

Report to: **Adult Social Care Scrutiny Committee**

Date: **15 March 2007**

By: **Director of Adult Social Care**

Title of report: **Adult Social Care Departmental Sickness Absence Levels**

Purpose of report: **To update the Adult Social Care Scrutiny Committee, as requested in June 2006, on current sickness levels within the department and what impact policies and initiatives that have been put in place have had on previous levels of sickness.**

RECOMMENDATIONS

The Adult Social Care Scrutiny Committee are recommended to note the content of this report and the progress made to date in relation to the Department's sickness absence levels.

1. Financial Appraisal

1.1 There are no financial implications as a direct result of this report. However, the Scrutiny Committee may wish to note that the absence cost for the Adult Social Care (ASC) Department during 2005/06 (excluding replacement costs) amounted to £1,345,000. If the 2006/07 estimated outturn of 15.6% reduction in days lost per FTE for the Department (as of the end of quarter three) is applied to the absence cost of the previous financial year as above, then the Department will produce an approximate saving of £209,820.

2. Background and Supporting Information

2.1 With effect from June 2005, in line with East Sussex County Council's priority to deliver against BVPI 12 and reduce sickness absence across the County Council, the Personnel and Training Department introduced a new Attendance Management Procedure. The revised procedure tightens the trigger points for short term absence and strengthens the process in relation to the management of long term absence.

2.2 An excel spreadsheet containing charts which show the Council's annual outturns of sickness absence since 2003/04 (department by department), and a comparison of absence rates for quarters 1, 2 and 3 over the last three years for ASC, is attached at **Appendix 1**.

3. Current Position

3.1 The Corporate BVPI 12 absence rate for quarters one, two and three (i.e. April to December 2006) has been calculated as 5.65 days per FTE, a 6.4% reduction on the same period last year. If this reduction is maintained for the whole of 2006/07, the final Corporate BVPI 12 outturn figure for the authority will be 8.05 days per FTE, below the 2006/07 target of 8.2 days. In departmental terms the absence rate for Adult Social Care, for quarters one, two and three, has been calculated as 10.25 days per FTE, a 15.6% reduction on the same period last year. If this reduction is maintained for the duration of 2006/07, the final outturn figure for the department will be 12.85 days per FTE, well below the 2006/07 target set of 15.10 days.

3.2 This positive reduction in absence rates compared to those of last year is welcome news and is almost certainly attributable to the increased corporate and departmental focus on attendance management.

4. Actions to reduce sickness absence (long-term and short-term)

4.1 According to the latest Local Government Employers (LGE) survey, during 2004/05 the top 5 causes of sickness absence (as % of total) were:

1.	Stress/depression/mental health	23.7%
2.	Musculoskeletal Disorder (MSD)	12.2%
3.	Infections	11.3%
4.	Back Problems	9.2%

4.2 The following are some key areas where action has been taken within the department and across the Council to reduce these highlighted causes of sickness absence during 2006/07:

Stress Management (key cause of long-term sickness absence)

With an average of 18% of East Sussex County Council's staff absences being recorded as due to stress, whether work related or otherwise, it is important that positive steps are taken to reduce this, in line with the stress management standards expected by the Health and Safety Executive. Managers are ensuring that the following interventions are fully utilised within their departments:

- Make full use of the stress management resources currently available, i.e. the [corporate policy](#), [manager's toolkit](#) and corporate training workshops on [stress management](#) (these are located on the ESCC Intranet) and ensure that all staff are aware of their own personal responsibility to help manage stress, utilising the [employee guidance](#) document.
- In ASC a Departmental Stress Management Steering Group has been formed, who meet bi-monthly, to ensure that appropriate momentum with stress interventions is maintained and that departmental actions plans can be developed and their effectiveness monitored. The group is chaired by an Assistant Director.
- Arrangements will be piloted over the next two months for the early referral of staff absent from work due to stress to the Occupational Health Advisers. Early intervention in managing any absence is key.

Physical Therapy Pilot Scheme

This pilot scheme was launched on 15th January 2007. The scheme, approved for funding under an "Invest to Save bid", will allow any employee suffering from musculoskeletal disorders (such as back pain) to access up to 5 sessions of physical therapy. Treatment is provided by fully qualified osteopaths, physiotherapists or chiropractors and Managers have received full instructions on how to refer an employee who is suffering from a musculoskeletal injury or condition.

Staff Counselling Service

The Council's Occupational Health Department continues to facilitate access to a trained counsellor to provide help with a wide range of issues: long term ill health; redeployment; redundancy; disciplinary/grievance procedures; harassment; stress; bereavement; relationship & family problems; critical incident; post traumatic stress. In the last 5 years approximately 2,000 staff from across the East Sussex and Brighton areas have benefited from using the staff counselling service.

General Health & Safety

The ASC Department continues to provide training on a range of health and safety issues which will enable staff to understand their responsibilities and work safely e.g. Moving and Handling.

4.3 The ASC Departmental Attendance Management Co-ordinator continues to actively support the Personnel and Training Department in reducing the levels of sickness absence and regularly contacts Line Managers and sends them the relevant monthly absence trigger reports for their members of staff. The Co-ordinator also attends the corporate 'Attendance Management Steering Group' meetings and the departmental 'Stress Management Steering Group' meetings on a regular basis in order to contribute to new ways of improving attendance and monitoring systems.

5. Conclusion and Reasons for Recommendation

5.1 The ASC Scrutiny Committee are recommended to note progress made to date in reducing the Department's sickness absence levels during the current financial year and to support the continuation of this positive corporate and departmental work.

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Local Member(s): All

BACKGROUND DOCUMENTS: None