

Data Label: Public



PARTNERSHIP AND RESOURCES POLICY DEVELOPMENT AND SCRUTINY PANEL

SICKNESS ABSENCE (1 APRIL 2020 – 31 MARCH 2021)

REPORT BY HEAD OF CORPORATE SERVICES

A. PURPOSE OF REPORT

To report on sickness absence rates during the period 1 April 2020 to 31 March 2021 and to provide an update on the ongoing application of the council's Policy & Procedure on Managing Sickness Absence.

The report also provides an overview on the levels of absence attributed to the COVID-19 pandemic.

B. RECOMMENDATION

That the Panel notes the content of the report.

C. SUMMARY OF IMPLICATIONS

I Council Values	Focusing on our customers' needs
	Being honest, open and accountable
	Providing equality of opportunities
	Developing employees
	Making best use of our resources
	Working in partnership
II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)	Council policy seeks to strike a balance between effective management of sickness absence and the promotion of a healthy workforce taking into account the council's obligations under Equality legislation.
III Implications for Scheme of Delegations to Officers	None
IV Impact on performance and performance Indicators	The sickness absence SPI for 2020/21 first quarter commenced at higher rates compared to previous years however by the end of the year this had decreased and is the lowest rate recorded for March within the last 5 years.

V	Relevance to Single Outcome Agreement	National Outcome 15: Our Public Services are high quality, continually improving and responsive to local people's needs. Reduced sickness absence levels increase the efficiency and productivity of the council.
VI	Resources - (Financial, Staffing and Property)	Sickness absence is managed within service budgets.
VII	Consideration at PDSP	None
VIII	Other consultations	None

D. TERMS OF REPORT

D.1 BACKGROUND

The Council Executive on 26 June 2018 approved a Policy and Procedure for Supporting Attendance at Work that replaced the former Policy and Procedure on Managing Sickness Absence with effect from 1 September 2018.

This report relates to absence rates for the period from 1 April 2020 to 31 March 2021.

D.2 SICKNESS ABSENCE RATES

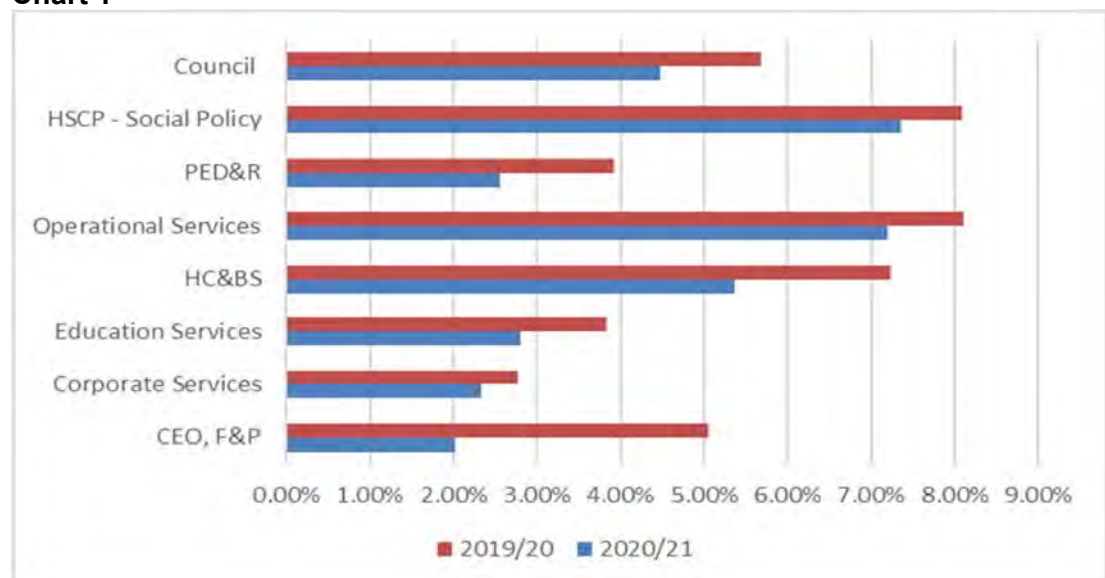
Standard Performance Indicator – Council Wide

The sickness absence Standard Performance Indicator (SPI) for the full council for the period 1 April 2020 to 31 March 2021 is set out at **Appendix 1** of this report together with the SPI performance indicators for the full years 2016/17 to 2019/20.

The SPI for the cumulative period from 1 April 2020 to 31 March 2021 is 4.47%, which compares favourably with the SPI figure of 5.68% for the same period in 2019/20. A total of 2921 employees were absent from work for one or more days in the period 1 April 2020 to 31 March 2021.

All seven council service areas have reported an improved sickness absence rate in 2020/21 compared with 2019/20 as highlighted in Chart 1 below.

Chart 1



In service areas where a high percentage of staff have been predominately working from home, there have been reductions in overall sickness absence rates of up to 3.05%.

These absence trends are comparative with findings by the National Office of statistics (ONS) which has seen the UK sickness absence rates fall by 1.8% in 2020, the lowest recorded rates of sickness absence since the data time series began in 1995.

The ONS also reported that nearly half (47%) of people in employment did at least some of their work from home. This, together with government asking people to social distance and self-isolate may have led to less exposure to germs that would minimise some of the usual sickness absence such as coughs, colds, flu, nausea etc. Homeworking could also allow people to work when they were feeling a little unwell, when they might not have travelled to a workplace to work but feel well enough to work from home.

Within the Council, absences categorised as “Infectious” and “Gastrointestinal”, which would incorporate community-based illnesses as described by ONS, have reported substantial reductions of 3.12% and 1.92% respectively in 2020/21 compared to the same periods in 2019/20.

Standard Performance Indicators – Services

The sickness absence SPI for each service area (figures for teaching and non-teaching staff shown separately), for the period 1 April 2020 to 31 March 2021 is set out at **Appendix 2**.

Of the seven council service areas, three reported sickness absence rates above the council target of 3.6% (Housing Customer & Building Services, Operational Services and Social Policy). Education Service is counted as one service although the chart reflects teaching and non-teaching figures separately.

Chief Executive, Finance & Property Services (2.01%), Corporate Services (2.33%), Education Services (2.80%) and Planning & Economic Development (2.56%) are reporting below the council target of 3.6%.

Long –Term Absence (1 April 2020 – 31 March 2021)

Of the days lost due to sickness absence during this period, a significant proportion of those absences are attributable to long term absence which is defined in the policy as a period of continuous absence ‘in excess of 4 weeks.’

A further breakdown of days lost for the three services with rates above the council sickness absence target indicates the following:

- Of the total number of 10,229 days lost in Housing, Customer & Building Services, 8,551 (83.60%) of those days were due to long-term absence and were accounted for by 128 employees.
- Of the total number of 22,162 days lost in Operational Services, 19,134 (86.34%) of those days were due to long-term absence and were accounted for by 280 employees.
- Of the total number of 20,176 days lost in Social Policy 17,637 (87.42%) of those days were due to long-term absence and were accounted by 229 employees.

The average percentage of days lost of the total absence rates from long term absence across the three services was 86.22%.

The average percentage of days lost of the total absence rates due to long term absence across the whole council was 82.75%.

The average length of long-term absence during the period was 69 days with the longest absence lasting 261 days.

Analysis of Categories of Absence (1 April 2020 – 31 March 2021)

Top four reported reasons for all absences, split by long term are as follows:

Table 1

Level 1 Reasons	Days	Long Term %	All Absence%
Mental & Behavioural	33,040	37.11%	40.80%
Musculoskeletal	10,731	10.97%	13.25%
Accidents, Injuries, Poisoning	7,573	7.82%	9.35%
Surgery	4,648	4.93%	5.74%
Total	55,992	60.83%	69.14%

Mental & Behavioural Level 2 Category

The main category for absences is Mental and Behavioural. A breakdown of all mental and behavioural absences recorded is set out below:

Table 2

Mental & Behavioural	Days	Long Term %	All M&B Absences%
Stress	18,683	51.02%	56.55%
Anxiety	7,148	19.79%	21.63%
Depression	4,219	11.94%	12.77%
Not specified	2,380	6.46%	7.20%
Other psychiatric illness	278	0.79%	0.84%
Insomnia	145	0.42%	0.44%
Panic attacks	98	0.27%	0.30%
Bipolar disorder	36	0.11%	0.11%
Obsessive compulsive disorder	30	0.08%	0.08%
Self-harm	21	0.05%	0.05%
Alcoholism	1	0.00%	0.01%
Other substance abuse	1	0.00%	0.01%
Total	33,040	90.95%	100.00%

D.3 MANAGEMENT OF SICKNESS ABSENCE

i) Sickness Absence Case Management

The HR Policy and Advice team continue to work closely with managers across the council, providing advice and guidance on the monitoring and management of sickness. Table 3 below shows the number of employees at each stage of the Policy & Procedure as at 31 March 2021, compared to the previously reported positions.

Table 3

	Counselling/ Informal Review Meeting	Stage 1	Stage 2	Total
Total at 31 March 2021	453	241	182	876
Total at 31 March 2020	823	434	267	1524
Total at 31 March 2019	512	392	262	1169

A breakdown of live cases as at 31 March 2021 is set out in Table 4.

Table 4

	Counselling/ Informal Review Meeting	Stage 1	Stage 2	Total
Cases on going from 30 December 2020	240	209	175	624
New cases since 30 December 2020	213	32	7	252
Total	453	241	182	876

ii) Other Support Initiatives

HR Adviser Input – Management Meetings

During 2020/21, the following functional areas were targeted for input and support from Human Resources Advisers;

- Education (Teaching & Non-Teaching)
- Care Homes
- Facilities & Support Services
- Recycling Waste & Fleet Services
- NETS, Lands & Countryside
- Roads & Transportation
- Building Services

Within the level of advisory resource available, Human Resources continue to provide as much ongoing support as possible to a number of Service Managers across those functional areas to develop action plans to address issues and to help line managers manage staff absences in line with policy.

All functional areas except one, Roads and Transportation, have reported a reduction in sickness absence rates since April 2020. The largest reductions were reported in Care Homes and Recycling, Waste & Fleet services who reported a reduction of 1.86% and 1.91% respectively.

Employee Assistance Programme

Since 1 November 2018, a telephone-based counselling service (Help EAP) has been in operation provided by our occupational health provider, Optima Health.

Statistics from Quarter 4 (2020/21) show that 45 employees received mental health assessment during this period. This resulted in 29 employees being referred for counselling services, 2 employees signposted to Voluntary/Private Services and a further 14 employees were provided onward referral and guidance.

Of the 29 employees who were referred for counselling, 23 received structured telephone counselling sessions, 1 employee for video conferencing and 5 employees received computerised Cognitive Behavioural Therapy (CBT).

Contact reasons indicate that 13.33% of calls in Quarter 4 were in relation to work-related issues, 46.67% in relation to personal issues and 40% due to a combination of work and personal related issues.

Further analysis of contact reasons identified the following categories:

Table 5

Personal Categories	Percentage
Bereavement	10.39%
Carer responsibilities	2.60%
Domestic Violence	1.30%
Housing/Accommodation	3.90%
Mental Health (stress/anxiety/depression)	57.14%
Relationships	14.29%
Physical Health	10.39%
Total	100.00%

Table 6

Work Categories	Percentage
Change	9.52%
Control	11.90%
Demands	28.57%
Relationships	9.52%
Role	21.43%
Support	19.05%
Total	100.00%

The work categories are the HSE Management Standards which cover the six key areas of work design, that if not properly managed, are associated with poor health and wellbeing, lower productivity and increase sickness absence.

Help EAP also provide a dedicated website for various support articles and have reported during Quarter 4 that the top categories accessed are as follows:

Table 7

Webpage Categories	Percentage
Health	81.82%
Work	4.55%
Family	9.09%
Personal Effectiveness	4.55%
Total	100.00%

As this is a confidential service we are unable to canvas employees directly for specific feedback on their experiences, although anecdotally, services have reported a mainly positive response from staff who have accessed these services.

HR Advisers will continue to promote the use of this service and the trade unions have been asked to promote these services to their members.

D.4 APPLICATION OF MANAGEMENT DISCRETION (1 April 2020 – 31 March 2021)

The Policy and Procedure for Supporting Attendance at Work has the provision for the relevant manager, in consultation with Human Resources, to exercise discretion not to progress an employee through a stage of the procedure to take account of extenuating circumstances.

Since April 2020, Human Resources have been consulted in regard to 115 requests for management discretion to be considered. Of those 115 requests, 102 (88.70%) have resulted in discretion being applied to suspend application of the trigger level for a limited period considering the circumstances of the individual case.

A breakdown of the general categories in respect of which requests for discretion have been considered are as follows:

Table 8

Main Category	Discretion Applied	Discretion Not Applied
Bereavement	45	1
Industrial Injury	3	0
Medical Treatment	25	2
Personal Difficulties	5	10
Surgery	24	0
Trauma	0	0
Total	102	13

The policy provides for management decisions not to apply discretion to be reviewed by a more senior manager if requested by the employee concerned. No requests for review have been requested during this quarter.

D.5 ABSENCE AS A RESULT OF COVID-19

Since April 2020, the council has submitted a weekly return to COSLA highlighting the number of cases of absence from the workplace which are attributed to COVID-19, including the number of individuals absent because of the requirement to shield.

In Quarter 4, COVID-19 absence rates have increased from 2.75% to 3.20%. This correlates with West Lothian Council remaining in Tier 4 restrictions where employees in the shielding category could elect to have a fit note from Chief Medical Officer or work from home if possible.

In line with national advice on terms and conditions of employment for all groups of council staff, COVID-19 absences are not classed as sick leave.

An overview of the COVID-19 absence rates for Quarter 4 are set out in **Appendix 3**

E. CONCLUSION

The sickness absence SPI has seen a significant reduction in the council wide absence rate in 2020/21 in comparison to the absence rates for the same time period year.

Stress continues to be the highest contributor to levels of sickness absence across the council and the focus will continue to be on targeting additional support at those service areas that are reporting high levels of stress related absence.

COVID-19 has had an impact on the number of staff who have been available for work over the period with the absence rates due to COVID-19 symptoms, shielding or in the high risk category due to underlying health conditions increased during the period.

In addition, with the increased hygiene, enforced social distancing and a large proportion of the workforce working from home there has been less exposure to the normal community illnesses such as colds, flu, gastrointestinal etc which would contribute to the decline in absence rates.

F. BACKGROUND REFERENCES

- Policy & Procedure for Supporting Attendance at Work

Appendices/Attachments: 3

1. Sickness Absence SPI% History – Full Council
2. Sickness Absence SPI% all services – 2020/21
3. Overview of Q4 2020/21 COVID-19 absence rates.

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