# **SICKNESS ABSENCE MANAGEMENT**

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Summary: Updates the Committee on the current position with

regard to the Council's sickness absence figures and the steps that are being taken to improve the situation.

Recommendation: That the Committee notes the report.

Resource Implications: None as a result of this report, although a reduction in

sickness absence figures will improve the resources available to the Council to carry out its work, and reduce the strain on employees who are covering for

absent colleagues

LA21 Implications: None

Rural Implications: None

Crime and Disorder Act: None

Key Decision Status:

- Financial Status None

- Ward Yes – impacts on all wards

Other ward implications None

## 1. INTRODUCTION

The Council's sickness figures, as measured through the Best Value Performance Indicators, have been higher than the average for local government and getting worse over the past three years, in contrast to most other local authorities.

Year	CBC Figure	Top Quartile Figure	Cumbria Authorities Average
2002/3	12.6 days per employee	N/a	
2003/4	11.1	8.93	
2004/5	11.8	8.4	
2005/6	15.4	8.4	10.33
2006/7 (to end Dec)	9.62	8.4	10.33

Analysis of the reasons for this high level of sickness absence was discussed, although it was difficult to say that any particular factor was to blame for the 2005/6 figures. Possible causes of the high level of sickness at Copeland Borough Council could have been:

- Managers lacking skills or confidence to manage sickness absence
- Poor record keeping and data which was hard to obtain
- Sickness policy and procedures which needed revision
- Poor morale during a period of fast change and uncertainty
- Unsupportive Occupation Health provision
- Work/life balance issues that are not adequately addressed

#### 3. ACTIONS TAKEN TO DATE

Corporate Team's realisation in April 2006 that the position had worsened markedly over the previous 12 months led to the introduction of some emergency measures. These were aimed at improving reporting arrangements and intervening where necessary to support employees and managers. The actions included:

- Building in sickness absence management to the managers' development programme running throughout 2006
- Reviewing long-term sickness cases to resolve them
- Improving the monthly absence reporting to Payroll, to ensure that up to date figures are more readily available
- Analysing the information electronically and feeding back the information to senior managers monthly (Note: the imminent upgrade of the PWA personnel information system will make analysis of data and information about causes of sickness absence much easier)
- Requiring managers to carry out and document return to work discussions for all employees who had been absent due to sickness
- Establishing an Attendance Taskgroup comprising representatives of HR, managers, trades unions and health and safety advice to work on a programme of improvements
- Negotiating with other Cumbrian councils to procure a better Occupational Health service

# 4. ACTIONS PLANNED FOR 2007

The Attendance Taskgroup has agreed a programme of priority work which it is confident will make a difference to the Council's sickness figures.

National advice is that effective absence management is prevented or impaired by:

- □ A lack of top management commitment
- Insufficient training of managers
- □ A lack of appropriate data
- Insufficient support from employees and their representatives
- Policies that are viewed only as punitive

The actions that are being carried out by the Attendance Taskgroup are:

- Review of the Council's current sickness absence management policy and procedure, although we don't think that there is much wrong with the principles, there could be clarification in a few areas
- Consideration of new policy areas to help with long-term sickness, compassionate leave and return to work
- New guidance and support for managers

- Information about the true position of the Council's levels of sickness absence and its implications
- Review of the impact of industrial accidents on the Council's sickness levels

In addition the Council needs to review work arrangements for parents and carers, work-related stress in the organisation and the impact of the Disability Discrimination legislation. There are people already working on plans for these issues.

## 4. CURRENT FIGURES FOR SICKNESS

The first three quarters for 2006/7 (April-June, July-September and October-December) show that the Best Value Performance Indicator figures are on track for a slightly reduced figure of sickness per employee for the year. This information needs to be treated with caution, however, as the data is unaudited and covers the healthiest period of the year.

The Council's own figures, which are calculated differently and are more inclusive, show that on average Council employees took 6.28 sick days between April and the end of December. The same caveats apply as to the BVPIs.

There are big differences in sickness levels between sections of the Council's workforce for a variety of reasons, and the new information that we are now producing allows managers to intervene in the areas where there appear to be problems. These actions will vary widely according to the reasons for the raised figures.