NORTH AYRSHIRE COUNCIL

29 May 2018

Audit and Scrutiny

Title:	Maximising Attendance – 5 year Trends
Purpose:	To provide a summary of the sickness absence trends for a five year period from 2013/14 – to 2017/18, and analysis of trends for the period 2014/15 to 2017/18.
Recommendation:	That Audit & Scrutiny committee notes the five year absence trend information and the support the Council provides to employees.

1. Executive Summary

1.1 This report provides a summary of the sickness absence trends for a five year period from 2013/14 – to 2017/18, and analysis of trends for the period 2014/15 to 2017/18.

This report highlight the policies, procedures and proactive intervention to support the Council's workforce.

2. Background

- 2.1 In 2017/18 the Council target for maximising attendance performance was set at 7.53 average days lost per employee. The year-end outturn was 9.35 average days lost.
- 2.2 The table below shows the days lost per FTE for the Council against the respective annual maximising attendance target for the last five years and the Council ranking in the Scottish Local Authority benchmarking table.

Days Lost per FTE	Actual	Target	Variance	Change From Previous Year	SLA Ranking
2013/14	9.06	8.1	0.96	-0.32	14
2014/15	8.1	7.9	0.2	-0.96	2
2015/16	8.98	8.00	0.98	0.88	8
2016/17	9.79	7.57	2.22	0.81	16
2017/18	9.35	7.53	1.82	-0.44	-

2.3 Attendance

In 2014/15 the Council introduced the positive measure of employees with no sickness, this had remained steady with 50% of our workforce never being absent during each of the financial years until 2017/18 where this positively increased to 52%.

2.4 Costs

The cost of absence has increased by £527k (9%) since 2014/15. With the increase in number of days by (3,218 days (6%)). This cost only reflects pay due to employees for the days they were absent and does not include the cost of replacement cover for critical posts such as teachers and care workers.



2.5 Duration Profile and Absence Trend

The graphs below detail the duration and frequency of absence by year:

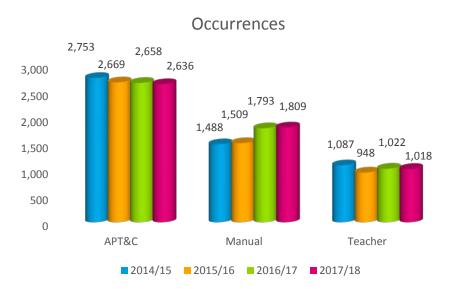




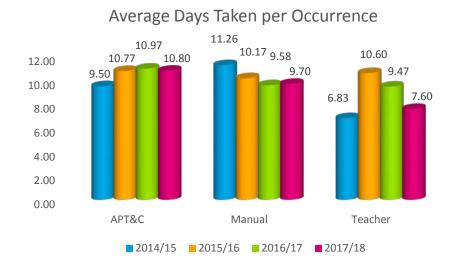
Since 2014/15 the total number of occurrences has increased marginally by 135 (2%), however total days taken has increased by 3,218 days (6%) and average days taken has increased by 0.36 days (4%).

2.6 Workforce Absence Profile – Employee Type

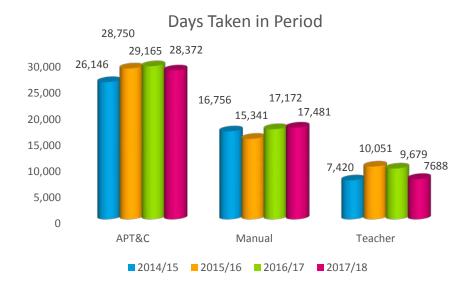
The following three graphs show sickness absence for the past 4 years by employee type.



Occurrences of absence have reduced within both APT&C and Teacher groups since 2014/15 by 4% for APT&C and 6% for Teachers. Manual Worker occurrences have however increased by 21%.



While occurrences have reduced in both APT&C and Teacher groups average days taken have increased by 1.30 (13%) and 0.77 (11%) respectively, indicating that when an occurrence of absence takes place employees are off for a longer duration. Average days taken by Manual Workers has reduced by 1.56 (14%).

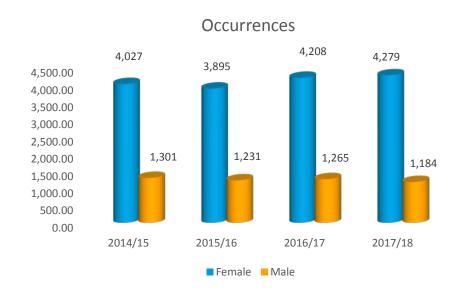


Total days taken in the period have increased across all groups since 2014/15, however Teachers have shown an improvement in both 2016/17 and 2017/18 on the previous year. Overall total days taken have decreased by 2,474 days (4%) from 2016/17.

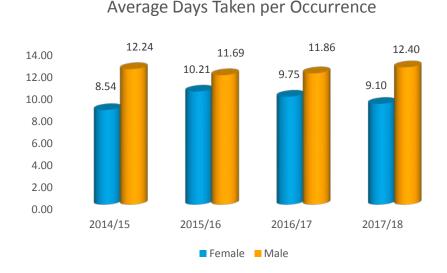
APT&C employees who make up 50% of the overall workforce contribute to 48% occurrences of absence within the Council, a 9% increase in the total days taken since 2014/15 and have the highest average days taken in 2017/18 of 10.80.

2.7 Gender Absence Profile

The gender ratio of employees in the Council is 1:2.8 male to female with 74% of the workforce being female, which is consistent with the previous year. Therefore as expected both the occurrence of absences and days taken in the period, is higher in female than male employees. The table below indicates that after taking into account the higher number of females in the workforce, Females have relatively more occurrences of absence.

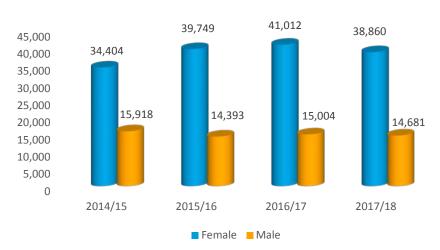


Occurrence of absence has increased in female employees by 6%, while in male employees has decreased by 9% since 2014/15.



Average days taken has increased in females since 2014/15 by 0.56 average days (7%), this has reduced in 2017/18 on the previous year (2016/17) by 0.65 days (6%). Average days taken by males has increased since 2014/15 by 0.16 (1%), this is higher than the average days taken by females by 3.3 average days (36%).



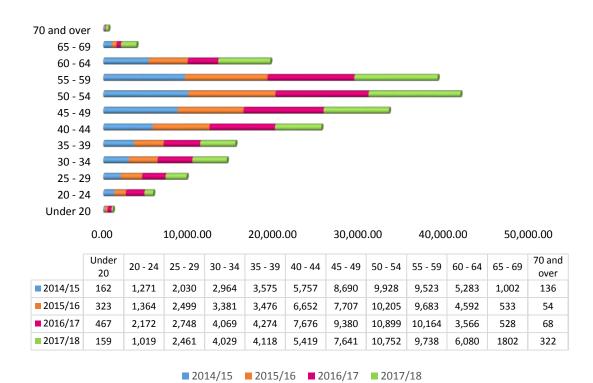


Days taken in the period by females have increased by 4,456 days (13%), whereas there has been a reduction of 1,237 days (8%) by males.

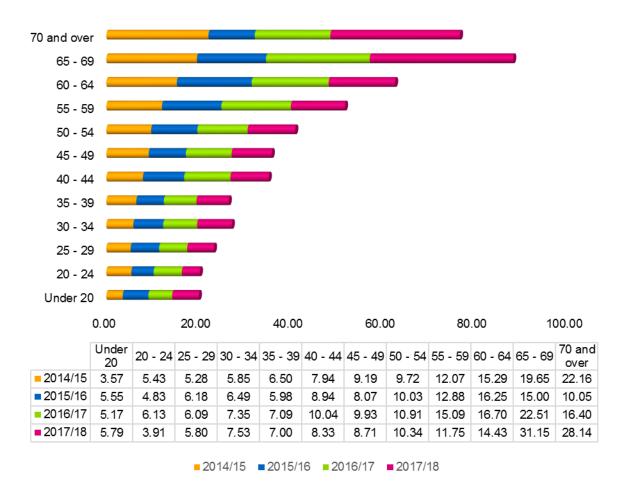
2.8 Age Absence Profile

Days lost has increased in 2017/18 in all age bands except 20-24, 40-44 and 45-49. The three age groups covering the age range of 45 – 59 have the highest number of days lost to sickness absence in all 4 years, however when placed in the context of the total workforce it is worth noting this age range also has the highest concentration of FTE.

Days Lost per Age Group



Ratio of Days Lost to FTE



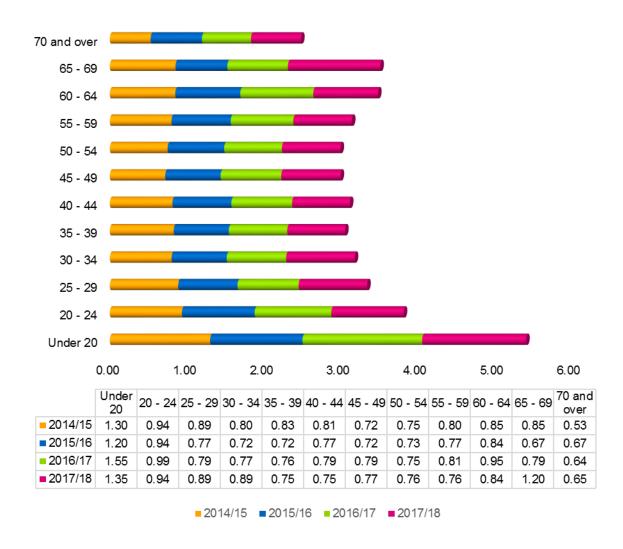
The graph above displays that sickness absence has decreased in 2017/18 amongst the majority of age groups.

Occurrences per Age Group



Occurrence of absence slightly differs, the group broadens to include the age range 40 – 59 as having the most occurrences, although this age range had the highest number, the number of occurrences in the band 45-49 have reduced from the previous year.

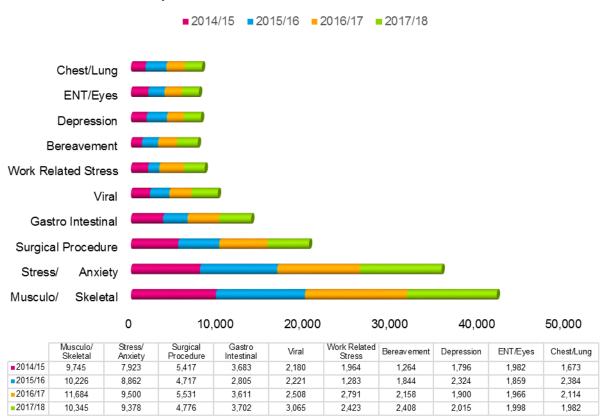
Ratio of Occurrences to Headcount



Younger employees have a higher occurrence of absence, while older employees are off for a longer duration.

2.9 Reasons for Absence

The graph below details the top ten reasons for sickness absence (number of days lost) in 2017/18 and compares the previous 3 years.



Top 10 Reasons For Sickness Absence

Musculo/Skeletal and Stress/Anxiety are consistently the main causes for absence in all years showing an increase in days lost, with the exception of 2017/18. Five out of the ten reasons for absence have all reported a decrease in days lost from 2016/17.

In terms of overall days lost, Stress/Anxiety (1,455 days) and Bereavement (1,144 days) show the largest increases.

Top 10 Reasons	% Change 2014/15 - 2017/18
Musculo/Skeletal	6%
Stress/Anxiety	18%
Surgical Procedure	-12%
Gastro Intestinal	1%
Viral	41%
Work Related Stress	23%
Bereavement	91%
Depression	12%
ENT/Eyes	1%
Chest/Lung	18%

There has been large percentage increases in days lost in 5 areas: Stress/Anxiety 18%, Viral 41%, Work Related Stress 23%, Chest/Lung 18% and Bereavement 91%.

2.10 Actions



Maximising attendance continues to be high on the Council's agenda with a number of policies, procedures and initiatives in place to support employees both at and back to work.

Case management discussions with Occupational Health and Service Managers ensure a joint approach to support individual employees. HR professional support, such as attendance at meetings helps to manage cases consistently and effectively. Advice to support Financial Wellbeing is provided to help employees to maximise their income through tax allowances and utilise the services of credit unions.

New policies have been implemented to support employees through bereavement and also those with caring responsibilities.



Employee led healthy working lives initiatives continue across the Council. LiveWell our health and wellbeing programme for Council employees, run by Council employees, goes from strength to strength.

A range of free physical activities have been made available to employees such as learning to dance and running for beginners. Directorate led activities are on-going. In addition there have been several challenges including the step count challenge and workplace travel challenge.

A text messaging facility is being introduced to enhance our existing communication channels, to raise awareness of all health, wellbeing and financial initiatives ongoing within the Council.



The provision of Occupational Health services has been increased offering a programme of 'mini health checks', physiotherapy, counselling and enables employees to self-refer. Physiotherapy and Employee Counselling services are promoted as a preventative

measures rather than a cure. Employees are also encouraged to self-refer for minor issues before they escalate to absences.

3. Proposals

- 3.1 Services should continue to utilise occupational health services, where required and seek advice from HR to ensure that an approach of early intervention is taken to support employees.
- 3.2 The Council continues to be proactive in its approach to sickness absence with Occupational Health available before sickness absences occur as a preventative measure. The Council continues to promote an abundance of Health and Wellbeing initiatives such as the Livewell and Workwell groups.

4. Implications

Financial:	Sickness absence is a cost to the Council, in terms of those absent and resulting in reduced or delayed service delivery.
Human Resources:	The Council's approach supports the health and wellbeing of its workforce.
Legal:	None.
Equality:	None.
Children and Young People:	None.
Environmental & Sustainability:	None.
Key Priorities:	None.
Community Benefits:	None.

5. Consultation

5.1 Services are provided with regular Maximising Attendance information.

Laura Friel

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Executive Director (Finance and Corporate Support)

For further information please contact **Jackie Hamilton**, **Senior Manager – Employee Services** on **01294 324694**.

Background Papers

Maximising Attendance Performance

2017/18 Summary



Higher ratio of occurrences amongst younger employees

Higher ratio of days taken amongst older employees



Education & Youth Employment have achieved their target for 2017/18



Of employees had **no sickness** during, this is an increase of 2% from 2016/17



The cost of sickness absence has decreased by £78,048 since 2016/17 to £6,327,040



Musculo/Skeletal is the leading cause of sickness absence



Female employees have a higher ratio of occurrences and days taken

Male employees have longer spells of absence on average



APT&C Employees average longer spells of sickness at 10.8 days, consistent with 2016/17



2,476

Decrease in total days taken

10

Decrease in total occurrences

0.4

Decrease in avg. days Taken per occurrence

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