

Policy & Resources Scrutiny Committee

People Management: Sickness Absence Monitoring Report – Half year 2020/21

Date



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People Management

Sickness Absence Performance Monitoring Report

Half year 2020/21

Introduction

The Authority's Performance Indicator (PI) for sickness absence measures the number of working days lost due to sickness absence per full time equivalent (FTE) headcount per annum. The target set by Corporate Management Team for improvement for 2020/21 is 9.63 FTE.

In June 2017 departmental targets were also agreed to support a reduction in sickness absence and these targets have been maintained for 2020/21. Both the corporate and departmental targets are monitored half yearly via Corporate Management Team (CMT) and quarterly via Departmental Management Teams (DMT). The targets were calculated by reference to the average Full Time Equivalent (FTE) headcount figure and End of Year (EOY) results over the preceding 3 years less 5%.

What has changed during 2020/21 to date?

It is the responsibility of all DMTs to maintain a high profile on attendance management, monitor performance on a quarterly basis, to set clear expectations of all its managers to manage sickness absence proactively and to foster a healthy working environment that encourages improved attendance from all employees.

From a corporate perspective People Management has focused its energies to date during 2020/21 supporting in the following areas:

a. Attendance management during covid

For all concerned the covid emergency continues to be a challenging period. Since the UK government's announcement that a national lockdown was to commence on 23rd March 2020 the Authority has taken a different approach to the management of attendance where sickness absence is covid related.

A temporary covid sickness absence guide was developed to ensure that managers can support employees affected by covid in a supportive manner and without detriment. If sickness absence is covid related, eg, having to self-isolate due to being symptomatic or diagnosed, this period of absence is discounted when looking at the individual level of sickness that may instigate the formal sickness absence process. Managers are still expected to keep in touch with employees and to undertake supportive 'Return to Work' discussions and Employee Support Meetings.

All covid related absences are recorded via My View and reported at each Gold and Silver Tactical Command Groups and to Welsh Government. The key covid absence categories are:

Sickness Self-isolation	Employee is ill and not fit to work Employees under self-isolation are expected to stay home and not go to work. The employee remains fit to work and is self-isolating because they are displaying symptoms, have been diagnosed or are in contact with a symptomatic household member.
Test, Trace and Protect (TTP)	The TTP process will identify the close contacts of people who have tested positive for coronavirus asked to self-isolate for 14 days. The TTP absence codes are for use only when an employee has been contacted under the TTP and advised to self-isolate but remain fit to work.
Risk Assessment	Employee is fit to work but cannot enter the workplace due to Covid Risk Assessment.
Pre-operative Self-isolation	Employee is awaiting surgery, has been booked in for the operation/procedure, is advised to self-isolate for 14 days before the surgery/procedure can take place and is fit to work.
Key Worker self-isolation	Employee is symptomatic and works with vulnerable people. Even where they have a NEGATIVE test result for COVID-19 infection the employee MUST not return to work until at least 10 days from symptom onset.

b. Health & wellbeing support during covid

The team reacted swiftly in response to Covid to ensure there was adequate Health and Wellbeing resources and support available:

- Development of the “Looking after your Wellbeing” intranet page with advice and guidance to support staff in relation to Covid such as working at home tips during Covid, keeping active, nutrition and managers guidance;
- Development of Employee Wellbeing Advice and Support Centre (EWASC) where employees could self-refer for any psychological concerns / signposting;
- Review of employee and departmental feedback to find key themes for promotions, initiatives and e-discussion to support staff with various concerns such as loneliness and burnout throughout the pandemic;
- Development of new health and wellbeing intranet pages to include key ‘Stress, Mental Health and Wellbeing’ content for intranet pages to support staff;
- Virtual and drop in events on various health and wellbeing topics such as musculoskeletal disorders;
- Review of our Management of Mental Health policy to support managers and staff;
- Development and roll out of Management of Mental Health training for people managers remotely;
- Development of Mental Health Awareness training for all corporate staff working remotely;
- Development and organisation of Management of Mental Health Training for Head Teachers and wider school leadership staff remotely;

- Drop-in sessions for Head Teachers to promote the support and resources available, particularly within the area of stress and mental health;
- Review of external mental health resources, e-learning, webinars, guidance etc. to ensure staff are appropriately signposted;
- Attendance at various departmental meetings to promote relevant mental health and wellbeing support and resources;
- Development of Personal Resilience e-learning module;
- Development of Alcohol and Substance misuse e-learning module;
- Organisation and delivery of Mental Health and Wellbeing e-discussions for staff
- Development of Health and Wellbeing contact form to ensure staff and managers have an interactive way to contact the team for advice and resources;
- Development of surveys and feedback forms to pilot in departments targeted areas;
- Key speakers in Time to Change Wales conference on initiatives implemented to support Mental Health in the workforce;
- Key speakers in social care wales conference on supporting mental health and wellbeing
- Supporting the network of 62 health and wellbeing champions corporately and the recruitment of at least one champion in each school;
- Attendance of Men's Health training to become a Men's Health Champion, with key aspects focusing on men's mental health which will be offered to the champions as training and area of interest;
- Time to Change Wales training researched and to be offered to champions as an area of interest;
- Virtual events and drop in on various health and wellbeing topics such as musculoskeletal disorders.

c. Corporate Health & Wellbeing project

The Health and Wellbeing Project now has full corporate support across the authority with all 5 departments contributing towards funding 2 Health and Wellbeing Coordinators.

The Health and Wellbeing project's overall aim is to improve the health and wellbeing of employees by ensuring they have access to appropriate health and wellbeing resources and advice in order to be proactive, improve their own health and wellbeing and support the overall reduction in sickness absence.

A selection of interventions has been trialled whilst also looking at employees working environment and how these contribute to an improvement in the overall culture of the department and our organisation towards health and wellbeing.

The effectiveness of the proposed interventions to improve employee's individual health and wellbeing were being monitored to evaluate the impact on overall employee wellbeing, improved productivity and reduction in sickness absence. Due to Covid and the reactive response in supporting the authority, the specific targeted work within the departments has been put on hold.

Below we show a breakdown of some of the other specific priorities, activities and interventions that we have undertaken during this time.

Corporate

- The importance of the Health and Wellbeing of our employees requires it to be a central focus of the organisation's operations. Given the current situation and ongoing changes, having senior leaders involved in driving the wellbeing agenda is key to ensure timely decision making and actions, to supporting employees at all levels. A new Health & Wellbeing framework and groups has been approved to create a more holistic approach towards supporting the health and wellbeing of employees and to support the overall reduction of sickness absence across the authority.
- From this approval the team are now meeting with DMT's to ensure appropriate members to the sub groups are established. This will feed in to the Health and Safety Leadership board which will Provide the strategic direction for the management and leadership of wellbeing across the authority.
- A communications plan has been produced in line with the new Health and Wellbeing Group structure, which will help to facilitate the effective communication of information throughout all levels of employees within Carmarthenshire County Council. This plan will help to ensure that health and wellbeing remains an integral part of the Authority's day-to-day operations through a more consistent and structured approach.
- Research and scoping for a corporate Wellbeing Strategy will be compiled with support from task and finish groups that have come out of the corporate health and wellbeing group.
- The current network of volunteer Health and Wellbeing Champions has now increased to 65 across the authority. Further training for these champions is scheduled for the new year which covers health topics such as Physical Activity, Nutrition, Smoking and Alcohol; Making Every Contact Count training which equips them to have effective conversations with colleagues relating to their health and wellbeing. The Champions across the Authority continue to be directed by the Health and Wellbeing Coordinators working from the health events calendar to promote and raise awareness of various monthly health topics.
- Since the last report the authority's champions have continued to assist with the delivery of wellbeing initiatives across the authority supporting the role out of the initiatives mentioned above during the pandemic to ensure key messages and events and support has been promoted to each department.
- Many run / walk groups had been set up before the pandemic in various locations across the authority such as St David's Park, Parc Myrddin, Ty/Elwyn, Town Hall Llanelli. The new champions intranet pages with lists of various activities such as run groups will be updated over the coming weeks so that all staff can see what is being held across the authority to include what has been adapted virtually due to the pandemic.

Targeted

Environment

- Invited to attend various meetings with DMT team as well as present at two People Manager's events;
- Working with Planning Division to investigate the current wellbeing of staff and support work ongoing following recent audit. A health and wellbeing survey has been distributed and completed and is currently being analysed. Once analysed interventions can be developed targeted to issues and discussion groups formed.
- Discussions ongoing on how we can support staff within the Cleaning Service following high levels of sickness absence due to stress
- Discussions with Property Maintenance Service following recent staff survey. This will be followed up with a wellbeing survey and discussion groups.
- Environment Heads of Service have asked for volunteers to join an Environment Health & Wellbeing Group.
- Environment are continuing their yoga sessions virtually for staff.

Communities

- Asked to contribute to the Domiciliary & Residential Care Sickness report. Provided a report on wellbeing options.
- Working with Domiciliary Care to undertake a wellbeing assessment which links to the above, the appraisal trial and follows on from the pilot project. This is currently being analysed. Once analysed interventions can be developed targeted to issues and discussion groups formed.
- Working with Business Support to make assessment of current wellbeing level. Survey drafted and waiting to be approved before sending out. Once analysed interventions can be developed targeted to issues and discussion groups formed.

Schools

- The Health and Wellbeing Champions scheme has been promoted to schools, information distributed and the recruitment of one champion in each school and training for these champions is being arranged. Currently 55 schools have appointed Champions. Microsoft Teams group to be formed and introduction meeting to be scheduled.
- The option paper that was compiled through analysis of sickness absence and other data, for determining a list of priority schools to embark on a pilot project aimed to improve the health and wellbeing of employees. This will continue and analysis on interventions to these 4 schools and an additional secondary school will be undertaken. Results of which will be analysed to inform wider schools wellbeing commitment.
- Co-production of 'Welcome Back Pack' to support schools' staff in June 2020 following the closure of schools.
- More targeted approach on supporting Head Teachers' wellbeing
- 2 drop-in sessions delivered to promote resources and support available
- Half termly drop-in sessions for HTs on the theme of their Wellbeing
- New wellbeing focus group set up to input into the support developed for HTs Wellbeing
- Development of an internal peer support network is underway
- Chair of Governors received training specifically on supporting HT's wellbeing

- Mental Health training for all leadership staff

d. Mental Health Awareness

To support managers in managing staff attendance, mental health awareness development has continued for managers and employees to supplement the existing e-learning modules. This includes corporate and grant funding for the following:

The recruitment of a new Health and Wellbeing Coordinator (Mental Health) to:

- Raise the profile of mental health across the authority and reduce the mental health stigma across the Authority.
- Coordinate the management development training and mental health awareness training for all corporate staff and schools
- Analyse all the training that has been rolled out and its impact on staff and managers
- Coordinate the delivery of Mental Health First Aid Training for staff corporately and subsequent roll out of Mental Health First Aiders across the Authority.
- Coordinate and develop a structured support network for the Mental Health first aiders.
- Raise the profile of the mental health and wellbeing support and resources available to staff
- Regularly review and update the mental health information and guidance available to staff
- Provide information on external mental health services and organisations and signpost staff where appropriate
- Undertake and facilitate attendance at Corporate and Departmental events, meetings, discussions, conferences to highlight the project, ongoing initiatives and support that is available.
- Attend external networking events and conferences which can help to inform our interventions and resources.
- Use of research, departmental feedback and sickness absence statistics to continue to develop new learning opportunities, training, promotions and initiatives for managers and staff to support their mental health such as the development of the personal resilience e-learning module.
- Support the overall reduction in Mental Health and Stress related Absence by use of research, departmental feedback, sickness absence statistics, working with DMT's and the new Corporate Health and Wellbeing groups to feed into initiatives and ideas to support Stress, Mental Health and Fatigue.
- Support departments on targeted work for action plans.
- Take the lead on Time to Change action plan, attend events and seminars.

e. Review of the Sickness Absence Policy and Procedures

The Sickness Absence Policy has been reviewed and consulted with our recognised trades union representatives and departmental management teams. This was formally adopted via Executive Board Member in Spring 2020 but due to the covid emergency is yet to be formally launched. Work has re-commenced on developing appropriate learning & development modules to support managers with the effective application of the revised policy with an anticipated launch in the New Year.

f. Resourcelink Reporting Service (RRS) and other reporting developments

Development work for the reporting tool within Resourcelink known as RRS is continuing. This tool provides the facility for all users to run reports direct from My View (our online employee system). The reports are available to Managers on demand. Attendance management information is an essential part of the suite of reports that are available via this system. These reports have therefore been prioritised for inclusion. Pilot tests have been undertaken along with a soft launch of the tool to all managers and schools in May 2020. Limited training has been provided to specific managers on a demand led basis and a more formal training programme will be undertaken over the next year. Once fully implemented it will provide a valuable additional source for sickness absence data to supplement our performance management information.

As a consequence of the urgent need for real time data in relation to covid related absences across the whole Authority, a “live feed” has also been developed. This provides a snapshot of all absences (not just covid related) for the current day and is updated on an hourly basis. Access has so far been limited to key officers for contingency planning but will shortly be made available to a wider range of managers and should provide an additional useful source of management information.

g. Management of Stress and Mental Health for People managers

The continued roll out of the Management of Stress and Mental Health in person briefings linking in with Sickness Absence and Management of Stress and Mental Health policies is currently on hold. Managers in Information Technology & Corporate Policy, Regeneration and delivery within Environment have been undertaken.

As mentioned above, the development and roll out of Management of Mental Health Training for people managers remotely has been set up.

Since staff have been working remotely, 12 online mental health training sessions have been delivered remotely. These have included 8 Managing Mental Health in the Workplace sessions – 4 for corporate People Managers and 4 for Head Teachers – and 4 Mental Health Awareness and Resilience sessions for corporate staff. In total, 105 staff have attended and benefited from this training. Moving forward, an additional 12 sessions have been confirmed which will benefit a further 32 Head Teachers, 32 People Managers and 56 staff.

Prior to March 2020, 7 Mental Health Awareness courses and 9 Managing Mental Health in the Workplace courses were delivered for all staff and People Managers, respectively. In total, 84 staff and 72 People Managers benefited from this training.

h. Schools' Staff Absence Scheme (SSAS)

Due to the UK government's decision to commence a national lockdown in response to the covid emergency all schools in Carmarthenshire closed on 23rd March 2020. As a result, the SSAS was suspended until schools re-opened in September 2020. Therefore, no premium was sought from participating primary schools from 1st April and 31st August 2020.

Several school hubs were opened across the county to support vulnerable and key worker children staffed by feeder cluster schools. Where there was insufficient staff to cover the hubs due to sickness and internal cover could not be sourced from the relevant cluster schools the SSAS used its discretion to pay the daily rate to cover agency support. This was funded from the schemes' financial reserves.

As at 1 September 2020 the scheme has re-opened and premium applied pro rata until 31 March 2021. There are currently 87 participating primary schools compared to 60 original entrants in 2017/18 and 78 during 2018/19.

The level of financial cover has been increased following consultation with participating schools, as follows:

- The daily rate for teachers has increased from £120 to £160 per day;
- The maternity lump sum for teachers has increased from £3000 to £4000;
- The daily rate for teaching assistants, support staff has increase from £50 to £70 per day
- The maternity lump sum for teaching assistants, support staff has increased from £1500 to £2000

i. Performance management information

Maintained the provision of improved performance management information, benchmarking and ranking data, and summaries of main reasons for absence at an authority, departmental, divisional and team level, all school, primary, secondary and special school level to inform CMT, DMTs, BMT's and Governing Bodies to enable improved performance monitoring and action planning.

HR Business Partners continue to discuss performance management information at Departmental Management Teams, Primary and Secondary Head Teachers' meetings and offer support and advice on appropriate actions for improvement.

Has this made a difference?

[Table 1: Departmental performance ranking Q2 2020/21](#)

Performance indicates that all departments have met their 2020/21 Q2 target.

The Q2 figure for the whole Authority of 3.37 is below the 2019/20 Q2 result of 4.62. There has been a reduction of 1.3 FTE days lost by average employee FTE headcount. Covid sickness absence accounts for 0.17 FTE days lost.

Other covid related absence is split into two categories: 1) staff that are absent from the workplace due to a covid related reason, e.g. self-isolation required, are fit to work and able to continue working from home and 2) staff that are absent from the workplace due to a covid related reason and are not able to undertake their work from home, e.g. care worker (see Table 1).

Department	Average Employee FTE Headcount	Short Term Lost FTE Days	Long Term Lost FTE Days	Total Lost FTE Days	FTE Days Lost by Average Employee FTE Headcount	Ranking	2019-20 Q2 Performance		20-21 Target. Targets remain unchanged from 2017-18. (Q2 =whole year target /4 & seasonally adjusted)			
Corporate Services	202.1	100.90	290.60	391.5	1.9	1	3.1	-1.2	6.3	2.9	Yes	
Education & Children	3184.2	1957.80	6495.50	8453.3	2.7	2	3.8	-1.1	9.0	3.7	Yes	
Chief Executives	409.8	399.1	816.2	1215.3	3.0	3	3.8	-0.8	6.9	2.8	No	
Environment	900.2	875.50	2223.90	3099.4	3.4	4	5.3	-1.9	11.2	4.6	Yes	
Communities	1387.7	2236.90	5105.10	7342.0	5.3	5	6.5	-1.2	11.6	4.8	No	
Authority Total	6084.1	5570.2	14931.3	20501.5	3.37		4.6	2	-1.3	9.63	4.00	Yes

Q2 2019/20	6053.2	10353.6	17638.7	27992.3	4.62
Difference		-4783.4	-2707.4	-7490.8	-1.3
		-46.2%	-15.3%	-26.8%	

Coronavirus absences - Sickness	6,084.1	699.0	321.4	1,020.3	0.17
Sickness excluding Coronavirus Sickness	6,084.1	4,871.3	14,609.9	19,481.2	3.20

PI excluding Coronavirus Sickness

Coronavirus absences - Other Absences (NOT SICKNESS) Homeworking	6,084.1	8,453.06	42,198.56	50,651.62	8.33
Coronavirus absences - Other Absences (NOT SICKNESS) Non-Homeworking	6,084.1	2,523.85	13,504.32	16,028.17	2.63
Total Coronavirus absences - Other Absences (NOT SICKNESS)	6,084.1	10,976.9	55,702.9	66,679.8	10.96
All Coronavirus absences	6,084.1	11,675.9	56,024.3	67,700.1	11.13

This includes both homeworking and non-homeworking

Table 2: Average number of days lost per FTE – whole Authority

Following the launch of the Sickness Absence policy in 2015 and targeted interventions there was a marked reduction in 2014/15 (not shown on graph). Since then the trend line indicates an annual increase in 2015/16 and 2016/17 but a slight decrease in 2017/18. The Q2 2018/19 was the best level achieved since 2014/15. However, the 2019/20 result indicated an upward trend compared to the last 3 reporting years. In stark contrast Q2 2020/21 shows a significant decrease in absence levels. The cause of this may be attributed to the impact of the Coronavirus pandemic – school closures and working from home has contributed to the decrease in short term sickness absence levels (a decrease of 46% compared to the same time last year) but there has also been evidence of under reporting of sickness absence. As a result the Absence Team has been proactive in supporting managers and teams with absence recording and a Departmental HR Support Group has been established to support timely input of absence. The levels of other covid absences and the proportion of which were homeworking is possible should also be considered when analysing this data.

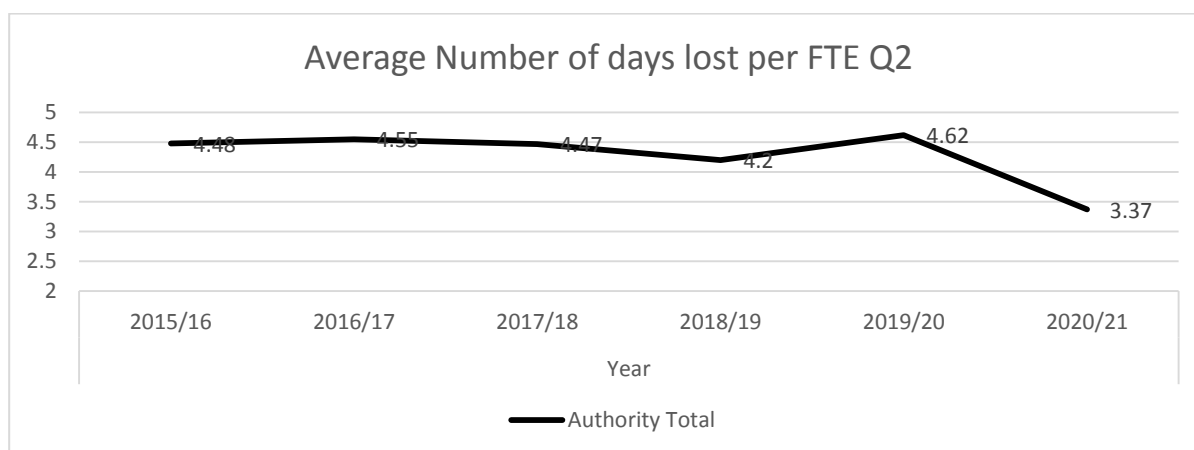


Table 3: Impact of targeted interventions to support schools in managing sickness absence

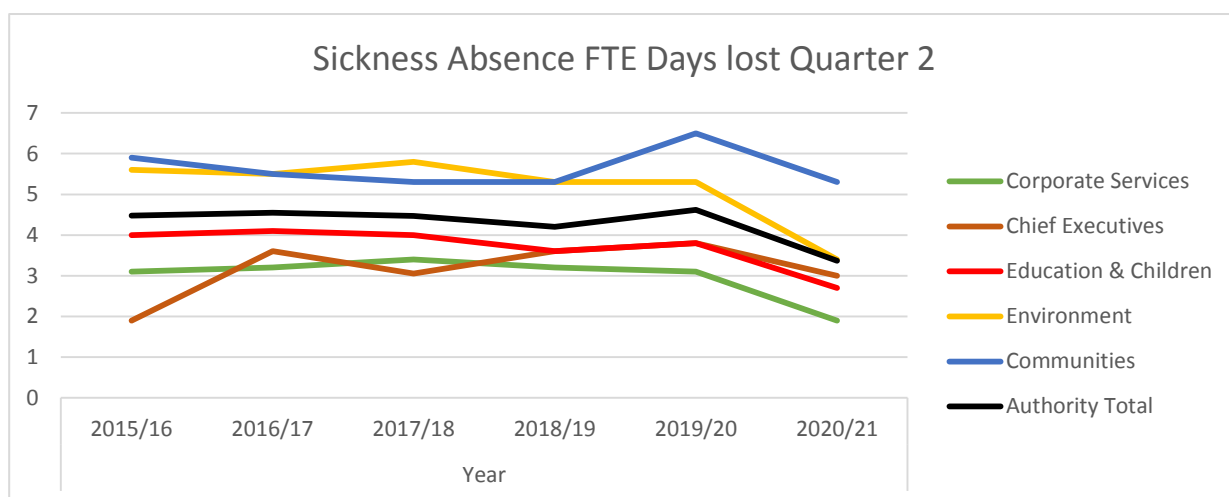
The table below compares the performance of CCCs primary, secondary and special schools between Q2 2018/19, 2019/20 and 2020/21. Schools closed during the national lockdown on 23rd March and re-opened at the start of the September 2020 term. During the closure the County opened cluster school hubs to support vulnerable and key worker children and continued with remote learning for all other pupils. Staff were deployed from the catchment schools to support the school hubs. As you can see there was a significant reduction in sickness absence reporting compared to the previous two reporting years. The People Management Division continue to support schools during 2020/21.

Division	2018-19 Q2 FTE days lost by avg FTE	2019-20 Q2 FTE days lost by avg FTE	2020/21 Q2				FTE Days lost by Employee FTE	Difference (YR ON YR 19/20 TO 20/21)
			Employee FTE	Short Term Lost FTE Days	Long Term Lost FTE Days	Total Lost FTE Days		
Secondary Schools	3.2	3.8	1017.64	478.52	1987.85	2466.37	2.4	-1.3
Primary Schools	3.4	3.5	1249.46	694.90	2539.41	3234.31	2.6	-1.0
Special Schools	5.5	5.3	90.93	127.68	144.08	271.76	3.0	-2.3

Table 4: Departmental Analysis

When departmental performance is compared to that of the previous year (Table 1) the level of sickness absence has reduced in all Departments.

Quarter 2	Year					
Department	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Corporate Services	3.1	3.2	3.4	3.2	3.1	1.9
Chief Executives	1.9	3.6	3.1	3.6	3.8	3.0
Education & Children	4	4.1	4	3.6	3.8	2.7
Environment	5.6	5.5	5.8	5.3	5.3	3.4
Communities	5.9	5.5	5.3	5.3	6.5	5.3
Authority Total	4.48	4.55	4.47	4.2	4.62	3.37



The service areas with the greatest variance (decrease - /increase +) compared to Q2 2019/20 are:

Department	Division	Difference
Environment	Business Support & Performance	-5.5
Communities	Business Support & Service Improvement	-4.6
Education & Children	Access to Education	-2.9
Communities	Integrated Services	-2.7
Communities	Leisure	-2.6
Environment	Planning Services	-2.5
Communities	Adult Social Care	1.9
Chief Executives	Media and Marketing	4.4

* Service areas listed above are those with over 50 FTE

Table 5: Cost of Absence

The table below illustrates the cost of occupational sick pay for Q1 to Q2 cumulatively in each year since 2018/19. This excludes additional costs that may be incurred by divisions in particular those delivering e.g. Overtime costs, agency costs; other replacement costs.

Occupational Sick Payments (OSP)			
Quarters 1 and 2	Year		
Department	2018/19	2019/20	2020/21
Corporate Services	52,517	48,816	42,614
Chief Executives	145,224	159,309	119,059
Education & Children*	1,262,047	1,443,728	856,251
Environment	394,162	424,793	262,154
Communities	713,782	862,521	719,009
Authority Total	2,567,732	2,939,167	1,999,088

* Including schools

Table 6: Occupational Health Appointment Data

Fig.1

Number of Employees seen at the Occupational Health Centre			
Department	Number of Employees Attended Q2 Cumulative		
	2018/19	2019/20	2020/21
Chief Executives	50	46	27
Communities	310	305	238
Corporate Services	11	26	29
Environment	489	389	164
Education & Children	283	281	240
External	130	281	122
Total	1273	1325	820

The table above indicates the number of employees being referred and supported by the Occupational Health Centre. Each employee will attend at least one appointment with either the Occupational Health Advisor or Physician. Depending on the recommendations made, a proportion will be offered a further referral for an Initial Assessment to the Wellbeing Support Service and supported using a range of interventions and strategies which may include: CBT / CBT informed approach, counselling/active listening, coping skills and problem solving. If they are accepted to the service, they are then offered up to a further 6 sessions (these further sessions/appointments are not included in the table below above).

The totals include Statutory Health Surveillance appointments to the nurse.

As can be illustrated by the data above (Fig.1) there has been a 38% decrease in the total number of employees seen at the Centre in Q2 2020/21 compared to Q2 2019/20. This is due to the

restrictions in place due to the COVID 19 Pandemic which forced Occupational Health to pause face to face Statutory Health Surveillance. Following HSE guidance this service restarted remotely through the use of electronic questionnaires. Following Gold command sign off our Face to face Health Surveillance tests will resume from 01.12.2020.

New Employment Questionnaire screens and Night Worker Questionnaire screens by the nurse are not included in the totals. Teachers’ pension administration by the practitioners are also not included.

Fig.2

Number of Appointments Attended at the Occupational Health Centre			
Department	Number of Appointments Q2 Cumulative		
	2018/19	2019/20	2020/21
Chief Executives	128	127	107
Communities	625	615	649
Corporate Services	12	71	95
Environment	584	546	267
Education & Children	757	768	848
External	147	359	147
Total	2253	2486	2108

The table above indicates the total number of Appointments attended at the Occupational Health Centre. These further sessions referenced above **are** included in the table above (Fig.2).

The totals include Statutory Health Surveillance appointments to the nurse.

As can be illustrated by the data above (Fig.2) there has been a 15.2% decrease in the total number of appointments to the Occupational Health Centre during cumulative period Q1 – Q2 2020/21 compared to 2019/20.

The decrease noted above can be attributed to the restrictions placed on our services due to the COVID 19 Pandemic. Over the previous two years there was however a 46.67% increase in total number of appointments at the Occupational Health Centre which we forecast will continue in the future, following the pandemic.

Appointments Attended – Reason breakdown:

Figures 3, 4 and 5 below show a breakdown of the reasons by number of employees that have attended the Employee Wellbeing Centre.

Fig. 3

The tables below show the breakdown of total number of Appointments attended at the Occupational Health Centre for Q2 cumulative over the last 3 years.

Although the total number of appointments have decreased due to restrictions in undertaking our statutory health surveillance face to face appointments and general sickness absence referrals due to employees shielding, as can be seen below the total number of appointments to our Wellbeing Support Service for psychological support during this time has increased by 25.54%

Breakdown: Total Number of Appointments Attended the Occupational Health Centre Q2 Cumulative 2018/19						
Department	Appointment Reason					Totals
	OHA	OHP	All WSS Appts	H/S	*Other	
Chief Executives	24	11	88	0	5	128
Communities	128	77	391	10	19	625
Corporate Services	3	1	1	0	7	12
Environment	47	67	98	364	8	584
Education & Children	104	56	577	2	18	757
External	37	43	31	26	10	147
Total	343	255	1186	402	67	2253

Fig.4

Breakdown: Total Number of Appointments Attended the Occupational Health Centre Q2 Cumulative 2019/20						
Department	Appointment Reason					Totals
	OHA	OHP	All WSS Appts	H/S	*Other	
Chief Executives	21	9	92	0	5	127
Communities	136	62	387	7	23	615
Corporate Services	11	5	53	0	2	71
Environment	53	49	180	258	6	546
Education & Children	111	54	590	0	13	768
External	121	60	92	69	17	359
Total	453	239	1394	334	66	2486

Fig.5

Breakdown: Total Number of Appointments Attended the Occupational Health Centre Q2 Cumulative 2020/21						
Department	Appointment Reason					Totals
	OHA	OHP	All WSS Appts	H/S	*Other	
Chief Executives	9	2	94	0	2	107
Communities	96	65	475	0	13	649
Corporate Services	11	4	76	0	4	95
Environment	55	20	121	68	3	267
Education & Children	108	40	689	0	11	848
External	67	34	34	2	5	147
Total	346	165	1489	70	38	2108

**These appointments include: Chair Assessments, Ill Health Retirement Appointments with the pensions doctor, Case Conference*

As can be seen from the above charts, our Wellbeing Support Appointments have increased 6% on the previous year and 25% on Q1 & Q2 2018.

Percentage of employees who have attended Occupational Health in Q1-Q2

Following the request from P&R scrutiny committee the following table below shows the percentage breakdown of employees that have attended the Occupational Health Centre per department.

Percentages are based on overall headcount (October 2020)

Department	OHA %	OHP %	Wellbeing Support Service (Initial Assessment) %	Health Surveillance %	Other %	Total %
Chief Executives	2.2	0.4	3.4	0	0.4	6.4
Communities	6.9	4.6	4.6	0	0.9	17
Corporate Services	5.4	1.9	4.9	0	1.9	14.1
Environment	6.1	2.2	2	7.5	0.3	18.1
Education & Children	3.3	1.2	2.5	0	0.03	7.03

As shown in the above table the Environment department have the highest number of employees who attend Occupational Health, this is due to their mandatory Health Surveillance which employees are required to undertake based on risk assessment.

Without Health Surveillance, the Environment department have 10.6% of employees accessing our services for sickness absence reasons and support.

[Table 7: Number of employees dismissed on the grounds of capability \(health\)](#)

Valuing our employees by supporting good health and wellbeing is one of the authority's core values. There is much research to demonstrate that attendance at work contributes to positive health and wellbeing. The authority aims to support its employees by providing a safe and healthy workplace and promoting a culture where regular attendance can be expected of all. Absence from work is unlikely to be a positive experience for the absent employee(s) or their colleagues, so the authority actively manages and supports those employees who experience ill health during their employment in line with its Sickness Absence Management policy.

However, there are occasions where an employee cannot be supported back to work to his/her substantive role or redeployed into suitable alternative employment due to the nature of the illness or condition and in such circumstances an employee will be dismissed on the grounds of capability (health). Table 7 below details the number of employees that have been dismissed on the grounds of capability (health) over the last three years:

	2018/19 EOY	2019/20 EOY	2020/21
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			Q2
Ill Health Capability	52	42	26
Ill Health Capability – Tier 1	9	20	1
Ill Health Capability – Tier 2	1	-	-
Ill Health Capability – Tier 3	1	1	1
Resignation – Health Reasons			2
Total	63	63	30

Quarter 2 figure indicates that end of year figure will be on a par with previous years.

[Table 8: Causes of absence – half year cumulative Q2 EOY 2020/21](#)

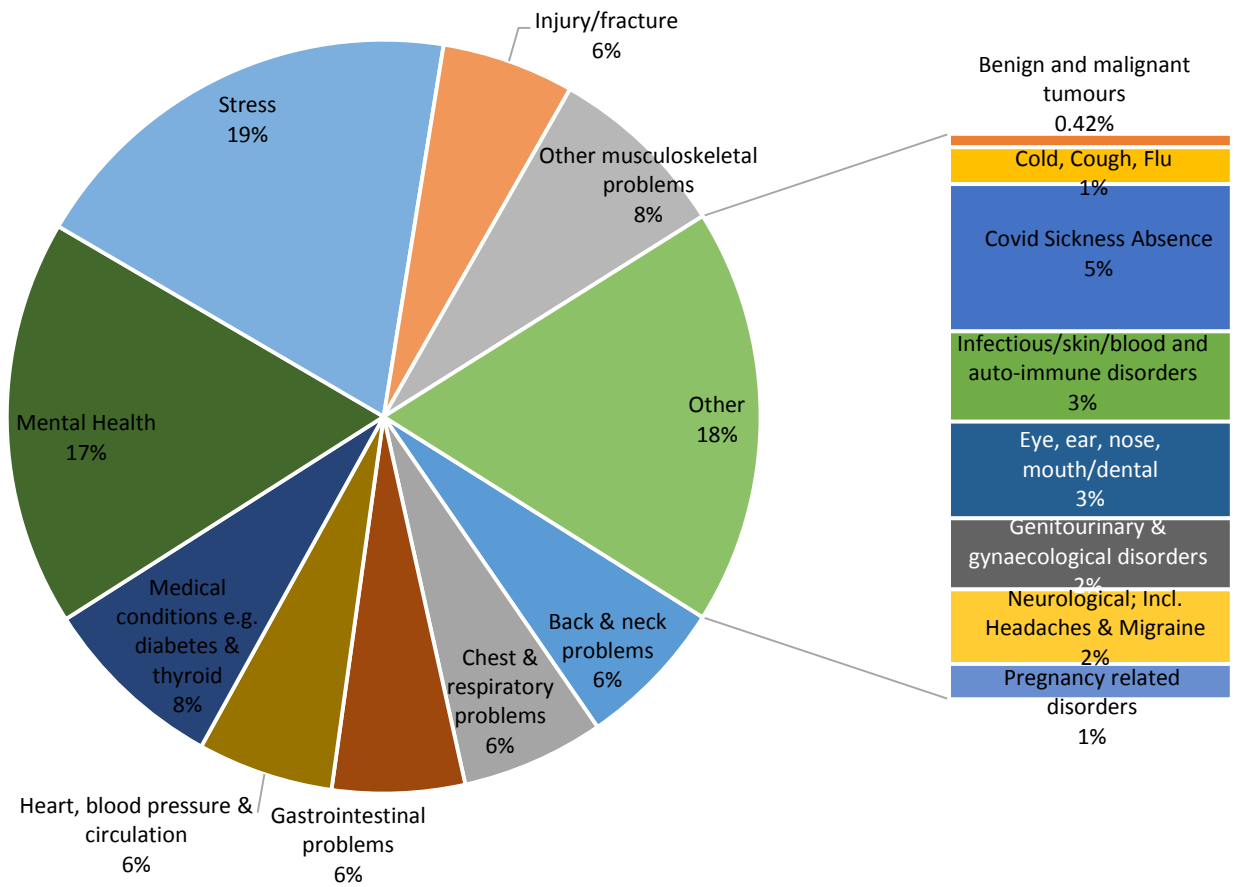
Stress is the most common cause of absence within the authority (19%) followed by mental health (17%). Other reasons for absence are as detailed within the pie chart below and will vary from one reporting period due to seasonal variations.

The CIPD Health & Wellbeing at Work report published in May 2019 focusing on the public sector has found that more organisations include mental health amongst the most common reason for short- and long-term absence. Over half of respondents confirmed that reported mental health conditions had increased. A fifth of respondents confirmed that stress and mental health is the primary cause of long-term absence and a third include stress in the top three causes of absence.

Whilst stress and mental health are the main causes of absence within CCC and an area of significant concern, the level of absence for this reason is comparable with other public sector organisations including health, education and civil service.

During 2020/21 the absence codes have been rationalised to aid clearer reporting and to reflect updated society of occupational medicine codes.

Authority Total FTE Days Lost Q2 2020/2021



The percentages displayed below relate to the sub categories to the stress and mental health absence codes combined which accounts for 36% of all authority sickness absence. Of the 36% of sickness absence, stress constitutes 52%. (Stress is 19% of all sickness absence).

Stress & Mental Health Detail

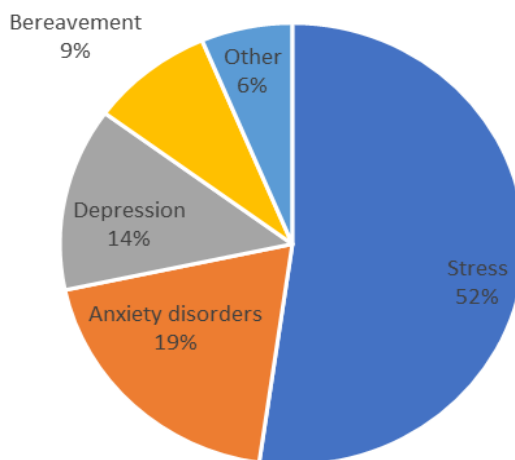


Table 9: Comparative sickness absence performance indicator

The Authority directly employs approximately 7,700 employees in a range of occupations including catering, cleaning, residential / domiciliary care, refuse and leisure services. In many of the local authorities listed below these services are contracted outside of the authority and therefore not included in the respective calculations. It should be noted that, according to benchmarking figures, these occupations generally have higher sickness absence rates either due to the physical nature of the work or being more susceptible to illness due to interaction with service users/customers.

It should also be noted that the actual make up of local government reported sickness figures can also vary considerably i.e. first 3 days removed, long term sickness removed; Carmarthenshire County Council include both.

All Wales Comparative benchmarking data for 2019/20 at the time of writing this report is yet to be published due to the impact of the covid pandemic emergency. There is a provisional publication date of 18th January 2021.

The **provisional** sickness absence figure for Wales is 11.1 days/shifts lost per FTE due to sickness absence with LA data ranging between 8.1 and 13.9. Carmarthenshire EOY 2019/20 result was 10.7.

NHS Wales benchmarking data

Below is benchmarking data relating to 11 NHS organisations in Wales shown as a percentage. Data is extracted from the NHS Electronic Staff Record. Sickness absence rates by quarter for the period April 2019 to June 2020 and calculated by dividing the total number of sickness absence days by the total number of available days for each organisation.

- 4% is equivalent to 9 FTE days lost.
- 5% is equivalent to 11.25 FTE days lost.
- 6% is equivalent to 13.5 FTE days lost.
- 7% is equivalent to 15.75 days lost.

	Apr- June 2019	Jul- Sep2019	Oct- Dec 2019	Jan- Mar 2020	Apr - Jun 2020
	%	%	%	%	%
All Wales	5.1	5.4	5.9	6	6.5
Betsi Cadwaladr University LHB	4.9	5.2	5.8	5.5	6.2
Powys Teaching LHB	4.2	4.4	5.6	5.1	4.9
Hywel Dda University LHB	5	4.8	5.5	5.5	5.4
Swansea Bay University LHB	5.8	5.9	6.6	6.8	8.4
Cwm Taf Morgannwg University LHB	5.7	5.9	6.6	6.6	7.5
Aneurin Bevan University LHB	5.2	5.6	5.9	6.5	6.5
Cardiff & Vale University LHB	4.9	5.3	5.9	5.8	7
Public Health Wales NHS Trust	3.6	4	3.7	4.6	3
Velindre NHS Trust	4	3.9	4.6	4.7	3.7
Welsh Ambulance Services NHS Trust	6.6	7.3	7.5	7.1	6.5

Health Education and Improvement Wales	2.6	1.8	3.1	2.8	1.3
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Benchmarking with English Unitary Authorities 2018/19 (This is the latest data available)

Sickness absence FTE days per employee - Rationale:

This indicator is collected through the Local Government Workforce Survey conducted in England between June and September each year. The question is: 'Please complete the following table and provide the sickness absence rate for the current financial year?';

- The sickness absence calculation includes all staff (including school-based support staff), but excludes teachers. The performance indicator reported by the 22 authorities within Wales in the earlier table includes teachers.
- The average number of days lost per FTE published for 2018/19 was 10.1 per employee. 2019/20 figures are not yet published.
- This compares to 9.7 in 2016/17 and 9.6 in 2017/18 illustrating declining performance in England over the last three years.

[Table 10: Sector comparisons by percentage working time lost v FTE days lost](#)

XpertHR is a reference tool for HR professionals with information on compliance, legislation, best practice and benchmarking. It undertakes annual benchmarking exercises on sickness absence rates and costs, and focuses on absence figures according to industry, organisation size and sector.

The latest survey results conducted in 2019 was published in 2020 and approximately 146 employers participated from all industry sectors. 2020 data is pending publication and will be reported in 2020/21 EOY report once published.

Among the survey respondents that provided data on absence rates, the national average absence rate stood at 2.9% of working time in 2019, equivalent to 6.5 days per employee.

When broken down by sector survey respondents, the national average for the public sector stood at 3.3% of working time in 2019, equivalent to 7.5 days per employee and private sector stood at 2.9% of working time in 2019, equivalent to 6.6 days per employee.

In terms of Carmarthenshire, our Q2 2020/21 figure of 3.37 FTE days lost per employee as a percentage of working time lost is 1.5.