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Corporate Management
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Manager

Colleague health and wellbeing update and Quarter two Attendance Management Performance

Purpose

- 1.1 This report provides an update on the colleague health and wellbeing approach the Council is taking to support all colleagues across the Council during 2023/24 and provides the headlines of the Council's attendance management quarter two performance for 2023/24.

Recommendation(s)

- 2.1 To note the colleague health and wellbeing offer that is available to the Council's colleagues, and the importance of supporting colleagues to take personal responsibility for their wellbeing.
- 2.2 To note that Public Health has identified the spread of a new COVID variant which has led to a rise of cases in Derby City.
- 2.3 To note the Council's attendance management performance for quarter two of 2.96 FTE days lost and a year-end forecast of 11.32 FTE days lost for 2023/24, against a year-end target of 10.5 FTE days lost.

Reason(s)

- 3.1 To ensure that Personnel Committee is aware of the continued focus on colleague health and wellbeing, and the context in which that focus is operating and the quarter one attendance management performance.

Supporting information

- 4.1 We will continue to keep the focus on the health and wellbeing of our colleagues during 2023/24.

4.2 Occupational Health and Wellbeing approach

Personnel Committee have regularly received updates about the ongoing work of the Occupational Health and Wellbeing service, and the continued development of the Council's health and wellbeing approach previously.

The Council provides an in-house, doctor-led Occupational Health service. We have recently exceeded our SLA by 2 days (17 days). This was for the month of September. This is now back on track.

The referring managers were supporting colleagues through the OH referral service which had an impact on clinic times and resource. We have managed to support these colleagues who have had trouble accessing NHS or GP support and are now back in target.

The Occupational Health service is now back on track against service level agreements, delivering appointments within 5-10 days of receipt of the referral.

We have recently supported our colleagues through World Menopause Day and have arranged for a menopause practitioner session as a question and answer session to further support. This was circulated through our internal channels. Uptake has been positive with over three weeks to go before the session.

An integral part of our wellbeing offer is the Employee Assistance Programme (EAP), which is externally hosted. Colleagues can access information and advice on a range of health and financial matters, 24 hours a day and 7 days a week.

At the previous Personnel Committee we were asked to clarify the percentage usage numbers. We can confirm that the usage figure (4.5%) is of the total workforce. This equates to 145 people accessing the counselling sessions available.

A total of 10 new counselling cases were opened in August and a further 6 in September. To note, People Services directorate remains the highest user of the counselling service at of all sessions during the period August to September.

The average take-up remains at seven counselling sessions each. The most popular format for the session was telephone consultations.

The top three reasons for accessing counselling sessions across all Council directorates were anxiety, women's health and family.

Personal Issues accounted for 68% of access and work-related issues accounted for 32% of access which is a slight decrease on the last report. Whilst the data of who accesses counselling is never disclosed to the Council, headline figures of levels of take up are shared at a directorate level.

The focus continues with managers from the People Services directorate to understand, from a HR business partnering approach, what actions can be taken to understand and address the level of absence and EAP usage numbers.

As services continue to focus on relevant actions to reduce the absence levels, an analysis of average working days lost due to sickness absence is currently being carried out, this may relate to the increase in counselling sessions.

We have formed the Wellbeing and Attendance Group to focus on trends and supporting managers through education, peer support and ensuring accountability on managing absence effectively. The Group has representatives from Occupational Health and Wellbeing, HR, Performance and Heads of Service to ensure support and consistency when dealing with absence.

We are currently in draft stages of our Wellbeing Strategy and we recently headlined the priorities in the draft Strategy at the Council's recent Managers Conference.

4.3 COVID new variant – impact on absence

On 25 September Public Health provided an update for all colleagues that the spread of a new COVID variant had led to a rise in cases in Derby City, whilst National Guidance has not changed, a supply of lateral flow test kits are available for colleagues from the Council House and Kedleston Road site to minimise the spread of the new variant within the workplace.

Guidance for colleagues to help mitigate the spread of the new variant amongst colleagues includes staying home if you are unwell, practising good hygiene including covering mouth and nose when sneezing and encouraging staff that are eligible for the vaccination to take this up. Cases of Covid are not recorded separately within the attendance system and if this impacts on absence over the Autumn period there would be an increase in the number of coughs/colds/virus category.

4.4 Attendance Management Performance for Quarter 2 2023/24

The Council's performance on attendance for the current financial year quarter two result of 2.96 FTE days lost shows a positive decrease with a year-to-date result of 5.66 days per FTE against the 2022/23 period actual year to date result of 6.82 FTE days lost. There has not been a significant increase from the quarter one period actual result of 2.78 FTE days lost.

The quarter two result gives us a year-end forecast of 11.32 FTE days lost which would be 0.82 days higher than the year-end target of 10.5 FTE days lost.

Effective from the 1 May 2023, following the Senior Leadership restructure, a number of department and team changes were implemented in the Council's organisational structure. The current year to date position by Directorate has been split to show the number of days lost under the previous Directorate names and new Directorate names:

April 2023:

Corporate Resources - 0.28 FTE days lost
People Services - 1.67 FTE days lost.
Communities and Place – 0.94 FTE days lost

Quarter 1 - May and June 2023:

Chief Executive's – 1.12 FTE days lost and year end forecast of 6.18 FTE days lost.
Peoples Services - 1.92 FTE days lost and year end forecast of 10.57 FTE days lost.
Place - 2.64 FTE days lost and year end forecast of 14.54 FTE days lost.

Quarter 2 - May to September 2023:

Chief Executive's – 3.50 days lost and year end forecast of 7.71 FTE days lost.
People Services - 5.00 days lost and year end forecast of 11.00 FTE days lost
Place - 5.72 FTE days lost and year end forecast of 12.59 FTE day lost.

The top three absence reasons for quarter two are as follows:

1. Stress/Anxiety - 21.01% of all absence. (not including Depression/Psychological illness related absences)
2. Musculoskeletal - 16.06% of all absence.
3. Operations Post operative recovery & other hospital treatments – 8.32% of all absence.

The largest increase over the top 3 absences is in Operations Post operative recovery which for quarter 1 was 6.87%.

Personnel Committee requested at its last meeting more information on the quarter one absence information within People's Services due to the potential year to date outturn.

People Services Data Quarter 1

Headcount in period 1427; Headcount of people off sick 158 (11.07%)

Short Term Absence 108, Headcount of people off sick (32.74%)

Long Term Absence 55, Headcount of people off sick (67%)

Of the 6 Director areas – 4 were under their monthly target and 2 were over their monthly target of 0.88 FTE days per month.

Adult Social Care Services – 4 Areas – all over target.

Top 3 absence reasons

Bereavement
Stress/Anxiety
Operations Post operative recovery & other hospital treatments

Early Help and Childrens Social Care – 19 Areas -12 below target – 7 over target.
Top 3 absence reasons

Stress/Anxiety
Operations Post operative recovery & other hospital treatments
Musculoskeletal

Integrated CYP Commissioning – 2 Areas – both below target
Top 3 absence reasons

Musculoskeletal
Stress/Anxiety
Chest Respiratory

Integration & Direct Services (Adults) – 4 Areas – all over target.
Top 3 absence reasons

Stress/Anxiety
21 - Chest Respiratory
16 - Operations Post operative recovery & other hospital treatments

Learning and Skills – 7 Areas – 5 below target – 2 over target
Top 3 absence reasons

Stress/Anxiety
Bereavement
Stomach Liver Kidney Digestion

Public Health – 1 Area – below target – zero absence.

The above information and data is taken from the HR Dashboard which is shared with Directors and Heads of Service. The dashboard also includes further breakdowns of absence reasons, starters and leavers and turnover rates which all form part of the picture of absence. This information then feeds directly into the Service Area action plans which include long term and short term absence cases and the wellbeing support interventions available for colleagues within the service area.

At the time of compiling this report the quarter two HR Dashboard is still under preparation and not available for inclusion within this report.

4.5 **Future focus for 2023/24**

Our focus throughout the remainder of 23/24 is defining our Wellbeing Strategy, as this will form an integral part of our Council People Strategy. The recently established People and Culture Programme Board will oversee the development and implementation of the strategies, underlining the importance of positive health and wellbeing for our colleagues.

Our prevention focussed wellbeing approach supports our vision of ensuring that health and wellbeing is embedded in everything we do and championed at all levels and across all functions, so that positive wellbeing becomes part of our culture.

We recognise that wellbeing does not start and end in the workplace. We want to empower our colleagues to make informed choices and engage in positive health and wellbeing behaviours so that they can thrive at the Council and beyond. We will build on the work that we've been doing over the last 12 months to support colleagues to make these informed choices.

We will be exploring the following actions to start early 2024:

- Develop our existing mental health champion network into an over-arching wellbeing champion network to signpost colleagues on a range of health and wellbeing issues.
- Improve the understanding of occupational health and wellbeing and developing a culture of wellbeing – by regular team discussions to ensure that our comprehensive wellbeing offer is understood, complemented by a wellbeing programme running throughout the year.
- Provide appropriate guidance based on national campaigns and relevant research in line with our NHS partners. This will provide information to our workforce to allow them to make informed decisions about their own health and wellbeing. We will maximise all opportunities with collaborate with partners.
- Provide the support and tools needed to make healthy choices, so that our colleagues can continue to take responsibility for improving their own health and wellbeing.
- Develop a wellbeing activity calendar, and all the activity associated with the planned actions to be supported by the identified champion network.

In addition, services will continue to focus on relevant actions to reduce the absence levels and an analysis of average working days lost due to sickness absence has been carried out, looking at our local data and within the national context.

This will be continued in the Wellbeing and Attendance group work.

Public/stakeholder engagement

5.1 Public and Stakeholder engagement has not been required for this report.

Other options

- 6.1 Do nothing. This is not considered to be a viable option, as the council is committed to supporting colleagues to take personal ownership of their health and wellbeing.

Financial and value for money issues

- 7.1 Services may be impacted financially due to capacity or resourcing issues to deliver services. This can create additional budget spend which will need to be accounted for.

Legal implications

- 8.1 None arising from this report.

Climate implications

- 9.1 None arising from this report.

Other significant implications

- 10.1 Colleague health and well-being is a risk on the Council's strategic risk register which is monitored regularly and performance is reported to Cabinet and Scrutiny. This paper contains actions which helps to mitigate the risk.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal Finance Service Director(s)	Heather Greenan, Director of Corporate Management	19/10/2023
Report sponsor Other(s)	Liz Moore, Head of HR and OD	19/10/2023

Background papers: List of appendices:
