



PERSONNEL COMMITTEE
15 September 2022

ITEM 07

Report sponsor: Simon Riley, Strategic Director of Corporate Resources
Report author: Carl Ward, Occupational Health and Wellbeing Manager

Occupational Health and Wellbeing

Purpose

- 1.1 To provide an update on the Council's approach to Occupational Health and Wellbeing.
- 1.2 To provide an update on the Council's performance on attendance management at Quarter 1, 2022/23.

Recommendation(s)

- 2.1 To note the update on the Occupational Health and Wellbeing service's priorities going forward.
- 2.2 To note the Employee Assistance Programme performance.
- 2.3 To note that the Council's performance on attendance management for Quarter 1 2022/23 was 3.24 days lost for each full-time equivalent colleague (FTE).

Reasons

- 3.1 To ensure the Personnel Committee is aware of the current position of the Occupational Health and Wellbeing priorities and approach moving into 2023.
- 3.2 To ensure that Personnel Committee is aware of the Quarter 1 performance for the year 2022/23.

Supporting information

Occupational Health and Wellbeing service

- 4.1 We continue to keep the focus on the health and wellbeing of our colleagues. Occupational Health have moved from a nurse led service to a doctor led service over the last 6 months to improve the quality of advice and reports written. The impact we have seen from this already is the referring manager receives the full Occupational Health report within 24 hours of the appointment. We are currently collating the data on the fitness to return to work rate for colleagues whom the Occupational Health doctors have assessed. This data will be presented in a future report.

- 4.2 The Occupational Health Service continues to perform well against service level agreements, delivering appointments within 5-10 days of receipt of referral. The service also delivers above local benchmarks where appointments are offered within 21 days.

Our Statutory Health Surveillance programme remains on track and no issues identified from the surveillance assessments this year. Health surveillance is a system of ongoing health assessments. These health assessments are required by law for employees, and it includes those colleagues who are exposed to substances that are hazardous to health, as well as driver assessments. We are to carry out approximately 2350 health assessments throughout the calendar year.

- 4.3 Our Employee Assistance Programme (EAP) usage, provided by AXA Health, continues to perform above industry benchmarks. Uptake of the EAP is at 4.8% for the 6-month period January 2022 - June 2022.

For context, the industry usage is 1.6%; like for like organisations of a similar size usage is 1.2%. AXA Health Portfolio 1.3%.

During the first 6 months of 2022 a total of 71 new counselling cases were opened. Whilst the details of the counselling cases are not shared with the Council in order to maintain the necessary confidentiality, AXA are able to share anonymised headline data as follows. The top three reasons in the new cases for the counselling were:

1. Anxiety
2. Women's Health
3. Family

The breakdown between work and personal reasons for the support requested was interesting on receipt of the report. Work reasons as the main reason for counselling was at 28% and personal reasons was 72%.

- 4.4 We continue to offer our colleagues a range of wellbeing support in relation to the top three reasons for new cases, such as through our Mental Health Champions as well as through our Menopause Friends Group. We continue to review how we offer such support to make it as effective as possible.
- 4.5 We are aware of both the potential impacts of the pandemic, and also the potential impact of the rising cost of living, for our colleagues. We have been working with the MoneyHelper Service (formerly the Money and Pensions Service or Money Advice Service). We have promoted their service through our internal channels of communication, including our Mental Health Champion network, should our colleagues need to access the support. Further work is ongoing to ensure we continue to signpost colleagues to relevant sources of information and advice on financial matters.

- 4.6 Occupational health and wellbeing are intrinsically linked to good performance and work life balance. The Council's Occupational Health and Wellbeing Strategy will be developed to incorporate a support model on which to build on the great work already in place within the Occupational Health and Wellbeing service. This will be done through greater understanding, informed decision-making and engagement with services to promote and educate the importance of optimal health for all colleagues.
- 4.7 It will be of benefit to our city to develop and to continue to improve our Occupational Health and Wellbeing offer so our colleagues are healthy at work and can continue to deliver the city ambitions.
- 4.8 To support maintaining a healthy workforce, the Council needs a strong and visible wellbeing offer, with engaged managers at all levels to promote and support the wellbeing offer to their teams. We will achieve this by focusing on the following three priorities:
- Build awareness and visibility of occupational health and wellbeing - Develop a calendar of monthly wellbeing topics and activities to raise awareness about that topic. We will have a greater focus on partnership working with our NHS partners on local and national initiatives.
 - Engaging, educating and upskilling managers and colleagues – This includes, but isn't limited to, stress management training and also our Wellbeing Champion training offer. This will be supported by our Human Resources and Organisational Development teams.
 - Engaging with our colleagues and providing access to resources and tools available to empower colleagues to continue to take responsibility for their wellbeing, and to reach out for support.
- 4.9 Wellbeing is a core influencer on people's ability to perform effectively, efficiently, safely and with creativity to drive innovation. To achieve optimal wellbeing, it is important to support the workforce to have the psychological strength, (with regard to work, this would be able to deal with for example the appropriate demands of their role), and mental health, (conditions and issues not related to work, that could impact), to think clearly and avoid ill health.

To continue to support colleague wellbeing, we aim to:

- Provide a mental health / wellbeing champion network that addresses the perceived stigma of mental health through research and using wellbeing champions/mental health first aiders, workshops, guidance and opportunities to articulate needs and develop solutions via our champion networks.
- Explore the provision of a physiotherapy solution to assist with musculoskeletal complaints.
- 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, and 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.
- Provide the support, tools and opportunity needed to make healthy choices, our workforce can continue to take responsibility for improving their own health.
- Develop a wellbeing activity programme, and all the activity associated with the planned actions to be supported by the identified champion network

4.10 As referenced in 4.6 above, we will be re-focusing our Occupational Health and Wellbeing Strategy for 2023. A future report for Personnel Committee will provide an update on further developments.

Attendance Management Performance for Quarter 1 2022/23

The top three reasons for absence in Quarter 1 with a comparison to the last reported Quarter 4 2021/22 information is as below:

Quarter 1 2022/23	Quarter 4 2021/22
1. Covid-19 related illness 14.48%.	1. Stress/Anxiety: 18.30%
2. Stress/Anxiety – 13.27%	2. COVID-19 related illness: 16.05%
3. Musculoskeletal – 11.93%	3. Musculoskeletal: 12.28%,

Whilst the top three reasons for absence in Quarter 1 remain the same as reported in Quarter 4, the number of COVID-19 related absences has decreased. At the commencement of the pandemic the COVID 19 absence reason was removed from the managing attendance triggers in line with guidance from the National Joint Council. Effective from the 1 August 2022 following consultation with Public Health, COVID 19 has been reintroduced back into the Council’s Attendance Management process. Whilst this will not impact on attendance figures until Quarter 2 it is anticipated that there will be a decrease in absence in Quarter 2.

Please see the Directorate data and comparison to the 2021 outturn as shown below:

Directorate	FTE days lost Quarter 1	FTE days lost Quarter 2	FTE days lost Quarter 3	FTE days Quarter 4 year end position	2022/23 - FTE End of Year Forecast
Communities and Place	3.33	-	-	-	13.32
2021/22	2.82	3.35	3.91	14.12	
Corporate Resources	2.14	-	-	-	8.55
2021/22	1.45	2.04	2.41	8.33	
People Services	3.81	-	-	-	15.23
2021/22	2.66	3.22	4.23	14.43	
Overall year end forecast					12.95
Overall year end actual 2021/22					12.81
Overall year-end target					8.5

All Directorates have reported an FTE day loss greater than the previous year's quarter with Covid 19 having an increased impact across all Directorates.

The overall year end forecast at the end of Quarter 1 is exceeding the year end for 2021/22 at 12.95 FTE days. A revised approach to Attendance Management is currently being ratified through the Council's policy approval process and is presented as a separate item for this Committee's approval. The revised policy will empower Managers to manage robustly setting zero targets for absence.

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 wellbeing.

Financial and value for money issues

7.1 None arising from this report.

Legal implications

8.1 None arising from this report.

Climate implications

9.1 None arising from this report.

Other significant implications

10.1 None arising from this report.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal	Paulette Brown, Solicitor	31/08/22
Finance		
Service Director(s)		
Report sponsor	Liz Moore, Head of HR	30/08/22
Other(s)		

Background papers:	None
List of appendices:	None