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Derby City Council

Attendance Management Project Update

Purpose

1.1   To update the committee on recent progress.

1.2   The Attendance Management Project Group continues to provide direction in order to support the aim of reducing sickness absence rates in the Council and it is a high priority for CLT.

1.3   To note that at the end of July 2019, the full time equivalent days lost per FTE was 12.71 days over the 12 month rolling period, against a current Council target of 11.5 FTE days for 2019/20.

1.4   To update the committee on support measures in place for managers and colleagues.

Recommendation

2.1   For the Committee to note the updated absence data and the continued support from the Project Group, with the aim of reducing sickness absence rates in the Council.

Reason

3.1   Personnel Committee have requested that an update on attendance management is a standing agenda item and it is a corporate priority.

Supporting information

4.1   The Corporate Leadership Team (CLT) has confirmed their commitment to managers managing attendance and delivering an improvement in performance. Monthly data reports on sickness absence rates are presented to Directorate Management Team meetings, and also to the CLT Performance Board.

The Councils Return to Work compliance for the rolling 12 months to end of July was 72.9%. The target for return to work compliance is 90%. Detail in **Appendix 1.**

Director absence targets have been set for each Strategic and Service Director. The targets took effect from April 2019. Progress can be seen in **Appendix 1.**

4.2   Data on sickness absence rates is presented to Directorate Management Team meetings and Corporate Leadership Team Performance Board on a monthly basis.

4.3   CLT recently reviewed a report, following an investigation into stress and mental health levels in the Council. CLT reaffirmed their commitment to addressing the issues highlighted in the report, which were as follows:

- High workload and budget cuts are causing stress among the work force
- We need to communicate better with colleagues that don't use IT in their roles
- We need more proactive management
- We have a lack of engagement in training
- Colleagues perceive a tick box approach to wellbeing
- We need fair and consistent application of policy
- We have issues with the legacy left by previous leaders
- We need more openness, honesty and accountability
- We need to minimise structure changes
- Colleagues want to work on their agreed work plans

Please see **Appendix 2** for more details.

4.4   In order to support improvement in colleague wellbeing and attendance, the Health Wellbeing and Attendance Team have the following support in place for managers to access to ensure that they are effectively managing their employee's health, wellbeing and attendance:

- **Health and Attendance Clinics –** available weekly for all managers to assist with health, wellbeing and attendance issues. The clinics will now include a HR Advisor.
- **FirstCare system –** all support/management actions should be recorded on FirstCare under the employee notes tab.
- **Absence monitoring on FirstCare** – allows managers to record what action/support is being taken with regards to absence management.
- **Training** – there are a range of courses available to managers to assist with effectively managing health and attendance. These include 1 health, wellbeing and attendance new manager Induction, 2. stress management for managers and3 using FirstCare effectively
- **Mental Health First Aid.** There are now 140 accredited Mental Health First Aiders in the Council able to provide support on a first aid basis, to any colleague in distress.

4.5   Mental Health and stress related absence is the biggest cause of sickness (31%) by absence spells and working days lost across the organisation, the average length of absence being 20 days. This is particularly high within People Services, where more than one in three days lost to sickness absence are mental health related and the average length of mental health absence is 22.5 days. Peoples Service Directors are promoting Mental Health First across the service, along with looking at

other ways of supporting colleagues and promoting our support services.

4.6   An Employee Assistance Programme has been put in place to ensure all colleagues have access to wellbeing support including counselling 24 hours per day. HWAT and OH have offered support in promoting the service to vulnerable work areas.

4.7   Mental Health First Aider training is in place to recruit and Train 400 Mental Health First Aiders. The Council currently has 140 accredited Mental Health First Aiders trained and a further 10 will be trained by end of August 2019. HWAT has started targeted recruitment of MHFA to ensure our most vulnerable work areas have sufficient provision.

4.8   FirstCare now has an absence monitoring tracking facility which has been added to the system. This allows managers to track and update any action that they are taking when employees are hitting absence trigger alerts. This makes it easier for managers to use and keep all of their health, wellbeing and attendance support and actions in one central system, as well as allowing the HR and HWAT Teams to run reports on where employees are in the management progress.

4.9   FirstCare are currently rolling out an upgrade to the system to all clients, this should come into effect at the Council by October 2019. The upgrade will include updated return to work forms.

4.10   The HWAT are currently reviewing the councils approach to safeguarding colleague wellbeing. The aim is to create a plan that will ensure NICE guidance and the governments Thriving at Work standards and are met and where possible exceeded throughout the organisation. A Wellbeing Action Plan is currently being developed to work on the issues highlighted in 4.3.

Public/stakeholder engagement

5.1   Significant communication has been disseminated to managers and colleagues, confirming the importance of attendance management and help available to support colleague wellbeing. Further work has to be done to reach colleagues in remote locations.

Other options

6.1   Do nothing. This is not considered to be a viable option, as the Council needs to reduce the current levels of sickness absence and work towards achieving the current sickness absence performance target of 10.5 FTE days lost for 2019/20.

Financial and value for money issues

7.1   Managing attendance in a more consistent and timely way should reduce costs of covering sickness absence, in addition to significantly improving productivity.

Legal implications

8.1   There may be an increase in legal challenge dependent on any changes in the Council's approach to managing attendance.

Other significant implications

9.1   Employee capacity is identified as a significant risk in the corporate risk register and high levels of sickness absence impact on this.

This report has been approved by the following people:

Role	Name	Date of sign-off
Legal	N/a	
Finance	N/a	
Service Director(s)	Nicola Sykes, Director of HR and OD	
Report sponsor	Paul Simpson, Strategic Director - Corporate Resources	
Other(s)	Diane Sturdy, Organisational Development Manager	

Background papers	None
List of appendices:	**Appendix 1 -** Director targets and RTW Compliance **Appendix 2 –** Mental Health Power point slides **Appendix 3 –** FirstCare Department Data