

## **SICKNESS ABSENCE YEAR END REPORT – (2019/20)**

### **Report of the Corporate Director, Corporate and Support Services**

#### **1.0 Purpose of the Report**

- 1.1 This report highlights the Councils (excluding Schools) sickness absence performance at the year-end point, (1 April 2019 to 31 March 2020).
- 1.2 Outlines actions that are being undertaken to support colleagues and address sickness absence and provides an overview of future plans.

#### **2.0 Recommendations**

- CRMG is asked to:
- 2.1 Note and comment on the year-end outturn of 9.59 days per FTE which is very close to the Council target of 9.5 days.
  - 2.2 Comment on the activity related to supporting the effective management of sickness absence also supporting the Health, Safety and Wellbeing of the workforce as outlined in sections 13 and 14.

#### **3.0 Introduction**

- 3.1 The health, safety and wellbeing of colleagues is a key priority for Stockport Council. The evidence is clear; a happy, healthy and engaged workforce will result in better quality services and improved outcomes for our residents. There is also a clear financial benefit as reduced sickness, turnover and increased productivity will have a positive impact on the budget. As a council, we are committed to putting people at the heart of what we do and ensuring that we value and support our amazing workforce.
- 3.2 This report is produced annually to understand the Council's sickness absence and actions that are being taken to support colleagues and manage absence effectively.

#### **4.0 Year-end position**

- 4.1 The average number of full time equivalent days lost per employee across the Council, as a result of sickness between 1 April 2019 and 31 March 2020 is 9.59 FTE days. This is very close to the Council target of 9.5 days and 0.26 FTE days lower than the 2018/19 figure which was 9.85 FTE days lost and is the lowest level of sickness absence the Council has achieved since 2012/13. Historical year-end figures are shown in appendix 1.

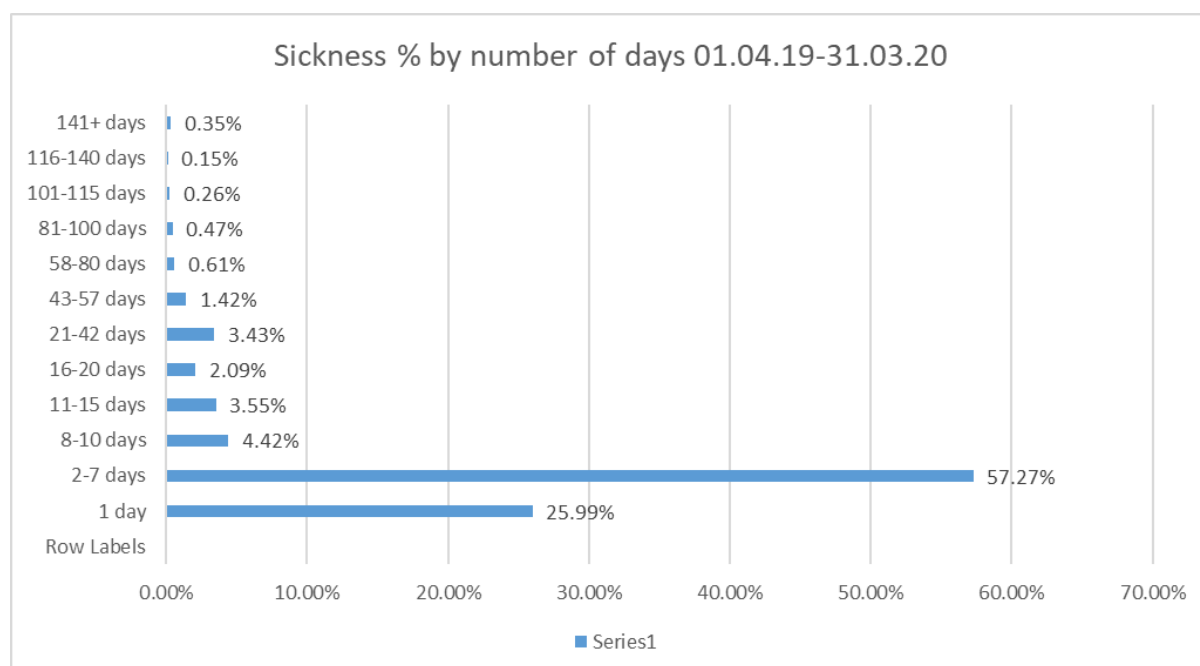
- 4.2 The Directorate position can be summarised as follows:  
Table 1: Year-end Position

Directorate	Total FTE	Long Term (FTE Days Lost)	Days Lost per FTE (Long Term)	Short Term (FTE Days Lost)	Days Lost per FTE (Short Term)	Grand Total (FTE Days Lost)	Total Days Lost per FTE
<b>CSS</b>	902.89	2594.86	2.88	4602.65	5.11	7197.51	7.99
<b>People - Adults</b>	564.94	4139.13	7.33	4495.56	7.96	8634.69	15.28
<b>People – Children's</b>	606.07	2137.68	3.53	3106.08	5.12	5243.76	8.65
<b>Place</b>	322.73	428.25	1.33	1470.15	4.56	1898.4	5.88
<b>Total</b>	<b>2396.64</b>	<b>9299.92</b>	<b>3.88</b>	<b>13674.44</b>	<b>5.71</b>	<b>22974.36</b>	<b>9.59</b>

- 4.3 It should be noted the headcount of the Council workforce is 2753 employees but for the purposes of the sickness calculations the FTE figure 2396.6 is used. The short term absence average days lost has reduced from 6.09 FTE days lost in 18/19 to 5.71 days in 19/20, whilst the long term absence figure has marginally increased from 3.77 FTE days lost in 18/19 to 3.88 days in 19/20. A further detailed breakdown of sickness absence levels in each service at year-end 19/20 is shown in appendix 2.

- 4.4 Table 2 below provides details of how long employee's periods of sickness absence lasted between the 1 April 2019 and 31 March 2020:

Table 2: Percentages of occurrences by duration

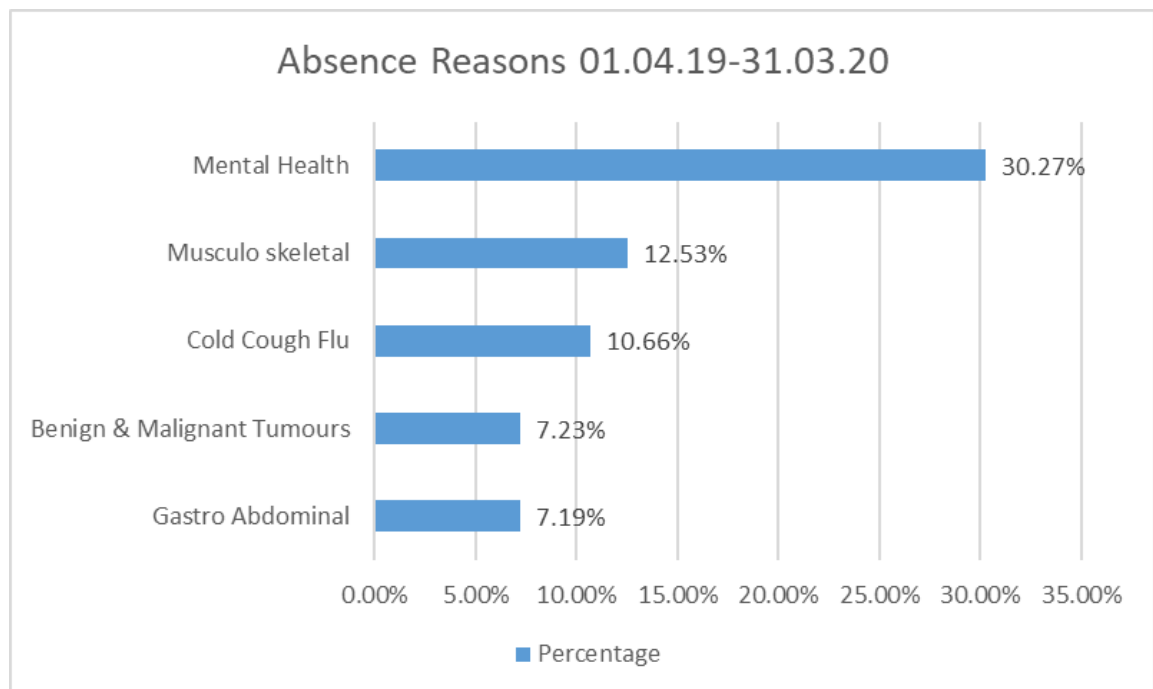


- 4.5 As the table above demonstrates 98.77% of sickness absence instances last less than 3 months. Only a further 0.88% extend from 3 to 6 months and

0.35% beyond 6 months (which is the point at which occupational sick pay reduces to 50% for longer serving employees). The majority of individual sickness instances are self-certified and last between 1 to 7 days accounting for 83.26% of instances.

- 4.6 The top two reasons for sickness absence in Stockport continue to be mental health reasons (stress, depression, anxiety) and musculoskeletal reasons as demonstrated in the table below. Mental health reasons account for 30.27% of the total absence; this is an increase of 0.52% from the 2018/19 year end figure. Musculoskeletal absence accounts for 12.53% of the total absence, which is lower by 5.47%, compared to the 2018/19 year end figure. Cough, cold, flu is the third highest reason for absence and this has increased by 1.04% from the 2019 year end figure of 9.62%.

Table 3: Percentage of sickness absence by type



- 4.7 To help us better understand and analyse the reason for absences relating to mental health, subcategories are added to the sickness absence reason for anxiety, stress, depression, other psychiatric illness. Employees and managers are able to select the specific reason contributing to their absence. Anxiety, stress, depression, other psychiatric illness which accounts for 30.27% of overall absence. Since the 2019 year-end figures “work related” has increased by 0.33%, “personal” has decreased by 6.98%, “both” has increased by 2.26% and “bereavement” has increased by 4.4%.

The year-end data is summarised in table 4 below.

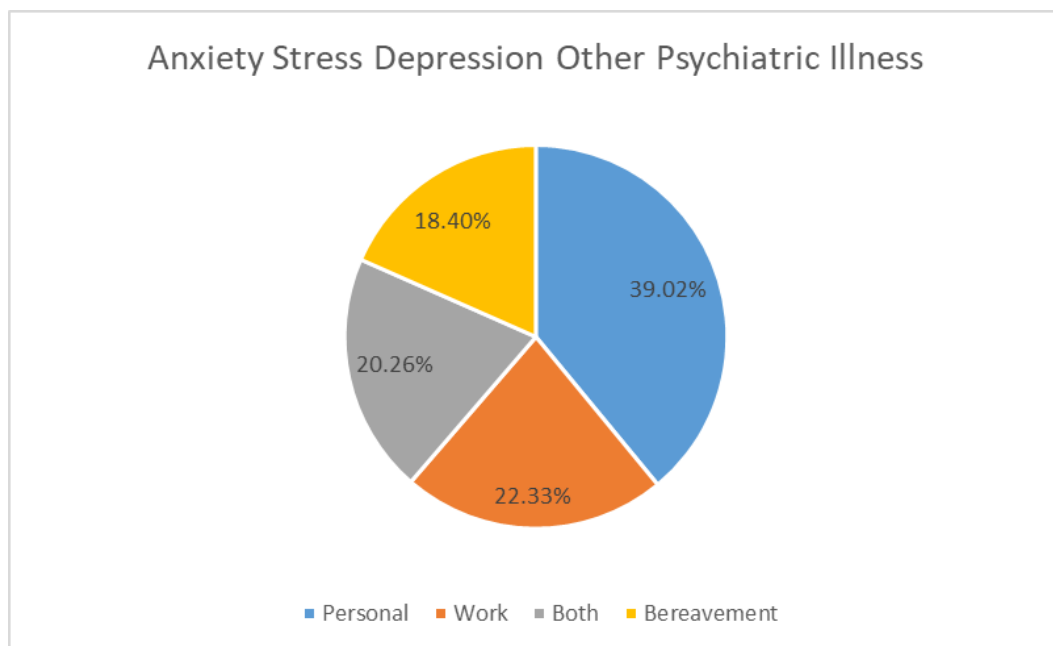


Table 4: Breakdown of mental health related illness by type

- 4.8 The online sickness absence reporting was developed to enable managers to capture whether or not a period of sickness absence was disability related, allowing us to provide better data in this area. At the year end point in 18/19, 6.10% of employees have been absent with a disability related illness, this has reduced to 5.80 % at the year-end 19/20.
- 4.9 The sickness data is used to inform activity undertaken by both the Council's People and Organisational Development (POD) Team. There continues to be a strong focus on employee wellbeing and resources have been allocated to progress work in this area. Further details are in section 6 of this report.

## 5.0 Comparison and benchmarking

- 5.1 The year-end comparative sickness data has been received from some, but not all, AGMA Councils. Those who have provided data are included in the anonymised table 5 below, this shows the year-end sickness position across AGMA Councils. Stockport continues to perform well in the management of sickness absence and has one of the lowest levels of absence in comparison

to other Councils. We will continue to populate the table as more data is provided.

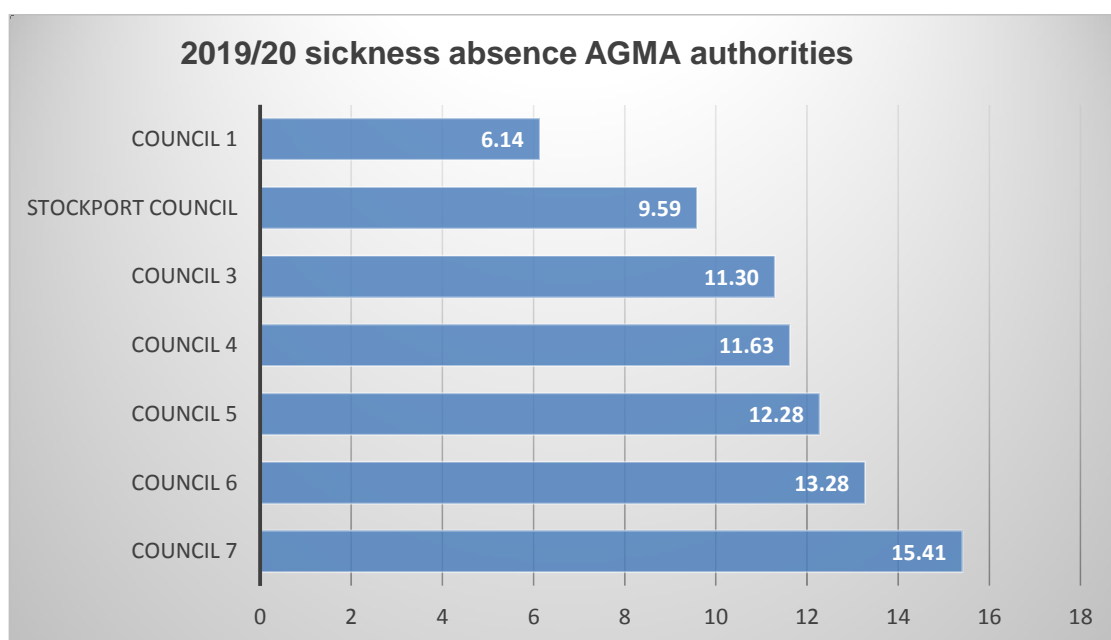


Table 5: AGMA Authorities Comparison

### **Action being taken support colleagues and address absence management**

## **6.0 Occupational Health Provision**

- 6.1 Stockport Council has three wellbeing contracts for Physiotherapy, Counselling and Occupational Health services. All three contracts were re-tendered during 2019/20. The use of all three services has remained reasonably consistent from year end 2019 to year end 2020. There have been 17 fewer Occupational Health Referrals, 33 fewer Physio referrals and an increase of 32 counselling referrals. The total number of referrals across all three services is summarised in the table below:

Service	YE 17 Referrals	YE 18 Referrals	YE 19 Referrals	YE20 Referrals	Primary reason for referral
OH	485	532	568	551	Mental Health
Counselling	180	236	221	253	Mental Health
Physiotherapy	185	225	186	153	Lower back

- 6.2 The main reason for referral to the physiotherapy service continues to be lower back problems. A fast track physio referral was implemented in 2017 for employees who are suffering from a musculoskeletal condition (the second

highest cause of absence), whether or not they remain in work. 56 fast track referrals were received during 2019/20.

- 6.3 Our Wellbeing providers have continued to operate their services during the pandemic and therefore offer vital support to employees. Initially this was via remote phone calls or video calls only but as lockdown has been lifted these appointments can now also be face to face. Additional bereavement support has also been made available by our Counselling Service provider to colleagues in the workforce who may have suffered a bereavement during the pandemic.

## **7.0 Wellbeing at Work**

- 7.1 The Wellbeing Steering Group continues to ensure the Council's Wellbeing Framework called 'Live Well Work Well' is active and brought to life.
- 7.2 The Steering Group sponsored the development of an updated Council Wellbeing Strategy for 2019 to 2022. Part of our updated strategy includes an approach to improve the mental health offer to employees through the introduction of Wellbeing Advocates, (also known as mental health champions or mental health first aiders in other organisations), to help support the good mental health of employees. Earlier in 2020 we began the recruitment of a team of colleagues who would become wellbeing advocates for the council. Approximately 20 people expressed an interest in undertaking this voluntary role but progress paused through the pandemic. The programme will be relaunched with senior sponsorship in September 2020.
- 7.3 There has also been a focus on supporting women with menopausal and menstrual systems, a policy has been developed, agreed and shared with colleagues, a support group has been established and information has been publicised to all employees to raise awareness and understanding.
- 7.4 The Council has also worked jointly with Health partners to develop a Carers Charter which is now in place, this complements the Greater Manchester Carers Charter to ensure support is in place for employees with caring responsibilities.
- 7.5 Public Health once again funded free flu jabs for front line workers in the Council. Three drop in vaccination sessions took place in October, November and December 2019. Following these sessions spare vaccines were then offered to the rest of the Council workforce.

## **8.0 Sickness Absence Training**

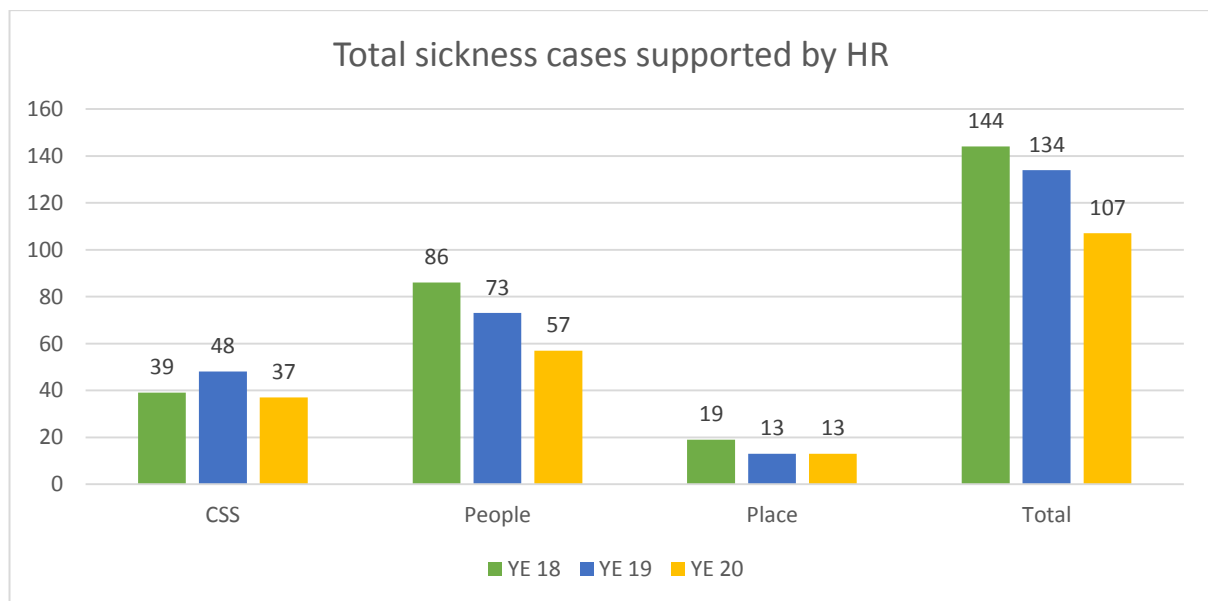
- 8.1 Managers complete mandatory sickness absence training to support them to manage absence effectively. The training consists of a short e learning module which has been refreshed in 2019 and is more relevant, followed by a 2-hour face-to-face training session. We are pleased to report that all existing managers have now completed this training. New managers undertake sickness absence training as part of their entry-level management

development training and compliance will continue to be monitored.

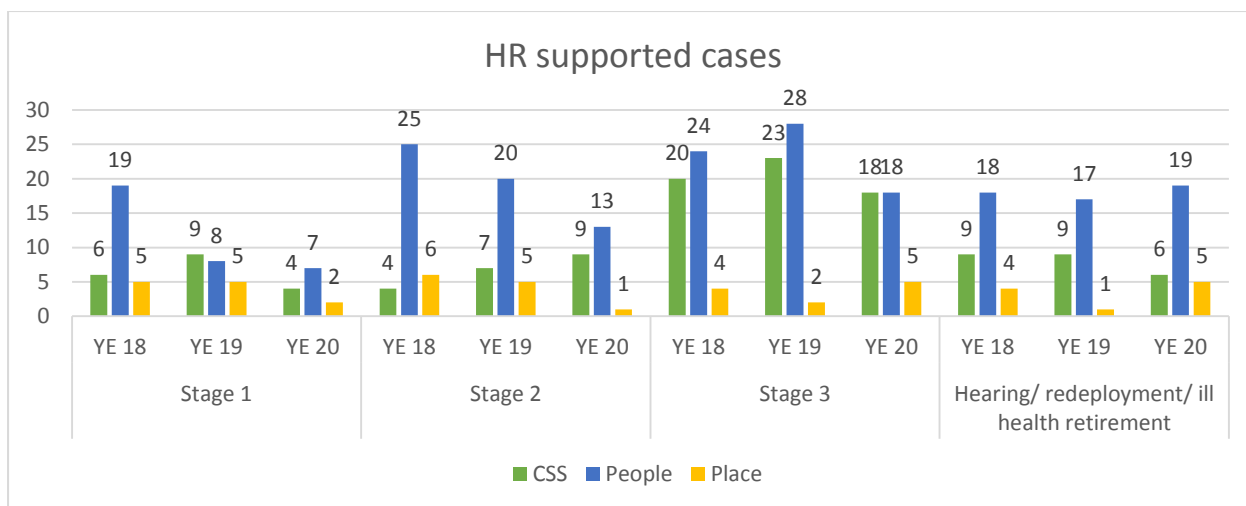
## 9.0 HR Case Work

9.1 HR continues to provide general advice to managers on all aspects of sickness absence, physiotherapy and counselling services. Managers are therefore able to access advice on how to deal with what can often be very sensitive matters. The HR team also offers support to managers by attending meetings handled at Stage 2 and above of the absence procedure.

9.2 The total number of sickness absence cases in the formal sickness stages being supported by HR is slightly less than 2019. The chart below shows the number of sickness cases in each directorate being supported by HR over the past three years.



8.3 The total cases being supported by HR is further broken down by the sickness absence stages within the policy; illustrated in the chart below and compared against the year end 2019 figures. There has been a continuing decrease, 40% from 2019 figures, in support required for stage 1 meetings as managers become more confident at managing these without HR support. The majority of cases being dealt with by HR is supporting managers with stage 3 sickness meetings. This is consistent with previous years however in 2019/20 there has been reduction of 22% of cases at this level. There has been a 10% increase in support to stage 4 hearings, redeployment and ill health retirement when compared to 2019.



## 10.0 Targeted Support

- 10.1 HR has continued to offer additional targeted support to service areas with high levels of absence and this will continue during the coming year. This is with the aim of changing the culture within the service regarding the management of sickness absence. This helps to ensure employees receive timely support and are given access to services such as occupational health, physiotherapy and counselling. For those employees with long term conditions or who may be recovering from operations (e.g. hip/knee) these services may supplement the support they are receiving through their GP or the hospital and can be vital in assisting with their recovery and enabling appropriate adjustments to be made to help facilitate a successful return to work.

## 11.0 Improved Management Information

- 11.1 The Councils HR/Payroll system, i-Trent, enables managers to run reports about sickness absence in their area. However for technical reasons this reporting is limited and managers can only see data for two layers below them in the hierarchy. In order to help services effectively manage sickness absence, further improvements have been made to the sickness absence data available. During 2019/20 Heads of Service across the Council have received a monthly sickness report for their whole service area. The report details staff within the service with sickness absence in the previous 12 months, and highlights those staff who have hit the standard sickness triggers. The report also contains details of the return to work interviews and identifies when a manager has not completed this, enabling Heads of Service to monitor and oversee actions required to comply with the policy and ensure employees are properly supported.

## 12.0 Sickness Absence Policy



- 12.1 The Council sickness absence policy and procedure is in the process of being reviewed. To inform potential changes to the policies from other Councils' have been reviewed and incorporated best practice. It was proposed that the revised draft policy will be consulted upon during 2020/21, however this will be reviewed and progressed at the appropriate time in light of the pandemic.

### **13.0 Wellbeing support to the workforce in response to Covid 19**

- 13.1 There has been clear focus nationally on people's physical and mental health and this has been mirrored by the Council in relation to the workforce. An enormous amount of work has been undertaken during the pandemic in order to support the health safety and wellbeing of Council employees. A workforce steering group has been established with strong representation from across the council to co-design our response to the pandemic and supporting colleagues. Examples of the activities undertaken are below and this focus on Wellbeing will continue during 20/21.
- 13.2 The chief executive sent daily emails to the whole workforce at the start of the pandemic giving updates, information and ensuring regular communication, these are now three time per week. These emails have included regular information on the importance of physical and mental health and have offered tips, information, support, links to resources and advice available to support physical and mental health. These have been supplemented since April 2 with a series of 'Supporting our Wellbeing' emails from the POD Team. The first series focused on practical measures colleagues could undertake to support their wellbeing, and featured articles on Counselling and Coaching, Physical Activity, Stress and Anxiety, Sleep, Healthy eating, Financial wellbeing, Support for Carers, Taking Time to Relax and Kindness. The second series has featured articles from colleagues describing their experiences over the last few months. The articles have had positive feedback from colleagues and the current series will continue to run until September. Example newsletters are included in appendix 2.
- 13.3 A significant amount of engagement with the workforce has been undertaken. A series of colleague surveys, under the banner of 'Let's Talk' have been, conducted on the topics of:
- Wellbeing
  - Flexible Working
  - Equality and Inclusion
- Take up has been positive, with the flexible working survey receiving almost 800 responses. Information from the surveys has been used to inform our wellbeing support offer and will continue to be used as we shape our People Strategy in the future. As a result of some of the feedback from the surveys we have also arranged a series of sessions on 'Developing Emotional Resilience and Wellbeing'. These two hour sessions, run via webinar, focus on individual resilience and discuss how strengthening resilience can enable you to tolerate and cope with adverse events more easily.
- 13.4 Recognising that many employees were/are going through a range of emotions and changes that haven't been faced before the POD Team have

undertaken wellbeing calls to the workforce. The team have offered all colleagues either 1-2-1 or group wellbeing support and a large number of colleagues have made contact with the team. Colleagues have had chance to speak to members of the workforce development team in a confidential and safe environment and, where appropriate, have been signposted to further support. Anonymised and aggregated feedback from these sessions has been collated and is being used to inform our wider wellbeing offer. Tailored wellbeing calls were also undertaken with colleagues who were operating the public coronavirus information line to ensure their wellbeing was supported whilst they were undertaking that challenging role.

- 13.5 Additional training and support for Managers has been provided to help managers adapt to remote working. A series of webinars on Digital Tools and Leading Remote Teams have been provided for all colleagues. The Digital Tools sessions focused on how technology can help managers to keep in touch, collaborate and manage workflows digitally. The Leading Remote Teams sessions included information on managing sickness absence and recruitment remotely and also gave guidance on how managers could effectively keep in contact with colleagues to ensure they were being supported and their wellbeing was being looked after.
- 13.6 All colleagues have also been offered the opportunity to access our team of internal coaches. In addition to the informal wellbeing calls our formal coaching offer, where colleagues undertake up to 6, 1-2-1 sessions of coaching with a qualified internal coach, has continued to be available. This has been accessed by colleagues, including those who need additional support due to their management responsibilities, the impact of Covid 19 on their role, wellbeing and/or personal resilience issues. The team are currently looking at training additional colleagues to become accredited coaches.
- 13.7 We have also promoted financial wellbeing and given employees access to financial help and support via the Credit Union.
- 13.8 Significant support has also been provided by to managers and employees to support the Health and safety of the workforce. This has included, reviewing, updating and developing new risk assessment documentation in order to ensure risks relating to Covid 19 are minimised. These template documents are available for managers and employees to access via the Health & Safety pages on the Council Intranets site.
- 13.9 An individual risk assessment has been developed along with guidance for managers and employees. The aim of this risk assessment is to guide managers and staff through a conversation to discuss the particular individual circumstances, for employees who are not able to work from home, which may increase the risk of impact of Covid-19. The development of this assessment has been led by colleagues in Public Health working in collaboration with HR and the Health and Safety Team and has been informed by good practice examples. Unison colleagues were also involved in this development and are supportive of our approach. Colleagues in the Public Health, HR and the Health and Safety Team continue to offer support

in the use of the individual risk assessment to managers and employees across the Council. To date over 350 individual risk assessments have been completed. Work continues to offer support and to ensure completion rates are high.

- 13.10 At the start of the pandemic a large proportion of the workforce moved to working from home at very short notice. As a result a new online working from home workstation assessment has been developed in collaboration with services. This was to help employees check their workspace was helping to keep them safe and well, as well as providing guidance on action employees can take to improve their working from home setup. The assessment also included a section on wellbeing to identify how colleagues were feeling and what actions could be put in place to support them further. To date over 1800 online workstation assessments have been completed. We also set up an equipment distribution hub and to date over 160 office chairs and over 180 monitors have been distributed to employees to improve their working from home setup helping to protect their health, safety and wellbeing.

#### **14.0 Moving Forward**

- 14.1 Covid 19 has fundamentally changed the way we work. Our workforce has risen to the challenge and adapted in so many ways. They continued to provide essential services when residents needed them the most and embraced home working at pace and scale. We have also asked colleagues to take on different roles. From running the PPE hub to supporting people through the coronavirus helpline, they have done whatever it takes to help residents at this unprecedented time. We recognise that this has been a stressful time and we are more focused than ever on putting our workforce at the heart of our approach.
- 14.2 With this in mind, we are coproducing a new People Strategy that will outline the future direction. This will have a big focus on wellbeing, building on the strength of the work that has been undertaken during the pandemic. It will focus on further embedding the Council's values and developing staff.
- 14.3. A key component of the strategy is a leadership programme that will be launched in September 2020, to support and enable managers to lead effectively in the changing environment. This will include managing sickness absence to ensure absence is managed in a timely, fair, consistent and compassionate way.
- 14.4 We will also continue to improve management intelligence through the development of a tableau dashboard that will provide senior leaders and managers with vital intelligence of their services. This will help to target interventions.

- 14.5 We will also work closely with Directorate Management Teams in the coming months to focus on areas of high sickness absence to understand the challenges and opportunities and ensure there is a continued focus on wellbeing.

## **15.0 Recommendations**

CRMG is asked to:

- 15.1 Note and comment on the year-end outturn of 9.59 days per FTE which is very close to the Council target of 9.5 days.
- 15.2 Endorse the ongoing activity related to supporting the effective management of sickness absence also supporting the Health, Safety and Wellbeing of the workforce as outlined in sections 13 and 14.

Appendix 1 - Historical Stockport Sickness Data

Appendix 2 - Supporting our wellbeing newsletter examples

## **BACKGROUND PAPERS**

There are none.

Anyone requiring further information should contact Kathryn Rees/Greg McNair on 0161 474 31747/0161 218 1427 or email:

[kathryn.rees@stockport.gov.uk/greg.mcnaire@stockport.gov.uk](mailto:kathryn.rees@stockport.gov.uk/greg.mcnaire@stockport.gov.uk)

## Appendix 1 - Historical Stockport Sickness Data

Rolling Year End	Non-schools employees FTE	FTE Sick days per FTE
31 <sup>st</sup> March 2008	3291.12	11.8
31 <sup>st</sup> March 2009	3352.14	12.0
31 <sup>st</sup> March 2010	3222.31	9.9
31 <sup>st</sup> March 2011	3123	9.6
31 <sup>st</sup> March 2012	2979.58	8.9
31 <sup>st</sup> March 2013	2760	9.3
31 <sup>st</sup> March 2014	2677.06	10.9
31 <sup>st</sup> March 2015	2510.53	11.5
31 <sup>st</sup> March 2016	2452.61	10.8
31 <sup>st</sup> March 2017	2386.11	10.3
31 <sup>st</sup> March 2018	2395.65	9.68
31 <sup>st</sup> March 2019	2376.71	9.85
31 <sup>st</sup> March 2020	2394.64	9.59

## Appendix 2 – Supporting our wellbeing newsletter examples

May 2021

Dear Colleagues,

As Pam Smith stated in her email yesterday this week is Mental Health Awareness Week. Each year the week has a different theme and this year it is '[Kindness](#)'. We know from research that [kindness and our mental health are deeply connected](#) – kindness is an antidote to isolation and creates a sense of belonging. It can help to reduce stress, brings a fresh perspective and deepens friendships. Being kind to yourself is also important – it can prevent shame from corroding our sense of identity and help boost our self-esteem. Kindness can even improve our feelings of confidence and optimism.

We know that one act of [kindness can lead to many more](#). This type of [community action](#) can help us to inspire others as we discover our connections to each other and extend kindness to ourselves.

*"Be kind whenever possible. It is always possible."* The 14th Dalai Lama

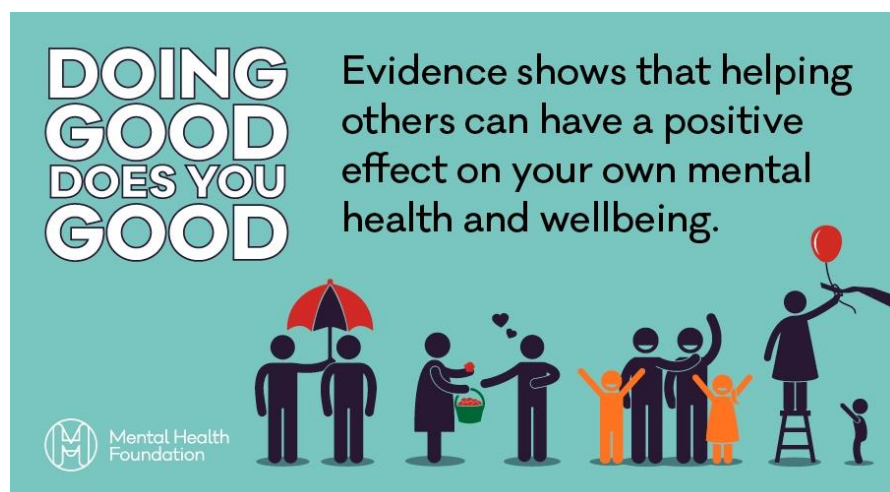
### What can you do for Mental Health Awareness Week?

The [Mental Health foundation](#) are asking you to do three things:

1. Reflect on an [act of kindness](#). Share your stories and pictures (with permission) of kindness during the week using **#KindnessMatters** and **#MentalHealthAwarenessWeek**
2. Use [the many resources](#) and [ideas](#) with your family, school, workplace and community to join with thousands in practising [acts of kindness](#) to yourself and others during the week
3. Share your ideas on how you think we could build a [kinder society](#) that would support our mental health using **#KindnessMatters** and **#MentalHealthAwarenessWeek**

[Mind](#) are also encouraging you to **#SpeakYourMind** and reach out to someone who needs a friend with a positive message, or share with them your own tips for coping to make sure they don't have to face this pandemic alone. They also have lots of [downloadable resources and social media posts for you](#).

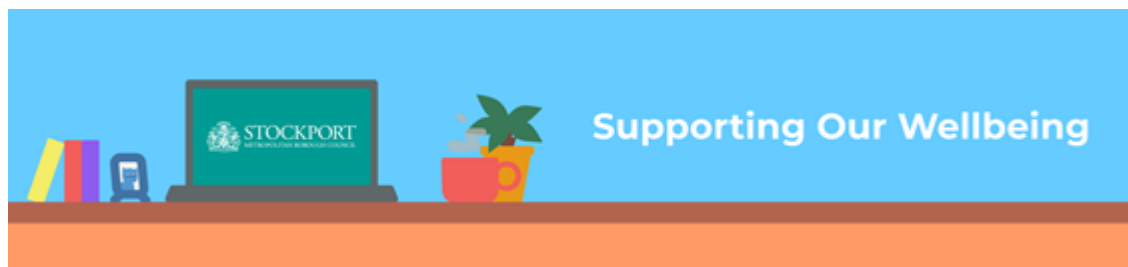
A colleague shared details of a [national kindness exchange](#), where you sign up to post a card or letter with a message of



encouragement to someone else in the UK and have someone allocated to send some encouragement to you. [Sign up here](#) by 28th May to be part of it.

All the best,

The Workforce Development team



June 2021

Dear Colleagues,

This week's article comes from Aurndra Golden, who manages the Equipment, Adaptations and Sensory Loss Team within Adult Social Care.

Aurndra explained that her role before lockdown was mostly office based. As well as supporting the team that complete moving and handling assessments and deliver training, Aurndra is responsible for the contract for providing complex equipment for over 650 NHS and Social Care prescribers. She also supports a service that provides equipment for people who need it at home, supplied in partnership with local businesses.

When lockdown came about Aurndra confesses that she, like a lot of us was incredibly busy. In addition to supporting her own team and making sure they were safe Aurndra supported the Manchester Nightingale Hospital in sourcing equipment. Aurndra also had to ensure that the contract supplier and retailers that provided the equipment were aware of all necessary precautions and had the required processes in place to ensure they were not at risk and that equipment could be delivered safely. The equipment itself faced an unprecedented shortage as many of the parts for the equipment are made overseas, at the same time experiencing higher levels of demand. When asked how she got through all that, Aurndra pointed out that she thrives under pressure and, fortunately, has good time-management skills.

**'How do you stop your glasses from steaming up when wearing a mask?'**

So how did Aurndra make sure that her colleagues were supported throughout all of this? She explained that she had daily Microsoft Teams catch-ups where the team would check in with each other, sharing hints and tips. They also shared experiences, including how to communicate with and mitigate some of the fear when



dealing with already concerned members of the public and then facing them in full PPE including, in some cases, respirator masks. Aurndra explained that she also made sure to have regular 1 to 1 check-ins and made sure to ask how colleagues were managing at home, especially those who have very young children.

Aurndra explains that she was due to go on holiday to Budapest but lockdown prevented that from happening. However she still took the annual leave and recreated as much of the experience at home as she could. She set up her kitchen like a hotel buffet complete with coffee cups next to the coffee machine, and tiny toiletries in the bathroom. They went on two virtual walking tours via YouTube and cooked Hungarian food for lunch and then a goulash and strudel with Hungarian red wine for dinner, with Hungarian folk music playing whilst they ate. She even made sure that the beds were turned down with fresh bedding and chocolates. She enjoyed it so much that she's going to do it again next month, travelling virtually to either Rome or Marrakesh.

#### 'purposeful and meaningful activity'

Aurndra explained that doing purposeful and meaningful activity is central to philosophy of Occupational Therapy and that having the 'gift of time' has given her the chance to relax and enjoy more things, particularly knitting and making jams and chutneys.

Thank you so much to Aurndra for sharing her lockdown experiences. If you would like to share your story, please contact [workforce.development@stockport.gov.uk](mailto:workforce.development@stockport.gov.uk).

All the best,

The Workforce Development team

