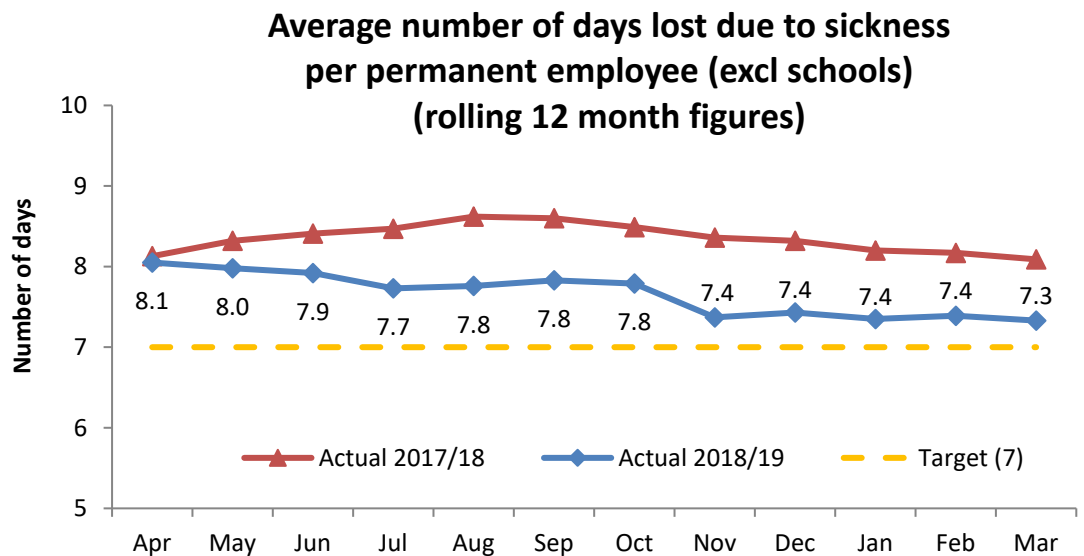


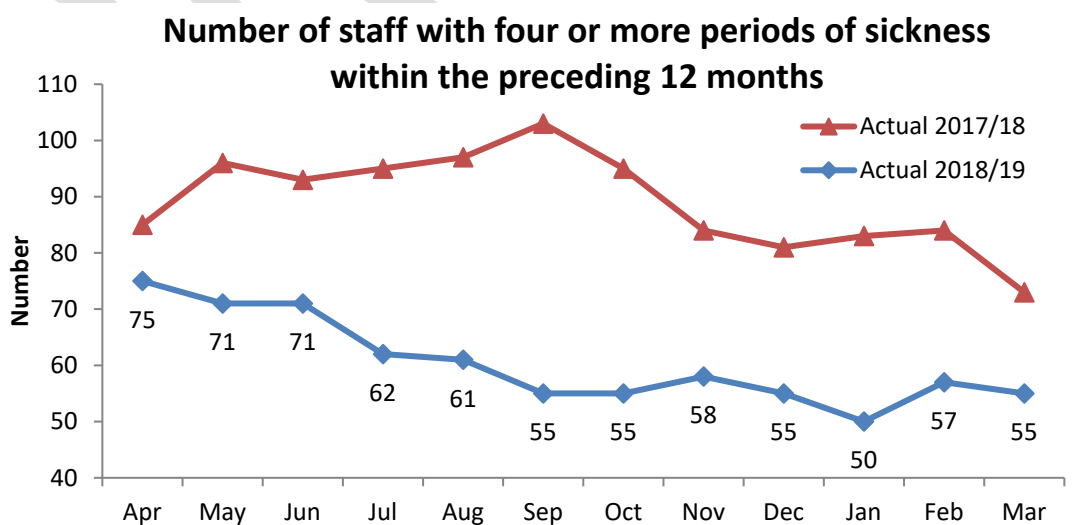
Q4 Appendix A11 – ORGANISATIONAL HEALTH INDICATORS

Average number of days lost due to sickness per permanent employee (excluding schools) (rolling 12-month figures)



The outturn at the end of March 2019 of 7.33 shows that there continues to be a downward trend in overall levels of sickness absence since 2017. The most common cause of absence is infections accounting for 32% of all absences. The most common cause for working days lost however are those relating to mental ill-health, which accounts for 33% of all working days lost. 22% of working days lost due to mental ill-health has been identified as work related. The outturn figure shows that 3.2% of possible working time is lost to sickness absence, which has decreased since 2017/18 (3.3%) and 2016/17 (3.4%). The indicative cost of this absence based on the average salary (including an estimate of on-costs) is £1.7M, this has increased compared to 2017/18 (£1.6M) and 2016/17 (£1.5M).

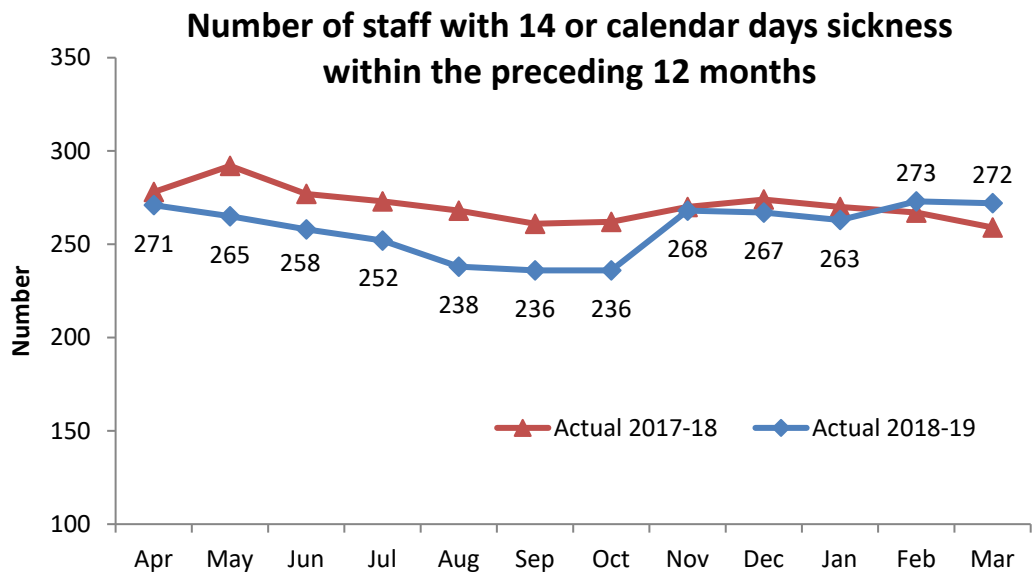
No. of staff with 4 or more period of sickness within preceding 12 months



This measure continues to show a downward trend as a result of improved attendance management arrangements within service directorates and support made available through the human resource team.

Number of staff with 14 or calendar days

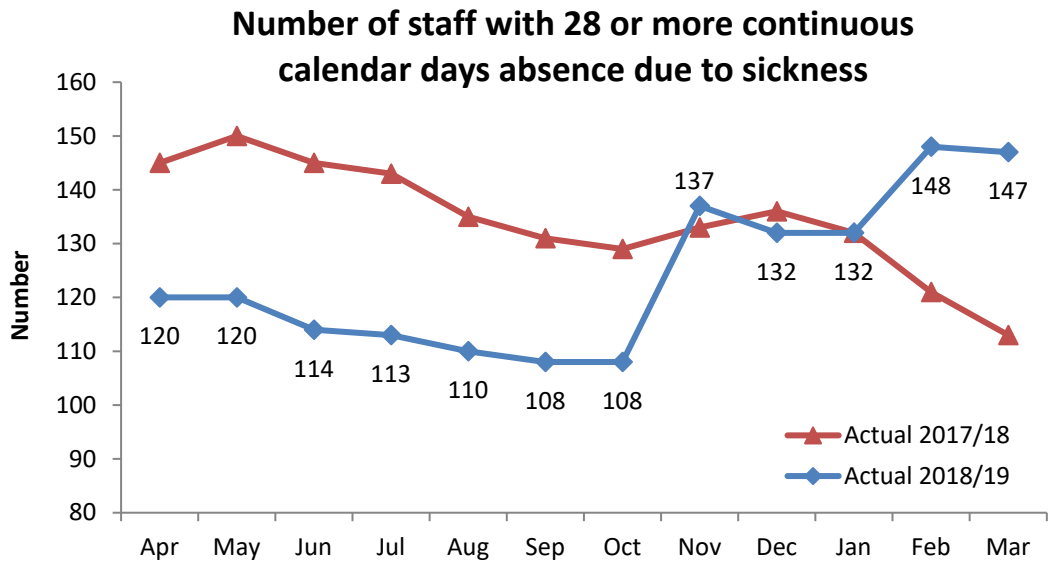
sickness within the preceding 12 months



Having shown an decreasing trend for the first six months of the financial year, the number of staff with 14 or more calendar days sickness has increased significantly over Quarter 3 and is now in line with the previous years higher levels. This matches the increased number of staff with a long term sickness episode of 28 days or longer shown in the measure below, thus indicating that staff are off work due to sickness less frequently but when they are off work due to sickness it is for a longer period of time, thus indicating that staff are off work due to sickness less frequently but when they are off work due to sickness it is for a longer period of time.

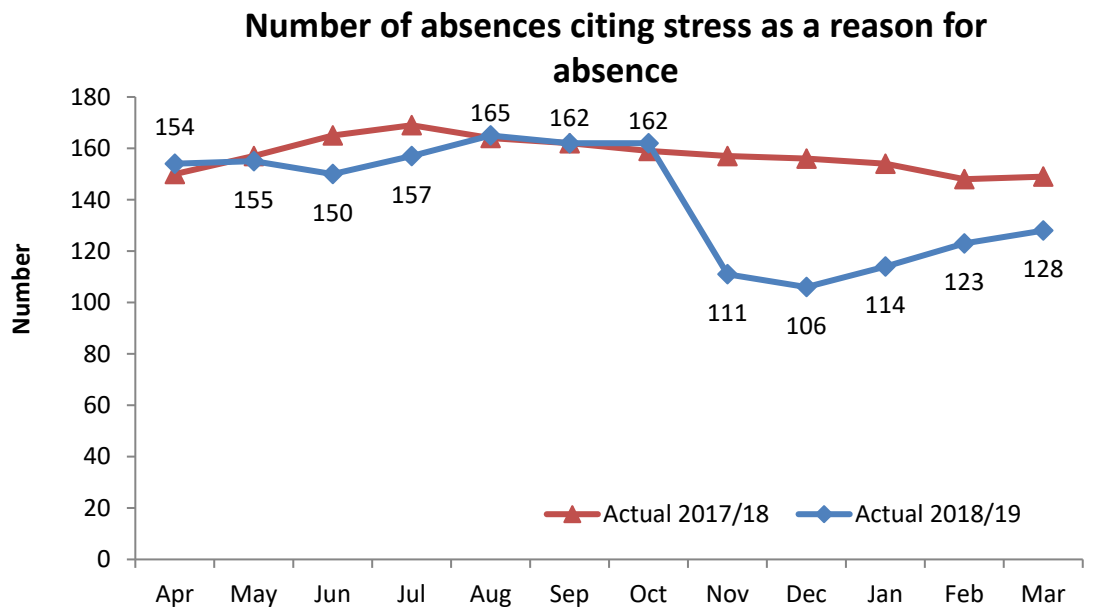
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Number of staff with 28 or more continuous calendar days absence due to sickness



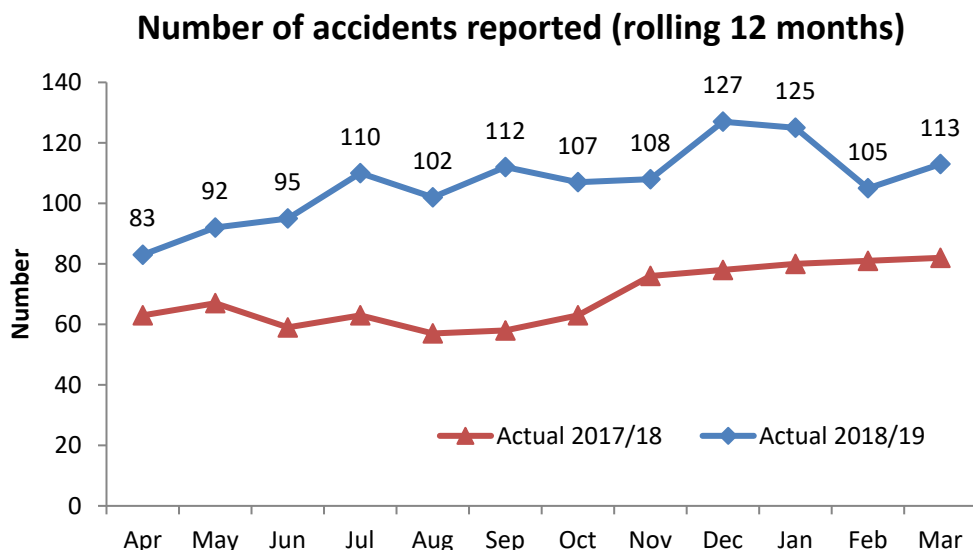
As can be seen from the graph above, there has been a marked change in absence trend in the last two reporting quarters. It is not unusual for there to be an increase in the length of absence during the winter months but this is an unexpected level of spike over this period. 49% of long term absence is caused by absences relating to Stress/Depression/Mental Health, 18% is caused by absences relating to Operations/Recovery/Treatment, and 10% is caused by absences relating to Other Musculoskeletal.

Number of absences citing stress as a reason for absence



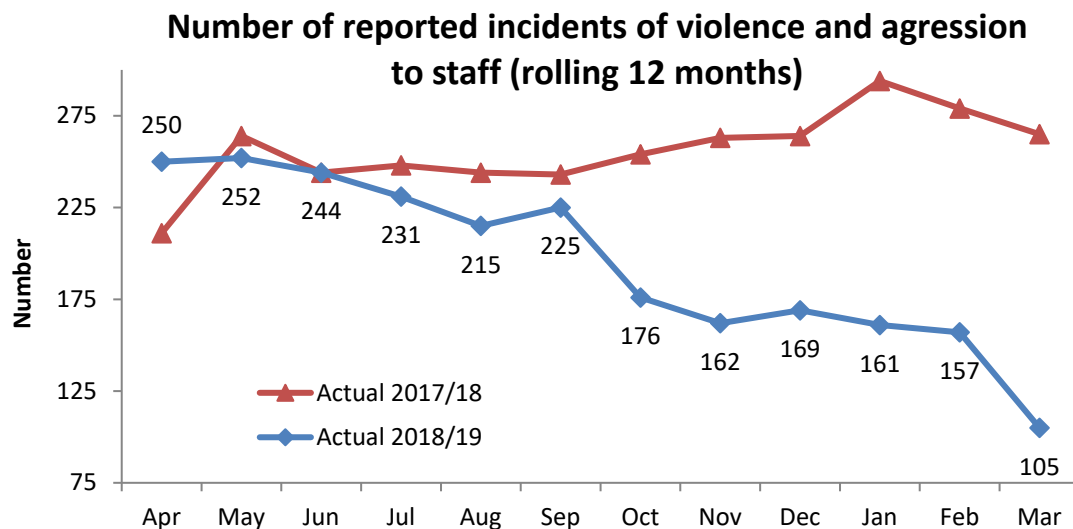
The number of absences that cite stress as a reason has continued to remain lower than in the previous reporting year. After a significant fall in numbers during quarter three whilst there is a slight upward trend, this remains well below previous reporting data. There is a continued focus on mental health awareness and promotion of support options that are available to staff, including an internal network of training mental health first aiders.

Number of accidents reported (rolling 12 months)



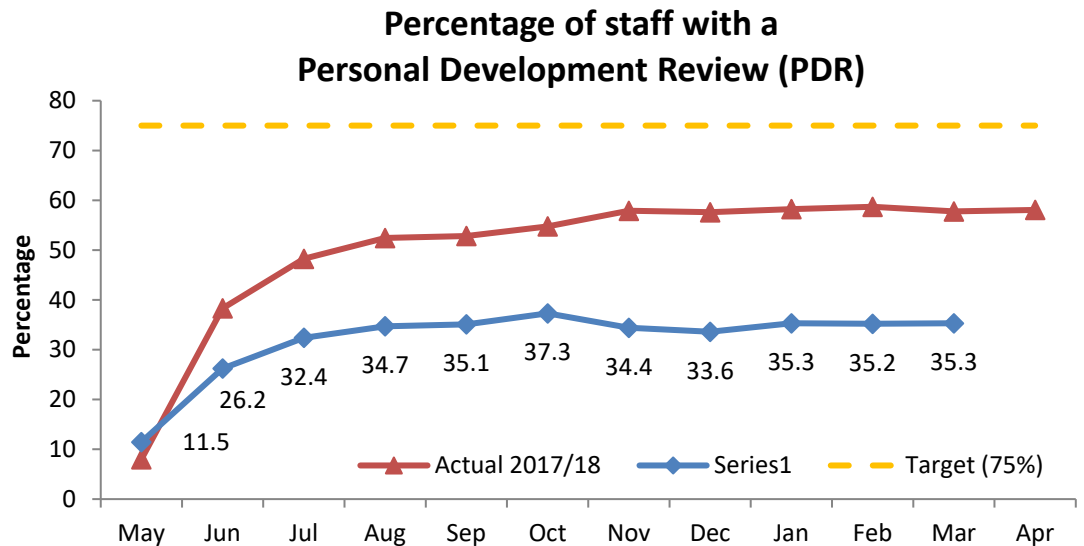
Whilst the number of reported accidents is higher than in the previous reporting year, this is considered to be directly related to the promotion undertaken to raise awareness of the importance of reporting accidents and incidents amongst staff and managers this year. It is evident that there has been under-reporting.

Number of reported incidents of violence and aggression to staff (rolling 12 months)



As can be seen from the chart above, incidents of violence and aggression overall remain at the same levels although a slight decline in recent months. The majority of incidents reported fall within maintained schools, children's services, adult social care, civil enforcement and reception areas where incidents are more likely to occur due to the nature of the work. Continued monitoring takes place of all incidents and remedial action taken where appropriate to provide additional protection and support to staff who are subject to incidents.

Percentage of staff with a Personal Development Review (PDR)



Following feedback received, the Council’s PDR process has now been reviewed through consultation with staff, managers and the corporate management team. Therefore, this is the final quarter for reporting this measure as it currently stands.

Alongside the launch of the revised approach, new guidance outlining the People Performance Management (PPM) ethos which contains templates for conducting regular 1-1s and a BIG discussion annually has been made available. The focus of the new approach is on regular, quality conversations between staff and managers rather than an administrative ‘recording’ process. Monitoring during implementation and evaluation of success or otherwise of the revised will take place through a quarterly mini staff survey.

Managers have access to face to face training on the new requirement