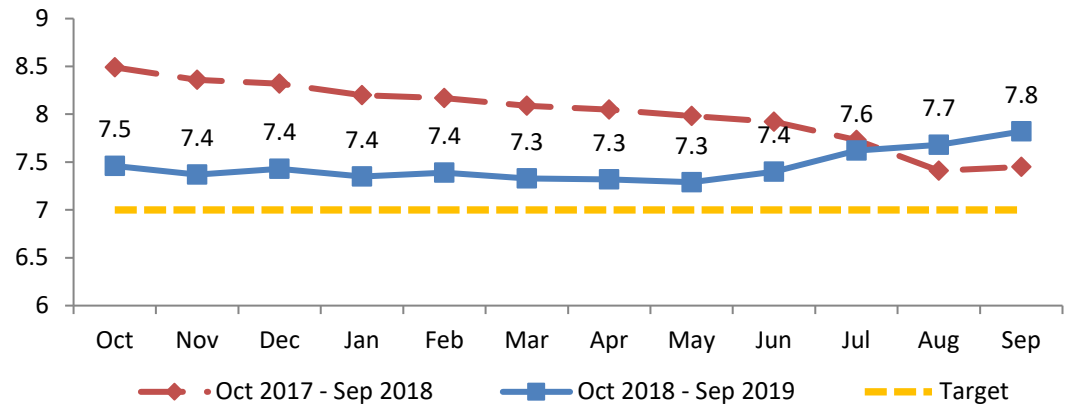


Q2 Appendix A11 – ORGANISATIONAL HEALTH INDICATORS

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



The outturn at the end of September 2019 of 7.8 shows that there continues to be an upward trend in overall levels of sickness absence over the first half of the year. However, the trend over the last 12 months shows an increase in the average. Average absence levels remain consistently above the target of 7.

The most common cause of absence is infections accounting for 28% of all absences. The most common cause for working days lost are those relating to mental ill health, accounting for 33% of all working days lost. Of the working days lost to mental ill health 23% has been specifically identified as work related.

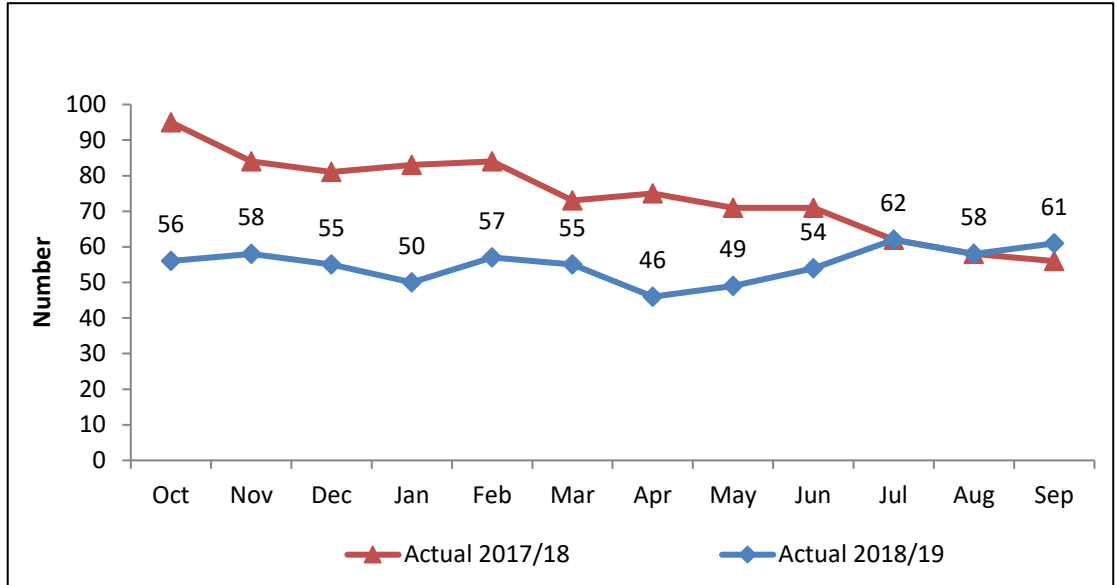
The indicative notional cost of lost productivity is £1.7M, this has increased over the last 12 months from £1.6M.

Significant steps have and continue to be taken by directorates with advice and guidance from the human resource service to contain and reduce sickness absence. Actions include

-
- *Absence reports are produced monthly for each director so that active monitoring and review can be undertaken. Directorates with the highest absence levels also receive additional absence reporting information to supplement the standard reports to assist with attendance management activity.*
- *Significant effort has been made to proactively provide access to support for those with mental ill health related absences as detailed in the measure below. Work will continue to make available preventative resources to encourage personal resilience in staff.*
- *Automatic notifications are now sent to managers when staff reach a long term or multiple absence triggers as detailed in the Attendance Management Policy and Procedure. This includes an escalation process if the manager does not respond to calls for action.*
- *Regular lunch and learn sessions are held with managers providing further opportunities to access support and to help to hone their people management skills.*

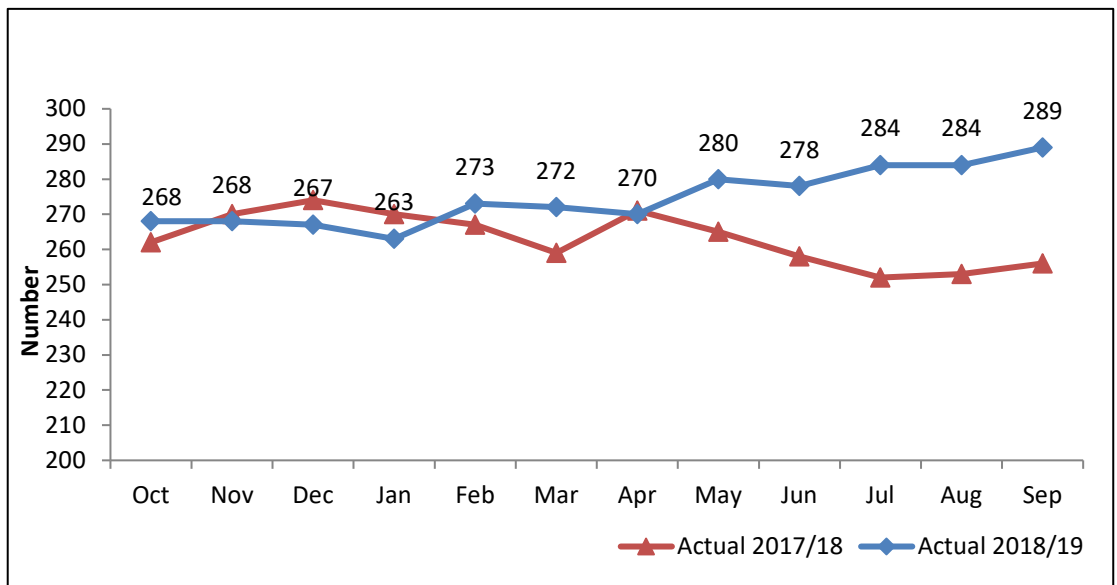
- Work is ongoing with our Occupational Health provider to secure the continuous improvement of this provision.
- Consideration is being given to temporary dedicated resources in Adult Social Care & Housing to provide managers with additional help to manage sickness absence.

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



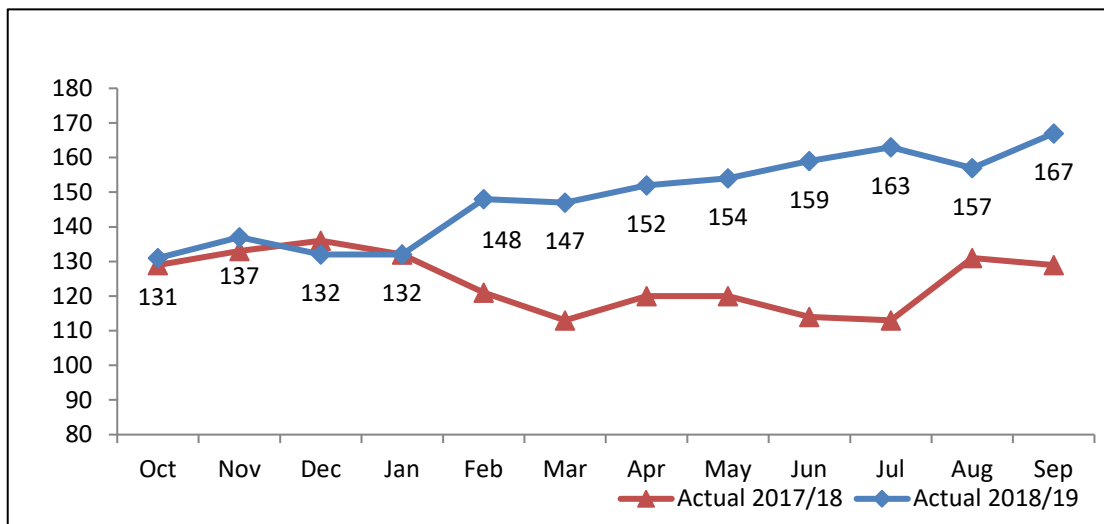
This measure continues to follow an overall downward trend and has shown little variation over the last 12 months. . A significant amount of management information is being sent monthly to directorate service boards to facilitate appropriate strategies being put in place to address any areas of concern. Managers also receive automated email notifications when their employees reach this policy trigger.

Number of staff with 14 or calendar days sickness within the preceding 12 months



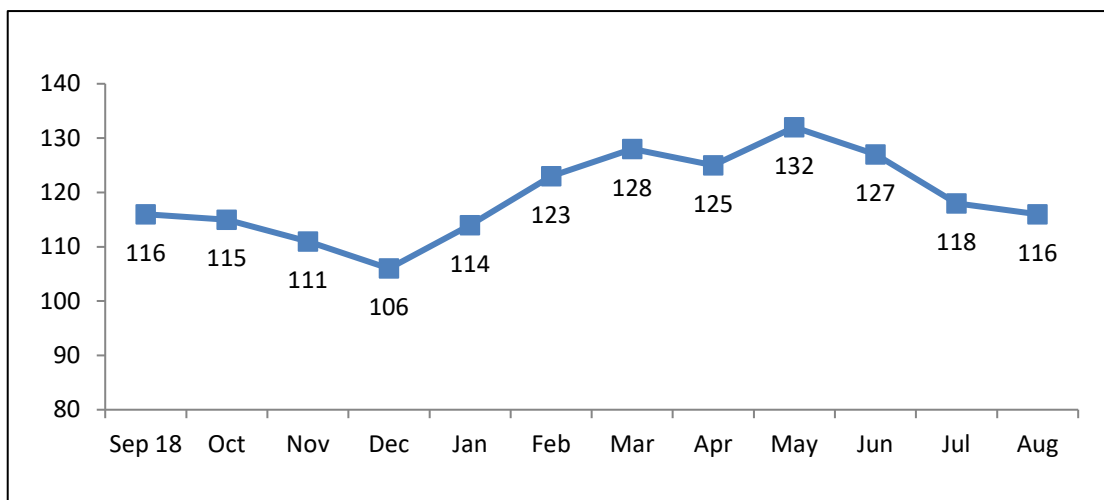
While the number of occasions that sickness occurs is showing a downward trend, longer term absences are showing an increase. Since 2019 there has been an upward trend of the number of employees with 14 or more cumulative calendar days. This matches the trend seen with long term absence and the comment there describes the steps that are being taken to reduce absence.

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



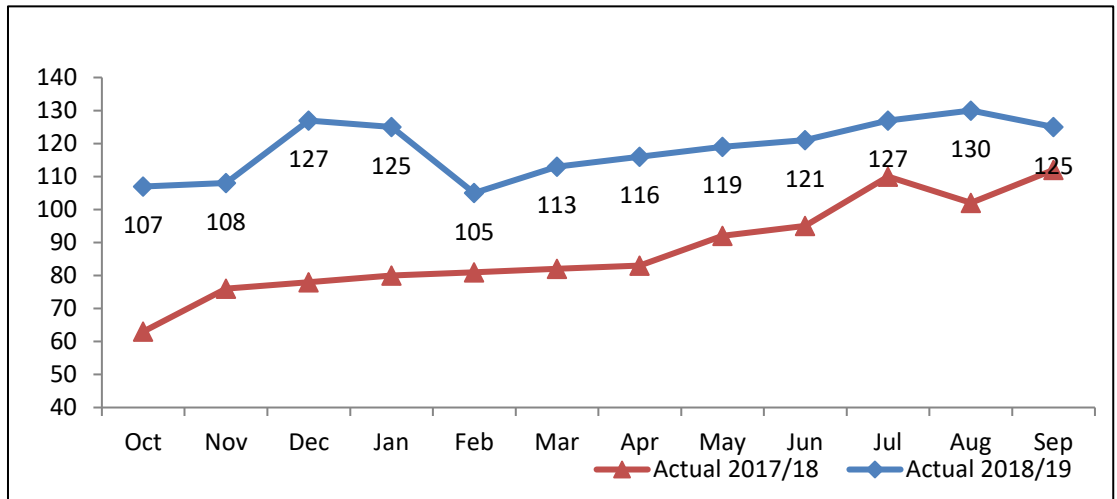
The trend since 2019 shows a significant increase in the number of long-term absences. The majority of these absences (45%) relate to Stress / Depression / Mental Health (which relates to both non-work and work-related stress), the next significant reason is Operations / Recovery / Treatment at 17%. The steps being taken to reduce overall absences are detailed in the commentary set out above for the average working days lost measure. As with employees that reach the multiple absence policy trigger (4 or more absences), automated emails are sent out for long term absences to managers calling for action and escalation is made in cases of non-response.

Number of absences citing stress as a reason for absence



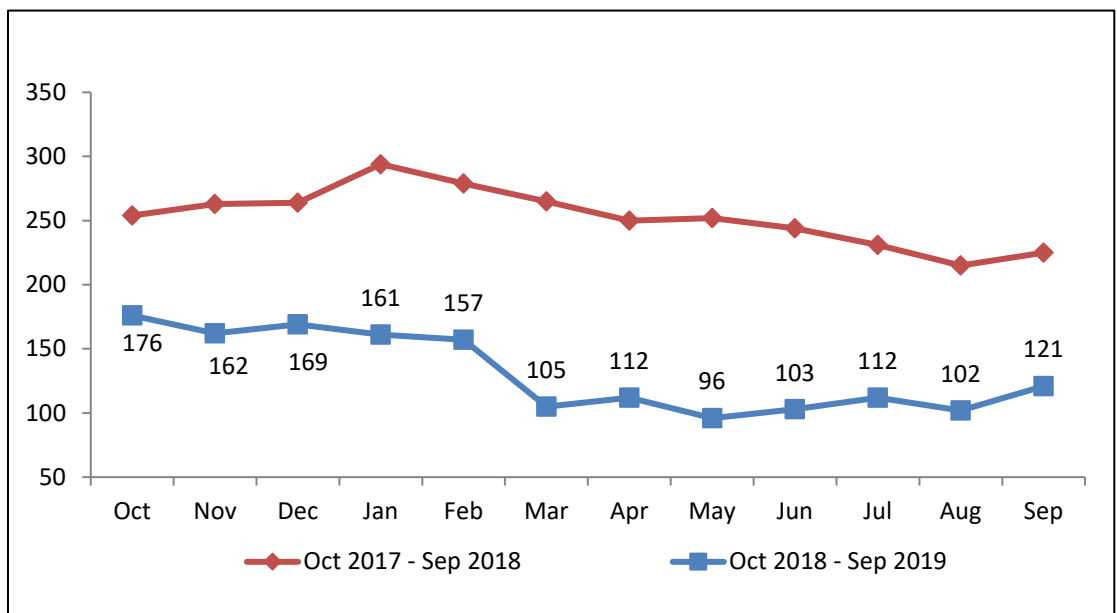
The council signed up to the Time to Change Employer Pledge in 2018 to demonstrate its commitment to tackling the stigma associated with mental ill health and to ensure that there are appropriate mechanisms in place for staff to access appropriate help and support. In line with the action plan put in place to deliver against this commitment, a cohort of some 85 mental health first aiders across the majority of council sites have now been trained. In addition, there are now also 22 mental health champions trained to carry out promotional and stigma reducing activities. There is also an Employee Assistance Scheme available to staff with a 24/365 helpline as well as the mental health access to work scheme REMPLOY which now has bespoke IWC access arrangements and has helped 72 staff to remain in work over the last two years.

Number of accidents reported (rolling 12 months)



The number of reported accidents continues to be higher than last year, although this is primarily due to improved reporting and as a result of work undertaken to clarify the expectations of the sort and level of incidents which need reporting.

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



The last month has shown an increase in violence and aggression cases, albeit lower than last year, this increase is primarily emanating from our respite care facilities resulting from residents who are new to the service and display new and challenging behaviour. In most cases, the strategies put in place to support residents mean that incidents reduce over time.