DEVON & SOMERSET FIRE & RESCUE AUTHORITY

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REPORT REFERENCE NO.	**HRMDC/10/14**
MEETING	**HUMAN RESOURCES MANAGEMENT & DEVELOPMENT COMMITTEE**
DATE OF MEETING	**20 SEPTEMBER 2010**
SUBJECT OF REPORT	**ABSENCE MANAGEMENT**
LEAD OFFICER	**Director of People and Organisational Development**
RECOMMENDATIONS	*That the report be noted.*
EXECUTIVE SUMMARY	The progress with Absence Management has been included as a standing item within the HRMD agenda. This report includes an update of the Service performance for absence levels and also the long term absence levels.
RESOURCE IMPLICATIONS	There are ongoing resource implications in relation to absence management in terms of providing cover when required.
EQUALITY IMPACT ASSESSMENT	The Absence Management policy has had an equality impact assessment.
APPENDICES	
LIST OF BACKGROUND PAPERS	None

1. __INTRODUCTION__

1.1   Absence levels have previously been identified as a key measure that the HRMD Committee will monitor and review as a standing item. The overall performance in 2009/10 was better than our target level of 9.55 days per person and an overall level of 8.02 days was achieved. The target for 2010/11 is an average rate of 9.0 days/shifts lost per person.

2. __2010/11 PERFORMANCE__

2.1   A good start has been made in 2010/11 in terms of our performance with absence management. We have seen a 11.5% decrease in absence when compared with the same period last year. At this point in time, the previous year was at an average of 2.67 days absence per person compared with our actual level for 2010/11 of 2.36 days. This is 21.2% better than our target level of 3 days per person at this point in the year.
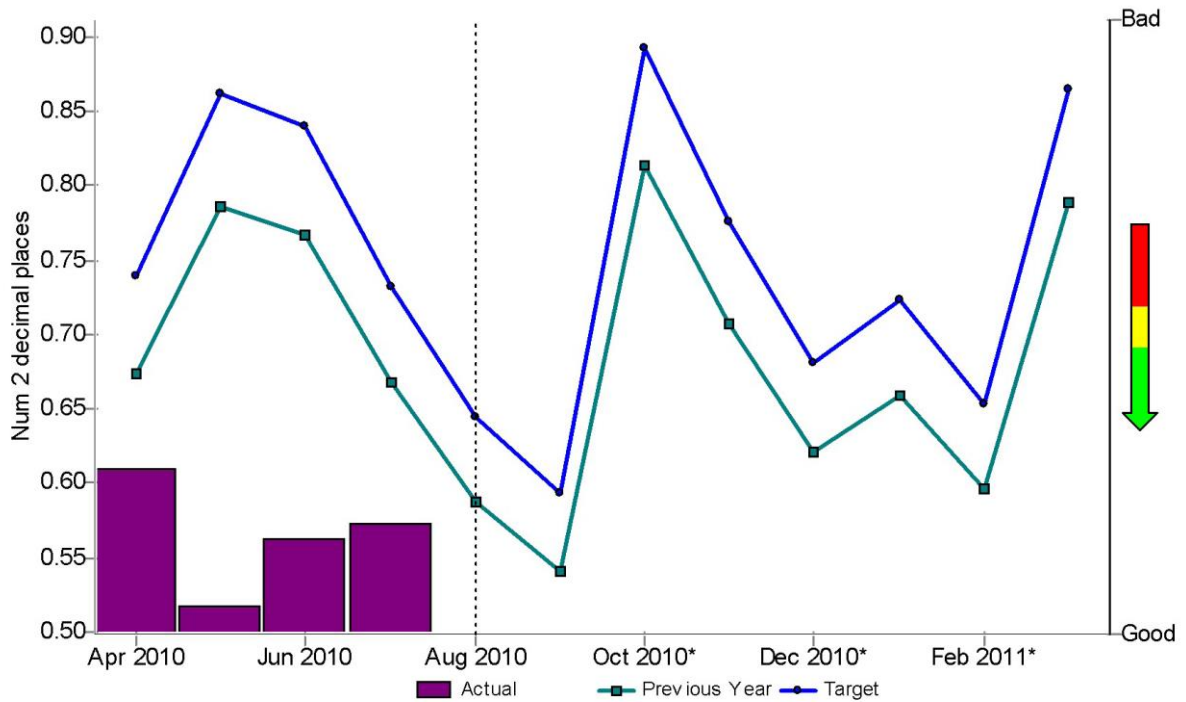

Sickness Rates (All Staff) By Month
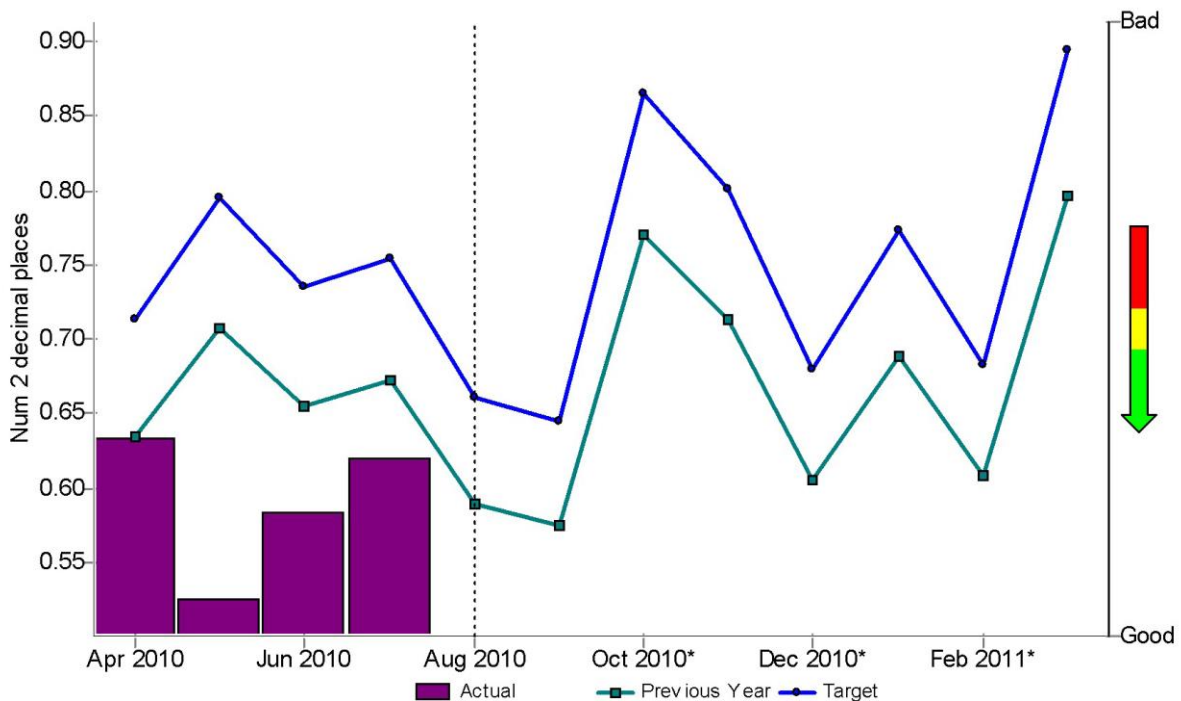
All Staff – Sickness Rates per Person – by Month

|	Actual 10/11	Previous Year 09/10	% variance on previous year	% variance on target
Apr-10	0.63	0.64	-0.3%	-11.2%
May-10	0.53	0.71	-25.8%	-33.9%
Jun-10	0.58	0.66	-10.9%	-20.7%
Jul-10	0.62	0.67	-7.7%	-17.8%
YTD	**2.36**	**2.67**	**-11.5%**	**-21.2%**

2.2   As usual, we can then break down the figures by staff category and the rates for uniformed, control and non-uniformed are shown below. Both the uniformed and non-uniformed rates show a reduction in May followed by increases other June and July which are reflected in the overall absence levels. Uniformed sickness rates are below that of the target and also last year's rates but for non-uniformed absence rates are higher than last year. In Control, after a poor April they have remained under the previous year's performance.
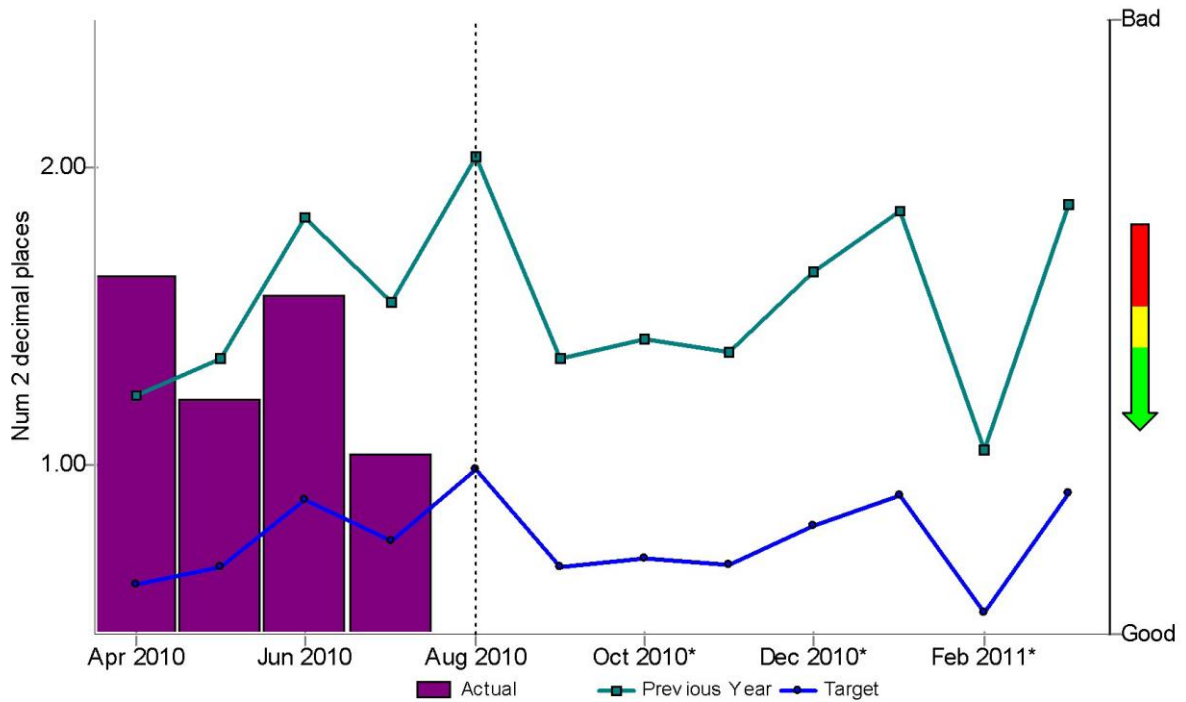
Uniformed Staff Sickness Rates by Month 2010/11

Non-uniformed Staff Sickness Rates by Month 2010/11
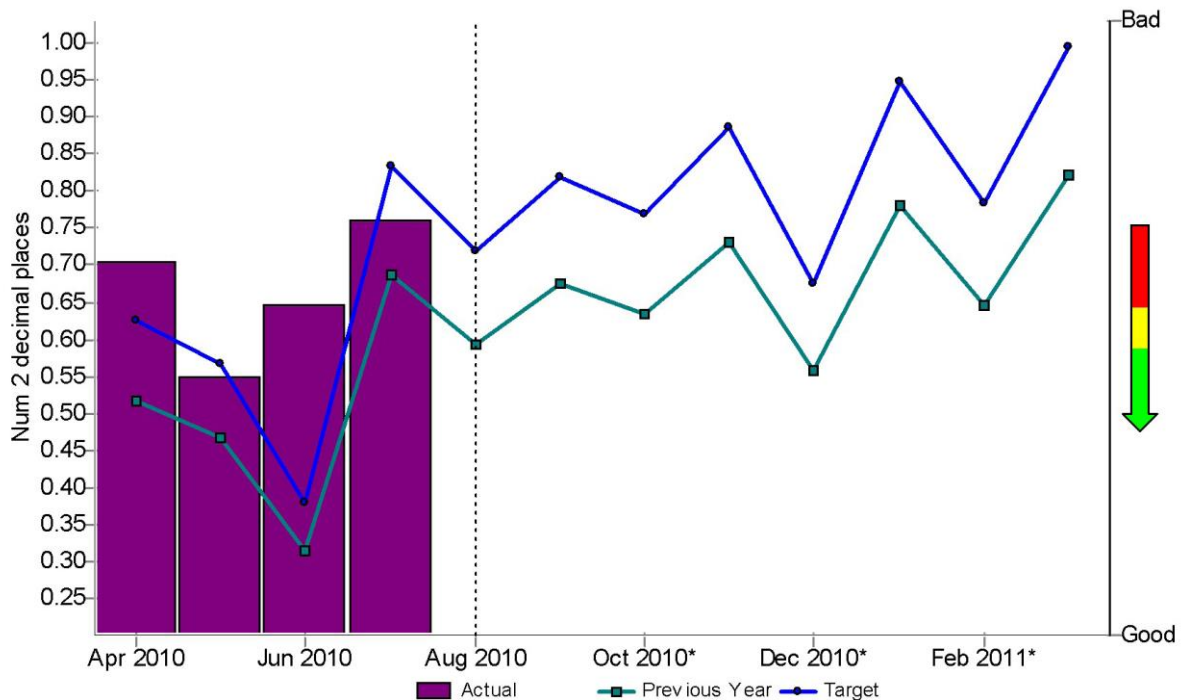
Control Staff Sickness Rates by Month 2010/11

3. **DETAILED BREAKDOWN OF LONG TERM SICKNESS**

3.1 The monitoring of long term sickness ie those over 28 days is reported on a monthly basis and includes those who are long term sick and those on restricted duties. The number of staff who have been long term sick in 2010 is shown below and a chart overleaf shows the overall trend lines since 2008. Both uniformed (Wholetime and Control) and non-uniformed show a downwards trend whilst the Retained Duty System has been on the increase. The HRMD Authority committee have also requested that a further breakdown is shown for absences that have been ongoing for a period longer than 12, 18 and 24 months. For August these are shown overleaf.

2010 Long-term Sickness

Number of staff	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
Uniformed	12	11	15	11	13	14	16	13
Retained	21	16	20	21	16	15	17	16
Non-uniformed	3	3	4	6	5	4	5	5
Total	36	30	39	38	34	33	38	34

Long-term Sickness 2008 to 2010 – Number of Staff
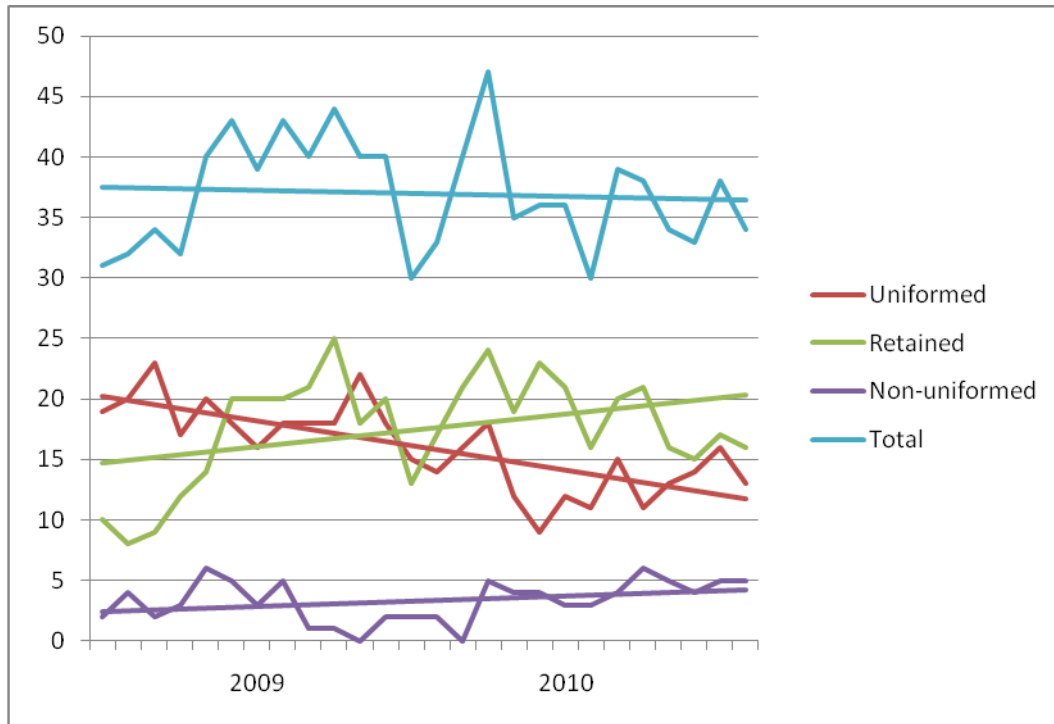
August 2010

Number of staff	>6 mths	>12 mths	>18 mths	>24 mths
Uniformed	4	0	0	2
Retained	2	1	1	3
Non-uniformed	2	0	0	1
Total	8	1	1	6

4. **PERFORMANCE MANAGEMENT OF ABSENCE LEVELS**

4.1   The Service has continued to closely monitor levels of absence and as part of the Service Improvement Group these are being considered at a departmental level to enable us to highlight the best performing areas but also to identify where additional management support may be required.

4.2   The Service has also undertaken an internal audit of absence management to provide assurance that the systems and processes for recording and managing sickness are robust. The Audit & Review Team identified the strengths of our existing procedure for absence management and areas that could be improved upon. The communication of absence between employees and managers was generally good with staff keeping in regular contact with their line manager and sickness forms being completed. The process for return to work interviews was found to be reasonably robust, although 38% of those line managers interviewed did not hold return to work interviews unless there is a recurring sickness issue that needs addressing. The audit identified a number of key areas where additional management actions could be focused or where controls could be more robust. This included using a flowchart within the policy, simplifying reporting forms, automating trigger point calculations and confirming to flexi-duty staff the method of reporting absence to their line manager.

4.3   The HR team are also developing an e-based learning package for staff to provide training in the absence management policy. This includes a basic training package for all staff and for line managers an additional advanced training session.

5.   **<u>CONCLUSION</u>**

5.1   To date, the Service has seen an improvement in the absence levels in 2010/11 and further actions are being taken to continue this direction.

        Jane Sherlock
        DIRECTOR OF PEOPLE AND ORGANISATIONAL DEVELOPMENT