



DEVON & SOMERSET FIRE & RESCUE AUTHORITY

REPORT REFERENCE NO.	HRMDC/12/1
MEETING	HUMAN RESOURCES MANAGEMENT & DEVELOPMENT COMMITTEE
DATE OF MEETING	23 JANUARY 2012
SUBJECT OF REPORT	ABSENCE MANAGEMENT & HEALTH OF THE ORGANISATION
LEAD OFFICER	Director of People and Organisational Development
RECOMMENDATIONS	<i>That the report be noted.</i>
EXECUTIVE SUMMARY	The progress with Absence Management has been included as a standing item within the Human Resources Management and Development (HRMD) Committee agenda. This report includes an update of the Service performance for absence levels. In addition, the Committee have sought to consider wider aspects which are linked to the overall health of the organisation.
RESOURCE IMPLICATIONS	
EQUALITY RISK & BENEFITS ASSESSMENT	The Absence Management policy has had an equality impact assessment.
APPENDICES	None
LIST OF BACKGROUND PAPERS	None

1. **INTRODUCTION**

1.1 Absence levels have previously been identified as a key measure as they affect the efficiency and the effectiveness of the Service. The Human Resources Management and Development (HRMD) Committee have therefore determined that this measure will be monitored and reviewed as a standing item.

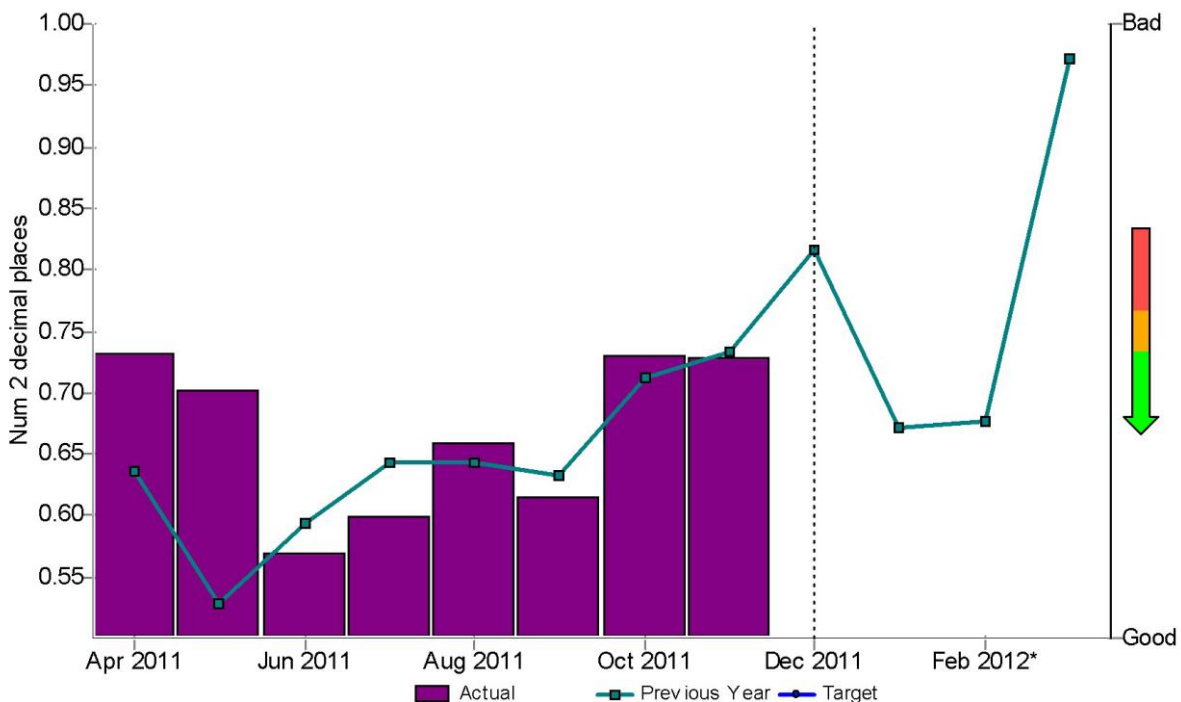
1.2 The 'Health of the Organisation' relates to the wider health of the organisation as a means of monitoring people aspects which could be inextricably linked. The key aspects of consideration are the safety event rates, the levels of discipline and grievances cases, any trends in bullying and harassment, the turnover of staff, the levels of stress and referrals to counselling and the collective relationships with unions. The health of the organisation encompasses the 'psychological' safety of the organisation. A psychologically safe workplace can be defined as one that does not permit the harm to employees' mental health in a careless, negligent, reckless or intentional way. There are critical reasons as to why employers should address the psychological safety of their workplace and work to minimise the risk factors. These are:

- Ensuring that we meet our legal and moral responsibility for our staff.
- The financial impact of enhancing psychological health in the workplace.
- The impact of workplace factors on employee mental health.

2. **2011/12 ABSENCE PERFORMANCE**

2.1 The current actual level for 2011/12 is 5.33 days/shifts lost per person compared with the previous year when it was as at an average of 5.12 days per person. In previous committee meetings we had reported that we were 12.7% worse than the previous year and this then dropped to 5.8%. We are now 4.2% worse than the previous year. This improvement has been due to lower levels of absences within Control and non-station based Uniformed staff.

All Staff – Sickness Rates per Person – by Month

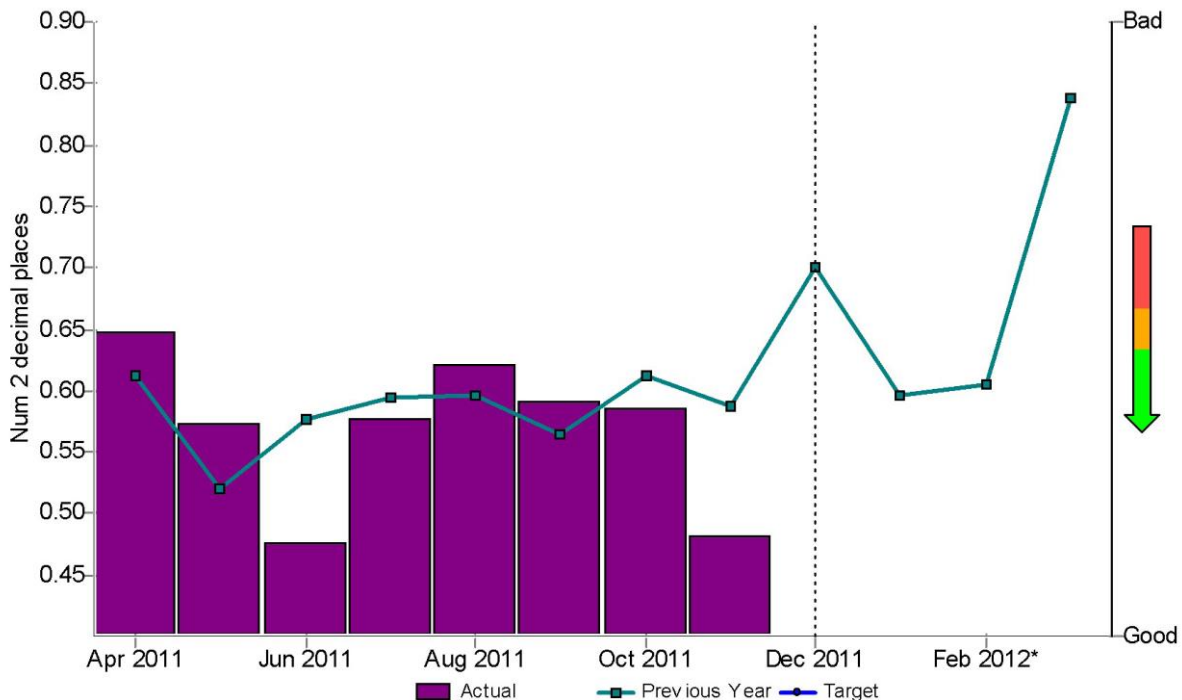


	Actual 11/12	Previous Year 10/11	% variance on previous year
Apr-11	0.73	0.64	(15.1%)
May-11	0.70	0.53	(32.8%)
Jun-11	0.57	0.59	4.2%
Jul-11	0.60	0.64	6.8%
Aug-11	0.66	0.64	(2.4%)
Sep-11	0.61	0.63	2.9%
Oct-11	0.73	0.71	(2.6%)
Nov-11	0.73	0.73	0.9%
Dec-11		0.82	
Jan-12		0.67	
Feb-12		0.68	
Mar-12		0.97	
YTD	5.33	5.12	(4.2%)

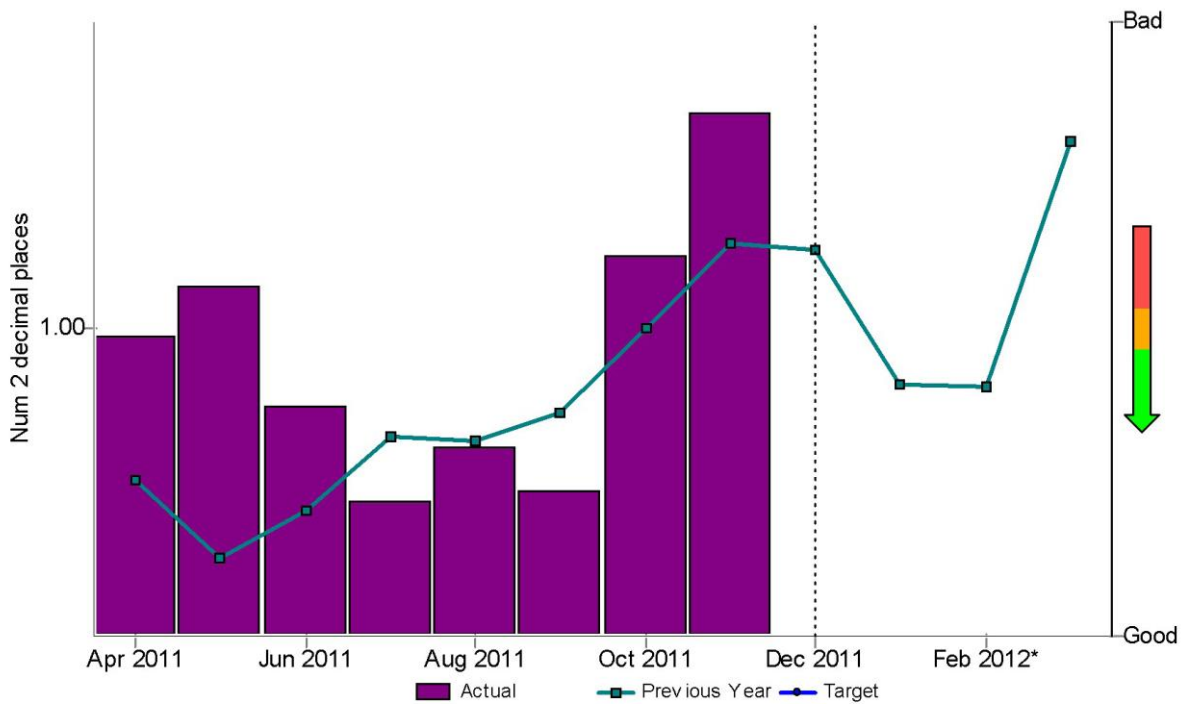
2.3

The Service can break down the figures by staff category and the rates for Uniformed, Control and Support staff are shown below. It is encouraging to see that in Control, absence levels have consistently been lower than the previous year (by 25.2%). For Uniformed staff the non-station based staff are down by 34.4% on the previous year whilst station based staff are up 13.6%. Previously the Support staff were showing an improvement but October and November have left them 17.4% worse than the previous year.

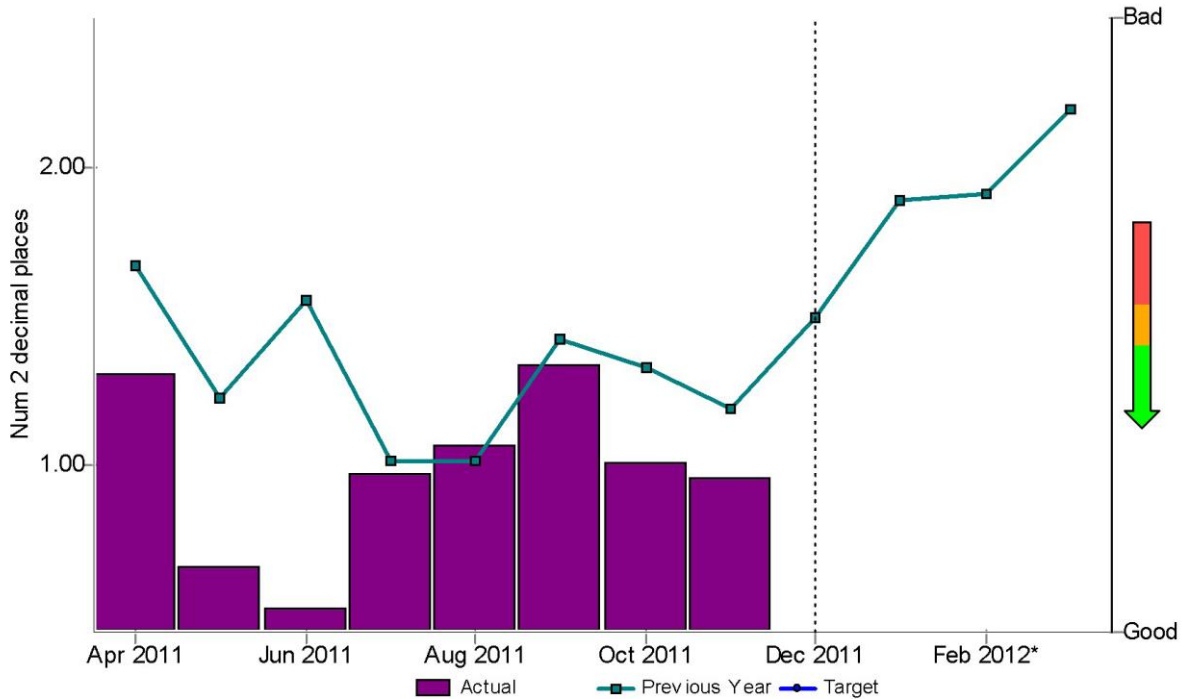
Uniformed Staff Sickness Rates by Month 2011/12



Support Staff Sickness Rates by Month 2011/12



Control Staff Sickness Rates by Month 2011/12



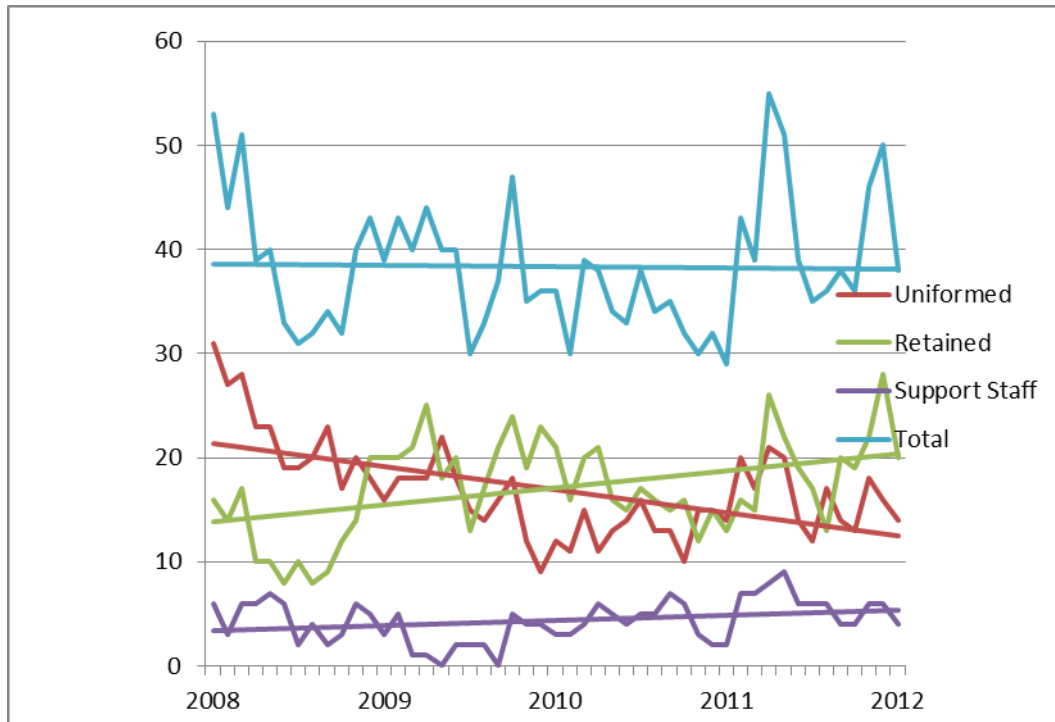
3. DETAILED BREAKDOWN OF LONG TERM SICKNESS

- 3.1 The monitoring of long term sickness i.e. those over 28 days, is reported on a monthly basis and includes those who are long term sick and those on restricted duties. There has been another 'spike' in the Long-term sickness levels for November and December but once again dropping back in January 2012.

2011/12

Number of staff	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Uniformed	21	20	14	12	17	14	13	18	16	14		
Retained	26	22	19	17	13	20	19	22	28	20		
Support Staff	8	9	6	6	6	4	4	6	6	4		
Total	55	51	33	38	34	38	36	46	50	38		

Long-term Sickness 2008 to January 2012 – Number of Staff



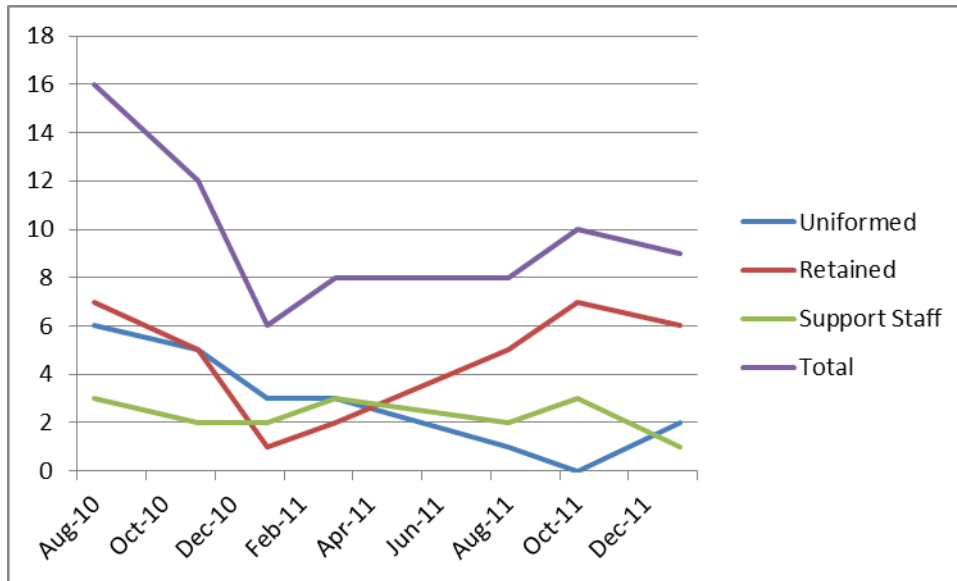
Long-term Sickness 2008 to Jan 2012 – Number of Staff

3.2 The Long term sickness can then be further broken down for staff with absences that have been ongoing for a period longer than 6, 12, 18 and 24 months as requested previously by the HRMD Committee. These have been reported at the last 7 HRMD committee meetings. The performance has been good in this area with the number of cases having reduced from 16 in August 2010 to 9 in January 2012. Currently there are no Wholetime uniformed staff with more than 6 months absence. The overall numbers are also represented graphically on the next page.

Jan-12

Number of staff	>6 mths	>12 mths	>18 mths	>24 mths	Total
Uniformed	2	0	0	0	2
Retained	3	1	0	2	6
Support Staff	1	0	0	0	1
Total	6	1	0	2	9

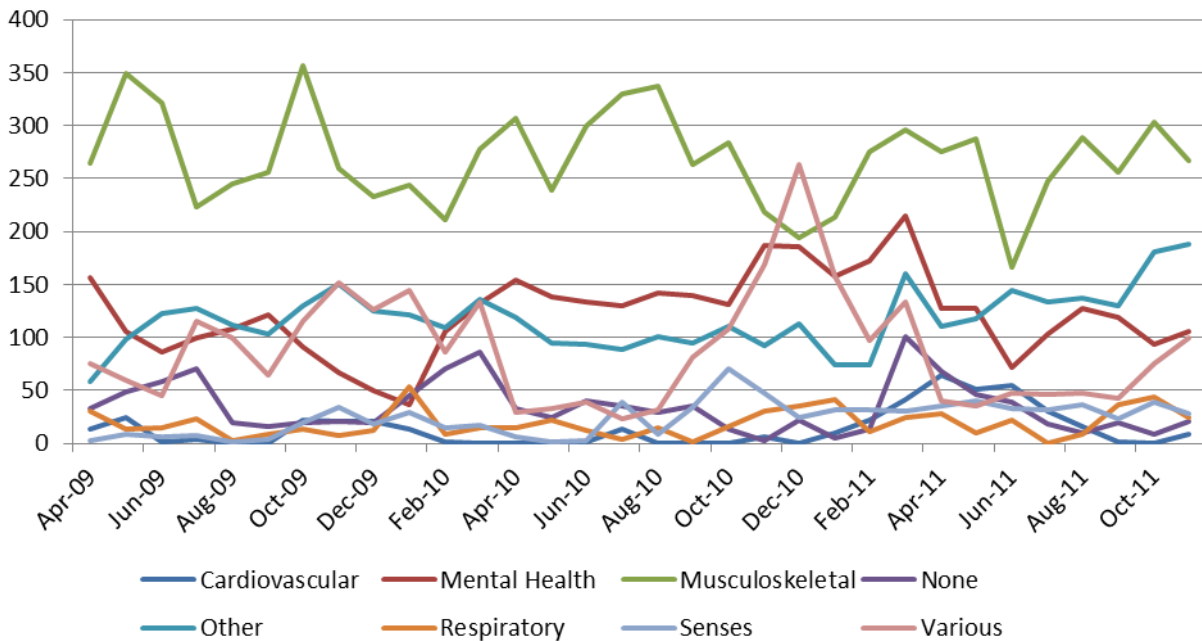
Long-term Sickness – Number of Staff with greater than 6 months sickness



4. REASONS FOR SICKNESS ABSENCE

4.1 The graph below show the reason category for sickness. The 'Other' category includes sickness/diarrhoea whilst 'Various' includes flu. The 'None' category is none of these.

Days/shifts lost to sickness for all staff



5. **MENTAL HEALTH**

5.1 It is recognised that there is a close link between wellbeing and personal performance. People who feel well will generally perform better than people who do not feel well. Within DSFRS, we categorise the causes of sickness and mental health has regularly been second only to musculoskeletal as the highest cause of absence.

5.3 The Service has counselling contracts in place and the number of sessions is shown below. An individual will have multiple sessions to assist them with their mental health issue.

Devon Counselling

	No of Sessions
2007/8	134
2008/9	180
2009/10	237
2010/11	261
2011/12 (Apr – Jul)	63

Somerset Counselling

	No of Sessions
2007/8	176
2008/9	143
2009/10	153
2010/11	304
2011/12 (Apr – Dec)	384

5.4 The Service also has a Welfare Officer who will have welfare cases and is typically helping and supporting around 28 employees at any one time. In addition the Service has a well@work team consisting of volunteers from throughout the Service who have an interest in the wellbeing of our staff. The objectives of the team are to raise awareness of stress, remove the stigma attached to stress, and to promote solutions for the management of stress, including creating a healthy work-life balance for employees of DSFRS.

5.5 The well@work team have worked with the International Stress Management Association to obtain advice and guidance in dealing with stress. The team undertook presentations all around the Service on the National Stress Awareness day in November to promote understanding of Wellbeing and Resilience at Work.

6. **STAFF TURNOVER**

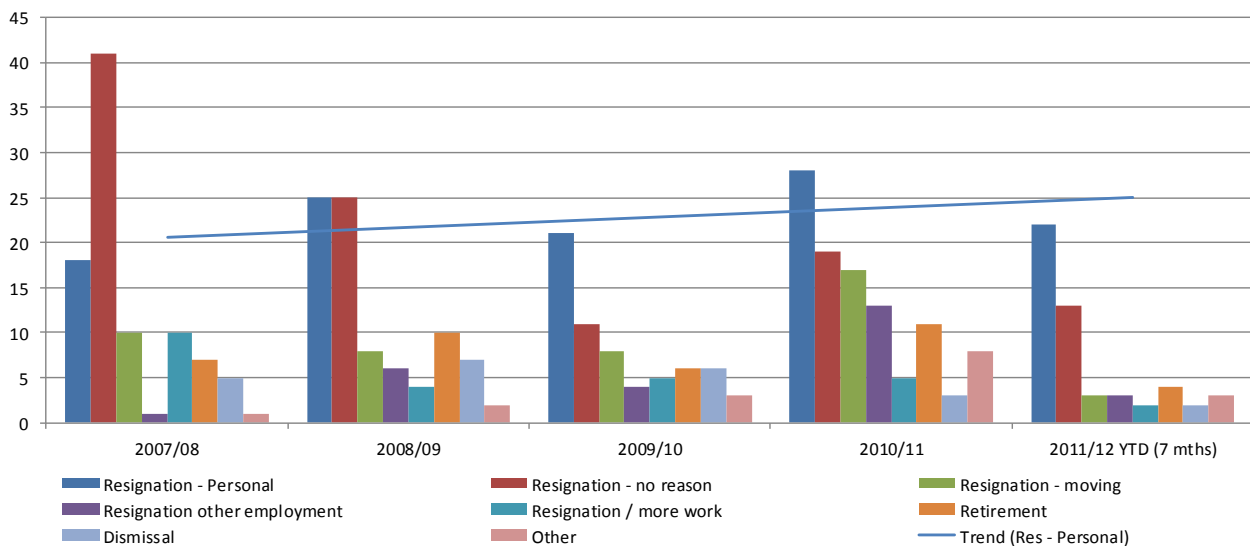
6.1 The level of turnover is monitored in relation to staff leaving the organisation. Whilst a reasonable level of turnover demonstrates a degree of good organisational health if it becomes too high then it will cause organisational issues e.g. if those leaving have specific skills that are lost from the organisation.

6.2 The characteristic pattern of employee turnover is high for new starters, then decreasing. This pattern will vary in any single organisation and is known as the 'survival curve'.

6.3 Within DSFRS it has been recognised that there levels of staff turnover have been reducing for Wholetime uniformed and Support staff but that in the RDS, the levels of turnover had seen an increase from 2009/10 to 2010/11. The Service has examined this in more detail to consider the reasons given. These are shown in the graph below. Although we have more data through the use of leaver exit interviews and leaver questionnaires, the majority of the leavers have left for personal reasons or not actually given a reason. Feedback from the Service Delivery Group suggests that there have been a number of leavers due to the introduction of the Gartan availability system which has provided data for performance management purposes. Work-life balance also remains an issue and the Service is to set up a working party to review the contractual options for the RDS.

6.5 Another concern is that there has been a disproportionate increase in the number of female firefighter leavers. On analysing this data the same problem arises with the number of staff citing personal reasons or giving no reason at all. The Service will be re-visiting the categories that we use for the leaver data to see if this can be improved.

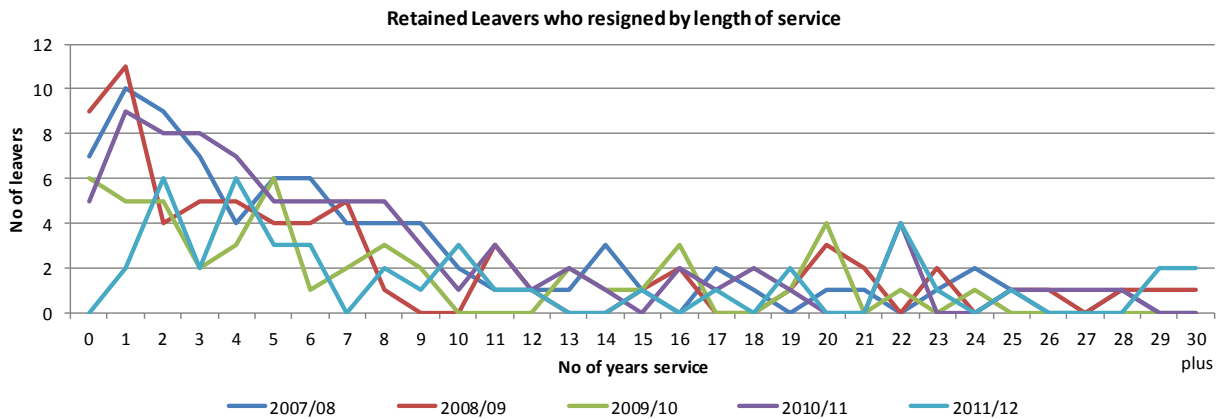
Retained Leavers by Reason



6.6 In relation to the survival curve for RDS staff, the concern is the cost incurred by the Service to recruit and train a Retained Firefighter. The costs to get a new recruit through to being fully competent to 'ride an appliance' are just under £7,000:

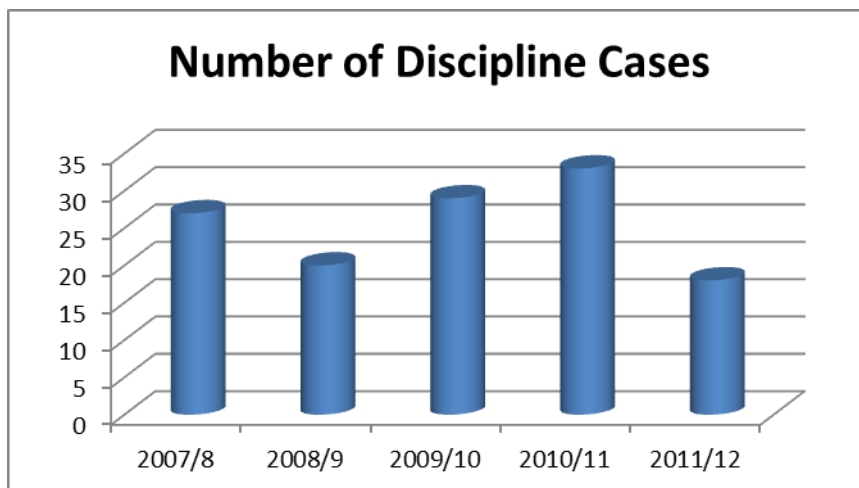
- Training costs of £2,680.00
- Salary for recruits training attendance of £1,606.65
- Uniform/kit costs of £959.00
- IMASS medical costs of £112.00
- Salary for uniformed assessors for tests of £75.23 (based on 11 candidates average)
- Other costs relating to staff salaries, back office and admin work etc of £1,559.60
- **Total = £6,992.6**

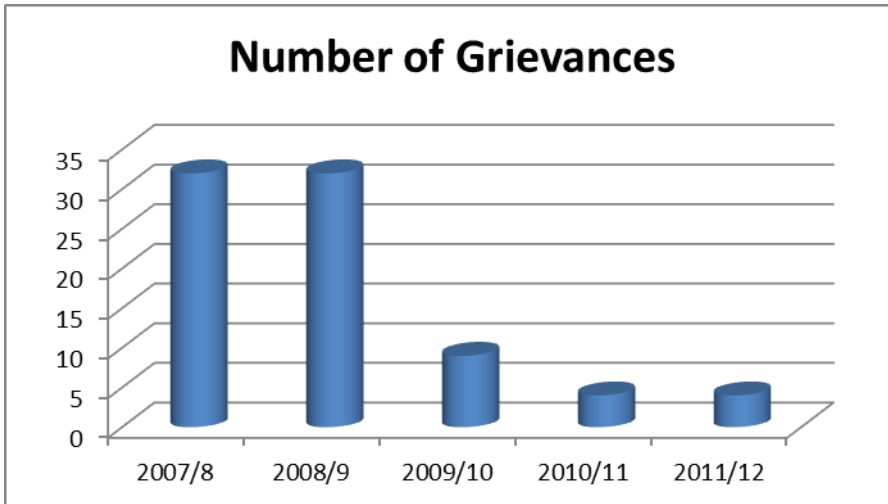
6.7 The 'survival curves' by each year are shown over the page. The figures are favourable for this year to date. During this time we have modified the recruitment process to include open evenings at stations to promote positive action and to also give potential recruits a better awareness of the requirements to be a Retained Firefighter. It is too early to say but perhaps this is the early evidence of this method of recruitment showing success.



7. DISCIPLINE & GRIEVANCE CASES

7.1 The levels of Grievance and Discipline cases are shown below. In 2009/10 there was a marked reduction in the number of grievances within the Service which is a good improvement. There is no real trend in the number of discipline cases but we typically have around 30 per year.





7.2 Of these cases the number relating to bullying and harassment are as follows:

	Grievances	Discipline
2007/8	5	5
2008/9	3	0
2009/10	1	3
2010/11	1	2
2011/12	1	2

8. **COLLECTIVE RELATIONSHIPS**

8.1 There have been no matters so far this financial year which have required referral to the national employers but there is a current issue which is likely to do so. The industrial action by UNISON on the 30 November 2011 was handled professionally by all concerned with 11 members of staff taking strike action.

9. **CONCLUSION**

9.1 For the year to date, the Service absence levels are higher compared with the same period in the previous year. The Health of the Organisation continues to be an important aspect of the wider issues that should be considered by the Service and Authority on our journey to excellence.

JANE SHERLOCK
Director of People and Organisational Development