

DEVON & SOMERSET FIRE & RESCUE AUTHORITY



REPORT REFERENCE NO.	HRMDC/12/8
MEETING	HUMAN RESOURCES MANAGEMENT & DEVELOPMENT COMMITTEE
DATE OF MEETING	25 JUNE 2012
SUBJECT OF REPORT	ABSENCE MANAGEMENT & HEALTH OF THE ORGANISATION
LEAD OFFICER	Director of People and Organisational Development
RECOMMENDATIONS	<p>(a) <i>That the sickness absence management data contained within this report be noted, and:</i></p> <p>(b) <i>that future reporting on Absence Management be consolidated within the Service Performance Management reports that will include Absence Management as an external facing measure,</i></p> <p>(c) <i>that Health of the Organisation trends be considered annually by the Committee.</i></p>
EXECUTIVE SUMMARY	<p>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.</p> <p>This report also recommends a consolidation of the provision of data and less frequent reviews of the longer term Health of the Organisation statistics. This will enable greater efficiencies within the Service and enable the HRMD to have a longer term programme focusing on more strategic matters that are impacting the Service.</p>
RESOURCE IMPLICATIONS	None
EQUALITY RISK & BENEFITS ASSESSMENT	The Absence Management policy has had an equality impact assessment.
APPENDICES	None
LIST OF BACKGROUND PAPERS	None

1. **INTRODUCTION**

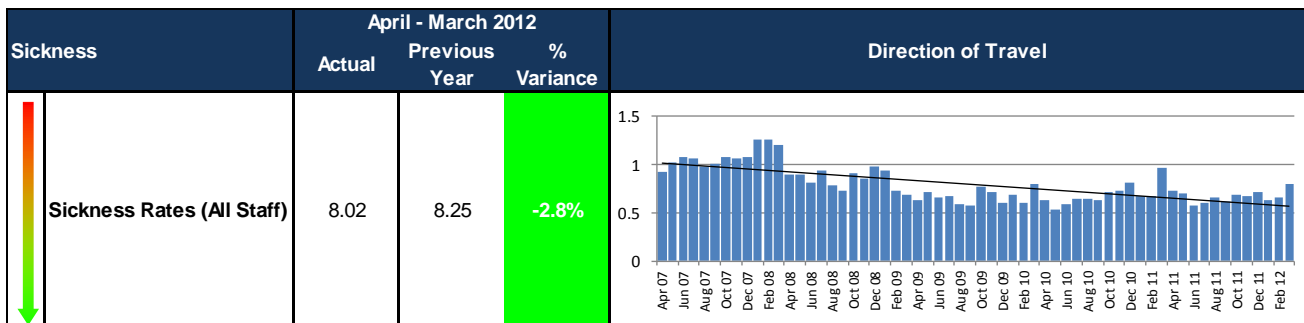
2.1 Absence levels have previously been identified as a key measure as they affect the efficiency and the effectiveness of the Service. During 2011/12, sickness absence rates were removed from our external facing measures but The Human Resources Management and Development (HRMD) Committee continued to monitored and review this measure as a standing item. In 2012/13 sickness absence will be returned as one of our external facing measures which will ensure that it has more rigorous monitoring.

2.2 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 the 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.

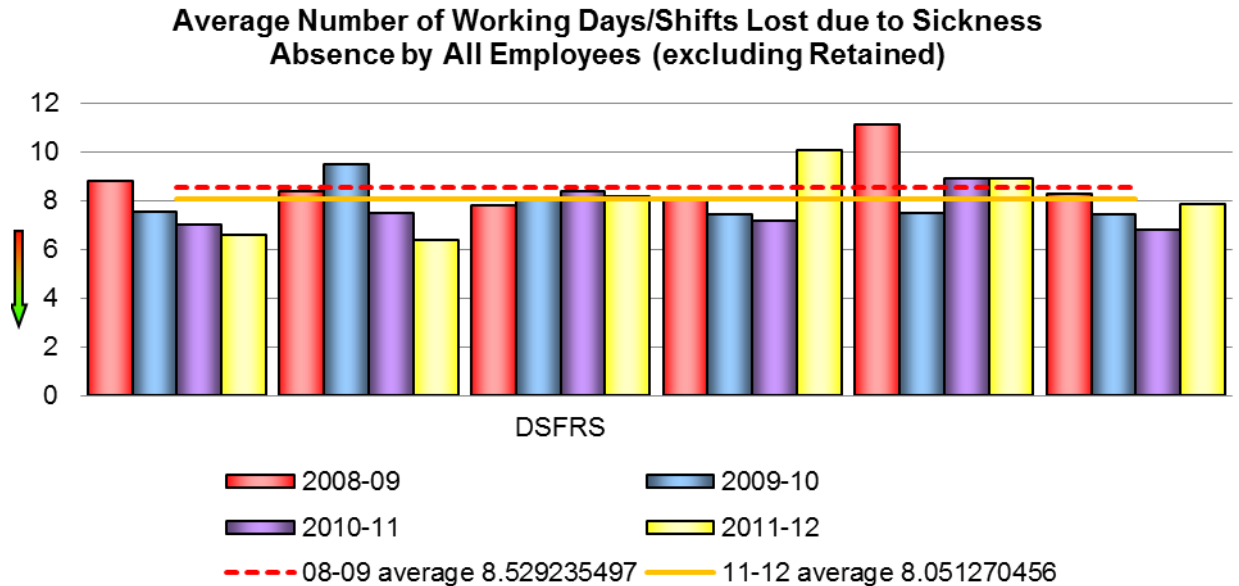
3 **2011/12 APRIL TO MARCH ABSENCE PERFORMANCE**

2.1 The absence performance for the full financial year in 2011/12 was on average 8.02 days/shifts lost per person compared with the previous year when it was as at an average of 8.25 days per person. When reviewing the direction of travel it is noticeable that although the trend is downwards, the March sickness levels have been higher than other months in each of the last 3 years. This is in part due to the way in which our absence records are closed out. During the financial year they are updated each month as staff return to work but at year end, records can still be showing staff as absent since the return to work forms may not have been completed and returned at that point in time. The overall records are not then refreshed on a retrospective basis. The process of recording absence will be improved when middleware is used to support this process. Sickness Absence is one of the 'break through' processes for middleware and Cambridgeshire FRS have been the lead on this with input from DSFRS.



2.2

The Service also undertakes benchmarking with other Fire & Rescue Services in the South West and the comparative data for 2011/12 are shown below. DSFRS are currently fourth in this table out of the 6 Fire & Rescue Services. This comparative data goes back to 2008/9 and it can be seen that the average regional levels have reduced during this period from 8.5 to 8.05 days/shifts lost per person.



3. LONG TERM SICKNESS

3.1

The monitoring of long term sickness i.e. those over 28 days, is reported on a monthly basis. These figures show that the number of Support Staff on long-term sickness has reduced during this period but the number of uniformed staff has shown an increase since April 2012. These are mainly attributable to physical injuries or operations and none of these relate to injuries-on-duty. The number of long term sick since 2008 are also shown graphically on the next page.

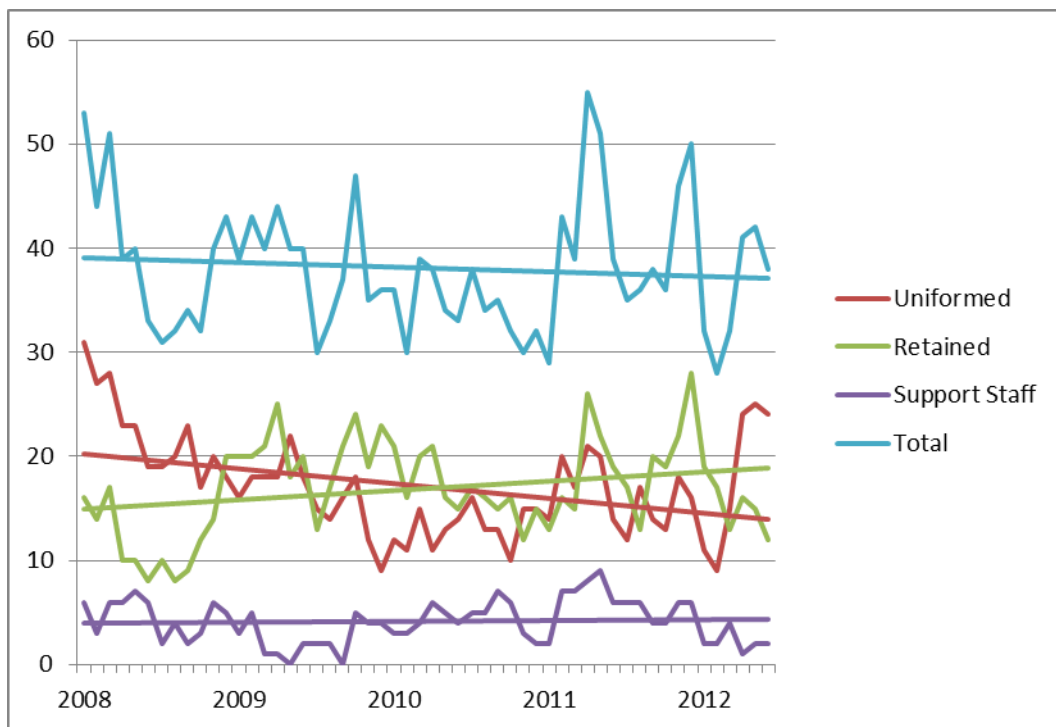
2011/12

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	9	15
Retained	26	22	19	17	13	20	19	22	28	20	17	13
Non-uniformed	8	9	6	6	6	4	4	6	6	4	2	4
Total	55	51	33	38	34	38	36	46	50	38	28	32

2012/13

Number of staff	Apr	May	Jun
Uniformed	24	25	24
Retained	16	15	12
Non-uniformed	1	2	2
Total	41	42	38

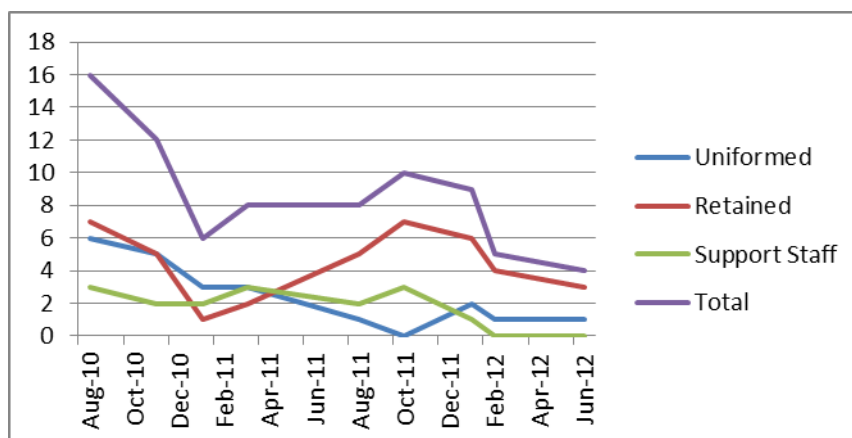
Long-term Sickness January 2008 to June 2012 – Number of Staff



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. This has been monitored at each HRMD committee since August 2010 and the total number of staff with long term sick beyond 6 months is shown in the graph below. This has reduced from 16 to the current level of 4.

Jun-12

Number of staff	>6 mths	>12 mths	>18 mths	>24 mths	Total
Uniformed	1	0	0	0	1
Retained	1	1	1	0	3
Support Staff	0	0	0	0	0
Total	2	1	1	0	4



4. **MENTAL HEALTH**

- 4.1 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. 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	199

Somerset Counselling

	No of Sessions
2007/8	176
2008/9	143
2009/10	153
2010/11	304
2011/12	522

5. **TURNOVER OF STAFF**

- 5.1 Turnover rates provide a measure of the health of an organisation and whilst it is healthy to have some turnover, if the levels are excessive then it could suggest that there are underlying issues. Within Devon and Somerset Fire and Rescue Service (DSFRS), there have been redundancies within both Control and Support Staff during the last year and these are reflected in these figures. The Retained has not changed from 7.7% and turnover in the Wholetime remains low as has traditionally been the case.

	2009/10			2010/11			2011/12			2012/13
	Employed on 1/4/09	Leavers during year	%	Employed on 1/4/10	Leavers during year	%	Employed on 1/4/11	Leavers during year	%	Employed on 1/4/12
Support	278	26	9.4	293	21	7.2	299	33	11.0	296
Control	57	6	10.5	59	5	8.5	58	14	24.1	45
Retained	1226	62	5.1	1280	98	7.7	1249	96	7.7	1211
Wholetime	711	23	3.2	733	14	1.9	734	26	3.5	712
Total	2272	117	5.1	2365	138	5.8	2340	169	7.2	2264

6. DISCIPLINE & GRIEVANCE CASES

- 6.1 The levels of Grievance and Discipline cases are shown below. There are typically about 30 discipline cases per year. The number of grievances has increased but remains low.

	Grievances	Discipline
2007/8	32	27
2008/9	30	20
2009/10	9	29
2010/11	4	33
2011/12	9	32

- 6.2 Of these, the number of cases found to be 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

7. COLLECTIVE RELATIONSHIPS

- 7.1 Collective relationships remain generally good. There has been one matter that has required referral to the national employers and this relates to the contractual requirements for the uniformed Day Duty staff.

9. FUTURE REPORTS ON ABSENCE MANAGEMENT

- 9.1 As we commence a new financial year, it would be beneficial to review how the Service reports on these measures to the Committee and the frequency. Data is being produced for a range of requirements and inevitably there is duplication of work. It would be beneficial, where possible, to use the standard performance reports for the measurement of sickness absence and consider the Health of the Organisation statistics on an annual basis since any trends are longer term. This would allow more time to consider more strategic matters that are impacting the Service. It would then be possible to set out a longer term programme for the HRMD committee.

10. CONCLUSION

- 10.1 For 2011/12, the Service absence levels were slightly lower than 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 but is one that can be incorporated on a planned basis over the year.

JANE SHERLOCK

Director of People and Organisational Development