



NOTTINGHAMSHIRE
Fire & Rescue Service
Creating Safer Communities

Nottinghamshire and City of Nottingham
Fire and Rescue Authority
Human Resources Committee

HUMAN RESOURCES UPDATE

Report of the Chief Fire Officer

Date: 26 January 2018

Purpose of Report:

To update Members on key Human Resources metrics for the period 1 October – 31 December 2017.

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1. BACKGROUND

- 1.1 As part of its remit, the Human Resources Committee of Nottinghamshire and City of Nottingham Fire and Rescue Authority receives regular updates on Human Resources (HR) issues within the Service. This includes issues such as sickness absence, formal discipline, grievance, health and safety, employment tribunal cases and staffing numbers. These issues are known as HR metrics.
- 1.2 Reports are on a quarterly basis and allow the Human Resources Committee to keep informed of ongoing issues and offer their guidance and scrutiny.

2. REPORT

HR METRICS - SICKNESS ABSENCE

- 2.1 The following represents absence figures for Quarter 3 of the new financial year: 1 October 2017 to 31 December 2017

Target absence figures for 2017/18 are:

Wholetime and Control: 6 days per person
Non-Uniformed: 7 days per person
Whole Workforce: 6.25 days per person

(The average is affected by the numbers of employees in each work group and the average work shift)

- 2.2 Absence across the workforce, excluding Retained employees, decreased by 12 days (0.82%) during the review period. A comparative breakdown of figures by employment group are set out in Appendix C. However, sickness absence figures have increased in comparison to the same period of 2016 (1414.5 days) by 33 days (+2.33%).

Absence	Quarter 3 1 October – 31 December 2017	Compared with previous quarter	Cumulative total days lost for 17/18	Cumulative average over last 12 months
Total workforce (97 employees have been absent on 104 occasions during Q3, excluding retained*)	1447.5 days lost 2.23 days per employee	1459.5 days lost 2.25 days per employee 0.82% decrease (12 days)	4007 days lost	8.15 days per employee (target 6.25 days)

(*Due to the on-call nature of the Retained Duty System, RDS absence is not reflected in the figures. These are shown separately at Appendix C)

- 2.3 Long term absence equated to 66% of the total absence during this period.
- 2.4 The main reasons for absence are set out below. The highest number of days lost were due to Other reasons, musculo skeletal and mental health issues. The highest number of instances was due to Other reasons and musculo skeletal.

NATIONAL TRENDS

- 2.5 The Service contributes to the CFOA sickness absence survey, which is undertaken quarterly and allows for comparison between contributing Fire and Rescue Services. Appendix B reflects the national absence trends for 2016-17. The two charts reflect Whole-time and Control (12i) and whole workforce figures* (12ii).
- 2.6 This shows that for the first half of 2017/18 (period ending 30 September 2017):
- Whole-time and Control (12i) the Service ranked 7th of the 27 Services at 3.06 days per employee, and was below the sector sickness average of 3.72 days per employee. The lowest average was 1.68 days and the highest 5.12 days.
 - Whole workforce (12ii) the tables show that the Service, ranked 14th of the 26 Services at 3.84 days per employee, and was above the sector sickness average of 3.73 days per employee in quarter two. The lowest average was 2.18 days and the highest 5.71 days.

DISCIPLINE, GRIEVANCES ETC

- 2.7 The metrics below summarise key HR information during Quarter 3:
- Disciplinary - 1
 - Grievances: - 0
 - Harassment and Bullying: 0
 - Formal Management Sickness Absence Policy: 0
 - Dismissals (including ill health retirements): 0
 - Redundancy: 0
 - Redeployment: 0
 - Employment Tribunal Cases: 0
 - IDRP Appeals: 0
 - Performance and Capability: 0

STAFFING NUMBERS

- 2.8 During the period 1 September 2017 to 31 December 2017, 6 employees commenced employment. Establishment levels at 31 December are highlighted below:

	Approved	Actual	Variance
Wholetime	471 (471 FTE)	448 (447.1 FTE)	-23 (-23.9 FTE)
Retained	192 units	253 persons (136 units) (includes 57 dual contracts)	- 56 units
Non-Uniformed	162 posts (150.82 FTE)	167 (155.46 FTE)	+ 5 units (+4.64 FTE)
Fire Control	24.5	27 (26 FTE)	+ 2.5

2.9 There have been 20 leavers and 6 starters since the last report, which has resulted in an actual workforce figure of 896 (this includes 50 WDS dual contractors).

- Leavers are broken down as follows: 6 Wholetime, 10 Retained and 4 Support staff

2.10 As at 31 December 2017 whole-time establishment stood at 448 operational personnel (447.1 FTE) against an establishment of 471 posts. It should be noted that the reduction of 16 operational roles, agreed by the Authority on 22 September 2017, will be reflected in establishment figures from 1 January 2018.

3. FINANCIAL IMPLICATIONS

The Authority's pay budgets cover the cost of the workforce, and these include budgets for overtime to cover sickness absence where operational cover is affected. The actual numbers of employees in post compared to the establishment can cause budgetary variances and these are reported to the Finance and Resources Committee.

4. HUMAN RESOURCES AND LEARNING AND DEVELOPMENT IMPLICATIONS

The human resources and learning and development implications are set out in the report.

5. EQUALITIES IMPLICATIONS

As this review does not impact upon policy or service delivery, no equality impact has been undertaken. However, equality monitoring information is contained within the body of the report.

6. CRIME AND DISORDER IMPLICATIONS

There are no crime and disorder implications arising from this report.

7. LEGAL IMPLICATIONS

There are no legal implications arising from this report.

8. RISK MANAGEMENT IMPLICATIONS

A regular reporting system on the management of HR ensures that the Service and the Authority are aware of any developing workforce issues.

9. COLLABORATION IMPLICATIONS

There are no collaboration implications arising from this report.

10. RECOMMENDATIONS

That Members endorse the report.

11. BACKGROUND PAPERS FOR INSPECTION (OTHER THAN PUBLISHED DOCUMENTS)

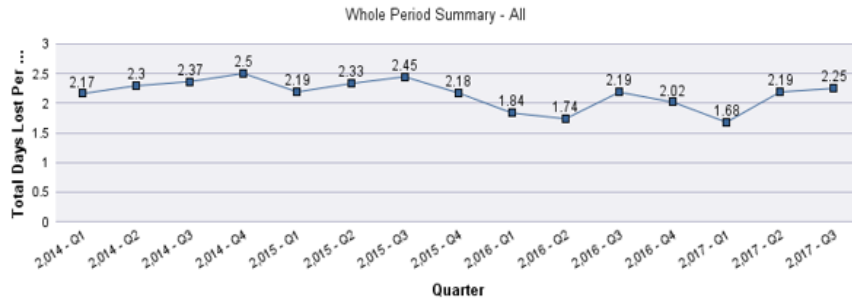
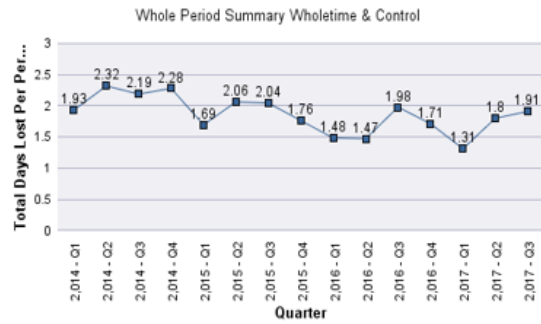
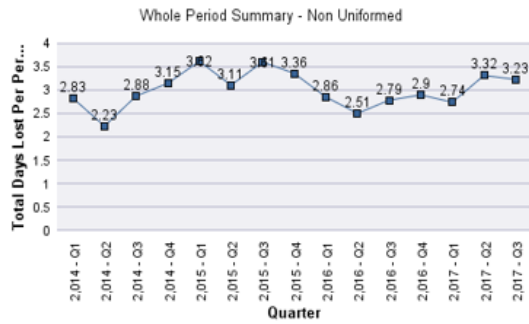
None.

John Buckley
CHIEF FIRE OFFICER

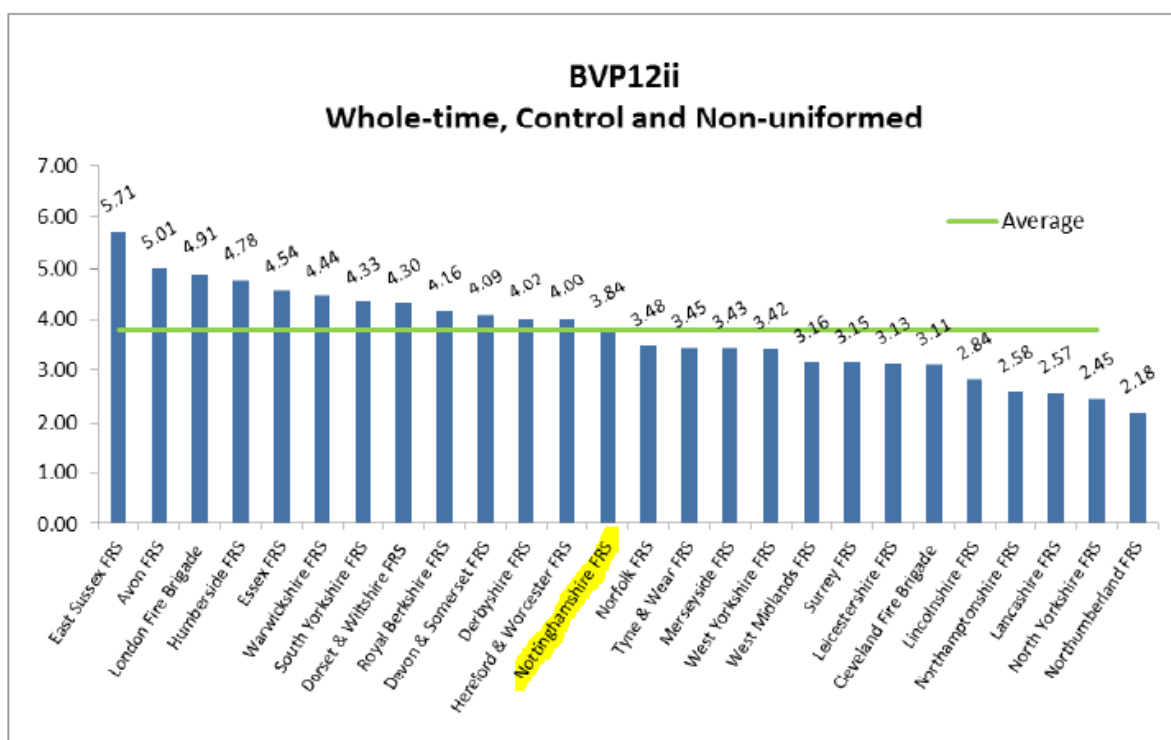
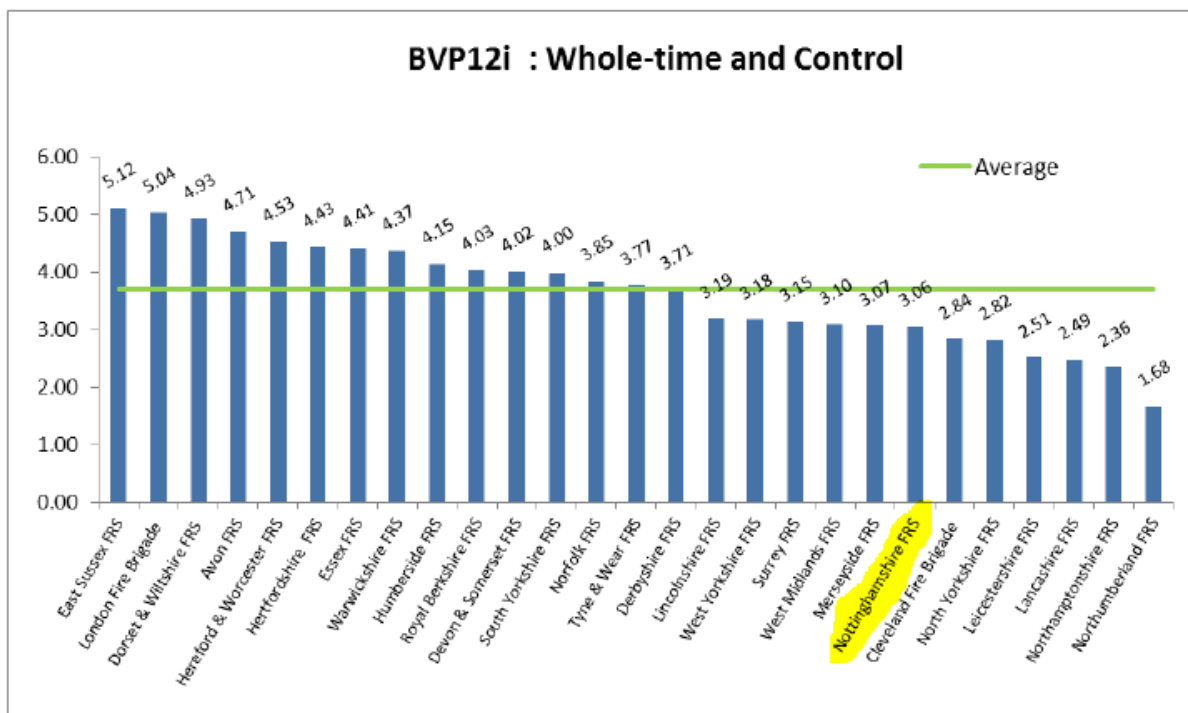
APPENDIX A

Appendix - Reporting Period: 01/04/2014 to 31/12/2017

Quarter Breakdown by Month	October		November		December		Current Q vs Previous Q	2,017 - Q2		2,017 - Q3	
	Days Lost Per Person	Total Working Days Lost	Days Lost Per Person	Total Working Days Lost	Days Lost Per Person	Total Working Days Lost		Days Lost Per Person	Total Working Days Lost	Days Lost Per Person	Total Working Days Lost
Non Uniformed	1.15	191.0	1.20	199.0	0.88	146.5		3.3163	550.5	3.2319	536.5
Wholetime & Contr	0.63	298.0	0.78	373.0	0.50	238.0		1.8004	857	1.9097	909
Sum:	0.76168	489.0	0.891	572.0	0.5989	384.5		2.1924	1407.5	2.2516	1445.5



NATIONAL ABSENCE DATA 17/18 (CFOA SURVEY)



WHOLETIME EMPLOYEES

In total 851 working days were lost due to sickness during quarter three. Of this, 528 days were lost to long-term absence (28+ days absence) and 323 days were lost due to short term absence. This represents a decrease of 32 days (3.62%) when compared to the previous quarter.

The average absence per employee was 1.9 days lost, which is above the target figure of 1.6 days lost per quarter per employee.

62% of sickness absence was due to long term absence i.e. longer than 28 days in duration. There were 34 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 17 of which were classified as long-term sickness. At the end of the period 23 employees had returned to work with 11 still absent.

Reasons for absence

The main reasons for absence in this work group were due to Hospital/Post-Operative conditions (8 instances, 213 days) and Musculo Skeletal conditions (24 instances, 191 days).

The main long-term absence reason related to Hospital/Post-Operative conditions (5 instances, 191 days).

Wholetime			Short Term Absences			Long Term Absences		
Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost
Hospital/Post Operative	8	213	Musculo Skeletal	19	88	Hospital/Post Operative	5	191
Musculo Skeletal	24	191	Respiratory - Cold/Cough/Influenza	15	49	Musculo Skeletal	5	103
Mental Health	9	141	Mental Health	6	48	Mental Health	3	93
Mental Health - Other	3	56	Gastro-Intestinal	11	24	Mental Health - Other	2	53
Respiratory - Cold/Cough/Influenza	15	49	Hospital/Post Operative	3	22	Anxiety/Depression	1	47
Anxiety/Depression	1	47		7	21	Cancer and Tumours	1	28
Cancer and Tumours	2	41	Unknown causes, not specified	7	19			
Gastro-Intestinal	11	24	Cancer and Tumours	1	13			
	7	21	Heart, Cardiac and Circulatory Problems	1	13			
Unknown causes, not specified	7	19	Ear, Nose, Throat	2	11			

RETAINED EMPLOYEES

Attendance for on-call fire-fighters does not reflect shifts lost as RDS personnel do not have standard working hours, instead it reflects calendar days lost e.g. availability to attend incidents or training periods and absence is predicated over a 7-day availability pattern (compared to 4 days for whole-time employees).

In Q3, 580.5 days were unavailable due to sickness, broken down into 515 days of long-term absence (28+ days) and 65.5 days of short-term absence. This equates to an average of 2.29 “days” of unavailability per employee.

Compared to the previous quarter when 719.5 days were lost to sickness absence, this reflects a decrease of 139 available days (-19.31%).

There were 9 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 7 of which were classified as long-term sickness. At the end of the period 2 employees had returned to work with 7 still absent.

Reasons for absence

The main reasons for absence in this work group were Hospital / post-operative conditions (4 instances, 271 days) and Musculo Skeletal conditions (9 instances, 195 days lost).

The main reason for long-term absence was Hospital / post-operative conditions (4 instances, 271 days).

Retained			Short Term Absences			Long Term Absences		
Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost
Hospital/Post Operative	4	271	Musculo Skeletal	7	43	Hospital/Post Operative	4	271
Musculo Skeletal	9	195	Ear, Nose, Throat	1	11	Musculo Skeletal	2	152
Mental Health	1	92	Gastro-Intestinal	3	5	Mental Health	1	92
Ear, Nose, Throat	1	11		1	5			
Gastro-Intestinal	3	5	Respiratory - Cold/Cough/Influenza	1	2			
	1	5						
Respiratory - Cold/Cough/Influenza	1	2						

CONTROL EMPLOYEES

In total 60 working days were lost due to sickness absence during this quarter. Of this 51 days were lost due to long term absence and 9 days were lost due to short-term absence, at an average of 2.14 days per employee.

This represents an increase of 34 days (130.8%) on the previous quarter. It should be noted that the size of the control work group (28 people) means that a small increase in absence can disproportionately affect the overall % absence figure.

There were 2 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration) during the review period, 1 employee has returned to work and 1 is still absent.

Due to the low level of absence, and to protect confidentiality, no analysis has been made of reasons for absence.

SUPPORT EMPLOYEES

In total 536.5 working days were lost due to sickness absence for support personnel during the quarter. This breaks down into 379 days due to long term sickness absence (28+ continuous days absent) and 157.5 working days due to short term absence. This represents a decrease of 14 days (2.54%) on the previous quarter.

The average absence per employee was 3.23 days lost, which is above the target figure of 1.6 days lost per quarter per employee.

There were 18 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 9 of which were classified as long-term sickness. At the end of the period 12 employees had returned to work with 6 still absent.

Reasons for absence

The 2 main reasons for long-term absence were Musculo Skeletal conditions (8 instances, 135 days lost) and Mental Health conditions (4 instances, 79 days lost).

The 2 main reasons for short-term absence were Respiratory – Cold/Cough/Influenza (14 instances, 43 days lost) and Hospital/Post-operative (5 instances, 38 days lost).

Non Uniformed			Short Term Absences			Long Term Absence		
Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost	Absence Reason - Grouped	Unique Absence Count	Days Lost
Musculo Skeletal	8	135	Respiratory - Cold/Cough/Influenza	14	43	Musculo Skeletal	3	121
Mental Health	4	79	Hospital/Post Operative	5	38	Mental Health	1	53
Hospital/Post Operative	6	78	Mental Health	3	26	Headache/Migraine/Neurological	1	51
Headache/Migraine/Neurological	2	52	Musculo Skeletal	5	14	Bereavement	1	43
Mental Health - Other	3	50	Gastro-Intestinal	5	12	Mental Health - Other	1	41
Bereavement	1	43	Chronic Fatigue Syndrome	1	9	Hospital/Post Operative	1	40
Respiratory - Cold/Cough/Influenza	14	42.5	Mental Health - Other	2	9	Chronic Fatigue Syndrome	1	20
Chronic Fatigue Syndrome	2	29	Unknown causes, not specified	3	6			
Gastro-Intestinal	5	12	Other known causes (not specified in list)	2	4			
Unknown causes, not specified	3	6	Genitourinary/Gynecological/Reproductive	2	3			
			Respiratory - Other	1	3			