

## report

meeting	<b>NOTTINGHAMSHIRE AND CITY OF NOTTINGHAM FIRE &amp; RESCUE AUTHORITY</b>	
	<b>HUMAN RESOURCES COMMITTEE</b>	
date	<b>6 October 2006</b>	agenda item number

## REPORT OF THE CHIEF FIRE OFFICER

### SICKNESS ABSENCE REVIEW

#### 1. PURPOSE OF REPORT

To update Members on sickness absence levels as requested at the last meeting of the Human Resources Committee on 7 July 2006.

#### 2. BACKGROUND

This report summarises the figures for all staff and is further broken down into organisational groups for wholetime personnel, control personnel and non-uniformed personnel. Personnel employed on the retained duty system are not included as they do not form part of the recording requirements for Best Value Performance Indicator 12. BVPI 12 is reported on a quarterly basis.

#### 3. REPORT

3.1 In the first half of 2006 (Jan – June) the following absence levels were recorded :

	<b>Short Term</b>	<b>Long Term</b>	<b>Total</b>	<b>% Time Lost (FTEs)</b>	<b>Average (days per person)</b>
Wholetime	1372.5	1579	2951.5	5.1%	5.2
Control	23	36	59	2.3%	2.03
Non Uniformed	323	593	916	4.8%	5.7

3.2 In total the Service lost 3926 working days due to sickness absence, at an average of 5.2 days per person. 44% of all absence was recorded as short-term in nature (less than 28 continuous days) and 56% was recorded as long-term in nature. Sickness absence overall accounted for 4.9% of working time.

3.3 The highest level of average absence per person was reported for non-uniformed personnel with an average of 5.7 work days lost per person. This compares to 5.2 days lost for wholetime personnel, and 2.03 for control personnel.

### Comparative Data

- 3.4 In order to establish absence trends, comparison with the same period of 2005 are set out below. The average working time lost per person is detailed in brackets :

	<b>Wholetime</b>	<b>Control</b>	<b>Non Uniformed</b>	<b>Total</b>
Jan-Jun 2005	2995 (5.42)	340 (13.08)	497 (3.64)	3832 (5.37)
Jan-Jun 2006	2951.5 (5.2)	59 (2.03)	916 (5.7)	3926 (5.2)
Difference	-44	-281	+419	+94
Average per person	-0.22	-11.05	+2.06	-0.17
% variance	-1.5%	-83%	+84%	-2.5%

- 3.4 It is pleasing to note that there has been a slight reduction (2.5%) in sickness absence levels compared to the comparative period of 2005. The greatest reduction has been within the control section, mainly due to the return to work of a number of staff who had previously been absent on a long term basis. The reduction in wholetime absence is small but nevertheless welcome – to place this in context, records show that average half yearly absence levels for the previous four years have been around 3282 shift days lost, which is 331 days more than in 2006.
- 3.5 Of significant concern however, is the increase in non-uniformed absence which has increased by 2.06 days per person (84%). This is largely as a result of increases in long term absence of 28+ days – 593 days lost in 2006 compared to 108 days lost in the same period of 2005.
- 3.6 An analysis of this figure has shown that in Jan-Jun 2006 there were 12 non-uniformed staff absent on long-term sickness. There does not appear to be any common reason for the illnesses, and all have been actively managed through the intervention of the Occupational Health and Personnel Sections. Of the 12 persons recorded as long-term absent, 8 have either returned to work or left the Service. It is therefore anticipated that recorded absence for non-uniformed staff will see a reduction in the second half of the year.

### Reasons for Absence

- 3.7 Based on figures provided by Firstcare (which is collated when employees notify absence or speak to a nurse advisor on first notification of absence), the following were the ten most common reasons for sickness absence during the review period :

<b>Conditions</b>	<b>Days Lost</b>	<b>% of all absence</b>
Other Respiratory (not due to service)	376	9.6
Other mental health (due to service)	261	6.6
Lower limb (not due to service)	248	6.3
Gastrointestinal (not due to service)	212	5.4
Other musculoskeletal (not due to service)	179	4.6
Other senses (not due to service)	147	3.7
Back (not due to service)	116	2.9

Conditions	Days Lost	% of all absence
Back (due to service)	110	2.8
Other mental health (not due to service)	108	2.8
Reproductive	102	2.6

(Conditions are categorised in accordance with national criteria).

It should be noted that 993 days were registered as “reasons undisclosed” – ie: the reason for 25% of reported absence is unknown.

- 3.8 Of the “top ten” reasons for absence, the Service has introduced or will be introducing initiatives through the Occupational Health team to reduce instances of absence related to mental health (which accounts for 9.4% of all absence) and musculoskeletal and back injuries (which account for 10% of all absence).

#### **4. FINANCIAL IMPLICATIONS**

- 4.1 It is very difficult to quantify the cost of individual absence to the organisation as it involves both direct salary cost (sickness payments), the cost of providing temporary replacements or the intangible cost of not being able to provide a full and effective service. As an estimate, an average wholetime (rider post) salary is approximately £28,000, the average control salary (ConOp) is approximately £25,000 and the average non-uniformed salary is approximately £20,000.
- 4.2 The half-year cost of sickness payments based on the above is estimated at £226K (wholetime), £4k (control) and £50K (non-uniformed). Additional on-costs may add up to £100K to this overall figure. This figure takes no account of costs associated with temporary cover arrangements.

#### **5. PERSONNEL IMPLICATIONS**

Personnel implications are contained within the body of this report. The current level of absence shows an overall reduction against the same period of 2005, however the Service is committed to reducing this figure to an average of 8 days per person, and ultimately to achieve a target of 6.5 days (wholetime) and 5.4 (control) lost due to sickness absence established in the National Framework. The means by which this will be achieved were set out in the report to the Human Resources Committee on 7 July 2006.

#### **6. EQUALITY IMPACT ASSESSMENT**

There are no direct equalities implications arising from this report, however it should be noted that the Service is required to comply with the provisions of the Disability Discrimination Act when managing disability related illness.

#### **7. RISK MANAGEMENT IMPLICATIONS**

The financial and Service implications of sickness absence is a continuing risk to the Authority in terms of delivering Service commitments within established budgets.

#### **8. RECOMMENDATIONS**

That Members note the contents of this report.

## 9. BACKGROUND PAPERS FOR INSPECTION

- Fire and Rescue Services National Framework 2006-08, Chapter 5, Section 5.3.

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