

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

HUMAN RESOURCES UPDATE

Report of the Chief Fire Officer

Date: 02 July 2021

Purpose of Report:

To update Members on key human resources metrics for the period 1 April 2021 to 31 May, with exception of absence data which is for the reporting period 1 January 2021 to 31 March 2021.

Recommendations:

That Members note the content of the report.

CONTACT OFFICER

Name: Craig Parkin

Deputy Chief Fire Officer

Tel: 0115 967 0880

Email: craig.parkin@notts-fire.gov.uk

Media Enquiries Corporate Comms

Contact: (0115) 967 0880 corporatecomms@notts-fire.gov.uk

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, employment tribunal cases and staffing numbers. These issues are collectively referred to 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

STAFFING NUMBERS

2.1 During the period 1 April 2021 to 31 May 2021, 18 employees commenced employment. Establishment levels at 31 May 2021 are highlighted below:

	Approved	Actual	Variance
Wholetime	431 (431 FTE)	441 (425.76 FTE)	+10 (+8.76 FTE)
On-Call	192 Units	251 persons (138.5 units) (includes 84 Dual Contracts)	-60.5 units
Support	157 (150.28) FTE)	177 (168.02 FTE)	+20 (+17.84)

- 2.2 There have been 7 leavers and 18 starters since the last report. The starters include 14 Wholetime firefighter apprentices who commenced their initial training in April 2021. This has resulted in an actual workforce figure of 869 (this includes 84 dual contractors). Leavers are broken down as follows: 1 Wholetime, 3 On-Call and 3 Support roles.
- 2.3 As at 31 May 2021 Wholetime strength stood at 441 operational personnel (439.76 FTE) employees against an establishment of 431 posts.
- 2.4 During this period, the Service has appointed 1 On-Call role and 3 Support roles.

SICKNESS ABSENCE

2.5 The following represents absence figures for Quarter 4, 1 January to 31 March, and also include total year (2020-21) figures.

2.6 Target absence figures for 2021/22 are:

Wholetime: 6 days per person
Support: 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)

2.7 Absence across the workforce, excluding On-Call employees, decreased by 267.36 days (20.15%) compared to the previous quarter. A comparative breakdown of figures by employment group are set out in Appendix C. This represents a decrease compared to the same quarter of the previous year (2019-20) of 278.78 days.

Absence	Quarter 4 Jan-March	Compared with previous quarter (Q3)	Cumulative total days lost for 20/21	Cumulative average over last 12 months
Total workforce	1059.22 days lost	1326.58 days lost	3911.24 days lost	6.64 days per employee
(105 employees have been absent on 113	1.8 days per employee	2.24 days per employee		(target 6.25 days)
occasions during Q4, excluding On-Call *)		20.15% decrease (-267.36 days)		

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

- 2.8 Across the workforce a total of 1059.22 working days were lost in the final quarter of 2020/21. The trends across quarters is shown in the table set out at Appendix A.
- 2.9 Long term absence equated to 56.83% of the total absence during this period. A full period commentary of Quarter 4 can be found at appendix C.

WHOLE YEAR ABSENCE REVIEW

- 2.10 Sickness absence during the financial year 2020-21, accounted for 6887.48 days, at an average of 8.24 days per employee. This means that the Service did not achieve its target of 6.25 days per employee. This accounts for 651 separate instances of sickness absence.
- 2.11 It should be noted that 59.28% of this absence was of a long-term nature i.e. requiring a GP certificate and was in excess of 28 days in total.
- 2.12 Absence due to COVID related reasons accounted for 1177.48 days of absence during the year.
- 2.13 The Service provides support to employees through its Occupational and Health and Fitness team, Employee Assistance Programme and membership of the BUPA Cash-Back scheme, both to promote well-being and therefore to prevent sickness or injury arising, and to support employees during any period of sickness or injury. This includes a focus on mental health and musculo-skeletal injury, which are the two primary reasons for sickness absence. Support includes access to counselling, physiotherapy, fitness advisor, an Occupational Health Physician and on-site gyms.
- 2.14 The Service will also be appointing a part-time mental health practitioner during 2021 as part of a pilot to establish whether in-house support would assist in reducing the instances of sickness absence due to mental ill health issues.

NATIONAL ABSENCE TRENDS

- 2.15 The Service contributes to the National Fire Chiefs Council (NFCC) sickness absence survey, which is undertaken quarterly and allows for comparison between contributing Fire and Rescue Services.
- 2.16 Reasons for sickness absence at NFRS broadly mirror the national trends with musculo-skeletal and mental health related absences featuring significantly in all workgroups.
- 2.17 Appendix B reflects the national absence trends for Quarter 1, Quarter 2 and Quarter 3. Quarter 4 figures have not yet been published. The three charts reflect Wholetime, Support staff (Green book) and On-Call, the average of duty days/shifts lost per person for those Fire and Rescue Services who contribute to the survey.
- 2.18 For Wholetime personnel, NFRS has an average of 4.16 days lost per employee which ranks the Service as 14th lowest out of the 41 Services included in the survey. This figure is below the sector sickness average of 5.4 days per employee. The lowest average was 2.76 and the highest 7.37.
- 2.19 For Support staff, the Service has an average of 4.11 days lost per employee which ranks us 17th lowest out of the 41 Services included in the survey. This

figure is below the sector sickness average of 4.67 days per employee. The lowest average was 0.93 days and the highest 9.28 days.

OTHER WORKFORCE METRICS

- 2.20 Over the period 1 April 2021– 31 May 2021:
 - Disciplinary: 0Grievances: 0
 - Harassment and Bullying: 1
 - Formal Management Sickness Absence Policy: 0
 - Dismissals including ill health retirements: 0
 - Redundancy: 0Redeployment: 0
 - Employment Tribunal cases: 1
 - IDRP appeals: 0
 - Performance and capability: 0
- 2.21 There are no significant issues in respect of the above HR metrics outlined above. The employment tribunal case is due to heard in September.

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 assessment has been undertaken.

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 human resources 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 note the contents of the report.

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

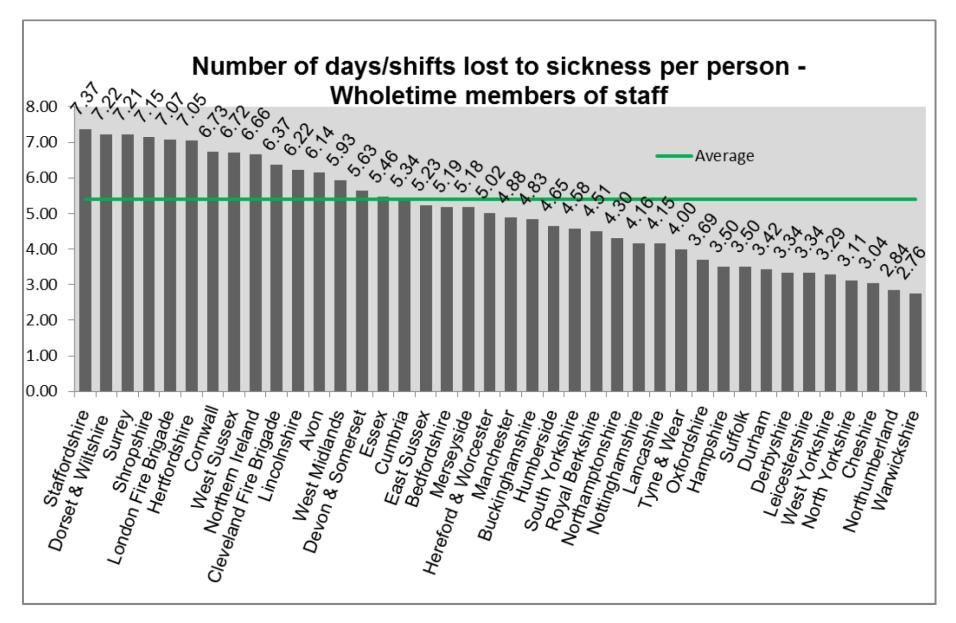
None.

John Buckley
CHIEF FIRE OFFICER

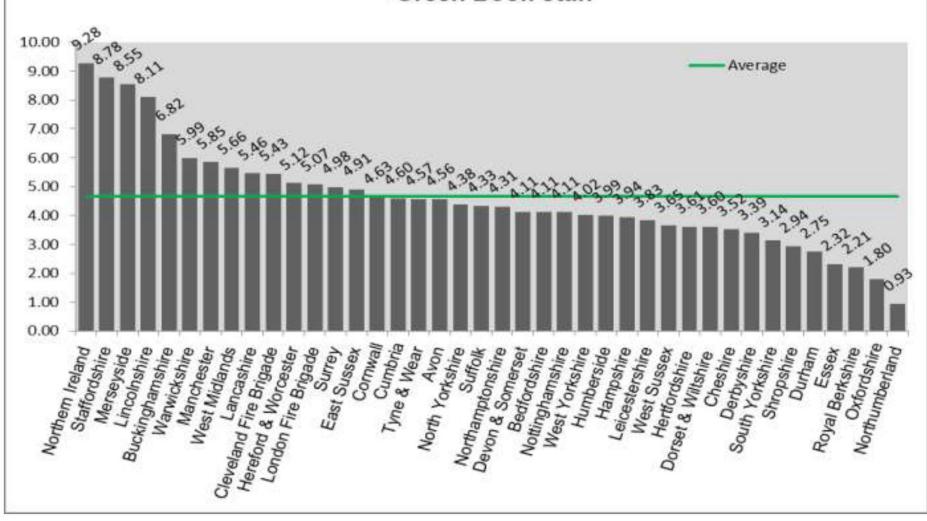
APPENDIX A

LOCAL TRENDS OVER TIME





Number of days/shifts lost to sickness per person Green Book staff



Q4 2020/2021 - WHOLETIME

In total 821 working days were lost due to sickness during this quarter. Of this, 507 days were lost to long-term absence (28+ calendar days absent) and 314 days were lost due to short term absence. This represents an overall decrease of 129 days (13.58%) on the previous quarter.

The average absence per employee was 1.95 days lost, which is above the target figure of 1.6 days lost per quarter per employee.

61.75% of sickness absence in this quarter was due to long term absence. There were 43 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 16 of which were classified as long term sickness. At the end of the period 31 employees had returned to work with 12 still absent.

Reasons for Absence

Main reasons for sickness absence for the Wholetime are Musculo Skeletal (20 instances, 167 days) and COVID-19 isolating (12 instances, 144 days). The main long term absence reasons were Mental Health (3 instances, 136 days) For short term absences was Musculo Skeletal (16 instances, 96 days).

Wholetime

Absence Reason - Grouped	Unique Absence Count	Day s Los
Musculo Skeletal	20	167
COVID-19 Isolating - Tested Positive	12	144
Mental Health - Other	3	136
Mental Health	6	100
Hospital/Post Operative	6	72
Headache/Migraine/Neurological	6	65
Other known causes (not specified in list)	9	58
Virus/Infectious Diseases	5	23
Cancer and Tumours	1	20
COVID-19 Isolating Symptoms Self	8	13

Short Term Absences

Absence Reason - Grouped	Unique Absence Count	Day s Los
Musculo Skeletal	16	96
COVID-19 Isolating - Tested Positive	9	51
Hospital/Post Operative	4	42
Mental Health	5	36
Other known causes (not specified in list)	8	33
Headache/Migraine/Neurological	5	32
Virus/Infectious Diseases	5	23
COVID-19 Isolating Symptoms Self	8	13
COVID-19 Adverse Reaction to Covid Vaccine	5	9
Gastro-Intestinal	3	6

Long Term Absences

Absence Reason - Grouped	Unique Absence Count	Days Lost
Mental Health - Other	3	136
COVID-19 Isolating - Tested Positive	3	93
Musculo Skeletal	4	71
Mental Health	1	64
Headache/Migraine/Neurological	1	33
Hospital/Post Operative	2	30
Other known causes (not specified in list)	1	25
Cancer and Tumours	1	20

SUPPORT (NON-UNIFORMED) SICKNESS ABSENCE

In total 238.21 working days were lost due to sickness absence for Support personnel during the quarter. This breaks down into 95 days due to long term sickness absence (28+ continuous days absent) and 143.22 working days due to short term absence. This represents a decrease of 138.36 days (36.74%) on the previous quarter.

The average absence per employee was 1.41 days lost, which is below the target figure of 1.6 days lost per quarter per employee.

39.88% of sickness absence in this quarter was due to long term absence. There were 9 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 4 of which were classified as long term sickness. At the end of the period 7 employees had returned to work with 2 still absent.

Reasons for Absence

The main reasons for support absence was COVID-19 Isolating (4 instances, 53 days) and Mental Health (3 instances, 52 days). The main reason for short term absence was mental health issues (3 instances, 52 days).

Unique Absence Count	Day s Lo
4	5
3	5
2	3
2	3
3	2
7	14
	Absence Count 4 3 2

COVID-19 Adverse Reaction to Covid Vaccine
Respiratory - Cold/Cough/Influenza

Non Uniformed

Gastro-Intestinal

Short Term Absences		
Absence Reason - Grouped	Unique Absence Count	Days Lost
Mental Health	3	52
COVID-19 Isolating - Tested Positive	3	25
Other known causes (not specified in list)	3	21
COVID-19 Isolating Symptoms Self	7	14
Musculo Skeletal	3	8
COVID-19 Adverse Reaction to Covid Vaccine	6	7
Respiratory - Cold/Cough/Influenza	1	5
Gastro-Intestinal	1	3
Ear, Nose, Throat	1	2.5
Headache/Migraine/Neurological	3	2.5

Unique Absence Count	Days Lost
1	37
2	30
1	28
	Absence Count

Long Term Absences

ON-CALL ABSENCE

Attendance for On-Call firefighters does not reflect shifts lost as they 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 day shift traditionally for Wholetime employees).

In Q4, 1012 days were unavailable due to sickness, broken down into 747 days of long-term absence (28+ days) and 265 days of short-term absence. This equates to an average of 4.1 "days" of unavailability per employee.

Compared to Q3, when 895.17 days were lost to sickness absence, this reflects an decrease of 116.83 available days (13.05%).

There were 27 periods of absence covered by a Medical Certificate (i.e. absence longer than 8 days in duration), 12 of which were classified as long term sickness. At the end of the period 15 employees had returned to work with 12 still absent.

Reasons for Absence

The main reason for sickness absence were Musculo-skeletal issues (8 instances, 396 days) and COVID absence (16 instances, 191 days). The main reason for long-term absence is Musculo-Skeletal issues (5 instances, 348 days) and the main reason for short-term absence is linked to Covid isolating (15 instances, 147 days).

Retained

Absence Reason - Grouped	Unique Absence Count	Day s Los
Musculo Skeletal	8	396
COVID-19 Isolating - Tested Positive	16	191
Other known causes (not specified in list)	3	125
Mental Health - Other	2	113
Headache/Migraine/Neurological	1	66
Hospital/Post Operative	2	56
Respiratory - Chest Infection	2	26
COVID-19 Isolating Symptoms Self	4	14
Respiratory - Cold/Cough/Influenza	2	11
Mental Health	1	7

Short Term Absences

Absence Reason - Grouped	Unique Absence Count	Day s Los
COVID-19 Isolating - Tested Positive	15	147
Musculo Skeletal	3	48
Hospital/Post Operative	1	27
Respiratory - Chest Infection	2	26
COVID-19 Isolating Symptoms Self	4	14
Respiratory - Cold/Cough/Influenza	2	11
Mental Health	1	7
Other known causes (not specified in list)	1	6
Virus/Infectious Diseases	1	5
COVID-19 Adverse Reaction to Covid Vaccine	2	2

Long Term Absences

Absence Reason - Grouped	Unique Absence Count	Days Lost
Musculo Skeletal	5	348
Other known causes (not specified in list)	2	119
Mental Health - Other	2	113
Headache/Migraine/Neurological	1	66
COVID-19 Isolating - Tested Positive	1	44
Hospital/Post Operative	1	29