



**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:** 13 January 2023

**Purpose of Report:**

To update Members on key human resources metrics for the period 1 June to 30 December 2022, with the exception of absence data which is for the reporting period 1 April 2022 to 30 September 2022.

**Recommendations:**

That Members note the contents of the report.

## CONTACT OFFICER

**Name :** Candida Brudenell  
Assistant Chief Fire Officer

**Tel :** 0115 967 0880

**Email :** [candida.brudenell@notts-fire.gov.uk](mailto:candida.brudenell@notts-fire.gov.uk)

**Media Enquiries Contact :** Corporate Comms  
(0115) 967 0880 [corporatecomms@notts-fire.gov.uk](mailto: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.
- 1.3 Due to the postponement of the meeting on 4 November, staffing figures reflect the period 1 June to 31 December 2022.

## 2. REPORT

### STAFFING NUMBERS

- 2.1 During the period 1 June 2022 to 30 December 2022, 33 employees commenced employment. Establishment levels at 30 December 2022 are highlighted below:

	Approved	Actual	Variance
<b>Wholetime</b>	431 (431 fte)	411 (410.3fte)	-20 (-20.7fte)
<b>On-Call</b>	192 Units	239 persons (includes 70 dual contracts)	-63 units
<b>Support</b>	159 (154.75 fte)	154 (143.93 fte)	-5 (-10.82fte)

- 2.2 There have been 49 leavers and 33 starters since the last report. This has resulted in an actual workforce figure of 804 (this includes 70 dual contractors). Leavers are broken down as follows: 11x Wholetime, 13x On Call and 25x Support roles.
- 2.3 As at 30 December 2022 Wholetime strength stood at 411 operational personnel (410.3 fte) employees against an establishment of 431 posts.
- 2.4 During the period, the Service has appointed to 6 Wholetime (migration and transfers), 8 On-Call roles and 19 support roles.

- 2.5 In the year to date (April to December) the number of leavers for Wholetime and On-call roles is within planning forecasts. However, the number of leavers from support roles remains higher than predicted, with 30 leavers compared to a 9-month forecast of 19.5 leavers. It should be noted that this includes the completion of 7 fixed-term appointments and 3 retirements.
- 2.6 This reflects the national picture of turnover where employment vacancy rates have increased significantly. This has been identified as a potential area of concern for the Service, and work has been undertaken to address the issue. This includes enhancing our employer brand to attract more potential recruits, engaging in pre-recruitment on social media, reducing the time taken to recruit into vacant posts and reviewing non-salary benefits.
- 2.7 In the same period, the Service has recruited to 20 support role vacancies.

### **SICKNESS ABSENCE**

2.8 Whilst the review period usually covers three months, due to the timing of committee meetings, the review period covers a six-month period and represents absence figures for Quarter 1, 1 April to 30 June, and Quarter 2, 1 July to 30 September.

2.9 Target absence figures for 2022/23 are:

Wholetime:	9.05 days per person
Non-Uniformed:	9.35 days per person
Whole Workforce:	13.2 days per person

(The average is affected by the numbers of employees in each work group and the average work shift and reflects national sector averages in 2021-22).

2.10 For the purposes of reporting, On-call absence analysis is shown separately to other workgroups due to the nature of their working arrangements.

#### **Workforce (excluding On-call)**

- 2.11 Total absence across the workforce decreased by 539.49 days (-28.16%) in Quarter One and increased by 181 days (13.2%) in Quarter 2 compared to the previous quarters.
- 2.12 Excluding covid related absence, this represents a decrease compared to the same quarters of 2021-22 of 191 days in Q1 (-14.9%) and 60 days in Q2 (-4.3%).
- 2.13 Absence related to Covid represents 504.46 working days lost, which accounts for 17.2% of total absence in Q1 and Q2.
- 2.14 Long term absence (excluding Covid absence) equated to 62.2% of sickness absence in Q1 and 71% in Q2.
- 2.15 Absence trends across the last three years are shown in the table set out in Appendix A.

## **On-call Workforce**

- 2.16 For On-call staff, absence figures (excluding covid absence) in Q1 increased by 141 days (+19.5%) and decreased by 151 days (-17.5%) in Q2 compared to the previous quarters.
- 2.17 This represents a decrease compared to the same quarters of 2021-22 of 171 days in Q1 (-16.5%) and 125 days in Q2 (14.9%).
- 2.18 Absence related to Covid represents 294 working days lost, which accounts for 15.7% of total absence in Q1 and Q2.
- 2.19 Long term absence (excluding Covid absence) equated to 71% in Q1 and 80.5% of sickness absence in Q2.
- 2.20 A summary of the reasons for absence by workgroup are attached at Appendix C.

## **NATIONAL ABSENCE TRENDS**

- 2.21 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.
- 2.22 Reasons for sickness absence at NFRS broadly mirror the national trends with musculo-skeletal and mental health related absences featuring significantly in all workgroups.
- 2.23 Appendix B reflects the national absence trends for Quarter 2. 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.
- 2.24 For Wholetime staff NFRS has an average of 5.04 days lost per employee which ranks the Service as 19 out of the 35 Services included in the survey. This figure is below the sector sickness average of 5.76 days per employee. The lowest average was 2.44 and the highest 13.37.
- 2.25 For On-call staff NFRS has an average of 7.77 days lost per employee which ranks the Service as 13 out of 22 Services included in the survey. This figure is below the sector sickness average of 8.73 days per employee. The lowest average was 0.00 and the highest 20.58.
- 2.26 For Support staff (Green Book) the Service has an average of 5.61 days lost per employee which ranks us 31 out of the 36 Services included in the survey. This figure is above the sector sickness average of 4.57 days per employee. The lowest average was 0.26 days and the highest 6.75 days.

## **OTHER WORKFORCE METRICS**

- 2.27 This section reviews the following activities: disciplinary cases, grievances raised, harassment cases raised, dismissals, appeals and active employment tribunal cases.
- 2.28 Over the period, one grievance has been heard which related to a management issue and an harassment investigation has concluded. It should be noted that a discrimination claim has previously been lodged with the employment tribunal office and will be heard in March 2024.
- 2.29 There have also been two dismissals from the service on the grounds of ill health and capability, in the period.

## **3. FINANCIAL IMPLICATIONS**

- 3.1 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.
- 3.2 Any increase in absence has a direct impact upon the Service's operational pay budget as gaps in the ridership can lead to an increase in overtime pay to cover for long-term absence.

## **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**

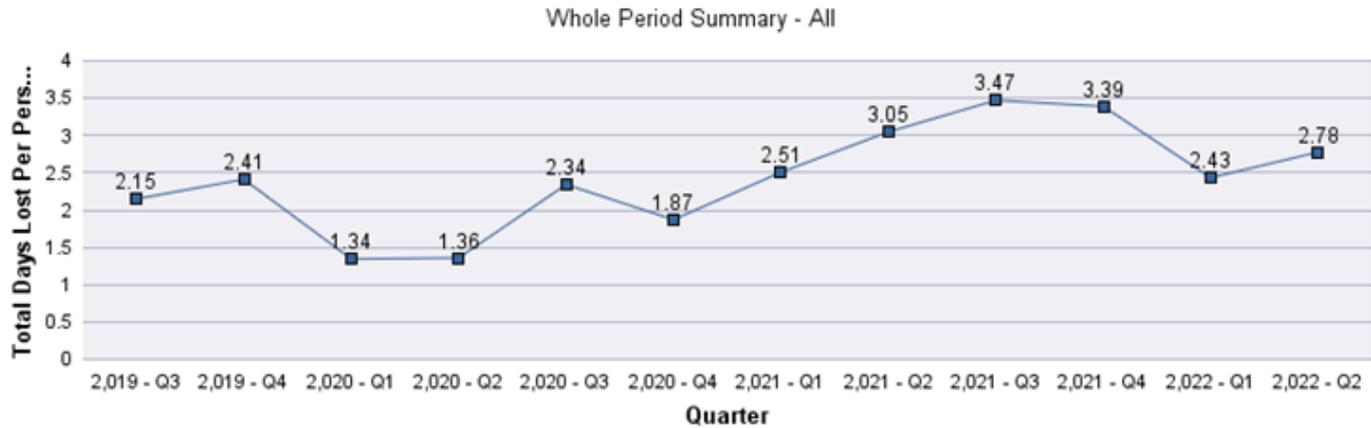
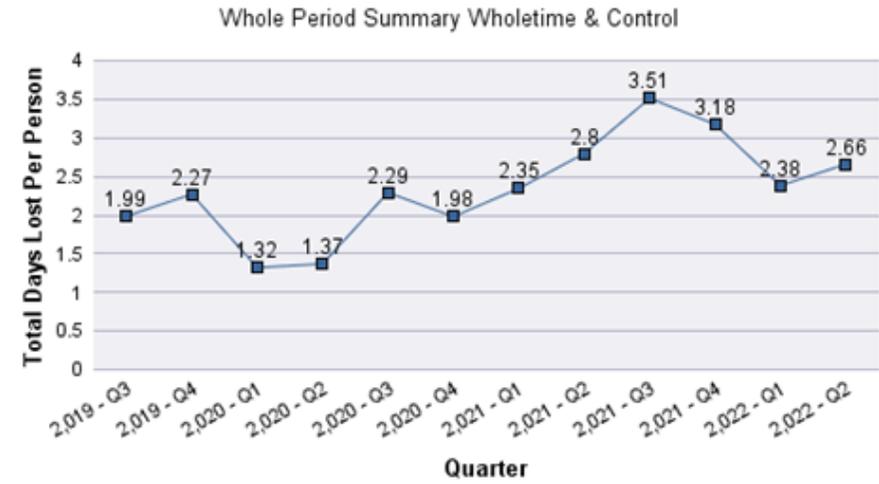
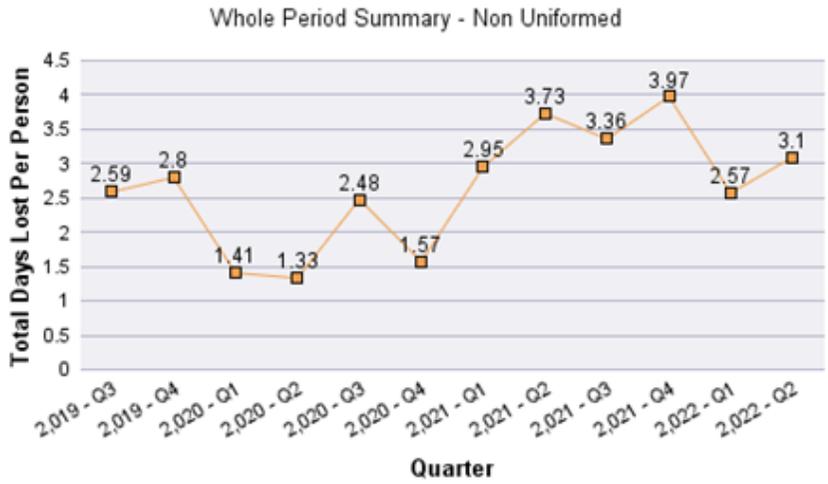
That Members note the contents of the report.

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

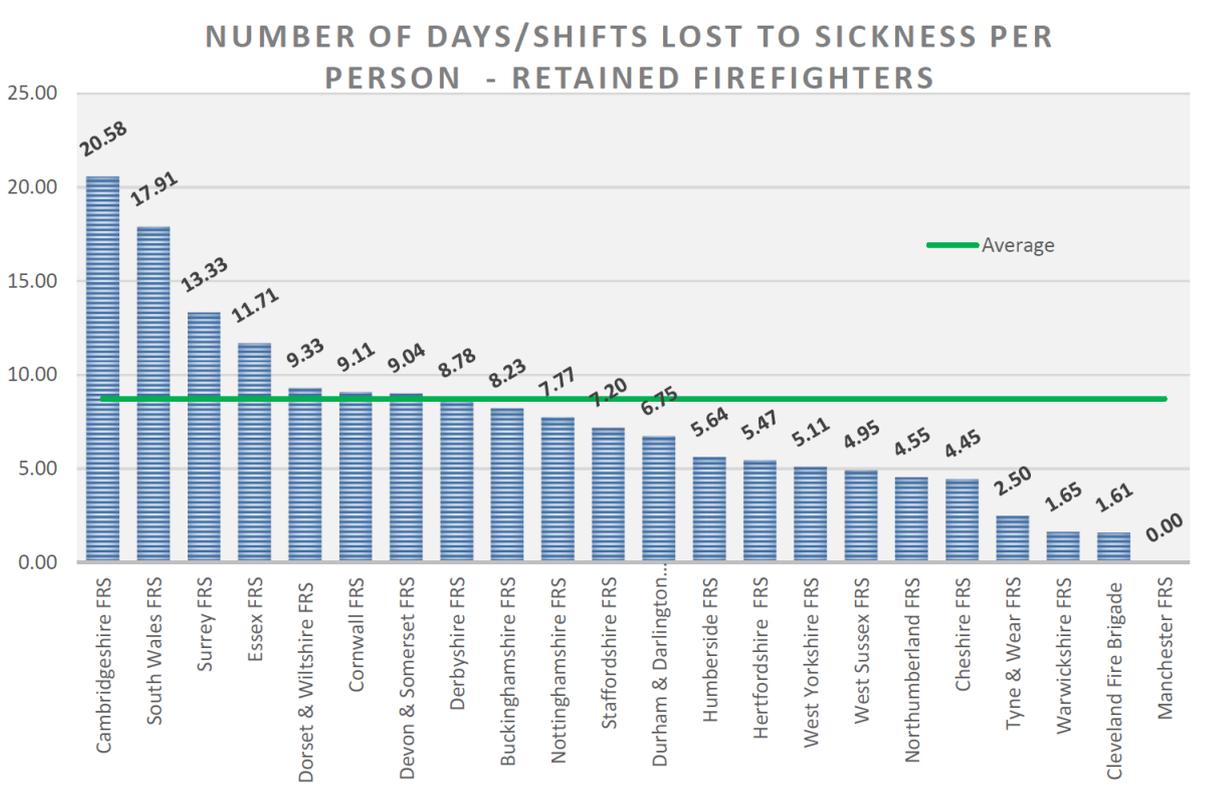
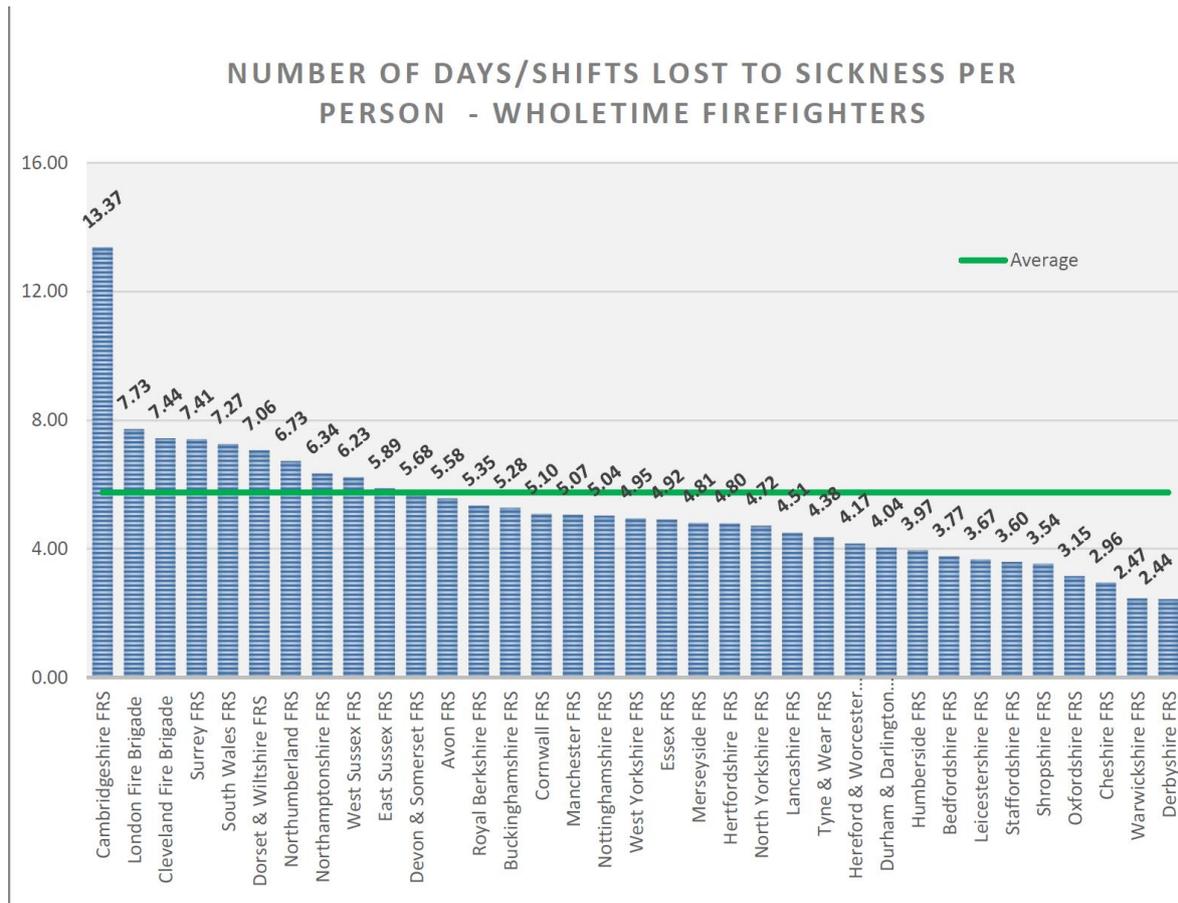
None.

Craig Parkin  
**CHIEF FIRE OFFICER**

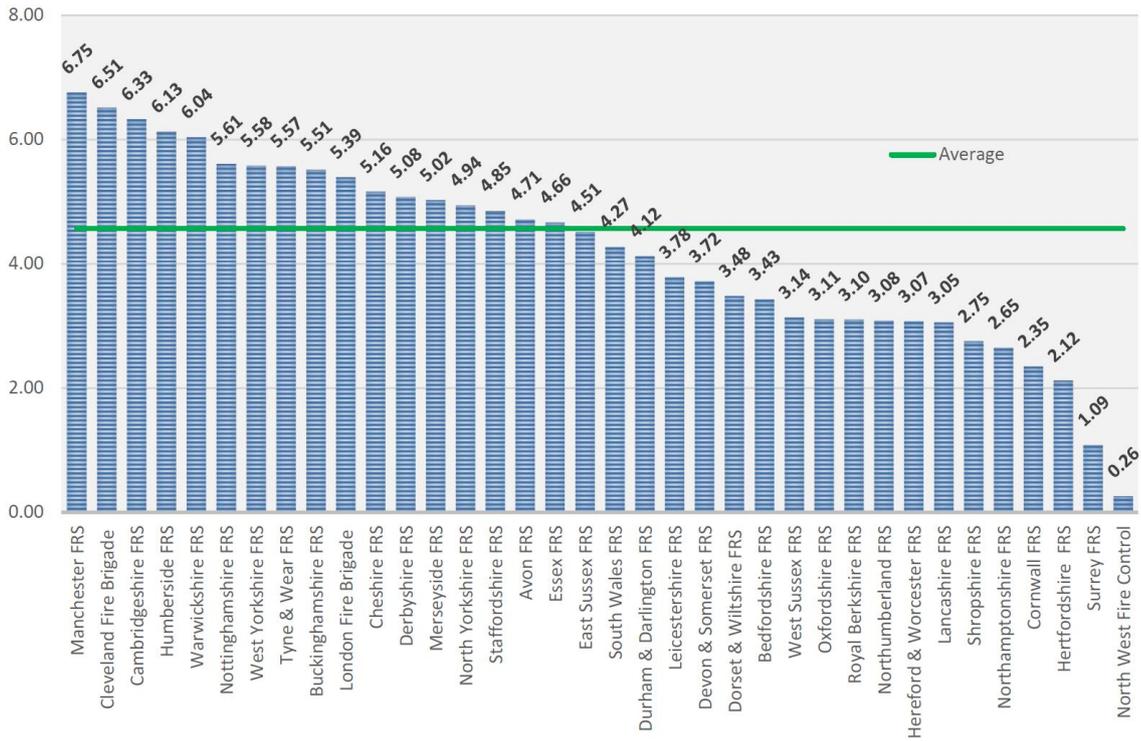
## Appendix A



## Appendix B



## NUMBER OF DAYS/SHIFTS LOST TO SICKNESS PER PERSON GREEN BOOK STAFF



## Appendix C

### Q2 2022/23 - Wholetime

#### Wholetime

			<u>Short Term Absences</u>			<u>Long Term Absences</u>		
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	37	426	Musculo Skeletal	28	134	Musculo Skeletal	9	292
Mental Health	7	241	COVID-19 Isolating - Tested Positive	30	128	Mental Health	6	237
COVID-19 Isolating - Tested Positive	30	128	Gastro-Intestinal	22	50	Hospital/Post Operative	2	89
Hospital/Post Operative	2	89	Unknown causes, not specified	12	39	Mental Health - Other	2	47
Mental Health - Other	6	81	Mental Health - Other	4	34			
Gastro-Intestinal	22	50	Respiratory - Cold/Cough/Influenza	4	16			
Unknown causes, not specified	12	39	Other known causes (not specified in list)	5	12			
Respiratory - Cold/Cough/Influenza	4	16	Eye Problems	3	6			
Other known causes (not specified in list)	5	12	Virus/Infectious Diseases	3	6			
Eye Problems	3	6	Ear, Nose, Throat	2	5			
Virus/Infectious Diseases	3	6						

### Q2 2022/23 - On Call absence

#### On-Call

			<u>Short Term Absences</u>			<u>Long Term Absences</u>		
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	16	413	COVID-19 Isolating - Tested Positive	26	176	Musculo Skeletal	7	353
COVID-19 Isolating - Tested Positive	26	176	Musculo Skeletal	9	60	Mental Health - Other	1	92
Mental Health - Other	1	92	Mental Health	2	27	Respiratory - Other	1	92
Respiratory - Other	1	92	Unknown causes, not specified	5	20	Mental Health	1	38
Mental Health	3	65	Gastro-Intestinal	5	17			
Unknown causes, not specified	5	20	Other known causes (not specified in list)	4	8			
Gastro-Intestinal	5	17	Hospital/Post Operative	1	4			
Other known causes (not specified in list)	4	8						
Hospital/Post Operative	1	4						

### Q2 2022/23 – Support staff absence

#### Non Uniformed

			<u>Short Term Absences</u>			<u>Long Term Absences</u>		
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	125	COVID-19 Isolating - Tested Positive	17	88	Hospital/Post Operative	3	124
Musculo Skeletal	2	109	Mental Health	3	30	Musculo Skeletal	2	109
COVID-19 Isolating - Tested Positive	17	88	Other known causes (not specified in list)	3	16	Other known causes (not specified in list)	2	45
Other known causes (not specified in list)	5	61	Headache/Migraine/Neurological	4	14.5			
Mental Health	3	30	Gastro-Intestinal	7	14			
Headache/Migraine/Neurological	4	14.5	Ear, Nose, Throat	1	9			
Gastro-Intestinal	7	14	Unknown causes, not specified	1	9			
Ear, Nose, Throat	1	9	Respiratory - Cold/Cough/Influenza	2	5			
Unknown causes, not specified	1	9	Mental Health - Other	1	4			
Respiratory - Cold/Cough/Influenza	2	5	Respiratory - Chest Infection	1	2			