

# EAST AYRSHIRE COUNCIL

## SOCIAL WORK COMMITTEE – 22 MARCH 2007

### ABSENCE MANAGEMENT – QUARTER 3 AND 4 2006

#### Report by the Executive Director of Educational and Social Services

#### 1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to advise Committee of staff absence rates for Social Work Services, including Resource Support (Social Work), for the quarterly periods 1<sup>st</sup> July 2006 ending 30<sup>th</sup> September 2006 and 1<sup>st</sup> October 2006 ending 31<sup>st</sup> December 2006.

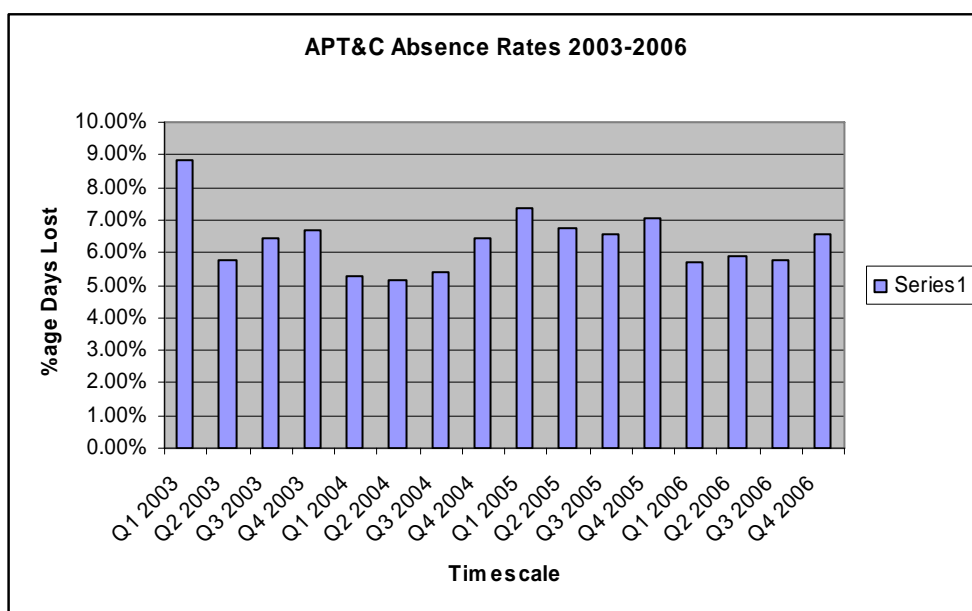
#### 2. HISTORICAL INFORMATION

- 2.1 Historical data for the current reporting period is detailed in tabular form in Appendix 1 and 2 to assist members in considering absence rates.

#### 3. ANALYSIS OF QUARTERLY ABSENCE RATES

- 3.1 The Council target for APT & C absence rates is 4%. Analysis of information gathered through the corporate personnel system highlights a total absence rate for Social Work Services and Resource Support of 5.78% Quarter 3 2006 and 6.54% for Quarter 4 2006. Graph 1 (below) compares this with previous quarters in 2003, 2004, 2005 and 2006.

#### 3.2 Graph 1 – APT & C Absence Rates for 2003 – 2006

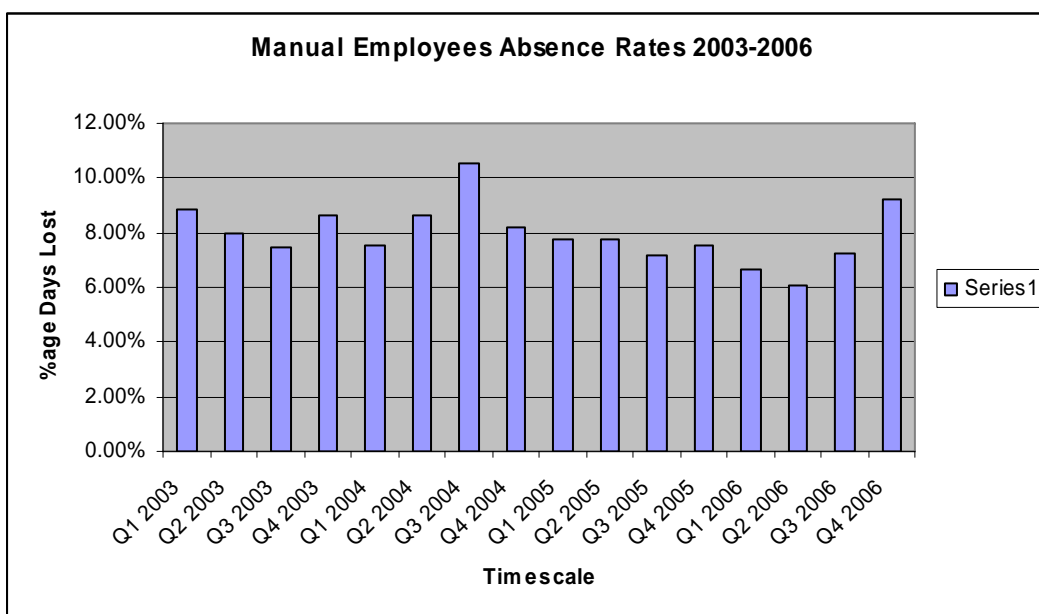


3.3 For Quarter 3 a total of 2032 working days were lost which is a decrease of 101 days on Quarter 2. Of this figure 1202 days were lost for medically certified absences covering a period of more than 4 weeks.

3.3.1 For Quarter 4 a total of 2262 working days were lost which is an increase of 230 days on Quarter 3. Of this figure 1162 days were lost for medically certified absences covering a period of more than 4 weeks.

3.4 The Council target for Manual absence rate has been set at 5%. The statistics for Quarter 3 show an actual absence rate of 7.23% for this group of staff and 9.23% for Quarter 4. Graph 2 (below) compares this with previous quarters in 2003, 2004, 2005 and 2006.

3.5 **Graph 2 – Manual Employees Absence Rate for 2003 – 2006**



3.5.1 For Quarter 3 a total of 1969 days were lost, which represents an overall increase in Manual staff absences of 281 days. Of this total 1322 days lost were for medically certified absences covering more than 4 weeks.

3.5.2 For Quarter 4 a total of 2539 days were lost, which represents an overall increase of 570 days on Quarter 3. Of this figure 1829 days were lost for medically certified absences covering a period of more than 4 weeks.

**4. EXECUTIVE DIRECTOR'S COMMENTS**

4.1 With regard to the absence levels reported for Quarter 3 and 4 the following can be noted:

4.1.1 The overall absence rate for Quarter 3 is 6.41% and for Quarter 4 7.73%.

4.1.2 Long term absence remains a significant issue within the Department. As previously reported the predominant causes of absence continue to relate to muscular-skeletal conditions, stress and recovery from operations. These issues are similar to previous quarters; however Members will also note that referrals made to Occupational Health Service, as a department, equates to 48% of the Councils total referrals to Occupational Health.

4.1.3 In relation to specific areas the following comments shall be noted:

Community Care Adults – Redeployment has been progressed in some situations with clear action plans for returning to work for the remainder of staff absent long term.

Community Care Older – Significant change in older people services has had a negative impact on absence levels, a reversal of this trend is anticipated. The Service Manager is currently reviewing long term absence with line managers and personnel and planned remedial actions are in hand.

Community Care Locality – The issue is predominately in Home Care. Long-term absence is expected to reduce in the next quarter following several ill-health retirements. An action plan has also been put in place involving Guidance Notes issued to managers on absence management, 4 weekly reporting of absence levels and a full audit of all staff absences is being carried out.

Children & Families – The issue is predominately in the children's Residential Sector. Absence monitoring processes have been improved and we anticipate an overall improvement in the absence rate for the next quarter. Further actions to address this includes raising the profile of absence by making it a standing item on team meetings, personnel attendance at team meetings, automatic referrals to occupational health have been put in place prior to therapeutic crisis intervention training, this should have an impact on reducing absence levels.

Criminal Justice – Due to long term sickness absence by a small number of employees who have now returned to work, absence levels will significantly reduce in the next quarter.

4.1.4 75 Absence Reviews and 47 Follow-Up Meetings were held with 60 referrals being made to the Occupational Health Service in this period.

4.1.5 A detailed review of individual record cards within each section has been carried out to ensure that the Council's Managing Absence Policy is being adhered to in terms of Absence Review Meetings.

## **5. LEGAL/POLICY IMPLICATIONS**

5.1 Absenteeism within Social Work is being managed in accordance with Council Policy and employment legislation.

## **6. FINANCIAL IMPLICATIONS**

- 6.1 As there is no budget within Social Work Services to provide cover for absent staff, and services must be maintained, costs are managed within the total resources available.

## **7. RISK IMPLICATIONS**

Social Work has identified that having insufficient appropriately trained staff to deliver the service is a significant risk to business continuity. The actions outlined in section 4 seek to address this risk.

## **8. RECOMMENDATIONS**

- 8.1 Committee is asked to:
- (i) note the contents of this report.

**Graham Short**  
**Executive Director of Educational and Social Services**  
**2/3/07**  
**Enc (1)**

### **LIST OF BACKGROUND PAPERS**

**Nil**

Any member wishing further information should contact:  
Jackie Donnelly, Executive Head of Social Work Tel 01563 576917

**IMPLEMENTATION OFFICER: JACKIE DONNELLY**

**Comparison between Quarter 3 2006 and Quarter 2 2006**

<b>SECTION</b>	<b>Q2 2006 DAYS LOST %</b>	<b>Q3 2006 DAYS LOST %</b>	<b>% INCREASE/ DECREASE</b>
Community Care - Adults	8.17	9.58	+1.41
Community Care – Locality	5.05	6.45	+1.40
Community Care - Older	5.29	5.00	-0.29
<b>Children &amp; Families</b>	6.30	4.05	-2.25
Children & Families	N/A	4.85	
Support Services	N/A	1.90	
Criminal Justice	6.39	6.88	+0.49
Resources	7.24	6.98	-0.26

\* Children & Families split into services for Q3

**Comparison between Quarter 3 2005 and Quarter 3 2006**

<b>SECTION</b>	<b>Q3 2005 DAYS LOST %</b>	<b>Q3 2006 DAYS LOST %</b>	<b>% INCREASE/ DECREASE</b>
Community Care - Adults	N/A	9.58	
Community Care – Locality	N/A	6.45	
Community Care - Older	N/A	5.00	
<b>Community Care</b>	7.62	6.75	-0.87
<b>Children &amp; Families &amp; Criminal Justice</b>	6.04	4.05	-1.99
Children & Families	N/A	4.85	
Support Services	N/A	1.90	
Criminal Justice	N/A	6.88	
Resources	3.87	6.98	+3.11

**Comparison between Quarter 4 2006 and Quarter 3 2006**

<b>SECTION</b>	<b>Q3 2006 DAYS LOST %</b>	<b>Q4 2006 DAYS LOST %</b>	<b>% INCREASE/ DECREASE</b>
Community Care - Adults	9.58	8.15	-1.43
Community Care – Locality	6.45	8.41	+1.96
Community Care - Older	5.00	6.37	+1.37
Children & Families	4.85	8.62	+3.77
Support Services	1.90	3.22	+1.32
Criminal Justice	6.88	10.82	+3.94
Resources	6.98	6.20	-0.78

\* Children & Families split into services for Q3

**Comparison between Quarter 4 2005 and Quarter 4 2006**

<b>SECTION</b>	<b>Q4 2005 DAYS LOST %</b>	<b>Q4 2006 DAYS LOST %</b>	<b>% INCREASE/ DECREASE</b>
Community Care - Adults		8.15	
Community Care – Locality		8.41	
Community Care - Older		6.37	
<b>Community Care</b>	7.27	7.96	+0.69
<b>Children &amp; Families &amp; Criminal Justice</b>	8.12	7.82	-0.30
Children & Families		8.62	
Support Services		3.22	
Criminal Justice		10.82	
Resources	6.11	6.20	+0.09