



**Safest People, Safest Places**

## **Human Resources Committee**

**16 September 2021**

### **Sickness Absence Performance**

**Quarter Four 1 April 2020 – 31 March 2021**

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## **Report of Head of People and Organisational Development**

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### **Purpose of the report**

1. The purpose of this report is to provide Members with an update on sickness absence performance for the period 1 April 2020 to 31 March 2021.

### **Background**




2. The effective management of absence is a key performance issue for any organisation. This is particularly important when operating in a climate of reduced financial and human resources.
3. The Service places significant emphasis on the effective management and reporting of sickness absence and Members have an important role to play in providing an overview of the arrangements that are in place and the performance that is achieved.

### **Summary of Sickness Statistics**

4. The sickness statistics for the period 1 April 2020 to 31 March 2021 are calculated as average shifts/days lost per person.
5. The Service compares sickness levels to the targets that have been set for the year and to previous year's performance to provide a rounded view of sickness performance, and to help to identify any trends in particular areas.
6. For the purposes of the performance indicators, absence has been included where an employee has shown symptoms of Covid-19 (C-19) or tested positive. All absence relating to shielding employees, test and trace and those self-isolating (SI) due to another member of their household showing symptoms have been removed however are still recorded.

7. Table 1 sets out the sickness statistics against three key performance indicators. These indicators were measures previously used to measure performance within the best value framework and the Service continues to use these measures to enable national comparisons to be undertaken at year end.

**Table 1 Key Sickness Statistics by Best Value Indicators**

Performance Indicator	Apr 20 to Mar 21	Apr 20 to Mar 21 Target	Variance	Apr 19 to Mar 20 (PYR)	Direction of Travel
Working shifts / days lost for <b>all staff</b>	7.26	6	+1.26	8.50	
Working shifts / days lost due to sickness for all <b>Wholetime, Control and Non- Uniformed</b>	7.03	6	+1.03	7.67	
Working shifts / days lost due to sickness for all <b>Wholetime and Control</b>	7.37	6	+1.37	7.99	

8. Overall, the number of shifts lost in total this year has decreased by approximately 15% from the reported figure at the same time last year. All indicators are showing an improvement on last year despite being above target.
9. All reportable staff groups have had an increase in shifts lost from quarter 3 to quarter 4 in this year however, this has been impacted by the pandemic and the introduction of lateral flow testing in Service venues and the increase in Covid-19 (C-19) cases nationally.
10. It is pleasing to report that Wholetime (WT), Flexible Duty Officer (FDO) / Day Duty (DD), Non-uniformed and Retained Duty System (RDS) have seen a reduction in shifts lost in comparison with last reporting year. However, there has been a significant increase in absence levels within Control in quarter 4 and the year as a whole, a number of which are specifically linked to C-19 long term issues.
11. Table 2 below shows a further breakdown over the specific staff groups that are employed by the Service.

**Table 2 Sickness by Staff Group**

Performance Indicator	Apr 20 to Mar 21	Apr 20 to Mar 21 Target	Variance	Apr 19 to Mar 20 (PYR)	Direction of Travel
WT Riders	7.14	6	+1.14	7.39	↑
FDO / DD	6.02	4.5	+1.52	10.78	↑
Control	17.15	8	+9.15	11.06	↓
RDS	9.18	9	+0.18	13.13	↑
Non-uniformed	4.89	5	-0.11	6.77	↑

**Wholetime Station Based Firefighters (Riders)**

12. The detailed sickness information relating to WT riders is summarised below.

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	1904	+1.7%
Long term sickness	1253 (66%)	-5%
Short term sickness	651 (34%)	+13.8%
Approximate cost of sickness	£345,652	+£22,269

13. The WT rider category has seen a 1.7% increase in shifts lost when compared with the same reporting period in 2019/20.

14. 1465 shifts were lost due to C-19 related absences this year at the end of quarter four. 1054 shifts are not included in the above data and are due to test and trace, self-isolation (SI) due to a household member or shielding. We can start to see a rise in shifts lost for positive C-19 cases.

15. The main reasons for absence in this category remain as musculoskeletal (MSK) accounting for approximately 42%, mental health accounting for approximately 26% and C-19 confirmed cases accounting for 22.5% of overall shifts lost. The long-term absence has increased as expected in quarter 4 with non-Covid related absences.

16. Short term absence remains relatively low for non-Covid related reasons and the recording of category/reason for absences has improved due to closer monitoring by HR.

17. This category is over target at this point in the reporting year.

### Flexible Duty Officers and Day Duty

18. The detailed sickness information relating to FDO and DD staff is summarised below.

#### FDO

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	160	-51.1%
Long term sickness	51 (32%)	-83%
Short term sickness	109 (68%)	+541%
Approximate cost of sickness	£33,760	-£42,105

#### Day Duty

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	93	-44%
Long term sickness	40 (43%)	-63%
Short term sickness	53 (57%)	-7%
Approximate cost of sickness	£14,193	-£4,884

19. The FDO and DD category of staff has continued with significant reductions of 69% and 57% respectively in absence levels when compared with the same reporting period in 2019/20. This has been due to a reduction in long term absence in both categories.

20. 206 shifts were lost year to date due to C-19 related absence which are not included in the above data, most of which was seen in November and due to SI and C-19 confirmed cases in February.

21. This category is over target at this point in the reporting year.

### Control

22. The detailed sickness information relating to Control staff is summarised below.

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	343	+82%
Long term sickness	300 (87%)	+289%
Short term sickness	43 (13%)	-61%
Approximate cost of sickness	£61,729	+£29,987

23. The Control category of staff has seen a rise of 82% in absence when compared with the same reporting period in 2019/20. However, absence was low within this category last year. Long lasting C-19 issues have been a significant concern for Control and impacted significantly on long term sickness. The impacts of this are still unknown.

24. A further 40 shifts lost year to date were due to C-19 related absence which are not included in the above data.

25. This category is over target at this point in the reporting year.

### Non- Uniformed

26. The detailed sickness information relating to Non-uniformed staff is summarised below.

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	489.3	-22.7%
Long term sickness	246 (50.3%)	-45%
Short term sickness	243.3 (49.7%)	-27%
Approximate cost of sickness	£57,569	+£5,350

27. This category has seen a decrease of 22.7% in shifts lost when compared with the same reporting period in 2019/20.

28. A further 678.14 shifts were lost year to date due to C-19 related absence which are not included in the above data due to test and trace, SI due to a household member and high proportions of shielding.

29. This category is under target at this point in the reporting year.

### Retained Duty System

30. The detailed sickness information relating to RDS staff is summarised below.

Description	Days/cost	%/£ change
Total shifts lost to 31/3/2021	1234.8	-32%
Long term sickness	249.1 (20.1%)	-84%
Short term sickness	985.7 (79.9%)	+400%
Approximate cost of sickness	£38,636	+£13,583

31. The RDS category has seen a decrease of 32% in shifts lost when compared with the same reporting period in 2019/20 however short-term absences have significantly increased due to C-19 related occurrences.

32. A further 463.13 shifts were lost in the year due to C-19 related absences.

33. Most of the absence in this category has been long term with the reason mostly being MSK. Disregarding C-19 related absence, other short-term absence has been very low.

34. This category is over target at this point in the reporting year.

### Covid-19 Related Absence

35. There have been various reasons for C-19 related absence since the pandemic began and the Service has followed government guidance.

36. The reasons include employees who have needed to SI due to showing symptoms of C-19 or living in a household with someone showing symptoms. It also includes employees who have been required to shield following government guidance.

Employees contacted via 'Test and Trace' and who have been confirmed as having C-19 are also included in this category.

37. Testing arrangements were put in place at the beginning of June 2020 and our employees can be tested through the NHS, for a small cost, as soon as they start to show symptoms or need to SI. This testing is more accurate and means staff will only need to take one test. Where a negative result is received, the employee can return to work.
38. Up until 31 March 2021, the rise can still be seen in positive C-19 cases with 176 tests carried out and 69 receiving a positive result. At the end of the previous reporting quarter (December 20), 105 employees had been tested with 28 receiving a positive result. This rise in positive tests has impacted significantly on short term absence across all staff categories.
39. The table below shows the shifts lost per category for C-19 (1 Apr 20 – 31 Mar 21).

<b>Employee Group</b>	<b>Shifts lost to SI</b>	<b>Shifts lost to SI (other household member)</b>	<b>Shifts lost to Shielding (V)</b>	<b>C-19 confirmed</b>	<b>Test &amp; Trace</b>	<b>Total shifts lost to C-19</b>
<b>Control</b>	20	20	1.6	113	18.5	173.1
<b>Non-Uniformed</b>	66	98	529.14	93	51	837.14
<b>RDS</b>	63.53	257.14	21.36	123.47	184.63	650.13
<b>WT Riders</b>	121	263	634	290	157	1465
<b>FDO/DD</b>	101	90	87	101	29	408
<b>Total</b>	<b>371.53</b>	<b>728.14</b>	<b>1273.1</b>	<b>720.47</b>	<b>440.13</b>	<b>3533.37</b>

40. It is important to note that all shielding employees have been undertaking work from home during this period and so the Service has still benefitted from productive working. Any employees who have been required to SI due to a member of their household showing symptoms have also been allowed to work from home if they have been able to do so.

### **Action Taken**

41. C-19 related absence will continue to be monitored and reported. We will continue to update our guidance in line with government guidance where available.
42. Sickness levels will continue to be monitored closely with regular analysis for any trends and patterns and instigation of the attendance management triggers where appropriate.

43. The HR team continue to liaise with line managers to support personnel to return to work as soon as possible through regular welfare visits, Occupational Health (OH) advice, additional support such as physiotherapy or counselling and encouraging discussions around the potential of modified duties once a return-to-work date is in sight. The restructure of the People and Organisational Development (OD) Team which includes HR enabled the recruitment of staff with specialist HR and OD skills who will support managers in their responsibilities to manage absence within their teams.
44. As of 31 March 2021, government guidance stated any employees shielding were no longer required to do so. The Service took a proactive and supportive approach in response, with each employee being supported by line managers and OH to discuss their own individual circumstances and needs. From the advice received where appropriate, an individual risk assessment has been completed to enable the employee to return to their role with additional control measures in place where identified. This approach allowed all staff apart from 1 employee from emergency response, to return to front line duties.
45. The Service has undertaken a review of all staff utilising a risk-based tool developed by Kent Fire and Rescue Service (FRS). This has identified any employees who have risk factors and enable the Service to appropriately support these individuals. There were 119 employees who were categorised as high risk with a score of 60 or over. Each employee has partaken in a conversation with their line manager and HR Business Partner and completed an individual risk assessment where appropriate and we have been able to prioritise these individuals for vaccinations where they were available. OH advice has been sought where required. At the end of the reporting year, there were 26 employees left to complete this process.
46. The Service has set up several Lateral Flow Testing (LFT) sites across the Service area to enable us to test our own staff. Staff are asked to test themselves twice per week and log their results on our system. At the end of the reporting year our staff had completed 2649 tests of which 16 had been positive. We will continue with the testing programme into this year with the introduction of home testing being implemented next.

### **National Fire Service Data Comparison**

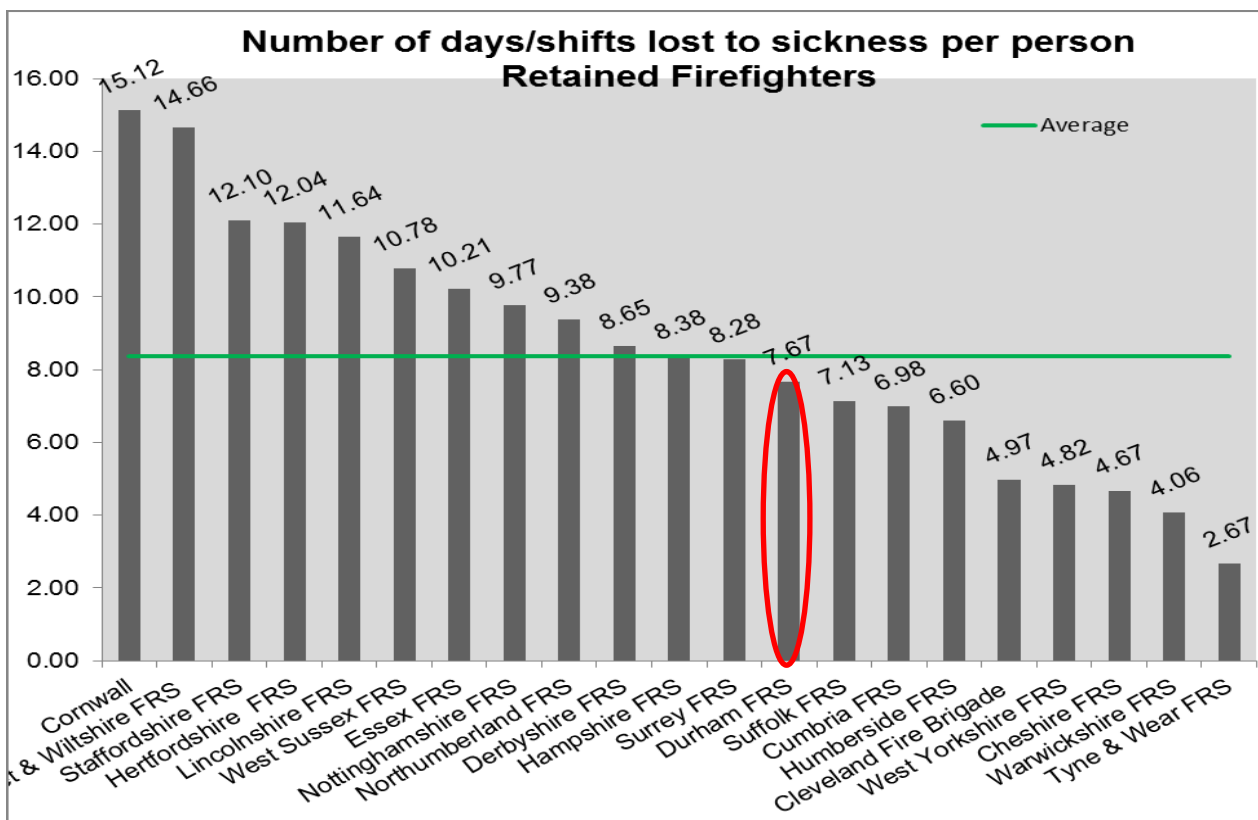
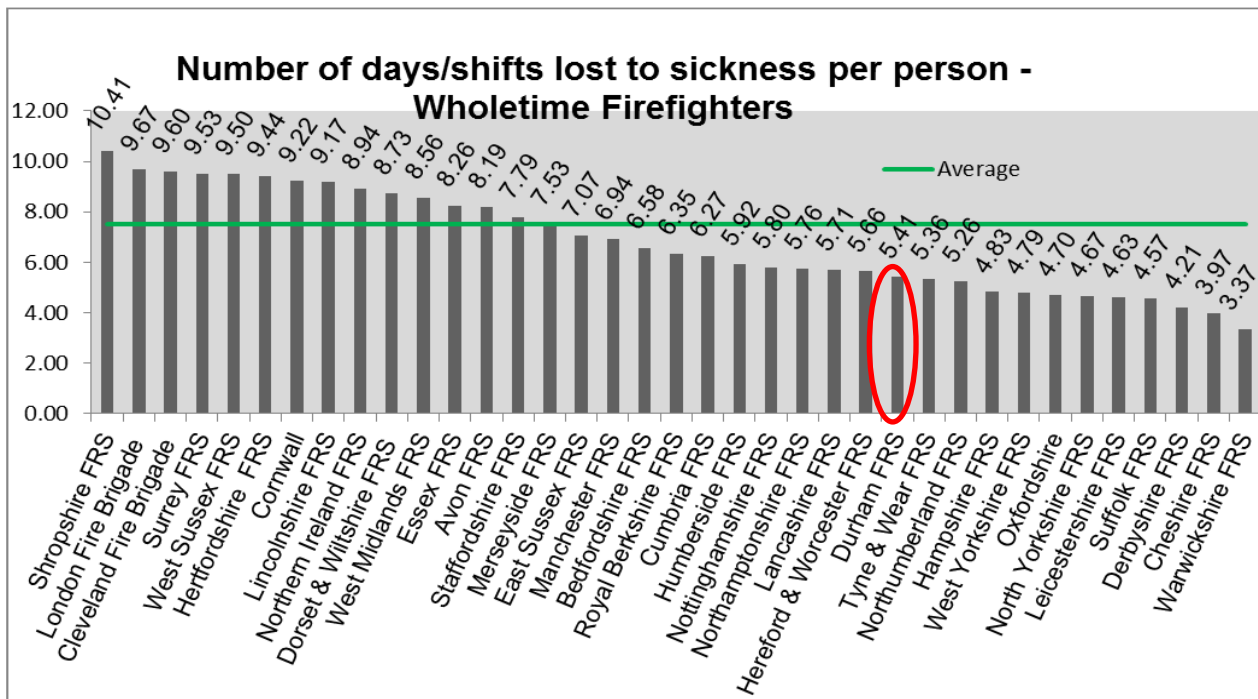
47. This data is supplied via the National OH Performance Report which is compiled by Cleveland Fire Brigade (CFB). All FRS are asked to supply data for the main categories of employees; WT, Control, RDS and Non-uniformed.
48. There is a set calculation which all FRS's supplying information must adhere to, to ensure the data can be used to give an accurate comparison, however this varies to our own reporting. The data helps our Service benchmark against other FRS's in terms of sickness absence rates. The data range is from for April 2020 to March 2021 and is attached at Appendix 1.
49. Performance across WT, RDS and Non uniformed indicators are below the national average and overall, in the lower half of the graph. As outlined above, absence levels within Control have spiked this year due to long term issues and this is reflected in the

national data where performance is slightly above the national average and mid-range in the graph.

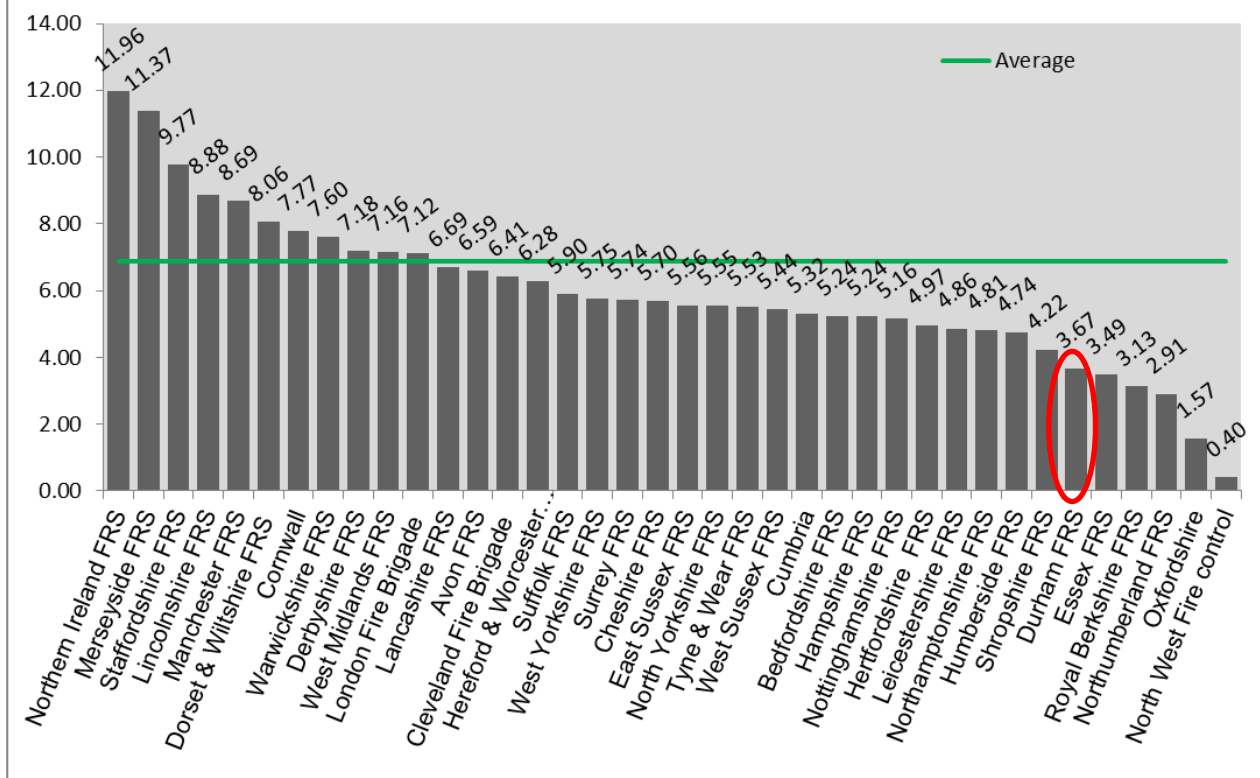
**Recommendation**

50. Members are asked to **note** and **comment** on the contents of this report.





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



**Number of days/shifts lost to sickness per person -  
Fire Control**

