

<b>12 September 2013</b>		<b>ITEM: 8</b>
<b>Corporate Overview &amp; Scrutiny Committee</b>		
<b>Stress Related Absence Management</b>		
<b>Report of:</b> Jackie Hinchliffe, Head of HROD and Customer Strategy		
<b>Wards and communities affected:</b> ALL	<b>Key Decision:</b> Non-Key	
<b>Accountable Head of Service:</b> Jackie Hinchliffe, Head of HROD and Customer Strategy		
<b>Accountable Director:</b> Graham Farrant, Chief Executive		
<b>This report is</b> Public		
<b>Purpose of Report:</b> to provide Corporate Overview and Scrutiny members with an overview of the current situation and initiatives relating to the staff Health and Wellbeing agenda with particular reference to stress-related absence		

### **EXECUTIVE SUMMARY**

Despite the implementation of a variety of initiatives and mechanisms sickness absence remains a challenge for the council – with absence in the first quarter showing an increase above last year and suggesting a high outturn for the full year. Stress related absence has also increased.

The purpose of the report is to provide Corporate Overview and Scrutiny members with an overview of the current situation and initiatives relating to the staff Health and Wellbeing agenda with particular reference to stress-related absence.

#### **1. RECOMMENDATIONS:**

**That Corporate Overview & Scrutiny Committee:**

- 1.1 Note the analysis in this report regarding stress related absence**
- 1.2 Agree to onward monitoring of the situation via the stress performance indicator within the corporate scorecard being an IN FOCUS item for the remainder of this year**

## 2. INTRODUCTION AND BACKGROUND:

2.1 Our Organisational Development Strategy sets high aspirations, one of these being;

*“We want a healthy, diverse, lively and vibrant organisation where staff feel supported, where the physical environment, the nature of the job and the balance between home and work enable staff to work effectively, safely and have fun”.*

2.2 With particular reference to the health and well-being of staff the strategy states that the council will:

- Improve attendance and reduce sickness through the promotion of health and wellbeing and effective management
- Embed the management of health and safety throughout the organisation
- Use performance indicators and feedback from staff to monitor and continuously improve the morale and ‘health’ of the organisation

2.3 Sickness absence remains a significant challenge for the council. Despite the introduction of a number of corporate initiatives, and a gradual decline in absence over the past 2 years, absence rates remain above national averages. In addition the absence rates for the first quarter of 2013/14 show an increase in sickness absence which, if continued, take the council back up to average levels of over 11 days per employee – the council’s challenging target for 2013-14 is 8.5 days.

2.4 Stress related absence has been a consistently high factor in the council’s absence statistics; it is frequently highlighted through our performance management process and is intensely scrutinised by members. Despite multi-faceted and targeted efforts, levels have continued to be high.

2.5 This report sets out the latest situation and initiatives for responding to stress-related sickness absence and improving the wellbeing of the workforce.

2.6 A stress action plan developed in 2011 was reviewed and evaluated last year – the outcome was presented to Directors Board in February as part of a wider report on Staff Health and Well-being. The majority of the actions were delivered and some further recommendations proposed, which have either been actioned or are planned. Since then the following activities have taken place:

### 2.7 ACTIONS DELIVERED

- The CIPD/HSE **management competencies** relating to stressors are now incorporated into the wider Leadership and behaviours framework within the Management Handbook.
- Human Resources Advisers are escalating to DMT’s at their monthly meeting regarding outstanding RTW interviews and triggers that have been met, which have not been undertaken/recorded.

- The “ownership” for the Wellbeing and Stress management policy has been transferred to the **OD Team** to link more closely in with wider Managing Sickness Absence, Occupational Health and Health and Well Being agenda.
- Further work is ongoing on the format and content of the quarterly stress report to Corporate HR, Equalities and Cultural Change Board (CHRECC) to make information more meaningful, at both corporate, and service level and to align it to the performance reports.
- Stress Absence remains an indicator to be monitored in the corporate scorecard.
- The Stress Risk Assessment forms and process have been reviewed and training rolled out to managers,

## **2.8 TRAINING AND PROGRAMMES**

2.8.1 From February to June 2013, an external contractor was commissioned to deliver half-day training sessions to all frontline managers within Thurrock Council. Altogether 16 sessions of training were delivered with an aim to provide training for 289 managers. Overall the training has been very well received and managers have indicated a better understanding of what is expected and report improved confidence as regards the stress risk assessment process.

2.8.2 A new Health and Well Being programme has also been launched. This focuses on building resilience and supporting managers and employees in managing and coping with change. There will be two courses:

### **2.8.3 Managers Programme**

- Regular programme for new managers on stress risk assessment.
- Stress Risk Assessment (in corporate programme).
- Promoting Positive Attendance (which will be aligned to all Well Being procedures including stress risk assessments, as part of the induction process).
- Leadership & Management Development programme – Resilience and Change Management.

### **2.8.4 Core programme for staff**

Managing your Well Being and building ‘Personal Resilience’ – pilot programme in July. The pilot will be reviewed to assess take up and plan for wider programme. If demand and outcomes are successful the programme will be incorporated into the corporate programme. Part of the pilot programme will be conducted within Children’s Social Care where team stress risk assessments are being completed.

2.8.5 The programme will be reviewed in autumn 2013 to assess progress and to support the wider development of a Well Being programme. A wider programme could be developed dependent on available resources.

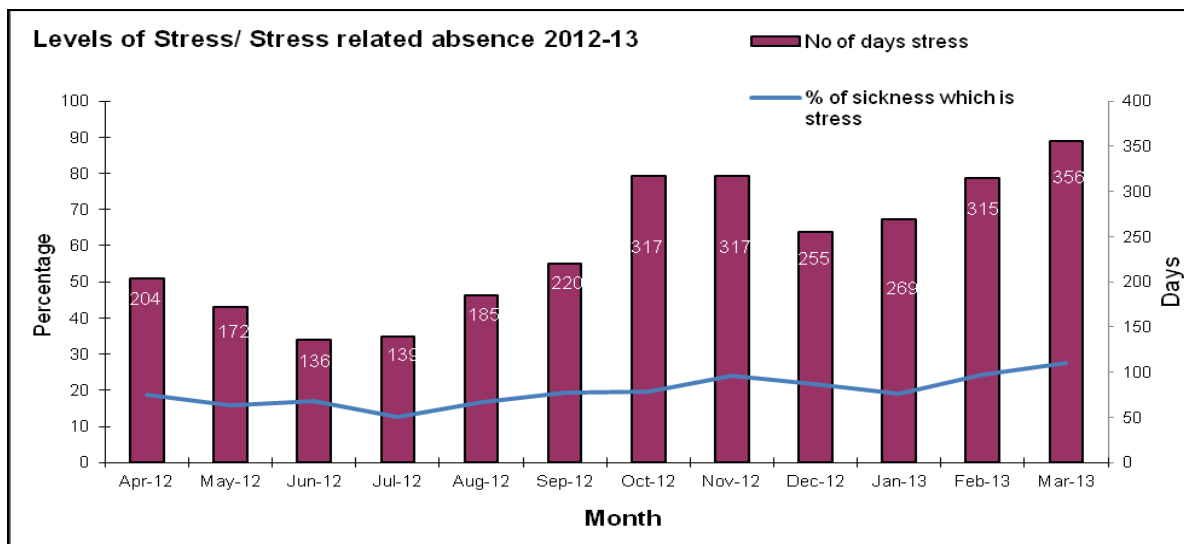
### 3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

3.1.1 Corporate Overview and Scrutiny Committee requested further analysis of stress-related absence.

3.1.2 In the CIPD/Simply Health Annual Absence Survey Report for 2012 two-fifths of organisations reported an increase in stress-related absence over the past year, rising to half in the public sector. The top causes of stress at work were reported as workloads, management styles and relationships (both at and outside work).

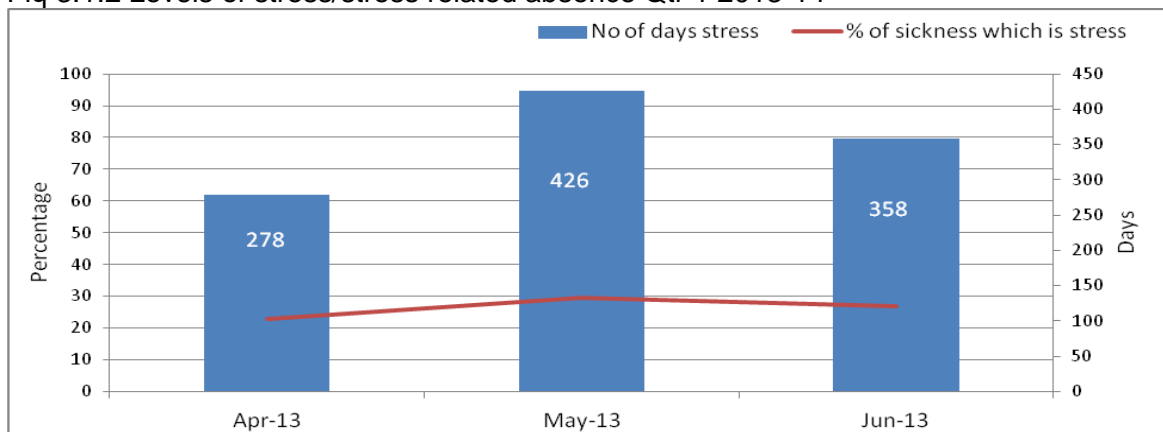
3.1.3 This mirrors the position at the Council. Stress/stress related absences were one of the top 3 causes of absence throughout 2012-13. During the first quarter of 2013-14, stress-related absence has been the cause of more days sickness absence than any other reason each month.

Fig 3.1.1



[Source: HRMI packs]

Fig 3.1.2 Levels of stress/stress related absence Qtr 1 2013-14



[Source: HRMI packs]

3.1.4. Whilst the number of people reporting stress as the cause of their absence is still relatively low (normally between 20 and 30 individuals at any one time out of a total of approximately 1800 staff), these figures have increased during the first quarter of 2013-14.

3.1.5 It should be noted that not all of these individuals identified work issues to be the cause of their stress. The causes of stress are usually multi-factoral, a mixture of personal and work-related issues. Based on the number of occurrences, the percentage of work-related (self-reported) stress for 2012-13 was 58% for the year. The cumulative year to date so far in 2013-14 is 45%. (see Figs. 3.2.1 and 3.2.2).

### 3.2 ANALYSIS OF STRESS BY SERVICE

Fig 3.2.1 – Number of days of stress related absence by service during 2012-13

Service	A	M	J	J	A	S	O	N	D	J	F	M	Total no of stress days	Total no of days sick	% sickness which is stress	No of cases/ occurrences	% Work Related Stress
Plan/Trans	0	1	0	1	0	6	0	0	0	22	20	39	89	514	17.32	5	22
Environment	19	27	19	22	52	60	69	66	48	44	47	40	513	2610	19.66	6	75
Corp Finance	4	0	0	0	0	0	0	0	0	0	12	20	36	159	22.64	2	100
Info Mgt	0	0	0	0	0	0	0	0	0	0	0	0	0	17	0.00	0	0
PA Office	0	0	0	0	4	18	0	0	0	0	0	0	22	87	25.29	1	0
Asset Mgt	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0.00	0	0
Bus Services	0	0	0	0	0	0	0	0	0	0	0	0	0	6	0.00	0	0
Legal	0	0	0	0	0	0	14	7	6	22	4	0	53	215	24.65	2	62
Housing	19	29	33	23	15	29	61	32	18	22	9	20	310	1487	20.85	9	10
HROD	0	0	0	0	0	0	0	0	0	0	0	4	4	102	3.92	1	0
CEDU	0	0	0	0	0	0	0	0	0	0	0	0	0	149	0.00	0	0
CATO	2	0	5	22	22	1	2	19	0	12	50	20	155	1384	11.20	36	48
LUO	97	60	23	26	38	52	120	129	118	76	98	143	980	2732	35.87		
Catering	7	12	4	5	5	5	1	0	0	0	8	10	57	515	11.07		
Commiss'g	20	19	9	0	11	5	0	4	10	0	0	0	78	536	14.55	31	64
SC (Adult)	36	23	44	29	38	38	50	60	55	70	66	60	569	2928	19.43		
Public Protection	0	0	0	0	0	7	0	0	0	0	0	0	7	332	2.11	1	0
<b>Whole Council</b>	<b>204</b>	<b>172</b>	<b>136</b>	<b>139</b>	<b>185</b>	<b>220</b>	<b>317</b>	<b>317</b>	<b>255</b>	<b>269</b>	<b>315</b>	<b>356</b>	<b>2885</b>	<b>12777</b>	<b>22.58%</b>	<b>94</b>	<b>56%</b>

[Source: HRMI packs and "Absence Manager" database]-

NB shaded cells denotes service percentage is higher than the whole council percentage

Fig 3.2.2 – Number of days of stress related absence by service during Q1 2013-14

Directorate	Service	April	May	June	Total no of stress days (Q1)	Total no of days sick (Q1)	% sickness which is stress-related (Q1)	No of cases/ occurrences (Q1)	% Work Related Stress (Q1)
Plan & Trans	Planning & Trans	21	12	0	33	151	21.9%	1	0%
Environment	Environment	33	55	70	158	947	16.7%	8 (1 repeat)	75%
Chief Executive's Office	Corp Finance	21	27	0	48	65	73.8%	2	50%
	HROD	0	0	0	0	50	0.00%	0	0%
	Legal	0	0	0	0	78	0.00%	0	0%
Housing	Housing	21	21	56	98	429	22.8%	3	100%
	Bus Services	0	0	0	0	35	0.00%	0	0%
CEX Deliv	CEX Deliv Unit	0	0	0	0	18	0.00%	0	0%
Children Services	CATO	29	34	2	65	356	18.3%	14	50%
	LUO	97	115	85	297	693	42.9%		
	Catering	0	0	67	7	142	4.9%		
Adults, Health & Commissioning	Commissioning	0	16	4	20	100	20%	16 (3 repeats)	44%
	SC (Adult)	56	147	134	337	933	36%		
	Public Health	0	0	0	0	16	0%		
Whole Council		278	426	358	1062	4015	26.45	44	45.45%

[Source: HRMI packs and "Absence Manager" database]

NB shaded cells denotes service percentage is higher than the whole council percentage

- 3.2.1 The shaded cells in the tables above highlights the areas which have higher stress / work-related stress than the council wide figure.
- 3.2.2 It is important to set this in the context of the relatively low numbers of incidences in some of these areas – for instance 50% work-related stress in an area which had 2 cases of stress means one person.
- 3.2.3 Similarly, the number of incidences seems high in Children’s Services and Adults, Health & Commissioning (formerly People Services Directorate), however this is not necessarily disproportionate given these services have the largest number of employees in the council (767 and 362 respectively).
- 3.2.4 Over the two periods above (whole of 2012-13 and first quarter of 2013-14) a specific trend is the relatively high levels in Learning and Universal Outcomes. Service areas have been pro-actively tackling stress. This issue was identified early in 2012-13 and there has been significant work with those individuals, their managers, HR and Occupational Health to support these individuals.

### 3.3 ANALYSIS OF HSE CAUSE OF STRESS

Fig 3.3 below analyses the causes of stress by the nationally recognised Health and Safety Executive (HSE) work-related stressor categories. Appendix 1 defines these stressor categories and also details how each one has identified and been rated through the council’s stress risk assessment process.

Fig 3.3 – HSE stressor category of work related stress related absence during Q1 2013-14

Service	No of staff absent due to work related stress	No who returned to work in Q1	Cause of work related stress (of those who were referred to Occupational Health and completed a stress risk assessment during Q1)					
			Demands (average out of 8)	Control (average out of 3)	Support (average out of 2)	Relationships (average out of 4)	Role (average out of 4)	Change (average out of 3)
Environment	5	3	3	3	2	0	4	2
Chief Exec Office	1	0	n/r	n/r	n/r	n/r	n/r	n/r
Housing	3	0	n/r	n/r	n/r	n/r	n/r	n/r
Children's	7	3	4	3	2	1	3.5	2
Adults	7	5	3	2	2	1.3	4	2.3
<b>Whole Council</b>	<b>23</b>	<b>11</b>	<b>3.3</b>	<b>2.6</b>	<b>2</b>	<b>0.76</b>	<b>3.8</b>	<b>2.1</b>
<b>Weighting out of 100</b>			<b>41</b>	<b>87</b>	<b>100</b>	<b>19</b>	<b>95</b>	<b>70</b>

[Source: Stress Risk Assessments]

NB individuals can attribute more than one factor as a stressor up to a maximum of 24 factors

3.3.1 For the first quarter of 2013-14 there were 23 staff absent with work-related stress. 11 of these staff returned within the same period. By analysing the reasons given for stress as categorised using the stress risk assessments we can see that the two main “stressors” are support and role.

Appendix 1 shows the details behind all the categories.

**3.3.2 Support** - includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues;

- Should your work get difficult, do you have the support and help from your colleagues /manager available?
- Are you given supportive feedback on the work you do?

**3.3.3 Role** - Whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles;

- Are you clear on what is expected within your role?
- Do you understand your duties and responsibilities?
- Do you know how to go about getting your job done?
- Do you know the goals and objectives for the department

### 3.4 ANALYSIS OF STRESS BY DIVERSITY STREAM

Fig 3.4.1 – incidences of stress related absence by diversity stream during Q1 2013-14

Age Profile	16-24	25-34	35-49	50-64	65+
No of people with stress	1	6	23	13	0
% of all stress in this age group	2.30	13.90	53.50	30.20	0.00
% total workforce in this age group	3.76	14.48	40.66	37.89	3.21

Ethnic Group	White	BME	n/a
No of people with stress	38	5	0
% of all stress in this ethnic group	88.40	11.60	
% total workforce in this ethnic group*	84.92	9.09	

\*Does not add to 100% as not all employees disclose their ethnic group

Gender	Male	Female
No of people with stress	16	27
% of all stress in this gender group	37.20	62.80
% total workforce in this gender group	34.02	65.98

[Source: HRMI packs, "Absence Manager" and Oracle HR database]

Fig 3.4.2 – incidences of stress related absence by diversity stream during 2012-13

Age Profile	16-24	25-34	35-49	50-64	65+
No of people with stress	4	16	40	33	0
% of all stress in this age group	4.30	17.20	43.01	35.48	0.00
% total workforce in this age group	3.76	14.48	40.66	37.89	3.21

Ethnic Group	White	BME	n/a
No of people with stress	82	9	2
% of all stress in this ethnic group	88.17	9.68	
% total workforce in this ethnic group*	84.92	9.09	

\*Does not add to 100% as not all employees disclose their ethnic group

Gender	Male	Female
No of people with stress	26	67
% of all stress in this gender group	27.96	72.04
% total workforce in this gender group	34.02	65.98

[Source: HRMI packs, "Absence Manager" and Oracle HR database]

NB Shaded cells denote where the percentage of stress in a particular diversity group is higher than the proportion of that group in the workforce profile

3.4.1 The only repeat trend over both of the two time periods is that there is a higher prevalence of stress amongst employees aged 35-49 than any other group.



### 3.5 ANALYSIS OF STRESS BY TYPE/GRADE OF ROLE

Fig 3.5.1 – incidences of stress related absence by paygrade during Q1 2013-14

Pay grade	Band 1	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8	Band 9	Band 10	Other (inc Senior Manager, Soulbury, Teachers & Youth Workers)
No of people with stress	0	2	10	4	8	6	3	0	3	0	7
% of all stress in this paygrade	0.00	4.70	23.30	9.30	18.60	13.90	6.90	0.00	6.90	0.00	16.3
% total workforce in this paygrade	5.17	4.8	15.84	15.52	15.19	13.15	9.48	5.6	2.32	0.59	1.27

[Source: HRMI packs, "Absence Manager" and Oracle HR database]

Fig 3.5.2 – incidences of stress related absence by paygrade during 2012-13

Pay grade	Band 1	Band 2	Band 3	Band 4	Band 5	Band 6	Band 7	Band 8	Band 9	Band 10	Other (inc Senior Manager, Soulbury, Teachers & Youth Workers)
No of people with stress	2	2	14	13	19	11	4	8	1	1	17
% of all stress in this paygrade	2.15	2.15	15.05	13.98	20.43	11.83	4.30	8.60	1.08	1.08	18.28
% total workforce in this paygrade	5.17	4.8	15.84	15.52	15.19	13.15	9.48	5.6	2.32	0.59	1.27

[Source: HRMI packs, "Absence Manager" and Oracle HR database]

NB Shaded cells denote where the percentage of stress in a particular band is higher than the proportion of that band in the workforce profile

3.5.1 The repeat trends over both of the two time periods shown above show that there is a statistically disproportionate level of stress related absence in employees who are Band 5, and the joint category of Soulbury, Teachers and Youth Workers. In the first quarter of 2013-14 there was also a significant prevalence of Band 3.

### 3.6 ANALYSIS OF COINCIDENCE OF STRESS CASES and BUDGET CUTS

Finance have conducted an analysis and there is no evidence of a direct link between areas which have seen budget cuts and those which have higher levels of stress. Some areas which have received cuts do have comparatively high levels of stress, but equally some areas with large cuts had no stress at all. It is difficult to prove one way or another based on timing of budget cuts.

However, the council recognises that large financial cuts/restructures will have an unsettling effect on employees which can impact sickness levels and this forms part of the monitoring and support mechanisms which are in place.

### **3.7 CONCLUSIONS BASED ON ABOVE ANALYSIS**

As members will clearly see from the data it is difficult to make any absolute conclusions, predominantly because the sample size is comparatively small. It is worth reiterating that stress-related absence accounted for 94 incidences of sickness in 2012-13, which in terms of people is approximately 5% of the whole workforce. Fluctuations, peaks and troughs are therefore sometimes affected disproportionately by one or two incidences. Where there have been apparent hotspots additional support has, and continues to be offered.

Although occurrences are relatively small, over a quarter of the council's total sickness absence is stress related. The impact on individuals - and the knock-on effect on their teams - can be significant. Therefore, actions to reduce absence and improve health and well-being will continue in line with the Organisation Development Strategy.

It is for this reason that the council's approach has been to treat every case on an individual basis. Stress is different to many other "illnesses" in that it impacts differently and is impacted by different things for each and every person. Reasons for stress and stress-related illness are multi-faceted and complex – usually a mixture of personal and work-related issues, and even those which finally manifest themselves as work-related may be rooted in underlying, existing personal issues. Simple, generic solutions are not appropriate.

The council has raised awareness of stress through briefings, training, health and well being events and directorate management team reports. Service areas have been pro-active about tackling stress within their teams. In addition, the council operates a policy whereby any sickness reported as stress-related absence, regardless of the length of that absence, should be automatically referred to Occupational Health and a stress risk assessment conducted.

The council has contracted with an external independent counselling service to offer the Employee Assistance Programme (EAP), which offers support and advice to employees, their families and members on a range of issues, work-related and personal.

Each case of stress related absence is treated seriously and a resolution worked upon jointly by the employee, their manager, occupational health and HR as necessary.

### **3.8 RECOMMENDATIONS BASED ON ABOVE CONCLUSIONS**

It is recommended that the monitoring of stress continues in the format of the corporate performance report which is presented to Corporate Overview and Scrutiny Committee on a quarterly basis. It is recommended that the stress performance indicator is a consistent "IN FOCUS" item for the remainder of the year.

**4. REASONS FOR RECOMMENDATION:**

- 4.1 A monitoring method is already in place for this. There is a significant amount of both officer and member scrutiny on this issue, through team, service and directorate meetings and onwards to Performance Board, Corporate HR Equalities and Cultural Change Board (CHRECC) and Corporate Health & Safety Board, culminating in Cabinet and Corporate O&S scrutiny.

**5. CONSULTATION (including Overview and Scrutiny, if applicable)**

- 5.1 There has been no consultation on this report.

**6. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT**

- 6.1 Reducing levels of stress amongst the workforce will help the council ensure the effective and efficient delivery of the priorities.

**7. IMPLICATIONS**

**7.1 Financial**

Implications verified by: **Mike Jones**  
Telephone and email: **01375 652772**  
**mxjones@thurrock.gov.uk**

There are no direct financial implications arising, however any recovery planning commissioned by the Council may well entail future financial implications, which will be considered as appropriate.

**7.2 Legal**

Implications verified by: **Daniel Toohey**  
Telephone and email: **01375 652049**  
**daniel.toohey@BDTLegal.org.uk**

As an employer, the council is required by law, under the Health and Safety Act to assess the risk of stress-related ill health arising from work activities and take action to control that risk. This report details actions that the council is taking in relation to supporting employees and managers with sickness absence issues.

The initiatives undertaken by the council suggest that as an organisation the council is doing more than most organisations in relation to supporting employees and managers with sickness absence issues, including

implementing the best practice HSE standards in relation to stress management.

### 7.3 **Diversity and Equality**

Implications verified by: **Samson DeAlyn**  
Telephone and email: **01375 652472**  
**sdealyn@thurrock.gov.uk**

Analysis has been undertaken as part of this report to consider whether there are any particular diversity groups for which the rates of stress related absence are disproportionately high or low. No such statistic evidence was found. As such there are no direct diversity and equality implications arising from this report.

### 7.4 **Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental**

There are no other relevant implications.

### **BACKGROUND PAPERS USED IN PREPARING THIS REPORT (include their location and identify whether any are exempt or protected by copyright):**

- Not applicable

### **APPENDICES TO THIS REPORT:**

- Appendix 1 : HSE Stressor categories and stress risk assessment factors

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## APPENDIX 1

### HSE Stressor categories and stress risk assessment factors

**Demands** - includes issues like workload, work patterns, and the work environment;

- Are deadlines within your role unachievable?
- Are you required to work long hours?
- Are your time pressures unrealistic?
- Are you subject to work demands from different groups that are hard to combine?
- Is your work boring, monotonous or unchallenging
- Does your role involve excessive physical demands such as heavy lifting; standing for long periods of time; repetitive movements that are causing concern
- Is your work environment adequate / comfortable?
- Is it free from hazards such as cigarette smoke and unacceptable levels of noise

**Control** - how much say the person has in the way they do their work;

- Do you have any say in how you do and plan your work
- Can you set your own work pace
- Can you decide when to take a break?

**Support** - includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues;

- Should your work get difficult, do you have the support and help from your colleagues /manager available
- Are you given supportive feedback on the work you do

**Relationship** - includes promoting positive working to avoid conflict and dealing with unacceptable behaviour;

- Are you subject to personal harassment in the form of unkind words or behaviour?
- Is your relationship at work strained?
- Is there friction and anger between you and your colleagues?
- Are you subject to bullying?

**Role** - Whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles;

- Are you clear on what is expected within your role?
- Do you understand your duties and responsibilities?
- Do you know how to go about getting your job done?
- Do you know the goals and objectives for the department

**Change** - How organisational change (large or small) is managed and communicated in the organisation.

- Are you consulted / updated about changes at work that affect you.
- Are you clear about how the change will affect you in practice?
- Is there adequate consultation about workplace issues / changes