ANNEX 1
Workforce Data Summary – Quarter 2 Update 2022/23

1. RBBC's workforce is key to the success of our organisation and service delivery, and therefore consideration of our employee workforce data is essential to help guide future workforce planning and organisational strategy.

2. In addition to employee demographics, we also capture and analyse additional data to help us measure the success of our people management strategies, policies and procedures.

3. We use various methods to resource the work of the Council – permanent and fixed term employees (with full time and part time hours worked), workers (including casual workers), agency staff, contractors and ad hoc consultants. For the latter three groups of worker, we do not hold direct/personal data about them as they are not directly employed by the Council. The information contained within this report therefore relates to directly employed staff.

4. The Portfolio Holder for Corporate Policy and Resources/Chair of the Employment Committee will also be consulted in the case of unusual or unexpected issues (raising of exceptional circumstances) occurring within the organisation, including sickness absence concerns.

5. At the Employment Committee meeting on 29th July 2019, it was agreed that employee demographic and organisation workforce measures data would be reported to the Committee annually, at the first Employment Committee meeting of the municipal year, with the exception of sickness absence and turnover data. These two measures would be reported to the Committee twice a year - at the start of the municipal year and again after six months (i.e. Q2 and Q4 reporting). The information below is therefore the six-month update to the Employment Committee on sickness absence and turnover data as the end of quarter 2 2022/23.

Organisation workforce measures
6. On a regular basis, we collate data on a number of indicators to help us assess the organisation's health of workforce stability, performance and effectiveness of people management policy & procedures. These are reported internally to the officer Corporate Pay Group and the Corporate Governance Group.

Employee sickness absence
7. The most recently available sickness absence data information contained within this report is a rolling cumulative 12-month period.

8. The average total number of days lost to sickness absence has decreased overall and is currently at 3.22 days when compared to the previous reporting period and remains under our target of 4.0 days. It should however be noted that COVID-related absences are now included in our standard sickness absence reporting.

9. The Chartered Institute of Personnel & Development's (CIPD) 'Health and Wellbeing at Work Report' released in April each year is usually the most up to date report available to compare our averages against other public sector and

private sector organisations. The pandemic and the government's response in terms of interventions made, has had a deep impact on the UK labour market. Temporary absences from work increased nationally as many businesses had to close temporarily or operate at reduced capacity, with considerable numbers of employees furloughed, shielding or isolating. The disruption to many businesses in terms of working time has been incalculable in many ways and still continues to have impact.

10. The survey data for April 2022 shows that two years on, the coronavirus pandemic continues to heavily influence employee health and wellbeing. The virus has caused severe disruption due to absence, while many organisations have employees with long COVID. Although organisations are clearly still committed to supporting their people, evidence suggests that activity in this area is starting to slip nationwide, and a more holistic approach – based on the health risks and needs of the workforce – is needed.

Key findings of the CIPD report

11. There is less management focus on health and wellbeing compared with the first year of the pandemic. Evidence points to a small but disappointing slip in attention to employees' mental and physical health. Seven in ten (70%) of HR respondents agree that employee wellbeing is on senior leaders' agendas (down from 75% last year) and 60% believe that line managers have bought into the importance of wellbeing (down from 67% last year).

12. More organisations are taking steps to tackle presenteeism. Working when ill (presenteeism) remains prevalent – and is even higher for those working from home (81% versus 65% among those in a workplace). In response, 52% of HR respondents to the survey are taking steps to address this trend and investigate potential causes.

13. COVID-19 continues to have a huge impact on employee health. Only 3% of organisations haven't suffered any COVID 19-related absence, and just under half (46%) have employees who have experienced – or are experiencing – long COVID. Long COVID is now a major cause of long-term absence.

14. New or better support for people working from home. Just under three-quarters of organisations (72%) are providing new or better support for people working from home. For example, nearly half (47%) are encouraging more responsible use of digital technologies, acknowledging that regular movement breaks and time away from screens are essential for health and wellbeing.

What this means for the Council

15. The Council takes its staff health and wellbeing very seriously and has measures in place to track, monitor and where possible prevent re-occurring illness.

16. The emerging HR&OD strategy also focuses on wellbeing and the Council will be producing a wellbeing sub strategy in the new Municipal Year.

17. Benchmarking of our sickness absence data remains a challenge more broadly. This is due to how data is recorded, measured and calculated by other organisations – so there's a risk we could be comparing apples with pears. This remains the case even for Local Authority organisations – no standard definition is applied to determine what constitutes short-term absence or long-term absence.

Reasons for absence

18. The top ten reasons for sickness absence are shown on the final page of this report.

19. ONS data revealed that depression rates in the UK had doubled since the COVID-19 pandemic began and this continues to be a featuring trend within the Council (although not the main cause of sickness).

20. In addition to offering employees access to the Employee Assistance Programme (a free and confidential service to staff provided by the Council, which grants online and face to face Counselling and support), we equip managers and employees with the skills to manage and reduce the negative effects of these conditions, through personal resilience training and mental health first aid. The figures are showing a slight upward trend in absences related to stress, anxiety or depression. As well as continuing to work with managers on the individual cases to support employees and manage these absences, HR are reviewing the data in a broader sense to consider and recommend corporate interventions needed in this area and will be addressed in the new wellbeing strategy.

21. Back related pain continues to be the main cause of sickness absence and HR work closely with Health & Safety on this matter to better mitigate this cause of sickness.

Employee turnover (attrition)

22. RBBC's voluntary (resignation) employee turnover rate has increased to 16% compared to the target rate of 12%.

23. This is not an unusual trend in the general marketplace at present. Due to COVID employees were deferring moving jobs due to uncertainty and job security during the pandemic. As restrictions have relaxed and the rise of the 'great resignation' took hold in the marketplace (and indeed a period of refection by some individuals with work/life balance or simply leaving the marketplace altogether) the Council has seen numbers of resignations slowly rise. We anticipate this trend to continue at least for the next two quarters (resignations early in the new year are common as employees look to start new roles). We will continue to monitor the rates and compare exit interview data to see what further interventions (if any) are required or if this is simply natural churn after a challenging two years, which will settle back to a natural pattern.

24. Again, similar to the sickness benchmarking challenge, our neighbouring local authority colleagues approach the recording and reporting of turnover figures in different ways.

Conclusion

25. In summary, we are seeing there has been a downward trend in our short-term sickness absence overall and in terms of staff turnover, we are currently above our threshold target and expect this to continue for at least the next 6 months, however it is an issue that HR and managers are closely monitoring.

Q2 2022/23 Key Performance Indicators

KPI	Status	Portfolio Holder
KPI 3 – Staff Turnover	RED	Cllr Lewanski
KPI 4 – Staff Sickness	GREEN	Cllr Lewanski

KPI 3 – Staff turnover

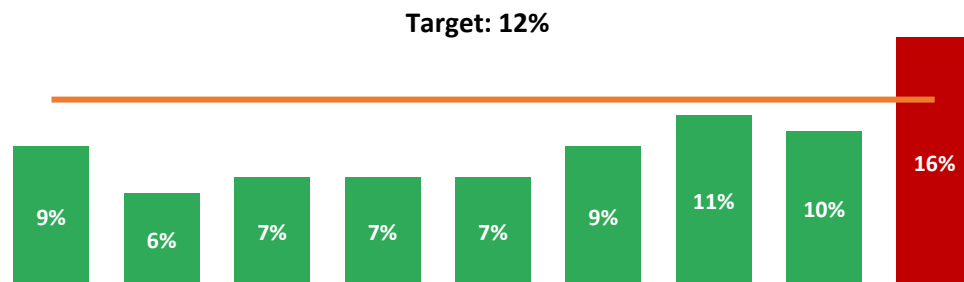|	TARGET	ACTUAL	STATUS
Q1	12%	10%	GREEN
Q2	12%	16%	RED
Q3	12%		
Q4	12%		

Description

This indicator tracks the percentage of staff that leave the organisation on a voluntary basis. The performance reported is for a cumulative rolling 12 month period.

Narrative

Levels of staff turnover were in excess of target in Q2. However, the Council has previously seen lower than expected turnover (see historic trends in the graph below). The Pandemic, a buoyant labour market and pent-up demand for a move in job are likely to have contributed to this increase. The current uptick in turnover is being managed, with workloads carefully monitored and balanced and resources redeployed if required.

Staff Turnover

Target: 12%

9% | 6% | 7% | 7% | 7% | 9% | 11% | 10% | 16%

KPI 4 – Staff sickness absence

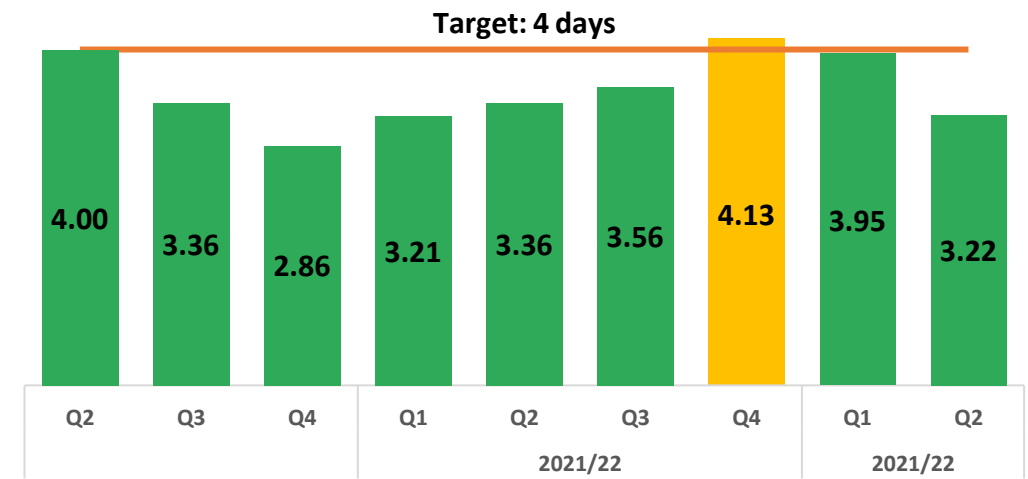|	TARGET	ACTUAL	STATUS
Q1	4 days	3.95 days	GREEN
Q2	4 days	3.22 days	GREEN
Q3	4 days		
Q4	4 days		

Description

This indicator tracks the average duration of short term sickness absence per employee. The performance reported at the end of each quarter is for a cumulative rolling 12 month period. The indicator measures all non Covid-19 short term sickness absence.

Narrative

Q2 has seen staff sickness levels remain within target range with levels down slightly from Q1, to just over 3 days average for the Q2 reporting period.

Staff sickness absence (days)

Target: 4 days

Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
4.00	3.36	2.86	3.21	3.36	3.56	4.13	3.95	3.22
			2021/22				2021/22	

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Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
				2021/22			2022/23	

Days lost to the top 10 absence reason in the last year (Covid excluded)

Absence Reason ● Back Pain ● Cancer/Malignancy ● Cold/Flu ● Diarrhoea, vomiting or st... ● Stress (non-work relat... ● Anxiety ● Covid 19 ● Stress (work related) ● Heart/Chest Con... ● Prostrate problem

Absence Reason

Days lost to the top 10 absence reason in the last year (Covid excluded)

Absence Reason ● Anxiety ● Back Pain ● Cancer/Malignancy ● Cold/Flu ● Covid 19 ● Depression ● Diarrhoea, vomiting or stomach p... ● Prostrate problems ● Stress (non-work related) ● Stress (work related)

Year Month number