Report of the Director of Corporate Services

Governance and Audit Committee – 8 February 2023

Social Services
Absence Management Audit Report Update

Purpose:	To provide an update on the Absence Management audit report in relation to the Social Services Directorate.
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For Information	

1. Introduction

1.1 As a result of the first internal audit on Absence Management across the Council carried out in 2020, an assurance level of moderate was given.

1.2 An action plan was developed to address the issues identified and appropriate implementation steps put in place.

1.3 An Update Report was provided to the Audit Committee in September 2022 and it was requested that additional details be provided in relation to sickness within the Social Services Directorate.

2. Further progress as at September 2022

2.1 As reported previously, in line with the Oracle Fusion project a Manager dashboard is in development and nearing readiness for User Acceptance testing. This will provide real time information for all Managers with absence management responsibility and provide them with information on the following:-

- Staff absent due to sickness (within their area only) and days lost
- Return to Work Interviews Outstanding

- Record of Action Meetings Outstanding

This information will also be available to the "Manager's" Manager, providing additional data and information to improve Absence Management across the authority.

2.2 The monthly reminders to Managers has had a positive impact in terms of queries and requests for additional training.

2.3 Development of the Learning Module in Fusion is progressing and will provide an additional tool to further improve compliance in completing mandatory sickness management training.

2.4 Management of Absence Advisors have been appointed in the Education, Place and Social Services Directorates to support Managers in ensuring compliance with our Sickness Absence Policy and to identify pro-active ways in managing and reducing sickness.

This has included;

- Support to progress current Long Term Sickness cases of over 6 months and address cases which are progressing into 6 months and over.

- Early interventions in sickness cases to support managers and employees in progressing cases as appropriate.

- Strengthening links with Occupational Health by arranging review meetings with the OH Team to assist Managers by discussing next step plans at an earlier stage.

- Provision of additional dedicated clinics for Social Services staff, to minimise the waiting times between referrals and appointments.

- Manager training, guidance and upskilling.

- Support with Manager Compliance

Stress and Coronavirus related absences are being monitored and have started to decrease. This will continue to be a key focus for the team going forward.

3. Social Services Update

3.1 Breakdown of Sickness Per Section

The following is a breakdown of Long Term Sickness days and Intermittent Sickness Days for Social Services per Section within each Service Area for the Period 1st April to 31st December 2022

Service Unit	Section	Emp Headcount	Total Days Sick	Days Lost to Long Term Sickness	Days Lost to Intermittent Sick	Average days sickness - Target	Average Days Sick (Actual)
Adult Services	Community Resource (Adult Services)	86	1504	1178	326	7.5	19.47
Adult Services	Integrated Supported Care Planning	277	7360	5675.5	1684.5	7.5	33.21
Adult Services	Mental Health & Learning Disabilities	57	899.5	667	232.5	7.5	16.85
Adult Services	Prevention, Wellbeing & Commissioning	35	337	273	64	7.5	10.13
Adult Services	Safeguarding	23	111	39	72	7.5	4.91
Adult Services	Service Provision (Adult Services)	485	8073	5547.5	2525.5	7.5	21.47
Adult Services	Transformation (Adult services)	67	587.5	348	239.5	7.5	8.98
Adult Services	Service Management	2	8	0	8	7.5	4.00
TOTAL		1032	18880	13728	5152	7.5	22.17
Child & Family	Adolescent and Young People Services	67	773	554	219	7.5	11.76
Child & Family	Adoption Swansea (WB)	39	219	110	109	7.5	7.02
Child & Family	Care and Support Services	70	592.5	486	106.5	7.5	8.65
Child & Family	Commissioning and Care Services	70	470.5	314	156.5	7.5	7.20
Child & Family	Early Help and Single Point of Contact	224	1992	1444.5	547.5	7.5	10.10
Child & Family	Family Support Services	112	1241.5	866	375.5	7.5	12.99
Child & Family	Residential Support	20	74	0	74	7.5	3.86
Child & Family	Safeguarding and Performance	28	145	103	42	7.5	5.37
Child & Family	Service Development Team (CF)	9	12	0	12	7.5	1.33
Child & Family	Service Management	1	0	0	0	7.5	0.00
TOTAL		640	5519.5	3877.5	1642	7.5	9.52
Commissioning Hub	Capital Team (Commissioning)	1	0	0	0	7.5	0.00
Commissioning Hub	Commissioning Team	3	4	0	4	7.5	1.33
Commissioning Hub	Community Integration Team	14	22	0	22	7.5	1.74
Commissioning Hub	Early Years and Play	48	207.5	93	114.5	7.5	5.10
Commissioning Hub	Finance Team (CommHub)	28	150	111	39	7.5	5.57
Commissioning Hub	Partnership and Involvement Team	8	0	0	0	7.5	0.00
Commissioning Hub	Service Management	1	0	0	0	7.5	0.00
TOTAL		103	383.5	204	179.5	7.5	4.11
Directorate Reports	Business and Support Services	198	1801.5	1141.5	660	7.5	10.19
Directorate Reports	WCCIS System Support Team	11	203.5	190	13.5	7.5	18.50
Directorate Reports	Service Management	1	13	0	13	7.5	13.00
TOTAL		210	2018	1331.5	686.5	7.5	10.69
Tackling Poverty	Community Learning and Development	27	10.5	0	10.5	7.5	1.18
TOTAL		112	961.5	551	410.5	7.5	10.78
West Glamorgan		26	154	102	52	7.5	5.92
TOTAL		26	154	102	52	7.5	5.92
DEPT TOTAL		2123	27916.5	19794	8122.5	7.5	15.27

3.2   Reasons for Absence

The top 5 Absence Reasons based on working days lost for the period 1st April to 31st December 2022 are as follows;

Social Services

Stress	32.57%
Coronavirus	15.25%
Hospitalisation	5.41%
Stomach Complaints	5.29%
Carcinoma/Cancer/Leukaemia	4.65%

Adult Services

Stress	24.90%
Coronavirus	13.50%
Hospitalisation	4.31%
Stomach Complaints	3.43%
Carcinoma/Cancer/Leukaemia	3.09%

Child and Family Services

Stress	27.50%
Coronavirus	9.33%
Hospitalisation	3.75%
Influenza/Cold	3.22%
Stroke	3.18%

3.3   Summary of the Measures and Mechanisms that the Management of Absence role plays to support the Social Services Directorate to manage Sickness Absence.

3.4   **Support to address high levels of cases which are progressing into 6 months and over.**

Long Term sickness (LTS) was identified as a key priority. A system to ensure that all LTS cases are monitored and supported from month 4 onwards is now in place. This consists of a regular case review meeting with the manager to discuss OH advice, devise next step plans and provide HR support and invention when required.

3.5   **Working in conjunction with the Occupational Health Service to monitor best use of Occupational Health Referrals and Appointments**

Monthly review meetings with Occupational Health and reports devised to monitor compliance in terms of Occ Health Referrals and appointments and HR intervention when required to discuss next step plans.

Additional guidance in terms of making OH referrals has been built into the Department's Management of Absence training.

Providing additional admin support when chasing outstanding GP reports, to help minimise the waiting time for ill health retirement recommendations.

3.6 Training, guidance and upskilling.

Regular Management of Absence training is provided to all Managers across the directorate as and when required.   With future plans to develop a similar online Policy Refresher course for employees.

Future plans to expand the training portfolio for Managers with the implementation of future Management upskilling workshops on targeted areas of the process and in terms of preventative measures. This is to be developed over the coming months.

3.7 Support with Manager Compliance

Monthly monitoring of Manager Compliance which trigger monthly email notifications and reminders to Managers, to ensure that action is taken at the appropriate stages of the process.

Work is also underway to review Return to work Interviews and Intermittent Absence Breaches compliance across the department to determine how best to support the Department in the future.

3.8 Dying to Work Charter

In conjunction with other Management of Absence Advisers, Corporate Manager guidance has now been developed to support employees with terminal illness. This will complement the Management of Absence Policy and 'Dying to Work' Charter. This is now readily available to Managers with the Teams ongoing support as and when required.

### 3.9 HR Support and Advice in terms of Stress, Coronavirus and Critical Illness absences

This also consists of a regular case reviews with managers and employees, to discuss OH advice, help devise employee support plans and provide HR support when required.

4. Occupational Health Support

Occupational Health (OH) continue with dedicated clinics for Social services and Place. Stress Management & Counselling (SMAC) have launched a bereavement support group. OH & SMAC have jointly launched a long term sickness support group.

OH have restarted the menopause cafes and Health Fairs, which include free health checks. Additional counselling sessions are being provided to cut waiting time to avoid stress related absence.

An additional in-house Occupational Health Officer has been recruited on a part time basis via ERF funding, with a further applicant to be interviewed shortly. The number of Occupational Health Referrals in relation to Social Services in 2022/23 up to 31st December 2022 are as follows;

Occupational Health Appointments 1st April 2022 to 31st December 2022 for Social Services

- Adult Services
- Child and Family
- Other
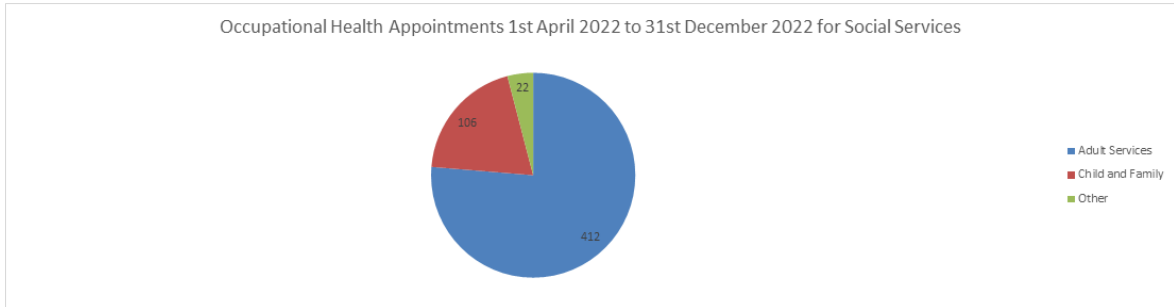
Please note that "Other" refers to a combination smaller supporting work areas in the Commissioning Hub, West Glamorgan Transformation Programme and "Directorate Reports".

5.   Integrated Assessment Implications

5.1   The Council is subject to the Equality Act (Public Sector Equality Duty and the socio-economic duty), the Well-being of Future Generations (Wales) Act 2015 and the Welsh Language (Wales) Measure, and must in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Acts.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.
- Deliver better outcomes for those people who experience socio-economic disadvantage
- Consider opportunities for people to use the Welsh language
- Treat the Welsh language no less favourably than English.
- Ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs.

5.2.   The Well-being of Future Generations (Wales) Act 2005 mandates that public bodies in Wales must carry out sustainable development. Sustainable development means the process of improving the economic, social, environmental and cultural well-being of Wales by taking action, in accordance with the sustainable development principle, aimed at achieving the 'well-being goals'.

5.3.   Our Integrated Impact Assessment (IIA) process ensures we have paid due regard to the above. It also takes into account other key issues and priorities, such as poverty and social exclusion, community cohesion,

carers, the United Nations Convention on the Rights of the Child (UNCRC) and Welsh language.

5.4   There is no direct cumulative impact on people and /or communities other than to ensure that services are supported through provision of suitable resources, with appropriate governance, in line with Council policy. There are no implications identified through the Integrated Impact Assessment (IIA) process.

6.   Financial Implications

6.1   There are no financial implications other than those set out in the body of the report.

7.   Legal Implications

7.1   There are no legal implications other than those set out in the body of the report.

Background Papers: None.

Appendices:
Appendix A - Impact Assessment Report