DECISION-MAKER:		GOVERNANCE COMMITTEE				
SUBJECT:		Quarterly HR Statistics				
DATE OF DECISION:		29 th July 2019				
REPORT OF:		Service Director, HR and OD				
CONTACT DETAILS						
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STATEMENT OF CONFIDENTIALITY

None. This report contains no personal information relating to specific individuals.

BRIEF SUMMARY

The Governance Committee requested quarterly, council wide information on key employment data covering disciplinaries, dismissals, referrals to the police, suspensions and grievances. Additional summary information on levels of staff sickness was requested from September 2018 onwards.

The report format is as requested and agreed with the Governance Committee and reflects Q1 for 2019/2020.

RECOMMENDATIONS:

(i) To note the Quarter 1 2019/20 HR statistics as requested.

REASONS FOR REPORT RECOMMENDATIONS

- 1. As requested by the Governance Committee.
- 2.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

N/A

DETAIL (Including consultation carried out)

3. Quarter 1: In the period April 2019 – June 2019 the Council had:

A total of 11 dismissals:

- 2 on disciplinary grounds
- 1 for capability
- 1 via settlement agreement
- 1 as a result of service restructures
- 6 for sickness absence
- 0 during probationary period

- 0 Step 3 grievance resolution cases
- 3 suspensions
- 0 Appeals against dismissal with the dismissal decision upheld in each case
- 4. Overall sickness levels for the council showed an average 12.19 days per employee (5.22%). This is a reduction of 0.3 days per FTE for the same quarter last year when the figure was 12.49 days per employee.

The sector "average" is 8.5 days. Short term absence accounts for 92% of the overall absence occurrences, whilst long term sickness accounts for 8% of the overall absence occurrences.

The HR team provide managers with monthly absence data and detail and look to identify and address "hot spots" and underlying issues against which to target interventions including information, support, occupational health appointments, phased return and in some cases, dismissal.

A target reduction of number of days lost to sickness will see an increased focus in return to work meetings, manager workshops, occupational health sessions for staff and the offer of Autumn flu jabs. Managers are sent monthly data on sickness absence and the HR Advisors work with each service to agree return to work action plans or exit plans for those staff who are unable to have any return to work date in place due to underlying absence causes. Improved reporting and tracking will ensure cases are closed on the system in a more timely manner.

At the last meeting of the Governance Committee, members requested two examples of sickness absence cases that have been resolved through proactive action plans.

Example 1 – Robust Management of Frequent Absence

Employee 1 had worked for the Council for 4 years, in a front-line, customer facing role. Latterly the member of staff developed a pattern of frequent sickness absence. The supervisor conducted return to work interviews in line with Council procedure. The employee subsequently exceeded the Council's sickness absence trigger of 10 days/5 occasions and the manager commenced the formal steps of the procedure, including allowing time for an improvement in attendance.

As the member of staff's attendance failed to improve an attendance management dismissal hearing was convened at which a further period of time for improvement was agreed.

No improvement in attendance was forthcoming. The member of staff was therefore called to a second hearing and adjournment agreed whilst further Occupational Health advice was sought. Occupational Health confirmed there were no underlying reasons for the sickness absence and the employee was therefore dismissed.

The employee appealed the dismissal and, taking into account all the circumstances of the case, the appeal panel upheld the dismissal.

Example 2 – Successful Redeployment

Employee 2 has worked for the Council for over 12 years. The person went onto long-term sick leave due to a skin condition, which the employee believed was associated with chemicals used in their role. Occupational Health advised the manager that the employee was unable to return to the substantive post and recommended redeployment as a reasonable adjustment.

The member of staff was placed on the Redeployment Register and was duly redeployed to a different service. The new role is in a completely different discipline, in a different Directorate. To support the redeployment, training and a vocational qualification was offered by management, and welcomed by the employee. The person undertook a trial period and was successfully confirmed into the new post.

RESOURCE IMPLICATIONS				
Capital/Revenue				
6.	None			
Property/Other				
7.	None			
LEGAL IMPLICATIONS				
Statutory power to undertake proposals in the report:				
8.	None			
Other Legal Implications:				
9.	None			
RISK MANAGEMENT IMPLICATIONS				
10.	None			
POLICY FRAMEWORK IMPLICATIONS				
11.	None			

KEY DE	ECISION?	No	
WARDS/COMMUNITIES AFFECTED:		FECTED:	
	SL	JPPORTING D	<u>OCUMENTATION</u>
Append	lices		
1.	Q1 HR table of data	a (Summary)	
2.	Q1 Sickness absence data (Summary)		

Documents In Members' Rooms

Equality Impact Assessment				
2.				
1.				

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.				No	
Data Protection Impact Assessment					
Do the implications/subject of the report require a Data Protection No Impact Assessment (DPIA) to be carried out.					
Other Background Documents Other Background documents available for inspection at:					
Title of	Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)			
1.		•			
2.					