

Long Term Sickness 11/12 breakdown

Absence Reason	Percentage of sickness
Operations and Recovery	46%
Stress, depression and anxiety	28%
Chest/respiratory	10%
Cancer Treatment	8%
Musculoskeletal	6%
Pregnancy Related	2%

Proposed strategy (as set out in 19th June 2012 Services Select Committee report)

- Improving the Employee Assistance Programme (EAP) available for all staff by making it available on the internet. This is in addition to the current service where staff can access support over the telephone or access support in person where it is necessary;
- The HR team will invest more time in management reporting. Each month a member of the team will meet with each Head of Service to ensure they are aware of all sickness issues in their respective areas;
- Each quarter a member of the team will attend Departmental Management Team meetings, ensuring Directors, alongside their Heads of Service are fully briefed on all sickness issues across their Directorate; and
- Detailed monthly reports will be sent to all managers on staff absence, helping to ensure immediate action is being taken when an issue with sickness absence has been identified.
- An online portal through which occupational health referrals can be made;
- Improved response times in relation to referral reports. The report from Occupational Health will now be available on the same day the officer is seen;
- Access to a physician over the telephone for immediate advice;
- A website hosted on the Council Intranet on which all officers can read articles and features on a range of health issues; and
- Health and well being days specifically targeted to tackle issues such as stress, depression, healthy lifestyles and life skills.

Other initiatives being proposed or currently undertaken

- Manual Handling Training to ensure musculoskeletal absences are avoided where possible.
- Role specific risk assessments to ensure employees are aware of how to fulfil their role safely, aimed to try to minimise any musculoskeletal absences.
- Earlier introduction of phased returns to work where employees are returning after an operation, normally over four to six weeks.
- Flexible working introduction to allow those not fit enough to come into the office an earlier opportunity to work from home.
- Well Being Assessment designed to be SDC specific, tailored from HSE recommended tool but designed to be SDC specific. A document that allows concerns around stress/anxiety to be discussed to ensure discussions take place so employee can be supported.
- Earlier redeployment to assist those medically unfit to continue in their roles after a musculoskeletal or a complex operation to look for alternative roles within the organisation.
- Returning on different (lighter) duties to assist those recovering from an operation or musculoskeletal injury to return to work in a suitable role.
- Online (and telephone) based EAP service to support employees and their families and to allow access to advice in a practical way.
- Healthy Mind, Healthy Body well being day aimed at giving practical advice and guidance to those suffering with any form of mental illness.
- Themed and focused Health portal on intranet aimed at delivering information to employees and managers on topics such as fighting the winter flu, how to deal with muscular issues and healthy eating.

Comparison of sickness across all sectors

Average Annual Absence Rates (Dec 2011)	(%)
Local Government	4.2
Public Sector	4.0
Non profit	3.9
Sevenoaks District Council	4.6
Private Sector Services	3.1
The figure for SDC at the end of August 2012 was 3.83%.	