



OFFICIAL

Task and Finish Group Review - Long-term mental health sickness absence

Executive Committee

Date: 10 April 2015

Agenda Item:

5

Submitted By: Chief Legal and Governance Officer

Purpose

To consider the final recommendations of the Authority's Task and Finish Group in respect of its 3-month review of long-term mental health absence within West Yorkshire Fire and Rescue Service.

Recommendations

That the recommendations and final report of the Task and Finish Group into long-term mental health sickness absence be noted and that consideration be given to further recommendations to be made for consideration by the appropriate committee.

Summary

The Task and Finish Group was established on 26 November 2014 to undertake a review into long-term mental health sickness absence in the Brigade. An undertaking was given that the final report be submitted back to the Executive Committee three months after the implementation of the review.

Local Government (Access to information) Act 1972

Exemption Category: None

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Background papers open to inspection: None

Annexes: Mental Health sickness absence Task and Finish Group – final report

1 Introduction

- 1.1 The Task and Finish Group was established on 26 November 2014 to consider issues related to causes and the management of long-term mental health sickness absences within the Brigade.

2 Information

- 2.1 The first meeting of the Group was held on 19 December 2014 and the Group met to agree its final report (attached at Annex A) on 31 March 2015.
- 2.2 The Group was established on the premise that the final report would be submitted for consideration / ratification by the Executive Committee a maximum of three months following implementation of the review.
- 2.3 Members are invited to consider the final report and agree any further actions to be taken in relation to mental health sickness absences.

3 Financial Implications

- 3.1 There are no financial implications arising from this report.

4 Equality and Diversity Implications

- 4.1 These have been dealt with during the course of the review. There are no specific equality and diversity issues arising directly from this report.

5 Health and Safety Implications

- 5.1 These have been dealt with and considered in some detail during the course of the mental health sickness absence review. There are no specific health and safety issues arising directly from this report.

6 Service Plan Links

- 6.1 This report supports the following priorities;
- Provide a safe, competent and diverse workforce
 - Achieve value for money in managing resources

2015

Mental Health sickness absence Task and Finish Group



FinalReport

1/2014/15

31/03/2015



Mental Health sickness absence Task and Finish Group

Introduction and background

Members of the Executive Committee considered a report at a meeting on 26 November 2014 which sought advice on areas for scrutiny review. It was agreed that long-term mental health sickness absence would be the subject of the Task and Finish Group's initial review.

The review was required to report back to the Executive Committee three months after its commencement.

The Task and Finish Group comprised the following Councillors:

B Smith (in the Chair)
P Harrand
J Hughes
C Townsley

Officers attending in an advisory capacity were:

Steve Rhodes – Director of Service Support
Mark Dixon – Occupational Health and Safety Manager

Meetings were held on:

19 December 2014
22 January 2015
20 February 2015
31 March 2015

Scope and approach

Following the initial meeting of the Group the following scope and approach for the scrutiny review was determined:

- a) To analyse data related to the incidence of long-term mental health sickness absence including comparative data from other Fire and rescue Authorities. (this was subsequently extended to include short term absence)
- b) To assess the adequacy of data collected in terms of;
 - i. West Yorkshire Fire and Rescue Service's (WYFRS) historical mental health absence data,



- ii. Comparisons between work related and non-work related absence,
 - iii. Comparisons between Grey and Green book employees,
 - iv. The causes of work related absence and non-work related absence,
 - v. Comparisons in mental health absence and age of employee.
- c) To review the processes for the referral and the management of mental health related absences; and
- d) To review the suitability of the proposed Health and wellbeing staff survey and determine appropriate timescales for completion.

Mental Health sickness absence

Task and Finish Group

Scrutiny review findings

This report sets out the findings, conclusions and recommendations from the detailed work.

1 Data Analysis and adequacy of data

- 1.1 A report was submitted to the group which provided data on:
- the number of employees currently absent due to mental health reasons,
 - the historic position in relation to days lost through absence per quarter between October 2011 and January 2015,
 - comparisons of work related and non-work related absence,
 - work related absence per District,
 - comparisons of cause of absence,
 - comparisons between Grey and Green Book employees,
 - Mental Health absence by age group,
 - Comparison with other Fire and Rescue Authorities.
- 1.2 The Task and Finish group were reassured that WYFRS had processes in place to collect numerous types of data and that analysis was being undertaken to identify trends and reduce sickness.
- 1.3 The Task and Finish group determined that the data analysis could be improved by the inclusion of the following information:



- sickness figures and associated shift patterns and duty systems,
- average length of absences,
- number of staff involved,
- number of decisions to extend payment of full and half-pay reductions
- reasons for the high level of “unknown” causes for short term sickness (the level of short term “unknown” was higher than anticipated)
- a more detailed breakdown of causes of “domestic related” mental health absence.

1.4 The above data has now been included in the data and trend analysis carried by the Occupational Health Unit, thus providing an improved level of analysis.

1.5 Subject to the above additional items being included with the trend analysis, the Task and Finish Group are satisfied that appropriate trend analysis is being carried out.

2 Referral processes and management of mental health absence

2.1 The Group were provided with details of the arrangements for the management of mental health absence. The Occupational Health and Safety Manager gave an overview of the processes that are undertaken from the point an individual first books sick through to either returning to work or leaving the organisation. This briefing included information related to:

- initial contact with employee,
- welfare support (including referral to counselling services),
- speedy referral to the Authority Medical Adviser,
- managerial advice,
- request for specialist information (including psychiatric referral if appropriate),
- multi-discipline cases conferences,
- policy for pay reduction as appropriate - options including return to work, phased return to work, redeployment, reasonable adjustments, ill health retirements, capability dismissal.

2.2 The Group was satisfied with the range of measures already in place. Further information was requested, however, in relation to the proportion of those employees considered for pay reduction who have had their pay reduced together with the process of determining any such reductions.

2.3 The Director of Service Support provided the additional information requested; the Group were satisfied that appropriate measures were in place.



3 Health and Well-being Survey

- 3.1 A Health and Wellbeing survey is being undertaken in collaboration with Middlesex and Bedfordshire Universities, there are no costs associated with the survey.
- 3.2 The Group recommended that the introductory paragraph to the Survey be amended to better reflect the fact that WYFRS were collaborating with the Universities (who are also working with other FRAs).
- 3.3 A timetable for completion of the Survey was set, with the Survey being open for three weeks in March 2015, followed by three months of data analysis. It is anticipated that the findings of the survey will be reported back to participating authorities in September 2015.
- 3.4 The findings from the Health and Wellbeing Survey will be reported to a future Human Resources Committee.

4 Summary of findings

- 4.1 The Task and Finish Group are assured that the data and trend analysis currently being carried out by the Occupational Health Unit is appropriate, having been adjusted to incorporate the Group's recommendations as detailed at paragraph 1.3 above.
- 4.2 Management processes were reviewed the Group is satisfied that there is the correct balance between support for individuals and managerial / organisational needs. The Group recommended that this balance be continually reviewed to ensure that organisational requirements are maintained.
- 4.3 The Task and Finish Group found that the perceived levels of stress and anxiety amongst employees had not been borne out by sickness absence figures related to mental health issues.
- 4.4 The Group endorsed the Health and Wellbeing Survey and agreed a timeline for completion. They sought confirmation that the results would be reported back to the Human Resources Committee.
- 4.5 Members requested that the following information be submitted to the Executive Committee
- total number of employees with a disability
 - total number of shifts lost per person due to ill health related to domestic causes



- 4.6 That future Activity Reports submitted to the Human Resources Committee include more detailed information relating to the type of sickness absence on a departmental basis and how this was being managed.

5 Conclusion

- 5.1 A comprehensive scrutiny review has been undertaken by the Task and Finish group into Mental Health Sickness absence. Overall the Group was satisfied that appropriate measures were in place to balance welfare and support with organisational requirements subject to a number of recommendations made throughout the review which have subsequently been adopted in order to make improvements.

6 Recommendation

- 6.1 That, subject to the continual review of management processes related to mental health sickness absence, the findings of the scrutiny review are reported to the Executive Committee.