

CABINET ITEM COVERING SHEET PROFORMA

**AGENDA ITEM 12**

**REPORT TO CABINET**

**9 MARCH 2006**

**REPORT OF CORPORATE  
MANAGEMENT TEAM**

**CABINET DECISION**

**CORPORATE - Lead Cabinet Member – Councillor Coleman**

**PERFORMANCE – KEY CORPORATE MEASURES**

1. Summary

The purpose of this report is to provide Members with detail of the council's performance against a range of "corporate health" measures included in the corporate basket of PIs. The report includes a detailed analysis on the key issue of sickness absence

2. Recommendations

Members are asked to note the report

3. Reasons for the Recommendations/Decision(s)

To keep Cabinet informed of performance against key performance issues

#### 4. Members Interests

**Members (including co-opted members with voting rights) should consider whether they have a personal interest in the item as defined in the Council's code of conduct (paragraph 8) and, if so, declare the existence and nature of that interest in accordance with paragraph 9 of the code.**

**Where a Member regards him/herself as having a personal interest in the item, he/she must then consider whether that interest is one which a member of the public, with knowledge of the relevant facts, would reasonably regard as so significant that it is likely to prejudice the Member's judgement of the public interest (paragraph 10 of the code of conduct).**

A Member with a prejudicial interest in any matter must withdraw from the room where the meeting is being held, whilst the matter is being considered; not exercise executive functions in relation to the matter and not seek improperly to influence the decision about the matter (paragraph 12 of the Code).

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**SUMMARY**

The purpose of this report is to provide Members with detail of the council's performance against a range of "corporate health" measures included in the corporate basket of PIs. The report includes a detailed analysis on the key issue of sickness absence

**RECOMMENDATIONS**

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**DETAIL**

1. The Council's basket of key performance indicators contains 85 measures broken down into 6 themes:
  - Corporate health
  - Children and Young people
  - Healthier Communities and adults
  - Livability
  - Community safety
  - Economic regeneration and transport
  
2. This report focuses on our performance at the end of the third quarter of 2005/06 against the measures which indicate our "corporate health". These include:
  - Percentage of non-domestic rates due for the financial year which were received by the authority
  - Average number of working days / shifts lost to sickness absence per employee
  - The number of types of interactions with the public that are enabled for electronic service delivery as a percentage of the

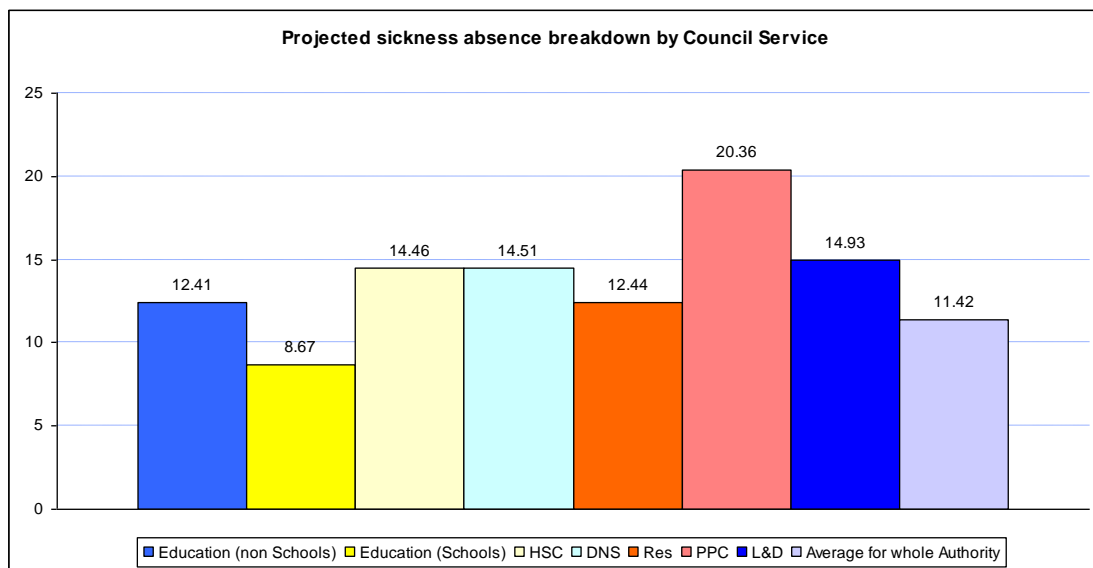
types of interactions that are legally permissible for electronic service delivery

- The level of the Commission for Racial Equality’s “Equality standard for local government” to which the authority conforms
- Percentage of invoices for commercial goods and services that were paid by the authority within 30 days of such invoices being received
- Percentage of council tax collected
- Percentage of expenditure inside contracts where contracts exist

3. Our performance against each measure is detailed in the graphs and tables appended to this report.

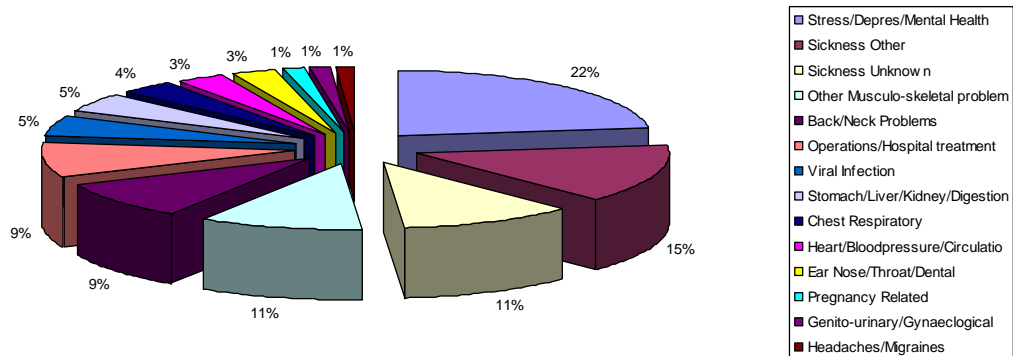
**Focus: Sickness absence**

4. Performance in this area has dropped. It is projected that for 2005/06 the council will reach 11.4 days per full time equivalent member of staff. In 2004/05 it was 10.59. Projected performance by service grouping is shown in the graph below:

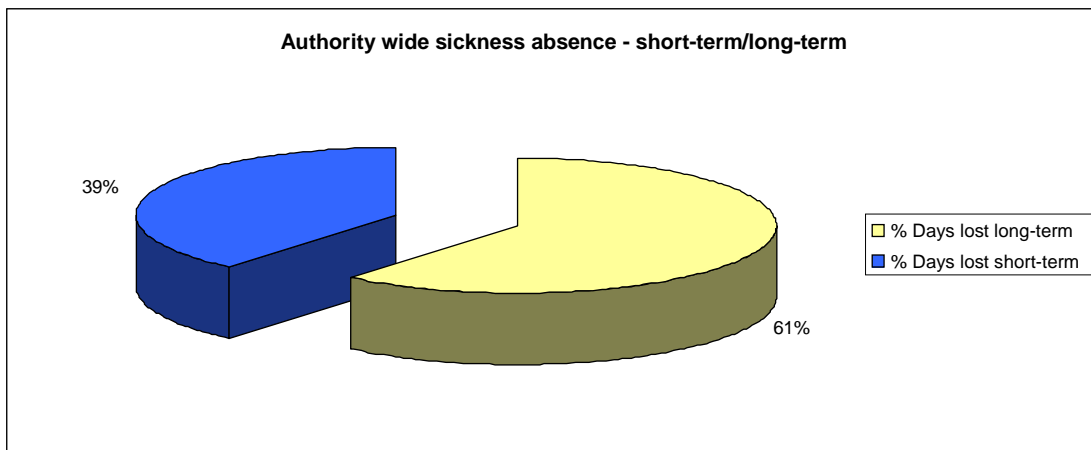


5. Data on sickness absence is categorised for different types of illness. The pie chart below shows how this breaks down for 2005/06 (up to quarter 3). It is clear that the largest reasons for absence are Stress, Depression and Mental Health (22%) and Back/Neck Problems and Other Musculo-Skeletal Problems (20%). These proportions are similar to the national picture. 11% of absence is currently recorded as unknown, work is currently underway to identify why the information is unavailable and introduce procedures to significantly reduce this figure.

Breakdown of Reasons for Absence



6. Records also show that the majority of sickness absence, just over 61% is due to long term absence, that is absences of 20 days or more:



7. Absence management was completely reviewed during 2003/04 with new procedures, guidance and support for managers put into place. The collection of data has also been improved and this drop in performance may reflect more accurate data collection. However, this may not be the case and action is being taken to further tighten the council's approach to managing sickness absence. These actions include:

- Implementing the recommendations of the scrutiny review into sickness absence that reported in late 2005, including reviewing training for managers and supervisors
- Providing further information to managers on managing sickness absence
- Improving management information on frequent absences, providing managers with alerts when employees have had three absences in a rolling 12 month period

- Completing a detailed analysis of patterns in sickness, by service area, manager etc. to enable “hot spots” to be addressed
- Developing realistic but challenging targets for the reduction of sickness absence across the council, culminating in a half day reduction per full time equivalent, per year for 3 years.

## **FINANCIAL AND LEGAL IMPLICATIONS**

None specifically from this report

## **RISK ASSESSMENT**

None specifically from this report

## **COMMUNITY STRATEGY IMPLICATIONS**

None specifically from this report

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