

Workforce Report – September 2020

General

This is the second quarter since the start of the Covid-19 pandemic and it is possible to start to draw some initial views on the impact Covid-19 has had, and is having, on the workforce.

After the initial national lockdown, the job market stagnated, resulting in a significantly lower number of starters and leavers than in previous months/quarters. The job market now seems to have recovered and recruitment to the organisation appears to be back to the levels experienced pre- Covid-19.

The change to a predominantly home-working model seems to have had an impact on the level of short-term sickness. Calendar days lost to short-term sickness have been consistently lower since the change to home working in late March 2020. When comparing the months of April to August* between 2020 and 2019, there is 33% less short-term sickness absence in 2020 over these months, when compared with the same months in 2019. There appears to be little/no impact of Covid -19 on long-term sickness absence.

The top reason for short-term sickness absence has changed from anxiety/stress to musculoskeletal. It is probably still a bit too early to make an assessment, but home working with employees using their own desks, chairs and other general office equipment etc. may be a contributing factor to the 15% rise in short-term sickness attributed to musculoskeletal.

** September has been excluded from the comparison as the sickness figures for the last month in a quarter can change, sometimes markedly, due to retrospective absence reporting and/or unknown/estimated durations being replaced with actual absence durations.*

Workforce KPIs

Resourcing & Talent

At the end of September 2020 WSCC had 5,274 employees. This is an increase of 117 since the end of the previous quarter. Just over half of this increase in headcount was the result of the in-sourcing of Service Finance from Capita.

The Workforce KPIs document shows a £0.9m increase in employee pay in Fire and Rescue Service, however this is not an increase in spending in Fire and Rescue Service directly. When the pandemic started, a cost centre code was set up to charge all the spend that was incurred as a direct consequence of Covid-19 so this expenditure could be identified and collated. This cost centre code is held within this area and it still resides there at this time, hence the increase in the employee pay costs for Fire and Rescue Services.

There has been an increase in agency headcount and contract spend this quarter with the increase in contract spend being in proportion with the headcount increase - i.e. not a general shift in level of seniority. The largest increase in headcount has occurred in Children & Family Services (+12) and this resource is for two transformation funded projects. Manpower agency workers as a percentage of the total workforce has increased to 5.4% (5.1% in Q1).

As would be expected with the overall increase in headcount, the number of new starters has increased since Q1 with more new starters than leavers. As previously mentioned, the insourcing of Service Finance means the highest number of new starters has been in Resource Services (+65). There has been a net increase (new starters minus leavers) in Place Services (+25); Adult Services (+16); and Children & Family Services (+13). Turnover is up to 1.9% due to the higher number of starters and leavers since Q1 and this is particularly relevant in Resources where there are only three leavers compared to the 65 new insourcing new starters. Turnover rate is now just below the quarterly target rate of 2% -3.75%.

Performance & Skill

Staff induction completion rates have increased by 9% overall. Whilst the direction of travel is encouraging, the rate is still below the target of 90%.

Face-to-face events were initially cancelled following lockdown in March with events moving to an on-line delivery model where this was possible. Events continue to be delivered on-line, but a handful of face-to-face sessions have now started where training cannot be delivered successfully online such as first aid.

This change in the delivery model was most likely the reason for the Q1 fall in the 'did not attend' a training session percentage, which reduced from 12% in Q4 2019 to 4% in Q1 2020. The percentage has gone back up again and is now 10%.

At 8%, short term cancellations have remained at the same level as Q1. There has been an increase in cancellations in Adults Services from 0% in Q1 to 14% in Q2 but this is somewhat misleading as this relates to just three late cancellations and the percentage is more volatile due to the significant reduction in scale of

bookings, which for Adults Services, have gone from a pre- Covid-19 level of 400-500 bookings per quarter, to 20-30 bookings in Q1 and Q2.

Formal appraisal training for managers was paused when Covid-19 lockdown started and therefore no figure has been provided for Q1. Training has now restarted using a webinar approach and the percentage of managers who have undertaken formal appraisal training has increased marginally (+2%) compared to 2019 Q4.

The level of new Employee Relations cases has remained static for across Q1 and Q2 and it would appear that Covid-19 is having little, if any, effect.

Health, Safety & Wellbeing

Total overall sickness has reduced again this quarter by 721 calendar days lost. When compared with the same Q2 quarter in 2019/20, overall sickness is down slightly (by 382 calendar days lost) so there is a level of consistency with Q2 last year.

At the start of the Covid-19 pandemic there was a significant drop in the level of calendar days lost due to short term sickness absence. This reduction has levelled out since March, but the general trend is an average reduction each month. It is likely that the shift in the workforce largely working from home due to Covid-19 restrictions has been a significant factor in this reduction in short-term sickness absence.

The top reason for short-term absence has changed to Musculoskeletal this quarter (from Anxiety/Stress in Q1). This change is due to a 15% increase in short-term sickness being attributed to Musculoskeletal, accompanied by a 28% reduction in short-term sickness being attributed to Anxiety/Stress. Both these changes are worth noting given the shift from office to home working. Employees have been reminded of the need to ensure their home working environment is suitable and conforms with Display Screen Equipment (DSE) requirements. The New Ways of Working group is monitoring the level of sickness absence attributed to musculoskeletal reasons and suitable intervention actions will be implemented if required.

Long-term sickness absence has reduced slightly this quarter (-671 calendar days lost) but it is higher than the same quarter last year (2020 Q2 +1,653 calendar days lost compared to 2019 Q2). The level of long-term sickness absence has remained largely constant since January 2020 and so it would appear Covid-19 seems to be having little impact on the level of long-term sickness.

Anxiety/Stress continues to be the top reason for long-term absence, both for WSCC overall, and all three priority service areas.

Public Health, HR & Organisational Development and Health & Safety teams are working to develop an action plan to ensure that employee mental health and wellbeing is embedded within core WSCC business procedures and practices. Work is ongoing to design actions the organisation needs to take such as: increasing mental health awareness; encouraging open conversations; supporting and developing effective people management; and routinely monitoring employee mental health & wellbeing. Further details of this work will be provided in the Q3 report.

Workforce KPIs

2020 Q2
1st July 2020 to 30th September 2020

| Indicator | West Sussex County Council | | | | | | Commentary |
|--|---|-------------|---------------------------|------------------------------|------------------|--|---|
| | 2020 Q2 | 2020 Q1 | Change since last quarter | Intended Direction of Travel | Target 2019/2020 | | |
| Resourcing & Talent | | | | | | | |
| Employed workforce <small>(Includes all staff directly employed by WSCC. Excludes casuals, agency, outside bodies, pensioners and partners)</small> | Total Headcount (total number of people employed over reporting period) | 5,374 | 5,257 | ↑ 117 | N/A | N/A | There has been an increase in headcount. A significant proportion of this increase was the result of in-sourcing of Service Finance from Capita. The Employee Paybill in Fire & Rescue Service shows an increase of £918k but this is not an increase in spending by FRS. When the pandemic started a cost code was set up to charge all spend that was incurred as a direct consequence of COVID-19 so this expenditure could be identified and collated. This cost code was placed in FRS and it still resides there, hence the increase in the Employee Paybill in FRS. |
| | Active Headcount (number of people employed on 28th of last month of reporting period) | 5,274 | 5,179 | ↑ 95 | N/A | N/A | |
| | Active FTE (on 28th of last month of reporting period) | 4,666 | 4,589 | ↑ 76 | N/A | N/A | |
| | Employee paybill (including on costs and casuals, excluding agency and schools) | £50,370,088 | £49,361,718 | ↑ £1,008,370 | N/A | N/A | |
| Agency (Manpower) | Headcount (Manpower) | 333 | 309 | ↑ 24 | N/A | N/A | There has been an increase in agency headcount and contract spend this quarter with the increase in contract spend being in proportion with the headcount increase i.e. not a general shift in level of seniority. The largest increase in headcount has occurred in Children & Family Services (+12) and this resource is for two transformation funded projects. Manpower agency workers as a percentage of the total workforce has increased to 5.4% (5.1% in Q1) |
| | Contract spend | £4,636,535 | £4,109,120 | ↑ £527,415 | ↓ | Reduction of £0.5m since previous year | |
| | Manpower % total workforce | 5.4% | 5.1% | ↑ 0.3% | N/A | N/A | |
| Recruitment | Total number of starters (over reporting period) | 221 | 89 | ↑ 132 | N/A | N/A | In line with the rise in headcount there has been significant increase in starters in Resources due to the insourcing of Service Finance (+65). There has been a net increase (Starters minus Leavers) in Place Services (+25); Adult Services (+16); and Children & Family Services (+13). Turnover is up to 1.9% and is now just below the quarterly target rate of 2%-3.75%. |
| Retention | Total number of leavers (over reporting period) | 108 | 86 | ↑ 22 | N/A | N/A | |
| Staff turnover | Rolling turnover rate (average headcount over the previous 3 months, divided by the number of leavers over the last 3 months) | 1.9% | 1.5% | ↑ 0.4% | → | Between 2-3.75% (rolling qly target) | |

| Adults Services | | Children & Family Services | | Fire & Rescue Service | | All other Services | |
|-----------------|-------------|----------------------------|-------------|-----------------------|------------|--------------------|-------------|
| 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 |
| 1,085 | 1,083 | 1,466 | 1,456 | 650 | 647 | 2,173 | 2,071 |
| 1,065 | 1,059 | 1,430 | 1,427 | 641 | 642 | 2,138 | 2,051 |
| 911.9 | 905.5 | 1,264.3 | 1,258.6 | 605.0 | 597.3 | 1,884 | 1,828 |
| £10,171,537 | £10,390,140 | £13,891,212 | £13,870,716 | £7,074,740 | £6,156,065 | £19,232,599 | £18,944,797 |
| 87 | 84 | 167 | 155 | 7 | 6 | 78 | 62 |
| £680,898 | £683,941 | £2,843,082 | £2,609,896 | £40,838 | £39,479 | £1,071,718 | £775,803.91 |
| 7.0% | 6.8% | 9.7% | 9.1% | 1.1% | 0.9% | 3.0% | 2.5% |
| 31 | 16 | 45 | 18 | 6 | 17 | 139 | 38 |
| 15 | 20 | 32 | 32 | 8 | 4 | 53 | 30 |
| 1.3% | 1.7% | 2.1% | 2.1% | 1.2% | 0.6% | 2.1% | 1.3% |

| Performance & Skill | | | | | | | |
|--|--|-------|-------|-------|-----|-----|--|
| Training & development | Staff induction completion rates | 76.0% | 67.0% | ↑ 9% | ↑ | 90% | Staff induction completion rates have increased by 9% overall. Whilst the direction of travel is encouraging, the rate is still below the target of 90%. The change in training delivery in March to on-line only training resulted in a fall in Q1 in the 'did not attend' a training session but the percentage has gone back up now to 10% overall. Short term cancellations have remained at the same percentage. The increase in cancellations in Adults Services from 0% in Q1 to 14% in Q2 is somewhat misleading as this relates to just three late cancellations and the percentage is more volatile due to the significant reduction in scale of bookings. Details are provided in the main narrative. Formal appraisal training for managers was paused when COVID-19 lockdown started and therefore no figure has been provided for Q1. Training has now restarted & the percentage of managers undertaking formal has increased marginally (+2%) compared to 2019 Q4. |
| | Percentage of managers who have undertaken formal appraisal training | 83.0% | n/a | ↓ n/a | n/a | 90% | |
| | Percentage of 'did not attend' booked training sessions run through the L&D Gateway | 10.0% | 4.0% | ↑ 6% | ↓ | 5% | |
| | Percentage of short notice (1-10 day) cancellations for booked training sessions run through the L&D Gateway | 8.0% | 8.0% | → 0% | ↓ | 5% | |
| Employee Relations <small>(new cases during the reporting period)</small> | Suspensions | 0 | 0 | → 0 | N/A | N/A | There have been no employee grievances during this quarter (down from 4 in Q1). There is one more disciplinary case this quarter then in Q1. It would appear that COVID-19 is having little, if any, effect on Employee Relations. |
| | Dismissals (exc redundancy ie ER) | 0 | 0 | → 0 | N/A | N/A | |
| | Staff Appeals panel: upheld | 0 | 0 | → 0 | N/A | N/A | |
| | Staff Appeals panel: rejected | 0 | 0 | → 0 | N/A | N/A | |
| | Employee grievances | 0 | 4 | ↓ -4 | N/A | N/A | |
| | Disciplinary cases | 5 | 4 | ↑ 1 | N/A | N/A | |
| | Formal capability (performance) | 2 | 1 | ↑ 1 | N/A | N/A | |
| | Formal capability (health) | 0 | 1 | ↓ -1 | N/A | N/A | |
| Employment tribunals | 0 | 1 | ↓ -1 | N/A | N/A | | |

| | | | | | | | |
|-----|-----|-----|-----|-----|-----|-----|-----|
| 69% | 60% | 62% | 67% | 84% | 80% | 85% | 60% |
| 88% | n/a | 64% | n/a | n/a | n/a | 93% | n/a |
| 4% | 9% | 0% | 4% | 5% | 0% | 11% | 4% |
| 0% | 14% | 14% | 10% | 8% | 0% | 7% | 8% |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 4 | 0 | 0 | 0 | 0 |
| 0 | 2 | 5 | 1 | 0 | 1 | 0 | 0 |
| 0 | 0 | 2 | 1 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |

| Indicator | West Sussex County Council | | | | | |
|-----------|----------------------------|---------|---------------------------|------------------------------|------------------|------------|
| | 2020 Q2 | 2020 Q1 | Change since last quarter | Intended Direction of Travel | Target 2019/2020 | Commentary |

| Adults Services | | Children & Family Services | | Fire & Rescue Service | | All other Services | |
|-----------------|---------|----------------------------|---------|-----------------------|---------|--------------------|---------|
| 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 | 2020 Q2 | 2020 Q1 |

| Health, Safety & Wellbeing | | | | | | | | | | | |
|---|--|--|--|---|--|---|--|---|---|--------------|-------|
| Level of sickness absence (May retrospectively increase due to late reporting of sickness) | Sick days lost (calendar days lost) | 13,753 | 14,474 | ↓ | -721 | N/A | N/A | Total overall sickness has reduced slightly again this quarter. When compared with the same Q2 quarter in 2019/20, overall sickness is down slightly (by 382 calendar days) so there is a level of consistency with Q2 last year. | | | |
| | Average sick days per FTE | 2.6 | 2.8 | ↓ | -0.2 | ↓ | TBC | | | | |
| Short term sickness absence (less than 21 calendar days) | Number of calendar days lost | 2,618 | 2,668 | ↓ | -50 | ↓ | N/A | Short term sickness has remained at the same level as Q1, but long term sickness has fallen again. It is likely that the shift in the workforce largely working from home due to COVID-19 restrictions has contributed to this reduction in short-term sickness. | | | |
| | Top reason for short term absence | Musculoskeletal, Fractures, Injury, Surgery | Anxiety, Stress, Depression, Mental Health | | N/A | N/A | N/A | | | | |
| Long term sickness absence (more than 21 calendar days) - see Note below | Number of calendar days lost | 11,135 | 11,806 | ↓ | -671 | ↓ | N/A | The top reason for short term absence has changed to Musculoskeletal (from Anxiety/Stress). This increase is particularly important given the change to employees working from home. This will continue to be monitored by the Way We Work group in its monitoring of the impact of COVID-19 on employee well-being. For long term sickness Anxiety/Stress is the top reason for absence for WSCC overall and all three priority service areas. | | | |
| | Top reason for long term absence | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | | N/A | N/A | N/A | | | | |
| Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) incidents to the Health and Safety Executive (HSE) | Violence at work | 0 | 0 | → | 0 | ↓ | N/A | There has been 1 notifiable accident this quarter. This occurred in FRS where a firefighter fell through the hatch and has been off sick for more than 7 days. The incident has been investigated and reported to the HSE | | | |
| | Accident | 1 | 1 | → | 0 | ↓ | N/A | | | | |
| | Dangerous occurrence | 0 | 0 | → | 0 | ↓ | N/A | | | | |
| | Total RIDDORs reported to HSE | 1 | 1 | → | 0 | ↓ | N/A | | | | |
| | | 4,287 | 4,950 | | | 4,185 | 4,110 | 1,437 | 1,264 | 3,844 | 4,150 |
| | | 4.06 | 4.7 | | | 3.0 | 2.9 | 1.9 | 1.7 | 1.8 | 1.98 |
| | | 879 | 1,052 | | | 652 | 729 | 289 | 235 | 798 | 652 |
| | Digestion, Reproduction & Glandular systems | Unknown | | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | Unknown | Other / Chose Not to Disclose | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | | |
| | | 3,408 | 3,898 | | | 3,533 | 3,381 | 1,148 | 1,029 | 3,046 | 3,498 |
| | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | Anxiety, Stress, Depression, Mental Health | Musculoskeletal, Fractures, Injury, Surgery | Musculoskeletal, Fractures, Injury, Surgery | | |
| | | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | | | 0 | 0 | 1 | 1 | 0 | 0 |
| | | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | | | 0 | 0 | 1 | 1 | 0 | 0 |