



**Democratic Support**

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#coopsctutiny

## CO-OPERATIVE SCRUTINY BOARD

### TO FOLLOW 2

Wednesday 11 March 2015  
4.00 pm  
Council House (Next to the Civic Centre)

**Members:**

Councillor James, Chair  
Councillor Mrs Aspinall, Vice Chair  
Councillors Mrs Beer, Bowie, Darcy, Philippa Davey, Jordan, Sam Leaves, Murphy, Parker-Delaz-Ajete and Kate Taylor.

**Please find enclosed additional information for your consideration under agenda item number 8 'Corporate Monitoring Report (Including HR Information)'.**

**Tracey Lee**  
Chief Executive

# **CO-OPERATIVE SCRUTINY BOARD**

## **AGENDA**

### **PART I – PUBLIC MEETING**

#### **8. CORPORATE MONITORING REPORT (INCLUDING HR INFORMATION) (Pages 1 - 4)**

The Board will receive the corporate monitoring report (including HR information) for its consideration.

**Co-operative Scrutiny Board**

Information/Action Points 18 February 2015

- I. The Board requested a comparison of the types of absence in different organisations including maintained schools (to be submitted to the meeting on 11 March 2015).

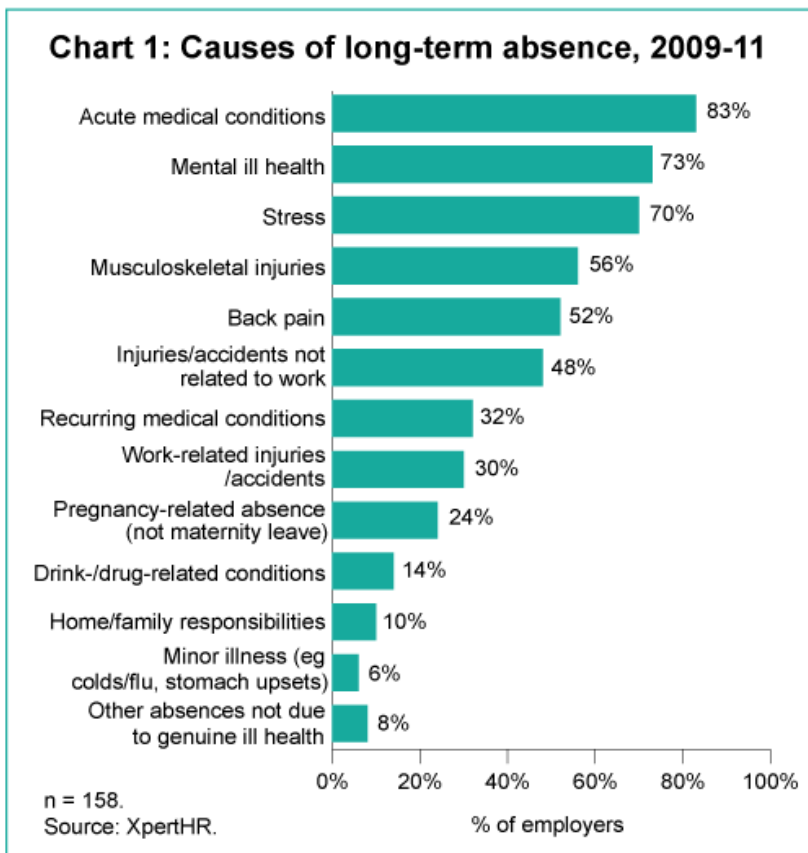
**PCC Short term Sickness (Top two reasons)**

	Cold and Flu (number of cases)	Stomach/gastric (number of cases)
Corporate	255	262
Schools	544	1022

**PCC Long term sickness (Top two reasons)**

	Stress (number of cases)	Musculo (number of cases)
Corporate	55	39
Schools	56	45

**External Benchmarking**



- The Board requested information on the cost of back filling posts with agency staff in order to cover staff absence.

The current financial year spend on backfill via Pertemps between April 2014 to Jan 2015 data is as follows :

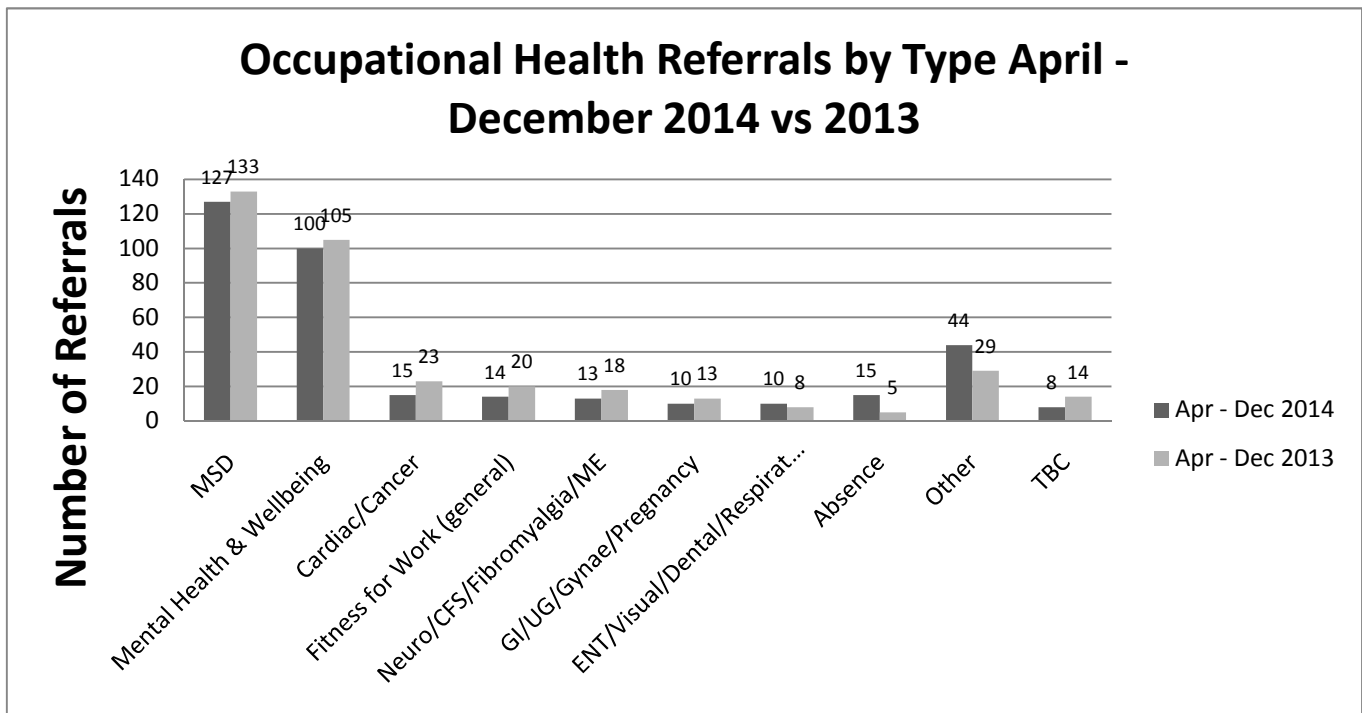
Holiday Relief	£311,405.14
Maternity Leave	£160,458.55
Sickness	£244,429.06

- The Board requested information on the number of occupational health referrals taking place and the length of time it was taking for staff to be referred.

**Number of Referrals**

A total of 356 referrals have been made to occupational health (OH) financial year to date<sup>1</sup>. This compares with 368 for the same period last year.

Table below demonstrates referrals against targets:



<sup>1</sup> April – December 2014, includes IMASS and Eastcliff Services (for workplace/ergonomic assessments)

An analysis of occupational health (OH) referrals demonstrates that the top two priority areas remain musculoskeletal (MSD) and mental health issues. The breakdown for the financial year to end of December 2014 is as follows:

The 'other' category includes a wide range of referral types that are grouped together to avoid identifying individuals. 'TBC' is a code used by our OH provider for referrals that they have not yet classified.

**Referral Time**

The referral guidance for line managers to refer an employee is no later than 4 weeks from the start of absence, though it's very much on a case by case basis. Some colleagues are referred while they are still at work and in some cases it is inappropriate to refer to OH (e.g. when chemotherapy has just started).

Once the referral has been made, the Key performance indicators from IMASS are tabled below.

OCC Health referral Type	Target = 85%	Actual (full year)	Reason for not meeting target
Online referral time to first telephone appointment offered with Occupational Health Nurse	<= 5 day Appt Offered	64%	National shortage of qualified OH Nurses. Situation being managed by IMASS and we currently meet monthly target of 100%
Online referral time to first face to face appointment offered with Occupational Health Nurse	<= 10 day Appt Offered	97%	
Online referral time to first telephone appointment offered with Occupational Health Physician	<= 10 day Appt Offered	83%	One month shortage of OHP's. Met KPI in all months bar one which had a performance of 30% bringing down overall KPI.
Online referral time to first face to face appointment offered with Occupational Health Physician	<= 10 day Appt Offered	85%	

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