

Appendix 3: Health and Wellbeing Survey 2016 - summary of findings

The 2016 Staff Survey asked staff about the health and well-being support provided by Portsmouth City Council. In order to understand in more detail how effective this support is and how staff can be better supported if they are absent from work because of sickness, a Health and Wellbeing Survey was commissioned.

Consideration of the small sample size and the bias of respondents who are closely aligned to the survey's core subject should be given to the weight placed on the range of responses.

- There were 261 respondents: 115 of which had been on short term sickness and 54 on long term sickness in the past year.
- The Community and Communication Directorate had the most respondents absent due to short term sickness.
- The Property and Housing Directorate had the most respondents absent due to long term sickness.
- Overall 42.52% of the total respondents (111 out of 261) obtained a statement of fitness from their doctor.
- Keeping in contact by telephone is the most popular form of contact whilst absent due to sickness.
- Those on long term sickness also used face to face contact as a way of keeping in contact with their manager.
- Over a third (37.8%) of the respondents considers the cause of their absence to be ongoing.

CAUSES OF SICKNESS

- Those on short term sickness cited, viruses (34.04%), musculoskeletal (26.95%) and gastrointestinal illness (18.26%) as the most popular causes of their sickness absence.
- Members of staff on long term sickness cited reasons which would require more long term recuperation such as fractures, surgery and heart problems.
- The survey showed the greatest cause of illness from across all Directorates is stress/psychological reasons.
- 70 respondents out of 133 felt changes to their working environment might have helped prevent their absence due to sickness.
- Particular reference was made to the working environment within the Civic Offices as a cause of sickness. The ventilation system and lack of fresh air, the temperature respondents have to work in which varies according to location from too hot, to too cold. Also the lighting, cleanliness and overcrowding within the Civic Offices were referred to as a cause of sickness.
- Workload: The amount of work being undertaken by individual members of staff due to cut backs and fewer staff was cited as a cause of sickness.

- Management: Respondents didn't feel listened to. Some did not feel their managers treated them fairly and others highlighted the lack of support from their manager before and during their period of sickness as a cause of their prolonged absence.
- The equipment being used was also highlighted as a cause of sickness, particularly the chair being used and desk set up especially in relation to hot desking.

SERVICES ACCESSED

- 61.9% of respondents agreed that the council provides support for their wellbeing when they need it.
- 56.2% of respondents know where to access help regarding their health and wellbeing.
- There is an indication that the longer members of staff have been absent from work due to sickness, the more likely they are to agree that the council provides support for their wellbeing if they need it.
- The survey results indicate that despite having a period of absence from work due to sickness, almost a third of the respondents do not know where to access help regarding health and wellbeing should they need to.
- The Back Support Service was the least known of all services.

OCCUPATIONNAL HEALTH

- The Occupational Health Service is the most known service with 75.9% of respondents being aware of it.
- 41.5% (71) of respondents were referred to this service of which 24.3% (17) found the referral useful in supporting them back to work and 30% (21) did not find the referral appointment useful.
- There appears to be a lack of clarity over what the Occupational Health appointment is for and what it involves. Some members of staff did not find this useful as it seemed to be a tick box exercise; some indicated they saw it as purely a form of absent management.
- The timing of the occupational health appointment was not always useful as some respondents had already returned to work before their appointment or they couldn't return to work until they'd had an appointment.
- Some respondents did not find their occupational health appointment useful as the recommendations were not followed through in the workplace.
- The 21 respondents who found the referral useful stated it was useful because they were talking to a separate organisation and were being listened to.

EMPLOYEE ASSISTANCE PROGRAMME (EAP)

- Only 8.9% (15) of respondents had accessed EAP.
- Of these 26.7% (4) did not find this useful but 20% (3) did find EAP very useful.

TALKING CHANGE

- 9.5% (16) of respondents accessed Talking Change of which 18.8% (3) did not find it useful and 37.5% (6) found it useful.
- Most people who used this service accessed it via their doctor.

RETURNING TO WORK

- Out of 160 respondents, 43.63% (73) confirmed that reasonable adjustments were made for their return to work, 12.5% (20) did not and 41.9% (67) respondents did not feel this was applicable.
- A return to work interview was found to be the most helpful process towards returning to work, whilst a phased return to work was also useful, especially for those who had been absent due to long term sickness.
- Some respondents cited the support from their managers useful in returning to work.
- Temporary working arrangements with more flexible working such as reduced hours and/or working from home aided the return to work.
- Others felt that if they could have changed their duties temporarily that would have aided their return to work.
- Some had specialist equipment provided e.g. a different chair, which supported their return to work.
- Better absence management by managers could have helped some return to work sooner, as well as mediation from their manager where there were difficulties with other members of staff to be resolved.
- Some respondents commented on the lack of information provided and the tone of the correspondence sent out in relation to absence management.
- Respondents commented on the lack of information about the services they can access for their health and wellbeing.
- Respondents also commented on the fact that the survey focused on a period of sickness and what happened after. They wanted more focus on prevention to help to stay healthy and not get ill.

POSSIBLE ACTIONS TO ADDRESS IDENTIFIED ISSUES

- Review the information on the services available to support staff with their health and wellbeing and ensure that it is easily accessible in different formats.

- Advertise the health and wellbeing services and support more widely.
- More work should be undertaken to support staff to access services before they go sick.
- Managers should receive further training and guidance in:
 - Services to support staff wellbeing, including how they are accessed.
 - How to make a referral to Occupational Health
 - Better absence management
 - Mediation
 - Managing Stress and resilience
 - Restorative approaches
 - Communication Skills
- Occupational Health: The referral processes should be reviewed and consultation made with the Occupational health Service to ensure that the purpose of the referral is clarified. Details of the referral process should then be made clear to managers and staff.
- More use should be made of Back Care Advisor to support staff with their posture and also advise members of staff at home whilst on sick leave due to back problems.
- Relevant staff should be signposted to Posture Awareness training as part of their induction training when they join PCC.
- Staff should receive additional help and support if they have problems with their workstation set up over and above the e-learning course, where their workstation set up is causing problems.
- More training should be available to managers and staff on coping with stress, and building resilience.
- The lack of cleanliness in the Civic Offices should be addressed, e.g. quality check on cleaning undertaken, toilet checks during working day.
- The suggestions made within the survey to support wellbeing should be explored e.g. exercise and weight initiatives, health checks for staff, awareness of mental health issues increased across the council.
- Managers should
 - Carry out regular supervision and discuss any ongoing health issues
 - Consider whether staff should be absent or work from home if suffering from cold/viral symptoms
 - Make more use of flexible working, including working from home to support staff with health and wellbeing issues.
- Make staff aware of current PCC absence policies before undertaking an official referral to HR/OH for managing absence.

A number of the issues raised by contributors have already been identified and actions are in hand. For example;

- A 'Building Resilience' training course is available, aimed at assisting staff coping with stress.

- Training for managers and supervisors is available on 'Absence Management' via the current learning and development offering
- Posture awareness training is available
- Staff are able to work flexibly to aid return from periods of absence
- Plans are in place to re-brand and publicise the Employee Assistance Programme
- HR and Corporate Communications are in the process of revamping the Health and Wellbeing content on our intranet.