OVERVIEW & SCRUTINY BOARD 9th October 2025

Subject Heading: Corporate HR Metrics – Agency Workers

and Sickness Absence

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Policy context:

This report provides an update on the

level of spend on agency staff engaged by the Council, and levels of sickness absences for the directly employed staff in

the corporate workforce.

An update from HR, following the O&S meeting held on the 3rd July 2025.

HR Metrics

Action points and recommendations captured at the last O&S meeting:

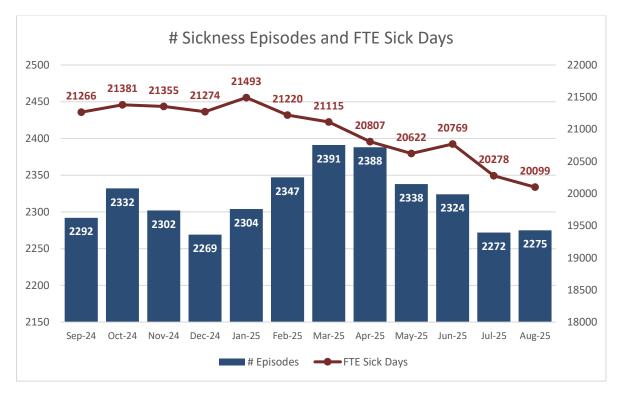
A breakdown was requested regarding the types of legal support accessed through our current Employee Assistance Programme (EAP) provider.

The provider offers general Consumer and Legal support, with common areas of enquiry including:

- Family-related matters
- Neighbour disputes
- Crime-related issues

A recommendation was made that statistics be supplied for the number of absences rather than just the length of absence.

The below table shows the number of sickness episodes and the total FTE sick days for the past 12 months:



The chart above illustrates the rolling 12-month total of sickness episodes (blue bars) alongside the number of full-time equivalent (FTE) sick days (red line). For clarity, the figure of 2,275 shown for August 2025 does not represent all episodes that occurred in that single month. Instead, it reflects the cumulative number of episodes recorded over the preceding 12 months ending 31 August 2025.

The red line similarly shows the total FTE sick days taken across the same rolling 12-month period, rather than the number of days lost in any given month. This approach provides a more stable trend line, reducing the impact of short-term fluctuations and allowing clearer comparison over time.

The data indicates that while the total number of sickness episodes has remained broadly consistent across the year, FTE sick days have shown a gradual decline since March 2025, falling from 21,493 to 20,099 by August 2025.

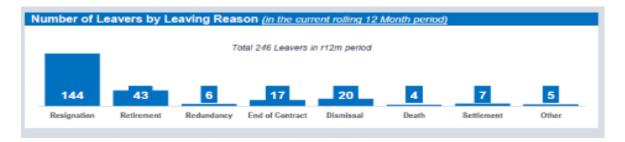
The Board also recommended that a study be undertaken into whether the working from home policy is causing increased levels of sickness.

This study suggested is not currently possible, as there is no mechanism in place to record an individual employee's work pattern in Fusion – so we don't know if someone is off sick on a day when they were working from home or were in a workplace.

There is a common theory that the opposite is true, in that it reduces sickness levels as staff with minor illnesses tend to work from home if they can, rather than call in sick.

Anonymised data was also requested on the reasons for staff exits.

Reasons for leaving is currently captured in the "Turnover" section of the monthly Workforce Information Report as below.



Sickness Absences

Sickness has continued to reduce, with the average number of sick days per employee falling to 9.4 days for the rolling 12-months period ending 31st August 2025. This is in line with national equivalent, recently published by the The Chartered Institute of Personnel and Development (CIPD).

(The CIPD Health and Wellbeing at Work 2025 report highlights a national increase in sickness absence, with the average rising to 9.4 days per employee—the highest in over a decade. In contrast, Havering's corporate workforce has seen a reduction in FTE sick days, now aligned with the national average. This suggests that local absence management and wellbeing strategies are having a positive impact).

The downward trend in FTE sick days, reducing from 21,493 in March 2025 to 20,099 in August 2025, suggests that both the incidence and duration of absence episodes are stabilising. This improvement may reflect the impact of absence management policies, proactive health and wellbeing initiatives, and greater organisational focus on early intervention and support.

Although encouraging, it should be noted that the overall number of episodes remains relatively consistent month-on-month (c. 2,300 episodes), indicating that while absences are still occurring at a steady rate, they are on average of shorter duration. This distinction is important, as it highlights the need for continued monitoring of the nature and underlying causes of short-term absence, alongside ongoing management of long-term sickness cases.

In summary, while performance has improved and is now aligned with national benchmarks, there remains scope for deeper analysis to ensure absence continues to reduce, particularly through tackling frequent short-term episodes and supporting managers in addressing underlying causes.

Please refer to Appendices 1, 1a and 1b

The collation of benchmarking data from London Councils is ongoing, with completion anticipated by year-end to inform future analysis and decision-making.

Appendix 1



