

Report of the Director of Children's Services to the meeting of Children's Services Overview and Scrutiny to be held on Wednesday 4th November 2020

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Subject: Sickness Absence and Recruitment in Children's Social Care

Summary statement:

This report provides an overview of sickness absence and reasons for this in the period April 2019 to August 2020 with predominant focus on the social work employee group. The report also provides an overview of recruitment activity and plans.

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Overview & Scrutiny Area:
Children's Services

1. **SUMMARY**

- 1.1 This report provides members with an overview of sickness absence in Children’s Social Care, with a particular focus on social workers.
- 1.2 The purpose is to present data on the situation, discuss reasons for the sickness absence and actions that can be taken to help solve this ongoing problem.
- 1.3 The report also provides information on current and planned recruitment activity.

2. **BACKGROUND**

- 2.1 Members have expressed concern about the continued sickness absence in Children’s Services, in particular in Children’s Social Care and the social work employee base.
- 2.2 Data is provided on this in the monthly Vital Signs report, below Table A shows the information provided in that report for August 2020:

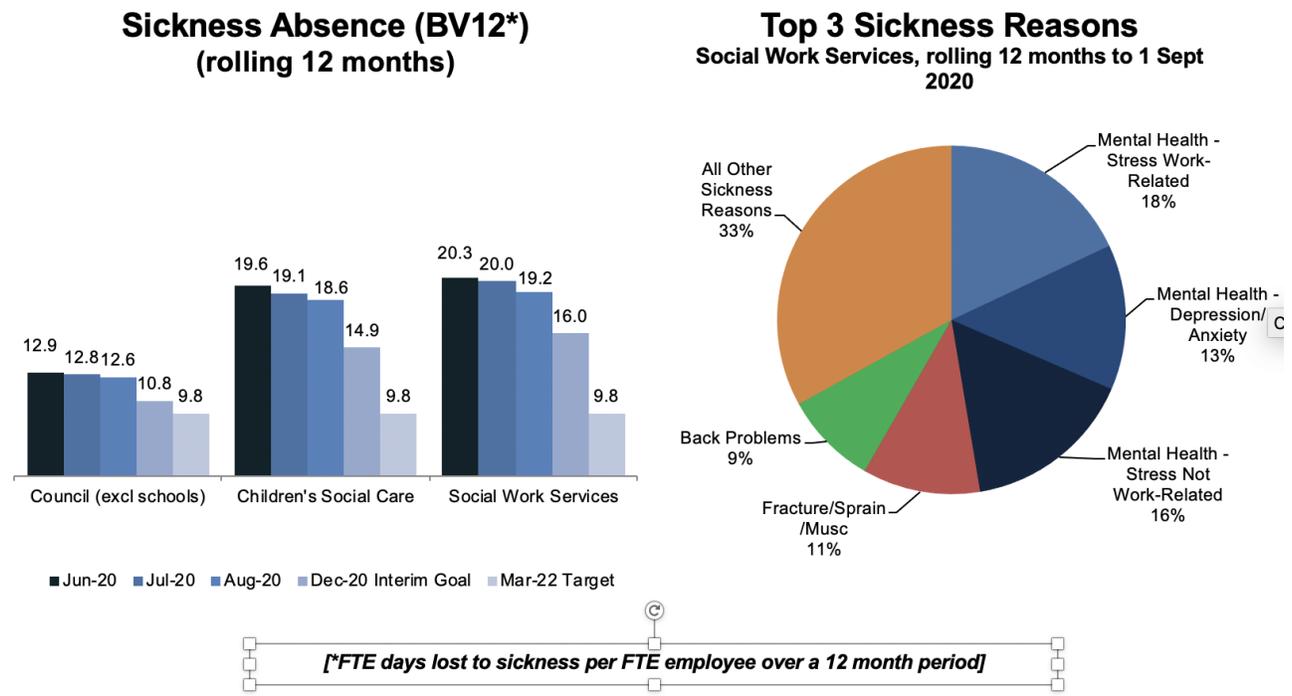


TABLE A

- 2.3 For this report, further detailed analysis has been conducted on the available data from both HR and the Performance Team to present Members with a more detailed view of this situation.
- 2.4 The timeframe for data to be considered was set at April 2019 given the current locality model came into existence then and runs to the end September 2020. (There are some variances to this due to structural changes or reporting issues, these will be highlighted where necessary).

2.5 Table B below shows the main absence trends in this time period across all social work teams:

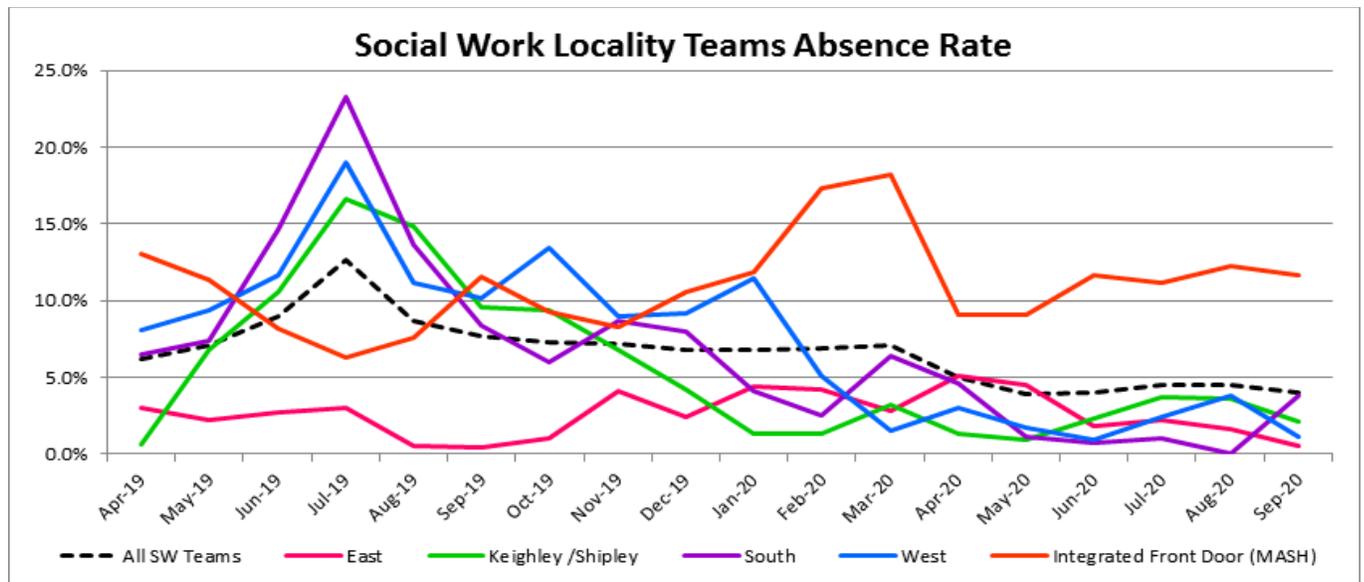


TABLE B

2.6 To clarify, Table B shows days in the month that were recorded as sickness expressed as a percentage of the total days in that month.

2.7 There were clearly spikes in May/June/July 2019 in three locality teams at the same time. This was the first three months of the new locality model coming into place and as with any restructure, there is usually a settling in period. The East team was the exception to this and has never gone above 5% absence for this whole period being reviewed. Evidence shows that this team had a more consistent headcount and the same Service Manager employed throughout this period. Continuity of workforce and management is an essential element to good performance and stability. Also training has been delivered by HR to ensure all managers are clear on how to record sickness in the MSS system.

2.8 Noticeably, the locality team sickness spikes have *significantly* dropped and especially since the start of lockdown. A key factor here is the recruitment of permanent Heads of Service and other management roles which has provided stability and consistency.

2.9 The exception to this pattern is the Integrated Front Door (IFD) which has been running at over 10% nearly every month since December 2019. Review of workload in the IFD shows the following:

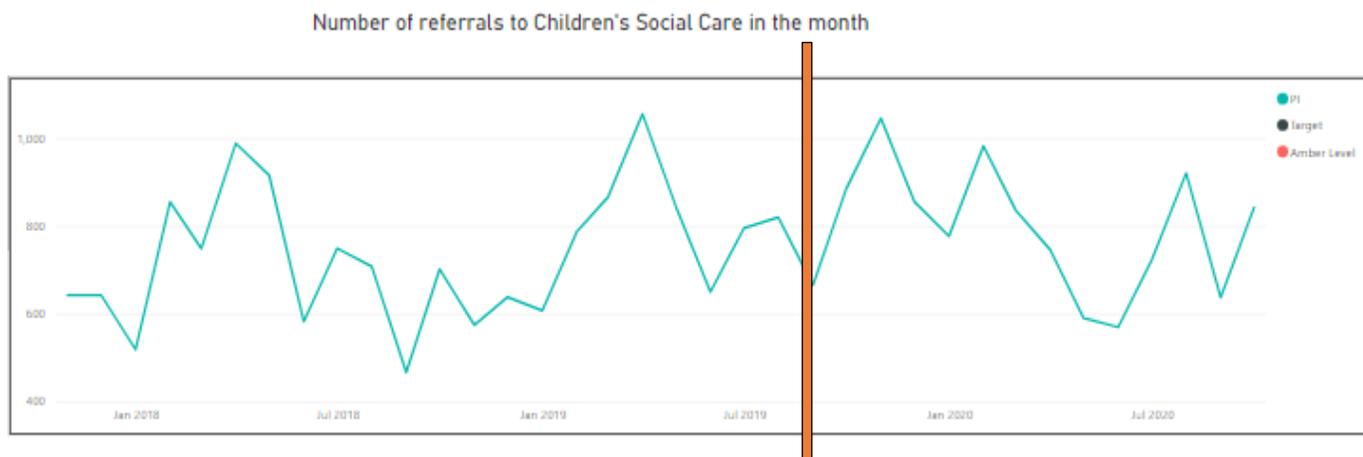


TABLE C

- 2.10 Reviewing the data from January 2020 (orange line denotes in Table C above) when there is a spike in referrals to the service, this also broadly correlates with the increase in sickness and trends seen in Table B above.
- 2.11 Factors that drive sickness in the workforce are numerous and varied. The Council captures this in the SAP HR system. Of the 5938 days lost to sickness in this period of review, the top 5 sickness reasons were:

<i>Sickness Reason</i>	<i>Days lost April 2019-Aug 2020</i>
Stress – work related	1449
Stress – non work related	906
Cold, flu, viral	606
Anxiety/Depression	567
Pregnancy related	496

TABLE D

- 2.12 The five factors listed in Table D account for 68% of all sickness recorded, with 'work related stress' accounting for 24% of absence rising to 34% if 'Anxiety/Depression' is also considered. Caution should be exercised when considering 'anxiety/depression' as this could be caused by a number of factors, not purely work.
- 2.13 Social workers tend to report higher levels of work-related stress than any other profession (Collins, 2009; Johnson et al 2005). There are many research studies and articles on 'burnout' in the profession. There is a growing body of literature that explores how stress impacts on judgement and performance in general. Sound judgement and utilising best evidence and data is a fundamental part of the role of a social worker.
- 2.14 Organisational factors contribute significantly to stress and/or burnout. According to the Health and Safety Executive (HSE), the causes of 'work-related stress' are broken into six main areas:

- Demand: Feeling able to cope with your workload
- Control: Having a say about the way in which you carry out your work
- Support: Feeling supported by managers and colleagues
- Relationships: Working in an environment free from bullying or intimidation
- Role: Having clarity over your role
- Change: Receiving sufficient information to manage necessary organisational change

2.15 Considering the impact of caseloads on individuals is also key and is the ‘demand’ factor mentioned above. How individuals handle the volume of work is hugely varied and closely related to personal levels of resilience. There are examples of individuals who have persistently high case allocation and have then had long periods of ‘stress- related’ sickness and/or resigned from the Council. Yet, similarly there are examples of individuals who continually work with high workloads but do not feel stress in the same way. Understanding individuals and their drivers, stressors and motivators is essential in a social care context. This can be built into the recruitment process.

2.16 Given team stability and the chance to distribute work across team members is a key component to managing stress and burnout, it is important to highlight the following ongoing work with regards to recruitment:

- Following appointment of the permanent Deputy Director a number of permanent Heads of Service have been appointed this year.
- Therefore, all established senior leadership posts are now filled by a permanent post-holder which provides much-needed stability of leadership. This was reflected in a positive way by staff in a recent focus group.
- Subsequently, permanent appointments have been made to vacant Service Manager posts and thus all posts are now filled on a permanent basis again providing stability and consistency for teams and services which is, in part, borne out in the changes shown in table B.
- We have continued a programme of rolling recruitment for Team Manager and Social Worker posts.
- In addition, we have increased the number of Practice Supervisor and Children’s Resource Worker posts and have filled a number of these with further recruitment planned. Both of these posts are critical to staff retention because both can make a strong contribution to the “quality of life” of our social work staff in terms of the support they can offer in different ways.
- Similarly, we have now agreed to the expansion of our business support resource which our social workers tell us is an important part of their wellbeing and workload management.

2.17 We are currently developing a new Workforce Strategy that is underpinned by a planned expansion of our Workforce Development Team and clear statements around our Practice Frameworks and Ethos.

2.18 Recruitment of new staff is key to our strategy. The very latest research tells us that the vast majority of social workers would not consider moving to an inadequate local authority. See Table E below:

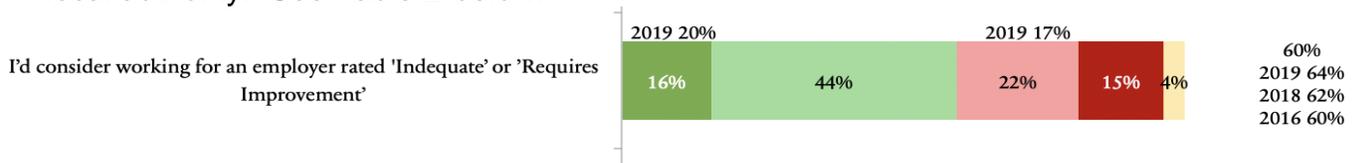


TABLE E (source: Community Care - Job Seeker Survey 2020. N = 2420)

2.19 Table E demonstrates that there are potentially significant challenges for Bradford in recruiting permanent staff and our offer must be highly competitive and compelling if we want to attract people to us from other local authorities. Although financial rewards are important, what social workers and other staff tell us is that “quality of life” issues such as feeling safe, supported and valued is equal value to them and the creation of a stable, supportive environment with manageable workloads, coupled with a competitive financial package is the key to future recruitment and retention. The factors identified in relation to sickness in paragraph 2.14 are equally applicable to retention and recruitment. What tempts social workers to move job is outlined in Table F below, meaningful insight and issues that we must address and factor into our future plans:

What tempts social workers to move jobs?

Top 5 temptations to move jobs	Top 5 most important benefits	Top 5 details in job advertisements
<ul style="list-style-type: none"> Better work/life balance Better salary Better career development opportunities New challenges and experiences Flexible working 	<ul style="list-style-type: none"> Flexible working (i.e. job sharing or compressed hours) Being able to work from home/remotely occasionally Free parking Generous pension scheme Holiday entitlement 	<ul style="list-style-type: none"> Salary Job description Management approach (culture, supervision frequency) Information on team working with Caseloads

TABLE F (source: Community Care - Job Seeker Survey 2020. N = 2420)

2.19 Recruitment remains a challenge and we continue to have too many vacant social worker posts that are filled by agency workers, particularly at Level 3. This is particularly the case within our Assessment and Intervention Teams where the bulk of our child in need and child protection work is held - arguably one of the most difficult areas of work. This presents challenges in relation to the additional costs associated with this and also with the potential inconsistency and instability caused by temporary staff. The presence of a high number of agency staff can also cause tensions with the permanent workforce due to the disparity in pay and some staff have left us in order to seek employment via agency due to the significantly higher salaries on offer.

2.20 Nonetheless we do continue to appoint permanent people and in the past five months have appointed the following permanent roles:

Newly-qualified social workers	34
Experienced social workers	10
Practice Supervisors	34
Team Managers	15
Service Managers	3
Children's Resource Workers	62
Supervising Social Workers (Fostering)	4
Advanced Practitioners	5

2.21 In addition we have also appointed permanently to a number of other vacancies, for example, Family Finding Social Workers and Social Workers in the Problem Solving Court Team. We have also created and recruited to four Court Consultant roles to support staff in the localities who are undertaking court work, which many find difficult at the start of their careers.

2.22 The number of vacant posts is reducing. At management and senior level we are now more stable than we have been for some time. We now only have three permanent vacant Team Manager posts across our 25 Assessment and Intervention Teams.

2.23 However in respect of child protection social workers we continue to have a high number of vacancies and this is the biggest area of challenge. To put this into context, this is not just a Bradford issue, this is a national issue.

2.22 The new Workforce Strategy will clearly set out our vision for the services we deliver to children and states clearly that we can only achieve this by:

- Nurturing social work practice which is steeped in building effective relationships with children their families
- Creating safety where this is needed and supporting families to be ambitious for their children
- Creating a culture of high support and high challenge for our workforce whilst respectful and restorative in our approach
- Creating safe and reflective spaces for our practitioners to receive the highest standards of support
- Providing coaching and mentoring to all our staff
- Supporting career development and CPD opportunities

2.23 Therefore, recent developments to our staff supervision and appraisal policy, the development of staff forums, the employment of an increased number of senior staff in supporting/coaching roles and the ability of staff to begin to shape policy are all key elements of the strategy. We have recently determined our future model for social work practice and will continue to use the Signs of Safety approach which the majority of social workers are now familiar with and feel comfortable with.

2.24 Similarly the expansion of our Workforce Development Unit will enable us to nurture and develop our staff whether they are newly qualified or experienced.

3. OTHER CONSIDERATIONS

3.1 Recruitment, retention, sickness management are key areas of our Improvement Plan. Our improvement in practice is reliant on a skilled, stable and resilient workforce.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 The impact of an 'Inadequate' Ofsted judgement has impacted the workforce and driven agency usage which has had a financial impact on the Council. Work is currently underway to correct this position and stabilise the workforce.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

N/A

6. LEGAL APPRAISAL

N/A

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

Ethnicity %						
Region/Local Authority - BRADFORD	White (%)	Mixed Race (%)	Asian or Asian British (%)	Black or Black British (%)	Any Other Ethnicity (%)	Refused or Information Not Available (%)
Sep-16						
Sep-17	57.4	x	24.9	4.1	x	9.0
Sep-18	55.7	3.4	27.9	4.2	1.0	7.8
Sep-19	56.7	5.1	33.1	4.2	0.9	

Previous Department of Education Annual Returns provide a useful snapshot of the good mix of ethnicity in our social work workforce. Gender data also shows that we consistently employ a split of 85% female to 15% male social workers. This gender mix is consistent with the UK demographics for the social work workforce.

7.2 SUSTAINABILITY IMPLICATIONS

N/A

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

N/A

7.4 COMMUNITY SAFETY IMPLICATIONS

Contact the Safer Communities Delivery Co-ordinator on (01274) 431364 for further guidance.

7.5 HUMAN RIGHTS ACT

Refer to the guidance contained in: 'Deciding Rights - Applying the Human Rights Act to Good Practice in Local Authority Decision-Making' published by the Local Government Association (<https://www.local.gov.uk>).

Consult the lawyer who normally offers advice in relation to the matters covered in the report.

7.6 TRADE UNION

N/A

7.7 WARD IMPLICATIONS

N/A

7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS

N/A

7.9 IMPLICATIONS FOR CORPORATE PARENTING

Refer to the guidance contained in the Report Guide.

7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

Undertake a Privacy Impact Assessment to determine whether you need to deal with data protection and information security matters arising from the proposal/decision.

8. NOT FOR PUBLICATION DOCUMENTS

None

9. **OPTIONS**

Close monitoring of sickness to continue and future update to be scheduled for this Committee at a timeframe to be confirmed by Members.

10. **RECOMMENDATIONS**

The views of the Committee are invited around the content of this report and a timeframe around frequency of updates on this matter to be determined.

11. **APPENDICES**

N/A

12. **BACKGROUND DOCUMENTS**

N/A