

ABERDEEN CITY COUNCIL

COMMITTEE	Staff Governance
DATE	18 June 2019
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	EAS Annual Report: April 2018 – March 2019
REPORT NUMBER	RES/19/295
DIRECTOR	Steven Whyte, Director of Resources
CHIEF OFFICER	Isla Newcombe, Organisational Development
REPORT AUTHOR	Rebekah Walker, Health and Wellbeing Advisor
TERMS OF REFERENCE	4.2

1. PURPOSE OF REPORT

- 1.1 This report updates the Committee on utilisation of the Employee Assistance Service (EAS) provided by Time for Talking during the last 12 month period April 2018 – March 2019.

2. RECOMMENDATIONS

That Committee:

- 2.1 considers the contents of the report; and
- 2.2 instructs the Director of Resources to request evidence from Functions on the actions taken to support individuals and address trends (usage and root causes) as detailed in the report.

3. BACKGROUND

- 3.1 Following a joint tender evaluation process with Aberdeenshire Council, Therapeutic Counselling Services Ltd. (Time for Talking) were awarded the Employee Assistance Service (EAS) contract. The contract commenced on 01 January 2017 and is for the duration of 3 years with the option of extending for a further period of up to 24 months.
- 3.2 This report contains utilisation information on the 12 month reporting period (April 2018 – March 2019). This report therefore has limited comparison figures for the corresponding period reported under the previous Directorate structure.

Utilisation (April 2018 – March 2019)

3.3 A total of 140 referrals were made during the 12 month period comprising of employees (137) and family members (3). The overall figure is higher than the last annual reporting period (April 2017 – March 2018) of 125 referrals (employees 122; family members 2; foster carers 1). There were a higher number of referrals relating to Personal Issues (94) compared to Work Related Issues (46) a similar trend as the last reporting period. The greatest number of referrals was from Operations (62%), this includes Integrated Children's and Family Services and Protective Services and accounts for 68% of all employees in the workplace. The greatest percentage of staff usage came from Resources.

3.3.1 Overall the provided utilisation information has increased compared to last annual reporting period. Work Related Issues remain similar to last period, with Demands (Workload/ Stress/Anxiety) being the most common reason for utilisation (43 out of 46). These figures have significantly risen compared to last reporting period (18 out of 31). Of the Personal Issues 62 out of 94 relates to Personal stress/Depression/Anxiety/Anger similar, to the last reporting period (58 out of 94).

3.3.2 A person can experience excessive pressure and demands outside work just as much as they can at work. Stress tends to build up over time because of a combination of factors that may not all be work related. Conflicting demands of work and home can cause excessive stress. Stressors at home can affect those at work and vice versa. The "adverse reaction people have to excessive pressures or other types of demand placed on them" (HSE, 2018) can seriously undermine the quality of people's working lives and, in turn, the effectiveness of the workplace.

3.3.3 The breakdown of figures by Function and issue for the period April 2018 to March 2019 is shown in the table below: -

Functions	Number of Staff within Service	% of Staff usage	Number of referrals	Personal Issues	Health/Bereavement	Addiction/Abuse	Relationship/Family Issues	Personal Stress/Depression/Anxiety/Anger	Traumatic Incident	Work Related Issues	Change (Organisational/redundancy)	Demands (Workload/Stress/Anxiety)	Relationships (with colleagues)	Relationships with manager (Bullying Harassment)	Role (Understanding of)	Support (discipline & grievance)	Control
Commissioning	101	1.98	2		0	0	0	0	0		0	2	0	0	0	0	0
Customer	1189	2.61	31		3	0	3	14	0		0	11	0	0	0	0	0
Operations	5151	1.69	87		12	0	10	39	0		1	24	0	1	0	0	0
AHSCP	607	0.82	5		1	0	0	2	0		0	2	0	0	0	0	0
Resources	327	3.06	10		1	0	0	4	0		0	4	0	0	1	0	0
Governance	81	2.47	2		0	0	1	1	0		0	0	0	0	0	0	0
Place	156	0.00	0		0	0	0	0	0		0	0	0	0	0	0	0
Foster Carers	0		0		0	0	0	0	0		0	0	0	0	0	0	0
Elected Members	0		0		0	0	0	0	0		0	0	0	0	0	0	0
Family Member	0		3		1	0	0	2	0		0	0	0	0	0	0	0
Total Number of Referrals/C'ling	7612	12.63	140	0	18	0	14	62	0	0	1	43	0	1	1	0	0

3.3.4 A further breakdown of figures by cluster for the period April 2018 to March 2019 is shown in the table below: -

	Clusters	Commercial and Procurement	Bus Intelligence & Perf Manage	ALEO's	Customer Experience	Early interven and Comm Emp	Digital and technology	External Communications	Integrated Childrens and Fam Serv	Operations and Protective Services	Aberdeen Health & Soc	Finance	Capital	People and Organisation	Corporate Landlord	Governance	Strategic Place Planning	City Growth	Foster Carers	Elected Members	Family Member	
Commissioning		1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Customer		0	0	0	5	25	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operations		0	0	0	0	0	0	0	66	21	0	0	0	0	0	0	0	0	0	0	0	0
AHSCP		0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0
Resources		0	0	0	0	0	0	0	0	0	0	2	0	6	2	0	0	0	0	0	0	0
Governance		0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0
Place		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Foster Carers		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Elected Members		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Family Member***		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3
		1	1	0	5	25	1	0	66	21	5	2	0	6	2	2	0	0	0	0	0	3

3.4 The number of referrals for the same reporting period (April 2018 to March 2019) are higher than the last 3 years. However more has been done to increase awareness of the service for example posters have been displayed in all workplaces, new information leaflets have been produced and more information has been made available on People Anytime with the different ways to contact Time for Talking.

- April 2015 – March 2016 114
- April 2016 – March 2017 136
- April 2017 – March 2018 125
- **April 2018 – March 2019 140**

3.5 The percentage of the Council's workforce that used the service is detailed below, along with similar sized local authorities' industry averages for comparison for the annual reporting period:

Council A – Aberdeen City Council	1.57%
Council B	1.39%
Council C	1.25%
Council D	2.18%

3.6 Both full-time (135) and part-time (2) employees are using the service (26% male; 74% females). There has been an increase in fulltime (102) and a decrease in part-time (23) using the service from the last annual reporting period. The majority of employees have been at work (82) compared to those

absent from work (55) when receiving support. This is an increase in employees from the last reporting period who were absent from work (39). Three family members have used the service. Full details are shown in the table below:

	Demographics	Male	Female	Full Time	Part Time		Currently at work	Absent from work
Commissioning		0	2	2	0		2	0
Customer		11	20	31	0		20	11
Operations		17	70	85	2		51	36
AHSCP		4	1	5	0		3	2
Resources		3	7	10	0		4	6
Governance		1	1	2	0		2	0
Place		0	0	0	0		0	0
Foster Carers		0	0	0	0		0	0
Elected Members		0	0	0	0		0	0
Family Member***		1	2	0	0		0	0
		37	103	135	2		82	55

***Family member not included in Full / Part Time or at Work / Absent at work categories

- 3.7 In the reporting period there were both self-referrals (126) and management referrals (14). Management referrals have significantly increased from the last annual reporting period where all referrals were self-referrals and none were from management. The assistance provided was mainly via face to face counselling (96) along with telephone counselling (22). In addition to these a further 22 referrals were made, however these employees had yet to make their appointment therefore neither the face to face or telephone session had been confirmed. Face to face counselling has increased (96 compared to 84) and telephone counselling has increased (22 compared to 19) on the annual last reporting period. During the reporting period 5 employees were given additional sessions and a total of 14 additional sessions were provided. The number of additional sessions has significantly decreased from the last annual reporting period (10 employees were given additional sessions, a total of 31 additional sessions). Employees were made aware of the service via a range of means as detailed in the table below.

	Assistance Provided							Type of Referral		How Employees heard about Service				
	Helpline/Advice Only	No contact from client	Telephone Counselling	Face to face counselling	CBT Counselling Sessions	Live Zilla Counselling sessions	Management Referral	Self Referral	Website/Posters/Leaflets	Managers	Colleagues	HR	Wallet Cards	
Commissioning	0	0	0	2	0	0	0	2	8	14	24	30	0	
Customer	0	2	4	25	0	0	0	31						
Operations	3	12	15	55	2	0	14	73						
AHSCP	0	0	1	4	0	0	0	5						
Resources	0	2	1	7	0	0	0	10						
Governance	0	0	0	2	0	0	0	2						
Place	0	0	0	0	0	0	0	0						
Foster Carers	0	0	0	0	0	0	0	0						
Elected Members	0	0	0	0	0	0	0	0						
Family Member	0	1	1	1	0	0	0	3						
	3	17	22	96	2	0	14	126						

3.8 Service users are offered the opportunity to provide feedback on the service via a short questionnaire. A total of 17 anonymous questionnaires have been completed by service users in the last reporting period.

Actions

3.9 It is critical that Function leads, and responsible line management ensure that suitable and sufficient action is being taken to support individuals and address trends (usage and root causes). This includes the application of the Mental Health and Wellbeing in the Workplace Policy, adoption and delivery of the Mental Health Action Plan and supporting the Stress Procedure. Other improvement actions suggested include:

- Sharing with Function leads the information in this report so that local action plans can be developed
- Continued communication and advocacy of the service provided by Time for Talking
- Completion of risk assessments to assist in identifying, understanding and addressing factors that affect employees' mental health and wellbeing. Functions should be proactively completing Quality of Working Lives (QWL's) risk assessments for teams (and in some cases individuals) to identify improvement areas as detailed in the Health and Safety Executive (HSE) Management Standards;
- Completion of Line Manager Competency Indicator Tool (HSE) for managers to assess whether they currently have the behaviours identified as effective for preventing and reducing stress at work. This will assist managers reflect on their behaviour and management style and adapt as necessary;

- 3.10 People and Organisation will continue to advertise the service but must not rely on the EAS to address the issues. The mental health action plan approved by committee in January will also help to address issues by openly tackling the stigma against mental health creating a culture that is inclusive and recognises that everyone's mental health is important. Local mental health charities will also continue to be worked with to raise awareness of mental health. If no action is taken to address the root causes of issues and related absence the referral utilisation figures will continue to remain the same. Employee absence from work related mental health is in many cases the forerunner of contacting the EAS. Through good management and a proactive approach, the utilisation of the service from a work related perspective has the potential to be reduced along with the corresponding direct and indirect costs.
- 3.11 An effective EAS service supports individuals with difficulties in their lives; sometimes these problems can affect an individual's ability to function fully at work or at home. This in turn may impact on their health and wellbeing, which may also impact on their productivity, attendance and associated costs. Both direct and indirect costs require to be considered.
- 3.12 The longer an employee is off work the more challenging it becomes to manage their health problems and less likely that they will return to work. Long-term absence is costly. There is mutual benefit if we can proactively support employees in the workplace and help employees avoid long waiting times for, e.g. counselling or psychological therapy.

4. FINANCIAL IMPLICATIONS

- 4.1 There are no direct financial consequences resulting from this report. The award price for the current EAS contract has been calculated on the expected usage. If usage climbs above the expected level, there will be a cost implication and a sharp increase in usage should be investigated and considered.
- 4.2 There is also the potential for employment tribunal associated costs if an employee was to make an employment related claim against the Council.

5. LEGAL IMPLICATIONS

- 5.1 Failure to comply with legislation in ensuring a safe and healthy workplace has the potential to result in enforcement action by the Health and Safety Executive (HSE). Such intervention can result in potential prosecution (criminal) equally, employees (civil claims) are more likely to succeed following as successful HSE prosecution. Changes in the Sentencing and Fines Guidance for health and safety non-compliances are resulting in increased financial penalties. Fine starting points are based on an organisation's turnover. As Local Authorities do not have turnover; Annual Revenue Budget is deemed to be the equivalent. This amount is then altered depending on the culpability of the organisation and harm factors to employees and members of the public.

- 5.2 Under the Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999 there is a legal requirement to ensure the health safety and welfare at work of our employees. This includes minimising the risk of stress-related illness or injury to employees.
- 5.3 The provision of an EAS is in line with guidance produced by the HSE as one of the measures to control that risk. One person in four in the UK will experience a mental health problem in their lives.
- 5.4 HSE potential prosecution (criminal) can attract fines, imprisonment and remedial orders. There is also the possibility of employee claims (civil). Provision of an EAS can be used as mitigation against potential claims from employees exposed to work related stress.

6. MANAGEMENT OF RISK

- 6.1 The risks with the potential to impact the decision being sought from the Committee are categorised as:

	Risk	Low (L), Medium (M), High (H)	Mitigation
Financial	If no action is taken to support individuals and address trends, then the organisation will incur both direct and indirect costs.	M	Implementation of the Mental Health and Wellbeing in the Workplace Policy and supporting Stress Procedure. Effective management and maintenance of a mentally healthy workplace and provision of appropriate support. Review and identification of EAS use and related absence to act on lessons learned. Corporate and individual awareness of mental health in the workplace. Active monitoring of work-loads.
Legal	Compliance with legal requirements ensures the health and safety of	M	As above. Assessment of risk via stress and QWL's risk

	employees. Poor management of the risks and lack of support has the potential to attract enforcement action (criminal and civil).		assessments with identification and implementation of safe working arrangements. Functions acting on utilisation, trend and root cause information to develop and implement controls to prevent a reoccurrence. Completion of Line Manager Competency Indicator Tool (HSE) by line managers acting on feedback. Provision of specialist support / advice.
Employee	Ineffective support during challenging times impacting on an employee's personal health and wellbeing. This has the potential to affect their resilience and ability to function at work and with general life events. This can result in employee ill health and related absence. The longer an employee is absent the more likely it will impact on an employee's health and wellbeing and the less likely that they will return to the workplace.	M	As above. Provision of information, instruction and training as identified in Job Profiles, skills and training matrices and in risk assessment. Open and clear two-way communication at all levels within the organisation. Non-judgmental and proactive support provided to employees who experience mental health problems. Good self-management of personal wellbeing and resilience.
Customer	Reduced quality of service delivery owing to the lack of resource. No identification of trends and root causes will not address or prevent reoccurrence and not ensure a safe and healthy employee workplace.	M	As above.
Environment	No risk or impact was identified.	-	-

Technology	No risk or impact was identified.	-	-
Reputational	Without ensuring suitable employee support there is a risk of the organisation not being seen as an employer of choice and having recruitment and retention issues. Potential civil or criminal action against the organisation will also adversely impact upon its reputation.	L	As above.

7. OUTCOMES

Design Principles of Target Operating Model	
	Impact of Report
Governance	The provision of EAS utilisation figures and trends provides an opportunity for the committee to scrutinise the provided management information. It enables what action has been taken by Function responsible line management to support individuals and address trends to be questioned. From the evidence the committee can determine if the level of assurance provided is acceptable in effectively managing health and safety.
Workforce	The report provides the opportunity for the committee to ensure that trends are addressed and the health and safety management system improved. This would reduce the risk of lost resource through for example absence, enforcement action and potential claims. Early address of issues has the potential to reduce impact on employees and the wider community reducing demands on other public sector organisations.
Process Design	This can allow the committee to identify where processes are failing to address health and safety risks and improve wellbeing.
Partnerships and Alliances	This allows Trade Unions, elected members and officers to collaborate.

8. IMPACT ASSESSMENTS

Assessment	Outcome
Equality & Human Rights Impact Assessment	Not required
Data Protection Impact Assessment	Not required
Duty of Due Regard / Fairer Scotland Duty	Not Applicable

9. BACKGROUND PAPERS

Employee Assistance Service – Time for Talking Annual review 01 April 2018 – 31 March 2019.

10. APPENDICES

There are no appendices.

11. REPORT AUTHOR CONTACT DETAILS

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