# User Guide to Sickness Absence Statistics in the Northern Ireland Civil Service

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## Section 1 Background

The Northern Ireland Civil Service's sickness absence statistics have been collated and reported by the Human Resource Consultancy Services (HRCS) branch (formerly named Human Resource Research and Evaluation Branch - HRREB) within the Northern Ireland Statistics & Research Agency (NISRA) since 1999/2000. These statistics are currently official statistics but are due for assessment as National Statistics by the UK Statistics Authority during 2018/19. They are published on a financial year basis with the report (https://www.nisra.gov.uk/statistics/ni-civil-service-human-resource-statistics/sickness-absence-statistics) currently issued around September each year.

HRCS is one of a number of NISRA branches within the Dept. of Finance in the Northern Ireland Civil Service (NICS). The branch currently consists of 14 statisticians, 5 of whom oversee the reporting of the NI Civil Service's sickness absence statistics. The NISRA statisticians work in compliance with the UK Statistics Authority's Code of Practice for Statistics (<u>https://www.statisticsauthority.gov.uk/code-of-practice/</u>).

Sickness absence statistics are commonly used by private and public sector organisations across the world to monitor absence levels and are a key performance indicator used to inform decision making by senior management. In terms of the availability of comparative absence statistics, high level information is generally available for public sector organisations but it is less readily available for private sector organisations. This is thought to be due to a combination of factors such as the fact that they are not required to report this information and also because it might be considered as commercially sensitive information – potentially giving competitors information on the company's performance. Furthermore, many public sector organisations do not publish their absence statistics as official statistics but instead make them available as management information. We are unaware of any absence statistics sourced from administrative data in the UK that are being published as National Statistics.

Reporting sickness absence on a "working days lost per staff year" basis was recommended by the Cabinet Office in the review "Working Well Together - Managing Attendance in the Public Sector (1998)". This approach replaced "working days lost per person" which was felt to be a poor measure for comparing absence levels between organisations which have different proportions of part-time staff and/or levels of staff turnover. From the start, NISRA therefore adopted the "working days lost per staff year" methodology as it was best practice and would allow for better comparability.

Building on the work of the 1998 report, on 11<sup>th</sup> May 2006 the Director of Employment and Reward, part of the Cabinet Office, issued a set of standardised definitions for the reporting of sickness absence management (see Appendix 1). These had come about because UK Government Ministers had, for some time, been keen to see better and timelier data on sick absence. The Ministerial Task Force on Health, Safety and Productivity had, in particular, highlighted the need for an accurate and common set of sick absence data and standards against which robust targets could be set and reported. The recent implementation of new standards for headcount information across the public sector by the Office of National Statistics (ONS) had highlighted anomalies in sick absence information, preventing consistent messages around the overall efficiency and productivity of civil servants. This inconsistency also prevented benchmarking with external bodies such as the Chartered Institute of Personnel and Development (CIPD) and the Confederation of British Industry (CBI) that continue to report on a "working days lost per person" basis.

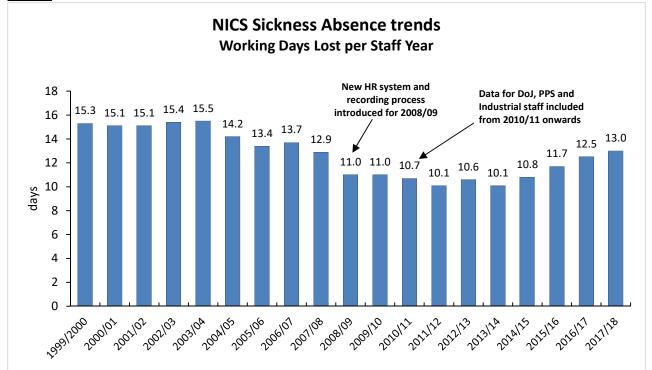
Between November 2005 and March 2006 a Working Group consisting of the larger UK Departments met. Their remit was to agree common definitions and standards for sick absence reporting across Government to facilitate more consistent and effective monitoring, benchmarking, target setting and time series analysis.

Analysts and senior HR practitioners in these Departments worked through a large number of issues to establish a set of standards to enable more robust analysis and reporting of sick absence across the Home Civil Service. At its final meeting on 27 March 2006 the Steering Group ratified these new standards.

The sickness absence statistics for the NICS are therefore calculated in a similar way as those for the Civil Service in England, Wales and Scotland, which are also based on the Cabinet Office guidance.

#### Trends in Sickness Absence over the years in the NICS

Chart 1 shows the average days lost per staff year due to sickness absence in the NICS for the last 19 available years. During the early 2000s around 15.0-15.5 days were lost on average per staff year. This then dropped over subsequent years until 2011/12 when it reached its lowest level of 10.1 days lost per staff year. In the 6 years since then the average has increased to 13.0 days, still some 2.5 days lower than its peak in 2003/04.



#### Chart 1

#### Notes:

- The actual 2010/11 publication (<u>https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-201011</u>) contained a headline figure of 10.4 days. This figure was subsequently revised to 10.7 days when data for NI Prison Service Prison Grade staff became available [see 2011/12 report (<u>https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-201112</u>) for more details].
- A report, for Industrial staff only, was produced for 2009/10 (headline figure of 13.4 days lost per staff year) as the relevant data was not available in time to be included in the main report for 2009/10. A copy of this report is available at <a href="https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-industrial-staff-200910">https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-industrial-staff-200910</a>.

#### Comparison with other Civil Service Sickness Absence Statistics / Local Councils

The Cabinet Office publish quarterly headline sickness absence statistics (on a rolling 12-month basis) in the form of a tabular report with no accompanying text or explanation (<u>https://www.gov.uk/government/publications/cabinet-office-absence-data</u>). These quarterly reports provide headline absence figures broken down by geographical area, gender, age group and grade level.

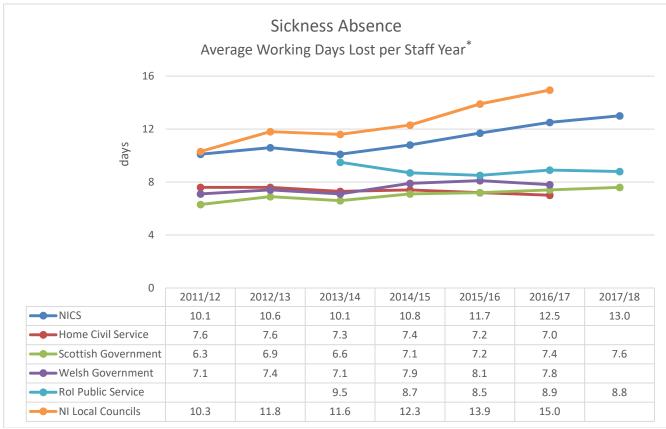
Headline figures since 1999 for the Home Civil Service overall are also published quarterly (on a rolling 12month basis) at <u>https://www.gov.uk/government/publications/civil-service-sickness-absence</u> along with some limited commentary. However, in-depth comparisons cannot be made as they do not publish figures beyond the headline rate. The headline figures would achieve a grade D on the 4 Nations Comparability Scale (Comparing Official Statistics Across the UK) given that they are produced from separate sources of data but the methods and standards are broadly comparable.

In Scotland the sickness absence statistics for the Scottish Government workforce are reported quarterly (on a rolling 12-month basis) at <u>https://beta.gov.scot/publications/workforce-information/</u>, along with explanatory notes. They are produced on a "per staff year" basis.

The Welsh Government includes headline sickness absence figures in their annual Consolidated Accounts, available at <u>https://beta.gov.wales/welsh-government-consolidated-annual-accounts</u>. They are produced on a "per staff year" basis also.

In the Republic of Ireland (RoI), sick leave statistics for the Public Service are published annually (on a calendar year basis) at <u>https://hr.per.gov.ie/sick-leave/</u>. These are on a "per full-time equivalent" basis.

The NI Audit Office publish a Local Government Auditor's Report (<u>https://www.niauditoffice.gov.uk/publications/local-government-auditors-report-2018</u>) each year that includes information on sickness absence levels in the local councils. These are presented on a "per employee" basis.



\* Rol Public Service figures are for calendar years from 2013 to 2017, and are reported on a "per full-time equivalent" basis. NI Local Councils figures are on a "per employee" basis.

#### **Comparisons with Private Sector**

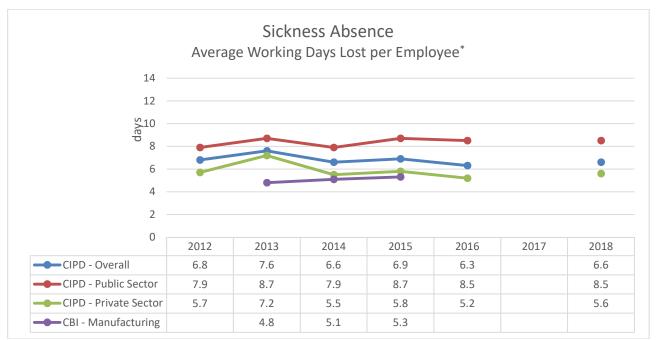
Across the wider labour market the Office for National Statistics undertakes a quarterly Labour Force survey that contains information on sickness absence

(https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sickness sabsenceinthelabourmarket/2016). This survey is also replicated in Northern Ireland, with a sickness absence table appearing in their Quarterly Supplement (https://www.nisra.gov.uk/statistics/labour-marketand-social-welfare/labour-force-survey). The CIPD also commission a survey (<u>https://www.cipd.co.uk/knowledge/culture/well-being/health-well-being-work</u>) each year that then reports on levels of sickness absence across the various UK labour market sectors. The CBI carry out a similar survey for UK manufacturers (<u>https://www.eef.org.uk/resources-and-knowledge/research-and-intelligence/industry-reports/sickness-absence-survey-2016-sponsored-by-jelf</u>).

Care should be taken when making comparisons with the sickness absence reports produced by CIPD or CBI, which are often quoted in the press. These are based on survey returns which can be affected by response bias. For example, firms with solid methods of data collection and that have 'good' figures to report may be the ones most likely to send in their figures. These organisations also report on a "per person" method while the NICS reports on a 'per Staff Year' basis, as per Cabinet Office guidelines, which methodologically tends to return a higher figure. In particular, using the 'per person' method can markedly underreport the absence levels of organisations with a high proportion of part-time staff and/or high levels of staff turnover (see worked example on page 16).

The "per Staff Year" method takes account of the hours a member of staff actually works whereas the "per person" method uses the number of staff employed but disregards their working patterns. The Staff Year value is a better reflection of the real working time available because it takes into consideration both the contracted hours worked and the proportion of the year for which staff were employed. This enables more meaningful comparisons to be made with external organisations and between/within Departments.

Typically the number of Staff Years is less than the headcount of staff and therefore an organisation's Working Days Lost per Staff Year figure will tend to be higher than their Working Days Lost per Person figure. The magnitude of this difference will depend on the proportion of part-time staff and the level of staff turnover in the organisation. For example, in the GB Civil Service the difference has been estimated to be about one day<sup>1</sup>.



\* CIPD figures are based on an annual survey with between 342 (2014) and 736 (2016) responses. The figures also exclude the top and bottom 5% of responses and are reported on a "per employee" basis – a methodology that tends to report a lower level of absence than a "per Staff Year" approach. The figures reported by CIPD for 2018 relate to their survey undertaken in November 2017.

<sup>&</sup>lt;sup>1</sup> <u>https://www.gov.uk/government/publications/civil-service-sickness-absence</u>

## Section 2: NI Civil Service Absence Statistics Recording Process

The procedures for collating, validating and reporting the NICS sickness absence statistics have largely been in place since the new HR IT system (HRConnect) was introduced in 2006/07. The processes have been continually reviewed and refined over the years to improve the service. Detailed instructions are documented for statisticians working on the absence statistics within HR Consultancy Services Branch, to ensure that consistency of approach is adopted.

Within the NI Civil Service, the vast majority of staff absence is recorded on the organisation's on-line HR system (HRConnect). The HRConnect system was procured in 2006 and is available to virtually all NI Civil Service staff members (data for the NI Prison Service comes from another admin system called COMPASS). It enables staff and line managers to manage their HR functions electronically providing a more efficient service. The main functions that HRConnect covers are:

- Recruitment and promotion;
- Equality (section 75 equality variables required for monitoring purposes);
- Personal details (bank account, home address, next of kin etc.);
- Sickness absence recording and management;
- Staffing levels numbers of staff in post within the NICS by Department, grade and profession etc.;
- Pay, pay scales & pay agreements;
- Performance management reviews;
- Requesting annual leave, special leave etc.; and
- Recording and claiming for overtime worked or additional allowances due.

The introduction of HRConnect replaced a manual paper based process for recording these details where individuals/line managers updated the details by paper form which was then forwarded by post to Departmental HR staff who then updated a central HR database (HRMS) with the details. The move to HRConnect and the on-line element of the process replaced the need for the paper forms and the Departmental staff inputting the details and relies instead on the individuals and their line manager updating the system.

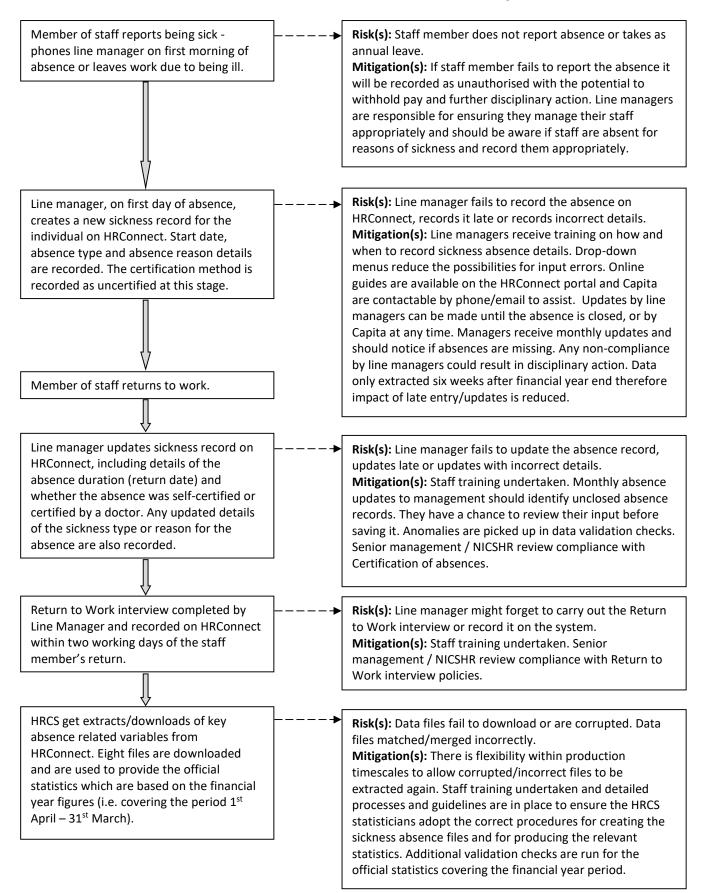
The HRConnect system is administered and managed by external contractors (Fujitsu/Capita) on behalf of the NI Civil Service. A small number of Civil Servants do not have access to HRConnect as they are seconded to public bodies outside the NI Civil Service IT network, do not have easy access to computers (e.g. Industrial staff) or because they are part of another HR system. Those civil servants who do not have on-line access to the system have their absence recorded by HRConnect through the emailing of absence details to HRConnect (Capita) by the out-posted staff.

Key aspects of the process are monitored by Departments and by NICS HR throughout the year, to ensure that absences are recorded promptly and the relevant details completed throughout the various stages of the absence process.

## NI Civil Service Sickness Absence Recording Process – HRConnect

#### Process

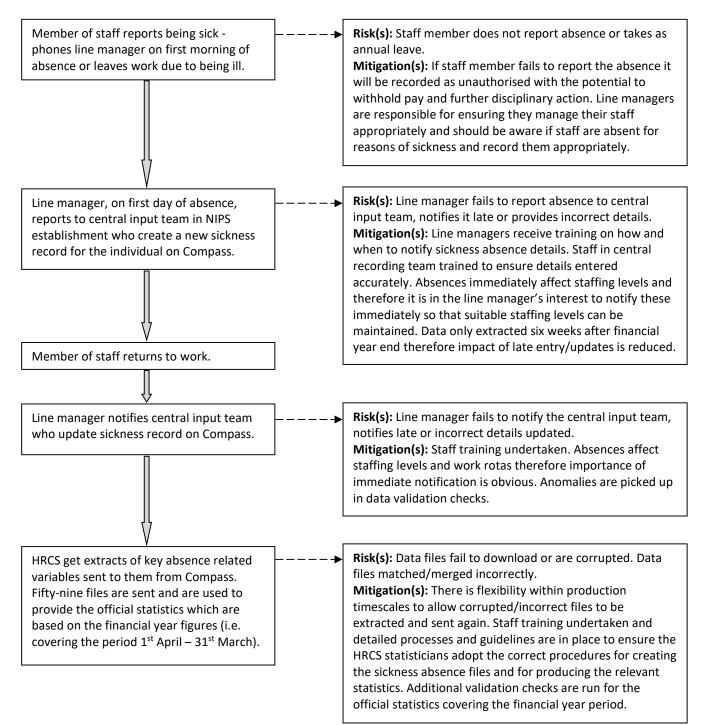
#### Risk(s) and Associated Mitigation(s)



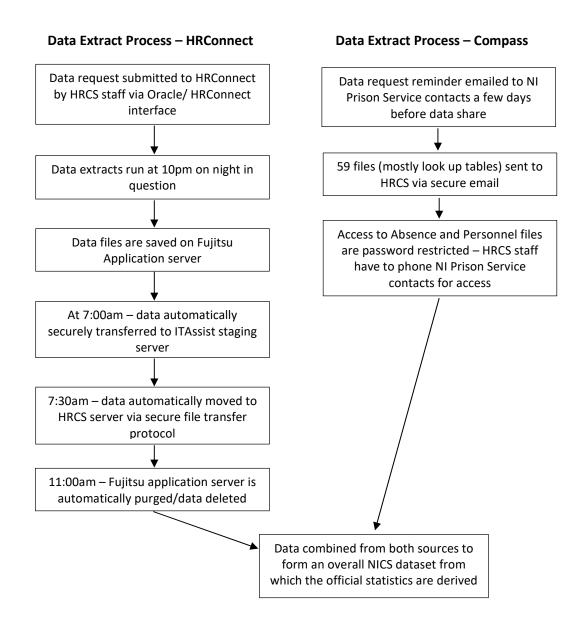
## NI Civil Service Sickness Absence Recording Process – COMPASS

#### Process

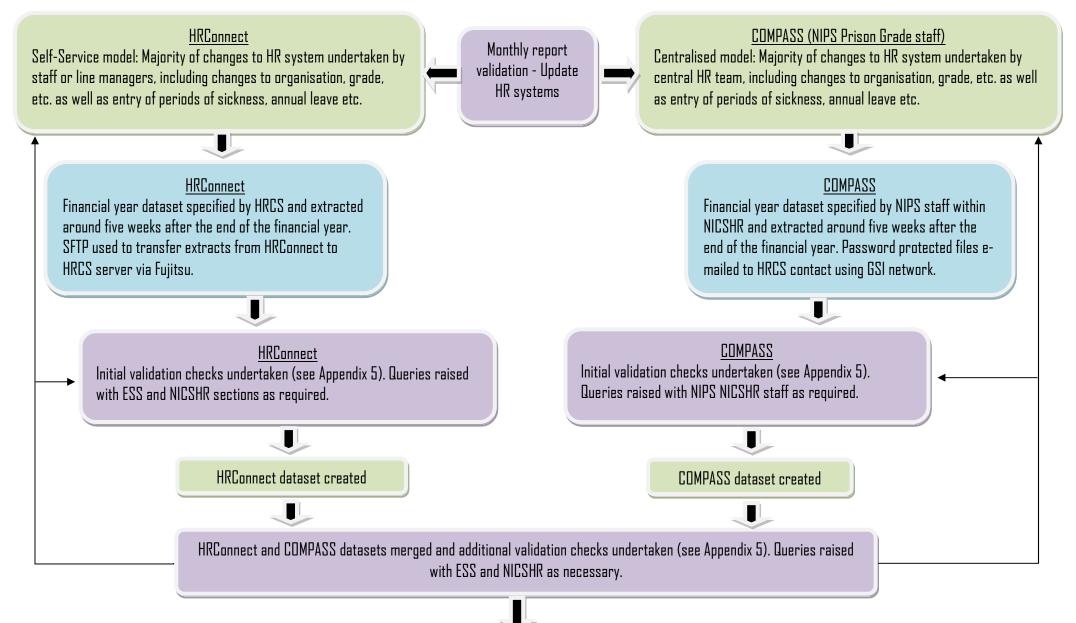
#### Risk(s) and Associated Mitigation(s)

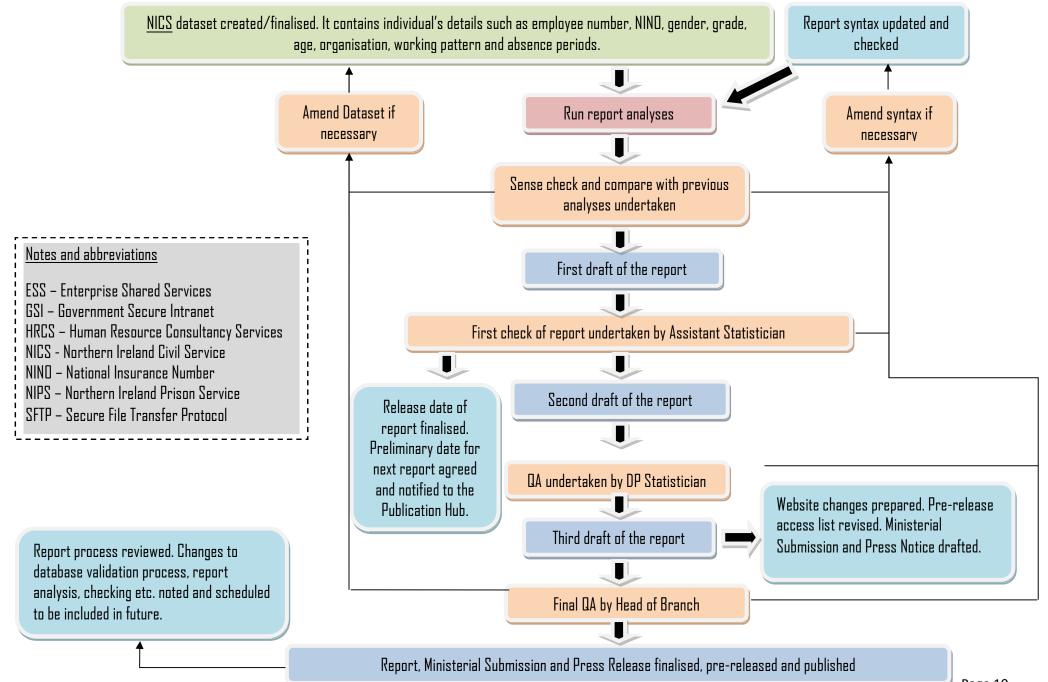


### **Overview of HRCS Data Extract Process**



### **Report Production - Process Map**





#### Changes in the NICS Absence Statistics Data Series over time

Analyses prior to 2008/2009 were based on data extracted from HRMS (the previous HR system used by the NICS). Sickness absence information was entered onto this system by Departmental HR staff based on manually completed weekly sick returns. Under the new system (HRConnect) it is the responsibility of line managers to record sickness absence information (except for Industrial staff where, due to a lack of regular access to computers, manual returns continue to be submitted on a weekly basis for input onto HRConnect). This change in recording practices coincided with an increase in the proportion of staff with no absences and should be taken into consideration when analysing historical trends.

The recording of the reason for absence also changed in 2008/2009 from using the International Classification of Diseases (ICD) codes to the Sickness Absence Recording Tool (SART). Trend data relating to the reason for absence is therefore not available prior to 2008/2009. Details regarding the SART classification can be found at <a href="http://www.iom-world.org/sicknessabsence/index.htm">http://www.iom-world.org/sicknessabsence/index.htm</a>. These were developed by the Institute of Occupational Medicine (IOM) for the UK Health and Safety Executive (HSE). A slight variation from these SART reasons was actually implemented for the NICS enabling a differentiation between work and non-work related stress. Post-natal depression and post-natal debility were also added as level 2 classification options under Pregnancy related disorders.

Prior to 2010/2011 Industrial staff were not included in the analyses (a separate Industrial report was available for 2009/2010 - <u>https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-industrial-staff-200910</u>), nor were staff in the Department of Justice (DoJ) or the Public Prosecution Service (PPS). Historic figures are therefore not directly comparable with analyses for 2010/2011 onwards.

Headline Departmental figures for 2009/2010 that include DoJ, PPS and Industrial staff can be found in the Targets chapter of the 2010/2011 report (<u>https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-201011</u>). The figures for 2009/2010 were used as a baseline for the setting of strategic targets.

Around November 2013, HR information, including historic sickness absence information, relating to staff in the Northern Ireland Courts and Tribunals Service (NICTS) was moved onto HRConnect (the main HR system used by the NICS). In December 2016 information relating to staff in the Youth Justice Agency was moved from their Simply Personnel HR system onto HRConnect and, similarly, Non-Prison Grade staff in the Northern Ireland Prison Service have moved their HR information from the COMPASS system onto HRConnect from 1st April 2017.

The HRConnect, NICTS, Simply Personnel and COMPASS databases used similar definitions and methodology to record sickness absence. As part of the data verification process the variables in the datasets are checked to ensure that they are comparable prior to the datasets being merged into one overall financial year file.

On the 9th May 2016 new Departmental structures came into effect within the NICS, with the number of Ministerial Departments being reduced from twelve to nine [Note: The Public Prosecution Service (PPS) is a Non-Ministerial Department], with various functional areas being transferred to accommodate this.

For the 2016/2017 Departmental analyses, data for the period 1st April 2016 to 8th May 2016 have been recoded to best reflect the new Departmental structures that came into effect on the 9th May 2016. In addition, in order to provide some comparative information, any Departmental analyses presented for 2015/2016 (since the 2016/2017 publication) have also been reworked to represent a best estimate of the position as if the restructuring had actually taken effect from 1st April 2015. Given staff moves/transfers and the normal ongoing restructuring that occurs within Departments it has not, however, been practical to attempt to estimate historical Departmental figures, based on the new NICS structure, prior to 2015/2016.

Between September 2015 and May 2016 almost 3,000 full-time and part-time staff left the NICS on a Voluntary Exit Scheme leading to some 2,100 less staff years being available in 2016/2017 than in 2015/2016.

HRCS became aware that sickness absence certification data was being incorrectly recorded by a relatively small number of line managers or staff. This meant that the certification data for around 2% of all sickness absence spells being mistakenly reported as uncertified or missing. Through the use of related medical certificate data it has been possible, from the 2017/2018 report onwards, to improve the quality of the reported data and correctly identify these spells as being certified. This process has been retrospectively applied to NICS sickness absence data for 2013/2014 onwards and headline figures are presented in the Key Facts section of the 2017/2018 report (https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-201718).

#### Strengths and weaknesses of the Data

#### Strengths

- The data are sourced from an administrative data system and therefore are a complete record of all NICS staff (i.e. are not based on a sample of staff).
- The vast majority of the data used is taken from a single source (HRConnect). This is an e-HR system specifically designed to manage and record HR processes for large organisations, with sickness absence being one of the key functions captured. The remaining data (for Prison Grade staff) is sourced from Compass this system is felt to be more reliable and accurate as there is an operational need for it to be so, given that it is used to ensure correct staffing levels in Prisons.
- The NICS has a comprehensive sickness absence policy that all staff and managers have to comply with, and which is included as an objective in their annual performance reviews. Line managers have to complete mandatory training on recording and managing sickness absence.
- NICS managers receive monthly updates of their staff absences, enabling them to rectify errors on the system.
- Senior management monitor compliance levels with sickness absence policies (e.g. Return to Work Interviews, Certification of Absences etc.) on a monthly basis and take steps to ensure these policies are followed.
- Monthly data validation checks and quality assurance checks are run by Employee Shared Services (ESS part of NICS), Fujitsu and Capita to identify and correct any missing values or inaccuracies in the data.
- Comprehensive data quality checks are undertaken (see Appendix 2) by HRCS statisticians and anomalies forwarded for rectification on HRConnect.
- The HRCS statisticians working on the data are all given a detailed induction and training in this area before they are allowed to report the statistics.
- A robust process of data quality checks are applied to all sickness absence outputs by HRCS before they are issued (each report double checked by another statistician).
- The key HR statistics are recorded on a similar basis to other organisations.

#### Weaknesses/Limitations

- System is dependent on line managers accurately inputting staff sickness details onto HRConnect. Problems can occur if the line manager doesn't update the details on a timely basis or if the line manager is absent themselves. In other words, we are unable to assess the extent of any unreported absence on the system. However, this would be the same for any absence monitoring system and so there is no reason to think that it's has changed for the worse over time.
- System is dependent on the individual's work area details being updated on a timely basis. With transfers/promotions possible across the NICS, staff roles and locations can change regularly and

are dependent on the individual and their line manger ensuring that this is accurately reflected on HRConnect. Again, it is difficult to ascertain the extent of any related inaccuracies.

- The reason for sickness absence may not be entered accurately, especially for self-certified absences.
- A small proportion of the data is taken from a separate HR system (COMPASS). This only covers some 1,200 Prison Grade staff out of the total of around 23,000 NICS staff. It is hoped that these remaining staff will be migrated onto HRConnect in 2019.

**Note:** Further information relating to data quality can be found in the associated Quality Assurance of Administrative Data (QAAD) report (<u>https://www.nisra.gov.uk/statistics/official-statistics/quality-assurance-administrative-data-qaad-report</u>), in Appendix 1 of each published report, and in the published Background Quality Report (<u>https://www.nisra.gov.uk/statistics/ni-civil-service-human-resource-statistics/sickness-absence-statistics</u>).

## Section 3: Key Users of the Northern Ireland Civil Service's Absence Statistics

The main users of the NICS sickness absence statistics are NICS HR and senior Departmental managers across the NICS. NICS HR was established in April 2017 and acts as a centralised HR function for the NICS. Prior to this, each Department had its own HR staff that managed and coordinated their own Departmental HR administration with responsibility for NICS-wide HR initiatives falling to Corporate HR (CHR), which was based in the Department of Finance (DoF). The formation of NICS HR meant that all these Departmental functions are now carried out by one central body.

The NICS HR function is headed by a Grade 3 member of DoF staff with six directorates headed up by Grade 5s and supporting strategic HR business partners. The six directorates are:

- Support / Specialist Services
- Resourcing
- Learning & Development
- Pay & Reward
- Employee Relations
- Occupational Health Service (OHS) & Welfare

The sickness absence statistics are used by the NICS to monitor absence levels, to track trends and to underpin the formulation of policies/strategies to effectively manage sickness absence within the NICS. Monthly management information statistics are provided to Departments via NICS HR and these are then incorporated into monthly HR management reports that are considered by senior staff at monthly Departmental Management Board meetings.

While not an indicator in the current Programme for Government (PfG), the NICS's sickness absence statistics have been used as an indicator/target in the previous PfG and are regularly used as a performance management indicator across NICS Departments.

The HRCS annual publication for the financial year is issued in the following autumn and generally receives media coverage with the main focus being on the average days lost due to sickness absence and the associated cost of this absence to the NICS.

Our Customer Service and Engagement Statement (<u>https://www.nisra.gov.uk/statistics/official-statistics/hrcs-customer-service-engagement-statement</u>) and the HRCS Corrections and Revisions Policy (<u>https://www.nisra.gov.uk/statistics/official-statistics/hrcs-corrections-revisions-policy</u>) are also available to view online.

#### **Other uses of the statistics**

In February/March 2018 an online customer survey provided HRCS with the following breakdown of the stated usage of the publication (from 29 respondents).

Reason for using the statistics	Percentage of respondents stating reason
Policy making / policy monitoring	51.7%
Performance monitoring	79.3%
To aid decisions on resource allocation	13.8%
Personal interest	6.9%
Media related / informing public / public interest	6.9%
Other (see below for further details)	10.3%
To facilitate academic research	3.4%
To inform public marketing campaigns	0.0%

Note: Other includes - 'For purpose of monitoring sickness absence'; 'To provide reports to individual G5 commands'; 'Working within the management attendance environment'.

#### Media

Various media outlets ask Freedom of Information requests (FoIs) about aspects of sickness absence in the NICS. For example, a local radio show asked for details of the NICS sickness absence causation factors for the last few years with a focus on the levels of stress related illness.

#### Members of the Legislative Assembly (MLAs) – Assembly Questions (AQs)

MLAs would ask AQs about levels of absenteeism in the NICS or in specific Departments or Agencies in order to find out more about their performance in this area.

#### **User Survey Results/Findings**

An online customer survey was carried out by HRCS in February/March 2018 to gather feedback on our six official statistics publications, including "Sickness Absence in the NICS". A report summarising the findings can be found at <u>https://www.nisra.gov.uk/statistics/official-statistics/hrcs-customer-survey-report</u>.

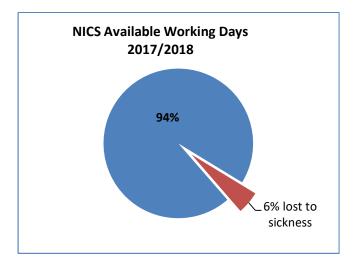
Overall satisfaction with the publication was 90%, with 93% of respondents stating that the statistics fully or mostly met their needs. Some suggestions regarding the frequency, timeliness and format of the report were made.

Regular meetings also take place with our key users within the NICS.

## Section 4: Definitions and Classifications used in the Absence Statistics

#### The Absence Rate

The Absence Rate is the percentage of the Available Working Days that were lost to sickness absence. The Absence Rate allows us to compare the percentage of Working Days Lost to sickness across Departments, no matter how many staff are in each Department or what their working patterns are. Individual Departmental Absence Rates are calculated by dividing the Working Days Lost in each Department by its total Available Working Days. Overall, the NICS lost 6.0% of its available working days to sickness absence in 2017/2018.



Formula:  $\frac{Working Days Lost}{Available Working Days} \times 100$ 

#### Available Working Days

For the majority of staff, their Available Working Days are calculated as follows:

- 365 days in the year
- Less 104 weekend days
- Less 12 bank/public holidays
- Less Annual Leave taken

For a full-time member of staff in post for a full year, this normally equates to around 220 available working days in the year. Both the Working Days Lost to sickness and the Available Working Days take account of each staff member's working pattern and the number of contracted hours worked during the week.

#### Note:

For improved accuracy, and to remove any impact from unusual work patterns, we actually count the **hours** rather than the **days**. Hours are then converted into days by dividing by 7.4 (the number of hours in a standard working day). This allows us to take account of part-time and variable working patterns. If, for example, a staff member works a half day every Tuesday, we would count this as 0.5 of a day. If a staff member works an 8 hour day on a Tuesday, the Available Working Days would be 1.1 days (8 hours / 7.4 standard hours).

#### Working Days Lost<sup>2</sup>

Working Days Lost are any days on which a staff member was expected to work but was absent due to sickness. For example, unless an employee is contracted to work weekends, being sick on a weekend does not count as Working Days Lost. Also, if an employee doesn't work on a Tuesday but is sick from Monday to Wednesday, only two Working Days are lost, not three.

#### Joiners/Promotions/Transfers/Leavers

If an employee changes Department during the middle of an absence, the new Department does not inherit the entire absence, rather, the Working Days Lost and Available Working Days are split across the Departments, according to the date of the change.

#### **Average Working Days Lost**

Average Working Days Lost (AWDL), or the Absence Level, are the number of working days lost to sickness per Staff Year. Individual Departmental AWDL figures are calculated by dividing the Working Days Lost in

<sup>&</sup>lt;sup>2</sup> Phased-return days (Part Time Working on Medical Grounds) and part-days sick are not counted as Working Days Lost. Where an employee is being medically retired, or discharged on the grounds of inefficiency due to sickness absence, any Working Days Lost until the actual date of medical retirement or leaving are, however, counted as Working Days Lost.

each Department by its total Staff Years. As you'll see below, we do not calculate working days lost by total headcount, because headcount does not take into consideration working patterns or portion of the year worked (see example in box below).

#### Average Working Days Lost Formula:

## Working Days Lost

Staff Years

#### Working Days Lost

Working Days Lost are calculated as they are when determining the Absence Rate.

#### Staff Years

One Staff Year is equal to one member of staff working full-time for the whole year. Staff who started the NICS half way through the year would be given a Staff Year value of 0.5. Staff Year values typically<sup>3</sup> range from 0 to 1.

### Available Working Days of employee Available Working Days of a full time employee in post for full year

Each employee's Staff Year value is added together to create the total Staff Years for the NICS (or each Department). Using Staff Year instead of Headcount allows for more accurate comparisons between Departments with different levels of part-time working and/or staff turnover. An extreme example is detailed in the box below.

#### Using Staff Year vs. Headcount when calculating the AWDL: Example Organisation A has 10,000 full-time staff Organisation B has 20,000 part-time (0.5 FTE) staff

Both Organisations lost the equivalent of 50,000 working days during the year. If we just considered the working days lost per <u>person</u>, we would find that Organisation A had <u>twice</u> the AWDL of Organisation B:

Working Days Lost per Person:

Organisation A = 50,000 days lost / 10,000 staff = 5 Working Days Lost per person Organisation B = 50,000 days lost / 20,000 staff = 2.5 Working Days Lost per person

If we use <u>Staff Years</u>, however, we get a more accurate picture of the AWDL in each Organisation. Organisation A has the equivalent of 10,000 Staff Years because all staff work full-time. Organisation B also has the equivalent of 10,000 Staff Years because all their staff work part-time (20,000 x 0.5 FTE = 10,000 Staff Years). Note: Organisation B would also have 10,000 Staff Years if their 20,000 staff had each worked full-time but for only half a year each.

When we divide the Working Days Lost by the Staff Year value, <u>both</u> organisations have <u>5</u> Working Days Lost per Staff Year:

Organisations A and B: 50,000 days lost / 10,000 Staff Years = 5 Working Days Lost per Staff Year

 $<sup>^{\</sup>rm 3}$  Staff who have contracted hours greater than 37 per week can have a higher staff year value.

#### Discussion

The Staff Year value is a better reflection of the real working time available because it takes into consideration both the contracted hours worked and the proportion of the year for which staff were employed. Taking account of this enables more meaningful comparisons to be made with external organisations and between/within Departments.

As can be seen in the example above, typically the number of Staff Years is less than the headcount of staff and therefore an organisation's Working Days Lost per Staff Year figure will tend to be higher than their Working Days Lost per person figure. The magnitude of this difference will depend on the proportion of part-time staff and the level of staff turnover in the organisation. For example, in the Home Civil Service the difference has been estimated to be about 1 day<sup>4</sup>.

The above should also be borne in mind when comparisons to CIPD/CBI surveys are quoted in the press. These organisations report using the 'per person' method. They are also based on survey returns which can be affected by response bias. For example, firms with solid methods of data collection and that have 'good' figures to report may be the ones most likely to send in their figures.

#### Sickness absence causation classification

The classification scheme used by NICS for recording the reason for absence changed in 2008/2009 from using the International Classification of Diseases (ICD) codes to the Sickness Absence Recording Tool (SART). This change was first proposed by the head of the Occupational Health Service (OHS) during the implementation of the new HRConnect system that would require staff and line managers to enter the reasons themselves. It was felt that the ICD codes were too detailed and not fit for purpose.

The SART was developed by the Institute for Occupational Medicine (IOM) on behalf of the Health and Safety Executive (HSE) in 2003/2004. Their aim was to develop a simple, standardised Sickness Absence recording tool that could be used by organisations, particularly SMEs that had no absence management and recording system in place. The aims were to investigate the status of sickness absence recording in the UK, and to develop a simple recording tool and accompanying guidance information to assist employers in managing sickness absence.

Part of the research was to develop a sickness absence causation classification system. This consisted of a two level 'tree-and-branch' approach and the scheme was devised to be broadly compatible with the internationally recognised International Classification of Disease (ICD revision 10) at the top level, to enable the future possibility of companies comparing their own sickness-absence statistics with those in their industry sector, geographical location or with national rates for the country as a whole.

In a departure from the standardised SART codes, following representation from the head of the OHS and NICS policy colleagues, it was agreed that HRConnect would split the Level 2 "Stress" reason into "Stress – Not Work Related" and "Stress – Work Related", and that both "Post-natal Depression" and "Post Natal Debility" would be added as Level 2 reasons under "Pregnancy Related Disorders". These additions would enable the possibility for specific analyses relating to these absences, should they be required.

A full list of the SART codes used by NICS can be found at Appendix 3.

#### Analysis by Grade and Department

The Good Friday Agreement (April 1998) led, on the 2<sup>nd</sup> December 1999, to the formation of the Northern Ireland Executive which is accountable to the Northern Ireland Assembly. The Northern Ireland Executive initially had ten Ministerial Departments plus the Office of the First Minister and deputy First Minister (OFMDFM). These ten Ministerial Departments were:

<sup>&</sup>lt;sup>4</sup> <u>www.gov.uk/government/publications/civil-service-sickness-absence</u>

- Department of Agriculture and Rural Development (DARD)
- Department of Culture, Arts and Leisure (DCAL)
- Department of Education (DE)
- Department of Enterprise, Trade and Investment (DETI)
- Department of the Environment (DoE)
- Department of Finance and Personnel (DFP)
- Department of Health, Social Services and Public Safety (DHSSPS)
- Department of Higher and Further Education, Training and Employment (DHFETE) [renamed as Department for Employment and Learning (DEL) in July 2001]
- Department for Regional Development (DRD)
- Department for Social Development (DSD)

On the 12<sup>th</sup> April 2010, following the devolution of justice matters to the NI Assembly, an eleventh Ministerial Department, the Department of Justice (DoJ), was added to the NI Executive. This Department combined the previous work of the Northern Ireland Office and the Ministry of Justice from within the UK Government. A non-Ministerial Department, the Public Prosecution Service for Northern Ireland, was also added at this time.

Former Northern Ireland Office staff at the Band C grade level (a historic amalgamation of the Executive Officer I and II grades levels) were, for analysis purposes, classified as analogous to the Executive Officer II grade level.

The devolution of justice matters also led to the inclusion of NI Prison Service staff, including Prison Grade staff, in the sickness absence analyses. Whilst the relevant data was not originally available in time for inclusion in the 2010/2011 publication the 2011/2012 publication included revised figures for 2010/2011 that did include them.

Sickness absence information for Industrial staff became available in a suitable format from 2009/2010, but too late to be included in the main 2009/2010 publication. The information was released as a separate publication (<u>https://www.nisra.gov.uk/publications/sickness-absence-northern-ireland-civil-service-industrial-staff-200910</u>) with Industrial staff then included from the 2010/2011 publication onwards.

Following the Fresh Start Agreement (November 2015) it was agreed that the number of Departments should be reduced, with three subsequently being dissolved and their roles amalgamated with other Departments to leave the following Departments:

- The Executive Office (TEO)
- Department of Agriculture, Environment and Rural Affairs (DAERA)
- Department for Communities (DfC)
- Department for the Economy (DfE)
- Department of Education (DE)
- Department of Finance (DoF)
- Department of Health (DoH)
- Department for Infrastructure (Dfl)
- Department of Justice (DoJ)

The PPS also remained as a non-Ministerial Department.

A graphical overview of this Departmental reorganisation can be found at Appendix 4. An overview of the grade structure within the NICS can be found at Appendix 5.

#### **Statistical Disclosure Control**

Standard disclosure control methodology is applied to the data. This ensures that information attributable to an individual is not identifiable in any published outputs and that the outputs are only seen by authorised staff prior to their publication.

Suppression is applied where the number of individuals in a cell is less than three. Suppression is also applied, where necessary, to the next lowest valued cell in order that identification by subtraction is not possible.

Further details on this can be found in the HRCS Confidentiality and Protection Arrangements statement (<u>https://www.nisra.gov.uk/statistics/official-statistics/hrcs-confidentiality-and-protection-arrangements</u>).

#### Definitions

Term	Definition		
Average Working Days Lost (AWDL)	The number of Working Days Lost divided by the number of Staff Years.		
Absence Rate (%)	The percentage of Working Days Lost to sickness. (Number of Working Days Lost / Number of Available Working Days) x 100		
Available Working Days	Any day on which a member of staff would have been expected to attend work. Annual Leave, Maternity leave, and Term-Time leave are excluded.		
Estimated Lost Production (£)	Calculated by multiplying the number of Working Days Lost by each individual's daily salary cost, including the appropriate Employer's National Insurance and Superannuation costs. Provision is then made for periods of sickness at half pay, pension rate of pay and no pay.		
Full Time Equivalent (fte)	An individual's full time equivalent (fte) value is calculated as their expected weekly hours divided by the number of weekly hours worked by a full-time member of staff (37 hours).		
Long-term absence	A long-term absence is any period of sickness absence that lasted for more than 20 consecutive working days of the reporting period.		
Reporting period	The time period during which data is considered and incorporated into the statistics. The reporting period runs from 1 <sup>st</sup> April to 31 <sup>st</sup> March.		
Short-term absence	A short-term absence is any period of sickness absence that lasted for 20 or less consecutive working days of the reporting period.		
Staff Year	One Staff Year equates to one full-time member of staff having been available for the entire Financial Year. This number is typically the same as an individual's fte, but could be smaller if staff have left or joined a Department and therefore have not been available for the entire reporting period.		
Working Days Lost	Any day on which a member of staff would have been expected to attend work but was absent due to sickness.		
Working Pattern	The days/hours during the week that a staff member is contracted to work.		

## Section 5 Data Quality

The NI Civil Service's sickness absence statistics have been produced by NISRA statisticians for almost 20 years. The data collection and reporting processes have been continually reviewed and improved over the years. A team of 5 NISRA statisticians within HRCS oversee the process. The majority of their work is taken up in compiling numerous monthly NICS-wide and Departmental management information on sickness absence statistics. Once the financial year data is available, additional data quality checks are applied before it is used to compile the annual sickness absence statistics in September each year.

#### UK Statistics Authority's Administrative Data Quality Assurance

In January 2015 the UK Statistics Authority published guidance to help statisticians ensure that official statistics sourced from administrative data comply with the requirements of the Code of Practice for Official Statistics. The Quality Assurance for Administrative Data (QAAD) toolkit is designed for producers of statistics to apply to their statistics sourced from administrative data.

The QAAD report covering the Sickness Absence in the NICS report is available at <a href="https://www.nisra.gov.uk/statistics/official-statistics/quality-assurance-administrative-data-qaad-report">https://www.nisra.gov.uk/statistics/official-statistics/quality-assurance-administrative-data-qaad-report</a>.

## Appendix 1

## Cabinet Office Guidance

#### SICK ABSENCE MANAGEMENT: STANDARDISATION OF DATA, DEFINITIONS, AND REPORTING

## **Cabinet**Office

**Director of Employment and Reward** 

Admiralty Arch The Mall London SW1A 2WH Telephone 020 7276 1515 Fax E-mail

HRDG(Main)(06)40 HRDG(Small)(06)37 Agency Chief Executives

11 May 2006

Dear HR Director

## SICK ABSENCE MANAGEMENT: STANDARDISATION OF DATA, DEFINITIONS, AND REPORTING

- Issue: The Implementation of new standards for the collection; analysis and reporting of sick absence data.
- Action: HR Directors are asked to:
  - 1. note the results of the work to standardise absence data definitions and reporting set out at Annex A.
  - 2. provide any comments on expected implementation issues by 25 May 2006.
  - 3. Implement the new standards within their department as soon as is practicable.
  - 4. Note the change in data collection from a calendar to a financial year basis from 2007

Timing: Immediate

#### A. Background and Summary

 Ministers have, for some time, been keen to see better and timelier data on sick absence. The Ministerial Task Force on Health, Safety and Productivity has, in particular, highlighted the need for an accurate and common set of sick absence data and standards against which robust targets can be set and reported. The recent implementation of new standards for headcount information across the public sector by the Office of National Statistics (ONS) highlighted anomalies in sick absence information, preventing consistent messages around the overall efficiency and



productivity of our civil servants. This inconsistency prevents benchmarking with external bodies such as CIPD and CBI.

- 2. On 8 September 2005 Alice Perkins, then Director General of Corporate Development Group, asked Kevin White, Group HR Director, DWP to work with Cabinet Office to set up and Chair a Steering Group of the larger Departments to consider common measures of sick absence and its associated costs. HR Directors were informed of the formation of the group and its aims in the Addendum to the January HR Newsletter issued by e-mail by the Cabinet Office on 1 February 2006.
- 3. This exercise represents a major step forward in aligning sick absence data and reporting with the new standards for headcount data and reporting recently implemented by ONS. Implementation of these new standards will, for the first time enable departments to make better comparisons of their performance with other Civil Service departments and with other parts of the economy.

## B. Steering Group

## Standardisation of sick absence data, definitions, and reporting

- 4. Between November 2005 and March 2006 DWP, HMRC, DfES, HO, MOD, HMT, and the Prison Service have participated in Steering Group and Working Group meetings to consider common measures for sick absence and its associated costs. Their remit was to agree common definitions and standards for sick absence reporting across Government to facilitate more consistent and effective:
  - Monitoring;
  - Benchmarking;
  - Target Setting; and
  - Time series analysis.
- 5. Analysts and senior HR practitioners in these Departments worked through a large number of issues to establish a set of standards to enable more robust analysis and reporting of sick absence across the Home Civil Service. At its final meeting on 27 March 2006 the Steering Group ratified these new standards.
- 6. The new standards are outlined at **Annex A**.

### C. Implementation of revised standards

### Immediate Plans and Priorities

 Larger Departments have introduced plans to move to these new standards over the next 12 – 18 months (in line with their own modernisation agendas, and IT service provider contracts). Lord Hunt is keen to see progress in this regard as part of his remit within the Ministerial Task Force on Health, Safety and Productivity.

- 8. The next Cabinet Office annual data collection in April 2007 (see section 12 of Annex A) will enable those Departments that are able to, to provide data against this new standard. Cabinet Office's current contractor for analysis of sick absence Red Scientific will implement the new standard from this time.
- 9. In addition, Cabinet Office agreed to co-ordinate a dialogue between both CIPD and CBI and the Civil Service, to include participation in these organisations' external surveys for sick absence from January 2007.

### Impact for other Departments

10. This standard should be implemented across Departments so we have a consistent measure of absence as soon as practicable, taking into account your own systems development and modernisation agendas.

### D. Action

- 11. This letter seeks your co-operation for the implementation of this new standard as soon as practicable within your Department, thereby ensuring consistent messages are provided to Ministers and other interested parties.
- 12. If your department or agency has not been involved in either the Steering or Working Group, there is still an opportunity for you to comment on the new standards or any possible implementation concerns that you might have. Any comments should be forwarded to Alison Khan at <u>Alison.Khan@cabinet-office.x.gsi.gov.uk</u> by **25 May 2006**. If you have any queries, Alison can also be contacted on 020 7276 1639.
- 13. I am copying this letter to HRDG Main, HRDG Small and Agency Chief Executives.

Yours sincerely

CHRISTOPHER JOHNSON

## Standards for sick absence data, definitions and reporting

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## **Definition of sick absence**

The state of being away from work because of the declared illness of the jobholder.

## **Data collection**

Data will be collected as follows:

- □ Absence start date;
- □ Absence end date;
- □ Absence reason (see section 3);
- □ Type of Certification (see section 4);
- □ Employee Number;
- Date of Birth (to inform age band reporting, see section 5);
- Gender (see section 6);
- $\Box$  Grade (see section 7);
- □ Full working pattern for each employee (or, as a minimum, number of hours worked in a week by a part-time employee) (see section 8);
- Government Office Region (GOR)/location;
- □ Employment Type (see section 9);
- ONS headcount marker (see section 10).

Each Department will provide a statement to indicate the normal working hours of their full-time employees, e.g. for some Departments this might correspond to 36 hours for employees in London and 37 hours for employees outside London, so that analysis of both full- and part-time absences is possible.

Additional information will be provided for joiners/leavers in the reporting period:

- Date of Entry; and/or
- Date of Leaving.

Only sick absences for civil servants will be included in the data collection. Employees such as field workers, fee paid staff, contractors, etc., will not be included in the data collection

All data will be complete, and any Department-specific codes (e.g. absence reason, grade, location) will be explained in 'look up' tables to improve data quality and enable full analysis and reporting.

### Absence Reasons

All Departments will ensure that their annual data collection is capable of analysis and reporting against the International Classification of Diseases (ICD) version 10. This includes, as a minimum:

Infectious and Parasitic Diseases Neoplasms Endocrine, Nutritional and Metabolic Diseases Diseases of the Blood Mental & Behavioural Disorders Diseases of the Nervous System Diseases of the Circulatory System Diseases of the Respiratory System Diseases of the Digestive System Diseases of the Genitourinary System Complications of Pregnancy and Childbirth Diseases of the Skin and Subcutaneous Tissue Musculoskeletal and Connective Tissue Diseases Injury and Poisoning Eye & Adnexa Symptoms, Signs, and III Defined Conditions

In addition, all Departments recognised the need for improved data quality and better recording of sick absences; thereby reducing the number of absences recorded against ICD category "Symptoms, Signs, and III Defined Conditions". Some departments have abolished this category by broadening the definition of the other categories and making them more self-explanatory, while remaining within the structure of ICD 10. This is acceptable.

## **Types of Certification**

All Departments will ensure that their annual data collection is capable of providing analysis and reporting against the following types of Certification:

- □ Self-Certification; and
- □ Certification.

## Age bands

All Departments will ensure that their annual data collection is capable of providing analysis and reporting on the age of their employees (based on date of birth information provided for each employee) as follows:

- **□** 16-24
- **□** 25-29
- **a** 30-34
- **□** 35-39
- **u** 40-44
- **u** 45-49
- □ 50-54
- **□** 55-59
- **G** 60-64
- □ 65+

## Gender

All Departments will ensure that their annual data collection is capable of providing analysis and reporting on the gender of their employees as follows:

- □ Male
- □ Female

## **Responsibility groups/Grade equivalency**

All Departments will ensure that their annual data collection is capable of providing analysis and reporting on the responsibility groups/grade equivalency of their employees as follows:

- □ Responsibility Group A/AA;
- Responsibility Group B/AO;
- □ Responsibility Group C/EO;
- Responsibility Group D/HEO;
- □ Responsibility Group E/SEO;
- □ Responsibility Group F/Grade 7
- □ Responsibility Group G/Grade 6
- □ SCS

## Working Pattern

All Departments will, where possible and practicable, ensure that their annual data collection is capable of providing analysis and reporting on the working pattern of each employee for each sick absence. Where this is not possible, Full Time Equivalency (FTE) information for each employee will be provided: monthly (where available); or quarterly (in line with Office of National Statistics (ONS) Public Sector Employment Statistics (PSES) returns); or, as a minimum, at the end of the reporting period/date of leaving.

#### Full time workers:

Using ONS definition – those employees that work the normal conditioned hours of the organisation.

#### Part time workers:

Using ONS definition – those employees that work less than the normal conditioned hours of the organisation.

#### FTE:

Using ONS definition - FTE is calculated as follows:

$$FTE = \left(\frac{ContractedHours}{StandardHours}\right)$$

e.g. part time employee works 20 hours, full-time employee works 45 hours:

$$FTE = \left(\frac{20}{45}\right) = 0.44$$

<u>NOTE</u>: Where the actual working pattern is not provided, FTE hours will be assumed to be evenly distributed across the week (Monday to Friday).

#### Shift workers:

The calculation for estimating absences for shift workers will be different to the normal civil service population. This is because shift-workers can reasonably work weekends. For these workers a simple calculation of multiplying the total days in the period of absence by 5/7<sup>th</sup>s is used.

## **Employment Type**

All Departments will ensure that their annual data collection is capable of providing analysis and reporting on the following Employment Types (in line with the ONS definition):

- Permanent employees: (including Fixed Term Appointments >12 months, but excluding any temporary employees); and
- Temporary employees:

(including Fixed Term Appointments <=12 months, but excluding any permanent employees);

□ Shift workers.

## Office of National Statistics (ONS) headcount marker

In order to ensure full alignment with ONS PSES information, and to provide consistency for efficiency and performance reporting, sick absence will be analysed and reported as follows (but see section **Error! Reference source not found.** for reporting of Headline figures):

Average Working Days Lost (AWDL) for ONS headcount:

(the sick absence figure for civil servant employees with a contract of employment who are receiving some form of pay in the pay period (calendar month)); and

#### Average Working Days Lost (AWDL) for other employees:

(the sick absence figure for civil servant employees with a contract of employment who are not included in ONS headcount e.g. career break employees, employees on unpaid leave for a period longer than the pay period (calendar month), and employees on unpaid sick leave).

<u>NOTE</u>: any employee in receipt of any pay whatsoever for sick leave e.g. pension rate sick pay or half pay will be included in the ONS headcount group.

All Departments will, where possible and practicable, ensure that their annual data collection is capable of providing analysis and reporting on the ONS headcount marker for each sick absence. Where this is not possible, ONS headcount marker information for each employee will be provided: monthly (where available); or quarterly (in line with ONS PSES returns); or, as a minimum, at the end of the reporting period/date of leaving.

## Working Days and Total Staff Years Calculations

The annual analysis will assume that an average employee can work a total of 225 days in any one calendar year – this is a complete staff year.

A full-time employee working all year works 1 staff year. The analysis will also assume that the employee works Monday to Friday, during normal office hours (9.00 - 17.30, with an hour for lunch), and totalling the standard hours for the Department in a calendar week (37 is used as a default), up to a total of 225 days.

For part-time workers, the ratio of their contracted hours to those of a full-time employee are used to scale the total potential staff year. This is done in the following way:

Staff Year Proportion(1)=1 Staff Year  $\times \left(\frac{\text{ContractedHours}}{\text{StandardHours}}\right)$ 

If an employee starts or leaves employment within a Department, this is also used to 'scale' the staff year. The location of the date worked within a 365-day calendar (366 for a leap year) is used:

Staff Year Proportion(2)= Staff Year Proportion(1) × 
$$\left(\frac{\text{End Day-(Start Day-1)}}{365}\right)$$

In the above equation the End Day and Start Day are the numerical days within the year – i.e.  $1^{st}$  January is 1 and  $31^{st}$  of December is 365. The "-1" adjusts the figure so that it is inclusive; i.e. for an employee working all year we would have 365 - (1 - 1) = 365.

Where employees change their working patterns during the year (e.g. moving from full-time to part-time working) they will have multiple records in the personnel data collection. The analysis will utilise these records as separate personnel.

Once the proportion of a staff year worked by each employee has been determined, a total figure will be derived for each Department.

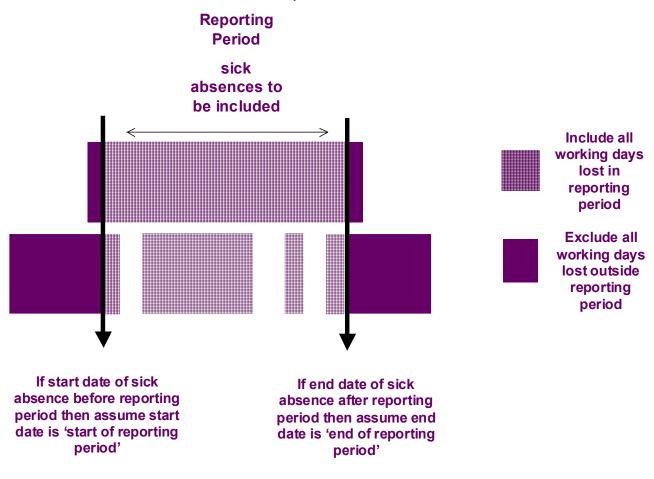
<u>NOTE</u>: for all Departments this will be different to the ONS PSES published figure due to turnover (joiners/leavers), and adjustments for part-time workers.

## Reporting period and what to include

The time series for reporting annual sick absence across the civil service will move from calendar year reporting (last collection January 2006 covering the period 1 January 2005 – 31 December 2005) to financial year reporting, in line with other Departmental performance target reporting.

The first financial year data collection will take place in April 2007 (for the period 1 April 2006 – 31 March 2007) and data will be requested from all Departments annually each April thereafter.

A one-off collection of data for the period 1 January 2006 – 31 March 2006 will be arranged to ensure that there is no discontinuity in the time series data.



Sick absences will be included/excluded from analysis as follows:

A number of different reporting periods were identified across the Departments including:

- Calendar month
- Rolling Year
- Calendar Year
- Financial Year
- Cumulative Year to Date

It was agreed that, for the purposes of time series analysis, the rolling year figure offers the best indicator of levels of sick absence in a Department as it includes 12-months of sick absence at any one time and ensures any seasonal peaks and troughs of sick absence (e.g. coughs and colds in Winter) are not over-estimated.

## Working Days Available in a year

Each full time employee can work a maximum of 225 Working Days in a year. This is known as Working Days Available (WDA) and a full-time employee working all year works one staff year.

This figure has been calculated by:

- □ Assuming there are 365 days in each year;
- Less 104 days for weekends (Saturdays and Sundays)
- Less 11 days for bank and public holidays, and privilege days
- Less 25 days for annual leave

## Working Days Lost (WDL) and Scaling Adjustment

Each full time employee can have a maximum of 225 Working Days Lost (WDL) to sick absence in a year.

For a part-time employees, the same basic adjustment is made as for the staff year to calculate their WDL:

WorkingDaysLost(1)= WorkingDaysLost  $\times \left(\frac{\text{ContractedHours}}{\text{StandardHours}}\right)$ 

Where a full time employee is absent for the whole year, and unable to take their annual leave, then they are actually absent for 250 working days in a year. In order to make sure that longer-term absences are not over-estimated, a 'scaling' adjustment is made to all absences of over 6 months duration. The scaling adjustment is, therefore, based on 250 working days in a year (365 days – weekends – bank & privilege holidays) and is calculated as follows:

Number of additional days lost past 6 months, N

$$N=$$
 Total Days Lost  $-125$ 

Number of days in 1 actual working year past 6 months, TotDays

$$TotDays = 250 - 125 = 125$$

Number of days in 1 adjusted working year past 6 months, ScaledDays

$$ScaledDays = 225 - 125 = 100$$

From these we can therefore calculate the Number of additional Sick Days, x

$$x = \left(\frac{N}{TotDays}\right) \times ScaledDays$$

Where possible Departments should count the number of working days in a year, which might vary slightly due to leap years and when weekends fall, instead of using an average of 250.

$$x = \frac{\left(\text{TotalDaysLo st} - 125\right)}{125} \times 100$$

This value is then added on to the 125 days lost in the initial period of absence, such that the total scaled period of absence is x + 125.

Overall equation for use on all absences greater than 125 working days:

scaledperi odofabsenc 
$$e = (\frac{(TotalDaysLo \ st - 125)}{125} \times 100) + 125$$

#### How to apply scaling to calendar days:

It is recognised that some legacy IT/reporting systems are programmed in calendar, rather than working, days. In order to make sure that longer-term absences are not over-estimated, a 'scaling' adjustment is made to all absences of over 6 months duration. The scaling adjustment is, therefore, applied to all absences greater than 183 calendar days. Absences first identified for scaling adjustment in calendar days should next remove weekends and bank holidays, **before** applying the scaling calculation as above.

## What to include in Working Days Lost

WDL figures should include all reasons for sick absence (including pregnancy related, third party, accident/assault/injury at work) except Part Time working on Medical Grounds (PTMG).

PTMG should no longer be included in WDL calculations for sick absence. Other types of absence e.g. maternity or special leave, should not be included in WDL figures as the WDL figure relates only to absences as a result of <u>sickness</u>. <u>NOTE</u>: where an employee is to be medically retired or leaves the Department whilst sick, any sick absence should be included in WDL figures until the date of actual medical retirement or leaving.

## AWDL per staff year

This is calculated as:

$$AWDL = \left(\frac{(WDL \ x \ FTE)}{(WDA \ x \ FTE)}\right) x \ 225 = \left(\frac{(WDL)}{(WDA)}\right) x \ 225$$

## % AWDL per staff year

This is calculated as:

% AWDL = 
$$\left(\frac{(WDL \times FTE)}{(WDA \times FTE)}\right) \times 100\% = \left(\frac{(WDL)}{(WDA)}\right) \times 100\%$$

## AWDL per employee

This is calculated as:

$$AWDL = \left(\frac{(WDL \ x \ FTE)}{(WDA)}\right) x \ 225$$

<u>NOTE</u>: The AWDL **per employee** measure is not designed to produce an accurate measure of the size of a Department's sick absence (AWDL per staff year is the better indicator for this). It is designed to provide an accurate comparison of data with external surveys such as CBI / CIPD.

Many external surveys ask for data "per employee", because the assumption is that an average organisation will only record 2 basic statistics: number of days lost and number of employees. Many organisations do not have sophisticated recording and reporting systems like government departments. The "number of employees" contributing towards WDA assumes that all employees are a multiple of 1 (i.e. excluding any FTE calculations). The WDA figure is calculated based on an estimate of employees during the year, regardless of whether they work full or part time. The "number of employees" contributing towards WDL is more complex. This figure represents the total number of days lost (for productivity purposes) to absence in an organisation, and this means continuing to make an adjustment for part-time employees. Therefore, the FTE adjustment is left in the numerator calculation.

The net result of this is that the FTE calculation is only taken out of the denominator, but it is left in the numerator; hence, AWDL per employee figures can be around 10% lower than AWDL per staff year calculations dependent upon the number of part-time employees an organisation employs.

## % AWDL per employee

This is calculated as:

% AWDL = 
$$\left(\frac{(WDL x FTE)}{(WDA)}\right) x 100\%$$

## Definitions of Short and Long Term sick absences; and working days/calendar days for calculating absence lengths

All Departments will ensure that their annual data collection is capable of providing analysis and reporting against the following categories:

Number of Working Days absent from work (inclusive)	Number of Calendar Days absence from work (inclusive)	Length classification	Length group
1	1	1 Day	
2	2	2 Days	
3	3	3 Days	Short (all absences <= 20 working days or 28 calendar days)
4	4	4 Days	
5	5-7	1 Week	
6-10	8-14	More than 1 week and <= a Fortnight	
11-15	15-21	More than a Fortnight and <= 3 weeks	
16-20	22-28	More than 3 weeks and <= 1 month	

Number of Working Days absent from work (inclusive)	Number of Calendar Days absence from work (inclusive)	Length classification	Length group
21-41	29-61	More than 1 month and <= 2 months	
42-62	62-91	More than 2 months and <= 3 months	
63-83	92-122	More than 3 months and <= 4 months	Long (all absence => 21 working days or 29 calendar days)
84-104	123-152	More than 4 months and <= 5 months	
105-125	153-183	More than 5 months and <= 6 months	
126-175	184-274	More than 6 months and <= 9 months	
176-225	275-365	More than 9 months and <= 1 year	
226+	366+	More than 1 year	

The proportion of long-term sick absences is calculated as follows:

## $Long-termSickProportion = \frac{TotNumLong-termAbsences}{TotNumSpellsof allAbsence}$

This figure is provided in order to help indicate the reason why a particular AWDL figure is produced; AWDL is highly dependent on the levels of long-term sickness within a Department. The lower this proportion, the lower the overall AWDL is.

## Headline AWDL figures

The headline AWDL figure to allow for comparisons across the Home Civil Service is AWDL **per staff year** (all staff i.e. ONS headcount <u>and</u> other employees).

The headline AWDL figure to allow for comparisons with the private sector e.g. CBI and CIPD is AWDL **per employee** (ONS headcount only).

<u>NOTE</u>: The AWDL per staff year (ONS headcount) is the top line figure and the one that should be the standard consistent headline figure used. An AWDL per employee (ONS headcount) will also be calculated and published which while allow for better comparison with the private sector where many organisations only include employees in their sick absences figures if they are paying them.

## **Cost of Sick Absence**

The direct cost of sick absence for each employee is calculated as direct salary costs, together with any other employer's costs such as ERNIC and superannuation. Costs for accommodation, postage, utilities etc., should be excluded.

It was recognised that the majority of Departmental sick absence recording systems did not include this level of detail. As such, and in the absence of actual employee-level costs, the average cost per responsibility group, per Department will be calculated and applied to Departmental sick absence figures within the annual report.

It was not possible to identify indirect costs of sick absence that could easily be calculated and reported.

## **Bradford Factors**

It was recognised that Bradford Factors are useful additional levels of analysis for inclusion in the annual report.

Bradford Factors allow for objective analysis of sickness absence patterns. In order to calculate the Bradford Factor for an employee the number of working days lost in the previous six months is multiplied by the square of the number of spells of absence taken in that period.

So, for example an employee who had one absence that lasted 6 days would have a Bradford Factor of 6 (6 x 1<sup>2</sup>). However, an employee who had 3 absences, each of 2 days length would have a Bradford Factor of 54 ( $(2+2+2)x 3^2$ )). As these examples show, the Bradford Factor tends to put more emphasis on multiple spells of absence, since in both cases 6 days were lost.

The Bradford Factor utilised in the annual analysis is slightly modified. Normally Bradford Factors are calculated dynamically on a 6-month basis but the annual analysis involves a full year's sick absence data. The average Bradford Factor is also reported – there are two figures: one for all employees in a Department; and another for those employees who took absence. The difference between these two values acts as a good indicator of the proportion of employees in the Department who lost time to sickness absence.

There is no requirement for individual Departments to use the Bradford Factor for internal management purposes, but if they wish to do so a set of thresholds must be set. If these values were exceeded by the employee then this would trigger an appropriate action by the employer, such as a verbal or written warning. In the case of the annual analysis, the proportion of employees that exceeded threshold values of 50, 200 and 400 within a Department are reported.

## Weightings Adjustments

It was recognised that Weightings Adjustments are useful additional levels of analysis for inclusion in the annual report. However, the headline figure for sick absence reporting purposes across Cabinet Office and government Departments will utilise unweighted figures (see section 21).

The annual analysis undertakes a comparison of regional working days lost, using weightings. The use of weighting removes the effects demographic differences have on the results.

The process used is to normalise the regional values against the Civil Service as a whole. As can be seen from the demographics section, the Civil Service has a particular demographic – consisting of 54% female employees, for example. However, individual regions do not necessarily share this breakdown – there may be a greater proportion of male employees, for example.

In order to weight the results the annual analysis divides the data for the whole of the Civil Service into the various demographic combinations: age band (10 groups), gender (2 groups), and grade (8 groups). For each of these groups the annual analysis determines the percentage of all employees in the Civil Service that fall into that group, and the working days lost for each group.

In order to apply the weightings, the working days lost for an individual group is multiplied by the percentage of total employees in that group for the Civil Service as a whole. These are then summed to give a weighted value for the group.

The result is to scale the working days lost contribution for each group according to the relative size of the group in the whole Civil Service. In other words, if all of the Departments had the same demographic makeup as the Civil Service we would expect a similar result to the weighted value.

# Appendix 2

# List of Data Quality Checks and Validations undertaken by HRCS

# HRConnect - Raw extract files

Personnel Snapshot file (also applies to Joiners and Leavers files)

- Remove obvious test records
- Variable lengths ensure no data being cut off (x43 variables)
- New option in variables (x5 variables)
- Valid payroll number / assignment number
- Valid Age / Date of Birth
- New Assignment Category option
- New Employment Category option
- New Equal Opportunity option (x6 variables)
- New options in Person Type
- New Standard Occupational Classification option
- Valid Entry Dates
- Valid Grade information (x6 variables)
- Valid Position / Job Name
- Valid Organisation Name
- Valid Assignment Status
- New Sexual Orientation option
- Remove duplicate records
- Length of Reason for Leaving variable to ensure no data being cut off (*Leavers* file only)

## Organisational Hierarchy file

- Variable lengths ensure no data being cut off (x3 variables)
- Valid Organisation Level
- Organisation Names in *Personnel Snapshot* but not in *Organisational Hierarchy*

#### Absence file (also applies to Absence Year-To-Date file)

- New Absence Sub-Reason option
- Variable lengths ensure no data being cut off (x12 variables)
- New option in variables (x3 variables)
- Valid payroll number / assignment number
- New Pregnancy option
- Valid Duration of Absence
- Valid Part-Day Absence
- New Document of Record option
- New Grade option
- Valid Number of Subordinates
- Remove duplicate records
- Zero Duration Absences

### Career History file (also applies to Career History Year-To-Date file)

- Remove obvious test records
- Terminate Assignment anomalies
- Valid Length of Service
- Remove duplicate records
- Variable lengths ensure no data being cut off (x13 variables)
- New Assignment Category option
- New Employment Category option
- New Equal Opportunity option (x6 variables)
- Valid payroll number / assignment number
- Valid Available Days / Available Hours
- Valid Position / Job Name
- New options in Person Type
- Overlapping lines

#### Paybill file

- Remove duplicate records
- Variable lengths ensure no data being cut off (x13 variables)
- New Assignment Category option
- New Employment Category option
- Valid Personal Point indicator
- New Pension Scheme option
- New Person Type option
- Valid payroll number / assignment number
- Valid Personal Point
- Valid Pay Rate
- Valid Assignment Status

#### HRConnect - Additional validation checks for production of final dataset

#### Career History validation file

• Remove Terminate Assignment lines

#### Absence validation file

- Valid Absence Reason combination
- Fix Sickness to be Paid Leave
- Fix specific Unclosed Absences to be closed
- Fix Unclosed Absences after left NICS to be closed
- Fix 'Stringer' absence cases
- Fix Part-Day absence cases
- Remove duplicate records
- Remove Annual Leave when already on Sickness (pre-approved leave)
- Remove Annual Leave when already on Annual Leave
- Validate overlapping absences

#### Combined Career History and Absence validation file

- Absences with no Career History information
- Split Absences across Career History lines and ensure overall duration not changed
- Not more Days Lost than Available

### Organisational Hierarchy and include setup file

- Missing Hierarchy information
- Exclude staff and/or specific periods of work
- Valid Age / Length of Service

#### *Costings* file

- Pay Rate information
- Overlapping 'Rate of Pay' dates

## **COMPASS - Raw extract files**

#### Lookup table files

• New option (x11 variables)

#### Organisational Hierarchy file

• n/a

#### Personnel Snapshot file

- Recoding to match HRConnect values (x10 variables)
- Organisation Codes not in Hierarchy file

#### *Leavers* file

• n/a

## Absence file (also applies to Absence Year-To-Date file)

• Remove duplicate records

## **COMPASS** – Additional validation checks for production of final dataset

#### Absence file (also applies to Absence Year-To-Date file)

- Fix Available Days / Days Lost variables to be more like HRConnect Standard Working Days
- Analogous Grade variable
- Absences but no Personnel information
- Valid Absence Reason
- Male 'Pregnancy Related' absences
- Overlapping absences
- Split Absences across Personnel lines and ensure overall duration not changed
- Exclude Nurse / Healthcare Assistant
- Valid Age / Length of Service
- Valid Pay Rate
- Not more Days Lost than Available

## NICS Overall dataset – Additional validation checks to produce final combined dataset

Absence file (also applies to Absence Year-To-Date file)

• Duplicates and overlapping records between HRConnect and COMPASS files

# Appendix 3

# Sickness Absence Recording Tool (SART) – Reason for Absence options

Absence Sickness Reasons (SART Level 1)	Sickness Sub Reasons (SART Level 2)
Anxiety/Stress/Depression/Other Psychiatric Illnesses	Anxiety Behavioural disorder Bipolar disorder Delusion disorder Depression – not pregnancy related Eating disorder Insomnia Manic disorder Obsessive compulsive disorder Panic attacks Personality disorder Phobic disorders Psychosis Schizo affective disorder
	Schizophrenia Self harm Stress – not work related Stress – work related Other psychiatric illnesses Not specified
Back Problems	Back ache/pain Disc problems Lumbago Sciatica Scoliosis Spinal stenosis Spondylitis Spondylosis Other back problems Not specified
Other Musculoskeletal Problems	Arthritis Carpal tunnel syndrome Cartilage disorder Frozen shoulder Ganglion Hand arm vibration syndrome (HAVS) Ligament disorder Neck ache/pain Osteoarthritis Osteoporosis Pinched/trapped nerve Pulled muscle Repetitive strain injury (RSI) Rheumatism Rheumatoid arthritis Shoulder ache/pain Tendon problem Tennis elbow Vibration white finger Whole body vibration

Cold Course Elu Influenza	Cold
Cold, Cough, Flu, Influenza	
	Cough
	Flu Influenza
	Other cough cold flu
	Not specified
Asthma	Non-allergic (intrinsic) asthma
	Allergic (extrinsic) asthma
	Exercise-induced asthma
	Seasonal asthma
	Nocturnal asthma
	Combination of two or more of the above types of asthma
	Other asthma
	Not specified
Chest and Respiratory Problems	Breathing problems
·····	Bronchitis
	Chronic bronchitis
	Chronic obstructive airways disease (COAD)
	Chronic obstructive pulmonary disease (COPD)
	Emphysema
	Lower respiratory tract infection
	Pleurisy
	Pneumoconiosis
	Pneumonia
	Tracheitis
	Upper respiratory tract infection
	Other chest and respiratory problems
	Not specified
Headache/Migraine	Headache
	Migraine
	Not specified
Benign and Malignant Tumours, Cancers	Benign tumour
	Bladder cancer
	Bowel cancer
	Brain cancer
	Breast cancer
	Cervical cancer
	Colon cancer
	Colorectal cancer
	Leukaemia
	Lung cancer
	Melanoma
	Mesothelioma
	Non-Hodgkin's lymphoma
	Oesophageal cancer
	Ovarian cancer
	Pancreatic cancer
	Prostate cancer
	Stomach cancer
	Stomach cancer Testicular cancer
	Stomach cancer Testicular cancer Throat cancer
	Stomach cancer Testicular cancer Throat cancer Other types of cancer
Disad Disardara	Stomach cancer Testicular cancer Throat cancer Other types of cancer Not specified
Blood Disorders	Stomach cancer Testicular cancer Throat cancer Other types of cancer Not specified Anaemia
Blood Disorders	Stomach cancer Testicular cancer Throat cancer Other types of cancer Not specified Anaemia Sickle-cell disorders
Blood Disorders	Stomach cancer Testicular cancer Throat cancer Other types of cancer Not specified Anaemia

Heart, Cardiac and Circulatory Problems       Angina         Cardiovascular disease       Cardiovascular disease         Cerebrovascular disease       Deep vein thrombosis (DVT)         Disease of the arteries       Endocarditis         Heart failure       Hypercholesterolemia         Hypercholesterolemia       Hyperlipiaemia         Hypertensive disease       Hyperlipiaemia         Hypotension       Mitral valve disorder         Mycocarditis       Pericarditis         Pericarditis       Pulmonary heart disease         Rheumatic fever       Stroke         Thrombosis       Other heart or circulatory problems         Not specified       Burns, Poisoning, Frostbite, Hypothermia         Burns, Poisoning, Frostbite, Hypothermia       Burns from air and hot gases         Burns from air and hot gases       Burns from bit alurns         Chiblains       Electrical burns         Chiblains       Electrical burns         Frostbite       Hypothermia         Poisoning by wrong medication       Poisoning by wrong substance         Poisoning by wrong substance       Poisoning by wrong substance         Poisoning by wrong substance       Poisoning by wrong substance         Poisoning by wrong substance       Poisoning by wrong substance         <	
Burns, Poisoning, Frostbite, Hypothermia       Cardiomyopathy         Cerebrovascular disease       Deep vein thrombosis (DVT)         Disease of the arteries       Endocarditis         Heart failure       Hypercholesterolemia         Hypertholesterolemia       Hypertholesterolemia         Hypertholesterolemia       Hypothermia         Burns, Poisoning, Frostbite, Hypothermia       Burns from air and hot gases         Burns from hot objects       Chemical burns         Chilbains       Electrical burns         Frostbite       Hypothermia         Poisoning by wrong medication       Poisoning by wrong substance         Poisoning by venomous animals       Scalds         Sunburn <td></td>	
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Burns, Poisoning, Frostbite, Hypothermia	
Disease of the arteries         Endocarditis         Heart failure         Hypercholesterolemia         Hypertensive disease         Hypotension         Mitral valve disorder         Myocardial infarction         Mycocarditis         Pericarditis         Pulmonary heart disease         Rheumatic fever         Stroke         Thrombosis         Other heart or circulatory problems         Not specified         Burns, Poisoning, Frostbite, Hypothermia         Burns from air and hot gases         Burns from bot objects         Chemical burns         Chilblains         Electrical burns         Frostbite         Hypothermia         Poisoning by wrong medication         Poisoning by wrong substance         P	
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Endocarditis         Heart failure         Hypercholesterolemia         Hypercholesterolemia         Hypertensive disease         Hypotension         Mitral valve disorder         Myocardital infarction         Mycocarditis         Pericarditis         Pulmonary heart disease         Renal disease         Rheumatic fever         Stroke         Thrombosis         Other heart or circulatory problems         Not specified         Burns, Poisoning, Frostbite, Hypothermia         Burns from air and hot gases         Burns from hot objects         Chemical burns         Chilblains         Electrical burns         Frostbite         Hypothermia         Poisoning by wrong medication         Poisoning by wrong substance         Poisoning by wrong	
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Scalds Sunburn	
Sunburn	
Other hurns/poisoning	
Not specified	
Ear, Nose, Throat Allergic rhinitis	
Blocked Eustachian tubes	
Blocked nose	
Hay fever (seasonal rhinitis)	
Hearing loss	
Laryngitis	
Meniere's disease	
Nose bleed	
Otitis externia	
Otitis media (glue ear)	
Perforated ear drum	
Pharyngitis Constitution at	
Septic throat	
Sinusitis	
Sore throat	
Throat infection	
Tinnitus	
Tonsillitis	
Vertigo	
Other ear/nose/throat problems	
Not specified	

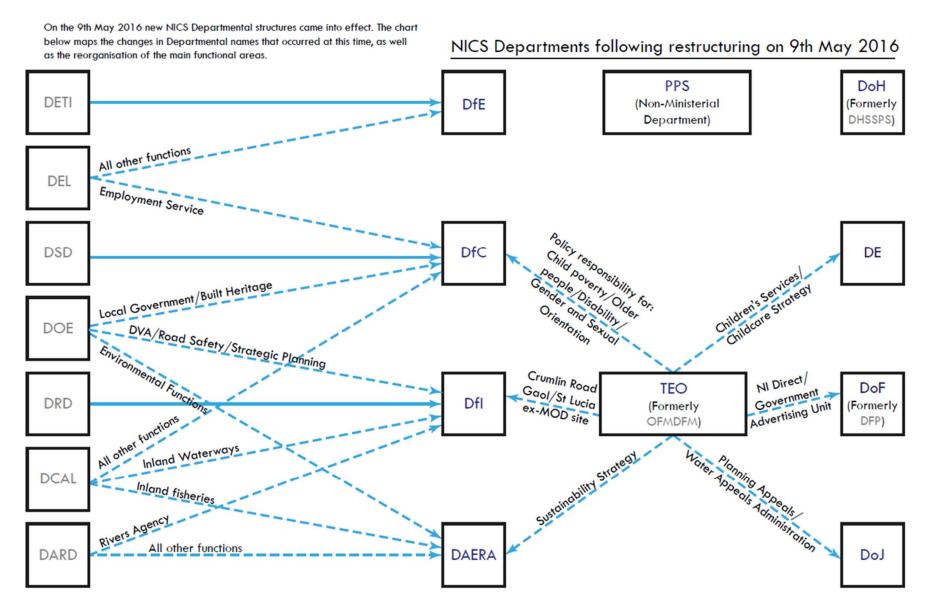
Dental and Oral Problems	Dontal problems
Dental and Oral Problems	Dental problems
	Broken/chipped tooth
	Dental abscess
	Mouth infection
	Mouth ulcer
	Tooth ache
	Tooth extraction
	Other dental and oral problems
	Not specified
Eye Problems	Blurred vision
	Cataract
	Conjunctivitis
	Detached retina
	Double vision
	Eye strain
	Glaucoma
	Keratitis
	Tunnel vision
	Other eye problems
Endocrine/Glandular Problems	Not specified
Endocrine/Glandular Problems	Adrenal disorders
	Cystic fibrosis
	Diabetes – insulin dependent
	Diabetes – non-insulin dependent
	Parathyroid disorders
	Pituitary gland disorders
	Thyroid disorders
	Other endocrine disorders
	Not specified
Gastrointestinal Problems	Abdominal pain
	Appendicitis
	Cirrhosis of the liver
	Coeliac disease
	Colitis
	Constipation
	Crohn's disease
	Diarrhoea
	Diverticulitis
	Duodenal ulcer
	Food allergy
	Gall bladder disease
	Gali bladder disease Gastric ulcer
	Gastro-intestinal disorder
	Gastroenteritis
	Hiatus hernia
	Irritable bowel syndrome
	Inflammatory bowel syndrome
	Lactose intolerance
	Liver disease
	Malnutrition
	Oesophagitis
	Pancreatitis
	Peptic ulcer
	Stomach ache
	Ulcerative colitis
	Unset stomach
	Upset stomach Vomiting
	Vomiting

Conitervinent and Orman a la visal Discust	Exidial maitie (Mark)
Genitourinary and Gynaecological Disorders	Epididymitis (M only)
	Orchitis (M only)
	Prostatic (prostate) problems (M only)
	Testicular problems (M only)
	Cervical problems (F only)
	Endometriosis (F only)
	Fibroids (F only)
	Hysterectomy (F only)
	Uterine problems (F only)
	Vaginal problems (F only)
	Menstrual problems (F only)
	Pelvic inflammatory disease (F only)
	Problems with fallopian tubes (F only)
	Ovarian problems (F only)
	Bladder infection
	Cystitis
	Kidney stones
	Kidney failure
	Mastitis
	Sexually transmitted (venereal) disease (STD)
	Urinary obstruction
	Urinary tract infection
	Other genitourinary or gynaecological problems
	Not specified
Infectious Diseases	Anthrax
	Chickenpox
	Cholera
	Diphtheria
	E coli infection
	Glandular fever
	Hepatitis A
	Hepatitis B
	Hepatitis C
	Hepatitis E
	HIV
	Listeria
	Malaria
	Measles
	Meningitis
	Mumps
	Rubella (German measles)
	Salmonella
	Scarlet fever
	Shingles
	Tetanus
	Trachoma
	Tuberculosis
	Typhoid fever
	Typhus fever
	Whooping cough
	Yellow fever
	Other infectious disease
	Not specified
1	not opcollicu

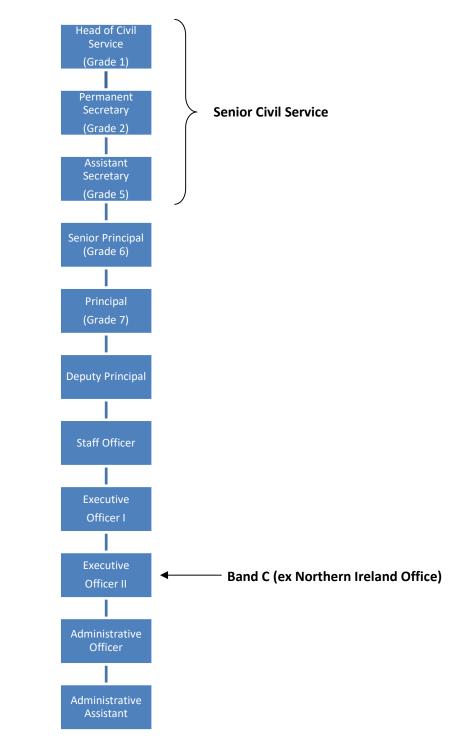
Injuny Fracture	Animal bite
Injury, Fracture	Broken arm
	Broken back
	Broken finger
	Broken foot
	Broken leg
	Broken toe
	Complications of surgery
	Cut
	Dislocation
	Electric shock
	Fractured ankle
	Fractured hip
	Fractured knee
	Fractured nose
	Fractured pelvis
	Fractured rib
	Fractured shoulder
	Fractured skull
	Fractured wrist
	Injury to elbow or forearm
	Injury to foot or ankle
	Injury to hip or thigh
	Injury to knee or lower leg
	Injury to shoulder or upper arm
	Injury to wrist or hand Insect bite
	Laceration
	Sprain
	Strain
	Whiplash
	Other injury/fracture
	Not specified
Nervous System Disorders	Alzheimer's disease
	Dementia
	Epilepsy
	Huntington's disease
	Motor Neurone disease
	Multiple Sclerosis
	Muscular dystrophy
	Parkinson's disease
	Sleep disorders
	Other disorders of the nervous system
	Not specified
Programov Polated Disorders	Amniotic fluid disorders
Pregnancy Related Disorders	Bladder infection
	Ectopic pregnancy
	Gestational diabetes
	Infection of urethra
	Infection of urinary tract
	Haemorrhaging
	Kidney infection
	Miscarriage
	Morning sickness
	Placental disorders
	Post natal debility
	Post natal depression
	Pre-eclampsia
	Uner pregnancy related conditions
	Other pregnancy related conditions Not specified

Skin Disorders	Cellulitis
OKIT DISOIDEIS	
	Contact dermatitis
	Eczema
	Hives
	Impetigo
	Pruritis
	Psoriasis
	Ringworm
	Seborrhoea
	Skin allergy
	Urticaria
	Other skin disorders
	Not specified
Substance Abuse	Alcoholism
	Drug dependence
	Other substance abuse
	Not specified
Other Known Causes - not elsewhere classified	Other Known Causes – not elsewhere classified
Not Specified	Not Specified

Appendix 4 Overview of NICS Departmental Restructuring



# Appendix 5



# **Overview of the main NICS analogous Grade Levels**