

Sickness Absence Overview

(December 2024 - November 2025)

January 2026

Business Executive Team
People and OD Committee

Sickness Absence

Purpose

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To provide assurance to Business Executive Team and the People and OD Committee on sickness absence rates and trends.

To discuss ongoing work to improve the quality of sickness absence data and seek input from the Committee.

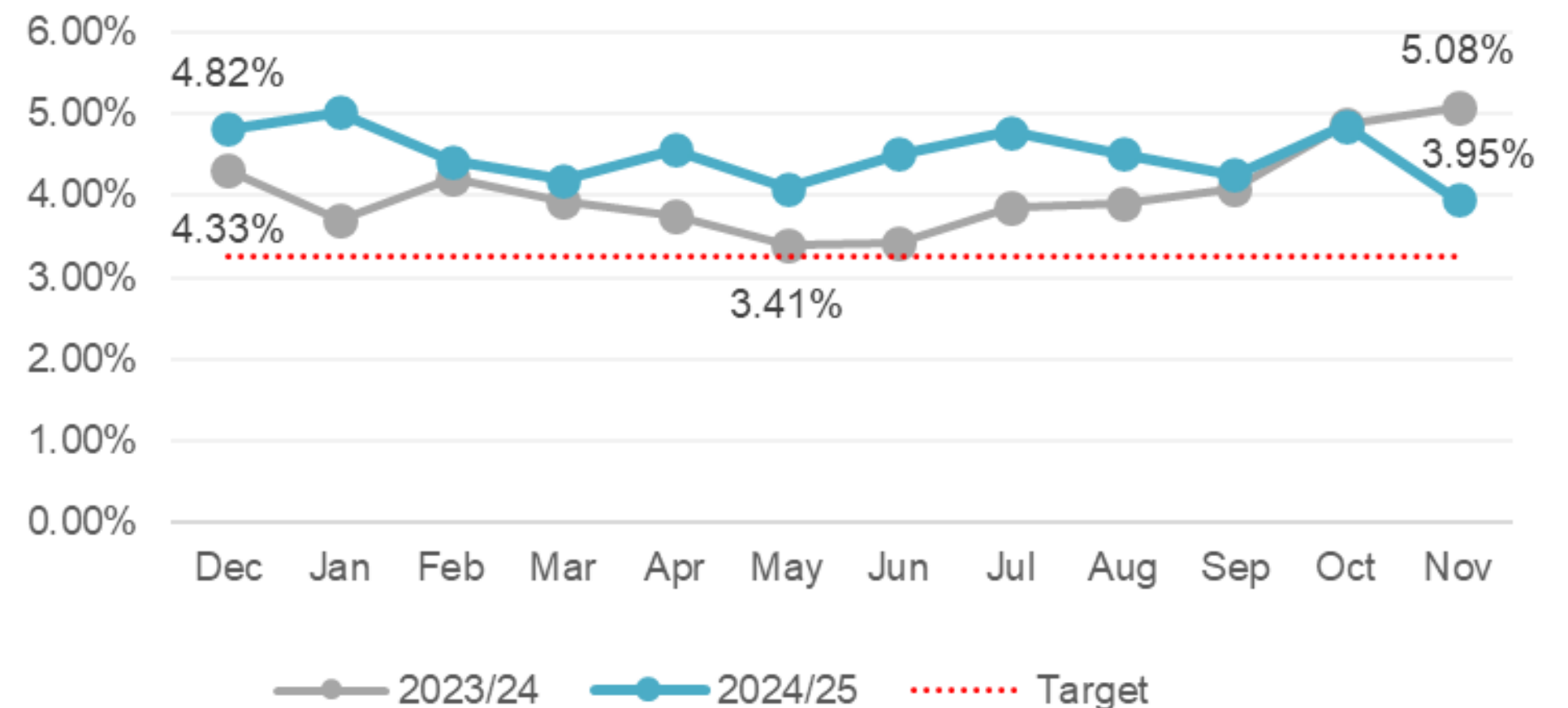


Sickness Absence

Current position

- For the 12-month period ending 30 November 2025, sickness absence was **4.56 % FTE**.
- This is above the national target of **3.25%** FTE and slightly higher than the same period the year before (see chart).
- Monthly sickness absence was **3.95%** in November 2025.
- Stress, anxiety, and depression accounted for **933.42 FTE days lost** sickness during November.
- Unknown reasons for absence accounted for **347.08 FTE days lost** sickness during November.

PHW Absence % FTE Timeline - 1 Dec 2023 - 30 Nov 2025



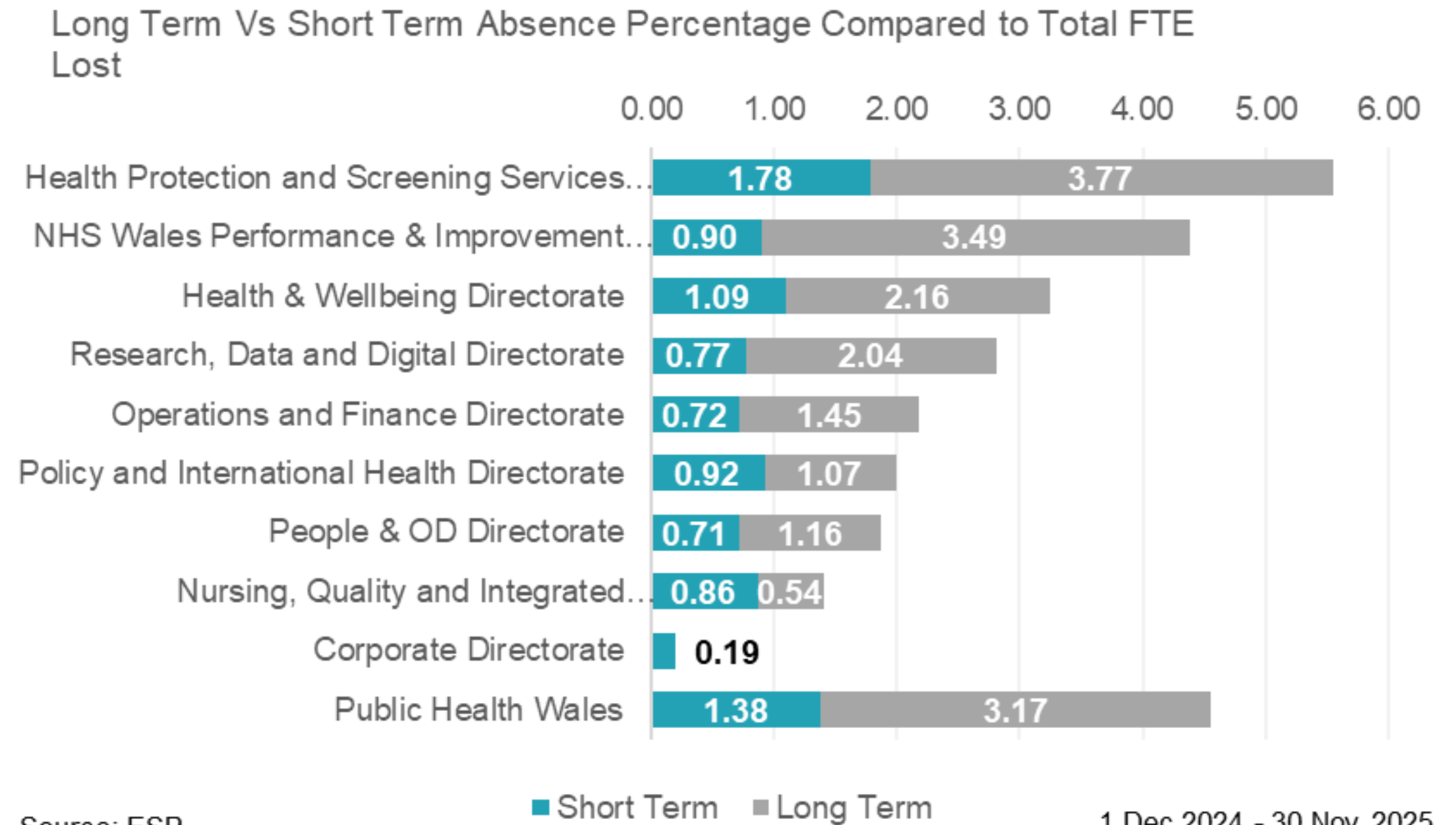
Source: ESR

1 Dec 2023 - 30 Nov 2025

Sickness Absence

Current position - Long Term Vs Short Term

- Across Public Health Wales, long-term sickness absence accounts for the majority of FTE lost.
- Long-term absence = **3.17% FTE** and short-term absence = **1.38% FTE**
- Anxiety/ stress/ depression/ other psychiatric illnesses is the top reason for long term absence.



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

12 Month Sickness Absence – By Directorate

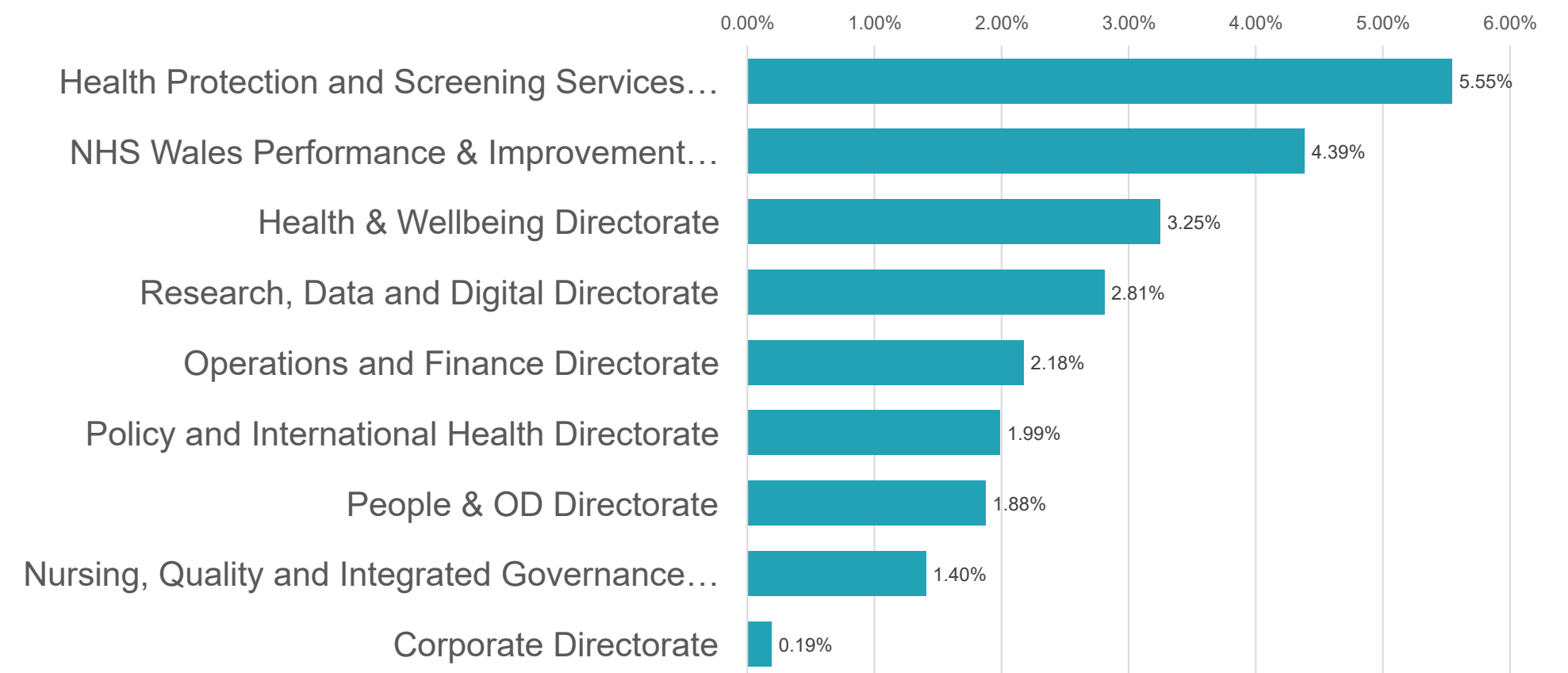
Directorates with Highest Absence FTE %:

- Health Protection and Screening Services: 5.55%
- NHS Wales Performance & Improvement: 4.39%
- Health & Wellbeing: 3.25%

Directorates with Lowest Absence FTE %:

- Corporate: 0.19%
- Nursing, Quality and Integrated Governance: 1.40%

12 Month Sickness Absence % FTE By Directorate



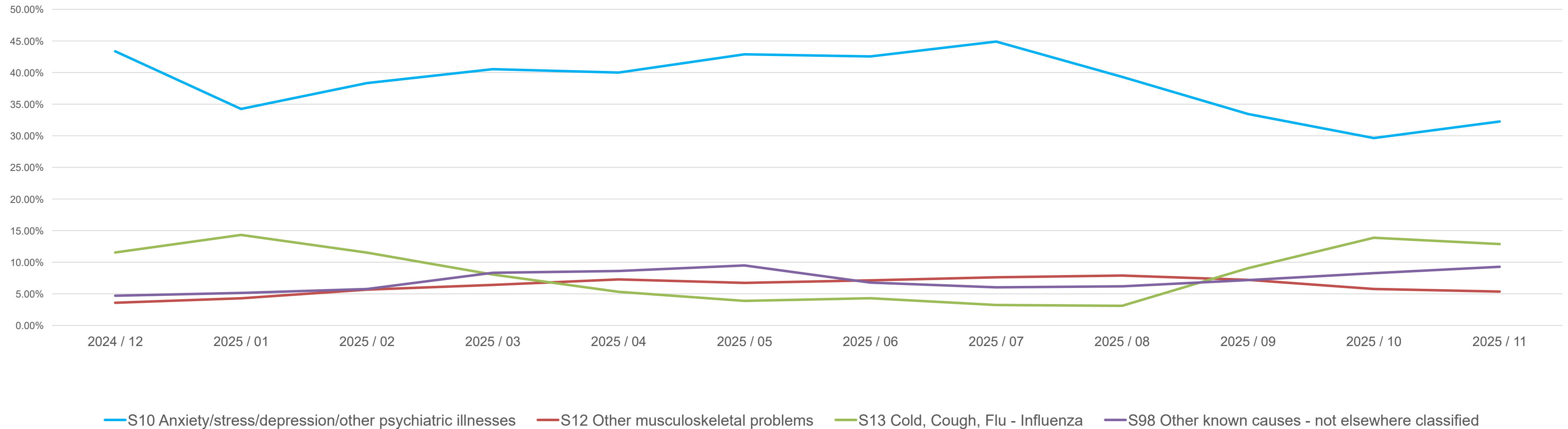
Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Focus Area: Anxiety, stress, and depression (S10)

Anxiety, stress, and depression Remains Top Absence Reason by FTE Lost %



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Focus Area: Anxiety, stress, and depression (S10)

Proportion of staff absent due to S10 by Directorate

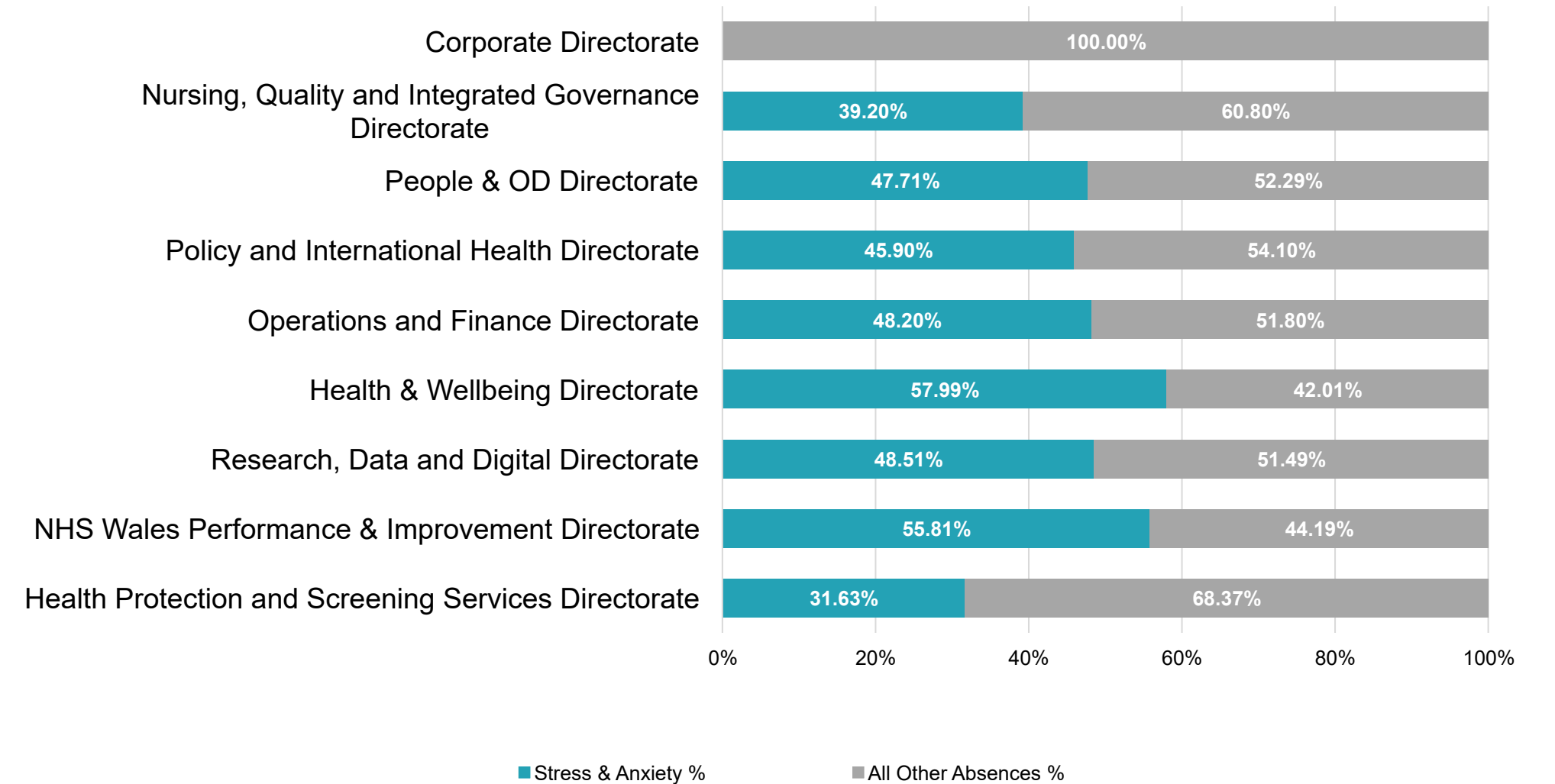
Highest proportion:

- Health and Wellbeing: 57.99%
- NHS Wales Performance & Improvement: 55.81%

Lowest:

- Corporate and Board: 0%
- Health Protection and Screening Services: 31.63%

Stress & Anxiety Vs All Other Sickness Absences by Directorate



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

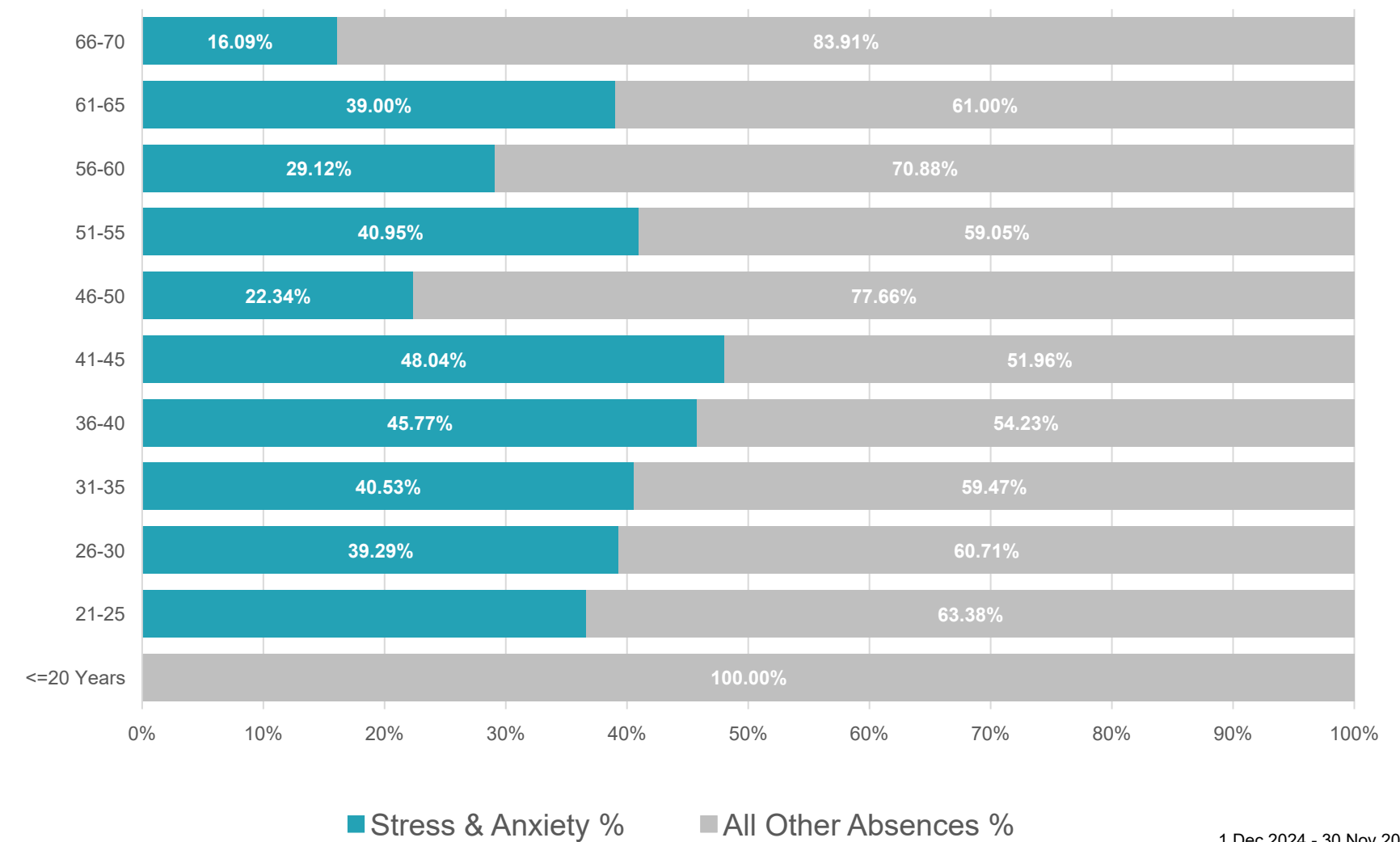
Focus Area: Anxiety, stress, and depression (S10)

Proportion of S10 absences by age group:

Highest Levels:

- 41 - 45 age band: 48.04%
- 36 - 40 age band: 45.77%
- Very low or no absences are recorded in the ≤ 25 and ≥ 66 age groups, which is attributed to much lower staff numbers in these categories.

Stress & Anxiety Vs All Other Sickness Absences by Age Group



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Focus Area: Anxiety, stress, and depression (S10)

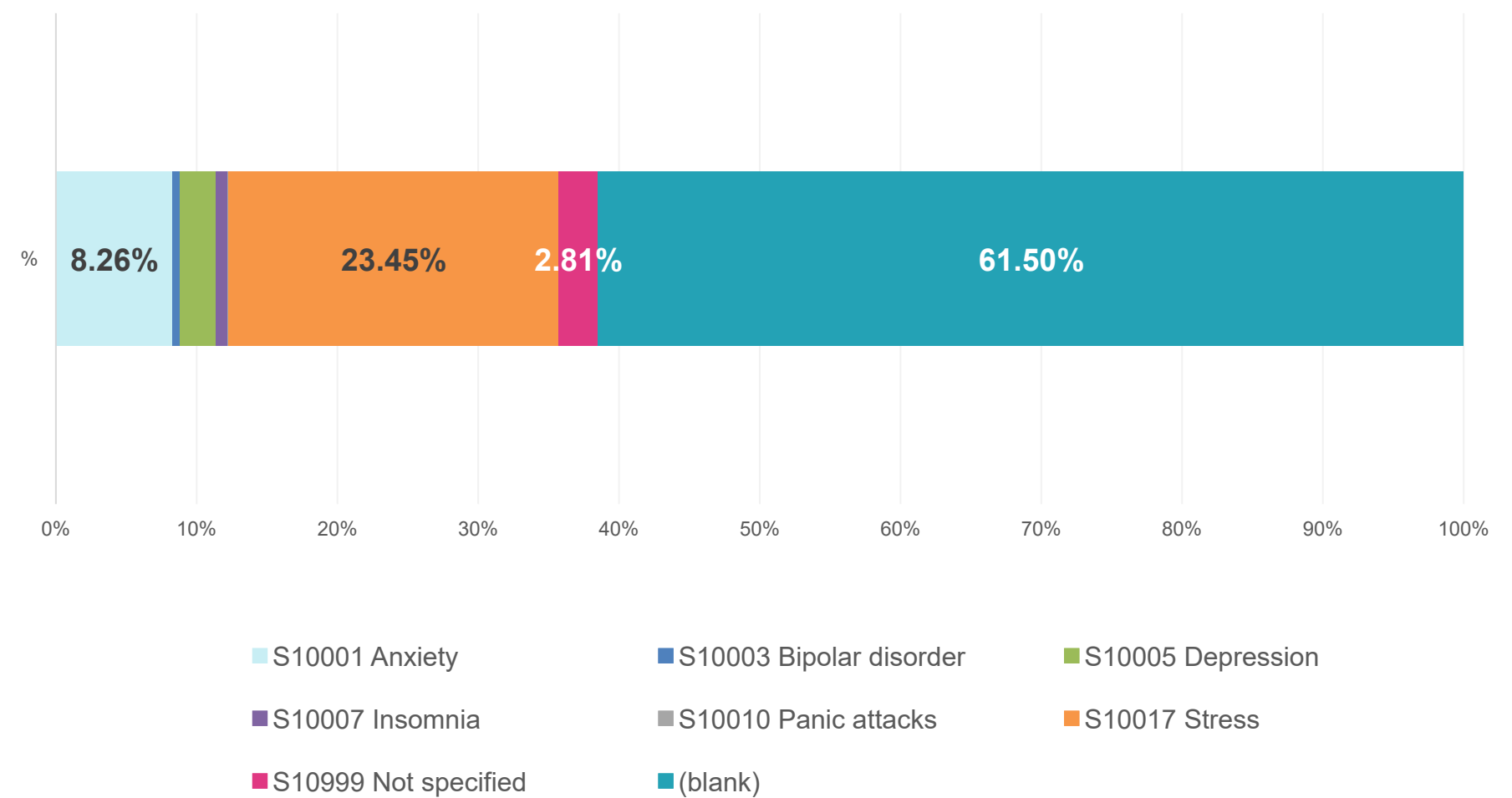
'Level 2' Absence Reasons for S10:

- 61.50% of all 'Anxiety/Stress/Depression' absence reasons did not provide a Level 2 reason.

Level 2 reasons disclosed:

- Stress: 23.45%
- Anxiety: 8.26%
- Depression: 2.50%

61.50% of Absences in Public Health Wales related to Stress & Anxiety Did Not List a Level 2 Reason



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Focus Area: Anxiety, stress, and depression (S10)

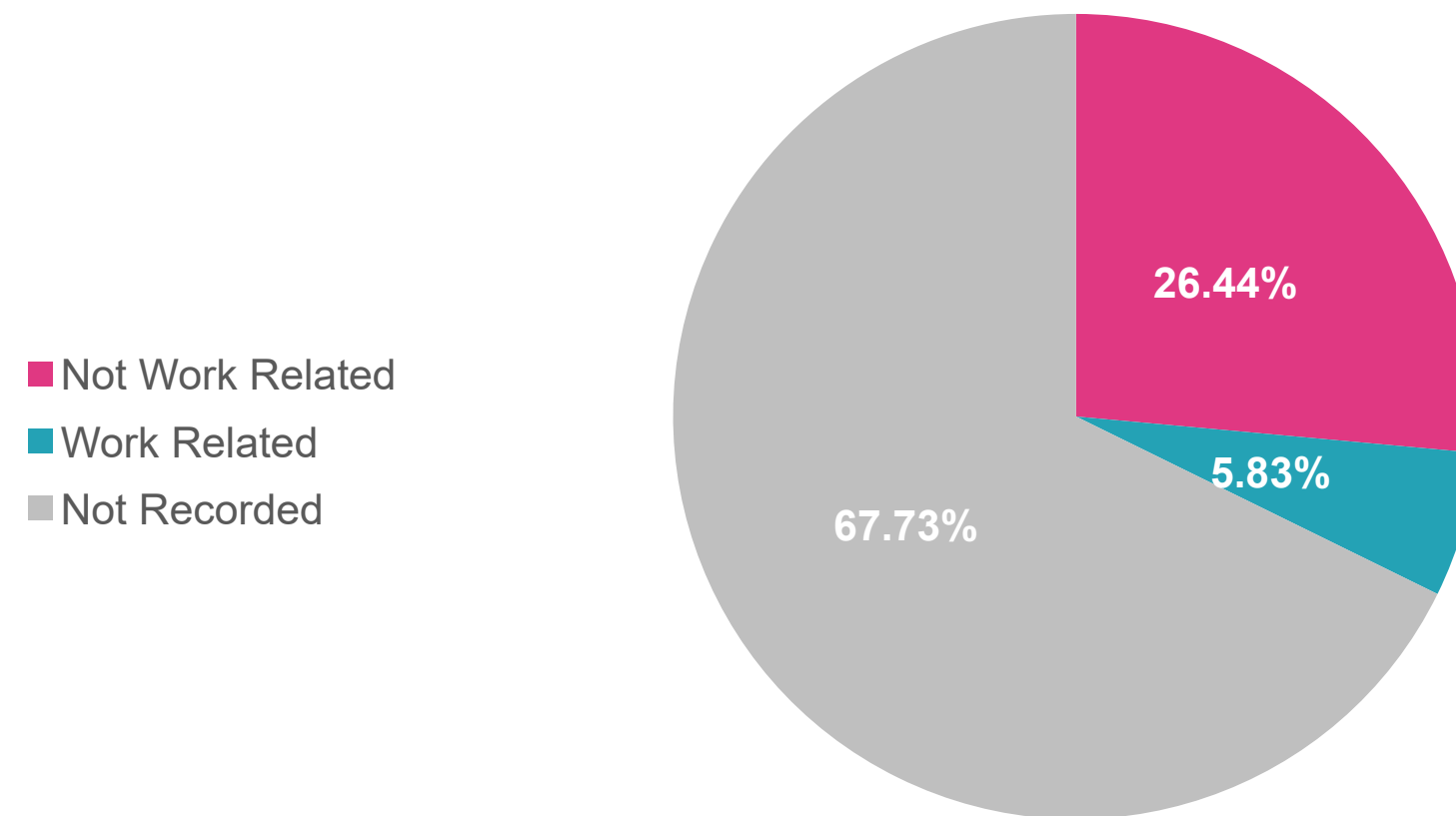
Work-related vs. Non-work-related sickness for S10:

- This is not a mandatory field in ESR, limiting comprehensive analysis.
- 67.73% of FTE Days lost in 2024/2025 attributed to S10 were left blank for this question.

Of those that were recorded:

- 5.83% indicated it *was* work-related.
- 26.44% indicated it *was not* work-related.

5.83% of Stress & Anxiety Absence within Public Health Wales was Recorded as Being **Work Related**



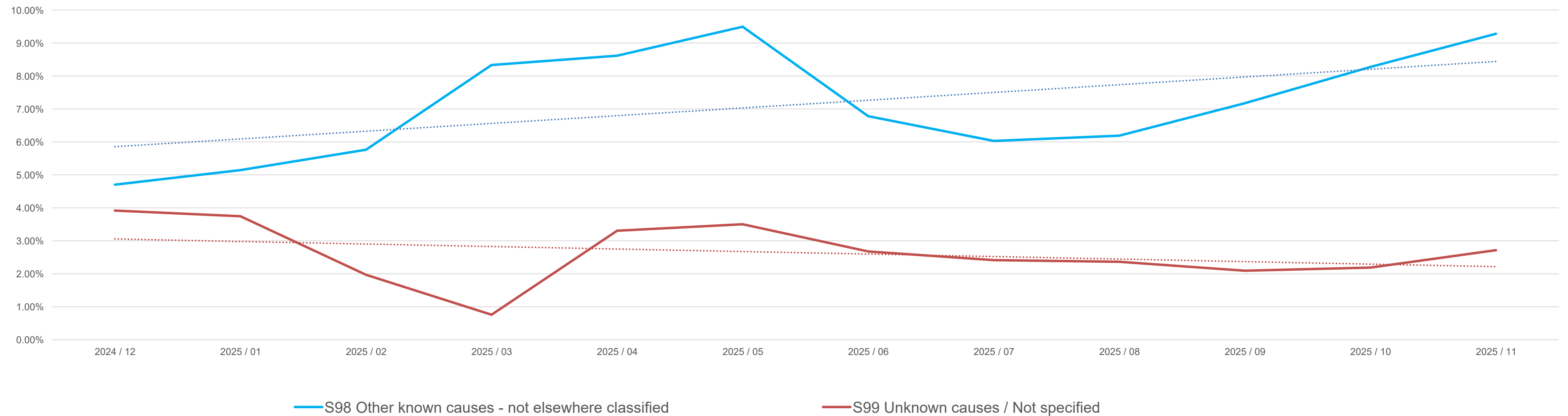
Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Unknown/'uncategorised' reasons for absence (S98 and S99)

Other Known Causes - Not Elsewhere Classified and Unknown Causes / Not Specified by FTE Lost %



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Unknown/'uncategorised' reasons for absence (S98 and S99)

For the period 1 December 2024 to 30 November 2025:

- “Other known causes – Not elsewhere classified” (S98) accounts for **2,814.31** FTE days lost
- "Unknown causes / Not specified" (S99) accounts for **4,057.65** FTE days lost
- In total, this equates to **9.74%** of total sickness absence for the year.

Sickness Absence

Unknown/'uncategorised' reasons for absence (S98 and S99)

Proportion of staff absent due to S98 and S99 by Directorate

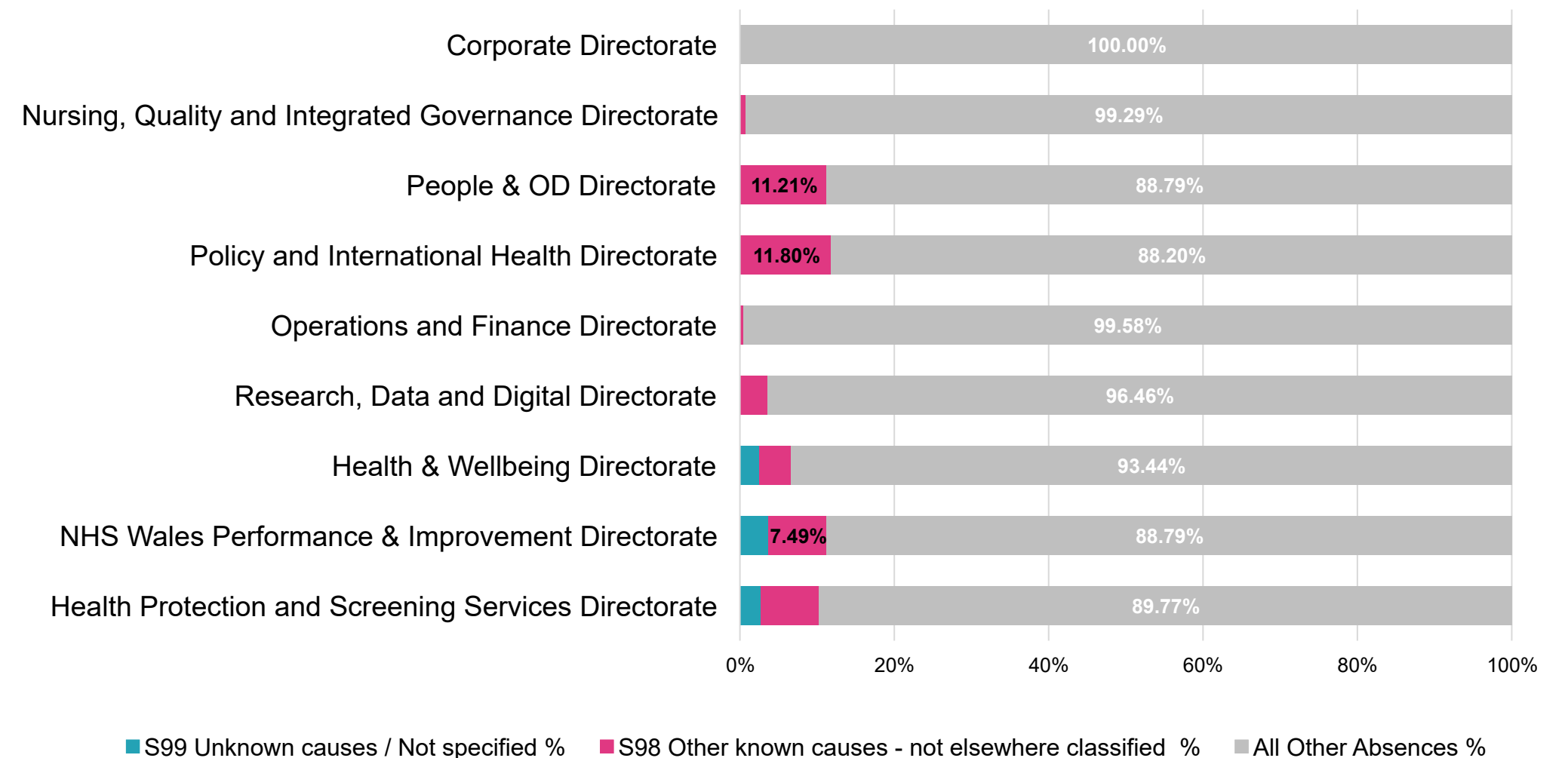
Highest proportion:

- Policy and International Health: 11.80% (4)
- NHS Wales Performance & Improvement: 11.21% (27)
- People & OD: 11.21% (2)

Lowest proportion:

- Corporate: 0%
- Nursing Quality and Integrated Governance: 0.71%

S99 Unknown Causes / Not Specified & S98 Other Known Causes - Not Elsewhere Classified Vs All Other Sickness Absences by Directorate



Source: ESR

1 Dec 2024 - 30 Nov 2025

Sickness Absence

Data quality improvement

Summary

- Unknown and uncategorised absences may obscure trends or systemic issues, limiting the organisation's ability to respond effectively to workforce wellbeing needs.
- Further improvement is needed in the accuracy of sickness absence data, to enable more detailed reporting and appropriate, tailored interventions where needed.

Specific actions to improve categorisation of absences

- Monthly reporting to identify and work with relevant managers to request disclosure, and to understand any barriers to recording this information.
- Return to Work form has been updated to reiterate need for accurate recording of absence in ESR along with a full list of *Reasons for Absence* to aid selection.
- People and OD Advisors reminding People Managers of the importance of capturing Level 2 reason, particularly in absences related to Stress.

Sickness Absence

Wellbeing Support - Internal Audit Report



Internal Audit of ‘... *the effectiveness of arrangements in place to monitor, support, and respond to mental health-related sickness absence ...*’

‘*Reasonable Assurance*’ overall, with ‘*Substantial Assurance*’ for support mechanisms.

Comprehensive Support Framework

- Wide range of support for staff mental health, including:
- 24/7 Employee Assistance Programme (Vivup)
- Wellbeing workshops for managers and staff
- Peer-led Burnout Support Hub
- Occupational Health Services (self-referral or manager referral)
- Departmental wellbeing groups and regular communications

Sickness Absence

Wellbeing Support - Internal Audit Report continued



Pro-active Data Quality Improvements

- Monthly reporting to identify and address data gaps
- Updated Return to Work forms to reinforce accurate ESR recording
- Active reminders to managers to capture detailed absence reasons

Manager Training and Advisory Support

- Regular delivery of All-Wales Managing Attendance at Work (MAAW) training
- Managers supported by People and OD team members for long-term absence cases

Consistent Signposting and Engagement

- Managers consistently signpost staff to support resources
- Staff engagement with support services is monitored and informs action plans

Sickness Absence

Wellbeing Support – Mental Health Resources

- Wellbeing Workshops for line managers and colleagues - key in promoting early intervention and reducing stigma in the workplace.
- Regular communication and news items throughout the year to signpost to available support and create mental health awareness; working in collaboration with our Staff Diversity Networks.
- Partnered with *Theatre Cynefin* to deliver a 6-week programme of mindfulness workshops, providing tools to manage stress, improve wellbeing, and build resilience.
- A range of courses on Vinci Works (digital e-learning platform) including: Wellbeing and remote working; Mental health in the workplace; Stress management at work.
- A new financial wellbeing portal with *Planned Future*, offering resources on mortgages, pensions, and insurance to empower staff in making confident financial decisions.
- Continued adoption of Stream (formerly Wagestream), an app to support financial wellbeing. Feedback has been very positive and frequently mentions reduced stress due to improved financial wellbeing.

Sickness Absence

Wellbeing Support – Supporting our Managers

Learning and Development

- The All-Wales Managing Attendance at Work (MAAW) learning and development sessions continue to be delivered by the People and OD Advisors. These encourage open discussion and early intervention with team members.
- The MAAW e-learning module is expected to be released in the new year and is planned to be mandated for those with line management responsibility.

Advisory Support

- The People and OD team continue to engage directly with managers to support the management of long-term sickness absence, via People Support, on-site visits and HR clinics.
- Advisory support is available at every long-term sickness absence meeting providing support for Occupational Health referrals, phased returns, reasonable adjustments or other interventions.

Sickness Absence

Ongoing action

- **People and OD advice** - Continue with targeted support for areas with high proportions of 'Anxiety/Stress/Depression' absences - (currently Health & Wellbeing & NHS Performance & Improvement).
- **Partnership working** – Continue to work with Trade Union colleagues to resolve workplace issues informally and to avoid unnecessary work-related absences.
- **Data Integrity** – Monthly reporting of unknown absences to allow for targeted intervention.
- **Return-to-Work form** – Updated to include reminder for accurate recording of absence in ESR and identification of Level-2 reason for S10; (2) work-related vs non-work-related stress.
- **Centralised record-keeping** - Sickness absence documentation consolidated into a secure SharePoint staff files library for improved accessibility and oversight.

Sickness Absence

Next steps

- **Data quality improvements** - Implement approaches to improve data quality, particularly for Level 2 reasons and the work-related/ non-work-related sickness field.
- **Ongoing monitoring** - Regular monitoring of sickness absence trends to inform ongoing interventions.
- **ESR transformation** - The NHS Future Workforce Solution is currently in development and is scheduled to begin replacing ESR from 2027. We will play an active role in shaping the new system's design, ensuring that key elements, such as the recording of Absence Reasons (Levels 1 and 2) and the distinction between work-related and non-work-related absence, are intuitive and support the continued accuracy of our sickness absence data.
- **Communication** - Pro-active communications to colleagues to highlight full range of wellbeing support available, including how to build resilience and how to seek support when needed.

Sickness Absence

Recommendation

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The Business Executive Team and the People and OD Committee are asked to receive assurance on sickness absence rates and trends for the period 1 December 2024 to 30 November 2025, and provide any input on plans for improving the quality and accuracy of sickness absence data.

