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Gníomhaireacht Thuaisceart Éireann
um Staitisticí agus Taighde

Sickness Absence in the Northern Ireland Civil Service

2017/2018



Department of
Finance

An Roinn

Airgeadais

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EXECUTIVE SUMMARY

This annual report provides a comprehensive analysis of sickness absence in the Northern Ireland Civil Service in the 2017/2018 financial year and contains analyses of trends over the last five years as well as headline figures since 1999/2000.

13.0

working days lost per staff year



6.0%

of available working days lost



£33.8

million in lost production

The headline absence figure for 2017/2018 was **13.0 days** (average days lost per staff year), an increase from 12.5 days in the previous year. This was the highest level of sickness absence since NICS moved to a new HR system and recording process in 2008/2009, but lower than the peak of 15.5 days recorded in 2003/2004.

The 13.0 days lost per staff year represented **6.0%** of the available working days in 2017/2018. In salary terms, this equated to an estimated **£33.8 million** of lost production - equivalent to around 4.0% of the total NICS pay bill in 2017/2018.

Just under half (46.6%) of staff had no recorded absence in 2017/2018 - a figure that was negatively impacted by the higher than usual number of **Cold, Cough, Flu, Influenza** absences this year.

Over one in every eight staff had at least one spell of long-term absence - these spells lasted around three months on average. This was the highest level of long-term absence observed in the last five years, and accounted for nearly three quarters of all working days lost.

Anxiety/Stress/Depression/Other Psychiatric Illnesses was the absence reason that accounted for the greatest proportion of working days lost (36.4%) during 2017/2018. Within this category, work-related stress accounted for approximately a third of the days lost.

The level of absence within Departments varied from 7.6 days for the Executive Office to 15.4 days for the Department for Communities (DfC), with half of the Departments recording lower absence levels compared to 2016/2017.

The absence level for females (15.4 days) remained higher than that for males (10.9 days) with over half of this difference being due to gender-specific conditions¹.

Staff who had been in post for under two years had a much lower level of sickness absence (5.8 days) than staff who had been employed for two years or more (13.2 days). Around half of the staff employed for under two years would have been on probationary terms and conditions, which would include the more stringent management of sickness absence.

¹ Absences due to *Pregnancy Related Disorders*, gender-specific *Genitourinary and Gynaecological Disorders* and gender-specific *Benign and Malignant Tumours, Cancers*.

KEY FACTS

	2013/ 2014	2014/ 2015	2015/ 2016	2016/ 2017	2017/ 2018
Proportion of Staff with No Recorded Spells of Absence (%)	55.3	52.1	50.0	49.5	46.6
Working Days Lost per Staff Year	10.1	10.8	11.7	12.5	13.0
Percentage of Available Working Days Lost (%)	4.6	4.9	5.3	5.6	6.0
Total Number of Working Days Lost	262,230	277,176	277,855	270,458	279,996
Estimated Lost Production¹ (£ Million)	30.2	31.9	32.7	32.6	33.8
Average Number of Spells per Staff Year	0.7	0.8	0.8	0.8	0.9
Proportion of Working Days Lost by Certification³					
Certified (%)	86.2	86.1	85.6	86.9	86.5
Self-Certified (%)	12.7	12.7	13.1	11.5	11.6
Uncertified/Missing (%)	1.2	1.2	1.4	1.6	1.9
Long-term Absence					
Proportion of Working Days Lost due to Long-term Absence (%)	73.0	73.6	73.8	76.1	74.7
Frequency Rate ² (%)	10.9	11.8	12.5	13.5	14.0
Average Duration (Working Days)	59.8	60.2	60.2	62.5	62.0
Short-term Absence					
Average Number of Spells per Staff Year	0.61	0.64	0.69	0.68	0.72

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¹ Any information provided in this report that relates to lost production is calculated, where possible, on the basis of each individual's actual salary and the associated employer's National Insurance and Superannuation contributions.

² Frequency Rate is the average number of long-term spells per employee, expressed as a percentage. (No. of spells of long-term absence in the period/No. of employees) x 100

³ Certification data for 2013/2014 onwards have been revised – see page 18 and Appendix 1 for further information.

CHAPTER 1

Working Days Lost through Sickness Absence

13.0 working days lost on average due to sickness absence

6.0% of available working days lost due to sickness absence

£33.8 million lost production

1. WORKING DAYS LOST THROUGH SICKNESS ABSENCE

Absence levels vary by Department, grade level, gender, age group, and the length of service of staff. This chapter looks at trends across these variables over the last five years.

1.1 Introduction

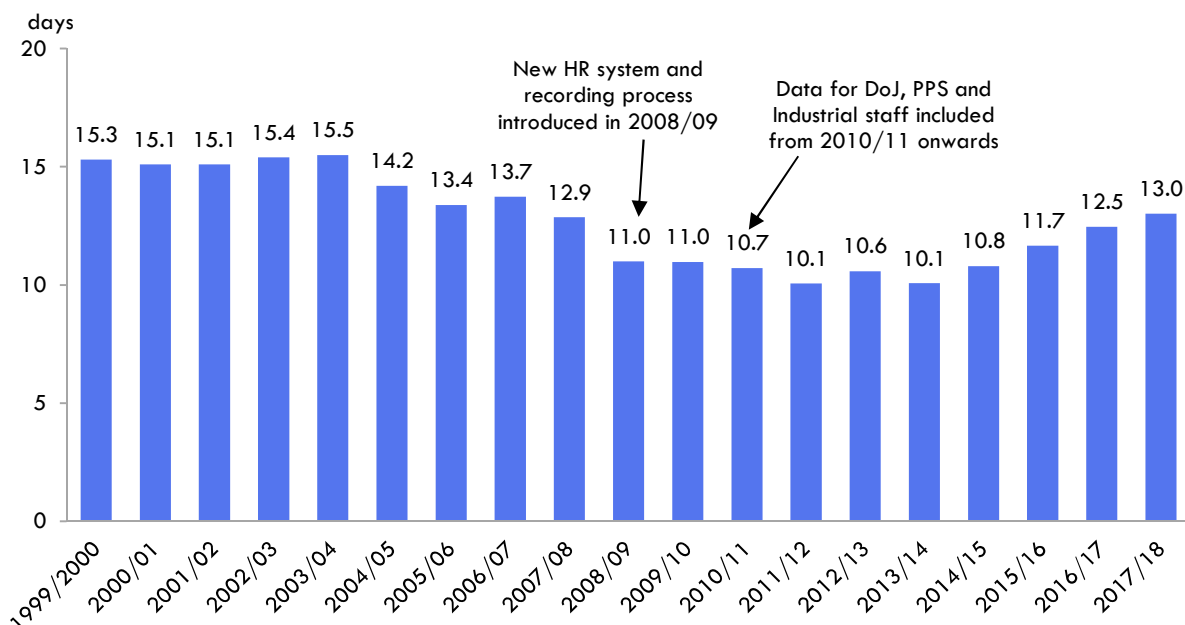
Staff in the NICS lost an average of 13.0 days to sickness absence in 2017/2018 - an increase from the previous year when staff lost 12.5 days (Some further analyses into the underlying factors of this increase can be found in Chapter 5 - Absence Insight).

In total, 6.0% of all available working days were lost due to sickness absence, equating to around £33.8 million in lost production¹, equivalent to around 4.0% of the total NICS pay bill.

All three main measures of sickness absence – working days lost per staff year, the percentage of available working days lost and estimated lost production - were the highest they had been in the last five years. Looking at longer trends however, Figure 1 below shows that during the early 2000s around 15.0-15.5 days were lost on average per staff year. This then dropped over subsequent years until 2011/2012 when it reached its lowest level of 10.1 days. In the six years since then the absence level has increased to 13.0 days, still some 2.5 days lower than its peak of 15.5 days in 2003/2004. It should be noted, however, that there was an increase in the proportion of staff with no absences following the introduction, in 2008/2009, of a new HR system and recording process. This should be taken into consideration when analysing the historical trends.

Figure 1

Working Days Lost per Staff Year² in NICS (1999/2000 to 2017/2018)



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Staff who either retire early on medical grounds or are dismissed because of inefficiency due to excessive sickness absence are entitled to receive up to 13 weeks' notice. In line with Cabinet Office guidelines, any sickness absences during this notice period are included in the overall statistics. It is estimated that these absences added around 0.4 of a day to the overall absence level. If they were excluded, the headline figure of 13.0 days would reduce to 12.6 days.

¹ Estimated lost production is calculated using direct costs alone and does not consider any associated costs such as for overtime and replacement staff. Any information provided in this report that relates to lost production is calculated, where possible, on the basis of each individual's actual salary and the associated employer's National Insurance and Superannuation contributions.

² One staff year is the equivalent of one full-time member of staff being in work for a full year. It takes account of staff leaving / joining as well as part-time working patterns.

1.2 Department

The average number of working days lost due to sickness absence in 2017/18 ranged from 7.6 days for the Executive Office (TEO) to 15.4 days for the Department for Communities (DfC).

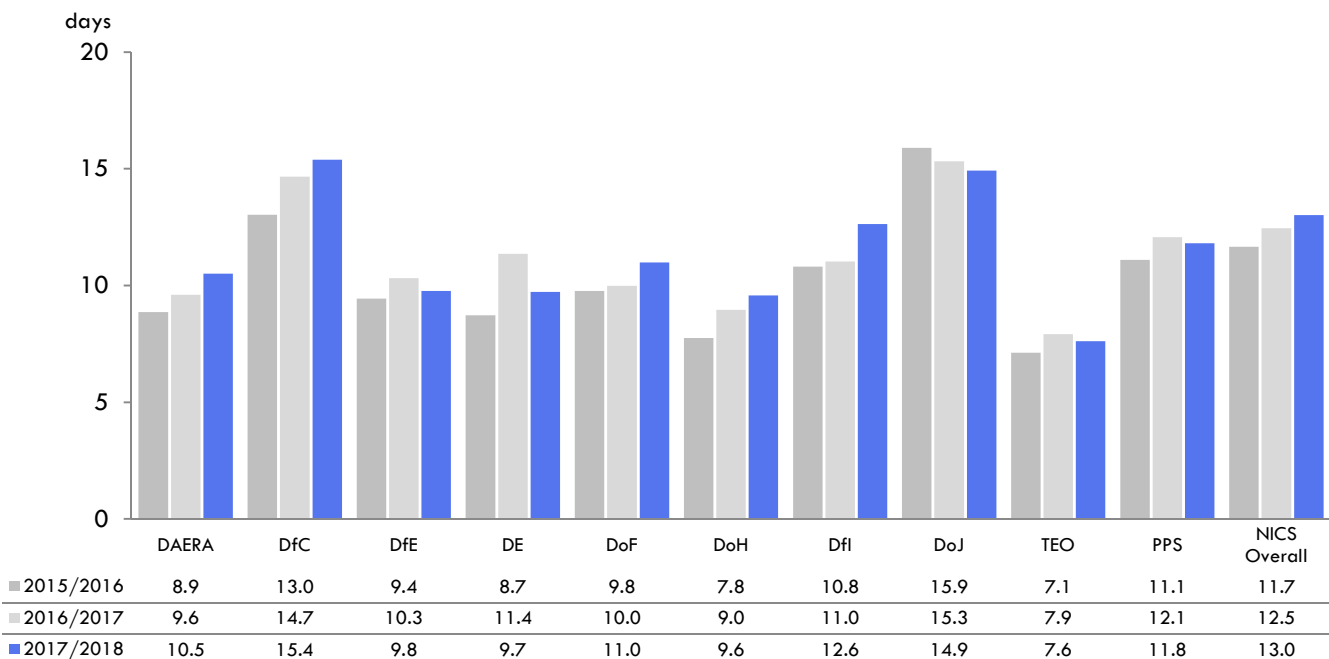
Five Departments improved on their absence levels from last year - DfE, DE, DoJ, TEO and PPS with the Department for Education (DE) experiencing the greatest reduction. In terms of the other Departments, the Department for Infrastructure (DfI), Department of Finance (DoF) and Department of Agriculture, Environment and Rural Affairs (DAERA) saw notable increases.

DoF, while containing around 15% of NICS staff, had the biggest impact on the overall increase in absence level. Within DoF, most grade levels experienced an increase with AO staff having the biggest impact on this rise. To view each Department's contribution to the overall absence level, see Table 9.1 in Appendix 9.

Departmental staffing profiles can have a major influence on relative absence levels. This needs to be considered when making Departmental comparisons. More appropriate like-for-like comparisons can be obtained in Appendix 5 which provides standardised Departmental absence figures which seek to eliminate the impact of staffing factors. In the majority of Departments, standardised absence levels are lower than their unadjusted figure. DoJ's figures showed the greatest reduction, falling from 14.9 to 10.3 days lost through sickness absence.

Figure 2

Working Days Lost per Staff Year by Department (2015/2016 to 2017/2018)^{1, 2}



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¹ The NICS Departments were restructured from 9th May 2016. All Departmental figures for 2015/2016 represent a best estimate of those year's figures, had the new NICS structure been in place. No comparable figures are available for years prior to 2015/2016. For more information on the restructuring, see Appendix 1 and Appendix 11.

² Staff in HSENI and OAGNI are included in the NICS Overall figure only.

1.3 Grade Level

Within this report, non-industrial staff are separated into analogous grade levels, while Industrial and Prison Grade staff are reported separately.

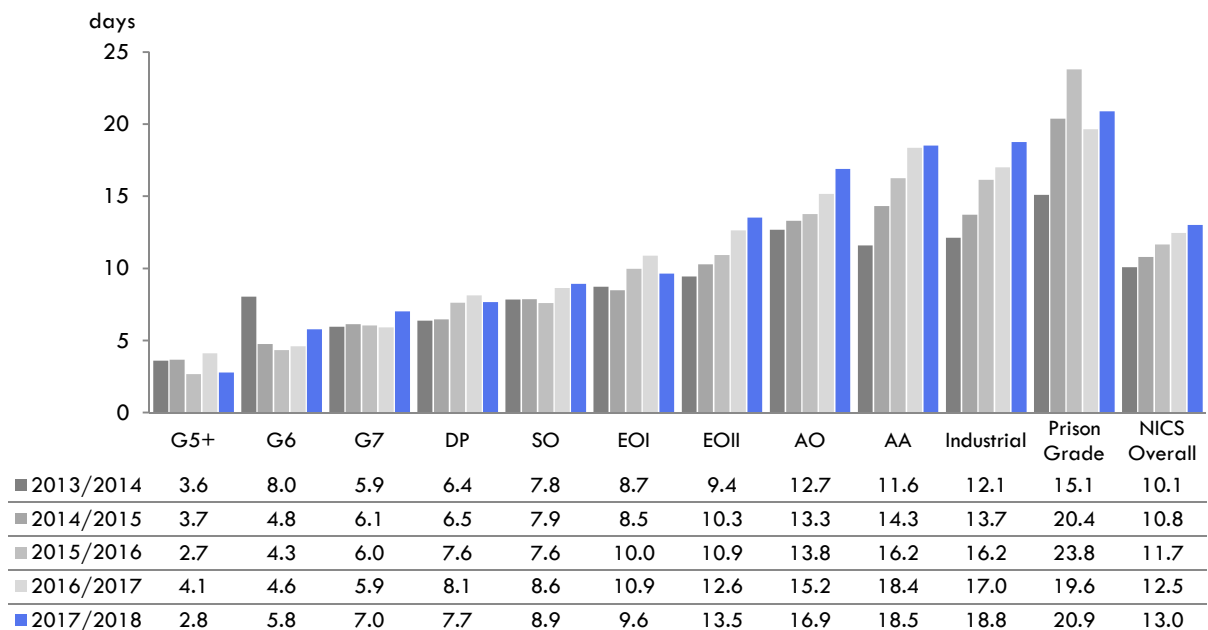
There is significant variation in absence levels across grade levels, although a general trend of decreasing levels of absence as grade level increases can be observed. The average number of working days lost in 2017/2018 ranged from 2.8 days for staff at Grade 5+ level to 20.9 days for Prison Grade staff.

Three of the eleven grade levels reported an improvement compared with 2016/2017 (G5+, DP and EOI). Within the other grade levels, the Administrative Officer (AO), Industrial and Prison Grade staff had the largest increases.

The AO level encompassed the largest number of staff, representing just over one-quarter of the NICS, and had the biggest impact on the rise in the overall NICS absence level in 2017/2018. For detailed information on each grade level's contribution to the overall NICS absence level, see Table 9.2 in Appendix 9.

Figure 3

Working Days Lost per Staff Year by Analogous Grade Level (2013/2014 to 2017/2018)¹



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¹ For the purpose of this analysis all former Northern Ireland Office staff at the Band C grade level have been classified as analogous to the EOII grade level.

1.4 Gender

Absence levels increased for both males and females in 2017/2018.

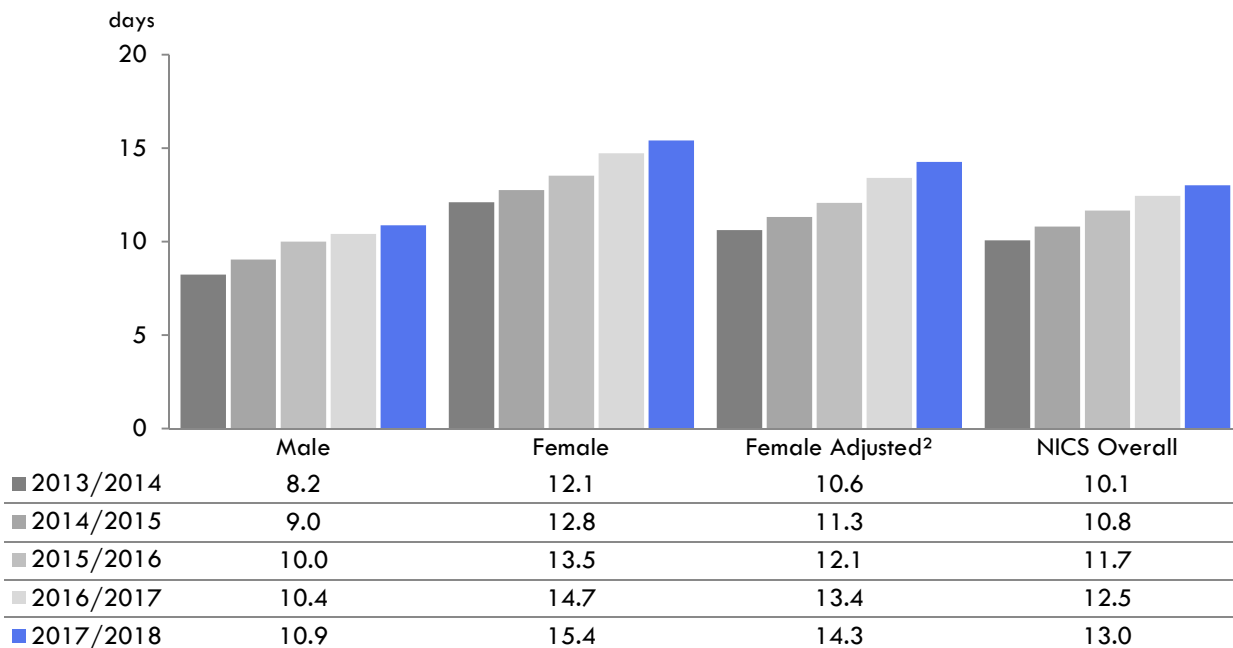
Female staff have historically had a higher level of absence than males, with a difference of around 4 days observed in recent years. In 2017/2018 this difference was 4.5 days, the highest it had been in the last five years. However there are other factors to take into account when comparing the difference between genders.

The largest cause of the difference was *Pregnancy Related Disorders*. If this cause was excluded, the adjusted absence level for females fell from 15.4 days to 14.3 days. If all gender-specific absences¹ were excluded from the absence figures the difference between male and female absence would fall to 2.4 days (13.2 days for females and 10.8 days for males).

To view the contribution of each gender to the overall NICS absence level, see Table 9.3 in Appendix 9.

Figure 4

Working Days Lost per Staff Year by Gender (2013/2014 to 2017/2018)



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¹ Absences due to *Pregnancy Related Disorders*, gender-specific *Genitourinary and Gynaecological Disorders* and gender-specific *Benign and Malignant Tumours, Cancers*.

² Excludes absences due to *Pregnancy Related Disorders*.

1.5 Length of Service

Staff with less than two years' service in NICS lost an average of 5.8 days through sickness absence in 2017/2018. This was less than half of the average number of days lost (13.2 days) by staff with more than two years of service.

The lower level of sickness absence among new staff was a likely consequence of the one year probationary period each staff member undergoes immediately after joining NICS. The probation regime includes more stringent conditions concerning the management of sickness absence compared to those not in probation. For probationary staff, each absence spell leads to a review and the consideration of potential inefficiency action.

It is worth noting that only 3.1% of NICS staff had less than two years' service in 2017/2018. The NICS-wide recruitment embargo which operated from November 2014 to April 2016, plus the subsequent time taken to run recruitment campaigns once the embargo had been lifted, has resulted in the proportion of staff in this category being very low.

Table 1

Working Days Lost per Staff Year by Length of Service (2013/2014 to 2017/2018)

Length of Service	Working Days Lost per Staff Year				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Less than 1 year	3.6	3.4	3.1	2.1	4.4
1 to less than 2 years	6.1	6.3	5.1	5.7	7.1
Less than 2 years	4.9	5.3	4.3	3.0	5.8
2 to less than 3 years	7.4	11.6	9.2	6.8	7.9
3 to less than 4 years	5.5	10.6	12.2	12.4	10.1
4 to less than 5 years	10.1	9.7	8.6	11.4	11.6
5 years or more	10.5	11.1	11.9	12.7	13.4
2 years or more	10.4	11.1	11.8	12.6	13.2
NICS Overall	10.1	10.8	11.7	12.5	13.0

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1.6 Age Group

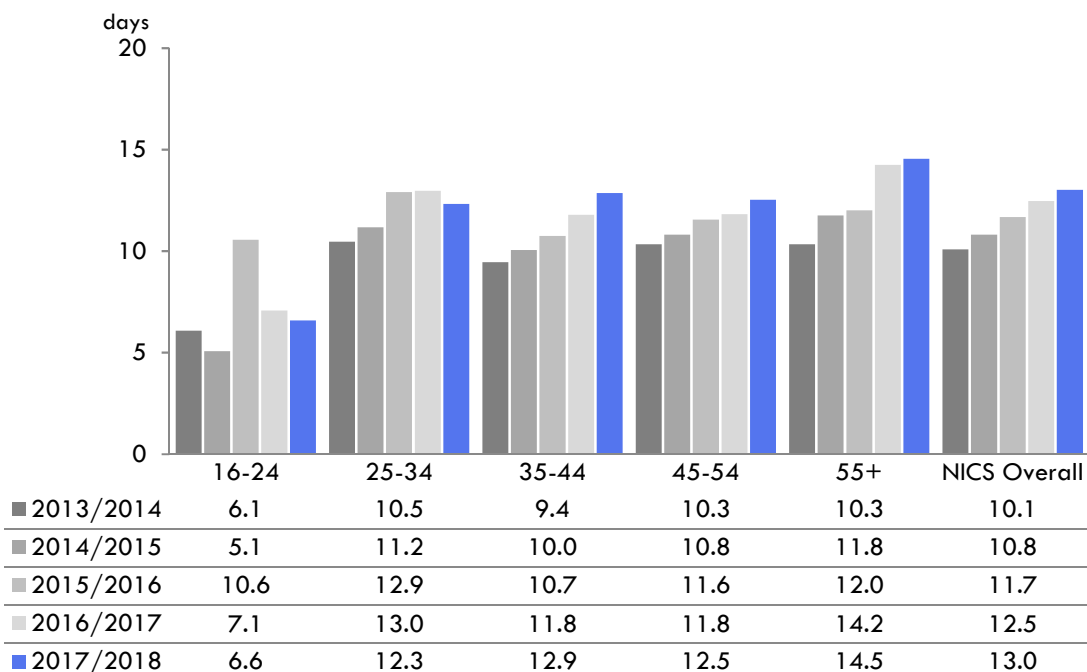
The average number of working days lost ranged from 6.6 days for staff aged 16-24 to 14.5 days for staff aged 55+. It should be noted, however, that the youngest age group (16-24) accounted for only 0.3% of NICS staff.

Staff aged 16-24 and 25-34 experienced a decrease in absence levels, while all other age groups experienced an increase.

Older staff generally tended to have fewer absences but when they were sick, the duration of their absence was longer. The average duration of absence increased by age group and ranged from 7.8 days for staff aged 16-24 to 18.6 days for staff aged 55+. To see the age comparisons in greater detail, see Table 6.4 in Appendix 6.

Figure 5

Working Days Lost per Staff Year by Age Group (2013/2014 to 2017/2018)



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CHAPTER 2

Spells of Sickness Absence

46.6% of staff had **no** sickness absence

66.6% of absence spells lasted five working days or less

86.5% of working days lost were covered by a medical certificate

2. SPELLS OF SICKNESS ABSENCE

This chapter looks at the number and duration of sickness absence spells and how they were certified. Supporting information can be found in Appendix 6.

2.1 Number of Absence Spells

Figure 6 shows that in 2017/2018, under half of all staff (46.6%) had no spells of sickness absence - the lowest level recorded in the last five years and a decrease from the previous year when 49.5% of staff had none. One spell of absence was recorded for 35.4% of staff, 13.4% had two spells, while the remaining 4.7% of staff were absent on three or more occasions.

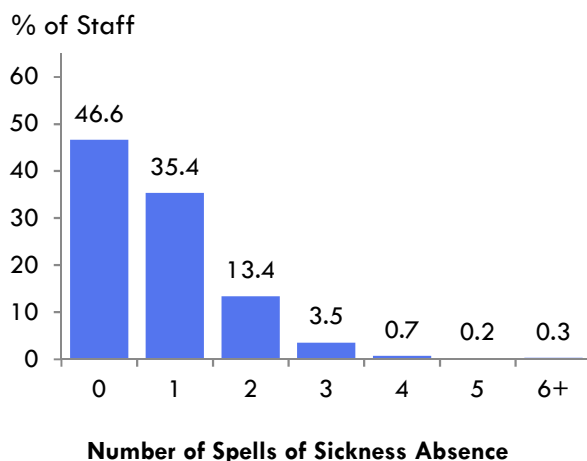
It should be noted that 2017/2018 had a higher than usual number of *Cold, Cough, Flu, Influenza* absences and this has impacted negatively on the proportion of staff with no spells of sickness absence. Further analyses can be found in Chapter 5 - Absence Insight.

The proportion of staff with no absence varied markedly between Departments from 40.3% in DfC to 58.0% in TEO (see Table 6.10 in Appendix 6).

Figure 7 shows that nearly a quarter (24.6%) of staff were absent for between one and five days in total during 2017/2018. Meanwhile, the percentage of staff who were absent for a total of more than 20 days during the year rose to 14.4% - the highest proportion observed over the past five years (see Table 6.8 in Appendix 6).

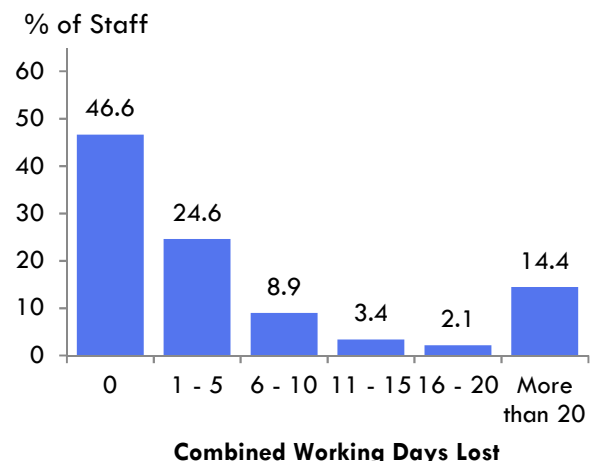
For further information on absence spells and working days lost, see Appendix 6.

Figure 6
Number of Absence Spells



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Figure 7
Combined Working Days Lost¹

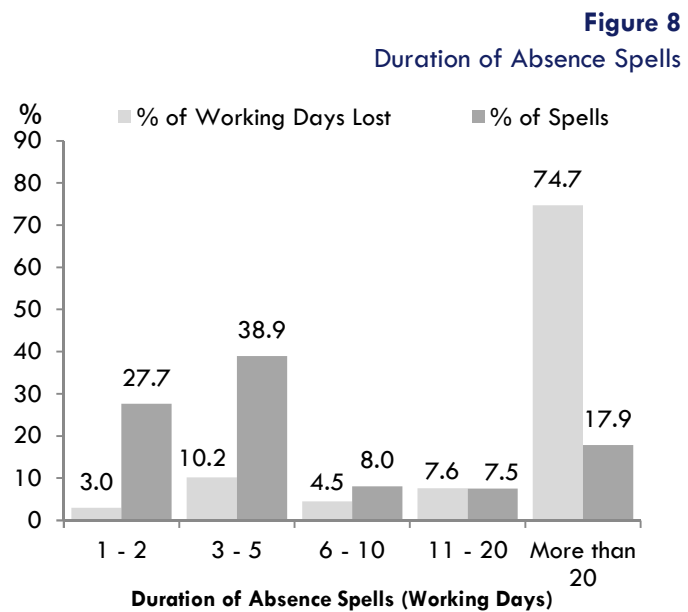


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¹ The total number of working days lost for an individual, counted across all their absence spells, during the financial year.

2.2 Duration of Absence Spells

Nearly 19,000 sickness absence spells were recorded in 2017/2018, almost 900 more than in the previous year. The majority of this increase was due to the higher than usual number of *Cold, Cough, Flu, Influenza* absences, but there was also an increase in the number of long-term absences. The majority of spells were relatively short - 66.6% of all absence spells lasted five working days or less. Such absences, however, only accounted for 13.2% of the total working days lost to sickness absence (see Figure 8). In total, short-term absences (those lasting 20 working days or less) accounted for 82.1% of all spells.

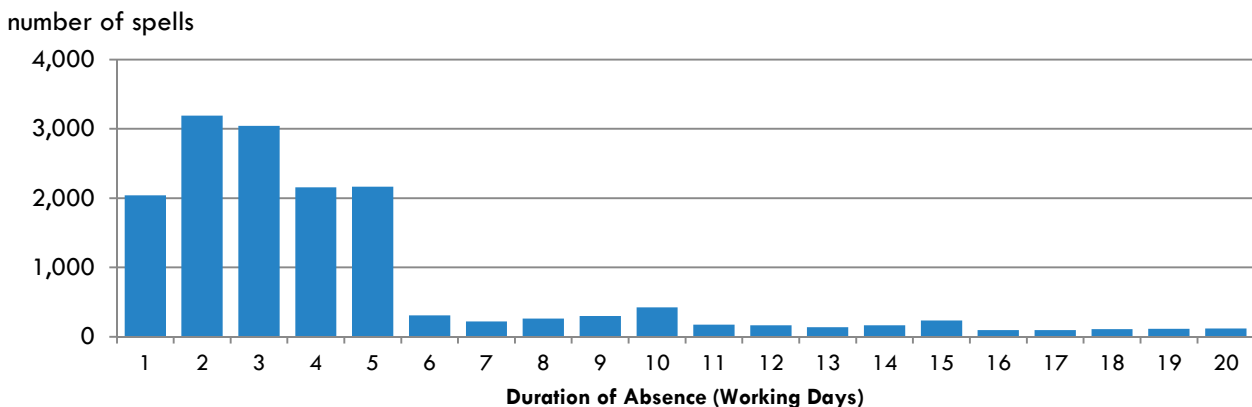


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Long-term absences (those lasting more than 20 days) made up the vast majority of all working days lost. Although they represented just 17.9% of spells, they accounted for 74.7% of all the working days lost. These figures were a small decrease on those for 2016/2017, likely due to the large increase in short-term spells due to *Cold, Cough, Flu, Influenza*.

Figure 9

Number of Spells by Duration - Short-term Absences



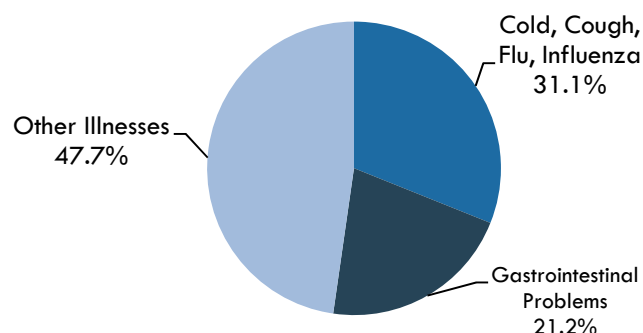
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Just over 3,000 spells of absences lasted for two working days - the most frequent duration of all absences (see Figure 9).

Short-term absence spells were predominately due to *Cold, Cough, Flu, Influenza* (31.1%) or *Gastrointestinal Problems* (21.2%).

An analysis of long-term absences can be found in Chapter 4.

Figure 10
Short-Term Absences - % of Spells by Reason



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2.3 Absence Certification

All NICS staff are required to have their spells of sickness absence certified. For absences of seven calendar days or less staff are able to self-certify whereas, for longer absences, a Medical Certificate from a medical practitioner or hospital is required. Given the short duration of many absences, it is not surprising that the majority (58.2%) of spells were self-certified with medically certified absences making up a further 34.1% of the total.

Absences which were uncertified or missing a certification have been classified here as 'other' and accounted for 7.6% of absence spells. A proportion of this figure would relate to absences where the certification had yet to be processed at the end of 2017/2018.

As would be expected, self-certified absences did not last as long as certified absences. On average, self-certified absences lasted 3.0 days while certified absences lasted 37.5 days (see Table 6.1 in Appendix 6).

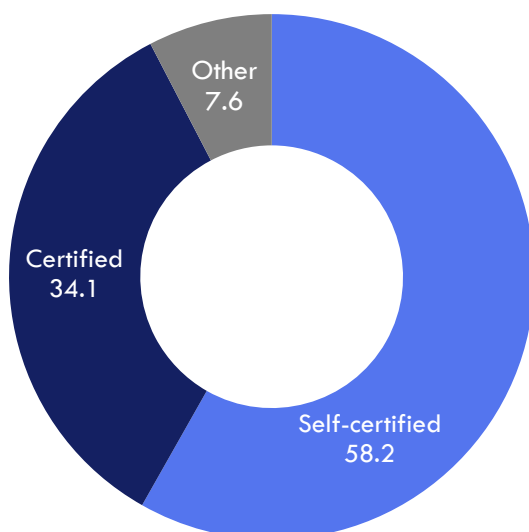
The majority of working days lost were certified by a doctor or hospital. Absences certified in this manner accounted for 86.5% of the total working days lost, equating to 11.3 days lost per staff year or 5.2% of the available working days (see Table 3.3 in Appendix 3). Self-certified absences accounted for a further 11.6% of the working days lost while 'other' absences made up the remaining 1.9%.

It should be noted that the Certification analyses presented here are not directly comparable with similar analyses presented in previous publications. Certification information was found to be being incorrectly recorded by a relatively small number of line managers or staff and this led to around 2% of all sickness absence spells being mistakenly reported as uncertified or missing. Through the use of related medical certificate information, the quality of the reported data has been improved in the presented analyses this year. Updated headline Certification figures from 2013/2014 onwards can be found in the Key Facts table on page 5. Further information relating to this revision exercise can be found in Appendix 1.

Further information about absence certification (including a Departmental breakdown) is available in Tables 6.1 to 6.4 in Appendix 6.

Figure 11

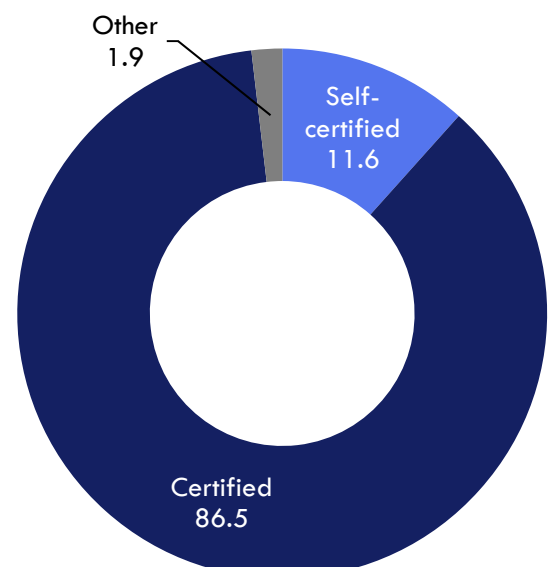
% of Absence Spells by Certification



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Figure 12

% of Working Days Lost by Certification



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CHAPTER 3

Reason for Sickness Absence

The main reason for absence was

**Anxiety/Stress/Depression/
Other Psychiatric Illnesses**

accounting for **over 1 in 3** working days lost

3. REASON FOR SICKNESS ABSENCE

This chapter looks at the reasons for sickness absence. More analyses are presented in Appendix 7.

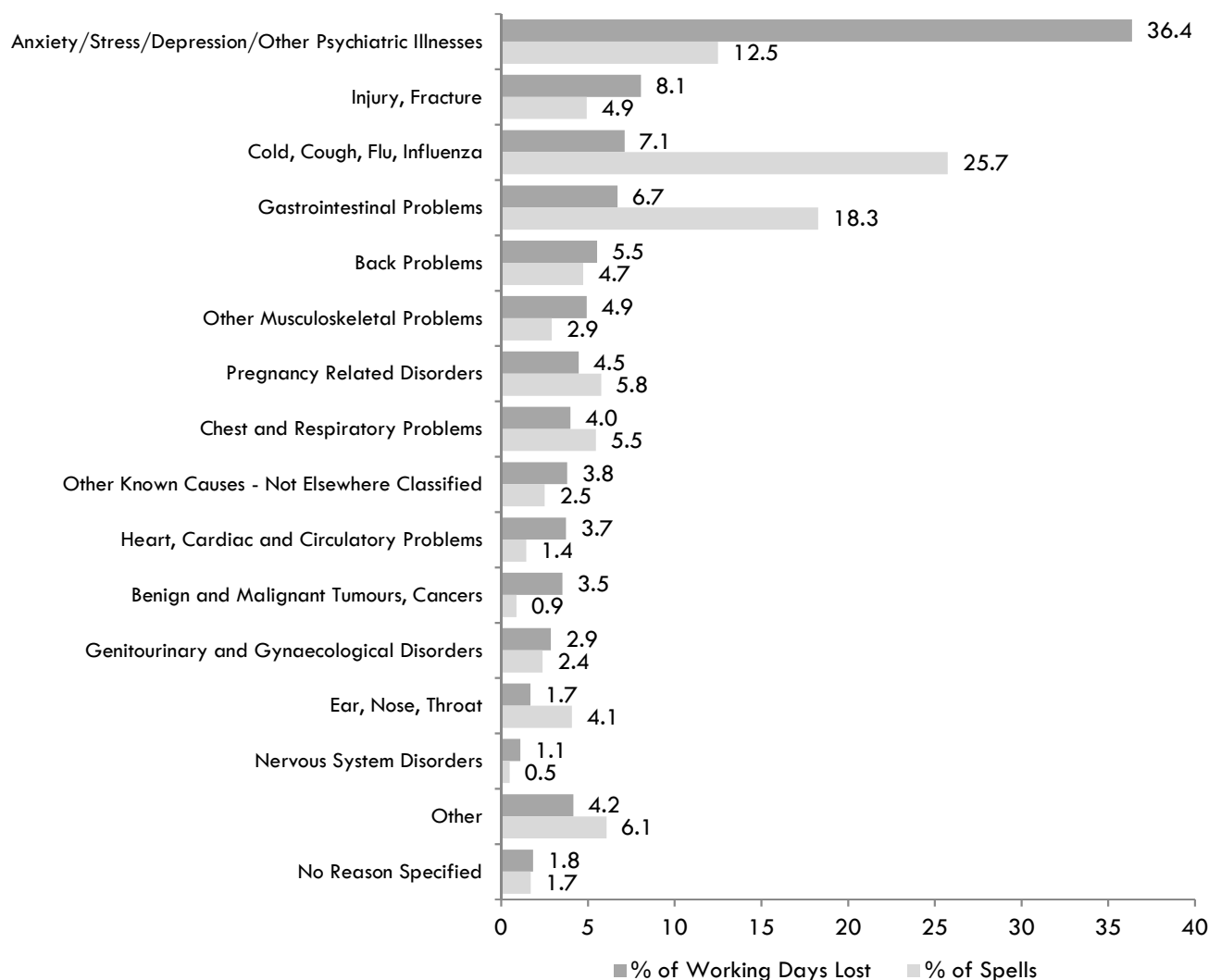
3.1 NICS Overall

Absences recorded as *Gastrointestinal Problems* or *Cold, Cough, Flu, Influenza* accounted for 44% of all absence spells in 2017/2018. However as such illnesses tend to be short-term in nature they did not account for the highest proportion of working days lost.

As in previous years, *Anxiety/Stress/Depression/Other Psychiatric Illnesses* remained the reason behind the highest proportion of working days lost. This reason accounted for 36.4% of the total working days lost and was the biggest contributor (closely followed by *Cold, Cough, Flu, Influenza*) to the increase in the overall absence level observed in 2017/2018 (see Table 9.5 in Appendix 9). Over one third of the working days lost in this illness category were recorded as work-related stress (see Table 7.4 in Appendix 7).

To view each absence type's contribution to the overall NICS absence level, see Table 9.5 in Appendix 9.

Figure 13^{1,2}
Reason for Absence



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¹ The category 'Other' contains any absence with a reason that accounted for less than 1% of the working days lost.

² The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

The average duration of an absence is linked to the nature and severity of the illness involved.

Absences caused by *Benign and Malignant Tumours, Cancers* had the longest average duration at 58.7 working days. These absences, however, were quite rare and only accounted for 0.9% of absence spells. By contrast, absences due to *Anxiety/Stress/Depression/Other Psychiatric Illnesses* not only had the second highest average duration (43.1 working days) but also accounted for 12.5% of spells.

At the other end of the scale, absences due to *Cold, Cough, Flu, Influenza* had the shortest average duration at 4.1 days. For a detailed breakdown of absence reason by spells, see Table 7.2 in Appendix 7.

Table 2^{1,2}

Average Duration of Absence by Reason

	Working Days
Benign and Malignant Tumours, Cancers	58.7
Anxiety/Stress/Depression/Other Psychiatric Illnesses	43.1
Heart, Cardiac and Circulatory Problems	38.4
Nervous System Disorders	32.5
Blood Disorders	31.6
Other Musculoskeletal Problems	25.1
Injury, Fracture	24.2
Other Known Causes - Not Elsewhere Classified	22.4
Substance Abuse	21.5
Endocrine/Glandular Problems	21.2
Genitourinary and Gynaecological Disorders	17.8
Back Problems	17.3
Eye Problems	16.7
Infectious Diseases	12.6
Skin Disorders	12.5
Pregnancy Related Disorders	11.5
Chest and Respiratory Problems	10.8
Asthma	9.5
Burns, Poisoning, Frostbite, Hypothermia	8.2
Ear, Nose, Throat	6.2
Gastrointestinal Problems	5.4
Dental and Oral Problems	4.4
Headache/Migraine	4.2
Cold, Cough, Flu, Influenza	4.1
No Reason Specified	16.0

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¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² The analysis only takes account of the working days lost by each absence during the specific financial year.

The following three tables show the percentage of total working days lost by grade level, gender and age group. Shading denotes the reason for the largest proportion of working days lost for each subgroup.

3.2 Grade Level

For the third year in succession, *Anxiety/Stress/Depression/Other Psychiatric Illnesses* accounted for the highest percentage of working days lost at all grade levels. Only staff at the EO1, EOII and DP Grade Levels experienced a decrease in the proportion of working days lost to this reason compared with 2016/2017. AA staff experienced the most notable change, which saw the proportion rise from 32.1% to 40.4%.

Prison Grade and Industrial staff had a noticeably higher proportion of working days lost to *Injury, Fracture* than staff in other grade levels, while Industrial staff experienced higher levels of *Back Problems*. This situation is likely to reflect the type of work undertaken by these grades.

For all grade levels *Cold, Cough, Flu, Influenza* accounted for a higher percentage of the days lost than in previous years, reflecting the impact of the unusual flu season in 2017/2018.

Table 3^{1,2,3}

Reason for Absence by Grade Level

	% of Working Days Lost								
	G7+	DP	SO	EOI	EOII	AO	AA	Industrial	Prison Grade
Anxiety/Stress/Depression/Other Psychiatric Illnesses	30.7	28.9	31.5	30.4	36.7	39.0	40.4	27.6	46.1
Asthma	-	-	0.1	0.7	0.3	0.1	n/a	-	n/a
Back Problems	5.4	6.6	4.0	9.0	5.6	4.2	2.8	13.3	4.6
Benign and Malignant Tumours, Cancers	7.1	6.5	4.7	5.8	3.3	3.0	3.1	1.5	0.9
Blood Disorders	-	0.1	0.7	0.9	0.9	1.0	n/a	1.7	n/a
Burns, Poisoning, Frostbite, Hypothermia	-	-	-	-	-	0.1	n/a	0.3	n/a
Chest and Respiratory Problems	3.3	4.2	3.4	4.1	4.3	4.2	3.5	4.7	3.0
Cold, Cough, Flu, Influenza	9.9	9.9	10.9	8.9	7.8	6.7	4.9	4.5	2.1
Dental and Oral Problems	0.1	0.3	0.6	0.1	0.2	0.2	-	0.2	-
Ear, Nose, Throat	1.8	2.1	1.9	2.1	2.1	1.7	2.7	0.4	-
Endocrine/Glandular Problems	-	0.4	0.4	0.5	0.5	0.5	0.5	n/a	-
Eye Problems	0.5	0.8	0.5	1.1	1.0	0.9	0.8	2.3	0.4
Gastrointestinal Problems	5.9	8.5	5.7	6.8	6.8	7.5	6.4	6.2	4.1
Genitourinary and Gynaecological Disorders	3.3	3.1	4.0	3.1	4.2	2.5	4.4	1.1	0.4
Headache/Migraine	0.7	1.5	1.0	0.4	0.6	1.0	0.2	0.5	0.1
Heart, Cardiac and Circulatory Problems	3.1	7.3	6.8	3.6	4.1	1.7	4.9	8.8	2.4
Infectious Diseases	0.4	0.5	1.0	0.7	0.4	0.4	0.6	-	n/a
Injury, Fracture	9.4	6.5	6.4	8.0	5.8	6.3	6.6	15.7	17.2
Nervous System Disorders	1.8	0.9	1.0	0.5	1.0	1.6	2.1	-	-
Other Known Causes - Not Elsewhere Classified	4.9	3.6	4.9	3.4	4.7	3.1	3.6	2.1	4.9
Other Musculoskeletal Problems	4.3	3.7	5.5	4.4	5.3	5.5	4.9	6.6	2.2
Pregnancy Related Disorders	4.1	3.9	3.3	2.9	3.3	6.9	6.1	n/a	2.7
Skin Disorders	0.4	-	0.2	1.3	0.4	0.4	0.6	0.4	-
Substance Abuse	n/a	n/a	-	-	-	n/a	-	n/a	n/a
No Reason Specified	2.0	0.6	1.5	1.1	0.4	1.5	0.4	1.2	8.7
NICS Overall	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

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¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² n/a: No cases recorded.

³ Cells with small numbers of occurrences have been suppressed (-).

3.3 Gender

As has been the case for over 10 years *Anxiety/Stress/Depression/Other Psychiatric Illnesses* was the reason behind the highest percentage of working days lost for both males and females.

The second highest reason for males was *Injury, Fracture*, accounting for 9.8% of their working days lost. *Pregnancy Related Disorders* was the second highest reason for females, accounting for 8.0% of their working days lost.

For both genders *Cold, Cough, Flu, Influenza* accounted for a higher percentage of the days lost than in previous years, reflecting the impact of the unusual flu season in 2017/2018.

Table 4^{1,2,3}
Reason for Absence by Gender

	% of Working Days Lost	
	Male	Female
Anxiety/Stress/Depression/Other Psychiatric Illnesses	37.7	35.3
Asthma	0.1	0.3
Back Problems	6.8	4.6
Benign and Malignant Tumours, Cancers	2.6	4.3
Blood Disorders	0.7	0.8
Burns, Poisoning, Frostbite, Hypothermia	0.0	-
Chest and Respiratory Problems	4.3	3.8
Cold, Cough, Flu, Influenza	8.1	6.4
Dental and Oral Problems	0.2	0.2
Ear, Nose, Throat	1.3	2.0
Endocrine/Glandular Problems	0.2	0.5
Eye Problems	1.0	0.8
Gastrointestinal Problems	7.2	6.3
Genitourinary and Gynaecological Disorders	1.3	4.1
Headache/Migraine	0.6	0.8
Heart, Cardiac and Circulatory Problems	5.4	2.4
Infectious Diseases	0.5	0.5
Injury, Fracture	9.8	6.7
Nervous System Disorders	0.7	1.4
Other Known Causes - Not Elsewhere Classified	3.6	4.0
Other Musculoskeletal Problems	4.7	5.1
Pregnancy Related Disorders	n/a	8.0
Skin Disorders	0.7	0.2
Substance Abuse	0.1	-
No Reason Specified	2.5	1.3
NICS Overall	100.0	100.0

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¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² n/a: No cases recorded.

³ Cells with small numbers of occurrences have been suppressed (-).

3.4 Age Group

Anxiety/Stress/Depression/Other Psychiatric Illnesses accounted for the highest percentage of working days lost for all age groups.

The only other absence reason to exceed 15% of working days lost in any age group was *Pregnancy Related Disorders* among the 25-34 age group, which accounted for 15.3% of their working days lost.

Across all age groups *Cold, Cough, Flu, Influenza* accounted for a higher percentage of the days lost than in previous years, reflecting the impact of the unusual flu season in 2017/2018.

Table 5^{1,2,3}

Reason for Absence by Age Group

	% of Working Days Lost				
	16-24	25-34	35-44	45-54	55+
Anxiety/Stress/Depression/Other Psychiatric Illnesses	42.4	38.9	35.9	39.2	31.7
Asthma	n/a	0.1	0.1	0.3	0.2
Back Problems	n/a	3.7	6.3	5.7	5.5
Benign and Malignant Tumours, Cancers	n/a	1.2	3.0	4.1	4.6
Blood Disorders	-	1.0	0.9	0.7	0.6
Burns, Poisoning, Frostbite, Hypothermia	n/a	0.1	-	-	0.1
Chest and Respiratory Problems	3.2	2.5	2.7	4.2	6.1
Cold, Cough, Flu, Influenza	7.0	6.8	7.2	7.4	6.9
Dental and Oral Problems	n/a	0.2	0.3	0.2	-
Ear, Nose, Throat	-	2.1	2.2	1.5	1.3
Endocrine/Glandular Problems	n/a	0.3	0.6	0.4	0.2
Eye Problems	n/a	0.7	0.5	0.9	1.4
Gastrointestinal Problems	13.8	8.1	7.3	6.3	5.8
Genitourinary and Gynaecological Disorders	-	1.9	3.4	2.9	2.8
Headache/Migraine	4.7	0.8	1.0	0.6	0.6
Heart, Cardiac and Circulatory Problems	n/a	0.1	1.6	3.9	8.0
Infectious Diseases	n/a	0.3	0.8	0.2	0.6
Injury, Fracture	8.8	8.3	7.2	7.6	9.5
Nervous System Disorders	n/a	1.0	1.0	1.2	1.1
Other Known Causes - Not Elsewhere Classified	-	2.8	3.2	4.1	4.6
Other Musculoskeletal Problems	n/a	1.9	4.2	6.0	6.0
Pregnancy Related Disorders	-	15.3	8.4	-	n/a
Skin Disorders	n/a	0.4	0.4	0.5	0.4
Substance Abuse	n/a	n/a	-	-	-
No Reason Specified	-	1.6	1.7	2.1	1.8
NICS Overall	100.0	100.0	100.0	100.0	100.0

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¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² n/a: No cases recorded.

³ Cells with small numbers of occurrences have been suppressed (-).

CHAPTER 4

Long-term Sickness Absence

13.3% of staff had at least one long-term absence

Long-term absences accounted for **74.7%** of the total working days lost

A long-term average duration of **62.0** working days

23.5% of Prison Grade staff had a long-term absence

4. LONG-TERM SICKNESS ABSENCE

A long-term absence is defined as any spell of absence that lasted more than 20 consecutive working days during the financial year. Additional information can be found in Appendix 8.

4.1 Prevalence of Long-term Absence

In 2017/2018, over one in every eight staff (13.3%) had a long-term absence; an increase from the 12.8% of staff in the previous year.

These 3,194 staff each had at least one absence spell that lasted anywhere from more than one month to the full year (see Figure 14). The average length of these 3,375 spells was around three calendar months (62.0 working days¹).

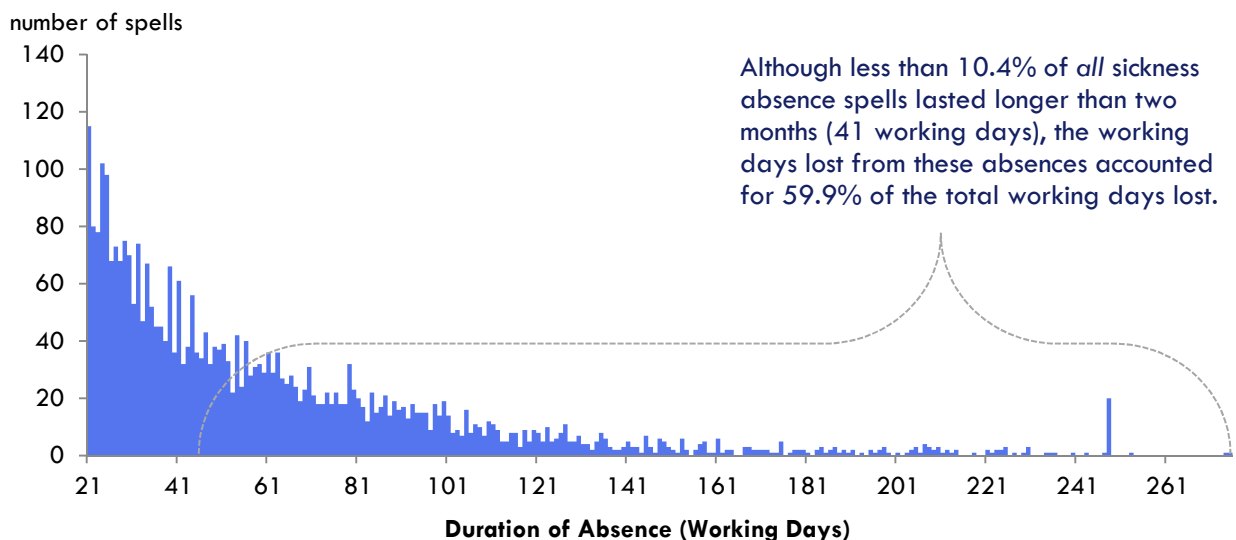
Long-term absences accounted for 74.7% of all working days lost, which was a reduction on the proportion recorded in 2016/2017. This level of long-term absence would, by way of illustration, be equivalent to the loss of around 950 full-time staff for an entire year.

It should be noted, however, that while there were more working days lost due to long-term absences in 2017/2018 than in 2016/2017 the large increase in short-term absences in 2017/2018, due to the higher than usual number of *Cold, Cough, Flu, Influenza* absences, actually led to the proportion of working days lost due to long-term absences reducing.

Meanwhile, the Frequency Rate² - the number of long-term spells per employee - increased from 13.5% to 14.0%, its highest level in the last five years.

Figure 14

Number of Spells by Duration - Long-term Absences (more than 20 working days)



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¹ The figure of 62.0 working days is the mean duration. The median (the middle value of all the long-term absence durations) is 49.0 working days, which equates to nearly 2½ months. These figures only take account of the days lost during the specific financial year. For context, long-term absences that ended during 2017/2018 lasted for an average of 75.9 working days (over 3½ months).

² Frequency Rate is the average number of long-term absences per employee, expressed as a percentage. (No of spells of long-term absence in the period/No. of employees) x 100

Table 6

Number of Long-term Absence Spells

Number of Long-term Absence Spells	Number of Staff	% of Staff
0	20,888	86.7
1	3,018	12.5
2	171	0.7
3+	5	0.0
NICS Overall	24,082	100.0

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4.2 Grade Level

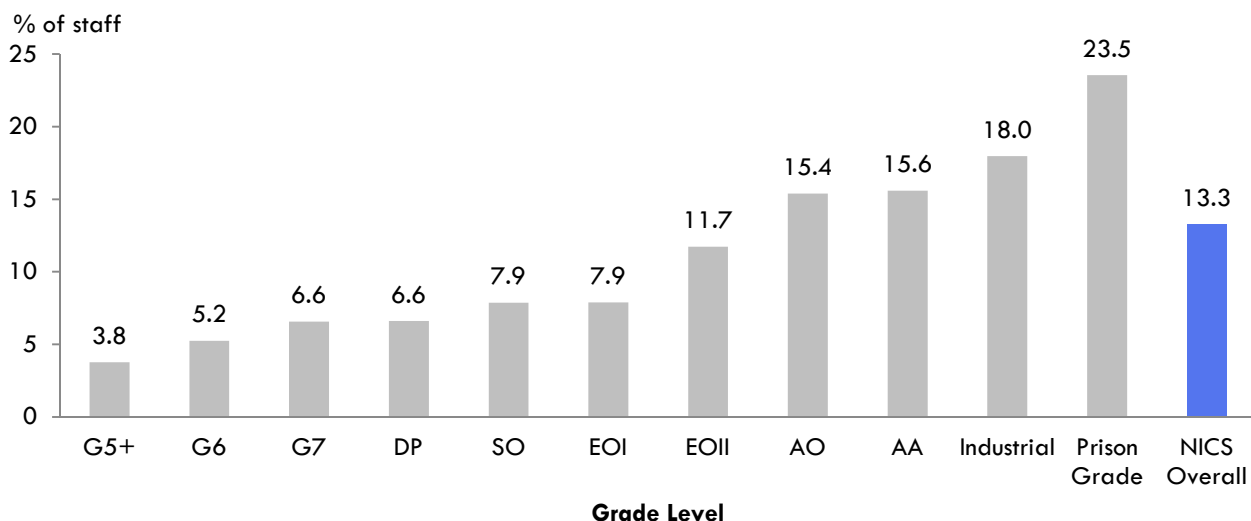
Prison Grade staff had the highest incidence of long-term sickness absence - with nearly one in four (23.5%) staff having a long-term absence spell in 2017/2018. This was an increase on the 2016/2017 figure of 22.9%. The only grade levels to show a reduction in long-term sickness absence spells were DP, EOI and AA.

The average duration of Prison Grade absences was 66.5 working days, which was higher than the overall NICS average (62.0 working days). In total, 86.9% of all working days lost by Prison Grade staff were due to long-term absences – the highest percentage of any grade level (see Table 8.2 in Appendix 8).

In the non-industrial grades, the incidence of long-term absence tended to decrease as grade level increased. For example, 15.6% of the AA grade staff had a long-term absence compared with 3.8% of G5+ staff.

Figure 15

One or More Long-term Absence by Grade Level



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4.3 Gender

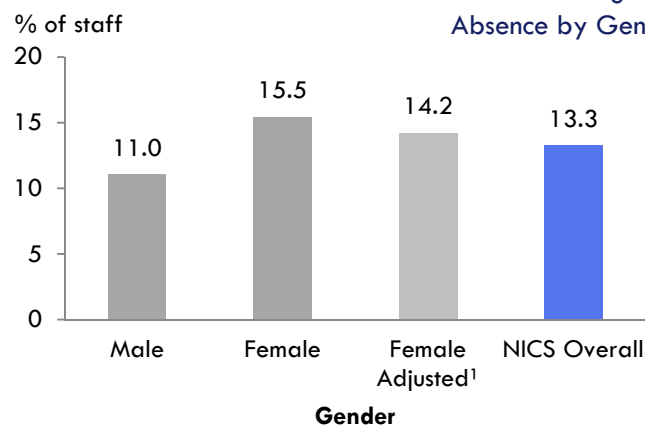
Females had a higher incidence of long-term absence than males, even after absences due to *Pregnancy Related Disorders* were excluded.

On the other hand, the average duration of their long-term absences (59.5 days) was shorter than those of males (65.4 days).

For further information, see Table 8.3 in Appendix 8.

Figure 16

One or More Long-term Absence by Gender

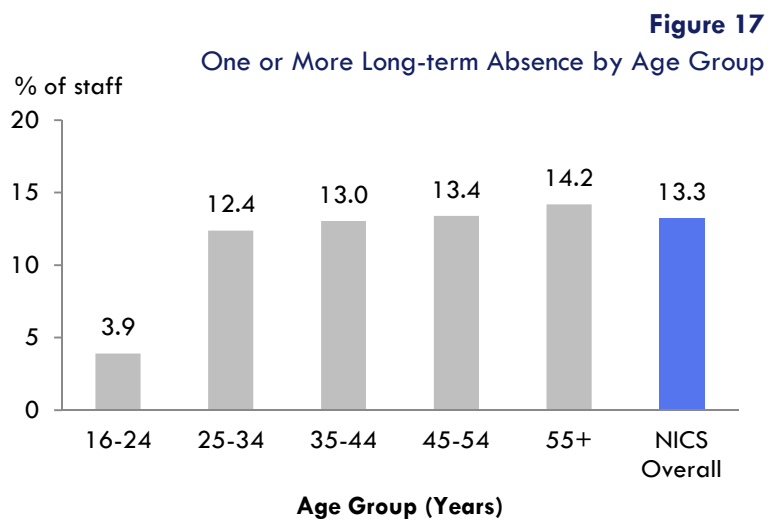


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¹ Excludes absences due to Pregnancy Related Disorders.

4.4 Age Group

Aside from a considerably lower incidence of long-term absence among staff aged 16-24 (3.9%), there was a gradual increase in the percentage of staff with a long-term absence spell as age group increased, ranging from 12.4% to 14.2%. Similarly, the average duration of the long-term absences increased with age group (see Table 8.4 in Appendix 8).



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4.5 Reason for Long-term Absence

Anxiety/Stress/Depression/Other Psychiatric Illnesses accounted for the largest proportion of long-term absences in terms of both the spells (42.7%) and the working days lost (44.8%).

The second most significant reason was *Injury, Fracture*, which accounted for 8.9% of the long-term working days lost and 10.1% of the long-term absence spells.

Table 7

Reason for Long-term Absence^{1,2} (% of Long-term Working Days Lost and Long-term Spells)

	% of Long-term Working Days Lost	% of Long-term Spells
Anxiety/Stress/Depression/Other Psychiatric Illnesses	44.8	42.7
Injury, Fracture	8.9	10.1
Back Problems	5.6	5.4
Other Musculoskeletal Problems	5.5	5.2
Heart, Cardiac and Circulatory Problems	4.5	3.6
Benign and Malignant Tumours, Cancers	4.5	2.8
Gastrointestinal Problems	4.1	4.7
Other Known Causes - Not Elsewhere Classified	4.1	4.6
Pregnancy Related Disorders	3.8	4.9
Genitourinary and Gynaecological Disorders	3.0	3.3
Chest and Respiratory Problems	2.9	3.2
Nervous System Disorders	1.3	1.2
Other	5.2	6.4
No Reason Specified	1.8	1.9
NICS Overall	100.0	100.0

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¹ The category 'Other' contains any absence with a reason that accounted for less than 1% of the long-term working days lost.

² The category 'No Reason Specified' contains any long-term absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

4.6 Long-term Frequency¹

DoJ had the highest frequency of long-term absences in 2017/2018 at 16.6%, although this was a reduction on the previous year's figure of 17.2%. TEO had the lowest frequency at 6.6%.

While six Departments reported a reduction in their long-term frequency rate - the Department for Infrastructure (DfI) experienced the greatest rise - a frequency rate increase from 12.0% to 14.1%.

Table 8

Long-term Frequency by Department (2013/2014 to 2017/2018)^{2,3}

Department	Long-term Frequency Rate (%)				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			9.9	10.5	11.2
DfC			13.8	15.2	15.8
DfE			9.1	10.5	9.5
DE			9.4	11.2	10.1
DoF			9.8	10.4	10.3
DoH			7.4	8.0	10.0
DfI			11.3	12.0	14.1
DoJ			18.1	17.2	16.6
TEO			7.5	7.7	6.6
PPS			11.5	13.6	12.3
NICS Overall	10.9	11.8	12.5	13.5	14.0

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4.7 Long-term Duration⁴

In 2017/2018, the Department for Infrastructure (DfI) had the longest average duration of long-term absence spells at 64.6 working days while the shortest average was 57.3 working days in the Department of Health (DoH). Seven Departments showed a decrease in average duration compared with 2016/2017; only DoF, TEO and PPS reported an increase.

The most notable increase was in the Department of Finance (DoF), where the average duration rose by 6.3 days to 61.6 days. Overall the long-term duration of absence spells in the NICS decreased by half a day.

Table 9

Long-term Duration by Department (2013/2014 to 2017/2018)^{2,3}

Department	Long-term Duration (working days)				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			57.2	62.4	61.2
DfC			57.0	62.0	61.4
DfE			62.5	61.2	57.4
DE			54.8	64.4	58.4
DoF			58.1	55.2	61.6
DoH			54.6	63.4	57.3
DfI			66.4	66.5	64.6
DoJ			65.7	66.3	63.3
TEO			50.4	56.0	61.6
PPS			57.9	56.4	58.6
NICS Overall	59.8	60.2	60.2	62.5	62.0

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¹ Frequency Rate is the average number of long-term spells per employee, expressed as a percentage.

² The figures shown for 2015/2016 represent a best estimate of what the figures would have been, had the new NICS structures been implemented for the entire year. No figures are available for prior years due to the impact of NICS restructuring. For more information on the restructuring, see Appendix 1 and Appendix 11.

³ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

⁴ Throughout this report, the duration of absence relates only to days lost in the specific financial year.

CHAPTER 5

Absence Insight

5. ABSENCE INSIGHT

This chapter aims to provide an insight into some of the issues behind the headline figures.

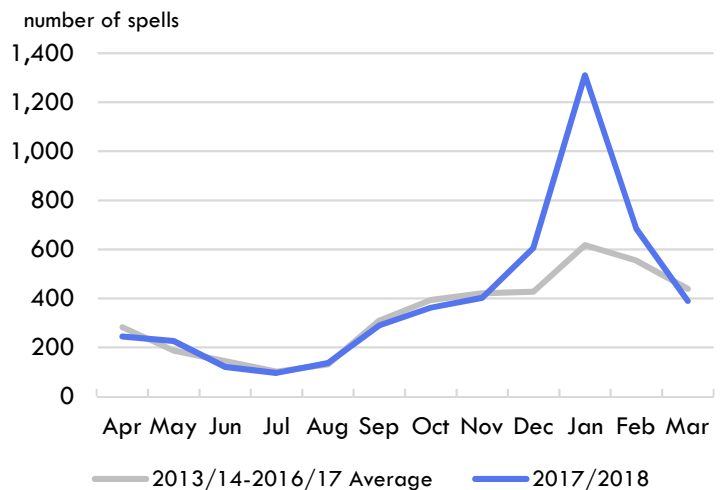
5.1 Higher Flu¹ levels

Almost one in every five staff (18.1%) had an absence due to Flu during 2017/2018, with the December 2017 to February 2018 period having a marked spike in these absences. As shown in Figure 18, the 2017/2018 Flu season resulted in more spells of absence than had been seen, on average, in the previous four years. In fact, since 2008/2009, January 2018 had by far the highest number of Flu spells (1,310), surpassing December 2008 (988) and more than doubling the average of the last four years.

If the 2017/2018 Flu season had been similar to that of the previous four years we have estimated that the overall NICS absence level would have been approximately 0.3 days lower than reported (i.e. an overall absence level of 12.7 days lost per staff year). Not unexpectedly, given how bad the Flu season was, 2017/2018 also saw a drop in the percentage of staff with no spells of sickness absence (from 49.5% to 46.6%).

Figure 18

Spells of Cold, Cough, Flu, Influenza starting in each month (2013/14-2016/17 average, and 2017/2018)



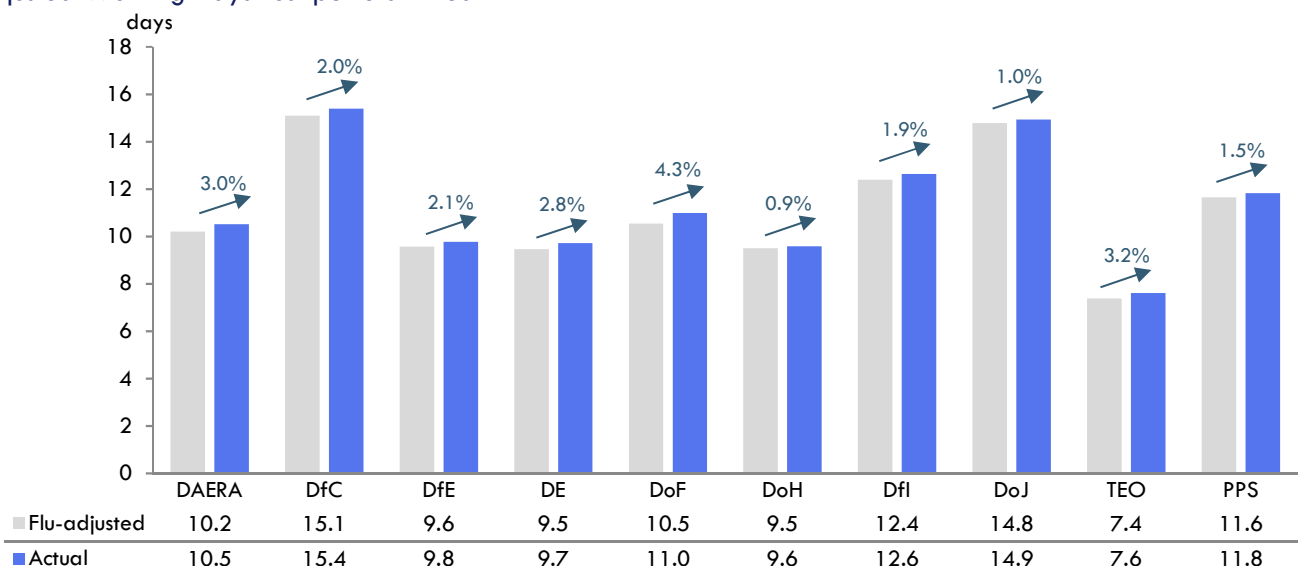
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Departmental Focus - Flu

Whilst generally affecting all genders and grade levels equally, some Departments had their absence levels impacted more than others by the Flu season. Figure 19 estimates what each Department's absence level would have been had a Flu season similar to those in the previous four years occurred. DoH and DoJ appear to have been the least affected - for DoJ this was partly due to Prison Grade staff having lower instances of Flu than other grade levels. DoF appears to have been most affected by the high levels of Flu which we estimate to have added 0.5 of day, a 4.3% increase, to its absence level.

Figure 19

Flu-adjusted Working Days Lost per Staff Year



¹ "Flu" refers to the sickness absence category Cold, Cough, Flu, Influenza.

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5.2 Mental Health¹ - More stress?

Besides the unusually high number of Flu spells, the other major driver behind the increase in the overall absence level in 2017/2018 was the continuing increase in the frequency and duration of Mental Health absences. The proportion of working days lost due to Mental Health illnesses has been rising within the NICS since 2011/2012. At that time this illness category accounted for 29.0% of all working days lost and 10.7% of absence spells. After six years of consecutive increases, in 2017/2018 it accounted for 36.4% of working days lost and 12.5% of absence spells.

As discussed in previous annual NICS sickness absence reports, the level of Mental Health absence varies across the NICS in terms of grade and gender. This continued to be the case in 2017/2018 where, overall, almost one in eleven staff (8.9%) had a spell of sickness absence due to mental health illnesses.

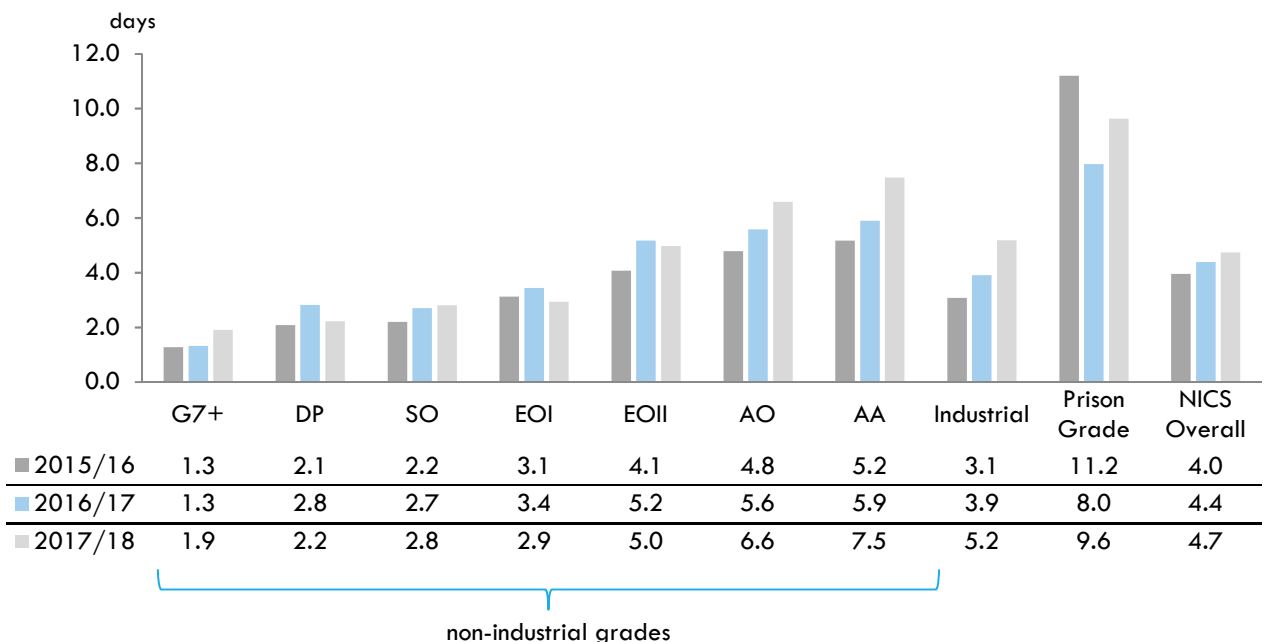
Grade Level Focus - Mental Health

Prison Grade staff have consistently had the highest levels of Mental Health absence. Over 9.6 working days were lost due to illnesses such as stress, anxiety and depression at that grade level in 2017/2018. This equated to 46.1% of all the working days lost by Prison Grade staff.

Among non-industrial grades, Mental Health absences tended to decrease as the grade level increased. In 2017/2018, for example, the highest level was reported among staff at AA level (7.5 days per staff year) and the lowest among staff at G7+ level (1.9 days per staff year).

Figure 20

Working Days Lost per Staff Year due to Mental Health Illnesses by Analogous Grade Level (2015/2016 to 2017/2018)



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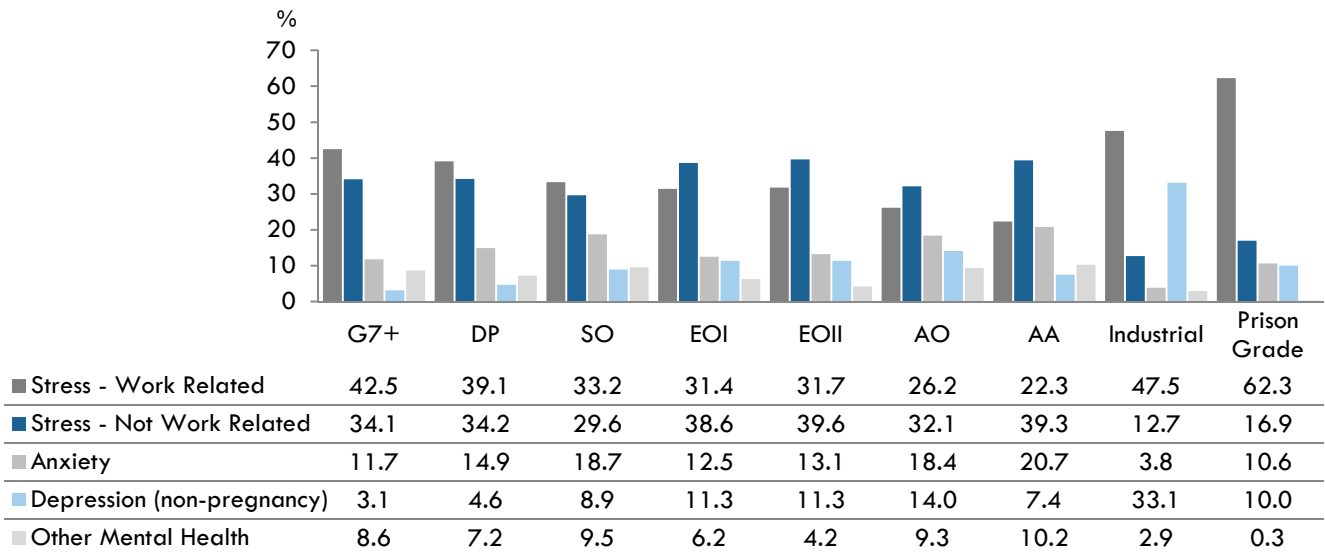
While absences recorded as being due to stress were responsible for the majority of days lost at all grade levels, the nature of this stress appeared to differ. Among the non-industrial grades, the majority of the days lost due to stress at the more senior levels were recorded as being *Work Related* but at the more junior grades (EOI and below) the majority were recorded as being *Non-Work Related* (see Figure 21).

Another notable difference was the relatively low proportion of days lost due to *Non-Work Related Stress* for Industrial staff, with *Depression (non-pregnancy related)* being their second highest cause of Mental Health illness - accounting for 33.1% of their working days lost.

¹ "Mental Health" refers to the sickness absence category Anxiety/Stress/Depression/Other Psychiatric Illnesses.

Figure 21

Proportion of Mental Health Working Days Lost by sub-Reason within Analogous Grade Level

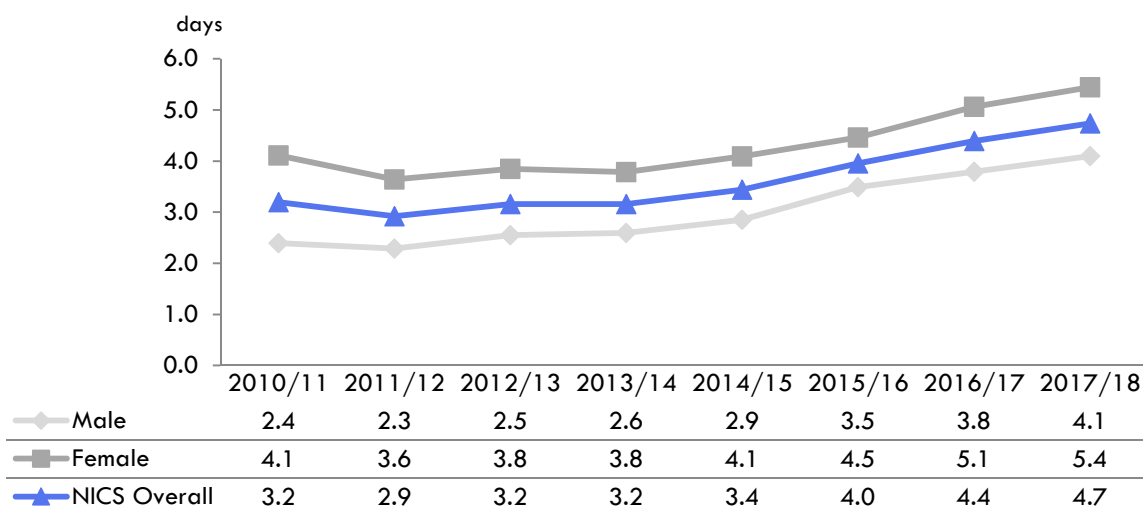
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Gender Focus - Mental Health

Since 2011/2012 the average days lost due to Mental Health illnesses has generally been increasing, to a current high of 4.7 days per staff year out of the total of 13.0 days lost in the NICS as a whole. As shown in Figure 22, this trend affected both males and females similarly, with females now losing 5.4 days and males losing 4.1 days on average to Mental Health absences.

Figure 22

Working Days Lost per Staff Year due to Mental Health Illnesses by Gender (2010/2011 to 2017/2018)

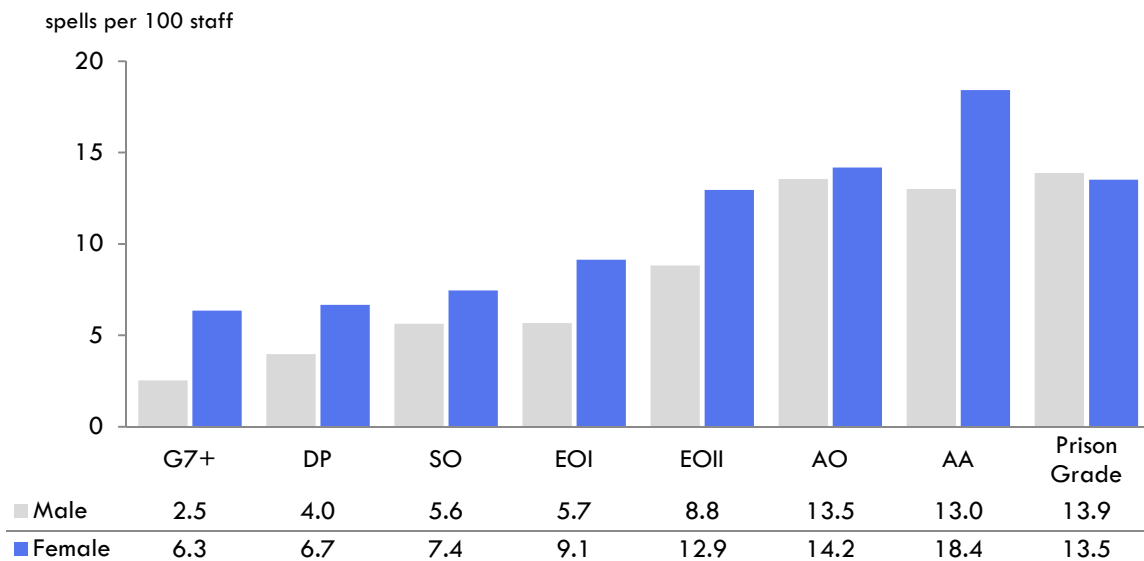
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Females also had a higher level of absence due to Mental Health illnesses than males at all grade levels, apart from Prison Grade (see Figure 23). No comparison is provided for Industrial staff due to the small number of females in that grade level.

The highest incidence of Mental Health absences for females was at the AA grade level (18.4 spells per 100 staff). For males, at 13.5 spells, it was highest at the AO grade level.

Figure 23

Incidence of Mental Health Illnesses by Gender and Grade Level

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When staff were absent due to a Mental Health illness in 2017/2018 it was males who were, on average, off for longer on each occasion (46.9 working days for each absence spell on average for males compared with 40.3 working days on average for females).

Females, however, were more likely to be absent with Mental Health absence (11.3 spells per 100 staff compared with 8.3 spells per 100 staff for males). Both of these rates have, however, increased noticeably since a similar analysis in our 2013/2014 report - 8.5 spells per 100 staff for females and 5.7 spells for males. Table 10 also shows that females are more likely than males to be absent for *Anxiety* or *non-Work Related Stress*, with males a little more likely to be absent due to *Work Related Stress*.

Table 10

Incidence of Mental Health Illnesses by sub-Reason and Gender

Sub-Reason	No. of Spells per 100 Staff	
	Male	Female
Stress - Work Related	2.8	2.4
Stress - Not Work Related	2.6	5.0
Anxiety	1.3	2.1
Depression - Not Pregnancy Related	1.1	0.9
Not Specified	0.3	0.6
Other *	0.3	0.3
Mental Health Illnesses	8.3	11.3

* The category 'Other' contains any absences due to sub-reasons not detailed elsewhere in the table.

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In summary, levels of absence due to Mental Health illnesses continue to rise within the NICS with staff at the more junior grade levels and females affected the most. *Work Related Stress* is more prevalent for males and staff in the more senior grade levels whereas *non-Work Related Stress* is more prevalent for females and staff in the more junior grade levels.

APPENDICES

Appendix 1: Data Quality

Relevance: *The degree to which the statistical product meets user needs for both coverage and content.*

This report covers sickness absences that were recorded on HRConnect (the main HR system used by the NICS) for industrial and non-industrial staff in the Northern Ireland Civil Service. The report also includes sickness absence information for staff in the Department of Justice that were not held on HRConnect, namely: the Northern Ireland Prison Service (data taken from their COMPASS system). Data prior to 2016/2017 for Youth Justice Agency staff were taken from their Simply Personnel system.

Absence information is presented by Department, grade level, gender, age group, length of service and reason for absence. Some comparisons with figures for the previous four financial years were also included.

Accuracy and Reliability: *The proximity between an estimated result and the unknown true value.*

Absences that were entered, or closed, on the HR systems retrospectively may be missed if the data were downloaded before this happened. To minimise the impact of this the data for all staff held on HRConnect and COMPASS were extracted five weeks after the end of the financial year reporting period; this allowed for the updating of absence records and personnel moves. Absence records from the Simply Personnel system were extracted on a monthly basis a week after the end of each month of the financial year.

Any information provided in this report relating to lost production is calculated, where possible, on the basis of each individual's actual salary and the associated employer's National Insurance and Superannuation contributions.

There is no means of verifying if line managers have entered absences incorrectly, or not at all. Misdiagnosis of symptoms may lead to some self-certified absences being recorded under the wrong reasons. However, Departments regularly remind line managers and staff concerning their roles and responsibilities which are also detailed in Personal Performance Agreements. HRConnect also contains guidance in this regard.

Users should note that some figures may not add to the totals due to rounding.

Timeliness and Punctuality: *Timeliness refers to the time gap between publication and the reference period. Punctuality refers to the gap between planned and actual publication dates.*

The annual datasets cover the financial year from 1st April to 31st March. The processes used in producing this report are continually being streamlined while at the same time maintaining or improving the accuracy of the data.

Report Year	Date Published	Report Year	Date Published
2017/2018	26/09/2018	2013/2014	16/10/2014
2016/2017	20/09/2017	2012/2013	30/10/2013
2015/2016	22/09/2016	2011/2012	29/11/2012
2014/2015	10/09/2015	2010/2011	02/12/2011

The reports for 2010/2011 and 2011/2012 were both delayed beyond October for reasons as detailed in their respective Data Quality sections.

Accessibility and Clarity: *Accessibility is the ease with which users are able to access the data, also reflecting the format in which the data are available and the availability of supporting information. Clarity refers to the quality and sufficiency of the metadata, illustrations and accompanying advice.*

No issues relating to accessibility or clarity were received during internal user consultations held in June and August 2018, nor in a wider customer survey in March 2018, the results of which can be found at <https://www.nisra.gov.uk/statistics/official-statistics/hrcs-customer-survey-report>. The report contains contact details for further information and is available to download through the NISRA, DoJ and gov.uk websites along with the reports from previous years. In 2013 the report was scrutinised as part of an internal NISRA peer review process, with generally very positive feedback. The data presented in the report are also available in OpenDocument Spreadsheet (ODS) format through links below each table or chart.

Appendix 1: Data Quality

Coherence and Comparability: *Coherence is the degree to which data that are derived from different sources or methods, but refer to the same topic, are similar. Comparability is the degree to which data can be compared over time and domain.*

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 it is the responsibility of line managers to record sickness absence information on 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.

In December 2016, HR information, including historic sickness absence information, relating to staff in the Youth Justice Agency was moved from their Simply Personnel system onto HRConnect (the main HR system used by the NICS). This should improve the data's comparability further, from 2016/2017 onwards. 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, Simply Personnel and COMPASS databases use 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], and various functional areas being transferred to accommodate this (see Appendix 11 for an overview of the changes).

For the comparative 2016/2017 Departmental analyses in this report, data for the period 1st April 2016 to 8th May 2016 have been recoded to best reflect the Departmental structures that came into effect on the 9th May 2016. In addition, any Departmental analyses presented for 2015/2016 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 of work being available in 2016/2017 than in 2015/2016.

HRCS became aware that certification data was being incorrectly recorded on HRConnect by a relatively small number of NICS line managers or staff. This meant that the certification data for around 2% of all sickness absence spells were mistakenly being reported as uncertified or missing. Through the use of related medical certificate data, also held on HRConnect, it has been possible for 2017/2018 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 this report.

The recording of the reason for absence uses the Sickness Absence Recording Tool (SART) - details of which can be found at <http://www.iom-world.org/sicknessabsence/index.htm>. These were developed by the Institute of Occupational Medicine (IOM) for the UK Health and Safety Executive (HSE).

Where practical, the Cabinet Office guidelines on the calculation of sickness absence are followed. The headline sickness absence figures can be compared to the GB Civil Service (<https://www.gov.uk/government/publications/civil-service-sickness-absence>). However, in-depth comparisons cannot be made as they do not publish figures beyond their 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 <https://beta.gov.scot/publications/workforce-information/>, 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 <https://gov.wales/about/civilservice/how-we-work/facts-figures/ourfinance/welsh-government-consolidated-accounts/?lang=en>. 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 at <https://hr.per.gov.ie/sick-leave/>. These are on a "per full-time equivalent" basis.

Appendix 1: Data Quality

Care should also 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.

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.

Output Quality Trade-offs: *Trade-offs are the extent to which different aspects of quality are balanced against each other.*

No trade-offs applied.

Assessment of User Needs and Perceptions: *The processes for finding out about users and uses and their views on the statistical products.*

Internal user consultations were undertaken in June and August 2018, and a wider customer survey carried out in March 2018, the results of which can be found at <https://www.nisra.gov.uk/statistics/official-statistics/hracs-customer-survey-report>. An internal peer review in 2013 also provided positive feedback on the annual publication.

Performance, Costs and Respondent Burden: *The effectiveness, efficiency and economy of the statistical product.*

There is no respondent burden since the data are held on administrative systems and extracted using an automated process. The annual operational cost (staff time) of producing the report is approximately £24,000.

Confidentiality, Transparency and Security: *The procedures and policy used to ensure sound confidentiality, security and transparent practice.*

All staff involved are trained on the protocols for protecting and maintaining the confidentiality of the data. NISRA follows the 'National Statistician's Guidance: Confidentiality of Official Statistics' in the collection and dissemination of this report. The guidance can be found at: <https://gss.civilservice.gov.uk/policy-store/national-statisticians-guidance-confidentiality-of-official-statistics/>

Data are held on a network that is only accessible to the few statisticians who need access. Printouts containing individual records or small cell sizes are locked away and shredded as soon as possible.

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.

The pre-release access list for the report is reviewed on an annual basis. The named individuals are checked to ensure that they are the correct contact and that they are available on the day before the release of the report (if they are not then they can nominate a deputy). A guidance document is also sent to those on the revised list explaining to them their obligations about data disclosure prior to the publication of the report.

Appendix 2: Calculations

Absence levels are presented in a number of ways throughout the report and are defined as follows:

$$\text{\% of Available Working Days Lost} = \frac{\text{Number of Working Days Lost}}{\text{Number of Available Working Days}} \times 100$$

$$\text{Working Days Lost per Staff Year} = \frac{\text{Number of Working Days Lost}}{\text{Number of Staff Years}}$$

$$\text{Spells per Staff Year} = \frac{\text{Number of Absence Spells}}{\text{Number of Staff Years}}$$

The "Working days lost per staff year" approach was recommended by the Cabinet Office in the review "*Managing Attendance in the Public Sector (1999)*". This approach replaced 'working days lost per person' which does not always permit valid comparisons to be made between or within organisations that differ in their proportions of part-time staff and/or their levels of staff turnover. In particular, it can misrepresent the absence rate in organisations that have a high proportion of part-time staff and/or high levels of staff turnover. For the majority of people, a staff year is approximately **220** working days, but clearly this depends on date of entry and/or date of leaving, and annual leave entitlement which varies by grade, length of service, and work pattern. For each individual a 'staff year' was therefore calculated taking all of these factors into account. The following simple example highlights the rationale for the methodology used by the Cabinet Office.

Example

There are 2 members of staff **A** and **B**.

- A.** Worked Full-time all year (hence 1 staff year), and
- B.** Worked Full-time for ½ year (hence ½ staff year)

If **A** was absent for 20 working days and **B** was absent for 10 working days, then the number of working days lost per staff year are calculated as follows:

$$\begin{aligned} \text{Total Number of working days lost} &= 30 \\ \text{Total Number of Staff Years} &= 1 + 0.5 = 1.5 \\ \text{Working Days Lost per Staff Year} &= \frac{30}{1.5} = 20 \end{aligned}$$

According to the other approach, the number of days lost per person would be:

$$\begin{aligned} \text{Total Number of working days lost} &= 30 \\ \text{Total Number of People} &= 2 \\ \text{Working Days Lost per Person} &= \frac{30}{2} = 15 \end{aligned}$$

which overlooks the fact that one of the staff was only employed for six months.

Appendix 3: Tables Relating to Chapter 1

Working Days Lost through Sickness Absence

[Download Appendix 3 data](#)

Table 3.1: Department by Grade Level¹

When assessing the variation in days lost per staff year in the table below it should be noted that the number of staff involved can be relatively small. Even a small number of long-term absences can therefore strongly influence the overall level of absence in these groupings.

Department	Working Days Lost per Staff Year								
	G7+	DP	SO	EOI	EOII	AO	AA	Industrial	Prison Grade
DAERA	5.2	9.4	9.5	9.7	10.0	15.5	20.7	12.2	n/a
DfC	4.8	6.8	10.7	10.4	14.9	18.9	23.1	8.6	n/a
DfE	6.1	8.8	8.4	9.3	13.7	11.9	11.6	n/a	n/a
DE	8.8	4.9	7.8	16.4	10.4	10.6	19.3	n/a	n/a
DoF	7.5	7.8	8.9	8.0	11.1	17.2	18.9	5.2	n/a
DoH	4.4	8.0	6.9	13.9	17.7	13.7	19.1	n/a	n/a
DfI	4.7	4.7	7.4	7.3	13.5	15.5	8.9	21.9	n/a
DoJ	5.2	8.5	8.4	11.5	10.7	12.1	17.8	8.0	20.9
TEO	6.3	4.4	5.4	11.7	8.7	16.4	3.2	n/a	n/a
PPS	8.0	10.2	9.2	12.6	12.1	15.9	10.4	n/a	n/a
NICS Overall	6.2	7.7	8.9	9.6	13.5	16.9	18.5	18.8	20.9

Table 3.2: Absence Levels by Occupational Grouping²

Occupational Groupings (with more than 200 staff)

Occupational Grouping	Working Days Lost per Staff Year				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Prison Grade	15.1	20.4	23.8	19.6	20.9
Industrial	12.1	13.7	16.2	17.0	18.8
Drawing Officer	9.4	7.0	7.8	8.3	17.4
Secretarial/Typing	8.6	10.2	12.2	13.3	16.0
General Service	10.6	11.3	11.9	13.0	13.6
Driving Examiner	9.9	11.0	11.8	11.4	12.6
Support Grade Staff	12.0	14.0	11.9	13.2	10.5
Scientific Officer	7.8	6.9	7.4	8.1	9.3
Other	7.7	6.9	7.4	9.2	8.7
Planning	8.2	8.2	6.9	4.7	7.7
Computing	6.1	5.4	5.0	6.4	7.7
Casual	3.7	5.6	4.1	2.6	7.2
Agricultural Inspector	6.0	6.5	6.6	8.7	7.2
Statistician	7.2	4.5	5.8	7.3	5.6
Civil Eng (inc assistants)	4.1	4.6	5.2	6.1	5.0

¹ n/a: No cases recorded.

² Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 3: Tables Relating to Chapter 1

Table 3.3: Certification by Department¹

Department	Working Days Lost per Staff Year			% of Available Working Days Lost		
	Self-Certified	Certified	Overall	Self-Certified	Certified	Overall
DAERA	1.0	9.4	10.5	0.5	4.3	4.8
DfC	1.9	13.1	15.4	0.9	6.0	7.0
DfE	1.5	8.2	9.8	0.7	3.8	4.5
DE	1.5	8.0	9.7	0.7	3.7	4.5
DoF	1.7	9.1	11.0	0.8	4.2	5.0
DoH	1.6	7.8	9.6	0.7	3.6	4.4
DfI	1.2	11.3	12.6	0.5	5.2	5.8
DoJ	1.1	13.5	14.9	0.5	6.2	6.9
TEO	1.3	6.3	7.6	0.6	2.9	3.5
PPS	1.6	10.2	11.8	0.7	4.7	5.4
NICS Overall	1.5	11.3	13.0	0.7	5.2	6.0

Table 3.4: Certification by Grade Level¹

Grade Level	Working Days Lost per Staff Year			% of Available Working Days Lost		
	Self-Certified	Certified	Overall	Self-Certified	Certified	Overall
G5+	0.6	2.1	2.8	0.3	1.0	1.3
G6	0.8	4.9	5.8	0.4	2.3	2.6
G7	0.9	6.0	7.0	0.4	2.8	3.2
DP	1.1	6.4	7.7	0.5	2.9	3.5
S0	1.3	7.4	8.9	0.6	3.4	4.1
EOI	1.3	8.1	9.6	0.6	3.7	4.4
EOII	1.8	11.5	13.5	0.8	5.2	6.2
AO	2.1	14.5	16.9	0.9	6.6	7.7
AA	1.6	16.7	18.5	0.7	7.6	8.5
Industrial	1.0	17.7	18.8	0.5	8.0	8.6
Prison Grade	0.9	19.4	20.9	0.4	9.0	9.6
NICS Overall	1.5	11.3	13.0	0.7	5.2	6.0

Table 3.5: Certification by Gender¹

Gender	Working Days Lost per Staff Year			% of Available Working Days Lost		
	Self-Certified	Certified	Overall	Self-Certified	Certified	Overall
Male	1.4	9.2	10.9	0.6	4.2	5.0
Female	1.6	13.5	15.4	0.7	6.2	7.1
NICS Overall	1.5	11.3	13.0	0.7	5.2	6.0

Table 3.6: Certification by Age Group¹

Age Group	Working Days Lost per Staff Year			% of Available Working Days Lost		
	Self-Certified	Certified	Overall	Self-Certified	Certified	Overall
16-24	1.3	4.9	6.6	0.6	2.1	2.9
25-34	2.1	9.8	12.3	1.0	4.5	5.6
35-44	1.8	10.8	12.9	0.8	5.0	5.9
45-54	1.3	11.0	12.5	0.6	5.1	5.7
55+	1.1	13.2	14.5	0.5	6.0	6.6
NICS Overall	1.5	11.3	13.0	0.7	5.2	6.0

¹ Certification data for 2017/2018 has been revised and is no longer directly comparable with similar analyses presented in previous publications – see page 18 and Appendix 1 for further information.

Appendix 3: Tables Relating to Chapter 1

Table 3.7: % of Available Working Days Lost by Department^{1,2}

Department	% of Available Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			4.1	4.3	4.8
DfC			6.0	6.6	7.0
DfE			4.3	4.6	4.5
DE			4.0	5.1	4.5
DoF			4.5	4.5	5.0
DoH			3.5	4.0	4.4
DfI			4.9	5.0	5.8
DoJ			7.3	6.9	6.9
TEO			3.3	3.6	3.5
PPS			5.1	5.4	5.4
NICS Overall	4.6	4.9	5.3	5.6	6.0

Table 3.8: % of Available Working Days Lost by Grade Level²

Grade Level	% of Available Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
G5+	1.6	1.7	1.2	1.8	1.3
G6	3.6	2.2	2.0	2.1	2.6
G7	2.7	2.8	2.8	2.7	3.2
DP	2.9	2.9	3.5	3.7	3.5
S0	3.5	3.6	3.5	3.9	4.1
E0I	3.9	3.9	4.6	4.9	4.4
E0II	4.3	4.7	5.0	5.7	6.2
A0	5.7	6.0	6.3	6.8	7.7
AA	5.2	6.5	7.4	8.2	8.5
Industrial	5.5	6.2	7.4	7.6	8.6
Prison Grade	7.0	9.4	11.0	8.9	9.6
NICS Overall	4.6	4.9	5.3	5.6	6.0

Table 3.9: % of Available Working Days Lost by Gender²

Gender	% of Available Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Male	3.7	4.1	4.6	4.7	5.0
Female	5.5	5.8	6.2	6.6	7.1
NICS Overall	4.6	4.9	5.3	5.6	6.0

Table 3.10: % of Available Working Days Lost by Age Group²

Age Group	% Available of Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
16-24	2.7	2.2	4.6	3.0	2.9
25-34	4.7	5.1	5.9	5.8	5.6
35-44	4.3	4.6	4.9	5.3	5.9
45-54	4.7	4.9	5.3	5.3	5.7
55+	4.7	5.3	5.5	6.4	6.6
NICS Overall	4.6	4.9	5.3	5.6	6.0

¹ The NICS Departments were restructured from 9th May 2016. All Departmental figures for 2015/2016 represent a best estimate of those year's figures, had the new NICS structure been in place. No comparable figures are available for years prior to 2015/2016. For more information on the restructuring, see Appendix 1 and Appendix 11.

² Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 4: Seasonal Effects on the Onset of Absence

[Download Appendix 4 data](#)

The following tables examine seasonal effects on the onset of sickness absence.

Table 4.1: Onset of Absence by Month¹

Month	% of Spells Starting in Month		
	Self-Certified	Certified	Overall
April	6.3	5.6	6.1
May	7.5	7.7	7.6
June	6.4	7.3	6.7
July	4.7	6.2	5.2
August	6.4	7.1	6.6
September	7.2	7.2	7.3
October	9.5	8.2	9.0
November	9.8	8.3	9.2
December	9.5	7.2	8.7
January	15.3	13.4	14.6
February	9.4	10.7	9.9
March	7.8	11.3	9.0

Table 4.2: Onset of Anxiety/Stress/Depression/Other Psychiatric Illnesses by Month

Month	% of Spells Starting in Month
April	5.1
May	7.9
June	8.5
July	6.9
August	8.0
September	7.3
October	9.7
November	9.8
December	6.4
January	9.8
February	10.1
March	10.4

Table 4.3: Onset of Absence by Weekday¹

Weekday	% of Spells Starting on Weekday		
	Self-Certified	Certified	Overall
Sunday	0.2	0.7	0.4
Monday ²	32.2	33.1	32.4
Tuesday	24.3	21.5	23.1
Wednesday	18.8	16.6	17.9
Thursday	16.0	16.7	16.5
Friday	8.1	10.3	9.0
Saturday	0.4	1.2	0.7

¹ Certification data for 2017/2018 has been revised and is no longer directly comparable with similar analyses presented in previous publications – see page 18 and Appendix 1 for further information.

² It should be noted that absences that actually started on a Saturday or Sunday, and then continued into the working week, may have been recorded as if they had started on a Monday.

Appendix 5: Standardised Departmental Absence Levels

[Download Appendix 5 data](#)

The following figures show the extent to which a Department's staffing profile can influence its overall absence level. In Figures 5.1 and 5.2 below, the staffing profile of each Department has been standardised by grade level, gender and age group to that of the NICS as a whole.

It should be noted that in reports prior to 2011/2012, DFP (DoF) was used as the staffing profile against which all other Departments were standardised. However, this is no longer a suitable staffing profile to use as there are no Prison Grade staff in DFP (DoF). A similar approach to that used by the GB Civil Service has therefore been adopted for this illustration, and the staffing profile of the NICS as a whole is being used.

Figure 5.1: Working Days Lost per Staff Year - Observed and Standardised

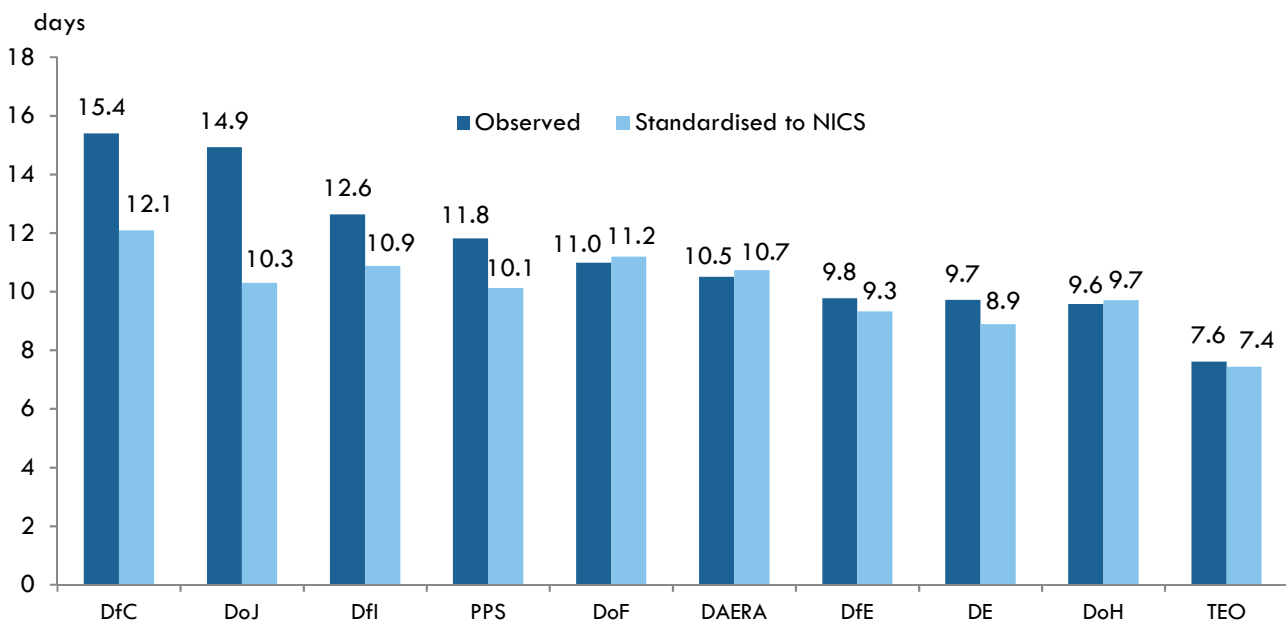
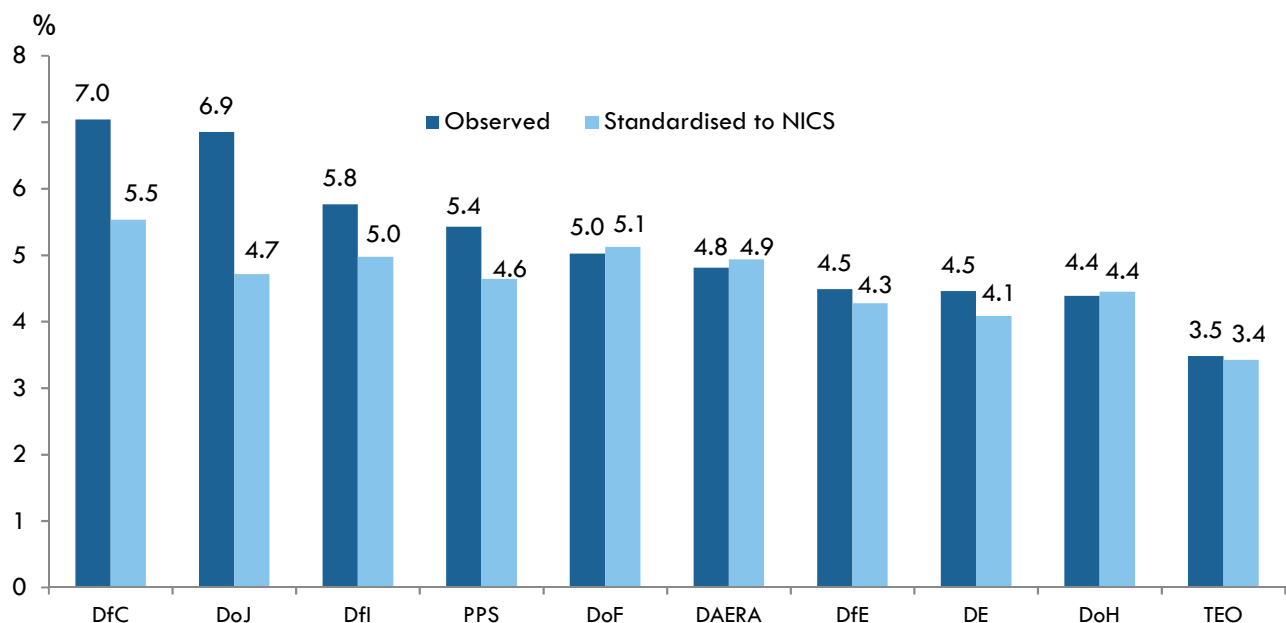


Figure 5.2: % of Available Working Days Lost - Observed and Standardised



Appendix 6: Tables Relating to Chapter 2

Spells of Sickness Absence

[Download Appendix 6 data](#)

Table 6.1: Average Duration and Number of Spells by Certification and Department¹

Department	Self-Certified Absences		Certified Absences		Overall	
	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration
DAERA	0.4	2.9	0.3	34.9	0.7	16.1
DfC	0.7	2.9	0.3	38.6	1.1	14.0
DfE	0.5	2.9	0.3	31.8	0.8	12.3
DE	0.5	2.9	0.2	36.7	0.8	12.2
DoF	0.6	2.9	0.3	33.6	0.9	12.0
DoH	0.6	2.8	0.2	35.1	0.9	10.9
DfI	0.4	3.3	0.3	39.0	0.7	18.6
DoJ	0.4	3.0	0.3	41.6	0.8	18.9
TEO	0.5	2.8	0.2	30.7	0.7	11.2
PPS	0.5	2.9	0.3	31.7	0.9	13.4
NICS Overall	0.5	3.0	0.3	37.5	0.9	14.8

Table 6.2: Average Duration and Number of Spells by Certification and Grade Level¹

Grade Level	Self-Certified Absences		Certified Absences		Overall	
	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration
G5+	0.2	2.5	0.1	20.6	0.4	7.9
G6	0.3	2.8	0.2	33.0	0.5	12.6
G7	0.3	2.7	0.2	32.0	0.6	12.6
DP	0.4	2.7	0.2	31.2	0.7	11.6
S0	0.5	2.9	0.2	33.7	0.7	12.5
EOI	0.5	2.9	0.2	32.9	0.7	12.9
EOII	0.6	2.9	0.3	36.5	1.0	13.5
A0	0.7	3.0	0.4	37.5	1.2	14.5
AA	0.6	2.8	0.4	38.8	1.1	17.3
Industrial	0.3	3.4	0.4	46.5	0.7	27.3
Prison Grade	0.2	3.9	0.4	49.1	0.8	27.3
NICS Overall	0.5	3.0	0.3	37.5	0.9	14.8

Table 6.3: Average Duration and Number of Spells by Certification and Gender¹

Gender	Self-Certified Absences		Certified Absences		Overall	
	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration
Male	0.5	3.1	0.2	39.5	0.7	14.5
Female	0.6	2.8	0.4	36.1	1.0	15.0
NICS Overall	0.5	3.0	0.3	37.5	0.9	14.8

¹Certification data for 2017/2018 has been revised and is no longer directly comparable with similar analyses presented in previous publications – see page 18 and Appendix 1 for further information.

Appendix 6: Tables Relating to Chapter 2

Table 6.4: Average Duration and Number of Spells by Certification and Age Group ¹

Age Group	Self-Certified Absences		Certified Absences		Overall	
	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration (Working Days)	No. of Spells per Staff Year	Average Duration (Working Days)
16-24	0.5	2.6	0.2	22.0	0.8	7.8
25-34	0.7	2.8	0.3	33.6	1.1	10.8
35-44	0.6	3.0	0.3	36.3	1.0	13.3
45-54	0.4	3.0	0.3	38.9	0.8	16.5
55+	0.4	2.9	0.3	39.5	0.8	18.6
NICS Overall	0.5	3.0	0.3	37.5	0.9	14.8

Table 6.5: Number of Absence Spells - % of Staff

Number of Absence Spells	% of Staff				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
0	55.3	52.1	50.0	49.5	46.6
1	30.7	32.7	33.3	33.9	35.4
2	10.3	11.4	12.4	12.2	13.4
3	2.6	2.9	3.2	3.2	3.5
4	0.6	0.5	0.6	0.7	0.7
5	0.2	0.2	0.2	0.3	0.2
6+	0.2	0.3	0.3	0.2	0.3

Table 6.6: Duration of Absence Spells - % of Spells

Duration of Absence (Working Days)	% of Spells				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
1-2	30.2	30.2	29.8	29.5	27.7
3-5	37.5	37.3	38.3	37.6	38.9
6-10	7.7	7.9	7.8	7.5	8.0
11-20	7.7	7.5	7.1	7.1	7.5
More than 20	16.9	17.1	17.1	18.2	17.9

Table 6.7: Average Duration of Short-term Absence Spells - Working Days ^{2,3}

Department	Average Duration (Working Days)				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			4.5	4.6	5.2
DfC			4.3	4.1	4.3
DfE			4.2	4.2	4.5
DE			3.9	4.2	4.3
DoF			4.1	4.3	4.4
DoH			4.0	4.1	3.8
DfI			5.1	5.2	5.3
DoJ			4.9	4.7	4.9
TEO			4.2	4.0	4.6
PPS			4.4	4.6	4.6
NICS Overall	4.5	4.5	4.4	4.4	4.6

¹ Certification data for 2017/2018 has been revised and is no longer directly comparable with similar analyses presented in previous publications – see page 18 and Appendix 1 for further information.

² The NICS Departments were restructured from 9th May 2016. All Departmental figures for 2015/2016 represent a best estimate of those year's figures, had the new NICS structure been in place. No comparable figures are available for years prior to 2015/2016. For more information on the restructuring, see Appendix 1 and Appendix 11.

³ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 6: Tables Relating to Chapter 2

Table 6.8: Distribution of Working Days Lost

Cumulative Number of Working Days Lost	% of Staff				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
0	55.3	52.1	50.0	49.5	46.6
1-5	21.7	23.2	24.0	23.7	24.6
6-10	7.1	7.8	8.1	8.3	8.9
11-15	2.5	2.7	2.9	2.8	3.4
16-20	2.0	1.9	2.0	2.0	2.1
More than 20	11.4	12.3	12.9	13.7	14.4

Table 6.9: Duration of Absence in Working Days Lost

Duration of Absence (Working Days)	% of Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
1-2	3.4	3.4	3.4	3.1	3.0
3-5	10.5	10.3	10.6	9.7	10.2
6-10	4.5	4.6	4.5	4.0	4.5
11-20	8.6	8.0	7.7	7.1	7.6
More than 20	73.0	73.6	73.8	76.1	74.7

Table 6.10: Number of Absence Spells by Department ^{1,2}

Department	% of Staff						
	0	1	2	3	4	5	6+
DAERA	56.2	32.4	9.4	1.5	0.3	0.2	n/a
DfC	40.3	37.1	16.4	4.5	0.8	0.4	0.6
DfE	51.8	34.8	10.3	2.8	0.3	n/a	n/a
DE	52.0	33.4	9.4	4.1	1.0	n/a	n/a
DoF	47.5	34.2	13.6	3.4	0.9	0.3	0.2
DoH	48.7	32.1	14.8	3.6	0.7	n/a	n/a
DfI	54.5	32.1	10.4	2.4	0.4	-	-
DoJ	51.0	34.2	10.9	2.8	0.8	0.1	0.2
TEO	58.0	31.4	6.9	2.7	0.9	n/a	n/a
PPS	47.5	36.0	12.5	2.4	0.8	-	-
NICS Overall	46.6	35.4	13.4	3.5	0.7	0.2	0.3

¹ Cells with small numbers of occurrences have been suppressed (-).² n/a: No cases recorded.

Appendix 7: Tables Relating to Chapter 3

Reason for Sickness Absence

[Download Appendix 7 data](#)

Table 7.1: Certification by Reason for Absence ^{1,2}

Reason for Absence	% of Available Working Days Lost		
	Self-Certified	Certified	Overall
Anxiety/Stress/Depression/Other Psychiatric Illnesses	0.0	2.1	2.2
Asthma	0.0	0.0	0.0
Back Problems	0.0	0.3	0.3
Benign and Malignant Tumours, Cancers	0.0	0.2	0.2
Blood Disorders	0.0	0.0	0.0
Burns, Poisoning, Frostbite, Hypothermia	0.0	0.0	0.0
Chest and Respiratory Problems	0.0	0.2	0.2
Cold, Cough, Flu, Influenza	0.3	0.1	0.4
Dental and Oral Problems	0.0	0.0	0.0
Ear, Nose, Throat	0.0	0.1	0.1
Endocrine/Glandular Problems	0.0	0.0	0.0
Eye Problems	0.0	0.0	0.1
Gastrointestinal Problems	0.1	0.2	0.4
Genitourinary and Gynaecological Disorders	0.0	0.2	0.2
Headache/Migraine	0.0	0.0	0.0
Heart, Cardiac and Circulatory Problems	0.0	0.2	0.2
Infectious Diseases	0.0	0.0	0.0
Injury, Fracture	0.0	0.5	0.5
Nervous System Disorders	0.0	0.1	0.1
Other Known Causes - Not Elsewhere Classified	0.0	0.2	0.2
Other Musculoskeletal Problems	0.0	0.3	0.3
Pregnancy Related Disorders	0.0	0.2	0.3
Skin Disorders	0.0	0.0	0.0
Substance Abuse	0.0	0.0	0.0
No Reason Specified	0.0	0.1	0.1
NICS Overall	0.7	5.2	6.0

¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² Certification data for 2017/2018 has been revised and is no longer directly comparable with similar analyses presented in previous publications – see page 18 and Appendix 1 for further information.

Appendix 7: Tables Relating to Chapter 3

Table 7.2: % of Absence Spells by Reason for Absence¹

Reason for Absence	% of Spells				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety/Stress/Depression/Other Psychiatric Illnesses	11.1	11.2	11.5	12.5	12.5
Asthma	0.4	0.3	0.4	0.3	0.3
Back Problems	5.2	5.2	5.4	5.1	4.7
Benign and Malignant Tumours, Cancers	0.9	0.9	0.8	0.9	0.9
Blood Disorders	0.4	0.4	0.3	0.3	0.4
Burns, Poisoning, Frostbite, Hypothermia	0.1	0.1	0.1	0.1	0.1
Chest and Respiratory Problems	4.9	5.3	5.3	5.2	5.5
Cold, Cough, Flu, Influenza	19.6	21.6	22.0	20.3	25.7
Dental and Oral Problems	0.8	0.7	0.7	0.8	0.7
Ear, Nose, Throat	4.7	4.8	5.1	4.6	4.1
Endocrine/Glandular Problems	0.4	0.4	0.4	0.4	0.3
Eye Problems	1.0	1.0	0.9	0.9	0.8
Gastrointestinal Problems	19.9	18.7	18.5	20.8	18.3
Genitourinary and Gynaecological Disorders	2.5	2.6	2.7	2.4	2.4
Headache/Migraine	2.9	2.5	2.9	2.6	2.5
Heart, Cardiac and Circulatory Problems	1.5	1.4	1.5	1.5	1.4
Infectious Diseases	0.5	0.6	0.6	0.5	0.6
Injury, Fracture	5.1	5.4	5.2	5.0	4.9
Nervous System Disorders	0.6	0.5	0.5	0.5	0.5
Other Known Causes - Not Elsewhere Classified	4.2	3.2	2.4	2.7	2.5
Other Musculoskeletal Problems	3.0	3.0	3.2	3.2	2.9
Pregnancy Related Disorders	7.9	7.8	7.5	7.0	5.8
Skin Disorders	0.6	0.6	0.7	0.6	0.5
Substance Abuse	0.2	0.1	0.1	0.1	0.0
No Reason Specified	1.7	1.7	1.2	1.4	1.7
NICS Overall	100.0	100.0	100.0	100.0	100.0

¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

Appendix 7: Tables Relating to Chapter 3

Table 7.3: % of Working Days Lost by Reason for Absence¹

Reason for Absence	% of Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety/Stress/Depression/Other Psychiatric Illnesses	31.3	31.9	33.9	35.2	36.4
Asthma	0.2	0.2	0.2	0.2	0.2
Back Problems	5.9	5.8	5.4	5.5	5.5
Benign and Malignant Tumours, Cancers	4.5	4.5	4.0	4.3	3.5
Blood Disorders	0.7	0.6	0.4	0.6	0.8
Burns, Poisoning, Frostbite, Hypothermia	0.1	0.1	0.0	0.1	0.0
Chest and Respiratory Problems	2.6	3.4	3.7	3.5	4.0
Cold, Cough, Flu, Influenza	4.9	5.4	5.8	5.1	7.1
Dental and Oral Problems	0.2	0.2	0.2	0.3	0.2
Ear, Nose, Throat	2.4	2.1	2.6	2.2	1.7
Endocrine/Glandular Problems	0.7	0.6	0.6	0.6	0.4
Eye Problems	1.1	0.8	0.8	1.0	0.9
Gastrointestinal Problems	7.3	6.4	7.0	7.1	6.7
Genitourinary and Gynaecological Disorders	3.0	2.9	2.7	2.7	2.9
Headache/Migraine	0.9	0.8	0.9	0.7	0.7
Heart, Cardiac and Circulatory Problems	3.6	3.8	4.2	4.2	3.7
Infectious Diseases	0.4	0.5	0.4	0.4	0.5
Injury, Fracture	9.1	9.8	9.5	8.7	8.1
Nervous System Disorders	1.4	1.2	1.0	0.9	1.1
Other Known Causes - Not Elsewhere Classified	5.3	5.1	3.5	3.7	3.8
Other Musculoskeletal Problems	5.0	5.0	4.7	5.5	4.9
Pregnancy Related Disorders	7.3	6.6	6.2	5.3	4.5
Skin Disorders	0.5	0.5	0.6	0.6	0.4
Substance Abuse	0.3	0.2	0.3	0.2	0.1
No Reason Specified	1.3	1.5	1.2	1.2	1.8
NICS Overall	100.0	100.0	100.0	100.0	100.0

¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

Appendix 7: Tables Relating to Chapter 3

Table 7.4: Breakdown of Anxiety/Stress/Depression/Other Psychiatric Illnesses

Sub-reason for Absence	% of ASD ³ Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety	14.6	14.1	16.1	14.1	15.2
Depression - Not Pregnancy Related	15.6	13.5	16.9	13.8	12.1
Stress - Not Work Related	29.3	28.9	28.0	30.7	31.8
Stress - Work Related	30.8	35.3	32.2	33.3	34.2
Other ¹	3.8	3.0	2.4	2.4	2.5
No Reason Specified ²	5.8	5.2	4.5	5.6	4.3
Anxiety/Stress/Depression/Other Psychiatric Illnesses	100.0	100.0	100.0	100.0	100.0

Table 7.5: Breakdown of Anxiety/Stress/Depression/Other Psychiatric Illnesses

Sub-reason for Absence	% of ASD ³ Spells				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety	15.2	16.2	17.1	16.5	17.1
Depression - Not Pregnancy Related	12.8	11.5	13.2	11.7	10.1
Stress - Not Work Related	34.5	34.9	36.1	36.4	38.8
Stress - Work Related	26.3	27.6	25.3	26.1	26.0
Other ¹	4.9	3.7	3.0	3.0	3.0
No Reason Specified ²	6.2	6.1	5.3	6.3	5.0
Anxiety/Stress/Depression/Other Psychiatric Illnesses	100.0	100.0	100.0	100.0	100.0

¹ The category 'Other' contains any absence with a sub-reason that is not shown elsewhere in the analysis.

² The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

³ ASD - Anxiety/Stress/Depression/Other Psychiatric Illnesses.

Appendix 7: Tables Relating to Chapter 3

Table 7.6: Average Duration by Reason for Absence^{1,2}

Reason for Absence	Average Duration (Working Days)				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety/Stress/Depression/Other Psychiatric Illnesses	39.1	39.9	41.0	42.3	43.1
Asthma	6.5	9.2	6.1	7.8	9.5
Back Problems	15.7	15.5	13.9	16.4	17.3
Benign and Malignant Tumours, Cancers	66.6	67.3	68.9	72.0	58.7
Blood Disorders	22.5	21.8	18.3	26.5	31.6
Burns, Poisoning, Frostbite, Hypothermia	6.6	9.1	7.8	9.2	8.2
Chest and Respiratory Problems	7.5	8.9	9.6	10.1	10.8
Cold, Cough, Flu, Influenza	3.5	3.5	3.7	3.7	4.1
Dental and Oral Problems	4.4	4.9	4.5	4.8	4.4
Ear, Nose, Throat	6.9	6.2	7.2	7.0	6.2
Endocrine/Glandular Problems	25.1	19.9	20.5	21.2	21.2
Eye Problems	14.0	11.3	12.6	15.9	16.7
Gastrointestinal Problems	5.1	4.8	5.3	5.1	5.4
Genitourinary and Gynaecological Disorders	16.6	15.8	14.1	17.0	17.8
Headache/Migraine	4.4	4.4	4.5	4.2	4.2
Heart, Cardiac and Circulatory Problems	34.0	36.9	39.5	41.2	38.4
Infectious Diseases	11.2	12.2	9.4	11.1	12.6
Injury, Fracture	24.8	25.6	25.7	26.1	24.2
Nervous System Disorders	33.7	32.2	29.7	30.3	32.5
Other Known Causes - Not Elsewhere Classified	17.3	22.5	20.7	20.8	22.4
Other Musculoskeletal Problems	23.3	23.3	20.4	25.8	25.1
Pregnancy Related Disorders	12.8	11.9	11.5	11.4	11.5
Skin Disorders	9.9	10.6	12.9	13.9	12.5
Substance Abuse	27.8	26.2	46.9	28.1	21.5
No Reason Specified	10.7	12.8	13.3	12.6	16.0

¹ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

² The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

Appendix 8: Tables Relating to Chapter 4

Long-term Sickness Absence

[Download Appendix 8 data](#)

Table 8.1: Long-term Absence by Department

Department	No. of Spells per 100 Staff Years	Average Duration (Working Days)	Long-term Absence
			% of Working Days Lost due to Long-term Absence
DAERA	12.7	61.2	73.9
DfC	18.7	61.4	74.6
DfE	11.7	57.4	68.7
DE	11.7	58.4	70.2
DoF	12.2	61.6	68.1
DoH	11.6	57.3	69.6
DfI	15.2	64.6	77.8
DoJ	19.0	63.3	80.5
TEO	7.9	61.6	63.9
PPS	14.3	58.6	71.1
NICS Overall	15.7	62.0	74.7

Table 8.2: Long-term Absence by Grade Level

Grade Level	No. of Spells per 100 Staff Years	Average Duration (Working Days)	Long-term Absence
			% of Working Days Lost due to Long-term Absence
G5+	4.3	35.0	54.0
G6	6.4	59.9	66.4
G7	8.5	57.1	69.3
DP	8.7	59.6	67.5
S0	10.5	58.6	69.2
EOI	10.9	61.1	69.1
EOII	16.9	58.7	73.4
AO	20.7	60.8	74.5
AA	22.5	64.8	78.7
Industrial	20.3	77.4	83.7
Prison Grade	27.3	66.5	86.9
NICS Overall	15.7	62.0	74.7

Appendix 8: Tables Relating to Chapter 4

Table 8.3: Long-term Absence by Gender

Gender	No. of Spells per 100 Staff Years	Average Duration (Working Days)	Long-term Absence
			% of Working Days Lost due to Long-term Absence
Male	12.3	65.4	73.8
Female	19.5	59.5	75.4
NICS Overall	15.7	62.0	74.7

Table 8.4: Long-term Absence by Age Group

Age Group	No. of Spells per 100 Staff Years	Average Duration (Working Days)	Long-term Absence
			% of Working Days Lost due to Long-term Absence
16-24	6.9	50.1	52.5
25-34	15.4	54.0	67.6
35-44	15.5	59.7	72.3
45-54	15.2	63.4	76.9
55+	17.0	67.3	78.6
NICS Overall	15.7	62.0	74.7

Appendix 8: Tables Relating to Chapter 4

Table 8.5: Long-term Absence by Grade Level¹

Grade Level	% of Working Days Lost due to Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
G5+	79.3	73.8	51.6	69.9	54.0
G6	87.3	63.6	62.4	68.2	66.4
G7	76.5	71.1	71.2	73.1	69.3
DP	69.9	68.5	72.1	74.3	67.5
S0	72.5	71.0	68.4	71.7	69.2
E0I	71.5	71.3	73.1	77.2	69.1
E0II	70.1	70.4	69.9	73.1	73.4
A0	71.2	71.5	70.7	74.1	74.5
AA	67.6	73.9	71.8	77.8	78.7
Industrial	81.2	81.6	84.8	85.1	83.7
Prison Grade	84.8	87.6	89.0	86.1	86.9
NICS Overall	73.0	73.6	73.8	76.1	74.7

Table 8.6: Long-term Absence by Gender¹

Gender	% of Working Days Lost due to Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Male	72.5	73.8	74.7	76.1	73.8
Female	73.3	73.4	73.0	76.0	75.4
NICS Overall	73.0	73.6	73.8	76.1	74.7

Table 8.7: Long-term Absence by Age Group¹

Age Group	% of Working Days Lost due to Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
16 - 24	43.0	54.2	70.1	59.2	52.5
25 - 34	64.4	65.7	66.9	68.4	67.6
35 - 44	71.0	69.9	69.6	73.0	72.3
45 - 54	77.6	77.9	77.9	78.7	76.9
55+	78.9	79.3	78.7	81.7	78.6
NICS Overall	73.0	73.6	73.8	76.1	74.7

¹ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 8: Tables Relating to Chapter 4

Table 8.8: Long-term Absence by Reason for Absence^{1,2,3}

Reason for Absence	% of Long-term Working Days Lost				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Anxiety/Stress/Depression/Other Psychiatric Illnesses	38.4	39.1	41.8	42.5	44.8
Asthma	-	0.1	-	0.1	0.2
Back Problems	6.0	5.7	5.0	5.4	5.6
Benign and Malignant Tumours, Cancers	5.9	5.8	5.2	5.5	4.5
Blood Disorders	0.7	0.7	0.4	0.7	0.9
Burns, Poisoning, Frostbite, Hypothermia	-	0.1	-	0.1	-
Chest and Respiratory Problems	1.3	2.0	2.5	2.4	2.9
Cold, Cough, Flu, Influenza	0.3	0.4	0.7	0.8	0.9
Dental and Oral Problems	0.1	0.1	-	0.1	0.1
Ear, Nose, Throat	1.3	1.0	1.6	1.2	0.7
Endocrine/Glandular Problems	0.8	0.7	0.6	0.6	0.4
Eye Problems	1.0	0.7	0.7	1.0	0.9
Gastrointestinal Problems	4.5	3.6	4.4	4.1	4.1
Genitourinary and Gynaecological Disorders	3.0	2.9	2.6	2.8	3.0
Headache/Migraine	0.5	0.4	0.6	0.5	0.4
Heart, Cardiac and Circulatory Problems	4.4	4.7	5.2	5.1	4.5
Infectious Diseases	0.3	0.4	0.2	0.3	0.3
Injury, Fracture	10.3	11.1	10.8	9.5	8.9
Nervous System Disorders	1.7	1.5	1.2	1.1	1.3
Other Known Causes - Not Elsewhere Classified	5.3	5.5	3.7	3.8	4.1
Other Musculoskeletal Problems	5.7	5.6	5.0	6.1	5.5
Pregnancy Related Disorders	6.6	5.8	5.6	4.5	3.8
Skin Disorders	0.3	0.4	0.5	0.5	0.3
Substance Abuse	0.3	0.3	0.4	0.3	-
No Reason Specified	1.1	1.4	1.1	1.1	1.8
NICS Overall	100.0	100.0	100.0	100.0	100.0

¹ The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

² Cells with small numbers of occurrences have been suppressed (-).

³ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 8: Tables Relating to Chapter 4

Table 8.9: % of Staff with one or more Long-term Absence by Department^{1,2}

Department	% of Staff with 1 or more Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			9.6	10.2	10.8
DfC			13.1	14.3	14.9
DfE			8.7	9.9	9.4
DE			9.1	10.7	10.1
DoF			9.2	10.0	9.8
DoH			7.4	8.0	9.6
DfI			10.9	11.5	13.3
DoJ			17.0	16.3	15.6
TEO			7.5	7.4	6.6
PPS			10.7	12.4	11.5
NICS Overall	10.4	11.2	11.9	12.8	13.3

Table 8.10: % of Staff with one or more Long-term Absence by Grade Level²

Grade Level	% of Staff with 1 or more Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
G5+	3.5	3.3	2.5	3.7	3.8
G6	6.6	4.9	3.3	4.1	5.2
G7	5.1	5.8	5.3	5.1	6.6
DP	5.8	6.1	6.7	6.9	6.6
S0	6.5	7.1	7.2	7.9	7.9
E0I	7.6	8.0	9.0	10.4	7.9
E0II	8.8	9.5	9.9	11.0	11.7
A0	12.0	12.9	13.5	14.4	15.4
AA	9.4	13.4	14.8	16.6	15.6
Industrial	11.7	12.8	15.2	17.0	18.0
Prison Grade	19.1	23.5	28.2	22.9	23.5
NICS Overall	10.4	11.2	11.9	12.8	13.3

¹ The NICS Departments were restructured from 9th May 2016. All Departmental figures for 2015/2016 represent a best estimate of those year's figures, had the new NICS structure been in place. No comparable figures are available for years prior to 2015/2016. For more information on the restructuring, see Appendix 1 and Appendix 11.

² Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

Appendix 8: Tables Relating to Chapter 4

Table 8.11: % of Staff with one or more Long-term Absence by Gender¹

Gender	% of Staff with 1 or more Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
Male	8.6	9.2	10.1	10.8	11.0
Female	12.3	13.2	13.7	14.8	15.5
Female Adjusted*	10.7	11.6	12.0	13.4	14.2
NICS Overall	10.4	11.2	11.9	12.8	13.3

Table 8.12: % of Staff with one or more Long-term Absence by Age Group¹

Age Group	% of Staff with 1 or more Long-term Absence				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
16-24	4.2	4.4	7.7	4.5	3.9
25-34	9.9	11.2	13.0	12.9	12.4
35-44	10.0	10.8	11.4	12.5	13.0
45-54	11.6	11.4	12.2	12.8	13.4
55+	10.2	11.7	11.3	13.4	14.2
NICS Overall	10.4	11.2	11.9	12.8	13.3

¹ Green text denotes a reduction from the previous financial year.

Red text denotes an increase from the previous financial year.

* Excludes absences due to *Pregnancy Related Disorders*.

Appendix 9: Contribution to overall Working Days Lost

[Download Appendix 9 data](#)

The tables presented in this Appendix show the main components of absence (Department, grade level, gender, age group, reason and duration) and how these components have contributed to the overall level of absence in the NICS. It also shows how the contribution of these components has changed when compared with the previous year. This analysis takes account of the absence level of each component and also its size in relation to the NICS. For example, a high absence level for a large group of staff, such as the AO grade level, makes for a larger contribution to the overall NICS absence level than a small group of staff with a higher absence level, such as Prison Grade staff.

Table 9.1: Contribution of each Department to the overall Working Days Lost per Staff Year ¹

Department	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
DAERA	1.22	1.32	0.10
DfC	4.91	5.02	0.12
DfE	0.46	0.43	-0.03
DE	0.27	0.23	-0.04
DoF	1.30	1.60	0.30
DoH	0.16	0.17	0.01
DfI	1.56	1.75	0.19
DoJ	2.19	2.10	-0.09
TEO	0.10	0.10	0.00
PPS	0.24	0.24	0.00
NICS Overall	12.5	13.0	0.56

Table 9.2: Contribution of each Grade Level to the overall Working Days Lost per Staff Year ¹

Grade Level	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
G5+	0.04	0.03	-0.01
G6	0.06	0.08	0.02
G7	0.29	0.35	0.07
DP	0.78	0.76	-0.02
S0	1.07	1.12	0.06
E0I	1.41	1.25	-0.16
E0II	2.14	2.34	0.21
AO	4.09	4.44	0.35
AA	0.77	0.70	-0.06
Industrials	0.65	0.71	0.06
Prison Grade	1.15	1.23	0.08
NICS Overall	12.5	13.0	0.56

¹ The Change figures in this table are calculated from unrounded figures.

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Table 9.3: Contribution of each Gender to the overall Working Days Lost per Staff Year¹

Gender	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
Male	5.50	5.73	0.23
Female	6.95	7.29	0.33
NICS Overall	12.5	13.0	0.56

Table 9.4: Contribution of each Age Group to the overall Working Days Lost per Staff Year¹

Age Group	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
16-24	0.02	0.02	0.00
25-34	2.09	1.76	-0.32
35-44	3.37	3.71	0.34
45-54	4.14	4.30	0.16
55+	2.83	3.22	0.39
NICS Overall	12.5	13.0	0.56

Table 9.5: Contribution of each Reason to the overall Working Days Lost per Staff Year^{1,2}

Reason for Absence	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
Anxiety/Stress/Depression/Other Psychiatric Illnesses	4.39	4.73	0.35
Asthma	0.02	0.02	0.00
Back Problems	0.69	0.72	0.03
Benign and Malignant Tumours, Cancers	0.54	0.46	-0.08
Blood Disorders	0.08	0.10	0.02
Burns, Poisoning, Frostbite, Hypothermia	0.01	0.01	0.00
Chest and Respiratory Problems	0.44	0.52	0.08
Cold, Cough, Flu, Influenza	0.63	0.93	0.30
Dental and Oral Problems	0.03	0.03	-0.01
Ear, Nose, Throat	0.27	0.22	-0.05
Endocrine/Glandular Problems	0.07	0.05	-0.02
Eye Problems	0.12	0.12	-0.01
Gastrointestinal Problems	0.89	0.87	-0.01
Genitourinary and Gynaecological Disorders	0.34	0.37	0.03
Headache/Migraine	0.09	0.09	0.00
Heart, Cardiac and Circulatory Problems	0.53	0.49	-0.04
Infectious Diseases	0.05	0.06	0.01
Injury, Fracture	1.09	1.05	-0.04
Nervous System Disorders	0.12	0.14	0.03
Other Known Causes - Not Elsewhere Classified	0.47	0.50	0.03
Other Musculoskeletal Problems	0.68	0.64	-0.04
Pregnancy Related Disorders	0.66	0.58	-0.08
Skin Disorders	0.07	0.06	-0.02
Substance Abuse	0.03	0.01	-0.02
No Reason Specified	0.15	0.24	0.09
NICS Overall	12.5	13.0	0.56

¹ The Change figures in this table are calculated from unrounded figures.

² The category 'No Reason Specified' contains any absence for which the reason was 'Not Specified', 'Awaiting Reason' or missing.

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Table 9.6: Contribution of each Grade Level, within Department, to the overall Working Days Lost per Staff Year^{1,2}

Department	Grade Level	Working Days Lost per Staff Year			Department	Grade Level	Working Days Lost per Staff Year		
		2016/2017	2017/2018	Change			2016/2017	2017/2018	Change
DAERA	G7+	0.08	0.07	-0.01	DoH	G7+	0.01	0.02	0.00
	DP	0.13	0.15	0.01		DP	0.03	0.03	0.00
	SO	0.22	0.26	0.04		SO	0.04	0.03	-0.01
	EOI	0.24	0.22	-0.01		EOI	0.01	0.02	0.01
	EOII	0.14	0.16	0.01		EOII	0.04	0.04	0.00
	AO	0.19	0.24	0.05		AO	0.02	0.02	0.00
	AA	0.11	0.11	0.01		AA	0.02	0.01	0.00
	Industrial	0.11	0.10	-0.01		Industrial	n/a	n/a	n/a
	Prison Grade	n/a	n/a	n/a		Prison Grade	n/a	n/a	n/a
	DAERA Overall	1.22	1.32	0.10	DoH Overall	0.16	0.17	0.01	
DfC	G7+	0.04	0.04	0.00	DfI	G7+	0.03	0.03	0.00
	DP	0.11	0.10	-0.01		DP	0.08	0.06	-0.02
	SO	0.24	0.27	0.03		SO	0.11	0.13	0.01
	EOI	0.40	0.33	-0.07		EOI	0.19	0.16	-0.03
	EOII	1.37	1.54	0.17		EOII	0.09	0.14	0.05
	AO	2.35	2.43	0.08		AO	0.49	0.62	0.13
	AA	0.38	0.31	-0.07		AA	0.05	0.03	-0.01
	Industrial	0.01	0.01	0.00		Industrial	0.52	0.58	0.06
	Prison Grade	n/a	n/a	n/a		Prison Grade	n/a	n/a	n/a
	DfC Overall	4.91	5.02	0.12	DfI Overall	1.56	1.75	0.19	
DfE	G7+	0.03	0.03	0.00	DoJ	G7+	0.04	0.03	-0.01
	DP	0.05	0.07	0.02		DP	0.09	0.08	-0.01
	SO	0.08	0.06	-0.02		SO	0.12	0.09	-0.03
	EOI	0.12	0.09	-0.04		EOI	0.24	0.20	-0.04
	EOII	0.08	0.08	0.01		EOII	0.13	0.10	-0.04
	AO	0.08	0.08	0.00		AO	0.33	0.29	-0.03
	AA	0.03	0.02	-0.01		AA	0.08	0.07	-0.02
	Industrial	n/a	n/a	n/a		Industrial	0.01	0.01	0.00
	Prison Grade	n/a	n/a	n/a		Prison Grade	1.15	1.23	0.08
	DfE Overall	0.46	0.43	-0.03	DoJ Overall	2.19	2.10	-0.09	
DE	G7+	0.03	0.05	0.02	TEO	G7+	0.03	0.02	-0.01
	DP	0.04	0.02	-0.02		DP	0.02	0.01	-0.01
	SO	0.03	0.03	-0.01		SO	0.02	0.01	-0.01
	EOI	0.03	0.03	0.00		EOI	0.01	0.01	0.00
	EOII	0.06	0.04	-0.02		EOII	0.01	0.01	0.00
	AO	0.07	0.05	-0.02		AO	0.01	0.03	0.02
	AA	0.02	0.02	0.00		AA	0.00	0.00	0.00
	Industrial	n/a	n/a	n/a		Industrial	n/a	n/a	n/a
	Prison Grade	n/a	n/a	n/a		Prison Grade	n/a	n/a	n/a
	DE Overall	0.27	0.23	-0.04	TEO Overall	0.10	0.10	0.00	
DoF	G7+	0.08	0.13	0.05	PPS	G7+	0.02	0.03	0.00
	DP	0.16	0.19	0.03		DP	0.04	0.04	0.00
	SO	0.19	0.23	0.05		SO	0.01	0.01	0.00
	EOI	0.16	0.16	0.00		EOI	0.01	0.02	0.01
	EOII	0.19	0.20	0.02		EOII	0.03	0.03	0.00
	AO	0.47	0.58	0.11		AO	0.09	0.09	0.00
	AA	0.06	0.10	0.04		AA	0.03	0.03	0.00
	Industrial	0.00	0.00	0.00		Industrial	n/a	n/a	n/a
	Prison Grade	n/a	n/a	n/a		Prison Grade	n/a	n/a	n/a
	DoF Overall	1.30	1.60	0.30	PPS Overall	0.24	0.24	0.00	
					NICS Overall	12.5	13.0	0.56	

¹ The Change figures in this table are calculated from unrounded figures.² n/a: No cases recorded.

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Table 9.7: Contribution of Long-term and Short-term absence to the overall Working Days Lost per Staff Year ¹

Duration	Working Days Lost per Staff Year		
	2016/2017	2017/2018	Change
Short-term absence	2.98	3.29	0.31
Long-term absence	9.47	9.72	0.25
NICS Overall	12.5	13.0	0.56

¹ The Change figures in this table are calculated from unrounded figures.

Appendix 10: Departmental Analysis: Industrial, Non-Industrial and Prison Grade

[Download Appendix 10 data](#)

Table 10.1: Departmental Analysis^{1,2}

Department	Working Days Lost per Staff Year				
	2013/2014	2014/2015	2015/2016	2016/2017	2017/2018
DAERA			8.9	9.6	10.5
DAERA Industrial			15.4	12.6	12.2
DAERA Non-Industrial			8.4	9.4	10.4
DfC			13.0	14.7	15.4
DfC Industrial			8.1	7.7	8.6
DfC Non-Industrial			13.1	14.7	15.4
DfE			9.4	10.3	9.8
DE			8.7	11.4	9.7
DoF			9.8	10.0	11.0
DoF Industrial			1.9	5.6	5.2
DoF Non-Industrial			9.8	10.0	11.0
DoH			7.8	9.0	9.6
DfI			10.8	11.0	12.6
DfI Industrial			17.2	19.3	21.9
DfI Non-Industrial			9.2	9.1	10.4
DoJ			15.9	15.3	14.9
DoJ Industrial			12.0	9.8	8.0
DoJ Non-Industrial			10.6	12.3	10.6
DoJ Prison Grade			23.8	19.6	20.9
TEO			7.1	7.9	7.6
PPS			11.1	12.1	11.8
NICS Overall	10.1	10.8	11.7	12.5	13.0
Industrial Overall	12.1	13.7	16.2	17.0	18.8
Non-Industrial Overall	9.7	10.1	10.7	11.8	12.3
Prison Grade Overall	15.1	20.4	23.8	19.6	20.9

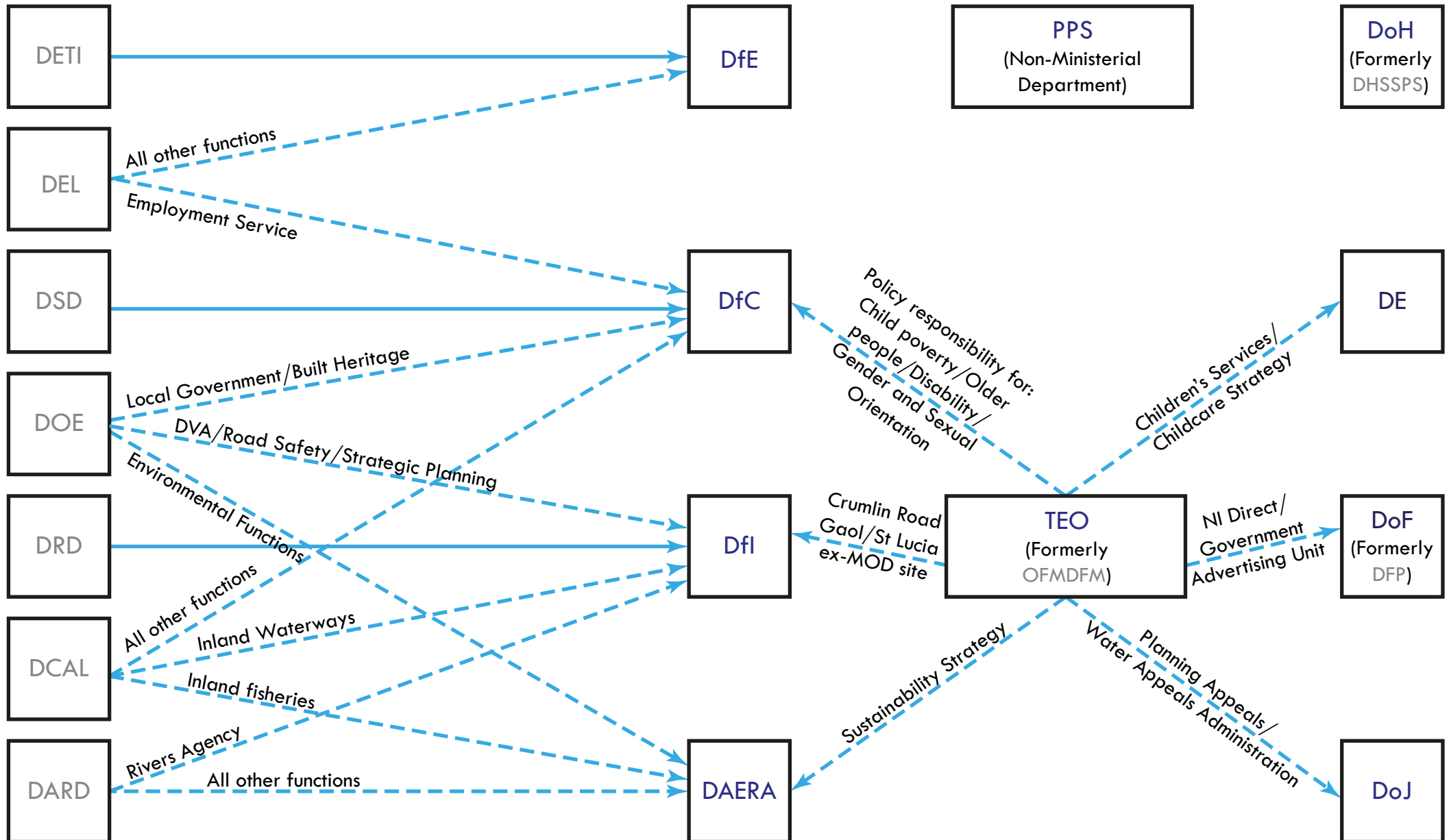
¹ The NICS Departments were restructured from 9th May 2016. All Departmental figures for 2015/2016 represent a best estimate of those year's figures, had the new NICS structure been in place. No comparable figures are available for years prior to 2015/2016. For more information on the restructuring, see Appendix 1 and Appendix 11.

² Staff in HSENI and OAGNI are included in the NICS Overall figures only.

Appendix 11: Overview of NICS Departmental Restructuring

On the 9th May 2016 new NICS Departmental structures came into effect. The chart below maps the changes in Departmental names that occurred at this time, as well as the reorganisation of the main functional areas.

NICS Departments following restructuring on 9th May 2016



Note: Explanation of the abbreviations used in this chart can be found in Appendix 12

Appendix 12: List of Abbreviations

AA	Administrative Assistant
AO	Administrative Officer
CBI	Confederation of British Industry
CIPD	Chartered Institute of Personnel and Development
DAERA	Department of Agriculture, Environment and Rural Affairs
DARD	Department of Agriculture and Rural Development
DCAL	Department of Culture, Arts and Leisure
DE	Department of Education
DEL	Department for Employment and Learning
DETI	Department of Enterprise, Trade and Investment
DfC	Department for Communities
DfE	Department for the Economy
Dfi	Department for Infrastructure
DFP	Department of Finance and Personnel
DHSSPS	Department of Health, Social Services and Public Safety
DOE	Department of the Environment
DoF	Department of Finance
DoH	Department of Health
DoJ	Department of Justice
DP	Deputy Principal
DRD	Department for Regional Development
DSD	Department for Social Development
DVA	Driver and Vehicle Agency
EOI	Executive Officer I
EOII	Executive Officer II
G5+	Grade 5 and above
G6	Grade 6
G7	Grade 7
G7+	Grade 7 and above
GB	Great Britain
HR	Human Resources
HSENI	Health and Safety Executive for Northern Ireland
MOD	Ministry of Defence
NI	Northern Ireland
NICS	Northern Ireland Civil Service
NICTS	Northern Ireland Courts and Tribunals Service
NIPS	Northern Ireland Prison Service
NISRA	Northern Ireland Statistics and Research Agency
OAGNI	Office of the Attorney General Northern Ireland
ODS	OpenDocument Spreadsheet
OFMDFM	Office of the First Minister and Deputy First Minister
PPS	Public Prosecution Service
SO	Staff Officer
TEO	The Executive Office
YJA	Youth Justice Agency