APSE Briefing 20-97   **December 2020**
COVID-19 and workforce resilience: Results and analysis of the APSE Survey

Introduction

During the course of the on-going health pandemic, a number of APSE member councils expressed concerns about the impact of the pandemic, on the resilience of the local government workforce, including well-being issues, both in terms of managers facing new challenges and increased demands, alongside the overall workforce, including frontline staff and 'back-office' unseen roles, as well the impact on managerial and political leadership teams.

As a result of these concerns APSE conducted a short survey during late November / early December and a total of **312** responses were received. Respondents included Chief Executives, (**6.5%**) Head of Service / Senior Managers, (**30.3%**) Managers (**38.2%)** Supervisors / Frontline Workforce members (**19%**) and Council Leaders / Cabinet Members / Local Councillors (**6%**). This means many of the results should be assessed against the respondent demographics, with higher representation amongst managerial / traditional 'white collar' roles, though there is sufficient data to consider the traditional 'blue collar' impact some questions, such as 'home working' will not reflect the differences in 'blue collar' work, where the majority of the roles of these workers could not be carried out at home. In many of the questions, asked of managers, information was sought about the impact on the wider workforce. Given APSE's services to those groups in local authorities, managing or providing frontline services, it is important to note that many of the respondents were able to reflect issues, both from personal experience, and experience of managing the frontline workforce, and services, during the pandemic. Respondents were distributed proportionately across the UK, including the areas of APSE Scotland, APSE Wales, APSE Northern Ireland, APSE Central, APSE Southern and APSE Northern.

The following provides the results and analysis of the survey through the most significant questions and analysis as well as a more detailed analysis in the summary.

1. **During the health pandemic what has been your most common working arrangements?**

We asked about working arrangements during the health pandemic. Whilst near to **45%** stated that they were home working **35.6%** said that they continued to work in an office / depot either all of the time (over **20.7%**) or most of the time (**14.8**%) whilst a further **17.8%** worked some of the time from their office or depot. In total therefore **53.4%** of respondents had presented

during the pandemic at their office or depot, or other allocated workplace, to support ongoing service delivery. What is clear from these results, including individual comments, is that the perception that home working has become the 'normal mode' of work is in fact a more blended model highly dependent on the nature of the work to be carried out. For example, one manager working within a depot site, reported working from the depot to ensure they were available, and visible, to staff teams who were expected to go out on rounds, and felt this was also a safety issue to operations.
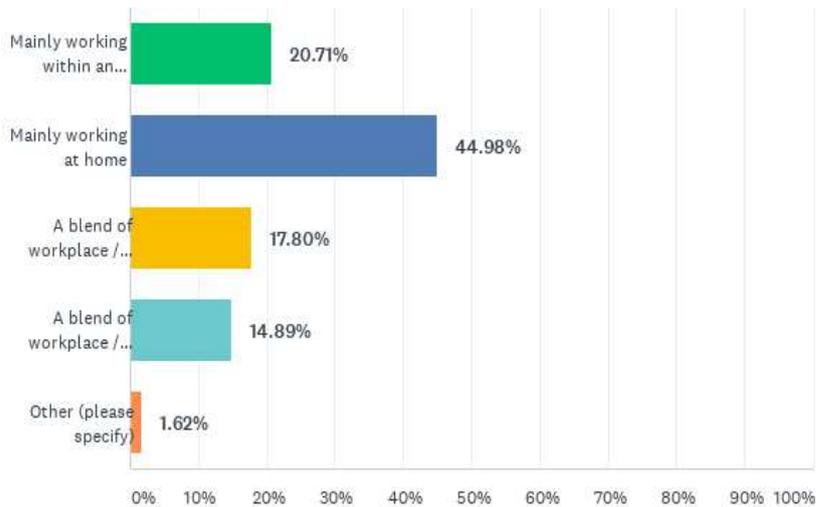
## 2. During the health pandemic what has been the impact on your working hours?

We asked about hours of work and whether this had been impacted by the health pandemic. **69.85%** reported that they had worked increased hours during the pandemic, including 1 in 4 of all respondents reporting excessive working hours. Less than **1%** reported working less. This perhaps reflects the reported increase in new work, to deal with the health pandemic, alongside the existing 'day job' with services continuing in the vast majority of areas, albeit with adaptations as to how the services are delivered.
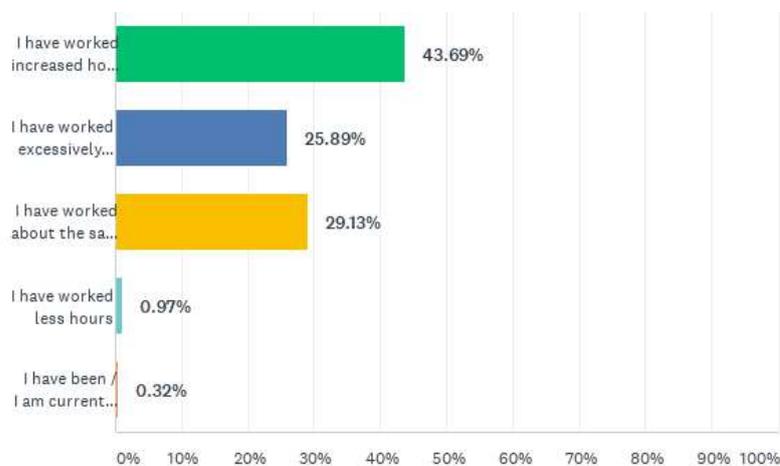
3. During the health pandemic have you taken on additional duties / responsibilities?

We asked respondents about what additional responsibilities if any, they had taken on during the health pandemic and whether they had been part of the emergency response teams. **30.84%** stated that they had taken on additional duties and were acting as part of the emergency response team, whilst near to **25%** of respondents had also taken on additional duties or responsibilities, who were not considered to be formally part of the emergency response teams. Collectively therefore **55.58%** of respondents had seen an increase in workload. A further **13.64%** stated they had taken on different job roles to help with the pandemic, including in the commentary, issues such as redeployment to other services to help ensure cover, and a further **10%** reported that they had taken on new duties but this had abated as time went on. Just **18.8%** reported no impact.
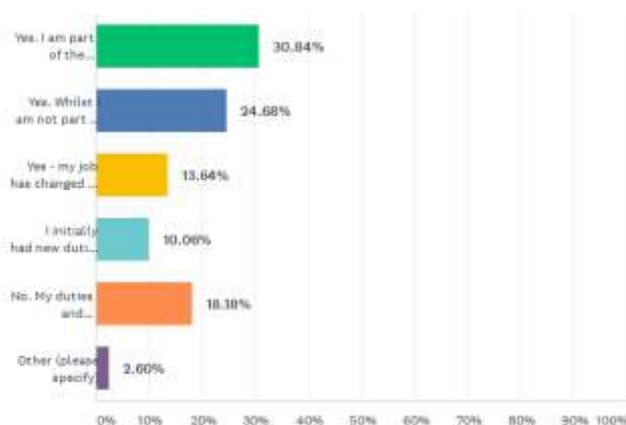
4. Thinking about your own well-being which best describes how you are feeling as a result of your work. (Respondents were able to tick more than one option on this question.)

Over half of all respondents, **52.43%,** reported that whilst on some days they felt okay they also had bad days thinking about the stresses and strains of the pandemic on their work. **36.89%** reported they were feeling mentally exhausted by the impact of the pandemic on their work. **22%** also reported feeling physically exhausted by the pandemic. Less than **10%** reported that they were working better (more focussed work for example).

These figures are alarming and reflect the impact of the pandemic across the local government workforce and management, as well as councillors. Whilst many in local government have not been given the status of 'key workers' during the pandemic it is clear that the scale and the scope of local governments response has, and continues to have, an impact on the mental health and well-being of the workforce, and in many cases physical health as well.
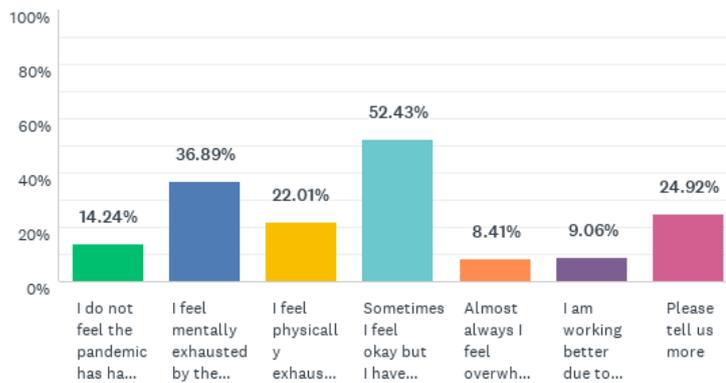
In response to this question a total of 77 more detailed responses were received. A selection of these responses are as follows:-

'…….all parties have failed to appreciate the impact COVID has had on the abilities of services to deliver the normal business as usual, with expectations of the normal work being done to higher standards, rather than accepting that the workforce can't do everything on top of COVID related work.'

'A great deal of pressure to maintain services. The public were initially very much on our side. Since Lockdown …. the phrase 'Covid is not / no longer an excuse' has become all too familiar. That has caused frustration and resentment.'

'Remote, isolated, feel less in control, others have tried to take advantage of the circumstances to try to improve their standing/reputation'

'Highly pressurised environment with multiple challenges, both in working life but also home life.'

In a more positive way, many also reported that team working had met the challenges facing services, with a willingness for people to go 'above and beyond' in their responses. Many also reported that isolation and loneliness of home working was counter-balanced by less travel time, although the impact of 'intrusion' into home life was also a concern. For example, answering calls from the public that have become abusive and loud, whilst working in the home environment. Some also felt support from managers was not always as good as it might have been. Communications was noted as a further area for improvement.

4. **Thinking about the workforce you may manage or your work colleagues please tell us your views on their wellbeing. Again, respondents were able to select more than one answer.**

84.81% of all respondents reported concerns about the mental wellbeing of their directly managed workforce or colleagues, with **56.65%** reporting that mental wellbeing amongst the

workforce was at an all-time low with **28.16%** stating that mental wellbeing was at a low point. **28.16%** reported concerns about physical wellbeing as well.
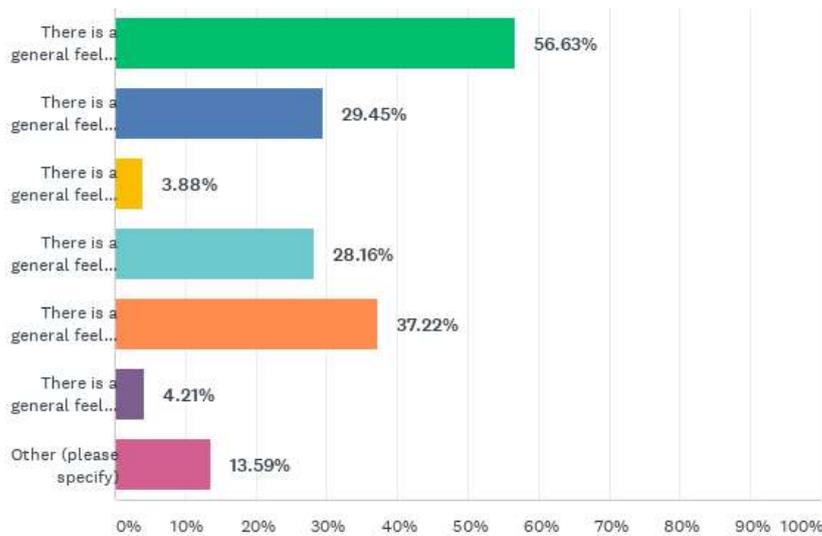
In terms of comments as to why the mental wellbeing of the workforce / colleagues has been so badly impacted by Covid-19 many reported continuous changes to regulations or a lack of clarity in new regulations as one respondent stated. '*Continual changing in working environment in line with the regularly updated guidance*'. A further respondent stated '*WFH means being isolated from colleagues which has affected me much more that I thought it would. I am lonely and can't wait to see them, but understand and support the decision to have us WFH.*'

5. Which best describes the current feelings or emotions of the workforce?

It was reported in **62%** of responses that there was a 'general acceptance that the current ways of working are here to stay for the foreseeable future' with **44.81%** stating that '*everyone is fed up and wants to move to a post-Covid environment*'. However relatively less numbers reported they were still in 'crisis response mode – with just **12.99%** feeling they had not moved out of this mode of operation.
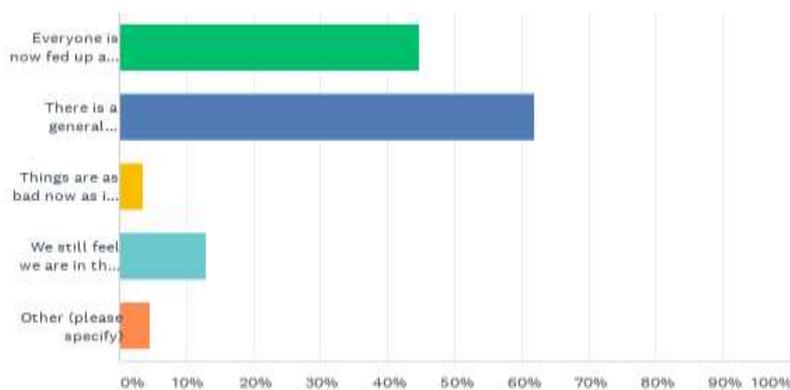
6. Thinking about sickness absence and Covid-19 / self-isolation absence which of the following applies?

51.15% reported that they had had a small number of covid-related absences with just **10.49%** reporting a large volume of self-isolation cases. **11.80%** reported a surge in covid-related absences with **5.57%** reported a surge in non-covid absences.
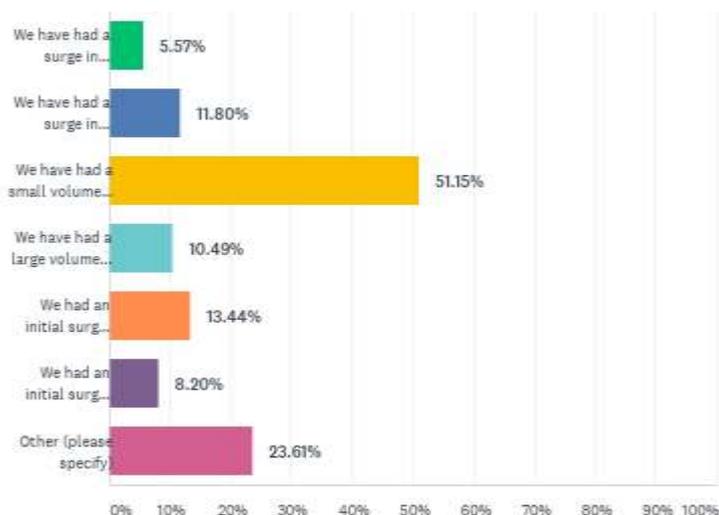
A total of 72 bespoke comments were received on this question with many reporting some difficulties in monitoring absence figures during the changed working arrangements. One reported that they *'had a little surge due to stress and sickness that way (this links to the increase work pressures due to Covid and also the changed work arrangements).'* This sentiment was reflected in other responses too, where typically issues had been brough to a head through struggles with childcare, home schooling etc. One respondent felt the absence levels had been relatively low due to good weather over the spring and summer, during lockdown, helping with mental health and people at least able to get out and about in the fresh air. Another respondent however warned that they *'expect mental stress illness to increase in the coming winter months - it's winter, we are stuck at home, I haven't seen my family in 12 months, others are the same.'*

7. Has the impact of the health pandemic made you think about any of the following? Respondents were able to select more than one answer.

Near to **50%** of all respondents reported that they do not feel the public understand the importance of the services that they / their service provides. A further **34.19%** felt undervalued for the work they provide. However, **37.7%** said they felt proud to work in local government and the pandemic response made them want to stay in public services. A quarter of all respondents however said they would be minded to take early retirement or redundancy if offered and **12.9%** were rethinking their career choice considering a move away from local government.
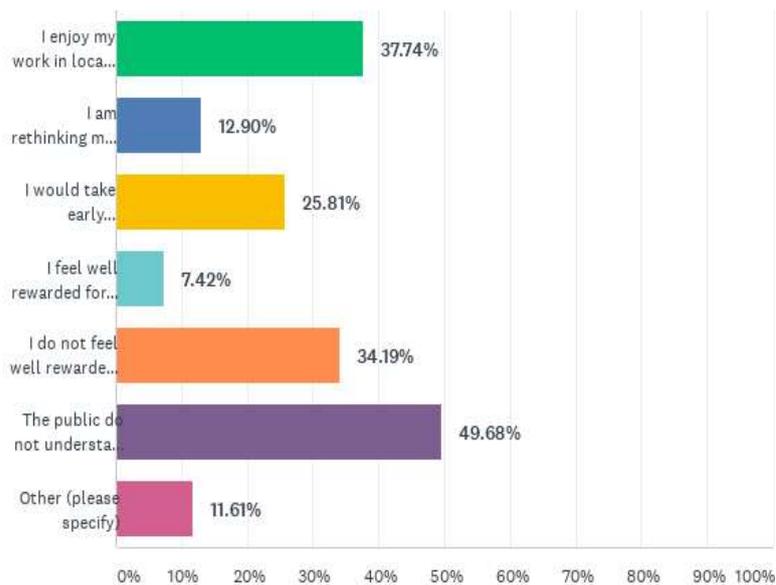
Again, this question attracted a number of explanatory comments. A theme emerged to suggest a disconnect between the realities of service delivery on the ground at a local council level and a lack of understanding or empathy from central government(s) across the UK.

The ability of local government to respond locally at a community level invoked pride in the services. However, a theme that repeatedly emerged was the recently announced pay freeze for local government.

'Reminded me of the importance of local government in a crisis in supporting and keeping local people safe!'

'I feel that the government do not appreciate the efforts that my colleagues and I have sustained to continue to deliver key services throughout the pandemic. #public sector pay freeze'

'A significant amount of attention is given to NHS and the Care Sector and those in Local Government providing essential frontline services are not recognised in the same way.'

'Financially undervalued but feel valued by colleagues and management'

'It would be good if we felt valued by central government; LAs have been at the forefront of local support'

8.Thinking about the impact of COVID overall what is your view on overall morale within local government - workforce, managers, elected members, council leaders?

When asked about morale **43.09%** reported that morale was okay but **47.3%** reported that morale was low with **9.8%** of those respondents stating morale was extremely low. These

figures correlate to the earlier questions when respondents were asked about mental well-being. They are also consistent with the sentiments coming through in responses when asked about feeling valued in the work and service provided.
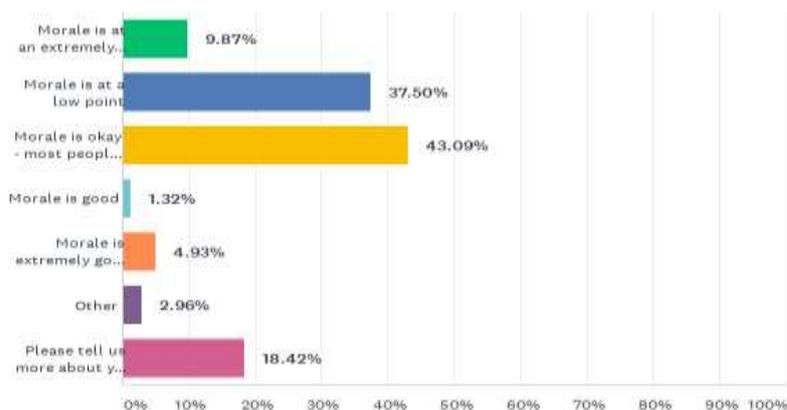
56 separate responses were received to support answers to the question on morale. One respondent comments that '*At the moment we think we can see light at the end of the tunnel with the vaccine, however we are all beginning to realise that there is a long road to recovery. The fast pace of change already experienced before the pandemic is likely to continue, local economic factors impacting on the workforce will now be intensified.*'

Others suggested that morale is linked to the pressure of work which is different from service to service or from role to role. '*Pockets of low morale in teams that have been more affected, partly as a result of being worn out.*'

Again, the announced pay freeze for local government was raised as an impact on staff morale with a respondent saying '*Initially morale was not a major issue as staff understood the need to step up and do what was necessary to continue to deliver our essential services. This changed when the public sector pay freeze was re-introduced which was seen as something of a kick in the teeth. The phrase 'We are all in this together' appears to have a strange meaning.*'

A further matter raised consistently was the impact on working arrangements and following safe working practices during Covid-19. '*Although my staff are in reasonably good spirits, they are working in bubbles and I know they are looking forward to a time when they can all work together again. Talking to other managers with staff redeployed or working from home on other tasks, morale is lower. Many employees long to get back to their substantive roles and deliver the services they are paid to. The roller coaster of tiers and lockdowns does not help. An incredible amount of work goes into getting ready to reopen services, only for them to close again or not be permitted to open last minute. Staff understand the rationale but the frustration is palpable*'.

Overall Analysis

The resilence survey has thrown up a number of alarming issues. There is a clear sentiment within local government that it is the poor relation of other public services, driven in many ways by a lack of public, and indeed Government(s), understanding of the different roles and responsbilities carried out by councils. Many reported negative social media comments, assuming that council staff '*had not worked for nine months'* and this reportedly increased after the announcement of the pay freeeze, and again mis-reporting of the facts around sector pay. Whilst feeling valued by other colleagues is evident there is a clear disconnect with feeling valued by the public, often driven by misunderstanding of the roles of local council services.

Many expressed that they felt they were just about '*keeping the plates spinning'*. Whilst initially they felt that there was public support at the start of the pandemic this faded away with expectations of 'normality' which could not in many cases be realised because of ongoing measures, such as maintaining social distancing and work bubbles. Some commented that councillors had been impatient to see a return to full-service delivery, whilst others commented that new team working and groups had been formed, and that these would be advantageous in the future to inform working differently.

In terms of the overall survey results around the theme of resilience, there are some concerning findings. Mental well-being is an overriding concern as is low staff morale. This appears to be driven by a number of factors. Whilst working from home has some clear positive advantages, such as reduced travel time, with some reporting more time to exercise and eat healthily, many reported the initial novelty factor was quickly diminished through feelings of isolation and loneliness. There has also been a significant increase in working hours during the pandemic with many taking on new or additional responsibilities. Many commented that they had taken on these new responsibilities without the usual support, from colleagues or managers, in a working environment. It was also noted that for many frontline workers they had continued to work throughout in depots or offices, so something of a two-tier situation where managers were able to work from home but those carrying out manual-based work or support roles needed to be in their usual place of work; this was an issue that many managers themselves pointed out.

A further factor on mental wellbeing, and in some cases physical exhaustion, has been the need to constantly respond to changing guidance. Getting a service, building or asset ready to re-open to then face either a new closure, or a change of regulation. Finances also features as a factor with many expressing worries about the financial health of their council and possible job losses or redundancy; in some situations, staff leaving or retiring had not been replaced, due to both the pandemic and due to ongoing financial uncertainty.

Communication also featured in many respondent comments. Remote working arrangements were not always conducive to effective communications. One commented that

communications from a Chief Executive through a newsletter was too lengthy to be able to pick out the relevant information. Others felt confused about what was intended for them or that communication at a management level did not always filter down to frontline staff.

Whilst this survey was designed to consider the issues around resilience in local government through senior managers, staff and councillors it also picked up many positive comments. Many reported a sense of pride in the response to the health pandemic. There was also an overwhelming number who felt that teams and groups had come together quickly to meet new challenges; some reflected that local councils are good at 'getting the job done'. The feared lost days of either covid-related sickness absence or self-isolation measures did not materialise to the extent initially feared (albeit this could of course change with the latest infection rates). Many felt that the situation had improved with better understanding of the guidance on those for example, who were clinically vulnerable as defined in the regulations, and the sensible application of self-isolation measures, which is some earlier cases went needlessly beyond the guidance, creating difficulties. Staff teams working in bubbles also helped to manage staff availability in key services; this was also supported by new ways of working, such as a single person been allocated to a job role so that they could travel to and from destinations without having a second person on the vehicle.

Conclusions

The survey results may usefully inform future decisions about how staff are deployed and supported. With the alarming numbers concerned about mental well-being, and future workforce resilience, this should be considered as a priority area for the sector. ACAS has previously recommended the following steps in its guidance [Promoting positive mental health in the workplace](#)

- Identifying why the organisation is committed to promoting positive mental health and what the objectives of the organisation are

- Planning a range of activities and key messages to educate staff and managers and remove any stigma associated with mental ill health.

- Putting support processes in place for staff experiencing mental ill health. For example, training managers in mental health and having named mental health champions in the workplace who can be approached if the employee does not want to talk their manager

- Creating a mental health policy and reviewing existing policies to ensure managers and staff know where to go for support and further information when required

- Ensuring that senior managers champion mental health awareness and act as role models to encourage healthy behaviours. For example, always having lunch away from their desk or work area can encourage staff to do so as well.

Of course, these matters may be more difficult to address when people are working from home and are 'unseen'. However, ensuring staff have support, including clear communications about how to access that support is vital. The TUC produced a short web article at start of the pandemic entitled ['Working from home? Here's what you need to know'](#)

This brief guide suggests the following measures (slightly abbreviated)

1. **Stay safe** - around having access to safe working conditions including posture and access to day light.

2. **Have the right equipment** – access to relevant IT and software needed to perform the job

3. **Know what is expected** - a clear understanding of what is expected especially if this differs from normal duties

4. **Work regular hours** - taking regular breaks and sticking to usual working patterns where possible.

5. **Keep in touch** – staying in touch with colleagues and avoiding isolation through Whats App chats or video calls for example.

A further source of support is a research publication produced by the Mental Health Foundation in 2017 which highlights the importance and significance of looking beyond, or behind, the words people present, in order to gain a realistic insight into what is actually going on for people. You can access the research using this link. [I'm fine | Mental Health Foundation](#).

There are also many training courses, tools and techniques which can help alleviate low workforce morale for example:-

- Promptly responding to concerns
- Ensuring effective and timely communications
- Ensuring employees are able to input into any feedback loops
- Ensuring actions are picked up, rather than being ignored
- Being clear about expectations and ensuring a reasonable workload

All local councils have an overriding duty of care to employees under the Health and Safety at Work Act. Whilst many councils have behaved in an exemplary way, introducing new working practices, providing appropriate PPE and carrying out risk assessments, it is important to ensure such measures are regularly reviewed, and that mental health issues form part of that

assessment, not just the physical risk to the workforce. Whilst support may be varied across different employers many respondents to the survey felt a simple call to check if they were okay meant they did not feel 'forgotten'.

The health pandemic has brought about a rapid period of change, and it is important to remember that no-one could have expected the full range of challenges that this has placed on local government services, managers, the workforce and indeed local councils. However, taking some time to reflect on the outcomes, and thinking about future resilience, from a workforce perspective, is time well-spent, most especially if some of the new ways of working are, as predicted, expected to continue into the future, beyond the parameters of the pandemic response. The potential 'normalisation' of some home working, or lone working, for example will require a much more planned approach from HR professionals, ICT teams, managers who are expected to manage teams remotely, and the social and working conditions, for all employees to thrive. Many managers have themselves reported 'burn-out' at the relentless demands on services. The impact of change on training and mentoring staff, particularly on new or younger members of the workforce, including apprentices, must also be considered. There are also some positives from the acceleration of change which may have otherwise taken many years to achieve. New skills to have emerged with the rollout of new technologies and software solutions which may benefit the workforce and service recipients well into the future.

Finally, it is important to note that not all of the stresses and anxieties exposed within the survey are directly correlated to work pressures. The impact of the pandemic on the local government family, as citizens themselves, has to also be considered; with the same worries about not being able to see loved ones, older parents, home-schooling, possible job insecurity, and consequential financial insecurity, as well as the health concerns about catching the virus, are of course all too familiar with everyone.

APSE in partnership with the PPMA will be hosting an online discussion workshop on the **15 January 2021** to further explore the survey findings. You can book online to register for this FREE event. **Click here to register your place**

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