

Healthier Futures

Black Country and West Birmingham



Black Country and West Birmingham NHS Employers Integrated Care Partnership

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Introduction

The Healthier Futures Partnership is the official name for the Black Country and West Birmingham Integrated Care System (ICS).

The Black Country and West Birmingham (BCWB) Sustainability and Transformation Partnership (STP) was formed in 2016 and covers the five places of Dudley, Sandwell, Walsall, West Birmingham and Wolverhampton.



On the 1st April 2021, Black Country and West Birmingham STP became an Integrated Care System (ICS). The ICS is a collaboration of organisations across primary care, community services, social care, mental health and acute and specialised services across the Black Country and the west of Birmingham. These organisations retain their individual responsibility and decision-making powers, but recognise the opportunity and benefits of coming together for people who use our health and care services. The ICS offers a new way of working for health and social care services locally, focusing on delivering health and care services defined by local area boundaries, not by local organisational boundaries. The aims are to:

- Improve the health and wellbeing of local people
- Improve the quality of local health and care services
- Deliver financial stability and efficiencies throughout the local health care system.

Please find a list below of organisations which form part of the Healthier Futures partnership:

- Birmingham City Council
- Black Country and West Birmingham CCG
- Black Country Healthcare NHS Foundation Trust
- City of Wolverhampton Council
- Dudley Integrated Health and Care NHS Trust
- Dudley Group NHS Foundation Trust
- Dudley Metropolitan Borough Council
- Sandwell and West Birmingham NHS Trust
- Sandwell Metropolitan Borough Council
- The Royal Wolverhampton NHS Trust
- Walsall Healthcare NHS Trust
- Walsall Metropolitan Borough Council
- West Midlands Ambulance Service NHS Foundation Trust

Further information about the Black Country and West Birmingham Integrated Care System can be found here: [Healthier Futures ICS – About Us](#).



What do we mean by flexible working?

This brochure sets out our organisational position on supporting our employees and prospective employees to achieve a healthy work-life balance in line with the objectives of the NHS People Plan and the Black Country and West Birmingham NHS Employers People Board.

NHS Employers within the Black Country region have established a People Board which is made up of a number of Health and Social Care organisation representatives from across the region. One of the projects of the NHS Employers People Board is the Workforce Supply project and the main objectives of this group are to:

- Support ongoing flexible working across the Black Country and West Birmingham ICS
- Transform our workforce so that it is flexible and consistent as we redesign services for our integrated future.
- As part of our workforce transformation to increase and broaden our supply by making sure our posts are attractive to the local workforce whilst retaining our highly skilled and experienced staff.

The Black Country and West Birmingham region has a rich cultural heritage and its diverse communities make up 26% of the local population. We want to become an employer of choice now and in the future and in order to make our organisations an attractive proposition we are committed to ensuring that we provide options to work flexibly taking into account individual and personal circumstances.

The range of flexible working options that are available include the following:

Flexible working options...		
<p>Flexi time/Time off in Lieu (TOIL) - this is where employees use time off in lieu (TOIL) when there is a requirement for employees to work extra hours or days. TOIL is used to encourage flexible working.</p>	<p>Staggered Hours - An employee starts and finishes work at varying times during the working week, subject to attendance during core hours.</p>	<p>Compressed Hours - this is where an employee works their usual hours over fewer days, e.g. 35 hours over 4 days.</p>
<p>Job Share - Two employees (or sometimes more) voluntarily share the responsibilities of a full-time role.</p>	<p>Part time working - An employee who works less than 37.5 hours per week. Their salary, leave and other benefits are pro-rated.</p>	<p>E-rostering/team based rostering - this is about developing a team-based approach to develop the roster and manage shifts and working patterns. This is achieved by using colleagues' work-life balance needs and preferences wherever possible and practical to do so based on the needs of the service.</p>



Flexible working options...

Term time working - An employee reduces their annual hours to work only during term times, enabling them to take time off during school holidays

Annualised hours - An employee works a defined number of hours over a year rather than a fixed number of hours a week. Salary is paid as a set amount each month regardless of the actual number of hours worked in that month

Why should you consider a career in the Health and Social Care Sector in the Black Country and West Birmingham Region?

A career in health and social care in the Black Country and West Birmingham Integrated Care System (ICS) offers excellent employment prospects, with opportunity for promotion and progression.

There are over 350 different job roles in the Health and Social Care sector and this illustrates the vast number of roles available which makes the sector a very attractive career proposition.

The skills that are needed to work in a career in health and social care are often transferable and as it is such a varied sector, as prospective employees there are a range of specialisms to match individual motivations, strengths and skills.

In the future digital developments are changing the way we work in health and social care and as a result of the COVID 19 Pandemic, models of health and social care delivery are changing. This means there will be an increased focus on transforming our workplace cultures underpinned by digital technologies with the sector delivering more cost effective patient centred care. There will also be an increased focus on developing new roles to fit the changing needs of the sector.

As well as a range of flexible working options, a career in the sector also offers a wide range of benefits from generous annual leave entitlement, pension scheme and other great incentives such as cycle to work schemes, lease car scheme initiatives, plus access to a range of health & well-being support.

There are many different specialisms and different types of job role within the sector. A Doctor, for example might specialise in Surgery, General Practice or Pathology (amongst many other options). Similarly a Nurse might specialise in Mental Health, Learning Difficulties, Cardiology or Diabetes, and a Care Assistant might specialise in Dementia or Home Care.

Overleaf is a list of some of the different types of roles/ specialisms within the sector.



- Allied Health Professionals
- Adult Social Care Worker
- Ambulance service Team
- Dental Team
- Doctor
- Health Informatics
- Health care service management
- Health Care Support Workers
- Nursing
- Midwifery
- Pharmacy
- Psychological professions
- Public Health
- Wider health and social care



What are the benefits of working flexibly?

Research carried out by the CIPD in 2019 shows that many people (87%) would like to work more flexibly and there is an increasing demand for flexible working from men and women and across all age ranges. Within the Black Country and West Birmingham ICS we recognise that some of the benefits of flexible working include;

- addressing skills shortages
- attracting and retaining talent and supports our commitment to diversity
- narrowing the gender pay gap
- improving employee job satisfaction and loyalty
- supporting well-being
- empowering our organisations to be more agile and responsive to change.

Below is useful diagram produced by NHS Employers which explains the benefits of flexible working for both employees and employers.

For employees

- Improved job satisfaction
- Higher level of engagement
- Improved health and wellbeing
- A better work-life balance
- Reduced travel time
- Support to manage caring responsibilities

For employers

- Increased recruitment
- Larger talent pool of potential employees
- Widened participation and improved diversity of the workforce
- Reduced costs where full-time cover is not required
- Loyal and committed employees
- Reduced sickness absence



Below are two short video clips from colleagues working in Sandwell and West Birmingham NHS Trust who discuss the benefits of being able to work flexibly and the positive and beneficial impact on their home and working lives. Please click on the links below to watch these videos.

[Nurse Emma Hughes talks about how she is able to work flexibly at the Trust allowing her to spend quality time with her children.](#)

[Nurse Nina Faraon talks about flexible working at SWB NHS Trust within medicine and emergency care. She describes how her hours allow her to spend quality time with her daughter.](#)

Our commitment to supporting you to work flexibly

The Black Country and West Birmingham NHS Employers ICS People Board has set out a commitment to ensure flexible working options are available to existing employees, as well as prospective job applicants. The benefits of being able to work flexibly are well documented and assist in attracting, recruiting and retaining talented individuals within the health and social care economy. The NHS Employers ICS People Board has given its commitment to include the following statement in all job adverts posted by each of the five healthcare trusts in the region. This is as follows;

“As a major employer in the Black Country and West Birmingham region we are committed to supporting all employees to achieve a healthy work life balance. We want the Black Country and West Birmingham region to be the best place to work and as such will consider all requests to work flexibly taking into account personal and individual circumstances alongside the needs of the service. We encourage all prospective applicants to discuss their individual circumstances with the Recruiting Manager as part of the on-boarding process.”

The NHS Employers ICS People Board has also adopted a set of principles for flexible working. We aim to create a culture where flexible working is seen as an integral part of enabling a healthy work life balance, rather than an exceptional circumstance.

- All employees are entitled to make a request to work flexibly irrespective of their length of service.
- We will ensure that our employees who work flexibly are able to fulfil their career aspirations for their chosen career irrespective of their working pattern.
- All employees are entitled to submit a request for flexible working irrespective of their reasons.



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- We are committed to developing creative solutions to support flexible working arrangements, whether long or short term, providing the needs and objectives of the organisation can be met.

These principles and the flexible working statement act as a set of guiding principles for working collaboratively with our partners in the region. We know that to provide the best quality services we need the highest quality staff. Together, the Healthier Futures partnership will have a renewed focus on retaining our existing workforce, attract more people to work in health and care locally, and develop new roles to help us to work together better.

Our ambition is to be the employer of choice in the Black Country and West Birmingham through leadership development, talent management, succession planning, links to universities and development of innovative approaches, to solving recruitment challenges that will retain and attract the best staff. We will be research driven, harnessing technology and innovation to benefit all areas of service delivery and organisational development.



Flexible Working Case Studies

Below are some case studies and practical examples of how flexible working is being implemented across the Black Country and West Birmingham region.

Case Study 1 - Term Time working - Health Visiting Team

What flexible working arrangement was put in place? Was this at an individual level or a team level? Was it temporary or permanent?

I am a Specialist Health Visitor working with children aged 0-5 years with complex medical needs, disabilities and SEN needs - I have a small caseload of 30 families and have 2 nursery nurses working with myself in the team- I work at The Child Development Centre and with a multi- agency team of Physiotherapists, Occupational Therapists, Speech and Language Therapists, Paediatricians and Early Years Education partners

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

I have been working term time since September 2012 mainly due to childcare commitments – I have a disabled daughter who up until this point was able to attend pre-school clubs and have grandparents pick them up from school, however once she started at High School wasn't able to continue with this arrangement. I was supported by my employer to work part- time and term time to take the children to school and collect them after school. Due to personal circumstances I was also provided with the opportunity to work reduced hours which was supported by our Occupational Health team and my line manager. My term time only contract is very flexible to accommodate the school term times as my children are not members of any schools in the area where I work and often the term dates vary. Fortunately I am able to work the hours that fit in with childcare.

What did you take into consideration when deciding to implement this arrangement?

My hours of work were adjusted following a period of reduced hours due to personal circumstances and this was full supported by HR, Occupational Health. As part of the review of my working hours, I worked an additional day during term time to allow me to have school holidays off. My contracted hours did not change – therefore there was no impact on the service from by working reduced hours. It's a flexible contract and I add additional hours to meet the needs of the service especially during summer months and then take time back accordingly.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

Challenges were presented when the rest of my team also started to work term time only as this meant the Specialist Health Visiting service as a whole was not present during school holidays.



We are all flexible in our approach to ensure the needs of the service are being met and we hosted clinics, coffee mornings and I carried out specific visits if during school holidays as and when required. The week long holidays are not usually an issue but during the 6 week summer holidays we planned it so that parents on our caseload all have a generic named Health Visitor base to contact if they need advice during the summer holidays.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Tips for managers is that flexibility is crucial when taking into account colleagues requests for flexible working – one size does not fit all. For example during the lockdown when schools were closed I was able to work from home as I have no childcare for my disabled daughter. My line manager gave me the flexibility to work from home and fully supported me throughout this period. I do have additional health needs myself and I can honestly say my Trust has been fully supportive of me throughout and given me flexibility support and care with appropriate adaptations being put in place to enable me to return to a job I love.

Case Study 2 - Home working/remote working - Patient Access Team

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Was it temporary or permanent?

We have implemented an arrangement which allows the whole team to work from home with designated on-site days. This was originally introduced in response to Covid19, however due to the success of the arrangement we will be exploring whether we can continue with it going forward.

We keep in touch with those working from home via daily Webex huddles and ad hoc remote meetings. This helps us to effectively manage workload, as well as ensuring the health and wellbeing and ongoing inclusion within the team. We also make use of the instant messaging function within Webex Teams which allows for ease of communication within the team and reduces email traffic.

There are key functions within the department that require staff to be on site, therefore this hybrid model allows for those functions to continue, whilst also supporting team members to work remotely at other times, which supports their work-life balance. In addition, we have some colleagues who do not wish to work from home so they are able to continue to work on-site. We also utilise on-site time to further support individual training and development.

We are able to ensure that the department is fully covered during our opening hours.



What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

Overall this has worked well throughout; with colleagues being more flexible in terms of the working times they are able to cover, at the same time as enabling colleagues to achieve a better work-life balance. We have also seen a definite improvement in terms of task ownership and communication. This had led to greater efficiency and a happier, more engaged team.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

In terms of the working from home arrangements, we examined the tasks that could be completed from home and those that could not. We canvassed all members of the team and asked if they were willing to work from home and to confirm that they had an appropriate space to work in.

We developed a departmental 'Working from Home' protocol which specified requirements in terms of availability to attend the office when needed, working space and confidentiality, keeping in touch, requirements for risk assessments etc. to ensure colleagues could work safely and that communication and work output was effective. Appropriate office equipment was provided for colleagues to use at home to ensure they had everything they needed to work safely. We also ensure that everyone has a set break time so that adequate rest breaks are being taken.

The roll out of home working was gradual to ensure that systems worked effectively and that the overall concept of operation was effective. Once proven this was rolled out to the wider team.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

Some colleagues were initially resistant to working from home. We discussed their concerns on a one to one basis, talking through the pros & cons of the arrangement and identifying any risks and support measures. As the numbers of colleagues working on site has now dramatically reduced, this has enabled us to support some colleagues to continue to work safely on-site with appropriate social distancing measures in place.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Consult with the team; show them the benefits of remote working and identify any support measures required. Ensure fairness and transparency.



Case Study 3 - Compressed hours: Your Health Partnership Primary Care Network- Home Visiting Team

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Was it temporary or permanent?

Most of our Advanced Nurse Practitioners (ANPs) within our Home Visiting team work a compressed week. This was both an individual and a team agreement. Non-working days are divided across the team. Some centred on child care provision, others around attending outpatient appointments with close relatives (e.g. regular consultant appointment days). The arrangements made were temporary and always subject to change and needs of the service with sufficient notice e.g. colleagues able to swap with others with the team for specific events.

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

This has helped to improve job satisfaction through breaking up a long week. Recruitment and retention has also improved – we find people are happy to travel further to work if this is for 4 rather than 5 days, which means we can widen our recruitment net and offer an attractive working pattern that may not be offered elsewhere.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

We considered the provision of the service and capacity for home visits. Working a compressed week effectively elongated the working day. This benefitted patients as ANPs were able to visit earlier or later as convenient for the patient and were able to link in with carers/family who could not attend during the working day.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

One team member preferred to remain on 5 working days but this was able to be accommodated within the team. Another preferred to work 3 x longer days and 2 x short days finishing at 2.30pm allowing for collecting children from school. It was definitely a team approach to ensure everyone was accommodated.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Consider any arrangements. Use a team approach to ensure everyone feels valued and their unique circumstances considered. As long as the service is provided, flexibility leads to happy staff who enjoy coming to work. A compressed week means that the ratio for full time staff of four working days and three non-working days feels a lot more comfortable and a better work life balance.



Case Study 4 - Flexible working – Reduction in hours – Senior Leadership Role

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Was it temporary or permanent?

We had a member of staff, who was in a leadership role, returning from Adoption Leave and a subsequent career break. They requested to reduce their hours from 37.5 hours to 18 hours per week, which would normally be a hugely difficult scenario for someone in a managerial capacity.

A decision was made in service to allow the request, but change the managerial capacity to supporting a struggling area rather than be in charge of another. The struggling area already had a manager over it and a secondary manager supported it with all the essential requirements to get through a key inspection (such as review of SOP's and processes). This was initially in place temporarily but allowed to be permanent due to the success of the first year.

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

The service retained the experience of a manager with over 20 years' experience. Further, the old role became available for the manager seconded to cover the role during the Adoption Leave. This is also a talented manager whose skills would have been lost.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

The service generally engages many stakeholders with certain decisions, particularly if finances are affected.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

The main challenge was deciding how the new role would fit into the structure but this was overcome by reconsidering budgets, structures and considering the workforce plan for each area.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

This in essence allowed the service to retain two key managers and enabled stability in the service. During the COVID pandemic, the service has been under great pressures and having an experienced manager to support these services has been priceless.



Case Study 5 - Accommodating the health needs of our employees- changing working patterns

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Were they temporary or permanent?

A member of staff asked for flexible working initially to assist with her fatigue during the winter months and also to allow her flexibility in managing an outside commitment. The request was to take a Wednesday morning off commencing work at 1.30pm and make up the hours by working extended days on 3 other days within the week. This has enabled the member of staff to also juggle a commitment outside of work and also manage her fatigue and health and wellbeing during the winter months. Initially this was temporary, however as this has worked successfully this has been made a permanent working arrangement.

Whilst this was an individual request, impact on the team also had to be taken into consideration.

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

Flexible working has worked well in the main as the individual member of staff has also been flexible where required and at times changed her working pattern to suit the needs of the service. Positive impact on the individual's health and wellbeing has also been reported. No impact either positive or negative at a team level has been reported.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

Service requirements and need were taken into consideration also the positive impact this may have on the individual's wellbeing was also taken into consideration. Discussion with the wider team was undertaken.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

No real challenges/obstacles were faced however it did require some discussion around why this would not work, could we not try this and review, what impact would this have on the team and also the wider services we work with.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Be willing to be open and have an honest conversation with your line manager but also be flexible and be willing to compromise to ensure that the needs of the service you are working in can be accommodated.



Case Study 6 - Supporting operational colleagues to achieve a health work life balance – Andy's Story

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Were they temporary or permanent?

Andy works as a Band 6 Deputy Ward Manager on a busy older adult's inpatient unit. When Andy became a single Dad to his young son; he found working and spending quality time with his son a challenge. Andy shared custody of his 5 year old son and his son spends Friday nights and Saturdays with him. Through an informal agreement managing the rota and requests he has been able to ensure he is not rostered to work on a Friday night or on a Saturday. Leaving him to strike that all important work life balance managing his other (and arguably more crucial role) of being a parent.

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

For Andy he says that consistency for his son has been the biggest benefit to him and his family in being able to work flexibly. He describes not being met with too many challenges to working flexibly and this is down to the flexibility he can offer in return. He is able to meet the needs of the Trust through working any other shift required including long days and nights for the rest of the week. The only night he requests is a Friday night and the only day is a Saturday but all other shifts can and will be worked according to the rota.

Andy says his own mental health and sense of wellbeing has improved since working flexibly. He states that his own relationship with his son has improved and developed over the years. He feels more productive when he is in work through being happier and calmer.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

Andy says that this has never really been formalised through a flexible working policy route but rather has relied on the understanding and goodwill from his colleagues and managers. He has been open and transparent within the workplace about his particular needs for his personal circumstances. He commented that anyone applying for flexible working needs to have this good communication with colleagues and managers so that goodwill can be shaped through an understanding of the rationale.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

Andy describes at the beginning of the pandemic he didn't see his son for a few weeks and this highlighted to him the importance of having the time from work to be able to spend this quality time with him and to be a part of his upbringing. He commented that anyone applying for flexible working needs to have this good communication with colleagues and managers so that goodwill can be shaped through an understanding of the rationale.



Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Andy's advice to anyone wanting to work flexibly or to managers receiving requests of staff is to search for that common middle ground and to work together to find a way that it can benefit both the service and the staff member. For anyone applying he says to 'go for it' but to be clear of why they want flexible working and to remember it is a two way process and to be flexible, realistic and reasonable. Andy's closing statement is that 'anything is possible.' We are people first and if someone is not happy at home it can be detrimental to work and vice versa.

Case Study 7 - Supporting colleagues with caring responsibilities- Dr Kumar's story

What flexible working arrangement did you put in place? Was this at an individual level or a team level? Were they temporary or permanent?

Dr Kumar joined the Trust as Lead Psychologist (Older Adult Mental Health) at the end of May 2021 in the height of the COVID-19 Pandemic. Prior to joining the Trust she faced a battle with her previous employer agreeing on the terms and conditions for a flexible working pattern that would suit the needs of both her and the service she was working with. The only way that Viba could work was by having a flexi-working contract as she had to accommodate juggling both work and her own parent-carer needs. Caring for her child who had special educational needs meant that school holidays posed a challenge as many traditional forms of childcare available for most children were either unsuitable and/or inaccessible.

What has worked well and what benefits have been realised as a result? Were these benefits at an individual level or team level?

When Dr Pavan Kumar was offered the post; she decided to "lay out all the cards on the table" and explain her personal circumstances and discussed her need to work flexibly in a way that would not compromise patient care and service delivery and also that would support her personal needs. From the outset she describes feeling valued and supported by the Trust and she was thrilled to be able to accept the post and join the Trust working 30 hours per week on an annualised hour's contract. Around the same time, the guidelines for NHS Staff-Carers was published, which helped underscore her need for a flexi-working contract and this acknowledgement by NHS England was in itself a huge milestone as it protected Staff Carers from discrimination by association.

What did you take into consideration when deciding to implement this arrangement? Did you consult/engage with any stakeholders in forming your decision (if so, how did you go about this)?

Since starting in post she describes that she will flex her hours so that she works longer days during term time and shorter hours during school holidays and also has a day off during the week. On occasions there may be medical appointments that she needs to attend and she is able to swap her non-working



day to accommodate the appointment or to flex her hours. She was grateful to her manager Nick Stephens for facilitating this arrangement. From previous experience, she was aware that although the law supports her request for annualised hours contracts, to implement it effectively one needed compassionate managers.

Not only has this helped to achieve a better work life balance she also explains how this has positively impacted the service. Working flexibly has allowed her to be able to split her hours efficiently between clinical/leadership/research areas and scope for virtual meetings has given her more time to work on strategies and developing care pathways that otherwise may have been more challenging working a traditional 9am – 5pm working pattern.

What challenges/obstacles did you face when considering & implementing this flexible working arrangement and how did you overcome them?

Whilst she has found this Trust supportive she describes experiencing workplaces cultures in the past that make flexible working seem more of a privilege to have rather than a necessity, which in turn can trigger feelings of guilt and inefficiency in the staff member, thus affecting their wellbeing. . The current pandemic has made ‘working from home’ a norm to most- and everyone has discovered ways to work flexibly in ways that best ensure meeting service needs as well as staffs’ work/life balance. If managers continue to support their staff, working flexibly (in general) may help improve productivity and efficiency.

Do you have any tips / suggestions / learning you can share with other managers who may be considering a similar approach?

Her advice for anyone considering flexible working or considering a request to work flexibly is to understand the context behind the request and also to understand the law as it can get complex with calculating hours and holiday entitlements etc. Good HR policies are key to implementing flexible working cultures. Compassionate Managers are vital to ensuring requests are heard and processed. It is also important to think practically and to take the emotion out of it while discussing the specifics of the contract.

Useful links

Please click on the links below to find out more about careers on offer within the Health and Social Care sector:

- [NHS Jobs](#)
- [NHS Professionals – vacancies](#)
- [NHS pay and benefits](#)
- [Think Care Careers](#)
- [NHS Employers](#)
- [Healthier Futures ICS](#)

