Sharing innovation:

Inspiring flexible working stories from within the NHS

#Fairflexiblefutures

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Sharing innovation
Inspiring flexible working stories from within the NHS

Chair

- **Amy Butterworth**, Consultancy Director, Timewise

Speakers

- **Jess Done** & **Alex Czopowyj,** Flexible Leads, NHS England

- **Angela Murphy**, Workforce Programme Manager, Hampshire & Isle of Wight ICB

- **Inge Cordner**, Lead Nurse, Nursing & Midwifery workforce and **Claire Stranack**, HR Business Partner, University College London Hospitals NHS Foundation Trust

Flexible Working

Across the NHS

Presented by:

Jess Done Flexible Lead NHS England

Alex Czopowyj Flexible Lead NHS England

NHS
England

The vision and the reality

Flexible working across the NHS

The vision

The NHS is an exemplar employer, with flexible working embedded into the culture and values of the NHS so that saying 'yes' is our usual default position from day one of employment.

Flexible working is simply 'how we work'.

Flexible working across the NHS

The reality

Staff survey

People Pulse Survey

Pay Review Body (PRB)

Exemplar Programme (23 sites)

Flexible working across the NHS

Challenges

Organisational level

- Culture and leadership

- The basics – right to request

- More than a policy

- Implementation e.g. clinical teams, rigid shift patterns
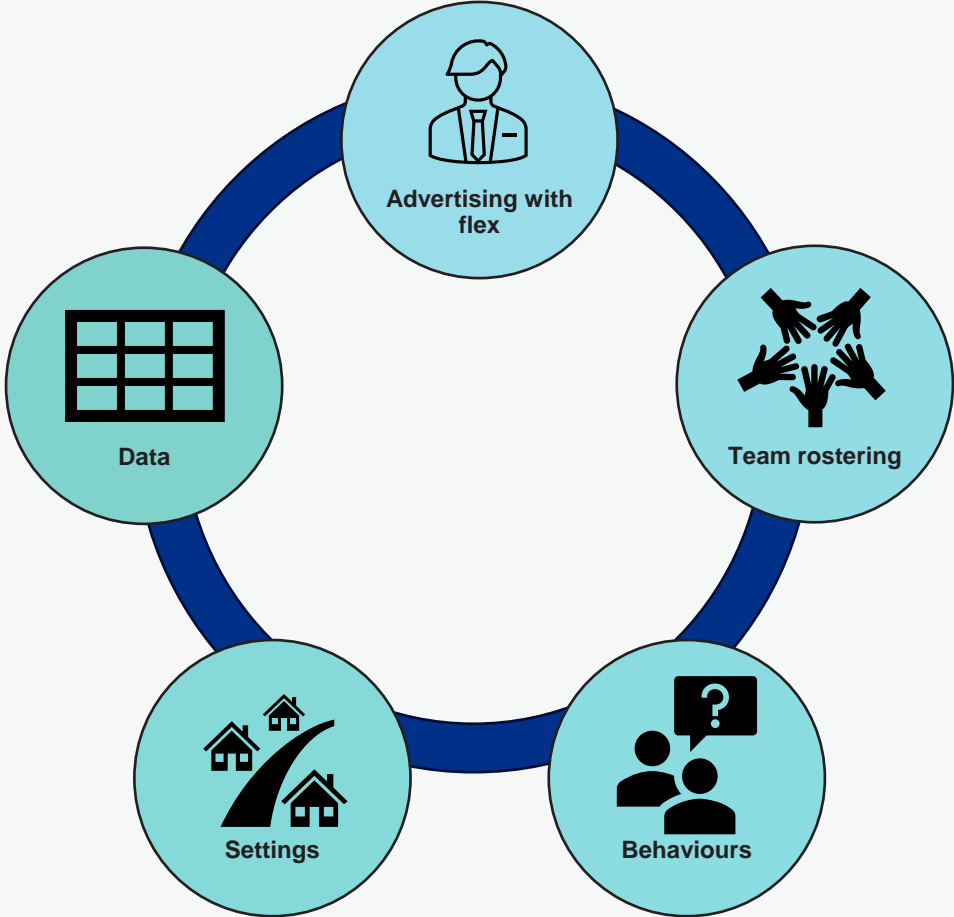
Nationally

- The scale 1.3million

- Reaching more people with less resource

- Timeframes of a culture change – takes time, takes leadership

- It's not a linear process

Themes and trends

Themes and trends

Across the NHS

Informing the plan

Shifting the dial

Who, what, where?

- Leadership: Culture development

- Managers: training

- System level: ICS Retention Leads

Thank You

weworkflexibly@nhs.org.uk

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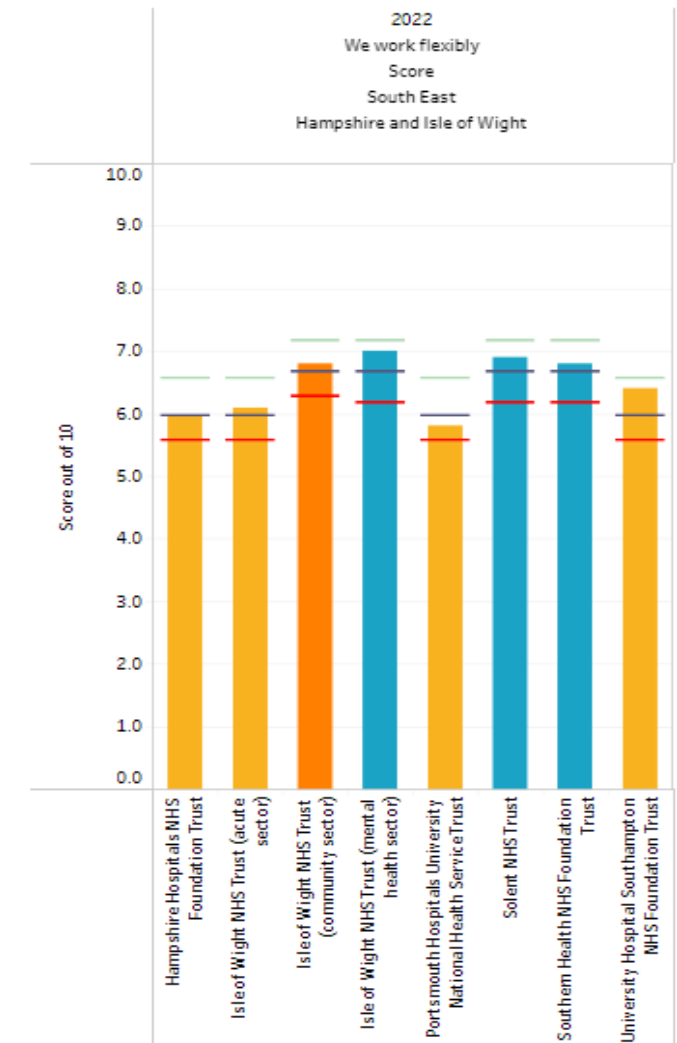
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Focus on Flex

Angela Murphy

HIOW Retention Programme

- Summer 2022: Report commissioned to look at drivers for retention

- Availability of flexible working a key factor, people told us:
  - Flexibility is offered at the managers discretion, and there are significant inconsistencies.
  - Flexibility is fought for, not default.
  - Flexibility is largely restricted to flexible scheduling rather than broader conceptualisations including task (which part of the job) or relational (who working with) or location flexibility.

- Staff survey – not bad but could be better

- ESR – Work life balance consistently the top recorded reason for leaving

2022
We work flexibly
Score
South East
Hampshire and Isle of Wight

What could we deliver at scale that would have relevance across all sectors of our system?

Engaged Timewise to address the following:

- Job design – how to practically approach this to adapt roles to enable our staff to work flexibly?
- Manager engagement – enabling managers to adopt and embrace flexible working across all parts of the organisations where flexibility is seen as a key part of our organisations cultures which is valued and embedded.
- Team based rostering – a toolkit and guidance on how to deliver team based rostering
- Webinars and other creative digital resources that managers and staff can access across the wide geographical spread of our system

- A programme that helps to bring flexible working to life by helping to frame conversations and address practical considerations for the individual, the service, the wider team
- Case studies of successful examples of flexible working from within Hampshire and Isle of Wight and further afield.
- Training materials and practical resources that can be held and used again locally within the system to aid continuous training and development needs in the future.

FOCUS ON FLEX

- HR Workshop developing flex job design capabilities

- Webinars for managers covering
    - Patient facing teams
    - Rostered teams
    - Non-patient facing teams

- Resources
    - Managing a flexible team
    - Employee guide to flexing where you work
    - Having effective conversations about flex
    - Guide to self & team based rostering

- People Portal www.hiowpeople.nhs.uk

- System working
    - Collaborating and learning from each other
    - Reducing duplication
    - Everyone working towards the same goal, not competing

NHS

Hampshire and Isle of Wight
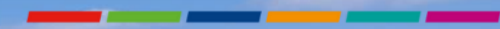
Any questions?

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Self Rostering
University College London Hospitals NHS Foundation Trust

Inge Cordner – Lead Nurse N&M Workforce

Claire Stranack – HR Business Partner

NHS
University College London Hospitals
NHS Foundation Trust

uclh

Background
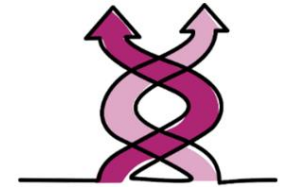
- **External drivers**:
  - The NHS People Plan and People Promise
  - Updates to Agenda for Change terms in September 2021
  - December 2019 Government commitment to increase number of nurses by 50,000 by 2024/5

- **Internal drivers**:
  - Focus on flexible working as a recruitment and retention tool particularly for 24 hour areas
  - History of self rostering but without the systems to enable this
  - Implementation of HealthRoster

Why rostering?

- New HealthRoster system implemented gave us an opportunity to think about how technology could support flexibility

- Rostering is something that is for everyone – we had feedback from staff that you needed a 'reason' for flexible working such as childcare responsibilities

- Combines increased input from employees regarding their own working hours with meeting their organization's occupancy requirements

Why nursing?

- 24 hour areas unable to access the wide variance of flexible working types due to operational constraints

- Interest from some of our Matrons and Ward Sisters in self rostering as a solution

- Evidence from literature that self rostering could help unlock flexibility for these staff groups

Our approach

Ward Selection- why we chose these areas:
- 1. Each board represented
- 2. Size of the wards
- 3. Engagement to take part in the pilot
- 4. One ward was part of a previous pilot

Pilot Wards:
UCH T08 Floor 8 Adults Inpats (68.25 WTE)
NHNN Bernard Sunley (41.55 WTE)
UCH T09 Central (32.74 WTE)
UCH T09 North (32.74 WTE)

Literature on self rostering indicates it is most effective in wards with under 35 staff (Silvestro, 2000)
Team rostering is recommended for larger wards of 35-70

Timewise involvement
- Dedicated resource to support the roll out
- Expertise and experience in rolling out self rostering in other NHS Trusts
- Worked with NHS England to produce the Flexible Working Guides
- Has existing tools and templates to reduce internal burden – share learning

uclh

Our approach

Research (May / June)
- Research conversations with ward staff to understand the current position
- Review of our policies to think about how self rostering would work in the UCLH context

Pilot design – one design for all 3 wards (June / July)
- Identification of a pilot are in each board
- Engagement with ward to start thinking about parameters for the project
- Creation of a self rostering hub on MyUCLH with guidance for staff

Leadership and ward engagement / training (July)
- Discussion with wards about rostering rules and what new flexibility we could offer through the pilot
- Consideration to support required centrally – drop in sessions from roster team, regular check ins with representatives from Corporate Nursing and Workforce

Pilot – 3 wards simultaneously (July onwards)
- Baseline survey to understand the current position of current satisfaction with flexible working
- Check in sessions with wards pre-launch
- Promotional materials shared with wards

Evaluation and recommendations
- Review of rostering data to understand requests that could not be met
- Engagement with ward teams to understand the experience from a managerial and user perspective

Uptake data

Row Labels	Staff In post (ESR)	Staff notavailable to self roster	Staff who can self roster	Number of staff making requests			% staff requesting		
				November	December	January	November	December	January
NHNN Bernard Sunley									
HCA Band 2	7	2	5	1	0	1	20%	0%	20%
HCA Band 3	2	0	2	1	1	1	50%	50%	50%
HCA Band 4	4	0	4	2	3	2	50%	75%	50%
RN Band 5	19	1	18	11	12	8	61%	67%	44%
RN Band 6	6	1	5	5	4	5	100%	80%	100%
Totals	**38**	**4**	**34**	**20**	**20**	**17**	**59%**	**59%**	**50%**
UCH T08 Floor 8 Adults Inpats									
HCA Band 2	13	0	13	3	7	5	23%	23%	38%
HCA Band 3	8	0	8	6	6	5	75%	75%	63%
RN Band 5	26	0	26	13	15	12	50%	50%	46%
RN Band 6	16	0	16	12	13	10	75%	75%	63%
RNA Band 3	2	0	2	1	1	1	50%	50%	50%
TNA Band 3	1	0	1	1	0	0	100%	100%	0%
Totals	**66**	**0**	**66**	**36**	**42**	**33**	**55%**	**64%**	**50%**
UCH T09 Floor 9 Central									
HCA Band 2	13	2	11	10	10	8	91%	91%	73%
RN Band 5	12	2	10	9	5	7	90%	50%	70%
RN Band 6	9	3	6	6	5	5	100%	83%	83%
Totals	**34**	**7**	**27**	**25**	**20**	**20**	**80%**	**74%**	**74%**
UCH T09 Floor 9 North									
HCA Band 2	12	1	11	4	5	5	36%	45%	45%
RN Band 5	10	0	10	8	8	8	80%	80%	80%
RN Band 6	8	1	7	4	5	5	57%	71%	71%
Totals	**30**	**0**	**30**	**16**	**18**	**18**	**53%**	**60%**	**60%**
Grand totals	168	11	157	97	100	88	62%	64%	56%

Outcome of shift requests

	November				December			
	Shifts Requested	Shifts Rejected	Percentage Rejected	Percentage Approved	Shifts Requested	Shifts Rejected	Percentage Rejected	Percentage Approved
NHNN Bernard Sunley	206	23	11%	89%	183	22	12%	88%
UCH T08 Floor 8 Adults Inpats	323	98	30%	70%	376	86	23%	77%
UCH T09 Floor 9 Central	190	35	18%	82%	181	22	12%	88%
UCH T09 Floor 9 North	110	44	40%	60%	164	50	30%	70%
Totals	**829**	**200**	**24%**	**76%**	**904**	**180**	**20%**	**80%**

- Overall percentage of approved requests is high and increased for all wards from Nov to Dec with exception of Bernard Sunley

- Data is not yet available for January – we will obtain this once rosters are approved

- We will also continue to monitor usage, and will be doing further analysis for an evaluation paper, to explore any patterns in the outcome of shift requests by Band.

Challenges: Expectation vs Realisation

Pitfalls for staff	Pitfalls for organisation	Realised?
Shortages of key staff makes it less flexible	Existing management culture may be challenged by control of roster being devolved to staff	
Reluctance to use computer to input preferences	Presence of individual staff members may be less predictable.	
Selfish behaviour and pressure from other staff	**Staff avoiding certain shifts/responsibilities (NIC)**	
Ward demands, e.g., skill mix, may be overlooked	Service covered safely	
Ward managed for convenience of staff		
Arbitrary first come, first served ruling	**Restricted by technology e.g. when shifts are available for booking**	
May not result in a balanced roster overall		
Can't cope with complex rostering problems		
Overhead of training all staff to understand rostering problem		

Successes: Expectation vs Realisation

Benefits for staff	Benefits for organisation	Realised?
More control over the scheduling of their own working lives	Diffusing conflicts over shift allocation	
A stronger voice in planning team activity	Enabling a better match between staffing levels and delivery of care	
Team spirit improve because of having to work together	Reducing reliance on bank and agency	
Attending appointments without losing whole shift	**Encouraging development of stronger team spirit**	
Improved Morale, Nurtures team-work and co-operation	Improving retention – once staff have worked in a self-rostering system very few want to give it up	
Ward manager time better spent on supervisory role	**Reducing time spent by ward manager rostering**	
Line managers are spared the pressure of allocating staff		
More discretion to be at work for significant events in patient care	For patient: ● Better motivated staff ● More effective use of finite resources	

Where next?

- Evaluation of current pilot is underway

- Considering:
  - Trust wide roll out (Excluding ED and ITU)
  - Other staff groups – estates and facilities

- On-going support to our pilot areas to embed self rostering

- On-going monitoring required by the organisation

Questions

Breakout room discussions

A chance to network and discuss...

1. What progress have you seen in relation to flex?

2. What is still to do?

3. What will help make this happen?

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Share your thoughts from your breakout rooms

Browser: www.menti.com

Code: 1381 1855

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Thank you for attending

Any questions?

info@timewise.co.uk

𝕏   @Timewise_UK

in   @Timewise

Scan the code &
share your story of
flex in healthcare

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Appendix

Further information from the NHS England Flex team including a list of resources

Our work to date

1. Setting intent
- Changes to NHS Terms and Conditions Handbook
- Creation of Definitions and Principles for Flexible Working
- Flexible working options included in NHS Jobs and Trac
- Flexible working options included in ESR

Context:
- Pandemic
- Elective recovery
- Financial and workforce challenges
- Ambitious transformation agenda

3. Collaboration with key stakeholders to support delivery of flexible working including;
- E-rostering
- Pensions
- Health and Wellbeing
- Retention

4. Comms and engagement
- Focus on Flex Initiative
- Flexible working network

2. Practical Support
- Line Manager & Individual toolkits
- Webinars and recordings
- Case studies
- Flex for the Future development programme

5. Data & evidence
- Staff survey & People Pulse Survey
- Exemplar Programme (5 key areas of focus)
- Literature review

1
2
3
4
5

Staff survey

We work Flexibly national average 6.1/10 - unchanged* compared to 2021

Opportunities for FW patterns – 54.1% in 2021 moving to 54.4% satisfied/very satisfied in 2022

My organisation is committed to helping me balance my work and family life – 44.4% in 2021 moving to 45.7% in 2022 agree/strong agree.

I achieve a good balance between my work life and home life – 52.1% in 2021 and 52.5% in 2022.

I can approach my immediate manager to talk openly about FW – 66.9% in 2021 to 68.5% in 2022 – agree/strongly agree
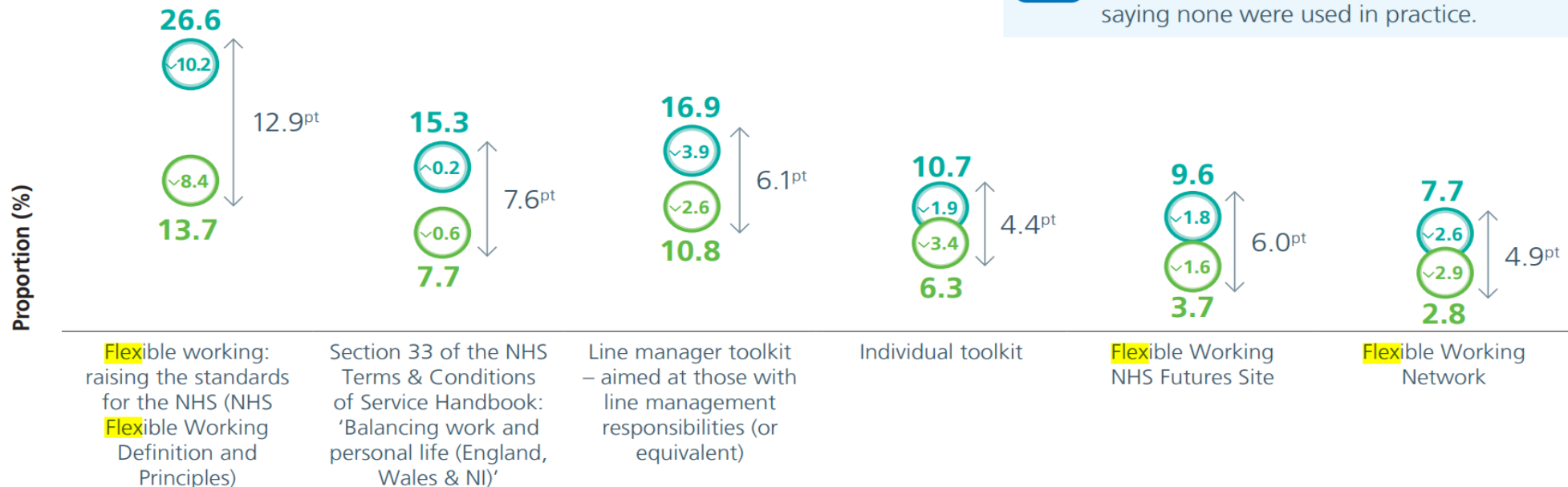
People Pulse Survey (Sept 2023)
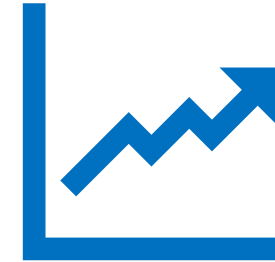
We are flexible: Flexible working resources

○ Aware   ○ Used in practice   ⌄⌃ vs. Wave 39 (June '23)

59.4% of staff were unaware of any of these working resources, with 73.2% saying none were used in practice.

Proportion (%)

26.6 ⌄10.2	15.3 ⌃0.2	16.9 ⌄3.9	10.7 ⌄1.9	9.6 ⌄1.8	7.7 ⌄2.6
12.9pt	7.6pt	6.1pt	4.4pt	6.0pt	4.9pt
⌄8.4 13.7	⌄0.6 7.7	⌄2.6 10.8	⌄3.4 6.3	⌄1.6 3.7	⌄2.9 2.8

Flexible working: raising the standards for the NHS (NHS Flexible Working Definition and Principles)

Section 33 of the NHS Terms & Conditions of Service Handbook: 'Balancing work and personal life (England, Wales & NI)'

Line manager toolkit – aimed at those with line management responsibilities (or equivalent)

Individual toolkit

Flexible Working NHS Futures Site

Flexible Working Network

Leaver rates in Exemplar organisations

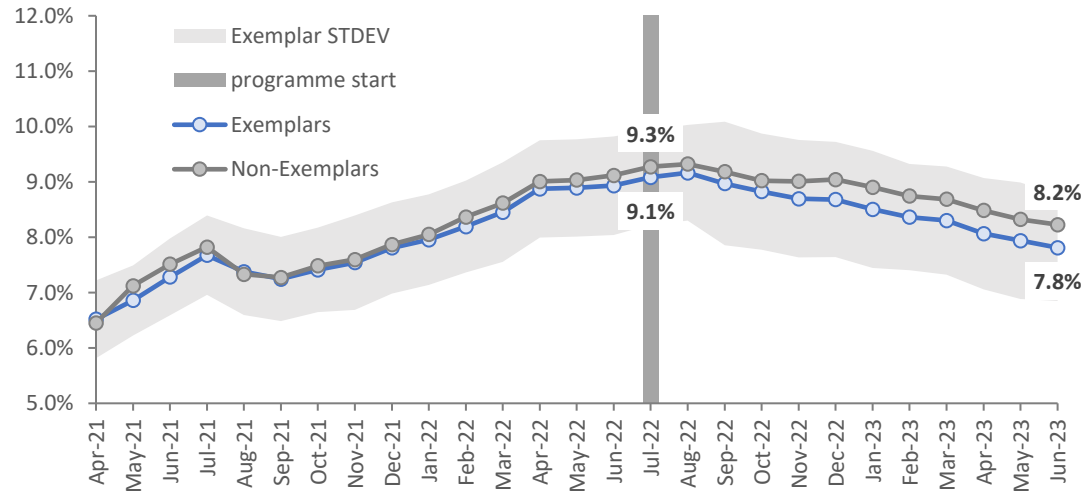**Nursing (N50k) leaver rate** in Exemplar vs Non-Exemplar orgs

All staff leaver rate in Exemplar vs Non-Exemplar orgs
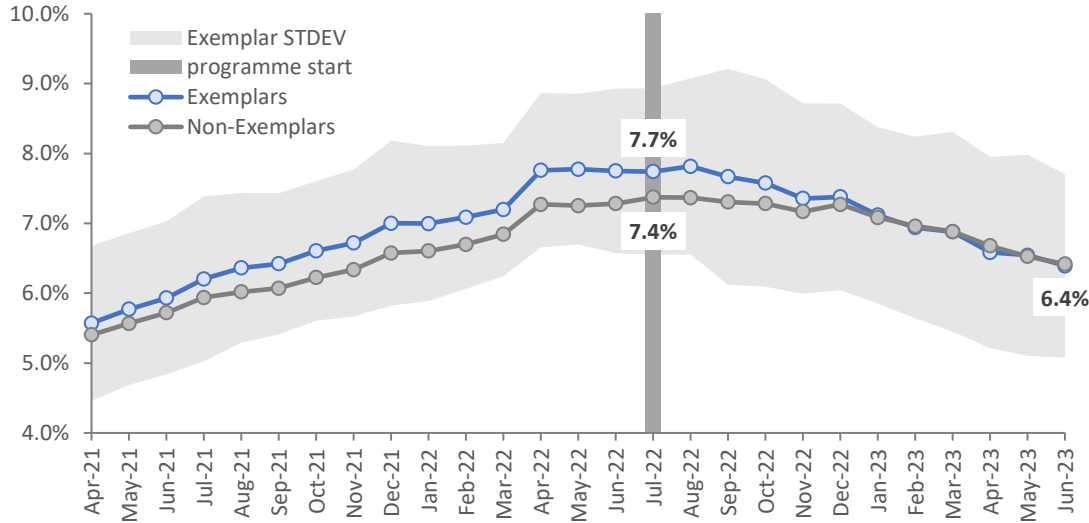
Nursing leaver rate

- **Prior** to the programme starting, the 23 **Exemplar** organisations had **slightly higher**, **nursing leaver rates** to **non-Exemplar** orgs. Both groups were on an upward trajectory.
- After the **programme initiated (Jul-22)**, the **Exemplar leaver rate has decreased 1.3 percentage points** (pp) from 7.7 to 6.4%, whereas the **non-Exemplar group has decreased less, by 1.0pp** (7.4 to 6.4%).
- It is important to look at what is happening in **each individual Exemplar.** We have conducted a **fully controlled evaluation** using Difference in Differences analysis which found a significant impact of the programme after five months. We will be refreshing this analysis with the latest data.

All staff leaver rate

- **Prior** to the programme starting, the 23 **Exemplar** organisations had **similar all staff leaver rates** to **non-Exemplar** orgs. Both groups were on an upward trajectory.
- **After** the programme initiated (Jul-22), all staff **Exemplar** rates appear to be **declining faster**: they have **reduced 1.3 pp**, compared to **1.0 pp for non-Exemplars.**

*non-Exemplar organisation leaver rate differs to national rates due to excluding the Exemplar organisations to do the comparison
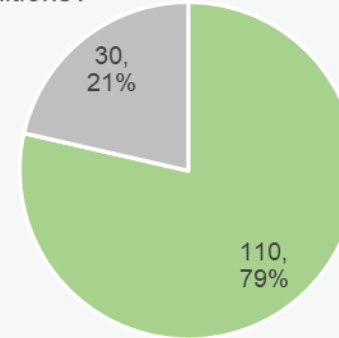
ICS Retention Returns

- **50% of organisations have a board level flexible working champion; 79% have communicated flex changes to terms and conditions; and 45% track applications for flexible working and outcomes.**

- Tracking applications for flexible working ranges from 33% of organisations on the South West to 61% in the South East.
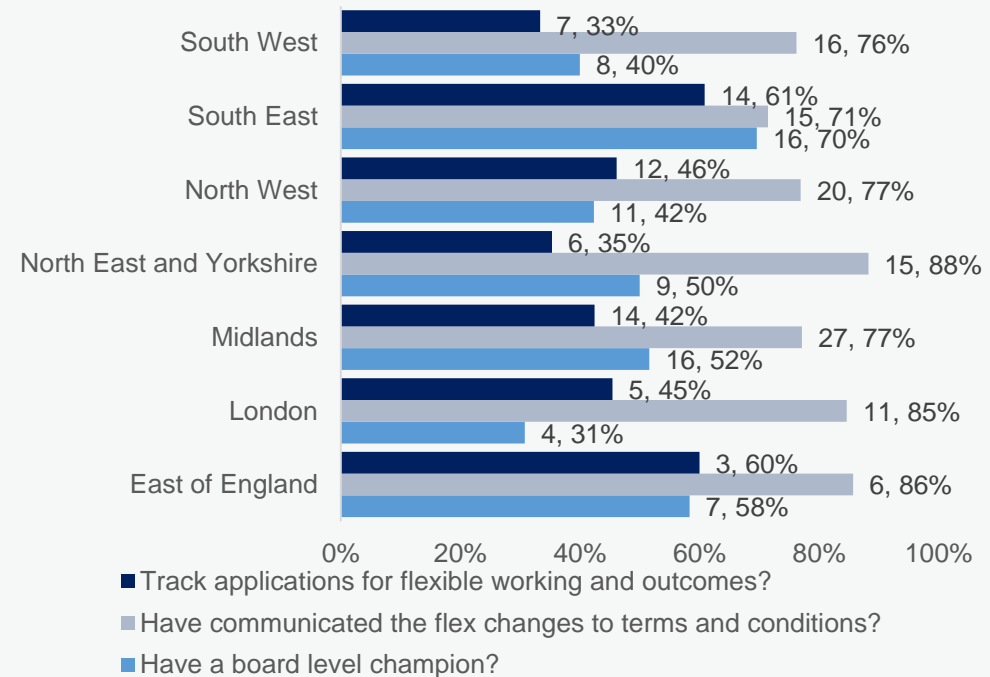
Have a board level champion?
- Yes
- No

71, 50%
72, 50%
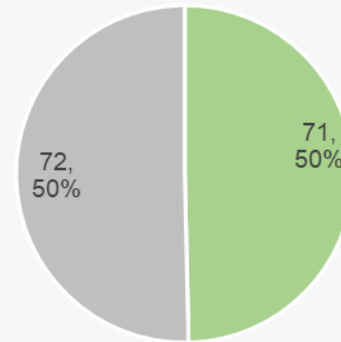
Have communicated the flex changes to terms and conditions?
- Yes
- No

30, 21%
110, 79%

Track applications for flexible working and outcomes?
- Yes
- No

61, 45%
75, 55%

South West
7, 33%
16, 76%
8, 40%

South East
14, 61%
15, 71%
16, 70%

North West
12, 46%
20, 77%
11, 42%

North East and Yorkshire
6, 35%
15, 88%
9, 50%

Midlands
14, 42%
27, 77%
16, 52%

London
5, 45%
11, 85%
4, 31%

East of England
3, 60%
6, 86%
7, 58%

0% 20% 40% 60% 80% 100%

- Track applications for flexible working and outcomes?
- Have communicated the flex changes to terms and conditions?
- Have a board level champion?

%s are number of organisations by response excluding unknowns and N/As

2023/24

Implementing Flexible Working resources : through a robust and innovative communications plan
Look back, Look forward impact report: Evaluation of the impact of the Flexible Working Team during the year 23/24

Influence a flexible working culture

Case studies and practice in action:
- Identifying and sharing best practice
- Identifying impact and RoI in FW Working
- Raising awareness
- Driving investment in FW initiatives.

Network:
- Grow awareness of Flexible Working and drive implementation.
- Create a robust network to help inform, support and champion the work of the FW team.

Drive consistency in practice

Assessment and make recommendations to improve existing data: across NHS platforms against the following usability criteria:
- Accessibility
- Quality:
- Completeness

Flexible Working Dashboard: Establishing a flexible working reporting dashboard and supporting engagement plan

Promote the **5 key interventions** that enable the implementation of Flexible Working (Exemplars)

Enable and empower our stakeholders to implement

Developing our senior leaders to lead flexible working locally by role modelling and enabling from the top

Developing leaders, managers and teams competence and confidence to implement flexible working conversations at a local level

Collaborate with partners to agree a national approach to commonly reported FW knotty issues

NHS Long Term Workforce Plan
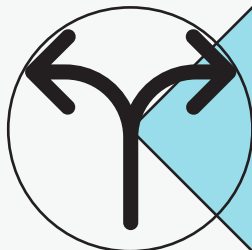
Identified 3 key priorities

Train – Grow the workforce

- Expanding domestic education, training & recruitment will mean more healthcare professionals will be working in the NHS.

Retain - Embed the right culture and improve retention

- Improving culture, leadership and wellbeing will ensure up to 130,000 fewer staff leave the NHS over the next 15 years.

Reform Working and training differently.

- New roles within the multidisciplinary team and digital innovations will enhance service delivery, allowing

NHS Long Term Workforce Plan

Retain - Embed the right culture and improve retention

• Improving culture, leadership and wellbeing will ensure up to 130,000 fewer staff leave the NHS over the next 15 years.

Reduce the overall leaver rate for NHS employed staff from 9.1% in 2022 to between 7.4% and 8.2% over the course of the modelling period. This is equivalent to retaining 55,000–128,000 FTEs:

- Significant improvements in retention will depend on a **changed culture** across the NHS and more flexible working options

- Every staff member should be given the opportunity for **regular conversations** to discuss their wellbeing and what will keep them in work

- Across the NHS, staff want opportunities to work more flexibly and we know delivering this is key to attracting and retaining talent. This is also true for **learners**

- We need to evolve our approach to **different employment models and shift patterns** to fully embed a culture of flexible working.

- Our ambition is that the NHS continues to go **beyond statutory requirements** in terms of flexible working.

- Opportunities for organisations to work closely with system partners to **consider flexible working options for every job** and clearly communicate these to staff.

- Organisations and systems should ensure **e-rostering and e-rostering metrics** are regularly reviewed at board level.

Resources – Flexible Working

NHS

The foundations	Contractual changes to section 33 of the [NHS Terms & Conditions of Service Handbook](#)
	NHS Staff Council's guide to support making flexible working policy changes: [Guidance for joint uninon-employer partnerships on reviewing flexible working policies](#)
	[NHS Flexible Working Definition and Principles](#) (published by NHS England, Feb 2022)
Learning and development	[Line manager](#) and [Individual](#) toolkits.
	NHS Flex for the Future programme resources ([Flexible Working NHS Futures Site](#)) – including slides, booklets and handouts.
	Flexible Working Network join via [weworkflexibly@nhs.net](#)
E-rostering and team rostering	Resources on e-job planning software and benchmarking progress available on NHSE website ([E-Rostering and E-Job Planning](#))
	Level of Attainment checklist ([Advancing Levels of Attainment Handbook 2022](#))
	[Resources on team-based rostering](#) including team rostering [case study](#)
	[Timewise guide](#) to team-rostering for nurses
Data and systems	[NHS Staff Survey](#) data and [a blog](#) to help accessing it and what to consider
	NHS Jobs and TRAC functionality to advertise each role with clear flexible working options
	[Recording](#) on using ESR functionality to record flexible working requests. Includes an exit questionnaire
Pensions & flexible retirement	Information and support on [Flexible Retirement](#) and [Retire & Return](#)
Case for change	Draft [Case for Change](#) template
	[Cost calculator -](#) An MS Excel tool to help identify potential cost savings and measure return on investment from retention initiatives
	The NHS Flex for the Future programme has a [data analysis and capture tool](#) and there is a [template dashboard](#) available on for organisations to use (to be tested with Exemplar Sites

Scan QR code to access Flexible Working NHS Futures site.

People Promise

Masterclasses and Webinars – Flexible Working

Changing the culture	2021 webinar: Supporting your team to work flexibly
	2021 webinar: Flexible working in the NHS: How to ask
	Hear from CEO Joe Harrison (Milton Keynes NHS FT)
EDI	Understanding Multigenerational Teams: how to be flexible and thrive
	Addressing Cultural Barriers to Flexible Working
ESR	Flexible Working on ESR
Advertising	Advertising with Flex Webinar
Retention	Flexible Working Masterclass: Nursing & Midwifery Retention
Flexible retirement:	Flexible Working for nurses, midwives and AHPs: Pensions and Flexible Retirement webinar
E-rostering	Flexible Working Midwifery Masterclass
	Webinars on Flexible working (focus on e-rostering) and team-based rostering
	Flexible Working and Rostering for Ward and Rota Managers
Flexible Working Network	Network meeting recordings exploring a range of subjects and speakers **Next meeting: 22nd January 2024**

Scan QR code to access Flexible Working NHS Futures site.

People Promise