NHS Employers
Part of the NHS Confederation

ENABLERS TO FLEXIBLE WORKING AND FLEXIBLE RETIREMENT

Webinar 29th September

TODAY'S SPEAKERS

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LET'S CONTINUE THE CONVERSATION

Flexible working – continuing the conversation
15 October 2020 10.30am – 12.00pm

You will have the opportunity to:

- hear from FlexNHS about the social movement to increase flexible working opportunities for everyone in the NHS, regardless of role, grade or profession.

- take part in informal discussions with other colleagues about what needs to happen next to further increase options for flexible working.

- consider what the actions in the People Plan mean for flexible working.

- establish what support we need from each other and from different parts of the system moving forward.

NHS EMPLOYERS RESOURCES

NHS Employers has developed a suite of resources aimed at colleagues that have a responsibility or interest in implementing flexible working, including HR professionals and line managers.
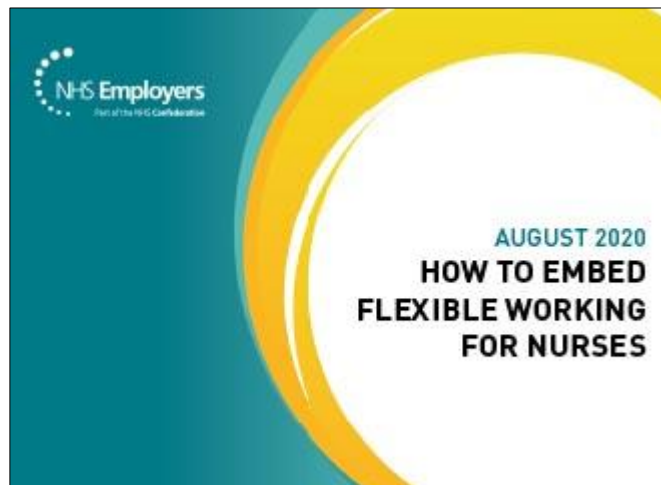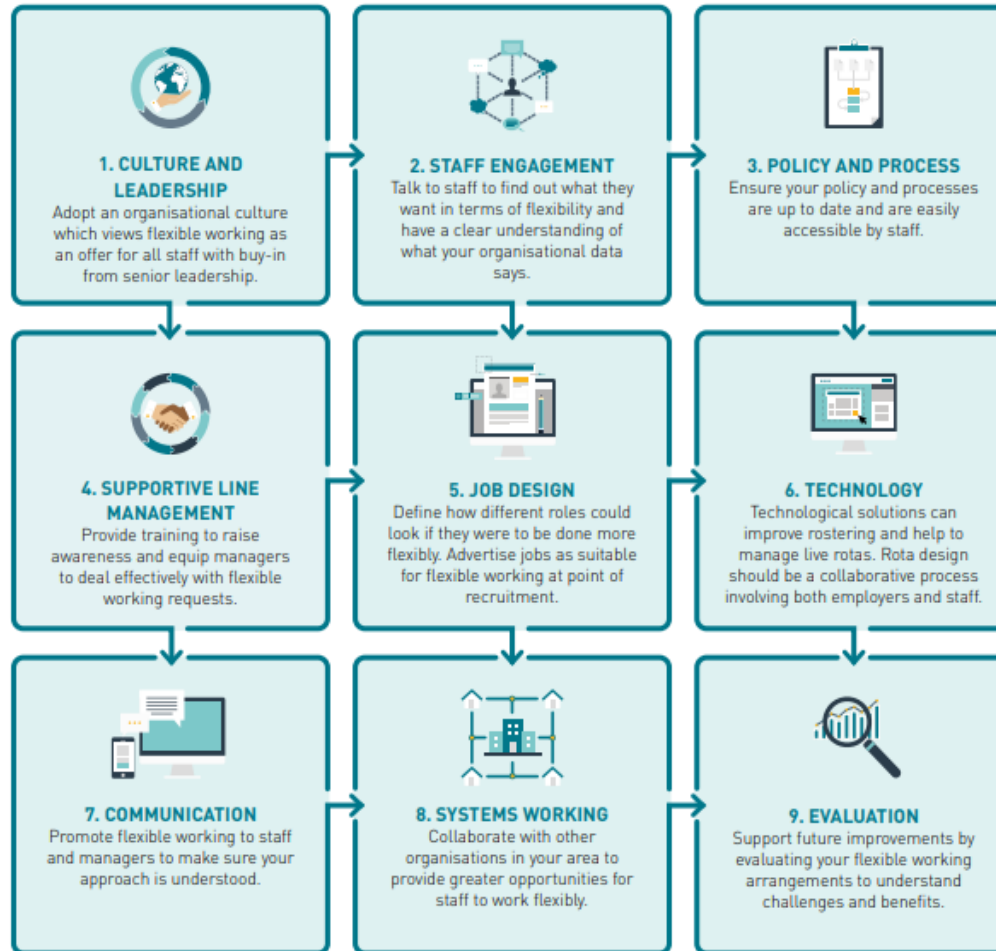

Flexible working guide
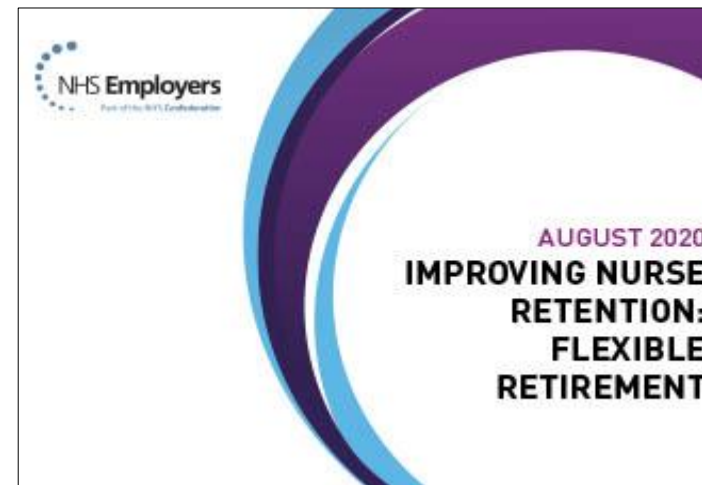
Flexible retirement guide
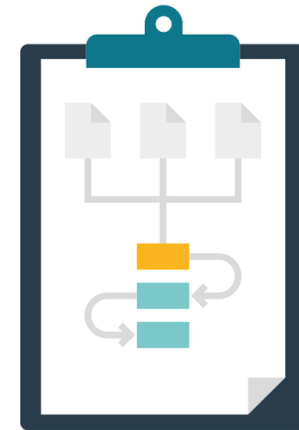
ENABLERS TO FLEXIBLE WORKING

CULTURE AND LEADERSHIP

STAFF ENGAGEMENT

POLICY AND PROCESS

SUPPORTIVE LINE MANAGEMENT

JOB DESIGN

TECHNOLOGY
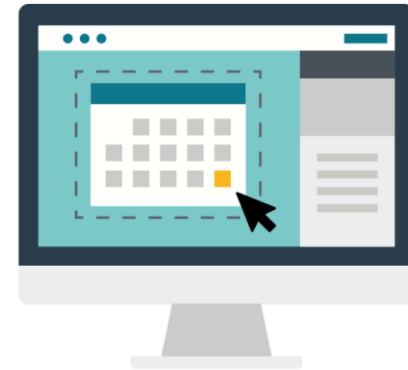
COMMUNICATION

SYSTEMS WORKING

EVALUATION

How our staff helped us improve our turnover and work more flexibly

Tameside & Glossop Integrated Care NHS Foundation Trust

Who are we?

- Combined general acute and community Foundation NHS Trust

- Employ approximately 4,200 staff

- Rated "good" by the Care Quality Commission

- Higher sickness and turnover than peer groups (NHSi data) but slightly better Staff Survey scores (Staff Survey 2019)

Our story

- We were identified as one of 20 Trusts in country with higher than average turnover rate for registered nursing staff.
- Registered nurse turnover was reported as 16.1% by NHSi
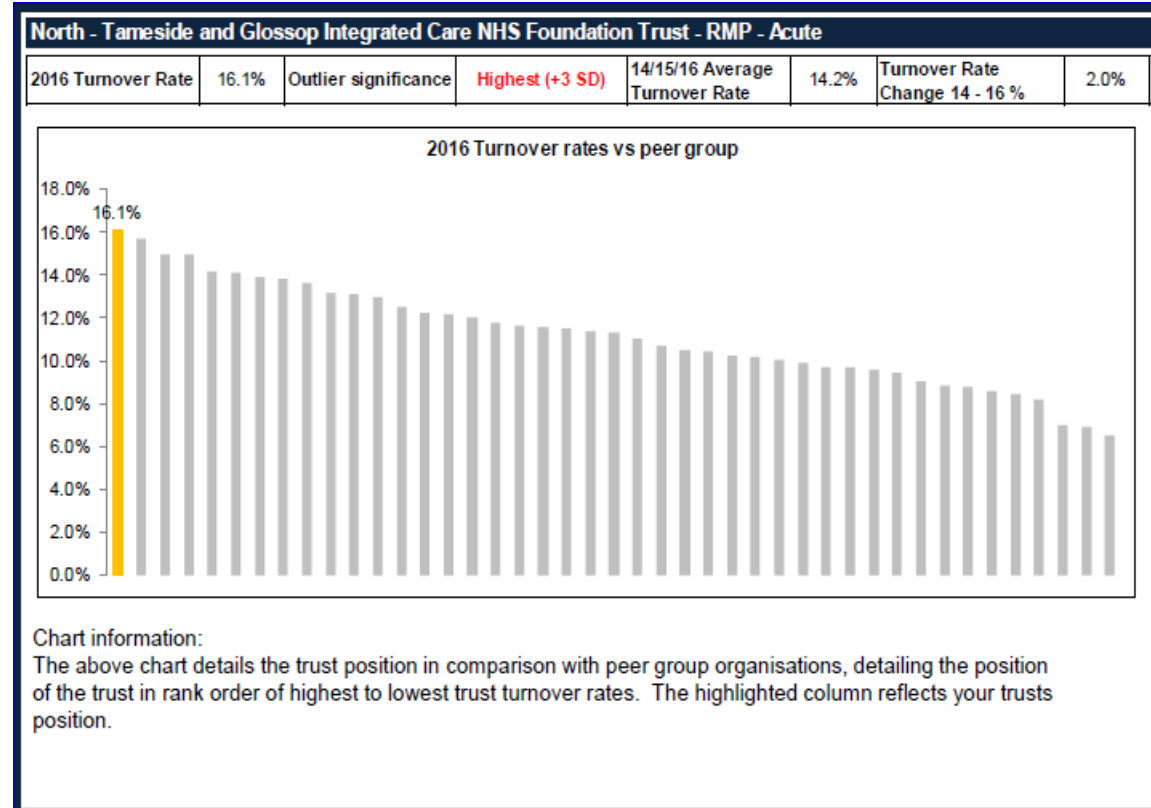- NHSi invited the Trust to be in first wave of a national programme for improving retention across the NHS
- We created and submitted an Action Plan turnover target of 11.5%

North - Tameside and Glossop Integrated Care NHS Foundation Trust - RMP - Acute							
2016 Turnover Rate	16.1%	Outlier significance	Highest (+3 SD)	14/15/16 Average Turnover Rate	14.2%	Turnover Rate Change 14 - 16 %	2.0%

2016 Turnover rates vs peer group

16.1%

Chart information:
The above chart details the trust position in comparison with peer group organisations, detailing the position of the trust in rank order of highest to lowest trust turnover rates. The highlighted column reflects your trusts position.

Why were our nurses leaving?

The diagnosis?

- ESR data – biggest reasons for leaving were "unknown", "relocation" and "work/life balance"

- We set up an electronic exit questionnaire process and did phone calls to registered nurse leavers to get more detail

- Focus groups in areas with low turnover, low sickness and high engagement – what was making them stay?

- "Work/life blend"/flexible working was a key theme through all

What did we/our managers think?

"Let's pilot self rostering, other Trusts have done it"

"Let's look at having roster 12 weeks in advance"

"Everyone will want to work flexibly, we won't be able to cover anything"

"Everyone wants set shift patterns"

What did our staff tell us?

"It's not always about set shifts but knowing I can speak to my manager if I need flexibility"

"We don't want roster 12 weeks in advance, it makes it difficult to plan"

"We want an improvement in the % of rosters being approved on time "

"We would prefer not to do self rostering, we just want fair rostering with adequate notice"

"I needed to work differently as I got older but there wasn't the option"

Flexible working – what did we do?

- Developed Management Training which focused on compassionate leadership, including supporting work-life balance

- Accreditation scheme for roster approval, bronze/silver/gold for number of months where roster were approved on time

- Promoted flexible working for older workers to managers – shorter shifts, reduced hours

- Piloted self rostering in 2 ward areas
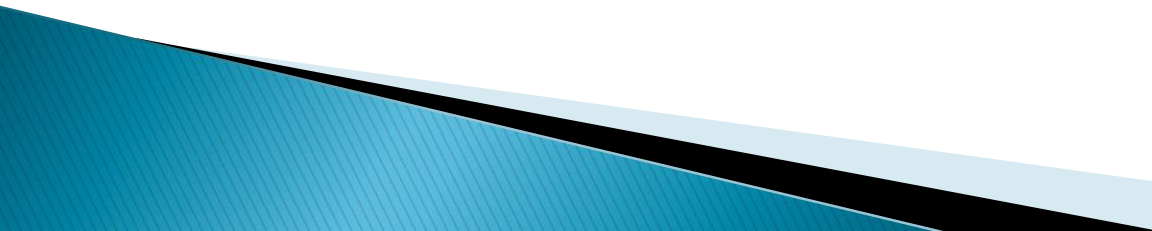
Where we are now

- Overall nurse turnover 10.8% most recent data (12.8% Band 5)

- Reduction in the amount of leavers citing work-life balance as a factor (but it still happens)

- Slight increase in uptake on retire and returns/flexible retirement

Learning from us

- Listen without preconceptions – staff are your greater enabler and they have the answers

- It takes time and confidence – keep encouraging managers to take chances

- Eyeball the elephants in the room – what if flexible working does cause staffing issues or unrest? How will you manage this?

- If the rule book says no, do you need a different rule book?

Next steps

- Work still to do – focus groups ongoing with Ward Managers and Deputy Director of Nursing to look at different options

- Project to commence looking at supporting older workers, how can we be more innovative?

- Ongoing work with Timewise, hoping to become Timewise accredited

- More work to do with nurse leaders – just launched a competency based ASPIRE leadership programme

Flexible working

New ways of working for all colleagues in the NHS

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- Pre Covid project

- What we know so far

- Transitioning to a new way of working

- Phase 3 recovery considerations and opportunities

- Shaping a new flexible workforce

- Questions, discussion and thoughts

Pre Covid project

- To raise the profile of how to agree team based flexible options fairly
- To utilise the current rostering system to support variations of flexible working
- To utilise technology to enable remote and home work
- To increase retention and lower stress related sickness absence
- To form part of a new attraction package

Pre Covid project

- 6 month completion of FW trial - Trelawney Outpatients, Recruitment, Histopathology

Trelawney Outpatients implemented team-based rostering with Sister of unit. Outpatient staff are given more flexibility with how they work and can fully input their working patterns with the department Sister to ensure clinics are safely staffed and patient flow through the department is smooth and efficient

Recruitment implemented compressed hours and extended their service times to allow staggered start and finish times. Information taken directly from the applicant tracking system TRAC, showed an increase in Recruitment Team productivity with some care groups, with the time taken for the ID Check process to be fully completed decreasing by a cumulative total of 12 days

Histopathology implemented team based rostering and service hours extended to allow staff to rotate through labs smoother. In terms of productivity, managers reported that due to staff being able to flex their time, samples are being processed up to 3 hours quicker than before. Senior managers from this service area report that workflow continues to be more efficient

Pre Covid project

- 3 month initial phase - Clinical Coding (CDC), L & D clinical, Specialist Medicine Med Sec's

CDC working remotely on a 1 in 8 weekly rotation.
All staff members have the functionality to work from home. Hours have started to be extended, including Saturdays (no enhancement so keeps within budget). Staff looking at extending working patterns further.

L & D clinical planning to reduce staff on Monday
to allow flexibility but still delivering key training and induction only. Currently working to the end of Winter pressure phase. Aim is to get staff onto a 9 day fortnight pattern.

Med Secs – Spec Medicine, awaiting enabling equipment through desktop swap scheme but Service Manager and CAL already approving staff to work from home 1/5 days a week to overcome overcrowding.
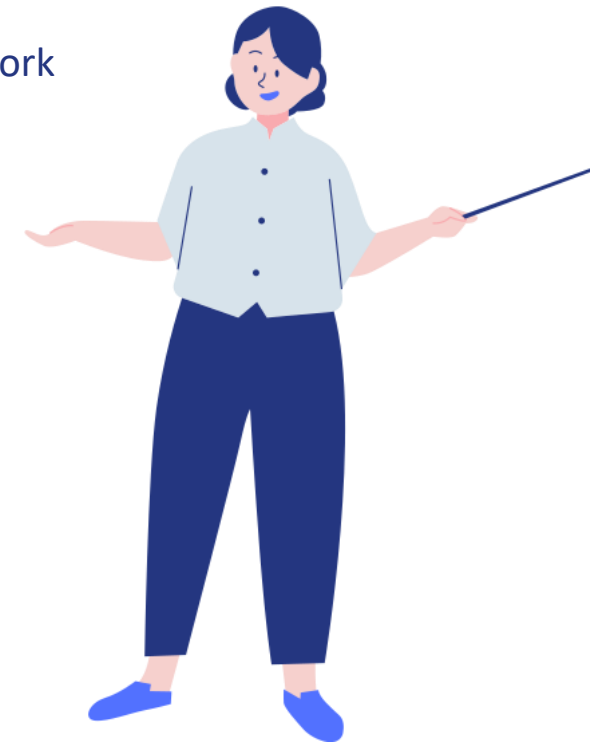
What we know so far

- 70 % of staff in the early adopting areas felt they have more opportunities now for flexible working. This is an increase of 39% when staff were asked the same question pre-implementation

- 71% of staff stated they were happy with their current level of flexible working

- 65% of staff reported they were happier in work since trialing flexibility

- 79% Staff feel they have been supported by their line managers with flexible working compared with 32% when we first began

- Productivity has increased

- Staff feel more motivated and engaged

- Staff better understand their service needs
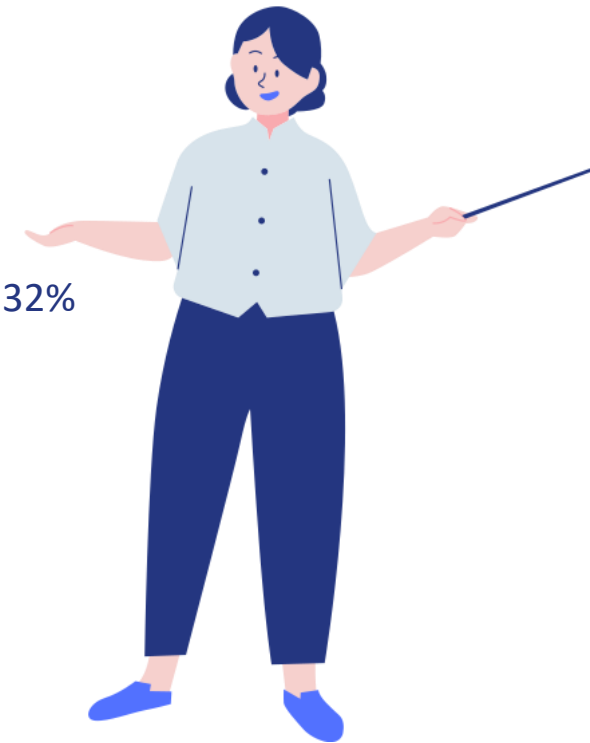
What we know so far

Martin Crump from Evolution Development ran a survey last week about working from home during the lockdown.

- 7% of the staff plan to return to 'normal' post lockdown e.g.; returning to an office based place of work
- 75% found they were more productive working from home
- 78% felt more satisfied with the new way of working
- 63% felt more motivated to start their day compared to their usual way of working

Q4. Do you feel that working from home makes you more productive, or less?

More productive — 75%

Less productive — 25%

0   25   50   75   100

EVOLUTION-DEVELOPMENT.COM

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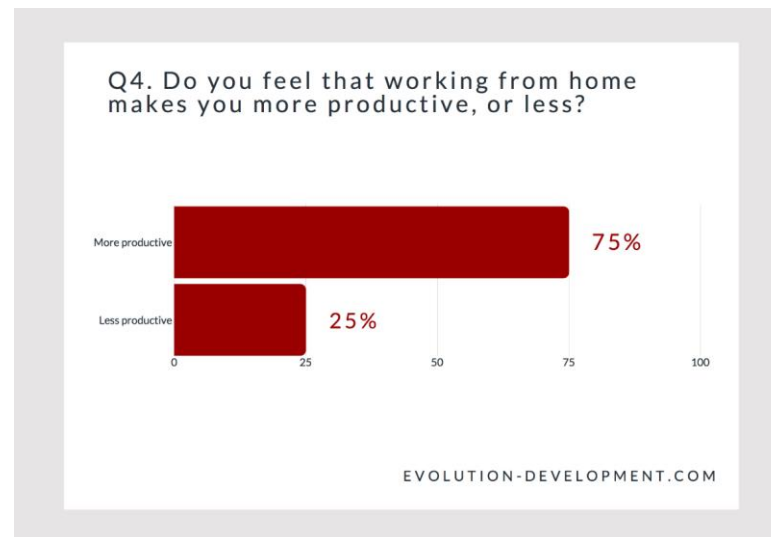
Transitioning to a new way of working

We need to consider the wider implications of making changes and need to be asking;

- How do we meet the needs of our employees' for social interaction?
- How do we ensure our colleagues working remote and from home have the same level of care for their mental health and wellbeing than our colleagues on site?
- How do we best create environments that allow their creativity ? i.e., when could they work V's when should they work
- How do we ensure that colleagues are rewarded the same, continue to be motivated and engaged ?

We have put together a comprehensive Remote and Working from Home guide that should help alleviate some of the stresses that can be faced with useful resources and tips.

We have updated our E-roster Policy to including flexible working.
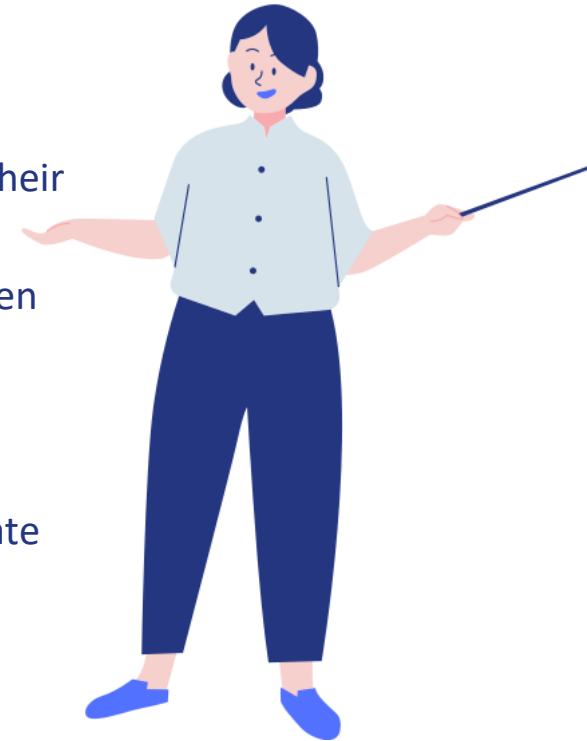
Phase 3 recovery considerations

- How and what services are to be delivered ?

- What workforce is required to deliver services ?

- What impact does social distancing have on workforce numbers delivering services ?

- How will workforce compliment service delivery model ? (if reduced beds, or clinics what staff mix is needed at any given time; what do work patterns look like; how do people work; what does this mean for policy, and practice

- What work needs to be done to scope staff to space ration (taking into account social distancing)?

- How will we measure productivity of remote and homeworkers?

- What plans will be in place to allow staff to be called in during an escalation? (e.g., for staff redeployment)

- How do we take in to account safe staffing in line with roster requirements vs patient acuity?

Phase 3 recovery - possible opportunities

Possible opportunities

- Virtual clinics and better use of MS Teams

- Better utilising current assets e.g. buildings, land, underused office

  spaces

- If staff are redeployed, utilise safe care better to avoid over staffing and

  over crowding

- Agree remote and home working to mitigate overcrowding in offices

- Impact on Corporate Social Responsibility (CSR)

- And others...... ?

Practicalities

- Managers of services to complete a checklist

  (social distancing, home work guidance, risk assessments)

- Managers will decide their own service KPIs to monitor productivity

  without the need for presenteeism

- Use quarterly pulse check surveys to measure impact

- Review policies , Governance and emergency planning

- Develop a Trust wide framework for flexible working - clinical and

  non- clinical

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Shaping a new flexible workforce

- To understand that this is a long term solution and sustainable way of working

- To accept a there will be a difficult transition period

- To develop robust policies and procedures to enable flexible approaches to working that supports all staff (clinical and non-clinical tool kits)

- Make the NHS a great place to work by promoting and encouraging greater work-life balance opportunities for all staff

- Support our strategic goals of maintaining brilliant care

- Enable improvements to support patient safety and outcomes, and service delivery

- Continue to build positive relationships with our customers or stakeholders whilst working in different ways

QUESTIONS AND ANSWERS

Please type your questions for our speakers in the chat box

WHAT NEXT

Join us for our upcoming discussion:

Flexible working – continuing the conversation

15 October 2020 10.30am – 12.00pm

In case you missed it, catch up on last week's webinar recording:

Flexible working in the aftermath of the pandemic