

AUGUST 2020 SURVEY REPORT

Nurses' views on flexible working

CAPTURING NURSES' VIEWS AND EXPERIENCE OF

FLEXIBLE WORKING

NHS Employers' retention programme sought the views of nurses and midwives to better understand attitudes and arrangements around flexible working in the NHS.

A survey was created to gather the views of nurses, to understand the enablers and barriers to flexible working, and how examples of success could be replicated at scale.

The survey looked specifically at the opportunities available to nurses and what their employers can do to support a more flexible approach to working.

The survey

The survey went live on 5 March 2020 and was open for responses until 5 April 2020.

It was promoted through several channels, including:

- a latest news story on the NHS Employers website
- social media promotion on LinkedIn and the @NHSEmployers and @NHSE_WFS Twitter accounts
- shared in NHS Employers' workforce bulletin
- ✓ a Nursing Times online article and social media promotion.

Although the survey remained open for the whole month that it was intended, active promotion of the survey ceased mid-March due to the COVID-19 pandemic affecting priorities across the NHS and therefore consequently engagement activity.

There was a total of 101 respondents overall and two were removed from the data analysis due to them not working in a nursing role, equalling 99 responses to report on.

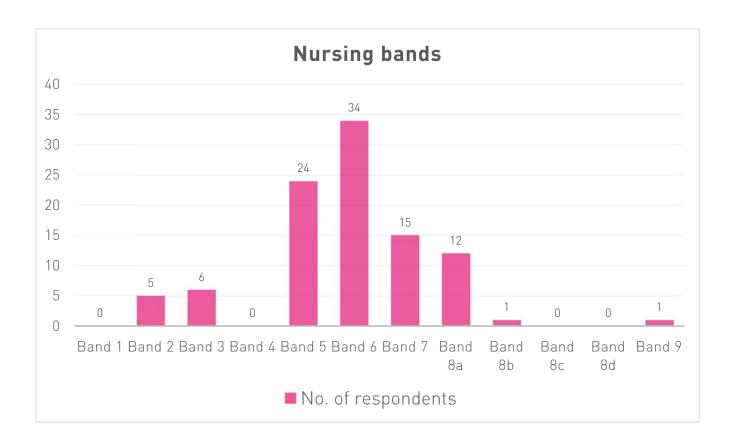
Q1) WHAT IS YOUR JOB TITLE?

There were 20 different nursing roles that the respondents identified as, with the majority being staff nurse (23 per cent), senior staff nurse (12 per cent), sister (10 per cent) and health visitor (9 per cent).

- Staff nurse = 23
- Other = 25
 - Trainee nursing associate = 3
 - Head of safeguarding = 2
 - Health visitor = 9
 - Psychotherapist = 1
 - Director of nursing = 1
 - Community staff nurse = 1
 - Lead nurse = 1
 - Nurse manager = 1
 - Clinical educator = 2
- Senior staff nurse = 12
- Research nurse = 1
- Healthcare support worker = 7
- Ward clerk = 1
- Midwife = 5
- Matron = 1
- Sister = 10
- Nursing associate = 1
- Clinical nurse specialist = 7
- Advanced nurse practitioner = 6

"Flexible working should be considered wherever possible as it helps to create a workforce that feels equipped to juggle the demands of everyday life and work."

Q2) WHAT NURSING BAND ARE YOU?



Q3) WHAT DOES FLEXIBLE WORKING MEAN TO YOU?

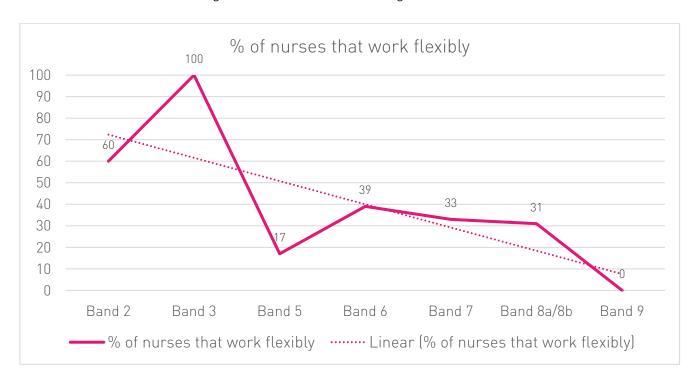
Respondents were given three suggested options to relate to and the opportunity to input their own response in an 'other' box.

The majority of respondents ticked the reasons on offer equally across the three when asked what does flexible working mean to you, with 32 per cent choosing 'A fixed working pattern with predictable shifts', 29 per cent 'A mixture of different shifts, week to week' and 29 per cent saying 'The autonomy to decide your own start and finish times'. The remaining 10 per cent suggested other options within the themes of working from home, self-rostering, being bank staff and that it is of line manager discretion.

Q4) DO YOU CURRENTLY WORK A FLEXIBLE PATTERN?

Out of the respondents, 37 per cent already have a flexible working pattern in place, with the remaining 63 per cent not.

Correlation between nursing band and flexible working:



Within each of the bands, the number of respondents that said they currently work flexibly showed that it is more likely for those in a lower band to work flexibly compared to the middle and higher bands.

Q5A) WHAT TYPE OF FLEXIBLE WORKING PATTERN DO YOU WORK?

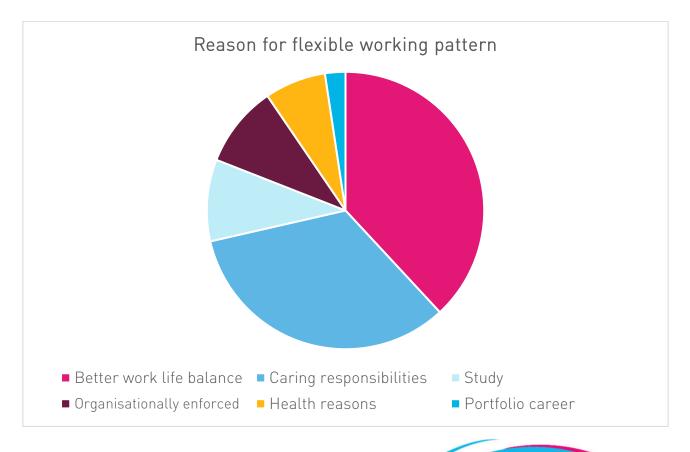
Of the nurses that responded to having a flexible working pattern in place, there were five variations of which the nurses use:

- 49 per cent are part time
- 33 per cent have compressed hours of some sort (e.g. four-day week, nine-day fortnight)
- 12 per cent are bank staff
- 3 per cent use flexi-time
- 3 per cent have annualised hours.

Out of the options suggested, none of the nurses have a job-sharing agreement or term time contract.

Q5B) WHY DID YOU CHOOSE TO WORK IN A FLEXIBLE PATTERN?

The same sample size gave six different reasons for working a flexible working pattern. Most of the respondents answered for better work life balance (38 per cent) or caring responsibilities (33 per cent). Other reasons included for study (10 per cent), that it is organisationally enforced (10 per cent), for health reasons (7 per cent) and that an individual has a portfolio career (2 per cent).

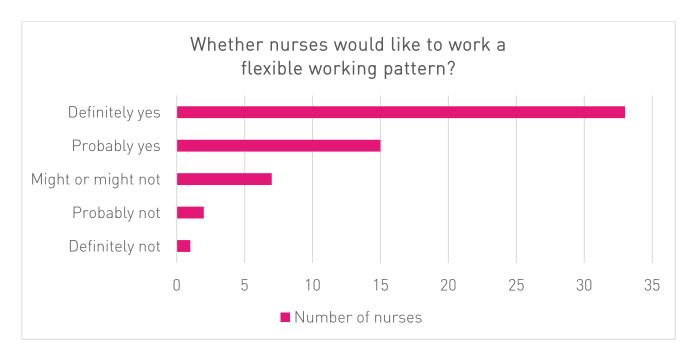


The respondents that answered yes to question four and gave answers to the previous two questions then went straight onto question nine. The following three questions were answered by the 63 per cent of respondents that answered 'no' as to whether they currently worked flexibly.

"If I had a flexible
working pattern, I would
be able to work more
hours. Unfortunately,
over the last few years
I've had to gradually
reduce my hours more
and more to be able to
work around my
commitments."

Q6) WOULD YOU LIKE TO WORK A FLEXIBLE WORKING PATTERN?

Of the nurses not currently working a flexible working pattern, 83 per cent said they definitely or probably would like to, 12 per cent may or may not want to and 5 per cent probably or definitely would not like to work a flexible working pattern.



Q7) FOR YOU, WHAT WOULD BE THE BENEFITS OF FLEXIBLE WORKING?

42 per cent of the nurses that do not currently work a flexible working pattern said they would expect to see the benefit of an improved work life balance if they had a flexible working pattern, 30 per cent would be able to fulfil caring responsibilities, for 16 per cent of the respondents it would better suit their extracurricular activities or hobbies and 12 per cent would have the time to complete studies or further qualifications.

Therefore, for the same reasons that the nurses that currently do have a flexible working pattern in place, match the benefits that those who currently do not work flexibly would expect to see if they did.

Q8) WHAT DO YOU THINK ARE THE BARRIERS FOR YOU TO WORK A FLEXIBLE WORKING PATTERN?

When asked about the barriers to them working a flexible working pattern, the nurses outlined a variety of issues that they currently face:

- 35 per cent saying that it is down to staffing issues and the fact that there is not enough staff to cover shifts
- 23 per cent stating that there is no organisational policy to support flexible working
- 22 per cent having a line manager that is not supportive in allowing nurses to work flexibly
- 19 per cent based on hierarchy of needs and that some get precedence over others
- the final 1 per cent does not want to.

Q9) DO YOU HAVE ANY FURTHER COMMENTS YOU WOULD LIKE TO ADD ABOUT FLEXIBLE WORKING?

29 of the nurses that responded made further comments about flexible working, these seemed to fit into four general themes for employers to consider when thinking about supporting flexible working for the nursing workforce.

- Regardless of the reason for the request, employers should be more open to flexible working for nurses to support their needs. When considering these requests employers need to be fair across their approach to flexible working and ensure that the same opportunities are available to all nurses
- 2. Even when the service or organisation states support for flexible working, this may not generally be translated on the ground and the experiences that nurses have. Employers should raise awareness internally and provide support for line managers that may not currently be there.

"There needs to be a balance for the individual and the service and one person's flexible working should not impact on others."

- 3. When flexible working for nurses is not supported, it is affecting the way that nurses currently in the workforce work and when they retire. Many nurses have to cut the hours that they work or work as bank staff rather than permanent to be able to fit around their lives.
- 4. Finally, employers should know that flexible working would increase staff retention, improve work life balance, make them a more attractive employer and ultimately improve the quality of patient care.

APPENDIX

Q3) Full text answers

- Ability to discuss with managers your work pattern
- A mixture of the first two options. It doesn't have to be totally fixed but with some option to have a say over your shifts
- Ultimately at the whim of the line manager and their particular mood that week. One day per week set aside to have a flexible day whether its needed or not
- Core times to attend with flexi in place
- The ability to be able to consider a variety of options, base to work from. With flexibility to ensure service needs are met but also to support home-life balance during these times
- Working from home
- Being able to request specific days/shifts to work (within set guidance so it is fair to colleagues)
- Being open to work whenever required and knowing that work patterns can change
- Working designated number of hours mainly within a 8.30 5.30 working day but flexibly to work outside of those hours if the role demands. To work from base and agile
- Everybody else being able to work what suits them while I cover there shifts
- Provide the correct number of hours are worked over and agreed period
- Being able to come off a shift if there is not enough demand for the amount of staff
- Working remote once a week normally and starting and finishing visits from home.
 Writing up at home after a later visit. Now with coronavirus we are making all visits telephone consultations in base or at home. This is a challenge at any rate but with conference calls using interpreters when not being face to face with them is difficult, though necessary
- The ability to have set days off for a specific not using your requests
- Having set nights off
- The autonomy to decide in your own shifts or a rolling 7-week Rota e.g. working Monday, Tuesday, Wednesday this week means you'll work Tuesday, Wednesday, Thursday next week
- Can include regular hours with the ability to extend and shorten to still equate to set number a week, if needed for work tasks and home life
- The possibility to work from home
- This suits my situation as childcare providers are not flexible
- Hours that suit the family
- A discussion that allows staff to work shifts that allow a good work/life balance. For some that will be agreed fixed shifts a week, for others it will be adjusting start and finish times, for some the ability to work the hours differently each week
- Option to discuss condensed hours or flexi time so long as the service needs are met

Q9) Full text answers

- I had a saddle pulmonary embolism almost two years ago, I was told by the Respiratory Consultant it could take 2yrs + to fully recover. I am almost at 2yrs post PE, I am unable to work more than six hours due to overwhelming fatigue, the staff Bank said there was nothing they could do shift wise to help, If I wanted to stay on the Bank I had to accept longer shifts or leave. That was in October, thankfully I have 95 pension which I was able to take on my 60th birthday in February. Not the way I thought my many years of service would end.
- There needs to be a balance for the individual and the service and one person's flexible working should not impact on others who then get the worst pattern.
- My flexible working is a verbal agreement with my manager only. She would not
 agree to a formalised flexible working arrangement for anyone in our department.
 Where she has held to keeping me on certain days there is stress that this could just
 suddenly change especially if something happened to her.
- If I had a working pattern, I would be able to work more hours. Unfortunately, over the last few years I've had to gradually reduce my hours more and more to be able to work around my children and getting them to and from school. I've repeatedly asked for a more regular work pattern so I could employ a nanny or childminder as they need set days, but I have been declined. The reason is childcare is not a work problem and if I can't work the hours then I can't do the job. This has left me with no choice but to reduce my hours from full time to currently 27 hours p/w. It's a mockery though as the ward is often needing to cover using agency which I could cover if I had a regular work pattern.
- The annualized hours have a huge impact on work life balance in a way that it is not flexible in a way that it was originally discussed, it means working on planned days off. It means the trust can expect hours as no contract was changed.
- It feels that the key messages from NHS England are about the importance of flexibility and supporting work-life balance whilst absolutely ensuring service is not compromised however this is not translating to the experience as an employee making this request.
- I understand the need for flexible working contracts and believe this is the way forward however with this in mind I know the difficulties this poses when doing the off duty. Flexible working needs to be flexible within reason for example if an individual can only work certain days or hours then they should not be available for agency shifts at other times. Flexible working contracts need to be fair not only for those needing them but also those who don't require one, these individuals also need to have a degree of flexibility and the right to request / get given a fair share of the shifts available for example nights and weekends. Flexible working contracts need to be reviewed periodically to ensure their need and fairness.

- Flexible working would increase staff retention, improve work life balance and ultimately the quality of patient care
- Flexible working should be undertaken wherever possible (i.e. workload demands) as
 it helps to create a workforce that feels equipped to juggle the demands of everyday
 life and work
- Although we have FW policy and it happens elsewhere in the trust due to our manager the entire team was denied FW
- Applies to people who are woman with kids, same rules don't apply to men with kids when their life goes wrong and they find they have childcare, caring for elderly or mentally ill family members responsibility. If it hadn't been my personal experience wouldn't have believed it
- Flexible working appears to be prioritised for childcare or illness/disability i believe age should also be prioritised as we are all expected to work longer flexible working may enable this
- It's important to be equitable about flexibility for all staff.
- I had to stop working on wards due to having a child with additional needs who could not adapt to my varying working pattern, therefore, I decided to train to be a health visitor. I love this role but equally loved working on EMU and it was said that on the acute site a more regular patter could not be offered.
- Remote working is suitable some of the time for some roles. However, if teams do
 not meet on a regular basis this adds to communication barriers and a lack of team
 bonding.
- it works for myself and my team, but I would not like my flexible working to impacted on my team and patients
- Most managers give it lip service. They see it as an inconvenience. Many either don't understand what can be done to support it or aren't interested in exploring it further because of that.
- Flexible working is looked at as a negative aspect though we have policy to follow. I
 feel policy drawn are also too rigid. It does not show flexibility in a compassion way.
- Nurses with health problems are hounded out of their jobs, despite no sick time being taken. This because they are unable to work alone. My NHS employer has a draconian work ethic that is coupled with Victorian values that have no place in today's working life. The band 7 managers all work office hours with all weekends off!
- Members of staff with children get the shifts they need to fit in with their childcare. Leaving those of us without children to pick up the rest of the shifts which are usually evenings, weekends and nights. Meaning those of us who work these shifts for very little time with family/friends as we constantly work the majority of the unsociable hours. Which means we miss out on many events as it is difficult to swap shifts.
- I was a ward manager for many years in the 80s and 90s and always managed to allow my staff to have what they needed, whilst still managing to cover the ward safely. There was absolutely no way I would have asked them to work a combination of days and nights within the same week, as that is outrageous. If managers don't

- have the skills to do this, they're in the wrong job. I think that the number one reason for lack of flexibility around days worked is attitude. Employers and managers still think they're in the driving seat and as a result, staff are voting with their feet
- It would make the NHS a competitive employer and, if correctly implemented, could support staff wellbeing, retention and reputation of workplace
- NHS needs to be more flexible for people with childcare
- The trust I observe is the opposite of encouraging flexible working. What trusts say, what they publicly encourage, versus what is said behind closed doors are very different. There are penalties in place for moving to flexible work (part time hours), specifically, a downgrade in banding. That is effectively a demotion and pay cut. The culture of flexible work in the NHS needs to be deeper rooted into the organisation. It is very superficial at the moment.
- Just to be able balance y life a bit better. For example, have an hour extra in bed and work an hour later at the end of the day. Be able to work from home a little more although generally my manager is usually happy with this. For the establishment to recognise the extra hours I put in and not to feel awkward about asking for the TOIL. I'm happy to say that I am able to support my own staff with this as much as the establishment will allow me.
- When submitting a flexible working request to work a 9 day fortnight my manger immediately rejected Ed it and told me 'that's the same as me giving you an extra 24 day annual leave a year' Actually it would make a massive difference to me- I'm a single parent of an autistic teen and also the main career for elderly parents- I spend my weekends 'working'
- If there was flexible working, then I would happily be a permanent staff with the NHS other than agency work / bank staff but that hinders myself and many other nurses that I know of
- I am 56 yrs. old. I have had reasonable adjustments made through flexible working which means I am still doing the same number of hours per month but by increasing my daily hours by 45 mins, I get every other Friday off. This has made a huge difference to my work life balance and I am less tired and far more productive
- A question about the Length of shift worked would have been useful in this survey.
 Personally, I struggle with the 7.30am til 20.00pm shift which is enforced where I work. I prefer the traditional 7.30 til 15.30 shifts i.e. 7.5hrs not 11.5hrs