



Produced for the NHS by Timewise – www.timewise.co.uk



Flexible Working – Job Design

Guidance notes for completing flexible working analysis by role

This job design tool is designed to help you identify what types of flexibility are likely to be possible in the different roles across the organisation, and what operational changes may need to be made to the design of the roles to enable flexible working arrangements to be successful.

Please use this tool to identify the types of flexible working options that are possible for a role type, and the job design changes or other considerations that are needed to enable these. There are three steps to analysing flexible working for a role:

Step 1 – Review the role

Step 2 – Identify where there is flexibility about how the role is done

Step 3 – Summarise your ideas about which flexible working options could be applied to this role

This tool will help you to analyse the role, and you can then capture the outcomes of your analysis on the 'Job Design Flexible Options by role' section (Step 3). You will be able to use this as a starting point for conversations about flexibility, and individual arrangements and share as appropriate with colleagues.



You may want to use this tool to help you respond to an individual's request for flexibility, or proactively think about what types of flexibility could be offered e.g. when advertising a vacancy, or talking to the team about ways of working.

Step 1 – Review the role

There are two main sets of questions here, which you need to consider for each role that you are analysing:

Activities:

- What are the main activities and responsibilities within the role?
- How are they currently done, with whom, and where?
- How much time do they take up?
- Are they fixed or variable in volume?

Relationships:

- Who are the key stakeholder groups for the role? These can be colleagues within the same team/specialism and elsewhere within the organisation, patients, families, external stakeholders.
- How often does the role holder interact with them?
- When, how and why does this interaction need to take place? E.g. are there particular times of day / week / month, in person or by phone / virtual etc. Please use the next table below to capture your thoughts with regard to each question.



Step 2 – Identify where there is flexibility in how the role is done

Please use your answers to **Step 1** above together with the questions below to help identify where there are opportunities for flexibility in how this role is completed.

a) Flexibility in ‘When’ – considering what flexibility about times/days of work is possible

When-based flexibility refers to patterns in which the working day, week or year is adjusted. This includes patterns such as flexitime, compressed hours and annualised hours. It could include working reduced hours, such as working fewer days, shorter days, term-time only, job sharing and job splitting.

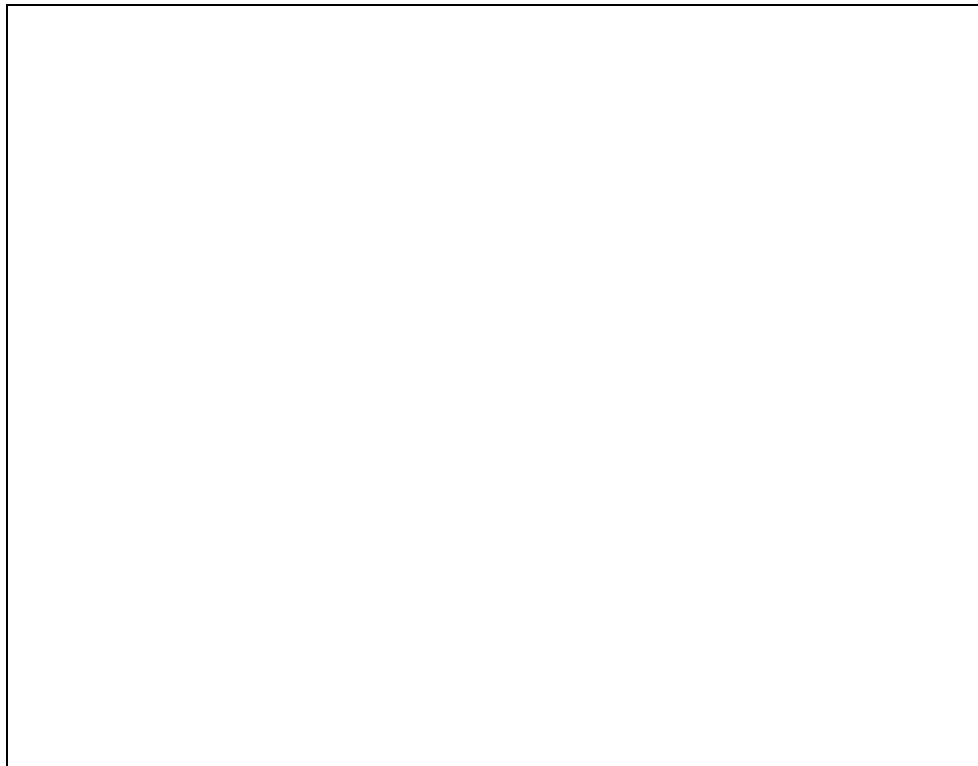
THINK CREATIVELY ABOUT WHEN WORK IS DONE

- What are the expectations of your patients / service users / colleagues / clients in terms of response time?
- Could alternative start/finish times / length of day or shift length be enabled in this role? Could this benefit the service?
- Are there core times when this role needs to work e.g. to attend key meetings or hold clinics?
- Are there peak times of activity during the day/week/month?
- Are there any important deadlines to be met?
- Are there key meetings during the week or briefings/handovers during the day that should be attended?
- Can anyone else provide cover if the individual is unavailable at certain times? Could they be briefed differently?
- Can you use technology to support different times of work and to keep people involved and informed?



b) Flexibility in ‘When’ – considering if part time (reduced hours/shifts) is possible

Job design is critical when considering any role, but particularly important to part-time working. Some roles will naturally be easier to reduce, for example by reducing the number of clinics or projects, but for other roles it is important to identify how the role can be reduced, either by reducing the workload or identifying who else could do the work. It is important to ensure the same development and stretch opportunities are given to part-time workers, or those working at different times, to ensure they are not disadvantaged by not being around all/every day. It is also important to ensure that staff are not missing out on receiving key communications and handovers.



REDUCE WORKLOAD

- What is the workload right now?
- Can any activities be stopped?
- Can responsibilities / deliverables be reduced?
- Can deadlines be delayed / timeframes extended?

FIND ALTERNATIVE RESOURCE

- Are other members of the team willing and able to support aspects of the work? Can this support development?
- What is the required staffing level & skill mix for the team?
- Could a job share or job split be formed? Is there anyone else in scope?
- Do you need to recruit backfill and how quickly can that be actioned?
- Can you advertise for specific work patterns to fill gaps or resource teams differently?
- Is there a minimum number of shifts per week that you would require people to work in this role e.g. to keep skills / knowledge up to date?



c) Flexibility in 'Where' – considering if remote working is possible

Whilst many of our NHS roles have to be undertaken in a fixed location, the COVID-19 pandemic illustrated that a surprising number of roles can embrace remote working for all or some of their week – including working from home. It has become a new normal for many people and has given us an introduction to remote working principles and practices. This section will help you identify if this role can accommodate a degree of working from home or another location, and think about what needs to be put in place to enable sharing of knowledge with others and team cohesion, as well as what technology might be needed.

Being clear about the type of activity that suits remote / virtual working, and the activities that are best done when physically together, will help you identify if a role can accommodate working remotely, and for what proportion of the week. Remember to factor in time for a team coming together physically to support cohesion and wellbeing also. Finally, think about how remote working interacts with other forms of flexibility – when and how much.

IDENTIFY WHAT ACTIVITY CAN BE DONE REMOTELY

- Who are the patients/colleagues/stakeholders for the role and what do they need/expect by way of presence?
- What are the potential benefits to your patients from remote or virtual working (e.g. they don't need to travel to the service or take time away from their work/caring responsibilities)?
- How will you measure the performance of this role in an outcomes-based way?
- How often does the whole team (which this role is part of) need to be physically together, in the same room, and what's the purpose of this time together?
- Which of the role activities are suited to remote working? Which require presence in a physical location such as an office, ward or GP practice?
- How much of this role do these activities take up?
- Are there any health and safety considerations?



We work
flexibly

- What equipment will be needed to perform this role remotely?
- How will the team communicate and share knowledge when not physically together?
- What practices have you adopted/could you adopt which support team cohesion, health and wellbeing when working remotely?
- How can you ensure regular feedback when working remotely, about performance, health and wellbeing and ways of working?



d) Flexibility in 'How' – different ways of planning and undertaking work

Whilst many NHS roles can be done remotely or with flexible hours, patient-facing and shift-based roles may require people to be present in specific locations at specific times, and so in order to redesign a role you may need to change the way the work is planned and delivered. We want to encourage all managers to be open-minded when it comes to considering creative ways to allow flexibility.

CAN YOU DESIGN THE WORK DIFFERENTLY?

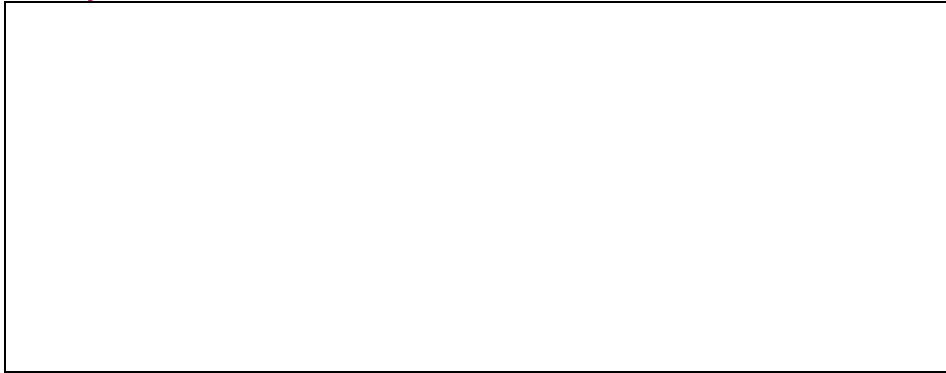
- Could a team-based rostering approach work for this team?
- Could a mixture of shift lengths work in this role/team?
- Could annualised hours be offered?
- Could talent be shared across teams?

A few examples:

- *Holding 1-2-1 appointments and clinics via phone or video conferencing to allow patients to be seen remotely*
- *Using e-rostering to allow teams greater choice and input to the scheduling*
- *Splitting shifts between two workers*
- *Using technical, remote solutions for certain activities including training and personal development*
- *Removing some of the 'rules' which have been applied locally to rostering but restrict individual choice e.g. to allow a 'nights only' pattern or working most weekends*
- *Annualising hours to enable people to scale up and down their shifts across the year, to meet activity peaks and suit personal needs*



We work
flexibly



- *Creating a '10-2' shift to provide cover during the busiest period on a ward, but also an attractive shift for someone who wants to work part-time working*
- *Opening up alternative shift lengths within a team, so workers who find a 12 hour shift a struggle can work a shorter shift, when they are needed most.*
- *Offering different shift lengths on different wards/sites/bases, so that there is more possibility of retaining talent within the organisation as their flexibility needs change*



Step 3 – Summarise recommendations for flexible working options applicable to the role

You may now wish to use your thinking and analysis above to complete the **Job Design Flexible Options Analysis by Role** table below to indicate which flexible working options should be considered for this role, and which are unlikely to work. This is particularly useful to record if you are doing this proactively rather than responding to a individual request for a particular type of flexibility.

On the form there is the opportunity to note down the parameters or considerations which you have identified through your analysis which will need to be in place to make this a success. These will be very useful for discussion with applicants/employees when they make an application for a particular type of flexible working in future.

Job Design Flexible Options Analysis by Role

Role title:			
	<i>Note if already in place for this role</i>	Able to offer? Y/N/poss	Parameters or considerations to make this a success (to be discussed by line managers and employee/applicant at point of flexible working application)
Part time hours			<i>Indicate briefly how work would be removed/reorganised from the role to enable a reduction of hours</i>
Job sharing			<i>e.g., handover time / working pattern</i>
Annualised hours			<i>e.g., when peaks & troughs of work are expected, or times when post holder needs to flex hours down during the year, specify parameters – min/max hours</i>



We work flexibly

Zero-hours contract			<i>Minimum guaranteed number of hours per week</i>
Bank hours contract			
Compressed hours			<i>Non-working day, minimum break times needed</i>
Term-time working			
Phased retirement			<i>Indicate over what time frame / impact on hours and/or role</i>
Remote working (all or part of the working week)			<i>e.g.: Possible to work from home, but will be needed in office for at least 2 days per week for xxx</i>
Unpaid leave			<i>e.g.: Applications to be reviewed in line with relevant policy</i>
Flexible start/finish times			<i>e.g.: Within window of x & y / or will start at xx:xx, need to agree how will be kept up to date with briefing</i>
Fixed shift pattern			
Other...			
Other...			



This Table is a reminder of several forms of flexible working in different NHS roles. Organisation policies can vary so please refer to your own Trust policy to ensure you have the right options for your team.

Informal	Formal
Non-contractual flexible working arrangement	Contractual flexible working arrangement
<p>These arrangements don't normally form part of the employment contract and are usually agreed between the individual and their line manager (or equivalent) as and when needed.</p>	<p>These arrangements normally form part of an employment contract as they can impact on pay, pension and/or annual leave calculations or have corporate governance implications. As such, they may require the involvement of an HR representative (or equivalent management arrangement) and individuals should be consulted before any changes to their agreed working arrangement is made.</p>
<p>Examples include:</p> <ul style="list-style-type: none"> • Swapping shifts/sessions • Mixing shifts/sessions (e.g., working some long and some short shifts/sessions) • Time off in lieu (TOIL) • Fixed shifts/sessions/schedules (e.g., individuals work days or nights only) • Rotating shift/session work (individuals rotate between different patterns, such as days and nights) • Split shift/session schedules (where an individual's working day is split into two or more parts with a rest period between. The rest period does not include paid breaks or allocated lunch periods) • Staggered hours where start, finish and lunch/break times can be variable (usually set around a period of 'core hours') • Working from home (where the individual has a defined office base but can work at home for part of their working week) 	<p>Examples include:</p> <ul style="list-style-type: none"> • Part time hours • Job sharing • Annualised hours • Zero-hours contract • Bank hours contract • Compressed hours • Term-time working • Phased retirement • Full-time home working (a role in which the individual spends all their working week based at home) • Mobile working (teleworking) which enables the individual to work from a different location for all or part of their working week • Unpaid leave • Sabbaticals • Purchase of extra holidays