# Barrier: An inconsistent approach to workplace flexibility

*Ambulance Victoria’s approach to workplace flexibility demonstrates varying understandings of, and attitudes towards, flexible work. This results in inconsistent and inequitable practices that contribute to cultural issues which hamper reform progress.*

## Why is this a barrier to reform?

During the Progress Evaluation Audit, the Commission heard from Ambulance Victoria’s operational workforce, managers and leaders that workplace flexibility is often viewed as a privilege for individuals and a problem for management – rather than as an opportunity for organisational benefit through improved employee work–life balance, diversity, engagement, satisfaction and retention.

The Commission also frequently heard that Ambulance Victoria’s inconsistent approach to flexibility is having a negative ripple effect across other areas of organisational reform. The Commission considers that accommodating the workforce’s flexibility needs will advance reform across many of the pervasive cultural issues that resulted in Phase 1 of the Commission’s Review and which the Progress Evaluation Audit has found to be continuing across the organisation.

Workplace flexibility is defined as ‘the ability of workers to make choices influencing when, where and for how long they engage in work-related tasks’.[[1]](#footnote-1) Legislation sets out the minimum standards for achieving workplace flexibility and key legal requirements are included in the *Equal Opportunity Act 2010* (Vic),the *Carer Recognition Act 2010* (Vic)and the *Fair Work Act 2009* (Vic)*.* The nature of workplace flexibility is different for each organisation and each individual person who accesses it. Some key features of workplace flexibility include flexible hours, person-centred rostering, part-time work, remote work, job-sharing and compressed hours.

## What are the impacts of this reform barrier for implementing the Review recommendations?

The current approach to flexibility may be a barrier to implementing the following recommendations:

* Recommendation 28: Removing structural barriers to career advancement: The Commission heard that the training program for Mobile Intensive Care Ambulance (MICA) paramedics, coupled with the work experience requirements, is difficult to manage for employees with caring responsibilities (most of whom are women). This has resulted in women having difficulty not only in gaining access to the program, but also in meaningfully participating in and completing the MICA training program.
* Recommendation 31: Implementing and tailoring the Think Flex First Framework: The Commission heard that the risk-averse nature of the organisation’s change-management approach and cumbersome administrative processes for accessing flexible work arrangements have been barriers to the implementation of flexible work initiatives such as introducing multiple roster types, part-time work options and effective transition-to-retirement processes. These initiatives would benefit all employees by allowing individuals to work in ways that suit their personal circumstances, in the short term and long term.
* Recommendation 33: Building knowledge, capability and accountability: Ambulance Victoria’s approach to flexibility has made it challenging to build a collective understanding of flexible work arrangements.
* Recommendations 36: Strengthening workplace equality education and training: Ambulance Victoria’s current flexibility approach contributes to persistent workforce attitudinal issues, which limits the effectiveness of workplace equality education and training.
* Recommendation 42: Organisational healing and cultural change through reflective practice: The Commission was told that Ambulance Victoria’s flexibility approach creates cultural divides where staff who have flexible work arrangements are seen to be unfairly advantaged. The Commission considers that this sort of divide holds back organisational healing.

Select the links above for further information on how this barrier impacts recommendation implementation.

## What are the impacts of this reform barrier for Ambulance Victoria’s workforce?

### Ambulance Victoria’s processes for accessing flexible work arrangements are complex and time-consuming

The Commission heard that the current process for applying for flexible work is complex, time-consuming and administratively laborious. In addition, managers often decline flexible work applications in the first instance as a means of testing which of the applicants ‘genuinely’ require a flexible work arrangement. These practices present clear structural barriers to accessing flexible work arrangements for people with some disabilities, as is detailed further in Reform Barrier: Archetypes – Diversity and Inclusion.

### Lack of choice and access to incentives to enable flexible work disadvantages some members of the Ambulance Victoria workforce

During the Progress Evaluation Audit, the Commission heard that flexibility is seen to be a privilege afforded to those who ‘really need it’ or have a legal basis for their request. This disadvantages people who require flexible working arrangements for intermittent reasons, such as to accommodate cultural practices. This dynamic can inform social prejudices against people who have had their requests approved and acts as a barrier that encourages people to choose unsociable shifts so as to be part of roster solutions.

*There's no incentivisation or acknowledgement or recognition of working unsociable hours or weekend impact or those sorts of things. And I think, culturally, that creates a challenge because there's a perception that if somebody is working flexibly on a Monday and Tuesday because that meets their needs, people see it is unfair and unreasonable when you're getting paid the same as I am and I'm working Saturday night shift, you know, so that that kind of creates some of that cultural divide and risk.
Participant*

Of the people the Commission surveyed during the Progress Evaluation Audit, 67% of respondents believed that Ambulance Victoria does not support Flexible Work Arrangements for all employees. 61% of survey respondents stated that they do not believe that Ambulance Victoria employees who have a flexible work arrangement are equally valued in the workplace to employees who do not work flexibly. This was particularly true for respondents with disabilities, young people and First Nations staff members, who experience additional social barriers.

## What are the impacts of this reform barrier for Ambulance Victoria’s leadership?

### Ambulance Victoria’s approach to flexible work is supported by rigid rostering practices and systems that do not enable roster reform innovation

The Commission has heard that team leaders have made attempts to improve their rostering approaches, providing creative solutions to the complex problems specific to their branches. The Commission heard these were largely declined.

We're trying to do it. We want to provide a flexible workplace. But the reality is really important things that people are asking for, like, you know, where you've got a ten-hour day or a fourteen-hour night, can I start an hour late so I can ensure that I can pick up the kids from childcare, whatever it might be, or I can ensure that either my partner or I can be there. And it's things like that that would be really meaningful to people. But we haven't found a good pathway forward with that yet. But I think that Think Flex needs to be coupled with the money that gives us the capacity to do it.
Participant

### Trust in Ambulance Victoria’s leadership and its ability to deliver the reforms is hampered by the lack of visible improvements in flexibility

The Commission heard that operational staff in non-leadership roles have not felt the impacts of work to improve workplace flexibility in their everyday lives. The perceived lack of progress in this area is seen to contribute to reduced trust in leadership and its ability to deliver these changes to the workforce.

The Commission considers that Ambulance Victoria’s lack of progress towards implementing a flexible work approach is likely to be reinforcing the persistent attitudinal barrier within the organisation that 24/7 emergency services are fundamentally incompatible with flexibility.

What are those kind of system-related barriers or process-related barriers that we actually need to address in order to ensure that people who want flexible arrangements can have flexible arrangements, recognising that we are 24/7 service and we do need to actually fulfil the needs of our community as well?
Participant

This is in contrast to other health and emergency services that have successfully introduced innovative approaches to flexible roster management. See the [Victorian Rostering Toolkit](https://www.safercare.vic.gov.au/sites/default/files/2023-12/final_-_victorian_rostering_toolkit.pdf) developed by Safer Care Victoria alongside the Australian Nursing & Midwifery Federation, the Royal Melbourne Hospital, Western Health and Echuca Regional Health.

1. E Jeffrey Hill et al., ‘Defining and conceptualizing workplace flexibility’ (2008) *Community Work & Family* 11(2) 149 <https://doi.org/10.1080/13668800802024678>. [↑](#footnote-ref-1)