**Appendix 1**

**FLEXIBLE WORKING APPLICATION FORM**

|  |  |
| --- | --- |
| Name: | Dept: |
| Manager: | Organisation start date: |

* I wish to apply to work a flexible working pattern that is different from my current working pattern.
* I understand this application is my statutory right to apply for flexible working

|  |
| --- |
| 1. Reason for request |
| 1. My current working pattern is:   Please provide details of days/hours/times to be worked |
| 1. The pattern I would like to work is:   Please provide details of days/hours/times to be worked |
| 4. I would like this working pattern to commence from: |
| 5. I think this change in my working pattern will affect the ICB and my colleagues as follows: *Please note answering this section is optional* |
| 6. I think the effect on the ICB and my colleagues can be dealt with as follows:  *Please note answering this section is optional* |
| 7. Supporting Information  *Please note answering this section is optional* |

Do you consider this request a reasonable adjustment in respect of a disability?

Yes No

Signed: Date:

**Appendix 2**

|  |  |
| --- | --- |
|  |  |
| Date  **Private and Confidential**  Name  Address |  |

Dear

**Confirmation of receipt of application** (Line manager to complete and return to employee)

I confirm that I received your request for flexible working, dated [Insert Date] to change your work pattern as follows on .

I would like to meet with you to discuss your request on [insert date, time and location]

In accordance with our policy, please be advised you are welcome to be accompanied by a colleague or a trade union representative at the meeting..

Yours sincerely

Name

**Job Title**

**Appendix 3**

|  |  |
| --- | --- |
|  |  |
| Date  **Private and Confidential**  Name  Address |  |

Dear

I write further to your application for flexible working, made on [DATE] and our meeting of [DATE].

I am pleased to confirm I am able to accommodate your flexible working request/we were able to reach an agreement further to your flexible working request.

*Or*

I am pleased to confirm I am able to accommodate your flexible working request/we were able to reach an agreement further to your flexible working request on a temporary basis, as discussed in our meeting. This will be reviewed on INSERT DATE. At this point we will assess whether this new flexible working pattern has been successful and is able to continue.

Your new working pattern will be effective from [INSERT DATE]

*Or*

Your new temporary working pattern will be effective from [INSERT DATE]

The agreed flexible working pattern is detailed below:

[INSERT DETAILS OF NEW WORKING PATTERN]

All other terms and conditions will remain the same; however will be applied on a pro rata basis if your new working hours are less than full-time.

[ONLY INCLUDE BELOW PARAGRAPH IF THIS IS A PERMANENT CHANGE]

Please be advised this new working pattern is a permanent variation to your contract and there is no right by law to revert to your previous pattern. I would also like to make you aware the ICB will not normally consider more than one flexible working application per year, per individual.

We will continue to monitor your new working arrangements through regular one to one meetings discussing how well the arrangements are working for yourself and your wellbeing and the wider team.

Yours sincerely

Name

**Job Title]**

Encl. Minutes of meeting

|  |  |
| --- | --- |
| **Appendix 4** |  |
| Date  **Private and Confidential**  Name  Address |  |

Dear

I write further to my previous letter when I confirmed that your flexible working request had been granted for a trial period of *[INSERT TIMESCALE].*

I am pleased to confirm the temporary flexible working pattern we agreed upon has been successful and therefore you may continue with this pattern. This will now become a permanent variation to your contract and there is no right by law to revert back to your original working pattern.

All other terms and conditions will remain the same; however will be applied on a pro rata basis if your new working hours are less than full-time.

Please be advised this new working pattern is a permanent variation to your contract and there is no right by law to revert to your previous pattern. I would also like to make you aware the ICB will not normally consider more than one flexible working application per year, per individual.

Yours sincerely

Name

**Job Title**

|  |  |
| --- | --- |
| **Appendix 5** |  |
| **Private and Confidential**  Name  Address |  |

Dear

I write further to your application for flexible working, made on *[DATE]* and our meeting of *[DATE].*

Following our discussion, I do not feel I am in a position to approve your flexible working request at this time due to XXXX.

Your request will now be escalated to XXX (THE LINE MANAGERS MANAGER - delete) in line with the escalation stage as detailed in the flexible working policy. XXX will provide a second opinion on whether the request can be accommodated taking into account both mine and your considerations which were discussed in the meeting on XXX (INSERT DATE OF INITIAL MEETING ).

At this stage, if you wish, other roles in different teams and organisations which may

accommodate your preferred flexible working style can be explored with you. Both myself

and XXX (THE LINE MANAGERS MANAGER – delete) will consider if we are aware of any

vacancies which may be appropriate however this responsibility will also sit with yourself to

search for potentially suitable roles across a wider footprint. Please do let us know if you

would like us to explore and discuss this.

A decision on your request will be made within 14 days unless an extension to this is

necessary.

Yours sincerely

Name

**Job Title**

**Appendix 6**

|  |  |
| --- | --- |
|  |  |
| Date  **Private and Confidential**  Name  Address |  |

Dear

I write further to your application for flexible working, made on *[DATE]* and our meeting of *[DATE].*

*[Following A temporary trial, while I accommodated your request, I have to advise…]* I am unable to *[continue to]* accommodate your request *[on a permanent basis]* for the following business ground(s) *[DELETE THE GROUNDS WHICH DO NOT APPLY]:*

* burden of additional costs;
* detrimental effect of the ability to meet customer demand;
* inability to reorganise work among existing staff;
* inability to recruit additional staff;
* detrimental impact on quality;
* detrimental impact on performance;
* insufficiency of work during periods that the employee proposes to work;
* planned structural changes;

The grounds apply in this circumstances because *[INSERT DETAILS]*

During the meeting, we discussed alternative flexible working patterns. However, these too are inappropriate due to *[INSERT DETAILS]*

If you are unhappy with the decision taken, you have the right to appeal against it. Should you wish to appeal, please do so, in writing, to *[THE MANAGER OF THE STAFF MEMBER WHO HAS REJECTED THE REQUEST/SOMEONE OF EQUIVILANT LEVEL],* clearly setting out the grounds of your appeal. This appeal will need to be submitted within 14 days of receipt of this letter.

Yours sincerely

Name

**Job Title**