

# Confidential

## Senior Management

### Work-Life Balance Survey

The work life balance of Senior Managers and the role they play in modeling and facilitating good practice is of great importance to our continuing efforts to address work-life balance issues. For this reason your views are very important, and you are encouraged to complete and return this questionnaire to the external work-life balance consultant.

Please note that all information provided will be treated in strictest confidence. If you have any questions about this survey, please call:

#### You and Your Role

Name: .....

Job title: ..... Department .....

1) Are you:      **Female**                       **Male**

2) Are you aged:   **Under 30**    **30 – 39**    **40 – 49**    **Over 50**

3) What is your grade ?.....:

4) How long have you worked for the organisation?

<b>Under 1 year</b> <input type="checkbox"/>	<b>3 – 5 years</b> <input type="checkbox"/>
<b>1 – 2 years</b> <input type="checkbox"/>	<b>Over 5 years</b> <input type="checkbox"/>

5) Do you work: **full-time**       **part time**       **job share**

6) What are your contractual weekly hours?.....

## You and Work-life Balance

7) Are you happy with your current work-life balance Yes  No

8) Are you able to do your job to a good standard in contractual hours?  
Mostly  Sometimes  Rarely

9) What are your average working hours in an average week? .....

10) Do you have sufficient time for the other dimensions of your life, (eg hobbies, study, sport, relationships, family, community or other outside interests?)  
Mostly  Sometimes  Rarely

11) Which aspects of your personal life would be improved by more flexible working options? (Please tick as many options as you wish.)

- |   |  |
|---|--|
| <b>Relationships at home</b>                  |  |
| <b>Childcare/Care of dependent adults</b>     |  |
| <b>Social life/Leisure/Personal interests</b> |  |
| <b>Travel to and from work</b>                |  |
| <b>Reduced stress levels</b>                  |  |
| <b>General health and wellbeing</b>           |  |
| <b>Other .....</b>                            |  |

## You, Your Role in the organisation and Work-life Balance

12) Are you clear on how your role achieves your key objectives?  
Yes  No

13) Over the last three months, how many **hours per week** have you worked on issues not directly related to your key objectives (e.g. wider projects, dealing with complaints/grievances in other units, assisting other service areas)?

Less than 5       5-10       10-15       More than 15

14) Do you regularly review your work programme and that of your staff to assess:

a) Whether priorities have changed?      Yes       No

b) Whether work can be excised from the programme?      Yes       No

15) Which of the following aspects of the organisation's working culture impact on your work life balance?

	Constantly	Sometimes	Rarely	Never
<b>a) The long working hours culture</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b) The meetings culture</b>				
Number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c) The pace of change</b>				
Too much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Too fast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Other** (please specify) .....

16) Does your department respect differing individual needs for work-life balance?

Yes  No

17) Are work-life issues taken into account when planning and scheduling work programmes?

Yes  No

18) Do you think greater flexibility to suit individuals' needs is possible without compromising our operational objectives?

Yes  No

19) Which aspects of your working life do you think would be improved by more flexible working options? (Please tick as many options as you wish.)

**Your own work efficiency/productivity**

**Others' work efficiency/productivity**

**Improved service to clients**

**Reduced absenteeism**

**Reduced stress levels**

**Lower staff turnover**

**More effective recruitment**

**Higher morale and commitment**

**Other .....**

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

20) Which of the following **additional work-life balance options** would be most useful to you in balancing your work and home lives? (Please tick as many options as you wish.)

- Inclusion in a flexible working hours scheme** (9 day fortnight or 4½ day week)
- Compressed hours** (full-time hours worked over 4-day week)
- Reduced hours**
- Sabbaticals**
- Occasional working from home**
- Full-time working from home**
- Other:** .....

21) If you have encountered problems or felt reluctant in requesting, using or offering any flexible working options, please give details:

.....

.....

.....

22) What would prevent you from taking up any of the existing work-life balance options?

- Manager's attitude**
- Colleagues' attitude**
- Sets a poor example**
- Negative effect on career**
- Financial implications** (e.g. salary or pension reduction)
- Operational requirements**
- Other:**.....

23) Are you able to discuss, and have you discussed, your work-life balance needs with your manager?

	<b>Able to discuss</b>	<b>Have discussed</b>
<b>During an appraisal meeting</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>During another meeting</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Informally</b>	<input type="checkbox"/>	<input type="checkbox"/>

24) Please give any other comments or suggestions about how we might use the work life balance project to achieve organisational objectives and/or improve working lives.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....