

MY CAREER AND MY FAMILY

— *how I managed to balance the two*

By DEBBIE ANDALO

A recent Department of Health initiative highlights how pharmacists have improved their working lives and suggests how other individuals could benefit from a change in working practice. This month, we feature the experience of one woman who has successfully combined career and family life

Jenny Dorey looks back in horror at the time she was forced to leave her child who had been sent home from nursery with head lice, sitting in a supermarket trolley in the hospital dispensary for two hours while she finished her shift. She could not leave early to take her child home and her husband, who worked in the same hospital as an engineer, was unable to get time off at such short notice. It was one of those days when she wondered if it was really worthwhile trying to juggle a pharmacy career with parenthood. Now, years later, with two children at university and the youngest studying for his GCSEs, she has made it a priority that none of her staff at the Oxford Radcliffe Hospital where she is chief pharmacist would ever be put in the same position. “That situation would not happen today — I would tell the parent that they had to take the child home,” she said.

Ms Andalo is a freelance journalist

A MALE HIERARCHY

Mrs Dorey (52) has spent the past 23 years trying to balance career and family commitments at a time when the phrase “family-friendly working” was unheard. She has had to battle against a male dominated hierarchy which was oblivious to the double demands of raising a family-of-three and climbing up the career ladder. There were no role models for her to follow and, unlike today, no government initiatives committed to encouraging women to return to work after having children.

She remembered: “There were senior women in pharmacy but they didn’t have children, and the hospital pharmacy management was male dominated — the needs of working parents just did not come into their thoughts”.

That culture is now slowly changing. The Labour Government came into power on a promise to make it easier for parents to pursue a career and meet the demands of caring for a family at the same time. The Depart-

ment of Health report published in August, last year, called “Improving Working Lives for the Pharmacy Team”¹ sets out guidelines for how more family-friendly policies can be introduced in the workplace to create a motivated and well qualified staff to implement the changes of the NHS Plan. The department has set all NHS employers an April 2003 deadline to provide evidence that they have risen to the challenge and taken steps to improve working lives of parents. Panel 1, p24 gives a resumé of the guidelines.

BRINGING ABOUT CHANGE

Mrs Dorey is already helping to bring about the changes suggested in the guidelines. One of the first things she did when she became chief pharmacist at the John Radcliffe Hospital in 1989 was to introduce flexible working. She was also involved in setting up a working parent support group across the trust so that vital information about childcare and local

Panel 1: Government guidelines for introducing flexible working

Flexible working includes working part time; flexitime or term time hours
Consider wider interests of patients, staff and the bigger organisation
Consult staff about preferred work patterns
Be aware of contractual implications and impact on earnings and, pensions
Look at new skill mix when considering changes in work patterns
Be clear about new patterns of working and staff responsibilities
Ensure adequate staff cover

Panel 2: How to combine hospital pharmacy with being a parent

Find or help set up a workplace nursery
Live near work
Make sure schools are near workplace
Work flexible hours
Do not abuse parent friendly policies
Establish a support group for working parents
Take career opportunities when they arise
Only hold meetings during the day and in term time
Use holiday and after school clubs or help set them up

Panel 3: Jenny Dorey's career

1971 Qualified
1973 Deputy chief pharmacist, Whittington Hospital, London
1974 Acting chief pharmacist for six months
1975–7 Studied MSc in pharmacology
1978 First child born
1978 Worked one day a week in Boots pharmacy
1979 Worked 1.5 days per week in John Radcliffe dispensary on basic grade
1980 Second child born
1980 Hours increased to five mornings a week
1984 Regraded to staff pharmacist
1985 Studied for clinical diploma
1986 Third child born
1988 Appointed deputy chief pharmacist. Hours increased to 35 a week
1989 Appointed chief pharmacist
1993 Appointed chief pharmacist for merged trust and director for clinical support services.

schools and nurseries could be shared easily. These and other suggestions for combining a career in hospital pharmacy can be found in Panel 2.

She said, "I could see the benefits of being able to work flexibly. It meant that parents had some sort of control over when they were working. Being allowed to start work 15 minutes later, for example, could mean you could drop your child off at school in the morning. If you needed a couple of hours off to go to a school concert then working flexible hours allowed you to do this". Successful flexible working is dependent on staff and managers agreeing regular hours at the outset, which have to be within pharmacy core time. "Flexible working has

to be a partnership and working together — the vast majority of people don't abuse the system," she said.

THE KEY

For Mrs Dorey, the key to her successful return to work after her first son, Stephen, was born in 1978, was the chance of a place at a hospital nursery. The site was near to where she worked and it provided excellent care. "Without that I don't think I would have gone back," she admitted. When her children reached school age she made sure that the schools were within 10 minutes of her workplace. "I think I would have found it difficult to be 20 minutes away from where my children were. Traffic jams were never a problem for me," she added.

Mrs Dorey was acting chief pharmacist at the Whittington Hospital in London when she first went on maternity leave. She never returned as her husband was offered a job at the John Radcliffe Hospital and she moved to Oxford with her new family. Six months later, she took her first steps as a

working parent when she worked one day a week in a high street pharmacy. A year later, she took up a one-and-a-half-day post working in the dispensary at the John Radcliffe Hospital. She found herself on a basic grade, despite her previous experience, and because she worked part-time, existing regulations meant she could not be regraded. "It was difficult because I had more skills than I was using. There were two issues here — the other pharmacists thought I did not have any special skills and I was just working in the dispensary. For me, it was a bit demeaning. I ended up taking on other things like establishing a drug information service because I needed something interesting to do."

It was this extra work which eventually led to her being regraded as a staff pharmacist in 1984. After her second child was born, she changed her working hours to every weekday morning.

Two years later, after the birth of her third child, she gradually increased her hours to 30 per week and took on the additional role of pharmacy purchaser. A supportive husband and reliable childcare arrangements — including a hospital holiday play scheme — made life simpler even though her work responsibilities had increased. But it was her own personal attitude that really helped. "I made sure that as a working parent I gave as well as received. I always tried to be as flexible as possible — if there was a day with staffing difficulties I would agree to work a couple of hours more to help out. I don't believe that you should say 'I'm a parent so I can't work weekends.' The only difference you face compared to those staff without children is that to work weekends might require a lot of planning."

THE LEAP FORWARD

Mrs Dorey's career took a significant leap forward just two weeks before her youngest son's third birthday when she became the full time chief pharmacist at the John Radcliffe. "It wasn't the ideal time to go for the job but I knew we were not going to leave Oxford and if I didn't go for the post, my career would be stuck. I think what I realised then is that you have to take the career opportunities as they happen, even if the timing isn't perfect."

She has since gone on to become chief pharmacist at the newly created Oxford Radcliffe NHS Trust and is also its director for clinical support services. She has used this role to put family-friendly working policies onto the trust agenda. "I suppose I now have the reputation for fighting for parents rights," she admitted.

Mrs Dorey backs the principles of the Government's "Improving Working Lives for the Pharmacy Team" initiative but believes it will only succeed if there is a culture shift across the NHS. "In today's NHS, you find yourself working to very tight deadlines like having to prepare a bid for emergency winter pressures with just 24-hours' notice — that doesn't really support the IWL initiative," she said.

"Staff are definitely under stress at the moment but that isn't only because they have children, it's because of the huge amount of change in the NHS we are having to cope with."

REFERENCES

1. Department of Health. Improving working lives for the pharmacy team. London: DoH; 2001. www.doh.gov.uk/iwl/iwlpharmacy.pdf