

## HealthRoster Case Study

# Hertfordshire Partnership NHS Foundation Trust



Impartial, fair and helping deliver the very best in clinical care while delivering more benefits for staff.

### The challenges

Staffing is a key issue for the NHS. Especially so in the Mental Health sector, where insufficient numbers of skilled, permanent ward staff is a problem which can affect both clinical leadership and the quality of care provided to service users.

Faced with these issues, Hertfordshire Partnership NHS Foundation Trust recognised an urgent need for a computerised rostering system to monitor and optimise its workforce, and to more effectively manage the nursing budget – which had been significantly overspent due to a heavy reliance on bank/agency staff. The Trust's 3,000-strong nursing workforce were historically deployed at ward level by a manually driven paper-based solution and it was acknowledged that the Trust needed a more efficient and less time consuming solution to objectively measure and manage the nurse workforce through improved nurse rostering.

As Sid Sohawon, Deputy Team Leader, Mental Health for Elderly People, Lambourne Grove Unit, points out "I used to sit down to do the roster, and get really bored after well over an hour of doing it. I didn't want to upset people, but frankly, rosters were previously more in favour of staff needs than service needs. Multiple flexible working arrangements in place often resulted in a lack of staff availability for shifts, especially on weekends and nights, with qualified nurses being used to cover support worker shifts."

### The Solution - HealthRoster

In order to find a solution to this key issue, Hertfordshire Partnership NHS FT asked Allocate Software to conduct a thorough 'roster assessment' across three areas within the

Trust. The assessment clearly demonstrated where significant financial and non-financial benefits could be made. Allocate also found that there were discrepancies in the current manual processes; highlighting that substantive staff were not being utilised in the most effective way and that staff were in some cases incorrectly paid for their unsocial hours. Based on these findings and its proven ability to manage staff and allow the Trust to model future staffing scenarios aligned to budgets and staff availability, the Trust awarded Allocate the contract for the implementation of HealthRoster.

### Managing Staff and Providing Positive Outcomes to Care

Due to the diverse care requirements of service users it is of utmost importance to have the correct skill mix in the various units of the Trust. As these skills are more often than not specialist, it makes rostering extremely challenging. HealthRoster has provided the Trust with the tools to create a new approach to managing the workforce.

Since implementation the Trust have been able to use their substantive staff much more efficiently which has in turn reduced their reliance on bank and agency staff and enabled the Trust to reduce staffing costs and make savings in excess of £750K since implementation.

#### Key Benefits

- £750k Savings on staff spend
- Increased visibility of staffing issues
- Major reductions in administration
- Powerful, fast and accurate reporting
- Reduced use of Bank staff
- Consistency of care service delivery
- Fairer rosters for staff

HealthRoster also ensures that the diverse care requirements of service users are met by always having the appropriately skilled staff on the wards ensuring that the best levels of care is always given.

The solution has also delivered many benefits for staff; Jacky Vincent, Interim Head of Nursing explains the main benefits she has experienced: “The standardisation of rostering in nursing teams, equally the dividing of shifts and ensuring appropriate skill mix, and secondly, the reports/findings that can be pulled from e-Rostering (HealthRoster). These reports give us complete transparency on such areas as the use of unallocated hours, the bank and agency usage and part time hours.”

In addition, the solution has “offered real time data, accessible to a range of stakeholders. The accessibility of information allows for centralisation of data, which has been helpful in reviewing the skills mix locally whilst conducting investigations to learn lessons from practice. It is clear that with this solution in place and fully functioning, the application of HealthRoster can support better systems for temporary staffing and roster management.” explains Andrew Cashmore, Lead Nurse Adult Acute and Rehabilitation Services.

### Providing In-Depth Data on Staffing Issues

HealthRoster has also helped to ensure that managers can make more informed decisions related to staffing and more importantly it provides the data to demonstrate resourcing issues.

Sid Sohawan pinpoints a particular example at his unit: “HealthRoster revealed clearly what we already knew – which was the impact that our two members of staff on long term sick leave were having on our operations. It was highlighted to everyone, including management that we required additional cover – it was hard evidence that couldn’t be ignored or disputed.”

### Releasing More Time to Care

Even when a shift is fully manned, all too often Healthcare workers are pulled away to perform mandatory administrative tasks, HealthRoster is designed to be quick and easy to use thus enabling these skilled workers to spend more time attending to patient needs. Pat Hanson, Ward Manager, explains; “I find it brilliant – it is so easy and simple to use, and saves so much more time than when we were working on paper rosters. Staff always want to change shifts and working days, so I often have to make changes. With the paper-based process it takes a lot of time, and gets very messy, with HealthRoster it’s done at a click of a button.”

### Delivering Value

The Trust has witnessed a steady decrease in lost contracted hours and full utilisation of substantive staff before going to bank/agency staff; resulting in significant financial savings. In addition, the ESR module will ensure that their payroll is 100% accurate which will also deliver additional savings. “We have been able to use our substantive staff in a much more efficient way. By doing this we are delivering more consistent care and reducing staffing costs. The financial savings have

been significant with £750k saved since we implemented HealthRoster [to May 2010] – and that’s due to simply using our staff better; nothing more!” Keith Loveman, Finance Director.

Phildah Chifamba, E-Rostering Project Manager agrees: With HealthRoster, we have increased management information enabling us to use our substantive staff better, and to put our substantive staff on the bank which not only saves the Trust money, but reduces risk and improves patient care due to the consistency of staff in post.



**“I love everything about HealthRoster. I don’t get problems with the roster now. Once you know what you are doing with it you can immediately see the improvement of processes. Now I auto-roster and it’s all done for me and we can now spend more time doing the job that we are here to do – attending to our patients.”**

**“What’s more, due to HealthRoster’s visibility, ‘Unsocial hours’ rostering is now much safer for patients, as well as much more balanced for staff allowing managers to make good rostering decisions based on staff availability and suitability”**

Sid Sohawan, Deputy team leader,  
Mental Health for Elderly People,  
Lambourn Grove Unit

### Empowering Staff

As with any major introduction of IT software, Allocate and the Trust acknowledge that at first there were challenges in getting some staff to adapt to a new way of working, but as staff have become more familiar with the technology and its ‘one screen, one-click’ methodology, they have been able to see the benefits. “Staff like it because they are able to change and request shifts and there is visible impartiality of shift allocation which is important when you are trying to create a happy and supportive

working environment. At first there was a bit of resistance from staff, but once I reassured them the system is easy to use they were fine.” Phildah Chifamba, E-Rostering Project Manager, further explains; “I said to staff, if you can shop online, you can work HealthRoster, and as soon as they heard that, the staff were more comfortable with the approach. The Employee OnLine module for individual staff to make requests saves time for the Ward Manager and is also a positive contribution from staff, empowering them in the production and maintenance of the roster. “

All the Trusts’ Service Managers, Finance and HR have been trained to use the Roster Central module of HealthRoster, a web-based central performance dashboard, which helps to reveal potential rostering difficulties well before they occur.

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**“As a manager I really like [HealthRoster] as it really, really helps with reporting. It’s so much easier; it’s a really big plus. Sickness reports are so much quicker; it’s one click to pull them out rather than filing through lots of different bit of paper. We can also analyse absence patterns with easy access as all the information is there at your finger tips.”**

Pat Hanson, Ward Manager  
Hertfordshire Partnership NHS  
Foundation Trust

### Supporting a Geographically Dispersed Team

For the Trust’s community-based teams the solution is ideal, allowing managers to see where staff are located at any given time. HealthRoster provides managers with more than just timesheets; it enables them to monitor and record annual leave, sickness, and study leave. The information is all stored digitally in one place, and the data highlights trends that were not previously identified.

### The Future

As a result of the savings derived with HealthRoster, the Trust has been able to bring the staff bank back in-house, creating further savings as HealthRoster and its Bank solution will provide increased transparency of staffing availability, requirements and visibility on who is making requests thus enabling better roster control. The Trust is also talking to Allocate about extending the solution to other areas, and intends to have all staff including the chief executive on e-Rostering by the end of next year. To date, HealthRoster has been rolled out beyond the initially planned 54 areas to 79 areas and is now being used across most in-patient areas to manage staff resources across multi-skilled teams including nursing, crisis teams, administrators and occupational therapists to drive efficiency and deliver higher quality care.

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Phildah Chifamba, E-Rostering  
Project Manager  
Hertfordshire Partnership NHS  
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