

AllocateAwards Case Study

Barts Health NHS Trust

After the WannaCry cyber-attack left the trust with no access to HealthRoster, the software used to manage rosters and view and book bank and agency staff, the e-rostering team at Barts Health NHS Trust put into place an emergency plan to ensure the safe staffing of wards and the correct payment of staff over a three-week period.

As part of the emergency plan, the team secured office space, laptops and internet access from external partners, including Allocate; this meant that HealthRoster could still be accessed as it is hosted on the cloud.

Rosters were printed and distributed to the wards, and an emergency on-call service was provided over the weekend in case any roster issues arose. Bank Partners, the trust's external business partners, managed any temporary staffing requirements.

The trust books around 5,000 bank shifts per week and, due to a weekly bank payroll, the team had to ensure that people would be paid for the shifts worked. Forms were designed to collect information relating to assignment changes and terminations, then changes were made as necessary on HealthRoster and actioned by ESR and payroll. These actions prevented £40,000 of overpayments.

With a large rostering team across six sites, plus links with other departments and external partners, a team WhatsApp account was created to co-ordinate the team from the central offices once they went out on site to assist the wards and other departments with any rostering and bank-related issues.

Sarah Fenlon, e-rostering central support lead, said:

"The plan would not have worked without our team collaborating with various departments within the trust and with external companies who were able to offer assistance."

"Our team had clear instructions and knew every day what was expected of them and who they needed to work with to achieve our goals. This led to a happier team, who felt that their input into managing the crisis was worthwhile and they were left with a feeling that they had made a difference for patients."

In terms of advice for others, Sarah said:

"I would strongly recommend having a contingency plan, processes and procedures, both hard and soft copies. Keep a supply of paperwork as the printers were inactive, and a supply of laptops not regularly connected to the network."