

Freeing up the HealthRoster team's time so they could focus on supporting staff.

West Suffolk NHS Foundation Trust's HealthRoster team created an escalation process to put the onus back on departments to ensure that shifts were finalised to deadline. In addition, it was decided that departments that were not compliant would be publicised.

The rationale for creating this initiative was that more and more of the team's time was being used to chase departments to ensure worked enhancements were logged correctly and included in their next immediate pay alongside their standard pay.

An escalation process was agreed and communicated to departments with a start date of October 2016.

Our challenge

One of the biggest issues West Suffolk Hospital's HealthRoster team had been facing was ensuring shifts were finalised to deadline. Timely returns of finalised shifts ensure staff are paid all their enhancements due for that month.

There are 71 substantive units on HealthRoster, which includes 1,930 staff. The HealthRoster Team processes approximately 30,000 substantive shifts each month.

Approximately 20 departments each month were not finalising their shifts. This could range from one person's shifts, one week's shifts for the whole department and or on occasion all shifts for the whole month.

The HealthRoster team would email, phone and bleep ward managers and service managers to finalise shifts that had not been completed to deadline. In some cases, the workforce information manager would walk around the Trust to each department to find a manager to complete the task.

The situation was deteriorating and there was concern that it would continue to do so.

Our approach

To ensure that shifts were finalised to deadline we put together an escalation process.

A paper was prepared agreeing the escalation process and sent to the executive directors for approval as the process involved the chief operating officer (COO).

Once the escalation process was agreed we emailed it out to all departments and outlined:

- who was responsible at each stage
- who staff should speak to in the event they believed a shift had not been paid
- that a list of departments not complying with the process would be published.

A start date was set for October 2016.

The escalation process is as follows:

- 1. All shifts must be finalised by close of play on the 5th of the month for the previous month.
- 2. On the 6th of the month or the next working dayemails are sent to department managers, service managers and general managers at 10.00 informing them that shifts not finalised by 2pm will be escalated.
- 3. Escalation involves:
- a. Outstanding shifts finalised by a manager in the workforce team

- b. Those outstanding shifts sent to each department for them to check, submit a pay correction to be processed in the following month and to inform the member of staff. This email will be sent to the department manager, service manager and general manager and the COO copied in.
- 4. The results are published alongside the departments KPI under the following headings:
- a. Completed on time
- b. Completed late
- c. Not completed / escalated to COO
- d. Unlock requests after escalation.

Our achievements

Since the introduction of the escalation process noncompliant departments have reduced from 19 to five on average and even reached 0 in one month with little intervention. Previously, up to 1,040 shifts could be left unfinalised in a month. This now averages at 150.

The HealthRoster team has also seen a reduction in the number of pay queries it receives as staff are now aware that they must speak to their manger in the first instance.

The biggest impact has been on the HealthRoster team who are now able to focus on what they need to achieve during payroll. However, wider staff experience has also improved as everyone is now paid their enhancements in a timely manner.

Lessons for others

1 star hard – 5 stars easy

Communication ★★★

It is important to clearly communicate who is responsible for each part of the shift finalisation process. Once everyone knew their role and the deadline the process became more efficient, accurate and timely.

Monitoring ★★★

On-going monitoring ensures that if we see a negative trend starting to creep in we are able to send out communications to ascertain any issues and trouble shoot them.

Persistence ★★★

There have been a few glitches along the way, for example, when wards might physically move or new teams are implemented on the system, which have caused some delays, but those finalising to deadline have improved on the previous year.



