



Allocate Insight11 Case Study

Salisbury NHS Foundation Trust using RLDatix's Insight11 to help staff understand rostering basics & find specific areas for improvement

Summary

Having had an e-rostering solution in place for many years and recently moved across to Allocate Optima, Salisbury NHS FT had a good foundation for getting the rostering basics right. The Trust was also invited to be part of the Carter Collaborative which identified a range of Key Performance Indicators for the management and deployment of staff. Allocate Insight11 has helped Salisbury improve further by giving the trust greater transparency and enabling the trust to use local and national comparisons to challenge performance.

One of the areas the Trust focused on was early roster approval to optimise the use of temporary staff. Early roster approval was identified by Lord Carter as being a vital element in better rostering as it allows shifts to be filled earlier by bank staff thus reducing the reliance on agency staff at the last-minute. Allocate Insight11 has also helped managers have a more detailed understanding of issues that need to be addressed through the six key metrics. Greater transparency and more detailed information is helping to inform safe staffing conversations in a way that wasn't possible beforehand.

In 2014 the trust rolled out Allocate Optima and Allocate BankStaff from RLDatix after moving from a previous eRostering solution and in 2015 started using Allocate Insight11 to help move beyond making comparisons to being in a position to make insightful improvements. We spoke to Fiona Hyett and Denise Major, both Deputy Directors of Nursing at the Trust, and Debbie Dupont, E-rostering Lead about Allocate Insight11 and their improvement journey.

Why did you decide to take up the Allocate Insight11 service?

Our involvement with the Lord Carter review was a key driver for introducing Allocate Insight11. Prior to this review the organisation already had work in progress utilising the metrics within Allocate RosterPerform11 and the Trust was very focused on reducing its nurse agency spend. However, the Carter project helped us identify where we could provide further focus to release efficiency savings. Allocate Insight11 has given us greater transparency and enabled a better understanding of how e-Rostering is being used as well as a more detailed understanding of rostering patterns and practice.

How has Allocate Insight11 been supporting Salisbury NHS Foundation Trust?

Allocate Insight11 provides an analysis of our information rather than just data. We were using Allocate RosterPerform11 at our agency reduction meetings and we had a large volume of data but it took a lot of time for DSNs to pull their own reports and complete their analysis. Allocate Insight11 provides all this in one place with six key metrics (roster approval lead time, staff unavailability, additional duties, unfilled duties, hours balance and temporary staffing), giving not only clarity but also providing the ability to compare performance of ward against ward as well as external comparison against other Trusts. One of the key benefits of Allocate Insight11 has been having more clarity around rostering which in practice means we have been able to identify and focus on issues that we previously could not see. The RLDatix team provides an objective and expert view helping us look for patterns as well as providing challenge.

The analysis within Allocate Insight11 has allowed the ward sisters and DSNs to see where rosters are fair and equitable and meet service need – this has helped them have conversations with staff about annual leave and patterns. When Allocate Optima was first introduced some ward sisters would say to staff “you can’t have annual leave because the system won’t let you”. Now we have moved to a position where they are saying “you can’t have annual leave that week because there are too many staff off already”. It is being used by ward sisters to improve people management which is a large part of their role.

One area we chose to focus on early was the timeliness of roster approval and its comparison to the other metrics. For the first time we had detail on approvals for each ward and we were able to challenge ward leads on the basis of this information. However, this had to go hand-in-hand with a cultural shift which saw ward leads helping nurses to understand that early approval could be flexible enough to fit around their lives, rather than rosters fitting around them at the last minute.

Nationally we are now one of the best Trusts in the country for roster approval with an average approval of 5.5 weeks. As an exemplar site, we can see how we can apply the learning in different scenarios - for example working with the Trust’s on-site Nursery to show how having approvals at nearly six weeks can link to staff booking nursery sessions.

Are there any other examples of how this clarity has helped the rostering process?

The Allocate Insight11 data highlighted that we had a higher use of additional shifts than our peers. With this increased awareness, we focused specifically on the use of additional shifts, those being used for avoidable reasons and the rationale for their use. Identifying the reasons used for these duties enabled us to remove 50 per cent of the options available and provide a clear set of definitions with the requirement for increased scrutiny and approval by senior staff. Evidence demonstrates that our avoidable additional shifts are now reducing. Using the same approach, we are about to produce guidance to define our use of the working day.

What other benefits have come from Allocate Insight11?

We can have more meaningful discussion at our monthly SafeStaffing Steering group where we can debate and discuss issues with DSNs and ward leads. During the meetings, each month a ward lead presents their current position against the set of KPIs and, within the discussion, identifies actions that will help improve their rosters. The ability to make internal comparisons as well as with other peer Trusts is also very useful for this type of discussion and challenges us to improve.

What did you learn as a result of using the software?

We have been able to carry out much deeper investigation into workforce issues. With greater transparency and the ability to monitor individual wards over time means we are able to pick up areas we need to focus on much more quickly. We have learned that for many members of staff, rostering is not easy and that we need to help them get the basics right.

Early roster approval has been a long journey and we have had to encourage a cultural shift within the Trust, but this means we are now making more effective use of bank and agency staff. With bank staff we are now able to give nearly six weeks’ notice of shift availability and also manage our agencies with a tiered approach to visibility of rosters.

What difference has it made to you?

The change for us has come from having good understanding of rostering - what it is and how to do it well. At the same time, Allocate Insight11 has helped us in supporting DSNs to challenge rostering practice with evidence and to develop the ward sister knowledge of impact on the ward staffing if rostering is right.

We have just experienced a very challenging summer where we have had an unprecedented level of demand for our services. This put a great deal of pressure on our workforce and if we had not been able to use Allocate Insight11 to focus on the rostering, the situation could have been a great deal worse.

For many of us in the team it has meant that what our professional judgement was telling us was happening, is actually happening. We have worked well with RLDatix and found out that this relationship is key to the improvements we have made.

Allocate Insight11 is a managed service that combines monthly reporting, always on interactive dashboards - such as the one pictured, metrics and benchmarks together with RLDatix’s expert advice to drive rostering improvement.

