

RLDatix Awards 2023 Finalists

Safe Care **Award**

Barking, Havering and Redbridge **University Hospitals**

NHS

University Hospitals Bristol and Weston

NHS Foundation Trust

Salisbury

NHS Foundation Trust

Supported Workforce Award

Northumbria Healthcare

NHS Foundation Trust

Salisbury

NHS Foundation Trust

NHS

Lewisham and Greenwich

Sustainable Organisation Award

NHS **Sheffield Health** and Social Care **NHS Foundation Trust**

Barking, Havering and Redbridge **University Hospitals**

NHS **South Yorkshire Integrated Care Board**

Fairer Award for Diversity, **Equity and Inclusion**

West Yorkshire Health and Care Partnership

Southern Health NHS Foundation Trust

Midlands Partnership University

NHS Foundation Trust

Innovative Award for Quality Improvement

Bolton

NHS Foundation Trust

Lewisham and Greenwich **NHS Trust**

Epsom and St Helier University Hospitals NHS Foundation Trust

Engagement Award for Community & Collaboration





Calderdale and Huddersfield

NHS Foundation Trust

Welcome to the RLDatix Awards 2023

It is with immense pride that I write this foreword as the CEO of RLDatix, a company deeply dedicated to supporting the NHS and healthcare worldwide. Our work revolves around understanding the unique needs and challenges of the healthcare industry, and we are committed to delivering solutions that make healthcare safer and more compassionate.

In recent years, healthcare has faced unprecedented challenges, and the NHS, like many others, has felt the strain. Clinicians have encountered immense administrative burdens, resulting in increased pressures on the workforce and a backlog of patient care. However, even in the face of these challenges, we see remarkable examples of organisations striving for improvement. Customers like you continue to inspire us with your innovative spirit and relentless pursuit of safer care. We are honoured to be your partner and help you to leverage your data to create insights that enable your leadership teams to make better informed decisions.

The work our customers do is nothing short of amazing, and it deserves to be celebrated. To honour their dedication and remarkable achievements, we are thrilled to present the RLDatix Awards Europe 2023. These awards are not just about recognising outstanding accomplishments within our community, but also about shining a light on the commitment, hard work and dedication displayed by the healthcare staff who go above and beyond to deliver safer care every day.

This year's award entries have showcased incredible strides forward, and I extend my heartfelt thanks to the independent judges who invested their time and expertise in this challenging task. To all those who have been shortlisted, your incredible contributions are deserving of recognition not only within the RLDatix community, but also across the entire healthcare sector.

So, as we celebrate all winners and highly commended for the RLDatix Awards 2023, let's remember that your resilience, passion and collaborative spirit define our industry. Each story shared and each award presented symbolises our commitment to safer care — an ethos that unites us all.

Jeff Surges CEO, RLDatix

Judges

Thank you to this year's judges:

James Titcombe (OBE) became involved in patent safety following the loss of his baby son Joshua due to failures in his care at hospital where he was born in 2008.

Formerly a project manager in the nuclear industry, James has since worked as the National Advisor on Patient Safety for the Care Quality Commission and was a member of the advisory group established to set up the Healthcare Safety for the Healthcare Safety Investigation Branch (HSIB).

James has recently worked as a specialist advisor supporting the Independent Investigation into East Kent Maternity Services, which published its report in September 2022, and has previously worked as an Investigation Science Educator with HSIB.

James's current roles include Chief Executive of the charity Patient Safety Watch, Patient Safety Ambassador for the Morecambe Bay NHS Trust and Expert Advisor to the Parliamentary and Health Service Ombudsman (PHSO). In 2021, James worked with Joanne Hughes to help set up the Harmed Patients Alliance, an organisation that aims to promote restorative practice after healthcare harm.

James was awarded an OBE for service to Patient Safety in 2015 and in 2018, completed a PGCert in Patient Safety at Imperial College, London. James's book, Joshua's Story, was published in 2015.





Mark Britnell

Professor at Global Business School for Health at University College London Professor at Sandra Rotman School of Management, University of Toronto

Mark Britnell is one of the foremost global experts on healthcare systems and has a pioneering and inspiring global vision for health in both the developed and developing world.

In dedicating his entire professional life to healthcare, for over 30 years he has delivered strategy, policy and operations solutions to teams in 81 countries on 385 occasions and counting. He has led organisations at local, regional, national, and international levels, on both the provider and payer sides, and in public and private sectors.

In 2022, he took his worldly experience to the education space, cultivating the brilliant minds of tomorrow as a professor at both the Global

Business School for Health at University College London and the Sandra Rotman School of Management at the University of Toronto.

In his 13 years at KPMG, Mark held various titles across the firm including KPMG International's Global Head of Health between 2009 and 2020, Global Head of Infrastructure, Government and Healthcare between March 2018 and September 2020, and most recently Senior Partner and Vice Chairman at KPMG in the UK. During this time, he delivered sustained growth, accounting for 22% of total global revenues, and managed 45,000 staff across 145 countries.

Mark is the award-winning author of two books of global acclaim exploring the successes and failures of the world's healthcare systems. His first book, In Search of the Perfect Health System, puts 25 healthcare systems under the microscope, revealing the different ways jurisdictions respond to healthcare challenges. Sold in over 100 countries, the book was recognized by the Chinese Medical Doctors' Association as the best health book in 2017, and in the UK by the British Medical Association in 2016.

His most recent book, Human: Solving the Global Workforce Crisis in Healthcare, examines how the healthcare worker shortage issue has and will continue to impact some of the world's leading health systems, while boldly offering 10 concrete and actionable solutions to help navigate the continually growing deficit. Having survived prostate cancer, he donates proceeds from his books to Prostate Cancer UK.

Prior to his work with KPMG, Mark worked his way up the National Health Service ladder. After joining the UK's NHS fast-track Management Training Scheme in 1989, he held several senior operational and government posts before being appointed Chief Executive of University Hospitals Birmingham, one of the highest performing hospitals in the UK.

He masterminded Queen Elizabeth Hospital — the largest new hospital build in NHS history — and established the Royal Centre for

Defence Medicine. He was then named Chief Executive of NHS South Central and led the successful financial turnaround of the region before joining the NHS Management Board as Director General at the Department of Health, where he designed, developed, and delivered "High Quality Care for All" with Lord Darzi. As Executive Director of Central Middlesex Hospital NHS Trust, he developed the firstever Ambulatory Care & Diagnostic Centre in the UK.

He is a Chairman of the Global Impact Committee in Beamtree, Australia and Trustee of The King's Fund, the oldest health charity think tank in the world, based in London. Previously, he was a Non Executive Director at Dr Foster Intelligence, a trustee of the British Pregnancy Advisory Service, and a Board member of Prostate Cancer UK.





Good Practice Guidance, the CHPPD (Care Hours Per Patient Day) metric and part of the team who developed the MHOST (Mental Health Optimal Staffing Tool). Her dedication to her work was recognised with an MBE for services to nursing in the Queen's Birthday Honours in 2014.



Safer Care Award

Winner

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Barking, Havering and Redbridge University Hospitals NHS Trust



Nursing workforce Hub and SafeCare

In response to the most demanding periods of hospitalisation during the COVID-19 pandemic, the trust decided to put in place a new process to oversee the management of a large-scale reorganisation of clinical services.

As part of this effort, the Nursing Workforce Hub was identified as a unit capable of delivering a fresh approach to managing safe staffing within nursing for several clinical specialties across two of the trust's hospital sites. The hub team was also empowered to oversee controls within the nursing workforce relating to quality, efficiency, and finances.

The team consisted of clinical nursing staff who could offer operational support to staffing on a daily basis. The team's overriding strategic priority was to embed the principles of the NHSI Developing Workforce Safeguards paper across the organisation and to provide ward to board assurance.

By using Allocate SafeCare, the hub team was able to present an unbiased 'helicopter' view of a range of vital data sets, including patient acuity and dependency, staffing skill mix, nursing numbers, care hours per patient day, and professional judgement. SafeCare is used widely throughout the NHS to match staffing levels to patient acuity, providing

control and assurance from bedside to board. It is designed to increase patient safety while maintaining efficiency and enabling informed decision-making at various levels of management. It provides live visibility of staffing levels and matches this with patient demand to highlight areas which are short on workload-based care hours.

The hub also created a clinical education role for quality rostering. This role provided a key conduit between the trust's back office corporate services and frontline clinical teams. The value of this role was demonstrated by an increased focus on productivity which led to a reduced reliance on temporary staffing. This had a positive impact on both care quality and financial outcomes, shown by the reduction in additional shifts from 48,976 in April 2020 down to 16,656 by July 2022.

The Nursing Workforce Hub initiative also delivered one of the most important improvements in the trust's safe staffing processes. This was to put an end to the last nursing 'red' shift (where patients are at risk of harm due to under resourcing) in January 2022. In addition, the hub also oversaw a 100% nursing roster compliance rate for three periods in succession, with the last of these ending on 28 August 2023.

Another impressive achievement was the way in which the team's use of SafeCare data, complemented with insights from the Safer Nursing Care Tool, enabled them to demonstrate the need for an additional 140 nurses and ensure these roles were fully funded. Aside from showing the benefits of having ready access to vital data in real-time, this achievement must be considered against the backdrop of the tight financial circumstances in which the NHS provider sector currently operates.



Barking, Havering and Redbridge University Hospitals NHS Trust demonstrated clear evidence of using SafeCare to improve patient outcomes and safety. The trust showed data being used from ward to board in a meaningful way to make decisions about patient safety.



Salisbury NHS Foundation Trust



Industrial Action Planning

In anticipation of nationwide strike action by nurses, Salisbury NHS Foundation Trust needed the most accurate staffing data available to effectively negotiate derogations with their trade union and to operate at safe staffing levels on strike days.

Thanks to the high number of staff already rostered on Allocate Optima (HealthRoster), elements of the data required to establish safe staffing levels could be obtained quickly and easily. But a third of the trust's staff establishment (around 1,950 people) were not, at this stage, rostered electronically.

Their rosters were either made on paper, in Excel spreadsheets or simply not recorded. The vital importance of the oversight and instant visibility that came through Allocate Optima's e-rostering data for reporting purposes was clear to the trust's industrial action committee. Allocate Optima is the most commonly used e-rostering system in the NHS. More than just e-rostering, the system is designed to not just automate roster creation but to make better rosters for both patients and staff alike. The application is designed to ensure that the full benefits of e-rostering are realised, and that follow-on processes (including bank and payroll processing) are also significantly improved.

As the strikes continued, the reliance on the software and the work of the trust's two e-rostering members were crucial to provide real-time staffing data. This data was combined with physical monitoring (on site walk-throughs) by senior nursing teams to compare planned staffing levels with actual slots filled on strike days.

These comparisons were vital in empowering the senior nursing teams to identify gaps and helped their decision-making when redeploying staff from a non-derogated area. This combination of accurate, accessible data from Allocate Optima and teams regularly doing walk throughs to produce real time attendance monitoring played an incredibly important role in ensuring safe staffing levels during industrial action.

The attendance monitoring enabled the industrial action committee to know who was arriving on duty at each handover period and therefore ensuring quick responses if required. At times, this would mean staff being redeployed from outpatient areas or clinical nurse specialist roles.

The monitoring work that began with the trust's need for oversight and data collection during strike action has now been embedded into the organisation. This has led to the Safe Staffing Matron undertaking regular audits to ensure this data collection continues to complement e-rostering insights.

Finally, the vital role played by the accurate and timely data, generated from areas of the trust already using the software during periods of strike action, has underlined to the trust's leadership the value of using e-roster data to enable effective planning. As a result, there is now an increased appetite from the organisation to roll out Allocate Optima to all remaining non-rostered Agenda-for-Change and medical staffing areas within the next two years.



Salisbury NHS Foundation Trust showed exactly the right use of data and information to plan for industrial action, ensuring patient safety is at the heart of all decisions.

Supported Workforce Award

Winner



Northumbria Healthcare NHS Foundation Trust



Team-based rostering for nursing staff in emergency care unit

What began as a three-month trial designed to create a better way of rostering nursing staff in the trust's Emergency Care Unit yielded such strong improvements in staff retention levels that this way of working is now permanently embedded into the nursing workforce.

The trial focused on the implementation of team-based rostering, using Allocate Optima to underpin a more flexible and collaborative approach to scheduling work patterns within one of the most demanding areas of care.

The imperative for this fresh approach to emergency department rostering arose from increased levels of short-term sickness, high staff turnover and low morale (identified via staff surveys) that followed changes in shift patterns that were designed to cover winter pressures while maintaining safe staffing levels. At this point, feedback from staff leaving the organisation included the view that some had limited input into roster production, making them feel undervalued.

The initial three-month trial saw the creation of a dedicated team that included more junior members of the ED nursing team, key managers and a representative from the trust's rostering team. This gave frontline care staff the opportunity to become more involved

in building rosters and to develop a greater understanding around the ways in which rosters are produced.

This approach, in conjunction with strong communication with RLDatix teams to review roster rules, resulted in rules that were more flexible during the trial period to accommodate staff feedback. This had the added benefit of speeding up the time taken for rosters to be produced. Systems were also put in place within the trust to ensure frequent and effective internal communication between relevant staff and those tasked with putting the rosters together. This included the use of an ED 'Big Room', a regular, dedicated space to discuss everything related to the roster and a safe forum for staff to voice feedback and concerns.

The trial went a long way in addressing working pattern issues. As a result, the trust has seen zero external leavers from the ED since March 2023, a remarkable turnaround from the high turnover experienced in previous years.

The trial also led to a reduction in vacancies within the ED, enhancing the stability of the team. This, in turn, has improved standards of care and patient experiences. Employee morale has received a significant boost as staff members feel valued and heard. The initiative has created a more positive care environment where employees have a say in their shift patterns and are empowered to contribute to the rostering process.

The flexible rostering approach has also enabled staff to achieve a healthier worklife balance. Staff can align their shifts with personal commitments, making it easier to manage family responsibilities and enjoy valuable time off. The trust's commitment to listening to its team, working collaboratively with RLDatix teams and reviewing roster rules has led to ongoing improvement.

Since the success of the trial within the emergency department, the trust's maternity team is trialling a similar rostering approach.



Northumbria Healthcare NHS Foundation Trust demonstrated highly flexible ways of working within an emergency department. The project clearly had high levels of staff involvement and shows positive results in terms of sickness, retention, and higher levels of staff morale.



Lewisham and Greenwich NHS Trust



The Staff Wellbeing Service

The impact of COVID-19 followed by increases in cost-of-living pressures and staff burnout have created conditions of heightened stress, anxiety, and sickness throughout the workforce. Over the last few years, the trust has been resolute in proactively investing in staff wellbeing services. In order to better direct these activities, the organisation has recruited a dedicated Senior Manager, with the Associate Director of Human Resources taking up the responsibility to deliver the service.

A wide array of initiatives were launched, spanning psychological, physical, spiritual and financial wellbeing. These initiatives include Wellbeing Trolleys offering free refreshments and social interaction. Since 2020, the trust has run over 750 such trolleys across its facilities.

Elsewhere, the trust's 'On The House!' events are quarterly meetings held at both primary hospital sites where staff can access free donated items and donate items they think their colleagues may benefit from using.

In recognition of the fact that the Lewisham and Greenwich Trust (LGT) workforce is predominantly an aging female population, LGT created Menopause Moments, a series of services and events designed to support older female staff and raise awareness of menopause. Menopause Moments offers a clinic, peer support groups and a service offering emergency menstrual kits.

The trust also created a Wellbeing Garden in collaboration with the Royal Horticultural Society, heavily featured in the media, as well as a voluntary Reverse Mentoring programme where managers and senior managers are mentored by ground level staff, many of whom frequently belong to a legally protected group. This is designed to increase understanding of staff from historically marginalised groups. Meanwhile, the International Staff Peer Group was formed to support the large number of international staff who are recruited each year.

Wellbeing Champions and Equality Advocates ensure are delivered personalised support and guidance, and regular workforce training sessions cover topics like emotional intelligence and LGBTQ+ studies. The Wellbeing Hub transformed a public space into a vibrant hub hosting various events, while the Cost of Living Bus and arts-based wellbeing programs further enhance support for staff.

As part of this work aimed at improving staff wellbeing, the trust has also re-written its sickness policy, renaming it the Wellbeing at Work policy. A key change has been to the way the trust records menopause-related absence (not identifying it as 'sickness').

As a result of these initiatives, the 2023 staff survey showed a significant reduction in anxiety and increased optimism across the trust.



Lewisham and Greenwich NHS Trust demonstrated high levels of inclusivity and identifying further areas to concentrate on to lead to increased job satisfaction and staff retention. This project highlights the value of investing properly in the workforce.

Sustainable Organisation Award

Winner



Barking, Havering and Redbridge University Hospitals NHS Trust



BHR Workforce Control Improvement Programme

Barking, Havering and Redbridge University Hospitals NHS Trust (BHR) found itself facing significant financial challenges. Over the past few years, it had been placed in financial special measures. The emergence of the COVID-19 pandemic further exacerbated the trust's financial struggles, necessitating the development of a comprehensive financial recovery plan. Given that a significant portion of the trust's operating costs were associated with staffing, the BHR Workforce Control Improvement Programme was initiated to support financial recovery and enhance the efficiency and effectiveness of the trust's workforce, aligning with the goals of the NHS People Plan.

Using key features in Allocate Optima, the workforce team led a diagnostic review, including a comparison of the trust's workforce with regional and national benchmarks, which helped shed light on unwarranted variations in staffing costs. One of the most significant findings was the presence of substantial premium waste within the contingent workforce - the difference between what BHR was paying for temporary staffing and what was considered standard or optimal practice. The pre-project baseline for temporary staffing expenditure was alarmingly high, reaching around 27% of the trust's total pay

expenditure, while London peers operated at approximately 14%, and the national benchmark was as low as 8.5%.

With the core problem identified, a multi-disciplinary control improvement steering group was established, composed of clinical directors and corporate leaders. Their objective was to develop an improvement plan grounded in evidence-based and equitable decision-making. This approach aimed to address the premium waste issue without punitive actions, fostering a sustainable and conducive environment for effective workforce management.

The steering group created a visual representation called the "Opportuni-tree", which illustrated various types of premiums to be targeted. This formed the basis for setting the waste baseline, engaging stakeholders, developing operational plans, and continuously monitoring the success of interventions.

With a waste premium identified at approximately £27m annually, the initiative galvanised teams to work collectively toward a common purpose. Clear communication from the executive team and clinical responsible officers helped steer the organisation's efforts. The result was a substantial reduction in monthly premium waste, from £2.3m to £1.6m, and an annual reduction of temporary staffing costs by around £10m.

In response to the challenges posed by the COVID-19 pandemic, a centralised workforce hub was established to facilitate large-scale nursing and medical redeployment, ensuring high-quality care and mitigating risks. It also led to improvements in patient care through the implementation of Allocate SafeCare software, enabling real-time assessment of staffing levels based on patient acuity and dependency, helping to balance the workforce and mitigate patient safety risks.



The permanent workforce increased by over 750 whole-time equivalents, providing greater stability in a challenging healthcare environment. The success of the BHR Workforce Control Improvement Programme

has led to the sharing of its methodology across North East London and other healthcare providers, further promoting the adoption of similar strategies.

What our judges said:

Barking, Havering and Redbridge University Hospitals NHS Trust offered an excellent example of how to address efficiency without compromising safety; one which can be easily replicated across other organisations in terms of process and sustainability.



South Yorkshire Integrated Care Board / Doncaster and Bassetlaw Teaching Hospital



Agency Reduction Programme

The South Yorkshire Integrated Care Board (ICB), in collaboration with Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust, embarked on a sustainability initiative to address escalating workforce costs, particularly the expense of temporary workers.

In response, the Agency Reduction
Programme was started to address this critical issue, beginning with a comprehensive data analysis, merging information from various sources, including the Allocate Optima rostering solution, temporary workforce records, vacancy data, and financial data.

This analysis was pivotal in revealing that agency worker costs in South Yorkshire ICS were substantially higher, when compared to other Integrated Care Systems (ICS). The team sought support and approval from the Chief People Officer, who recognised the gravity of the situation and fully embraced Quality, Service Improvement, and Redesign (QSIR) methodologies to engage stakeholders effectively. Together they conducted a series of meetings, workshops, and discussions, involving both internal and external stakeholders. These engagements facilitated the collection of valuable insights, data, and the triangulation of findings.

From the data analysis and stakeholder engagement, several areas of opportunity

emerged. The team prioritised two key areas for rapid and impactful changes: the high pay rates for agency workers, and the need for enhanced control and governance in the process of requesting and securing temporary workers.

The team identified a significant disparity in pay rates, with outliers paying an average of 20% more per worker to the same agencies for the same services. A procurement colleague obtained approval to negotiate and manage these agencies, successfully equalising pay rates with other organisations. Given the overreliance on temporary workers, particularly during the COVID-19 pandemic, the team recognised the necessity of introducing governance and control measures. Internally, restrictions and challenges were introduced to ensure the justifiability of temporary worker requests. Externally, the team worked with temporary worker suppliers to implement control measures. These measures ensured that requests for temporary workers were based on validated vacancies and followed established processes.

The program identified a root cause related to the development needs of managers, particularly those recruited during and shortly after the COVID-19 pandemic. To address this, a collaborative project involving all South Yorkshire trusts is underway. It aims to create a development programme for managers and workforce leads. This programme will accelerate the development of managers, enhancing workforce optimisation, planning, roster management, and improving service affordability and continuity of care.

The Agency Reduction Programme has had a profound impact on the sustainability and resilience of healthcare services in South Yorkshire ICS. It has successfully reduced the cost of agency workers by over £100,000 per week within the organisation, ensuring the affordability and sustainability of healthcare provision.



Improved workforce optimisation and utilisation of substantive staff greatly enhanced the continuity of care provided to patients. The valuable lessons learned from this initiative have been shared across all NHS trusts within South Yorkshire, with plans to extend these

lessons to all staff groups. A collaborative, cross-trust project is in progress to create a development program for managers and workforce leads.

What our judges said:

This was a really good initiative, clearly highlighting that agency reduction across an ICS can help organisations realise the goal of financial efficiency while maintaining a high quality of care.

Fairer Award for Diversity, Equity and Inclusion

Winner



West Yorkshire Mental Health, Learning Disabilities and Autism (MHLDA) Workforce Collaborative



Inclusive Recruitment – Diversity in the Workforce

The MHLDA Collaborative began piloting virtual recruitment events to support recruitment efforts during COVID-19, but also to enable its member organisations to reach a wider, more diverse pool of candidates.

The virtual platform was used to provide a recruitment fair experience online. The team hosted different virtual 'booths' where exhibitors could add information such as job opportunities, information about the organisation, pre-recorded videos and lots of other resources. In addition to the virtual booths the event auditorium function enabled employers to host interactive information sessions with delegates.

Information was made available for delegates to access on the platform for up to 30 days after the event, enabling interested attendees to access materials even if they were unable to attend a particular live slot. Over the four events the team organised 27 organisations from across the system participated and held over 97 interactive information sessions.

While these events covered all professions, two events focused on recruitment for entry level roles and for community support workers (CSWs) and resulted in 36 CSW appointments. The digital platform used to conduct these

events provided a wide range of capabilities – 'booths' for visitors to learn more about each employer, functionality to chat and host on-the-day job interviews, and interactive information sessions with delegates.

The most recent virtual recruitment events were held in partnership with Touchstone, a leading third sector provider of mental health and wellbeing services. Touchstone has experience of providing outcomesfocused support and progression pathways into employment for people who have vulnerabilities and are marginalised, including mental health issues, learning disability, substance misuse, criminal justice history and people with BME and LGBTQ+ identities.

This approach to recruitment has reduced barriers for under-represented groups in applying for these types of roles. It has also helped the NHS adopt an innovative approach to attracting and recruiting staff who are more representative of the Collaborative's service users.

The team also worked with local organisations such as Project Search and Bradford Skills House to facilitate attendance of potential applicants at events. A good example of the benefit of this was the support provided to a candidate who was visually impaired to help attendance at an in-person event, then a subsequent online event.

Since October 2022 the team has worked with candidates from under-represented groups and supported 115 people with different stages of the recruitment process (including support via email, phone, virtual meetings and in-person meetings). It has delivered 55 one-to-one employment support sessions and held five employment workshops reaching 47 people. There have been two in-person recruitment events reaching around 300 people and two online recruitment fairs reaching 526 people. Of the attendees, 75% were from ethnically diverse backgrounds and 50% were carers.



The partnership was able to demonstrate that it had adopted an innovative approach to recruiting staff in such a way that equality and diversity could be addressed - which is an important issue for the NHS.

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Midlands Partnership University NHS Foundation Trust



Digital Angels

The project began when Joan, a valued and experienced staff nurse, approached the digital training team feeling upset about her difficulties using multiple clinical systems. Although Joan was an expert in her role, use of these digital systems had not previously been a part of her job. The frustration she felt about her difficulties led her to consider quitting her job.

The training team listened to Joan with compassion and understanding and offered on-site face-to-face training sessions as often as she needed. This sparked a chain reaction of positive change, with the training improving Joan's wellbeing and work performance. Other demotivated staff saw the impact this had had on Joan and sought to benefit from similar training.

At the heart of the digital training team's commitment to staff and community is recognising the power and value of technology, only when it reaches every person, regardless of their role or background. The team built on these guiding principles and set out to identify and address the unmet digital training needs throughout the organisation using data gathered from a staff survey. The results of the staff survey revealed a clear picture of the challenges, revealing that many staff were unable to participate due to time constraints and frequent disruptions. It was evident that the traditional approach to training and learning needed a transformational shift.

This insight helped the team craft an inclusive way of approaching training and learning. The initiative resulted in 3,760 staff members undergoing comprehensive training across face-to-face sessions, virtual training and collaborative learning facilitated by 'Digital Angel trainers'. In addition, the Digital Training team has developed a comprehensive digital toolkit with 14 'How to' video tutorials in July 2023.

In the past, new technology was rolled out, staff were trained, and the team did not reengage with users. This often resulted in technology being 'put in the cupboard' and never being used again. The team has now changed their management approach, so that it highlights and communicates the benefits of the new technology. It also monitors the use of the technology which then helps the team to identify who is and isn't using the solutions.

The team then uses this intelligence to provide support and training, and identify blockers and problems, which they will work to fix to increase and encourage use of technology. Recognising the impact of unmet digital training needs and addressing them in a way that empowers staff, regardless of their geographical location, has fostered a culture of ongoing development within the organisation.

There has also been an impact on patients. By June 2023, the team distributed 130 KOMP devices and 17 Kraydel devices. These devices have played a crucial role in enhancing the digital inclusion of service users. By providing these devices, the team enabled patients to access care remotely, reducing the need for them to travel, and consequently increasing the time available for clinical interactions. This has also contributed to the continuity of clinical service provisions, even when patients are facing illness or isolation. These positive outcomes align with the trust's long-term goal of informing decisions regarding future remote consultation solutions.



This great initiative showed how it is possible to address the technical needs of staff in a very supportive and innovative way.

Innovative Award for Quality Improvement

Winner

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Epsom and St Helier Hospital NHS Trust



Pioneering ESRGo Implementation for Medics Onboarding

Epsom and St Helier University Hospitals NHS Trust, covering the London Borough of Sutton and North Surrey, operates two key hospitals - Epsom Hospital and St Helier Hospital - in addition to a specialised chronic fatigue and pain clinic at Sutton Hospital.

The trust is highly regarded for its sustained commitment to quality improvement, fostering a culture of continuous learning, and encouraging collaboration in the healthcare sector, making it one of the safest according to CQC indicators. In alignment with these core principles, Epsom and St Helier embarked on a transformative project designed to enhance the onboarding process for medical staff. The primary objectives were to minimise the hours spent on manual data entry, enhance data integrity, address user frustrations, and improve training retention. The goal was to ensure a seamless transition and comprehensive preparation for medical staff, beginning eight weeks before their start date.

Prior to this project, the trust faced several challenges associated with medical staff onboarding, which included a heavy reliance on manual data entry, resulting in inefficiencies and the potential for human errors. Additionally, data inconsistencies and inaccuracies hindered effective workforce

management, while both medical staff and administrative teams encountered frustration due to the cumbersome onboarding process. The existing training modules also required enhancements to ensure that new medical staff were well-prepared for their roles.

In response to these challenges, Epsom and St Helier NHS Trust began a journey that employed various strategies to address the issues, including leveraging Electronic Staffing Records (ESR) technology to streamline data management and enhance accuracy. The implementation of Allocate Optima and the integration of ESRGo improved workforce management, further improving data accuracy and overall efficiency. Data cleansing processes were introduced to ensure that all information was accurate and up to date, enhancing data integrity. Stakeholder engagement played a crucial role in the project, actively involving medical staff and administrative teams to collect feedback and ensure that the onboarding process catered to their specific needs. Furthermore, training modules were redesigned to provide a more comprehensive and effective preparation process for incoming medical staff, improving training retention.

The outcomes of this transformation of the onboarding process at the trust were felt immediately. First and foremost, medical staff readiness has been greatly improved, contributing to better patient care through increased medic readiness. Automation of data entry has significantly reduced human errors, ensuring data accuracy and compliance while promoting better decisionmaking. The project has resulted in more transparent workforce management and heightened divisional oversight, fostering better coordination and staffing levels. Wellstructured onboarding processes have led to a safer and happier workforce, improving overall staff morale.

Other benefits that the trust saw included the fact that patient care has been enhanced through better-informed medics, improved work-life balance, safer staffing levels, and reduced reliance on external staffing sources.



The optimisation of internal workforce management has resulted in cost savings while improving the quality of patient care.

This initiative has not only streamlined administrative processes but has also positively impacted workforce management,

staff morale, and patient care. By providing medical staff with the tools and preparation they need, OptimaESRGo has significantly contributed to the delivery of higher-quality healthcare services, ultimately benefiting both the institution and the patients it serves.

What our judges said:

Epsom and St Helier University Hospitals NHS Trust's use of OptimaESRGo stands as a fine example of quality improvement, a culture of continuous learning, and healthcare collaboration. This is a medics' programme of work to improve onboarding, setting benchmarks for excellence in quality improvement that are replicable across all organisations, as well as very informative ones.



Bolton NHS Foundation Trust



Driving down waiting lists with an innovative Staff Rostering System

Following the pandemic, Bolton NHS Foundation Trust found itself grappling with staffing pressures and a substantial elective backlog, which posed a potential significant challenge to patient safety. Legacy systems and processes for workforce planning in certain areas raised concerns about efficient resource utilisation and staff deployment. To address these critical issues, the trust initiated an innovative project aimed at optimising staff rostering, ensuring a balanced skill mix, and enhancing overall efficiency. The primary catalyst for this initiative was the pressing need to meet targets, improve patient safety, and make the best possible use of the trust's physical facilities.

Most of the trust's 6,500 staff were already using Allocate Optima, but in some specialised services like theatres, there was a need for added detail, which often involved supplementary paper records, spreadsheets, and manual processes. This approach resulted in human errors, overlaps, and disruptions, leading to cancelled theatre lists and staffing shortfalls with significant patient safety implications.

Recognising the need for a more sophisticated and integrated system, the trust explored Allocate ActivityManager, specifically designed for medical teams. This scheduling software can match not only the activity lead, but also any supporting staff such as junior doctors, nurses, ODPs, or to the appropriate

activity. It was designed in partnership with healthcare organisations to enable staffing to be managed around activities, from theatres to clinics, radiology and emergency activity.

ActivityManager offered the capability to synchronise e-Job Plans with staff rosters, creating a comprehensive solution for the non-medical teams with more complex rostering requirements. Given the urgency to meet national targets for elective care, theatres became the priority for the implementation.

The introduction of the innovative rostering system had a profound impact on patient care and overall quality improvement. Theatre list cancellations due to staffing issues saw a steady decline and, since December 2022, there have been no cancellations for this reason. This significant achievement has had a direct positive impact on patient care and staff morale.

The trust successfully met the 104-week elective recovery target, becoming the only trust in the Greater Manchester region to do so. This achievement is attributed to effective use of resources and efficient staffing, which has resulted in the highest number of patients per session in the region.

With well-planned rosters and insights into staff skills and preferences, the trust can better support staff training and development. Compliance with mandatory and statutory training, as well as appraisals, has improved, leading to better-skilled and motivated healthcare professionals. Staff can also now plan their lives more effectively as they receive their rosters well in advance, typically 30 days prior. This has a positive impact on their work-life balance and overall job satisfaction.

Rosters are now planned with precision, ensuring the right staff with the appropriate skill set are assigned to each shift. This minimises gaps and errors, leading to a more controlled and resilient staffing system. The system's long-term view allows for stable bank and agency bookings, reducing reliance on short-term variable pay rates. This not only leads to cost savings, but also positively affects the bottom line. The system can also



be accessed and updated 24/7, ensuring that short-term staffing issues do not disrupt clinical services during core hours.

As a next step, the trust plans to expand the system's use to other services and teams where basic rostering is insufficient for their requirements. This includes departments like Pharmacy, Podiatry, and additional theatre areas. The trust also aims to further improve

the system's automation and data capturing, as well as activity planning to ensure optimum use of its theatres and capacity.

The project showcases the effectiveness of collaboration between clinical and corporate teams in achieving significant benefits with existing technology. It is a testament to the trust's commitment to quality improvement, patient safety, and efficient healthcare delivery.

What our judges said:

Bolton NHS Foundation Trust's entry was a fine example of innovation in care, which can be replicated across all organisations which offer improved patient outcomes.

Engagement Award for Community & Collaboration

Winner



NHS Dumfries and Galloway



Dumfries and Galloway Early Adopters

NHS Dumfries and Galloway's Early Adopters programme not only streamlined staff scheduling across the trust, but also fostered collaboration and engagement across nearly 4,000 staff. This innovative project was introduced to optimise the NHS' Agenda for Change system. Facing the challenge of rolling out the eRostering system in a relatively short timeframe, NHS Dumfries and Galloway ran an 'early adopter' phase to evaluate the new system. The main goal was to onboard a new Agenda for Change team each week, providing comprehensive training and support in advance to ensure successful adoption. This was a strategic move to create a sense of urgency and continuity in staffing, facilitating strong working relationships between the project team and operational units.

Engaging early with teams proved to be a pivotal step. A meeting was organised with all team managers eight weeks before the beginning of building and training with the first team. This early interaction aimed to establish clear communication lines and mutual understanding among the teams. It was crucial to ensure that each team understood the requirements and expectations, including time commitments for providing essential information and attending training sessions. This upfront engagement played a significant

role in building enthusiasm and alignment, enabling teams to understand how their contributions would influence the project's success.

The engagement of senior management and key stakeholders, such as the Corporate Tommunications team, ensured that the project gained momentum and support from the very start. The project's timeline was aligned with wider goals, accentuating the sense of urgency and motivation among the teams. This alignment accelerated decision-making processes, allowing for the swift resolution of potential issues.

NHS Dumfries and Galloway's approach to the eRostering rollout centred on shared benefits. The project team took the time to assess and present the advantages that the new system would would bring to each team. This approach effectively conveyed how lessons learned from their experiences would benefit other teams by streamlining processes and optimising resource allocation. By emphasising this shared benefit, the teams were motivated to actively participate and offer insights that could better tailor the system to their operational needs. Open and effective dialogue dismantled silos that can often hinder cross-functional projects, fostering collaboration.

The project's commitment to creating a sense of urgency without compromising quality paid off. Emphasising the time-sensitive nature of the project secured high levels of commitment from team managers and motivated teams. This approach kept the project on track and facilitated prompt decision-making.

By consistently underlining the project's impact on improving processes, resource utilisation, and overall operational effectiveness, NHS Dumfries and Galloway maintained momentum throughout the early adopter phase. This contributed to the project's successful delivery, where key learning points were identified and integrated into the system.



The Dumfries and Galloway Early Adopters programme demonstrates how innovative solutions can revolutionise healthcare staff scheduling while promoting collaboration and engagement within an organisation. By fostering a sense of urgency, aligning with

organisational goals, and emphasising shared benefits, this project has not only streamlined processes but also set a fine example for successful cross-functional initiatives in future projects.

What our judges said:

It was a very close race with many refreshing and rewarding ideas, but NHS Dumfries and Galloway just pipped the competition because of the disciplined teamwork throughout this magnificent project.



West London NHS Trust / North West London ICB



NHS Refugee Employment Project

Against a backdrop of worldwide turmoil and conflict, the NHS in North West London has undertaken a pioneering community initiative, the NHS Refugee Employment Project. Led by the West London NHS Trust and North West London Integrated Care Board (ICB), this project serves as a beacon of hope for refugees who have found safe haven in the UK. It stands as a testament to the power of collaboration, compassion, and the pursuit of quality healthcare.

The catalyst for the project was the recognition that refugees arriving in the UK (often fleeing conflicts in countries such as Ukraine, Syria, Afghanistan, Sudan, and Yemen) possess qualifications, motivation, and the right to work. However, the existing NHS initiatives primarily focused on recruiting refugee doctors and nurses, leaving a gap for those in other vital roles within the healthcare system.

This project took a different approach, inclusive of everyone - porters, gardeners, healthcare assistants, administrators, support workers, IT analysts, finance and accounting professionals, HR specialists, allied health professionals, nurses, and doctors. In essence, anyone with the right to work was eligible. Another facet of the project was dedicated to recruiting asylum seekers and refugees into volunteering opportunities in the NHS, as well as in partnership with social care and the third sector. These opportunities not only reduced social isolation and depression

among asylum seekers but also allowed them to utilise their skills, gain work experience, and prepare for meaningful employment opportunities in the future.

The first step to success was the establishment of a programme board, including partner NHS trusts, local authorities, Job Centres, colleges, and charities. The initiative also prioritised collaboration with local partners, which involved working closely with local councils for voluntary organisations, and with national charities such as the Refugee Council, the Shaw Trust, Smart Works, Prince's Trust, and Ground Works. This collaborative effort enabled efficient cross-referrals based on the specific needs of refugees and asylum seekers, streamlining access to resources and opportunities.

A critical component of the project was direct engagement with asylum seekers. Regular visits were conducted in hotels across eight London boroughs, ensuring that new asylum seekers were registered and engaged with. This proactive approach aimed to reduce social isolation, provide support, and identify potential candidates for the program.

To ensure refugees had access to NHS and partner organisations' employment opportunities, the initiative regularly organised recruitment events exclusively for refugees. These events aimed to empower refugees by providing them direct access to roles within the NHS and partner organisations, helping bridge the gap between candidates and employment prospects.

The project left an indelible impact on the community and fostered significant collaboration among stakeholders. It raised awareness about staff shortages in specific areas of the NHS, prompting a recruitment success story that led to 39 refugees, including 11 doctors, finding employment in eight NHS trusts in the area.



The NHS Refugee Employment Project's recognition as a success story in the London Mayor's Anchor Institutions Network underlines its success. It has proven their

potential, commitment, and retention capabilities, ultimately highlighting the power of collective efforts in creating positive change within communities.

What our judges said:

The NHS Refugee Employment Project has transformed the perspective of various organisations involved, dispelling myths about recruiting refugees and asylum seekers. The scheme is highly commendable as the programme works with a wider variety of NHS and local partner organisations.





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