ALLOCATE

HealthRoster Case Study

Lesson from Covid: Learning from a Community Health Trust

Background

Central London Community Healthcare (CLCH) NHS Trust provides community health services to more than two million people across eleven London boroughs and Hertfordshire. Its vision is to deliver great care, closer to home.

Every day, its professionals provide high-quality healthcare in people's homes and local clinics, helping them to stay well, manage their own health with the right support and avoid unnecessary trips to, or long stays in, hospital. Services include district nurses, health visitors, children's services, physiotherapy and walk-in centres.

Given the breadth of services on offer, in order to effectively manage its workforce, CLCH has been using Allocate's HealthRoster e-rostering solution for five years to ensure that all units have the right staff, in the right place, at the right time to provide the best service possible. The Trust runs a fully integrated roster for 98% (3,950) of its substantive staff, as well as bank agency staff, which became invaluable at the onset of Covid-19. This level of integration meant CLCH has had staff deployment and status information which enabled them to plan for, and execute, as efficient a service as possible for its patients throughout the Covid-19 pandemic.

The Covid-19 challenge

Ensuring the continuity of excellent care to our patients and service users throughout the Covid-19 pandemic was naturally the top priority for CLCH. Meeting the NHS Level 4 Command and Control requirements was also paramount.

In order to provide this, however, there needed to be up to date information about all staff absence – including both substantive and bank staff – whether they were working from home, working from home with restrictions, in quarantine or absent due to Covid-related sickness.

To address this, an extended absence reporting system was created, with managers updating rosters on a daily basis. With this data in place, the Trust could review staffing levels, enabling them to identify gaps across service lines to take operational action and expedite referrals of those in isolation or displaying symptoms to testing centres.

The Allocate solution

The Allocate HealthRoster solution enabled the Trust to make necessary adjustments to absence recording and this information, combined with meticulous planning at daily meetings early on in the

process, provided information about both availability and demand for staffing needs at a local, clinical business unit, divisional and Trust level.

Julian St Clair-Gribble is Head of Workforce Information and HR Systems at CLCH. He explains: "We had two objectives throughout this period. The first was clearly a duty to patients to ensure they received the best possible care from the right staff, and secondly, whatever approach was taken, it had to have a minimum impact on the clinical teams, who already had a challenging environment to operate in.

"In order to achieve both objectives, we needed to adapt the rota to account for the new situation and introduce a rigorous recording regime, with strict rules about timings for data entry, so that accurate reports on staffing levels across the board could be produced in a timely manner. New fields for logging absences and quarantine were examples of how the rota was adapted with clear guidance on which unavailability to select for each situation a manager and employee faced. New rosters were developed to support the Nightingale Hospital and new discharge pathways.

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Head of Workforce Information and HR
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"As part of the new recording regime, we asked for all information about absences to be inputted into the rota by 9.30am on a daily basis so that reports could be generated by 10am and we could then be sure we had the right levels of staffing in the right areas.

"It was quite tense in the initial stages, but once those processes were in place, it was really just about making sure people were sticking to them and recording information on the rota as dynamically and as live as possible so that, at any given time, we had the complete picture of staff coverage."

With an effective process in place to ensure staff could record near real-time information, the Allocate solution was then able to support the operations team by reporting on the data in a multitude of different ways without requiring the team to search for additional information or reach out to already busy service lines.

"The Allocate system enabled us to continue providing essential patient care by providing us with a view of staff cover across the board and therefore enabling the Trust to deploy staff where needed, when needed, while minimising the pressure on the operational teams. The teams worked at top speed even in normal circumstances, so we had to ensure that the system provided them with the ability to ensure sufficient staff cover, despite increased absence levels, without adding significantly to their workload."

Current situation

Today, CLCH has restored non-urgent services across the community and is planning for a second wave. Technology as a whole, including the Allocate solution, has played a key role in enabling work to be carried out remotely meaning that patients can begin receiving care at the earliest possible opportunity. In each case, the Trust has worked tirelessly to ensure the safety of both staff and patients in carrying out this care.

"Forward planning was key and enabled us to offer exceptional support to our operational teams by having the information at our fingertips, being able to respond to requests, identify any issues and be able to handle the situation effectively.

"The fact that we utilised our technology from a very early stage in order to make sure we could manage with as many people as possible working from home to reduce any infection risk was absolutely key in our ability to continue delivering patient care where it was needed. The system tools really allowed us to minimise the impact of the additional reporting requirements on the operational teams, provide effective management information and oversight of the status at any given time so they could get staff back to work as soon as it was safely possible to do so and continue providing the excellent standard of care in our community that our patients have come to rely on."

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