

CASE STUDY

Integrated Community Teams Improvement Programme

Background

Integrated Community Teams provide a range of patient interventions, delivered by Community Nurses, Specialist Nurses and Therapists.

Historically, there had never been a link between the demand on each team and the resource provided to meet the demand.

The Executive team invited Meridian in to conduct an analysis with the aim to implement a capacity and demand model that will evidence the required level of resource to service each localities patient needs.

Community Services within scope made up of 12 Integrated Community Teams. The service as a whole are intended at delivering a high level of care, with the main goal being, to keep patients out of hospital and in their own home. The total workforce equals 535.6 within Integrated Community Teams.

Study Findings

The analysis was a three week long study, where a total of **55 days** was used. The current **Community Services** system showed a lack of control over activity, expectation, and performance.

The programme sold was a 21 week Improvement Project.

The overall goals of the project were as follows.

- Define and agree the HCP% of time in clinical v non-clinical activities within a net worked day;
- Implement HCP% clinical v non-clinical time and patient contact information into new team demand and required capacity planning;
- Develop and agree the new 'Way of Working' management controls – for Team Leaders, Matrons and General Managers. Containing the definitions of productivity and the language surrounding it;

- Develop and agree the Team Leaders, Matrons and General Manager 'Way of Working' management techniques and behaviours training workshops (soft skills including target setting, volume and mix forecasting, planning and assigning work, reporting and variance management;

Project

Meridian worked with the management team within **Community Services** through a series of interactions, consisting of meetings and workshops. During these various sessions a new management control system was designed to ensure effective running of the **Community Services**

The key focus was to implement management controls to **evidence the resource required to deliver the patient demand within each of the 12 localities, with the care intervention provided by the correct personnel, therefore producing a financial improvement to the Trust, alongside ensuring that the correct patients are on the caseloads and they are receiving the correct level of care.**

Results

The processes introduced and implemented gave the management of **Community Services**, better control over the Integrated Community Teams. As well as visibility on a daily basis of individual and team performance.

The main results of the programme are:

- Enabled the Trust to implement a new demand based staffing model, which in the first phase will deliver £1,999,677, with the opportunity for a further £1,734,617 in a second phase, scheduled for 17/18;
- Additionally put in place the steps that needed to be followed in order to realise the improvements, working



alongside Directors', HR, Workforce, Organisation Development & Staff Side representatives;

- Removed an annualised spend on Bank staff totalling £132,075, through the implementation of an evidence based approval process, meaning that Bank authorisation would go through a rigorous test focussing on team demand, staff expectations, available staffing before a response would be provided;
- Implemented the Trust 'fair days' work' approach, enabling the Trust to get there patient F2F% from 34.42% to 50%;
- Provided Executive & Senior management a 'how are we doing today' operating report, containing key performance measures, which had been agreed alongside Directors';
- Enabled the Trust to become more responsive and flexible with their workforce by flexing staff between Community Teams based on the individual demand within the team and the staffing available on a given day. Therefore ensuring an equal distribution of work both within individual teams and the Community service as a whole (12 locality based teams);
- Installed a more robust & structured allocation process alongside a systematic caseload review of patients;
- Conducted a Band 6 training week, where they were able to review 896 patients across all caseloads, which resulted in 134 patients being either discharged during review or planned a discharge visit for the next interaction. In addition this week provided the Band 6 staff the opportunity to actively engage in all of the transformation work being achieved, whilst allowing them the available time to make sure they are up to speed with the new processes and implementing them in the correct manner;

- Installed an updated Rota, which measures the proportion of staff unavailable to the team on a daily basis (expectation set of 23%), therefore pre-empting if the team would run in to capacity problems, whilst also acting as a leave request as it shows the Team Lead if they can afford staff taking leave. As an additional feature the Rota also provides the Team Lead with an approximate number of staff hours that can be given as leave on a weekly basis against the number of contracted hours within the team, when working with the expectation of 23% of staffing being unavailable on a weekly basis;

Contact Us

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Meridian Productivity was established 1996, and has been extensively involved in the Healthcare industry across the United Kingdom, Republic of Ireland, Holland, Belgium, Spain and the Czech Republic. Meridian assists clients across the Healthcare environment (private and public) in achieving improved operating efficiencies and performance, through the development of bespoke management and behavioural processes. These processes are all designed and implemented to ensure that our client organisation can be assured of returning the best performance on the resources applied.

We work with about 20 to 25 organisations a year, both in the public and private sectors, helping them to reduce their operating costs, improve their productivity and provide value for money.

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