

CASE STUDY

Community Services Improvement Programme

Background

First Community (FC) is an employee-owned social organisation, created in 2011. FC provide community healthcare services to people living in East Surrey and parts of West Sussex, in the local community, in patients' homes, in the community hospital, nursing home beds and in clinic settings.

FC was struggling to remain competitive under the current financial arrangements. There was an ever-growing risk of losing business to larger organisations. To gain a competitive advantage they invited Meridian in to conduct an analysis with the aim to reduce FC's unit costs per contact and to review capacity in relation to demand to allow for dynamic and evidence-based service resourcing.

The areas covered for the project included Falls, Health Visiting & Advice Line, Community Physio, District Nursing, Tissue Viability Caterham Dene Ward, Caterham Dene MIU, MSK Physio and Podiatry services.

Study Findings

The initial analysis consisted of a 3-week long study within FC ending in November 2021 which identified the following:

- The workload was not allocated to staff based on banding, skill mix or time.
- The ward rostered hours fluctuated and did not resemble the required safe staffing levels.
- The clinic-based services were not scheduled to ensure session and slot utilisation. With inappropriate slot lengths and types and no measure of lost slots.

As a result of the above findings, the programme sold was a 17-week improvement project.

The overall goals of the project were as follows:

- Increase the productivity across the services in the form of patient contacts.
- To design and implement a robust management system capable of capturing areas of lost opportunity and

bring around positive service improvements.

- Ensure a consistent method of working by standardising processes and procedures.
- Identify actual resource requirements by service with the creation of a dynamic Capacity Demand Model
- To design a system which enables the continual evaluation of work allocation and continued review and reduction of variances impacting the teams' work.

Project

Meridian worked with the teams across 11 services involving approximately 150 people including Associate Directors, Service Managers, Service Leads and Clinical Team Leads.

Working in partnership with First Community, ownership and responsibility for the projects goals and success was established and supported by the workshops and one-to-one coaching and follow up sessions. The workshops fostered a safe environment for the development of a bespoke management control system whilst providing a supporting space for managing behavioural change. All ideas, fears and challenges were brought to the floor, explored and tackled by the SM and TL's of First Community, with different services working together in collaboration in pursuit of improvement.

In cooperation with CTL's and SM's in-depth detailed process maps and in-depth observations were carried out throughout the services. The product of the extensive work was comprehensive and robust standardised planning 'norms' which provided a true reflection of the time taken for each activity. During the area development, patient facing targets were also established based on band and job role, and skills and competency flexibility matrices. In combination these components culminated in capacity plans for each of the services capturing all of their individual nuances. With the capacity of the services and each individual within the services established, the inclusion of service demands allowed for the identification of service and resource realignment across teams. With



accurate and reliable models established budget reduction opportunities could be identified. This provided FC with a multitude of options to become more competitive with a total annual saving identified through an increase in productivity of £2,646,372.

To drive the realisation of the identified improvements, a 'Fair Day's Work' allocation tool was developed. The purpose of the tool was to ensure all staff members were allocated their individual target amount of patient f2f activity. The allocation ensured that patients visits were planned to time, ensuring more patients were seen in a timely manner and that the distribution of work was fair and reflective of each individual's competencies and capacity. The tool saw the number of patient contacts per WTE double in one team rising from an average of 3.5 contacts per WTE per day to an average of 7 and a realised saving in reduction of locum spend of £75,000. Similarly, with an improved focus on slot and session utilisation. The installation of an available slot report and appointment template changes saw significant increases in patient contacts with another service rising to more than 6 contacts per person per day beyond base levels and 2 contacts per person per day beyond pre-covid levels.

The implementation of the resource requirement flex up calculator ensured that the ward would be staffed in line with safe staffing. The tool provided clarity to management and a means of justification and control over the use of additional staffing.

In order to capture lost opportunity and to underpin the process of continued improvement, operating and variance reports were designed and installed in each of the services. The reports equipped management with clarity of performance within the teams whilst providing team members with an outlet to evidence the impact specific variances had on their work. The operating and variance reports were supported by the implementation of daily and weekly reviews which cultivated a cultural shift to follow up on actual activity. A "Plan v Actual" review philosophy has been embedded within the services to inform more effective management decision making in pursuit of productivity and service quality improvement. As a result of the identification and evidence of variances within Children's services a transition towards admin management of therapist diaries is underway. The result of this has seen a significant increase in direct patient facing time and the number of

patient contacts per WTE. One service saw an increase from 3 to 6 contacts per WTE day on average.

Results

The overall realised annual savings was £1,362,960 with an identified opportunity of £1,283,412, which will be realised through continued productivity improvements and budget reduction ensuring FC have a competitive edge when compete for future contracts.

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.

Find out how Meridian can benefit your organisation.

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