



Creating a managed service platform to reduce cost and improve governance standards

The Royal Berkshire NHS Foundation Trust (Royal Berks) has managed to channel its entire locum doctor requirement through the NHS Professionals (NHSP) managed service platform to reduce costs, improve governance standards and help achieve key objectives within 12 working days.

High impact change 1: Increase understanding of the issue

Royal Berks requires up to 5,000 locum doctor assignments in a typical year, many of which are covered by long-term placements. Understanding the problem was key to getting a solution in place quickly.

What we did:

The trust found that demand for locums came from multiple sources, with little centralised visibility or control and many retrospective bookings. Locums were supplied through a variety of agencies and each agency generates an invoice for every individual timesheet completed by the locum during the assignment, incurring a back-office processing cost.

To address the staffing, cost and administrative issues, the trust executive team set out three key objectives:

- achieve clear visibility of all locum requests across the trust
- gain control of all medical locum suppliers
- reduce back-office processing and management costs.

High impact change 2: Manage the process and take control

Keeping close control on the implementation process meant that barriers could be removed and the system could be put in place quickly.

What we did:

The trust requested a proposal from NHS Professionals in December 2010 and, based on this, the trust executive team agreed to channel its entire locum doctor requirement through the NHSP managed service platform. We:

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- set a challenging delivery deadline of the first week of January 2011
 - agreed the scope, and decided to implement in two phases: implementing the platform and service for locums provided through existing agencies, followed by the on-boarding process for trust locums substantively employed by the trust
 - kept the project moving forward with an implementation team and daily conference calls.

We established a new platform and service for locums provided through existing agencies to ensure that all medical locum assignments within Royal Berks were:

- placed via the NHSP Online system
- allocated a specific booking reason
- authorised at the appropriate level
- available to appropriately qualified trust-based locums
- cascaded to all agencies via the NHSP:Online platform at an agreed time
- priced within the Buying Solutions Framework agreement [replaced in December 2011 by the Agency Partnership between NHSP, the Trust and Procure on behalf of the SHA]
- consolidated by NHSP to minimise back-office costs to the trust
- visible to the trust executive through NHSP Management Information.

Control over the quality of medical staff booked remains with clinicians but allows ease of reporting where concerns are raised.

High impact change 5: Engage with staff

Doctors, staff and primary agency suppliers were all engaged in the process though this was not always easy.

What we did:

The trust kept doctors in the four clinical division teams fully informed of the process, walking them through the process and identifying potential gaps.

In early December 2010, the trust met with its primary agency suppliers to explain the change in process and advise them that the trust would restrict locum assignments to GPS Framework rates or lower.

Initially, some of the agencies involved seemed not to want to work within the trust's new processes. The trust issued notice that where agencies were unable to comply with the trust's new arrangement, alternative agencies would be found. Following this, all agencies adopted the new arrangements.

Agencies were given one of 2 tier ratings and this gave sight of shifts at different timeframes.

Trust access through NHSP: *Online* for requesting agency locums was granted on 23 December 2010, allowing agencies to fill assignments due to commence in January 2011.

Results and next steps

Locum doctors filling short-term assignments at Royal Berks are now engaged on substantially lower rates, with minimal impact on income for the locums involved.

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Case study: The Royal Berkshire NHS Foundation Trust (Royal Berks)