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# Minimising the cost of medical rotas management

York Teaching Hospitals NHS Foundation Trust made efficiency savings of £225,000 through introducing a rota coordination team to maintain rotas, freeing up clinical and management time for service delivery.

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## High impact change 1: Increase understanding of the issue

The trust identified locum spend as a key priority for efficiency savings so we devised the roles of rota coordinators to manage the daily maintenance of our medical rotas.

### What we did:

We recognised that there was a long-term forecast that junior doctors would be in limited supply and as a result we would be spending more money on medical locums.

Our consultants in the elderly and medicine specialties identified that they were spending a lot of time on rotas, taking them away from their clinical and management duties. We piloted the idea of introducing rota coordinators to support the maintenance of rotas in these specialties.

Following the success of this, we decided to roll this out to obstetrics and gynaecology, the emergency department, surgery, trauma and orthopaedics and paediatrics.

The team oversees study leave and annual leave and fills gaps in rotas as they arise. Working closely with the directorate management team, in particular, they help to ensure that the directorate manager and clinical director are engaged in service activity rather than the management of rotas.

## High impact change 3: Manage your workforce, establish a sustainable supply

We realised that substantial savings could be made through the effective management of our internal bank staff, which could offer lower rates than external agencies.

### What we did:

We had an internal bank set up, but it was the rota coordination team that really saw the benefit of developing the bank and making better use of existing and past staff.

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They contact leavers prior to them leaving and ask if they would be available for bank work and also ask all new starters whether they want to come and work on the bank.

Bank staff are issued with bank locum contracts and opt-out waivers and provide their CVs and the departments they would like to work with. The department looks at the CVs and decides if they would like them to work there.

The rota coordinators have been able to look more creatively at how to make better use of staff and have a hierarchy for filling gaps in rotas:

1. look at existing resources
2. use the internal bank
3. go externally as a last resort.

We have also begun to work across organisations in the region to agree consistent rates to improve costs incurred from locum spend.

### High impact change 4: Work collaboratively

The new rota coordinators needed to establish strong working relationships with their directorates to understand how best to manage rotas while ensuring compliance with the New Deal and European Working Time Directive.

#### What we did:

We set up a team of three people working on a full-time basis. This is made up of two Band 4's managed by one senior rota coordinator.

Each team member is responsible for their own directorates, establishing strong working relationships with them by attending departmental meetings, and being viewed as part of the department's operational team.

As well as its key function of ensuring that compliance with the New Deal and European Working Time Directive is met, the team can look at alternatives to booking external locums and consider other options such as swapping shifts, cross-cover and using the internal bank of locums.

The rota coordinators are situated on a ward, which enables them to have quick and easy access to the senior decision makers and to the junior doctors they may need to approach to change their allocated shifts.

Crucially, they also provide an overview of requests for leave in terms of whether this would leave the rota unsafe to ensure the highest quality of patient care is met.

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## Results and next steps

The cost savings have exceeded expectations. From April 2010 to January 2011 we saved a total of £330,000 on temporary staff. The cost of the rota coordinators is £75,000, so the overall saving for the trust was £225,000.

We have continued to expand the rota coordination service, with more directorates being allocated a rota coordinator. We plan to eventually have a rota coordinator for all our major specialties as our performance measurements clearly illustrate that the investment is returned and exceeded.

We are also developing and streamlining our process around the booking of internal and external locums to ensure the leanest processes are used. We will be using the rota coordinators as a key step in this process.

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