



STAFF SCHEDULING MODERNIZATION PROJECT SUMMARY

County of Lambton

January 2022

Staff Scheduling Crisis

- We struggled even before the pandemic to meet baseline staffing needs and determine what our true capacity was
- At least one of our homes was critically short staffed with regardless of active recruitment
- We did not have the strategic resources to assess, plan and implement a solution
- Staff were disengaged, and sick and overtime was rising
- We engaged Workforce Edge to help us modernize our scheduling ecosystem, and stabilize our staffing.
- We tackled schedules, staffing procedures and our scheduling operations with a formal change engagement strategy to manage the intense resistance

Intervention – Planning

Assessment of current work force utilization and planning

Recommendations regarding scheduling business model

Assessment of task distribution, processes, & time expenditure of scheduling

Action plan/roadmap with change management considerations

Creation of new schedules across the organization

Plan to guide daily task and quality management

Intervention – Field Solution

Implementation of new master rotations (long range schedule) that include selection of 8 and 12 hours shifts – increase full time positions by 77

Consultation and engagement with staff, unions and operational leads each step of the way

Design and implementation of new scheduling procedures that support advanced planning

Key Performance Indicators for the scheduling service to keep on track with advanced planning and maintaining quality

Increased service hours of scheduling to make sure nurses are not trying to cover staffing while they care for residents

Properly sized replacement positions embedded in each new master rotations to support coverage of predictable leaves such as vacation and sick

Complexities of Change

- Current state of scheduling was very entrenched in short term planning such as having to create schedules every 4 weeks
- Current schedules with 8 hour shifts and every second weekend off caused inequity, drove down full time positions and created a situation where staff were only getting one day off at a time
- We didn't have replacement needs built in or informed by workforce analytics. We were consistently working short not meeting staffing needs to provide the best care
- This desperation was very unfair to staff as this requires us constantly reaching out with very short notice to take an open shift
- We were not taking advantage of the known replacement needs far enough in advance
- Staff and union concerns due to the lack of understanding of impact of past practices and the opportunities that could help stabilize resourcing and increase full time positions – i.e., move to 12 hour shifts, and 8 hour schedules move to 1 in 3 weekends

Intended Benefits

- Advanced planning up to 12 weeks out, increasing percentages of shifts filled
- 70 % full time positions supporting recruitment and retention
- Standardization of staffing procedures with a focus on efficiency and ensuring nurse managers are not doing scheduling
- Ability to consistency plan resources to staff our homes to provide the best care
- The creation a map so we could manage positions and see “true” vacancies and get ahead of the recruitment curve
- Increase fairness in schedules so that all staff, including part timers, have a long term schedule and are not constantly moved around
- Clarity on labor agreements to ensure we are designing the best highest quality schedules for out teams