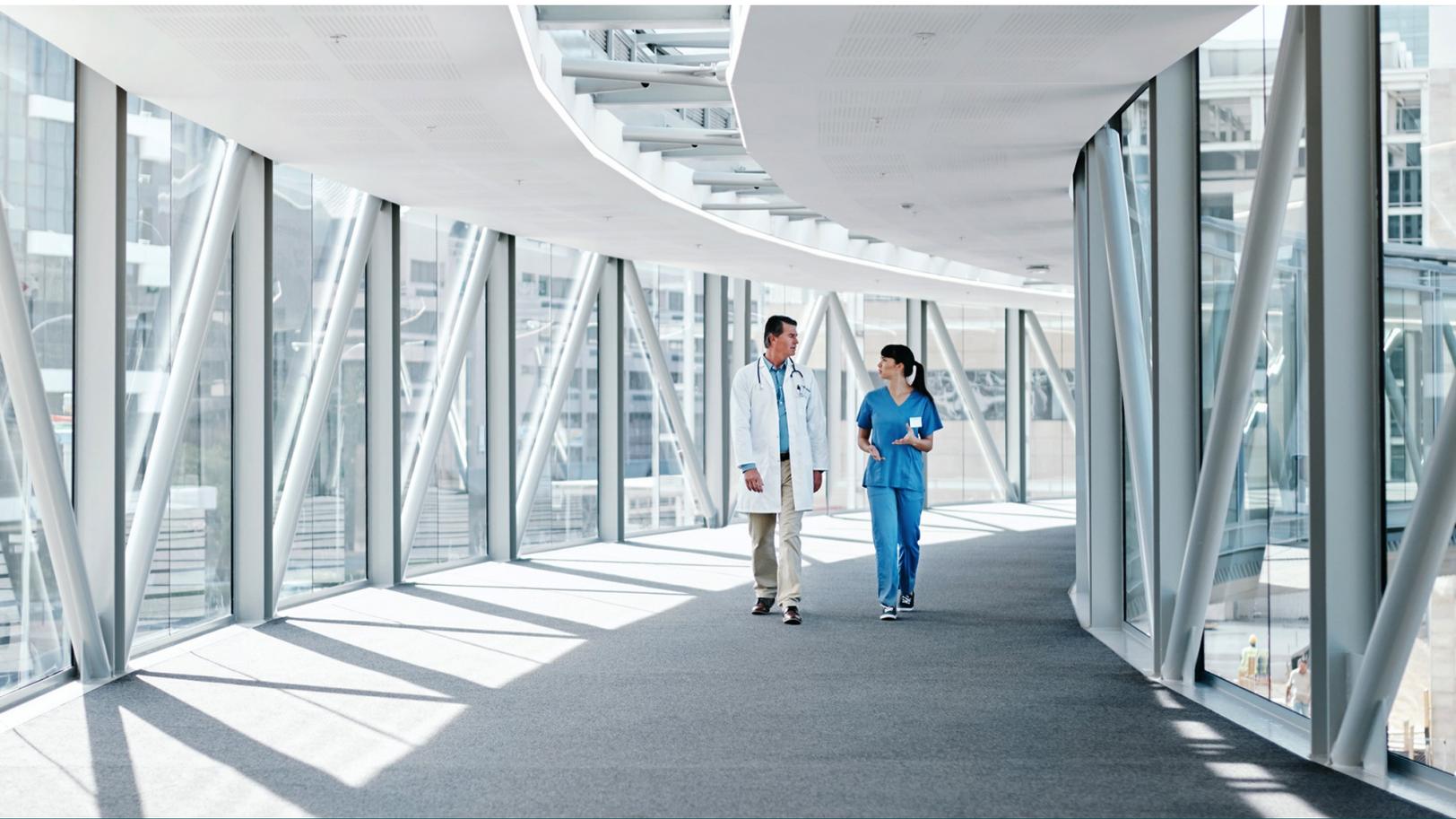




UKG for Healthcare

How Healthcare organizations have adapted workforce processes during the pandemic



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Hear how our customers have managed their workforces during COVID-19

Healthcare organizations have experienced unprecedented changes in the way they operate during the pandemic.

Hospitals faced significant financial, logistical, and other workforce challenges as they responded to COVID-19. They had to quickly pivot to address the needs of the current times. Some hospitals without elective cases and few COVID-19 patients had to reduce their staff or reallocate resources. Others had to set up satellite testing sites in a matter of days or create staff surge labor pools to handle the influx of patients. Hospitals across the country have shown they can adapt their processes and technology to continue to deliver on their mission of providing care to the patients in their communities, against all obstacles.

Collaboration among leaders and departments has been critical during the pandemic. According to healthcare executives in a HealthLeaders Media article, during the interim between the onset of the pandemic and the innovations that followed, a remarkable phenomenon occurred: unprecedented collaboration.¹ They also mentioned that during a recent session, leaders discussed how their organizations' COVID-19 responses extended beyond their own facilities and included coordinating with hospitals and health systems normally considered competitors.² Collaboration has enabled healthcare leaders to break down silos and share best practices and information that deliver value to their patients, staff, and organizations overall.

Over the past year, healthcare leaders shared stories of how they've leveraged their existing technology to adapt to their new needs and to align with unique business conditions. It is important during times like these that healthcare organizations work together and learn from one another.

At UKG™ (Ultimate Kronos Group), we have a significant number of healthcare customers across the continuum of care, from large health systems to small rural hospitals to skilled nursing facilities to outpatient clinics. During the pandemic, healthcare organizations have looked for unique ways to meet workforce demands while managing complexity and uncertainty. We'd like to continue the process of sharing and collaborating by showing you how some of our customers adapted their workforce systems and processes to manage during this time.



¹Roth, M., October 2020. The Unexpected Side Effect of COVID-19: Collaboration. HealthLeaders Media, found at <https://www.healthleadersmedia.com/innovation/unexpected-side-effect-covid-19-collaboration>.

²Ibid.

Mobile and self-service

The adoption of mobile was a significant change we saw customers make, and it was one that could scale quickly during this emergent situation. Customers expanded their mobile workforce capabilities for a few different reasons.

- The first was to manage the increase in employees working remotely. Employees working from home could clock in/out and access self-service capabilities on their mobile device, allowing them to gain visibility into schedules and access human resources – and payroll-related data.
- Some employees were scheduled to staff tent areas, so they utilized mobile time tracking at these remote locations.
- There were organizations that decided they didn't want employees to utilize a shared time clock, so they expanded their use of mobile within their healthcare facilities so employees could use their dedicated mobile device to clock in/out and reduce any cross-contamination risk.
- Managers appreciated the mobile capabilities because they could quickly communicate with frontline employees about available shifts they needed to fill.
- Last some very large healthcare customers from the Midwest sent volunteer staff from their home locations to other parts of the country. By expanding their mobile workforce capabilities, these employees could clock in/out from other hospitals they were helping support.

Reports

Reporting was something we heard about over and over again from customers. Some customers pushed out COVID-19 workforce reports to leadership on a daily basis. One large health system in New York was able to add new agency workers into its legacy Kronos® system so their time worked could be tracked which allowed the health system to generate a time-worked report it could use to understand its agency spend and to bill the agency. The health system also customized reports for daily sick time by department, which were automatically sent to senior management.



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Time tracking

Time tracking has been imperative during the pandemic, because organizations have needed to quickly and easily report on employees' time worked. By creating specific pay codes for staff working in COVID-19 areas, organizations could report specific hours worked related to COVID-19. Some organizations wanted to track additional hours staff worked due to COVID-19. By making modifications to their timekeeping systems, organizations could track where and when employees worked outside their normal settings to help determine the number of labor hours for that location.

All our workforce technology platforms have the ability to create a structure to track time where it is worked. If a customer needed to create a remote location, floor, or wing specifically to treat patients or residents with COVID-19 then they could choose to create a transfer at the clock or mobile device and schedule employees to that area. This allows finance to review budgeted labor hours versus actual hours in each location and validate the impact of employee transfers due to COVID-19. This also enables customers to capture time specifically spent on COVID -19-related work so they can apply for state/federal relief.

For instance, a large hospital in New York created additional transfer sets to track associates working in other departments than they normally would work in. Expenses were then charged to that department correctly.

Another way customers are managing time is by tracking employee time off due to COVID-19 and whether the employee was exposed to the virus at work or in their community. Some customers created separate codes for each for tracking purposes.



Regulatory changes

Every industry has been impacted by regulatory changes during the pandemic. One important thing we heard from all customers was that they needed a flexible system so they could manage the ever-changing regulations. A large hospital in New York was able to quickly change pay rules for tracking sick time related to COVID-19. Since the CARES Act required workers be paid for their COVID-19 sick time and not have it impact their paid time off (PTO), changes were needed to manage how their sick time was tracked and reported. Regulatory adjustments were also needed to track furlough pay and other Federal Emergency Management Agency (FEMA) reimbursements.

Attestation

Another area that has helped organizations adapt to the new demands was Attestation. Using the Attestation module, organizations created their own custom questions to capture travel or other questions they wanted employees to attest to.

PTO and accruals

When it came to looking at PTO and accruals, customers managed their workforces and the tracking of these very differently. In some cases, organizations created specific codes so they could track the reasons for PTO during COVID-19.

Another reason customers tracked PTO was to understand how many hours an employee was sent home during COVID-19 due to lack of work. Some organizations wanted to compare hours employees were sent home during COVID-19 versus other noncrisis situations. Some organizations allowed employees to go into negative PTO to capture hours not worked and not paid. We heard from some customers that have allowed employees to go into the negative during the crisis. While some were allowing negative 40 hours, others indicated they were allowing negative 80 hours so employees could be out due to quarantine and still receive their pay.



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Staffing and scheduling

Before COVID-19, it was hard enough for managers to make sure the proper staff with the proper skill mix were scheduled. Documentation for staffing and scheduling needs to be maintained for regulatory reporting purposes. During the crisis, full- and part-time employees who were normally scheduled to work on their own units may have volunteered to work extra hours if available. Opening shifts for all employees to view may require relaxing some scheduling rules and a flexible scheduling system. Our customers have become very creative during this time period. We all know that clinicians may be utilized in areas that they are not normally assigned, but we also heard from a customer that opened two hour shifts for greeters at the door, and these shifts were available to any employee. Another customer moved its clinic nurses and nurses from other organizations who were brought in and trained them to work as RN assistants, and where possible, had them help in Med/Surg since they already had the skills and licenses to do so.

Some of our customers already had a centralized staffing model. This allowed them to have a complete picture of resource needs and availability across the entire organization. Staff worked in multiple locations throughout the region, e.g., hospitals, pop-up hospitals, testing sites.

No matter the structure or system, a central command center needs to be able to see all employees so it can best utilize those who are available to work to provide the best quality of care in the safest environment.

Regulatory requirements and facility and unit-specific policies in addition to set practice standards can be incorporated into the scheduling tool to help ensure the right staff is assigned to the right patient.

Another area we heard helped customers was the functionality within Workload Manager. With the solution, they were able to match demand for care to the available clinical labor supply. By quantifying each patient's individual level-of-care needs, balanced, equitable shift-to-shift assignments could be made. Managers and charge nurses could quickly see which patients could be assigned to their supplemental staff and which should be given to someone with a specific skill or certification. One customer was able to quickly expand bed capacity and build out the additional units while tracking patient-to-staff assignments in the system. Also, by using the system to track shift notes the customer was able to document outliers, and since it was already familiar with the system, the process worked well for its staff.

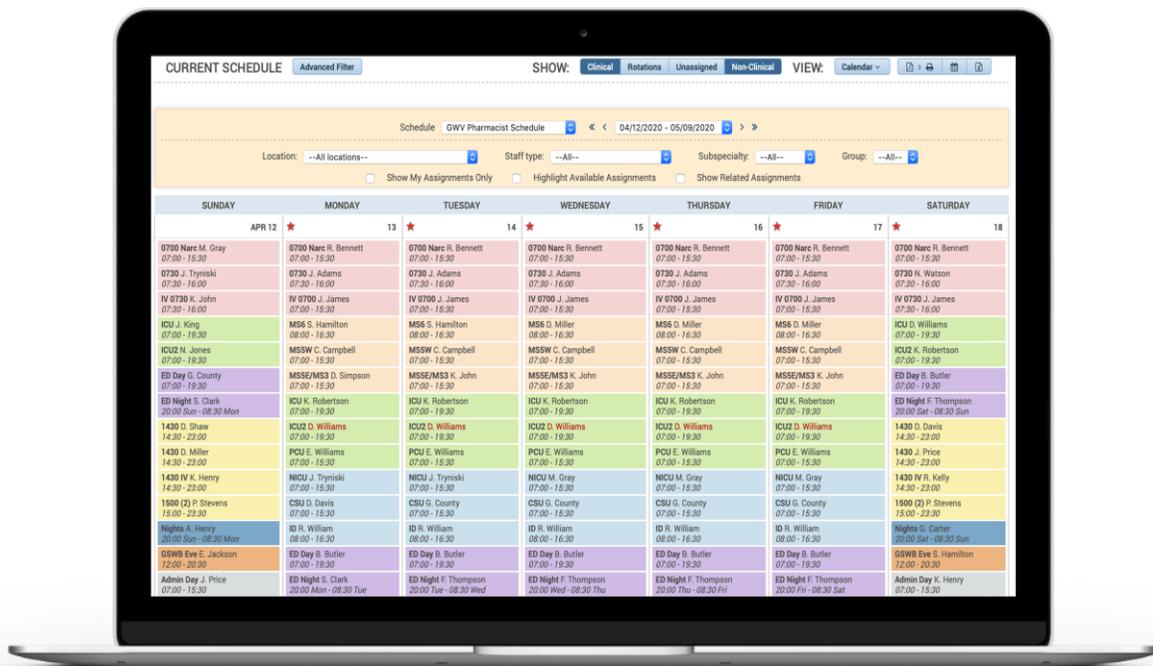
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UKG EZCall

Many customers were successful at adapting their current scheduling technology to meet their new, unique needs. For instance, one large health system in Pennsylvania was able to quickly close its outpatient clinics and reallocate resources to its testing sites. Using its existing UKG EZCall™ (formerly Kronos EZCall®) scheduling solution, it was able to create a “testing schedule” that allowed the health system to reassign providers across 10 different testing locations. The providers were able to continue using the scheduling system they were familiar with all while giving administrators visibility to where the employees were. Because they were able to create a COVID-19 testing site schedule, they could report info to FEMA based on the different testing sites, which provided information on what was going on and which provider was working where. The health system will continue to use its scheduling solution for presurgery COVID-19 testing and staff will be able to easily float from site, to site all within the system.



UKG EZCall also enabled customers to schedule their newly created pandemic tents. One specific customer was able to quickly create and manage eight different locations with over 500 staff. Most of the staff were redeployed from their home unit to the tents. Although the customer currently doesn't need to utilize all the staff it has, it's ready if another surge happens. Because these sites were across a region, the customer was able to view and manage individual locations and across the regions.

Looking forward

Based on the experiences our customers have faced during the pandemic, here are a few workforce management trends that we think will continue:

Mobile to the masses

Mobile self-service and self-scheduling capabilities will play a much bigger role given the dynamic changes in hospital care settings. From collecting punch data when the device is online or offline to pushing notifications to keep managers informed and finally to enabling shift swaps that allow employees to manage their personal lives, mobile workforce management will be part of the new normal going forward.

Managing fatigue and burnout

Care providers have put the interests of their patients and the public before their own. It's the professionalism of healthcare embedded in their DNA. Moving forward, how can organizations better support their caregivers and manage fatigue? According to Wake Up to the Facts About Fatigue ebook, 55% of nurses said having more control over their schedules would alleviate their fatigue, and 60% said if they had more say in their schedule, they could have better work/life balance.² With an automated solution, effective schedules can be generated that include a mix of employee skills and experience to deliver top-quality care. Providing nurses and other caregivers self-scheduling capabilities that allow them to set schedule preferences and swap and choose open shifts can help improve their work/life balance and decrease absenteeism.

Nursing leaders need to combat fatigue by managing the workload of caregivers based on each patient's unique care needs. Workload management functionality measures each patient's level-of-care intensity to quickly compile total workload, validate staffing levels, and generate balanced, equitable patient assignments for review and approval.

Navigating these uncharted waters

Across the continuum of care, the adoption of technology has accelerated and driven new innovations. New ways of working will emerge as providers navigate these unprecedented times at remarkable speeds. Yet at the end of the day, healthcare is all about people — staff, patients and the community. Looking out for their safety and well-being starts with your staff. No one knows what the future holds for the healthcare industry, but a lot of the lessons and insights learned from this pandemic will enable healthcare organizations to be more resilient and prepared for anything.

Learn more about UKG for Healthcare solutions at ukg.com/healthcare.

²Employee Engagement in Nursing Survey. Regina Corso Consulting on behalf of Kronos found at <https://www.kronos.com/resources/wake-facts-about-fatigue-ebook>