Labor Management Essentials

Optimizing our staffing resources for value-driven care

November 2016
Overview

• Why Sustainable Labor Management Strategies?
• Labor Management & Strategy Team (LMST)
• Labor Request (Requisition) Approval Process
• Labor Request Approval Tools
• Leader Support & Resources
• Timeline
Why are we Talking about Labor Management Strategies?

Healthcare is changing
- Move to value-based care
- Declining reimbursements
- Transition from inpatient to ambulatory care

UVA’s approach to Labor Management must change
- Flex budgeting with a focus on high quality (safe) care for our patients
- Having the right staff, for the right work, at the right time, in the right place...now and in the future
- Break down silos and look at positions from an organizational perspective
What changes are we making?

Establishment of a Labor Management & Strategy Team (LMST)

- Ensure staffing levels are supported by operational outcomes and the Flex Budget
- Ensure increased leadership knowledge and understanding of the departmental Flex Budget and team member productivity
- Increase workforce flexibility and encourage leaders to share resources or funding sources
LABOR MANAGEMENT & STRATEGY TEAM
- A new approach
Planning for Success

Labor Management & Strategy

Team Focus

• UVA mission, values and work plan goals
• Ensure leaders have the tools and training to effectively manage their existing resources
• Optimization of the workforce through internal efficiencies
• Creation of a nimble and adaptive approach to staffing in response to current and anticipated national workforce shortages in key clinical, technical and leadership roles

Tackling labor management at the Medical Center level results in improved coordination of resources and proactive identification of workforce needs overall.
Labor Management & Strategy Team (LMST)

Members:

• Tina Mammone, Chief Nursing Officer
• Bill Fulkerson, Chief Operating Officer
• Nick Mendyka, Chief Financial Officer
• John Boswell, Chief Human Resources Officer
Requisition Approval Process
Requisition Approval Process

**Current**

- Manager
- Director
- Chief

**New**

- Manager
- Director
- Administrator
- Assoc. Chief
- Chief
- LMST*
- CEO*

*Depends on the request*
Requisition Approval Process

Why the increased number of approvals?

• Each level has a different perspective:
  – Managers: Single department
  – Directors: Multiple departments
  – Service Line Administrators/Associate Chiefs: Service Line
  – LMST: Medical Center

All perspectives are necessary to ensure we are living our values of Stewardship and Accountability in the current and future healthcare environment.
SUSTAINABLE LABOR MANAGEMENT STRATEGIES - TOOLS

- Flex Labor by Job Role Report
- Labor Request Approval Guidelines
- LMST Labor Request Template
- Request for New or Changed Positions/Role Audits
What terms do I need to understand to use Flex Labor reports?

Key Terms

- **Unit of Service (UOS):** A critical element for the Flex Labor report. It is a workload statistic used to measure how busy a department has been for a given time period. The type of UOS associated with the various departments are typically as follows:
  - Inpatient department – Patient Days w SS/PP. Patient days including short stay / post procedure patients. Based on beds occupied during the midnight census.
  - Procedural department – Billed Procedures. A count of procedures recorded in the patient billing system for this department.
  - Clinic department – Visits. A count of attended patient visits.
  - Administrative department – Calendar Days. A simple statistic counting number of days in the calendar month or fiscal year.

- **Total Worked FTE:** Calculation of Full Time Equivalence (FTE) based on actual worked hours. Note does not include PTO.

- **Actual:** Actual amount of activity.

- **Budget:** Static budgeted amount of activity.

- **Flex Adjustment Factor:** Calculated as Actual UOS divided by Budgeted UOS. Used in Flex Budget calculation.

- **Flex Budget:** Budget that has been adjusted, either up or down, for changes in UOS. Uses the Flex Adjustment Factor ratio to adjust Budget up or down accordingly.

- **Variance (Flex vs Act):** Difference between Flex Budget and Actual. *Note this information is the main point of reference for the position approval process and appears as highlighted columns on the report.*

- **Variable Roles:** Group of job roles identified as being variable for “flexing” due to the Flex Adjustment Factor.

- **Fixed Roles:** Any job roles not identified as being Variable. These do not “flex”.

- **Fiscal Month / YTD:** The fiscal year begins with July and ends with June.
### What should I know about/how should I use the Flex Labor by Division Report?

<table>
<thead>
<tr>
<th>Area</th>
<th>Variable Roles</th>
<th>Fixed Roles</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample Admin</td>
<td>230.74</td>
<td>121.69</td>
<td>352.43</td>
</tr>
<tr>
<td>Area 1</td>
<td>257.43</td>
<td>129.03</td>
<td>386.45</td>
</tr>
<tr>
<td></td>
<td>26.68</td>
<td>7.33</td>
<td>34.02</td>
</tr>
<tr>
<td>Sample Admin</td>
<td>42.87</td>
<td>31.64</td>
<td>74.51</td>
</tr>
<tr>
<td>Area 2</td>
<td>59.28</td>
<td>31.31</td>
<td>90.59</td>
</tr>
<tr>
<td></td>
<td>16.41</td>
<td>(0.33)</td>
<td>16.08</td>
</tr>
<tr>
<td>Sample Admin</td>
<td>56.23</td>
<td>17.63</td>
<td>56.23</td>
</tr>
<tr>
<td>Area 3</td>
<td>56.93</td>
<td>19.07</td>
<td>0.70</td>
</tr>
<tr>
<td></td>
<td>0.70</td>
<td>1.44</td>
<td>2.41</td>
</tr>
<tr>
<td>Sample Admin</td>
<td>273.61</td>
<td>16.66</td>
<td>273.77</td>
</tr>
<tr>
<td>Area 4</td>
<td>316.71</td>
<td>19.07</td>
<td>309.37</td>
</tr>
<tr>
<td></td>
<td>43.09</td>
<td>1.44</td>
<td>35.60</td>
</tr>
<tr>
<td>Sample Division</td>
<td>227.19</td>
<td>16.66</td>
<td>226.50</td>
</tr>
<tr>
<td>Variable Roles</td>
<td>236.34</td>
<td>19.07</td>
<td>237.24</td>
</tr>
<tr>
<td></td>
<td>9.14</td>
<td>1.44</td>
<td>10.74</td>
</tr>
<tr>
<td>Fixed Roles</td>
<td>253.05</td>
<td>553.05</td>
<td>546.61</td>
</tr>
<tr>
<td>Total</td>
<td>52.23</td>
<td>46.34</td>
<td></td>
</tr>
</tbody>
</table>

**Variance:**
- Positive (black) variance indicates below budget. Possible factors: PTO usage, higher actual UOS than budgeted.
- Negative (red) variance indicates over budget. Possible factors: Overtime, lower actual UOS than budgeted.

**Variance Calculation:**
- \[ \text{Variance} = \text{Actual} - \text{Budget} \]
- \[ \text{Variance} = \text{Flex} - \text{Actual} \]

**Fiscal Month:**
- Aug-FY17
- AugYTD17

**Fiscal Year to Date:**
- Total Worked FTE
What should I know about/how should I use the Flex Labor by Administrator (Admin) Report?

Flex Labor by Job Role: Period Ending Aug-FY17
Example Administrative Area

<table>
<thead>
<tr>
<th>Job Role</th>
<th>Actual</th>
<th>Flex Adj Factor</th>
<th>Variance [Flex vs Act]</th>
<th>UOS</th>
<th>Total Worked FTE</th>
<th>Variance [Flex vs Act]</th>
<th>Total Worked FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2XXXX ICU Dept</td>
<td>Patient Days W. SS/P</td>
<td></td>
<td></td>
<td>95906 - Patient Care Technician</td>
<td>2.81</td>
<td>3.39</td>
<td>0.57</td>
</tr>
<tr>
<td>95710 - Patient Care Assistant</td>
<td>1.04</td>
<td>1.72</td>
<td>0.68</td>
<td>1.04</td>
<td>1.72</td>
<td>0.68</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95773 - Patient Companion</td>
<td>0.00</td>
<td>(0.01)</td>
<td>(0.01)</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95521 - RN Clinician 1</td>
<td>1.69</td>
<td>7.85</td>
<td>6.17</td>
<td>1.69</td>
<td>7.85</td>
<td>6.17</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95543 - RN Clinician 2</td>
<td>16.94</td>
<td>16.73</td>
<td>(0.21)</td>
<td>16.94</td>
<td>16.73</td>
<td>(0.21)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95557 - RN Clinician 3</td>
<td>56.13</td>
<td>60.64</td>
<td>4.50</td>
<td>56.13</td>
<td>60.64</td>
<td>4.50</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95566 - Registered Nurse-MC Pool</td>
<td>0.04</td>
<td>0.09</td>
<td>0.05</td>
<td>0.04</td>
<td>0.09</td>
<td>0.05</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95568 - RN Clinician 4</td>
<td>0.72</td>
<td>0.56</td>
<td>(0.15)</td>
<td>0.72</td>
<td>0.56</td>
<td>(0.15)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95938 - Registered Nurse-UB Pool</td>
<td>2.89</td>
<td>0.53</td>
<td>(2.31)</td>
<td>2.89</td>
<td>0.53</td>
<td>(2.31)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>Variable Roles</td>
<td>82.27</td>
<td>91.55</td>
<td>9.28</td>
<td>82.27</td>
<td>91.55</td>
<td>9.28</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95722 - Health Unit Coordinator</td>
<td>5.91</td>
<td>5.08</td>
<td>(0.83)</td>
<td>5.91</td>
<td>5.08</td>
<td>(0.83)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95727 - Administrative Assistant</td>
<td>0.79</td>
<td>0.92</td>
<td>0.13</td>
<td>0.79</td>
<td>0.92</td>
<td>0.13</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95613 - Nurse Manager</td>
<td>1.00</td>
<td>0.92</td>
<td>(0.08)</td>
<td>1.00</td>
<td>0.92</td>
<td>(0.08)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>96128 - Assistant Nurse Manager</td>
<td>1.02</td>
<td>1.83</td>
<td>0.81</td>
<td>1.02</td>
<td>1.83</td>
<td>0.81</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>95641 - Nursing Education Coord 2</td>
<td>0.96</td>
<td>0.90</td>
<td>(0.06)</td>
<td>0.96</td>
<td>0.90</td>
<td>(0.06)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>Fixed Roles</td>
<td>9.68</td>
<td>9.65</td>
<td>(0.02)</td>
<td>9.68</td>
<td>9.65</td>
<td>(0.02)</td>
<td>Flexible Budget</td>
</tr>
<tr>
<td>Dept Total</td>
<td>1,438</td>
<td>2,408</td>
<td>1.0124</td>
<td>91.94</td>
<td>101.20</td>
<td>9.26</td>
<td>Flexible Budget</td>
</tr>
</tbody>
</table>

* 2,438 divided by 2,408 = 1.0124. This department’s budgeted FTE will flex up 1.24% for variable roles.
The Flex Labor Report is a tool to help you make informed business decisions and is the primary point of reference to support the position approval process.

Typically the report is available by the 10th business day of the month and available at O:\SHARE\REPORTS\HyperionReports\Management_Reports.

Email notifications are sent each month once the latest report is accessible.

Note the subfolders for Fiscal Year and Period. Make sure you are referencing the most recent set of folders.

- Division Summary folder contains summary reports for each division. These reports give a high-level view of a division but do not provide job role / department information.

- Service Line – Admin Area folder contains reports for each administrative area. Each report includes department / job role detail. These reports contain detail information including job role / department level
Future Management Reporting Enhancements

- Flex Medical Supply and Pharmaceuticals Report.
  - Budget will flex up/down for pharmaceutical and medical supply expenses only.
  - Utilizes same methodology (Flex Adjustment Factor) as Flex Labor Report.

**Flex by Department - Medical Supply and Pharmaceuticals: Period Ending Sep-FY17**

**Sample Admin**

<table>
<thead>
<tr>
<th>Department</th>
<th>Patient Days W. SS/P</th>
<th>Medical Supplies Exp</th>
<th>Pharmaceutical Expense</th>
<th>Variance [Flex vs Act]</th>
<th>Actual Budget</th>
<th>Flex Budget</th>
<th>Variance [Flex vs Act]</th>
<th>Actual</th>
<th>Flex Budget</th>
<th>Variance [Flex vs Act]</th>
</tr>
</thead>
<tbody>
<tr>
<td>2XXX Unit A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,029</td>
<td>1,909</td>
<td></td>
<td>$51,319</td>
<td>$46,728</td>
<td>($4,591)</td>
</tr>
<tr>
<td>2XXY Unit B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,924</td>
<td>1,939</td>
<td></td>
<td>$41,049</td>
<td>$34,004</td>
<td>($7,045)</td>
</tr>
<tr>
<td>2XXZ ICU Unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>648</td>
<td>727</td>
<td></td>
<td>$33,235</td>
<td>$27,718</td>
<td>($5,517)</td>
</tr>
<tr>
<td>2YYY Procedural Lab</td>
<td>CASES</td>
<td>840</td>
<td>684</td>
<td>$967,012</td>
<td>$1,092</td>
<td>175,352</td>
<td>$827,742</td>
<td>$3,256,541</td>
<td>$3,778,466</td>
<td>$521,926</td>
</tr>
</tbody>
</table>

**Sample Admin**

- Flex Medical Supply and Pharmaceuticals Report.
  - Budget will flex up/down for pharmaceutical and medical supply expenses only.
  - Utilizes same methodology (Flex Adjustment Factor) as Flex Labor Report.

**Flex by Department - Medical Supply and Pharmaceuticals: Period Ending Sep-FY17**

**Sample Admin**

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<thead>
<tr>
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<th>Actual Budget</th>
<th>Flex Budget</th>
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<tr>
<td>2XXX Unit A</td>
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<td></td>
<td></td>
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<td>2,029</td>
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<td>$33,235</td>
<td>$27,718</td>
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</tr>
<tr>
<td>2YYY Procedural Lab</td>
<td>CASES</td>
<td>840</td>
<td>684</td>
<td>$967,012</td>
<td>$1,092</td>
<td>175,352</td>
<td>$827,742</td>
<td>$3,256,541</td>
<td>$3,778,466</td>
<td>$521,926</td>
</tr>
</tbody>
</table>

**Sample Admin**
• Service Line Profit / Loss Report.
  • Summarized view of patient / cost data by service line
  • Current and prior fiscal year rolling months.
  • Targeted release of January 2017.
<table>
<thead>
<tr>
<th>Finance Consultants</th>
<th>Supported Service Lines and Operating Areas</th>
</tr>
</thead>
</table>
| Chris Branin                 | ▪ HIT  
                             | ▪ EPIC / PFA / PFB                                                                |
| Keith Morris                 | ▪ Perioperative  
                             | ▪ QPI / Be Safe / Special Projects  
                             | ▪ Patient Experience  
                             | ▪ Supply Chain  
                             | ▪ Facilities Planning & Management |
| Kelly Bell                   | ▪ Women's & Children's  
                             | ▪ Medical Subspecialties: Allergy, Dermatology, Endocrinology, Family Medicine, General Medicine, ID/Travelers, Nephrology, Pulmonary, Trauma, Urology  
                             | ▪ Advanced Nursing  
                             | ▪ Nursing Professional Development Services  
                             | ▪ Care Management  
                             | ▪ Labor and Physician Workforce |
| Nancy Blackburn              | ▪ Musculoskeletal  
                             | ▪ Neurosciences & Behavioral Health  
                             | ▪ Clinical Ancillary: Radiology, Therapies  
                             | ▪ Surgical subspecialties: Dentistry, ENT, General Surgery, Plastics, Urology  
                             | ▪ HR, Marketing, GME, CEO |
| Kim Richardson               | ▪ Heart & Vascular  
                             | ▪ Transplant  
                             | ▪ Ophthalmology  
                             | ▪ Post Acute: LTACH, Continuum  
                             | ▪ Clinical Ancillary: Pharmacy, Labs |
| Stephanie Baker              | ▪ Oncology  
                             | ▪ Digestive Health  
                             | ▪ Palliative Care  
                             | ▪ Patient & Guest Services  
                             | ▪ Environment of Care |
| Jerry Huml                   | ▪ Emergency Department  
                             | ▪ Emergency Management  
                             | ▪ Infection Control  
                             | ▪ Patient & Guest Services  
                             | ▪ Environment of Care |
Key Categories

1) Variable Positions
   • Positions that fluctuate with work volume or units of service such as, patient days, calendar days, etc.
   • Final approval may occur with either the Chief or LMST
   • Examples include RNs, PCAs, Physical Therapist Clin 2

2) Fixed Positions
   • Positions that are not influenced by work volume -
   • All positions not identified as Variable
   • Final approval by LMST
   • Examples include Administrative Assistants, Software Systems Engineer, Nurse Practitioner, etc.

3) Management Positions
   • All positions included in the “Management” job family
   • Must be approved by Chief, LMST, and CEO
Key Categories

4) Other

- Less common situations that require various levels of approval
- Because they are less common, managers often have questions about the approval process
- As a result, information on the approval process for these situations is provided in the LMST Guidelines Summary
- Some scenarios will require approval outside of Taleo (new forms will be introduced)

A few examples include:
- Change in job role resulting in a pay increase where the change is not part of an automatic career progression
- All Wage positions, including replacement, new or changes in status from Wage to Benefit or Benefit to Wage
- Change in classification from “fixed” to “flex” and vice versa
Review Leader Tool

Summary of Labor Management & Strategy Team Approval Guidelines

- Variable position requests
- Fixed position requests
- “Other” requests
KEY TALEO CHANGES
Taleo

Overview of Changes:

– Approval process
– Variance Targets
– Requisition Sample
– Traveler/Administrative Temp (non clinical) request
Key Taleo Changes

APPROVAL PROCESS
Taleo Approval Process

– All positions require all levels of management approval

– The approval process may vary, based on key factors

– Variable, Fixed and Management positions may have different criteria and potentially different final approvers
Key Taleo Changes – APPROVALS
• Updated to reflect new approval process

**CURRENT**
- One level up + Chief
- Two approvers

**NEW**
- **All** levels in management chain*
- Could be up to five approvers

* Levels include Department Manager, Director, Administrator, Associate Chief, Chief
Note, not all departments have all levels in their management hierarchy
Taleo Approval Process

• **Variable Positions:**

  – Variable positions: *Meeting* Flex Variance targets:

    - Hiring Manager
    - Management Approvers
    - Chief
    - HR to Post

  - Variable Positions: *Not Meeting* Flex Variance targets:

    - Hiring Manager
    - Management Approvers
    - Chief
    - LMST
    - HR to Post
Taleo Approval Process

• **Fixed Positions:**
  – All Requisitions

• **Management Positions:**
  – All positions in management job family
  – Assistant Manager to Chief
  – Replacement, New, Revision
1. Requisitions requiring only Chief approval:
   • Upon Chief approval, HR is notified via Taleo
   • HR posts the position
   • No delays

Note: Chiefs with potential final approval authority:
- William Fulkerson, COO
- Tina Mammone, CNO
- Nicholas Mendyka, CFO
- John Boswell, CHRO
- Rick Skinner, CITO
- Jeffrey Keller, CIO
- Michelle Hereford, Chief Community Hospital and Post Acute Division

- Trish Cluff, Chief Strategic Relations & Marketing
- Dr. Tracey Hoke, Chief Quality and PI
- Mark Pulczinski, Chief Revenue Cycle
- Dr. Chris Ghaemmaghami, CMO
- Douglas Lischke, Chief Accounting Officer – HS
- Charles Coder, Chief Financial Officer – JOC
2. Requisitions Requiring LMST Approval – Timing/Process:

1. Tuesday COB
   Chief completes approvals in Taleo

2. Wednesday - COB
   HR prepares weekly LMST position review list and sends to Finance

3. Thursday – Noon
   Finance completes review of Flex Variance and sends to HR and LMST

4. Thursday - COB
   Mgr & Admin notified to attend LMST between 7:00 and 8:00 on Friday

5. Friday – 7:00 – 8:00 am
   Mgr & Admin arrive and sign-in (labor requests reviewed in order of sign-in)

6. Friday – COB
   HR enters LMST decisions into Taleo

7. Monday – COB
   HR posts positions
3. Requisitions requiring CEO approval:

- Upon completion of LMST approval
- LMST Committee member reviews with CEO at their next scheduled 1:1 meeting
- Typically within one week of the LMST meeting
- Upon approval, HR will be notified via email and the position will be posted

- Note: for positions that report to other health system executives (Dr. Richard Shannon, Larry Fitzgerald), the LMST member will review the recommendation with them for final approval
Key Taleo Changes

FLEX VARIANCE
Key Taleo Changes – FLEX VARIANCE

CURRENT

- **Fixed Positions:**
  Approval requires Variance of -1.0 or less

- **Variable Positions:**
  Approval requires Variance of -1.0 or less

Variance Criteria:
Flexible Labor by Job Role Report:
- YTD for Job Role

NEW

- **Variable Positions:**
  Approval requires variance to be -0.5 or less

- **Fixed Positions:**
  Approval requires variance to be 0.0 or less

Variance Criteria:
Flexible Labor by Job Role Report:
- Month and Year-to-Date
- Job Role and Department
Key Taleo Changes

REQUISITION SAMPLE
No additions to this section, some items moved and some removed to simplify.
Be sure to add collaborators

No changes to this section
Taleo – New Requisition

Drop Down Options:
- Variable
- Fixed
- Management
- Wage (Variable or Fixed)

Drop Down Options:
- Replacement
- New Position (job code already exists in department)
- New Position (job code does not exist in department)

Drop Down Options:
- Yes
- No
From the Flex Labor by Job Role Report:
- Month/Job Role Variance
- Month/Department Variance
- Data is from the report
## Taleo – New Requisition

### Flex Labor by Job Role: Period Ending Aug-FY17

#### Example Administrative Area

<table>
<thead>
<tr>
<th>Job Role</th>
<th>AugYTD17</th>
<th>AugFY17</th>
<th>AugYTD17</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UOS</td>
<td>Total Worked FTE</td>
<td>Total Worked FTE</td>
</tr>
<tr>
<td></td>
<td>Actual</td>
<td>Flex Adj Factor</td>
<td>Actual</td>
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<td>2XXX ICU Dept PATIENT DAYS W. SS/P</td>
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<tr>
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<td>2.81</td>
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<tr>
<td>95710 - Patient Care Assistant</td>
<td>1.04</td>
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<tr>
<td>95773 - Patient Companion</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>95521 - RN Clinician 1</td>
<td>1.69</td>
<td>7.85</td>
<td>6.17</td>
</tr>
<tr>
<td>95543 - RN Clinician 2</td>
<td>56.13</td>
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<tr>
<td>95557 - RN Clinician 3</td>
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<td>16.73</td>
<td>(0.21)</td>
</tr>
<tr>
<td>95566 - Registered Nurse-MC Pool</td>
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<tr>
<td>95568 - RN Clinician 4</td>
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<td>(0.15)</td>
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<tr>
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<tr>
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<td>95727 - Administrative Assistant</td>
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<td>0.13</td>
</tr>
<tr>
<td>95613 - Nurse Manager</td>
<td>1.00</td>
<td>0.92</td>
<td>(0.08)</td>
</tr>
<tr>
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<td>1.83</td>
<td>0.81</td>
</tr>
<tr>
<td>95641 - Nursing Education Coord 2</td>
<td>0.96</td>
<td>0.90</td>
<td>(0.06)</td>
</tr>
<tr>
<td>Fixed Roles</td>
<td>9.68</td>
<td>9.65</td>
<td>(0.02)</td>
</tr>
</tbody>
</table>

#### Department Totals

- **Dept Total**: 2,438 - 2,408 = 10.0124
- **Dept Total**: 91.94 = 101.20 = 9.26

### Notes

- Month
- Job Role
- Department
From the Flex Labor by Job Role Report:
- Year to Date/Job Role Variance
- Year to Date/Department Variance
- Data is from the report
Taleo – New Requisition

Flex Labor by Job Role: Period Ending Aug-FY17
Example Administrative Area

<table>
<thead>
<tr>
<th></th>
<th>AugYTD17</th>
<th>Aug-FY17</th>
<th>AugYTD17</th>
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<tr>
<td></td>
<td>UOS</td>
<td>Total Worked FTE</td>
<td>Total Worked FTE</td>
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<td></td>
<td>Actual</td>
<td>Budget</td>
<td>Flex</td>
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<tr>
<td></td>
<td>Factor</td>
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<td>2,408</td>
<td>1.0124</td>
</tr>
</tbody>
</table>

- Year to Date
- Job Role
- Department
Drop Down Options (all four questions):
- Yes
- No

Drop Down Option:
- Yes
- No
If No to any of the four preceding questions, must answer No

- Flex Labor Variance Targets
- How to access Flex Labor by Job Role Report
- Flex Labor Variance Targets
- How to access Flex Labor by Job Role Report

Provide requisition justification here
Taleo – New Requisition

No changes to this section
Key Taleo Changes

Sample Completed Requisition
Sample - Completed Requisition
# Sample - Completed Requisition

**RN Clinician 2 (21650)**

**Owners**

- Recruiter: Goelten, Jody M
- Hiring Manager: Carpenter, Richard M

**Collaborators**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Email</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andrea</td>
<td>Caufield</td>
<td><a href="mailto:1-clc2ty@hsomail.mcc.virginia.edu">1-clc2ty@hsomail.mcc.virginia.edu</a></td>
<td></td>
</tr>
<tr>
<td>Richard</td>
<td>Carpenter</td>
<td><a href="mailto:1-mcdin@hsomail.mcc.virginia.edu">1-mcdin@hsomail.mcc.virginia.edu</a></td>
<td>Nurse Manager</td>
</tr>
<tr>
<td>Joel</td>
<td>Anderson</td>
<td><a href="mailto:1-pradit@hsomail.mcc.virginia.edu">1-pradit@hsomail.mcc.virginia.edu</a></td>
<td></td>
</tr>
<tr>
<td>Thomas</td>
<td>Saul</td>
<td><a href="mailto:1-lps5g@hsomail.mcc.virginia.edu">1-lps5g@hsomail.mcc.virginia.edu</a></td>
<td></td>
</tr>
</tbody>
</table>

**2. Process**

Candidate Selection Workflow
Sample - Completed Requisition
Sample - Completed Requisition

RN Clinician 2 (21650)

- **Month-Total Worked FTE**: 2.6
  - Department Total Variance (Flex vs. Actual): 0.36

- **Year to Date-Total Worked FTE**: -4.63
  - Department Total Variance (Flex vs. Actual): -0.63

**Supported by Budot**
- Is this FTE supported in your Monthly job role variance?  
  - Yes  
  - No

- Is this FTE supported in your YTD job role variance?  
  - Yes  
  - No

- Is this FTE supported by the Flex Labor Variance?  
  - Yes  
  - No

**Additional Information**
- "FTE supported by the current month job role and department flex variance but not in the YTD month and department flex variance. We experienced a loss of 2.7 RN FTEs in the last 30 days. Recent new hires will not complete orientation until January by which time we will have six additional..."
Key takeaways:

Add Flex Labor Variance together for RN Clinical Ladder positions:
• RN Clin 1:  6.15
• RN Clin 2:  4.5
• RN Clin 3:  (2.20)
• Total:  8.45

Set Up Collaborators:
• Include everyone in approval hierarchy as a collaborator
• Allows them to see approval status in Taleo
• For assistance, talk to your Talent Acquisition Consultant

Approval/rejection notification:
• The system is unable to notify all approvers of the final decision
• Hiring Manager is notified in Taleo upon each level of approval and when a requisition is denied
• Hiring manager must notify the approval chain when a position has been approved or rejected
Key Taleo Changes

TRAVELERS AND AGENCY TEMP STAFF
Key Taleo Changes - TRAVELERS

CURRENT

Traveler request form submitted manually and routed through email

NEW

Traveler requests submitted through Taleo and approved by LMST
Key Taleo Changes – AGENCY TEMPS (non-clinical)

**CURRENT**

Email to Talent Acquisition indicating Chief approval

**NEW**

Requests submitted through Taleo and approved by LMST
Travelers (clinical):
– RN, Histo Tech, Cath Lab Tech, etc.

Agency Temps (non clinical):
– Administrative Assistant, Access Associate, Inventory Assistant, etc.

Approval Process:
Traveler Request Form

New: Traveler/Agency Temp

Traveler/Agency Temp requisition is the same as the standard requisition, with additional fields.
Drop Down Selections:
- Traveler
- Agency Temp

Drop Down Selections:
- New
- Extension
Traveler Request Form

Same information as existing traveler request

See previous slides – same as standard requisition
Key Takeaways:

• Traveler requisition is the same as the standard requisition with additional fields specific to travelers.

• All traveler and agency temps must go through this process.
SUSTAINABLE LABOR MANAGEMENT STRATEGIES
- Preparing for the LMST Meeting
Preparing for LMST Meeting

- Hiring Manager and Service Line Administrator attend LMST
- Chief is optional
- Approximately 5 minutes to discuss the request
- Chief must have already approved
- Complete the template
Preparing for LMST Meeting

• See Sample Template
SUSTAINABLE LABOR MANAGEMENT STRATEGIES
- Leader Support and Timeline
Manager Support Resources

On-line resources at:
Knowledge Link: HR\Leadership Tools\Labor Management
O:\SHARED\REPORTS\HyperionReports\Management_Reports

The following resources are available:

• **General questions**
  – Speak with your manager

• **Flex Variance/Budget questions**
  – Speak to your Finance Consultant

• **Taleo/Process questions**
  – Speak to your Talent Acquisition Consultant
Next Steps:

– Taleo changes effective November 21

– First LMST Meeting: December 2 (due to Thanksgiving holiday)

– A work in progress...anticipate some challenges and adjustments as we refine the process

– Ask questions!
QUESTIONS & DISCUSSION
# Requests for New or Changed Positions and Role Audits

<table>
<thead>
<tr>
<th>Date of Request:</th>
<th>[ ] Staff [ ] Management [ ] New Job Creation [ ] Revision of current role with market repricing [ ] Revision of current role without market repricing (Committee approval not required) [ ] Review of current team member (Role Audit) [ ] Team Member Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Requesting Review [Name and Title]:</td>
<td></td>
</tr>
<tr>
<td>Staff/Management Position:</td>
<td>[ ] Staff [ ] Management</td>
</tr>
<tr>
<td>Type of Request [Select more than one option if needed]:</td>
<td>[ ] Staff [ ] Management</td>
</tr>
<tr>
<td>Current Job Title [if available]:</td>
<td></td>
</tr>
<tr>
<td>Number of FTEs Impacted:</td>
<td></td>
</tr>
<tr>
<td>Justification [Include labor standards, variance, etc.]:</td>
<td></td>
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<tr>
<td>Is this a fixed or variable position?:</td>
<td></td>
</tr>
<tr>
<td>Dollar variance:</td>
<td></td>
</tr>
<tr>
<td>Is this covered within your budget? Include budget and range information:</td>
<td></td>
</tr>
<tr>
<td>Reason &amp; Justification for Request:</td>
<td></td>
</tr>
<tr>
<td>How are the specific job duties similar and different from current role(s) in the department or organization? What are those roles?:</td>
<td></td>
</tr>
<tr>
<td>How are the job requirements similar and different from current role(s) in the department or organization?:</td>
<td></td>
</tr>
<tr>
<td>Additional Information:</td>
<td></td>
</tr>
<tr>
<td>Chief Approval:</td>
<td></td>
</tr>
</tbody>
</table>

Required supporting documents:
- New/Revised Job Descriptions require submission of proposed job description.
- Creation of a Supervisor, Manager, Director, or above requires submission of current and proposed organizational chart.

Note that the leader or chief submitting this request will be required to attend a scheduled RAC [Requisition Approval Committee] meeting to provide information and answer questions regarding this request unless the role currently exists and there is no change to the market placement.

All positions and upgrades must be approved by their respective Health System Executive.
Template – LMST Position Request: Position Exceeds Flex Variance Target
11/14/15

1. Are you within your Flex Variance Target? (Y/N)

<table>
<thead>
<tr>
<th>Job Role</th>
<th>Current Month</th>
<th>Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   • If No, list the Flex Variance(s) that exceed target?
   • If No, explain variance.

2. Is it possible to absorb or reassign the workload to existing resources within the functional area or within another department? If no, please explain.

3. Are there tasks or functions currently being performed that could be modified or discontinued?

4. Vacancy:
   1. Current vacant FTE for the job role (approved requisitions):
   2. FTE of traveling/temporary agency staff:

5. Overtime:
   • What is your average overtime usage the last two pay periods for this job role?
   • Will the position eliminate the need for overtime?
   • What is your part-time and waegepool staff utilization in last two pay periods?
   • How many team members picked up extra shifts in the last two pay periods?

6. Is this request the result of an anticipated increase in work volume for your department?
   • If yes, explain
     • Current volume:
     • Forecasted volume:
     • Reason for the change:
     • Anticipated duration of the volume increase?
     • Comment:

7. Will this position result in additional revenue generation?

8. Additional Comments:
Appendix

Template – LMST Position Request: Management Position
11/11/16

1. Position is:
   • ___New___Replacement
   • If New, explain why it is necessary:
   • Comment:

2. Is it possible to absorb or reassign the workload to existing resources within the functional area or within another department? If no, please explain.

3. Describe the management structure of the department:

4. How many direct reports does this manager have?

5. Is it a “working manager” (Y/N)
   • What percentage of time is spent in non-management duties?
   • Describe non-management duties:

6. Could the position be filled at a different level (example, Director converted to a Manager)?

7. Who does this position report to?

8. Additional Comments: