Driving workforce planning outcomes with people analytics
An international case study with the largest private healthcare provider in the US

Translating a people strategy into business language has become a key ingredient for effective workforce planning in healthcare. For Aurora, the largest private non-for-profit integrated healthcare organisation in Wisconsin, America, large-scale stakeholder mapping has been critical to the success of their workforce planning team.

Launched in 2015, Aurora's workforce planning strategy is focused on using people data to transform the way their organisation works. With a focus on data analytics and internal collaboration with other functions – such as HR and Finance – Aurora has developed a robust workforce planning framework that has transformed its talent acquisition and retention strategies over the past two years.

Ahead of the 11th Annual Workforce Planning for Healthcare Summit 2017, Chirag Padalia, Director of Workforce Strategy & Analytics at aurora, shares how his team is using workforce analytics to identify cost saving opportunities, address critical business challenges and improve talent acquisition across the organisation.

The vision: building the case for workforce analytics

"Before I accepted my role at Aurora Healthcare in early 2015, the organisation's data analytics strategy was very much in its infancy stages. As a result, we had to build workforce analytics from the ground up.

In America, one of the biggest challenges we face is around the healthcare workforce. The demand for workers is growing. But at the same time, the supply for healthcare caregivers is not. As a result, it has become a war for dollars. There is finite talent out there and there is also more demand than there are workers. It is imperative to get in front of this trend to understand what your needs are as workforce, what your needs will be; and then proactively plan for the workforce of the future.

When I started at Aurora our challenge was: defining our mission. For the first month or two, we gathered information to understand what we were trying to solve. For example, we considered things like whether data analytics or predictive analytics should be part of our strategy. Our main aim was to understand our objectives and the key roles within our organisation that we wanted to focus on to create a more proactive approach to workforce planning.

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For example, we looked at how many nurses we do have versus how many we needed at a department level and hospital level over the next three years. Aurora is made up of 15 hospitals and 33,000 caregivers or employees. We have a large workforce scope and that is why it is imperative that we have the data to improve our overall workforce systems and strategies.

The next step once we set up the data is use the information to understand and fill gaps, as well as to attract, retain and engage staff."

Leveraging data to transform talent and acquisition

"There is a lot of data out there, so whatever tool you're using there is always going to be various data sources. To counter this, we established a single source of data that brings in data feeds from all different sources. This includes people data – such as everything from who applied for specific job openings to how many candidates there are, right through to who got the job offer. We now have all this data around potential and current employees.

We are leveraging this data to understand trends about our current and potential employees. Some areas we are able to analyse from data include:

- Application logging – process guide by each stage of the process and the overall time to close

- Ratio of qualified candidates to non-qualified candidates

- Identify bottlenecks from a sourcing perspective to help us understand where we need to focus our efforts on

We also have workload analytics just for our recruiting team to help our recruiters with talent acquisition."

Driving collaboration between functions to improve workforce planning

"When we first built the workforce planning framework it was created around a supply-demand model. For example, we had the nursing stakeholders (Chief Nursing Officers at each hospital and the Directors of Nursing) involved in building that framework. Once we had the straw framework built, we conducted workshops across all 15 hospitals to make sure that our model and approach fit with what the nursing world is used to in terms of the language and levels.

Once we validated this information we were able to focus on more strategic projects. For example, one of the more impactful projects currently underway is the variable staffing model, which is nursing driven. A lot of the Chief Nursing Officers are driving it and it is just the data analytics and the model that my team provides.

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At the same time, HR Business Partners (HTBPs) are crucial to driving that relationship, especially the retention management process, which is really fuelled by the flight risk model that my team develops and provides.

This risk model involves provides a risk level for all of our 33,000 employees. We rank and measure whether or not each employee is at a high or low risk of leaving our organisation and why. The first step is the creation of dashboards and visualisations which are done through HRBPs and operation leaders, so they can drive the retention and engagement of high risk employees. This in tern boosts retention, turnover drops and therefore the HRBPs are a key cog in the wheel that drives the whole process.

Our team also partners with finance regularly to look at our staffing models and to understand what products are working in terms of supply and demand. For example, we compare different units across different hospitals to understand work hour ratios across each of our hospitals. Finance is key to help us understand the differences between these ratios and standards."

Results to date

At a high level, if I were to sum it up, I would say we've transformed our workforce planning model from practical to strategic. We have improved the way we leverage analytics to drive not only the people outcomes, but the impact to the bottom line. This transformation has seen reduced turnover, better efficiency and better employee engagement."

Interested in learning more?

Join Chirag at the 11th Annual Workforce Planning for Healthcare Summit 2017 where he will further explore and lead a pre-conference workshop on:

- Who: Underlining who is responsible for the data mining and the employees who will benefit from the analysis to improve the training needs

- What: Developing the right plan to adapt and react to the results to determine the areas for improvement

- Why: Utilising data to evidence change and assess high level trends in the evolving workforce profile

- How: An overview of the methodology and strategies that will work for your organisation's capabilities and resources to meet your objectives

Chirag will also be presenting on Linking Workforce Planning to the Bottom-Line: Driving Outcomes with Advanced Analytics.

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