

Case Study

North and Central London ICS (NCL)

A collaborative bank transformation for medics across NCL

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NHS

North Central London
Medical Collaborative Bank

The vision

The purpose of this project is to implement a shared, medical bank across North Central London ICS in order to reduce agency costs and allow NCL organisations to access a larger bank, building significant resilience into operational processes. This shared bank will not change current bank structures.

An agreed priority across London is to maximise the use of trust banks and establish regional banks or collaboration between banks to persuade flexible workers to work more across different trust banks than through expensive agencies. Within each of the ICS's similar projects have, or are being, established.

Locum's Nest was appointed as a partner to NCL and in June 2021 the project was launched, with the end goal of allowing the Trusts to provide better clinical care to patients and improved working within the ICS.

NCL Trusts will be required to develop standard operating procedures to support a shared bank. Locum's Nest will work with NCL to achieve this objective.



How are NCL setting up a Collaborative Bank?



Sharing the vision

Each Trust has a Trust Lead, who is responsible for sharing any project updates within the organisation, and being a champion for change to support the implementation at their Trust.



Creating a structure

Cross-functional teams have been set up to support the project, manage governance and deliver change with Locum's Nest. There are bi-weekly project calls with all Trust Leads and the NCL Programme team to manage progress



Collaborative payroll process

Locum's Nest are supporting Trust finance and payroll teams to cross charge internally, allowing medics to work across any of the NCL Trusts and be paid without multiple, repetitive HR/onboarding processes.



Recruitment/ onboarding process

Each Trust will also receive applications to join their bank from outside medics, allowing each Trust to expand their bank and create new opportunities for new doctors to fill bank shifts. These shifts may typically have been filled by agencies, therefore giving the ICS a direct route to save significant money!



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January 2022