

## ESR Update – Wave 9 now live!

### August update from Acting Programme Director, Simon Willcock

**Wave 9** has gone live on ESR and we are now three-quarters of the way through roll-out. Comprising 45 organisations and c120k employees, Wave 9 completed User Trial in June. Cutover to ESR was undertaken in two cycles. Cycle 1 organisations made their decision to go live on 20 July. Cycle 2 organisations made their go-live decision on 27 July.

In July we launched a series of Benefits Realisation Events with a format based on the successful 2006 'Lessons Learned' events. The main aim is to promote the Benefits Realisation approach, the

strategy and resources available to support local Benefits projects. Delegates included Executive Sponsors, Project Leads and HR, Finance and Payroll leads. The events highlighted some of the excellent initiatives that are being taken using ESR. You can read more about these events in this issue of ESR News.

The rest of the ESR Implementation continues to make steady progress.

**Wave 8** comprising 44 organisations and c103k employees. All Wave 8 organisations have now completed their go-live successfully and paid their second monthly payroll on ESR in July.

**Wave 10** comprising 45 organisations and c102k employees. Two Trusts

went through Readiness Assessments 3 on amber, 43 passed successfully on green in July. They start their User Trial this month and will go live in October. **Wave 11** comprising 34 organisations and c71k employees started the ESR implementation stage in June and are working towards Readiness Assessment 2 at the beginning of next month.

**Wave 12** comprising 32 organisations and c78k employees started Pre Requisite activities in May and are working towards their Readiness Assessment 1 at the beginning of August after which they will start the ESR implementation stage.

**476 organisations are now paying 949,470 employees live on ESR!**

# Think Data, Think Quality!

**The ESR Data Warehouse is a database populated each month with data extracted from ESR. Once ESR implementation is complete, the ESR Data Warehouse will provide aggregate data for strategic planning and reporting at national and regional level. Information available from the Data Warehouse includes:**

- Workforce composition
- Workforce movement
- Demonstrated skills
- Absence management
- Vacancies
- Payroll and earnings
- Career management
- Training attendance.

The ESR Data Warehouse will have significant strategic benefits. By using one system, there will be a greater consistency of information across all NHS organisations. At Trust level reduced effort will be required to meet the national and supra-trust reporting requirements.

As ESR is the source for the Data Warehouse, it is vital that all ESR users ensure the data on ESR is timely, accurate and complete. One of our key objectives within the project is to ensure that ESR users realise the importance

of achieving and maintaining high Data Quality. ESR local reports assist users to improve their data by identifying missing data and listing Employee and Position details.

Benefits for ensuring quality data is passed to the Data Warehouse include:

- Central production of existing and new reports which are consistently defined
- Reduced local effort to meet national and supra-trust reporting requirements
- Local reports will also benefit from improved data quality
- Better information leads to better decision-making.

**The need for high data quality is paramount. Where data is poor, NHS organisations will continue to be contacted by the Data Warehouse Users to provide corrected/updated information each time a report is run.**

The Data Warehouse was developed to meet central reporting requirements such as the Workforce Census (Medical and Dental, and Non-Medical). With the continuing success of the ESR rollout, 80% of NHS organisations

will have their Census data produced via the Data Warehouse this year. The Information Centre (IC) will shortly be contacting Trusts regarding arrangements in more detail.

The ESR Project is working in partnership with the IC to ensure that any issues with the Data Warehouse are identified and resolved, and that this year's Census runs as smoothly as possible. Both ESR and the IC have acknowledged their role in communicating the importance of Data Quality. The IC is hosting a number of ESR Data Quality Workshops later this month and in September, open to all NHS Trusts to promote this key message. Workshops will be held on:

- 23 August – Birmingham
- 24 August – Bristol
- 5 September – London
- 7 September – Leeds

For further information on the workshops, please contact the Information Centre, [enquires@ic.nhs.uk](mailto:enquires@ic.nhs.uk) or 0845 300 6016.

For further information on the Data Warehouse please contact us at: [esrnationalinitiatives@mckesson.co.uk](mailto:esrnationalinitiatives@mckesson.co.uk)



Speakers at the Birmingham event, held at St Andrew's Stadium, home of Birmingham City Football Club. Presenters from left to right: Vanda Clarke, John Perrett, Chris Squire, Chris Heward, Carol Robinson, Maureen Edwards.

## 'Realising ESR Benefits' events

A series of events is being arranged to launch the ESR Benefits Realisation approach. Events were held in Bristol on 17 July and Birmingham on 18 July. Their aim is to:

- enable ESR Users to share the experience of early wave implementers in generating the benefits of implementing the rich functionality of ESR
- promote the Benefits Realisation approach, the strategy and resources available to support local Benefits projects
- provide an opportunity to consider and examine the key 'lessons learned' from a User and central team perspective
- enable project leads to meet and discuss post go-live ESR implementation with early project leads
- provide a forum for discussion and learning to support on-going benefits work.

Invited delegates were Executive Sponsors, HR, Payroll and Finance Leads from NHS organisations in the South West, South Central, Wales and the Midlands. The programme, chaired by Maureen Edwards, Senior User/H.R. Director, featured presentations on the key ESR business benefits, the Benefits Realisation Strategy and approach, being led by Vanda Clarke, Head of Benefits Realisation, and the support available from the Central Team.

At the heart of the programme were

presentations from NHS colleagues leading benefits projects in their Trusts. In Bristol, there were contributions from Chris Squire and John Perrett from Royal Devon and Exeter Foundation NHS Trust, Darren Owen from North Devon NHS Trust and Carol Robinson from Leeds Teaching Hospitals NHS Trust. In Birmingham, Chris, John and Carol were joined by Chris Heward from Heart of Birmingham PCT.

### Key messages from our NHS speakers were:

- The need for Trust Board engagement to drive and manage the change required to realise benefits
- The enthusiasm for manager self-service when managers see and use the functionality
- The real benefits to be gained from streamlining processes and working towards one point of data entry.

The afternoon session was an 'ask the

panel' question and answer session, involving all the speakers, dealing with a wide range of issues and concerns from delegates.

Initial feedback showed that delegates really found the event helpful in planning their own on-going implementation of ESR.

### Comments included:

- 'Excellent to get first hand experience of implementing BR, lots of food for thought'
- 'This has given me more confidence to drive the BR agenda in my organisation'
- 'Having gone live in June 07, this session will invigorate our thoughts and plans to implement Self-Service (piloting from September)

### Further events are planned in:

- London 13 and 14 September
- Bolton 3 October
- York 5 October

## Realising the benefits of Self-Service in North West Wales

### By Liz James, ESR Project Manager, North West Wales

When ESR went live in North West Wales NHS Trust last November, we decided to pilot aspects of Self-Service functionality at the same time, in addition to implementing the core elements of the system (recruitment, core HR and Payroll) and the training administration module (OLM).

We wanted to drive out the benefits from ESR as soon as possible, and we felt that Self-Service offered great opportunities for process efficiencies and other business benefits.

The purpose of the pilot was to seek end-user feedback on Self-Service. We wanted to assess the implications for full rollout across the Trust, and at the same time identify any fixes or enhancements that were required. The pilot was managed by the Trust's ESR Project Team,

and involved almost 500 end-users from the Women & Families Directorate, IT Department and Finance Directorate. Manager, Supervisor and Employee User Responsibility Profiles were tested. The feedback provided invaluable data on the pros and cons of Self-Service.

Managers were particularly positive about the personal information function; they found that having staff details at their fingertips on the desktop was a great improvement on trawling through paper-based records. The ability to manage learning, qualifications and registrations electronically was also felt to support the move towards paperless systems. Managers commented that the property register would enhance their practice and they confirmed that Self-Service was intuitive to use, with new users requiring only minimal instruction.

Staff using employee Self-Service were particularly impressed by the facility allowing online payslips to be viewed and bank account details to be amended. Suggestions for enhancements were submitted to the ESR Central Team. This data is now helping to inform the continuing development of the system.

As a result of the pilot, the Trust has decided to implement a phased rollout of Self-Service as part of ESR Benefits Realisation. We are committed to using Self-Service to underpin new ways of working and process improvements that will realise benefits for managers, staff and ultimately, our patients and other service users.

Copies of the full pilot evaluation report can be obtained via [liz.james@nww-tr.wales.nhs.uk](mailto:liz.james@nww-tr.wales.nhs.uk)

## Hot Topics

Welcome to 'Hot Topics' a new feature that will explain how to deal with problems that users experience.

Items featured in 'Hot Topics' are current issues brought to the attention of the joint NHS ESR and McKesson Operations and Development Project Board (ODPB), and they will focus on current practice and, where applicable, future enhancements.

In this newsletter we are focusing on:

- Terminations and re-hires
- Retropay
- Maternity leave – pay and pension
- Inter-Authority Transfer and
- Sharing Discoverer Workbooks

### Terminations and re-hires

Issues have been raised over the recommended practice for terminations and re-hires. User Notice 512 outlines the recommended practice for employees either who leave and return to the Employing Authority within the same period, or who wish to retain a Bank Assignment, and sets out the procedure you should follow.

### Retropay

Retropay has so far proved to be challenging. It's a very different process compared with how arrears were dealt with on legacy systems, and the ESR team have acknowledged this. We have been listening to users and after analysing usage and usability issues are making the appropriate changes. The changes to the retropay procedure will promote standard usage and provide the opportunity to clear any outstanding retro calculations. It will be released in time for processing the Agenda for Change pay award.

### Maternity Leave – pay and pension

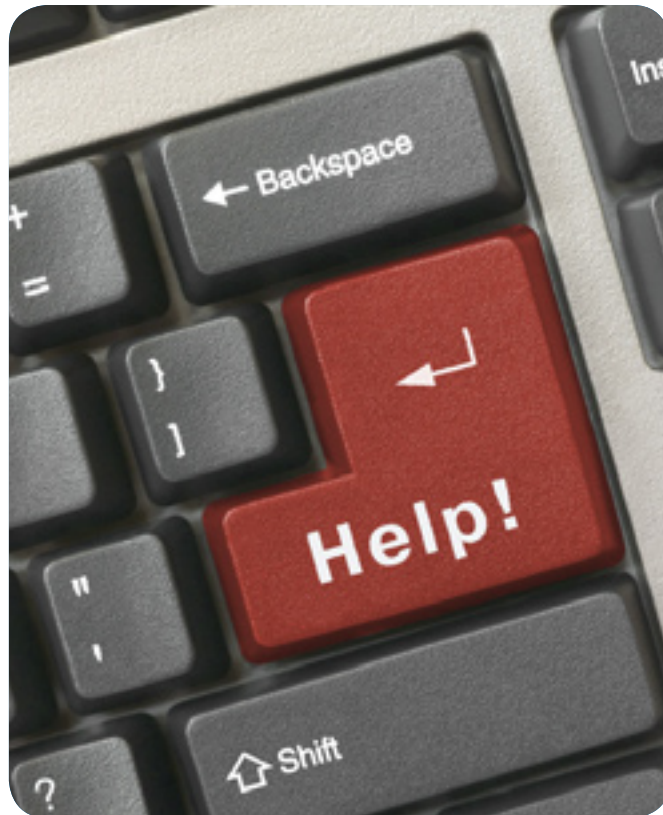
Users have raised concerns over the recommended requirements for Maternity leave, pay and pension. User Notice 499 advises users to remember to input an end date. This should automatically end Occupational Maternity Pay (OMP) and Statutory Maternity Pay. NOT entering an end date will result in:

- OMP entries continuing to be processed
- Incorrect employee pension calculations
- Subsequent Maternity Leave cannot be entered

### Inter-Authority Transfer (IAT)

IAT is an automated process which enables staff to move from one NHS organisation to another without having to complete staff transfer forms. Over two-thirds of NHS organisations are now using the ESR system and users and staff should:

- Check to see if their organisation is operational on ESR
- Check to see if the receiving organisation for a staff move is using ESR.



### For more effective use of IAT:

- Look at the User Manual on Kbase and/or go the Guide to Inter Authority Transfer found in the Functionality section
  - You can easily see which Trusts are live and can interact with you via IAT by visiting [www.esrsolution.co.uk](http://www.esrsolution.co.uk) and clicking on What is ESR? / Implementation Approach / Planning Schedule.
- A list of IAT live sites will soon be loaded onto Kbase.

### Sharing Discoverer Workbooks

There are concerns that people outside of your team may have access to your Discoverer Workbook reports. See User Notice 390 which explains that sensitive reports can be saved on a drive only accessible to the people you want to view it. We recommend reviewing any reports saved on the shared drive and thinking about which ones need to be shared and which need to be kept within your team.

### User Notices

All these topics have been covered by User Notices, so please make sure that users are made aware of these. User Notices are distributed to a Trust-maintained group e-mail but can also be found on Kbase via [www.esrsolution.co.uk/kbase](http://www.esrsolution.co.uk/kbase). Make sure you are registered with Kbase and check the User Notices regularly to keep up to date with changes affecting your use of ESR.

# ESR Top Tips

**ESR Top Tips is a monthly feature which will provide you with helpful tips on how to use ESR. This month Richard Massam, Functional Consultant, London, shares his tips on Self-Service and Learning and Talent Management.**

## Self-Service

If you are thinking of implementing Self-Service I would recommend you put in place some written policies and procedures. Here are a few examples.

### ● Creating Supervisory Hierarchy

Create a supervisor hierarchy at assignment level when using Self-Service and use the mass assignment update form to help you keep it up to date. This means that HR must be immediately informed when a manager leaves and who their replacement will be in order to maintain the hierarchy.

### ● Entering sickness records

Sickness has to be entered in calendar days in line with the Statutory Sick Pay scheme and in chronological order to help build an absence history for payroll purposes. Only users with Absence Administration

URP (User Responsibility Profile) are able to delete an absence in order to enter an earlier one. If managers are inputting a batch of absence forms into ESR they should always sort their batch into employee and date order before they start.

### ● Manager Self-Service Payroll Approvals Required URP

When using Manager Self-Service Payroll Approvals Required URP a payment by element may be required when making an assignment change. This cannot be added by the manager using self-service itself and will have to be added by the Approver using the core HR or Payroll application.

It is an important part of the process to require a manager to state the payment element required, even if no payment is to be made in the transaction. This can act as a positive control. For example, when a manager ends the employment of an employee, s/he needs to write a text comment asking the approver to add the required amount of annual leave to be paid as an element.

The manager should always state this

even when the amount is zero. If nothing at all is stated, as opposed to zero being stated, the approver should not approve the change and the notification can be returned to the manager for more information.

### Learning Management

The Copy Enrolments button on the Learning Management multiple enrolments form can be used to copy enrolments from one class to another. This is handy when cancelling a class and moving the list to the replacement one.

### Talent Management

Competencies in ESR can be used a number of ways using the various Standard Discoverer reports. Before loading competencies into ESR it is worth looking at these reports and considering the data you need. For example, some clinical competencies may require for a competency to be attached to the position and the employee so the Trust can report on the employees that do not have the competencies required for their post.

## ESR Roadshows at Barking help inform staff of the benefits

**The ESR Project Team at Barking, Havering & Redbridge NHS Trust held a series of 12 hugely successful roadshows over four days in July at their King George and Queen's Hospitals.**

The team had the opportunity to talk to hundreds of people – in fact over 95% of staff are now aware of ESR and how it will affect them.

As well as at lunchtimes, sessions were held early morning and evening to ensure all members of staff on shift changes were informed - this entailed managing the stand from 7am, and on rotation until 7pm.

"The roadshows were a huge success," said Alison Marshall, ESR Communications Lead. "Main areas of interest were the changes to the pay affecting forms and the moves to the 'lifetime' employee identification numbers.

"The assistance of the NHS ESR Communications team was very welcome as they kindly provided the merchandising and a selection of giveaways. Organising roadshows is an effective way of informing staff of the benefits of ESR. I would definitely recommend it to any Trusts thinking of spreading the ESR message to their staff."



Informing staff: Debbie Clifford, ESR Project Manager and Sandra Alborough, Recruitment Lead explain the benefits of ESR to BHR Phlebotomists Eryl Welsh and Christine Champion.