



## January Update from Programme Director Simon Willcock

### Welcome to the first issue of ESR News for 2008.

Last year was a year where we continued to meet our rigorous schedule of implementation. Spring of this year will see the final wave of implementation as the last few NHS organisations go live on ESR. It is our aim for 2008 to now build upon the significant progress we made with the Benefits Realisation project and to support organisations in fully exploiting the rich functionality of

the system. We also need to continue to work with McKesson to further improve the quality of the operational service. In this, and in future issues of ESR News, we will continue to report on exciting developments and to keep you up to date with all the news, views and real-life experiences in the ESR arena as the project moves into a new and increasingly dynamic phase. Finally, we wish to offer our warmest congratulations to those organisations that have successfully achieved the RA5 standard.

## RA5 Success! - The First Organisations to Complete RA5

**Readiness Assessment Five (RA5) is the post go-live check to ensure the initial implementation project is complete. NHS organisations work through this approximately 3 months after go-live. It assesses:**

- the organisation's use of the core ESR footprint;
- readiness to implement the expansion pack modules, learning and talent management and manager and employee self service;
- the approach to other post go-live activity such as implementing interfaces with other systems.

The following organisations have completed RA5. Congratulations to everyone who contributed to achieving this significant milestone.

- Bedfordshire & Luton Mental Health & Social Care
  - Bradford and Airedale PCT
  - Brighton and Sussex University Hospitals NHS Trust
  - East Kent Hospitals NHS Trust
  - Heart of Birmingham Teaching PCT
- Isle of Wight NHS PCT
- Kings College Hospital NHS Trust
- Leeds Partnership Foundation NHS Trust

- Nottinghamshire Healthcare NHS Trust
- Portsmouth Hospitals NHS Trust
- Sherwood Forest Hospitals NHS Foundation Trust
- Westminster PCT

### Implementation latest

**Wave 11** comprising 34 organisations and c71k employees all successfully completed their User Trial last month. Cycle 1 made their decision to go live on 18th January and cycle 2 will be making their decision on 25th January.

**Wave 12** comprising 32 organisations and c78k employees successfully completed Local Solution Testing last month and Readiness Assessment 3 last week.

## 2007 Pay Award - Top of the National User Group Agenda

The agenda for the 7th quarterly National User Group meeting held on Wednesday 5th December 2007 was re-structured to accommodate a full discussion about the serious difficulties experienced in implementing the 2007 Pay Award. Both NHS Programme Director Simon Willcock and McKesson Programme Director Suzanne Owen took lead roles. There was a full and lengthy debate. Issues were acknowledged and assurance re-iterated that following a full investigation action will be taken to address the problems experienced. NUG representatives are expected to report back to the Regional User Groups and it is envisaged that the User network will provide both a means of tracking progress with action taken and gauging satisfaction with results. The ESR central team is fully committed to ensuring that the quality of service improves and to delivering a first class product which can be used to its full potential.

Other areas covered during the meeting included the work which continues on the introduction of the NHS Pension Scheme Review and the new banded NHS pensions contribution rates. The new rates, which are

based on an individual's total salary for the previous financial year, would have meant each organisation manually allocating each individual to a band. However, to alleviate this additional burden, the ESR central team will ensure that these are calculated through ESR, that each employee is assigned to the correct band and that a report is submitted directly to each organisation to confirm the action taken.

There were further updates on all the major workstreams such as Benefits Realisation, the Data Warehouse and the development pipeline, and reports from each of the Special Interest Groups. The current Enhancement Process is being reviewed, based on a proposal put forward by the SE Coast RUG. Linked to the proposed 6 monthly release cycle it is suggested that:

- Each of the 6 local SIGs per SHA will raise two Enhancement Requests per quarter (or 4 per 6 months)
- Each national SIG filters the Enhancement Requests and sends 3 (or 6) for impact assessment
- Impact assessment of top 18 (or 36) works to timetable with good notice of when outcomes available

- RUG meets to prioritise and vote as a community
- Outcome goes forward for collation with all SHA outcomes to form national priority list

The outcome would be more time to consider and prepare Business Justifications and a higher likelihood of the enhancement proposal being selected. NUG Representatives will be consulting with their RUG colleagues on these proposed changes to the process.

Finally, Mark Johnson, Payroll Manager at Leeds Teaching Hospitals Trust, gave a presentation on using web ADI to upload time and attendance and additional pay data. The meeting once again proved to be a valuable arena for discussion, consultation and for sharing knowledge and information. The User Network continues to positively shape the development of the ESR solution and service. Our thanks to Delegates who participate in these meetings.

For a full report of the meeting, and to see the agenda, presentations and minutes visit Kbase: [www.esrsolution.co.uk/kbase/](http://www.esrsolution.co.uk/kbase/)

## South West successful engagement with ESR users

**NHS South West oversees the largest region in England – stretching from Land's End to Tewkesbury and covering 40 NHS organisations, all of which are now live on ESR. There are currently active Specialist Interest Groups (SIGs) for Payroll, HR, Reporting, Oracle Learning Management (OLM)/Talent Management (TM) and Self Service and a Finance SIG had its first meeting in January 2008.**

Like all SIGs throughout the country, the groups are chaired and run by trust representatives – the responsibilities are rotated so that there is wider ownership between organisations. The SIG chairs are responsible for providing a venue for meetings, for sending out agendas/notes etc. and for co-ordinating the completion of solution enhancement requests.

The Regional User Group (RUG) is chaired by the SHA ESR Lead, Tony Overd, which allows for a more region-wide steer and ensures links with strategic issues involving data warehouse, data quality, e-KSF and workforce planning.



SW OLM SIG lead Darren Owen (centre), Senior HR advisor at North Devon Healthcare NHS Trust, during the November OLM SIG meeting

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## South West successful engagement with ESR users

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Tony also takes responsibility for collating enhancement requests from the SIG leads and forwarding these to the ESR central team along with any critical issue details. Each SIG and RUG meeting has a standing agenda item for enhancements and suggestions are discussed, voted on and submitted for wider prioritisation at the RUG. Trusts which are more advanced in using areas of functionality are excellent at sharing their experience and learning.

To ensure maximum benefit from meetings, the ESR Functional Consultant usually puts on a half day learning event geared around system functionality such as OLM/TM and e-KSF, followed by the SIG meeting. Attendance at the SIG and

RUG meetings is extremely good and feedback suggests the content is meeting Users' requirements. For SIGs to work effectively the ESR team rely on individuals' good will and many thanks are extended to our SIG and RUG Leads.

'The South West SIGs have been successful from the start with all users being encouraged to attend whether post or pre go-live. Several of the requests from the South West have been accepted by the National User Group as enhancements and this has led to a general feeling of empowerment among the users. The support of the SHA has been invaluable and has certainly encouraged more Trusts to participate.'

John Perratt, ESR System Manager, Royal Devon and Exeter Foundation NHS Trust.

## North West Wales NHS Trust launches charity donation scheme 'Pennies from Heaven' through ESR!

**Pennies from Heaven is an innovative coin collection scheme. It enables workers to donate spare pennies from their income to charities by rounding down the gross salaries of individuals who join the scheme, to the nearest pound, with the spare pennies being donated to a nominated charity. The most anyone can give per payslip is £0.99. The scheme started in 1999 and to date has raised over £700,000 for more than 40 charities. The ESR solution has been configured to enable NHS organisations to implement the scheme.**

At a special launch event on the 24th October 2007, the North West Wales NHS Trust became the first in Wales to sign up to Pennies from Heaven. This scheme will allow employees to donate the spare pennies on their payslips to charity. The Trust was delighted when their staffside organisations, following consultation, decided that their chosen charity for the next two years would be Gwynedd Hospice at Home.

Founded 15 years ago, this charity has done immeasurable amounts in North West Wales to provide palliative care across the local community. 80% of the



Einion Parry, Staffside Chairman, presents Harry Edwards, Chairman of Gwynedd Hospice at Home, with the first Pennies from Heaven at the recent North West Wales NHS Trust launch

work carried out is based in patients' homes, ensuring that they can remain close to family and friends whilst receiving top quality nursing, psychological and spiritual care. Patients can also attend the Hafan Menai Day Hospice at Ysbyty Gwynedd Hospital, where nursing, physiotherapy, complementary and art therapy services are provided in a welcoming and homely atmosphere. In addition, the charity runs complementary therapy clinics in several health centres across Gwynedd and Anglesey.

Tania Marsden, Director of Human Resources at the Trust, says of the scheme, 'I would certainly encourage other organisations to launch Pennies from Heaven in order to support similarly worthwhile causes. What impressed us most about the scheme was that it was simple to implement. It is easy for the employee to donate, as deductions are made automatically following sign-up. It is also easy for the employer to manage, as ESR facilitates the collection and pay-over functions. We look forward to raising valuable funds for our chosen charity over the coming months and years, and I hope that other NHS organisations will join us – if all NHS employees joined the scheme we could raise over £8 million per year!'

### The key to success with the Pennies from Heaven scheme:

- Involve staff in the choice of charity
- Proactive internal promotion
- Active external communication
- Above all, keep communicating with staff at all times, and keep it simple!

For further information see [www.penniesfromheaven.co.uk/nhsf.html](http://www.penniesfromheaven.co.uk/nhsf.html) or contact Anthony Law on [a.law@penniesfromheaven.co.uk](mailto:a.law@penniesfromheaven.co.uk)

## Managing Absence Support Event

**Jonathan Hume, Self Service Project Manager and Interim Systems Manager at the Royal Free Hampstead NHS Trust, shares his experience of the London 'Managing Absence in ESR' workshop event on the 14th November 2007.**

### Our Background with ESR

The Royal Free Hampstead Trust, which has been live on ESR since April 2007, is a major teaching hospital in North London employing over 6,000 staff. One of the ESR related workstreams currently being undertaken by the Trust is rolling out Manager/Supervisor Self Service with the aim of having direct individual input of sickness absence information.

There are two driving forces behind this implementation:

- fulfil one of the core principles of ESR that data/information is input at source
- provide "real-time" absence information to the Occupational Health department so that they can better identify absence trends and work with departmental managers in offering timely support to staff

### The Agenda for the Day

The event, held at Kings College Hospital, was split into two main sessions. The first dealt with an overview of the recording of absence, with a particular emphasis on "best practice". The session covered:

- recording of long term sickness
- recap on the effect of the relevance of the Continuous Service Dates (CSD)
- input of annual leave

The topics allowed for clarification on issues our Trust has experienced since go-live and threw up areas for consideration at future London region SIG meetings.

The second session dealt with the reports that can be produced within Discoverer relating to the monitoring of absence and these should prove invaluable within the Trust. Already we are using the standard reports for looking at monthly sickness records within different organisations, and there is expertise within the Trust to run reports on staff approaching half and nil pay.

One of the most interesting reports was based upon the "Bradford Score" which



Jonathan Hume, SS Project Manager & Interim Systems Manager

will highlight employees taking a frequent number of short periods of sickness leave, as opposed to those on long term sick leave. These are staff that as a Trust we will be keen to identify to offer support to, with the aim of identifying issues and reducing their sickness absence. This report can also be amended to introduce traffic light indicators, which for me was a new functionality of disco ad-hoc and one I intend to explore further.

As with all the events organised by the London region Benefits Realisation team it was interactive, with delegates able to ask questions pertinent to them and to the whole group, at any time. It was a useful and thought provoking event and I would encourage all trusts to take full advantage of their local support events.

## Devon Partnership NHS Trust Map the Way to Increased Efficiencies

**Devon Partnership NHS Trust, which provides Mental Health and Learning Disability services within Devon and some specialist services within the peninsula, went live on ESR in the first wave, in February 2006.**

In order to prepare for ESR Readiness Assessment 5 and in considering plans to roll out the Manager Self Service functionality, the Trust took the opportunity to undertake a comprehensive process mapping exercise. Participants included Trust and shared service representatives from payroll, pensions, finance and HR, together with an ESR functional specialist. The group reviewed current work processes and whether these would remain appropriate for Manager Self Service (MSS) roll out. The primary aim was to examine whether the expertise of those inputting the data was effectively being utilised in the right parts of the process and to consider any changes which might improve effectiveness and avoid any errors occurring.

The mapping review exercise looked at each step in the process for new recruits, changes during employment, and employment termination and enabled everyone to question and challenge the appropriateness of these processes. The exercise was



Devon Partnership NHS Trust Building

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## Devon Partnership NHS Trust Map the Way to Increased Efficiencies

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a considerable success. It not only presented the Trust with the opportunity to fundamentally review and validate established practices but also led to significant changes being identified that will lead to improved efficiency and readiness for roll out of MSS functionality. An example is the change made in allocated responsibility for inputting and validating change of circumstances

where there is a payroll implication. Previously, HR had been responsible for this action but it was determined that it sat better within payroll. With the payroll URP, payroll colleagues are now able to immediately look up the changes made and the impact on pay and identify/correct any errors immediately following data input and get it right first time.

This change has reduced unnecessary administration and the risk of error.



For further information about the process mapping methodology adopted by the Trust, or about their experiences in preparing for MSS functionality, please contact Darran Armitage, Deputy Director of Workforce and OD on 01392 208680.

## Top Tips

### OLM Naming Conventions

**Many training departments will now be planning their training catalogue for 2008. As a result, this is a perfect opportunity to review the naming conventions used in Oracle Learning Management going forward.**

Before you begin to update your training catalogue, consider how you are going to name your courses in order to easily identify, enrol and report on them. Also, consider the impact that naming conventions can have on other areas of ESR, such as Self Service and Inter Authority Transfer (IAT). The naming of a class/course needs to be readable so that the receiving Employing Authority can understand and equate the training achieved at the previous Employing Authority to their own training or requirements.

Where self service is being utilised by an organisation, thought should be given to how meaningful a course and class name is to a manager or employee searching for a course. An appropriate naming protocol will enable the manager or employee to easily identify the course they want to apply for.

Careful consideration of naming conventions used in the Learning Management URP is therefore indispensable. One possible suggestion for naming protocol is as follows:

#### Course Titles

Course titles must begin with your VPD followed by the name of the course, for example, **503 Fire Safety**.

#### Course Codes

Not all training departments may use the course code. If your training department decides it will be using the course code, one possible suggestion is to use the following identifiers as follows:

- TD** = Training Department
- IT** = IT Training
- RT** = Resuscitation Training
- MH** = Manual Handling Training
- HS** = Health and Safety Training

For example, the course code for the Fire Safety course is **HS-FS**.

#### Offerings

Offerings identify the delivery mode of a course. If you are going to offer the same course but are using different delivery methods, you should identify the offerings accordingly.

For example:

- Fire Safety (e-learning)
- Fire Safety (classroom)

By clearly identifying the delivery method of the course, users of the system, be it via self service or the Learning Management URP, will be able to clearly identify the correct course.

#### Classes

As more than one fire safety class may be delivered, consideration should be given to how these classes will be identified in the course catalogue. The following suggests how you can make the most out of your naming conventions to easily identify different classes.

- Year training is taking place i.e. **08**
- Initials of training department
- Initials of course, followed by the number of the class i.e. the first class of the year would be 1 etc
- Course title
- Date the class is due to take place

For example: **08/HS-FS1 Fire Safety - 7 January 2008**

The careful consideration of naming conventions will assist not only users of the Learning Management URP but also assist managers and employees using Self Service to find the appropriate course.