

ESR Update

July update from Acting Programme Director, Simon Willcock

ESR Implementation continues to make steady progress. June has seen the Programme attend the Healthcare People Management Association and NHS Confederation Annual conferences. Both these events have played a part in informing Trusts of ESR Benefits and have been a great opportunity to network with colleagues across the health service. In this issue of ESR News you will also see more information about the brand new Realising ESR Benefits brochure pack

- an essential tool to help you realise ESR Benefits. **Wave 8** comprising 44 organisations and c103k employees have now completed their go-live successfully and paid their first monthly payroll on ESR at the end of June. Cutover to ESR was undertaken in two cycles. Cycle 1 organisations made their decision to go live on 18 May and Cycle 2 organisations made their go-live decision on 25 May.

Wave 9 comprising 45 organisations and c120k employees completed their User Trial in June. Preparations for cutover to ESR are being undertaken in two cycles. Cycle 1 organisations make their decision to go live on 20 July. Cycle 2 organisations are due

to make their go-live decision on 27 July. **Wave 10** comprising 45 organisations and c102k employees successfully progressed through Readiness Assessment 2 in May, completed Local Solution Testing last month and will start their User Trial in August.

Wave 11 comprising 34 organisations and c71k employees successfully completed Readiness Assessment 1 in June and commenced the ESR implementation stage last month.

Wave 12 comprising 32 organisations and c78k employees commenced Pre Requisite activities in May and will commence the ESR Implementation stage in August.

Time, Attendance and Rostering Interfaces

The NHS interface team have been working with a number of suppliers to assist in enabling their product to make use of the Generic Time, Attendance and Rostering Interfaces that ESR has available.

The March edition of ESR News outlined the progress that has been made in Interfacing ESR with the Smart Application. Smart now have eight ESR sites live on their Level 1 offering and two sites testing their Level 3 offering. The Smart application interfaces to ESR using the Generic T&A (Time and Attendance) Inbound Interfaces and a bespoke Outbound Interface. In addition to this, the NHS Interface team has been working with a number of other Bank system and e-Rostering suppliers. The team has been assisting suppliers to enhance their products in order for them to make use of the Generic T&A Interfaces that ESR has available.

The Generic Inbound Interfaces that ESR provides, enable supplier systems to send details of elements to be paid in the payroll as well as importing absence information. ESR also provides a Generic Outbound Interface that enables supplier systems to be kept up to date with changes made in ESR. The Generic Outbound Interface contains details of New Joiners, Leavers and changes to Employee related information, thus removing the need to double key information.

As well as suppliers, some Trusts have been making use of the interfaces to pass details into ESR from their In House systems.

The following table shows which suppliers have interfaces that are compatible with ESR and have sites either live on the interfaces or currently in testing.

3rd Party Providers	System	Sites live on Generic –		Sites testing Generic –	
		Inbound	Outbound	Inbound	Outbound
Smart	Smart T&A	8	8*	2	2*
Key IT	BSMS	4		4	1
HMT	Rosterpro	3		1	
Manpower	MAPS	2	2	2	4
BaumHart	StaffBank	1	1	1	1
Kronos	T&A	1			
Software Enterprises	Promis			3	5
Care Systems	CareWare			1	1
First Care	First Care			1	1
Crown Computing	My-Options T&A			1	
SMI	Nurse Rostering			1	
Optimize	Optimize			1	1
Northgate	Northgate				1
In House Trust	System	Sites live on Generic –		Sites testing Generic –	
		Inbound	Outbound	Inbound	Outbound
South London & Maudsley	Time recording	1			
Kings College	STARS	1	1		

* Bespoke Smart Interface

Continuous development

The Central NHS Team continues to develop the ESR solution to reflect changes in national requirements.

Most of the changes are generated and supported by the end user and are made in order to extract maximum benefit from ESR.

To accomplish this, two distinct development 'pipelines' have been deployed. The first was completed between February to October 2006 and the second from November 2006 to June 2007.

The total expenditure committed for the period February 2006 to June 2007 was over £2million. Fifty three per cent of this development work was triggered by the project centrally and 47 per cent by end users.

The central development encompasses areas such as:

- Changes to ESR in Financial areas
- Changes made to reflect recommendations from NHS Pensions
- Changes made to reflect national policy requirements from the Department of Health
- National Interface Development.

Changes driven by the user base include:

- Shared Training Centre enablement
- Changes to Reports
- Changes driven by the Benefits Activation Project.

The main resource commitment has been in Finance - 20 percent. 17 percent of development has been in

interfaces and 15 percent on Pensions.

Nine percent of the total spend has been targeted at improving the reporting solution. The Benefits Activation Project has also seen significant investment with nine percent being committed in this area.

Other key areas of development in the period from February 2006 to June 2007 are:

- Enabling Shared Training Centre functionality in OLM and SSHR
- New Payroll Elements Changes to Lists Of Values (Absence Reasons, Recruitment Activities)
- Changes to Recruitment Letters
- Changes to support Reconciliation – this does not include the staffing resource allocated to supporting this centrally.

ESR at HPMA Conference



Diane Taylor and Vivian Walker of the Department of Health, Social Services and Public Services, Northern Ireland talk to Jo Sidebottom, ESR Account Manager

ESR was at the Healthcare People Management Conference 'HR – Leading Success' held at the Brit Oval, London from 7 – 8 June.

The conference explored the critical role human resource management plays in health service delivery and focused on employee engagement, patient involvement, leadership and HR professionalism.

The keynote speaker was Clare Chapman, Director General of Workforce at the Department of Health who spoke about winning for patients and staff. Clare also visited the ESR stand and praised the work of the project.

Ian Stead, Director of HR, NHS Wales, and a member of the ESR Project Board was also a plenary speaker.

ESR at the NHS Confederation Conference



Sharon Thatcher, Deputy Head of Benefits Realisation talks to Dr Alfa Sa'ad, Deputy Medical Director, West Hertfordshire NHS Trust

ESR had a great opportunity to network and engage with senior people in the NHS at this year's NHS Confederation annual conference and exhibition.

The event was aimed at bridging the gap between day-to-day reality and the politicians' vision for the future. Themed around serving patients and the community, the event included speakers such as Patricia Hewitt MP, former Secretary of State for Health and David Cameron, Leader of the Opposition.

June's National User Group meeting

With over two thirds of the NHS live on ESR, the fifth meeting of the National User Group came at a point in the ESR Project when the focus is beginning to turn from implementation to successful live service and benefits realisation.

Simon Willcock, Acting Programme Director, opened the meeting, restating the purpose of the National User Group setting out its key functions of:

- representing Users
- developing and sharing knowledge, skills and new ways of working
- getting best value out of the User network
- steering system development

- highlighting operational issues
- working in partnership with the Central Team.

Simon emphasised the recent establishment of the Operations and Development Project Board to focus on the quality of service provided to organisations post go-live.

The agenda contributed to redefining the working relationship between the Central Team and Users, and the benefits and responsibilities the Regional and National network offers. It covered:

- updates on progress with structuring the Benefits Realisation Team, the Benefits Realisation Strategy and the support and guidance available to support organisations post go-live;

- Service Delivery;
- National Initiatives, including progress with using ESR data for FIMS reporting;
- and new arrangements for involving the User network in solution development.

The meeting concluded with two workshop sessions led by Bob Neale describing the South Devon Healthcare NHS Foundation Trust's approach to sickness absence management using information from ESR, and Retropay with a presentation from Sean Hayes from the Newham University NHS Trust.

The agenda, papers, presentations and minutes are all on Kbase under 'User Groups' at www.esrsolution.co.uk/kbase

What goes on in SIGs?

For those of you thinking of joining a Special Interest Group (SIG), Pieter Brummer, Functional Consultant, South Central SHA gives an insight as to what's involved. South Central SHA has a number of local SIGs helping to build user knowledge and skills and supporting the Regional User Group's involvement in how ESR develops.

I am currently preparing for the Payroll SIG where general payroll issues are discussed. I'm putting together a good practice document about using the PAYE Aggregated tick box and the NI Multiple assignments tick box, which was identified at last month's meeting as a 'grey area' for the Trusts in the region and their payroll provider, SBS. We'll discuss the best practice guidelines and go through the documentation to ensure the group understand the process. This will enable them to share the documentation and transfer knowledge to their colleagues. This SIG helps to maintain a solid working relationship between payroll and HR, and ensures smooth processes between the two departments.

I will be visiting a Trust to look at a specific error they are experiencing in Recruitment. Recruitment forms part of the RA5 assessment, so I am particularly keen to get this problem

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resolved, and pick up potential issues that might need to be shared with the rest of the patch at our Recruitment SIG meeting. I want to ensure that users are achieving maximum benefits from the module across my SHA.

I have organised a series of workshops, two of which will be regarding Work Structures and Reporting. The workshops have been arranged on request and a few questions have been sent to me to

address on the day. I'm expecting a good turnout, and hope the session motivates others to join the Reporting SIG, which will strengthen knowledge transfer across the patch.

I will attend the regular Learning Management SIG meeting. There aren't many Trusts in South Central using OLM yet. Two want to pilot OLM by November this year, with two more to follow on then. There is also another Trust that wants to pilot OLM with Self-Service in key areas of their organisation. So, it's a small SIG but definitely one to watch. The members are passionate and are currently working through the implementation considerations, focussing on getting the basics right. OLM is becoming popular with other organisations due to its functionality and cost saving benefit and the learning from the pilots will add to the case studies on Kbase, which I'm sure the other organisations will find very useful.

Brochure pack explains benefits

A brand new Benefits Realisation brochure pack was launched at the NHS Confederation Annual Conference held from 20 – 22 June at London ExCel.

The brochure pack includes an index and introduction and a CD with information such as:

- Implementing ESR
- Workforce Information Management System
- Learning and Talent Management
- Manager and Employee Self-Service.

Vanda Clarke, Head of Benefits Realisation said: "The new benefits pack is an essential tool for Trusts to help them realise ESR benefits. We want Trusts using ESR as an integrated workforce management system to help them deliver the workforce strategy for the NHS. In previous issues of ESR News we have featured Trusts that have already started to see the benefits of ESR by completing their RA5 or by implementing Self-Service. We'd encourage all live Trusts to maximise the benefits of ESR at

the earliest opportunity after go-live."

You can keep yourself updated with ESR information by visiting www.esrsolution.co.uk/kbase



Do you have your Self-Service CD-Rom?



The Self-Service e-learning CD-Rom is a course that provides you with in depth knowledge of how to use the important features of the Self-Self system.

Key features include:

- Employee
- Manager and
- Administrator Self-Service modules

To get your copy contact the Education Department at McKesson (UK) Ltd, e-mail ESRCourseReg@mckesson.co.uk with a name, contact telephone number and full postal address.

ESR Top Tips... from the Benefits Realisation Team

ESR Top Tips is a monthly feature which will provide you with helpful tips on how to use ESR. This month the Benefits Realisation Team share their tips on organisation policies and procedures.

Organisation policies and procedures

Planning the flow of information, processes and procedures starts in the implementation phase of ESR, but should not end once your organisation goes live.

- Review your ESR policies and procedures periodically. The structure of most NHS Employing Authorities and the departments within them is constantly evolving. Make sure that your policies and procedures are up to date so nothing 'falls between the cracks' or that work is not being duplicated.
- Involve all parties in the discussion. This will bring different perspectives together and increase understanding between departments.

- Share the policies so everyone knows what they are doing.
- You may need to redesign paper forms to include ESR specific data or terminology. If the forms are easier to understand there is a decreased chance of human error when inputting data.

Inter Authority Transfer (IAT)

As a large percentage of Trusts are live on ESR, IAT can now become a major efficiency benefit. For this to happen every organisation has to play its part:

- Make sure that your organisation has an IAT administrator
- Respond to IAT requests in a timely manner
- Build the use of IAT into your policies and procedures.