

ESR Update

Monthly update from Programme Director, Jim O'Connell

All Trusts making up **Wave 4** are now live on the system and paid their monthly and weekly staff using ESR for the first time in September. I would like to take this opportunity to welcome all Wave 4 sites and to congratulate everyone involved for all their hard work. This has been the largest wave to date (comprising 57 organisations). I am pleased to report that Wave 4 has been our smoothest wave to date and the overall rollout process is proving to be robust.

The forthcoming waves have a greater number of employees but the success of Wave 4 means we can be confident ESR will be rolled out according to timetable.

Wave 5 (57 organisations / c105k employees) have completed Local

Solution Testing and User Trials started in September, while **Wave 6** (59 organisations / c113k employees) start Local Solution Testing this month. **Wave 7** (51 organisations / c109k

employees) started implementing ESR in August 2006, while last month **Wave 8** were preparing for Readiness Assessment 1 and **Wave 9** started pre-requisite activities.

OGC positive in latest review

ESR has had another very successful OGC (Office of Government Commerce) review. The review examines the quality of the implementation processes. ESR has again been awarded an Amber Status – the reviewers felt that the project was too large and complex to award a green,

but were very complimentary about the significant progress we are making.

The review stated: "the Project is on course for a Green" and that: "there is every prospect that national roll out will be completed as planned."

This is great news and I would like to take this opportunity to express my thanks to you for all the hard work that has made this possible.

ESR – Oracle Learning Management (OLM)

Select Focus Name	Start Date	End Date	Offerings	Classes
NHS Business Group	01-Jan-1951			
Customer Relations	18-Aug-2003			
Health and Safety	01-Jan-1951			
Induction	01-Jan-1951			
Informatics	18-Mar-2004			
504 Microsoft Access	01-Oct-2005		1 Offerings	
504 Microsoft Excel	01-Oct-2005		1 Offerings	
504 Microsoft Word	01-Oct-2005		1 Offerings	
504 MS Word Classroom	01-Oct-2005			2 Classes
504 MS Office Learning Path	01-Oct-2005			
Medical Equipment	18-Aug-2003			
Occupational Knowledge & Skills	18-Aug-2003			
Personal Development	18-Aug-2003			
Post-Graduate Medical Education	01-Jan-1951			
Resuscitation	18-Mar-2004			

The Oracle Learning Management (OLM) module is available to NHS organisations from day one of their rollout onto ESR. There is no additional cost to the NHS organisation to utilise the module. OLM is part of the wider integrated ESR package which means that the organisation's structure and Employee data will already be present in the system with no additional work required.

The Learning Management component of ESR enables comprehensive control over all the activities associated with the training and development of NHS staff. This includes the administration of training courses, and the recording of training undertaken by every employee.

continued on page 2

continued from page 1

Courses can be linked to defined competencies, including national competence frameworks, so that current employee competencies and progress towards those competencies can be updated and monitored.

ESR OLM also supports the provision of training within a shared training centre environment. A training provider organisation can catalogue the training and identify those organisations it wishes to make classes available to. Managers and Employees at the "customer" organisations can view and request to be enrolled on training through Manager and Employee Self-Service for classes from the training provider in the same way that they search for and request enrolment on training from their own organisation.

A wide range of reports enables control over all aspects of staff training and development.

Benefits:

- Enables NHS organisations to manage all aspects of the delivery and maintenance of a training service.
- Maintains information on: courses (any educational or development activity designed to enhance an employee's competencies, qualifications or experience), classes (a single occurrence of a course on a particular date), resources (such as trainers, equipment or venues), customers (external organisations to whom training is delivered by the NHS), suppliers (external organisations who may provide training or support), and Training Centres (organisations within the NHS who deliver training).
- Employee competencies can be associated with training courses. Once a member of staff has completed the relevant set of courses, his or her employee record can be updated with the new competency.
- National competence frameworks

are built in, and an employee's position within these is automatically maintained. They include the Knowledge and Skills Framework (KSF), National Occupational Standards (NOS), and National Workforce Competencies (NWC).

- Local competencies can be created. For example, a skill in Manual Handling may require a refresher course every 12 months; ESR will report on those employees who are due for refresher training.
- A wide range of reports allows training and development to be monitored at a local, regional or national level. Through Employee Self-Service, students can complete a Training Evaluation form, thus cutting down on central data input and potentially increasing the response rate for such evaluations. A report is available to collate user evaluation of courses at a local, regional or national level. ESR allows training and development of NHS staff at all levels to be **monitored** and **managed**.

ESR helps deliver over £1million of savings at Leeds Teaching Hospitals

Leeds Teaching Hospitals is the largest NHS Trust in England, employing more than 15,000 staff across eight sites. Since it switched to ESR it has been able to make significant improvements to HR practices, while reducing costs.

Rachael Allsop, HR Director tells ESR News about the experience of being a pilot site for the project – and what impact the system is set to have in the future.

Rachael says: "We have an annual £740 million budget and we want to spend as much of that as possible on direct patient care. Our old payroll and HR systems involved a lot of manual processing and form filling – we were spending so much time on that, we were unable to offer the kind of HR management our staff deserved.

"It's early days but ESR is helping us to transform the HR function, enabling the Trust to deliver £1.1m of savings in administration costs – money which can then be used to directly improve patient care.

"We wanted to be a pilot site so

we could influence the development of ESR to ensure other large Trusts could benefit from our experience."

The Trust set up a project team and adopted a vision: *ESR will enable personnel administration to be undertaken by managers and strategic and advisory HR work to be undertaken by a streamlined HR function.* The system went live in October 2005.

Rachael added: "ESR came along at the same time as Agenda for Change and a number of other projects, so the whole process was not without difficulty. It placed a lot of strain on members of staff involved in all of these things at once.

"Our project team included a strategic project manager and co-ordinator plus representatives from all parts of the organisation. We also set up a series of sub groups for IT, Finance, HR, Training, data migration and localisations, process mapping, and system administration / security.

"This approach confirms our view that the project needs dedicated support,



Rachael Allsop, HR Director at Leeds Teaching Hospital NHS Trust

especially in a large organisation. It's also vital to have buy-in right across the organisation, and crucially to ensure your data migration process into ESR is robust."

With ESR now in place Rachael is overhauling the entire HR function at the Trust: "We are freeing up managers' time

continued on page 3

continued from page 2

to focus on proper staff development, rather than processing bits of paper. My HR team is now able to focus on the work they are actually paid to do – to strategically plan the training and career development of all our employees.

“Without ESR we simply wouldn’t be able to do that. It has saved us money in terms of day to day operations. But it is also the basis from which we can transform our strategic development – delivering potentially huge efficiencies, lower sickness rates

and of course better patient care.”

Future ESR developments for Leeds include:

- Utilising the ESR Sickness Absence facility to reduce absenteeism
- Streamlining the Medical Staffing function
- Enabling the Occupational Health interface
- Deploying the Learning & Talent Management Functionality
- Deploying Self-Service and devolved access across the organisation

First ESR / Occupational Health Interface goes live

In early September, Norfolk & Norwich University Hospital became the first NHS Trust to go live with the ESR/ Occupational Health interface – which could potentially save the NHS a million pounds a year when fully rolled out.

Benefits from the link include a substantial reduction in data entry, coupled with much greater accuracy of data. The Trust expects to save approximately £1,600 a year in admin time. This saving will allow the OH department to focus admin time on the development of new initiatives such as ‘text message’ appointment reminders for staff.

Adrian Whittle, Workforce Capacity & Information Manager at the Trust said: “The interface means that correct workforce data will always be loaded from ESR into the Occupational Health (OH) database. Confidential letters sent out by OH to their home addresses will be correct, and OH will be fully informed of all job assignments that staff have.

“OH is now able to ensure total accuracy when providing the necessary immunisation services. Previously it was possible that staff may be working without having pre-employment health clearance and therefore their immunity against infectious diseases would have been unknown.”

Employees joining and leaving the Trust will be automatically updated on the OH system. The automated interface, provided

by DT Systems Ltd within its NOHS 32 Occupational Health System, provides the conduit for these updates. OH will now have access to much more accurate and up to the minute data about which staff are no longer employed. Previously it was possible that OH would initiate routine services (such as Hepatitis B recalls and health surveillance) for individuals no longer employed by the Trust because the OH records were not up to date.

Mr Whittle added: “Furthermore, the Trust will be exposed to less risk because OH will immediately know if staff start work without prior clearance from OH. And when staff change jobs within the Trust it will be much easier and faster to determine if their new roles require further OH clearance (e.g. staff moving to new roles requiring EPP).

If every Trust adopts the interface and makes similar savings the benefit to the NHS could be £1 million a year.

For more information contact Adrian Whittle on 01603 287633

or email: adrian.whittle@nnuh.nhs.uk



ESR Urban myths exposed

Following on from last month, ESR News brings you four more ESR urban myths and facts:

Myth 1:

“Searching on ESR is very temperamental and difficult.”

Fact:

ESR provides powerful ‘search’ functionality. Confusion in this area normally stems from users not understanding how to search on ESR. This results in the user getting frustrated that they can’t find what they need. The training provided will demonstrate to the users the methods of searching on ESR. An example of this is ‘disappearing employees’. Users complain that they saw an employee on the system one day who disappeared the next - this doesn’t actually happen, it is user error.

Myth 2:

“ESR doesn’t pay AfC and it delays AfC implementation”

Fact:

This is not true. The national ESR and AfC teams worked closely throughout the AfC assimilation process and in England 99% assimilation was achieved at the same time as ESR waves 1 and 2 were successfully rolled out. We now see around 400,000 members of staff receiving accurate payroll services from ESR who are on AfC terms and conditions.

Myth 3:

“ESR has been scaled down to just payroll implementation”

Fact:

This is not true. ESR is an integrated HR and Payroll system which includes functionality such as Self-Service and Learning Management. It also has a reporting capability which supports workforce planning.

continued on page 4

Trust mergers – easy with ESR



During this year, a significant number of organisation mergers have taken place across the NHS, largely attributable to the 'Commissioning a Patient led NHS' initiative. The merger of local Primary Care Trusts is effective from this month.

ESR includes functionality to support the merging of one Employing Authority (EA) or Virtual Private Database (VPD) into another. This article explains the process of mergers for organisations already live on ESR.

Any proposed mergers for Employing Authorities which are not live at the date of merger should be referred to an ESR Account Manager for discussion.

The process

The process 'cuts' the source EA in its entirety (including all history) and 'pastes' it into the target EA. This is done by updating all of the appropriate internal database IDs from one VPD code to the other.

- EAs raise a Service Request (SR) with McKesson via Remedy (the ESR helpdesk)
- The EA's Service Delivery Manager will arrange a site visit to analyse the potential impact and gather the requirements
- This information will be used to agree the timing of the merge update or updates with both McKesson and the EAs.
- The EA will nominate a local Project Manager to oversee the whole process and be the main point of contact with the Service Delivery Manager.

- Once the EA has agreed the timing of the update to its data, the merge software will be run by McKesson over a pre-defined weekend.

Timeline

McKesson has set a number of pre-defined timeslots, processing **25** EA mergers every quarter. These are set as **February, May, August** and **November**. Timeslots will be booked on a 'first come, first serve' basis, co-ordinated by the Service Delivery Manager.

Pre-merge steps

McKesson recommend a number of pre-merge tasks:

- A review and update of Authority bank account details held against each payment method
- A review and update of tax references against the source EA's payroll definitions
- Review of duplicate person records
- Review of the General Ledger codes and ESR GL mappings
- Review of the top-level organisation hierarchy.

This assumes the source and target EAs will have completed all payroll period end processes **before** they request McKesson to run the merge update process (eg payroll process, pre-payments, GTN report, BACS, Cheque report, Costing and GL interface). McKesson also expect that the 'End of Year' has been run and that the pay periods reconciliation is complete.

The reports we recommend source EAs run to aid reconciliation for both pre and post-merge are:

- End of year
- Run duplicate employee report
- Run headcount report
- Run Discoverer reports – Organisational Profile Monitoring Analysis and Vacancy Analysis
- Run Discoverer reports – Recruitment, Training and Career management

continued from page 3

Implementation is complex, so the approach is to initially focus on Recruitment, Core HR and Payroll – adding Learning Management and Self Service as post go live development projects. All functionality however is available to the Trust from the 'go live' date. If an organisation has self service or learning management already, these can be added to the 'go live footprint' and the pre-go live implementation plan.

Myth 4:

"How much extra do you have to pay for Oracle Learning Management (OLM)?"

Fact:

There is no additional charge for use of the OLM functionality.

Following the merge update process EAs will see:

- The same responsibility names with the same old naming conventions i.e. still prefixed with the old Trust ID for both source and target EA names
- All inherited source EA work structures, payroll definitions, any local elements, local GRR rates, cost centres, sub-analysis 1 and 2 etc with their old naming conventions
- A top level EA organisation in the hierarchy, with the source and target EA's structures as child records
- Reports which amalgamate data for both the source and target EAs (as they are now under one VPD code).
- The source EA's existing GL codes and payroll definition moved into the target EA 'as is' – enabling it to continue to post to separate GL systems in the short term.

The moving of staff assignments from the source EA to the target EA's payroll should be done utilising the bulk 'employee assignment update' process. The system can basically be run as 'business as usual', allowing time for the target EA to slowly move over to new desired work structures.

For further information see the section 'Assignments / Assignment Mass Update' within the ESR User Manual. For an update on Merge procedures please contact your Service Delivery Manager.