

August and September Service Problems – Root Cause Investigation Outcomes

McKesson and its partners Oracle and IBM have now completed a full and exhaustive investigation into the events of the 19th and 20th August 2008, when Users experienced significant system performance problems. At the time, McKesson worked closely with Payroll Teams to ensure that all payrolls completed, although we recognise that this put considerable pressure on payroll staff and that other users were unable to access the system for periods on both days.

The problem related to the database in which the index information for payroll run results data was stored, in standard configuration, in a single area of storage. This index is accessed for a number of processes including copy pay advice, Gross to Net, pay advice and other payroll reports.

The investigation identified that the root cause of the performance issue was linked to the payroll reports, accessing the index in an inefficient manner. These reports were unable to efficiently access the increased amount of information provided by the pay award through the index. This resulted in retrieval of greater volumes of data and this increase was unsupportable with the storage in its standard configuration. This meant that processes slowed

whilst waiting for data and eventually stopped. This effect was seen by users as extremely slow or failing processes.

The immediate solution was to spread the index data into 4 separate areas of storage, which then allowed the report to access the data in a timely manner. This work was completed by the McKesson Team on 20th August, the initial analysis and the remedy were confirmed by the investigation. The data retrieval problem was entirely unforeseen and had not been encountered during the testing of the pay award process or in any previous payroll uplift or normal running. The storage design and report configuration was thought by McKesson and its partners to be correct for the ESR system and this type of problem has not been witnessed elsewhere on similar systems.

As a result of the investigation, a planned architecture review into all areas of the system design, using the experience of running the ESR system over the past 4 years, has now been brought forward, aimed at identifying improvements or changes that should prevent this problem in future. Oracle have also undertaken to review the design of

some of the payroll reports, including the Gross to Net, to optimise processing.

Unfortunately, a completely unrelated problem on 15th September, produced similar symptoms for users. The service experienced slow running following a change to the system, involving reconfiguring a network connection, over the preceding weekend. When the change was made in the live production environment, a component failed to function as specified, which caused the system to slow. This network configuration change was removed during two hours of down time and the system has since performed as expected.

The commitment and understanding of local teams in working with us through these problems has been very much appreciated. McKesson and their partners are acutely aware that these problems will have affected confidence in system capacity. As a result there is renewed vigilance in monitoring all aspects of system performance. The ESR service has the full attention and focus of both the NHS Central team and McKesson as well as our partners Oracle and IBM, in working to prevent such incidents happening in the future.

September 17th RA5 successes

Passed on GREEN

- Bedfordshire PCT
- Birmingham and Solihull Mental Health NHS Trust
- County Durham & Darlington NHS Foundation Trust
- Croydon PCT
- Cumbria Teaching PCT
- East Sussex Downs and Weald PCT

- Hastings and Rother PCT
- Manchester Mental Health & Social Care Trust
- North Cumbria University Hospital
- North East Strategic Health Authority
- Salisbury NHS Foundation Trust
- Shropshire County PCT
- Tees, Esk & Wear Valleys NHS Trust
- Telford and Wrekin PCT.

Passed on Green with Recovery

- Barnsley Hospital NHS Foundation Trust
- Buckinghamshire Hospitals NHS Trust
- Business Service Authority
- Central Manchester and Manchester Children's Hospital NHS Trust
- Dartford and Gravesham NHS Trust
- Derbyshire Mental Health Services NHS Trust

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- East Sussex Downs and Weald PCT
- Harrogate and District NHS Foundation Trust
- Hull PCT
- NHS Central Lancashire

- NHS Professionals
- Norfolk and Norwich University Hospital NHS Trust
- Royal Free Hampstead NHS Trust
- Royal National Orthopaedic Hospital NHS Trust
- Royal United Hospital Bath NHS Trust

- Sheffield Children's Hospital NHS Foundation Trust
- Solihull Care Trust
- South Birmingham PCT
- Sussex Partnership NHS Trust
- Swindon and Marlborough NHS Trust
- Maidstone and Tunbridge Wells NHS Trust.

Increasing Efficiencies with the ESR eRecruitment Interface

The ESR eRecruitment Interface is a bi-directional interface (inbound and outbound) which allows a link to be created from ESR to an online recruitment solution, such as NHS Jobs or Healthjobs websites. The interface is generic and therefore can be used for any online Recruitment solution.

How does it work?

The interface runs five times each day, so that it fits with the busiest organisation's business processes. A recent change to the interface timings means that the process runs more frequently within core work hours. It now runs from 10am until 6pm, on the hour, every 2 hours.

What are the benefits?

When the link is initiated by setting up a vacancy and recruitment activity, it allows ESR to pass position information directly from the work structures element of ESR into the web based Job Advertisement. This reduces the need for duplicate data entry on the job advertisement itself, and naturally ensures consistency with

the source position information in ESR.

Once the advertisement has been placed and applications received, it is then possible to import the applicant data back into ESR, thus reducing the need for further dual input. There are a number of benefits of this functionality:

1. It is possible for the employer to document the recruitment process on either system and ultimately begin to record the pre employment checks in ESR when a successful candidate is identified.
2. In two simple steps the applicant record can move from shortlist to hired employee by creating the Employee Assignment,



without the need for manual input of basic personal data for the applicant.

3. The link allows Trusts to accurately report on applicant data for the purpose of equal opportunities monitoring and other workforce management practices within ESR.

NHS ESR Central team to implement Self Service


A project is now underway to implement Employee and Manager Self Service across the NHS ESR Central team. The Project Manager, Alexia Rothwell, will be utilising the same Self Service Toolkit which is currently offered to other Self Service implementers across

the NHS (no short cuts will be taken!). This will be a perfect opportunity to test out the Toolkit and to share experiences and lessons learnt.

Subject to successful evaluation of this pilot, Yorkshire and the Humber

SHA (NHS ESR Central team's host organisation), will look to roll out Self Service across the rest of the organisation.

The project expects to go-live before the end of the year. More details to follow in the next ESR News.



National LMS Pilot Report – National Launch in late Autumn

The pilot process

Piloting of the National LMS has been an essential preliminary step in demonstrating that the new elearning functionality works and is fit for purpose, that content from a range of local and national providers can be played and that learner progress can be tracked successfully through the application. It has also been fundamental in ensuring the OLM implementation guide, which outlines the steps for elearning implementation, is fit for purpose.

The pilot process itself involved four key stages; engagement, set-up, testing and evaluation. For each of the stages, a set of clearly defined tasks were identified which each Pilot completed. This helped to ensure all the pilot sites were progressing towards a common set of objectives. The tasks included the creation of a local project plan, connectivity testing, issue logging and reporting.

Each pilot was allocated a dedicated National LMS Account Manager by the Central ESR team and received support throughout the pilot activity. In addition to this, a 'buddy' structure was put in place to encourage the sharing of knowledge and experience across the pilot community.

Lessons learnt and issues raised

The pilot process has been successful in highlighting a number of lessons learnt and points for action prior to national launch. There has been significant effort to ensure existing elearning courses are able to operate properly with the National LMS. The learning gained from this has been invaluable and will be used to ensure the process is understood for future deployment of elearning courses to the National LMS.

In addition, following evaluation of the pilot itself, reported system issues are

being resolved and areas for potential improvement suggested by the pilots assessed for consideration. All National LMS supporting documents and key processes are being reviewed and refined where necessary and are expected to be available at the end of Autumn 2008.

Common issues identified during the pilot included a fault with system replication and reporting, local IT configuration problems and internal engagement issues. Where system resolutions have been found these are being applied and re-tested with the pilot sites this month, prior to release to the wider NHS community.

Overall, of the 18 pilot sites that completed testing, the majority have reported positive outcomes from the pilots and intend to roll it out across their organisation. A number of system enhancements have been raised and are under review with the ESR development team, in conjunction with the pilots. The buddy system which was originally set up to support the pilot sites has been well received and, as a result, some sites are now actively engaged with non-pilot organisations to share advice and information.

What national elearning content will now be available to Trusts going forward?

Following successful completion of the National LMS pilot, efforts have continued in building up national elearning content to be available from the anticipated launch date. Initially, content will be made available from the three main NHS providers – NHS Connecting for Health, the NHS Core Learning Unit and e-Learning for Healthcare and will cover a range of statutory, mandatory and essential IT skills subjects - for example Elite (the Connecting for Health course which replaces ECDL), Transfusion Safety, Infection Control.

In all it is expected that some 21 subject areas will be available with over 90 modules of elearning material at inception of the National LMS in late Autumn, with many others to be added on a rolling basis. Full listings of available and future content will be available shortly, through a range of communications.

Next steps

The National LMS system will be made available to all NHS organisations in England once all documentation and implementation guides have been reviewed and evaluated and all outstanding system faults have been resolved & re-testing completed.

It is planned that this will commence from early November 2008.

Those organisations that have expressed an interest in the system will receive further guidance from their regional Operations and Benefits Account Manager. In the meantime, all current documentation and implementation guides are accessible on the Kbase website at <http://esr.knowledgebasesolutions.com>.

To register as a user on Kbase go to <http://www.esrsolution.co.uk/kbase> and click on the 'register' link on the left hand side - it will take you to the registration page. You will need to fill in your details and you will be sent an automated email with your login and password details so you can access Kbase. Please be aware that due to some security settings on PCs, you may not receive the automated registration email. If you have not received your user registration details within 3 days, please contact kbadmin@mckesson.co.uk or call **01926 478808**.

To find out more, please visit the NHS ESR team on the Connecting for Health stand at the NHS Employers Conference 4-6 November at the International Convention Centre in Birmingham.

Data Quality at the Heart of Effective Workforce Management

Since mid-July the NHS ESR Central Data Analysis team has focused on delivering centrally produced monthly data validation reports to every NHS organisation. This is part of the drive to improve data quality and is fundamental for effective reporting and workforce management/planning at local and SHA/National level. The reports, which include checks for both missing and invalid data, are now being accessed and utilised by the majority of NHS organisations. The Operations and Benefits Managers and Information Governance Leads are being contacted for those organisations that have not yet requested access to their reports.

In the meantime, the Central team is working closely with the NHS Information Centre (IC) to compare the ESR data validation reports with those currently being developed by the IC from the Data Warehouse. Plans are also in place to provide access to local versions of the ESR validation reports later this year. These reports will be slightly wider based than those being worked on by the IC and will develop over time to enable organisations to validate a greater range of their own data. Trusts will also have the opportunity to focus the report on specific data items and sections of the workforce rather than



Alexia Rothwell, Data Projects Manager

producing a full validation output for all possible fields and every member of staff.

If you have any queries regarding the ESR team's validation process then please contact alexia.rothwell-sykes@nhs.net. For IC data validation queries please contact Bernard.Horan@ic.nhs.uk.

Health Protection Agency is First Arms Length Body to receive RA5



The Health Protection Agency's (HPA) role is to provide an integrated approach to protecting UK public health through the provision of support and advice to the NHS, local authorities, emergency services, other Arms Length Bodies, the Department of Health and the Devolved Administrations. The Agency was established as a Special Health Authority (SpHA) in 2003.

On 1st April 2005, the Agency was established as a non-departmental public body, replacing the HPA SpHA and the National Radiological Protection Board (NRPB) and with radiation protection as part of health protection incorporated in its remit.

The HPA has a large network of approximately 3500 staff based at three major centres (Colindale, Porton and Chilton), and regionally and locally based throughout England.

The Health Protection Agency made a decision to implement ESR as its HR

and payroll management system based on the benefits they felt the system offered. Having first gone live with ESR in February 2007, HPA became the first Arms Length Body to achieve their RA5 standard in June 2008, subject to going live with ESR recruitment which they have now implemented.

The Key to RA5 Success

'Passing the RA5 has been a significant achievement for us at the Health Protection Agency. It marks the start of what promises to be a very exciting time. We now have the foundations to start to really exploit the full potential of the system and to implement other functionality such as Self Service and Learning Management,' says Tony Sborgia, Head of HR. Working towards the RA5 standard presented challenges but Tony lists the following as critical for success:

- Team work – HR, Finance & Payroll worked closely together from the beginning
- Internal User Group – the HPA set

up a team comprising representatives from each of the key departments who meet on a regular basis, to set objectives and monitor progress

- Good, strong relationships with regional ESR Account Managers – they are there to support and guide your organisation through the RA5 process

Effective reporting

Tony is confident that ESR was absolutely the right choice for the organisation and identified reporting capabilities of the ESR system as a particularly significant benefit. The new system allows the HR and Finance teams to produce detailed and timely quarterly reports for the Divisional Executives which show a range of data from age analysis to starters and leavers and staff in post. Managers now have the data they need to manage and plan their workforce more effectively.

For more information on the RA5 and for a recent list of organisations to have achieved the standard visit <http://www.esrsolution.co.uk/benefits/readiness>

Case study

Clatterbridge Centre for Oncology Takes up the OLM Baton

Background

Clatterbridge Centre for Oncology is one of the largest cancer centres in the UK serving a population of 2.3 million covering Merseyside, Cheshire, North Wales, the Isle of Man and South Lancashire. The Wirral-based Trust employs 650 staff, provides specialist radiotherapy and chemotherapy services and delivers more than 112,000 treatments to patients every year. Visiting medical and nursing teams also deliver specialist cancer services at hospitals across the region. Their vision is to provide world class cancer care by putting people first, achieving excellence, being passionate about what they do, always improving their care and being committed to their future.

They have achieved NHSLA Level 3 and first went live with ESR only recently, in February 2008, using the Oracle Learning Management (OLM) functionality from day one of go-live.

Prior to the implementation of OLM

Prior to the introduction of OLM to the Trust, the majority of Learning and Development activity was managed and co-ordinated centrally via a training database called PRIME. However, this database was a very basic HR system which did not capture all training records accurately and comprehensively.

Though very much in the early stages of development, OLM is already highly valued by the Trust and HR staff are confident of its capabilities and the many benefits it will bring. Liz Kinvig, HR Manager at Clatterbridge Centre for Oncology, recognises that a great deal of work is yet to be done by the organisation in terms of identifying and attaching competencies to training and in developing the OLM reporting capability further. In the meantime, short and longer term benefits are already evident. 'We recognise that we're beginning from a standing start,



Accompanying image: the team at Clatterbridge from back left to right – Liz Kinvig, HR Manager, Linda Griffiths, HR Assistant, Pauline Mitchell, HR Co-ordinator, Susan Birch, Medical Staffing Advisor, Karen Jones, HR Advisor. Front left to right – Janet Waterhouse, ESR Benefits Realisation Lead, Vickie Channon, L&D Co-ordinator, Jenny Blackshaw, L&D Advisor

having had no learning management tool of any real value before, and understand that some NHS organisations will be much further advanced than us. However, we do truly believe this is a major step forward for the NHS in terms of a joined up, national approach to managing and monitoring staff training and development. If we can better manage our staff competencies and training it can only be a huge positive for patient care.'

The Benefits of OLM

By allowing the Trust to capture data in a centralised electronic system, the following benefits have been identified:

- timely, accurate, transparent & comprehensive data about the training and development of all its staff will enable the Trust to be able to demonstrate risk mitigation to the Board
- improved staff engagement as individuals will feel involved and will see their development as a value to the organisation
- better communications within the Trust about learning and development
- ownership and empowerment for managers
- with more visibility, higher take up of learning opportunities

Lessons Learnt

HR Manager Liz Kinvig accepts that IT projects demand time and effort to develop them. To ensure their own success with the system, the Trust had a dedicated resource within the team - Janet Waterhouse, ESR Benefits Lead. They also had the full support and engagement from their Executive Trust Board members and a highly motivated, enthusiastic team who were willing to aim high and embrace change. Good communications were another key to success. By keeping senior staff informed and involved at all times, they gained buy-in at an early stage and continue to hold meetings and discussions to move the project forward. The engagement of colleagues in other areas of the Trust was also important such as staff in Clinical Education and Wirral Hospitals Informatics Services who have been booking people onto their courses through OLM since go-live.

The future

Having already gone live with Supervisor Self Service functionality in some areas of the Trust, the next step is to implement Manager and Employee Self Service, which will allow staff to book themselves onto appropriate courses and training sessions. There is also further work to be done on reporting and attaching competencies to training.

Only recently the Trust completed piloting of the National LMS. Although elearning is new for Clatterbridge, it is something which they are keen to develop moving forward. The Trust is confident that, the pilot having achieved what it set out to do in highlighting issues and lessons learnt, once these have been addressed, the system will bring many benefits. The opportunity to use the system remotely offers staff greater flexibility with learning and, as the system links directly into ESR, all learning can be automatically recorded and monitored.

Liz and the team at Clatterbridge are keen to roll it out across the Trust at the earliest opportunity.