Supporting Nurse Revalidation using ESR

Background

Peterborough and Stamford Hospitals NHS Foundation Trust was formed on 1 April 2004 as one of the first 10 foundation trusts created under the NHS Act 2003, and is the successor organisation to Peterborough Hospitals NHS Trust.

The Trust rolled out ESR HR and payroll functionality in September 2006, and then expanded its use through the implementation of Oracle Learning Management (OLM) in 2011, followed by Career Management in 2013 - this is when we started to visualise ESR as a complete solution rather than stand-alone functions.

Our first step on the self-service ladder came with the introduction of e-learning trust-wide and with the piloting of employee self-service (Limited Access); these were well received by staff, which stimulated a desire for more development and exploration of the ESR selfservice functionality.

The Trust is now on a journey of ESR discovery and workforce system transformation, currently implementing phase 2 of our strategy, introducing the appraisal module within ESR self-service for NMC Revalidation.

The Project

Peterborough and Stamford Hospitals NHS Foundation Trust employs 2,690 nurses and midwives. To ensure we sustain a high level of care we must ensure our staff feel supported both in their delivery of care and professionally in their roles. This was of upmost importance and at the forefront of our minds when the Nursing and Midwifery Council (NMC) launched its new guidance on Nurse Revalidation.

A Project Manager was appointed, who undertook initial scoping of the project, and for quality assurance and engagement purposes established a NMC Revalidation Steering group chaired by the Chief Nurse, with senior nursing and midwifery representative across the trust.

In order to understand our responsibility as an employer we identified 3 key priorities:

• Environment & Resources

Provide a supportive environment and sufficient resources to ensure staff successfully revalidate.

Governance

Provide a clear governance structure to individuals, the trust, and relevant professional bodies and the NMC

 <u>Risk Aversion – Reporting Compliance</u> To provide a robust reporting suite to manage revalidation progress against KPI's, thus the risk to the Trust The solution and its delivery clearly had to meet all of these priorities, to provide the assurance to the trust that staff would be fully supported to revalidate successfully, minimising the risk to patient care. It was evident that the chosen system was instrumental in meeting these priorities; a full IT options appraisal was undertaken to evaluate a number of the revalidation systems in the market place, ESR being one of them. Through this process ESR self-service and its appraisal module was selected as the chosen system. The external third party systems all delivered a basic revalidation solution, but were all let down by cost and data maintenance. ESR not only met all the requirements at no direct cost and no additional maintenance but has the added advantage of all the additional self-service functions, which could release further efficiency to the trust and independence to our staff.

Nicola Fowler, HR Transformation Programme Manager and ESR Lead explains: "The new way of working involving a self-service approach is required whether trusts use ESR or an alternative system. The key difference is by choosing ESR; trusts already have access to the workforce system with an established infrastructure for maintenance, and in addition receive the greater self-service functionality. This empowers staff and enables the trust to streamline processes to gain further efficiencies in back office functions. It also places trusts in a favourable position for any new capability being made available in ESR in the future."

The NHS ESR Central Team (NECT) proposed a solution to the National Special Interest group in September 2015, which highlighted how the ESR solution could be used to deliver this agenda. We adopted, and highly tailored this solution to meet the needs of our trust and launched our solution; #GAIT in April 2016, coinciding with the new NMC guidelines.

- Get connected to ESR
- Take Action
- Following Instructions
- Timely Progress

Working collaboratively with NECT and our regional NHS ESR Account Manager, we developed the localised tailored format; #GAIT. This version means employees are able to access ESR self-service to record all progress against the NMC requirements, attach supporting evidence and transfer the information to their Confirmer. Confirmers are able to access ESR self-service via Supervisor self-service (Limited Access) to review an employee's progress and record their checking processes. Using 'Limited Access' URP for supervisors negated the need for smartcard access.

The information recorded is available via the Business Intelligence (BI) reporting tool at manager and trust level. A primary advantage of selecting ESR is employees and managers (confirmers) not only receive the solution for revalidation, but also have access to the full ESR self-service functionality, which includes access to all personal & post information including payslips, training information and ability to make changes directly in ESR supporting the Trust's vision to be paper-lite.

The project produced a number of key documents including Revalidation Policy & KPI's, ESR Process Maps, Localised ESR Employee and Confirmers/Peer Reviewer Revalidation

Trackers (questionnaires), Revalidation and ESR Implementation Guide and ESR #GAIT Training Materials & Quick Reference Guides. The Trackers (questionnaires) are key to its success; our trackers include detailed revalidation questions with year 1, 2 and 3 evidence logs, and hyperlinks to the NMC website for templates and to the trust revalidation pages on our intranet. Please see below how our trackers are different to the national templates:





To aid the learning and development of our staff; staff that were historically not required to use computers on a daily basis, an e-learning package on basic IT skills and a suite of training material was produced including a take-away quick reference guide. These are not only given to staff as they attend their training, poster versions are also displayed in wards areas as a useful reminder and reference tool.



Benefits and Achievements

Joanne Bennis, Chief Nurse, Peterborough & Stamford Hospital NHS Foundation Trust:

"The collaborative approach taken between Nursing and HR has enabled us to deliver a quality, robust and tailored NMC revalidation solution, to support staff on their revalidation journey. The ESR tailored solution empowers our nurses and midwives to effectively manage their revalidation, but at the same time provides a mechanism to ensure a high level of transformational patient care is not only maintained, but is driven forward to further enhance the patient experience."

By using the tailored ESR solution; #GAIT, the trust has avoided the cost of purchasing a new system (£4,000) and the annual license fee per employee – saving £35,000pa. Substantial ongoing in-direct costs are also reduced as starters, leavers, amendments and management of the hierarchy will be undertaken through normal payroll processes. Employees are also able to book training directly through the portal, therefore reducing Learning Centre administration costs.

Key Benefits:

- 24/7 access to ESR self-service
- Enables employees to build their portfolio and track their progress
- 1, 2, 3 year record log to evidence progress

- Built in KPI information in the Trackers
- Easy, electronic 2-way communication between employee and confirmer
- Full suite of management reports based on Trust KPI's, identifying escalation routes and highlighting excellent progress
- The solution includes all the functionality available through ESR self-service

The easy accessible system helps staff deliver high quality patient care, by enabling staff to keep up-to-date with changes in practice, clinical proficiency and personal professional development. It also provides a clear governance structure that encourages individuals to take ownership of their revalidation, supported by their managers, the trust, professional bodies and the NMC, whilst overseeing regulatory compliance with the NMC.

To date all our nurses and midwives have revalidated successfully through the support of this project, reducing the risk to the trust and its patients. Current evaluations demonstrate our staff feel valued and supported, and feel professionally empowered to develop within their role.

Our approach has been endorsed by NECT and is promoted as an example of how trusts can tailor the solution to meet their needs. As well as the trust awarding the project 'Improvement & innovation of the month' award, we are also proud to be finalist for the HPMA ESR award this year; Award for the best use of ESR to support the NHS workforce agenda.

In summary we have realised the following cash benefits to our trust:

Direct Savings

Purchase & Implementation fee of a third party system	: £4,000 (one off-fee)
Annual License Fee (£24 per employee)	: £35,000 per annum

Indirect Savings (minimum)

Reduction in learning enrolment administration	: £2,109 per annum
Reduction HR & payroll processing	: £3,500 per annum

Key qualitative benefits have also been identified, supporting CQC regulations:

• Regulation 17 – Good Governance 'To meet this regulation; providers must have effective governance, including assurance and auditing systems or processes. These must assess, monitor and drive improvement in the quality and safety of the services provided, including the quality of the experience for people using the service. The systems and processes must also assess, monitor and mitigate any risks relating the health, safety and welfare of people using services and others.'

• Regulation 18 – Staffing

'Staff must receive the support, training, professional development, supervision and appraisals that are necessary for them to carry out their role and responsibilities. They should be supported to obtain further qualifications and provide evidence, where required, to the appropriate regulator to show that they meet the professional standards needed to continue to practise.'

Tips and Advice

The successful collaboration with Nursing and HR is an essential part of this project, this has ensured buy-in and strong commitment from the nursing community, and the system expertise from the HR directorate; this relationship aids the trust in fully realising the wider implications of the project.

Executive support is imperative in providing full backing and support to our project, demonstrating their commitment to their staff and the service they provide.

It is of vital importance to highlight how the solution makes it easier for staff to revalidate, identify all the additional benefits attained through ESR self-service, empowering the staff to take personal responsibility for the process and much more.

All feedback is a gift - listen to your staff. Obtaining feedback from staff is crucial to ensuring the solution meets their needs as well as the needs of the trust. Through this process our staff identified further IT access was required, which then instigated a pilot Learning pods project, aimed at providing single private learning workstations for staff.

The Next Steps

The Trust is on a journey of ESR discovery and workforce system transformation and we are looking forward to embracing the new enhanced ESR functionality as it becomes available, particularly the internet enablement of ESR, as this will add further benefit to our staff, encouraging them to manage all aspects of their development using ESR.

Phase 5 of our project, involves the expansion of the remaining ESR self-service functionality across our trust. We are keen to harness the enthusiasm that the Revalidation project has created in the nursing community and drive further efficiencies through ESR self-service to all staff within the trust.

For More Information

We are happy to share all our training material, ESR process maps, HTML for Questionnaires and also the ESR & Revalidation Implementation guide - an essential for ESR professional users.

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