

Case Study – Enhanced compliance reporting at East and North Hertfordshire NHS Trust.

Situation

The organisation had been using OLM since go live in September 2006. The Trust employs 5500 staff across various sites. The administration of learning activity is devolved across a range of specialist areas with a small central team focused on corporate activity. Reporting of training was being presented in each of the core mandatory subject areas based on the number of attendances of staff. The production of reports was being mostly undertaken centrally and also locally within the specialist areas with limited consistency. The central information analyst was required to manually remove staff on maternity leave etc. The organisation had no way of defining if the staff being trained had a clear requirement or whether they were up to date with their mandatory training. A detailed set of training needs had been produced in the form of a booklet by the central training team which managers and staff had access to. The consistency and reporting of mandatory training needed to improve before the financial year end.

Task

A formal project was set-up to enhance the reporting to enable the benefits of having a robust ESR system to be realised and enable the following deliverables;

- Staff defined with a set of mandatory training requirements by position
- Bring clarity as to what courses delivered which mandatory elements
- Reporting which will provide a detailed gap analysis broken down to meet the Trust's needs
- Future forecasting to aid capacity planning of mandatory training

A specialist project manager was contracted to manage the project and share his previous experiences of undertaking a project of this complexity and delivery of change.

Action

The status of managing mandatory training was reviewed and areas for process improvement were identified. Competence requirements were defined in readiness for input into ESR. In preparation clarity was sought in order to fully understand the training requirements and refresher periods of each element. Management controls were also established in order to manage the risk associated with the corporate mandatory training list. Local competencies were entered into ESR with their appropriate refresher periods. The requirements at position level for each of the 27 competencies were reviewed by the relevant subject leads. With these mapped, the central training team were able to pass the data across to the NHS Central data team for input. 20% of the inputting was retained by the local team in order to build up knowledge and understanding of how to undertake this work. The NHS central data team exceeded their estimates for completion despite the timescales being fairly tight. In a parallel activity, training history was extracted and presented back in a format ready for manual migration into the competency profile of each staff member. This work took approximately 8

weeks to complete due to the volume of training that had been undertaken in the past, despite only using records that would be valid at financial year end. Local training teams were trained in the use of competencies and the concept of using them for compliance purposes across the organisation. Local reports were set-up based on the standard reports which showed all competencies and staff but excluded at source staff on maternity, career break and external secondment etc. One main report, the competency matching report becomes the single key report for use with reporting spreadsheets and other databases.

Results

The project ran for 6 months and used only 28 days of specialist support in order to achieve the complex output defined at commencement. A single report could be run that shows the status of compliance against each of the subject areas (competencies) for each person. This same report is used to undertake future forecasting and determine peaks in previous activity (causing drop off) which had previously not been available. The level of detail in the report provides a detailed gap analysis which can be reviewed by division, cost centre, staff group/role and position or by individual.

Since the first report was produced there has been significant interest from line managers to get sight of the report showing the gaps in their staff compliance. The process of sharing this information needs to be carefully considered in order to fully enable the organisation to cope with the rise in demand for training in order to plug any gaps.

In the long-term this project is expected to have a significant impact on the organisation and how it manages mandatory training compliance. It paves the way for increasing individual and manager accountability which is expected to be enhanced through the introduction of ESR self-service.

In summary, the project was a great success by providing to the organisation strategically important information in a usable format which is expected to result in better patient care/safety, increased training compliance, improved scoring against standards and lowered NHSLA costs.

Wendy Parry, Associate Director for Organisational Development said "The completion of this project has enabled the Trust to build on the use of ESR OLM to do more than just capture data. It will provide us with a platform going forward to ensure all staff complete regular mandatory training in line with the needs of their roles. It brings much needed improved management information that is easier to access with significantly less manual intervention, leading to increased timely & accurate performance data."

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