

# HAMPSHIRE COUNTY COUNCIL

## Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Social Care and Health
<b>Date:</b>	3 October 2018
<b>Title:</b>	Support Plan Management System
<b>Report From:</b>	Director of Adults' Health and Care

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### 1. Recommendations

- 1.1. That the Executive Member for Adult Social Care and Health gives approval to spend up to a maximum of £1.6m over a period of 4 years extendable to up to 10 years from the Adult Social Care and Health budget to procure a software service contract for a Support Plan Management System for use in in-house residential and nursing homes for Older People and those supporting people with a Learning Disability from March 2019.
- 1.2. That the Executive Member for Adult Social Care and Health notes that the total spend on the contract is anticipated to be up to £1.8m, however the Information Technology (IT) budget for Transformation to 2019 (T19) is covering the first year contract costs at an anticipated total of up to £0.2m.

### 2. Executive Summary:

- 2.1. The purpose of this paper is to seek approval from the Executive Member for Adult Social Care and Health to procure a software service contract for a Support Plan Management System for in in-house residential and nursing homes Older People and those supporting people with a Learning Disability from March 2019.
- 2.2. Initially the service will be rolled out to the in-house residential and nursing services for older people (16 services).
- 2.3. The contract will include the option to further roll the service to in-house services for people with a learning disability (7 services).
- 2.4. This paper seeks to:
  - Describe the benefits that will be achieved by the procurement and implementation of this system.
  - Set out the rationale for procuring a contract rather than a framework agreement.
  - Consider the financial implications of the proposed contract.

- Address key issues that could prevent the successful implementation of the service.

### **3. Contextual information**

- 3.1. Adults' Health and Care have 16 council owned and managed Older People residential and nursing homes, employing over 1,000 care staff providing 962 beds. Learning Disabilities have an additional 7 units providing 64 beds employing 117 staff.
- 3.2. The record management and monitoring of residents care is currently paper based. The process requires staff to make multiple handwritten entries into daily diary notes, support plans, risk assessments and care charts. As well as record keeping inconsistencies this is also time intensive taking staff away from their core duty of directly supporting residents. A recent Week in the Life Of (WILO) survey indicated that an electronic support planning system would deliver efficiencies by increasing staff capacity to optimise the utilisation of beds within the home. This will result in improved capacity to admit an increased number of residents with a high support need, thereby reducing cost.
- 3.3. In the meantime, any discrepancies in recording therefore impacts upon both Adults' Health and Care's ability to demonstrate service quality and also to provide evidence of the care communications in relation to the direct care provision as required by the Care Quality Commission (CQC), relatives and on occasion the Court.
- 3.4. It is now a CQC requirement that all individuals receiving care and support have an extensive contemporaneous plan (this could be up to 30 pages of information).

The 2016 CQC innovation plan stated,

*"As people's health and social care needs are changing, providers are developing new ways of delivering care to meet those needs. We have seen new models of care emerge, and expect to see technology increasingly influencing these. Inevitably, providers will progress and develop at a varying pace. We expect that providers will explore different approaches to providing care to suit the needs of local populations, developing different ways of organising the delivery of that care, and using the new opportunities that technology provides. We expect to see some radical innovation and change over the next five years"*

- 3.5. This statement indicates that providers need to offer a supportive environment enabled through exploring new ways of providing care or organising delivery to create an efficient organisation that is easier for providers and the public to interact with. Without this development it is likely that "good" CQC inspection ratings will become harder to attain in the future.
- 3.6. To evidence a quality service staff must be able to record information in real time, recording the information in one place which will then populate all required records. Moving to an electronic support plan system will also give staff immediate access to information to facilitate the correct support to any

resident at any time and reduce the considerable amount of time spent maintaining records.

- 3.7. Furthermore the use of a digital system to record sensitive information will significantly reduce the likelihood of a data breach as the information rather than being paper based will only be available to staff who are authorised and securely logged into the specialist software system.

#### **4. Procurement of a contract – Rationale**

4.1. The specialist software required is not available directly via an existing framework agreement.

4.2. The contract would run for an initial term of four years with an option to extend by up to a total of six years, giving a maximum potential term of ten years. This timescale is proposed to avoid the risk that a short term contract will significantly impact the management of the digital continuity which requires that processes and technical strategies are put in place to ensure that information remains usable by the business for its full lifecycle. Digital continuity is put at risk by change, including changes to the IT environment, supporting contracts, business process and organisational function and structure.

- A contract is considered more appropriate than setting up a new framework agreement as: Framework agreements are limited to a maximum of four years. Timescales to procure, implement and fully embed the system are around 2 years. Re-procuring a support plan framework agreement every four years is not desirable due to the costs involved and the disruption to Adult Services staff.
- More suppliers are likely to tender for a contract than a framework agreement.
- A longer term contract provides a more strategic, longer term relationship to develop for both the service and the supplier.

4.3. The proposed route to market is for an Open OJEU tender process, the expected date for the tender to be live is November 2018 with the contract awarded in early in 2019.

#### **5. Finance**

5.1. The contract value is anticipated to be up to £1.8m for a ten year period and covers in-house services for Older People with an option to extend the service into in-house services for people with a Learning Disability. To avoid the costs of a second procurement exercise, permission is sought to include this option in the contract.

5.2. The system will be rolled out to the in-house services for Older People first and if it proves successful it will also be rolled out to in-house services for people with a learning disability.

5.3. In addition to the specific costs of the proposed contract there will be other items of expenditure required by the department to implement this project. These other items are outlined below:

- Devices from which to run the procured software on. The initial purchase of these devices will be covered from the Enabling Productivity (EPP) budget. It is currently anticipated that the refresh of these devices will need to be funded from the department.
- Additional annual Hampshire County Council IT services costs
- One off Hampshire County Council IT project costs should the software be rolled out to Learning Disability services.

5.4. Correspondingly it should therefore be noted that whilst the approval requested within this report is specifically for the contract value, agreement of this request, for both Older People and Learning Disability services, would commit the department to a significantly greater sum. The maximum departmental financial liability from this project is outlined in the table below:

	Software Contract	One off HCC IT cost	Ongoing HCC IT cost	Devices + Licencing*	Total other costs	Total Cost
<b>AH&amp;C Total Funding</b>	<b>1,430,000</b>	20,000	18,000	1,557,000	<b>1,595,000</b>	<b>3,025,000</b>
Contingency / Inflation	<b>170,000</b>				<b>0</b>	<b>170,000</b>
<b>Total Dept Funding</b>	<b>1,600,000</b>	<b>20,000</b>	<b>18,000</b>	<b>1,557,000</b>	<b>1,595,000</b>	<b>3,195,000</b>

\*In addition to device refresh costs this includes data and call costs. These may not be required and are to be confirmed.

5.5. As outlined earlier the first year contract costs and set up are being funded by the County Councils IT budget. These are estimated to be £0.2m contract and £0.3m for devices and project implementation making the overall project cost £3.7m over ten years.

5.6. During the contract, it is likely that there will be new or additional services and / or product developments that fall outside the scope of the support and maintenance arrangements in place with the successful supplier. The proposed contract value makes provision for such changes as per the contingency line in the table above.

5.7. The anticipated recurring annual cost to the department of this initiative, inclusive of Older People and Learning Disability services, after IT funding for year 1 has ended, is shown in the table below:

	Software Contract	Ongoing HCC IT cost	Devices + Licencing*	Total other costs	Total Cost
AH&C Annual cost	<b>155,000</b>	2,000	173,000	<b>175,000</b>	<b>330,000</b>

The department is therefore required to identify funding of £0.33m per annum to meet the cost of this project. Incidentally, all one off costs to be borne by the department, estimated to be circa £0.055m, will be met from the cost of change reserve.

5.8. This project is expected to achieve ongoing savings that will help to meet the cost of the annual funding requirement of £0.33m. The following recurring financial benefits are anticipated from year 2 onwards:

- £0.05m per annum saving on the printing budget as all data will be held electronically.
- £0.10m per annum saving on the Older Person's purchased care budget. The efficiencies offered from this new system will release carer time which will enable Care Home staff to care for higher needs service users, reducing the need for these service users to be placed into high cost private care placements.

5.9. After savings outlined in 5.8 there is a residual balance of annual recurring funding required by the department of £0.18m. This balance has been included within the departments' T19 considerations as an investment that will require additional savings. This is currently built into the T19 plan.

5.10. Whilst a maximum spend level for the ten year period has been estimated for this approval the annual spend will be monitored and managed within the value of the annual budget approved by Full County Council in each of the years.

## **6. Performance**

6.1. The contract will contain Key Performance Indicators. Performance against these indicators will be monitored through performance reports completed by both parties which will form the basis of quarterly review meetings.

## **7. Consultation and Equalities**

7.1. No consultation exercise has been conducted as yet, but a full familiarisation and awareness process will be undertaken as part of the change management process for all staff and other interested parties (e.g. relatives, residents and other key stakeholders).

7.2. An EIA has been completed to support the proposal outlining how the introduction of such a system will impact staff. At this time the perceived impact is considered low.

## **8. Other Key Issues**

8.1. The system will offer the ability to record care delivery in an efficient and effective way.

8.2. There may be resistance to using an electronic system from Care Home staff which will be addressed by a behavioural change management programme backed up by a full training programme.

8.3. It is anticipated that staff will need time to learn to use the system effectively, which will need to be factored into rollout plans.

8.4. Existing paper based support plans will need to be manually loaded into the system.

## **9. Legal implications**

- 9.1. The County Council shall procure the proposed services contract in accordance with the Public Contracts Regulations 2015.
- 9.2. The service must adhere to current Data Protection Legislation.
  - The data to be held is classed as 'Special Category Data'.
- 9.3. It is for the decision maker to have due regard to the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

## **10. Future Direction**

- 10.1. The system will introduce greater efficiency into the care delivery in Hampshire Care Homes, freeing up care staff from administrative duties enabling them to care for higher needs service users and reduce the need to place these service users in more expensive independent care settings. It will reduce printing costs and improve the quality of the recording of care provided to residents, support improved Care Quality Commission regulation.

## **11. Conclusion**

- 11.1. Subject to the approval of the Executive Member for Adult Social Care and Health Hampshire County Council should procure an electronic support plan management system with a 4 year contract extendable to up to 10 years at a maximum contract value of £1.8m.

**CORPORATE OR LEGAL INFORMATION:****Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	No
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	No
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	No

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
n/a	
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>
Care Act 2014	April 2014
Care and Support (Eligibility Criteria) Regulations	2015
Care and Support Statutory Guidance, Department of Health	September 2016 (revised)
Data Protection Act /General Data Protection Regulations	2018
CQC Innovation Plan, CQC Strategy 2016 -2021 <a href="https://www.cqc.org.uk/sites/default/files/20170327_cqc_innovationplan_2016.pdf">https://www.cqc.org.uk/sites/default/files/20170327_cqc_innovationplan_2016.pdf</a> <a href="#">Information Security Cloud Services policy - Appendix D</a>	

**Section 100 D - Local Government Act 1972 - background documents**

**The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)**

<u>Document</u>	<u>Location</u>
None	

## **IMPACT ASSESSMENTS:**

### **1. Equality Duty**

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;

Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

#### **Due regard in this context involves having due regard in particular to:**

- The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

### **1.2. Equalities Impact Assessment:**

Adults Health and Care have 16 in house residential and nursing homes employing over 1000 staff supporting 962 residents across Hampshire. In addition there are 7 Learning Disabilities residential units with 117 staff supporting 117 beds.

The management and monitoring of care is currently paper based requiring staff to make multiple entries by hand which can lead to inconsistencies.

Following a study of working practices it was identified that up to 13% of care staff time was being taken up recording these entries. Any discrepancies in recording impacts on the ability to provide not only a quality service, but also consistent evidence to the Care Quality Commission, relatives and law courts when required.

This project is to procure and implement an IT software/cloud system to provide a support plan management system in Adults Health and Care, (AHC), In House 16 residential and nursing homes. The current system is paper based requiring staff to make multiple entries into daily diary notes. It is AHC strategy to offer a range of services to include not only long term care but advanced dementia care and discharge to assess.



All individuals receiving care and support require an extensive and up to date support plan. In order to evidence a quality service it would be beneficial for staff to record information in real time in one place.

### **Impact on Service Users**

As this project will not change the existing protocols and procedures for the recording of service user information consultation is not required.

The equalities impact to service users is assessed as neutral. The changes will lead to an improvement in the manner in which information is recorded and reported against. It will not change the daily routine of service users.

### **Impact on Staff**

No direct consultation is required but communication and training will be provided as the project progresses to implementation.

Many of the In House staff will not have used technology to directly record information regarding service users and for this reason there will be a requirement for ongoing training and support throughout.

The requirements in procuring the system will consider factoring in the use of compatible access software such as talk to text, (Dragon Speak), as well as the use of symbols, drop down boxes and radio buttons where practical.

## **2. Impact on Crime and Disorder:**

2.1. No impact has been identified.

## **3. Climate Change:**

3.1. Care home staff will need to carry a mobile device to access the application. To minimise the impact on power usage, this should be the same mobile device that is used for the staff rostering system.

3.2. The contract will lead to a reduction in paper records being used.