

Meeting of South Ayrshire Health and Social Care Partnership	Integration	Joint Board	
Held on	21 <sup>st</sup> Octobe	er 2020	
Agenda Item:	6		
Title:	Digital Stra	tegy	
Summary:			
This report seeks the Integration Joint Board's approval of a Digital Strategy for the Health and Social Care Partnership. The Digital Strategy was largely developed before March 2020 and the initial COVID-19 'lockdown' period but the final version presented to the IJB (Appendix 1) incorporates some key elements of COVID-19 learning.			
This report also provides an update on the implementation of Carefirst and CM2000 – two key digital system changes within the HSCP.			
Author:	Tim Eltring	ham, Chief Officer	
Recommendations:			
It is recommended that the Integration Joint Board			
i. Endorses the Health and Social Care Partnership Digital Strategy attached			
at Appendix 1; ii. Agrees that a refreshed strategy will be brought to the IJB by the end of 2021, incorporating anticipated developments in national policy and further learning from COVID-19; and iii. Note the further updates in this report in relation to Carefirst and CM2000.			
Route to meeting:			
The draft Digital Strategy has been previously reviewed by the internal Digital Programme Board. This Board also oversees implementation of CM2000 and Care 1st.			
Directions:		Implications:	
No Directions Required		Financial	
Directions to NHS Ayrshire     & Arran		HR	
		Legal	
Directions to South     Ayrshire Council		Equalities	
		Sustainability	
4. Directions to both SAC & NHS		Policy	
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# **DIGITAL STRATEGY**

#### 1. PURPOSE OF REPORT

- 1.1 This report seeks the Integration Joint Board's approval of a Digital Strategy for the Health and Social Care Partnership. The Digital Strategy was largely developed before March 2020 and the initial COVID-19 'lockdown' period but the final version presented to the IJB (Appendix 1) incorporates some key elements of COVID-19 learning.
- 1.2 This report also provides an update on the implementation of Carefirst and CM2000 two key digital system changes within the HSCP.

#### 2. **RECOMMENDATION**

- 2.1 It is recommended that the Integration Joint Board
  - i. Endorses the Health and Social Care Partnership Digital Strategy attached at Appendix 1;
  - ii. Agrees that a refreshed strategy will be brought to the IJB by the end of 2021, incorporating anticipated developments in national policy and further learning from COVID-19; and
  - iii. Note the further updates in this report in relation to Care 1<sup>st</sup> and CM2000.

#### 3. BACKGROUND INFORMATION

- 3.1 The rate of change in digital technology is rapid and growth in the uptake of technologies such as mobile devices, social media, and high-speed broadband is changing the way we live, providing those living in our communities with greater choice and control than ever before. This presents a huge opportunity for the South Ayrshire Health and Social Care Partnership (HSCP) to change the face of health and social care delivery and transform our services so that care can become more person-centred.
- 3.2 Furthermore, the experience of COVID-19 has sharpened the HSCP's focus on digital technology as we adapt to a period in history when more services will be delivered remotely, more staff are working from home and citizens depend on digital technology to make up for reduced social interaction.
- 3.3 The Strategy, attached at **Appendix 1**, supports the delivery of the Partnership's vision and aligns closely with national and local strategies, including Scotland's Digital Health and Care Strategy and the digital strategies of both NHS Ayrshire and Arran and South Ayrshire Council. It recognises the pervasive nature of technology and, by providing a vision of a digitally transformed health and social care service, looks to put digital at the heart of all aspects of the Partnership's activities. In doing so, the Strategy aims to deliver positive outcomes for staff, partners and service users across South Ayrshire through improvements in service delivery and efficiency.



3.4 The full impact of COVID-19 on health and social care services and society at large as still not known and the HSCP will continue to use digital technology to adapt over the coming years to the effects of the pandemic.

### 4. REPORT

# **Digital Strategy**

- 4.1 A significant amount of work, including thorough engagement with staff across the HSCP was undertaken in preparing this strategy and its broad content and action plan have been approved by the internal Digital Programme Board. With this in mind the IJB are invited to approve the strategy, providing the HSCP with a sound basis for its work on digital going forward. Members should note, however, that in this already fast-moving policy area there are a number of emerging developments that are likely to require for the strategy to be refreshed as early as next year, including:
  - Current consultation on a new Scottish Government Digital Strategy;
  - Anticipated development in the Scottish Government/COSLA Reform of Adult Social Care Programme;
  - Publication of a new Strategic Plan for the HSCP in 2021; and
  - Further learning from COVID-19 within the partnership and a clearer view of the impact of the pandemic on the future of public services.
- 4.2 Taking these upcoming developments into consideration, it is recommended that the IJB agrees that a refreshed strategy is published by the end of 2021.

# Systems implementation (Carefirst and CM2000)

4.3 Two key programmes on which the IJB have asked to be updated are the implementation of **Carefirst** (a web based, multi modular case management system for recording care arrangements, statutory interventions and related events pertaining to social care service users) and **CM2000** (a care management system allowing the HSCP to gather real-time information on the delivery of care at home services, increasing quality, safety and efficiency of homecare services, whilst facilitating communication).

### Carefirst

4.4 As has been previously reported, the full implementation of Carefirst for adult services has been subject to a number of delays which relate in part to technical difficulties and more recently the impact of the Covid 19 emergency. While good progress had been made with staff preparation, the development of new assessment processes and the technical elements associated with the transfer of the client database from SWIS to Carefirst, a number of complexities have remained. Primarily these have been associated with the transfer of client financial information from SWIS to Carefirst and financial information being recorded in two different financial years. In recent weeks the Carefirst Programme Board has been advised that to date an electronic solution to this transfer has yet to be identified. Options are still being considered which may be electronic, manual or a blended approach.



- 4.5 In light of the progress with the client database and the ongoing consideration of options for the finance data transfer, the Programme Board asked for an assessment of the feasibility of "de-coupling" the two pieces of work. Following a range of exploratory discussions the Board has been assured that it is feasible to "de-couple". While this will mean all finance data will still be captured in SWIS and Client case records in Carefirst the Board are satisfied that a range of standard operating procedures can be devised which will ensure smooth capture of financial information. As a result, at the Board held on 15 September, it was agreed that the necessary arrangements be progressed to enable a "go- live" date for Carefirst adult care client case records on 2 November 2020. It is intended that the finance element of Carefirst will go live from April 2021, to coincide with the new financial year.
- 4.6 A revised project plan, to include a programme of staff training and support is being implemented and there is a transition plan overseen by the project team to ensure that teams are ready and will be supported in the use of the new system. A range of standard operating procedures are being developed and will be implemented prior to 'Go Live' for Adult and Older Peoples Services ( for use over the period to end March 2021) which will ensure smooth capture of financial information and minimise associated risk.
- 4.7 We anticipate significant benefits of full implementation including enhanced ability to draw down management information and performance reports, the streamlining of bureaucracy for social workers, management and clients, and more concise and timely information in relation to cost projections.

#### CM2000

- 4.8 The HSCP continues to take steps to reform and improve Care at Home services, with a view to improving the quality of older people's services, improving outcomes for people, reducing reliance on long-term care and care homes and reducing delayed discharge. The implementation of the CM2000 monitoring system is an important element of these reforms and in the March 2020 IJB report on Care at Home a plan of action and anticipated outcomes of CM2000 were shared, among other items.
- 4.9 Since then, the Project Team has engaged with other Partnerships: North Ayrshire, Dumfries and Galloway and Inverclyde which has helped with the internal process re-design and use of the CM2000 system.
- 4.10 Although implementation continues, the project has experienced delays and may have further delays due to Covid-19 working arrangements. A number of Project Outcomes have been partially achieved:
  - Improved processes around the scheduling of resources, moving away from existing labour intensive, paper-based processes;
  - Improved understanding and better regulation of the care that is being delivered through the provision of a consistent, modern service;
  - Removal or reduction in time and resource intensive, paper-based processes;



- The provision of meaningful analytics and management information to understand existing resource demands and inform decisions on future capacity; and
- Improved communication with carers in the community.
- 4.11 Progress is monitored by the Digital Programme Board and further verbal update will be provided to the IJB.

### 5. STRATEGIC CONTEXT

- 5.1 Improving and mainstreaming the Partnership's approach to and use of digital technology serves the organisation's strategic objectives, in particular our aim to "manage resources effectively, making best use of our integrated capacity" and that "bureaucracy will be the minimum it needs to be".
- 5.2 Taken together, Carefirst and CM2000 aim to improve the quality of older people's services, improve outcomes for people, reduce reliance on long term care and care homes and reduce delayed transfers of care from hospital.

#### 6. IMPLICATIONS

#### 6.1 Financial Implications

6.1.1 There are no direct financial implications of this report – financial implications of Care 1<sup>st</sup>, CM2000 and the wider Digital Strategy are monitored within the HSCP.

#### 6.2 Human Resource Implications

6.2.1 There are no direct HR implications of this report.

### 6.3 Legal Implications

6.3.1 There are no direct legal implications of this report.

#### 6.4 Equalities implications

6.4.1 The equalities implications of implementation of the Digital Strategy will be monitored – it is anticipated that overall the further use of digital technology will enhance the HSCP's ability to deliver high quality services to the people we support.

# 6.5 Sustainability implications

6.5.1 The sustainability implications of this report will be monitored through implementation of the Digital Strategy – it is anticipated that increased use of digital technology would enable the HSCP to lower its carbon footprint.

### 6.6 Clinical/professional assessment

6.6.1 There are no direct clinical or social work practice implications of this report however all of our efforts across the digital portfolio are designed to enhance the role of professionals and improve the quality of services we provide.



# 7. CONSULTATION AND PARTNERSHIP WORKING

7.1 Full detail of consultation on the Digital Strategy is included within Appendix 1.

# 8. RISK ASSESSMENT

8.1. Risks associated with CM2000 and Care 1<sup>st</sup> are monitored through the internal Digital Programme Board.

### REPORT AUTHOR AND PERSON TO CONTACT

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# **BACKGROUND PAPERS**

None.

15.10.2020