Digital Innovation & Efficiency Committee

Item No: 5

Report title:	**New Social Care System**
Date of meeting:	**8 November 2017**
Responsible Chief Officer:	**James Bullion, Executive Director of Adult Social Services**

Strategic impact

CareFirst has been NCC's social care system since November 2007. It is a key core system for NCC and its availability and functionality are business-critical. The system is used by Adult Social Services, Children's Services, Finance Exchequer Services for paying providers and charging for social care and Procurement for contract administration. The current contract with OLM for the CareFirst system should have expired in March 2016 and has been extended to March 2018. There are a number of reasons for replacing CareFirst which are set out in the body of this report.

The objective of the Social Care System Replacement programme is to procure and implement a social care information system for Norfolk County Council that will meet current and future business requirements, including integration with partners, which will enable us to support vulnerable people most effectively. This will form the platform on which savings, integration and service improvements can be developed and delivered.

Executive summary

The purpose of this report is to inform the Digital Innovation and Efficiency Committee of the progress of the Social Care System Replacement (SCSR) programme, outline the benefits and future development.

The new Liquidlogic and ContOCC systems are scheduled to go live the week commencing 20 November, following successful completion of live testing. The project is progressing through a series of five Programme Board 'Go / No Go' gates. The final 'Go/No Go' gate is on 20 November. At the time of writing the report preparations for go live are on target.

It is proposed that there will be a further report to the January meeting of this Committee providing a further update on the programme and a demonstration of the system.

Recommendation:

The Digital Innovation and Efficiency Committee are asked to note the progress on delivering the new Social Care Record System for Adult Social Services, Children's and Finance and to agree to a further report to the January meeting of this Committee.

1	Introduction
1.1	CareFirst has been NCC's social care system since November 2007. It is a key core system for NCC and its availability and functionality are business-critical. The system is used by Adult Social Services, Children's Services, Finance Exchequer Services for paying providers and charging for social care, and Procurement for contract

	administration. The current contract with OLM for the CareFirst system should have expired in March 2016 and has been extended to March 2018.
1.2	There were a number of reasons for replacing CareFirst. The key benefits are: 1) A resilient and adaptable system to underpin our planning and delivery of social care through to 2025; 2) Savings, integration and service improvement through an intuitive, flexible system; 3) Compliance with the legal and procurement imperatives.
1.3	The Policy and Resources Committee agreed on 8 February 2016 to: • Allow an exemption to Contract Standing Orders to extend the contract for the current CareFirst system to March 2018, to permit a phased transition; • the procurement of a replacement social care recording system that meets current and future business requirements, effectively; • associated capital funding of £7.926m; • recommend the revenue funding of £0.150m for 2015-16 and £2.271m over the three years 2016-17 to 2018-19. Reports had been presented to the Adult Social Care Committee on 25 January 2016 and to the Children's Services Committee on 26 January 2016 and their recommendations were presented to the Policy and Resources Committee.
1.4	In February 2016 the project to replace Care First had been provisionally planned as follows: • Phase 1 (Requirements) – to inform the development of an agreed Requirements Specification by March 2016; • Phase 2 (Procurement) – selection of a solution and supplier by October 2016; • Phase 3 (Implementation) – configuration of solution, business process review, training, migration of data and go-live by April 2018.
1.5	The project engaged with the market, users and stakeholders to inform the development of an agreed Statement of Requirements (SoR) by March 2016. A contract notice to start the formal procurement process was published on 6 May 2016. Three bids were received by 10 June 2016 and the bids were formally and extensively evaluated. Following this NCC awarded the contract to the new system provider, Liquidlogic, on 31 August 2016.
1.6	The project aims to implement the new system (LAS – Liquidlogic Adults System) for Adult Social Care and associated Finance functions (ContrOCC) by the end of November 2017, and for Children's Services (LCS – Liquidlogic Children's System) and associated finance functions (ContrOCC) by the end of March 2018.
2	**Governance**
2.1	The cross departmental nature of this programme dictates that it sits under its own governance hierarchy and provides reporting for information to each departmental transformation change programme. There is a SCSR Programme Board that meets monthly and includes: the Executive Director of Adult Social Services; the Executive Director of Children's Services; the Executive Director of Finance and Commercial Services; the Strategy Director; the account manager for Liquidlogic; the External Quality Assurance Consultant; the Head of IMT; the Joint Leadership Advisory Group Leads; and the two Senior Project Managers. Updates are provided regularly to CLT (County Leadership Team) and CLT make key decisions.

2.2	The Joint Leadership Advisory Group (JLAG) meets weekly to monitor progress, resolve issues and make decisions. It consists of: the Assistant Director Early Help and Prevention (Adult Social Services); the Assistant Director Performance and Challenge (Children's Services); the Head of Finance Exchequer Services; and the two Senior Project Managers. Other people attend as required.
3	**Benefits**
3.1	The strategic principles for the Social Care System Replacement are: 1) **A joined-up social care system for Adults, Children's, Finance and Procurement -** in order to enable and support more integrated approaches with the whole family, transition from child to adult, contracts, commitments and forecasting. 2) **Integration with Health and other partners**, reflecting our integrated commissioning and delivery in Adults, including direct working together under partnership arrangements under section 75 of the NHS Act 2006, and the new locality-based multi-agency hub approach in Children's. 3) **Supporting vulnerable people** – the solution is an enabler for our corporate outcome framework - that all vulnerable people who live, work, learn and are cared for will be safe; and that vulnerable people are more resilient and independent. 4) **Simplicity, with straightforward recording, automated workflows and readily accessible information**, in order to improve efficiency and release practitioner time while supporting our compliance with relevant legislation. 5) **Information and our use of it drives the system**. Information sharing with partners underpins commissioning and delivery within a 'whole system' approach. We also need to make citizens' own records more accessible to them. 6) **Transformation** – from the National Information Board digital strategy through to local initiatives (Caring for Our County, Signs of Safety and Promoting Independence) - will require a system and supplier that are flexible and offer innovative solutions. 7) **The strategic IMT architecture** requires integration of the social care system - with Identity Management, the Information Hub, Records Management, Customer Relationship Management, portals, and the means to control staff and other users access to systems - in order to support the corporate programme and exploit wider benefits.
3.2	The benefits include: • Time savings delivered through reduced administrative and data input time required by front line social care staff in Adult Social Services and Children's Services • Improved management information to reduce managers/supervisors' administration time and improve case management • Reduction in annual application support costs • Improved outcomes and efficiencies through mobile working

	- Improved service through integrated working and data sharing with NHS and other public sector partners - Improved care package commissioning process through improved information - More robust data quality for reports and mandatory returns - The ability to generate accurate client based milestone-driven information to enable NCC to plan and target services, manage demand and improve performance. Screenshots of how the new system will look to a social care user of the system are included in Appendices One to Four: - A snapshot of how a case will appear - A user worktray - A visual display of a person's network - Workflow.
4	**Phase Two**
4.1	As part of the implementation planning for the SCSR programme it is intended to deliver a number of functions in Phase Two, after the major go live dates for Adults and Adults Finance in November 2017 and Children's and Children's Finance in March 2018. Detailed planning for Phase Two will start after the Adults and Finance Go Live in November. The functions include: **Adults Client and Citizen Portal** including integration with NCC portal This will enable service users elements of self service and interaction with NCC online. This can be one way eg provision of information or two eg exchange of information. This could enable the citizen to receive their care information (assessment/plan) directly from LAS into a secure online account – saving on postage and ensuring more secure, electronic transfer of information. Citizen portal functionality also enables online referrals to be made directly in the Liquidlogic systems. For example this could be used to enable GP referrals to be made directly online into LAS (as Wirral do) rather than GPs ringing into the Customer Service Centre as they do at present. **Integration of Liquidlogic with the corporate CRM (Client Record Management) System** – Would enable information captured at the front door by the Customer Services team to be automatically fed into social care system, and to prevent duplication of recording for the Customer Service Centre, who double-key the information at present into both systems. **Adults Finance - Online Financial Assessment Portal** - Enables self-service financial assessments, which are required to see if people should contribute towards the cost of their social care. This has a dependency on corporate pieces of work and is a complex function to implement. **EHM (Early Help Module) rolled out to partners via Professional Portal** - Enables NCC workers to delegate parts of assessments to other professionals to contribute to assessments held in the Early Help Module. It could also mean that non-NCC early help professionals could complete Family Support Plans. **Mobile working including deployment of mobile apps -** Enables use of *restricted* case management system on mobile devices (tablets/hybrids). It would have significant benefits in enabling recording work to be carried out 24/7, and would have a

real impact when combined with mobile printers. Eg Staff who assess under the Mental Health Act at all hours and have to leave a copy of their assessment immediately on a ward. Currently the staff hand-write the assessment, and then return to the office to double-key. The opportunities will be informed by the results of the pilot. It will need a separate business case to secure funding for hardware.

Children's Troubled Families module. The Troubled Families functionality enables families to be identified and matched across multiple data sources. Data from contributing systems such as Police, Education, Youth Offending, etc would be into the Liquidlogic Single View and Data Warehouse, from where the payment by results returns can be generated. It enables increased automation of the identification of troubled families, able to see how the family is progressing, monitoring for payment by results and reporting requirements to central government.

Adults Finance Client Finance Portal – the ability for service users to self-serve online: Online Remittances; Online Documents (upload/download); Link to the 'Online Financial Assessments' (OFA); View Invoices; Accounts and Balances.

Children's Portal including extensions. Families and Children would be able to view documents, complete forms and message about their cases and plans. Professionals could also report concerns.   Care leavers could contribute towards pathway planning and review processes; they could view information published out to them from their records.

Integration with Health - the system can facilitate a shared care record. A shared care record is an overview of a person's health and social care information in one digital record. All the health and social care professionals involved in a person's care have access to the information they need and thus provide better care, making the best decisions about diagnosis, treatment and care plan. It could include test results, medications, allergies and social or mental health information. It would mean that: people don't have to keep repeating their medical or social care history; care professionals have access to the right information when they need it; a reduction in duplicate appointments and tests; people should receive the right treatment and care more quickly.

5	**Progress To Date**
5.1	The **Adult Social Services and Finance project** has completed all four formal test rounds and a dry run is in progress.
	The training programme started at the beginning of October, taking seven weeks. The face to face training (some 3,500 units; there are multiple units of training per staff members that vary by role) has commenced. It is being delivered in Great Yarmouth, Kings Lynn, Dereham, Cromer and County Hall.
	Efforts are focused on building the helpdesk function that will support staff through the implementation process, on training staff and on communication. A comprehensive structure of support resources have been developed over time to help users continue to work effectively during the implementation window when there is no system available and to adjust to working with the new systems. An intranet site includes FAQs, guidance and other materials and is already updated on an ongoing basis. A network of over 100 Champions has been developed from early in the year to provide local support. A helpdesk function has been established in room B33 bringing together members of the current CareFirst support team, the Adults project team and the IMT

7	System Administration team. The Finance team also has a network of champions and the project team will be on site to provide assistance. The eLearning training materials are available for reference and Liquidlogic trainers have been retained as floor walkers to provide support in locations across the county for two weeks following go live.
	Work on the Provider Portal continues to progress positively, with process maps being finalised, training videos being produced and regular communications being provided to providers.
	A suite of reports is on target to be available from Go Live to provide dashboard style access to information relating to Adult Social Services case work. The reports provide the ability to drill down to individual cases. Core financial reporting is also under development and is expected to be available from go live. Further work will be carried out after go live to develop more sophisticated self-service reporting.
	The new Liquidlogic and ContOCC systems are scheduled to go live the week commencing 20 November, following successful completion of live testing. The project is progressing through a series of five Programme Board 'Go / No Go' gates. A set of 94 acceptance criteria have been defined based on key project deliverables and these are re-assessed for each Go/No Go decision point. The final 'Go/No Go' gate is on 20 November.
	At the time of writing this report preparations for go live are on target and there are no show stopping issues.
	However it is important to note that the Briefcase function will not be available from go live delaying the ability to work 'offline'. Work is continuing by NCC and Liquidlogic to diagnose the performance issues being experienced as the Briefcase' offline working performance needs to be improved on NCC infrastructure if it is to be usable.
	Also a key issue for the programme currently is the delivery of the secondary Network link. The primary network link to the hosting site is in place and was tested in round 4 of UAT (User Acceptance Testing). The secondary link from the disaster recovery site has been installed by Virgin Media at the Millennium Library and is due to be connected up by staff from Liquidlogic's parent company (System C) by the end of October.
5.2	The **Children's Services and Finance project** has completed two of the four formal rounds of testing. The third round of testing starts from the 30 October and lasts for three weeks.
	There are risks currently being mitigated relating to: the availability of finance project team members not being ready to be released from the Adults half of the programme to support the Children's side; the availability of Liquidlogic resources to deliver NCC's form requirements; the timely availability of testers; and that Children's testers will not be available should an Ofsted inspection coincide with the third round of testing due to commence on 30 October.
6	**Financial Implications**
6.1	The project overall continues to be forecast to be on budget.
7	**Issues, risks and innovation.**
7.1	At the time of Policy and Resources Committee on 8 February 2016 the major risks identified were: 1) Being unable to resource the project to meet the April 2018 deadline

2) Setting a scope that is either too ambitious or not challenging enough

3) The market may not provide an affordable solution

4) It may be difficult to establish costs and fund the project

5) National and local agendas may cause our requirements to change radically between procuring and implementing the system

6) Corporate governance may be challenging to establish standard requirements for a complex project involving users from four council departments and three committees.

These risks are being successfully managed.

The Programme has a Risk Register which is reviewed regularly by the JLAG Leads and by the Programme Board. Given the scope, size and nature of the programme the project team and Board are managing risks and issues all the time.

The key risks and the mitigations currently are:

a) Numbers of 'no shows' at Adults training cannot be accommodated in the limited remaining training window. There are regular communications to managers and staff that they must complete their eLearning before attending face to face training and the need to maintain their booked slot where at all possible

b) Transactions are lost in the period where there is no system available. Business continuity processes have been updated to enable capturing of case information to Liquidlogic format form templates and storing in a structured way to enable recording in new systems when live. Champions and helpdesk in place to help support staff.

c) Briefcase function is not available from go live delaying the ability to work 'offline'. Work is continuing to diagnose the performance issues being experienced.

d) A total failure of the Adults live implementation delays effective go live and results in a prolonged period working with business continuity processes. Detailed implementation plans are in place and the testing completed has informed acceptance criteria which so far indicates no show stopping issues. A full dry run will be completed before actual go live and contingency plans are being developed to inform decision making and action at the time of implementation.

e) The risk that Children's testers will not be available should an Ofsted inspection coincide with the third round of testing due to commence on 30 October (this date is also an Ofsted Inspection notification date). The main mitigation for this is the project team are separately funded and will still be available to complete a reduced level of testing. In addition to this a number of part time staff have been identified who would be willing to work additional hours to support testing activities.

f) Testing will not be completed to a level that provides assurance the Children's systems are ready to go live. There are two current challenges relating to this risk including the unavailability of testers during Childrens user acceptance round 2 and LL not delivering certain aspects of functionality in line with the agreed project plan. Both elements are being addressed ready for the third round of testing.

g) There is a risk around the level of technical resource available from within the finance project team. The resource was expected to be released from the Adults part of the programme, but is still required to complete outstanding work to support Adults go-live. This risk has been known for a while but has increased in likelihood recently. Previously additional business analyst resource was secured and is working on the Children's Finance part of the project. To further mitigate this risk additional specialist ContrOCC support has now also been secured which started from 16 October.

	h) The risk that not all form requirements will be met by Liquidlogic (LL) due to their lack of available resource. NCC have prioritised the forms to better enable LL to manage the workload. Liquidlogic have also scheduled an additional configuration release in early February to provide additional capacity and have offered overtime to their product analyst in an attempt to meet the demand.
8	**Conclusion**
8.1	The SCSR programme has progressed well with an ambitious scope and timeline since the Policy and Resources Committee agreed on 8 February 2016 to the procurement of a replacement social care recording system. The new Liquidlogic and ContOCC systems are scheduled to go live the week commencing 20 November, following successful completion of live testing. The project is progressing through a series of five Programme Board 'Go / No Go' gates. The final 'Go/No Go' gate is on 20 November. At the time of writing the report preparations for go live are on target.
9	**Recommendation**
9.1	**The Digital Innovation and Efficiency Committee are asked to note the progress on delivering the new Social Care Record System for Adult Social Services, Children's and Finance and to agree to a further report to the January meeting of this Committee.**

Officer Contact

If you have any questions about matters contained in this paper please get in touch with:

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If you need this report in large print, audio, Braille, alternative format or in a different language please contact 0344 800 8020 or 0344 800 8011 (textphone) and we will do our best to help.

Child: Emily Example 13 years (Ref: 34)
CP CLA MISP R

My View

My View
My Page 1
Timelines

📎 Case Summary

Emily and her family have moved to this authority area in August 2011.
There have been repeated DV incidents between Emily's mother Edith (alleged victim) and Edith's partner, Jonas Jones (alleged perpetrator).

Emily has witnessed DV incidents and has unexplained injuries resulting in A&E visits.
Emily has unexplained unauthorised periods of school absence.
Emily has chronic asthma which is not being managed at home.
House shows evidence of drug and alcohol abuse.
Repeat...

Last updated by Ken Wetherby 784 days ago

+ Show extra detail...

👤 Parental Factors of Related Persons

Name	Parental Factor	Yes	No
Jonas Jones	Known History of Domestic Violence (Perpetrator)	☑	☐
	Problem Drinking Abuse	☑	☐
	Problem Drug Abuse	☑	☐
Edith Example	Problem Drug Abuse	☑	☐
	Problem Drinking Abuse	☑	☐
	Known History of Domestic Violence (Victim)	☑	☐

👥 Professional Involvements

Name	Involvement	Dates
Ken Wetherby	Allocated Case Worker	02 Apr 2012 to present

● Case Pathway Timeline

Update CLA Care Plan
Organise Next CLA Review Meeting |
Child Looked After
Organise Next CLA Review Meeting
Create CLA Care Plan
Place Into Accommodation
Child Becomes Looked After
Child Protection - End the Child Protection Plan
No Further Action
Update CLA Care Plan
Update Child Protection Plan
Active Child Protection Plan
Core Group Meeting   Organise Next CLA Review Meeting
Initial Child Protection Conference   Update CLA Care Plan
Child Already in CP Process   Child Missing from Placement
Single Assessment   Single Assessment
Section 47 Enquiries   Legal Action
Strategy Discussion   Single Assessment
Specialist Assessment
Contact Record   Single Assessment
Referral & Information Record   Other Actions   Single Assessment
Single Assessment   Single Assessment   Single Assessment

2012   2013   2014   2015   2016   2017

📎 5 most recent case notes

Ken Wetherby - Statutory Visit (Looked After)
Emily is happy and likes living with her carer.
13 Apr 2015

· Ken Wetherby - Statutory Visit (Looked After)
Looked after statutory visit to assess whether placement is meeting Emily's educa...
09 Sep 2014

Ken Wetherby - Statutory Visit (Looked After)
Emily is happy in her placement
17 Mar 2014

· Ken Wetherby - Statutory Visit (Looked After)
Emily's first CLA statutory visit goes here....
17 May 2013

Ken Wetherby - Child Sexual Exploitation
Emily has made an allegation of sexual exploitation against Wayne Smith who works...

● CLA Timeline

CLA Review
CLA Stat. Visit
CLA Stat. Visit
CLA Stat. Visit
CLA Review
CLA Stat. Visit
Placement - Nanny McPhee
Legal Status - CLA - V2 - Single period of accommodation under Section
Period of Care Started

2013   2014   2015   2016   2017

👥 Last 5 People to view this record

Ken Wetherby	12 minutes ago
Dylan Delegate	19 Nov 2015
System User	26 Oct 2015
Terry Transitions	14 Sep 2015
Ruby Davidson	01 Jun 2015

🏠 Relationship Summary with Alerts

Relationship	Name	Alerts
Self	Emily Example	✓ CLA MISP R
Mother	Edith Example	
Mother's Partner	Jonas Jones	
Carer	Nanny McPhee	
Cared For of Nanny McPhee	Charlie Fredricks	CLA SB PM R
Cared For of Nanny McPhee	Annie Cranshaw	CLA R
Cared For of Nanny	Amy Adoption	CLA R

Appendix Three: Screenshot of Atom – visual display of a person's network
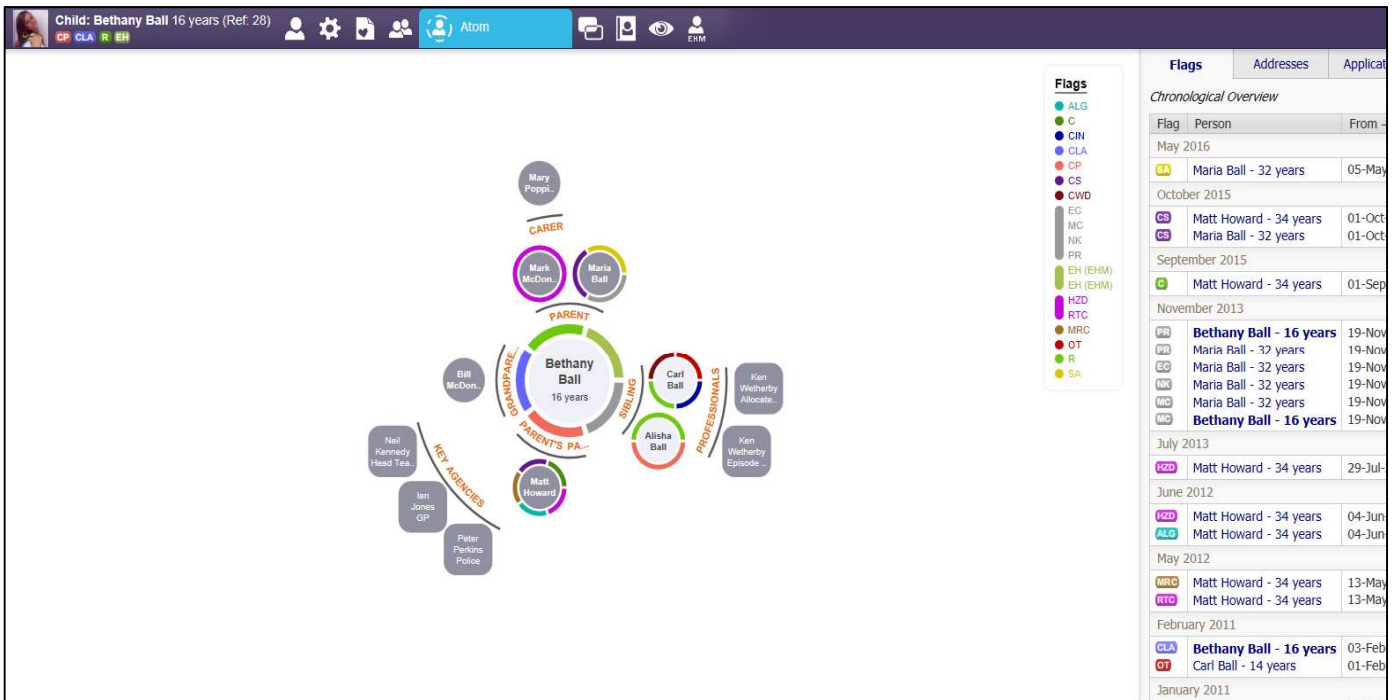
Workflow is embedded in the system. It enables training and learning. It steps the worker through case management – shows them where they have been, and what the next options are.