

North Yorkshire Council

31/08/2023

Digitalised Care Records & E Scheduling

Report of the Corporate Director Madi Hoskin/Gary Fielding

1.0 PURPOSE OF REPORT

1.1 Recommendation to procure a digital care records and e scheduling system, for use in HAS Care Provider Services and Reablement.

2.0 BACKGROUND

2.1 The purpose of the project is to explore and implement a solution to support the digitisation of Care Provider Services, particularly relating to digital care records and e scheduling. The primary aim of the project is to support improvements to productivity and data security across Care Provider Services and Reablement. The current paper-based processes for managing care records are time consuming, duplicative and completely manual, while the existing e scheduling system supplier is withdrawing from the UK market.

The main issues and problems that the digitisation of Care Provider Services project will support to resolve include:

- **Compliance with the Care Quality Commission (CQC) Key Line of Enquiry**
- **Information Security Standards**
- **National targets**
- **NECS – Capacity Tracker / Data Requirements**

A good quality e scheduling system enables increased productivity, route optimisation opportunities and other benefits such as improved management oversight, continuity of care and better tools and practices for staff. While the system awarded in 2021 has not realised all planned efficiency benefits, much of this is a consequence of technical problems with the product (e.g. reporting bugs and issues with system performance), and therefore these benefits should be realisable with an alternative solution, particularly the benefit relating to efficiencies associated with scheduling creation and management.

As there are several suppliers on the market who supply both e scheduling and care records functionalities, the decision has been made to seek a replacement system which covers both aspects.

3.0 DETAILED PRESENTATION OF THE SUBSTANTIVE ISSUE

3.1 The preferred option is to procure an off the shelf system which covers both e scheduling and care records. This option would achieve the most benefits, presents fewer risks and is more practical to implement than two separate systems. Lessons learned from 2261 E Scheduling also

evidence that this is the best option from a procurement perspective in terms of achieving value for money and ensuring any solution is holistic and can be implemented more easily.

4.0 ALTERNATIVE OPTIONS CONSIDERED

4.1 Doing nothing has been discounted as there is a clear case for change. Procuring two separate systems has also been discounted due to the potential complexities around procurement, integration and implementation, as well as feedback from managers that one system for operational staff to have to learn and log into would be much preferable to two separate systems. There would also be an increased overhead in terms of system support and maintenance internally within the NYC technology department.

5.0 FINANCIAL IMPLICATIONS

5.1

Estimated implementation costs and budget allocation

	Amount Required (£)	Funding Source		
		Service (£)	Corporate (£)	Other (£)
Implementation costs	112,925		112,925	
Recurring costs (5 years)	1,512,710		1,512,710	
Project delivery (internal staff costs)	36,197	12,406	23,791	

6.0 LEGAL IMPLICATIONS

6.1 An open procurement exercise will be carried out to ensure a formal and transparent procurement process is followed.

7.0 EQUALITIES IMPLICATIONS

7.1 An initial Equalities Impact Assessment screening tool has been completed, which has indicated that a full Equalities Impact Assessment is required. The process of paying due regard commenced in May 2023 and will continue throughout the project.

8.0 CLIMATE CHANGE IMPLICATIONS

8.1 No climate change implications are likely.

9.0 POLICY IMPLICATIONS

9.1 The Council has a statutory obligation to follow guidance set out by the Care Quality Commission (CQC). CQC has set a national target for 80% of CQC registered providers to have a digital care records solution in place by March 2024.

10.0 ICT IMPLICATIONS

10.1 The system purchased will be managed by the Corporate Systems team in Technology.

11.0 REASONS FOR RECOMMENDATIONS

11.1 The recommendation is the preferred way to achieve project objectives and meet national guidelines.

12.0 RECOMMENDATION(S)

i) Procure a digital care records and e scheduling system.

APPENDICES:

Appendix A –

BACKGROUND DOCUMENTS:

Outline Business Case:



3928 Digital
Transformation of Car

Madi Hoskin/Gary Fielding
Corporate Director – Technology
County Hall
Northallerton
31/08/2023

Report Author – Emma Pemberton, Project Manager
Presenter of Report – Emma Pemberton, Project Manager

Note: Members are invited to contact the author in advance of the meeting with any detailed queries or questions.

PLEASE ALSO NOTE THAT IF ANY REPORTS / APPENDICES INCLUDE SIGNATURES THESE MUST BE REMOVED / DELETED PRIOR TO SENDING REPORTS / APPENDICES TO DEMOCRATIC SERVICES. Appendices should include an Equality Impact Assessment and a Climate Impact Assessment where appropriate