

# Public Document Pack

## Officer Decisions

Friday, 3rd January, 2020

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### AGENDA

1. **Replacement of the Council's Reablement System**  
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Date Published: 3<sup>rd</sup> January 2020  
Denise Park, Chief Executive

## RECORD OF DECISION TAKEN UNDER DELEGATED POWERS OUTLINED IN THE CONSTITUTION – Part 3 Section 16



**DELEGATED OFFICER DECISION TAKEN BY:**

**Paul Fleming - Director Of Digital & Business Change**  
**Sayed Osman – Director of Adults & Prevention**

**PORTFOLIO AREA:**

**Digital & Customer Services**  
**Adult Services & Prevention**

**SUBJECT:** Replacement of the Council's Reablement system

### 1. DECISION

The Director of Digital & Business Change in consultation with the Executive Member for Digital and Customer Services to approve the re-allocation of £50,000 from the ICT capital reserves for 2019/20 to replace the current adult social care reablement system.

The Director of Adults & Prevention approves entering into a contract for the supply of the system with CM2000.

### 2. REASON FOR DECISION

The primary driver is that the Reablement and Home First Enhanced service requires modernisation in its working practices and processes, whilst also adopting the Local Authority's digital first ethos by way of digitising its workforce and promoting the 'digital citizen' approach. However, the current system being used is limiting what the Council are able to achieve in this regard.

A business case was produced by the ITM&G department with the recommendation to proceed with the replacement of the current Reablement system.

There are currently numerous issues with the current systems outlined as follows which would be resolved with the new system;

- The current system doesn't have the scope to expand to allow new workers access to technology such as Home First and the Crisis Team who need to schedule in home visits to vulnerable service users to meet current demand
- A lot of manual processes are being performed that with a new system will become automated such as new system rules that are built so workers patterns and shift allocations are fair and flexible and ensures a safer and smarter rota allocation.
- The current system doesn't allow sufficient time to match social care staff to service users, a new system would allow this to occur as well as avoiding double-bookings and would also perform various other checks including skill and language matching.
- The current system doesn't integrate/interface with Adult Social Care's main system Mosaic and as such there is duplication of work. A new system would enable one inputting process making it safer with more accurate information
- The current system has no GPS data available and resource time is wasted in some instances being unable to locate properties, a new system would include GPS and focus on timely routes being available
- The current social care system that reablement use is not fully auditable, a data function

- would enable analysis of staffing information which in turn will support capacity and demand
- Risk is currently managed via a manual processes, so having access to a system that allows risk to be managed more proactively given the information the worker will be accessing will be in real time, such as: Medication Details (also, to set tolerance times - i.e. for medication which has to be at least four hours apart). Tasks relevant to a visit. Double Up Workers. Emergency Contact Information. Access Notes and Key Safe. Access/Update Care Plan online
- A new system would enable visits to be scheduled in geographical area making it smarter in terms of production and managing demand
- a smarter system would enable all three teams to meet a higher demand of service users due to smarter ways of working that is digitalised.
- Lone working can also be supported by a system that offers a digital solution to staff logging in and out of visits especially whilst working hours outside of normal office hours.

Another local authority who implemented the new system demonstrated that in the first two months the number of visits undertaken by workers increased by 13% and the average visit time is reported to have decreased by eight minutes per visit. When applied to BwD's visits (120 per day/600 per week), this could generate an additional 50 hours per week capacity across the team (1.35 FTE). This resource would be used to accept more cases in to the team, thus undertaking more visits and reducing overtime.

The contract with CM2000 for the solution is for a 3 year period with the option to extend for a further 2 years. The total contract value over the potential 5 year period is £133,000 including implementation.

The Capital budget for the new system includes supplier's implementation costs, internal IT costs and the provision of Smartphones for staff.

The annual revenue costs for the new solution will be met through the departments existing budget envelope through the disestablishment of the vacant administrator post and mileage savings.

### **3. BACKGROUND**

Reablement is a Care Quality Commission (CQC) registered service which forms part of Adult's Social Care by way of providing personal care, help with daily living activities and other practical tasks to enable local people to be as independent as possible usually the intervention is for up to six weeks. The BwD Reablement team has 37 support workers and at any time will have approximately 40 service users who they are supporting, each of whom receives approximately three visits each day. This equates to approximately 120 visits each day/600 per week. The current system is primarily a domiciliary care system which enables organisations to manage care patterns that are generally static. The Reablement service is not static with rota patterns and care requirements frequently changing, the current system does not allow for quick updates to the system and therefore the administration and use of the current system is labour intensive.

Home First Enhanced (a CQC registered service) is similar to the reablement service but offers intensive support and care for service users with the highest level of need and who are significantly complex and are at greater risk. The team is smaller than the reablement team but includes therapists and social workers, so all staff will benefit from visit scheduling.

The Crisis Team (CQC registered with Reablement) work alongside the Emergency Duty Team outside of office hours and as such lone working is imperative. The crisis team need to respond to emergencies with immediate effect and offer personal care assistance.

#### 4. OPTIONS CONSIDERED AND REJECTED

The business case ruled out various options for the reablement system as follows;

Option A – Do Nothing, continue to use the existing system in its existing form. This option was ruled out as the current solution is not fit for purpose.

Option B – Upgrade the existing solution. The current system provider gave a demonstration of the new system and whilst there had been technological improvements which could improve business operations it was still predominately a homecare/domiciliary system and would not be fit for purpose.

Option C – Replace the current system with a Reablement system without the functionality to auto-schedule visits for users. Without this functionality the same efficiencies would not be made in terms of ensuring visits are allocated efficiently and therefore would not provide the same benefits in terms of reduced mileage and the expected administrative savings.

*Further information is available from the report author*

#### 5. DECLARATION OF INTEREST

All Declarations of Interest of the officer with delegation and the any Member who has been consulted, and note of any dispensation granted should be recorded below:

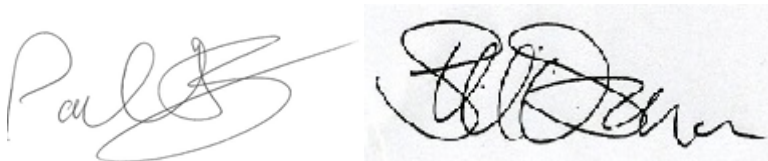
<b>VERSION:</b>	<b>1</b>
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<b>CONTACT OFFICER:</b>	<b>PETER HUGHES</b>
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<b>DATE:</b>	18/12/2019
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<b>BACKGROUND DOCUMENTS:</b>	None
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Signed:



<b>Director : Paul Fleming</b>	<b>Date: 18/12/19</b>
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<b>Director: Sayyed Osman</b>	<b>Date: 20/12/19</b>
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