# Business case for release of funds CORPORATE IT DEVELOPMENT PLAN 2008/9

ITT Reference

08HASS01

A1	Title of Bid				
	Electronic Monitorin	g for Home C	are		
A2	Directorate				
	Which directorate is the Bid from	HASS			
<b>A</b> 3	Bid Priority				
	What priority has your DMT given this Bid?	1/2			
	When was this priority agreed?	9/8/07			•••••
A4	Type of bid				
	What type of scheme is	Business Appraisa	al; New sy	vstem;	
	proposed? Delete as appropriate				
A5	New Bid or Review				
	Is this a new bid or a review of a		Dofofor	rovious Did.	
	previous bid?	New	Ref of previous Bid:		
	Delete as appropriate	11011	Title of p	revious Bid:	
A6	<b>Business Appraisal Details</b>				
	Has a Business Appraisal been		By who	m:	
	prepared prior to this Bid?	No	Reference no:		
	Delete as appropriate		Copy in	icluded: Yes / No	
<b>A</b> 7	Timing of the scheme				
	When would the scheme need	to be in place by?	Novem	ber 2009	
	Is this date critical?		No		
	If so, please explain why below.				
	When can the directorate prov	ide the relevant	April 20	108	
	staff resource to start work on		, p		
	If the scheme is phased over n	nore than a year,	This bid covers activity over two financial		
	which years is this bid covering	g, e.g. 1 - 3?	years		
	What is the total time for which	n the scheme	18 months		
A8	expected to run, in years?  Scope Of The Proposal				
<i>,</i> 10	To what extent does it affect the	ne Council?		Directorate only	V
	To what extent does it anout if	io oddiidii.		More than one Directorate	
		Tic	k just one	Corporate	
				Externolo 9 Dorte ese	
	Does it affect?	Tick all	that apply	Externals & Partners Public	
A9	Contact Details			: <u></u>	
		Name:	Gary Br	rittain/Kathy Clark	
	Bid Author	Job Title:	Commis	ssioning and Contract	
			_	er/Corporate Strategy Manager / xt 4143	
		Contact number:	•••••		
	Duning on Out and	Name:	Keith Martin		
	Business Sponsor	Job Title:	Head of	f Adult Services	
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# Part B: About The Proposal

To be completed by Directorates

B1 Details of the Business Problem or Opportunity (What's the problem? Why do we need to do something?)

#### 1. Core Efficiency Measure

 Electronic home care monitoring has been identified as a core efficiency measure for councils by CSED (Care Services Efficiency Delivery), an initiative funded by the Department of Health.

#### 2. Project Drivers

- a. Changed contractual arrangements for the delivery of home care to Block Contracts and in-house SLAs. This purchasing model delivers better capacity and cost benefits than the previous spot-purchasing model. However, it requires regular monitoring of hours of care delivered, instead of invoices from providers, as previously. Currently providers need to transfer details from handwritten timesheets to spreadsheets, and forward these to the Council. These actual hours of care then have to be reconciled against planned delivery of care. The system is cumbersome and does not always reflect the actual care delivered.
- b. Charges to customers are calculated on the basis of actual care delivered. The current system relies on manual input from the returns submitted by providers and is labour intensive. Because of the difficulties of the manual system, it is possible some customers may be charged inappropriately.
- c. Data quality issues exist with the current information mechanisms. There are varying interpretations by home care workers and providers about how to log their work. Care is often not delivered as originally planned, but care plans are not updated correspondingly. Information on needs therefore does not reflect actual needs so that in some cases customers may not receive the best care for their situation.
- d. There are performance issues for in-house services related to rota management. Face-to-face contact time between carers and customers is low with in-house services. There is a target to improve it to 75% of paid care time but this will require improved rota management to be achievable.

# 3. Opportunities

- a. Enhanced partnership working with external providers. Having moved to block contracts we now have only 4 main external providers to link to the system, representing a reduction in external providers. This simplification of partnership arrangements allows us to develop new ways of working.
- b. Better integration of finance and activity information The implementation of Frameworki means that systems can provide, and so support, the improvement of MI through the electronic transfer of information on actual care delivered
- c. Improved customer service and financial control, By enabling care workers not only to register the time they arrive and depart from a customer's home electronically, but also for this information to be transferred electronically to CYC care management systems and thence to Finance systems. As a result, an electronic system will significantly improve processes around planning and management of home care worker rotas.
- d. Improved lone worker security

#### 4. Contribution to Corporate Priorities

- a. Improvement of the health and lifestyles of the people who live in York, in particular among groups whose level of heath are the poorest
- b. Improvement of our focus on the needs of customers and residents in designing and providing services
- c. Improvement of the way the council and its partners work together to deliver better services for the people who live in York
- d. Improved efficiency and reduced waste to free up more resources

#### 5. Contribution to Directorate Objectives

a. Helping more people to live at home for longer

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# B2 Description of the Proposed Resolution/Scheme (What is it that you're proposing we do?)

What is the proposed course of action that will result from approval of this Bid? Here you should:

- 1. include a description of areas to be reviewed or investigated
- 2. highlight corresponding business or process changes that would be necessary
- 3. list the specifics of any equipment / systems to be implemented or services required
- 4. give details of what is required from ITT and the IT Development Fund to facilitate this.

*In all cases* you should include details of how the proposed scheme will address each of the current problems / opportunities listed in section B1.

#### 1. Business Appraisal by 28 February 2009

A business appraisal will identify the best option for delivery by:

- Including BPR for home care rota management, for charging, and for contract management; this includes defining standard recording practices for all providers
- Potentially evaluating other options eg routing software for planning visits efficiently or paying travel costs
- Defining appropriate interfaces between new capability and Financial management systems and Frameworki
- Identifying the functional requirements to meet the business needs in home care monitoring.
- Exploring the market place for solution options
- Identifying any procurement related issues of the various options
- Assessing integration options linking into other major applications
- Estimating associated costs of the various options
- Making recommendations on solutions and scoping system requirements which will also include:
  - Data cleansing requirements
  - Management information requirements
  - o Possible business efficiency gains and service improvements.
- Reviewing implications for Partnerships

# 2. Procurement by 31 May 2009

An appropriate system for home care monitoring and associated equipment, infrastructure, support/maintenance and licences will be procured.

#### 3. Implementation by November 2009

The Implementation Phase will cover:-

- implementation of the new system
- delivery of the defined interfaces between new capability and financial management systems and Frameworki
- communication with customers to explain changes
- negotiation with staff and unions, and development of a communication plan for staff
- some reconfiguration of Frameworki
- training for staff to utilise the new system, and where necessary will provide basic IT training plus additional technical training for IT support staff
- support/funding for external providers to develop their current IT systems to enable them
  to interface with CYC systems providers already work in this way with other agencies so
  this is not considered a major issue for them

#### Support

ITT support is required to develop the business appraisal, and to procure and implement the new systems and interfaces.

HASS is committed to providing a dedicated project officer and manage the project using a Prince2-based methodology. Staff resources will be available for project management, process definition, testing and training. The HASS Project Portfolio Management Board will oversee appropriate resourcing form the business to meet key objectives supported by this project.

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**B3** 

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# Benefits & Impacts

#### (What are we going to get out of doing it?)

Give details of the Benefits to be realised as a result of undertaking this scheme. These should be linked to the Problems / Opportunities identified in section B1.

#### 3.1. Productivity/efficiency, improvement

Access to information on an immediate basis enables Commissioners to monitor services more effectively and manage home care contracts to the value of approx £6m.

Measure: Improved confidence in information.

Baseline: High numbers of queries regarding inaccurate information

Target: 100% accuracy i.e. reduction of the number of queries/time to resolve

#### 3.2. Business results/improvement, financial

Improved Management Information to Commissioners and Providers (enables more efficient service delivery from Providers) and improved performance monitoring to support service planning at strategic level.

Measure: Improved budget projections.

Baseline: Currently, budget figures do not promptly reflect activity and unable to accurately match capacity to demand at present

Target: Improved service commissioning matching capacity to demand 100% Accuracy.

#### 3.3. Service quality, financial

The generation of electronic timesheets in place of manual timesheets completed by care workers. This allows greater transparency of the services delivered and can be used to calculate the billing, where users are charged for the service, and to generate invoices for external domiciliary care services. The use of electronic timesheets would reduce the requirement for providers to invoice the department and the need to manually input customer timesheets for charging ona four-weekly basis. This would enable efficiencies to be realised within staffing areas associated with this role. Approximatly 4500 timesheets are submitted each four weekly cycle for manually checking and entering onto the system.

A recent CSED (Care Services Efficiency Delivery) report stated that savings of between 2 and 10% have been realised from the introduction of monitoring systems. The higher levels would include savings realised from changes to guaranteed hours and locality provision which the Council has already adopted but Buckinghamshire state that they have saved £64,182 in administartion costs as a result of the changes alongside an additional £70,000 efficiency from increased care delivery. Within York there is the potential to increase capacity further alongside delivering and sustaining the efficiencies detailed above but administration savings as a result of the introduction of electronic monitoring are estimated at 1% of the home care budget. Further examples of efficiencies realised can be seen at Lewisham where they saved 1.25FTE staff posts.

The savings identified should be seen alongside the significant non-cashable benefits such as improved health and safety for customers and staff, improved monitoring and management information and continued efficient management of services.

Measure: Charges will be more accurate with fewer queries from customers and fewer discrepancies on invoices, minimal invoices to process and reduction of time spent on inputting data for customer charges,

Baseline: unknown but identifiable administrative savings of £60k p.a.

Target:100% accuracy

# 3.4. Service quality

Compliance with National Care Standards in relation to the keeping of accurate records for services provided.

Measure: CSCI inspections of providers rate this section (standard 23 and 24) as 3 (met) Baseline: 3 providers (of 10) assessed, 2 meet level 3.

Target 100% meet level 3 by April 2010

#### 3.5. Financial, risk reduction

Potential to reduce service costs and eliminate any potential for fraud in timesheets etc.

Measure: Reduced discrepancies and processing time.

Baseline: Manual spot checks

Target: Full audit trail

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#### 3.6. Productivity, business results

Capacity for Providers to utilise system to manage staff rotas, timesheets, allocation of calls etc. The introduction of electronic monitoring will ensure that savings from efficiencies agreed as part of the 2007/8-budget process (£900K p.a.) can be sustained within CYC In-House provision.

Measure: Increased face to face contact time within the in house services and continued efficient delivery of in-house services

Baseline: 33%

Target: 75% by April 2010

#### 3.7. Risk reduction, quality of service

Procedures to safeguard the health and safety of home care workers and Customers. Real time alerts and alarms reduce health and safety risks for both staff and customers. Measure: New procedures produced by February 2009; Alerts/alarms defined and implemented by April 2010

# 3.8. Stationery, scanning overheads

Reduced cost of printing timesheets and scanning of hard copy. Saving £10k p.a.

Measure: Staff & printing cost saving

Baseline: Printing cost £12K

Target: Negligible

Part C: Post Corporate IT Strategy Group Review

To be completed by IT

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# C2 Project Risk Assessment Summary

The detailed assessment is documented separately

Overall score for acquired risk

Overall score for inherent risk

# Part D: Staff & Financial Resources required

To be completed by IT assisted by Directorates

D1 Estimated staff resources (dedicated time in weeks)

Directorate staff time committed		ITT staff time requested		Other		
Directorate reps		Business Development	8	Partner organisations	0.5	
Service managers		Customer Support				
Other Service Staff	20	Networks	0.5			
		Systems	0.5			
		Procurement Contracts	0.5			

D2 Will your Directorate be submitting a growth bid related to this bid? Yes / No

If Yes please give brief details

# D3 Is any part of this proposed scheme externally funded?

If Yes, please give brief details - how much, when it's available, special conditions or constraints

D4	Costs Requested from the ITDP as p	To be completed by IT		
	A breakdown of the costs is included in the accompanying document.	Total gross costs £	Year 1 Cost £	Ongoing Cost £
	Total Costs	109,000	26,596	26,596

# **Part E: Supporting Assessments**

To be completed by Directorates assisted by IT

# E1 Risk & Impact Scores

The detailed assessment is included in the accompanying document.

	Score
Likelihood	10
Impact	8
Overall Score	27

# **Part F: Document History**

To be completed if required

Please complete to avoid confusion or the wrong version being submitted.

	Updated by	"X"
	person making the changes	to indicate the current status
In progress		Χ
Finished by Service Manager and submitted to IT Representative	Bid Author	Χ

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Reviewed and prioritised by the Directorate Management Team	Dir IT Rep	X
Finished by IT Rep and submitted to IT Business Dev Consultant	Dir IT Rep	Χ
Finished by SBDC and submitted to Business Dev Manager	Bus Dev Cons	X
Ready for submission to the IT Strategy Group	Bus Dev Mgr	Χ
Reviewed by the IT Strategy Group	Bus Dev Mgr	X

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