

CARE AND SUPPORT ADVICE AND INFORMATION ON-LINE BUILDING TOWARDS A BUSINESS CASE

This document will be of interest to [should be read by]

- Director of Adult Social Care,
- Those with an interest in providing on-line information and advice
- Local Authority Chief Information Officers
- Chief Information Officers (or equivalent) in partner organisations

It aims:

- to ensure social care resources are budgeted to improve **on-line advice and information** for the public, using **DH capital and revenue funds** available from 2014 onwards
- to help staff **co-ordinate local material with continuing development of advice and information at national and regional levels** in order to use funds to maximum effect
- to prepare for the new advice and information needs that will come with the **care bill, care capping** and the **new tranche of people** who will require local authority assessment

High Level Timescale

By Dec 2013 plan for work and budget resources on advice and information strategy – using this document

2014 agree a strategy around on-line advice and information and start any procurement (ADASS IMG hope to provide further guidance by March 2014)

2014/15 implement strategy and extend towards self-funders looking for care accounts

Introduction

This document provides guidance about online provision of care advice and information. It has been developed by the national ADASS Information Management Group. It is intended to be the first in a series of documents which will build, in increasing detail, into a generic business case to support local development of care advice and information.

The guidance will help local authority social care departments understand the wider strategic policy environment in which on-line care and support information and advice systems need to be developed. This includes:

- ❖ [The Caring for our Future White Paper](#), published last year allocated additional Capital Grant funding of £20 million in 2014/15, further capital funds of £12.5million in 2015/16 and £12.5 million of annual revenue funding over the following year to develop and improve their on-line social care advice and information.
- ❖ The [Department of Health's Information strategy](#) set out the context and importance of improving the on-line provision of information and advice for those who may need care and support, their carers and families. While the DH strategy focused on the developments of a national approach across adult social care, NHS England and Public Health England the strategy makes clear how vital the part played by local authorities in providing citizens with good quality, local information on care and support.
- ❖ [The Care Bill](#), currently going through Parliament reinforces this policy direction, through the inclusion of a specific duty for local authorities to establish and maintain a service for providing people in its area with information and advice relating to care and support for adults and support for carers.
- ❖ Current on-line provision in local authorities is shown to be rather patchy, (e.g. with too much use of jargon) in recent research work from SOCITM (*Better connected 2013, Feb 2013*)
- ❖ Each authority will have its own approaches and local priorities dependant on their own requirements, the needs of their local population and fit with broader Council strategy, but within this there will be many commonalities. This document is designed to highlight some of the factors that authorities will need to take account of, so that they can prioritise and begin to estimate what provision they need to make and plan for over the next few years. To support this, the ADASS IMG will continue to work with authorities and others with an interest over the coming year to produce a detailed strategic view of the issues. We expect this to build into documentation that will support development of local business cases that will fit within wider development of information and advice services.

As such, this document is designed to supplement the work of the Think Local Act Personal (TLAP) partnership which it published earlier this year, and is designed to co-ordinate with their plans for more strategic work

- ❖ [Advice and information needs in adult social care](#) - An interactive map that demonstrates people's typical journeys through the complicated care system and identifies the "pinch points".
- ❖ [Principles for the provision of information and advice](#) - a short practical framework that sets out the main issues that councils need to consider when developing a comprehensive and coherent local information and advice service.

The following major business changes driving advice and information requirements will be addressed in turn. They are seen as:

- ❖ the **wider choice** available from the outsourcing of care and personalisation
- ❖ **cost savings in local government** and the need for shift to cheaper and easier channels for information and advice
- ❖ **care capping** proposals and the care bill
- ❖ the need for an **integrated service user experience** across social care, health and housing
- ❖ **outcomes and quality** factors
- ❖ **evolving capabilities** of the population and their carers and other proxies and how **good design** supports this
- ❖ rapidly **evolving sources of information**
- ❖ **risks** in developing on-line advice and information

Wider choice

The increased choice of care and variety of care providers, stemming from outsourcing and personalisation has led to:

- more and varied suppliers – care as a commodity, and the information needed to support this
- more work potentially involved in planning and providing support
- previous paper directories often unsustainable and rapidly out of date
- more sophisticated demand from some users
- changes in terminology which are not common public use

In the context of

- information is now more fragmented and not easily available
- ongoing maintenance requirements for information
- varied approaches to social care information – by condition (e.g. dementia), need (e.g. personal hygiene) or form of support (e.g. stairlift provision)
- dangers of partial views of the care system skewing people to larger suppliers (e.g. NHS Choices and CQC list registered suppliers only)
- the legal position from any Council listings of information or pointers to other sources of information

Changes required

- knowledge of the “system” and its complexities needed by many users, carers, staff and others – need for a campaign plan to market the local authority approach, both for this and solutions to the next item
- listing, details and guidance about suppliers of care needed by users, carers, staff and others, to satisfy many approaches, and potentially procuring (and jointly procuring) systems to enable this, using procurement methods like the Government Procurement Service
- guidance on potential suppliers of information services and software
- involvement of suppliers of care in their listings (considering syndication of material from suppliers and other sites)
- developing listings into transactional e-marketplaces
- define the legal limitations and approaches to any information that the Council creates, lists or points to
- ensure terminology is consistent with public usage

Cost savings in local government

Local government is facing a considerable challenge to meet government cost-saving targets

- Local government need for cost savings
- Self-service can support some reductions
- On-line channels of communication can be 1/10 cheaper than face-to-face or 1/3 cheaper than voice, and also decrease as transactions increase (*SOCITM figures Sep. 2013*)

In the context of

- 2011 research found that 73% of older people would still phone or visit, even if more services were online *Online Government Services and the Offline Older Generation, Fujitsu / Age UK, July 2011 P. 7*
- Some social services transactions (especially around assessment and financial assessment) require personal support and checking, even though there may still be an on-line role
- New channels incur set-up costs especially for smaller authorities, which can be mitigated by joint working and re-using existing information

Changes required

- Creation of effective, user-friendly and sustainable on-line support for all advice and guidance information
- Definition of where self-service (or supported self-service) can occur
- Planned provision of some support for many transactions
- Shifting in a planned manner to more voice and on-line transactions over time, with a clear and realisable benefits plan (whether costs or capacity and effectiveness)
- Encouraging partners in care and advice to support people serving themselves, through co-production and training in Council/partner sources (see campaign plan above)
- Educating the potential self-users (see campaign plan above)
- Working with other Councils and agencies to share costs
- Building on what is already available from the internet
- Using on-line sources to provide paper options, where necessary
- Ensuring on-line material meets high standards of usability for relevant service users

Changes as a result of Care Capping

The Caring for our future: [Consultation on reforming what and how people pay for their care and support](#) sets out the position and some of the options in more detail, and the main effects would appear to be:

- Further change to the complexity of the system of care
- More people (and more prosperous people, currently funding their own care) going through an assessment and financial assessment system
- Short term peak of assessments for people wanting care accounts
- More people supported by the Council to receive care
- Greater potential financial planning for care costs
- Wider care market to be potentially listed
- Opportunities to help citizens avoid costly care mistakes

In the context of

- Increased pressure on current channels of advice and information
- New information and systems for citizens, carers, staff and partners to understand

Changes required

- More pressure for the requirements listed in other headings above
- Basic information on finance and financial products
- Access to financial advice (regulated and non-regulated)
- Where to get independent advice
- Potential on-line and supported assessment and financial assessment services, and the re-use of the assessment material to help find appropriate services as in [Asksara](#)
- Potential re-use of benefit material in financial assessments and vice versa

Integrated Service User Experience

Social Care, Housing, Health services and the benefits system are frequently supporting the same citizens in one or more combinations, and all major parties are having thoughts about increasing integration, but this would need

- Enabling the citizen and agencies to appreciate the system as a whole
- Enabling navigation through and joint working at critical points in the system (e.g. hospital discharge), so that processes feel common
- Linking information to create as seamless an experience for the citizen as possible
- Providing for the variety of citizen approaches to current information

In the context of

- Lack of clarity about how integration will work
- Lack of shared processes and priorities for life events
- Different agencies working at different speeds with very different governance, and even within agencies there can be much variety of provision (as in the NHS)
- No real linked strategies around the provision of information

Changes required

- Co-ordination with other agencies (both local and national) in planning and delivering advice and information, defining the separate roles of each agency and how they evolve together, and what information needs linking (including within the whole of local authority services)
- Jointly working with health on its integrated customer service programme the Health and Social Care Digital Service (nationally)
- Considering how citizen approaches to information can be integrated with what agencies can supply, and how processes will work together between agencies
- Educating other agencies on what social care is and will be providing

Outcomes and quality factors

Policy is tending to match citizen desires for improved experiences by attempting to address outcomes and improving quality

- Enabling transparency through comparison
- Improving guidance about care suppliers
- Provision of feedback about care experiences
- Good user experience in finding and using information

In the context of

- Difficulty of feedback in ongoing care, partly due to fears of retribution
- Controlling feedback that is not publishable or designed to promote/denigrate a supplier
- Inadequate measures of quality and outcome
- Lack of quality and outcome definitions around advice and information

Changes required

- Ensure feedback on any registers, and try to ensure it is from service users
- Link to (or use) other sites providing feedback, like NHS Choices and Care Opinion
- Use feedback and outcomes measures in Healthwatch and commissioning work
- Define more common outcome and quality measures
- Define and implement the outcome and quality measure from information and advice

Evolving capabilities and the benefits of good design

The strategies of the government Digital by default and the DH Digital First can be expected to have an impact alongside the increasing use of digital technology, especially digital phones, throughout the population. Equally important is to ensure that design factors develop both on-line use and the reputation which encourages it.

Identification by the public of inherent potential on-line advantages of speed, convenience, transparency, auditability, consistency, flexibility and currency

- [Digital by default](#) the central government strategy with resources supporting it developed by the Government Digital Service
- [SOCITM strategy - planting the flag](#) which emphasises the local context
- [DH Strategy – the power of information](#) which sets the context in health and social care of digital first
- On-line health record access (funding training 100,000 users), on-line social care access
- Ensuring first experiences of digital services encourage people to come back and spread the word

In the context of

- The need to shift up to 73% of users towards on-line channels
- Online channels can be badly designed to provide a poor customer journey, with little concentration on service user key tasks in a mass of information
- Channel shift being seen as just a cost saving measure and dumping problems on partners in care
- Any specific design factors relevant to adult social care users

Changes required

- Creating “digital services so good that all who can use them prefer to use them” and have appropriate support when they are stuck.
- Gear access (through research) to the “top tasks” wanted by the public, considering where business processes get in the way of this
- Involving partners and the public in our strategy, and helping them see the role they can play. Co-producing strategies with them.
- Education of targeted service users, carers and professionals currently involved in care processes
- Working with strategic developments and especially the health integrated customer service platform to promote on-line sources of advice and information

- Encouraging citizen tools and infrastructure (like identity management) which can draw together their own care and support information and plans to make both them and their carers/support a true driver of their own care – as in the Web of Support.

Other sources of care and health information

Due to its user profile and lack of widespread digital skills, social care is frequently behind other agencies in creating effective on-line information services, but in recent months/years there has been a flowering of potential information sources. There is a challenge to maximise the use of existing maintained information

- Evolving amount of web information: e.g. NHS Choices directory of registered suppliers of care, Findmegoodcare, Age UK, EAC
- Not re-inventing the wheel

In the context of

- Dangers of developing independently and multiply
- Lack of current linking and syndication
- Re-creating the information that originates with others – as identified in the ADASS IMG “Web of Support” papers

Changes required

- Listing of current quality sources of information that also appear to have usability and sustainability
- Creation of agreed ways of linking and syndicating information
- Finding ways of integrating national and local information in a seamless user experience
- Moving towards a policy similar to “create once and re-use”, to include “persuade the owner of information to create and enable it to be syndicated”, in both cases with work arounds where this is not possible
- Using the strengths of local authorities as local communicators to support digital messages through its influence/communications and services to the population (e.g. developing digital skills and access in libraries and One Stop Shops), and its influence/levers with the local groups that need to move themselves and the public towards this digital environment

Risks

As with all developments, there are risks around provision of on-line advice and information.

The main ones so far identified are:

- Lack of resources and budget and its potential mitigation by joint working with other authorities/agencies (and the risks that introduces)
- Developing in a rapidly changing situation: customers, customer skills, local government offerings, national web-site offerings, health offerings. Dangers of provision for the situation now and setting a wrong direction for the future, or, dangers of providing for the future in a way that is not going to create a gathering wave of use now.
- Providing better information and advice may increase demand for support that a local authority cannot meet
- Being able to co-ordinate with health (and housing and the 3rd sector) for an integrated user experience, especially if the plans of allies are relatively unclear, and not mutually influenced and agreed

- Failing to give users an on-line experience that is so good they prefer it to other channels (e.g. responding to the most routine enquiries in an over-complex way to deal with all possibilities)
- Failing to fit on-line provision with internal channels (phone and face-to-face) so that all channels are changed to a unified communication structure
- Lack of integration between directory/marketplace and case management system
- Care Providers (some very small) not having the skills or resources to provide and maintain their directory entries, and the LA not being able to do it either
- The potential legal consequences of pointing people outside the local authority for information or services, and also the clash between the risk averse nature of local authority legal departments and the need to co-produce and co-operate with all potential allies in the provision of information for the benefit of most customers
- Failing to pick up some safeguarding issues when not in personal contact

Risks may also be generated by the strategic choices that authorities make (e.g. how integrated with health or council information they choose to be)

There is an aim to find some mitigation for these risks as this work is developed more towards a business case and strategy.

Conclusion

Local authorities social care departments and their partners in care will need to set aside resources to address these issues during 2014-2015 in order to develop their information and advice resources on-line. A critical date will be the implementation of care capping in 2016. Further guidance will be needed on the business factors listed above, hopefully derived from leaders in this relatively undeveloped field. Both TLAP and IMG have plans to develop further material for March 2014.

IMG Advice and Information Group
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