

# Discovery Phase Review

## Time to Connect (TTC)

27 September 2019

“The Social Care Digital Innovation Programme 2019-21 supports the adult social care sector to use digital technology to respond to challenges in local areas. The programme is funded by NHS Digital and managed by the LGA. It is intended to enhance direct practice, improve information sharing and enable integration”



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Independence

# Exploring the Problem

Norfolk County Council's (NCC) **Adult Social Services** department (ASSD) has set its **vision** as **“supporting people to be Independent, Resilient and Well”**. To enable this we are delivering a new social work model called “Living Well”. Two of the foundations of the new ethos are to ensure vulnerable people do not have to wait for support and that when a person is in crisis that we stick with them like glue.

Both goals **require us to have the workforce capacity** that is sufficient and able to respond to the likely increased level of demand. We are not financially in a position to enable us to just increase our staffing cohort and **therefore we must think innovatively about how we use our most valuable asset** - our frontline staff.

**Problem Statement: How can Practitioners use their time more efficiently and effectively to help prevent, reduce and delay?**

ASSD have an aim to improve the efficiency of our social care team and improve the service user's experience **by reducing the overheads in the current process for booking and allocating appointments** and how those appointments are arranged over different days of the week and geographical areas.



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# Who does this impact

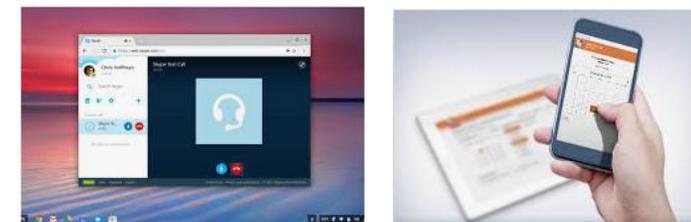
This project is **an enabler for** introducing future functionality such as **“self service” and video conferencing** calls for service users which will improve the quality, range and efficiency of care and support provision for them and provide greater independence and wellbeing. This project is also an enabler for our Mobile Working project.

This means that **initially** NCC will be looking to **roll out and embed the scheduling functionality only at this time** which will add benefits around freeing up Practitioners to spend time on the **people that matter** i.e. **the people in our communities that they support as they will receive quicker appointment slots and spend less time waiting for appointments.**

Therefore the **impact** of this project will be on both **internal staff and** indirectly on **Service Users.**



Future phase... following the right level of engagement



Video Conference Call self-service appointment scheduling .



- Appointments could be scheduled online
- Can book face to face or skype
- Can see a view of future appointments via portal
- Earlier appointments available as should not be on holding list anymore

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# Evolution of our problem Statement

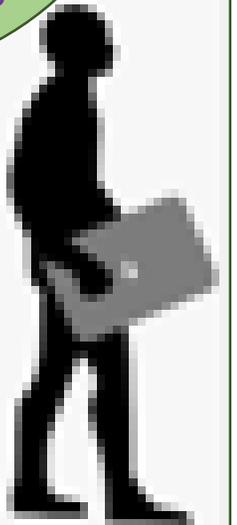
NCC have an aim to improve the efficiency of their social care team and improve the service user's experience by reducing the overheads in the current process for booking and allocating appointments and how those appointments are arranged over different days of the week and geographical areas and improving the service user journey by being able to identify those who are likely to continue using services in the future at a much earlier stage.



NCC aims to improve the efficiency of their social care team by reducing the overheads in the current process for booking and allocating appointments.



How can Practitioners use their time more efficiently and effectively to help prevent, reduce and delay?



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Adult Social Services

Norfolk County Council

# Research Methods

75%

of those targeted

7

20+

40

attendees over 2 meetings

30

attendees over 2 meetings



Early feedback questionnaire to Practitioners



Early feedback questionnaire to Team Managers



Stakeholder meetings with Heads Of Service



Workshops with Team Managers



User group meetings to review project outputs and request feedback



Steering group meetings specific to requirements

12

Coffee morning interviews at one of our Norfolk First Response Units

1

Meeting introducing project

Early Service User Engagement

10



Early supplier engagement meetings

## Outputs



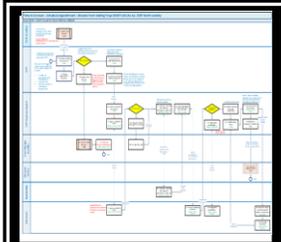
Validation of Problem Statement



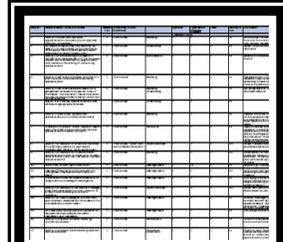
Personas



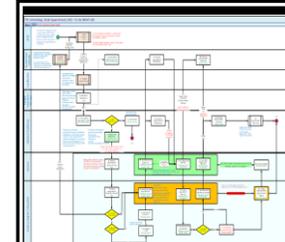
User Journeys



As Is Processes



Requirements



To Be Processes



Refinement of Tender Specification

Appointment Types	Can be booked by 1W/2W	Can be booked once by worker to 2W/3W	Can be booked once by worker to 3W/4W
1. Assessment/DBH or without (High/Low) NB New Forms	X	X	X
2. Crisis Conversation (new form)	X	X	X
3. Off conversation (new form) (communication forms)	X	X	X
4. Hospital discharge (communication forms)	X	X	X
5. Support planning	X	X	X
6. Mental Capacity Assessment	X	X	X
7. Unplanned Review	X	X	X
8. Initial Review	X	X	X
9. Planned Review	X	X	X
10. Actual Review	X	X	X
11. Next Intercare Meeting	X	X	X

Appointment Types



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# Research Findings



## People

- Booking meetings is currently convoluted and time-consuming especially when there are multiple agencies required.
- Scheduling by other resources will remove autonomy for Practitioners.
- There is not a big appetite from the service users we engaged with to embrace further technology options
- Service users would welcome a Video Conferencing service
- Understanding supply and demand today can only be done through email exchange with Practitioners
- Grouping allocations by locality will reduce mileage
- Should be a win on reviews side to book reviews that are due. Would be good to have advance reminders flag to team when annual review due. Also Useful for Time related panel meetings booked in advance and a great tool for identifying resource and capacity



## Process

- Not all appointment types will be able to be pre-scheduled (one size does not fit all)
- Processes for making appointments are different in each team and locality and sometimes uses a number of “end user applications”



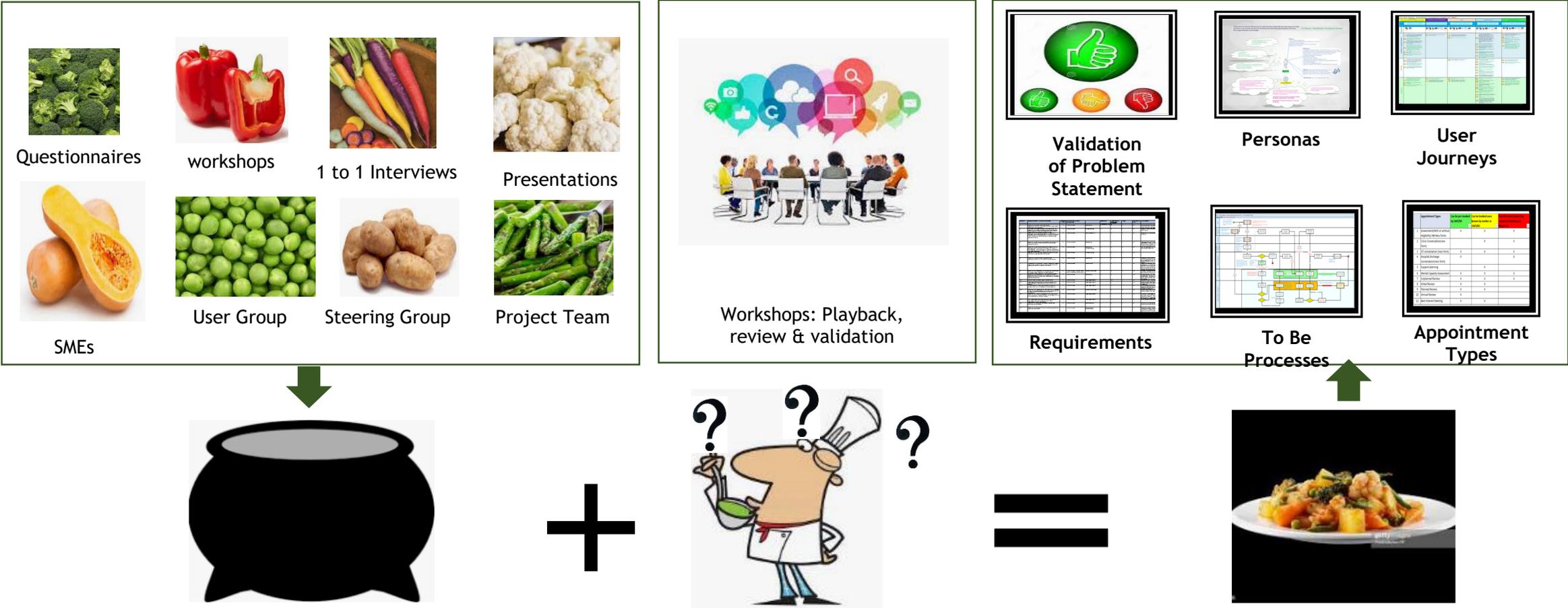
## Technology

- There is not a big appetite from the service users we engaged with to embrace further technology options such as self service
- There was an appetite to explore Video Conferencing calls from practitioners and Team Managers
- There are Commercial Off The Shelf (COTS) applications in the market that can be deployed



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# How were they co-produced



As previously mentioned this phase of the project will implement scheduling to internal staff. However Service Users will benefit from earlier appointment times, reduction in waiting times for appointments and appointment notification. Once self service and video conference calls are ready to be deployed NCC will engage fully with the volunteer sector, our co-production partners and service users

# How will stakeholders benefit

Enhances Mobile Working

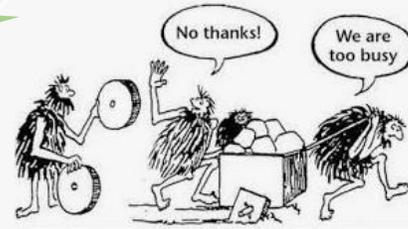
Improved response times



Supports Safer Lone Working

Reduction in Complaints

Promoting independence & Well being



Supports Smarter Ways of Working



Reduction in management of Holding Lists

Support Practitioners



Understand Practitioner Capacity & Demand (Work Life Balance)



More face to face time with Service Users



Multiple & New formats and channels of communication (MS Team, Portal Technologies)



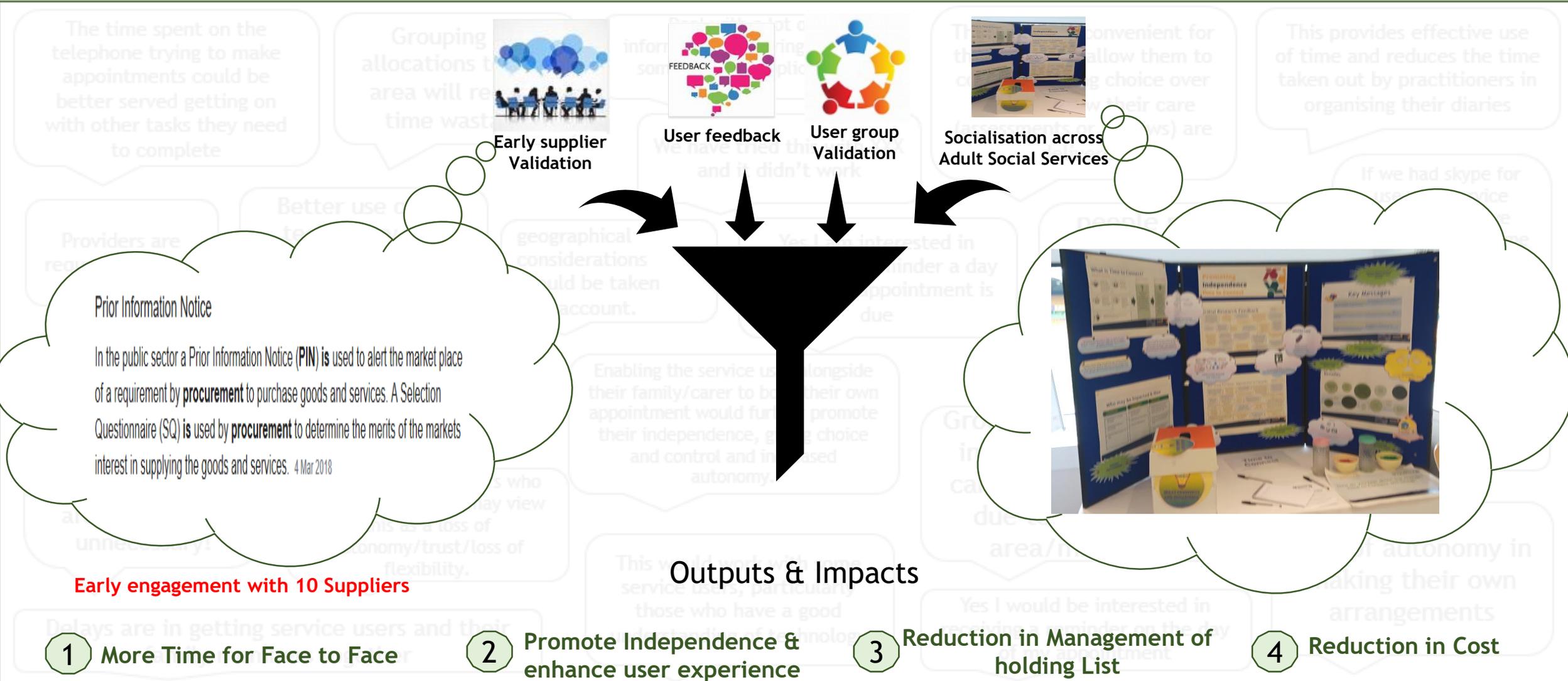
Reduced Mileage

Manage reviews proactively

Enhanced services to Service users

Prevent Reduce & Delay demand for social care services

# How will they be validated



# Further validation through early adopters

Start small and grow from there. Success rarely works the other way around.



WORLD LEADERS

1



Pre-scheduled

2

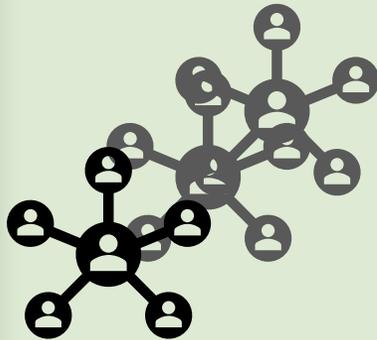


Schedule when known

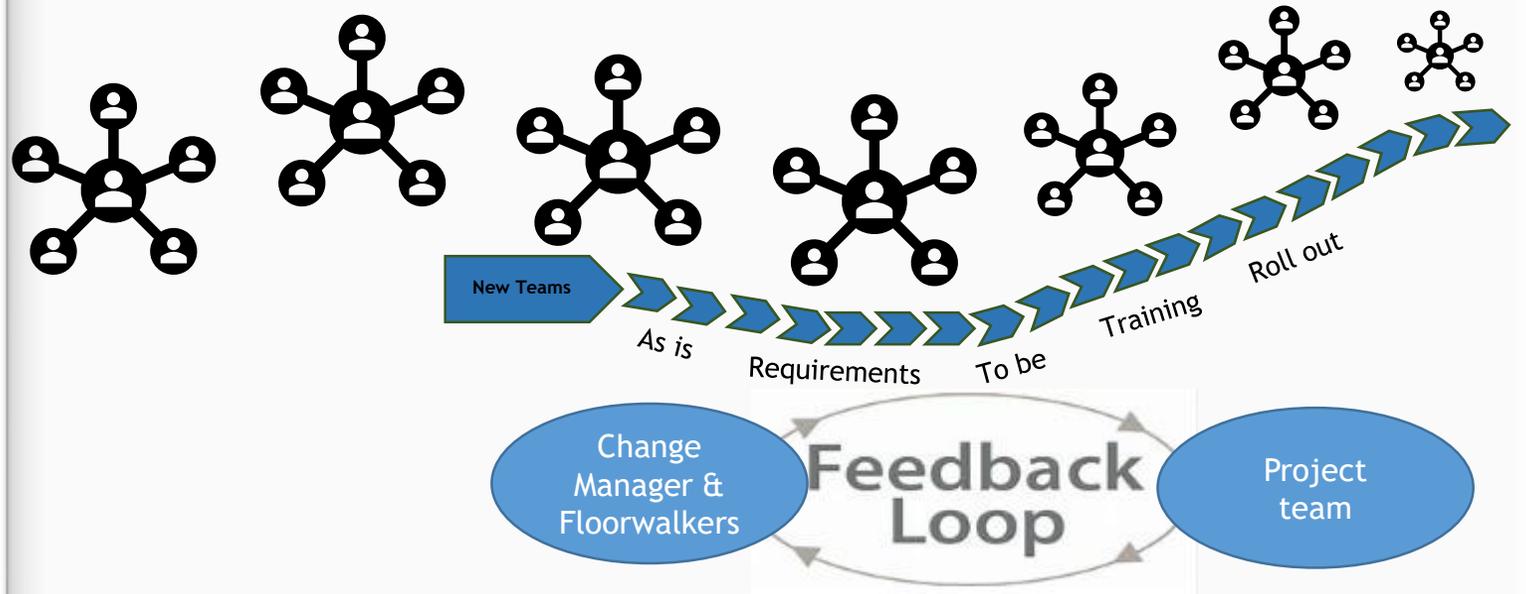
3



CCRT Team members clearing "Holding List"



Early Adopters: 2 or 3 teams (3 months)



Wider Roll Out: by team by locality following mobile working roll out plan

- **Early Adopters:** Identify 2 or 3 small teams to roll out to and monitor and validate over a period of 3 months to understand all learnings before rolling out wider
- **Wider Roll Out:** implement by team and locality following mobile working roll out plan will provide further validation throughout the implementation phase. This will ensure that teams and localities we touch will already have had use of their mobile device for some time and are comfortable using them and working in the new smarter way



