

Local Investment Programme

Peterborough City Council -
**Supporting interoperability across
health and social care records in
Peterborough and Cambridgeshire**

CASE STUDY

April 2018

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Local Investment Programme is overseen by the Local Government Association on behalf of the funders NHS Digital

OPM Group and the Bayswater Institute were commissioned to evaluate the Local Investment Programme producing an interim evaluation report and case studies.

Peterborough City Council was one of 19 local authorities to be funded in 2017/18 under the theme – **enabling care professionals to work from any base at any time**

The Local Investment Programme full interim evaluation can be found at www.local.gov.uk/scdip



Synopsis

Challenge & solution

The impact

Sustainability

Lessons learned

Project Summary: Aligning systems using the same social care database (Mosaic) to support integrated working across council boundaries

Partners: Cambridgeshire County Council, Servelec

Outcomes: Better ways of working across boundaries with a better aligned service for the Consumer

Projected Savings: More agile working in social care (£125,000), better information and analytics (£163,000) and reducing high cost placements (£500,000)

- Peterborough City Council (PCC) and Cambridgeshire County Council (CCC) plan to align their Adult Social Care systems to support integrated working across the Council boundaries which at some point will include the wider development of an integrated health and social care record portal, providing customers and professionals access to shared care records.
- To achieve this both Councils are migrating from their current adult social care record systems to Servelec's Mosaic system.
- The systems will be configured to support local health and care system transformation; including hospital discharge pathways, community neighbourhood hub multi-disciplinary team (MDT) working and safeguarding within the Multi Agency Safeguarding Hub (MASH).
- Alignment of data capture within the social care system will also support pseudonymised data extraction for secondary purposes such as demand profiling and risk stratification. This will enable the adoption of proactive MDT case management approaches to delivering care, as well as facilitating more effective service planning and market management.

- The project will be supported by a county wide programme board with membership from PCC, CCC and the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT). This programme board will align with the Data and Digital programme board within the Sustainability and Transformation Programme (STP).
- This project intrinsically links with the Council's objectives to deliver savings through managing demand for services, enabling services to be delivered more effectively and efficiently. A key part of this is to enable citizens to access services and support independently through digital technology, with relevant services being fully automated end to end processes. Interoperability and data sharing will be key to delivering part of this.

The Challenge

- Currently systems across health and social care providers are disjointed. There is limited sharing of customer information with referrals to each agency triggering separate assessment processes and limited information sharing at point of referral.
- There are limited examples nationally of shared record development and true interoperability across health and social care.
- How is it best to maximise opportunities for interoperability when aligning the social care systems across two local authorities?

The Solution

- A joint Director of Adult Social Care has been appointed across Peterborough and Cambridgeshire, and work is underway to look at a shared model of delivery across both authorities that also responds to local needs.
- The project will look at some key processes in both systems, identifying where there are similarities and differences in processes. This will form the basis for looking at the data items that are recorded and how the specifications for those data items differ. This will enable the production of a specified data set that is commonly defined across the authorities, which can be put to a variety of uses, including operational delivery of care and support, risk assessment, sharing with health authorities and demand planning.
- Early stage process and opportunity mapping will also enable requirements to be built into the live configuration of the two social care systems, thus minimising the potential additional costs associated with APIs and data extraction.

This project will result in three outputs:

1. Development of clear process maps around the overlaps of health and social care workflows including hospital discharge, intermediate care and reablement, community MDTs, Multi Agency Safeguarding Hubs, Transitions, Community based Mental Health Support.
 2. a core set of client data that might be shared with health colleagues, and a set of shared standards for these client level data items
 3. establish a smaller set of data fields which might be shared for secondary purposes (e.g. risk stratification) and use cases
- These outputs will feed into the development of innovative solutions to delivering joined up, proactive and person centred care, including:
 - Improved data sets for market management and system planning.
 - A future shared patient record, enabling effective MDT working across health and social care professionals.
 - The longer-term alignment of models of care in Cambridgeshire and Peterborough
 - The programme moves towards providing a single view of the customer, through data and analytics, to allow the Council and partners, to understand customer journeys, provide focus for continuous improvement, identify opportunities to intervene earlier to reduce costs and divert demand where appropriate. The methodology and the data set specification will be useful to other authorities in similar situations.

Cost savings:

- It is anticipated that this project is a key enabler to deliver savings from a shared approach to working across Cambridgeshire and Peterborough – for example in sharing case file systems.
- By establishing a shared data set to support risk assessment / stratification and demand planning, the project will also contribute to larger demand and efficiency savings targets planned in both Councils.

- The work will be sustained across both organisations as the outputs will feed into the respective Council transformation programmes and the Sustainable Transformation Programme. In particular, the process maps, use cases and data requirements will inform the final design for the implementation of the new social care systems.

Anticipated lessons:

- There is an identified opportunity to share information from the mental health PRISM service, which will support the identification of touch points between mental health and front door service access points.
- Early buy in from the wider health system is crucial to inform development of the project.
- EQ-CL national guidance has been published and initial review of has been a helpful tool to inform data standard requirements.

Learning to date:

- The proposed move to a shared service model across the County has impacted the timelines of the project but also opened up opportunities to add benefit
- • Focusing on the interoperability has increased collaboration supported the raising of the profile of social care records in the wider system and the work of this pilot have been able to feed into a wider sub regional bid for health and social care interoperability.
- • Information governance between the LA and GPs is in place and this has proven to be a difficult but beneficial building block.

Challenges to delivery:

- The timeframes associated with Mosaic implementation are different across Peterborough and Cambridgeshire, making alignment of project milestones more challenging.



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The final evaluation report will be published by March 2019

