Summary: Recommendation to Procure a Replacement Case Management ICT system to replace the current SWIFT/AIS system and support delivery of Adult Social Care.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to CONSIDER and ENDORSE or make a RECOMMENDATION to the Cabinet Member on the proposed decision (Attached as Appendix A) to:

a) PROCURE a new Adult Social Care Case Management ICT System; and

b) DELEGATE authority to the Corporate Director of Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision.

1. Introduction

1.1 The Council requires modern technology solutions to support the implementation of its Adult Social Care Strategy, Your life, your well-being, which will help the citizens of Kent to improve or maintain their well-being and live as independently as possible. The Council therefore requires a new and flexible case management system for adult social care (to replace its current system, SWIFT/AIS), which can be configured to suit the Council's business needs, and can evolve over time with minimal disruption and cost, preferably with the ability for the Council to make the changes without additional cost.

1.2 In addition, the Council requires an automated system for the payment of domiciliary service providers to replace the current Transaction Data Matching (TDM) system. The current TDM system has been secured until October 2019 but the contract with the supplier, PCCL, cannot be extended beyond this date.
2. Financial Implications

2.1 There will be an initial capital cost of up to £6.5m to cover the following:
   - Enterprise licences for the new software solution
   - Implementation Services (from the system supplier)
   - Implementation project team (KCC and temporary contract resources)

2.2 The implementation project is expected to start immediately on contract signature with the main replacement adult social care case management system to go live no later than the end of January 2019, ahead of the end of the SWIFT contract in April 2019.

2.3 The implementation programme will be delivered in two phases:

2.3.1 Phase One – by end January 2019:
   - Main Case Management system including finance and interfaces to corporate financial system for provider payments and client billing
   - Replacement of TDM for payment of domiciliary providers
   - Mobile Working.

2.3.2 Phase Two – to be delivered following implementation of main system and subject to business case
   - External portals to allow clients, their carers, other professionals and service providers to access social care records, subject to the appropriate security and consent
   - Integration with other systems e.g. Health.

2.4 In September 2016, the Adult Social Care and Health Directorate bid for Capital funding through the Programme Advisory Group and was given Approval to Plan. Having now undertaken negotiations with suppliers, the programme is expected to cost less than the original funding bid and includes the opportunity to implement greater functionality than originally expected.

2.5 The expected ongoing revenue cost will be comparable to that for the current SWIFT/AIS system at approximately £0.35m for hardware and software support and maintenance but represents a significant improvement in functionality. There will be a one-off revenue pressure of approximately £0.73m in 18/19 and £0.22m in 19/20 due to the transition from the old to the new system, the need to parallel run the two systems for a short period of time and the cost of additional resources (staff and venues) to provide training to approximately 1800 staff.

2.6 It is expected that the directorate will be able to realise significant efficiency benefits through streamlining processes and implementing more flexible ways of working. The new system will also replace the Transaction Data Matching system (TDM) used to pay domiciliary providers and the current Care Services Directory, representing a further revenue saving.
3. **Policy Framework**

3.1 The new system will give the Adult Social Care and Health Directorate the opportunity to modernise and streamline its processes and allow social care staff to work more flexibly with access to case records from wherever they need them. This will help to improve delivery of social care services to citizens of Kent.

3.2 The new system offers the opportunity to share information with partner organisations (subject to appropriate security and consent) which will improve services to clients as all partner agencies will have access to relevant information about an individual’s situation.

3.3 Implementation of a client/carer portal will allow citizens and/or their carers to access their social care records electronically (subject to the appropriate security and consent) and to transact with the Local Authority via a digital platform. This offers greater choice to the citizen and their carers and will help to promote independence and give the citizen more control over their own care.

4. **Procurement Process**

4.1 In December 2016, the Council launched its new strategy for Adult Social Care, Your Life Your Wellbeing. The Vision underpinning the strategy is to help people to maintain or improve their wellbeing and live as independently as possible. To support delivery of this strategy, the Adult Social Care and Health directorate (AH) has embarked on phase 3 of its Transformation programme. The directorate is seeking to move to a commissioning model of service delivery, in line with the Council’s ambition to become a commissioning authority and so many of the functions currently performed in house may be transferred to the Private and Voluntary sector or partner organisations in the next few years.

4.2 As part of the plans to implement the NHS Five Year Forward View, NHS England has initiated a programme of technology projects called *Personalised Health and Care 2020* which has as its ambition that health and care should be paper free at the point of delivery by 2020. This is intended to include Social Care in its scope and will require social care professionals to be able to work flexibly from any location including when access to the KCC data network is not available.

4.3 NHS Clinical Commissioning Groups (CCGs) were tasked to lead the development of Local Digital Roadmaps (LDRs) to deliver the objectives of Personalised Health and Care 2020 for Health and Social Care in their area. Four LDRs were developed in Kent and Medway: East Kent, West Kent, DGS and Swale and Medway.

4.4 In 2015, NHS England mandated the establishment of Sustainability and Transformation Plans (STP) to deliver place based change to the delivery of Health and Social Care. A single STP footprint was established for Kent and
Medway and the four LDRs combined to become the Digital workstream of the Kent and Medway STP (K&M STP).

4.5 The Council will need a modern and flexible case management system with integration capabilities (known as Open APIs) to support integration and delivery of the K&M STP Digital workstream.

4.6 Furthermore, the directorate has recognised that it is not making best use of the current Adult Social Care case management system with variable recording practices across teams and poor data quality in some areas. A review of system use has been undertaken to standardise and streamline the use of the SWIFT/AIS system but it has been recognised that SWIFT/AIS is no longer fit for purpose and will not support the future needs of the directorate.

4.7 As part of the need to promote independence and to support the Council’s digital strategy, the authority will need to enable clients and/or their carers to transact with the Council via a digital client/carer portal. This needs to be integrated with the back-office system so that the client or their carer has access to the same information as the social care professional and can undertake some tasks online; for example, searching for and paying for services, updating their personal details, undertaking an assessment of their own care needs (or those of a loved one), undertaking an online financial assessment and contributing electronically to their own reviews. Whilst this may not be appropriate for many clients in the short term, it should be offered as an option for those who prefer this route and take up is likely to grow over time as people grow ever more used to transacting digitally in other areas of their lives.

4.8 To promote further efficiency, the Council needs to interact digitally with its providers and partners to streamline processes and so may wish to implement provider and professional portals integrated with the back-office system to allow external professionals to contribute directly to assessments, care plans and reviews and to submit invoices electronically for payment.

4.9 The SWIFT/AIS contract expired in April 2016 and was extended under Single Source Justification to April 2018 with the option of two further six-month extensions to April 2019. A bid for capital funding for a project to replace SWIFT/AIS was brought to Project Advisory Group (PAG) in September 2016 and was given approval to plan.

4.10 Royal Bank of Scotland (RBS) gave notice that from September 2017 it would no longer support the Transaction Data Matching (TDM) system provided by its subcontractor, PCCL, which is used to automate payment to Domiciliary Providers. The Council has contracted directly with PCCL to continue to use TDM with some modifications but this will not be supported beyond October 2019. The Council therefore needs to implement a replacement system to automate domiciliary provider payments.

4.11 In January 2017, NPS, the suppliers of SWIFT/AIS (the current Adult Social Care Case Management system), announced that they were withdrawing from
the social care applications market and intended to give contractual notice that they would no longer support SWIFT/AIS beyond April 2020. Subsequently NPS sold their social care software business to another social care software supplier, OLM, who have committed to support SWIFT/AIS for the foreseeable future. However, the Authority’s contract for SWIFT/AIS is due to expire in April 2019 and cannot be further extended and so a procurement exercise was still required.

4.12 Various options for procurement of a replacement system were considered, as follows.

Option A: Lot 6 (Social Care systems) of the Local Authority Software Applications (LASA) framework (RM1059/L6);
This was rejected since it would not allow the Council to enter into a contract of more than seven years. Given the cost of implementing a system of this size and complexity, a contract term of this length was considered insufficient to allow the Council to derive maximum benefit from the new system.

Option B: Open Procedure
This procedure would require the Council to fully develop a technical specification up front and does not give the opportunity to negotiate over the proposed solution with the supplier. Given the current Transformation programme within Adult Social Care and the potential impact of the Kent and Medway Sustainability and Transformation plan on future partnership arrangements, this was not considered a viable option.

Option C: Competitive Dialogue
This procedure is most appropriate where multiple solutions must be discussed with bidders before a formal tendering process can commence. This was not required in this case.

This was rejected as it did not allow a full evaluation of the social care systems market or the opportunity to negotiate competitive contract terms with the supplier. The contract term would be limited to the remaining term of the East Sussex County Council contract and would not allow the Council to obtain maximum value from its investment in the new system.

Option E: Competitive Procedure with Negotiation (condensed to reduce timescales)
The procedure can be used where the Council can specify minimum requirements, but negotiations with bidders are needed to improve initial tenders. This was agreed as the best route for this procurement.

4.13 In early 2017, a market engagement exercise was undertaken which determined that a limited number of software suppliers were active in the Adult Social Care software market with offerings that appeared to meet the high-level requirements of the directorate.
4.14 In June 2017, the Adult Social Care and Health Directorate under the governance of the Adult Social Care Technology Enabled Change Programme Board initiated a procurement process using the Competitive Procedure with Negotiation.

4.15 A Core Negotiation Team consisting of representatives from Adult Social Care and Health, Strategic Commissioning, ICT Commissioning and Strategic Procurement was appointed by the Technology Enabled Change Programme Board to lead the procurement process and conduct negotiations on its behalf.

4.16 A larger Evaluation Team comprising of appointed representatives of all affected directorates and teams was established to evaluate and score the Initial and Final Tender submissions from the suppliers and to attend system demonstrations. The teams represented were:
- Adult Social Care and Health
- Strategic Commissioning
- Adult Social Care Performance and Information Management
- Corporate Finance
- ICT Commissioning
- Business Service Centre Finance
- Business Service Centre ICT

4.17 The timetable for the procurement process was as follows:

<table>
<thead>
<tr>
<th>Task Name</th>
<th>Start</th>
<th>Finish</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Preparation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop Requirements Specification</td>
<td>Mon 05/06/17</td>
<td>Wed 14/06/17</td>
</tr>
<tr>
<td>Requirements Signed Off</td>
<td></td>
<td></td>
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<tr>
<td>Publish OJEU Contract Notice &amp; Selection Questionnaire:</td>
<td></td>
<td></td>
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<tr>
<td>Supplier Response to Selection Questionnaire</td>
<td>Mon 10/07/17</td>
<td>Thu 13/07/17</td>
</tr>
<tr>
<td>Evaluate Supplier Responses to Questionnaire</td>
<td>Mon 10/07/17</td>
<td>Thu 13/07/17</td>
</tr>
<tr>
<td>Send Initial ITT to Selected Suppliers</td>
<td>Fri 14/07/17</td>
<td></td>
</tr>
<tr>
<td>Supplier Responses to ITT</td>
<td>Mon 31/07/17</td>
<td></td>
</tr>
<tr>
<td><strong>Evaluation and Negotiation</strong></td>
<td>Mon 31/07/17</td>
<td>Thu 21/09/17</td>
</tr>
<tr>
<td>Evaluate Initial Tender Responses</td>
<td>Mon 31/07/17</td>
<td>Fri 04/08/17</td>
</tr>
<tr>
<td>Supplier Negotiations</td>
<td>Mon 14/08/17</td>
<td>Thu 31/08/17</td>
</tr>
<tr>
<td>Invite Suppliers to submit Final Tender Response</td>
<td>Fri 01/09/17</td>
<td></td>
</tr>
<tr>
<td>Supplier Response to Final ITT</td>
<td>Mon 11/09/17</td>
<td></td>
</tr>
<tr>
<td>Evaluate Final Tender Response</td>
<td>Mon 11/09/17</td>
<td>Tue 12/09/17</td>
</tr>
<tr>
<td><strong>Decision and Award</strong></td>
<td>Mon 11/09/17</td>
<td>Fri 27/10/17</td>
</tr>
<tr>
<td>Write Approval to Award Report</td>
<td>Mon 11/09/17</td>
<td>Wed 13/09/17</td>
</tr>
<tr>
<td>Recommendation to ASC TEC Programme Board</td>
<td>Thu 14/09/17</td>
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</tr>
<tr>
<td>Present Approval to Award Report to ASC</td>
<td>Fri 29/09/17</td>
<td>Fri 29/09/17</td>
</tr>
<tr>
<td>Task Name</td>
<td>Start</td>
<td>Finish</td>
</tr>
<tr>
<td>-----------------------------------------</td>
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</tr>
<tr>
<td>Cabinet Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Key Decision by Cabinet Member</td>
<td>Mon 09/10/17</td>
<td>Mon 09/10/17</td>
</tr>
<tr>
<td>Award Decision</td>
<td>Tue 17/10/17</td>
<td>Tue 17/10/17</td>
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<tr>
<td>Contract Award and Signature</td>
<td>Fri 27/10/17</td>
<td>Fri 27/10/17</td>
</tr>
<tr>
<td>Procurement Complete</td>
<td>Fri 27/10/17</td>
<td>Fri 27/10/17</td>
</tr>
</tbody>
</table>

4.18 A new system will offer the functionality to allow integration with information systems in partner agencies, in particular Health, and will support the implementation of the Kent and Medway Sustainability and Transformation Plan Digital Workstream.

4.19 The robust Procurement process undertaken allows the Council to be confident that a new ICT system will support these ambitions into the future and represents best value to the Council.

5. Legal Implications

5.1 The procurement has been conducted as a Competitive Process with Negotiation in accordance with Kent County Council’s financial regulations and ‘Spending the Council’s Money’ guidelines.

6. Equality Implications

6.1 An initial Equality Impact Assessment has been undertaken. The only affected group will be staff with disabilities. Adherence to accessibility standards is a mandatory requirement of the procurement. Staff should be no worse off than currently and a new system may offer some improvements. The solution will be tested with the accessibility software used by staff as part of the implementation project.

7. Conclusions

7.1 The Adult Social Care and Health Directorate must replace its main case management system due to the age of the contract (which was originally let in 2004 and expires in April 2019) and the fact that the current system is outdated and will not meet the directorate’s current or future needs.

7.2 A new system will allow the authority to realise considerable efficiencies through the use of workflow, the creation of a single case record for a social care client and the ability for social care staff to work flexibly from any location. Further project phases will allow citizens or their carers to access their care records through a digital portal and to transact with the Council electronically if they wish to, thus promoting greater independence and control.

7.3 A new system will offer the functionality to allow integration with information systems in partner agencies, in particular Health, and will support the implementation of the Kent and Medway Sustainability and Transformation Plan Digital Workstream.
7.4 The robust Procurement process undertaken allows the Council to be confident that a new ICT system will support these ambitions into the future and represents best value to the Council.

8. Recommendations

8.1 The Adult Social Care Cabinet Committee is asked to CONSIDER and ENDORSE or make a RECOMMENDATION to the Cabinet Member on the proposed decision (Attached as Appendix A) to:
   a) PROCURE a new Adult Social Care Case Management ICT System; and
   b) DELEGATE authority to the Corporate Director of Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision.

9. Background Documents

   None

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