# **Audit, Risk and Scrutiny Committee**

# **IMPROVING INFORMATION DATA SHARING**

**Findings and Recommendations Report** 

**Scrutiny Review** 

December 2018

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# FOREWORD BY COUNCILLOR IAN CARRUTHERS, CHAIR OF THE AUDIT, RISK AND SCRUTINY COMMITTEE

This Report is from the Scrutiny Review on 'Improving Information Data Sharing'.

At its meeting on 27 September 2018, the Audit, Risk and Scrutiny Committee agreed to present the Review findings and recommendations to Full Council.

The Committee set out to understand the challenges and to identify ways in which the Council, working with its partners - particularly NHS Dumfries and Galloway in this Review - could improve the support we offer to users of our health and social care services. The Review identified the complexities of different operating systems across organisations and the need to give clarity to practitioners, ensuring they have access to relevant shared and up to date information to help them do their jobs and meet the needs of service users. The Review also clarified accountability in moving forward.

Throughout the Review, we have been grateful to staff in the Council and NHS Dumfries and Galloway, managers and frontline service providers, who shared their expertise, experience and views with us, including obstacles and challenges and, importantly, opportunities in going forward. Their contributions have assisted greatly in identifying best practice and guiding our thinking on the key issues.

To ensure that Dumfries and Galloway Council continues to support the development and improvements required for information data sharing, it will be important to monitor progress. The Audit, Risk and Scrutiny Committee will receive updates from the Joint Information Sharing Working Group on the recommendations detailed in page 5 of this Report.

The Audit, Risk and Scrutiny Committee commends this Report and the six recommendations to Full Council for approval.

Councillor Ian Carruthers

#### ANALYSIS AND FINDINGS AND EMERGING RECOMMENDATIONS

#### **OUR RECOMMENDATIONS**

Members of the Audit, Risk and Scrutiny Committee examined background information; research; and evidence collected from engagement sessions with officers and practitioners and reviewed other approaches. Following our analysis of the evidence collected we make the following recommendations to meet the objectives of the Improve Information Data Sharing Scrutiny Review:

# Objective 1:

Understanding legislation that applies to both data sharing and Health and Social Care Integration (HSCI)

# **Objective 2:**

Reviewing the current arrangement in the HSCI Scheme for information-sharing and data handling and progress

# **Objective 3:**

Identifying if there are barriers to sharing information and where these exist

## **Objective 4:**

Identifying the benefits that will be realised from data sharing

## **Objective 5:**

Recommending what is required to improve the Council's data sharing arrangements

## FINAL RECOMMENDATIONS AND TIMESCALES

**Recommendation 1.** Electronic information data sharing systems should be enabled to share basic information by the end of 2018. This should include the assurance that information sharing agreements are in place and approved by Dumfries and Galloway Council Legal Services. **31 December 2018** 

**Recommendation 2.** Dumfries and Galloway Council should ensure the reporting and monitoring of the transition phase, which will include staff from the Council and NHS Dumfries and Galloway sharing increased amounts of information through a secure system. **31 December 2019** 

**Recommendation 3.** Consider the scope for improving data sharing further across all sectors beyond 2019 as confidence and initial benefits are realised. **31 December 2019** 

**Recommendation 4.** To make full use of mobile technologies for practitioners in the field to access and update data for clients. **31 March 2020** 

**Recommendation 5.** Develop a single consent process for clients, including a review and update process for additional permissions and changes to circumstances. **31 December 2021** 

**Recommendation 6.** Through improved data sharing, maximise the opportunity to schedule work across the Council and NHS Dumfries and Galloway in the most efficient and effective way to benefit the user. **31 December 2021** 

	DEVIEW SCODE			
	REVIEW SCOPE			
Subject	Improve our support to vulnerable people through improved data sharing arrangements			
Council Plan Priority	Protect our most vulnerable people			
Council Plan Commitment	Help older or vulnerable people live healthy and independent lives			
	Ensure our older or vulnerable people receive the care and support they need			
Outcome Objectives of the Scrutiny Review	Improved data sharing arrangements The Audit, Risk and Scrutiny Committee will understand how to improve data sharing arrangements to support the work of Health and Social Care and improve outcomes for people by:  • Understanding legislation that applies to both data sharing and Health and Social Care Integration (HSCI)  • Reviewing the current arrangement in the HSCI Scheme for information-sharing and data handling and progress  • Identifying if there are barriers to sharing information and where these exist  • Identifying the benefits that will be realised from data sharing  • Recommending what is required to improve the Council's data sharing arrangements			
Workshops, Research and Contributors	Evidence Sessions Senior Operational Manager, Social Work Services Democratic Services Manager Legal and Licensing Manager Senior Manager - Business and Technology Solutions General Manager ICT, NHS D&G Senior Managers from NHS D&G Interviews with practitioners and service providers Desk based research (document review of information sharing, HSCI Scheme, understand how other Integration Joint Boards are operating)			
Submitted to Full Council	18 December 2018			

#### INFORMATION DATA SHARING - EVIDENCE AND ANALYSIS

**Objective 1:** Understanding legislation that applies to both data sharing and Health and Social Care Integration (HSCI)

#### Evidence - what Members saw and information we received at Committee

**14 May 2018** - Members of the Audit, Risk and Scrutiny Committee discussed information data sharing arrangements with the Senior Operational Manager, Social Work Services, Dumfries and Galloway Council and the General Manager Health and Social Care, NHS Dumfries and Galloway

11 June 2018 - Members of the Audit, Risk and Scrutiny Committee attended a workshop 'evidence' session on information data sharing arrangements. The first part of the evidence session was jointly attended by the Business and Technology Solutions Manager, Dumfries and Galloway Council and the General Manager, ICT, NHS Dumfries and Galloway. The second part of the evidence session was attended by two practitioners: a Senior Social Worker from Dumfries and Galloway Council and a Podiatrist from NHS Dumfries and Galloway

# **Analysis - What Members identified during discussions**

Data sharing is governed by legislation and must be applied by all organisations in respect to holding and sharing of personal data. The EU General Data Protection Regulation (GDPR) superseded the UK Data Protection Act 1998 on 25 May 2018. Significant and wide-reaching in scope, the new law brings a 21st century approach to data protection. It expands the rights of individuals to control how their personal data is collected and processed and places a range of new obligations on organisations to be more accountable for data protection.

## The six data protection principles

- 1. Processed lawfully, fairly and transparently.
- 2. Collected only for specific legitimate purposes.
- 3. Adequate, relevant and limited to what is necessary.
- 4. Must be accurate and kept up to date.
- 5. Stored only as long as is necessary.
- 6. Ensure appropriate security, integrity and confidentiality.

Staff across the Health and Social Care Partnership currently request consent from users to share information. Evidence is that the current process can result in multiple consent requests from practitioners to users, often leading to confusion amongst users due to duplication of requests.

## **APPENDIX**

# Health and Social Care Integration Scheme

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and Local Authorities to prepare jointly an Integration Scheme. In line with Scottish Government guidance, the Integration Scheme includes that Dumfries and Galloway Council and NHS Dumfries and Galloway are required to establish and agree an Information Sharing Agreement and the processes and procedures for sharing information and the process for amending the Agreement and the procedures for sharing information.

Information sharing processes need to be clearly understood and communicated. Operationally focussed agreements that support the safe and secure handling of information across organisations are crucial. The Agreement must articulate the circumstances in which information will be shared and the processes for doing so.

**Objective 2:** Reviewing the current arrangement in the HSCI Scheme for informationsharing and data handling and progress

## **Evidence - what Members saw and information we received at Committee**

**14 May 2018** - Members of the Audit, Risk and Scrutiny Committee discussed information data sharing arrangements with the Senior Operational Manager, Social Work Services, Dumfries and Galloway Council and the General Manager Health and Social Care, NHS Dumfries and Galloway

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# **Analysis - What Members identified during discussions**

The current arrangements operate across two main electronic systems, these are:

- Dumfries and Galloway Council [MOSAiC]
- NHS Dumfries and Galloway [PORTAL]

Case files which include personal data and information about visits, treatments, actions and consents are stored by individuals.

#### **MOSAiC**

- Provides a system for case recording; MOSAiC also provides workflow, workload assignment and financial management
- Business processes are converted to steps/next actions and necessary forms and letters are generated through the system; input from other staff can be "requested" within current workflow or "next actions"
- MOSAiC can be used with portable devices and the screens re-size to fit
- Notes added to advise worker at point of assignment are displayed, status according to work rule are displayed also. Worker can re-order work based on title, date, subject etc
- Manager can use team workview work can be single click re-assigned to other team members
- People Summary shows individual client summary DGC has control of codes used, we can build links to relationships, care packages, multiple addresses (using

the Corporate Address Gazetteer - CAG) etc.

- System calculates commitment for period care is purchased (or where care purchase is open-ended calculates for current financial year and next financial year)

#### **PORTAL**

- Information is collected by practitioners via portable devices at client's home
- There are 8 different NHS departments which feed information to the overarching Portal system and shares information across the NHS service provision
- A common user reference is used to link the client on treatments and actions undertaken
- The information both records activity and assists with scheduling. It has the ability to upload handwritten practitioner notes

#### THE PROCESS TO OFFERING SUPPORT

- Referrals are received via Email or Telephone
- **Information** is gathered from the referrer. Information is recorded via a scripted conversation which outlines the issues involved
- Outcomes are developed by appropriate teams within HSCI who assess the information and decide future action

It should be noted that not all information sharing is done electronically and there are areas of best practice of verbal sharing of case notes and discussion between both DGC staff and NHS D&G staff.

Information consent forms are currently completed by each organisation where appropriate.

#### Health and Social Data

A Data Sharing Agreement is in place for Health and Social Care Data amongst Dumfries and Galloway Council, Health Board, Integration Joint Board and The Common Services Agency for the Scottish Health Service.

**Objective 3:** Identifying if there are barriers to sharing information and where these exist

## **Evidence - what Members saw and information we received at Committee**

- **14 May 2018** Members of the Audit, Risk and Scrutiny Committee discussed information data sharing arrangements with the Senior Operational Manager, Social Work Services, Dumfries and Galloway Council and the General Manager Health and Social Care, NHS Dumfries and Galloway
- 11 June 2018 Members of the Audit, Risk and Scrutiny Committee attended a workshop 'evidence' session on information data sharing arrangements. The first part of the evidence session was jointly attended by the Business and Technology Solutions Manager, Dumfries and Galloway Council and the General Manager, ICT, NHS Dumfries and Galloway. The second part of the evidence session was attended by two practitioners: a Senior Social Worker from Dumfries and Galloway Council and a Podiatrist from NHS Dumfries and Galloway
- 10 September 2018 Members of the Audit, Risk and Scrutiny Committee discussed progress and implementation plans with the Business and Technology Solutions Manager, Business Solutions Manager and Social Work Services Senior Operational Manager, Dumfries and Galloway Council and the I.T. Delivery Manager, NHS Dumfries and Galloway. These Managers were present for a Question and Answer session with Members

## **Analysis - What Members identified during discussions**

**Electronic Systems:** Dumfries and Galloway Council and NHS Dumfries and Galloway currently operate different information systems (MOSAiC and PORTAL). The systems do not at present automatically share information.

What we can and what we need to share: Practitioners require additional information for both providing support and planning visit schedules. Information sharing requires only relevant information to be shared, and it is not an issue of simply sharing all information about a client. Practitioners only require relevant and appropriate information which provides reason for referrals and treatments. There has yet to be a clear set of data agreed for sharing. Establishing a set of data for sharing can help shape the development of any future system.

**GDPR**: The GDPR legislation has created an element of confusion between how and what information practitioners can share.

**Mobile and Agile Technology:** The need to record manually and then upload creates additional work and creates delays in accurate and appropriate information for practitioners. Technology is available, but currently largely unused, this can be provided

# **APPENDIX**

through ePENs, Mobile technology, eFORMS and scanning notes.

**Staff:** Staff are not a barrier per se; however, the reduction in staff numbers, both back office and practitioners, creates operational challenges. The roll out of new technology will require significant training to ensure that any system is fit for purpose.

Objective 4: Identifying the benefits that will be realised from data sharing

## **Evidence - what Members saw and information we received at Committee**

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# **Analysis - What Members identified during discussions**

The main benefit is to improve the service that is delivered to clients. The following issues were identified through workshop discussions and if improvements are made with information data sharing then benefits can be realised.

**Faster Hospital Discharge:** The sharing of information can assist with work flow planning and early notification to improve hospital discharge to people's own homes. Ensuring people are able to return to their homes faster is evidence, as well as improving their recovery and their mental wellbeing.

**Assist clients to remain in own homes:** The aim is to support people to remain in their own homes before moving into care. The ability to jointly schedule visits, activities and treatments can ensure an even provision of service to individuals.

**Joint Scheduling:** On occasions it has been noted that visits from different services can sometimes happen in blocks. The ability to schedule, reduce duplication and deliver a joined-up service will improve service efficiency, as well as providing the client with regular contact, therefore tackling social isolation.

**Financial Benefits:** Service efficiencies, through joint working, planning and delivery can reduce costs associated with operating the service. This may place fewer demands on services in both the NHS and Council and therefore future savings would be possible.

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# Scrutiny Review Process Key Stages and Timeline

1 SELECTING	2 SCOPING	3 PREPARATION	4 UNDERTAKING	5 REPORTING	6 EVALUATING
Agreeing topics for review	Define scope for the review  What are the objectives that are desired e.g. service improvement?	Establish a consistent knowledge base across the Committee  Background information identified and shared	Brief the attendees for workshops, ensuring the outcomes of workshops are achieved  Deliver workshops for members of Audit, Risk and Scrutiny Committee  Provide updates, reviews and progress reports to Audit, Risk and Scrutiny Committee  Agree draft recommendations and produce report	Report to Audit, Risk and Scrutiny Committee  Recommendations from Audit, Risk and Scrutiny Committee to Full Council  Inform NHS D&G and Integration Joint Board (IJB) of the review outcomes  Implement a reporting and review mechanism to monitor outcomes	Monitoring by Audit, Risk and Scrutiny Committee
Concept and review Ascussed with Chair and Vice Chair of Audit, Risk and Scrutiny Committee during March 2018	Scope agreed by Committee at meeting on 10 April 2018	Workshop schedules and attendees were discussed and approved at workshops and Committees: 10 April 2018 14 May 2018	Workshops undertaken on: 14 May 2018 11 June 2018 10 September 2018  Joint Information Sharing Working Group received a visit from representatives of the Greater Glasgow and Clyde HSCP on 11 June 2018  Draft recommendations presented to Committee on 27 September 2018	NHS D&G and IJB advised of outcome of the scrutiny review following Full Council (18 December 2018)  Establish process for reporting the improvements identified in the recommendations	Services will be notified of actions within the recommendations  Services will be required to provide an update to Audit, Risk and Scrutiny Committee workshop by July 2019  Audit, Risk and Scrutiny Committee will receive a report from services on progress by December 2019

# MEMBERSHIP OF THE AUDIT, RISK AND SCRUTINY COMMITTEE

Ian Carruthers (Chair)
Jane S Maitland (Vice-Chair)
Graham Bell
Karen Carruthers
Patsy Gilroy<sup>1</sup>
Iain Howie
David Inglis
Malcolm Johnstone
Graham Nicol
Matthew Ronnie
Willie Scobie

# **Officer Support**

Rhona Lewis, Head of Legal and Democratic Services Andrew Reed, Policy Officer Sheila Mohan, Policy Officer

# **Workshop Participants**

Graham Abrines, General Manager Health and Social Care, NHS Dumfries and Galloway Lesley Brown, Podiatrist, NHS Dumfries and Galloway Heather Collington, Senior Operational Manager, Social Work Services Graham Gault, General Manager, ICT, NHS Dumfries and Galloway Nigel Gammage, I.T. Delivery Manager, NHS Dumfries and Galloway Ellen Jere, Graduate Trainee Helen Jordan-Robinson, Development Manager, Business and Technology Solutions Kim McCall, Senior Social Worker Graeme Mcllorum, Business and Technology Solutions Manager Angela Paterson, Head of Resources and Support Services James Pocock, Business Solutions Manager

<sup>&</sup>lt;sup>1</sup> Attended Audit, Risk and Scrutiny Committee and Engagement Sessions up to October 2018

