DECISION-MAKER:	CHILDREN AND FAMILIES SCRUITINY PANEL
SUBJECT:	CAREDIRECTOR IMPLEMENTATION FOR CHILDREN AND LEARNING
DATE OF DECISION:	22 JULY 2021
REPORT OF:	EXECUTIVE DIRECTOR – CHILDREN AND LEARNING

CONTACT DETAILS					
Executive Director	Title	Executive Director Wellbeing (Children and Learning)			
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STATEMENT OF CONFIDENTIALITY

None

BRIEF SUMMARY

The Client Case Management (CCM) Programme concerns the procurement and implementation of a new social care IT system (CareDirector v6), for both Adult and Children's and Learning Services. CareDirector will be replacing Paris, the incumbent system, which has been in place since 2003. 18 years on from implementation, Paris has become difficult to use, make changes to and to extract data from.

Go live is targeted at October 2021. The programme sponsor is Rob Henderson Executive Director Wellbeing (Children & Learning).

The vision for the programme is to "transform the way we record, manage and use information to help us provide the best care for the people in our city who need it".

RECOMMENDATIONS:

	(i)	That the Panel note the forthcoming implementation of CareDirector v6 and the progress made to date.

REASONS FOR REPORT RECOMMENDATIONS

1.	To enable scrutiny of the implementation of CareDirector.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2.	Not applicable. Item added to agenda at request of the Panel

DETAIL (Including consultation carried out)

3.	The programme consists of workstreams (projects) to deliver the system design and build for Children's, Adults and Finance elements and is supported by workstreams dedicated to Testing, Business Change, Training, Migration, Reporting, Infrastructure, Configuration and Interfaces.

4.	Programme Benefits include: • Replacement of Paris with a modern, robust and user-friendly social care solution built to support services in meeting the needs of service users • Streamlining of processes across Adults, Children's and Learning and Integrated Commissioning Unit, increasing efficiency and productivity • Core system integrations, including Business World and Health • Ability to improve the way we manage suppliers and measure performance • Significant data management improvements and cleanse of old/duplicate/redundant data.
5.	Governance: • The CCM Programme Board has delegated decision-making authority from Executive Management Board/Full Council (within tolerances). • Robert Henderson, project sponsor (Senior Responsible Owner) has delegated authority to give a Go/No Go decision at the point of Go Live.
6.	Progress: • Processes across Adults and Children's and Finance have been documented and streamlined. • A portal to enable access to the Paris historical record has been built and integrated to CareDirector. • Eight data migrations have been executed, meaning client data, teams, providers and financial assessments have been successfully mapped and migrated from Paris to CareDirector. • 20/21 Statutory returns are being run from the CareDirector reporting infrastructure. • Development of Power BI capability gives social care teams self-serve capability that will transform our ability to view and analyse performance data. • Go-live release (v6.2.1) has been received and installed.
7.	Key milestones: • User Acceptance Testing begins mid-July 2021. • Training begins 6 September 2021. • Go live scheduled for 31 October 2021.
8.	Future phases: • Phase 1 will deliver the new system with streamlined processes, significant improvements to reports and data, key integrations, workflow and workload management. • Phase 2 is at the concept stage and will build on the foundation of Phase 1. Possible Children and Learning candidates for Phase 2 include further changes to remain aligned with the transformation programme, improved group working, field work and expansion of the finance functions to include children's payments.
RESOURCE IMPLICATIONS	
Capital/Revenue	

9.	A budget update and request for sufficient funding to complete the project was provided to Full Council February 2021 (item 56, report 2.1 (a)). The programme remains within its allocated capital and revenue budgets, which are delegated to the SRO to manage and for which he is accountable to Council.
10.	Remaining capital budget is £1.28M and is expected to be spent as follows: • £402,933 Internal resources (permanent staff cross-charged to the programme) • £493,503 Temporary resources • £253,300 Supplier costs

Property/Other

11.	None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

12.	The duty for local authorities to undertake health scrutiny is set out in National Health Service Act 2006. The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000

Other Legal Implications:

13.	None

RISK MANAGEMENT IMPLICATIONS

14.	Risk management and governance process are in place. A full risk report including mitigation strategies is provided to the Programme Board monthly and strategies to manage key risks and issues are discussed and agreed.

POLICY FRAMEWORK IMPLICATIONS

15.	This programme supports corporate wellbeing objectives by delivering a modern, robust, user-friendly social care solution and reporting infrastructure designed to support the council in meeting the needs of service users.

KEY DECISION?	No	
WARDS/COMMUNITIES AFFECTED:	All	
SUPPORTING DOCUMENTATION		

Appendices

1.	None

Documents In Members' Rooms

1.	None

Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?	**Yes**

Data Protection Impact Assessment

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?	**Yes**

Other Background Documents

Other Background documents available for inspection at:

Title of Background Paper(s)		**Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)**
1.	None	