Local government social care data standards and interoperability

The case for information sharing

In many areas of society our lives are made more convenient by the use of digital devices. We can now book holidays online, access our banking information and order groceries on a range of devices all connected to the internet.

All of these applications are being driven by better use of information – information that is accessible, accurate and in a format that can be easily consumed via different applications. The fact that we can now access information about our bank balance via a laptop, tablet, smartphone or voice-activated device is primarily down to easily consumable information.

However, whilst there has been progress in sharing information across health and social care there is still much more that can be made.

In a survey of people working in social care in 2017 the Social Care Institute for Excellence found that 98 per cent of people cited one or more difficulties in sharing information. It is perhaps not surprising therefore that councils told us in 2017 that only three in 10 believe they have the information they need from health organisations.

There is an opportunity to re-design aspects of social care so that people are more in control and are given the personalised information they need. Social care will always be person focused but that does not mean there is not a role for information and data.

Imagine, for example, being able to give someone personalised information via their chosen device and application about which home care agency will be visiting them, when they will be visiting and relevant information being made available about the care delivered to family members.

Or ensuring that professionals delivering care and support do not need to logon to multiple systems to access different elements of information that tell the story of an individual. We know that people do not want to tell their story multiple times to the various people supporting them.

Whilst there is good evidence of progress there is equally much more that still needs to be achieved.

The purpose and scope of the discovery

The Local Government Association (LGA), with funding from the Local Health and Care Record (LHCR) Programme, commissioned Socitm to undertake discovery work with councils in 2018/19.

The LHCR Programme is aimed at improving information sharing across the country. Eight regions are currently being funded and the LGA and partners have been raising the importance of this work being place-based, in a way which engages with councils and their partners.

The LGA worked with a group of councils to commission and oversee the discovery work undertaken by Socitm.

The purpose of the discovery was to better understand progress being made by councils in information sharing at a local level, identify the challenges and explore areas where by working collaboratively further progress could be made.

The discovery took place between January 2019 and April 2019 with the full report completed in July 2019. In total, 13 sessions took place with 36 councils, seven individual sessions with social care system vendors, and, towards the end of the discovery, a workshop with national organisations and professional bodies.

The headline findings

The discovery highlighted areas both of progress and challenge:

1. There were examples of where local areas had made progress in sharing information. It was often those with strong support at leadership level and funding (in some cases through the Better Care fund) that had made a difference locally.

2. Councils highlighted challenges associated with some systems that didn't make information sharing straightforward. Councils highlighted in some cases significant costs charged by suppliers from developing system interfaces to sharing information. However, suppliers equally recognised that there were very few common standards in social care and that development of systems was almost always bespoke for each individual council.

3. Councils wanted a sector-led approach to developing open data standards in social care rather than approaches that were overly nationally driven. Councils felt that these were best developed in a collaborative way across a group of councils, with initiatives that start small and grow. The NHS Digital Social Care Programme was one example of where this was already happening.

4. Councils felt that more work was needed in making the benefits case for information sharing. Some councils highlighted that, given the stretched financial position in social care, practical examples were needed that demonstrated a return of investment for committing significant sums of money towards such projects.

5. Whilst progress had been made there were still examples of where the basic foundations still needed to be put in place. Some areas highlighted confusion regarding approaches to consent whilst others drew attention to more practical issues such as NHS number tracing, which still needed resolution.

6. Overall, the vast majority of councils felt that a more person-centred approach to information sharing was needed, incorporating areas beyond just health and adult social care. Councils felt that this would benefit from greater collaboration between central government – specifically the Department for Education, Department of Health and Social Care and the Ministry of Housing, Communities and Local Government (MHCLG).

The recommendations

To respond to the challenges, Socitm worked with the LGA and councils to make 11 recommendations to help local government move forward in this area:

1. Support councils to collaborate on a number of small projects to identify information to be shared through specific examples. These projects should be used to develop standards that can be adopted by other councils.

2. NHSX and NHS Digital, in collaboration with the local government sector, to raise awareness of Interoperability Charter commitments to support dialogue with suppliers.

3. NHSX and NHS Digital to work with councils to define specific data and interoperability standards which can be incorporated into procurements undertaken by councils of social care systems.

4. NHSX and NHS Digital, in collaboration with councils, to develop a platform that enables visibility of all interoperability solutions available to the sector.

5. NHSX to lead on the production of clear information governance guidance, with and for the sector, in collaboration with the Information Commissioner's Office.

6. Funding be made available by Government to support improvements in data quality, enabling improved consistency and standardisation of data across social care.

7. NHS Digital to undertake work with councils to overcome remaining issues with NHS number tracing. This should include clear options and associated costs of tracing.

8. Greater engagement with frontline professional groups such as the British Association of Social Workers and Principal Social Workers Network in scoping of information standards.

9. NHSX to lead on work with the sector to improve awareness of the LHCR programme and specific benefits to councils.

10. Cross-Government work, specifically with the Department for Education and MHCLG, to explore information sharing with children's, education and housing based on specific scenarios.

11. A vendor strategy to be developed with the sector and, as part of this, the creation of a cross-supplier forum for councils and suppliers to help progress information sharing with the sector.

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