



Relieving Growing Pressure in the Care Sector

Main Issues

Healthcare in the UK is in the midst of a revolution – the sector is facing the biggest reform to the social care system seen in 60 years. Care providers are witnessing significant changes to the way that social care is administered and paid for in the community, driven by changes introduced in the Government's 2012 Caring for the Future white paper and further developed in the Care Act of 2014.

Whilst recent legislation has been applauded for putting the wellbeing of the community and (for the first time) carers at the heart of its strategy, the raft of new measures has created complexity for local authorities and care providers alike. The strain on care homes, for example, has been marked - a 24-fold rise in insolvencies since the coalition government took power in 2010; 72 care homes went out of business in 2015.

As such, care providers of all kinds are looking hard at their priorities and, in many cases, refocusing to put technology at the heart of their strategies as a meaningful way to become more efficient and to protect their future. What, then, are the major factors affecting care providers in 2016?

Rising Demand; Slashed Budgets

- > Healthcare budgets have been slashed by an average of 20% year on year, since 2008;
- > The burden on councils to deliver significant new services to carers is difficult with less funding (Care Act 2014);

- > Introduction of the Living Wage putting care employers under further pressure to deliver more with less;
- > Private providers need to provide a good return on investment to financial backers.

Changing Needs

- > Rising life expectancy and increasingly complex health conditions mean more people require care or support but the types of care are changing;
- > According to Caring for Our Future (2012), the government's last major White Paper on social care, "more than eight out of ten people aged 65 will need some care or support in their later life";
- > The devolved funding model means care is to be procured, managed and delivered in the community;
- > Increased patient choice means providers need to be more flexible about the care they offer and be able to demonstrate quality and value for money.

Staffing Pressures

- > Introduction of the Living Wage is creating a strain on care providers; £8.25 an hour will impact on levels of care;
- > Staff want better work-life balance;
- > The care sector faces high staff turnover and vacancy levels;

"I want local areas to have the power to decide what is best for their communities and strongly support the move towards more devolution of health and social care. Greater Manchester is the first English region to be given full control of its health spending with the city's £6bn health and social care budget being taken over by the region's councils and health groups. Longer term we want to see other areas coming forward with the same ambitions for their health and care services."

The Rt. Hon Alistair Burt MP,
> Minister for Community and Social Care (2015)

- > Staff training is both a recruitment and retention issue, and increasingly something that must be reported for regulatory purposes.

Regulation and Scrutiny

- > Scrutiny continues to grow in the care sector the government [body Care Quality Commission \(CQC\)](#)
- > New standards for the care sector set out in Care Act 2014;
- > More consumer-style rating and feedback services for care organisations will be required;
- > Following the Winterbourne View case, social care organisations face more scrutiny by both the press and public.

Technology

- > Care providers need to adopt mobile and web-based technologies to achieve efficiencies;
- > Secure systems for record keeping can protect client confidentiality and ensure an accurate care record;
- > Joined-up systems and processes are essential for seamless care provision, accurate client information and one version of the truth in terms of financial and operating position;
- > Good use of IT solutions frees-up time to develop and improve high quality services.

The Changing Care Landscape

Back in 2012, the Government called for radical reform of social care in its White Paper, *Caring for Our Future*. The Government claimed, "We will put people, and not institutions, in control".

We began to see a major move away from residential care towards early intervention and prevention efforts, which meant delivering more and better support in the community. However, with an increasing ageing population there continued to be a significant need for residential care.

A key pillar of the Government's policy was Personal Care Budgets. Every social care user was given a budget to allow them to choose or arrange the type of services they want. Rather than being centrally funded, procured and managed, care services could now be selected, funded and administered at the source of the need, or via local commissioning agents.

This added a new layer of responsibility to local care providers; once dealing with one central organisation to procure all services, now they would be responsible for selecting, administering and measuring multiple service accounts, within a tightening legislative environment.

Then, in 2014, the Care Act changed the landscape again. This time extending the remit of the care system to encompass carers and, crucially, making care eligibility consistent across the service, all within some serious financial constraints - £72,000 planned cap on care costs by end 2016 (since updated to 2020). These changes, compounded by growing demand for services from a growing population and rising staffing costs, have left many care providers struggling.

The residential care sector, as highlighted earlier, has seen significant and consistent year-on-year rises in insolvencies. A major reduction in funds paid for elderly residents since 2010, along with aforementioned staffing costs and the introduction of the living wage, have put an estimated 5,000 homes at risk of closure.

Devolution; Choice versus Complexity

Devolution of care provision has opened the door to the private care market in a bid to provide choice to care beneficiaries. And, without doubt, it has done that. But an increased management and administrative burden, coupled with a need to encompass carers in the charter, has increased complexity.

The emphasis on choice has meant that providers need to be flexible in how, where and when they offer services. There is an active shift in demand for care to be delivered at home or 'in residence', improving the experience and quality of life of those receiving care.

This presents a challenge to care providers who have to service this need. Some companies may need to review how they manage delivering care remotely, improve logistics and planning, consider how to ensure secure and accurate record-keeping or carry out a full analysis of their services.

As part of the agenda for choice, the government has developed a host of online information services where users can both compare services and give feedback. As a result, providers of all sizes must ensure they can show the quality of their services meet any local and national reporting standards.

"It's well known that there is a real lack of funds in the care sector and it isn't getting any easier for care home providers, making it harder for them to stay afloat. However, I would urge those organisations, who can afford to invest in technology to do so, purely to enhance care and maintain professional standards."

Mark Bailey >
Owner >
Fairways Care (2015)

Advanced Care

So the burden of responsibility for management teams is now how to streamline services and put in place processes that can reduce the complexity and save money. Many are turning to technology to solve these issues, but is it working?

Case study: Clever mobile technology supports good care

Fairways Care, in North Wales, specialises in creating residential environments for people living with dementia, and those who need 24 hour nursing care. Fairways has improved efficiencies since implementing Caresys, a care home management software solution from Advanced, at its three care homes two years ago and went live with Caresys Mobile at one of the homes in May 2015. Following its success, Fairways will roll out the software to their new home, which also specialises in dementia care.

Caresys Mobile gives care workers easy and secure electronic access to client information and care schedules using tablet devices, at the point of care. All updates are instantly transferred into the main Caresys system, eliminating time-consuming duplicate administrative tasks. Fairways has also been able to set up audits, making it much easier to report to the Care Quality Commission (CQC).

Mark Bailey, Owner, Fairways Care says, "It's well known that there is a real lack of funds in the care sector and it isn't getting any easier for care home providers. I would urge those organisations, who can afford to invest in technology to do so, purely to enhance care and maintain professional standards."

Managing Workforce Complexity

Social care providers are facing pressures around flexible delivery of care from two sides. Increased patient choice and the desire to specialise is counterbalanced by the needs of the workforce and rising staffing costs.

With the introduction of the Living Wage, staffing costs will rise further, putting more pressure on diminishing budgets. Added to this, about 80% of staff in the adult social care sector are women in their forties; often with their own family commitments. As a result, employers are facing requests for part-time working from key staff who want good work-life balance. At the same time, staff turnover among private providers is as high as 18% and many staff have been in their jobs for fewer than three years.

This makes a robust staff management system essential to address issues around part-time working as well as analysing staff turnover to ensure your business retains good quality staff and benefits from training investment. Well-trained care staff will increasingly be at a premium so hanging on to them is essential.

Higher than average vacancy rates and staff turnover, means the sector is reliant on agency and temporary staff. This creates a further need for a complete staff management system because not only are there payments and rotas to deal with, but the duty of care and safeguarding responsibilities of social care providers require accurate records of which worker visited which client.

Case study: Advanced software sustains growth and improves care at Gardiner's

Gardiner's Nursing & Homecare (Gardiner's) required a comprehensive home care solution to manage extensive clients and easily share care worker information across its organisation. Advanced's suite of homecare products, including Staffplan Roster and Monitor met Gardiner's requirements due to their ease of use, functionality and flexibility.

Advanced's solutions have improved care efficiency by eliminating time-consuming administrative tasks. By storing detailed records for client, care workers and suppliers within a single, unified solution, Staffplan Roster has enabled faster and more informed decision making as all information is now immediately accessible.

John-Joe Cottam, Owner of Gardiner's Nursing & Homecare, explains says, "Staffplan Roster has transformed us into a modern and highly efficient organisation. We have been able to move from employing lots of part-time staff to having a smaller but more productive team of full-time employees, which has made a significant difference to our bottom line through a reduction in recruitment and training fees. We were also able to initially downsize the amount of office space we required as we no longer needed to have filing cabinets crammed full of paper records, resulting in further cost savings."

Skills for the Future

Staff training in this sector is an ongoing important issue both in attracting and retaining a good workforce but increasingly will be a factor in attaining quality scores and meeting

The two key tenets of the Care Act 2014:

- > *To focus on promoting people's independence, connections and wellbeing so they can prevent and postpone their need for care and support.*
- > *To put people in control of their own care and support, and that services should ensure that they respond to what people want.*

regulatory standards. Skills for Care and Skills for Health were jointly commissioned to create a code of conduct and minimum care standards for adult social care workers in England. The result was a set of standards, encapsulated within the SkillsforCare (National Skills Academy for Social Care) initiative, covering both the training required for social care workers and how that training should be put into practice when delivering care.

It was agreed in 2014 that care providers registered with the Care Quality Commission (CQC) are expected to put all standards into practice and show they are meeting the code of conduct. The CQC expects to use the standards as part of their compliance assessment of any registered care provider, so it is essential for providers to be able to produce evidence around training and practice. The Social Care White Paper 2012 said: "Providers that follow the minimum training standards in the recruitment and training of staff are likely to meet the Commission's registration requirement on staff training."

Distributed Workforces

For domiciliary care and other community services, record-keeping presents particular challenges. Providers have a duty to keep accurate records but at the same time they must maintain client confidentiality.

With a mobile workforce, travelling from home to home carrying potentially piles of paper records, is not a particularly secure solution. The increased use of smartphones and other mobile devices provides the opportunity for care workers to access and update care records remotely and in real time. This provides increased client confidentiality as well as reducing paperwork because central records do not need to be updated at the end of a shift.

Commissioning Changes

According to the UK Home Care Association's last major report, in England almost three-quarters of local authority domiciliary care visits are commissioned on the basis they will take less than 30 minutes. In Northern Ireland, the figures shoot up to 87%; in Scotland and Wales it is 42%.

Care providers have had to organise themselves to meet these tight time slots however local authority commissioning is set to change in the wake of the Social Care White Paper. "Crude contracting by the minute" approaches are called upon to be replaced by outcome-based commissioning.

Adult social care umbrella body Think Local Act Personal (TLAP) was charged with developing a set of good practice standards around care commissioning that moves away from a purely time-based measure. The result was an Information and Advice Strategy Toolkit plus a host of other resources designed to ensure care providers stay compliant and commission effectively.

Care providers now have the challenging issue of changing their funding structures to suit both outcome and time based invoicing, alongside the current complex task of invoicing both clients and local authority commissioners.

Regulation and Scrutiny

Care providers of all types and sizes find themselves under greater scrutiny than ever before. In the wake of the Winterbourne Review and, later, the Care Act of 2014, the Government sought to tighten the way the care sector is regulated - and this tightening continues.

Providers must ensure they have systems in the place to allow them to show not only that they are meeting standards, but are going above and beyond to provide high quality care.

Every registered domiciliary or residential care provider in England has had a profile on the NHS Choices website for a number of years. The recent addition of a new rating system for hospitals and care organisations was also introduced to make it easier for the public to make informed decisions about their care. They also set out new laws for care providers.

It is crucial, therefore, that all care businesses can provide evidence of quality care, and have accurate internal information that can be used to ensure the official information on the site properly represents the business.

Technology: Protecting the Future

For care organisations that have managed to weather the recent governmental cuts and are looking to the future, it's clear they need to take a bold step with the technology investment and look at a holistic platform which will deliver efficiencies, cost savings, improved productivity but, most importantly, that is easy for non-technical care managers to use on a daily basis.

We've talked about two customer scenarios that address specific needs but, for many, the need to transform is more fundamental. A key factor driving inefficiency within many businesses is the lack of integration between core functions and

Care providers need to prove they are:

- > *Safe*
- > *Effective*
- > *Caring*
- > *Responsive*
- > *Well-led*

Advanced Care

processes and so we're seeing a move to a more holistic view of the organisation; "Can I link my HR system to my training programmes and then match the skills of my workforce with the needs of my clients? And how can I do this using a couple of servers? Could I put some processes in the cloud and how would this affect my security?"

For forward-looking care organisations, who know smart use of technology will help them flourish and grow, the emphasis is on making each part of the business inform the rest; reducing duplication, increasing efficiencies and, eventually, boosting profits. Advanced's integrated solutions are designed to grow and flex with the organisation and can offer more support through self-service reporting and dashboard solutions whilst keeping costs down by hosting in the cloud.

Case Study: Integration the Key to Growth

One social care provider with 2,000 employees and a turnover of approximately £30 million has recently reviewed its overall goals as an organisation in this current climate. In order to compete effectively and to cut costs, whilst being ready to flex and grow in the future, it recognised its existing IT infrastructure comprised a collection of ad hoc systems that were no longer fit for purpose. They required upgrading to meet a number of challenges – disparate finance, HR & payroll, budgeting and planning systems, resulting in a disjointed care management environment.

Why integrate, and which areas?

- > With **care management** at the hub of an IT infrastructure for care providers, it's possible to ensure the schedules of carers are optimised and have the right skills for the requirements of the patient. This is also where integration with HR is vital;
- > **HR and payroll systems** hold data on each carer, acting as a repository for their experience and skills. In this way, HR knows who is properly trained for the job, has the right mix of skills and, crucially, who is available on the roster schedule in order to be able to meet the needs of the patient in a timely and efficient manner;
- > The care management solution is often used as the front-line system for billing the customer. However, most care providers want to ensure that **financial and payroll data** is integrated back into the core financial system

- this way, the financial team can have one single view of all relevant data;

- > **Budgeting and planning** systems also need to be integrated with data from both the care management solution as well as finance, to ensure business decisions are based on accurate up-to-date information from across the organisation. When making decisions about recruitment of staff, this needs to tie in with the **HR systems** to ensure a unified view of the talent within the organisation;
- > **Document management systems** are another aspect within the 'integrated' equation, designed to electronically organise, hold and manage the array of paperwork that is involved in each case. For example, as HR processes come under more scrutiny, providers need to have information at their fingertips. In an instance of a grievance, the system needs to integrate with all relevant documentation. This needs to be available during any meetings to ensure the process is fair and compliant with HR statutory requirements.

In addition to these points of integration, the organisation also wanted a **customer relationship management (CRM) system**. Traditional (and predictable) procurement, funding and provision methodologies are no longer; replaced with a more decentralised, fragmented landscape. Care providers now deal with an array of funding bodies and care organisations; increasing the network of relationships a care organisation has to manage and maintain on a daily basis.

CRM is, increasingly, being seen as effective in managing this increasing complexity. The component back office solutions from Advanced – HR and payroll, finance management, budgeting and planning - together with its portfolio of care management solutions, effectively connect to Microsoft Dynamics CRM, which ensures every element comes together to share intelligence, inform stakeholders and ensure regular contact with external funders and stakeholders. The care provider's document management requirements have been provided by Advanced's V1 system integrated with the finance, HR and payroll solutions to effectively scan, archive and allow the quick retrieval of key documents.

The social care provider in question identified a need to work with an IT partner that could demonstrate value by bringing industry

expertise together with a connected modern infrastructure that brought an integrated approach to its complex requirements.

In addition; the care provider wanted to focus on two other areas.

Self-service & analytics

One of the challenges every social care provider faces is the need to report back on service provision. Ease of reporting from each area of the organisation overcomes an ongoing and familiar headache, as each system from Advanced has self-service reporting capabilities. Providing individuals have the right level of access, they can then customise the reports they need; highlighting evidence that demonstrates achievement of key performance indicators (KPIs). Each division can be confident that the data provides one single version of the truth, eradicating the propensity to have data silos and ensure the system is used by all.

The care organisation wanted to better view and measure the performance of the various areas of the business and so Advanced provided graphical reporting dashboards designed to offer a snapshot of how processes and services are delivering against agreed KPIs, in real time. The care provider wanted to be able to easily identify trends, from missed opportunities through to opportunities for best practice and growth. For example, areas that were doing well could be analysed across regions and best practice rolled out to areas that could improve its KPIs. Equally, any negative issues could be spotted quickly and resolved before they turned into major problems.

Hosting

Another technology trend which is generating demand in the care sector is cloud hosting. In the midst of the care revolution, digital demand is driving increased pressures. As care providers

try to juggle the need to drive efficiencies and cut costs, with maintaining care quality, some are finding hosting some of their core processes in the cloud is improving responsiveness.

A hosted approach relieves care providers of the cost and time of internally managing these IT systems – whilst ensuring ongoing upgrades to the latest technology. It also ensures ongoing updates to the latest software, and safe and secure remote access to data from mobile devices. Care workers can, therefore, access relevant data whilst on the road, providing they have the right permissions.

Conclusion

Despite an increasingly challenging financial and regulatory environment, the care sector is embracing technology not only to negotiate changes in government policy but to make diminishing budgets go further and secure their future, for the long term.

The Care sector has witnessed fundamental changes and reforms in the last few years and continues to navigate its way through an ongoing revolution threatening every area of operation. With the population aging and care organisations striving to get to grips with regulation and improve services and efficiencies whilst managing staffing pressures and trying to compete, the need to continue to drive down costs and improve productivity has never been greater. An integrated approach to technology can underpin an effective approach to address many of these challenges and Care providers who embrace such solutions will be the ones who will survive and be ready for future change and opportunities, putting them back in control

To find out how Advanced can help your organisation, visit our Care Sector website at: <https://www.oneadvanced.com/sectors/where-we-work/care-providers/>

More information

w oneadvanced.com
t +44(0) 8451 605 555
e hello@oneadvanced.com

Ditton Park, Riding Court Road, Datchet, SL3 9LL

Advanced Computer Software Group Limited is a company registered in England and Wales under company number 05965280, whose registered office is Ditton Park, Riding Court Road, Datchet, SL3 9LL. A full list of its trading subsidiaries is available at www.oneadvanced.com/legal-privacy.