

# DHCS Digital Maturity Assessment Results Summary: Local Authorities

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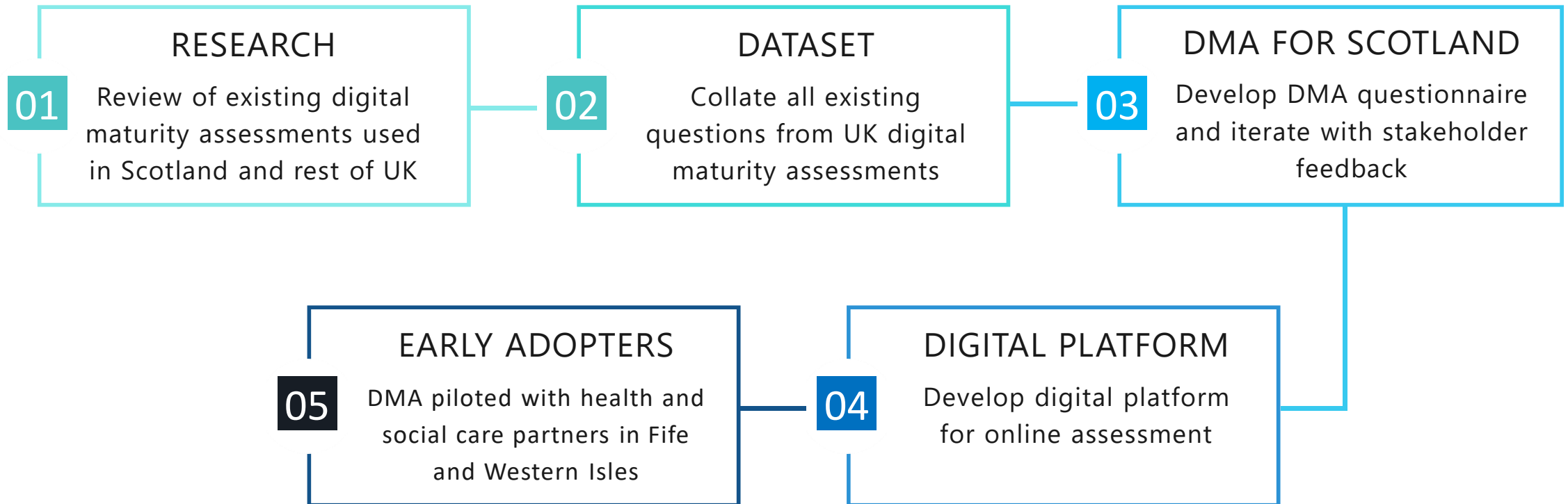
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# DIGITAL MATURITY ASSESSMENT DEVELOPMENT

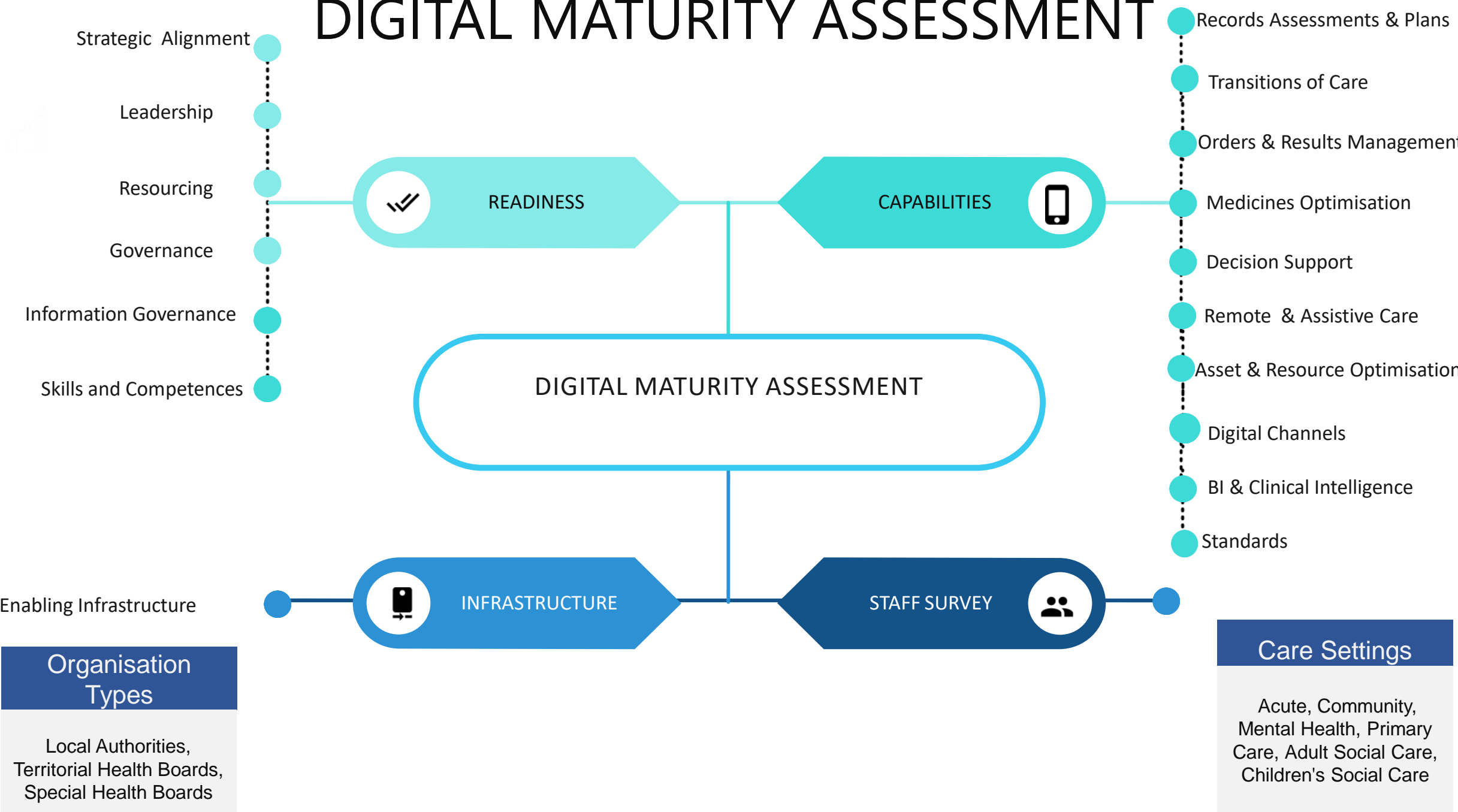


# Background & Methodology

- Local Authorities and Health Boards, working with their Health and Social Care Partnerships, were invited to take part in Scottish Government & COSLA's Digital Maturity Self Assessment in April 2019 with a view of completing the assessment by the end of August 2019.
- The assessment was completed using a dedicated online data collection platform customised to accommodate the needs of Scottish health and care organisations.
- Organisations were encouraged to engage with their leadership teams and health and care stakeholders via tools provided by the platform, and in workshops, in order to give the assessment a solid informational basis.
- The questions presented to each organisation were organised in 17 sections, which in turn were grouped into three distinct themes. For some capability sections, questions were asked separately by care setting.
- In order to present a relevant question set to each participating organisation, a share of sections and questions were omitted for each organisation type, and some question wording was adjusted to correspond to the specific environment of each organisation type. Moreover, some questions were shown depending on answers given to previous questions.
- All organisations had access to the platform's staff survey feature, allowing them to query responses from a wider staff group on a short selection of key questions from the DMA (with some wording changes to allow respondents to answer intuitively).
- All free text comments submitted were reviewed and a summary of the key messages included in the relevant results section.



# DIGITAL MATURITY ASSESSMENT



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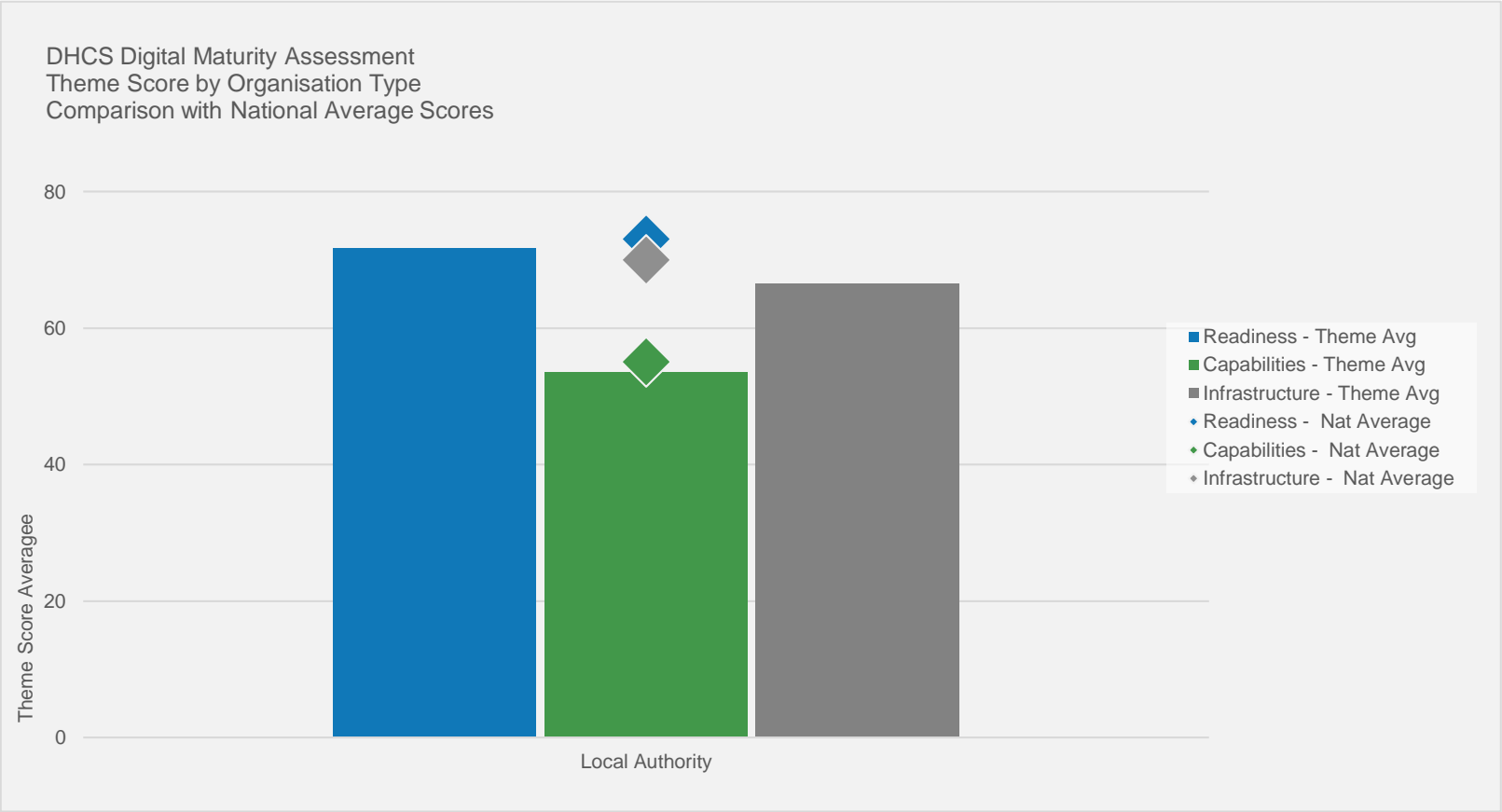
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# Scores by Theme

Local Authorities scored slightly higher for Readiness and Infrastructure themes than for Capabilities



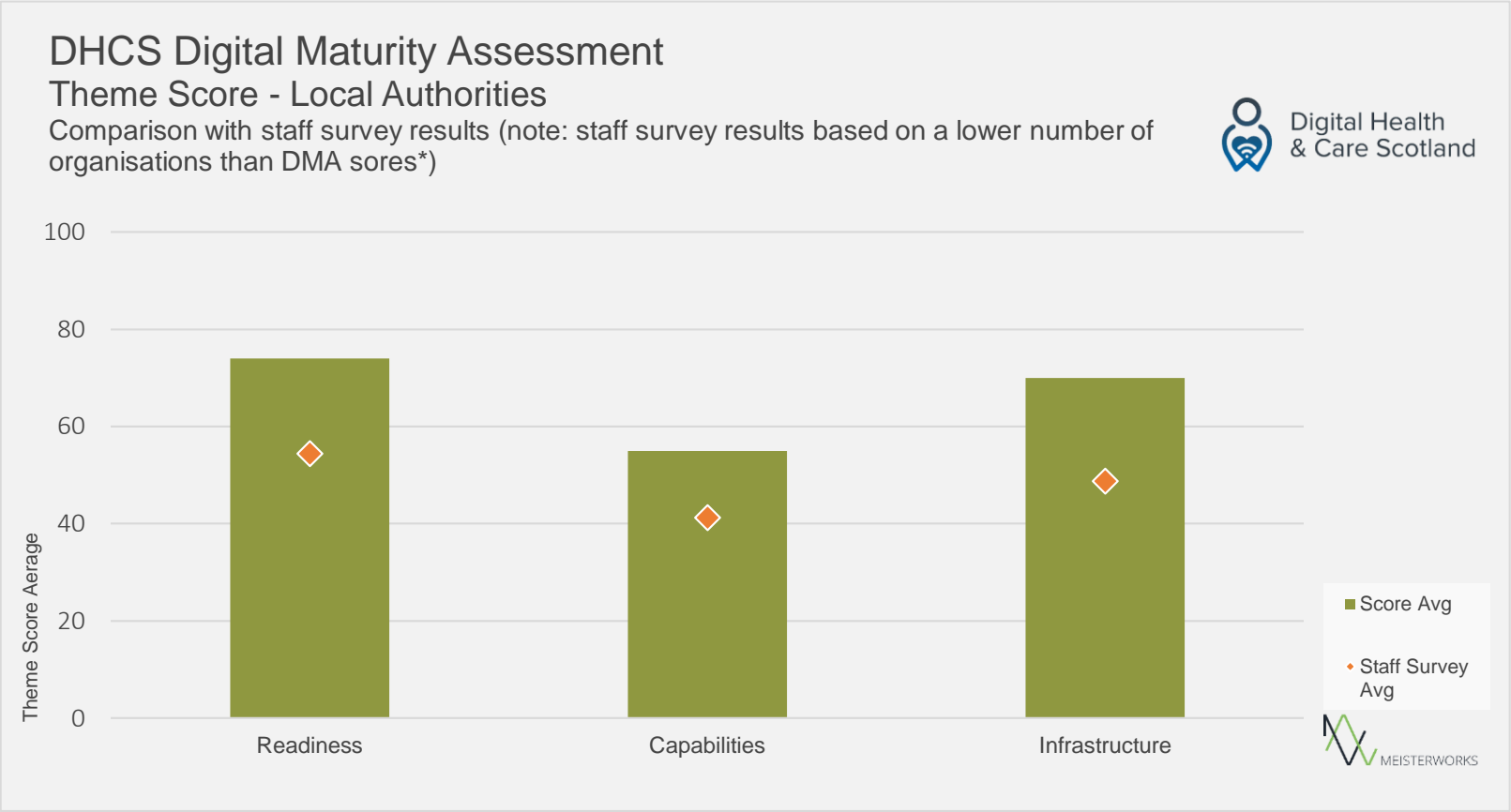
| Organisation Type | Readiness - Theme Avg | Capabilities - Theme Avg | Infrastructure - Theme Avg |
|-------------------|-----------------------|--------------------------|----------------------------|
| Local Authority   | 72                    | 54                       | 66                         |

\* DMA score data based on 22 participating Local Authorities



# Analysis by Organisation Type – By Theme

Staff survey results relating to each DMA theme were lower than self-assessed scores



| Theme             | Score Avg | Staff Survey Avg |
|-------------------|-----------|------------------|
| Readiness         | 73        | 54               |
| Capabilities      | 55        | 41               |
| Infrastructure    | 70        | 49               |
| Grand Total (Avg) | 62        | 47               |

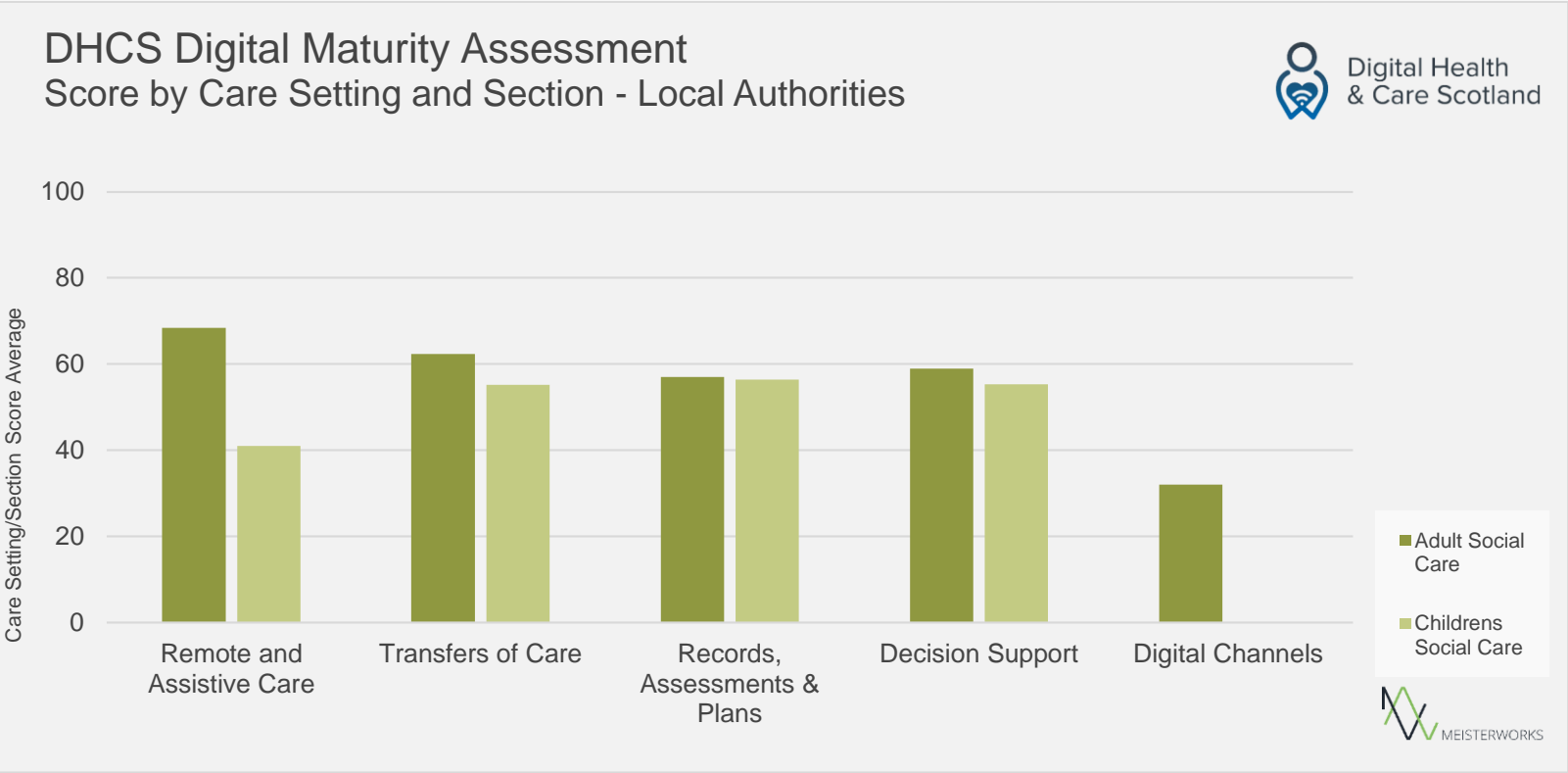
\* DMA score data based on 22 participating Local Authorities; Staff Survey data based on 839 responses from staff at 12 participating Local Authorities





# Analysis by Care Setting and Section

Adult social care digital capability results were generally higher than those of children’s social care where these were answered separately.



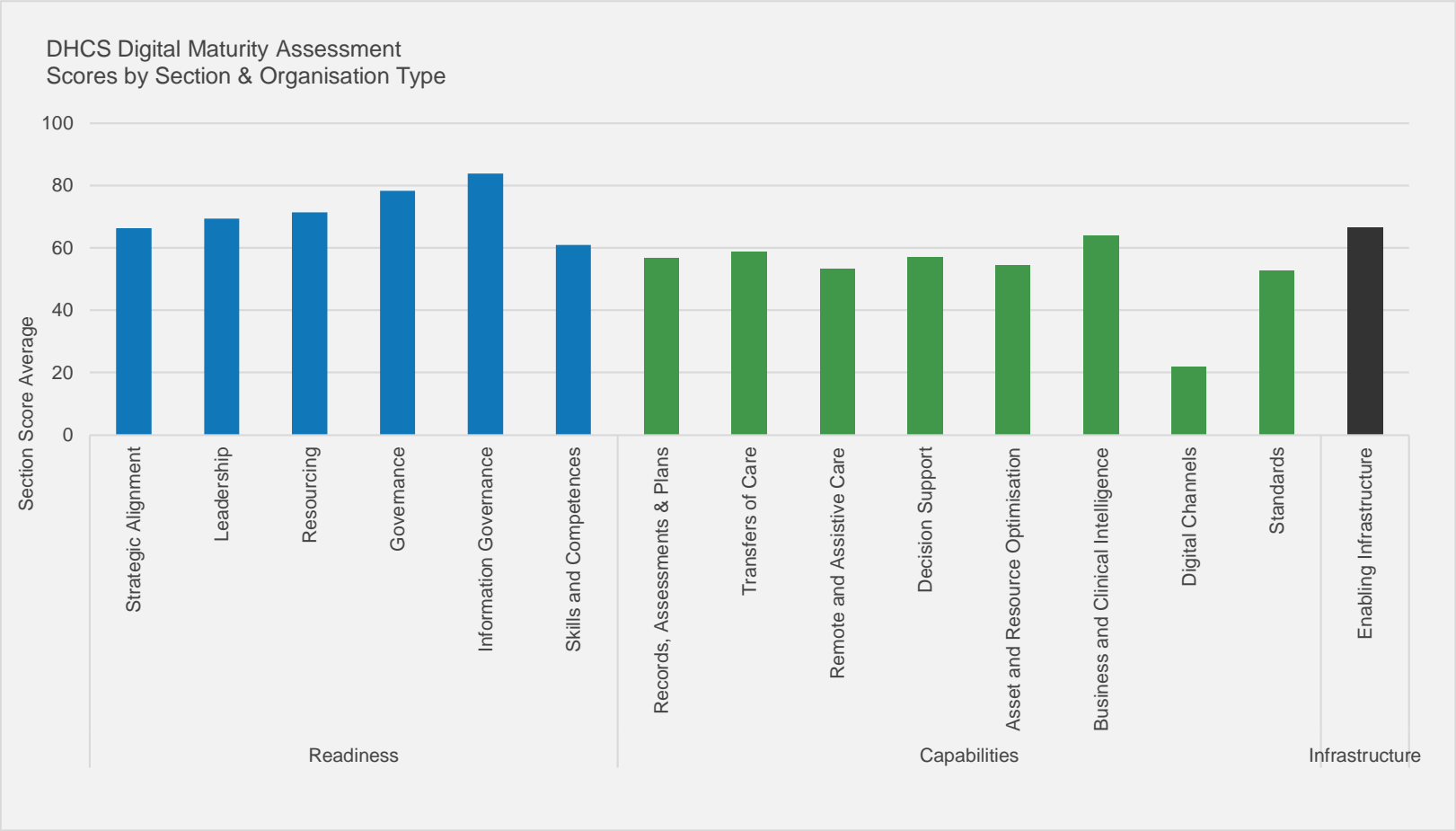
| Section                      | Adult Social Care | Childrens Social Care |
|------------------------------|-------------------|-----------------------|
| Remote and Assistive Care    | 68                | 41                    |
| Transfers of Care            | 62                | 55                    |
| Records, Assessments & Plans | 57                | 56                    |
| Decision Support             | 59                | 55                    |
| Digital Channels             | 32                | 0                     |
| Grand Total (Avg)            | 61                | 51                    |

\* DMA score data based on 22 participating Local Authorities



# Local Authority scores by section

For Readiness sections Information Governance had the highest score and Skills and Competences the lowest score. Results for sections relating to Digital Capabilities were generally similar with the exception of Digital Channels which had a significantly lower score than other sections.



| Theme/Section                      | Local Authority |
|------------------------------------|-----------------|
| Strategic Alignment                | 66              |
| Leadership                         | 69              |
| Resourcing                         | 71              |
| Governance                         | 78              |
| Information Governance             | 84              |
| Skills and Competences             | 61              |
| Records, Assessments & Plans       | 57              |
| Transfers of Care                  | 59              |
| Remote and Assistive Care          | 53              |
| Decision Support                   | 57              |
| Asset and Resource Optimisation    | 54              |
| Business and Clinical Intelligence | 64              |
| Digital Channels                   | 22              |
| Standards                          | 53              |
| Enabling Infrastructure            | 66              |
| Grand Total (Avg)                  | 60              |



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Asset and Resource Optimisation

Decision Support

Business and Clinical Intelligence

Digital Channels

Standards

Enabling Infrastructure

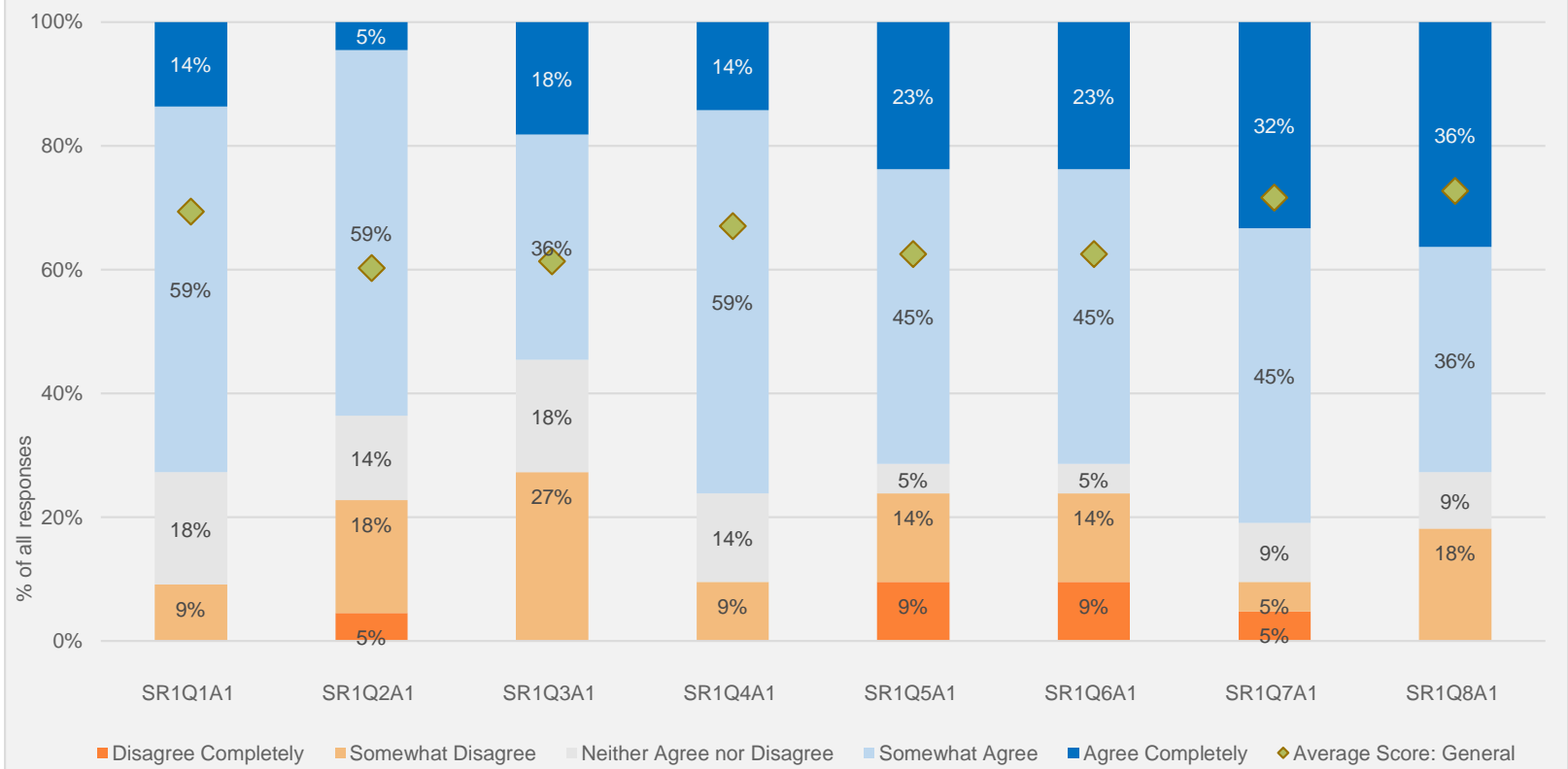
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# Strategic Alignment

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Strategic Alignment  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SR1Q1A1    | Digital technology is used to support improved collaboration, coordination, virtual working and decision making across the organisation, including senior leadership levels.            |            |     |
| SR1Q2A1    | Digital innovation and research are embedded into your ways of working and culture, informing both strategy and processes.  |            |     |
| SR1Q3A1    | Your organisation has a digital strategy, aligned with health and wellbeing objectives, that effectively drives transformation  |            |     |
| SR1Q4A1    | Implementation of the digital strategy is fully aligned to, and supported by, service transformation programmes.  |            | 5%  |
| SR1Q5A1    | Your organisation's digital strategy is supported by an effective stakeholder communications and engagement strategy that effectively articulates the benefits of the digital strategy. |            | 5%  |
| SR1Q6A1    | The needs of the users of your services were captured as part of the development of the digital strategy.   |            | 5%  |
| SR1Q7A1    | Your organisation monitors emerging technologies through regular horizon scanning to keep the digital strategy up to date.  | 5%         |     |
| SR1Q8A1    | There are processes in place to scrutinise and evaluate investment in digital technology and support ideas through to implementation.   |            |     |



# Strategic Alignment

## Sample of free text comments received

- *"The Health and Social care Partnership has attempted to develop a digital improvement plan with an interim plan agreed by the IJB in 2016. There is not sufficient resource available or engagement with our partners to drive the interim digital improvement plan forward. There is a need to develop better vision and support (including resources) at a national level to support the integration of health and social care systems."*
- *"Local Digital Health and Social Care Strategy is in development."*
- *"The HSCP is refreshing its Digital Telecare Strategy and working in partnership with Council Senior Leadership on the priorities, investment and potential benefits of the HSCP digital transformation. Elements of Digital Transformation are underway with the commitment to a TEC Board being established to scope and prioritise opportunities to enhance utilisation."*
- *"The Partnership will be using a Three Conversations Approach that offers three clear and precise ways of interacting with people that focuses on what matters to them. The use of technology is seen as an enabler to those conversations - care supported by the latest technology and a culture of continuous improvement, fostered by greater use of data and performance management."*
- *"Examples of Digital Innovation within the HSCP include the Telecare 'Can Do Challenge and the work of the Digital Resilience Group, which has a focus on Looked After Children."*
- *"The HSCP is currently working on a Digital Strategy for the Partnership that takes into account national and local digital strategies as well as the Integration Joint Board's Strategic Plan. The Council has a range of transformation programmes aligned to the digital strategy."*



# Strategic Alignment

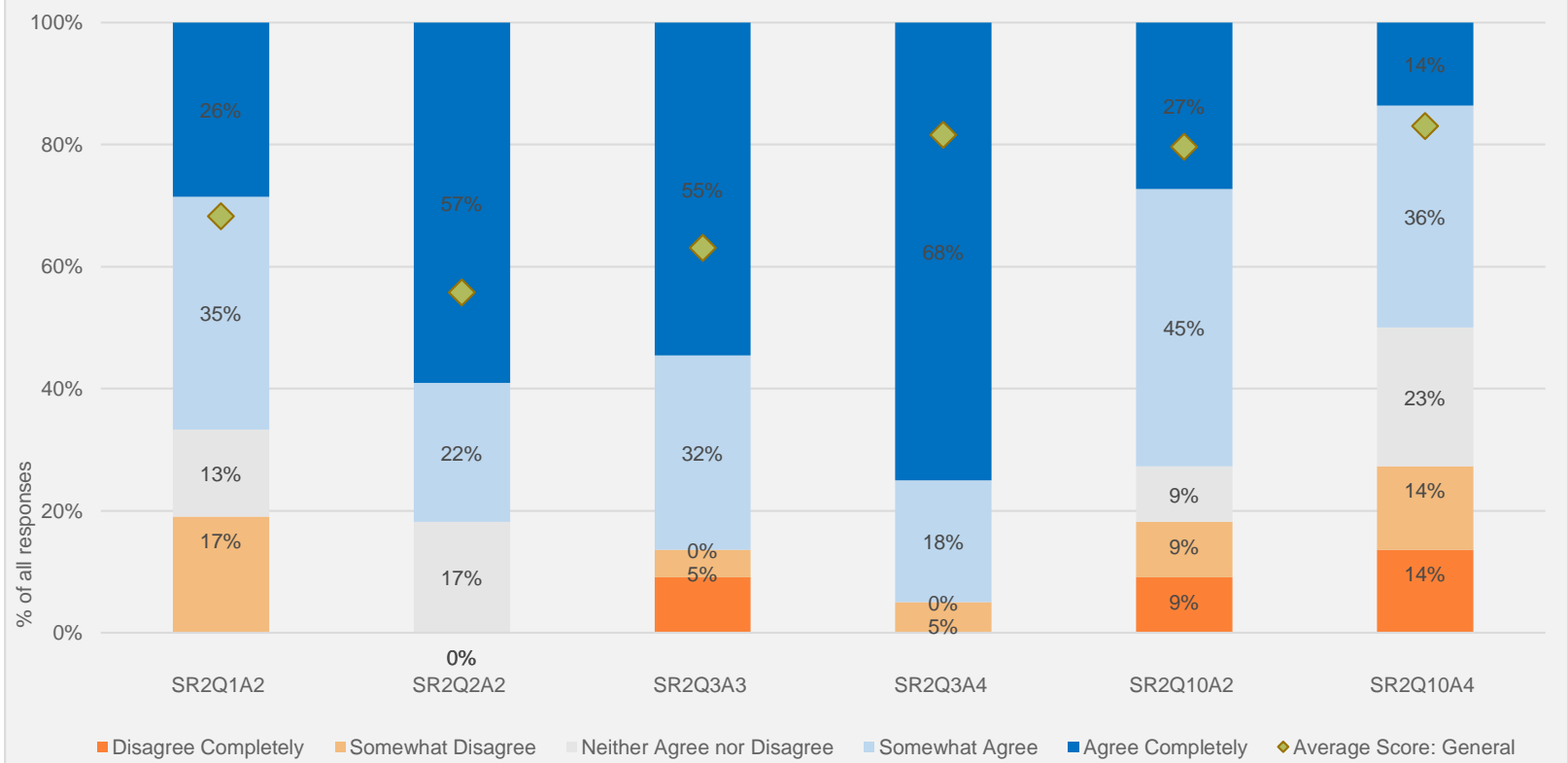
## Sample of free text comments received

- *"The Council has an over-arching Digital Vision, however there is not at present a specific Health and Social Care Digital Strategy."*
- *"The Council has a well embedded transformation and change approach, governed by a Redesign Board. This is a corporate approach, with a focus on specific transformation programmes. In a social care context, looked after children has been a significant focus of transformation over the past 12 months."*
- *"The Council has a fledgling digital innovation programme and limited one off funding for 2019-2020. This is being built on in the coming years."*
- *"Business Improvement team and IT work collaboratively to support business change across the Service."*
- *"The Council's Digital Strategy 2016-2019 is due for renewal this year and will be inclusive of Health and Social Care Partnership involvement."*
- *"Health and Social Care Partnership strategic plans - Workforce Plan, Organisational Development Plan and Improvement Plan all contain the principles and skills required to transform health and social care service to become more person-centred and accessible. The development of a specific digital strategy will be developed as part of the annual strategic planning cycle."*
- *"Digital strategy is defined for the council. Social care priorities are not a driving consideration."*



# Leadership

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Leadership  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SR2Q1A2    | Your strategic leadership team owns the organisation's health and wellbeing digital strategy and receives regular updates about progress.   |            | 9%  |
| SR2Q2A2    | Your team leading the digital transformation includes a sponsor from the strategic leadership team (Senior Responsible Officer).  |            | 4%  |
| SR2Q3A3    | Your digital leadership team includes recognised and engaged representation driving change and transformation within your organisation from: A social care professional.  |            |     |
| SR2Q3A4    | Your digital leadership team includes recognised and engaged representation driving change and transformation within your organisation from: Executive leadership, i.e. through your Chief Information Officer (CIO)/Chief Digital Officer (CDO). | 5%         | 5%  |
| SR2Q10A2   | Your organisation engages with the following groups to ensure digital solutions meet the demands of their users: Social care professionals.   |            |     |
| SR2Q10A4   | Your organisation engages with the following groups to ensure digital solutions meet the demands of their users: Clients and service users.   |            |     |



# Leadership

## Sample of free text comments received

- *"The 'Vibrant Voices' transformation engagement involved residents and the workforce and had significant reach. There will be further engagement with supported people and carers from a health and social care perspective in the implementation of technology enabled care and the management information system."*
- *"Digital solutions in place from previous projects did not include extensive users involvement however awareness raising of the technologies was in place to increase understanding for service users and families on the new technologies. Going forward for future projects we anticipate increase in service user involvement as projects progress."*
- *"The Council's Corporate ICT and Digital Board owns the digital strategies overall, which includes elements relating to health and wellbeing. Key updates are fed into relevant Senior Management meetings where senior staff from the Partnership attend, and senior managers across the Council Family have been identified as Digital Champions."*
- *"There is an opportunity to deliver coaching to senior managers to understand the detailed potential of digital transformation. Following on from this, the next step is to provide more clear focus to translate the vision and embed understanding and momentum at middle management level. Digital Leader Management programmes have been discussed which would support leaders to think differently about how they could deliver services and would support greater understanding of the potential to redesign service delivery. "*





# Leadership

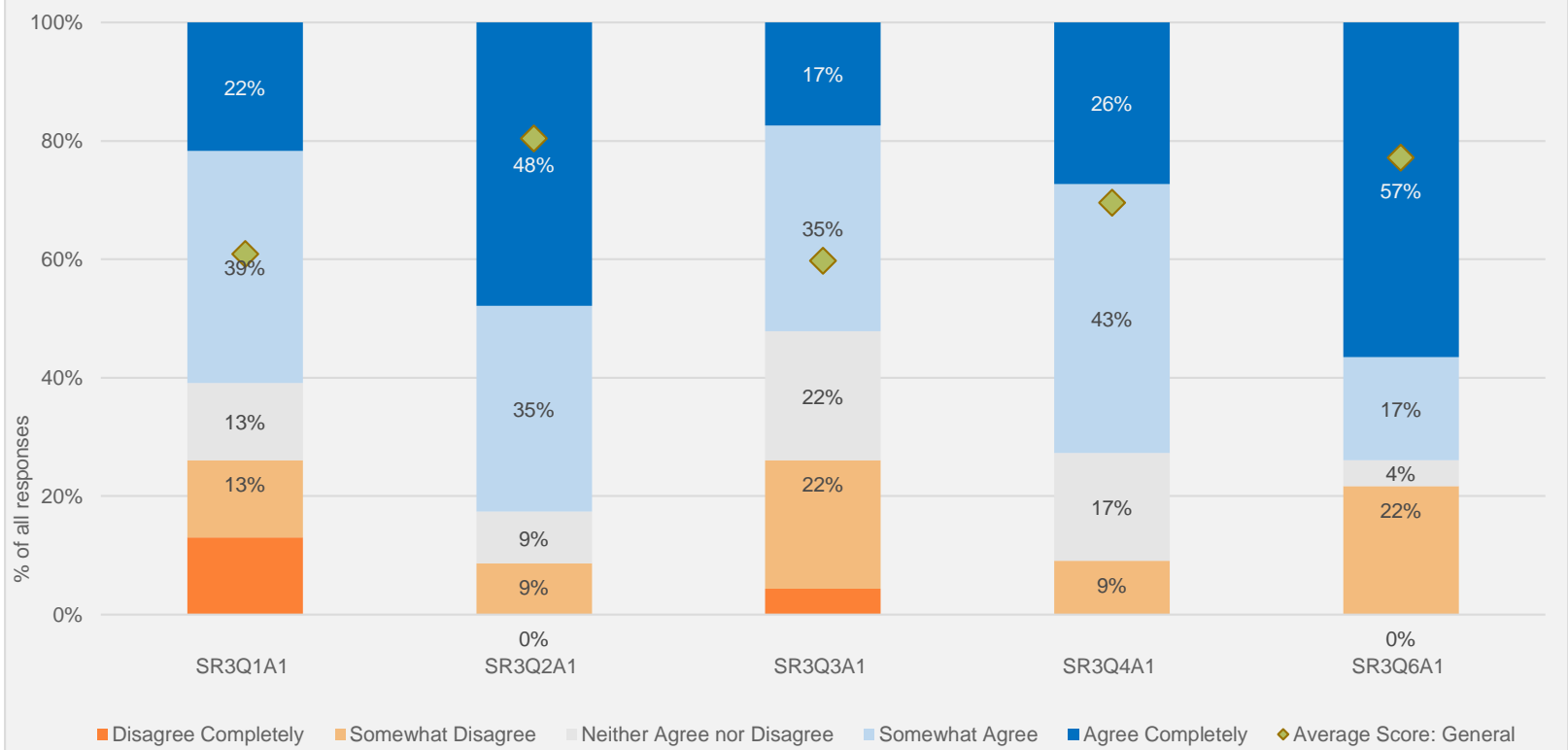
## Sample of free text comments received

- *"Digital Work Programme exists for social care and is maintained corporately (Council). It is intended that this programme will be presented at the Partnership's next ICT and Information Governance Steering Group."*
- *"In the HSCP the Senior Responsible Officer is the Chief Officer Finance and Resources. The Interim Chief Officer (who is also currently the Chief Social Work Officer) is the joint chair of the Strategic Resources and Operations Group and the Senior Management Team where decisions are made about key ICT and Digital priorities for the Partnership. All other ICT and Digital Boards within the Partnership include representation from social care professionals. The Head of the Strategic Innovation Team is the Chief Information Officer for the Council and the Chief Digital Officer is also part of that team. These specific roles do not exist in the Partnership."*



# Resourcing

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Resourcing  
N/A and Don't Know omitted.



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SR3Q1A1    | A 2 to 3 year financial plan for investment in digital technology is approved and in place.  |            |     |
| SR3Q2A1    | Your organisation has the buying, contracting, and supplier management capability it needs to manage technology suppliers effectively. |            |     |
| SR3Q3A1    | Your organisation ensures adequate resources are available for technology implementation, including associated change management.      |            |     |
| SR3Q4A1    | Commercial suppliers are involved in qualitative and quantitative benefits identification and realisation.                             | 4%         |     |
| SR3Q6A1    | Your organisation routinely undertakes an assessment of safety and risks associated with digital projects.                             |            |     |



# Resourcing

## Sample of free text comments received

- *"Governance process now under way for replacement of the social work management information system. This will be implemented over the next 2 years and will include working with partner agencies to improve collaborative working."*
- *"Resource for projects is very stretched."*
- *"Programme of Digital Transformation for HSCP is supported by Council services and Capital funding where required. The established Digital Strategy will support delivery of the Digital Technology strategy for HSCP services."*
- *"As an organisation I think we could do more to plan our digital needs, including formalising the resources needed to achieve our goals."*
- *"The HSCP does not have a specific financial plan for investment in digital technology because these investments are mainly held at the level of the Council and the Health Board. Funding for HSCP programmes and projects is made available on a case by case basis, either from parent organisation budgets or HSCP budgets."*
- *"A systems audit is currently underway, the results of which will inform the development of an investment plan which will then be embedded in the council's asset management strategy."*
- *"The Council has a multi year core ICT contract with an external provider, and has taken a commodity approach with a number of suppliers of other ancillary ICT services and in turn has the relevant multi-year budgets, and client management in place for those contracts."*



# Resourcing

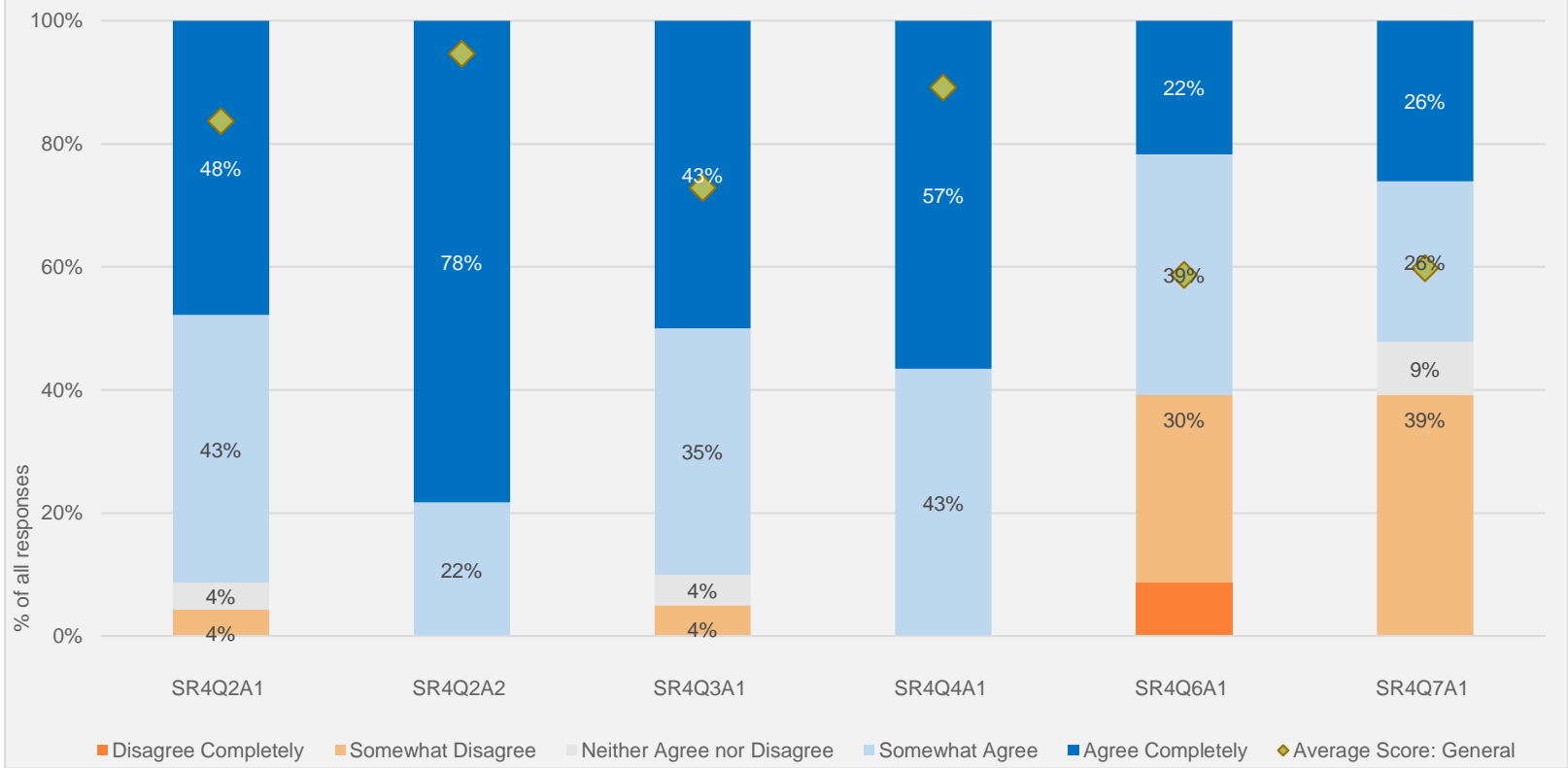
## Sample of free text comments received

- *"Financial plans for investment are available for large ticketed items (e.g. SWIFT Replacement, Web Roster, new website, etc.) and this is overseen by the Council's Leadership Team. Associated change management is accounted for, however, in-house (health and social care services) support is limited."*
- *"In order to achieve our digital vision, we must ensure that what we buy is consistent with our digital strategy aims and objectives. In collaboration with the Corporate Procurement Unit and other stakeholders, we will develop strategies for each requirement that are consistent with the councils wider ICT commodity strategy. This will ensure the consideration is given to any relevant internal and external factors in developing the scope of the requirement and determining the route to market which will deliver best outcome."*
- *"Restricted procurement team. Supplier Management is limited in terms of time and skills. Limited experience within the council for procurement. Still tending to buy from monolithic suppliers rather than Digital Ecosystem."*



# Governance

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section: Governance  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SR4Q2A1    | There is a relevant strategic board overseeing the plan, supported by effective operational IT delivery.  |            |     |
| SR4Q2A2    | Digital projects are underpinned by valid business cases and fully-engaged business owners.   |            |     |
| SR4Q3A1    | Your organisation adopts industry recognised principles outlined in best practice guidelines relating to social care digital services.                    | 13%        |     |
| SR4Q4A1    | Digital social care projects and programmes follow standard project management methodologies ensuring effective allocation of roles and responsibilities. |            |     |
| SR4Q6A1    | Your organisation routinely evaluates the benefits of digital social care projects using a consistent approach.   |            |     |
| SR4Q7A1    | Your organisation routinely evaluates lessons from digital social care projects and applies the learning to future programmes.                            |            |     |



# Governance

## Sample of free text comments received

- *"A Programme Board is in place for the implementation of Liquid Logic and programme management documentation includes risk identification and mitigation. Any digital risks are appropriately escalated to the Partnership risk register according to likelihood and severity."*
- *"HSCP follow the principles of programme governance and project board principles for the delivery of digital programmes."*
- *"The HSCP does not have a Digital Strategy. It does however have a strategic board - the ICT and Information Governance Steering Group that will see oversee the Digital Strategy Workstream mentioned in its Strategic Plan."*
- *"Agile Project Management methodology is used for ICT programme/project management."*
- *"Unfortunately, due to resources limitation, it is not possible to routinely evaluate benefits of an ICT project's outcomes, and review of past projects' 'lessons learned logs' is not common practice."*
- *"There are a range of boards in the Council and the HSCP overseeing the plans, but effective operational IT delivery cannot always be guaranteed due to a number of factors, including competing demands. All major projects require approved business cases before they can be taken forward, but smaller projects require documentation proportionate to their size, in line with the contractual arrangements with CGI."*
- *"Digital projects are always underpinned by valid business cases and fully engaged SROs."*



# Governance

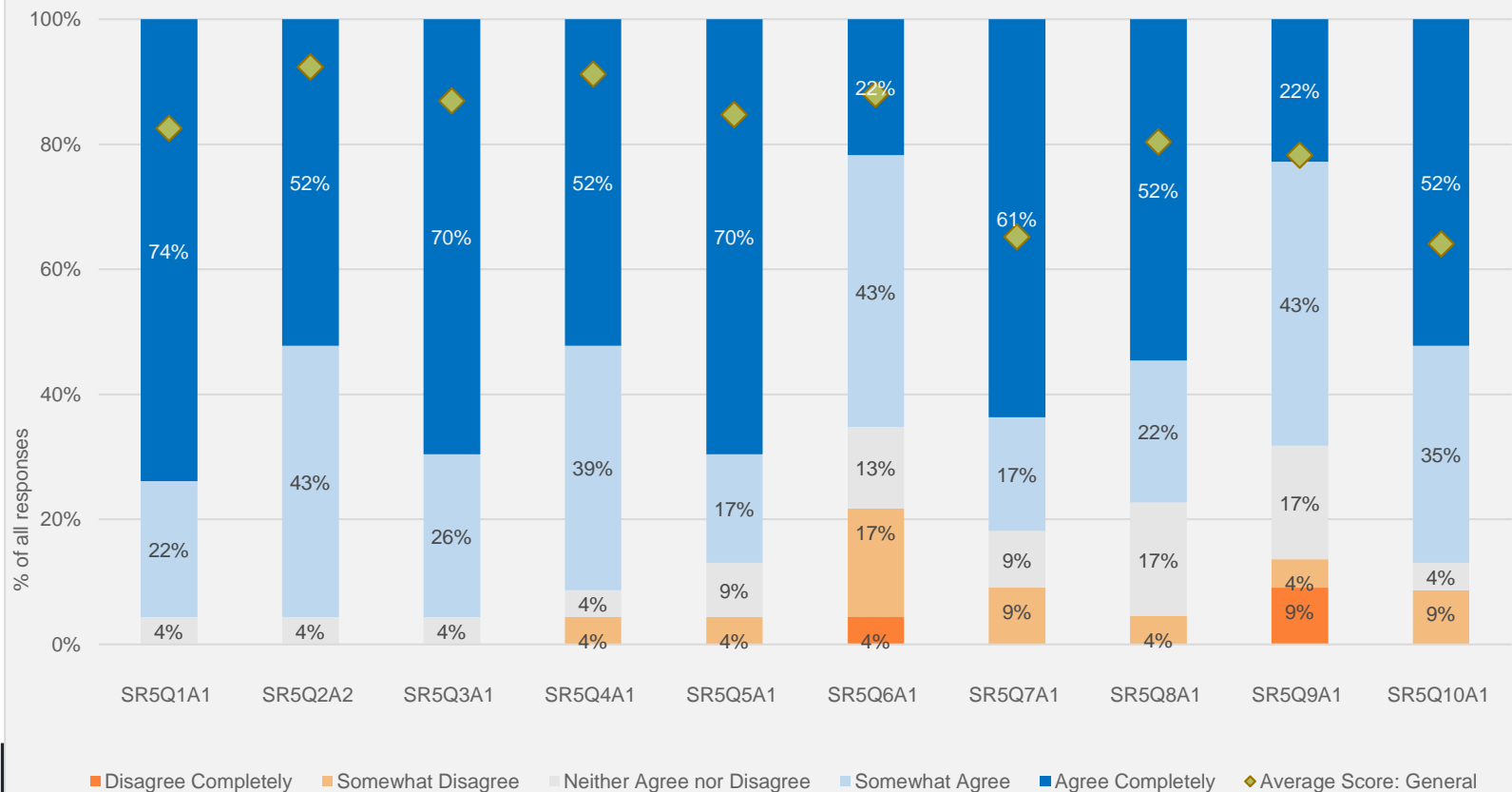
## Sample of free text comments received

- *"The Council have adopted Enterprise Architecture principles which include all technology towers and align to industry best practice."*
- *"Some evaluation of projects takes place, but it is recognised that this is not routine or consistent. This is an area that the Strategic Innovation and Technology Team intend to address. Lessons learned exercises are carried out for major projects, but it is rare for these to be carried out for smaller projects due to resource requirements for other projects."*
- *"The Council has robust governance in place for delivery of its ICT transformation programme, and in turn individual change and IT projects, including business cases being required. That said, some further focus on benefits realisation and monitoring, and lessons learned, should be considered."*
- *"We apply Lessons Learned logs throughout the cycle of any digital projects and these are shared where appropriate for learning throughout the organisation"*
- *"The council's corporate approach to project and programme management, which can be evidenced, will be applied in all cases and this includes business cases, benefits management and post implementation reviews. benchmarking with other local authorities and health and social partnerships is routinely undertaken and ITIL is followed for all projects that have an IT deliverable."*



# Information Governance

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Information Governance  
N/A and Don't Know omitted.



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SR5Q1A1    | Your organisation adopts high standards of information security and cyber resilience for social care digital services.   |            |     |
| SR5Q2A2    | A strategic group has a full and accurate picture that the organisation's key social care information is being properly managed and is safe from cyber threats.  |            |     |
| SR5Q3A1    | Your organisation takes a data protection by design approach to social care projects which involve data.   |            |     |
| SR5Q4A1    | Understanding of and adherence to information governance policies, procedures and agreements amongst your Social care staff is monitored and actively supported.   |            |     |
| SR5Q5A1    | The sharing of data with other health & social care providers is supported by existing information governance policies, procedures and agreements.   |            |     |
| SR5Q6A1    | Information sharing preferences of clients and service users are recorded and acted upon.  |            |     |
| SR5Q7A1    | There are robust due diligence mechanisms in place to ensure all 3rd parties comply with the law and central guidance and provide sufficient guarantees that personal data is handled safely and protected from unauthorised access, accidental loss, damage and destruction.      | 4%         |     |
| SR5Q8A1    | All information governance requirements are articulated in third party and supplier contracts and monitored on an ongoing basis.   | 4%         |     |
| SR5Q9A1    | You receive assurance on a regular basis that your suppliers and digital assets are secure.  | 4%         |     |
| SR5Q10A1   | Your organisation has a defined process to keep track of the Social care information it holds, including its purpose, classification, location and details of ownership / maintenance responsibilities. There is a clear process for the final disposal of each information asset. |            |     |





# Information Governance

## Sample of free text comments received

- *"Confirmation of supplier testing and annual reviews of supplier's data protection policies is routinely undertaken but improvements could be made in how we retain evidence of this."*
- *"External Security Assessments for all suppliers are carried out as part of the procurement and supplier management process. This is applied to all suppliers on entry and for key suppliers annually at contract review."*
- *"PSN service certification, services delivered to ISO27001 standards."*
- *"Mandatory staff training records (e-learning), regular staff supervision, staff contracts."*
- *"The Council has a robust information governance framework, which includes policies, procedures and mandatory information security training. There is also an established Information Security Incident Reporting Procedure and a re-active, as well as pro-active approach is taken in that as well as a strong awareness raising programme to avoid information security incidents, lessons are learned from any incidents which do arise to prevent a re-occurrence."*
- *Corporately, the Council has robust information management arrangements, including an Information Management Board, an IM strategy and clearly defined Information Asset Owners and Information Asset Registers. A programme of Information Management training of staff has also been rolled out across the organisation"*



# Information Governance

## Sample of free text comments received

- *"While all contracts and SLAs with external contractors require them to comply with GDPR and DPA2018 requirements, we have not yet put in place robust data processing requirements and effective monitoring of compliance in relation to social work contracts. In the context of health and social care integration, the council and the IJB have agreed a comprehensive framework for information sharing in relation to health and social care. However, there remain risks to effective integrated working arising from the fact that many health and social work information systems remain separate and there is not yet a shared intranet to enable robust management of shared decision making and collaboration."*
- *"The majority of policies and processes are in place to control these elements, but are managed corporately on behalf of social work. While all of the policies and processes are in place they are not always mature or fully embedded in the organisation."*
- *"Information Governance clauses are included in all HSCP contracts. Close monitoring is in place for larger contracts as part of contractual reviews to ensure ongoing compliance. However some gaps have been found in 3rd party supplier contracts. There is currently a piece of work to improve digital contract documents, personal data controls and better guidance for staff."*



# Information Governance

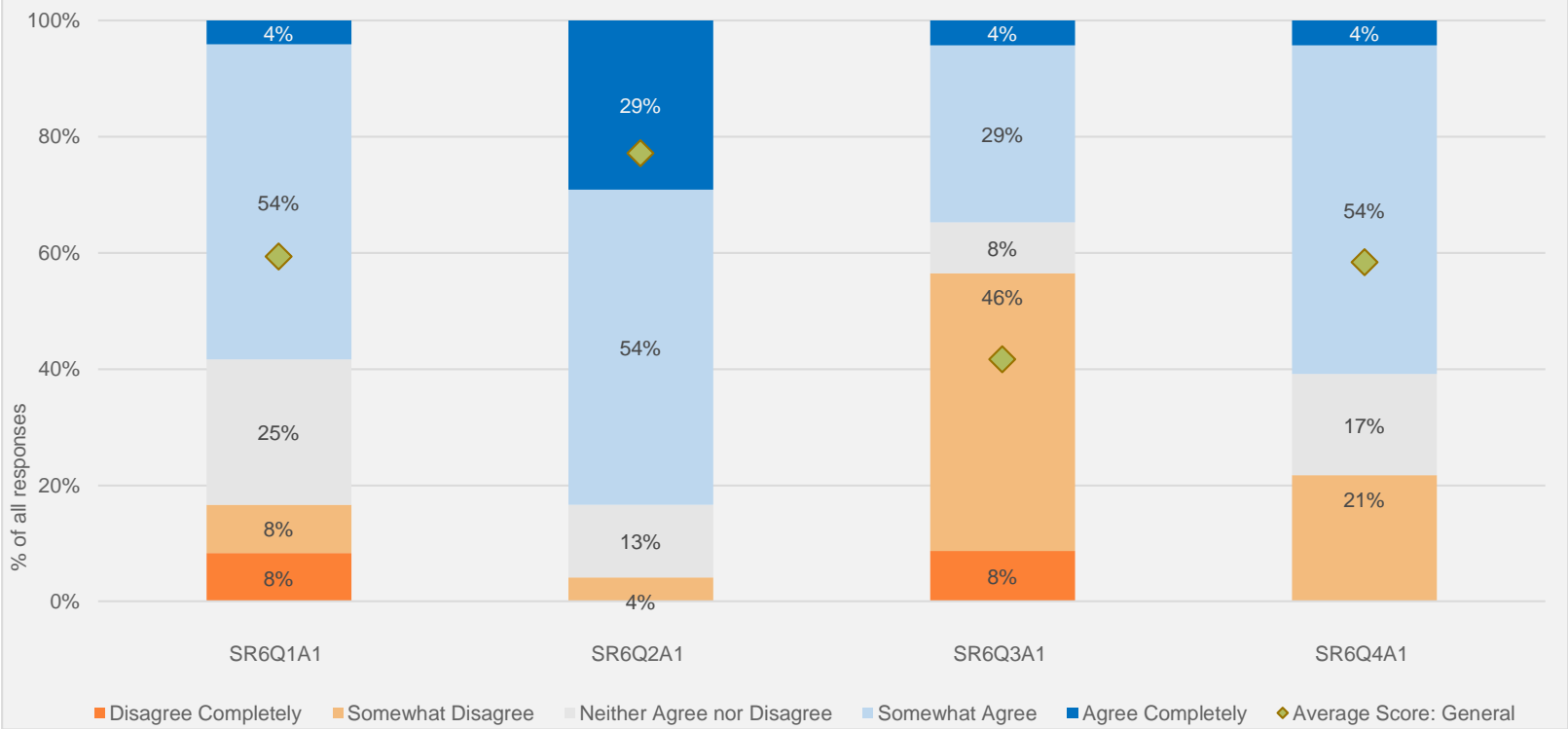
## Sample of free text comments received

- *"The Training and Communications subgroup of the Information Security Board develops and promotes annual mandatory information security training along with ongoing information security communications campaigns across the Council Family, including regular updates in newsletters and graphics and messages within the Council's document management system . The HSCP Senior Management Team is briefed annually on the training, and any other relevant information security communications, and compliance with the mandatory training is monitored on a 4 weekly basis and reported to Senior Managers as well as the Information Security Board. Additional exercises are undertaken to raise awareness and assess understanding, such as events for Cyber Security Awareness week, and a planned phishing simulation exercise."*
- *"We consider the implications of data use right from the outset through DPIA processes."*
- *"There is work still to be done on ensuring that appropriate information sharing arrangements are in place."*
- *"The Council has been running a 'Think Twice' campaign since 2014 to try to ensure that information security incidents arising from human error are avoided and run an annual Information Governance Awareness Week. The Council not only 'engages from the top', with six monthly briefings by the statutory DPO to the CMT, but also takes a bottom approach by ensuring that the training needs of all staff are met via the Information Governance Learning & Development Strategy."*



# Skills and Competences

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Skills and Competences  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SR6Q1A1    | Your organisation regularly monitors changes to the core skills required of social care staff as part of the organisation's ongoing digital transformation, and regularly reviews available skills development programmes to ensure their adequacy. |            |     |
| SR6Q2A1    | Staff receive training regarding the use of digital {application} applications and technologies that is effective in terms of skills development and available when it is required.   |            |     |
| SR6Q3A1    | Social care professionals receive training regarding the use and interpretation of data provided to them via dashboards and/or reports that is effective in terms of skills development and available when it is required.                          | 4%         |     |
| SR6Q4A1    | Staff have access to appropriate resources for professional learning and digital skills development and have allocated time for these activities.   | 4%         |     |



# Skills and Competences

## Sample of free text comments received

- *"There does not appear to be a robust approach to training related to the client system care first. This is underpinned by the level of data quality issues experienced. New technology that has been introduced has not been supported by ongoing learning support eg mobile tech for the enablement response teams."*
- *"A skills audit including digital skills has been completed in 2019 and actions arising are being considered."*
- *"Establishment of key roles will enable improvements in dashboard and the development of skills for interrogating data to better inform service delivery. Still require to ensure that all employees have accessed required digital skill development and time allocated across the workforce."*
- *"Training on social care applications is regularly reviewed and updated and a range of digital skills courses are available."*
- *"A range of classroom based and e-learning courses are available to staff on the use of digital social care applications, and these are reviewed on a regular basis to ensure they are meeting learning requirements. Demand for training can exceed the capacity of the Learning and Development team, particularly when there are large implementations alongside business as usual demand. Training records of staff are held on an electronic system and can be used as evidence of continuous professional development."*
- *"The Council has an organisation wide Employee Review and Development process, to capture staff training needs and requirements as part of an annual review process. There is no specific section relating to an ICT/Digital competency assessment, although it is expected that all managers and supervisors use the ERD process to assess all skills and training needs. Consistency of use and application of the ERD process may vary, and in particular the extent to which ICT training needs are regularly discussed, and this is borne out by views from staff survey for the DMA. "*



# Skills and Competences

## Sample of free text comments received

- *"Staff have access to e-learning modules some of which are Mandatory Training. Some staff require support to learn how to access digital learning as they do not have the confidence or competence to access such independently."*
- *"Staff training is identified via annual performance personal development as well as monthly supervision sessions. Training courses are provided by the council to meet the demands of any new technology that Social Care staff are required to utilise."*
- *"Mandatory training is provided to all staff who access Social Care systems. A recent development to this training was made, providing on-line training, rather than classroom-based approach, following feedback from staff. "*
- *"E-learning available for staff and notifications sent if it has not been completed."*
- *"Although front line staff receive training in the Case Management System used, there is some concern that frontline staff who are being given devices (and who will receive them in the future) lack essential digital skills to be confident and safe using technology. With the transformation board looking at identifying Digital champions and Digital Leadership programmes this will work toward increasing people's confidence in using such devices."*
- *"In line with the introduction of a new scheduling system, the entire care at home frontline workforce were supplied with a new smartphone device and associated training and support was also provided."*



# Key messages - Readiness

01

## STRATEGIC ALIGNMENT

- 72% of respondents agree completely, or somewhat agree, that there are processes in place to scrutinise and evaluate investment in technology in their organisations and support ideas through to implementation.
- 77% of respondents agree completely, or somewhat agree, that their organisations routinely undertake horizon scanning to remain aware of advances in digital technologies.
- 54% of respondents agree completely, or somewhat agree, that they have an existing digital strategy aligned to health and wellbeing objectives. Several health and social care partnerships are currently developing digital strategies and plan to align these with national digital strategies and IJB strategic plans.
- There is a need to develop better vision and support at a national level to support the integration of health and social care systems.

02

## LEADERSHIP

- The majority of respondents agree completely, or somewhat agree, that the digital leadership team is in place to oversee digital programme and project delivery (senior responsible officer, chief digital/information officer and senior social care professional lead).
- Lead respondents indicated there was good engagement with social care professionals but there were more varied levels of engagement with clients/service users.

# Key messages - Readiness

03

## RESOURCING

- 83% of respondents agree completely, or somewhat agree, that their organisation has the buying, contracting and supplier management capabilities required.
- 26% of respondents disagree completely, or somewhat disagree, that their organisations has adequate resources, including change management, to effectively implement digital projects.
- Several organisations commented that lack of resources limited progress or achievement of ambitions.

04

## GOVERNANCE

- 100% of respondents agree that they have good governance structures in place with digital projects underpinned by valid business cases and fully engaged business owners and that all projects are managed using standard project methodologies.
- 39% of respondents disagree completely, or somewhat disagree, that evaluation of benefits of digital social care projects is routinely undertaken and the same number disagree that lessons learned are applied to future projects. Lack of resources to support these activities was commonly quoted to be a key factor.



# Key messages - Readiness

05

## INFORMATION GOVERNANCE

- Almost all organisations agree that they adopt high standards of information security and cyber resilience and that a senior strategic group has a full and accurate picture of cyber threats.
- 96% of respondents agree completely, or somewhat agree, that they use a data protection by design approach to digital social care projects.
- 65% of respondents agree completely, or somewhat agree, that they receive assurance on a regular basis from suppliers that their digital assets are secure. It was noted that there remain some gaps in third party supplier contracts relating to this.

06

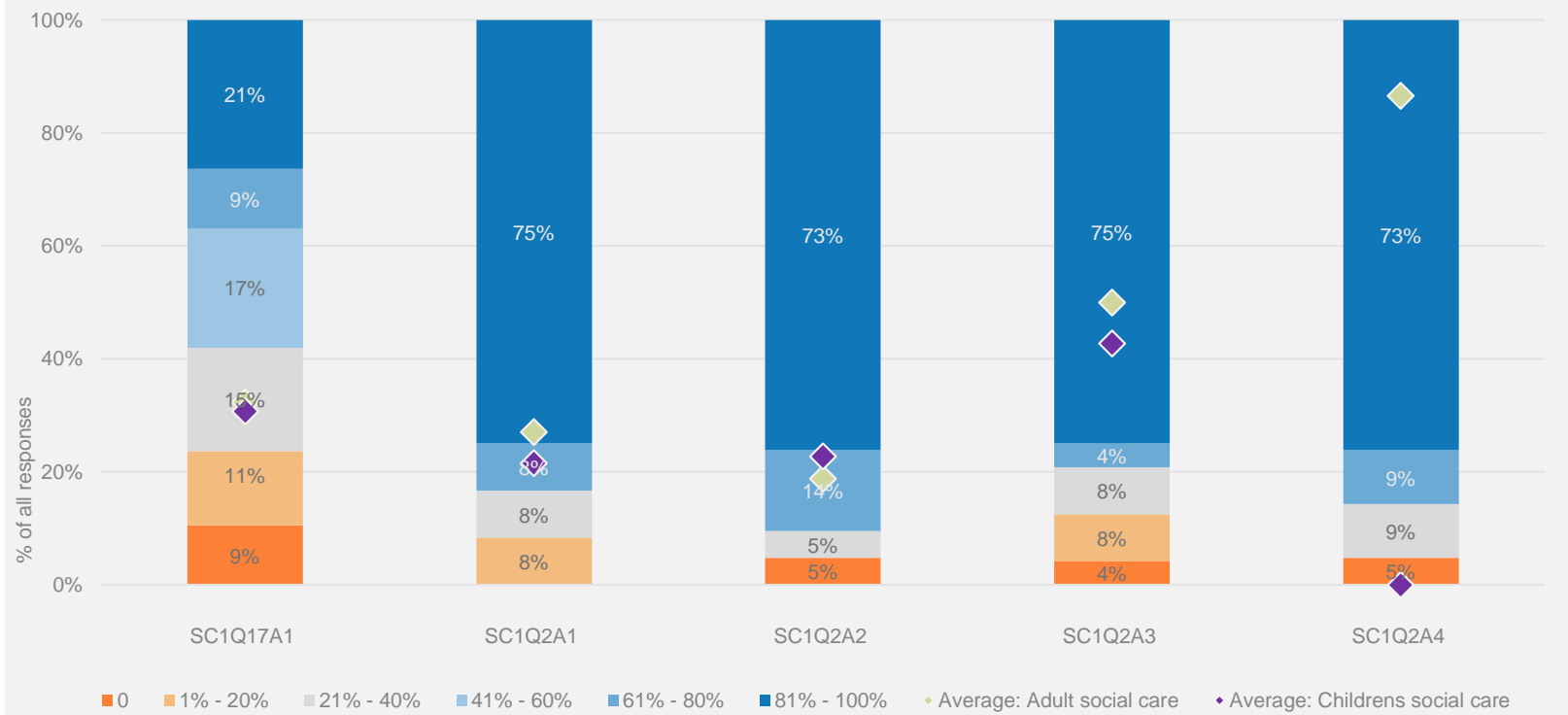
## SKILLS AND COMPETENCES

- Only 58% of respondents agree completely, or somewhat agree, that social care professionals have access to appropriate resources for professional learning and digital skills development.
- Lead respondents commented on variation in training provided to users of digital social care systems
- Some front-line staff were noted to lack the skills required and confidence to use digital technology.
- There is a need for ongoing assessment of digital skills training requirements.



# Records, Assessments & Plans

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Records, Assessments & Plans  
N/A and Don't Know omitted.

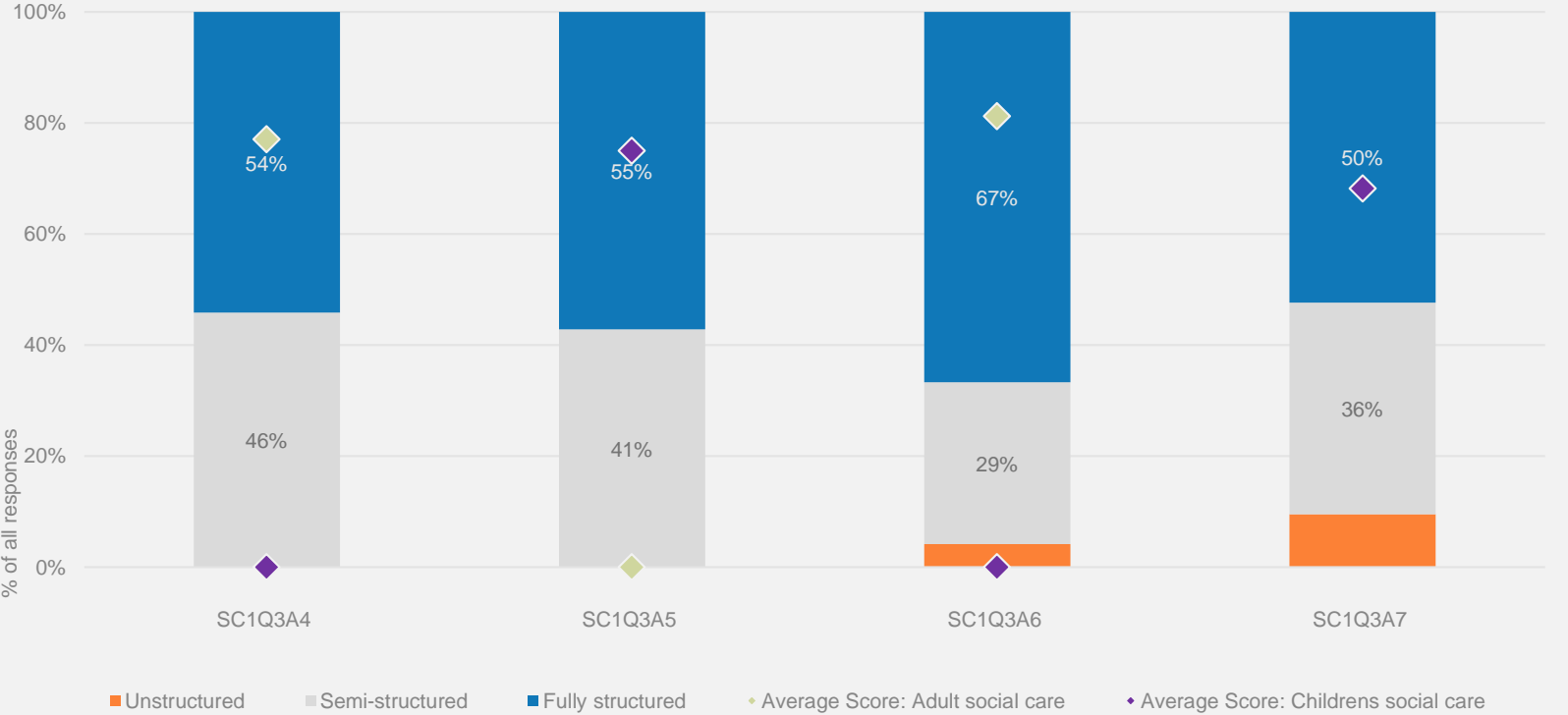


| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC1Q17A1   | What proportion of information shared with health and social care providers outside your organisation is provided in a structured or semi-structured digital format?                                     | 17%        | 2%  |
| SC1Q2A1    | What proportion of each of the following types of information are routinely available in a digital format, to social care professionals working in your organisation: Adult social care records          |            |     |
| SC1Q2A2    | What proportion of each of the following types of information are routinely available in a digital format, to social care professionals working in your organisation: Children's social care records     |            | 5%  |
| SC1Q2A3    | What proportion of each of the following types of information are routinely available in a digital format, to social care professionals working in your organisation: Vulnerable/at risk adult care plan |            |     |
| SC1Q2A4    | What proportion of each of the following types of information are routinely available in a digital format, to social care professionals working in your organisation: Vulnerable/at risk child care plan |            | 5%  |



# Records, Assessments & Plans

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Records, Assessments & Plans  
N/A and Don't Know omitted.

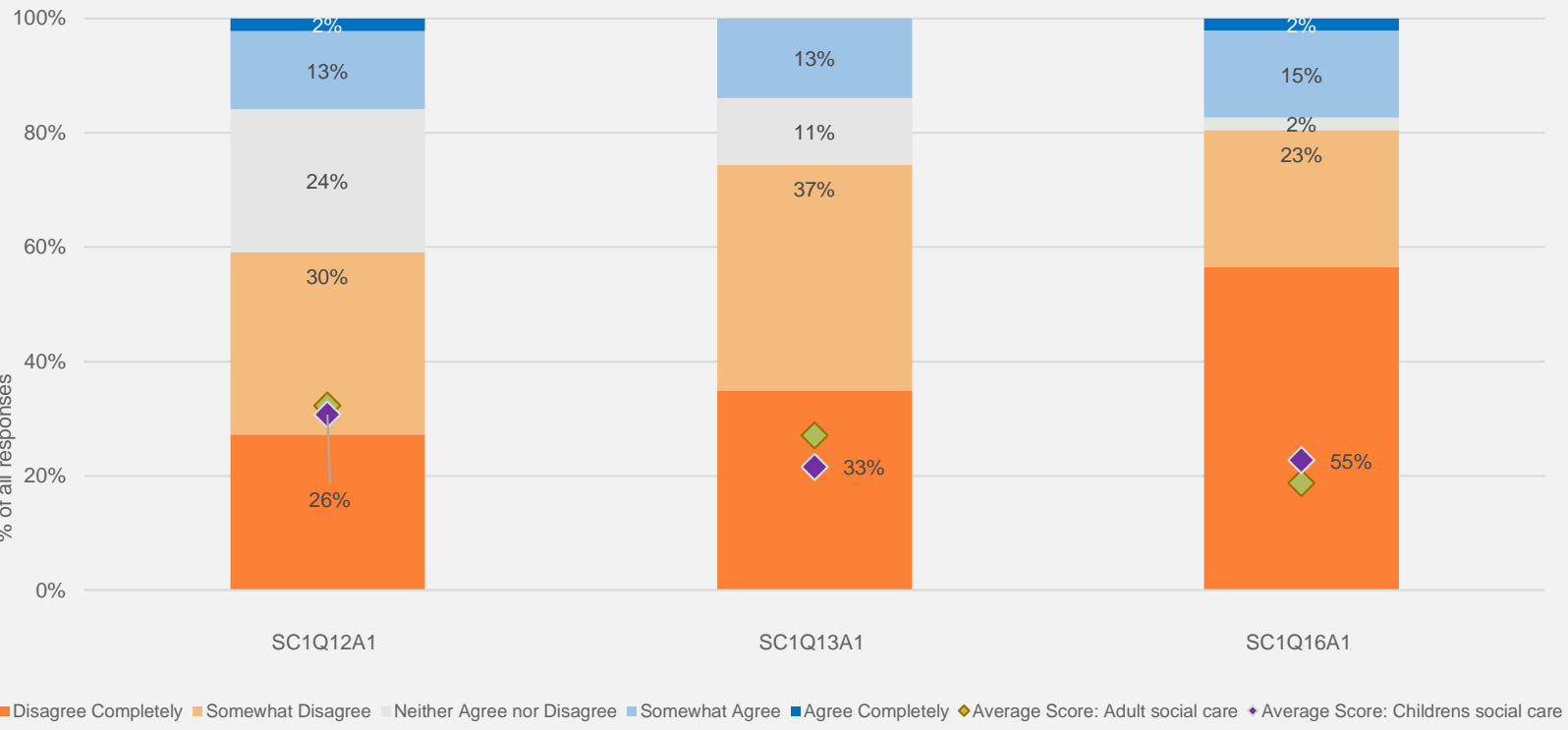


| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC1Q3A4    | In what main format are each of the following types of records held in your organisation: Adult social care records          |            |     |
| SC1Q3A5    | In what main format are each of the following types of records held in your organisation: Children's social care records     |            | 5%  |
| SC1Q3A6    | In what main format are each of the following types of records held in your organisation: Vulnerable/at risk adult care plan |            |     |
| SC1Q3A7    | In what main format are each of the following types of records held in your organisation: Vulnerable/at risk child care plan |            | 5%  |



# Records, Assessments & Plans

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Records, Assessments & Plans  
N/A and Don't Know omitted.

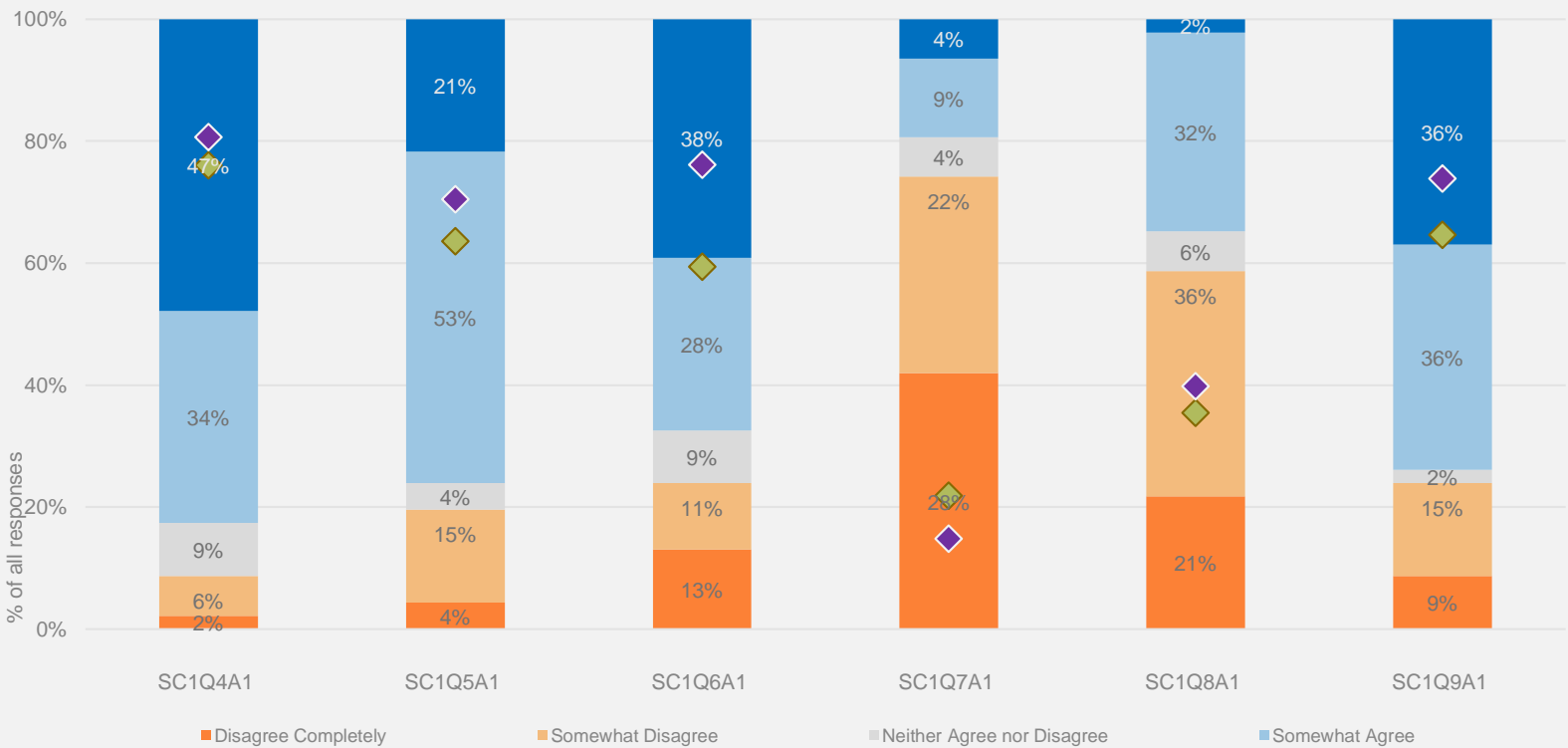


| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC1Q12A1   | Social care professionals, including third and voluntary sector staff commissioned to deliver care services, have digital access at the point of care to the information they need from other social care providers.   | 2%         | 2%  |
| SC1Q13A1   | Social care professionals, including care professionals from other agencies/services, third and voluntary sector staff commissioned to deliver care services, have digital access at the point of care to the information they need from local healthcare providers. | 4%         | 2%  |
| SC1Q16A1   | Social care professionals have access to a consolidated view of their clients' local health and care records.  |            | 2%  |



# Records, Assessments & Plans

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Records, Assessments & Plans  
N/A and Don't Know omitted.



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC1Q4A1    | Social care professionals can access digital records, or relevant components of them, at the point of care/need as part of their regular day-to-day routine. |            | 2%  |
| SC1Q5A1    | When using digital records, social care professionals can find what they need quickly and easily without having to log into different systems.               |            | 2%  |
| SC1Q6A1    | Social care professionals can update digital records, or relevant components of them, at the point of care as part of their regular day-to-day routine.      |            | 2%  |
| SC1Q7A1    | Relevant data from monitoring devices is included in client and service user records or charts automatically.  | 9%         | 24% |
| SC1Q8A1    | Information is collected/recorded once.  |            | 2%  |
| SC1Q9A1    | Social care professionals rely on digital records for the information they need at the point of care.  |            | 2%  |



# Records, Assessments & Plans

## Sample of free text comments received

- *"Digital Access through the new social work system will enable external agencies to collaborate on digital records where appropriate."*
- *"Staff are required to log-in to different systems due to the various types of services. Criminal justice services are required to do double entry. There are examples of where being able to input information at the point of care would not be desirable such as full reviews or assessments. For other service interactions such as referrals, concise clinical recording or updates to care plans would be beneficial. Developments are being progressed in this regard."*
- *"While there are established information sharing systems in relation to care and protection there remain areas where systems do not 'talk to each other' and require 'double-keying', in particular between the current system for social care SWIFT and EMIS for integrated care and reablement teams."*
- *"Social work staff have access to Clinical Portal in Intake, Home Care, Older people and COT/SW Rehab. Some NHS staff have access on a read only basis to CareFirst, centred around Rapid Access, SPOA (Admin) staff and managers."*
- *"Social Care Professionals have access to digital records however may not be able to access directly (e.g. in client's home) via mobile device."*
- *"Essential Care plans are paper based in clients' homes - as such SC professionals, 3rd and voluntary party, will need to routinely check paper based records."*
- *"SW are trained to have no barriers when interacting with clients and completing assessments/asking questions etc, with the use of a device viewed as a barrier to inter-activeness with a person. Connectivity is also an issue for staff, as they do not have access everywhere in the community. The current social care system is also perhaps not suitable to a mobile assessment process."*



# Records, Assessments & Plans

## Sample of free text comments received

- "We are currently implementing a new Social Care Case management system which will enable us to have greater freedom of access to information including at the point of care. It is our vision that all information relating to a service user will be held in one location reducing the need for staff to check multiple locations. Portals will be introduced to allow service users, health and police partners as well as other professionals to share information more securely with us. This will also reduce the double keying of information."*
- "Social Care professionals all have hybrid tablets with 4G access so can access service user records wherever they have connectivity. The majority of social care professionals also have the use of a smartphone with mobile data to access email and calendars from anywhere. careFirst is the main social care system for structured data, and EDRMS is the main application for unstructured data, both of which social care professionals can access from anywhere using either a network connection, Wi-Fi or 4G"*
- "The HSCP have introduced a 'Joint Desktop' which allows Social Work staff to access relevant NHS applications and vice versa. We are currently implementing the NHS portal, which will allow Social Work staff to access key information from NHS systems, and in the next phase will allow NHS staff to access key information from careFirst. Making data easier to access will be one of the key priorities in the HSCP ICT and Digital Strategy."*
- "Around 70 staff currently have access to NHS information via the NHS portal and this is being rolled out to over 1000 Adult services staff beginning at the end of July 2019. We don't believe that social care professionals from 3rd sector organisations have any electronic access to NHS information. There is currently no consolidated view of service users local health and care records."*



# Records, Assessments & Plans

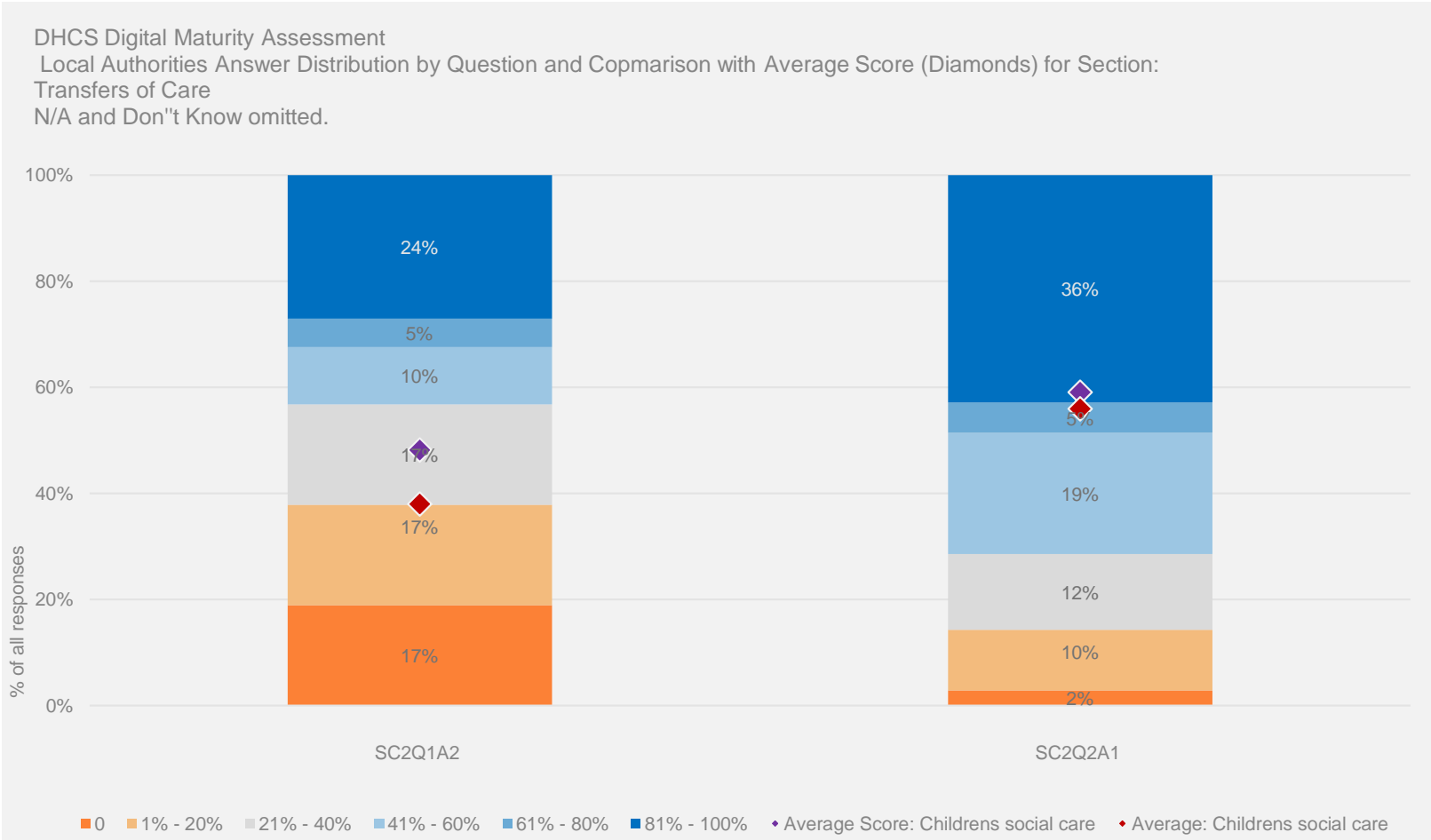
## Sample of free text comments received

- "Children's Social care staff have access to digital records, but only at their base location. As a result for a proportion, digital records are available at the point of care/point of need, where services are being provided from with Social work offices or facilities. However, for any remote working or within client residences or other external facilities, access to the digital records would only be prior to visiting clients. For some aspects of the social care service, records are not in digital form e.g. Residential Care records. Health staff don't have access to social care records in digital format."*
- "Some teams do not have mobile access to Mosaic and so complete paper forms to but entered later. Information must be copied from Mosaic to eIRD (electronic Interagency Referral Discussion)."*
- "Remote access to the main social care system is available to all staff as required and requires the corporate ICT service to provide this via provided equipment. Where health/ social care professionals as well as administrative support staff are required to access more than 1 system, they are required to re-enter the same information onto the secondary systems."*
- "Social care staff from adult services access the Clinical Health Portal (this does not include staff in care homes). Information shared is usually within the Clinical Health Portal, other information shared outwith the organisation would usually be scanned PDF document."*
- "Social Care staff need to log into x2 systems, the case management system CareFirst and also Civica Document management system. Not all child care staff have access to the clinical health portal or EMIS system."*





# Transfers of Care

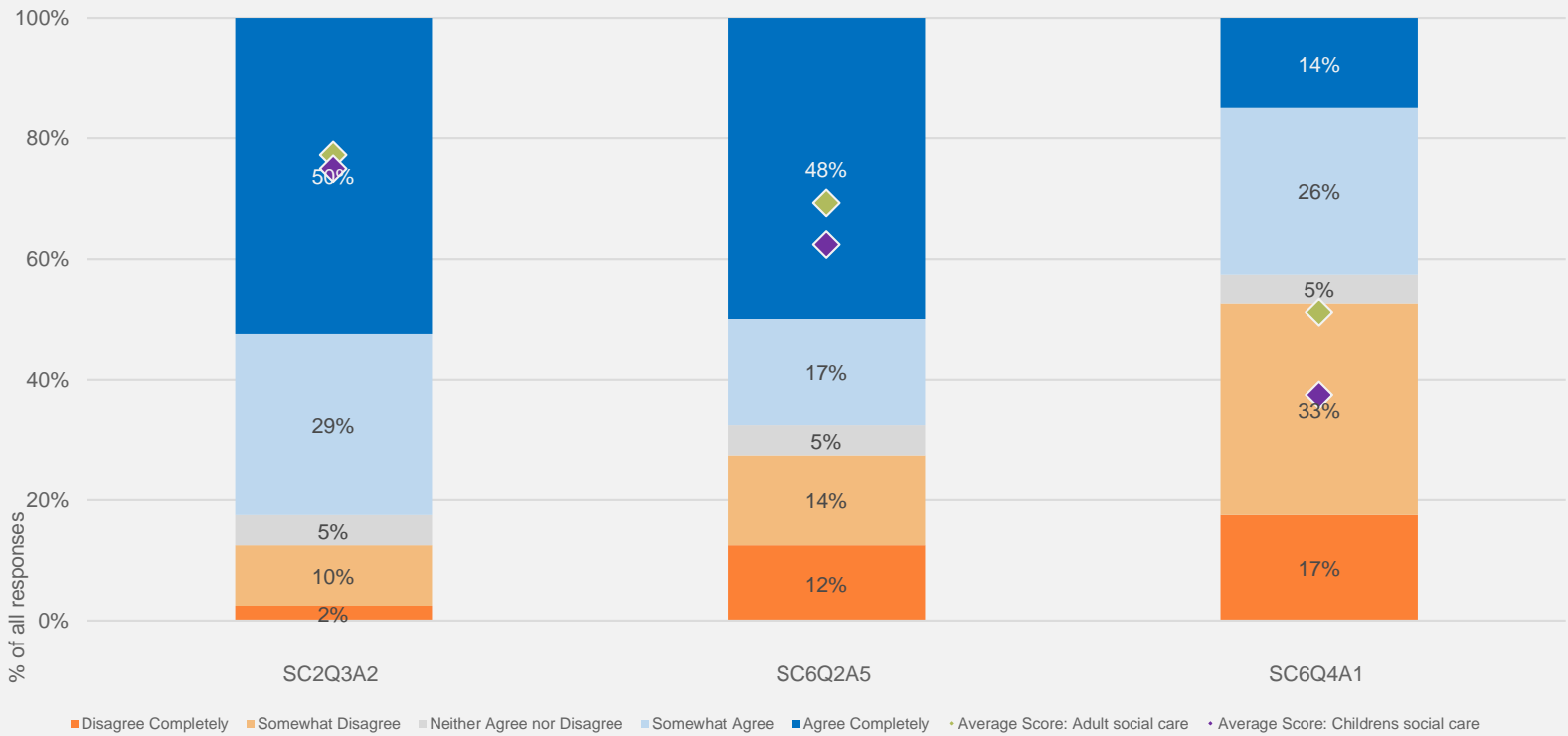


| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC2Q1A2    | What proportion of documentation, such as admission, discharge or withdrawal notices, is received and managed digitally and integrated into workflows? | 10%        | 2%  |
| SC2Q2A1    | For what proportion of handovers of care between services, departments or care teams is information shared digitally?                                  | 14%        | 2%  |



# Transfers of Care

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Transfers of Care  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SC2Q3A2    | Information is shared digitally for children and young people with ongoing needs who are transitioning from children's social care to adult social care services. | 2%         | 2%  |
| SC6Q2A5    | New care summaries are created in a structured digital format.  | 2%         | 2%  |
| SC6Q4A1    | Care summaries are shared digitally with all relevant stakeholders.   | 2%         | 2%  |



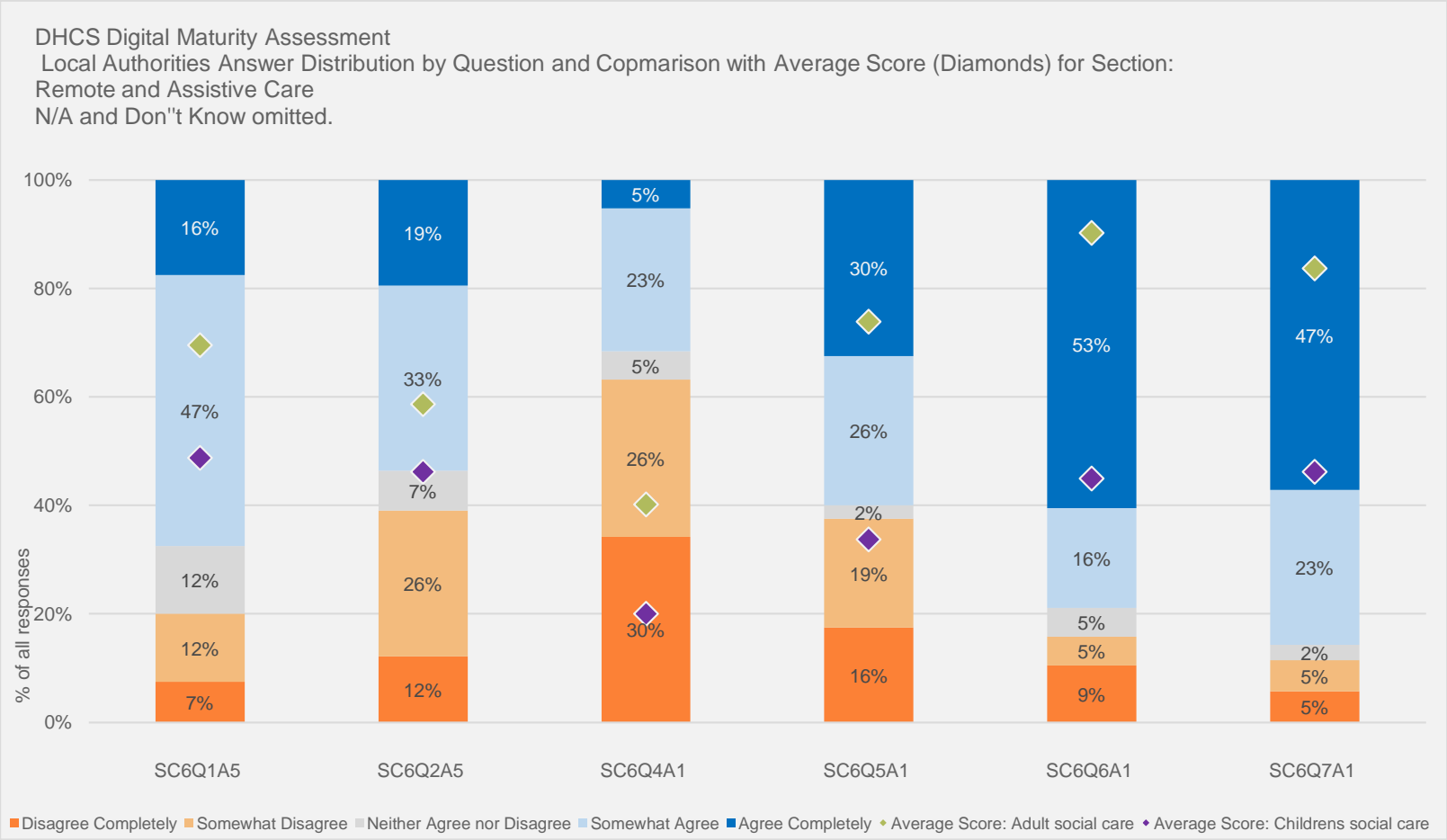
# Transfers of Care

## Sample of free text comments received

- *"For provided resources admissions and discharges are all managed within key systems and integrated into workflow. For purchased and other services (including NHS services) there are some electronic transactions via email as well as paper and telephone transactions."*
- *"Adult assessments and Outcome Based Support Plans are created in a structured format on careFirst."*
- *"Assessments and Care Plans for children are initially created as Word documents and copied into a structured format on careFirst. Assessments and care plans will usually be shared with professionals via email, but will be shared on paper with Service Users or parents/guardians."*
- *"Referrals from external bodies can come on paper or by phone or email, or online form."*
- *"Notes are entered into electronic systems but teams vary in relating the information from verbal handover to reading documentation."*
- *"Care summaries are in a semi-structured format within a form. The form fields are not based on a recognised ontology."*
- *"Information is contained within the same shared core system moving from children to adult services."*
- *"As Adults and Children's services share the same core system, information is shared seamlessly between care settings. This will also enhance with the introduction of a new social care case management system."*
- *"Most information is shared digitally, however it is not fully integrated into workflows and there are very few processes automated as a result of digital sharing of information. After most information is shared digitally, there generally has to be a manual review and then tasks/actions generated as a result of manual review."*



# Remote and Assistive Care



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SC6Q1A5    | Social care professionals use digital technologies to give or receive professional advice and guidance.   | 5%         | 2%  |
| SC6Q2A5    | Social care professionals are able to contribute to multidisciplinary discussions about patient and service user care with colleagues outside your organisation using digital technologies. | 2%         | 2%  |
| SC6Q4A1    | Apps are provided or prescribed as part of health and wellbeing packages offered to clients.  | 5%         | 7%  |
| SC6Q5A1    | Digital technology and tools are used for remote monitoring and assistive care of people at home.   | 2%         | 5%  |
| SC6Q6A1    | Telecare equipment, supported by a service that responds to alarms/alerts, is used to monitor clients at risk of deterioration at home or in the community.                                 | 5%         | 7%  |
| SC6Q7A1    | You have clear governance and consent agreements around the use of remote and assistive care technologies.  | 7%         | 12% |



# Remote and Assistive Care

## Sample of free text comments received

- *"Lack of shared communications systems (eg Skype) between Council and NHS staff can hamper contribution to MDT discussions with colleagues."*
- *"Prescribing of digital tools for self care or monitoring within the H&SCP would benefit from a proportionate and streamlined approach to information governance and security within the Health Board, which currently can hinder assessment of, and confidence to adopt, digital tools."*
- *"Analogue to Digital of Community Alarm – This is a large piece of work is to be completed over the next 6 years and we are currently undertaking a scoping exercise to inform this changeover. We are also seeing a gradual increase in the number of people supported by home mobile health monitoring opportunities."*
- *"We direct people towards NHS INform and ALISS which is a database of national and local resources people can access for support etc. We also use a number of apps such as My Stroke Life, My Diabetes My Way etc so that people can manage their own conditions and self-care with our support."*
- *"Plans for this year on access to teleclinics for people so that they can be more self-reliant and do not need to travel (funded) to hospital appointments when they could link in from home or a health and care centre. Development of Attend Anywhere/ Near Me options specifically in relation to mental health."*



# Remote and Assistive Care

## Sample of free text comments received

- *"Tele health-care - we have some patients who can use remote device technology to monitor their diabetes, BP monitoring or COPD for example. Analysis of the benefit since January this year has shown that 93% of people to whom Telecare responses are provided, are not admitted to hospital."*
- *"Tele conferencing, video, skype etc are all used regularly to communicate and collaborate, though there remain hardware issues pending a corporate device refresh due in 2019, with many social care staff on thin client devices that cannot utilise Skype."*
- *"There are 3000 users of telecare community alarms. We also have in place movement sensors, door sensors, falls mats and bed monitors to check for falls from bed etc. We also have GPS monitors in place. We have some patients who can use remote device technology to monitor their diabetes, BP monitoring or COPD for e.g. OPAL telephone signposting service is also in place."*
- *"Supportive apps are being promoted for long-term health conditions."*
- *"The Council is currently testing Microsoft Teams which could be used for the sharing of professional advice and guidance in future."*



# Remote and Assistive Care

## Sample of free text comments received

- *"Apps are not generally used at the moment, however there is a plan to introduce the Viewpoint app for looked after children and young people to be able to share their views. This will be piloted with young people in some residential and fostering services."*
- *"The main Telecare service is currently analogue, but there is a current project for the digitalisation of the service."*
- *"The current alarms technology is responsive, and has monitoring capabilities in relation to falls, inactivity, epilepsy, bed/chair occupancy, enuresis and risk of wandering. These trigger calls to the alarms centre, which are recorded."*
- *"Using Mind Of My Own app to support client voice in care planning for looked after children."*
- *"The use of Mangar lifting cushions enables the TEC service to assist uninjured fallers off the floor following a fall. Previously we would in certain instances have called on paramedic assistance from SAS."*
- *"ARMED system is currently being trialled, Florence (blood pressure) also being trialled"*



# Remote and Assistive Care

## Sample of free text comments received

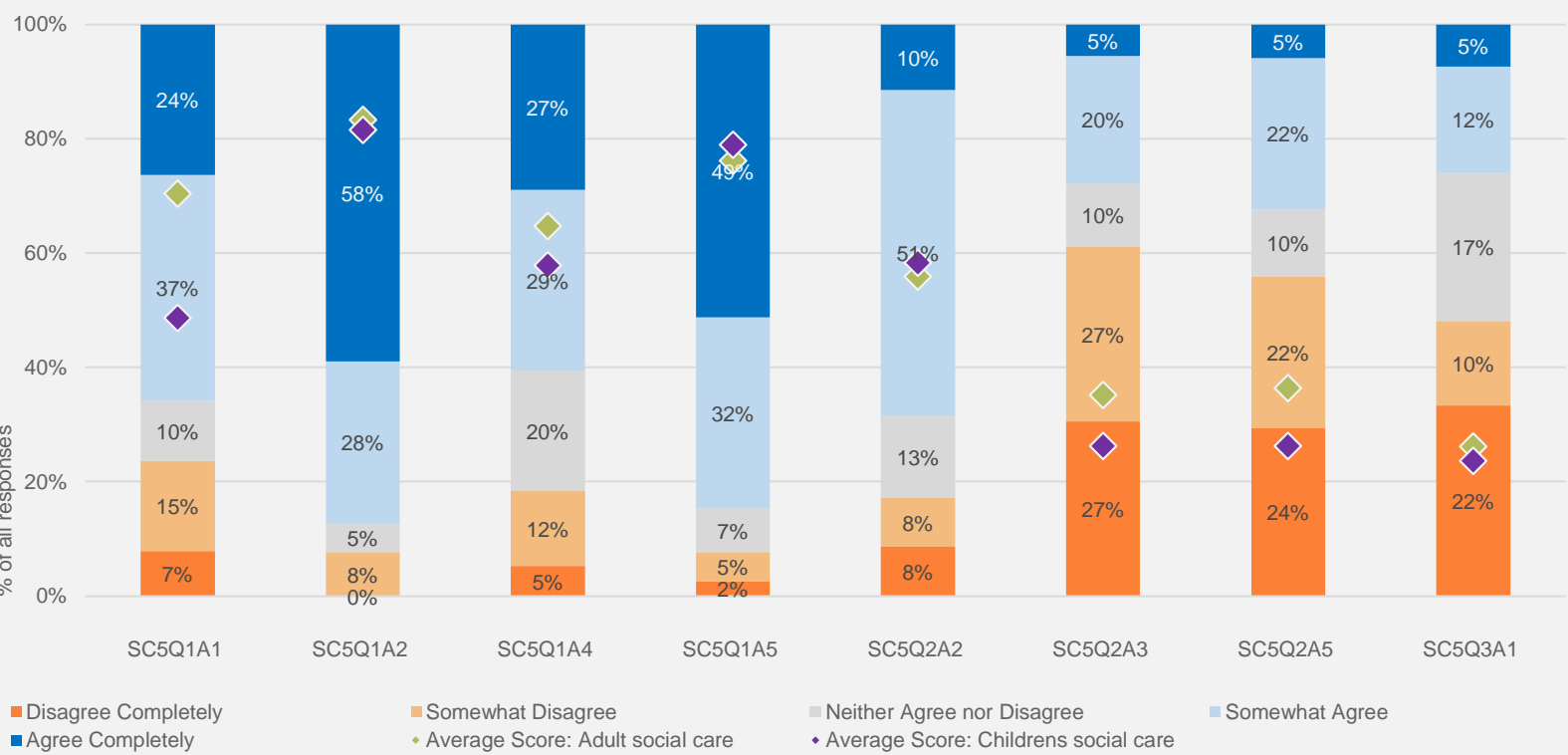
- *"Technology Enabled Care Service (TECS) provides an accredited alarm service to approx. 3600 residents. Many of our service users are the most vulnerable residents with 68% female service users to 32% male service users. 37% of all our service users are aged between 75-84 age band, 36% 85 years and over. The service receives referrals from a range of referrer, including, Police, Scottish Fire & Rescue Service and health professionals.*
- *Following receipt of the referral the TECS staff complete the assessment procedure for a basic alarm installation or a more detailed assessment for where a risk requires the installation of an enhanced telecare package including sensors (smoke detectors, heat detectors, flood detectors, bed sensors, fall detectors, door contacts, pill dispensers, pressure mats, PIR, safe walking devices, or activity monitoring). The alarm is programmed to call the alarm receiving centre (ARC) who are commissioned by TECS to provide call handling.*
- *The technology provides a tool to provide evidence of the demand to remain independent at home. However once risks are identified as too great in supporting this independent living evidence can be gathered via a calls history in relation to the activations from the TEC installation that provide evidence of a need for allocation of a care home placement."*





# Decision Support

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Decision Support  
N/A and Don't Know omitted.



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC5Q1A1    | Digital systems alert Social care professionals to: The existence of client preferences  | 2%         | 5%  |
| SC5Q1A2    | Digital systems alert Social care professionals to: Specific client risks  |            | 3%  |
| SC5Q1A4    | Digital systems alert Social care professionals to: Records which are due to expire so these can be actively monitored   | 2%         | 5%  |
| SC5Q1A5    | Digital systems alert Social care professionals to: Relevant operational information about clients   | 2%         | 2%  |
| SC5Q2A2    | Digital systems support Social care professionals by: Providing automatic prompts to complete missing information or remind clients about overdue care actions |            | 10% |
| SC5Q2A3    | Digital systems support Social care professionals by: Providing digital alerts, to start or suspend care services in near real-time                            | 2%         | 10% |
| SC5Q2A5    | Digital systems support Social care professionals by: Supporting multidisciplinary discharge planning and social care notifications                            | 10%        | 7%  |
| SC5Q3A1    | Your organisation monitors the overruling of decision support prompts and the reasons recorded   | 17%        | 17% |



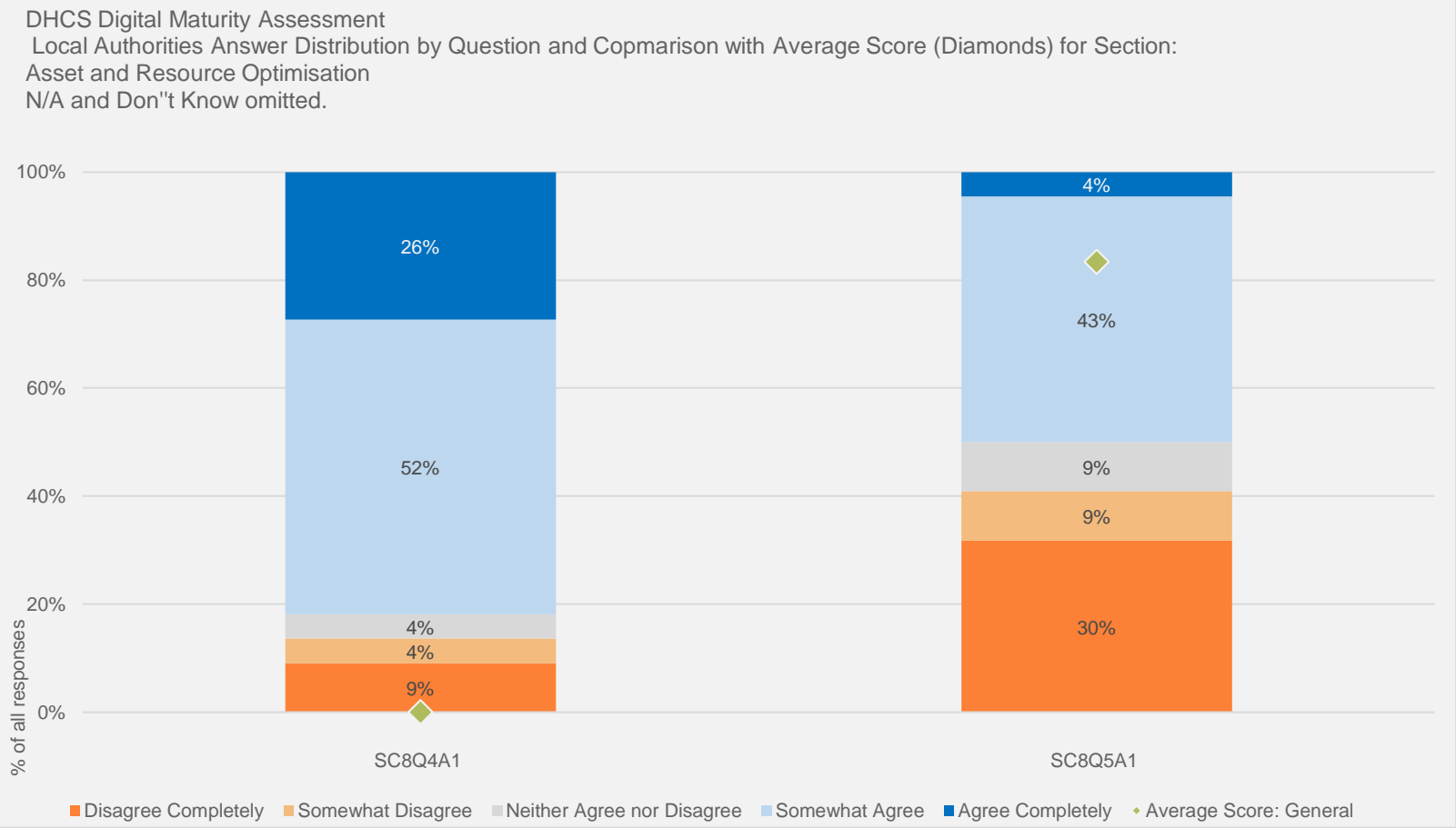
# Decision Support

## Sample of free text comments received

- *"Digital alerts exist for risk to life (hazards) , but not to start or suspend care services in real time. Workers need to regularly check their digital task lists for updates."*
- *"Social Care professionals can remotely access key applications which include service user preference information. The systems also contain risk assessments, and in the case of careFirst has warning flags for specific risks. There is limited functionality for records management across current systems."*
- *"The social care system provides prompts and alerts where recordings are mandatory in assessments, actions are overdue, warnings have been recorded. Auto sharing of significant events to the pan-Ayrshire system supports multi-agency notifications."*
- *"Children records are actively monitored through the use of Boxi reporting. The current systems do not provide functionality which supports prompting or alerting of missing information or expiry."*
- *"The system has limited capabilities but does have the facility for staff to manually add alerts/prompts/reminders."*
- *"Staff can have access to multiple systems on their hybrid tablets during multi-disciplinary discharge planning meetings, but meetings are usually conducted using paper reports from social work staff and verbal inputs from other professionals. Some notifications to professionals would be via email and some on paper. Decision prompts don't exist in any of our systems."*
- *"While our case management system can and does capture key information on risks, operational info, and provides alerts. it is nonetheless dependent on professionals in providing/completing relevant info, hence some scope for improvement. There are still a number of process/procedural aspects which are manual in nature, and only retrospectively input to the case management system, hence cannot be considered digital at this time."*



# Asset and Resource Optimisation



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC8Q4A1    | Your organisation uses digital systems to manage social care staff rostering.                            |            | 4%  |
| SC8Q5A1    | Location tracking is used for dynamic worklist management of social care staff working in the community. |            | 4%  |



# Asset and Resource Optimisation

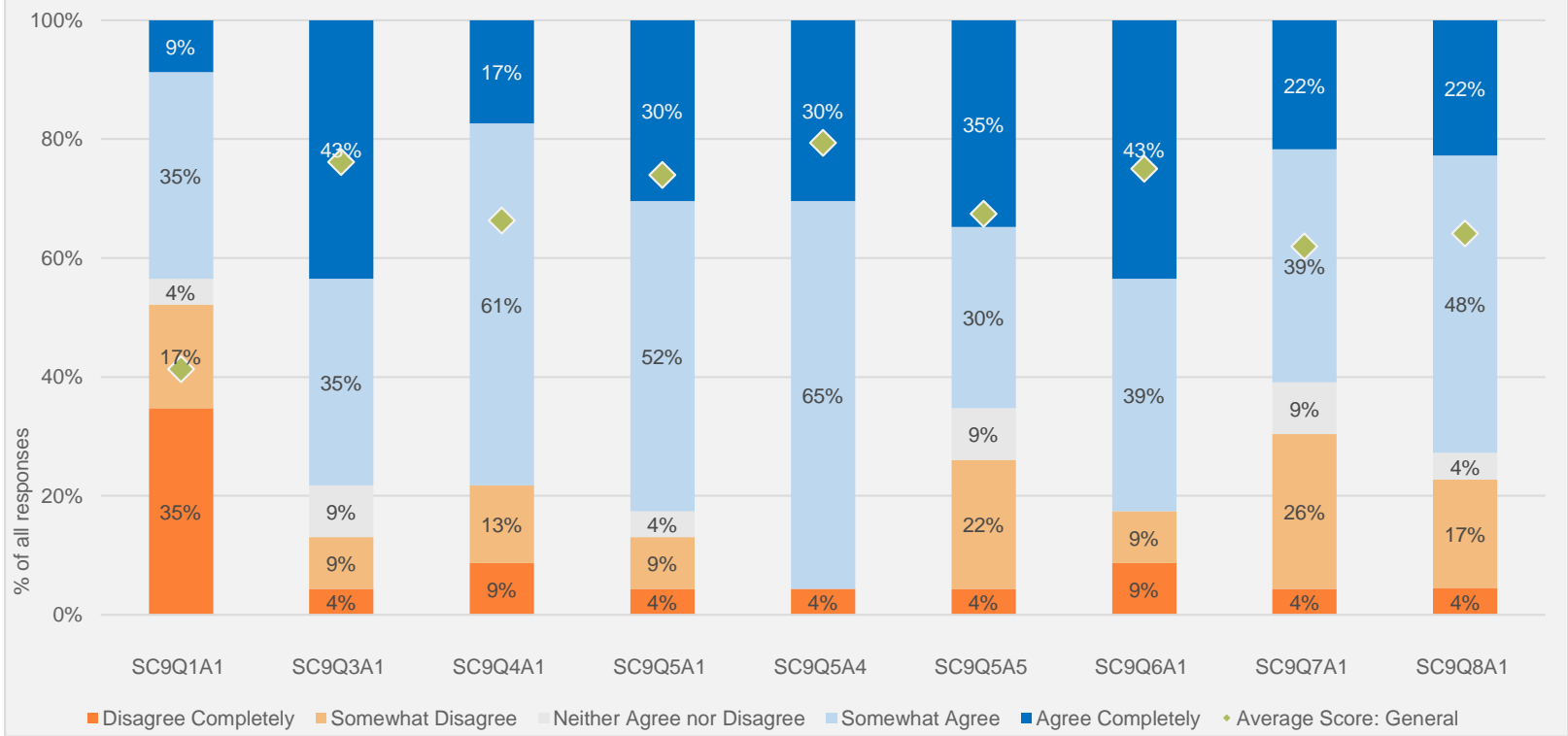
## Sample of free text comments received

- *"Exploring the true potential of digital solutions for mobility and flexibility are at the heart of the Digital Strategy for all services across Council and HSCP. "*
- *"The eRouter application manages rostering for Home Care staff who came in to the Partnership in Oct 2018, but the current functionality only schedules and does not optimise. In Adults and Children's residential and day services rotas are currently managed on spreadsheets, but both services are keen to have more efficient ways of managing this."*
- *"RFID Tags used in home locations for staff to swipe to acknowledge visit"*
- *"Our Care at Home services utilises a monitoring and scheduling system for managing staff workloads. This enables active monitoring of service provision per location and alerts when a service has not been provided on time."*
- *"Project now started to implement CM2000."*
- *"Location tracking is used only in our Care at Home section, for staff who provide care to clients at home."*



# Business and Clinical Intelligence

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Business and Clinical Intelligence  
N/A and Don't Know omitted.



| Question # | Question   | Don't Know | N/A |
|------------|--|------------|-----|
| SC9Q1A1    | Management teams have access to real time, or near real time, dashboards displaying information about the performance of the services they manage.                           |            |     |
| SC9Q3A1    | Social care professionals have access to real time, or near real time, information about their caseload and clients under their care.  |            |     |
| SC9Q4A1    | Data quality information is actively monitored and fed back to social care teams.  |            |     |
| SC9Q5A1    | Data collected as part of social care activities is used for: Building capacity and demand forecasting models within your organisation                                       |            |     |
| SC9Q5A4    | Data collected as part of social care activities is used for: Analysis supporting service planning and improvement   |            |     |
| SC9Q5A5    | Data collected as part of social care activities is used for: Supporting internal and external research  |            |     |
| SC9Q6A1    | Your organisation shares data on social determinants of health.  |            |     |
| SC9Q7A1    | Your organisation's data is available for local population health initiatives to support the identification of client cohorts for enhanced care management and intervention. |            |     |
| SC9Q8A1    | Outputs from local population health initiatives support the organisation's ongoing service design and prevention activities.  | 4%         |     |



# Business and Clinical Intelligence

## Sample of free text comments received

- *"Real-time information is available through reports which are automatically scheduled. At present these do not take the form of 'dashboards'. There is significant opportunity to move toward better live reporting through Liquid Logic."*
- *"The IJB is developing a performance dashboard across community and acute based service areas. A previous application for external resources to support development of a virtual live dashboard for patient/service users requiring care investment to prevent crisis or support discharge have been refused but would be revisited if the opportunity existed."*
- *"We have introduced locality based data dashboards showing strategic level data to display performance and needs for the public. We can see the benefit of shifting from data packs for service managers to real time dashboards but resources are not available to progress this."*
- *"Local Hubs and Clusters receive weekly social care reports on their waiting lists and activities."*
- *"Social Care Professionals have access to real time clients/caseload information through SWIFT."*
- *Data sharing on social determinants of health is good e.g. Joint strategic needs assessment to aid in the update of the Strategic Plan."*
- *"Management teams and staff have access to some dashboard type information within systems, but mainly access management, workload, data quality and other information from reports, either directly from systems or via Business Objects. Staff can access reports at any time using a range of parameters and they are either real time or near real time."*



# Business and Clinical Intelligence

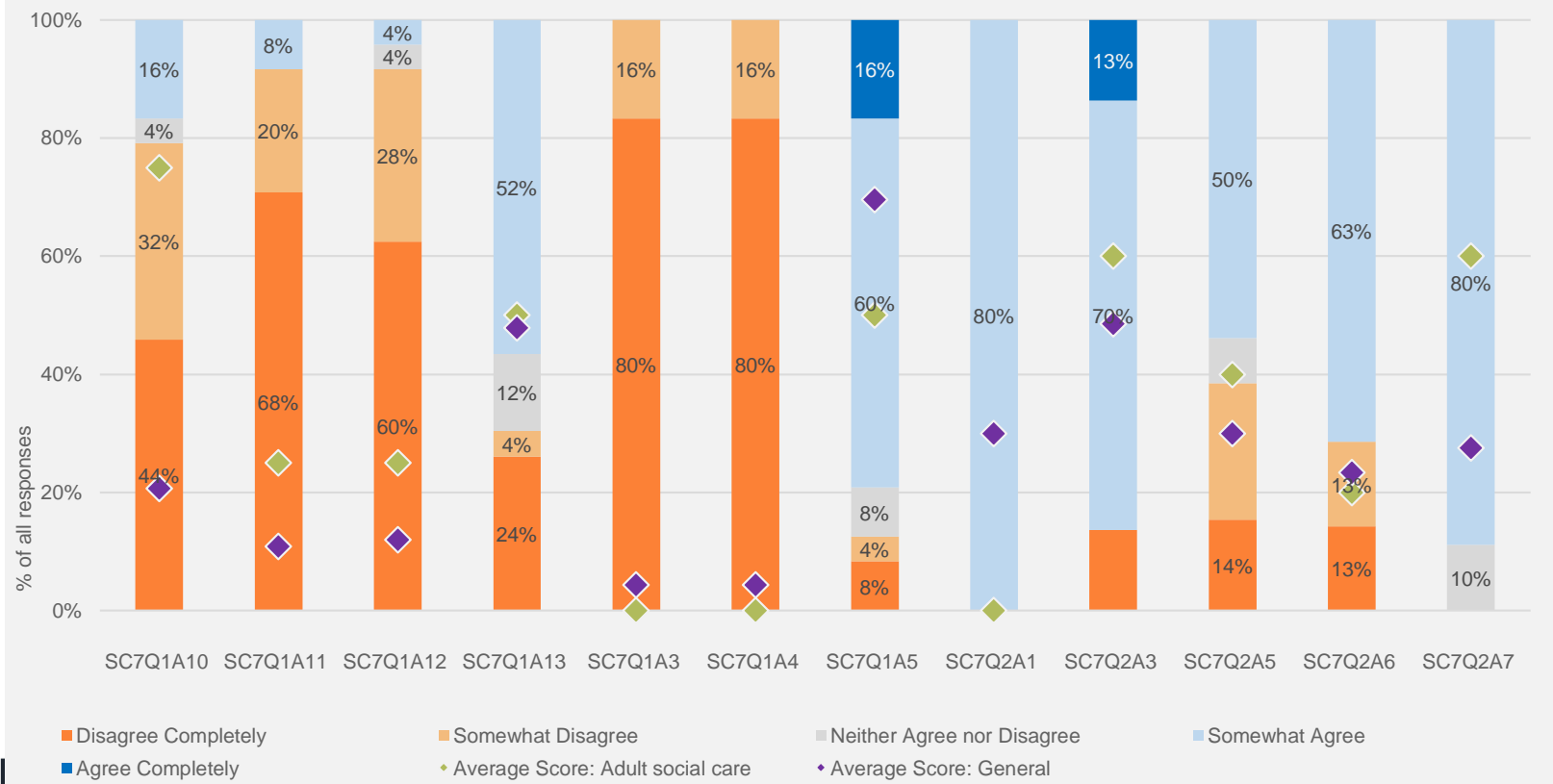
## Sample of free text comments received

- *"Improving health and care services and population health is a key strategic priority of the Partnership and drives service design and prevention activities on an ongoing basis. Data is utilised from health, social work and partner agencies to support this."*
- *"This is a major workstream in development - have prototype dashboards and are finalising governance."*
- *"Information development and provision is actively pursued within the service and provided via scheduled reporting from the main social care system. Dedicated performance officers regularly perform data analyses and attend service management meetings to discuss the information provided and identify potential for improvement data quality aspects associated with recordings and processes."*
- *"All social care worker professions can view their case load via CareFirst. Workers case loads are also available to managers to monitor."*
- *"Social work data is reported upon regularly through ongoing operational reporting at local level, as well as in quarterly and annual performance reports. These are used to inform service planning activities including the development of care group Transformation Programmes."*
- *"There is a Head of Health Improvement within the Partnership who links closely with the Health Board's Public Health Department and supports the production of a range of reports including the Director of Public Health Report and Health and Wellbeing Surveys."*



# Digital Channels

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Digital Channels  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SC7Q1A10   | Your organisation provides digital facilities that allow clients to: Complete self-referrals online   | 4%         |     |
| SC7Q1A11   | Your organisation provides digital facilities that allow clients to: Complete online self-assessments of social care needs  | 4%         |     |
| SC7Q1A12   | Your organisation provides digital facilities that allow clients to: Perform a calculation of their self-directed support budget online, complete an online financial assessment, manage direct payments online and purchase care online.   | 4%         |     |
| SC7Q1A13   | Your organisation provides digital facilities that allow clients to: Obtain support to improve their access to and use of digital services.   | 4%         | 4%  |
| SC7Q1A3    | Your organisation provides digital facilities that allow clients to: View or download information from your organisation's main social care record.   | 4%         |     |
| SC7Q1A4    | Your organisation provides digital facilities that allow clients to: Electronically update or upload relevant information about them to their main digital healthcare record.   | 4%         |     |
| SC7Q1A5    | Your organisation provides digital facilities that allow clients to: Access up to date details of services offered, including contact details   | 4%         |     |
| SC7Q2A1    | Your organisation provides digital facilities that allow carers and advocates to: Electronically update or upload relevant information about their clients to their digital health or care record   | 20%        |     |
| SC7Q2A3    | Your organisation provides digital facilities that allow carers and advocates to: Access up to date details of services offered, including contact details.   | 4%         |     |
| SC7Q2A5    | Your organisation provides digital facilities that allow carers and advocates to: Complete self-referrals on behalf of their clients online   | 7%         |     |
| SC7Q2A6    | Your organisation provides digital facilities that allow carers and advocates to: Complete online self-assessments of social care needs on behalf of their clients.   | 13%        |     |
| SC7Q2A7    | Your organisation provides digital facilities that allow carers and advocates to: On behalf of the person they care for, perform a calculation of self-directed support budget online, complete an online financial assessment, manage direct payments online and purchase care online. | 10%        |     |





# Digital Channels

## Sample of free text comments received

- *"There is no currently facility for service users, carers or advocates to do a self-assessment on line - they can only make a referral outlining the needs. The Your Support Your Way website has functionality which can allow self assessments and calculations of self-directed support budgets, and financial assessments online, and transfer the assessments into careFirst, but this has not yet been implemented."*
- *"Approximately 500 Direct Payment service users are about to have payments managed online via payment cards. Roll out of this service is scheduled for late June 2019."*
- *"There is no facility for service users to download information. We had a pilot of making service user information available to service users as part of the Modernising Government Fund 2 in 2005, but there has not been funding available thereafter."*
- *"We have an online facility for referrals, but these come in to us on email and are then typed by staff in Social Care Direct into relevant systems."*
- *"A public-facing information portal is in place, developed at the time of implementation of Self Directed Support legislation. There are plans to link this with NHS Inform and ALISS. Liquid Logic offers considerable additional functionality for citizens to view and update their record, self-refer or self-assess."*



# Digital Channels

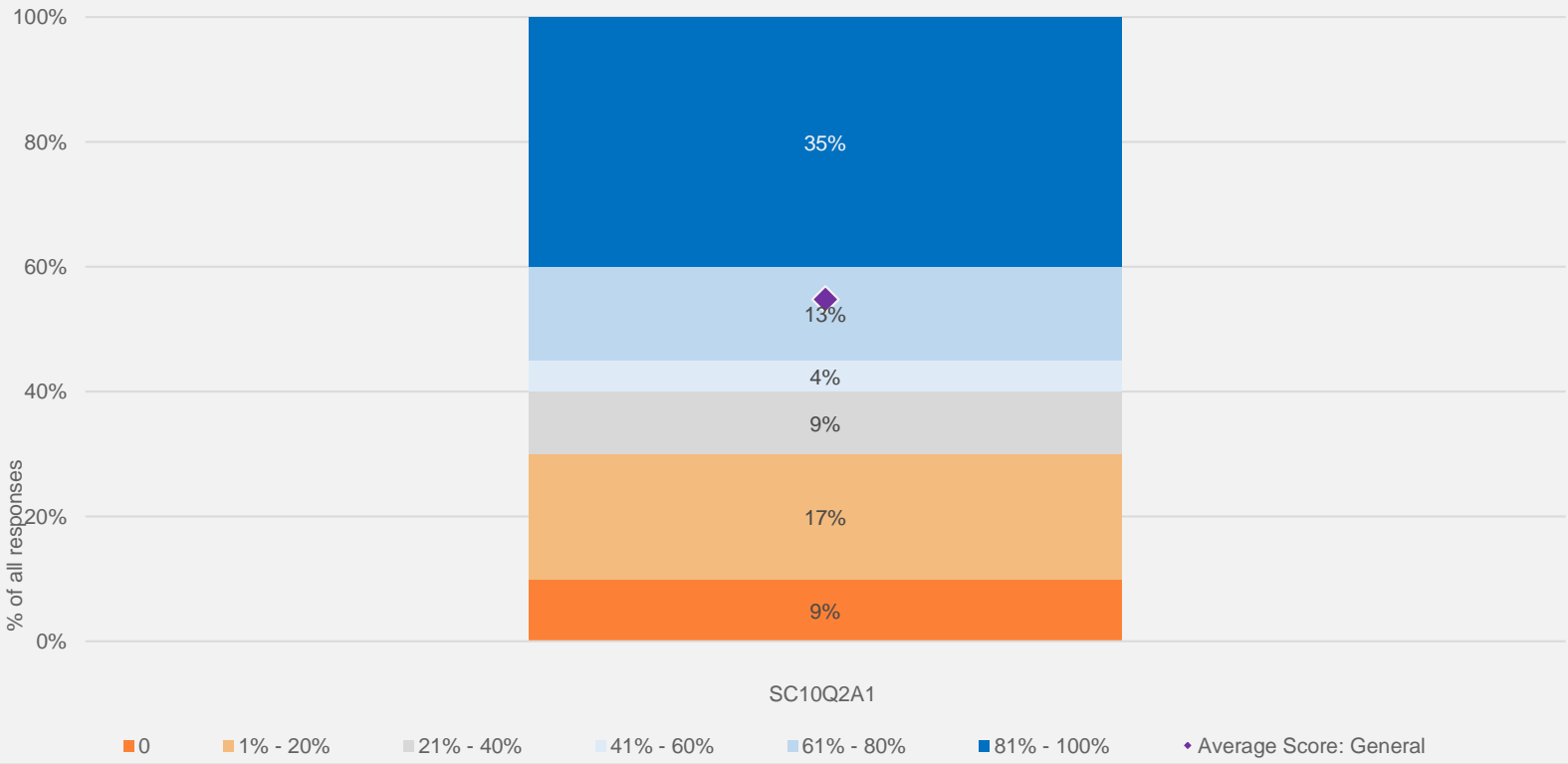
## Sample of free text comments received

- *"No access to digital records/technologies for clients, other than general access to information on services and resources via the Council website."*
- *"Online self referrals are not available, however, there is an online facility which people can access which then allows a call back service, where the person would be contacted to make a referral."*
- *"A range of staff provide assistance to service users to access and use digital services, in particular in relation to housing requests and Universal Credit. Our Leaving Care Services Team have college staff co-located with them and a classroom environment for the delivery of digital based learning. Similarly our Intensive Services have teachers and classrooms equipped with PCs for digital based learning. Our Digital Resilience programme is making ICT equipment and a new filtered internet service available to children and young people in our provided residential houses and the Education, Learning and Digital Skills workstream within that programme is working with a range of partners to provide support to young people, staff and carers to improve their digital skills and access to digital services."*



# Standards

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Copmarison with Average Score (Diamonds) for Section:  
Standards  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SC10Q2A1   | What proportion of active social care clients is the CHI number matched and verified for? | 9%         | 4%  |



# Standards

## Sample of free text comments received

- *"CHI matching is in place for Adults but not for Children."*
- *"CHI is recorded where interaction is identified with those who have a number. More predominant in Older People's care. Where a CHI is provided it is practice to record this however not all service users will have a CHI number."*
- *"This is the second CHI matching exercise we have undertaken with ISD and we also have business as usual processes for adding CHI numbers for new service users. CHI numbers are not recorded on the iWorld system (homelessness)."*
- *"It is possible to record CHI within a field in the social care demographics record but this is only manual completion. We have tested CHI seeding of our test database and this went well but require a software upgrade to make this routine and rollout the quality assurance process required from overnight matching through NSS."*
- *"Our assessment processes require the attempt to obtain the CHI and we have an agreement to pass key demographic information to NHS for attempted automatic CHI matching of service user records. We also have a means to upload matched CHI to our primary social care system which our ICT service can perform."*
- *"Ongoing migration to CareFirst will increase percentage of CHI number."*
- *"Plans are in place to seed Mosaic with CHI numbers."*



# Key messages - Capabilities

01

## RECORDS, ASSESSMENTS AND PLANS

- Approximately three quarters of respondents agree completely, or somewhat agree, that social care professionals rely on digital care records and can find what they need quickly and easily without having to log into multiple systems.
- It was frequently commented that there was very limited interoperability between health and social care systems and it was common for staff working as part of an integrated team to need to log onto systems separately.
- 24% of respondents disagree completely, or somewhat disagree, that social care professionals are able to update digital records at the point of care.
- Paper records are still widely used at the point of care in clients' homes. This reflects limited connectivity in some areas, inability to access systems and update data on a mobile device or, in some cases, is the organisation's preferred way of working.
- 57% of respondents disagree completely, or somewhat disagree, that social care information is collected and recorded once. Several respondents commented on the need for staff to have to log into different systems and duplicate data entry in separate health and social care systems. Social care professionals may also need to document on paper in clients' homes and subsequently replicate this information digitally when back at base.
- 56% of respondents disagree completely, or somewhat disagree, that they have access to information required from other social care professionals and 70% disagree completely, or somewhat disagree, that they have access to information required from healthcare providers.



# Key messages - Capabilities

02

## TRANSFERS OF CARE

- 79% of respondents agree completely, or somewhat agree, that safe handovers of care for children transitioning to adult care services are undertaken digitally.
- It was noted that this was often facilitated by use of a single digital system for both adult and children's social care services.

03

## REMOTE AND ASSISTIVE CARE

- 52% of respondents agree completely, or somewhat agree, that social care professionals are able to contribute to multidisciplinary discussions about patients and clients with health and social care colleagues using digital technologies.
- 69% of respondents agree completely, or somewhat agree, that their organisation supports clients to remain independent at home, and monitors those at risk of deterioration, through the use of technology enabled care services.

04

## DECISION SUPPORT

- With the exception of providing alerts about specific client risks the digital social care systems in use offer limited decision support.

05

## ASSET AND RESOURCE OPTIMISATION

- 78% of respondents agree completely, or somewhat agree, that their organisations use a digital rostering system for social care staff.
- Almost half of respondents agree that their organisation uses some form of location tracking to support community based staff working processes.
- Some respondents commented on the use of radiofrequency ID tags to acknowledge staff attendance in homes.



# Key messages – Capabilities

06

## BUSINESS AND CLINICAL INTELLIGENCE

- 78% of respondents agree completely, or somewhat agree, that social care professionals have at least near real-time access to information about caseloads and clients under their care.
- 82% of respondents agree that their organisation shares information about social determinants of health to support population health management and 95% agree that data collected as part of social care activities is used for capacity and demand forecasting.
- Availability of dashboards or reports to show linked health and social care metrics appears to vary across the country. Several respondents noted the interest to progress this further but lack of resources or funding was a limiting factor.

07

## DIGITAL CHANNELS

- 76% of respondents agree completely, or somewhat agree, that they provide clients with digital access to details of services offered.
- 76% of respondents disagree completely, or somewhat disagree, that they provide an online self-referral service and 88% disagree that clients can complete an online self-assessment.
- It was noted that new social systems being implemented offer the potential for citizens to view and update their records, self refer and undertake self-assessments.

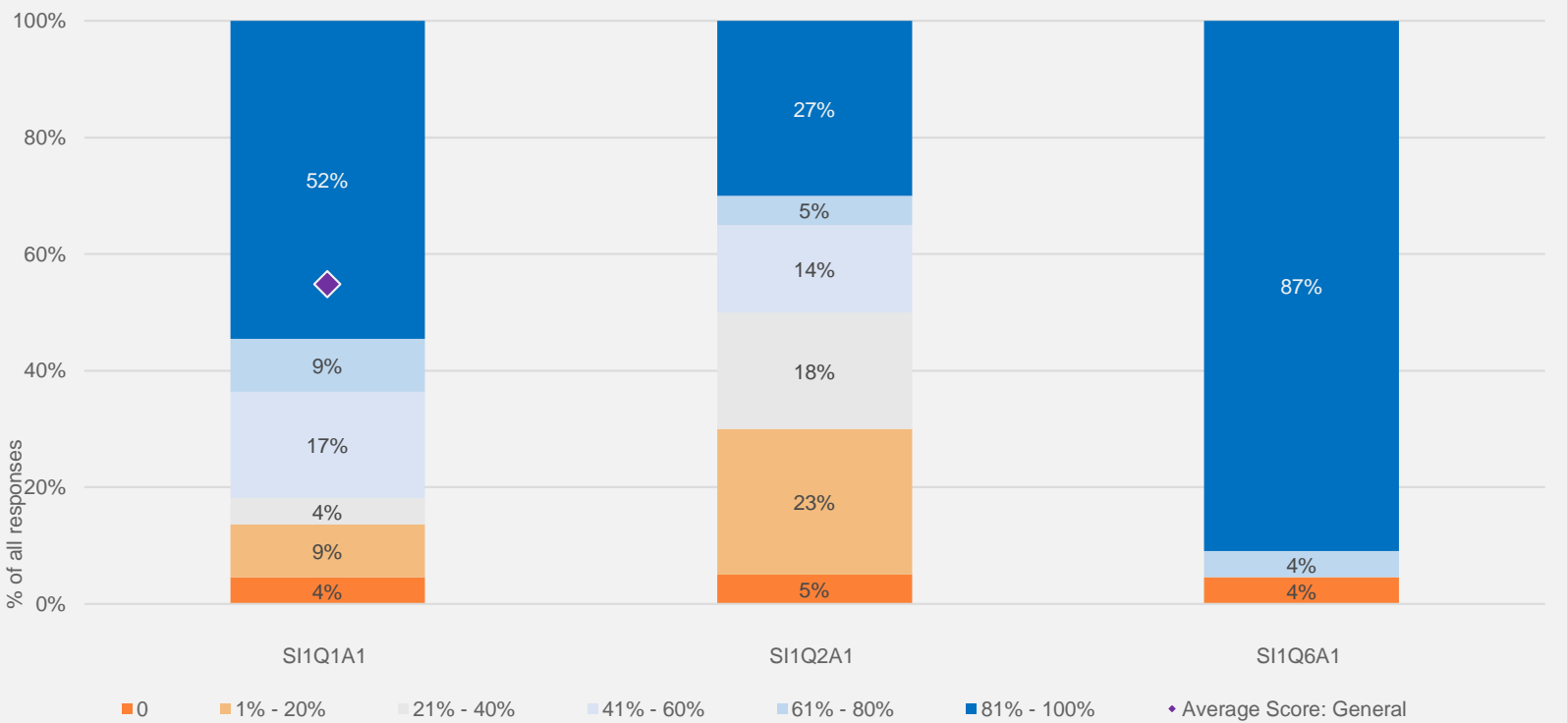
08

## STANDARDS

- 35% of participating organisations have achieved 81-100% CHI number matching for social care clients.

# Enabling Infrastructure

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Enabling Infrastructure  
N/A and Don't Know omitted.



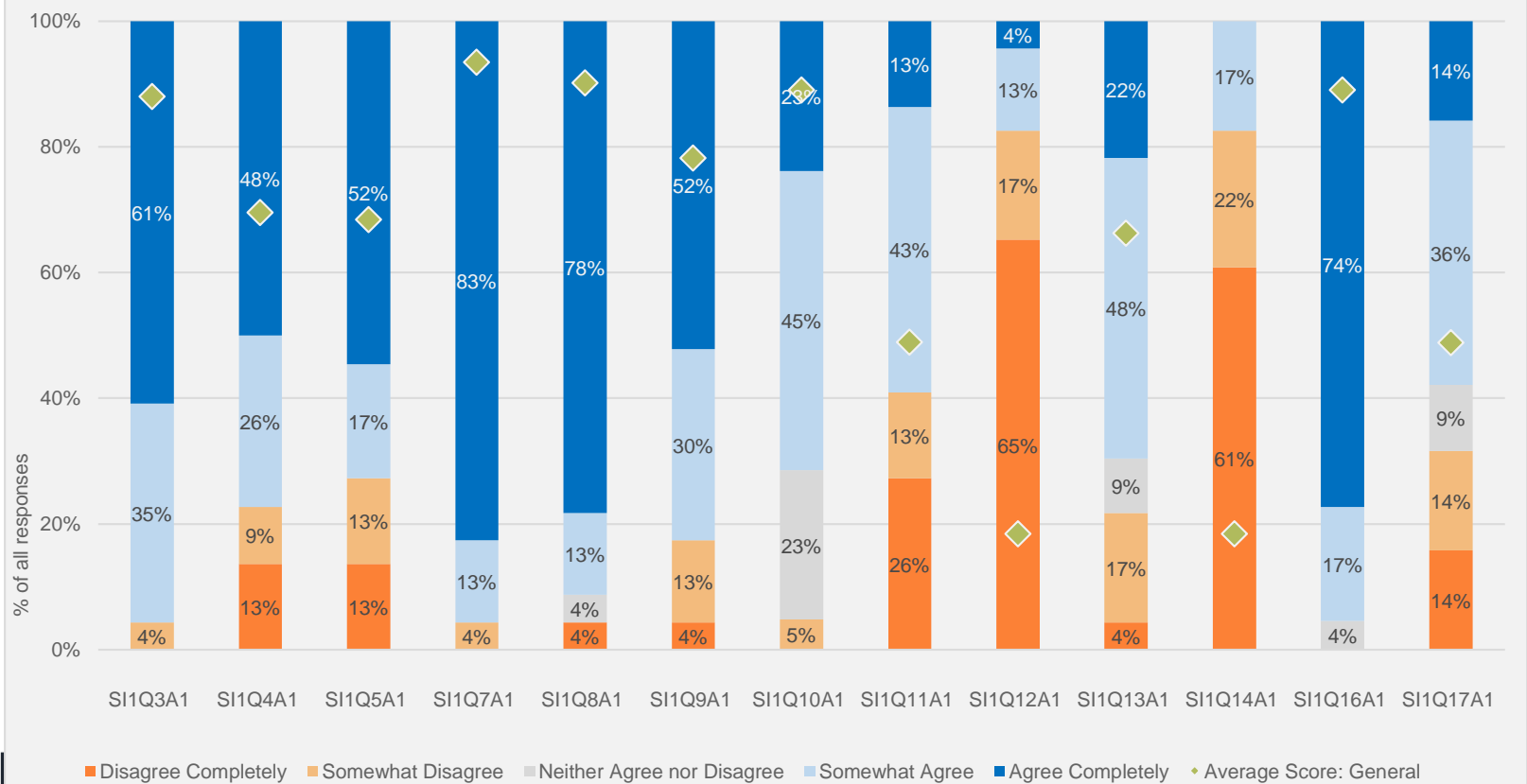
| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SI1Q1A1    | What proportion of social care professionals have wi-fi access to clinical/social care applications in all your main sites?                 | 4%         |     |
| SI1Q2A1    | What proportion of clients have access to free wi-fi in all your main sites?  | 9%         |     |
| SI1Q6A1    | What proportion of social care software installed on devices is still being maintained and updated by its supplier i.e. is still supported? |            | 4%  |





# Enabling Infrastructure

DHCS Digital Maturity Assessment  
Local Authorities Answer Distribution by Question and Comparison with Average Score (Diamonds) for Section:  
Enabling Infrastructure  
N/A and Don't Know omitted.



| Question # | Question  | Don't Know | N/A |
|------------|---|------------|-----|
| SI1Q3A1    | Business-critical social care digital services are supported by documented business continuity and disaster recovery processes, with clear roles and responsibilities assigned. |            |     |
| SI1Q4A1    | Disaster recovery processes for social care critical systems have been tested and audited.  |            | 4%  |
| SI1Q5A1    | Business-critical social care digital services are supported by IT infrastructure with multi-data-centre redundancy.  | 4%         |     |
| SI1Q7A1    | Social care digital services are supported by an IT Service Desk that prioritises incidents using a consistent approach agreed with nominated service users/owners.             |            |     |
| SI1Q8A1    | The IT support Service Desk follows an ITIL-aligned (or equivalent) Incident Management process that lets social care users track issues through to resolution.                 |            |     |
| SI1Q9A1    | Your organisation has a regular refresh and replace policy for all end user technology for social care professionals.   |            |     |
| SI1Q10A1   | Digital systems meet social care users expectations regarding repair and substitution times.  | 5%         |     |
| SI1Q11A1   | Information from your main social care applications is accessible on mobile devices.  | 4%         |     |
| SI1Q12A1   | Your organisation has a bring your own device policy for social care professionals.   |            |     |
| SI1Q13A1   | Digital systems meet users' expectations regarding the time it takes to log-in to social care applications and update/retrieve information.                                     |            |     |
| SI1Q14A1   | Social care professionals have single sign-on access and authentication to clinical/social care applications they require.  |            |     |
| SI1Q16A1   | Social care software license expiries are monitored and the organisation plans forward to ensure the IT environment is adequate and sustainable.                                | 4%         |     |
| SI1Q17A1   | Your social care information systems' key data fields are accessible as structured information via open interfaces.   | 14%        |     |



# Enabling Infrastructure

## Sample of free text comments received

- *"Shared access between NHS and Council staff; investigating appropriate Systems. The service is working with Council and NHS colleagues to improve infrastructure system access and data sharing."*
- *"As part of the Council Agile working programme more offices will have Wifi including those with AHSC staff and a number of staff are likely to be assessed as a "worker type" who requires to be more agile."*
- *"As the new Eclipse Social Care system for Adults and Children programme rolls out more staff will require laptops and this need will be assessed and investment provided late 2019/ early 2020."*
- *"We have in-house developed systems which are still technically supported by our own staff, but we have insufficient staff resource to support them adequately or to develop the required functionality. In addition the underlying platforms (oracle and IBM Notes) are still technically supported but the versions that our software is built on is no longer supported and so needs a major upgrade to be on a supported version."*
- *"In general infrastructure and systems are supported by our corporate IT services and is aligned with best practice. Things like wifi are widely available in all of our buildings but are not used extensively by social services because it is not required in the context of current ways of working."*



# Enabling Infrastructure

## Sample of free text comments received

- *“Establishment of the TEC Board with representation from partners will enable a more joined up approach to the priorities for progression in the coming years, funding opportunities as well as the alignment to the refresh of the Digital Health & Care Strategy.”*
- *“Wi-fi exists only in a few sites (including our 2 main headquarters buildings). Where it exists it is available to Council staff. Our residential homes for older people have Wi-Fi for residents and we have a current project rolling out Wi-Fi to our 20 provided residential houses for children and young people.”*
- *“In any case a very high proportion of staff have mobile data access to allow them to work anywhere there is a mobile data connection. More than 2000 staff have hybrid tablets and 3500 home carers have iPhones. This may mean that even in buildings with Wi-Fi users may use 4G, depending on relative signal strengths.”*
- *“All current systems are vendor supported, but a number are currently several versions behind. CGI are contracted to maintain key systems at N-1 level, and work is ongoing to upgrade key systems this year to required levels.”*



# Enabling Infrastructure

## Sample of free text comments received

- *"There is now a contractual requirement for the refresh of end user computing in the contract, however the majority of end user computing hardware is currently end of life and the supplier are unable to provide replacements, which is leading to operational difficulties. Faults with key applications are prioritised and usually dealt with very quickly, however this is not the case for end user computing hardware for the reasons explained above. Social Care staff can be left without the equipment they need for their jobs for periods of time."*
- *"Performance levels of social care applications and the business intelligence solution for reports from them can vary. This can be due to a variety of factors including issues with communications infrastructure or issues relating to application or data server architecture. These are expected to improve with the implementation of the infrastructure improvements."*
- *"Carefirst and the Council's current corporate ICT contract does not include provision for Disaster Recovery. This was a decision made on the balance of risk, impact, likelihood and cost of providing DR."*
- *"The Council has undertaken a significant programme of network refresh across all its main sites over the past 18 months, therefore giving wifi coverage including guest access."*
- *"All staff with mobile technology would have access to Wi-Fi in core corporate buildings BUT not all staff have mobile devices (laptop) and therefore their access would be through thin client (wired) networked devices."*



# Enabling Infrastructure

## Sample of free text comments received

- *"Our core social care system does not have a mobile app (in development). Digital Services report it is not supported on mobile devices - it renders but they have requested that we don't use it. An associated issue is the model of ownership and access to tablet devices that we would need."*
- *"For information governance, tablets are single user devices thus there is considerable expense in supplying devices to a team as we cannot have a pool for teams working on a rota basis to access, each team member needs one."*
- *"Carefirst resilience is provided via the inherent VMWare built in resilience. This will allow the application servers to be transferred to other hosts in the event of a single host failure. Should it require to be moved to another site then it would be undertaken using VMWare site recovery manager. The resilience model for the databases is to rebuild at another site should a restore on the original system not be available."*
- *"We have thin client via Netscaler for many social work staff which is similar to BYOD eg some social workers can log on to their home PC and get in via netscaler to get a thin client storefront to access their files and systems. This also works via a smartphone. If they are an NHS user on an NHS device at an NHS site their authentication is different, their usernames are different - this is by design and complies with NCSC guidance, PSN and our MOU with the NHS."*



# Which, if any, investments are planned for the next 18 months?

- *"BYOD is being explored. Mosaic Mobile module is to be implemented by September 2019."*
- *"Single sign-on, maintained and supported systems will be addressed with the implementation of Liquid Logic."*
- *"The options around mobility will be explored through the transformation activities. Health checks and utilisation of systems continues to inform future planning. Microsoft 365 pilot will support further scoping of options for the future."*
- *"The contract for the current social care case management system, used by the HSCP and Council's Children's Services, will expire in March 2021. Given the significant work required to introduce a replacement system, a new contract has been awarded and an implementation programme will commence in 2019. The replacement system will provide an opportunity to increase the usability associated to the use of social care systems. The new system will bring the opportunity to explore new functionality, allowing single sign on for social care professionals, which may also deliver a more responsive log in time. Functionality for self service password resets will also be introduced with this new investment, to support and improve the time associated to such tasks. The use of mobile devices to access the new system will also be explored when implementing the new system."*



# Which, if any, investments are planned for the next 18 months?

- *"The Council is currently refreshing its entire ICT user devices during 2019 and early 2020. A business case is also being developed regarding migrating from the existing case management system Carefirst."*
- *"Potential bids to IT transformation fund and Capital Provision for technology enabled care."*
- *"There are digital strategies in both corporate bodies."*
- *"Most social workers were GCSX users and therefore not able to use their own devices. With GCSX not being available we need to decide whether social work users are able to use BYoD."*
- *"The Council is currently replacing the current IT Social Care Solution. The new solution will give us mobile and single sign-on capabilities."*
- *"Community stores system ELMS mobilisation in development. Update of carer payments system - Schedule June/July 19. Domicile care contracted services scheduling monitoring upgrade - Schedule for Live - March 2020. There is hope that both the above systems will be consolidated as part of the new Social Care system."*
- *"There are significant investments within the Council's contract with CGI, which will result in a number of major transformations. The investments are intended to transform our infrastructure through upgrading networks, changing technologies, and focusing on providing a better infrastructure on which to build service provision. Specifically this means upgrading of the Wide Area Network, Local Area Networks and Telephony across the Council Family."*



# What improvements do you need to make which are currently unfunded?

- *"Implementation of strategy and projects."*
- *"Lack of resource mainly impacts the speed with which improvements and changes are rolled out eg update to new social Care system, mobile devices for front line social workers, wifi reciprocity via Gov Roam/ Swan Roam."*
- *"Replacement social care system is required. This is partially resourced but may require additional funding. A move from existing collaboration system (lotus notes) to Office 365 required to facilitate digital working. No funding allocated to this at the moment."*
- *"24/7 IT support, more investment in connectivity in rural locations, integrated systems, mobile devices, training and development for use of digital technology, development of more digital applications, investment in service user access to digital gateways for services."*
- *"Specific resources allocation for new web roster programme. Decision needs to be made on the use of personal devices. New 'mobile ways of working' - allocation of funding and resources."*
- *Wi-Fi is not currently available in all buildings and is not included in the Council's transformation programme. The Council chose not to invest in this some years ago because of the large investment in mobile data. While many staff have mobile data connectivity Wi-Fi would allow for more guaranteed connections in our buildings."*
- *"Chief Digital Officer / Chief Information officer / digital expertise / business analysts."*
- *"A ground breaking approach to connectivity that leverages new additional private sector investment."*





# What improvements do you need to make which are currently unfunded?

- *"Mobile and flexible working - no provision has been made for considering scope to provide greater support for mobile and flexible working, through provision of mobile devices to health and social care staff. Separately the Council is also preparing a business case for migration from its existing case management system to a solution which would be cloud based and support greater mobile and flexible working in future. There have been delays in the hardware device refresh, and across the organisation the devices in place are very aged and hence staff survey feedback has reflected in scores reflective of concerns and suitability of existing infrastructure."*
- *"There is a current bid in place to fund a complete network upgrade, including WAN connectivity and external Internet breakout points. Also roll out an up to date and effective WLAN solution. This is in line with a move to more cloud based services in the future."*
- *"Replace current IT Social Care Solution We run a refresh programme for customers hardware, we have not replaced machines this year due to budget cuts. Installation of SSD's and extra RAM have been utilised to good effect."*
- *"Data integration with NHS (Single view of the person) My access to my data for service users, carers, other professionals Mobile working."*
- *"Wifi access; remote / agile working; service user access."*



# Key messages - Infrastructure

## ENABLING INFRASTRUCTURE

01

- 91% of respondents agree completely, or somewhat agree, that business critical social care systems have business continuity and disaster recover processes in place, with 74% agreeing these have been tested.
- 82% of respondents agree completely, or somewhat agree, that their organisation has a regular refresh and replace policy in place for end user technology used by social care professionals.
- 82% of respondents disagree completely, or somewhat disagree, that their organisation has a bring your own device policy in place for social care professionals. More commonly staff are provided with smart phones or hybrid tablet devices to support working practices. It was noted that this resulted in considerable cost.
- Some respondents commented that resources were not available to support in-house developed system or develop new functionality required.
- Although the vast majority of software used by social care professionals is still supported by the supplier some respondents commented that their organisations had unsupported software and that staff were using systems that were several versions older than the current one.
- Some end user hardware was also noted to be at end of life, with challenges replacing it in a timely manner.



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Summary of Key Messages

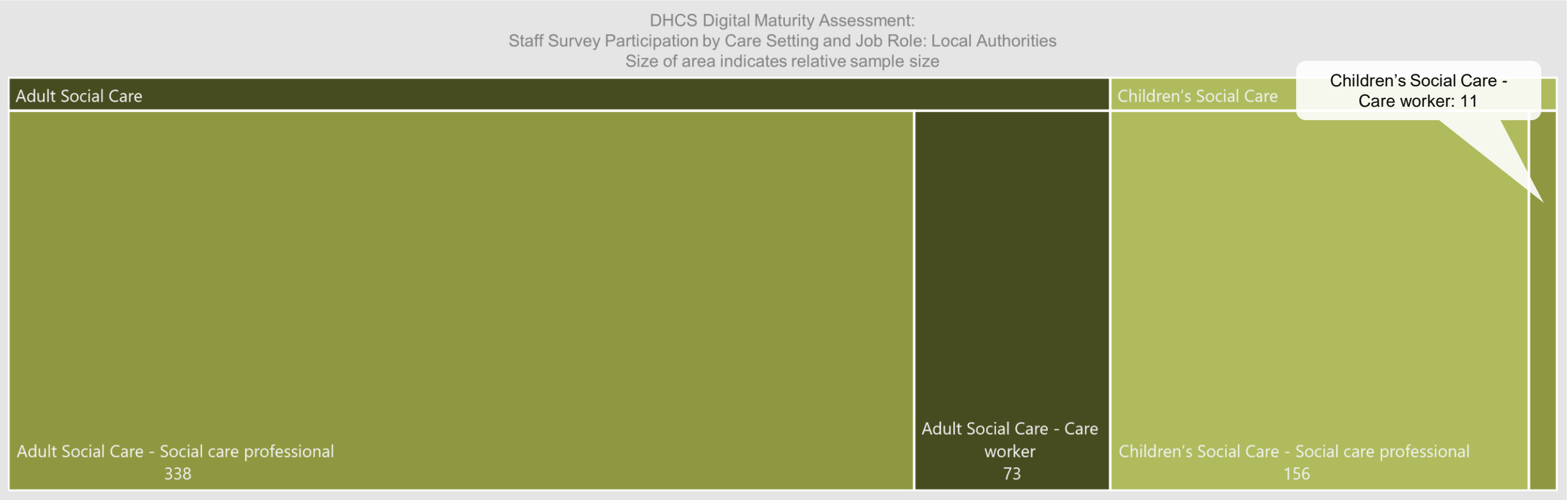
List of Participating Organisations

# Staff Survey



# Staff Survey Response Counts

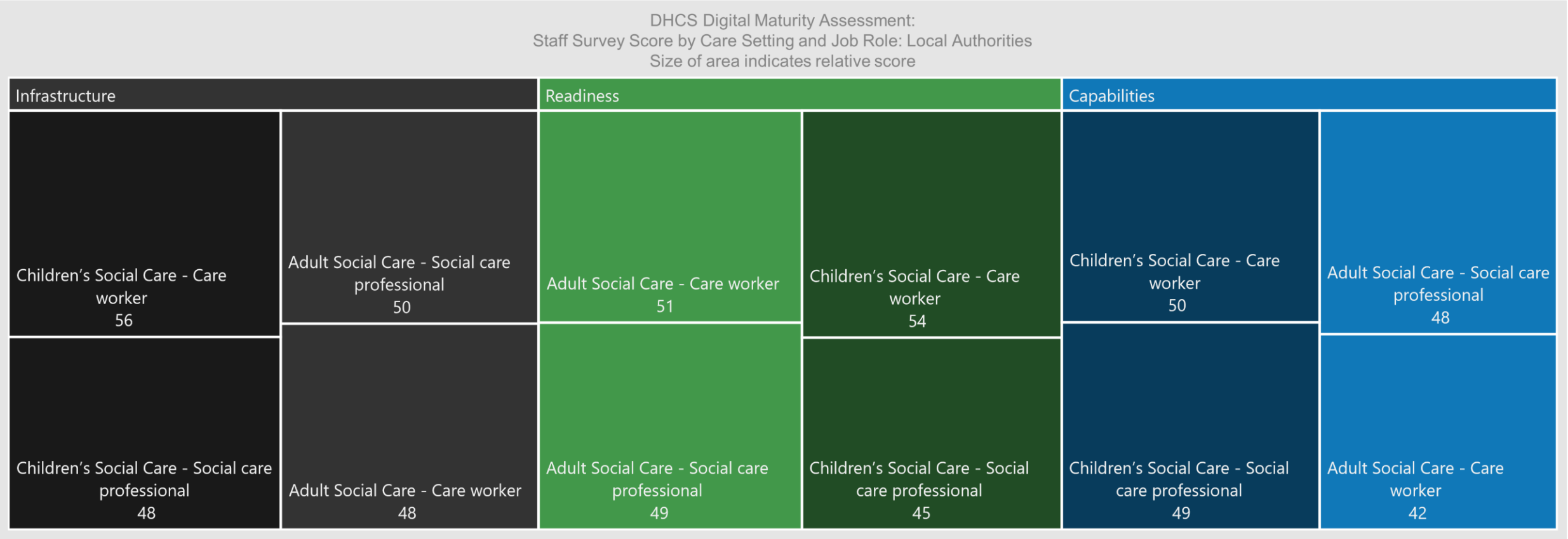
The staff survey was completed by 578 social care professionals and care workers.



Social care could assign themselves to more than one care setting. Responses from staff allocated themselves to “other” roles have been excluded.

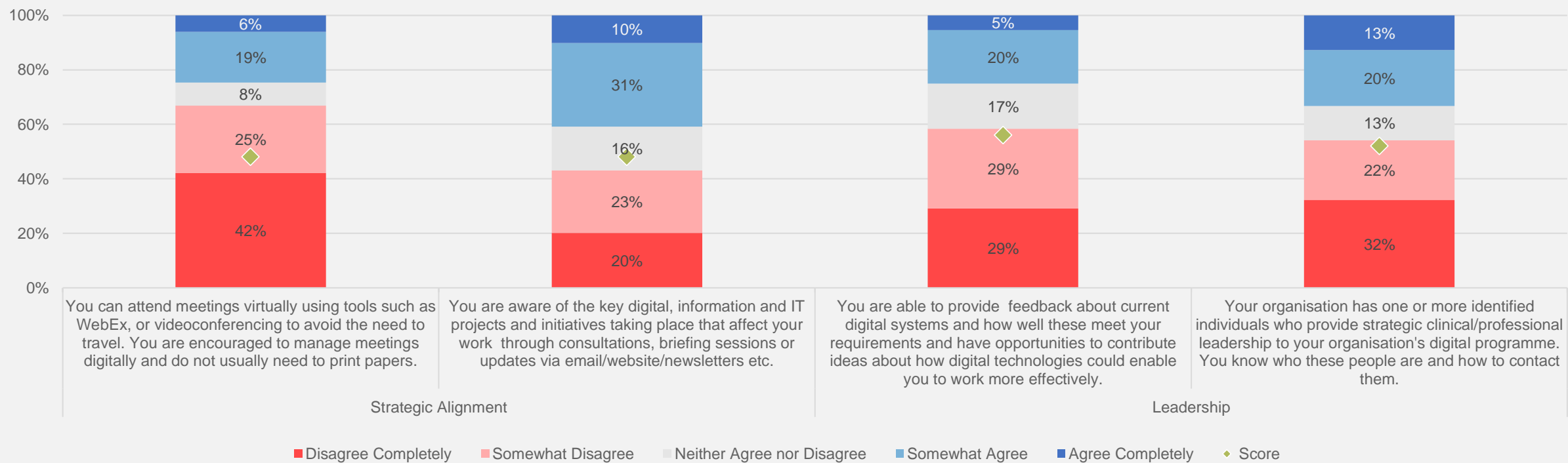
# Staff Survey Results by Care Setting and Job Role

There was no real difference between staff survey scores by care setting or role.



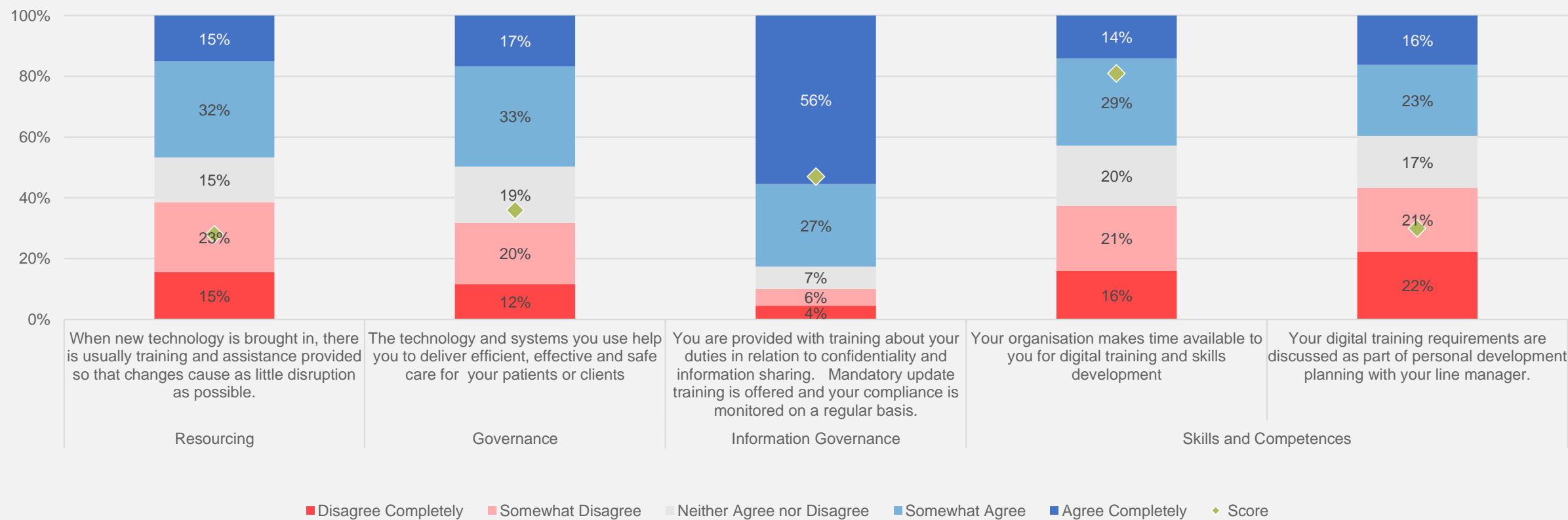
# Staff Survey Answer Distribution and Scores

Staff Survey Answer Distribution by Section - Local Authority  
Comparison with staff Survey section score (diamonds). N/A and Don't Know omitted



# Staff Survey Answer Distribution and Scores

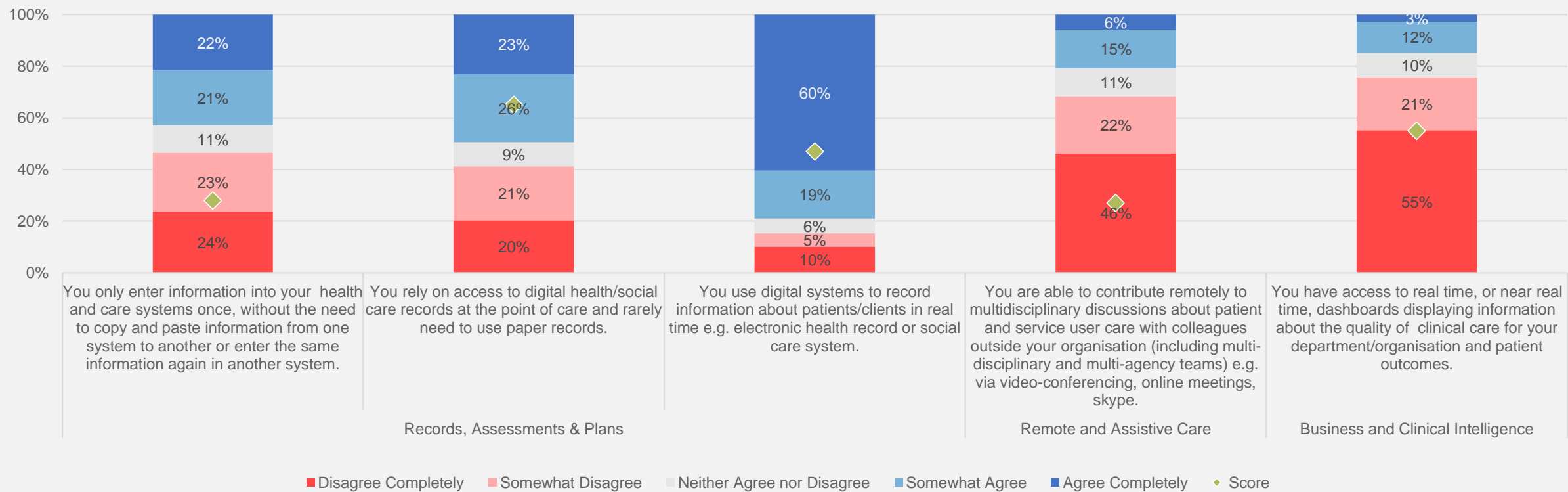
Staff Survey Answer Distribution by Section - Local Authority  
Comparison with staff Survey section score (diamonds). N/A and Don't Know omitted





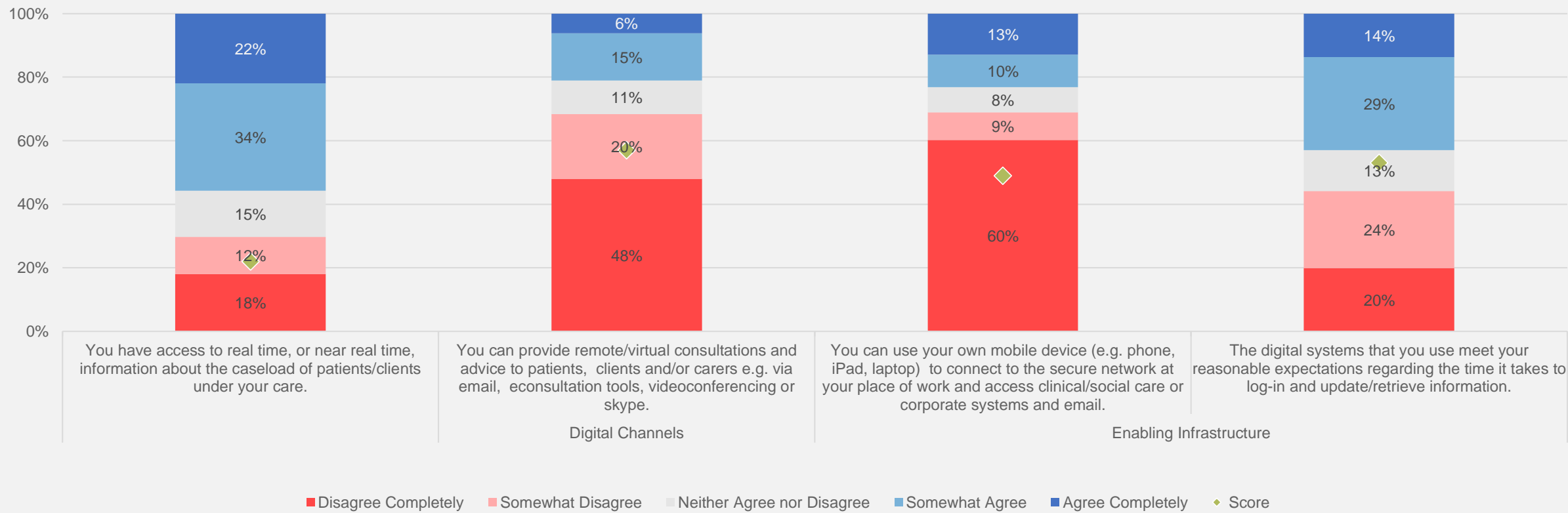
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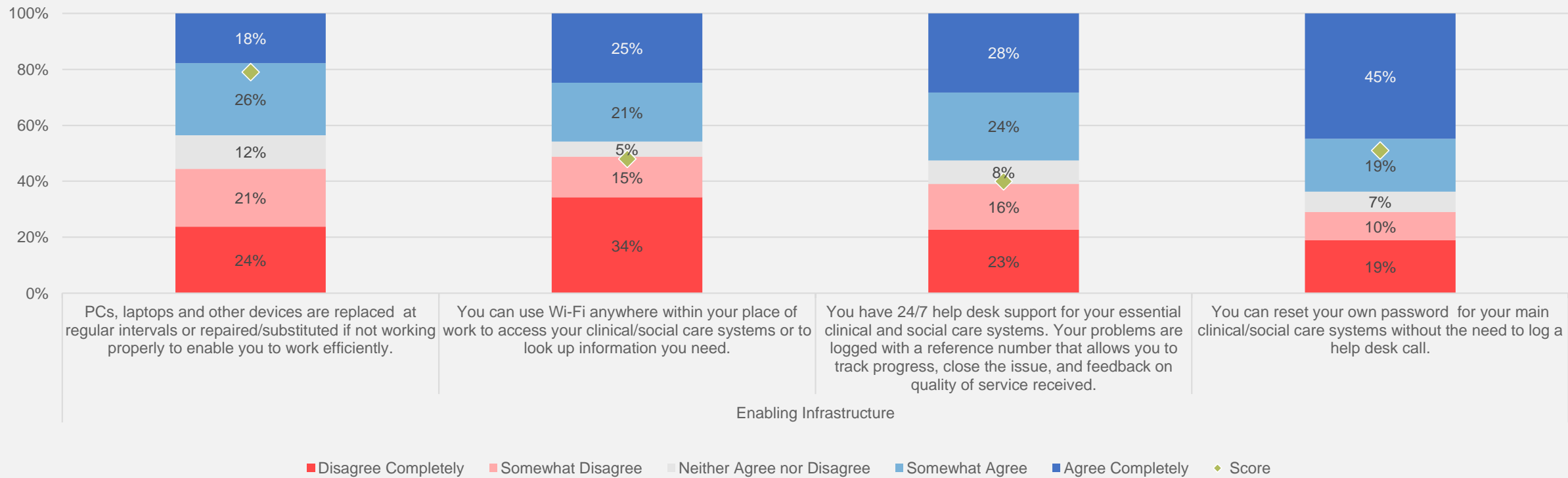
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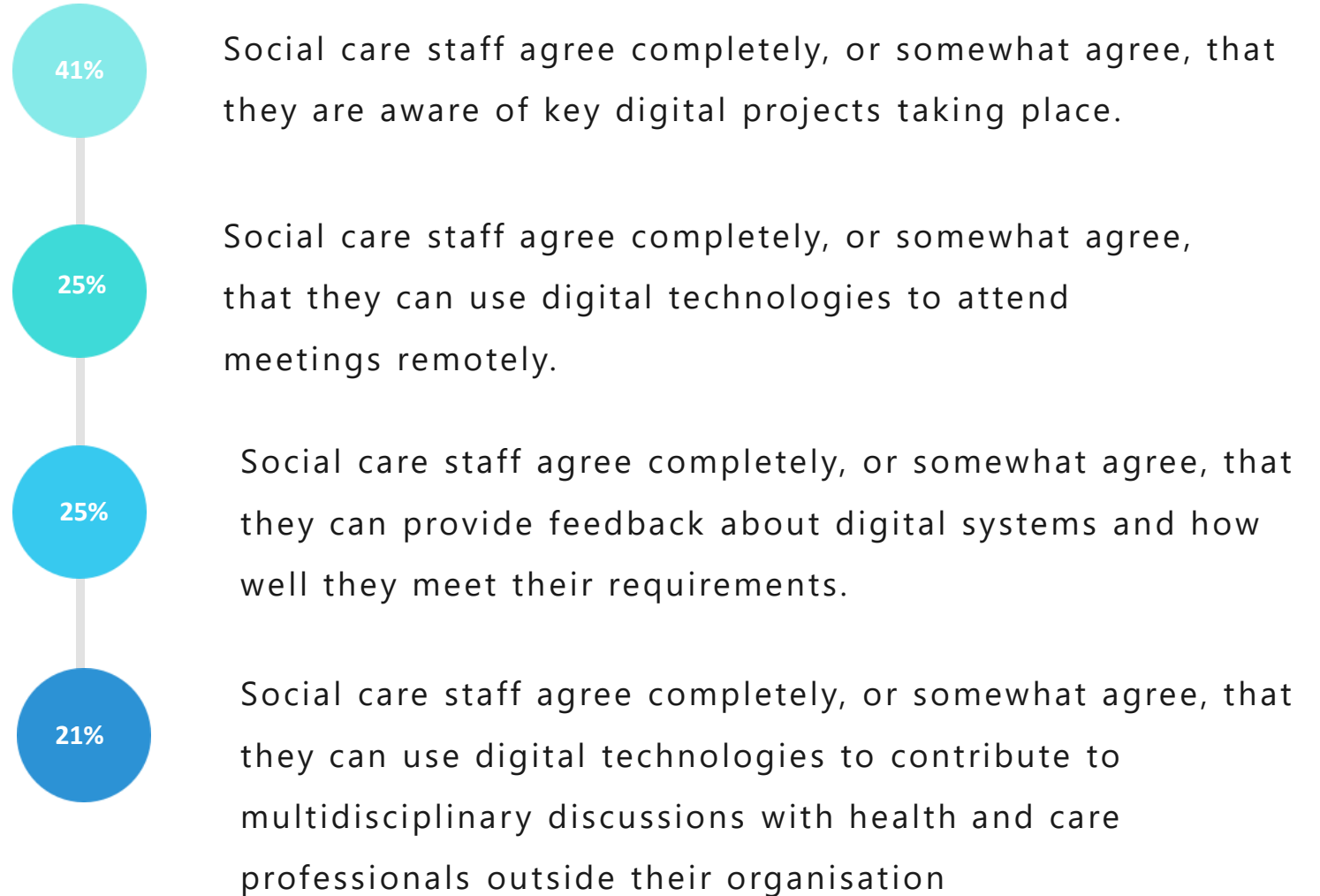


# Staff Survey Answer Distribution and Scores

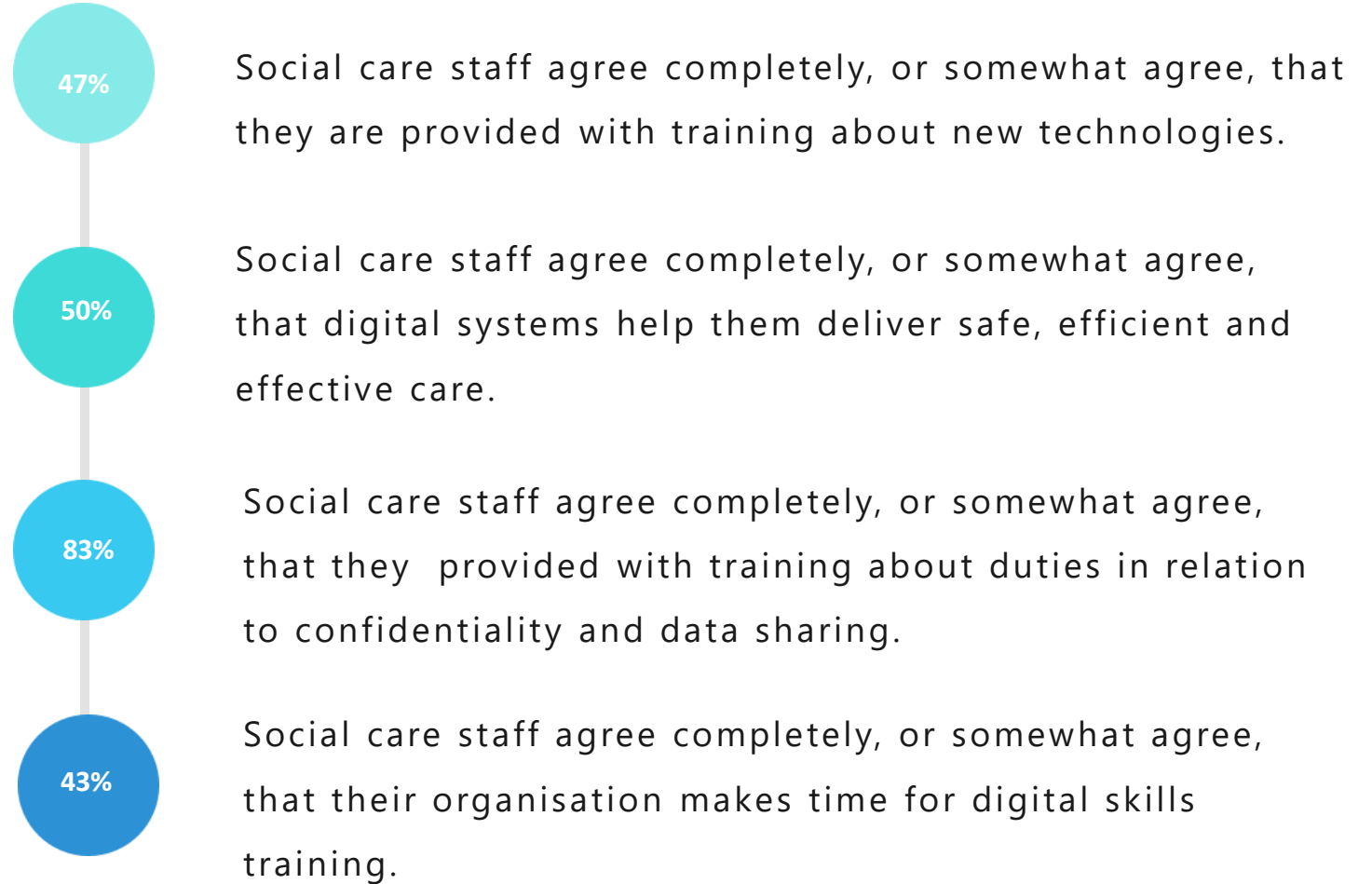
Staff Survey Answer Distribution by Section - Local Authority  
Comparison with staff Survey section score (diamonds). N/A and Don't Know omitted



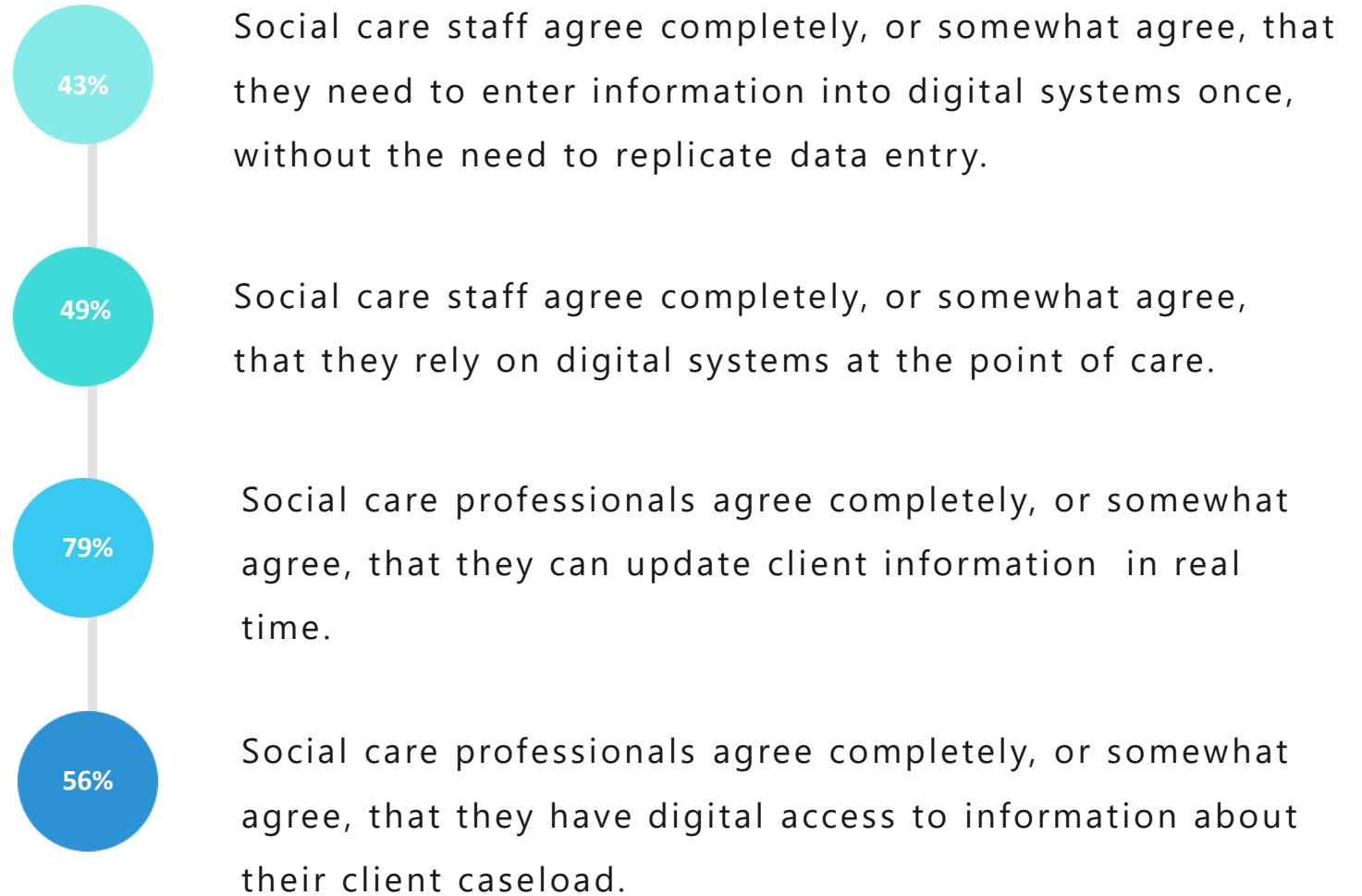
# Staff Survey Results



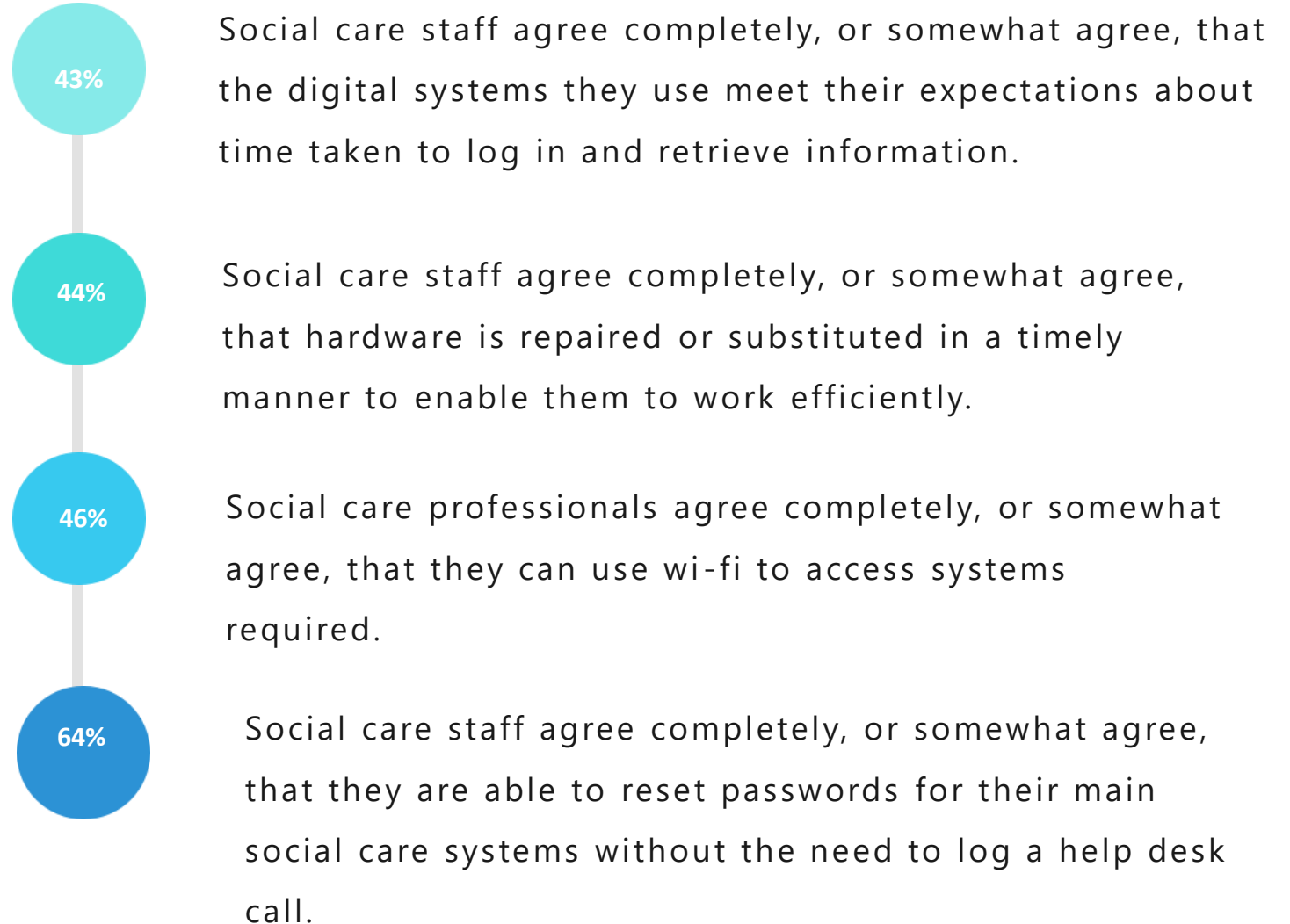
# Staff Survey Results



# Staff Survey Results



# Staff Survey Results



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# Summary of key messages

- Readiness
  - Information Governance and Governance sections had the highest self-assessed scores while the skills and competences section had the lowest score.
  - Health and Social Care Partnerships are at variable stages in the development of local digital health and care strategies.
  - There is a need to develop better vision and support, including resources, at a national level to support the integration of health and social care systems.
  - Most organisations are confident that the necessary leadership and governance structures are in place to support successful delivery of digital social care projects and that procurement, contracting and supplier management capabilities are available.
  - Benefits realisation related to digital social care projects could be improved and there are opportunities to improve application of lessons learned to future projects.
  - Resources were felt to be inadequate to effectively implement digital projects in a quarter of organisations. Lack of resources appeared to be a key factor for limiting progress and achievement of ambitions.
  - There are high levels of confidence that organisational structures are in place to oversee management of cyber threats but some organisations need to address gaps in supplier contracts to ensure they receive greater assurance that digital assets are secure.
  - Work is still required to upskill social care staff to ensure they have the digital skills and confidence necessary to use digital social care technologies to maximum effect.



# Summary of key messages

- Capabilities
  - Digital social care systems are available but there is still a dependency on paper based processes.
  - Social care professionals are often able to access information digitally but may not be able to update systems at the point of care in clients' homes resulting in the need for staff to have to record information on paper and update digital systems later. Connectivity in all locations can be a challenge.
  - Duplication of data entry is common due to health and social care system interoperability.
  - Digital access to information required from other health and social care providers is limited.
  - Decision support within existing digital social care systems is limited.
  - Transitions of care from children's to adult social care services appears to be well supported by digital systems. This is often because the same digital system is used by both adult and children's social care services.
  - Over two thirds of organisations are supporting people to live independently at home using a variety of technology enabled care services.
  - Most organisations have digital social care rostering systems in place.
  - The majority of social care staff have digital access to information about their caseloads and clients under their care.
  - Although reports and dashboards are available to some staff to show performance metrics further work needs to be undertaken to develop these further for a wider audience and to show integrated health and social care metrics.
  - With the exception of having access to digital information about services available clients, or their advocates, appear to have very limited ability to use digital channels to access or update information about their care, complete online referrals, self-assessments or manage self-directed support budgets.
  - A third of organisations have a high level of social care client matching to Community Health Index (CHI) numbers, particularly for adults receiving care.



# Summary of key messages

- Infrastructure
  - Most organisations have business continuity and disaster recovery processes in place for business critical social care digital systems but not all of these have been tested.
  - Although the majority of organisations have supplier supported software some organisations are using unsupported software or systems that are several versions out of date.
  - Very few organisations offer a bring your own device policy with most preferring to provide staff with smart phones or hybrid tablet devices, although this is noted to be associated with significant cost.
  - Funding for replacement of end user hardware and resources to support or develop existing digital social care systems was noted to be a challenge for some organisations.
- Staff Survey
  - The majority of staff felt they received adequate and ongoing training relating to information governance requirements.
  - Less than half of staff who completed the survey said they are aware of key digital social care projects being undertaken in their organisation.
  - Only half of staff completing the survey thought digital social care systems supported safe and efficient care delivery.
  - Key areas for improvement relate to social care staff having to log into different health and social care systems to access information needed about clients and to spend time undertaking duplicate data entry.
  - Over two thirds of staff said they are unable to use digital technologies to support multidisciplinary discussions about patients and clients with other health and social care professionals.
  - Limited training in core digital skills was identified as a challenge by staff.
  - Almost half to staff identified that replacement/refreshment of end user hardware to meet service needs was inadequate.



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## DMA: List of Participating Organisations

### Local Authorities

- Aberdeen City Council
- Aberdeenshire Council
- Angus Council
- Clackmannanshire Council
- Comhairle nan Eilean Siar
- Dumfries and Galloway Council
- East Ayrshire Council
- East Dunbartonshire Council
- Edinburgh City Council
- Glasgow City Council
- Highland Council
- Inverclyde Council
- Midlothian Council
- Moray Council
- North Ayrshire Council
- Perth and Kinross Council
- Renfrewshire Council
- Scottish Borders Council
- South Ayrshire Council
- South Lanarkshire Council
- West Dunbartonshire Council
- West Lothian Council



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