

Adult Social Care Information Signposting Discovery Day

2nd March 2015

NOTES

1. User Journey Workshops

Three possible user journeys have been created in advance of the discovery day, each considering a social care related goal and each presented from the citizen point of view. The journeys have been created as a result of group workshops or conversations with real people who have experienced these processes. They were started as part of the transformation work on NHS Choices and are an initial draft to unpick some social care information-seeking processes.

In group sessions, delegates were asked to review the journey and make suggestions if they felt there were gaps or inaccuracies. They were also asked to identify the information points and where users may be able to find this information, share good examples and discuss challenges.

Discharge from Acute Care

In this journey, an adult (40 something) is organising care for a frail elderly parent who is about to be discharged from hospital. The following suggestions were made:

- It was thought that people should be provided with information about discharge options earlier in the process, perhaps soon after the elderly relative has been admitted to hospital. Even if at this early stage the care that would be required on discharge is not yet clear, having information about what the options may be would give the family more time to absorb.
- When discussing the outcomes of the needs assessment, community care support options should be included. "Community connector roles" – using people who know their local area and what services are available and where there is capacity is crucial. Flow of information between agencies is essential.
- Sometimes there are delays between the time people are presented with residential care options and their discharge from hospital, and in this time the vacancy could have gone to another person. If residential care is required, an e-marketplace with real time vacancy information would be a valuable resource. Choosing a care home should be as easy as choosing a hotel online, where you can see what is available, what facilities and services they have, and how much it is.

- Furthermore, an e-market for available aids and adaptations would be valuable.
- People have a support and information need for how to have difficult conversations with elderly relatives about what are the next best steps for them. This is a highly emotive topic with a lot of guilt for the family, and potentially some loss of independence and change from familiar surroundings for the person in need of care. People need more support in how to have these discussions to arrive at the best decision.
- Comprehensive information about financial options and where to get financial advice is a key information need within this user journey.

Coordinating Care Remotely

This journey explores the information-seeking behaviour of someone organising domiciliary care for a relative who lives a distance away from them.

Notes:

- It is possible that this journey can start from primary care, if a GP or other health practitioner has recognised signs that the elderly person may not be taking their medication properly. They may be able to trigger a response from social care.
- 'Care Navigator' services may also spot people who need additional support.
- Carers UK has recently launched a new app called 'Jointly', a digital tool to help coordinate a circle of care around a person and to be able to monitor remotely and receive updates as care services are delivered.
- New changes under the Care Act will mean the elderly person in this scenario will be offered an assessment regardless of whether or not they will be self-funding for their care.
- It was felt that online self assessment or 'trigger tools' would make identifying what people need and want easier. There was reference to the new BBC calculator tool and the new Which? Elderly Care resource.
- A person organising a package of care from a distance will not necessarily know about the quality of care services where their relative lives. The availability of reviews, feedback and transparent information on care services on NHS Choices (or syndicated to the LA website) will help them make better and more informed choices on services.
- The rapid growth of the telecare/telemedicine market is providing ever more solutions for using technology to help people stay independent at home, using remote

monitoring and communication systems. An online marketplace for finding out what is available, where and for how much, would be a valuable resource in this situation.

2. Group Discussions

Delegates were asked on registration which particular challenges they faced in their preparation for the implementation of the Care Act. The topics for the discussion sessions were based on the answers they gave.

Making Information Accessible – The challenge to provide information in a range of languages and formats

- This session started with an update from NHS England regarding the new Accessible Information Standard, which is being developed. NHS England prepared a short paper for the discovery day to update delegates on the progress and timeline for the implementation of the new standard, and a description of which services are in scope and which are out of scope. The update was summarised and copies of it are available to download.
- Google Translate was discussed as most authorities used this free online service. There appears to be a differing level of accuracy in translation depending on the language to which the system is translating. The question was asked if anyone had any insight into any research on the accuracy of Google Translate. Most authorities applied a disclaimer to the service for this reason.
- There was a discussion about assumptions including that we would be wrong if we assume that people can always read their mother tongue language. Easy to understand formats are required regardless of language.
- There was a discussion about simplifying the information we present to people, which also echoes points made earlier in the day about resisting the urge to give people all the information we can find and overwhelming them with too much. Reducing the content of each stage of the journey intelligently to bite size bits of information not only makes for a better online user journey, but short simple bits of text are:
 - Likely to be easier to translate without errors
 - Easier to be listened to by an audio screen reader for a blind user (screen readers are not good at translating subtle pacing offered by grammar and can just 'drone' their way through a lot of text).
 - Make it easier for people to understand if they have low literacy skills, regardless of language

- A number of local authorities were interested to work together to form an editorial group of some sort, or in some way work together to reduce duplication, to simplify new care related content they are producing.
- The adoption of responsive web design has made it easier for web managers to ensure content reads well across a range of screens and devices, rather than having to manage the content on each separately.

Personalisation – In what ways can the information people receive be personalised for them

- Personalisation as a result of a directory search. Users are able to curate useful information that can be printed out and shared.
- But people can only search for what they know is available/exists
- Information needs can be analysed to design content, for example cost of care and entitlements. Surrey Information Point is an example here, combining this information with an e-marketplace.
- “Did you mean...?” facility in searches to help people find what they need. Prompts that say “If you are searching for X, have you thought about Y?” (as illustrated by People First, the Tri-borough site for RKBC, Hammersmith and Fulham and Westminster councils)
- There was a discussion about “Filtering vs Signposting”. Should we be pushing information at people based on what we know about what they are looking for? Other online services use these features to their advantage and help people to find out about services that may meet their needs, but that they otherwise may not know about. We could use cookies to track activities that indicate what users real needs may be, and therefore shape the view they see of available services. But what if the person’s needs change? And what are the privacy implications? Cookies can be used as long as we clearly declare why we are using them.
- We could ask people more questions early on in their journey to get a better idea of their needs. Including asking what format people want to receive information in and who is allowed to see it.
- Data can be linked across the site but people could be untrusting of giving the council too much information. Completing Personalised Individual Assessment forms brings

up data sharing issues.

- Sending people to third party websites means we lose track of the online journey.
- Examples of personalisation include:
 - Self-assessment tool being developed by Bracknell Forest Council where users can log in to access a personalised care package.
 - East Sussex have “1 Space” a market place database which can be searched by location and the nature of the care support required.
 - Kent, Sussex and Hants have a user portal around funding.
 - 13 local authorities across Yorkshire and Humber use “connect to support” to help people find the care services they need. Includes self assessment, support planning, care cap account and information on financial support.
 - Bexley have a 1 stop shop linking voluntary sector, primary care and council services. They offer a personal data portal, the first step to service users creating a single patient record.
- Collaboration opportunity here around linking searches to support needs and e-marketplace.
- Also, when people are getting face to face support, rather than accessing information online, the people who are helping them, social workers for example, could need additional training in digital skills and also in how to signpost people, and then support elderly people and their families in getting started with a personal data portal or similar ‘my council’ account. There was a prominent concern about an IT skills gap in the social care workforce, but not in all councils.
- An example was given of open sessions which match older people with schools and IT classes. This could perhaps incorporate an aspect of personalisation.
- Danger highlighted with personalisation of information rather than accessing universal information – ie. needs change and having content tailored too closely to previous needs could block essential new information getting through.
- There was a consensus that a good collaborative project to take forward from this Discovery Day would be a self-assessment form/tool of some kind, that provides some level of personalised content to users based on the assessment outputs.