Five principles for digital transformation and interoperability in Social Care

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A set of simple principles to ensure digital delivers a positive impact for care providers and people receiving care in the face of speed and complexity

- Digital transformation is happening at record pace
- With the complex commissioning and reporting structures within which care teams operate, digital transformation can lead to significant more work for care teams if not done well

Steering towards social care digital transformation that delivers better outcomes for people receiving care, and a more sustainable way of working for care teams

Providing overall guidance in a context where important decisions are being made without consideration for their impact on care delivery
Digital systems being rolled out to Social Care providers and their Interoperability must be...

1. Focused on each person receiving care
2. Intuitively integrated in the operational workflow
3. A time saver and not lead to duplication of effort
4. Able to share information and report appropriately
5. Inclusive of social care providers and people receiving care in decision making processes
1. Focussed on each person receiving care

Systems and processes that are designed around each person lead to better outcomes. Historically, we have seen projects that lead to personal data existing in silos, leading to fragmentation of information – hence information becomes less likely to support good decision making for the care of each person in a person centred manner.

2. Intuitively integrated in the operational workflow

Systems designed taking working practices into account are easier to train and roll-out, and lead to higher quality of data and outcomes in their use. If the changes required to adopt a new system are not intuitive and in line with how care and support work is provided this is likely to lead to poor adoption.

3. A time saver and not lead to duplication of effort

Being able to input data into any given system and have this data being reused saves significant time and improves quality of data, hence making it more likely that this data will be usable for improving care. Any data captured should be reused wherever required to avoid time wastage with data re-entry, e.g. for reporting into third party organisations – this will avoid extra work and data quality issues.

The five principles

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4. **Able to share information and report appropriately**

Good practices of data sharing and reporting will lead to improvements in safety and quality of care, and reduce reporting burden.

When people’s safety and quality of care is at stake, systems need to make it easy to enable the right information to reach the right care teams, be it in transfers of care, hospital admission avoidance, or other scenarios.

5. **Inclusive of social care providers and people receiving care in decision making processes**

Solutions for use by social care teams, without involving social care delivery teams, in particular the ones that are advanced in their digital transformation journey, will create friction, worsen the perception of lack of parity of esteem in the relationship with health, and create clinical risks from duplication of data records across different non-integrated systems.
More information

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