

# Putting **People First** Transforming Adult Social Care

# PSS EX1 - Collecting data in a new way

# efficiency delivery - supporting sustainable transformation

The proposal to revise the PSS EX1 return is in two parts:

- Dissaggregation of the current service lines; and
- Development of a new way of collecting data

This overview expands on the latter part of this proposal

#### The limitations of the current approach

- Due to the constraints of Excel, the current PSS EX1 returns limit the ability to provide dissagregated information and segregate the different dimensions of age, service line and client type. This results in a somewhat limited basis for analysis.
- Most councils spend significant effort transcribing their information into the Excel form and much of this effort is duplicated for other returns.
- Because there has been little standardisation of social care data at the operational level, every council has their own way of configuring their systems and reporting from them. Many councils struggle to get useful management information. The requirement for bespoke interfaces adds cost to the process of linking with other complementary tools.

## Leveraging our TRACS experience

We have now had exposure to a very wide variety of care management and related systems. Based on this experience we aim to significantly improve the quality of available management information whilst reducing the burden.

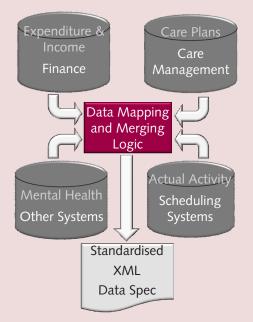
#### The proposal

- To extract data directly from host systems using database friendly protocols (XML)
- To separate out the dimensions of age, service detail, client type and types of income/expenditure
- To automate the process of producing the PSS EX1 return - merging data from different sources and providing the ability to prorate costs, activity, etc. where the breakdown is not otherwise available
- To develop (and demonstrate) standard protocols for transferring data at both client level and the aggregated service line level
- To validate this new way of collecting data, working with councils, the NHS Information Centre and providers of complimentary analytical tools

#### Timescales

- Engagement with pilots October 2008
- Concept demonstrator by January 2009
- Full implementation starting April 2009

## The approach in more detail



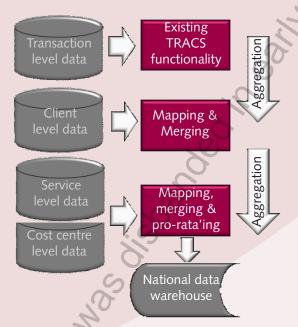
Care management and financial data often reside in a multiplicity of systems. The proposed solution will:

- define protocols for extracting information from each of these systems (based upon our experience with TRACS);
- extend existing TRACS logic to provide an even richer capability for mapping into standardised detail headings; and
- extend existing functionality to match information from these different systems

#### Improved Reporting of Adult Social Care Finance and Activity Data

Full reports covering the proposals and conclusions are available on the CSED, CIPFA IPF and NHS Information Centre web-sites.





The second technical aspect of the proposal is to provide support for data at three levels of aggregation:

- transaction level, as already handled by TRACS;
- client level an evolution of how data is presented (but not usually collected) within TRACS. We believe that councils will benefit most by standardising this level of extract. In addition to reducing barriers to entry for a number of existing analytical solutions, this will also provide the most common likely basis for sharing information across disparate systems; and
- service level largely per the new proposed PSS EX1 format. It is intended to provide logic to pro-rata the best available data to fill missing gaps.

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March 2009

For more information, visit CSED at www.dhcarenetworks.org.uk/csed