

**Report to:** Adult Social Care Scrutiny Committee  
**Date:** 13 March 2006  
**By:** Director of Adult Social Care  
**Title of report:** Implementation of Social Care Direct  
**Purpose of report:** To update the Scrutiny Committee for Adult Social Care on the implementation of the contact centre 'Social Care Direct' into Adult Social Care Services.

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## RECOMMENDATION

**The Scrutiny Committee is recommended to note the information contained within this report and endorse the proposed developments of Social Care Direct.**

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### 1. Financial Implications

1.1 Temporary additional staffing will be contained within the 2006/07 Adult Social Care Department Revenue Budget.

### 2. Background & Supporting Information

2.1 The Distributed Service Hub (DSH) project was launched in February 2004. The project initially included both Adults and Children's Services, together with the investigation and purchase of a Customer Relationship Management (CRM) computer system. In October 2004 the project took a different direction, when the CRM technology workstream was incorporated in a countywide activity, and Children's Services stepped out of the pilot due to disaggregation. The Project was then re-focused on the design and implementation of a contact centre (DSH) for the new Adult Social Care Department, with a revised deadline of October 2005.

### 3. Implementation

3.1 The main aim of a DSH/contact centre is to be the single point of access for customers, dealing with enquiries and taking referrals. The key deliverables for implementation have now been achieved and 'Social Care Direct' went live in September 2005.

3.2 The project plan formed the foundation from which the Department could create the contact centre and recruit the staff. Implementation was divided into four key workstreams and these are described in the following paragraphs.

3.3 **Business Processes** – A series of meetings were held with key operational staff to look at how the contact centre would process enquires and referrals, whether they were received by phone, fax, email, minicom, text message, or on-line forms. Activities included the establishment of protocols between service areas, developing quality service standards, designing an electronic recording process and implementing the single assessment process at first point of contact.

3.4 **Service Information** – To support the staff in the contact centre, and to help customers get access to the information they need, a comprehensive list of Frequently Asked Questions (FAQ's) was established. The list is designed to assist both new and experienced staff in providing a consistent message. At the same time this information was incorporated in new web pages on the ESCC website. The FAQ's enable the staff to provide a range of information about the services we provide in addition to answering a broad spectrum of health and welfare enquiries (eg how can I get a wheelchair ?, Who will pay for my fathers funeral ?). The FAQ spreadsheet also contains the key words callers may use, with a link to any relevant section on the County Council website and any Information Leaflets that have been produced.

3.5 **Training** – Prior to the launch, a three week comprehensive training programme was established which equipped the staff with a baseline of service knowledge, core IT skills to record

enquires/referrals accurately, and customer care skills to ensure this new service offered a high standard of customer service

3.6 **Marketing** – The marketing plan was very successful and took place throughout October/November 2005. This included re-issuing the core set of 16 Information Leaflets for Adult Social Care services with the new contact arrangements, along with posters, post cards, business cards, adverts, web pages, phone book directories, etc. Also key partners were visited and presentations on this new service given. Following on from this, key partners such as Sussex Ambulance have agreed that their staff carry Social Care Direct business cards to hand out if they come across an individual who may benefit from Social Care intervention.

#### **4. Current Position**

4.1 From initial activity reports (**See Appendix 1**), feedback from customers using the telephone and from staff in other teams/departments, it is apparent that at the start the majority of callers were experiencing difficulties getting through on the first attempt. This is because call volumes were higher than anticipated largely due to the success of the marketing plan and the publicity relating to the new 0845 single contact number.

4.2 As a result, a full 'post implementation review' was completed by 1 February 2006. The purpose of the review was to ensure that the objectives of the contact centre had been achieved, to look at the issues since the implementation and to develop a plan to deliver improvements.

4.3 The main issue identified by the review was the need to rapidly channel customers through the system without keeping phone lines blocked. In the short term this has been addressed by reviewing staffing levels, whilst in the longer term will be assisted by the implementation of CRM.

4.4 As a short-term solution back in December 2005, it was identified that two additional advisors were needed. Since they started in January 2006, the contact centre has managed to remove its backlog of simple enquiry contacts. However, with a limited number of staff and phone lines, current call metrics show that a high number of callers are still not getting through on the first attempt. A further short-term solution of 3 additional temporary staff has been agreed, to channel callers through quickly, giving more people the opportunity to get through.

4.5 A further review is scheduled for June 2006. By this time, activity levels are expected to have stabilised, so that telephony and actual staffing levels required assuming the implementation of CRM can be confirmed.

#### **5. Future developments**

5.1 After this consolidation has been achieved, other key targets within the contact centre's business plan will need to be taken forward. Examples of the longer-term objectives include:-

- Implementing the next general network (NGN) telephony enabling greater efficiency
- Developing the CRM to ensure it integrates with CareFirst (the client database).
- Commissioning 'mystery shopper' exercises to monitor customer 'quality service standards'.
- Promote the use of the on-line single assessment process.
- Investigate and apply for relevant call centre quality and customer accreditations

#### **6. Conclusion and Reason for Recommendations**

6.1 Social Care Direct has been successfully implemented and now provides a single point of access for our customers. Once the initial capacity issues have been overcome, it will be possible to further develop the service to our customers by exploiting emerging computer and telephone technology. As such, the Scrutiny Committee is recommended to note the achievements to date, the actions to resolve the current capacity issues and endorse the proposed developments.

**KEITH HINKLEY**  
**Director of Adult Social Care**

Contact Officer: Mark Stainton, Assistant Director (Older Peoples Services) Tel. 01273 481238  
BACKGROUND DOCUMENTS: None