

Summary of Option Appraisal

All of the following options will also require a new, time limited contract with the current supplier in order to facilitate the transition to new arrangements and plan an exit strategy with the current provider. The time limited contract would need to be for one year, with the possibility of an additional three months for contingency.

Option 1 – Go to market for a solution

This would involve a large scale procurement exercise with associated costs and time frame. The total life of the project from start to implementation is likely to be in excess of two years.

A new system would need to be configured to meet current requirements. Care Act requirements would need to be included in the specification.

Advantages:

- Adult Social Care (ASC) could write a specification detailing exactly what they want. This could potentially result in additional functionality being delivered, although there is no current evidence that any alternative systems could offer additional functionality over and above that offered by the proposed supplier
- ASC would select the supplier of choice
- There are frameworks which have most of the key suppliers on, which would make procurement faster

Disadvantages:

- Cost of procurement process
- Potential cost of purchase of new system
- Uncertainty about the future of how ASC services are delivered may hinder future proofing specifications
- As a market leader the proposed supplier may well win the tender exercise thereby unnecessarily spending council funds on a larger scale and more lengthy procurement exercise.
- The time scale for the option would mean implementing another solution to meet the Care Act requirements and therefore require two implementations (The contract with the current supplier can only be extended for a finite period of time and it is unclear at this point what the impact will be on the council's preparedness for the 2016 Care Act requirements).
- There is the potential that the outcome will be a different supplier from Children's Social Care and the potential improvements and efficiencies from having the same system will be lost
- The current supplier potentially has a substantial price advantage over the rest of the market as the system is already implemented. Basing a decision on cost alone could restrict our ability to benefit from innovation in the marketplace.

Comments:

The time scale for this option would require two implementations if the service were also be able to meet Care Act requirements. It would need a full procurement process and the significant associated costs. It would deliver benefits to the service, but may result in two different systems for Adults and Children's services, missing the opportunity to capitalise on those advantages, and other potential benefits that could be explored through our partnership with East Sussex County Council.

Option 2 – in-house or partner bespoke development

This option could include different approaches such as looking for a partner to develop the system or embarking on an in house development. It would require staying with the current core system in the interim, which may not be viable as the current contract could only be extended for a short period. There is also an option to invest in alternative solutions to meet new requirements and gradually replace current systems.

Advantages:

- Adult Social Care could gradually define what they want in an agile way over a period of time.
- Gives the most scope for innovation.
- Using a development partner or in house development team may provide more control over the product roadmap (timings and results)

Disadvantages:

- It would not be possible to develop an in house solution within the current time constraints, e.g. to support Care Act implementation
- A new 15 month contract with the current supplier is unlikely to give sufficient time for the new solution to be developed and implemented and there is a risk that the current system would go out of support before the new one is in place
- There is a high level of risk with this approach and Surrey County Council would be 'going it alone'.
- Cost of development of new systems will not be clear at the outset and could be much greater than an 'off the shelf' solution. Ongoing costs would be difficult to ascertain and control against future statutory changes.
- Developing the design and technical specification would be more time consuming and resource intensive than implementing an off the shelf solution.
- We would lose the advantage of having the same solution across Adults' and Children's Social Care both within Surrey and in partnership with East Sussex.
- Adult social care is strictly governed by statute and statutory guidance and a more radical development option might present a greater risk of not meeting the statutory requirements generally
- A bespoke solution results in a greater dependency on a limited number of developers and an increased risk of single points of failure.

Comments:

This is a high risk approach that would not meet the time frames required. A high cost is also likely to be incurred with insufficient evidence of benefits, over and above other options.

Option 3 – Utilise East Sussex procurement process and contract (December 2014) that awarded an Adults’ and Children’s Social Care Management system to LiquidLogic Limited

Surrey County Council is a contracting authority to the East Sussex County Council (ESCC) full EU procurement, which chose Liquidlogic, as part of it partnership with East Sussex. The council was involved in the specification but not the selection. Surrey County Council is referenced within the contract as a participating authority and consequently can use the contract to purchase Liquidlogic without the need for a further procurement process. The initial term of the contract is for 5 years with an option to extend for 3 years and a further 2 years after that.

The likely contract period for Surrey if it chooses to use this option would be for 4.5 years with a maximum 5 (2+3) year extension thereafter (Maximum whole life contract of 9.5 years).

Advantages:

- Liquidlogic is one of a handful of market leading products
- Lowest risk option as fastest route to being Care Act compliant.
- Additional procurement process would be minimised.
- Timescale provides opportunity to implement the Care Act changes solely in a new system The system meets the core Adult Social Care needs
- The system is used by Children’s Services and so integration with their data could be achieved quickly
- Having the same system as the Children’s service will support a more integrated council approach – Adults, children’s, the transition team and the Emergency Duty Team would all be on the same system
- Liquidlogic has a track record of integration (including with health)
- Liquidlogic and OCC have a range of Care Act and self service tools in production and development (move up)
- There are mobile working options
- It is a more ‘open’ system making future integration and development simpler
- IMT already have the skills to support this system and the experience of implementation in the Children’s Service.
- An established supplier relationship already exists between the council and Liquidlogic.
- There is potential to ‘go live’ with the Care Account module in advance of the core system, which would support early assessment and ‘smooth’ the demand curve
- Joint partnership working with East Sussex would provide opportunities for joint development of the system and shared / reduced development costs
- Opportunities to explore joint disaster recovery platform hosted by SCC within data centres
- Greater opportunity for sharing / developing best practice processes with East Sussex
- Opportunity to explore reduction in SCC training costs by re-using East Sussex material and training resources
- There is a small cost saving on the annual maintenance costs when compared to the current supplier.
- The third party software is considerably cheaper than the software the current supplier relies on.

Disadvantages:

- Migration and configuration would be a large project, needing resource from both Adult Social Care and IMT
- Although there is no current evidence of a better system solution in the market, not going through a further full tender exercise could mean implementing the proposed solution without confirming it is still the best system compared to alternatives in the long-term.

Comments

This option represents the ability to implement quickly in order to meet Care Act requirements and avoid two implementations. The system would deliver service benefits and efficiencies, and avoid full scale procurement costs.

Conclusion

Fundamental drivers for the system change highlight the timing of replacement and greater 'usability' and efficiency and alignment with the council's digital strategy as prime areas for consideration. The scale and nature of the service supported indicate that a low risk approach needs to be taken, while maximising service improvements and the ability to respond to future change.

Options 1 and 2 have significantly longer time frames and the associated costs of either a full procurement or more radical approach do not make these options desirable. They also carry a higher risk.

It is recommended that option 3 is progressed as it would deliver the greatest benefits within the specified time frame. It is the lowest risk option.
