

Access to CareDirector for non-standard Users

Adult Social Care Case Management System

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Access to CareDirector for non-standard Users

Directorate:	Social Care, Health, and Housing (SCHH)		
Division & Service:	Adult Social Care / Resources		
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Approved By:	CareDirector Change Board	Approved Date:	10/05/2024
Effective From:	10/05/2024	Version No.	6.0
Next Review:	01/12/2024		

CQC Assurance Key Areas and Statements:

This policy document supports CQC Assurance Key Areas (detailed in section 7):

Safe	Effective	Caring	Responsive	Well-led
●	●			●

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It is the responsibility of every individual to ensure that they are working to the most current version of this document.

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1. Introduction

- 1.1 Central Bedfordshire Council Adult Social Care records, including people's financial and charging information, are maintained on the CareDirector care management system.
- 1.2 The aim of the Protocol is to provide the framework for enabling access to CareDirector and its data to non-standard CareDirector users i.e. those who do not work within Adult Social Care services and/or do not need access to CareDirector as part of their daily working role.
- 1.3 It supports opportunities for professionals to work collaboratively and provides guidance on the requirements for non-standard CareDirector to be granted access to a person's case management records within the CareDirector system.

2. Legislation and Regulatory Framework

2.1 Relevant legislation:

- Care Act 2014
- Mental Capacity Act 2005
- Safeguarding Vulnerable Groups Act 2006
- General Data Protection Regulations 2018
- Data Protection Act 2018
- Freedom of Information Act 2000
- Health and Social Care (Safety & Quality) Act 2015: Duty to Share
- Professional Standards (Social Work England)
- Caldecott Review: Information Governance

2.2 Relevant Central Bedfordshire Policy:

- Information Security
- Data Protection
- Records Management
- Information Sharing Protocol
- ASC Joint Working Protocol
- ASC Continuity of Care Protocol and Guidance
- Adult Social Care Privacy Notice

3. Principles of the Policy

3.1 The Protocol provides a framework that governs access to CareDirector:

- to grant access to non-standard CareDirector users to view the CareDirector system.
- to provide relevant and proportionate information held within CareDirector with other professionals.

Standard CareDirector Users

3.2 Standard CareDirector users are defined as those working within:

- Central Bedfordshire Council Adult Social Care Services
- CareDirector Systems Team
- Business Development Team
- SCHH Contracts & Compliance Team
- Financial Operations teams including Brokerage and Finance
- SCHH Strategic Commissioning Team
- ELFT Mental Health Services
- Bedford Borough Council Sensory Impairment Team

Non-standard CareDirector Users

3.3 Non-standard CareDirector users are defined as those who do not work within Adult Social Care services and/or do not require access to CareDirector as part of their daily working role.

Sharing Information

3.4 When sharing a person's personal information, we must comply with the UK GDPR and the Data Protection Act 2018. The Care Act 2014 places a duty on us to work closely with Health colleagues to ensure the best level of care is delivered.

3.5 Central Bedfordshire Council is clear that information it holds that might support its residents and/or prevent adverse situations from arising, can and should be shared. All officers should be mindful that the degree of information shared should be appropriate and proportionate to the matter at hand.

4. Access to CareDirector

4.1 This Protocol aims to ensure that:

- systems exist to ensure that risk information about a person is passed across service boundaries in an effective way whenever there is a need to know.
- systems exist for organisations to provide relevant and proportionate information and for this information to be received whenever there is a need to know.
- there is a legitimate need for teams/users to hold a CareDirector account.

Requesting Access to CareDirector

Non-standard CareDirector Users

4.2 Non-standard Users, for example Children's Service, Education, Housing, Revenues and Benefits, IT (Internal and External) etc. should request access to CareDirector via the 'View only access to CareDirector for non-Users' form on the IT Service Desk Portal.

4.3 If the team/person is not a member of Adult Social Care, the Manager should use the comments section to state why the CareDirector account is needed. This should include purpose and frequency of use.

- 4.4 External colleagues who do not have access to the IT Service Desk Portal should contact the CareDirector team (cairedirector@centralbedfordshire.gov.uk) to request access on their behalf.
- 4.5 When the request has been submitted, the CareDirector Change Board will make the final decision to permit access and CareDirector account allocation.
- 4.6 Where non-standard users require access to specific records within CareDirector, they will be directed to business leads within CBC who will provide data as required.

Commented [TR1]: Those who don't have access to the IT support desk can email the CareDirector team email to request access

Standard CareDirector Users

- 4.7 If a colleague/team requires access to CareDirector, this should be requested via the 'CareDirector - New user/leaver/changes' form on the IT Service Desk Portal. The request should be submitted by the Team Manager.

5. Information and Training Responsibilities

- 5.1 The CareDirector Business Support Team will arrange for the new user to attend a training session as soon after their start date as possible. New starters will not have access to the live CareDirector system until they have attended a training session.

6. Equality and Diversity

- 6.1 Where applicable, all SCHH policies are accompanied by an EIA and an implementation plan that sets out monitoring and reporting arrangements available in relation to this protocol.
- 6.2 The Council is proactive about putting in place arrangements to ensure that they do not unfairly discriminate against individuals on the grounds of their protected characteristics. Equality should be integral to the way in which any support is prioritised and delivered.

7. Monitoring and Reporting Arrangements

- 7.1 The CareDirector Business Support Team will monitor user access and specified end dates. They will liaise with colleagues as and when access end dates are approaching to confirm expiry of the users account.
- 7.2 The team will confirm the user lists every 2 months and notify the IT Service Desk to close accounts no longer required.

Commented [TR2]: Should we add that the CD team send out lists of workers every two months to check workers are still in the team and we notify IT if the person has left the council

CQC Assurance Key Areas and Statements:

- 7.3 This policy document supports CQC Assurance Key Areas and Statements:

Key question:	Quality statements used to assess quality
Safe	Safe Systems, pathways and transitions Care and support is planned and organised with people, together with partners and communities in ways that ensure continuity. Policies and processes about safety are aligned with other key partners who are involved in people's care journey to enable shared learning and drive improvement.

	Safe and effective staffing Staff receive training appropriate and relevant to their role.
Effective	How staff, teams and services work together Staff have access to the information they need to appropriately assess, plan and deliver people's care, treatment and support. Information is shared between teams and services to ensure continuity of care, for example when clinical tasks are delegated or when people are referred between services.
Well-led	Governance, management, and sustainability Data or notifications are consistently submitted to external organisations as required. There are robust arrangements for the availability, integrity and confidentiality of data, records and data management systems. Information is used effectively to monitor and improve the quality of care. Partnerships and communities Staff and leaders are open and transparent, and they collaborate with all relevant external stakeholders and agencies. Staff and leaders work in partnership with key organisations to support care provision, service development and joined-up care.

8. Evaluation and Review

8.1 This policy will be evaluated after 6 months and reviewed after 2 years.