# Draft Housing with Care system specification

## 1. INTRODUCTION

### 1.1 PURPOSE

The purpose of this document is to provide a detailed specification for a digital social care records system for use in CHS Group's Housing with Care schemes based at Moorlands Court, Richard Newcombe Court and Dunstan Court.

## 2. OVERALL REQUIREMENTS

### 2.1 General Requirements

Database system to securely record residents' care information and allow sharing of up-to-date information with authorised staff and organisations.

- Receive care requirements from Cambridgeshire County Council, either as an initial request or as an amendment in agreed format (see appendix A)
- Hold care plan information (see appendix B) and allow access by authorised staff on either mobile devices or desktop computer. Allow staff to amend details as agreed.
- Hold risk assessments (see appendix C,E and F) and allow access by authorised staff on either mobile devices or desktop computer. Allow staff to amend details as agreed.
- Allow generation of daily care cards (see appendix G) – a schedule of appointments to be followed by each member of care staff and filled in as appointments are completed. Care cards to be accessed on secure mobile devices.
- Hold electronic MAR charts, with details of medicines held, to be filled in as appointments are completed. MAR charts to be accessed on secure mobile devices. (See medicines cycle – Appendix I)
- Have a method of staff being able to log their arrival at a resident's flat and departure to show attendance times.
- Interface with pharmacy to allow medicines received to be entered at start of 4-weekly medicine cycle, and medications to be ordered at the end of the cycle. (See medicines cycle – Appendix I)

- Hold power of attorney documents, where held, linked to the care plan
- Hold consent in line with GDPR requirements – replacing authorisation documents (see appendix D) linked to care plan
- Hold restriction record /best interests where recorded
- Hold staff availability and allow for the creation of rotas, taking into consideration resident preferences. Allow rotas to be amended reactively – for example when a staff member calls in sick.
- Allow agreed resident information to be displayed on a secure portal to be viewed by families
- Allow residents to access their own records on the secure portal
- Allow for creation of reports
- Allow for easy export of data set in accordance with a subject access request.
- Allow for automatic import of tenant data when added on Aareon QL Housing system

## 2.2 Security requirements

- Must have multi-factor authentication to all devices
- Must only allow staff to see, and amend only the information they need to see and amend
- Must link only to CHS secure WiFi connection
- Devices must not be able to access general Internet features, such as social media
- Devices must be able to be remotely wiped in the case of loss
- Devices must time-out when not used for an agreed period of time
- System must meet agreed backup and restore parameters
- System must be hosted on the Internet with an agreed disaster recovery plan
- Data must be held within the EU

## 2.3 Service Requirements

- **Availability:** The system must comply with agreed availability targets
- **Maintainability:** The application must support regular updates to ensure compatibility with the latest web technologies, bug fixes, and security patches.
- **Usability:** The application should be accessible on multiple devices, including desktop and mobile.

### 3.1 Existing process and documents

- **Care Grid (Appendix A)**
  Summary of tasks and times to be delivered for each resident used to request or amend the care given in Cambridgeshire County Council format
- **Care Plan (Appendix B)**

  Details of each resident and the care they receive, including:

  - Personal Information
  - Access to flat preferences
  - Medical information
  - Agreed points of contact
  - Current care and support needs
  - Desired outcomes
  - Routines (how resident wants the care team to support them)
  - Communication
  - Assistive technology
  - Oral health
  - Dietary requirements
  - Continence care
  - Mobility
  - Medication (full detail – dispensing method, supplier, swallowing difficulties etc)
  - Beauty treatments (hair, nails, feet etc)
  - Home services (housekeeping, laundry, shopping etc)
  - Power of attorney and advanced decisions (copy held in care plan)
  - Religious beliefs
  - Resident's background (parents, memories, interests etc)

- **Risk assessment for medicines management (Appendix C)**

  Full risk assessment for each resident's medicines in Cambridgeshire County Council format. Must be reviewed at least 6 monthly.

- **Authorisation sheet (Appendix D)**

  Consent to share information completed by resident or authorised party

- **Flat risk assessment (Appendix E)**

  Risk assessment for each flat, including

    - Slips/ trips/ fall risk
    - Fire safety
    - Hygiene
    - Security/ property safety
    - Any assistive technology used to mitigate risk
- **Tenant risk assessment (Appendix F)**

  Risk assessment for each tenant, including:

    - Frailty assessment
    - Nutrition
    - Cognition
    - Breathing
    - Mobility
- **Power of attorney**

  Power of attorney or other authorisation, where held, linked to Care Plan
- **Restrictions record**

  Restrictions record /best interests where held
- **Care Card (Appendix G**)

  Schedule of care appointments given to each member of care staff at the start of each day, to be filled in as appointments are completed
- **MAR chart (Appendix H)**

  A 4-weekly record of medicines to be administered, filled in by care staff. See Appendix I – medicine administration cycle)

**Appendix A - Care Grid**

Summary of tasks and times to be delivered for each resident used to request or amend the care given in Cambridgeshire County Council format

1. Care Grid - Social services .xls

**Appendix B – Care Plan**

Details of each resident and the care they receive

1. Care Plan 2024.docx

**Appendix C – Medication Risk Assessment**

Full risk assessment for each resident's medicines in Cambridgeshire County Council format

APP 3 Medication Risk Assessment.docx

**Appendix D – Authorisation sheet**

Consent to share information completed by resident or authorised party

Authorisation sheet 2024 DUC.docx

**Appendix E – Flat risk assessment**

Risk assessment for each flat

FRA 2025.docx

**Appendix F – Tenant Risk assessment**

Risk assessment for each tenant

TRA 2025.docx

**Appendix G – Care Card**

Schedule of care appointments given to each member of care staff at the start of each day, to be filled in as appointments are completed

NEW - TL and x2 carer 03.06.25.docx

**Appendix H – MAR (Medication Administration Record) Chart**

A 4-weekly record of medicines to be administered, filled in by care staff. See Appendix I – medicine administration cycle)

xMAR Sheet 1.pdf

**Appendix I – Medicines Administration Cycle**

Current process

- Initial MAR chart is created from the Care Grid (appendix A) with input from new resident, GP and family

1. CHS do manual order to the pharmacy for 4-weekly medicines order for residents
2. Medications arrive at CHS
3. Team Leader will sort out medicines and amend MAR charts to reflect the new stock of medicines
4. Carers amend the MAR charts every time they administer medication
5. 4-week cycle leads to completed MAR charts showing a record of medicine administration
6. Team Leader uses completed MAR charts to do medicines order for pharmacy
7. Return to step 1