



Ministry of Social Development

Case management systems for social service sector organisations

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2 May 2016	Updates to case management system features and ratings based on functionality changes since the previous version of this document.
10 Sep 2015	Corrections to summary comparison table relating to Recordbase ratings. Moved information about systems not reviewed in detail by Infoxchange into the main body of report (section 6). Included Exess' self-assessment ratings in section 5.2. Updated contact details for Penelope & other minor refinements.
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1 Case management systems in the social services sector

Social services organisations are increasingly looking to understand how their activities and programmes support the clients, whānau and communities they work with. Irrespective of the type of services provided – support for families at vulnerable times, early intervention, prevention or social cohesion services – organisations are increasingly looking for software packages to help:

- » measure the impact and outcomes they achieve
- » give staff easy access to the information and tools they require
- » understand and improve programmes and services
- » easily report to funders.

These case management systems¹ (also called client management systems) can, when implemented successfully, make a huge difference. It is much easier to understand the answers to questions such as “*How much did we do?*”, “*How well did we do?*” and “*Is anyone better off?*”² if the information about your services is stored electronically and can be easily reported on and analysed. However, successfully implementing these systems often requires a significant investment of both time and money. Given the range of different systems available, each with their own strengths, selecting the right system for your organisation is critical.

This report is designed to help small-to-medium sized social services organisations understand the different systems available in New Zealand and identify which systems should be considered and assessed in detail. Our goal is to reduce the effort that it takes for organisations to investigate and select the right system, and to increase the number of organisations that successfully implement and use a case management system.

This report covers five systems in detail:

1. FileVision Health
2. Kiistone
3. Paua
4. Penelope
5. Recordbase

The providers of two other systems were invited to participate in the full review process:

- » Exess – who choose not to participate in the full review but have provided self-assessment information which is available in section 5.2.
- » Whanau Tahi Navigator – who choose not to participate in the review.

Information on these systems and the two considered for a short-form review - Consult ONE and Benecura - is available in section 6.

Infoxchange recommends that social service providers consider each of these systems for their organisation, irrespective of the degree to which they have participated in this review.

Together with the suite of case studies and templates available on the ImproveIT.org site, we hope you find this report valuable and that it helps you support your clients, whānau and communities.

¹ We will use the term case management system through this report as it is more commonly used than client management systems, despite the discomfort we have with both terms – clients are not managed and support is not confined to a specific ‘case’.

² From the Results Based Accountability framework – For more information see <http://resultsaccountability.com/> and <http://www.familyservices.govt.nz/working-with-us/funding-and-contracting/results-based-accountability/index.html>

2 Background

This report was funded by the New Zealand Ministry of Social Development (MSD). The report is part of a larger programme of work – funded by MSD and being carried out by Infoxchange – to help small-to-medium social services agencies in New Zealand acquire and implement case management systems. The programme includes a suite of tools and templates, focused workshops and facilitated conversations.

We invited nearly 20 vendors of case management packages to submit an expression of interest to participate in this report. Along with MSD, Infoxchange developed the list of vendors to approach through our joint knowledge of the market in New Zealand. We also asked New Zealand umbrella (peak) bodies for the social services and software sectors to nominate systems for inclusion in the study. To focus this report on software packages that should be considered by small-to-medium social services organisations, we developed and used six criteria:

1. A package must have at least five New Zealand-based MSD-funded social services organisations as clients.
2. A package must have, of their New Zealand-based clients, over 25% in the social services sector.
3. The vendor must provide a hosted service with a continuing programme of development.
4. The package must be hosted in either New Zealand or Australia.
5. The package must be actively promoted in New Zealand.
6. The package must cost less than \$15,000 to implement for five users.

To be included in this report, software packages needed to meet at least five of the above criteria.

Five packages were fully considered in this review. A short-form review was completed for one further system because, being relatively new in the market, it did not meet our minimum criteria for the number of MSD-funded clients. Sections 6.6- 6.10 contains the short-form review and information on other systems that we became aware of as a result of undertaking this project.

The five selected case management packages were evaluated against requirements. We developed these requirements by talking with knowledgeable, experienced Infoxchange personnel and by adapting formal requirements developed by several larger social services agencies for their own case management systems. These requirements provided the foundation for each of the three-hour-long vendor product demonstrations. Using fact-based criteria for ratings, we addressed every area of the requirements and compared each system function by function. We then analysed the results: you can see the comparisons in section 5.2 - Comparing the systems. We also wrote up narrative summaries of the systems describing their fit with the requirements of social services agencies, their pros and cons, and pricing, which you can read in section 6 - Case management systems.

For more information on our approach to developing this report, please see Appendix B. Throughout the process, Idealware acted as advisors and mentors to Infoxchange. Idealware develops fantastic reports and resources, all with the purpose of “helping non-profits make smart software decisions”. We recommend you make yourself familiar with their resources, available at www.idealware.org. Many Idealware resources were used in the development of this report.

Infoxchange is committed to unbiased, impartial research, and accepts no funding from vendors including those whose software products we reviewed in this report. See our conflict of interest statement in Appendix A for more information.

3 What should a case management system do?

Understanding the types of systems out there and what features should and could be present will help you evaluate systems. Based on our work developing organisations' requirements for this sector and reviews of various systems, we learned a few things about what is typically available and about what's desirable. More is not always better. The right system for your organisation is the one that cost-effectively provides the best solution to support your business needs, not necessarily the one that has the most features. Feature-rich solutions can also be needlessly complex, and may present an unnecessarily steep learning curve for your staff.

General information

Whatever case management system you choose, it needs to be able to capture key information about the services you provide, the client, information about when, why, what and how the client engages with your services, and the outcome of that engagement. You should also be able to easily retrieve, interrogate and report on that information. Every system we reviewed provided these basic functions, but with varying degrees of ease and flexibility.

Client data tracking

All systems should record, out of the box, the client's basic demographic information, such as name, date of birth and NHI number as well as contact information and emergency contacts. Most systems also collect information, to a greater or lesser extent, about key relationships (like immediate family members or those who live in the same household). Different systems manage these relationships differently. Some link individual records to a family / whānau record while others will link individuals' records to one another. Systems may also collect basic name and contact details of a referrer and the names of funders.

Other features include the ability to link clients in family or other groups, collect socio-economic information (such as race, immigration status, or housing status, health and disability information) and add fields for information that may be specific to the services that you offer, and collect additional information on a referrer as well as funding contract details (contract manager, fund value, service numbers).

Service, workflow and staff management

All systems should be able to name multiple services and link them to a funder in some way. All systems we reviewed can reflect multiple sites or organisations and link them together, but some do it more easily and intuitively than others.

A standard workflow should exist in all systems. The more sophisticated the system, the more you can configure workflows, interrupting them with validation rules or using alerts to notify key users when they need to do something. Be aware that workflows may differ from your current practice and may not be configurable or customisable.

All systems can keep a list of case workers and assign one or more of them to a client, easily reflecting the number of cases assigned to a particular worker. The more sophisticated systems allow more detailed monitoring of caseloads, outstanding activities, waiting lists etc.

Service providers' most sought-after requirement is a system that has calendars and can sync them to Microsoft Outlook (or other desktop tools). However, this feature is exclusive to the more sophisticated systems and, even then, the functionality may only reflect what is in the system calendar (that is, you won't be able to manage your calendar in Outlook or other

desktop tools). In the same vein, most case management systems don't include staff rosters / timesheets, although some systems do have mechanisms that will let you report on time spent on client-related activities.

Case management

This is the core function within a case management system – it is the reason that you bought the system. This is the part that should capture information about “when, why, what and how” the client engages with your services and the outcome of that engagement. This is the section of the system that will generally be used most by your case workers so it should be intuitive and easy for them to insert and view data in the system.

It should be easy to put a client into the system – after searching for a client (to avoid creating duplicate records), accept them to a waitlist (if necessary) and then accept them to a service. The receiving case worker will be notified in some way, either by an alert, email, SMS or change in status. How this is done varies significantly across systems. Some integrate with an online portal where the referrer completes the data entry; others have a simple one-page entry form or a multi-page, multi-step process. Be sure to know what is essential for your purposes (for example a crisis line does not want a complicated process to follow) and whether this can be achieved out of the box or through customisation at an additional cost. Similarly, know whether you need to capture anonymous data as not all systems can support this requirement.

Assessment tools available at present are those predominantly linked to health outcomes. Some systems have the functionality for you to design your own tools.

It is critical to think about what outcomes you are trying to achieve, and what information must be captured to demonstrate these to make sure the system will support you in this process.

It is also important to know whether you will need any custom tools, forms or reports developed within the system to support you in this process.

The system should be able to capture the time and effort related to an enquiry, referral and client-facing and non-client-facing casework. This is usually done through entering notes / case notes that are date and time stamped. Not all systems can break activities down into smaller components or prioritise them, or link them to safety / care plans. The more sophisticated systems will alert clients / staff to activities and track a client's progress against a care or safety plan. All systems should let users attach files (in a variety of formats) to a case file within a stated size limit.

Although many social services are offered in groups, this is not yet a standard function. Some systems have a workaround for recording notes against a group but only one system truly caters for group requirements (although at least three of the systems are currently working to provide more comprehensive and appropriate functionality for this requirement – so watch this space!).

Organisations commonly request custom document creation and emailing from the system. With few exceptions, all systems can create some level of custom document / letter. These may simply be standard reports to which you can add a logo and some custom wording in the less complicated systems, or a document that is pre-populated with specified data in the more complicated systems. Rarely does a system integrate with desktop tools to allow emailing from the system, although most will allow an email to be saved against a case file as an attachment.

Billing

Increasingly social service organisations, especially those that provide counselling, need to bill government agencies or clients themselves for services provided. Most of the systems reviewed in this report will need a third-party billing or accounting system to generate invoices. The more sophisticated systems provide an Application Programming Interface (API) you can use to upload data to an external accounting system.

Queries and reporting

A key reason for acquiring a case management system is to easily access, present and evaluate data about clients and the services they have received. Make sure you have access to all collected data, including any custom fields you've defined. Queries, formatted or ad hoc reports are the usual methods of accessing data.

Queries should be flexible and easy to build and not limited to certain fields. Some systems can manage dynamic queries, automatically pulling in new data that meet specific criteria without having to refresh or reload the query every time.

Most systems come with a number of pre-packaged or "standard" reports that help you answer important questions about clients, such as how many clients have received a particular service in the past year, the average length of time a client is in a service, the number of clients cared for by a particular case worker etc. Others are a blank slate and either you or the vendor will have to build the reports your organisation needs. From time to time staff may want to create their own reports "on the fly", defining what formats and information are used. These simple ad hoc reports can be exported to Microsoft Excel and formatted there.

Customisable dashboards are an attractive option, allowing staff to quickly see up-to-date workflow information on relevant clients. When you're considering a case management system, see whether users can customise their own dashboards with the reports they need, or if an admin must set up dashboards based on specific user roles.

For extremely complex reports, experienced users may want the ability to write or use queries written in SQL. Some tools will even allow you to add charts or graphs based on your data.

Access permissions and audit logs

You'll also want to see if a system can help you report for data issues, like duplicates or inconsistent practices, and put a date stamp on all client-related information and other data for auditing purposes. It is best practice for every user of a case management system to have their own login. A system should support more than one user accessing a client's file at a time. Make sure you can customise the permissions within the system to suit your organisation's needs, so you can do things like hiding sensitive information from certain users.

Integration with other systems

In an effort to minimise double handling of data, organisations increasingly want their case management system to integrate with other pertinent systems, particularly calendar and email applications. Ideally, it should be easy to create a custom integration using an API or get data into your software through another import process, such as custom tables and lists from external sources. Data should also be straightforward to export out of the system to accounting systems or to business intelligence tools. Some vendors offer "open" APIs or let you access the source code of the system to help you integrate your systems.

Configuration / customisation

When looking at a system, you might want to make sure that you can hide pieces of functionality that aren't applicable to your organisation and customise language and terminology for your organisation. Most systems allow the user to maintain dropdown menus and add custom fields. Make sure there is sufficient capacity within the system to meet your specific needs. If necessary, check that the workflow within the system can be adapted to your organisation's workflow.

If you're planning to integrate or synchronise information between your case management system and another system, manual imports and exports can be time-consuming and error-prone. As this can be a complex process, make sure you have professional advice and consider whether an automated connection is beneficial so data can flow from one system to the next without manual intervention. If you want to build an automated connection, check to make sure the system you are considering supports it.

Ease of use

The systems reviewed in this report run the gamut from being simple and easy to use to being fairly complex. Functionality (once configured and installed) should be relatively easy to learn and remember. Are fields and functions intuitively named and easy to find? If staff need cheat sheets or guesswork to run basic processes, they're more likely to opt out of using the system or resort to workarounds. Can users easily find the actions they need to take without returning to a main menu? The system should also effectively support power users – those most familiar with the system – and help them perform common tasks quickly and efficiently.

4 Selecting a case management system

The information in this report will help you narrow down the choice of case management system to a select few. Before you start you'll need to gather some important information about your organisation and how you operate and you will certainly want to take a careful look at those systems yourself before making a final decision.

4.1 What do you need to make your decision?

Most importantly, think through your needs, otherwise known as requirements, carefully. Make sure that you can clearly articulate what your needs are, generally through writing them down, and which of them are critical for you. It helps to consider “what” rather than “how”; that is, *what* information do you need for funders, to make service decisions, to make strategic decisions rather than the exact process of *how* your service is offered. Focus on your requirements and try to remain open to different technical solutions.

Secondly, think about the budget – both implementation and ongoing budgets. In general you only ask vendors for pricing information once you have seen all the features. However, particularly if you have a limited budget, price may be a criterion for short-listing systems and it is therefore appropriate to ask for pricing information before doing the due diligence. Be aware that for some systems pricing is straightforward while for others it's quite complicated and may take some time for the vendor to estimate. Make sure you know what is included in the price. Will the vendor move any existing data into the system? Set up the system for you? Do more complex customisations? What are the ongoing costs over three to five years? When comparing system costs, consider the total cost of a system – including implementation costs, hosting, maintenance, support, training etc. over a period of three years or more to get an accurate view of systems – but make the decision on which system offers the greatest value to your organisation – not which is the lowest price.

Lastly think about other factors that may affect the successful implementation of the system such as:

- » the IT expertise of your people and how that matches with the degree of complexity of the proposed system
- » your IT strategy (for example, it may not be appropriate to have a locally installed system if you are moving everything else to the cloud)
- » whether you have enough dedicated resources, either internal or external, to manage the implementation, including engaging with the vendor, user testing the system, training, etc.

Product background / vendor due diligence

It takes considerable effort to choose a client management system and move your data into it. You don't want to be forced to repeat the process in a year because the vendor went out of business. When considering a system, consider the vendor, too.

Ask some background questions – how long has the vendor been in business? How many clients does it have and how many staff members? Does the revenue earned from its system cover the personnel and operational expenses required to support it? The most important thing you can do is review referees: talk to the vendors' other clients, particularly those similar to your organisation, and make your own assessment as to how well your two organisations could work together.

A vendor with a few hundred clients whose revenue covers expenses is likely to be as stable as any other company. Take your own preferences into account when thinking about company size. A small company might provide a more personal feel and better service, while a larger company might have more defined processes around upgrades and issues.

Professional advice

Selecting a case management system is a significant decision and investment for any organisation. While we have designed this guide to help non-profits identify systems which might be appropriate for their organisation, organisations should not consider this guide a substitute for skilled or professional guidance. In our experience, having someone on your internal project team³ who has previously selected and implemented a case management system for a similar organisation makes a significant difference to the success of the project. This is particularly important if you work with a complicated mix of services, processes or locations.

There are three distinct phases to acquiring a new system. The key activities involved in each of these three phases are outlined below.

1. Documenting requirements (prior experience / professional help strongly advised) includes:
 - a. documenting the business processes – this may involve some redevelopment and standardisation of current processes
 - b. documenting the requirements for the new system.
2. Selecting a system (prior experience / professional help recommended unless the requirements are very simple) includes:
 - a. considering more than one system, and preferably at least three
 - b. matching your requirements with each system
 - c. comparing the initial and ongoing costs over three to five years
 - d. considering the reputation of the supplier, how long you expect they will be in business to continue to develop their system and to support you, and their “fit” with your organisation
 - e. making the decision based on all of the above, not just on the price.
3. Implementing the system (prior experience / professional oversight recommended for more complex implementations with the supplier and client providing the actual project management) includes:
 - a. redevelopment and standardisation of business processes where necessary
 - b. ensuring there is adequate provision and time for testing, data migration, and training
 - c. monitoring all stages of the implementation
 - d. supporting and encouraging staff to use the system.

Remember that a case management system is only useful if it fits your organisation’s needs. It should make the jobs your already busy people do each day easier and more efficient, allowing you to focus on your core social service business. Each of the available options has its own strengths and feature mixes, and cost isn’t a guarantee of anything – especially since every social service organisation’s needs differ. But if you combine an honest evaluation of

³ They may be a member of your staff, contractor or external advisor.

what you need with due diligence in comparing what systems are available, you'll find a system that will manage your processes more efficiently and help you communicate better with each other, funders and clients.

4.2 What types of systems are available?

In this report, we are only evaluating online-hosted packages. We believe this is the best approach for the majority of smaller New Zealand-based social service agencies. But it is helpful to understand the range of options available and consider how they might work for you before you look at specific solutions. Choices include online-hosted, installed, specialised packages for social services agencies or custom built. Our definition of "package" is a software system developed for a specific purpose and available to multiple organisations and individuals for sale, lease or license. By "custom" we mean a software system developed exclusively for a specific organisation or individual. Both package and custom software systems can be made available as on-line hosted platforms or on your own computers ("installed"). We discuss some combinations of these options below.

It makes sense to think through what types of systems might work for you before considering specific solutions.

Self-hosted or online packages?

Online hosted packages

A growing number of case management systems are hosted entirely online, accessible through web browsers. In this model, sometimes called Software-as-a-Service (SaaS), you pay a software vendor to provide online access, and the software – along with all your client and case management information – is stored on the vendor's own or contracted servers. The benefits are that you don't have to purchase any hardware, the vendor handles software updates and data backups, and your people can access the system from anywhere there's an internet connection. This model also places significantly less burden on your agency's IT staff.

The online systems currently available typically offer strong support for online data collection, including case notes, assessments and reporting. They range from straightforward, inexpensive packages all the way up to very sophisticated, customised systems, all charged on a per-year basis.

Installed packages

A more traditional option, these systems are purchased up front and installed onto your server's network and computers. Many of these systems only run on the Microsoft Windows server operating systems. With this model, you're responsible for software updates and data backups, which generally come at an additional cost.

The available installed systems tend to be strong in the kinds of features that can help your people manage a complex process, such as easily creating printed letters, but can be weaker in online data collection. Some require external modules to support online applications and progress reports, or to let you send email from within the system. They typically cost more in the first year than the online systems, but many are more affordable on a per-year basis after that.

A few of the higher-end systems use a different installed model, and offer software that you buy and install on your own web server – like online hosted systems, your people can then access it from anywhere there's an internet connection, and it easily supports online data

collection. It also provides more control over technical details than a hosted system. However, you'll need to purchase the hardware required to host the system, and you'll need qualified IT people to install and update the software and back up the data. You'll also need to ensure that the system is hosted securely and reliably.

What about CRMs, custom-developed solutions and paper?

CRM systems

The term “customer relationship management system”, or CRM, usually describes systems that help organisations manage their interactions with current and future customers and supports functions such as:

- » opportunity management – to help an organisation track potential leads and make new sales
- » contact tracking – to provide a holistic view of interactions with a contact
- » managing and supporting the product and service delivery processes.

Many CRM systems integrate well with email and calendar systems such as Microsoft Outlook and are very flexible, but will often require a fair amount of customisation in order to meet the needs of organisations that deliver social services. Systems like Salesforce, CiviCRM, SugarCRM, and Microsoft Dynamics CRM are fairly blank slates out-of-the-box, and you will usually need a consultant to help you set the system up for your organisation. With some modification, you'll be able to track your clients in a number of different groups – not just clients, case workers, and volunteers, but also other groups important to your agency, such as advisory board members or donors. You are likely to need to build in features that go beyond basic client tracking.

While these CRM systems could potentially help a non-profit deliver social services, they do not provide the type of functionality that most organisations require (described in section 3) “out of the box”. It is also possible to purchase a package built on a CRM platform that is geared to the specific case management needs of social services agencies – one example of this is Whānau Tahi Navigator, which is built on top of Microsoft Dynamics CRM (refer to section 6.7 for more information).

Custom-built systems

This report focuses on packaged solutions, but building your own system can be a useful alternative for large agencies with truly unique needs. Going down this road merits caution as it can be expensive, lengthy and challenging. Make sure you have a good reason to build a system around your unique needs as it may be more appropriate to adjust some of your processes. And think through the long-term ramifications of owning a custom-built system – you'll not only need to pay to create the system initially, but to maintain it and upgrade it to match changes in your processes or with other software packages you are running. With the increased availability of viable case management packages, developing custom-built systems is growing less common as a strategy for social services agencies. Think about reaching out to peer institutions to find out what they are considering.

Pen, paper, word processing and spreadsheets

If your agency is very small with only a few case workers and clients, the volume and complexity of your work may not require a computer-based case management system. A well-constructed electronic and / or physical filing system may give you fast and efficient access to all the information you need.

5 An overview of the reviewed systems

This section provides overviews of each of the systems that we review in full later in this report. Remember that there are other systems which may also be of interest to your organisation. Section 6.6 - 6.9 provides information on Exess, Whānau Tahi Navigator, Consult ONE and Benecura, each of which may be appropriate for your organisation.

5.1 Introducing the systems

FileVision Health (Fraame Healthcare)

FileVision Health is a purpose-built set of modules that offers a broad range of functionality such as e-forms, content management, electronic signature, relationship management, process design translating into workflows. These modules can be switched on or off, depending on how the user organisation wishes users to interact with the system. Additional functionality is available through the "Custom Library", a repository of all customised functions that have been created for user organisations. Modules in the library can be used at no or minimal cost.

FileVision Health utilises an HTML5 web based interface which is technology "agnostic" and compliments the thin client interface available in previous versions of the product.

Workflow is strong and straightforward to set up. It includes who should do which task, when, how and with what. FileVision Health integrates seamlessly with Microsoft Office products, and documents such as emails, letters and reports generated within Microsoft Office are automatically logged to a client's record.

Average expertise is required to manage the system, although someone with higher skills will be needed if the organisation wants sophisticated reporting as this has to be done through a report writer interface.

The system starts at about \$3,500–\$5,000 per year for a minimum of five users.

Read the full review, beginning on page 17.

Kiistone (Kiistone)

Kiistone is a new vendor in the case management system marketplace, providing a simple, affordable system for the sector. It includes some unique functionality to support child placement case management (which is what it was originally developed for).

The workflow is, in general, intuitive. Although the workflow has limited configurability (you can turn portions of the workflow on or off), the document builder and the outcomes tool add some flexibility, allowing users to create custom forms, case notes, assessments and evaluations. While information collected in this way cannot, as yet, be reported on, this is planned for later in 2015.

Kiistone will support organisations to have their own administration users who can adapt and update most dropdown lists, text, language and terminology; however, most often the configuration and customisation changes are made by the vendor on your behalf. This comes at no additional cost except where new or unique functionality is required.

New developments to the system become available to the user group on request.

Ongoing costs for an online version of the system are around \$2,100 per year for a smaller organisation with 5 users, or for a larger organisation with 40 users, around \$12,000 per year (excluding implementation costs).

Read the full review, beginning on page 23.

Paua (Paua Software)

Paua is an affordable, easy-to-use case management system. It is very strong in some areas – for example, users can create powerful queries and ad hoc reports with comparative ease – and it has the best functionality for working with and recording group activities of any of the CM systems that we looked at. However, it does not have the sophisticated workflow management of some of the more expensive and complicated systems.

The vendor is willing to customise the system at reduced cost to the client and roll out those changes to all users if the new functionality is deemed useful to the user community.

The system starts at about \$1,800 per year for small organisations.

Read the full review, beginning on page 29.

Penelope (Athena)

Penelope is a well-established, higher-end case management system designed for mid-sized to larger organisations. Sophisticated tools facilitate the organisation in creating user-defined documents (such as forms, assessment tools, questionnaires) and custom workflows with automatic processes, alerts and notifications which are integrated within service delivery activity tracking, client scheduling and invoicing. The case file structure supports both individuals and family case files that receive multiple services.

It has an attractive, user-friendly interface with each user being presented with a personalised dashboard and access to their own collaboration suite drawer where their tasks, messages, alerts, reminders, calendar as well as reports are available to them.

A strong search function and large number of internal reports support data evaluation. ODBC compliance allows for flexible and ad hoc reporting although the vendor does recommend using Tableau to expand this capability.

Read the full review, beginning on page 33.

Recordbase (WildBamboo)

Recordbase is a mid-range case management system that originally focused on the health sector (and includes a number of sophisticated health outcomes tools) but has adapted well into the social service sector.

This is an easy-to-use system, with a simple workflow and the ability to link care plans with goals and tasks, coupled with the ability to track progress against goals. All of this makes this system good for outcomes reporting, although the reports themselves need to be custom-built.

The vendor still performs most configuration and customisation for clients, although most dropdown lists can be maintained by the user organisation.

Unique to all the case management systems reviewed, Recordbase has specific functionality in residential services and supported employment services, and has a sophisticated health and safety component for reporting and managing incidents.

Ongoing costs for an online version of the system are around \$5,400 per year for a smaller organisation with a minimum of 10 users, or for a larger organisation with 40 users, around \$21,600 per year (excluding implementation costs).

Read the full review, beginning on page 41.

5.2 Comparing the systems

As part of this research, we reviewed five case management systems in detail to determine how they compared across 23 areas, outlined in the following table. Also included below is Exess, who chose to complete a self-review. While every social services agency will base software decisions on a different set of factors, this chart can help by outlining the strengths of different systems in areas important to most agencies.

The detailed write-ups of the five systems begin in the following section – section 6. The framework used to determine the ratings is described in Appendix C - How we rated the systems.

Table 1: Comparison table	FileVision Health	Kiistone	Paua	Penelope	Record-base	Exess ⁴
Ongoing cost (approx. p/a): 5 users	\$5,000	\$2,100	\$1,800	- ⁵	\$5,400 ⁶	\$1,800
Ongoing cost (approx. p/a): 40 users	\$13,500	\$12,000	\$3,600	- ⁵	\$21,600	\$16,000
Client information	●	●	●	●	●	●
Referrer information	●	●	○	●	●	●
Funder information	●	●	○	●	●	●
Services	●	●	○	●	●	●
Workflow	●	○	○	●	○	●
Capacity and workloads	●	●	○	●	●	●
Enquiry / referral	●	●	○	●	○	●
Social services assessment tools	●	●	●	●	●	●
Notes / case notes	●	●	○	●	●	●
Care / safety plans	●	●	●	●	●	●
Groups	○	●	●	●	●	●
Documents & email creation	●	●	●	●	●	●
Scheduling and calendars	●	○	○	○	●	○
Service exit	●	●	○	●	●*	●
Invoice generation	●	○	#	○	○	○
Queries and reporting	●+	●	○	●+	●+	○
Data extraction	●	●	●	●+	●+	●
Access permission & audit log	●	●	○	●	●	●
Configure / customise fields	●	●	●	●	○	○
Integration	●	*	*	●	○*	○
Ease of use	○	○	●	○	○	●

None ○ Basic ● Intermediate ● Advanced * With customisation + With addition of non-standard module

Note: This report does not include information about implementation costs, as they can vary significantly depending the number of programmes and forms, data migration, training, and other

⁴ Exess is depicted separately to indicate they chose to self-assess their system against the ratings criteria. Infoxchange has not verified the self-assessment to ensure a common comparative basis.

⁵ Athena did not share pricing information about Penelope.

⁶ The minimum number of licences for Recordbase is 10 licences, which costs \$5,400 per annum.

factors. It is important that organisations work with the vendor to develop an accurate understanding of implementation costs as part of the software selection process.

5.3 How to identify a short list?

Although the processes within social services are similar at a high level, the specific needs of social service organisations are seldom exactly alike. It's simplistic to suggest that one system will fit all. We recommend you assess your own resources – the IT infrastructure, level of IT skills among your staff and the budget allocated for your organisation's technology infrastructure – both for set-up and annual running costs.

Below we outline different scenarios that might help narrow the systems of interest for your organisation. These scenarios are meant to be a starting place – please see our detailed overviews, pricing section, and comparison matrix for more information about each option.

First, consider which scenario best describes your organisation⁷.

You are a small organisation with few clients and simple, straightforward processes and a limited budget

Some of the systems with advanced functionality can be appealing, but think through how much of the functionality described is necessary for you. If the vast majority of functionality described doesn't really apply for your processes, the less-expensive and less-complex systems might work well for you. Don't assume that more functionality is better; an inexpensive and streamlined system might be just what you need. It may even be that a combination of pen, paper, word processing and spreadsheets is the most pragmatic solution for you. But if you need something more, consider reviewing:

- » Puaa
- » Kiistone
- » Recordbase.

You have a complicated organisational structure

Your organisation offers multiple services from multiple sites with each service having a unique workflow or you have multiple organisations offering similar services needing to collaborate and report on outcomes across the organisations. You will need a system that allows multiple workflows that are configurable for each service or organisation. Consider looking at:

- » Penelope
- » FileVision Health (Fraame Healthcare).

⁷ Our short list only references systems that Infoxchange reviewed in detail. For information on other systems see sections 6.6 - 6.10.

You have unique workflow processes

It's important to know what you need more than how you need it done before choosing a new case management system – tailoring a system to unique processes is at best expensive and time consuming and at worst impossible. It's quite common to think your processes are unusual in an important way, but in many cases these processes can be tweaked to match best practice without sacrifice. However, if you have truly unique needs, you'll need to look at systems that can be substantially customised, such as:

- » Penelope
- » FileVision Health (Fraame Healthcare).

Your people spend much of their time in the field and are often offline

If you want a system that your people can access from anywhere, you'll want to prioritise online-hosted options as well those that allow the user to work offline and sync data later. Depending on the complexity of the services you offer, systems to consider are:

- » Puaa
- » Recordbase
- » FileVision Health (Fraame Healthcare).

The services you offer are predominantly delivered in a group

If most of the services you offer are group activities and you need comprehensive group management tools, consider:

- » Puaa (the most comprehensive and intuitive system at present)
- » FileVision Health (Fraame Healthcare)
- » Kiistone
- » Penelope.

Your office has poor access to the internet

If your office has poor access to the internet or you prefer to have direct control of your system, then you may wish to consider a system that is installed on your own computers (bearing in mind that this will require robust IT infrastructure and specialist IT support). Consider:

- » Penelope
- » FileVision Health (Fraame Healthcare).

Unique services

There are a couple of systems that have components already created for some unique services. Consider Kiistone for child placement services and Recordbase for assisted employment or residential services if you want to avoid customising or creating other systems that will generally come at a cost.

6 Case management systems

The features and functionality of the five systems that Infoxchange reviewed in detail:

1. FileVision Health
2. Kiistone
3. Puaa
4. Penelope
5. Recordbase

are covered below.

Further information about other systems which met the criteria for inclusion in the report -

- » Exess (who completed a self-review)
- » Consult ONE
- » Whānau Tahi Navigator
- » Benecura

is also included below, together with some other systems we became aware of through this process.

6.1 FileVision Health

FileVision Health is a purpose-built set of modules that offers a broad range of functionality such as e-forms, content management, electronic signature, relationship management, process design translating into workflows. These modules can be switched on or off, depending on how the user organisation wishes users to interact with the system. Additional functionality is available through the "Custom Library", a repository of all customised functions that have been created for user organisations. Modules in the library can be used at no or minimal cost.

FileVision Health utilises an HTML5 web based interface which is technology "agnostic" and compliments the thin client interface available in previous versions of the product.

Workflow is strong and straightforward to set up. It includes who should do which task, when, how and with what. FileVision Health integrates seamlessly with Microsoft Office products, and documents such as emails, letters and reports generated within Microsoft Office are automatically logged to a client's record.

Average expertise is required to manage the system, although someone with higher skills will be needed if the organisation wants sophisticated reporting as this has to be done through a report writer interface.

The system starts at about \$3500–\$5000 per year for a minimum of five users.

Client information: A client is an individual person with a unique identifier that is automatically generated by the system.

The system lets you record and configure basic demographic information such as DOB, gender, nationality, Iwi, residence status; contact information such as phone, email, address; social information such as occupation, income, benefits, living arrangements; and health information such as medical conditions, medications, substance usage through user-defined dropdown lists.

The system lets multiple addresses be assigned to a single client, for example a physical address and a postal address or multiple legal guardian addresses. Historic addresses can be stored with dates against them. All previous addresses can be searched. Name changes overwrite current information. Point in time information would generally be lost, however if this

is functionality that would be required, then this can be readily customised but at additional cost.

The client can have multiple roles (husband, father, brother) and can be linked to anyone recorded in the system as well as individuals added specifically to the client's record as a contact. The system lists everyone with whom a client has a relationship, making identification of relationships easy.

Although the system allows the recording of Maori Iwi, the accommodation of the specific needs of culturally and linguistically diverse groups would be facilitated by creating specific business rules.

Referrers: Detailed information can be captured on referrers including identity of the referrer, referrer organisation and the type of referrer as well as the contact details of the referrer. This does not occur on the "entry form" but can be added to the referrer separately.

Funders: The system lets you capture funders' details such as contact person, contact addresses, telephone numbers, email addresses, contract managers and their line managers. The system lets you capture funder contract details like the number of contract hours, numbers of clients, contract value as well as a breakdown of cost / activity (i.e. fee for service).

Location, type and funding of services: The system is set up in a tiered way as multiple contracts that can be delivered at multiple locations. It is however flexible as to how the elements are reflected and linked e.g. it could be Special needs services with multiple funders beneath that and specific services for each funder or it could be a Funder with multiple services below the funder. This is determined by what functionality and reporting the user organisation requires.

Clients are linked to services and funders by referral into a particular contract and a service from a dropdown of services being selected.

A client may access multiple services simultaneously or sequentially.

Workflows: Workflows are created through the workflow editor. Simplistically, workflow process charts are created for all workflows in the user organisation and linked to people, documents, time and resources. These are configured and deployed by the vendor to meet the requirements of the service. Different workflows can be created for different services. If required, staff can be trained (this would be at an extra cost) to perform this task and therefore additional workflows, or changes in a particular workflow, can be changed by the user organisation as and when required.

The workflow can be interrupted at critical touch points by configurable validation rules and criteria with associated notifications and alerts. The system also lets you define criteria for automatic reminders for staff and clients for scheduled activities. Once set up, the processes can be easily managed by user organisation staff.

Capacity and workload management: The system lets you accept a referral onto a waitlist, add notes and activities against the client while on the wait list, change the priority and the service that the client has been referred to.

Workflow configuration will allow automatic alerts to be triggered in the event of a new vacancy arising.

The system lets you maintain a list of active and non-active case workers and you are able to assign more than one case worker to a client.

There is the functionality within the system for capacity to be tracked in real time. However, an alert in real time when capacity is reached in numbers, attendance hours or contract value is not standard and would require customisation (at a cost).

Search and identify: The system lets you perform the initial search by first and last name, or previous case number, if known. This is however configurable to the client's needs and any combination of first name, last name, DOB, NHI number etc. can be used to ensure that the client is unique. Duplicate files can be merged.

Enquiry / referral: The system does not have specific functionality with respect to capturing the time and effort related to an enquiry, however an e-form can be created for this specific function. e-forms can be created by the user organisation or the vendor with the latter option coming at an additional cost.

The referral capture is a single page intake process. The system allows multiple individuals to be linked to a single referral incident without needing to re-enter information

Online referral is possible, capturing data directly into the system. An automated response (acknowledgement, transaction ID) for referrals received electronically can be generated. This functionality is not standard and would come at an additional cost.

A referral has a status indicating whether it has been assigned or actioned. Re-referrals are not specifically noted; however, this can be immediately seen when looking up a client as all previous cases are visible.

The configurable workflow process allows a referral to be assessed and prioritised and for an alert to be sent to a team leader / case worker when a new case has been received / assigned.

The system allows you to update the consent status of the client during the case (with date-time stamp) although a note indicating this can be made. All notes and case notes are searchable.

The system allows you to record a user-defined response to the referral e.g. provide information, advocacy, donations etc.

Assessment tools: The system does not have any standard assessment tools but is currently developing the ability to will integrate with a range of industry psychometric tools, where an exact copy of the tool will be available as a working screen within FileVision Healthcare. It will look and feel exactly like the current form but with the ability to calculate numeric scores and pre-define certain fields (i.e. Client Name and Date). A configurable summary screen will indicate scores attained for previously completed tests. This functionality will be available in the latter part of 2016.

Other assessment tools could be developed by the client using the the e-form builder which, allows the user organisation to design and create their own assessment tools. These forms can then auto-populate information like personal details or other pertinent information that has already been captured in the system. Sequential assessments can take place at user-defined intervals with internal alerts.

Case notes / notes: How notes are captured is entirely dependent on the user organisation's preference and how the workflow has been configured. It can be as simple as completing a free text area on the client notes page or as complicated as completing a "timesheet" that tracks subjective / objective information, action / care plans, deadline dates, service codes, the amount of time spent, with it calculating (based on preconfigured information) the hours remaining on a time limited contract or the funding remaining for that particular service.

Notes are date and time stamped and all notes and activities are easily searchable.

Any type of formatted document can be attached to the file and these attachments are indexed.

Care / safety plans: Like case notes, the functionality is extensive and how it is used will be determined by the user organisation. Again this can be a simple form that outlines a care plan to a sophisticated breakdown of each element of the plan with associated resources, time, and costs associated with the plan. The system lets you link actions and activities and assign dates to these actions / activities.

Alerts can be placed on the system with different colours indicating different types of risks. Alerts show up as a coloured box on the case note page as well as a colour highlighted line in the list of activities.

Individual progress notes can be completed against a goal, task or care plan. These notes are date stamped, indicating the case worker completed the form / note. One is able to track the number of hours left in a plan, the amount of funding remaining and if a task has been completed. Notes can be reported on.

Groups / group management: The system lets you create a group from active clients and clients on a waitlist. The system lets you assign a group facilitator and other case workers to the group. It lets you record notes against a group, however you need to exit the group to add notes against an individual. You can create a group register.

Document and email creation: The system integrates seamlessly with Microsoft Office with a tab appearing in all the Microsoft Office products facilitating easy upload to the system. This applies to emails as well as documents. You are able to create standard documents / email from templates without re-entry of data and the system keeps a record against a specific client file.

Scheduling / calendar: The system does not include scheduling or resource planning functionality, however it does interface seamlessly with Microsoft Office (in the standard deployment) and therefore Microsoft Outlook can be easily used for this purpose.

Currently being developed is a scheduler, still within Microsoft Outlook, for users to plan their day and use as a simple way to update actual time spent against activities. This will be available in the latter part of 2016.

Service exit: The system supports internal referrals by simply adding another service to the client. Once again, configurable workflows can trigger the required alerts for the appropriate people receiving referrals.

A client may exit a service at any time and exit planning can be supported through e-forms and configurable workflow that provides notifications, reminders and alerts for all record management purposes. Custom letters can be generated for referrals out of the system in the form of documents saved to the file and emailed.

The process of delayed assessments (in support of RBA ©) can be done through configurable workflows with calendar alerts to remind a case worker that a client needs to perform another assessment.

Closed files cannot be changed or annotated and viewing of content once a file is closed is permissions-based.

Service evaluation can be performed in one of two ways – either through using a Word document or through a custom e-form. This is a moment in time and the information is stored as an attachment to the file. Content of the Word document cannot be reported on. e-forms

are dynamic and with the limited client view portal can be accessed online. Information collected in this manner is collected and collated. Analysis would need to be performed separately through exporting the data to Microsoft Excel.

Unique / special services: The system has highly configurable workflows, and this combined with e-forms and the relationship management module means that most service requirements could be met. The system has been successfully deployed for a number of different services. The customisation library has many service specific customisations that can be made available at a nominal cost. Otherwise this type of customisation would come at full development cost.

Incident and complaint management: e-forms are used for capturing incident and complaints information and the reporting functionality can track and manage the information.

Invoice generation: The system has a comprehensive, complicated accounts receivable component which is part of standard deployment. This component can be turned on or off.

The system integrates with a number of accounting systems including Xero. Other integrations can be set up at a cost.

Standard reports: There are a number of standard reports in the system which report on a variety of activities within services at multiple levels. Any data that has been captured in the system can be reported on and presented in a number of ways i.e. with graphics, tables, etc. These reports can be edited and customised to your specific requirements and saved as a favourite. Report scheduling is managed as part of a workflow configuration.

Report viewing is based on the same hierarchical permissions that allow data visibility within an organisation, i.e. within a business / service unit, however specific permission can be provided to individuals.

Queries and ad hoc reporting: There is extensive queries functionality. Any document or field can be searched and these can be exported to pre-defined templates as necessary. Criteria and output can be saved. If additional functionality is required, then open database connectivity (ODBC) and a separately purchased report writer of choice can provide this functionality.

Statistical reports: The system has no standard statistical reports, however the open database connectivity (ODBC) and a separately purchased report writer of choice can provide this functionality.

Individual view and dashboards: Users see an individual view of the tasks and data that apply to them in the HTML version of FileVision

Dashboards are available for any set of data that the user organisation requires. An initial set of dashboards will be configured by the vendor, and thereafter individuals can personalise, configure and manage their own dashboard, adding reports and saving favourites. Information displayed on a dashboard can be shared individually or made public, however viewing public information is based on role permissions.

This functionality is only available in the HTML version of FileVision.

Data extraction: Lets you export unlimited number of reports to .xlsx, .docx, PDF or .txt format. It also allows you to export information to preconfigured formats for batch file transfers.

Access: The system can be deployed as a SaaS or onto a client's server. If deployed as a SaaS, the system is accessed through a web browser. The system is browser agnostic.

The system is written in HTML 5 and is device agnostic ranging from desktop through to tablets and phones. The system is also written in a thin-client deliverable.

Off-line functionality is supported through the use of e-forms. This allows data to be collected and synced when connectivity is available. This functionality would need to be specifically requested and depending on the complexity of the needs, may involve additional costs.

Permissions: The system lets you grant individuals access to edit or delete data for a wide variety of system functions and data on a field-by-field basis. It lets you create and enforce access to different types of clients for different users, including one-to-one access if necessary. Users can be locked out if a process requires it.

Audit logs: Audit log access is permission-based and configured by the user organisation. Audit logs are available on all activities (including viewing).

Configuration / customisation: The system is built around five core functionality groups which have a variety of core functions that are sophisticated and complex. This functionality can be turned off / on depending on the requirements of the user organisation. Initial configuration is completed by the vendor, thereafter allowing the user organisation to maintain the configuration of specific fields e.g. dropdown lists and user roles with permissions, funder contracts etc.

The vendor will create customised additional functionality which, if appropriate, may be added to the system and distributed to other users. In general, if the customisation would have a wider application and could be included in the base product (and the user organisation is prepared for the intellectual property to be shared) the cost of customisation is significantly reduced. Customisations that can be shared, which are not included on the base product, become part of a comprehensive library of customised functionality that user organisations have access to when considering customisation. The cost for adding these customisations is less than it would be for unique customisations.

Additional custom functionality unique to the user organisation will be at full development cost.

Integration: The system integrates seamlessly with Microsoft Office with a tab appearing in all the Microsoft Office products facilitating easy upload to the system. It can be interfaced with Xero; however, this does come at an additional cost.

Data migration can be performed at additional cost from specifically formatted .csv or .xls documents.

Hosting: This system is a hosted service in New Zealand. The system can also be purchased and installed on your own servers.

Ease of use: The system is powerful with a lot of different options and features, but since the vendor will configure it on setup to better match your terminology and workflow, the learning curve should be decreased a bit.

The organisation of the system relies on many different screens, each with lots of information, making it sometimes difficult to find features or fields. Less technically savvy users may feel initially overwhelmed and it may take some time for novices to learn.

More advanced IT users can tailor their dashboard to their own preferences, create and use templates creating a number of quick data entry options, share data with colleagues and automate functions. The query building tool provides a lot of control once you've learned how to use it.

Product background: The vendor has been in business since 2004 and reports 26 clients in New Zealand and Australia.

For more information on this product please contact:

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6.2 Kiistone

Kiistone is a new vendor in the case management system marketplace, providing a simple, affordable system for the sector. It includes some unique functionality to support child placement case management (which is what it was originally developed for).

The workflow is, in general, intuitive. Although the workflow has limited configurability (you can turn portions of the workflow on or off), the document builder and the outcomes tool add some flexibility, allowing users to create custom forms, case notes, assessments and evaluations. While information collected in this way cannot, as yet, be reported on, this is planned for later in 2015.

Kiistone will support organisations to have their own administration users who can adapt and update most dropdown lists, text, language and terminology; however, most often the configuration and customisation changes are made by the vendor on your behalf. This comes at no additional cost except where new or unique functionality is required.

New developments to the system become available to the user group on request.

Ongoing costs for an online version of the system are around \$2,100 per year for a smaller organisation with 5 users, or for a larger organisation with 40 users, around \$12,000 per year (excluding implementation costs).

Client information: A client is an individual person with a unique identifier that is automatically generated by the system. Individuals created in error (for example, duplicate records) can be merged or deleted.

The system lets you record and customise basic demographic information such as DOB, gender, nationality, lwi, residence status; contact information such as phone, email, address; social information such as occupation, income, benefits, living arrangements; and health information such as medical conditions, medications, substance usage through user-defined dropdown lists. This information is in tabbed sections which can be turned on or off as the user organisation requires.

The system does not let you store multiple addresses against an individual and point in time information is lost when overwritten. As client notes are searchable, this can be gotten around by creating a note titled "address change". This however relies on business rules being followed by users. The same applies to name changes.

The system can link a client to a family member (which captures name, date of birth and critical notes) or an associated person (such as an agency, other clients or other associated persons like lawyers, doctors etc.). A family member or associated person, may have multiple roles with other clients (husband to one, father to another, brother). The system it lets you easily view everyone with whom a client has a relationship both familial (parents, siblings,

whanau) and non- familial (counsellor, school, placement family and caregiver). These associations can be searched, facilitating identification of an associated person who may present a risk to others, or groups of clients associated with a single organisation. When viewing the associated person or agencies record you can see the clients with whom they are linked.

The system has specific functionality to accommodate Maori cultural and linguistic needs through the use of Open Home Foundation Maori Social Work Model – Te Aho Takitoru (TAT) facilitating referrals to and from a Cultural Services Team. When this is enabled case records are also modified for reporting on TAT practice. Iwi (multiple) hapu and marae information can be recorded.

Referrers: Detailed information can be captured on referrers including identity of the referrer, referrer organisation and the type of referrer as well as the contact details of the referrer. This does not occur on the "entry form" but can be added to the referrer separately.

Funders: The system lets you capture funder contract details such as the number of contract hours, numbers of clients, contract value. You cannot capture details such as funder contact person, contact addresses, telephone numbers, email addresses, contract managers and their line managers.

Location, type and funding of services: The system is set up in a tiered way as multiple contracts that can be delivered at multiple locations. It is however flexible as to how the elements are reflected and linked e.g. it could be Special needs services with multiple funders beneath that and specific services for each funder or it could be a Funder with multiple services below the funder. This is determined by what functionality and reporting the user organisation requires.

Clients are linked to services and funders by referral into a particular contract and a service from a dropdown of services being selected.

A client may access multiple services simultaneously or sequentially.

Workflows: The system has a standard workflow which cannot be customised. However, within each component of the workflow, there are a series of screens for subsections of the workflow that can be turned on /off depending on the user organisation's needs.

Although the system does not have rules that interrupt workflow it does have referral and safe practice related alerts and flags for key users (the issue tab turns red). These are in the form of home page messages and timed, targeted emailed reports e.g. managers can be emailed a fortnightly report showing clients with no social work in a set period of time. Automatic calendar reminders are available for document review dates (determined during the creation of documents e.g. assessments, evaluations).

Client organisations can identify custom alerts required during the gathering of business requirements. This customisation may have a cost associated with it.

Capacity and workload management: Team leaders are able to accept a referral to a waitlist and actively manage that waitlist by:

- » changing a waitlisted client or family priority
- » moving the client from the waitlist to an active case
- » recording notes / actions against a client.

The system lets you maintain a list of active and non-active case workers and assign more than one case worker to the client. It lets you track time spent on case-related (client and non-client) and non-case-related activities. Although case management notes and events are recorded separately from time for services provided, the system prompts the user to enter time after case management actions or it can be entered directly from the side bar menu.

Capacity and workload is visible using the reporting function.

Search and identify: The system lets you search the database for an existing client using a form that searches first name, last name, or any combination of three contiguous letters from a name but only on the transaction entry screens, or by opening the form from the menu.

Notes can be searched.

Enquiry / referral: Referral information can be collected in one of two methods; detailed referral or quick referral. Detailed referral information is collected over a number of tabbed pages with the ability to save on each page. Tabbed sections can be turned on or off as the user organisation requires. Incomplete referrals appear as a link on the user's home page.

Quick referral is a one-page form that captures minimal demographic data and short activity notes with the option of recording time associated with the activity. Quick referral is ideal for enquiries or brief interventions.

Referrals can be captured and placed on a waitlist or made active immediately. The system does allow multiple individuals to be linked to a single referral incident without needing to re-enter information and while not specifically noting re-referrals, a note can be made when re-activating a file.

Referral responses are recorded in a titled case note which can be emailed to a referrer.

Referrals have a status of accepted, not yet, or rejected. There is currently no triage assessment. Once accepted an internal alert is sent to the team leader to advise of a new client and a case worker/s can be assigned. The team leader can view not-yet-accepted referrals from the client home page.

The system does not have specific functionality to allow you to update the consent status of the client during the case (with date-time stamp), however this can be partially circumvented by attaching the consent to the client notes with an appropriate heading and then making a note (which is date and time stamped) on the file.

Assessment tools: The system has Cage and Kessler screening tools.

An outcomes tool allows users to build their own assessments, outcome tools and reviews based on Results Based Accountability principles. High-level indicators with associated measures can be assigned to individual contracts or groups of contracts, allowing for outcomes to be reported for individual contracts or across contracts for a single funder or for the organisation. Reporting is not yet available at individual client level. Individual case workers or managers can access reports particular to their clients.

The user can define descriptors, number of questions, thresholds for acceptable / not acceptable, type of grading scale and assessment intervals.

A calendar reminder can be created to alert to this task. Alerts will also be sent if an outcome is not completed within a designated timeframe.

Case notes / notes: The system lets you record all activities against a client. Notes are dated and time stamped. Time taken on an activity is recorded separately as noted above. Notes can be saved and returned to later for completion. Notes made on one sibling file can be easily copied to another if required.

You can attach anything to the client notes (i.e. text, images, drawings, video and audio) however there is an 8MB limit per file uploaded. Should greater capacity be required, this would need to be requested and would come at an additional cost. Attachments are not indexed however can be sorted on by date or alphabetically and contents can be searched for key words, facilitating retrieval of information.

Care / safety plans: Care or safety plans are created using the document builder and stored as an attachment to titled notes against a client's file. These can be scheduled for review at the user's discretion.

The system does not let you align actions and activities to each other or prioritise them in relation to each other. It does however let you assign dates to actions and activities with automatic internal alerts / reminders for task and activities.

The system does not have specific safety alert functionality, however there is a "concerns" field on the personal details page, which if completed shows on the "list of clients" page with a "Yes" in the concerns column.

Groups / group management: The system allows groups to be created, recording the type, location, duration, number of sessions and facilitators. Clients are assigned individually to the group through the client profile, where it can be indicated whether it is obligatory for a client to attend a group and if a session is missed, whether a "make-up" session is required. Notes can be written against the group and individuals from the same screen. Attendance can be recorded. An attendance report for an individual can be printed from the client profile. There are specific group reports that can be accessed from the reports menu.

Document and email creation: A document builder allows for any document (e.g. letter) to become a template and added to a document template list. These templates can be added as an attachment note to a client's file. All notes can be easily emailed internally or externally as required.

Scheduling / calendar: The system does not have specific scheduling or calendar functionality. However, for calendar events when scheduling appointments, reminders, reviews etc. the system sends an email to the user with a calendar attachment that can be easily added to the calendar system (Outlook, etc.) used by the organisation without re-keying information.

There is also no specific functionality with respect to time sheets or rostering, however a case worker can add hours and track hours and a custom report could be created (at an additional cost) that would provide this information.

Service exit: The system can support exit planning through the use of the document builder tool to create predefined exit forms. These documents are stored in document templates and attached to the case notes. These can be sent to a recipient of choice. The system records a status as closed / completed.

There are no exit notifications or alerts e.g. change in waiting lists, team leader alert to service exits.

Internal referrals are managed through creating a new referral which generates an email to the receiving case worker. This is not a permissions-based activity.

A client may exit a service at any time and a reason for exiting the programme can be recorded.

The system lets you annotate a file with new information however point in time information (e.g. new name or alias only on forms going forward) is lost. Once closed, case notes cannot be added as there is no active funder contract.

As assessments are currently evaluated manually, the RBA © process of delayed assessments can be managed by scheduling a manual assessment and attaching the assessment to the file in the form of a note.

The system has no specific service evaluation functionality. The document builder could be used to create surveys and schedule them; however, collection, collation and analysis of this information would need to be manual.

Unique / special services: The system has specifically configured components to support child placement services which includes residential services including special purpose homes, foster care, kinship care and emergency accommodation. It also manages family court processes and legal statuses of clients.

Incident and complaint management: The system does not have any specific functionality in this area. There is an area within the Foster Parent section of the system that can record such events but this is specific to fostering placements. External critical incident documents can be attached to a client case record.

Invoice generation: The system can integrate with most accounting software on request. The system records accounting codes, which are available for use against named services in the system. The system can also record rates for nominated service types (per hour, per night), which can then be used to create invoices and reports. An analysis of any costs of development would be provided. All "contracts" in the system carry an expense code functionality, which is configurable.

Standard reports: The system has a number (70+) of standard reports which include data pertaining to clients, contracts (funding) and employee / case workers. The system has activity reports at multiple levels by client, worker, program, location, funder and organisation. Report viewing is based on the same hierarchical permissions that allow data visibility within an organisation (i.e. within a business / service unit) however specific permission can be provided to individuals.

There is limited capability to schedule specific reports and have them emailed internally to specific individuals as required.

There is no list of favourite reports and there is no capability for adding graphics or charts to reports.

Customised reports can be created on request and at an additional cost.

Queries and ad hoc reporting: There is no query or ad hoc reporting functionality within the system.

Statistical reports: The system has some standard quantitative reports however does not do statistical analysis on any data except for those that are linked to assessments. Data can be exported to Microsoft Excel as required in order to perform this analysis.

Individual view and dashboards: Users see an individual view of the tasks and data that apply to them.

The dashboard is limited to "My Own Info" through which a case worker can track their hours and clients.

Data extraction: Reports can be exported as .xlsx, .rft or PDF files. There is also the specific ability to export client profile data to Microsoft Excel in order to analyse demographic data that is not available in the standard reports.

Access: The system is deployed as a SaaS. The system is accessed through a web browser. The system is browser agnostic. The system is device agnostic from desktop through to tablets and phones although the phone interface is not specific to phones and therefore is not as user friendly as the other interfaces. The system can only be used online and has no mobile functionality.

Permissions: The system lets you define user or group permissions at multiple functional levels. This is limited to roles that are already in the system. New roles can be created but at a cost. Individuals can have multiple roles.

The system lets you create and enforce access to different types of clients for different users, including one-to-one access if necessary. The system has limited ability for creating permissions on a field-by-field basis through custom security filters. Users can be locked out if process requires it.

Audit logs: The audit logs are available on request. The system tracks all user activity – "every mouse click".

Configuration / customisation: The system is configurable. The configuration is predominantly done by the vendor, which includes changing names of primary entities (e.g. client, social worker etc.) The organisation's system admin user can configure most dropdown lists (lookups) in the system as well as change display names and manage standard reports, which can be turned on or off at a report group or individual report level.

Integration: The system has no integration function at present. Data migration services are offered on request.

Hosting: This system is a hosted service in New Zealand.

Ease of use: The system is carefully designed and easy to understand. The layout is well organised and generally fairly understandable once you learn it. Once you have mastered the system, it becomes quite quick to use. Terminology is easy to understand, and the system provides a fair amount of functionality to optimise time-consuming tasks, like data entry.

Product background: The vendor has been in the business of supplying the system to other organisations since 2014 and reports ten clients in New Zealand.

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6.3 Paua

Paua is an affordable, easy-to-use case management system. It is very strong in some areas – for example, users can create powerful queries and ad hoc reports with comparative ease – and it has the best functionality for working with and recording group activities of any of the CM systems that we looked at. However, it does not have the sophisticated workflow management of some of the more expensive and complicated systems.

The vendor is willing to customise the system at reduced cost to the client and roll out those changes to all users if the new functionality is deemed useful to the user community.

The system starts at about \$1,800 per year for small organisations.

Client information: A client is an individual person with a unique identifier that is automatically generated by the system.

The system lets you record and customise basic demographic information such as DOB, gender, nationality, lwi, residence status; contact information such as phone, email, address; social information such as occupation, income, benefits, living arrangements; and health information such as medical conditions, medications, substance usage through user-defined dropdown lists. It also lets you record information that may be specific to the service delivered, like abuse history, criminal history etc.

In addition, the system lets you record multiple addresses. It does not let you specify which address is the current address although the most recent address is deemed the current address. Returning to a previous address requires re-entry of the previous address to make that the current address. You can record name changes but this is through entering a new client and linking it to the old name.

You can record client relationships, allowing the client to have multiple roles (husband, father, brother), and it lets you easily view everyone with whom a client has a relationship.

The system does not have specific functionality to accommodate cultural needs relating to Maori beyond collecting kinship data.

Referrers: Detailed information can be captured on referrers including identity of the referrer, referrer organisation and the type of referrer as well as the contact details of the referrer. This does not occur on the "entry form" but can be added to the referrer separately.

Funders: The system lets you capture funder contract details like the number of contract hours, numbers of clients, contract value. You cannot capture details such as funder contact person, contact addresses, telephone numbers, email addresses, contract managers and their line managers.

Location, type and funding of services: The system is set up in a tiered way as multiple contracts that can be delivered at multiple locations. It is however flexible as to how the elements are reflected and linked, e.g. it could be Special needs services with multiple funders beneath that and specific services for each funder or it could be a Funder with multiple services below the funder. This is determined by what functionality and reporting the user organisation requires.

Clients are linked to services and funders by referral into a particular contract and a service from a dropdown of services being selected.

A client may access multiple services simultaneously or sequentially.

Workflows: The system has a standard workflow that cannot be customised. However, within each component of the workflow, there are a series of screens for subsections of the workflow that can be turned on / off depending on the user organisation's needs. There is no capacity for configurable validation rules that determine or interrupt workflow and with the exception of an issue alert (where the issue tab turns red) there are no other alerts in the system. Notifications are limited to being able to see appointments made on a calendar and client related alerts / reminders on the "My Clients" screen.

Capacity and workload management: The system lets you accept a referral to a waitlist and actively manage that waitlist by:

- » changing a waitlisted client or family priority
- » moving the client from the waitlist to an active case
- » recording notes / actions against a client.

You are able to move the client from the waitlist to an active case, or change them to another service from the waitlist but once active the client cannot be referred to another service. If active the current referral would need to be closed and a new referral would need to be created to the new service.

The system lets you maintain a list of active and non-active case workers and assign a primary and secondary case worker to the client. It lets you track time spent on case-related (client and non-client) and non-case-related activities through user defined activities however it has a limited capacity for tracking workloads and it does not have the ability to create alerts when capacity has been reached in a particular service (programme).

Search and identify: The system has a highly configurable search function, allowing you to search the database for an existing client using a form that searches against first name, last name, address, NHI number, or groups, but only on the transaction entry screens, or by opening the form from the menu.

Enquiry / referral: The system does not let you capture the transaction and related effort of an enquiry irrespective of the type or source. The referral is a streamlined process however it occurs over a number of pages (with the ability to save on each page).

Referrals can be captured and placed on a waitlist or made active immediately. The system does allow multiple individuals to be linked to a single referral incident without needing to re-enter information and while not specifically noting re-referrals, a note can be made when re-activating a file.

The system does not have specific functionality to record that a response has been provided to a referral however this could be circumvented by making a note against the file.

A referral does not have a status indicating whether it has been assigned / actioned and whether any further action is required, however once received an internal alert is sent to the team leader to advise of a new client. Referrals cannot be prioritised based on a triage assessment.

The system does not have specific functionality to allow you to update the consent status of the client during the case (with date-time stamp), however this can be partially circumvented by attaching the consent to the client notes with an appropriate heading and then making a note (which is date and time stamped) on the file.

Assessment tools: The system has a few standard assessment tools like ADOM, PRIMHD. These can be run sequentially and analysed and the reports exported. The system allows the

user to create and define their own assessments with Likert scale slider or numbers available for ratings. Assessments are not editable once complete.

Case notes / notes: The system lets you record activities against a client through free form writing or through highly configurable user defined and created forms. These forms can be made to be service (programme) specific however the data is not analysable. These forms can be printed blank or complete with answers with / without user logos. Notes are date and time stamped. Activity breakdown is through writing separate notes for each activity defining the activity through a used defined dropdown list. At present only .pdf, .docx or image files can be stored against a client. If video or audio files attachments are required, then this would require specific permission and the service would come at an additional cost. Attachments are not indexed.

Care / safety plans: The system does not have specific functionality in this area although as stated before, an issue alert (where the issue tab turns red) is created if an issue is flagged against a client. Issues are highly customisable.

Groups / group management: The system has a very good group module, allowing creation of groups through selection of current clients, assigning a group leader and co-facilitators. A risk register can be printed to take on a trip if necessary and attendance register can be completed in either paper or electronic format. Notes can be written against the group and individuals from the same screen and reporting is highly configurable.

Document and email creation: The system has basic functionality in this area. You are able to create and print letters (with organisation logo if required), however there is no mail merge ability.

Scheduling / calendar: The system has a calendar with functionality limited to seeing all staff and resource (rooms, projectors etc.) appointments in the calendar and it does not integrate with known desktop tools and has no ability for rostering or timesheets.

Service exit: The system allows you to create a new referral to another internal service without closing the current referral. This does not create a specific notification / alert for the receiving provider, however it is visible as a being on the waitlist for that service.

There is no exit planning functionality. Clients can be referred out or exit the service at any time, however the system does not generate referral documentation. It can record the exit date and the reason for exiting the programme.

Annotation of a closed file is limited to making notes (not case notes) on the file and a subsequent outcome assessment can be performed facilitating the RBA © reporting process.

The system lets you create questionnaires / evaluations / surveys. Information is collected anonymously, collated and analysed

Unique / special services: The system does not support any specific special services although is being successfully used in residential services.

Incident and complaint management: The system does not have any functionality in this area however users could use the enquiries module to do this.

Invoice generation: The system does not have specific functionality in this area.

Standard reports: The system comes with some standard reports particularly related to health outcomes e.g. PRIMHD, ADOM.

There are a limited number of standard activity reports related to client, worker, program, location, funder, organisation, however this can be circumvented by the powerful query capability of the system.

The system lets you add charts and graphs to a limited number of reports and your options of graphics or charts are limited. The standard reports are not customisable. There is no list of favourite reports nor are you able to schedule reports.

Queries and ad hoc reporting: You can create powerful queries with comparative ease, by choosing criteria from a well-organised interface. Many queries can be done through one screen, and you can query using criteria from any database field, including custom dropdown fields. Complex queries or writing your own SQL query is not supported. Most queries can be converted to an ad hoc-report. Custom fields can be displayed within ad hoc reports, although these are limited to those custom fields that are dropdowns. The system does not let you save queries or ad hoc reports, or add them to the report menu.

Statistical reports: The system has some standard quantitative reports however does not do statistical analysis on any data except for those that are linked to assessments.

Individual view and dashboards: The system has a client dashboard, which reflects pertinent personal and referral information. There are no other dashboards in the system

Data extraction: The majority of reports can be exported to CSV, Microsoft Excel files or PDF. The data extract cannot be saved to an extract menu.

A full backup of system data is available online for download by clients if they select this option. This in addition to the standard full backups performed and is a service provided to organisations. Data in the backups (excluding attachments data) can be accessed using MySQL and will require someone who is familiar with databases and database administration.

Access: The system is deployed as a SaaS. The system is accessed through a web browser. Although the system is browser agnostic, Google Chrome or Firefox will provide a better experience with fewer glitches. The system can only be used online and has no mobile functionality.

Permissions: Permissions are either role or service-specific and are mutually exclusive. However, an individual can be given extra permissions that are outside of the general role or service permissions. These are user-defined.

Audit logs: The audit trail capability is limited to tracking login / failed login, changes in permission status of users and changes made to core client details and to case notes.

Configuration / customisation: The system comes with a basic set of standard demographic dropdown lists. All other fields need to be created by the user. Any data that needs to be reported on is created as a dropdown list. It therefore lets you create and customise dropdown values for most fields. You can change list values for most fields, including the order of the list. In addition, you have the option of creating tick box client properties for yes / no answers for properties that need reporting.

You can add an unlimited number of custom fields. These can be placed on most screens in the system, however these fields cannot be reported on.

You cannot rename existing fields nor can you move or delete existing fields however you can make them inactive which will hide the field. You can also make a field mandatory by turning this functionality on or off.

The vendor will customise the system to your needs, however does not do this often. In general, if the customisation would have a wider application and you are prepared for the

intellectual property to be shared, the cost of customisation is significantly reduced. Functionality unique to the user organisation will be at full development cost.

Integration: At present Paua PRIMHD compliant i.e. it integrates with the PRIMHD upload facility. It does not integrate with any other third party tools. It does let you export some data visible to users into another file format such as [.xlsx, .docx, .pdf, .csv]. It does not let you import data into the system.

Hosting: This system is a hosted service in New Zealand.

Ease of use: The system is carefully designed to be free of clutter and easy to understand. The system is optimised around the needs of novice users, and while all are likely to find it intuitive, experienced users may wish for more flexibility and shortcuts to ease repetitive tasks. Terminology is easy to understand and the system provides a fair amount of functionality to optimise time-consuming tasks like data entry. Experts can design the custom fields to tailor them to their own workflow. The query-building tool provides a lot of control.

Product background: The vendor has been in business since 2010 and reports 15 clients in New Zealand.

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6.4 Penelope

Penelope is a well-established, higher-end case management system designed for mid-sized to larger organisations. Sophisticated tools facilitate the organisation in creating user-defined documents (such as forms, assessment tools, questionnaires) and custom workflows with automatic processes, alerts and notifications which are integrated within service delivery activity tracking, client scheduling and invoicing. The case file structure supports both individuals and family case files that receive multiple services.

It has an attractive, user-friendly interface with each user being presented with a personalised dashboard and access to their own collaboration suite drawer where their tasks, messages, alerts, reminders, calendar as well as reports are available to them.

A strong search function and large number of internal reports support data evaluation. ODBC compliance allows for flexible and ad hoc reporting although the vendor does recommend using Tableau to expand this capability.

Client information: A client is an individual person with a unique identifier that is automatically generated by the system.

Users can configure many demographic fields, collecting basic data within the individual profile such as date of birth, gender, nationality, lwi, residence status etc.

Contact information can be collected – such as phone, email, address – and preferential contact information and contact instructions indicated (for example, only contact home phone between specific hours). Multiple addresses can be stored against an individual with the

current address being identifiable. Point in time information is not lost. Name changes can be recorded in a "previously known as" or alias field. Both these fields are searchable.

Additional information such as social information (for example, occupation, income, benefits, living arrangements) and health information (such as medical conditions, medications, substance usage) can also be collected through user-defined fields or smart forms.

A unified case structure (family / whanau case) facilitates linking of clients to other clients or collateral contacts, with relationships and roles among the case members clearly identified. The system has specific functionality to accommodate the needs of culturally and linguistically diverse families e.g. Maori. Genograms per se cannot be depicted, however, roles and relationships can be configured. The individuals related to the client can easily be viewed from the client's file.

A client can have an unlimited number of personal or professional collateral contacts with identified roles and relationships. Collateral contacts can be private (relating only to a particular client) or can be pulled from the integrated directory feature (the Blue Book), where, for example, multiple clients may be working with the same third-party professional or organisation.

Referrers: Extensive detailed information can be captured on referrers including the type and identity of the referrer, referrer organisation (addresses, maps, services provided and when, referral document templates etc.) as well as the personal contact details of the referrer. This is information that is stored in a directory (the "Blue Book").

Referrer organisation sites / locations and employees can be linked at any time to clients, appointments and notes, and can be linked together as affiliates, allowing for a comprehensive overview of any given referral source in the community.

Funders: The system lets you capture funders' details such as contact person, contact addresses, telephone numbers, email addresses, contract managers and their line managers. The system lets you capture funder contract details (policies) and service limits like the number of contract hours, contract value as well as a breakdown of cost / activity (i.e. fee for service), reporting frequency.

Location, type and funding of services: The system supports multiple services offered at multiple locations for a single organisation. In addition, it is possible for multiple organisations to work with the same configuration of Penelope and develop common reporting.

The system supports a funder or funders funding multiple services and a single service may be funded by multiple funders.

A specifically funded service (policy) is assigned to a client. A client may access multiple services simultaneously or sequentially.

Workflows: The workflows can be configured by system administrators (or the vendor at a cost) to meet the requirements of the service. Different workflows can be created for different service delivery models. Guided workflows can be created using automated processes that may include, for example, checklists, tasks, escalations, reviews and approvals. Automatic reminders for staff and clients for scheduled activities are configurable. Optional email and SMS alert functionality is also available.

The collaboration suite facilitates communication between users and between user and client with easy access to all pertinent information for users – for self and others (as role and permissions allow). Discussions can be started from a client note or can be tagged to be included in client notes. Queued outstanding tasks for self and team can be viewed and accessed from a user's messages page.

Capacity and workload management: The system has a sophisticated waitlist (pre-enrolment list) to which user-defined parameters can be added, such as service, reasons and priorities. Adding a client to the waitlist can be incorporated into the intake process and may include a client matching / preferences step. The waitlist can be managed by authorised users. Action can be recorded against a client on a waitlist, including cancellation from the list. User-defined actions or alerts can advise relevant staff of waiting list changes such as new arrivals, priority changes, vacancies following client service exit or length of time on a list.

Active and non-active, as well as available case workers can be maintained in the system and one-to-many case workers can be assigned to a client either within the same programme or separate programmes as needed.

The system tracks time / resources (for example, cars, IT, rooms) spent on case-related (client and non-client) and non-case-related activities. Capacity (such as when capacity is reached in numbers, attendance hours or contract value) and workloads of services, teams and individual case workers are tracked in near real time. Service capacity can be tracked for group programmes which have an optional maximum attendance limit.

Search and identify: Comprehensive search functionality can be accessed with one click from anywhere in the system. All search pages allow for searching by multiple and many criteria. Individual searches can include user-defined data in addition to first name, last name, DOB, file number.

The system allows organisations to require that users search for new referrals prior to entry, using a minimum of two letters of their first or last name and other identifying information if desired. Duplicate warnings are also available to assist in the prevention of duplicate record creation.

Enquiry / referral: The transaction and related effort of a referral can be captured within a referral form that stores transaction and activity-related information or in a service file designed for this purpose. Details of anonymous enquiries can be tracked using the anonymous services feature.

Referral or enquiry capture can be a streamlined single-page process through the "intake wizard" which can be as simple or as comprehensive as the user requires. In the intake wizard, first name, last name and date of birth cannot be removed, however all other fields in the first section are configurable, moveable and / or optional.

Multiple individuals (family / case members) can be linked to a single referral incident without needing to re-enter information. Which information is copied is user defined and can be done by default if desired.

Online referrals are not currently available, however there is restricted permission-based access (kiosk view) for clients to complete referral forms directly into the system.

Referrals can be captured and placed on a waitlist or made active immediately. Referral status indicates whether it has been assigned / actioned and whether any further action is required. An internal alert is sent to the team leader / case worker to advise of a new referral. Referrals can be assessed to determine what action is required and then prioritised using workflow tasks.

A user-defined response to the referral can be recorded as well as updates to the referral and re-referrals.

The system supports electronic signatures (of both staff and clients) and therefore consent can be updated as required against a client file, date and time stamped. Signing the document

locks it to maintain the integrity of what was signed off on. Further edits are managed by creating a revision of the locked document, which maintains version history.

Assessment tools: The system currently offers PCOMS (ORS/SRS) which comes with an integration to the OPENFIT database and a number of other standard assessment tools. A flexible smart-form tool is used to create assessments. Key staff are trained to use this or the vendor can assist with development (at additional cost) of specific assessments. Assessments can be qualitative and/or quantitative with scoring with user defined elements such as stages, conditional questions/sections, required responses, scored responses, etc. Scored responses are graphed within the system showing change over time.

Assessments can also be tied to workflows, and automatically sent to the client at pre-determined time intervals, using Engage, a tool which allows organisations to send clients documentation via a link attached to email, facilitating clients to complete forms, surveys, documents and assessments directly into the system.

Alerts based on specific flagged responses or scores (e.g. where a risk or concern is identified or where subsequent actions are required based on a response) can be sent.

Assessments can be evaluated for individuals or cases (families) through internal and external reporting.

Case notes / notes: Date and time-stamped notes can be recorded throughout the file, against activities, groups and group activities, forms, care plans, profiles etc. Activities can be broken down into client-facing and non-client-facing activities. Service delivery and other activity tracking can also be tied into the collaboration suite features with options for workflow automation, notifications and alerts.

Keywords within notes in documents and case note fields can be searched within reports. Activities and events (with accompanying notes) are searchable using the centralised search functionality.

Documents can be attached within many records including the client, case, service file, groups, worker / user files. Attached documents can be in any format including text, images, drawings, video and audio and the organisation can determine a file size limit in the system administration settings. Attachments are stored in an attachment directory.

Care / safety plans: The system lets the user define and configure one or more case plans for a client or group / family that can include assessments, support plans and support activities, calendar of activities and events, milestones and goals, with updates. Genograms are not currently supported.

The system allows actions and activities to be aligned to each other and workflow activities (such as actions and planned activities) can be prioritised.

A designated safety flag (a yellow triangle) on the client's file alerts all staff working with the client of a safety concern. A quick view provides a synopsis of the risks, the details of which can be referenced in the file and accessed by authorised users. Assessments and other documentation also contain optional flags for responses that indicate a risk. These can trigger user-defined alerts and workflow processes if required.

The system can track a client's progress against individual service goals or care plans as well as providing an overview of all the services and goals that a client may be accessing at one time.

Groups / group management: A variety of group programs can be created and managed within the system, from educational / outreach groups (informal services) to formal or clinical

groups that are a fixed number of sessions or open and ongoing. User-defined parameters such as group size, number of sessions, attendance limits are available.

Informal services provide the ability to track user-defined parameters like number of attendees as well referrals from that event.

One or more facilitators and case workers can be assigned to groups.

Batch booking, including future events, is readily managed. Attendance can be captured with options to record cancellations, no shows for formal groups. This can be managed electronically either at the reception desk or when recording group activities. Register lists can be printed.

Groups can have an agenda and notes related to the group. In addition, a group note can be appended to the group event note field which will enter the note against each attendee / participant and individual notes can be created by clicking on the note field for each participant without exiting the group.

Internal reports for groups are available and the system can be used with external reporting tools for flexible, user-defined reporting.

Document and email creation: The smart form-building tool allows organisations to create documents, forms, assessments, surveys and letters. Features include the ability to pull data from elsewhere in the file, to minimise / eliminate duplicate data entry, and adding the logo to documents.

Internal communication in the form of email or messages can be sent through the collaboration suite. A record of these interactions is kept against the client or worker records. In addition, Engage, allows workers to send a link to clients via email for templates, documents/forms and messages. This facilitates clients to complete assessments and other forms securely online as well as communicating with their case workers securely via email. The history of interactions is visible from the client file and the interactions can be integrated with manual and automated workflows.

A one-way synchronisation (from Penelope to client and / or case worker) using the organisation's email server, irrespective of which email application or service they use, is possible. This one-way push is also applicable to calendar appointments (into Outlook) for events and activities.

A new communication feature, IO, is due for release in late 2015. This will allow workers to send a link to clients via email for templates, documents / forms and messages. This will give clients the ability to complete assessments and other forms securely online as well as to communicate with their case workers securely via email. The history of interactions will be visible from the client file and the interactions can be integrated with manual and automated workflows.

Scheduling / calendar: The system has a sophisticated scheduling and calendar function with filterable overviews on individual and resource deployment and capacity in real time. The calendar entries allow a quick view of the activity and people associated with the activity and can be configured to send automatic email / SMS appointment reminders to clients and staff ahead of meetings (and clients can also confirm their appointments using this email auto-remind tool). This functionality is permissions-based, ranging from seeing the time blocked off to read only or full access with editing ability.

Users can customise their own view of their schedules through colour coded, site-based availability and other communication flags. The calendar can be interfaced with Microsoft Outlook calendar however, in order to protect the integrity of the data in Penelope, it is a one-

way synchronisation and changes made in Microsoft are not reflected back into the Penelope calendar.

The system does not have specific rostering or timesheet functions, however, as outlined above, all non-client-related activities can be recorded and if done so, when combined with the client-related activities, the resulting report will generate timesheet quality data which could be exported for payroll purposes. A custom interface with a rostering program can be quoted based on detailed specifications if needed.

Service exit: The system supports internal referrals by completing an internal referral form which places the client on the pre-enrolment list of the receiving service and generates an alert / notification to the receiving service provider based on configurable workflow rules. Internal referral can occur without closing existing service files or other pre-enrolment entries for the client.

Exit planning is supported and may be tied to workflow / business processes including tasks, document / assessment completion, checklists, alerts and notifications etc. Alerts and reminders can be sent to and managed by case workers ensuring completion of case file and review and escalation workflows can be incorporated as well. Managers can also monitor overdue or incomplete activities of their subordinates.

Authorised users can re-open a closed file so that it can be annotated with new information if needed. Past service file history is maintained and new services can be added as appropriate. Service participation and delivery history are maintained as point in time information and notes and documents can be locked to prevent further editing. If data fields are pulled from elsewhere in the system (including name, alias as desired) they are updated from the source location; however, data entered directly into forms (including name, alias if needed) is retained as point in time information.

Questionnaires and surveys are created using the smart form tool facilitate service evaluations. This is facilitated by using Engage, which allows an email to be sent to the client with a link to an organisation configured form, that can be completed online with the data being fed back into the system. Data is collated and analysed automatically. External reporting using report writer or other tools for additional analyses is possible.

Unique / special services: The system is highly configurable. It is able to adapt to most service requirements and has been used in a vast array of different services.

Incident and complaint management: The system does not have any specific functionality in this area, however incident reports and complaints can be logged within the client's file in a protected service file. Anonymous feedback can also be captured in an anonymous service document.

Invoice generation: The system has a comprehensive accounts receivable functionality which is part of standard deployment. A variety of funding, billing and payment scenarios and business processes are supported, for example fee for service, fixed co-payment or a sliding scale based on income.

Invoicing can be individual or batching (including to third parties) or a combination of the two.

A number of internal accounting reports and statements provide quick viewing of all invoices filterable to individuals or funders. The full account history for funders and clients (including all billable, invoiced and paid services for clients) can be viewed.

The system does not specially support any existing integrations with accounting systems although queries on financial data can be created and exported to Excel, .csv or other format

for import into general accounting packages such as QuickBooks and Xero. Custom export files can also be developed by the vendor for a fee.

Standard reports: The system has over 100 standard reports which include data pertaining to clients, contracts (funding) and employee / case workers. Reporting viewing is based on report security permissions that can be assigned to individuals and / or groups of staff. There are report security classes that are independent of the security classes for features and functions. Both are used to achieve the correct security settings for reporting.

The reports let you view activity reports at multiple levels by client, worker, programme, location, funder and organisation and are readily filtered and date ranged to be specific to the user's requirements.

There is no list of favourite reports. There is no capability for adding graphics or charts to the standard reports.

The vendor recommends the use of the Tableau reporting dashboard (at additional cost) for dashboards, for extensive, custom reporting with full graphing capabilities, report scheduling and distribution capabilities, drilldowns, annotation and collaboration. A suite of standard Tableau reports is available that are sector specific.

Other reporting options are also available and the system has open database connectivity (ODBC) to support the development of Excel reports. Implementing this will require someone with expert Microsoft Excel capability or the vendor can provide professional services to assist with this set-up at an additional cost

Data issues can be identified through reporting

Queries and ad hoc reporting: While there is no inbuilt functionality for queries or ad hoc reporting, the comprehensive search tool, available from anywhere in the system, does provide a filterable quick view of data. The vendor recommends, however, the use of Tableau for extremely powerful and flexible custom and ad hoc reporting. Tableau allows simple and complex queries to be created with graphing, drill-down capabilities, "customisation" by staff, saving and sharing of reports etc. A free open database connectivity (ODBC) driver is also available for use with Excel or other tools.

Statistical reports: The system has some standard statistical reports providing mean, median and variance on some data that is filterable and date ranged. Reports for outcomes assessments include descriptive statistics and, where applicable, within and between subjects T-scores or Z-scores. For all scored outcomes assessments, change over time is plotted within the client's service file.

Individual view and dashboards: The "workflow" tab of the collaboration suite gives a personalised dashboard for each user which provides real time information on workflow tasks, activities, case loads, messages, reminders and calendar as well as reports specific to their case load.

Team leaders can access information on report staff, such as contract targets, staff contribution to the targets, case worker case loads and capacity as well as tracking staff activities and workflow exceptions.

Authorised users may also see multi-user views of scheduled activities and have access to features such as the pre-enrolment, centralised billing features, contract management and groups.

Advanced flexible dashboards and reports can be created using Tableau.

Data extraction: Queries into Excel, using existing views or custom queries, can be saved, modified, updated and distributed.

Access: The system is a full web application that can be installed on a client's server (self-hosted model) or hosted on the vendor's servers (SaaS model) and is accessed through a supported web browser. Internet Explorer, Safari and Firefox are officially supported, while other browsers, such as Chrome, can be used without known incident. Supported versions are updated over time.

The system enforces length (12 characters), complexity and changing of passwords once the user organisation has specified the frequency of password changes. Passwords used have to be different from the previous 10 changes.

The system is device agnostic provided that the device uses a full-function browser (e.g. smart phones, tablets, laptops, desktops) although the phone interface is not specific to phones and therefore is not as user friendly as the other interfaces. The client interface, Engage, has a fully responsive user interface.

Version 5 (to be released later in 2016) will have full responsive design for enhanced capabilities on mobile devices.

The system has no off-line functionality for security reasons.

Permissions: The system has comprehensive security settings which can be set at a number of different levels e.g. broad role-based and service or / site-based restrictions that can be refined by selecting detailed security options. Security classes allow for settings to be applied on a role basis or even worker-by-worker basis if necessary. Staff can be restricted to the client files assigned to them or to clients within specific services and sites. Users can be locked out if process requires it. These settings are user-defined and managed by a system administrator.

The system does not use field-by-field level access restrictions throughout, but does have detailed level protections for sensitive information. For example, administrative users that may need to access events can be prevented from viewing notes and documents within those events.

Audit trails: The system has a comprehensive back-end chronological audit (stdout) log which tracks system transactions and serves as an auditable record for the purposes of investigation and non-repudiation. Audit logs are created at least daily and are stored indefinitely. In addition, login / logout logs, postgres user requests and application performance logs are also available. Finally, on-screen user and date / time stamps are visible throughout Penelope that indicate when and by whom records were created and / or last modified.

Configuration / customisation: The system, with appropriately trained staff, can be fully configured to the business rules and processes within the user organisation. There are certain hard-coded fields that cannot be changed, however almost all other fields can be configured to the user organisation needs. Many fields can be renamed, moved or turned off, removing them from the screen.

While there is a limit to the number of custom fields (typically 10-20 fields) that can be added to the data entry screens that are provided with the system "out of the box", this restriction does not apply to the smart form creation tool which allows users to set up completely user-configured forms, with unlimited fields and flexible formatting. Workflow tools assist in configuring the system to support decision making and business processes.

Billable customisation may or may not be considered depending on the nature of the request, however, the vendor does collect feedback and customer requests and continuously incorporates feedback into the product development roadmap, with particular requests being included at the vendor's discretion.

Integration: The system has developed integrations / interfaces / export files with supporting configuration for a number of funders including ACC, PRIMHD, DSS, NDIS, 837pEDI and has incorporated PCOMS with a web services integration to OPENFIT. It does automatically exchange data with Google Maps and it can be interfaced with Microsoft Outlook / Calendar for push activities (i.e. from the system to Microsoft Outlook / Calendar) however this does come at an additional cost. In the same way, interfaces can be created with accounting software if necessary.

Data import: Data migration services are available if desired, most commonly from a .csv or .xls formatted document. Data import and export requirements are supported by a designated team of business analysts. Costs will depend on a number of factors including the compatibility between the data sources, the complexity of the data and so on.

Hosting: The vendor offers the software as a SaaS (Software as a Service) solution, hosted in a Tier II data centre in Auckland for New Zealand clients.

Ease of use: The system is powerful and has many features. Terminology is easy to understand, and the system provides a fair amount of functionality to optimise time-consuming tasks, like data entry. The user interface is well organised and role-based accounts are configured to simplify the system options to reflect a user's day-to-day needs. Because Penelope manages many core businesses processes and comprehensive client files, novice users will require training to become accustomed to the system.

Product history: The vendor has been in business since 2001 and reports 30 clients in New Zealand and around 500 clients globally at the time of this publication.

For more information on this product please contact:

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6.5 Recordbase

Recordbase is a mid-range case management system that originally focused on the health sector (and includes a number of sophisticated health outcomes tools) but has adapted well into the social service sector.

This is an easy-to-use system, with a simple workflow and the ability to link care plans with goals and tasks, coupled with the ability to track progress against goals. All of this makes this system good for outcomes reporting, although the reports themselves need to be custom-built.

The vendor still performs most configuration and customisation for clients, although most dropdown lists can be maintained by the user organisation.

Unique to all the case management systems reviewed, Recordbase has specific functionality in residential services and supported employment services, and has a sophisticated health and safety component for reporting and managing incidents.

Ongoing costs for an online version of the system are around \$5,400 per year for a smaller organisation of a minimum of 10 users, or for a larger organisation with 40 users, around \$21,600 per year (excluding implementation costs).

Client information: A client is an individual person with a unique identifier that is automatically generated by the system.

The system lets you record and customise basic demographic information such as DOB, gender, nationality, Iwi, residence status; contact information such as phone, email, address; social information such as occupation, income, benefits, living arrangements; and health information such as medical conditions, medications, substance usage through user-defined dropdown lists. This information is in "widget sections" which can be turned on or off as the user organisation requires.

The system lets you store multiple addresses against an individual and specify the primary (current) address. Name changes cannot be stored or tracked although a maiden name and a preferred name field, which are searchable, provide some flexibility.

You can record client relationships, allowing the client to have multiple roles (husband, father, brother) and the system lets you easily view everyone with whom a client has a direct relationship – familial (parents, siblings, whānau) as well as non-familial relationships (counsellor, school, placement family and caregiver). Familial relationships automatically create a record in the system against which all of the above data can be collected. Information collected against non-familial contacts includes contact information (telephone, email, address, consent to contact that person) and visibility (should this contact be visible to the client in their own record).

The system does not have specific functionality to accommodate cultural needs relating to Maori beyond collecting kinship data.

Referrers: Detailed information can be captured on referrers including identity of the referrer, referrer organisation and the type of referrer as well as the contact details of the referrer. This does not occur on the "entry form" but can be added to the referrer separately.

Funders: The system lets you capture funder contract details like the number of contract hours, numbers of clients, contract value. This information is captured separately from details such as funder contact person, contact addresses, telephone numbers, email addresses, contract managers and their line managers, which is captured in the accounts section of the system.

Location, type and funding of services: The system is set up in a tiered way with multiple funders at the top of the tier followed by the services offered under that particular contract.

Clients are linked to funders and services by referral into a particular funded team (contracted service).

A client may access multiple services simultaneously or sequentially.

Workflows: The system has a standard workflow which cannot be customised although user-created / configurable referral, activity, goal and hospitalisation templates generate automated tasks to be completed within specified time frames that are visible on the case worker's dashboard.

There is no capacity for client-configured validation rules that determine or interrupt workflow, however the vendor will configure validation rules that will highlight business rules that have not been followed. There is a risk tab which when completed, if desired by the user, will place a risk flag on all screens, alerting the user to a risk being present.

Notifications are limited to being able to see appointments made on a calendar and, where a review field has been completed, the system will remind the user that a review is due.

Capacity and workload management: A client can be placed on a waitlist. You can change a waitlisted client, moving them from the waitlist to an active case, and re-referring them to another service. Active holding can be provided through recording activities and notes against a client on a waitlist.

The system lets you maintain a list of active and non-active case workers and you are able to assign more than one case worker to a client.

Time and effort can be tracked on client-related activities through entering activities to the client file. Time and effort for non-client-related activities can be tracked in the account management component of the system.

Search and identify: When adding a new client, the system automatically performs an initial search and identify for an existing client using first name, last name, DOB and gender which will generate a list of any combination of those criteria. Duplicate files cannot be merged. Duplicate data will need to be deleted by the vendor.

Within the system, any consecutive three letters or more or the NHI number can be used to search for a client. Within the client file, notes can be searched based on type and subject as well as date ranges.

Enquiry / referral: The system does not let you capture the transaction and related effort of an enquiry in a simple process.

A referral is made into a specific service (with pending status) and is a simple prioritised notification that someone requires a service. Adding further detail to the referral requires accepting the referral to a waitlist or directly into the service which is a multi-click process. There is the ability to change the service that the referral is being accepted to at this time.

Online referrals are not available and therefore automated responses to referrals are not generated.

The system does not allow multiple individuals to be linked to a single referral incident without needing to re-enter information and while not specifically noting re-referrals, a note can be made when re-activating a file.

There are no specific referral alerts on the system, however a team leader or team member can see new referrals to the team as they will be in a pending area on their dashboard. This referral status is also visible on the client file. The system does not have specific functionality to record a user-defined response to the referral beyond making a note on the file.

Consent can be recorded as an attachment to the file which is date and time stamped. Updating consent would be a dated note with another attachment.

Assessment tools: The system has 19 standard assessment tools (CANSAS, SDQ, Kessler 10, Children's global assessment scale, DASS, WHOQOL NZ to name a few) which can be deployed as per the user organisation's preference. The vendor could create customised assessments (at an additional cost) and if there are no license requirements, these assessments will become part of the standard deployment of the system.

Assessments cannot be scheduled with reminders for future sequential completion, however client validation rules can be created to prompt for completion of ongoing assessments, e.g. ADOM reminders that completion is due in a week or tomorrow.

Case notes / notes: The system lets you record notes against activities, personal plans, goal plans and tasks as well as general notes which can be unsecured or secured against a team (which restricts viewing to permissions). Notes are date and time stamped and are easily searchable.

You can attach anything to the client notes (i.e. text, presentations, .xml, .pdf, images, drawings) however there is a 10MB limit which can be negotiated.

Attachments are sorted according to date.

Care / safety plans: The system lets you define and configure a personal plan with goals and tasks for a client. Plans can be updated at any time.

The system does let you align actions and activities to each other but does not allow you to prioritise them in relation to each other. It also lets you assign dates to actions and activities with automatic internal alerts / reminders for task and activities.

The system does have specific safety alert functionality which comes up as a red flag against the client's name. A quick view provides a synopsis of the risks that are associated with the client.

The system has limited capability for tracking client progress against goals / tasks allowing the user to provide an estimation of completion. Progress can be viewed in simple graphs.

Groups / group management: The system allows the creation of a group through creating a group activity, adding individuals to the group from across different teams, recording the time and duration of the activity. This activity can then be "cloned" with all components of the original activity replicated or these can be edited for other instances of that group activity. Additional staff members can be added to the activity.

The notes created against this activity will automatically be added to the files of the individuals listed. Individual notes from a group will need to be created separately. Clients can be added and marked as absent or attending.

At present group sessions cannot be scheduled without creating an activity.

Document and email creation: The functionality in this area is limited to editable person reports which are based on user-defined templates. These reports prepopulate with designated information which can be edited before being saved as a .pdf attachment that is date and time stamped. Edited information (e.g. change in name, address etc.) is not changed within the system.

The only automatic email in the system is an email alert to identified personnel in the event of a critical incident.

Scheduling / calendar: The system has a basic calendar function in which activities can be scheduled. The calendar can be linked to Outlook through iCal. The information is pushed from Recordbase into the email client. It does not do the reverse.

Service exit: The system supports internal referrals by transferring a client (with or without closing the current referral in the current service) to another service. This would automatically show up in the receiving case worker's pending cases on their dashboard.

A client may exit a service at any time with the exit date for each program a client is enrolled in recorded, as well as the reason for exiting the program. Exit planning is not supported, although configurable validation rules for record management purposes may prevent a file from being closed if certain activities have not been completed.

Once a file is closed the notes and assessments can be edited or changed for a period specified by the user organisation but managed by the vendor. If the client has had a referral into the system before and you have the appropriate permissions, the system will let you annotate a file with new information; however, point in time information (e.g. new name or alias only on reports going forward) is lost.

There is no specific process of delayed assessments (in support of RBA ©), however with the appropriate permissions, an assessment can be done with a client and added to the file and then evaluated.

There is no specific service evaluation functionality, however this can be worked around with custom-built evaluation forms (at a cost) within the outcome tools section which could then be evaluated by the system (this would result in a custom report also at additional cost).

Unique / special services: The system has specifically configured components to support residential services and supported employment services.

Incident and complaint management: The system has a full health and safety component that lets you capture incident details and manage the subsequent process with quick viewing of incident status and risk assessment as well as being able to generate incident and risk registers based on events.

Invoice generation: The system has limited functionality for invoice generation. Activities are coded and each code is associated to a dollar amount. A report will indicate the total amount to invoice, however it does not have the ability to monitor payments. This information could be exported to Excel to upload to an accounting system.

Standard reports: The system has a number of core standard reports which include data pertaining to clients, activities and case workers. The reports are readily filtered and date ranged to be specific but do not include any customised data. There are also person-specific reports (accessed through the client file) and some reports that have been generated for other customers (within specific service sectors) that may have a wider audience and could be modified at no or little cost.

Report viewing is based on the same hierarchical permissions that allow data visibility within an organisation (i.e. within a business / service unit), however specific permission can be provided to individuals. Reports cannot be scheduled.

There is no list of favourite reports. Graphics or charts are limited to outcomes reporting although the SSRS functionality can be used to do this.

The vendor will create customised reports on request, at a cost.

An SSRS access is now available as part of the system's licencing, to facilitate the creation of custom reports from the user's dataset. This does however require someone with technical knowledge to operate this function.

Queries and ad hoc reporting: There is no inbuilt functionality for queries or ad hoc reporting, however the core data set can be extracted to Microsoft Excel to manipulate data.

In addition, an SSRS solution is now available to facilitate queries and ad hoc reports. This does however require someone with technical knowledge to operate this function. The core data set can be extracted to Microsoft Excel to manipulate data.

Statistical reports: The system has no standard statistical reports. The vendor will create customised reports at a cost or the SSRS solution could be used to generate these reports.

Individual view and dashboards: Users see an individual view of the tasks and data that apply to them.

Reporting dashboards are currently limited to "my graphs" which shows a user a graphic representation of the recorded activities and the time entered with their case load.

The homepage for users and the landing page for key functions like calendar, clients and health and safety are dashboards that help you view basic metrics – number and status – and for users, pending tasks and activities.

Data extraction: A limited number of reports can be exported to .csv or Microsoft Excel files. Data can be printed to PDF. Data extracts cannot be saved to an extract menu. Additionally, the use of a third-party data transfer tool (Eight Wire – Conductor) is an option that allows the extraction of data into an organisation's own data warehouse for internal business reporting.

Access: The system is deployed as a SaaS. The system is accessed through a web browser. The system is browser agnostic.

The system is device agnostic from desktop to tablets to phones although the phone interface is not specific to phones and therefore is not as user friendly as the other interfaces.

There is a specific offline tablet interface which provides information around chosen client demographics, risks and activities. Information related to two weeks' activities associated with access to two user teams and their related clients can be stored in an encrypted file on the device.

Permissions: The system lets you grant individuals access to granularly create, view, edit or delete data for a wide variety of system functions and data on a field-by-field basis. It lets you create and enforce access to different types of clients for different users, including one-to-one access if necessary. Users can be locked out if a process requires it.

Audit logs: The user interface shows a basic audit of the last actions within a specific field (i.e. note updated by user – date and time stamped). A full audit is available as a permission-based report on all activities (including viewing). In addition, specific audit queries on a specific client or staff member can be requested and provided at no cost

Configuration / customisation: You can configure and maintain most of the dropdown lists within the system. Service-related dropdowns are configurable, however this is managed by the vendor and is set up as part of the installation.

You can rename existing fields at no additional cost. You can hide some (but not all) fields within the interface. This also applies to "widgets", which are clusters of information in related fields e.g. employment history, substance use. You cannot move or delete existing fields. Custom fields can be placed on the person details screen. All of these elements are managed by the vendor.

The vendor will customise the system to your needs. In general, if the customisation would have a wider application and you are prepared for the intellectual property to be shared, the cost of customisation is significantly reduced. Functionality unique to the user organisation will be at full development cost.

Integration: The system does not integrate with many third-party tools.

The vendor can import data upon setup. Data migration can be performed at additional cost from specifically formatted .csv or .xls document or, depending on the current system, directly from this system, however this option is normally more expensive.

Hosting: This system is a hosted service in New Zealand.

Ease of use: The system is designed to be free from clutter and is optimised around the needs of novice users. All are likely to find it quick to use, facilitated by dropdown lists for many features. The individual dashboard with quick-links to your cases, tasks and activities facilitates speed of access to client data. The system is well organised once you learn it, but many tasks require a fair number of steps, making it not the fastest system for data entry and other repetitive tasks.

Product background: The vendor has been in business since 2008 and reports 70 clients in New Zealand

For more information on this product please contact:

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6.6 Exess

Exess Connectivity reports that their system - Exess - is a secure, web-based client information and practice management system that has been designed specifically for the health, social service & education sectors by people from the sector.

Exess is a comprehensive client management tool. It supports PRIMHD, Family Violence, Residential (bed nights), PCOMS (ORS/SRS), multiple and flexible service delivery, complex client relationship links, Group participation, and has a calendar function. The system allows for creating user-defined documents (such as forms, assessment tools, questionnaires) and drop-down lists, and other content is defined by the organisational management.

Exess facilitates the ability for practitioners to be client-focused whilst enabling management to be strategy-focused by removing cost from the delivery model, opening up the opportunity for more flexible work practices and reducing administrative and reporting burdens.

While Exess met the criteria for inclusion in this report they chose not to participate in the process citing risks to Intellectual Property. Exess instead elected to self-review - see section 5.2. More information can be found on the Exess website www.exess.co.nz.

6.7 Whānau Tahī Navigator

Whānau Tahī Navigator is a case management system described by Whānau Tahī as “an outcomes-based whānau-centric software solution” and using Microsoft Dynamics CRM as its underlying platform. It is used in the New Zealand social services and health sectors. While Whānau Tahī Navigator met the criteria for inclusion in this report they elected not to participate in the process, but are happy to assist providers. The website is <http://www.whanautahi.com/>.

6.8 Consult ONE

While Consult ONE did not fully meet the selection criteria for inclusion in the full review, having only been in the market for a short time, it is worth bringing to the attention of the sector.

The Consult ONE system is a hosted case management package designed within NZ for practitioners, counsellors, small groups and NFPs. The developers have designed an easy to use system, which is secure and facilitates tracking and collating of statistics. It supports PRIMHD, has several key integrated assessments available including ADOM reporting, and the facility to include service developed assessments, forms, and specific team reports. Customised text and dropdown fields can be added.

Client specific data such as client relationships is recorded in client forms. Group activities such as workshop registrations, payments and client attendance are tracked in an event log. A calendar allows users to enter their own appointments or administrators to book appointments across user accounts. Security can be set at one of three organisational level options for accessing client files being fully open, closed to each user, or a shared client data base with limited shared file access to retain confidentiality or access can be tailored to each individual user based on their role and needs within the organisation.

Basic invoicing and event payments can be tracked from within the system using integrated customised forms. Reports compatible with XERO are near completion. An optional audit trail for tracking changes to records is available.

Consult ONE is \$20/month/user and \$5/month/user for the management pack. One-off setup fees are \$395 for a single user licence, and \$150 to add each additional user, or from \$895 for organisations. Fees for custom reports are around \$300.

The website is <http://consultoneinfo.co.nz/>.

6.9 Benecura

Benecura is a case management system used by medium to larger organisations who provide services across the spectrum of health, disability and social services. Benecura focuses on larger clients than the target audience of this report, hence the vendors have decided not to be the subject of a short-form review. More information on Benecura is available at <http://www.benecura.com/>.

6.10 Other systems

Other case management systems used by the social services sector in New Zealand that did not fully meet the criteria for inclusion in the report are listed below:

- » ChilliDB supplied and supported by Polymorphic Solutions. The website is <http://www.polymorphicsolutions.com.au>
- » CiviCRM supported by Fuzion. The Fuzion website is <http://www.fuzion.co.nz/>
- » iMap supplied and supported by TWONA. The website is <http://twona.org.nz/>
- » FIXE supplied and supported by FIXE Solutions Ltd. The email contact is Israel@wact.org.nz.

- » Support Manager supplied and supported by Netsoft NZ Ltd. The website is <http://www.netsoft.net.nz/>
- » CaseStream supplied and supported by Rataora. The email contact is don@rataora.com.

There will also be other systems of value to the sector. We do not consider the list above to be an exclusive list – just the systems we are aware of at this point in time.

Appendix A Conflict of interest statement

Infoxchange is a non-profit social enterprise that is committed to helping non-profits make better use of information technology.

In New Zealand, Infoxchange primarily provides consulting services such as IT planning, strategy development and client / case management systems selection advice.

In Australia, Infoxchange provides a broader range of services, including the provision of a client / case management system for non-profits.

The personnel involved in this review are not party to the development or delivery of Infoxchange's own client / case management system in Australia. Infoxchange's own system has been excluded from this review and is not currently available to New Zealand social services organisations.

Infoxchange is committed to unbiased, impartial research and accepts no funding from vendors including those whose software products we reviewed in this report.

Appendix B Approach to developing this report

The New Zealand Ministry of Social Development (MSD) has engaged Infoxchange to help New Zealand social services organisations successfully implement client / case management systems and improve client outcomes. This report forms part of that work. It is an in-depth review of key client / case management packaged and hosted software that is:

- » available in New Zealand and
- » suitable for small-to-medium sized social services agencies that deliver services directly to clients (the public).

The report will be shared free of charge.

B.1 Selecting packages for review

We invited vendors of case management packages to participate in this report. Along with MSD, Infoxchange developed the list of vendors to approach through our joint knowledge of the market in New Zealand. We also asked New Zealand umbrella (peak) bodies for the social services and software sectors to nominate systems to include in the study.

The vendors were sent a short survey. The survey asked about:

- » the makeup of the vendor's system's user base – we wanted to ascertain the degree and depth of their focus on the New Zealand social services sector
- » the vendor's length of time in the market
- » the product's hosting – whether it was externally hosted and / or ran on in-house computers
- » the core functionality in the system
- » the degree to which the solution came “out of the box” and how much needed to be configured or customised for a typical small-to-medium sized social services sector agency
- » the typical range of costs for both implementing and running the systems.

Not all vendors acknowledged our request for information and a few chose not to respond.

Based on the vendors' responses, we identified seven packages for review that met the basic client / case management needs of small social services sector agencies in New Zealand. As two vendors elected not to participate in the process, five software packages were reviewed in full. One further system was selected for a short-form review because while it didn't fully meet the selection criteria, it was relatively new in the market.

B.2 Requirements gathering

To conduct the in-depth reviews of the case management packages we needed a clear understanding of the needs of our audience – New Zealand-based social service agencies with 40 or fewer staff. We developed a suite of requirements for a typical client / case management system.

To develop the requirements we drew on the knowledge and experience of several Infoxchange personnel and supplemented that with information drawn from the formal

requirements developed by several small and larger social services agencies for their own case management systems.

B.3 System demonstrations and reviews

Each of the vendors of the selected packages was asked for a three-hour demonstration of their system.

We created a standard scenario-based demonstration script. The script focused on aspects of the requirements that would reveal each system's fit with common social service processes such as referral, case management, service exit and reporting. We then conducted three-hour demonstrations with each of the vendors. We wrote detailed, feature-by-feature reviews based on these demonstrations, and short narrative summaries of the systems describing their fit with the requirements of social service providers. Each vendor assessed the reviews and summaries for factual accuracy.

B.4 Evaluation framework

The reviews are much easier to understand when the vast amount of information gathered is considered through the lens of what a typical non-profit delivering social services requires.

In order to more easily compare strengths and weakness across packages, we created a rating system based on the common needs expressed by organisations that we work with and the features on which packages typically differed. While every organisation will need to decide on the criteria that are important for their own needs, and thus prioritise criteria quite differently, this rating system can provide a starting point for comparison.

We developed a chart so you can compare the systems at a glance. You'll find it in section 5.2 - Comparing the systems. You can read about how we evaluated and rated the systems in Appendix C.

Appendix C How we rated the systems

The reviews are much easier to understand when the vast amount of information gathered is considered through the lens of a typical social service organisation's needs. In order to more easily compare strengths and weakness across packages, we created a rating system based on the criteria used to evaluate the systems. Every organisation will need to decide on the criteria that are important for their own needs, and may rate criteria quite differently than we did, but this rating system can provide a starting point for comparison.

Definitions:

Configuration means using a vendor-supplied menu or wizard to create a unique interface, workflow, data field or report. For some systems, configuration can be either:

- » **user configuration:** functionality that is readily created or maintained by non-technical users
- » **technical configuration:** functionality that will require someone who is technically skilled – either within the organisation or the vendor – to perform the configuration.

Customisation means code that is specifically written to change or extend functionality for a particular user group. The code will need to be fully tested every time a new release is introduced.

	Basic	Intermediate	Advanced
General information			
Client information	<ul style="list-style-type: none"> » You can record basic demographic data, including simple family relationships, against a client. » You can record health, socio-economic data such as employment, housing, occupation. 	<p>Meets “Basic” criteria, plus at least three of the following:</p> <ul style="list-style-type: none"> » You can add custom fields to collect data specific to the service. » The client can have multiple roles, such as father, brother, husband. » The system supports linked familial relationship types (child, parent, Whānau, etc.). » You can record multiple addresses, nominating the primary address. » You can view everyone with whom a client has a relationship. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » you can map complicated relationships » you can record name changes without losing point in time information » there is specific functionality to accommodate cultural needs relating to culturally and linguistically diverse families (e.g. Maori kinship and land ownership genograms, cultural support plans).
Referrer information	<ul style="list-style-type: none"> » You can capture limited information about the referrer such as name or organisation. 	<ul style="list-style-type: none"> » You can capture detailed information about the referrer such as their name, organisation, contact details and type. 	<ul style="list-style-type: none"> » You can maintain a list of referrers and service details.
Funder information	<ul style="list-style-type: none"> » You can capture limited information about the funder; for example, who they are. 	<p>Meets “Basic” criterion, plus:</p> <ul style="list-style-type: none"> » you can capture full funder details such as contract manager, contact details or » you can capture funder contract details – numbers, reporting frequency, and contract value. 	<p>Meets “basic” criterion, plus:</p> <ul style="list-style-type: none"> » you can capture full funder details such as contract manager, contact details » you can capture funder contract details – numbers, reporting frequency, and contract value.

	Basic	Intermediate	Advanced
Service, workflow and staff management			
Services	<ul style="list-style-type: none"> » You can have multiple services in the system. » A client may only access one service at a time. 	<ul style="list-style-type: none"> » Clients can access multiple services at once. » You can work with services across multiple sites but it can be complex or hard to understand. 	<p>Meets “Intermediate” criteria and:</p> <ul style="list-style-type: none"> » working with multiple services on multiple sites is straightforward » working with multiple organisations offering multiple services on multiple sites is straightforward.
Workflow	<ul style="list-style-type: none"> » There is a standard workflow and you have limited or no ability to configure it. 	<ul style="list-style-type: none"> » There are a number of standard workflows with the ability to configure them. » There is limited capacity for configurable validation rules that determine or interrupt workflow. » There are a limited number of non-configurable notifications / alerts in the system. » The system supports a single alert method (such as email or SMS or flags). » There are a limited number of automatic alerts on the system. 	<ul style="list-style-type: none"> » Workflows can be created to align with your work processes. » Workflow can be interrupted by configurable validation rules. » You can define criteria for notifications and alerts at critical touch points in the workflow. » The system supports a variety of alert methods such as email, SMS, flags.

	Basic	Intermediate	Advanced
Capacity and workloads	<ul style="list-style-type: none"> » There is limited capacity to accept a referral to a waiting list. » You can maintain a list of active case workers. » You can assign a single case worker to a client. » There is limited tracking of time spent on case-related (client and non-client-facing) activities. » There is limited capacity in tracking workloads of case workers. 	<p>Meets “Basic” criteria, plus at least five of the following:</p> <ul style="list-style-type: none"> » You can accept a referral to a waiting list. » You can prioritise a client on the waitlist. » You can move a client from a waitlist to an active case. » You can provide active holding, recording actions against a client while on the waitlist. » You can maintain a list of active and non-active case workers. » You can assign one or more case workers to a client. » You can track time spent on case-related (client and non-client facing) and non-case-related activities. » There is limited capacity in tracking workloads of case workers, teams and services. 	<p>Meets “Intermediate” criteria, plus at least three of the following:</p> <ul style="list-style-type: none"> » You can change a client's priority and re-refer them to another service. » You can track the resources spent on case-related and non-case-related activities. » You can track capacity and workloads of individuals, teams and services in near-real time. » You are alerted when a service / staff member has reached full capacity. » Vacancy and waiting list changes are automatically triggered following client programme exit.

	Basic	Intermediate	Advanced
Case management			
Service enquiry / referral	<ul style="list-style-type: none"> » You can search for an existing client using a limited number of criteria, and only from specific screens. » You can capture the referral details, but not staff time or related activities. » You can attach consent documentation. 	<ul style="list-style-type: none"> » You can quickly search for an existing client from anywhere using user-defined criteria such as first name, last name, address, NHI and groups. » You can capture the enquiry details, but not staff time or related activities. » Referral details are captured on a single page. » You can generate a notification or alert to let a team leader / case worker know of a new case. » A referral has a status indicating whether it has been assigned and whether any further action is required. » You can record that a response has been provided to a referral (yes / no) but not what type of response. 	<p>Meets “Intermediate” criteria, plus at least three of the following:</p> <ul style="list-style-type: none"> » You can quickly search for any client-related information from anywhere. » You can capture the transaction and related effort of enquiry / referral regardless of the type or source. » You can link multiple individuals to a single referral incident without needing to re-enter information. » You can capture anonymous enquiries. » You can search or filter to find a particular set of referrals based on referral status, service and funder, and view pre-packaged reports based on this customised set of clients / referrals. » You can record a user-defined response to the referral; for example, you can provide information, advocacy, donations etc. » Clients can electronically sign consent and this can be updated in the file.

	Basic	Intermediate	Advanced
Social service focused assessment tools (SSFAT)	<ul style="list-style-type: none"> » There are no internal assessment tools. » You cannot automatically summarise or analyse collected assessment data. » Reports require manual effort. 	<p>Meets at least three of the following:</p> <ul style="list-style-type: none"> » There is a range of internal assessment tools. » There is a limited user-defined / configurable component to assessment tools. » You can report internally on data collected, or by exporting from the system. » You can make sequential assessments, however timing is not specified or alerted. 	<ul style="list-style-type: none"> » You can create your own assessment tools. » You can do complex reporting on assessments. » You can make sequential assessments at user-defined intervals with internal alerts.
Case notes	<ul style="list-style-type: none"> » You can record activities against a client, care plan or safety plan. » Notes are date and time stamped. » You can attach documents to the file but limited in format type. 	<p>Meets “Basic” criteria, plus:</p> <ul style="list-style-type: none"> » you can configure the activity breakdown into client-facing and non-client-facing activities » notes are searchable » attachments can be any format type. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » attachments are indexed by format type » attachments are searchable.

	Basic	Intermediate	Advanced
Care & safety plans	<ul style="list-style-type: none"> » Care and safety plans are recorded as attachments to the case file. 	<ul style="list-style-type: none"> » You can define and configure a case plan for a client or group / family with goals / tasks. » You can assign priorities and dates to actions and activities. » You can create alerts for activities and events. » You can create a flag / system-wide alert if a client is at risk or poses a risk. » There is limited capacity for tracking client progress against care plan / goals / task etc. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » you can align / link actions and activities to each other and prioritise them in relation to each other » you can track a client’s progress against a care plan / goals / task etc.
Groups	<ul style="list-style-type: none"> » You can record group notes using a workaround. 	<ul style="list-style-type: none"> » You can create groups. » You can assign a group facilitator and other case-workers to the group. » You can easily record group notes. 	<p>Meets “Intermediate” criteria plus:</p> <ul style="list-style-type: none"> » you can create an attendance register » you can record individual notes on group activities without exiting the group » you can report on group activities in a user-defined way.
Document & email creation	<ul style="list-style-type: none"> » You can create standard documents from vendor-defined templates and save as a PDF against a client file. 	<p>Meets “Basic” criterion, plus:</p> <ul style="list-style-type: none"> » you have limited ability to configure the templates » you can create standard documents without re-entering data and save them against a client file. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » you can create your own templates and save to a template file » you can email from the system and save against a client file » you can mail merge.

	Basic	Intermediate	Advanced
Scheduling and calendars	<ul style="list-style-type: none"> » Has a calendar within the system. 	<ul style="list-style-type: none"> » Integrates with Microsoft Outlook in a unidirectional manner (i.e. only allows changes in one of the systems). 	<ul style="list-style-type: none"> » Has seamless integration with Microsoft Outlook for diary and activity management.
Service exit functionality	<ul style="list-style-type: none"> » You can transfer a client between internal services by closing the current referral. » You can refer a client out at any time. » You can close a case file at any time. 	<ul style="list-style-type: none"> » You can transfer a client between internal services without closing the current referral. <p>The system will also need to do at least three of the following:</p> <ul style="list-style-type: none"> » create a notification/alert for the receiving provider » provide limited annotation of a closed file » have a few questionnaires / evaluations / survey templates that can be configured » collect and collate evaluation data. 	<ul style="list-style-type: none"> » Alerts and reminders are sent to case workers ensuring completion of case file. » You can generate referral documentation. » You can open a closed file to annotate with new information without losing point-in-time information (e.g. new name or alias only on forms going forward). » You can create questionnaires / evaluations / surveys. » You can collect, collate and analyse evaluation data.
Invoice generation	<ul style="list-style-type: none"> » You can get a report or extract that you can use to generate an invoice. 	<p>Meets “Basic” criteria plus:</p> <ul style="list-style-type: none"> » you can easily create an invoice for a client / funder for a specific service » you can view a list of invoices for a client. 	<p>Meets “Intermediate” criteria plus:</p> <ul style="list-style-type: none"> » you can easily export data to standard accounting systems like MYOB, QuickBooks, Xero <p>or</p> <ul style="list-style-type: none"> » there is a comprehensive complete accounting module (accounts receivable, accounts payable, service costs breakdowns etc.).

	Basic	Intermediate	Advanced
Queries and reporting	<ul style="list-style-type: none"> » You can run pre-packaged basic reports and queries, such as number of new clients in a service, upcoming activities / tasks, a list of recently discharged clients, clients per case worker. 	<p>Meets “Basic” criterion, plus:</p> <ul style="list-style-type: none"> » you can modify standard reports » you can save modified reports so they can be re-run » you can make ad hoc queries with data exported for external formatting » you can include virtually all system data – including the data entered into online applications, review forms, and client progress reports, if supported – in reports and queries. » you can see a “dashboard” view, which summarises the clients, cases and tasks currently relevant to each individual user » you can run standard reports and queries easily, even if you’re a casual user. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » you can make ad hoc reports, which can include custom data columns, datasets, sorting, grouping, logos, and headers » you can set reports to automatically run and be sent to individuals or groups » you can add charts and graphs to reports » you can create your own multiple dashboards, or a vendor can do this for you » you can quickly view favourite reports, and possibly queries and actions, without navigating a much-larger set » you can save ad hoc reports that you create or modify.

	Basic	Intermediate	Advanced
Data extraction	<ul style="list-style-type: none"> » You can export core data such as client name, funder and services accessed into another file format, such as .xls or .csv, in a way that it can be used for further reporting. 	<ul style="list-style-type: none"> » You can export most data visible to users into another file format, such as .xls or .csv, in a way that it can be used for further reporting. 	<p>Meets “Intermediate” criterion, plus:</p> <ul style="list-style-type: none"> » you can export all data visible to users into another file format, such as .xls or .csv » you can save any created extracts and add them to a data extract menu » programmers can use an API or a direct ODBC database connection to create custom data feeds to an external system <p>or</p> <ul style="list-style-type: none"> » there are apps or views designed specifically for mobile devices (for any purpose).

	Basic	Intermediate	Advanced
Access permissions and audit log	<ul style="list-style-type: none"> » There are at least two different internal interfaces – for example, a super-user view and a case worker view – to provide a simpler experience for users with less complex needs. » You can give individuals access (or not) to particular areas of system information, such as a module. 	<p>Meets “Basic” criteria, plus:</p> <ul style="list-style-type: none"> » you can grant role-based access to view, edit or delete data for a wide variety of system functions » you can limit direct access to a particular client’s (VIP) information but can be circumvented by reporting » you can ensure a number of specific actions – for example, records viewed, data changes, status changes, and client records – are recorded in an audit log. 	<p>Meets “Intermediate” criteria, plus:</p> <ul style="list-style-type: none"> » queries and reporting on VIP clients are restricted to those with permission » all actions are recorded in an audit log.
Configuration / Customisation of fields	<ul style="list-style-type: none"> » You can add up to 10 custom fields but there are limits on where you can put them. » You can rename fields at a cost. » You can move or hide some (but not all) fields within the interface. » You can configure and maintain dropdown values for fields. 	<ul style="list-style-type: none"> » You can add up to 10 custom fields, which can be placed on most screens in the system. » You can rename existing fields at no additional cost. » You can move some (but not all) fields within the interface, or delete them altogether. » You can change list values for most fields, including the order of the list. 	<ul style="list-style-type: none"> » You can add an unlimited number of custom fields, which can be placed on most screens in the system. » You can move many (but not all) fields within the interface, or hide or delete them altogether. » You can maintain the list values of custom fields.

	Basic	Intermediate	Advanced
Integration	<ul style="list-style-type: none"> » There is integration with Microsoft Outlook. This integration is often unidirectional. 	<p>Meets “Basic” criterion, plus:</p> <ul style="list-style-type: none"> » the system can automatically exchange data with a limited variety of third-party tools. 	<p>Meets “Intermediate” criterion, plus:</p> <ul style="list-style-type: none"> » the system can automatically exchange data with a broad range of applications: data appending tools, online map tools (e.g. Google, Yahoo, Bing), Outlook, Microsoft Office, cloud storage (Dropbox, box.net, etc.).
Ease of use	<ul style="list-style-type: none"> » Given sufficient time and training, users will be able to learn how to use the system. 	<ul style="list-style-type: none"> » The system is carefully designed to be free of clutter, and easy to understand. 	<p>Meets “Intermediate” criterion, plus:</p> <ul style="list-style-type: none"> » is quick and easy to use.

Appendix D About the report partners

D.1 About Infoxchange

Infoxchange is a not-for-profit social enterprise that has delivered technology for social justice for over 25 years. Our mission is to strengthen communities using technology to create positive social change.

We build the capability of the not-for-profit sector by providing technology advice and services to over 10,000 organisations. This enables not-for-profits to focus on what they do best and have greater impact in their communities.

Infoxchange was a finalist in the 2014 Institute of IT Professionals “Best IT Project in New Zealand” award for our work helping charities recover from the Christchurch earthquakes.

To learn more about Infoxchange, visit infoxchange.org

D.2 About the Ministry of Social Development (MSD)

The Ministry is all about helping to build successful individuals, and in turn building strong, healthy families and communities. It's a big job – they tackle some of the big issues in society, like family violence and youth offending.

The Ministry works closely with other government agencies, non-government organisations, advisory and industry groups, and communities and iwi. Together we aim to make a positive and lasting difference in the lives of New Zealanders.

The Ministry's Capability Investment Resource (CIR) fund is designed to support a stronger, adaptable and more integrated social sector. This report was funded through the CIR programme. More information on the CIR programme and MSD's activities can be found at www.msd.govt.nz.

D.3 About Idealware

Idealware is a USA-based non-profit organisation that provides thoroughly researched, impartial and accessible resources about software to help non-profits make smart software decisions. Visit www.idealware.org to learn more or view their hundreds of free articles, resources and reports.