

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board	
Held on	16th February 2022	
Agenda Item:	Item 10	
Title:	Business Case Approval for Telecare Analogue to Digital Migration	
Summary:		
<p>The purpose of this report is to present the Telecare Analogue to Digital Migration business case for approval by the IJB.</p>		
Author:	Vikas Kalra, South Ayrshire Council	
Recommendations:		
<p>It is recommended that the Integration Joint Board</p> <ul style="list-style-type: none"> i. Agree the project budget of £1.23m for ARC system implementation and replacement of analogue consumer devices and peripherals; ii. Note the increase in costs for providing Telecare service and funding arrangement for future years; iii. Agree the recruitment of 4 additional staff members to support the project implementation; and iv. Consider the risk of higher volume of failed calls if devices and software are not replaced and/or upgraded 		
Route to meeting:		
<p>Business Case reviewed at Digital Programme Board and approval obtained from Tim Eltringham, Billy McClean, Lisa Duncan and Eddie Gilmartin.</p>		
Directions:		Implications:
1. No Directions Required <input type="checkbox"/>		Financial <input checked="" type="checkbox"/>
2. Directions to NHS Ayrshire & Arran <input type="checkbox"/>		HR <input checked="" type="checkbox"/>
3. Directions to South Ayrshire Council <input type="checkbox"/>		Legal <input type="checkbox"/>
4. Directions to both SAC & NHS <input type="checkbox"/>		Equalities <input type="checkbox"/>
		Sustainability <input type="checkbox"/>
		Policy <input type="checkbox"/>
		ICT <input checked="" type="checkbox"/>

Business Case Approval for Telecare Analogue to Digital Migration

1. PURPOSE OF REPORT

1.1 The purpose of this report is to present the Telecare Analogue to Digital Migration business case for approval by the IJB.

2. RECOMMENDATION

2.1 It is recommended that the Integration Joint Board

- v. Agree the project budget of £1.23m for ARC system implementation and replacement of analogue consumer devices and peripherals.
- vi. Note the increase in costs for providing Telecare service and funding arrangement for future years.
- vii. Agree the recruitment of 4 additional staff members to support the project implementation.
- viii. Consider the risk of higher volume of failed calls if devices and software are not replaced and/or upgraded.

3. BACKGROUND INFORMATION

3.1 There are 31.22 FTEs within the Emergency Response Team (ERT), including telecare officers, providing analogue Telecare service to approximately 2,200 service users and out of office hours support to approximately 600 sheltered housing residents. The equipment used to deliver these telecare services use analogue dial-up protocols to carry status and alarm signalling between the alarm devices in users' homes to the Alarm Receiving Centre (ARC).

3.2 Connectivity between homes and the ARC is provided by users' home telephone line, or less commonly, a mobile (GSM) radio embedded in the users' telecare alarm device. We utilise a software system, to provide this service. This software system has recently been upgraded however is unable to provide a digital Alarm Receiving Centre (ARC) solution. In addition, for stock management we have System Manager, also provided by Tunstall. Both solutions are hosted on council's data centre (on-prem). Almost all the consumer devices (hubs and peripherals) are procured through Tunstall.

3.3 By 2023, analogue telephone services in the UK will be switched off and replaced by digital systems using internet protocol (IP) technology. Telecommunication suppliers are well on their journey to making this switch to 'IP networks'. Any systems relying on 'voice band data', such as telecare, will be affected by this change and citizens' equipment must be updated for them to continue to receive a safe and reliable service.

4. REPORT

- 4.1 The primary objective of this project is to replace the existing alarm hubs to use digital connections and upgrade our analogue ARC software system to a digital arc solution to de-risk the missed/failed alarm calls for the service users who will have a digital connection from their telecom provider.
- 4.2 We should have the capability to offer telecare services to all residents who require such service, without reliance on an analogue telephone line.
- 4.3 The software platform needs to be consumer device agnostic, offering better value for money by not restricting ourselves to one supplier.
- 4.4 The number of telecare users in Scotland is expected to rise, both because of an increase in those with care and support needs, and a rise in people using smart technology to support themselves and family members. A digital telecare service utilises higher capacity, always-on, connections to users' homes which means that the telecare service offerings can be both increased and improved.
- 4.5 The reasons for implementing digital telecare fall under a few broad categories:
 - i. Ensuring the continued ability to deliver reliable telecare services.
 - ii. Meeting increased demand for telecare services.
 - iii. Has the potential for data links with wider social care systems, NHS systems and the national digital platform.
 - iv. Developing and improving the range of telecare services that are offered to users.
 - v. Adapting an ARC system that is hosted by the system provider as a Hosted (Software as a service (SaaS)) solution.
- 4.6 We need to define the requirements and approach the ARC system providers via a compliant procurement route for the selection of a Digital ARC solution and consumer devices. The primary and core requirement of the engagement is to set the market our high-level requirements for a platform to deliver the telecare service, within the specific constraints of a financial envelope.
- 4.7 Our approximate costs per annum providing the telecare service is £1.28m and the revenue from the service is £0.5m. Annual budget includes £175k for the purchasing of hubs/peripherals and £42k for maintaining the alarm responder software system.
- 4.8 The new system implementation and consumer devices replacement high lever cost estimate is £1.23m with annual recurring costs of £134.8k.

5. STRATEGIC CONTEXT

- 5.1 SAHSCP Plan 2021 – 31 - Objective 1 - We focus on prevention and tackling inequality – Digital technology will help to provide Technology enabled care.
- 5.2 Council Plan 2018-2022 - Objective 3 - Health and care systems that meet people's needs – ARC software system and the devices are on analogue signalling protocol. This will need to be addressed so that we can continue to provide the Telecare service. In addition, move to digital solution may allow us to provide proactive care.

- 5.3 National Alignment – Scotland Digital Health and Care Strategy Vision - To improve the care and wellbeing of people in Scotland by making best use of digital technologies in the design and delivery of services.
- 5.4 Supporting People at home - The introduction of digital telecare will support a shift to a more proactive and preventative approach with the potential to integrate and use citizens' data to assess, anticipate and even predict needs enabling earlier intervention and improved resilience and wellbeing.

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 The source of funding for the project identified as:

- i. £300k - ICT Capital
- ii. £80k - Digital Office Telecare funding
- iii. £475k - Alarm Hardware and Peripherals- recurring budget. Budget has been increased in 22/23 by £300k from Winter Pressure investment from Scottish Government to meet costs of technology enabled care. This increase will be maintained for the future years as the replacement hub have reduced shelf life compared to analogue alarm hubs.
- iv. £105k – Ongoing Sim costs. Budget has been increased in 22/23 by £105k for Sim Costs identified in budget process in 21/22 and will be maintained for the future years.
- v. £42k - System Maintenance – recurring budget.
- vi. There is potentially a shortfall of £194k in year one (22-23) if all equipment is purchased in year and go live for all SIM costs is from 1st April 22, which is highly unlikely. However, any shortfall in year will be funded from reserves.

6.2 Human Resource Implications

6.2.1 There will be a requirement of 4 temporary resources to support the duration of the project.

6.3 Legal Implications

6.3.1 N/A.

6.4 Equalities implications

6.4.1 There is no equalities implications with the replacement of consumer devices and upgrade of software system.

6.5 Sustainability implications

6.5.1 None.

6.6 Clinical/professional assessment

6.6.1 N/A

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 Digital Office Telecare Team consulted regularly and representing SAHSCP Telecare service in monthly meetings. Also shown interest in early adopter for a “Shared ARC” which is one software system across Scotland Telecare Service.

7.2 Engagement with two partnerships in supplier's product demonstration and system requirements.

7.3 Attended TSA virtual surgeries to inform the requirements.

8. RISK ASSESSMENT

8.1. Reputation Risk, Health and safety risk –

- i. SAHSCP Telecare service do not migrate to digital Telecare: We are either unable to provide the Telecare service or have higher failed call volume this will result in user's safety and reputational risks.
- ii. Risk assessment – High if business case is not approved.

8.2. Health and safety risk, Financial risk -

- i. Delay to the migration to Digital Telecare: Increasing number of users moving to digital exchange lines prior to the Partnership being in a position to offer a digital telecare. Risk to user safety during the period prior to digital telecare being available.
- ii. Backlog with other Telecare Service Providers to achieve the same outcome may push us down a priority queue leading to increase timescales and costs.
- iii. Risk assessment – Medium. It is dependent on the approval of business case, timeline associated with the procurement and recruitment activities and the pace of digital migration rollout by telecommunication companies,

REPORT AUTHOR AND PERSON TO CONTACT

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BACKGROUND PAPERS