

Wiltshire Council

Cabinet

17 January 2012

Subject: Telecare Monitoring Service

Cabinet member: Councillor John Thomson - Adult Care, Communities and Housing

Key Decision: Yes

Executive Summary

In July 2011 Cabinet authorised officers to commence consultation with staff at the Council's telephone monitoring service, CareConnect and, subject to that consultation, to award a contract to Wiltshire Medical Services subject to the successful completion of a Voluntary Ex-Ante Transparency (VEAT) notice.

This report sets out the results of this consultation and informs Members that the VEAT notice period has now ended thereby enabling the Council to enter into a contract with Wiltshire Medical Services¹ for the provision of a telephone monitoring service. This contract will have a value in excess of £1m and therefore requires Cabinet approval.

The purpose of this report is to inform Members of the outcome of consultation undertaken with staff and to seek approval to close the telephone monitoring service currently provided by Careconnect and to transfer these services to Wiltshire Medical Services and the Council's interim telephony provider

This is a key element of the Council's strategy to enable more people to live at home through the provision of a 24 hour call centre and response service linked to telecare.

Proposals

- To decommission Careconnect and transfer the telecare monitoring service to another provider.
- To transfer the non-social care out-of-hours call handling services provided by Careconnect to the Council's existing out of hours telephony provider in an interim basis.

¹ Wiltshire Medical Services is a private company run by General Practitioners who provide the out of hours services to the NHS. This service includes the management of out of hours doctors and related health services. Wiltshire Medical Services also provides the Access to Care service for the NHS.

- To commission Wiltshire Medical Services to provide telecare monitoring for current Careconnect customers and future telecare customers in Wiltshire.
- Further to a decision by Cabinet in July 2011 to commence a consultation process, which has now concluded, to transfer Careconnect staff under T.U.P.E. to Wiltshire Medical Services (or implement redundancies if relevant).
- To commission the Council's interim telephony provider to take over the non-social care out of hours services on an interim basis pending the completion of the Council's review of telephony services that is being undertaken currently. (This service is already being provided for the Council for various aspect of the Council's business). The Corporate Procurement Unit to seek exemption from competition for the interim.
- To recognise the excellent work undertaken by Careconnect over the years in supporting people and to extend thanks to existing and past staff for their contributions.

Reason for Proposal

Careconnect does not have sufficient staff or the correct equipment to support the significant expansion envisaged in telecare provision under the Help to Live at Home strategy.

For the past 18 months the Council has been piloting a telecare response service utilising Wiltshire Medical Services, which has the expertise and experience to provide these services and to grow with demand in the future. It also will be able to link the social care and health out of hours response services for the benefit of customers. The remaining minority out of hours services that Careconnect also provide do not represent a viable business in their own right and therefore also need to be transferred elsewhere.

Name of Director: Sue Redmond

Designation: Corporate Director

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Purpose

1. The purpose of the report is to seek Cabinet approval to:
 - i. Close the Salisbury based Careconnect operation and TUPE transfer the Careconnect staff to the new provider of telecare call monitoring, Wiltshire Medical Services (WMS).
 - ii. Transfer the remaining out of hours services that are not related to telecare to the Council's interim telephony provider until a strategic solution can be procured in 2012.

Furthermore Members are asked to note and acknowledge:

2. The completion of a contract with Wiltshire Medical Services for the provision of a 24 hour telecare response service that will provide both a call centre and response service that will be countywide.
3. The excellent work undertaken by Careconnect in supporting people in the south of the county.
4. The development of an innovative service available to the whole population that will enable more people to stay in their homes safely.

Background

5. Cabinet received reports in February and July 2011 that outlined the scope of Wiltshire Council's transformational project called "Help to Live at Home" (HTLAH). This project is aimed at making a real difference to the lives of the people of Wiltshire through the provision of a range of new services that have been developed with the people who will be using them.

Most people wish to remain independent and in their own homes, The Help to Live at Home project will facilitate this by providing a range of care services available to the whole population

6. A key component of the HTLAH project is to provide support to people 24 hours a day. We propose to do this by extending the existing telecare and response service pilot that is in operation in the West and South of the county to the whole county.
7. Telecare (assistive technology) is a wide range of electronic equipment that can fulfil a wide range of functions. This can include: falls detectors, sensors that can identify whether somebody is leaving their house, whether they have opened the fridge, sensors that can detect movement, if there is a gas leak or a flood and so on. Each week there are new developments in this field which will greatly assist people to be move independent and able to manage with less support. Wiltshire Council has developed plans to cope with this increase, which include a target for a three-fold increase in the use of telecare over the next 12 months. Beyond that, the Council envisages that telecare will be 'mainstreamed' as part of a strategy to enable more people to remain independent and to prevent or delay peoples need for more support. In many cases telecare is expected to replace domiciliary care and enable people to live more independently.
8. The benefits of telecare are well established and include:
 - i. Increasing customers' safety and confidence, enabling them to remain independent and in their own homes for as long as possible;
 - ii. Delaying the point at which a customer may end up in a hospital bed or a care home, and;
 - iii. Reducing the costs of care without a diminution in the quality of care experienced by the customer. Research has shown that for every £1 spent on telecare £3 can be saved in care costs
9. The benefit of this service being provided by Wiltshire Medical Service is that in the event of a customer triggering an alert Wiltshire Medical Services will be able to offer either a health or social care response. This will mean that a GP, Ambulance, district nurse or social care workers will be sent out to respond depending upon which is the most appropriate. In addition Wiltshire Medical Service will have access to the health records of individuals as well as their social care records if they receive services from the Council's Department of Community Services. If an older person has a fall at night but has not injured themselves but requires some reassurance and support a care worker will be sent out to provide this service. This has been welcomed in consultation undertaken with existing and potential customers of the service.
10. Cabinet received a report in July 2011 that sought approval to commence formal consultation with Careconnect staff regarding the

externalisation of services and including the potential TUPE transfer of staff to the new provider.

11. Cabinet approved this request and staff consultation at Careconnect was duly undertaken and concluded on the 15th December 2011.
12. Work has been undertaken to plan for the decommissioning of the Careconnect operation and the safe transfer of their customers to WMS. This includes assessments of the size and scope of the operation at CareConnect; the nature of service they provide and; the identification of options for future provision of services.
13. This report makes the case for change demonstrating how transferring telecare monitoring to WMS is the best option for creating a service that is high quality, safe, sustainable and equitable and therefore capable of delivering the desired benefits for citizens and the Council.
14. This report details the proposals for all of CareConnect's business, separated into two principle areas:
 - i. Telecare call monitoring
 - ii. Non-social care out-of-hours call handling.

Transferring Careconnect social care call handling services to WMS will create an enhanced telecare monitoring and response service within the HTLAH strategy

15. Careconnect currently runs a service for approximately 4000 social care customers, who require access to a 24/7 telecare monitoring service. Careconnect receives approximately 86,000 calls per year from these customers. These calls are managed by a workforce of 14 people (a mixture of full time, part time and agency staff).
16. 1000 Careconnect customers are Carer's Emergency Card (CEC) and Family's Emergency Card (FEC) holders. This is a valuable service for carers who wish to put in place contingencies for their cared-for in the event that they are incapacitated in an accident or other emergency.
17. Careconnect is based in a lodge house on the crematorium site in Salisbury. These premises are unsuited to the current activity and future expansion.
18. Whilst Careconnect is providing a good service, it does not have the technical capacity to respond to the Council's vision for increased deployment of telecare. In addition, it is not able to offer integration with either a response service or health services.

CareConnect's staff will be actively engaged in the transition of the monitoring service and a number of them may choose to TUPE across and work for the new provider

19. CareConnect, which was originally part of Salisbury District Council, has been operating for many years and the staff have developed relationships with their customers and have the 'soft skills' necessary to provide a valued service. It is important that any new service builds upon this expertise. This expertise must also be used to support the safe migration of customers to the new service.
20. Careconnect staff will be supporting the service transition from Careconnect to WMS in two ways:
 - i. In the short term, they will support the migration of customer data from CareConnect's computerised customer records system to the more modern PNC6 customer record system used by WMS. They will check the data to ensure it is accurate and will help enter the information onto PNC6, checking it once completed.
 - ii. Secondly they will mentor new WMS staff, providing training and shadowing during the transition period.
21. For the longer term, when the service transfers Careconnect staff will transfer to transfer their employment to WMS.
22. Wiltshire Medical Services operates from Chippenham and the Careconnect staff are based in the Salisbury area. Whilst the transfer of services to WMS amounts to an automatic TUPE transfer, the relocation of the services to Chippenham will result in the staff being required to relocate their normal place of work. In accordance with the Wiltshire Council Appointments Policy it would be deemed unreasonable and those who choose not to commute or relocate with their roles will be offered Voluntary Redundancy instead of transferring to WMS. This has been a full and open consultation process and the Careconnect staff have been consulted in accordance with HR legislation.

In the short term, the non-social care out of hours calls will be more efficiently managed by the Council's interim telephony provider at a lower cost, allowing a strategic solution to be procured

23. Approximately 10% of CareConnect's activity is managing Out of Hours calls. These are categorised into three main areas:
 - i. Highways
 - ii. Repairs for Wiltshire Housing
 - iii. Homelessness

24. This volume of work does not, in itself, constitute a sustainable business and therefore an alternative provider will need to be found for these services if telecare monitoring moves to WMS.

Unlike the social care side of the business there is limited infrastructure and technology supporting Out of Hours call handing at CareConnect.

25. A strategic review of telephony and customer services is currently underway in the Council. This review has yet to conclude, but early indications suggest a service will be procured through full and open competition that provides customers with a single Out of Hours phone number and a seamless, integrated service. Therefore any provider identified to take over the Careconnect Out of Hours service must offer a short term, flexible solution.
26. The Council's interim telephony provider has been identified as fulfilling these criteria. They already provide 75% of Wiltshire Council's Out of Hours services and they have indicated that they would take over the remaining services on a short term basis. The Council can procure these services within current contracts and then put in place plans for a full procurement process within 12 months. If an alternative provider for specific elements of the Out Of Hours services becomes available services could be placed there.

Environmental and climate change considerations

27. There are no major considerations as part of this proposal.

Equalities Impact of the Proposal

28. The response service proposal will provide more equitable access to the Telecare service. The current pilot service is only available to approximately a quarter of Wiltshire customers. This new service will be a countywide service

Risk Assessment

29. The transition of social care and Out of Hours monitoring services from Careconnect to other providers raises risks around the continuity of service and quality of future provision. A project is underway to ensure the transition process is managed effectively. In addition both WMS and the Council's interim telephony provider are well established providers with a strong track record of good quality service delivery within current contracts for the Council.

Financial Implications

30. The setting up of the new Telecare Monitoring and Response Service is part of the overall business case for the Help to Live at Home Review. As a result, budget provision for the service has been considered during the budget setting process for 2011/12 and 2012/13. There is currently provision within the 2011/12 and 2012/13 budget for the response service, which based on current knowledge and understanding of user take up will be sufficient to cover the cost of the countywide service
31. The transfer of the Out of Hours Calls from Careconnect to the Council's interim telephony provider on an interim basis will be funded from existing resources. Future funding implications in this area are dependent on the strategic review of telephony and customer service functions.
32. There are potential TUPE implications for the Careconnect staff affected by the transfer to the new service. Provision for these costs has been made within the contract discussions with WMS and will be managed as transitional costs with the provider.
33. Redundancy costs would be in the region of £168,000. This assumes that no staff opt to transfer to WMS.
34. In the longer term, as the take up of the Telecare and Response Service increases, the cost of providing the service will reduce. The more people that buy the service, whether through Council funding or independently the less the cost which will enable more people to access it. Over the lifetime of the contract with WMS it is expected that the service will not require pump priming or subsidising by the Council and that it will pay for itself through the income generated. In addition, as Telecare is "mainstreamed", the new service will deliver realisable cost savings.
35. This will result in more people living the lives they wish to, independently in their own homes safe in the knowledge that if they required help at whatever time of day, it would be available.

36. Legal Implications:

Contracting for this service is controlled by the Procurement Regulations. However, for technical reasons the Council believes that while being compliant with the rules it can still award the contract directly to Wiltshire Medical Services without prior publication in the OJEU of a tender notice and commencement of a full tender. To be compliant the Council has alerted the market (by means of a V.E.A.T notice) of its intention to directly award the contract in this way. No comments were received in response to the V.E.A.T. notice and so

the Council may proceed with the award of the contract. This V.E.A.T notice publication process provides the maximum protection available to a procurement challenge.

Summary and Conclusions:

37. This paper makes the case for closing Careconnect and moving the service and TUPE transfer (or voluntary redundancy), the staff to WMS in four areas:
- i. Transferring Careconnect social care call handling services to WMS will create an enhanced, integrated and sustainable telecare monitoring and response service for customers as part of the HTLAH strategy.
 - ii. WMS will provide a service that bridges the health and social care divide and provides scalable and equitable access across the whole of Wiltshire.
 - iii. Careconnect staff will support the transition and some of them may TUPE across to the new provider. Those that choose not to will be offered redundancy in accordance with the Council's policies.
 - iv. In the short term, OOHs calls will be more effectively delivered by the Council's interim telephony provider , with the opportunity for a long term strategic solution to be procured.

Key Points to Note and Decisions Required:

38. Members are asked to authorise officers to close the Careconnect operation which will result in a TUPE transfer of Careconnect staff to WMS or offer staff voluntary redundancy.
39. To enter into a contract with Wiltshire Medical Service for the provision of a call centre response service.
40. To migrate current social care customers to WMS and move non-social care Out of Hours activity to the Council's interim telephony provider (until a longer term solution for Out Of Hours services becomes available).

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Date of report: December 13th 2011

Background Papers:

Cabinet Report dated February 26th 2011 “Help to Live at Home”

Cabinet Report dated July 26th 2011 “Helping people to live at home in Wiltshire”