

17 October 2023**REPORT OF THE SERVICE DIRECTOR, AGEING WELL AND SERVICE
IMPROVEMENT****PROOF OF CONCEPT FOR TECHNOLOGY ENABLED CARE AND OTHER
DIGITAL OPPORTUNITIES IN ADULT SOCIAL CARE****Purpose of the Report**

1. The report seeks approval from the Corporate Director of Adult Social Care and Health, subject to receiving prior approval from the Section 151 Officer, to:
 - a. use the national Discharge Grant in the Better Care Fund in the sum of £243,210 to continue work with specialist consultants (Channel 3) to mobilise the proof of concept for Technology Enabled Care (TEC) at scale and look at the feasibility and benefits assessment of other digital opportunities within Adult Social Care.
 - b. use the national Discharge Grant in the Better Care Fund in the sum of £30,000 to purchase of the TEC required to mobilise the proof of concept.
2. The work aligns with the recommendations set out in PA Consulting's 2021 Diagnostic Report, one of which recommends a broader offer for increased numbers of older adults and enhanced use of 'live' monitoring devices/digital options to reduce isolation. The next steps on the PA road map were identified as designing a range of delivery models and implementing them which this work supports.

Information**Background**

3. The Council received a Department of Health and Social Care grant this financial year to streamline the assessment process in readiness for the implementation of Charging Reform that was included in the adult social care reform white paper.
4. The grant was to be used to procure and implement digital efficiency tools, using business process experts to improve operating models to reduce the assessment burdens on local authorities due to the reform and the escalating demand and costs facing Adult Social Care.
5. A new approach was needed having exhausted traditional forms of transformation; therefore, a proportion of the grant (£100,000) was used to procure Channel 3 who are consultancy experts in digital opportunities for local authorities. Phase one of this work started in June 2023 and saw an exploratory workshop designed to understand and explore how innovative digital solutions could be utilised across services.

6. This led to phase 2 in July 2023 where the Council commissioned a deeper look into the opportunities digital presents and focused on two areas:
 - a. Digital discovery for people accessing Council support through the Customer Service Centre (CSC) and Multi Agency Safeguarding Hub (MASH) to identify the digital solutions that the Council could adopt to manage demand differently and maximise the use of digital in its current programme of change.
 - b. Digital discovery covering the broader Adult Social Care journey which included Hospital Discharge and Community Crisis Response.
7. Several workshops were completed with key stakeholders over an eight-week period to explore key challenges and opportunities to deploy and optimise digital.
8. The phase 2 work is now complete and prioritised roadmaps and high-level investment case deliverables for digital opportunities and benefits realisation have been received across the two areas of focus in **paragraphs 6a and 6b**.
9. Four priority projects detailed below have been identified for accessing Council support below and will be taken through the corporate gateway decision making process:
 - Improving how people can find local activities through the community directory
 - Redesigning the website and using supported navigation to help people better access the information they need
 - Streamlining processes and improving information capture at the Multi Agency Safeguarding Hub for Adults
 - Targeted digital improvements at the CSC to reduce high volume transactional activity.


Next Steps for Digital Opportunities in Adult Social Care

10. To ensure momentum continues, Adult Social Care is looking for further support from Channel 3 to progress digital opportunities over an initial four-month period looking at four key priority areas of work across reablement and community services to support hospital discharge and crisis prevention. The four areas of work are:
 - a) TEC at Scale – working with Re-ablement and Community Health Teams to deploy TEC to 50 people to support hospital discharge and prevent crisis in the community. This will require a revised process and workforce model to support how the teams respond to the TEC.

Feasibility studies and an assessment of benefits across three areas below will be undertaken:


- b) Improving the digital offer for carers
- c) Using data to assess patterns of risk to identify and target support where it is most needed
- d) Planning tool to provide live capacity and demand information across different providers.

11. The table below outlines the priority areas in more detail.



Priority solutions identified - crisis prevention, D2A, reablement

		Description	What does it do?	Benefits
Mobilise proof of concept	TEC at scale	Implementing TEC at scale to identify and respond to changes in need and prevent a crisis.	<ul style="list-style-type: none"> Sensor-based remote monitoring TEC Platform with AI, data analytics & monitoring that learn behaviours Notification triggers on changing behaviours 	<ul style="list-style-type: none"> Information to support needs assessment Reduction in crisis demand / costs Increased ability to self-care (incl. family) Reduces resi care placements, reduces costs of F2F care, can target resources
	Carers digital offer	Redesign the digital offer for carers to enable them to access IAG, support and fellow carers to help live their lives	<ul style="list-style-type: none"> Allows carers to connect with each other Easy access information and advice available digitally 24/7 to carer needs AI chat function to tailor advice/support 	<ul style="list-style-type: none"> Carers better supported and able to live a life Reduces carer breakdown Reduces front door demand Access to tailored support 24/7
Feasibility & benefits assessment	Risk stratification	Implement risk stratification tools to identify and target interventions at people who need it the most	<ul style="list-style-type: none"> Extracts data from ASC and NHS to build holistic view of person Uses historical data and AI to assess patterns of risk 	<ul style="list-style-type: none"> Better understanding of people's needs Target resources at those that need it most Better diagnosis & identification of need Reduction in crises, and long-term support
	Provider demand and capacity	Expand digital operational planning tools to key services supporting hospital discharge to improve use of resources	<ul style="list-style-type: none"> Dynamic scheduling system Access to live information to support capacity planning and decision making Ability to match resources to demand across services and geographies 	<ul style="list-style-type: none"> Increases capacity by optimising travel Reduction in missed visits Reduction in manual scheduling errors Cash releasing savings Reduced duplication

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12. The TEC at scale will focus on the Lilli TEC solution, (subject to compliant procurement) where known benefits have been quantified with pilots completed in neighbouring Nottingham City Council, and North Tyneside. Some of the impacts of the pilots are detailed below:

- Quality of life and independence maintained at home, reducing the need for increased social care support.
- Peace of mind and reassurance for the family.
- Social care waitlist reduced.

13. This phase of work with Channel 3 will initially support the delivery of existing savings for Strengths Based Approach projects already in the Medium-Term Financial Strategy (MTFS) that are experiencing obstacles that are due to increased levels of care that people are currently needing. For example, a person's homecare support plan is now approximately 43% larger than in 2019/20 due to more complex needs and the unit cost of care has increased by 5%. Therefore, new actions from the original 2019/2020 business cases are required due to this changing context and the changed assumptions that these were built on. Assessment will then be completed on the potential to scale up further and deliver benefits of a stretch target.

14. The table at **paragraph 11** outlines the benefits across the four areas of priority, and the use of TEC at scale demonstrates how it will support the strengths-based approach savings with a reduction in crisis demand and costs, and residential care placements, whilst providing vital information to support a person's needs in a more proactive way.

15. The table below sets out the projected recurrent net benefit of £2.3m investment by 2026/27 for TEC at scale, which will support the delivery of 2024/25 and 2025/26 respective savings of £1.15M.

TEC at scale: Investment Case	2023/24 £'000	2024/25 £'000	2025/26 £'000	2026/27 £'000	TOTAL £'000
Number of people supported	50	500	200	-	750
Projected financial benefits	54	1,243	1,405	540	3,243
Total recurrent costs	30	410	391	120	950
Projected net benefit/Cost Saving	20	834	1,014	420	2,293

16. Feasibility and benefit assessments will take place for the other priority areas identified in the table at **paragraph 11**.

Costs associated with next steps

17. The level of one-off investment required to deliver this next phase of four months of work with Channel 3 is £243,210 excluding VAT.
18. The cost of the TEC to support mobilising this proof of concept is £30,000.
19. The project resources required to support Channel 3 will come from existing resources from within the Service Improvement Quality and Practice Team in Adults.

Other Options Considered

20. The department could do nothing and continue to experience obstacles outlined in **paragraph 13** with the Strength Based Approach Programme, which would continue to be at risk of non-delivery and widen the MTFS gap by 2025/26.
21. A further option would be to look internally to mobilise the TEC proof of concept, but the department/Council does not have the same specialist knowledge that the consultants have in this field.

Reason/s for Recommendation/s

22. Continuing the work with Channel 3 will benefit the people the Council supports through the benefits identified at **paragraph 12** and investing now in mobilising TEC at scale is anticipated to reduce the MTFS gap in future years.

Statutory and Policy Implications

23. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty,

safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

24. The national Discharge Grant in the Better Care Fund has been identified as the funding source for the full amount of Channel 3 costs of £243,210, and the purchase of TEC to mobilise the proof of concept at a cost of £30,000.
25. The report to the Health and Wellbeing Board on 24 May 2023 (see Background Papers) approved the use of the national discharge grant, which included opportunities to extend investment in TEC to support people's independence longer and avoid re-admission to hospital. This is in line with the recommendations following a diagnostic by PA Consulting in May 2021, of which next steps were to work up detailed delivery models and implement.
26. It was also acknowledged in the report to the Health and Wellbeing Board that further diagnostic work is needed on TEC to improve how this is deployed to maximise maintaining people's health and wellbeing.
27. This work aims to be an alternative to deliver at least 50% of the existing Ageing Well Strength Based Approaches savings in the MTFs which are currently at risk due to changes in assumptions used to develop the business case completed by consultants Newton in 2019. This work would therefore continue to be at risk and be without an alternative proposal if this work does not progress.
28. There will be an opportunity to bid as an Integrated Care System (ICS) for the third round of the national Innovation Funds in 2024 to scale up an existing evaluated TEC service, which this work positions the Council to apply for. The plan is to work with Digital Notts in the ICS and use the same platform (Lilli) that Nottingham City has already successfully trialled and aim to apply to the second round of Innovation Fund to roll out more widely.

Data Protection and Information Governance

29. As part of the ongoing work with Channel 3 Data Protection Impact Assessments will be completed for all four areas of work in line with the Council's Information Governance Policy.

Human Resources Implications

30. The specialist consultants (Channel 3) were onboarded through the REED Consultancy+ framework agreement, and this further work is being taken through the same procurement process presently.

Human Rights Implications

31. The four areas of work will aim to provide the people the Council supports with more choice and control over the way in which their care and support is delivered. The carers digital offer as an example will enable unpaid carers to access tailored support more readily, improving the opportunities available to them. The technology deployed will not be

mandated but will be available to suit the needs and choice of the people and families the Council supports. There will be a positive impact on human rights.

Public Sector Equality Duty implications

32. The proof of concepts for TEC will be with no more than 50 people, and the teams have yet to be selected. Once known an Equality Impact Assessment will be completed.

Safeguarding of Children and Adults at Risk Implications

33. The evaluation from this work will inform how the Council can support more people to live safely in a place they call home and allow the Council to respond in a more proactive way to reduce the risk of harm.

RECOMMENDATION/S

That, subject to receiving prior approval from the Section 151 Officer, the Corporate Director, Adult Social Care and Health:

- 1) approves the use of the national Discharge Grant in the Better Care Fund in the sum of £243,210 to continue work with specialist consultants (Channel 3) to mobilise the proof of concept for Technology Enabled Care at scale and look at the feasibility and benefits assessment of other digital opportunities within Adult Social Care.
- 2) approves the use the national Discharge Grant in the Better Care Fund in the sum of £30,000 to purchase the necessary TEC to mobilise the proof of concept.

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Constitutional Comments (SF 29/09/23)

34. The Corporate Director may only give approval as requested by the Recommendation to engagement of the consultant through use of the REED Consultancy+ framework agreement, and the consultant may only start work, after the Section 151 Officer has given prior approval (Constitution / Financial Regulations / paragraph 8.12)

Financial Comments (CR 26/09/23)

35. There is scope within the Discharge Grant to fully fund the second stage of the Channel 3 work. This work is within the scope of the grant and there is budget available for payment in the financial year 2023/24.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Use of the Nottinghamshire County National Discharge Grant - report to Health and Wellbeing Board on 24 May 2023](#)

Electoral Division(s) and Member(s) Affected

All.

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