Digital Switchover transcript

MG = Marc Greenwood (WM ADASS); TM = Tim Mulvey (TSA); AV = Abby Vella (WM ADASS); JH = Julie Harrison (Birmingham City Council); MS = Michael Swaffield (NHSX); RMcC = Rory McClelland (Farrpoint); DA = Dave Andrews

MG: We've invited colleagues from the TSA, NHSX, and Farrpoint to talk to us about plans for the digital switchover and importantly what we as local authorities can undertake and do now to support our residents and our organisations with that switchover process.

TM: The challenge is [that] the majority of the critical alarm connectivity in the UK relies on PSTN, this analogue technology, the traditional phone line in the home. Those phone lines carry those critical alarm conversations from the person's, from the frail and vulnerable person's home, to the contact centre.

If you move that connectivity from this analogue, this existing analogue technology and move it onto digital, the reliability starts to suffer. It means that people may have to redial a few times to get through. Best case scenario, things will continue to operate as is but we're going to see more failed calls over this period of time as the network becomes more and more digital.

The challenge for care technology in the UK is actually to transmit digital signals from digital units. In this period of time we're in now there's a risk that the longer you hold onto your analogue box and force it down the digital route the more likely it is that there's going to be some challenges.

So whilst yes, you could have a list of all of these units and go tick, tick, everyone's been down to the BT lab in Martlesham, signed it off 'yes worked fine, worked fine, worked fine', what you'll still find is there will be intermittent failures and the feeling from the industry is that those intermittent failures will grow over time.

AV: What would be helpful is if there was full transparency over what devices and equipment had been tested in labs, you know, by suppliers, and the outcome of those. Just so that, you know, the right conversations can be happening.

TM: Yeah, it's been difficult to get hold of so as soon as I can pull that together I will share it.

I won't spend too much time on this other than there are several short term risks. If you're moving from analogue to digital predominantly at the moment the tech suppliers are recommending that you make those digital calls over a SIM card, and with SIM card comes obviously additional cost because you would be used to individuals paying for their own land lines, now you're having to fork out for SIM cards which could be between 70p and a pound a week. On top of that if you've got 5000 units in operation you could be looking at £200 – 250K per annum of additional costs.

In terms of how tech suppliers are planning for the switchover, they have developed what I call hybrid devices, so devices that are both digital and analogues and what I would say to people is, where you can, stop buying analogue-only units.

We've still got 50% of alarm receiving centres unable to receive digital alarm calls because the supplier hasn't released that and that's a major concern.

MG: There's a significant safeguarding risk, isn't there? I mean every time there's a failure that could be somebody who is in genuine need of help and that for me increases the safeguarding risk associated with telecare. Is that what you are suggesting?

TM: That's what I am suggesting. It could be a smoke alarm, for example, minutes could be absolutely critical in terms of getting that message through to the control centre. You've also got the risk where currently the devices are powered through the telephone exchange, they also have it battery backup. If you take that analogue unit out of the phone line in the wall, because the phone in the wall no longer works, and you have to plug it into the back of the router then all of a sudden that router becomes the single point of failure.

So if there's a mains failure in the property then it doesn't matter about the battery backup in the unit itself because it can't get to the outside world because of the reliance on the router to actually route that call out to the outside world. It is possible to have a router with battery backup, but again, it just adds to potential complexity.

JH: This is suggesting to me that with our call centre we need to have a failing report and I'm not sure if they do that at the moment. But it's really starting to worry me, Marc's point around safeguarding and that our control centre should be giving us failing reports per unit.

TM: You might be used to looking at how many calls do they answer in 60 seconds, but now it's actually 'which calls are we not getting into the centre?' We are just about to release a digital guide for what local authorities should be doing now - this is about what you should be doing as an organisation to prepare yourself for the analogue to digital transition.

MG: Michael can I bring you in to do some introductions to your item please?

MS: Thanks Marc when people will be switching over it's not like the television switchover where when regions switched over, there was lots of national comms about it, and everyone knew what was happening about it and it was quite a simple process follow, because when you switchover depends very much on your telecoms provider and the different exchange that you might be on.

There something like five and a half thousand different exchanges, so we will all be switching, you might switchover at a different time to your next door neighbour.

What NHSX wants to do in terms of telecare is to see where things are in terms of awareness and planning, that's why we have undertaken this study focused very much on providers and suppliers and what they doing. [We will be] completing the work by the end of this calendar year and then in the New Year preparing some awareness guidance.

RMcC: NHSX has commissioned Farrpoint to conduct a survey into the readiness and levels of planning for the digital shift among both providers and suppliers of adult social care and telecare services in England. The methodology has been designed to provide us with broad understanding of current telecare services and digital switchover plans. We will also be consulting other stakeholders such as service users, telecom providers, telecare suppliers, regulators and interest groups as well, to ensure we obtain views from a broad range of impacted parties.

MG: I can see some colleagues have put some information or some points in the chat, Rory, which is probably going to start the discussion, so Dave Andrews?

DA: There are lots of people out there who really don't understand they've got to do anything, why they need to do anything. Trying to communicate that to this very difficult cohort of people is becoming a bit of a challenge, in addition to which the problems we have still have with SIM based products. We have a lot of areas still with zero G, therefore we do need to have digital devices that connect can connect through a wired system into the router.

Tim's already alluded to the problems that we've got with battery backup failure and the additional need for a battery backup system for the router just to keep the service going beyond one hour. There are lots and lots of challenges around this digital switch and we really need to get communicating hard with our client base. And that's expensive and time consuming.

MG: Ian, that chimes with something that you put in the chat

lan: yes it's just that fibre is just about hitting Shrewsbury and the rural areas - I'm in a rural area - so we'll have to use a microwave product to get connectivity. I think the government does need to push the fact that if they are going to replace the copper network they have to target the rural areas. It is expensive, but if you can't actually use this service because you haven't got 4G either, how are you going to protect these people? Four years — they have a lot of work to do.

MG: Lisa Lawson can I bring you in?

LL: The focus in the comments that I have made really is about comms, and trying to simplify and cut away some of the technical language and the more detailed kind of changes that go on in the background, just to make it more accessible for the people that this will affect. I also think carers can play a really big part in supporting. Often somebody using this sort of care technology will be doing that with some support from a family member, a neighbour, you know a network of people. Or a voluntary organisation might be checking in on that individual and I think messaging needs to come from a number of angles, and I think tapping into that network will be really important. A basic one side fact sheet just setting out really clearly what the impact is, that's whether it's an individual who has purchased their own technology, or whether it is through a local authority or another organisation. It would be good if organisations like Carers Trust for instance could be part of sharing that.

MG: Marie, can I bring you in?

Marie: We've heard today to stop purchasing analogue equipment and move to a hybrid which is more expensive. We in Dudley have an internal service, we've started to look at the levels of investment that are going to be required to move the monitoring centre to take digital calls, and also it will be a full replacement programme. We've got eight thousand users across Dudley, between 8 and 10. Due to the level of investment and also the level of risk that we've talked about today, is there going to be a series of people, providers, opting out from the industry because that risk is too great both on a resource level basis and a safeguarding basis? For me, that's going to leave a huge gap in the market and potentially a lot of unmet need out there, which then might have a drain on statutory provision.

TM: I think Marie's point is a good one: three of three years ago there was about 200-230 alarm receiving centres in the UK, I think its around 177 at the moment, so we are seeing people put their hands up and step back from that provision.

MG: Nicola, can I bring you in?

Nicola: I work alongside Marie at Dudley, and I'm call centre manager for the telecare service. My worry is that we're obviously trying to safeguard our clients and telecommunications providers are offering for vulnerable clients, as we've already discussed earlier, this kind of emergency backup line. It does in one way give them some kind of reassurance that they can dial 999 or 112, but of course if they've fallen....

We're trying to now look at equipment, the risk that that presents, how we can support them but providers of our equipment aren't giving us any reassurance in terms of what we should be doing. You know, how we can make these two pieces of kit work together? Everybody seems to have their own tick box. Telecommunications providers have ticked a box by providing this backup line. No one is working alongside us to tell us how this can work together to safeguard the ultimate person which is our customers. I think that's a real concern for me at the moment, because everybody seems to be safeguarding themselves but not communicating with the telecare providers and how we can then safeguard the customer who has this lifeline into a communication centre but ultimately that won't communicate.

MG: I think that's a very fair reflection, it's certainly concern of mine, that I think we need to be progressing through NHSX. I'm hearing very much this morning there's a genuine concern and risk associated with the welfare of residents, and if we don't get this right the consequences could be quite significant. Ian, can I bring you in?

Ian: I would suggest, as part of this issue, speak to your ICT. They have probably got a very good handle as to what kind of connectivity is around your area, because I'm in ICT and we face this challenge on a daily basis - connecting schools, connecting our sites. I'd engage early with them, and they can provide you with a great deal of information and support to enable it to happen.

MG: Michael, clearly there are a significant number of concerns that we'd like to work with you on to overcome over the coming weeks and months if that's an offer you are happy to take up?

MS: Yes, that's really helpful and I think if it's possible to maybe come back to the group after Christmas and go through some of the issues that that we're trying to address. I think today's conversations have reinforced is the different number of players in this process and who can play a role, and who has access to information, who has access to the service user, and to try and join it all up. I think that's very much what our awareness guide is going to focus on, but there might be a need for a halfway process where we share information with local authorities before we publish the full guidance.