

# Appendix 1

## Technology Enabled Care (TEC) – County-wide contract

### Options Appraisal

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**Project SRO:** Helen Gillivan (Workstream 2 – Innovation)

**Portfolio:** ASC

**Version No:** v0.1

#### **Purpose:**

The Options Appraisal allows several different delivery model options to be explored and evaluated against a set of agreed criteria, leading to the selection of the preferred option.

#### **VERSION HISTORY**

<b>Version</b>	<b>Date Issued</b>	<b>Summary of Change</b>	<b>Owner's Name</b>
V0.1	August 2022	First draft	Lizzie Blockley
V0.2	August 2022	Amendments to CSFs	Lizzie Blockley
V0.3	August 2022	Amendments to Finance options	Lizzie Blockley

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## Key:

### Icon Type

### Description



The proposed option does **not** meet the CSF in some way.



The proposed option meets the CSF.



The proposed option meets and exceeds the CSF.



It is unclear at this time whether the proposed option meets the CSF or not.

## Purpose

The options framework provides a systematic approach to identifying and filtering a broad range of options for delivering policies, strategies, programmes and projects.

The framework considers the creation of options as a series of choices to be made in sequence. “Why” provides the rationale for intervention and the potential scope for change. Once the potential scope for the scheme has been agreed, the next stage is to identify and appraise the choices to be made in relation to what, where, how, who, when and funding.

The options framework identifies and filters these choices for the operational scope, service solutions, service delivery, implementation timeframes and funding mechanism for the project.

Table 1 - Scope Options (The What)

Option	SO 1 (Do Minimal)	SO 2	SO 3	SO 4 (Do Maximum)
Description	County-wide delivering TEC service flexible/ adaptive products. Incorporate existing contracts	County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With some innovation and service development	County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With innovation, service development and culture change	<p>County-wide TEC service and products (digital telecare, assistive technology, remote monitoring and virtual solutions and apps), which is flexible and adaptive. Incorporate existing contracts KARA and Telecare and manage switch over.</p> <p>Embed innovation through practice (culture) and seek new ways of working. Emphasis on delivering innovation in service design, practice and new technology; commercial capability and private pay. Strategic input on the delivery and development of TEC services. Develop our partnerships and opportunities Tracking and realisation of financial and non-</p>

				financial benefits.
<b>Objective</b>				
To put in place an innovative digital technology enabled care offer that empowers a person and to support them to maintain or improve their independence, safety, and wellbeing.	X	✓	✓	✓✓
<b>Critical Success Factors</b>				
<b>1</b> Develop a robust data evidence base which is used to proactively support independence, improve outcomes and generate insights about future service requirements and population-level need, and support a data-led approach to practice.	✓	✓	✓	✓
<b>2</b> A clear and innovative offer that empowers people, supports independent living and provides greater choice and control.	X	✓	✓	✓✓
<b>3</b> Proactively considering assistive technology across the social care pathway, including but not limited to, at the first point of contact, care and support assessments and reviews and enablement support.	X	✓	✓	✓✓
<b>4</b> A flexible model that enables TEC to develop over time and explore benefits of partnership working.	✓	✓	✓	✓✓
<b>5</b> To develop the private pay market, exploring options for promoting TEC to self-funders.	X	X	X	✓✓
<b>6</b> Maximise efficiencies in ASC and embed digital technologies to manage demand.	X	X	✓	✓✓

<b>Conclusion</b>	<b>Discounted</b>	<b>Discounted</b>	<b>Carried forward</b>	<b>Preferred</b>

### SWOT Analysis – Scope

Option	Reasons for carrying through	Reasons for discounting
<b>SO 1</b>  County-wide delivering TEC service flexible/ adaptive products. Incorporate existing contracts		<ul style="list-style-type: none"> <li>This option fails to address the requirement for innovation and culture change which seeks to embed the Technology Enabled Care approach across all ASC pathways</li> <li>The failure to include culture change activities in the scope means that staff will not be capable of proactively considering and applying assistive technology</li> <li>This option fails to meet the requirement to develop the private pay market and offering TEC to self funders, which means it will not align with Making a difference every day's strategic objectives on self-directed support</li> <li>The failure to incorporate innovation and culture change means that this option would not be capable of maximising the benefits associated with Technology Enabled Care</li> </ul>
<b>SO 2</b>  County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With some innovation and service development	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Although this option would meet the majority of the critical success factors, it fails to include the development of the private pay market. Additionally, there is limited service development and culture change, which means that the maximum benefits of implementing Technology Enabled Care are unlikely to be realised and technology will not be fully embedded across ASC pathways</li> </ul>
<b>SO 3</b>  County-wide delivering TEC service and flexible/ adaptive products. Incorporate	<ul style="list-style-type: none"> <li>This option meets all critical success factors other than specifically detailing the need to develop the private pay market, which could be incorporated at a later phase of the contractual arrangement</li> <li>The option also outlines the requirement for</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>

<p>existing contracts. With innovation, service development and culture change</p>	<p>innovation and culture change, which means it is capable of achieving all anticipated benefits associated to implementing Technology Enabled Care and embedding it across ASC</p>	
<p><b>SO 4</b></p> <p>County-wide TEC service and products (digital telecare, assistive technology, remote monitoring and virtual solutions and apps), which is flexible and adaptive. Incorporate existing contracts KARA and Telecare and manage switch over.</p> <p>Emphasis on delivering innovation, commercial capability and private pay. Strategic input on the delivery and development of TEC services. Embed innovation through practice (culture) and seek new ways of working. Develop our partnerships and opportunities Tracking and realisation of financial and non financial benefits.</p>	<ul style="list-style-type: none"> <li>• This option is capable of meeting and/ or exceeding all of the identified critical success factors through a focus on innovation and embedding cultural change in ASC services and pathways</li> <li>• Unlike the other options, this option specifies the need to develop the private pay market which aligns with KCC's strategic objectives and Making a difference every day approach</li> <li>• The option specifically highlights a requirement to develop KCC partnerships, which may include health partners. Over the life of the contract, this represents an opportunity to bring key partners on board, expand the coverage of the service, take a joined-up approach to care delivery and improve the outcomes for people as the result of a holistic whole-system approach</li> <li>• The option highlights the importance of embedding Technology Enabled Care within the ASC workforce through the delivery of culture change activities focusing on practice</li> <li>• Crucially, this option identifies the importance of benefits realisation and ensures that a Technology Enabled Care provider is an active participant in identifying an appropriate benefits realisation framework and supporting appropriate tracking of benefits</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>

Table 2 – Service Solution Options (The How)

Option	Service Solution 1	Service Solution 2	Service Solution 3
<b>Description</b>	The following service elements are managed in isolation from one another and possibly by multiple providers: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>	The following service elements are managed by one provider: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>	A TEC Partner delivers core TEC requirements: <ul style="list-style-type: none"> <li>• Referrals</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data dashboards</li> </ul> TEC Partner provides strategic and extended management input for the implementation, development and management of TEC. The TEC Partner may deliver via sub-contractors or consortia of providers
<b>Objective</b>			
To put in place an innovative digital technology enabled care offer that empowers a person and to support them to maintain or improve their independence, safety, and wellbeing.	✓	✓	✓✓
<b>Critical Success Factors</b>			
<b>1</b> Develop a robust data evidence base which is used to proactively support independence, improve outcomes and generate insights about future service requirements and population-level need, and support a data-led approach to practice.	✗	✓	✓✓
<b>2</b> A clear and innovative offer that empowers people, supports independent	✓	✓	✓✓







living and provides greater choice and control.			
<b>3</b> Proactively considering assistive technology across the social care pathway, including but not limited to, at the first point of contact, care and support assessments and reviews and enablement support.	X	✓	✓✓
<b>4</b> A flexible model that enables TEC to develop over time and explore benefits of partnership working.	X	✓	✓✓
<b>5</b> To develop the private pay market, exploring options for promoting TEC to self-funders.	✓	✓	✓
<b>6</b> Maximise efficiencies in ASC and embed digital technologies to manage demand.	X	✓	✓
<b>Conclusion</b>	<b>Discounted</b>	<b>Carried forward</b>	<b>Preferred</b>

### SWOT Analysis – Service Solution

Option	Reasons for carrying through	Reasons for discounting
<p><b>Service Solution 1</b></p> <p>The following service elements are managed in isolation from one another and possibly by multiple providers:</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>		<ul style="list-style-type: none"> <li>• This option has the potential to meet the Critical Success Factors relating to putting an innovative offer in place and developing the private pay market</li> <li>• However, managing different service elements in isolation from one another results in a high risk that this option would fail to meet Critical Success Factors relating to a flexible offer which develops over time, generating a robust data evidence base and maximising efficiencies in ASC. There is a high risk that having multiple service elements managed in silos and by multiple providers could result in failure to join up elements effectively and a service offer which feels disjointed and has multiple handoffs across the pathway, which would contradict the ambitions of Making a difference every day</li> </ul>
<p><b>Service Solution 2</b></p> <p>The following service elements are managed by one provider:</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>	<ul style="list-style-type: none"> <li>• This option is capable of meeting all of the Critical Success Factors for the project and is likely to maximise efficiencies as one provider will have oversight of all processes and the ability to reduce handoffs in the service pathway</li> <li>• From an ASC perspective, there is a benefit to working with only one provider as there will be a reduced resource requirement for contract management and a good opportunity to develop productive working relationships with only one business's stakeholders</li> <li>• Working with only one provider could enable KCC to develop an effective working</li> </ul>	

	<p>relationship which contributes to meeting the Critical Success Factors, particularly those relating to partnership working and innovation</p>	
<p><b>Service Solution 3</b></p> <p>A TEC Partner delivers core TEC requirements:</p> <ul style="list-style-type: none"> <li>• Referrals</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data dashboards</li> </ul> <p>TEC Partner provides strategic and extended management input for the implementation, development and management of TEC. The TEC Partner may deliver via sub-contractors or consortia of providers</p>	<ul style="list-style-type: none"> <li>• This option is capable of meeting and exceeding the project Critical Success Factors</li> <li>• The freedom for the provider to deliver via a consortia or sub-contractors has the dual benefit of retaining one key provider for KCC to develop an effective working relationship with, whilst also enabling access to a wider number of TEC suppliers in the market which will promote innovation and flexibility during the life of the contract</li> <li>• Unlike SS1 and SS2 options, this option specifies the requirement for a TEC Partner to work closely with KCC over the life of the contract, which provides the best opportunities for embedding a TEC-focused approach across care pathways and maximising efficiencies in Adult Social Care</li> <li>• Finally, the TEC Partner approach offers the best solution to develop robust data dashboards which can adapt over the life of the contract and provide the best evidence to KCC to manage health and wellbeing at a population level. This has the potential to deliver benefits to residents across Kent, even where they are not directly supported by the Technology Enabled Care Service</li> </ul>	

**Table 3 – Service Delivery Options (The Who)**

Option	Delivery 1	Delivery 2	Delivery 3	Delivery 4
<p><b>Description</b></p>	<p>All processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboard</li> </ul>	<p>Some processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul> <p>Assessment, referrals and data managed in-house by KCC staff</p>	<p>The TEC Partner works closely with KCC TEC Facilitators to implement the core service, manage data and embed the approach in practice, developing new working. Works with us to explore commercial opportunities/ private pay market/ self-funder offer</p> <p>The model enables KCC to upskill and embed innovation through practice over the life of the contract</p>	<p>All processes are managed in-house by KCC staff:</p> <ul style="list-style-type: none"> <li>• Triage and prescribing</li> <li>• Devices</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data</li> </ul>
<p><b>Objective</b></p>				
<p>To put in place an innovative digital technology enabled care offer that empowers a person and to support them to maintain or improve their independence, safety, and wellbeing.</p>				
<p><b>Critical Success Factors</b></p>				
<p><b>1</b> Develop a robust data evidence base which is used to</p>				





proactively support independence, improve outcomes and generate insights about future service requirements and population-level need, and support a data-led approach to practice.	✓	✗	✓	✗
<b>2</b> A clear and innovative offer that empowers people, supports independent living and provides greater choice and control.	✓	✗ ✓	✓ ✓	✗
<b>3</b> Proactively considering assistive technology across the social care pathway, including but not limited to, at the first point of contact, care and support assessments and reviews and enablement support.	✗	✓	✓ ✓	✗
<b>4</b> A flexible model that enables TEC to develop over time and explore benefits of partnership working.	✗	✓	✓ ✓	✗
<b>5</b> To develop the private pay market, exploring options for promoting TEC to self-funders.	✓	✓	✓	✗
<b>6</b> Maximise efficiencies in ASC and embed digital technologies to manage demand.	✗	✓	✓ ✓	✗
<b>Conclusion</b>	<b>Discounted</b>	<b>Carried forward</b>	<b>Preferred</b>	<b>Discounted</b>

**SWOT Analysis – Delivery**

Option	Reasons for carrying through	Reasons for discounting
<p><b>Delivery 1</b></p> <p>All processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboard</li> </ul>		<ul style="list-style-type: none"> <li>• This option has the potential to partially meet the Critical Success Factors; it is possible that a fully outsourced service would be capable of supporting people to maintain their independence and of developing a robust data evidence base</li> <li>• However, outsourcing all activity to a provider would severely restrict the opportunities for KCC to develop its own workforce and skillset and limit our ability to effectively implement technology across all care pathways and services</li> <li>• Additionally, outsourcing all activities to one provider would limit KCC's ability to work with that provider to implement internal efficiencies and truly embed a digital approach in the organisation</li> </ul>
<p><b>Delivery 2</b></p> <p>Some processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul> <p>Assessment, referrals and data managed in-house by KCC staff</p>	<ul style="list-style-type: none"> <li>• This option is likely to be capable of meeting the majority of Critical Success Factors and retaining assessments, referrals and data in-house would be beneficial in properly embedding Technology Enabled Care across ASC pathways</li> <li>• However, evidence from the build and test has demonstrated the challenges of getting staff to embrace new ways of working and services, and it is likely that in the initial phase of the contract the workforce would not have developed the skillset to effectively refer and assess for Technology Enabled Care. This could be mitigated through a robust training and culture change programme, but there remains a risk that the new contract could be implemented and not properly implemented due to the current lack of confidence in using technology to manage people's care and support</li> <li>• Additionally, there is a risk that the existing Strategic Analytics and Performance resource and systems in-house would not be able to develop a robust evidence data base. The development of the appropriate data bases and systems are likely to require a significant amount of resource, and the only way to mitigate</li> </ul>	

	<p>the risk of not achieving a robust data base would be to secure appropriate resource for the life of the contract before taking this option forward</p> <ul style="list-style-type: none"> <li>• In later phases of the contract, this option could be beneficial in its ability to properly embed Technology Enabled Care in ASC and retain control of efficiencies in-house</li> </ul>	
<p><b>Delivery 3</b></p> <p>The TEC Partner works closely with KCC TEC Facilitators to implement the core service, manage data and embed the approach in practice, developing new working. Works with us to explore commercial opportunities/ private pay market/ self-funder offer</p> <p>The model enables KCC to upskill and embed innovation through practice over the life of the contract</p>	<ul style="list-style-type: none"> <li>• This option is the preferred option due to its ability to meet and/ or exceed all of the Critical Success Factors</li> <li>• The partnership model outlined in this option will enabled KCC to benefit from the expertise of a provider partner and work with them over the life of the contract to transfer skills into the ASC workforce</li> <li>• Taking a partnership approach will enable the provider and KCC to utilise their respective insights and expertise to develop a robust service model which combines the best expertise from each partner</li> <li>• This option has the best opportunities to support culture change and skills transfer in the ASC workforce to fully embed a technology-focused approach in ASC practice</li> </ul>	
<p><b>Delivery 4</b></p> <p>All processes are managed in-house by KCC staff:</p> <ul style="list-style-type: none"> <li>• Triage and prescribing</li> <li>• Devices</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Whilst this may represent the long-term ambition for Technology Enabled Care Services, it is recognised that KCC does not yet have the technology expertise within the organisation to manage the end-to-end process. This option would therefore fail to meet the objective and Critical Success Factors and is discounted; it may be reconsidered at the end of the initial contract term, at which point it is anticipated that skills transfer into KCC will have occurred</li> </ul>

Table 4 – Implementation Timeframe Options (The When)

Option	Imp 1	Imp 2
<b>Description</b>	<p>Phased go-live which prioritises transition to the new contract for:</p> <ul style="list-style-type: none"> <li>• Existing Telecare</li> <li>• Existing KARA</li> <li>• Existing Build &amp; Test TECS</li> </ul> <p>Mobilisation period from April – July focuses on supporting migration</p> <p>County-wide contract go live July 2023 onwards</p> <p>Emphasis on innovation. TEC partnership will evolve to reflect ongoing transformative nature of technology. Working with partners to develop opportunities and maximise potential commercial opportunities. Identifying additional cohorts of people that may benefit. Over the life of the contract activity will increase year on year</p>	<p>Big bang – go-live on 1 April 2023 with a full county-wide service across the entire scope</p>
<b>Objective</b>		
<p>To put in place an innovative digital technology enabled care offer that empowers a person and to support them to maintain or improve their independence, safety, and wellbeing.</p>		
<b>Critical Success Factors</b>		
<p><b>1</b> Develop a robust data evidence base which is used to proactively support independence, improve outcomes and generate insights about future service requirements and population-level need, and support a data-led approach to practice.</p>		
<p><b>2</b></p>		



A clear and innovative offer that empowers people, supports independent living and provides greater choice and control.	✓	✓
<b>3</b> Proactively considering assistive technology across the social care pathway, including but not limited to, at the first point of contact, care and support assessments and reviews and enablement support.	✓	✓
<b>4</b> A flexible model that enables TEC to develop over time and explore benefits of partnership working.	✓	✗
<b>5</b> To develop the private pay market, exploring options for promoting TEC to self-funders.	✓	✓
<b>6</b> Maximise efficiencies in ASC and embed digital technologies to manage demand.	✓	✓
<b>Conclusion</b>	<b>Preferred</b>	<b>Discounted</b>

### SWOT Analysis – Implementation Timeframe

Option	Reasons for carrying through	Reasons for discounting
Imp 1	<ul style="list-style-type: none"> <li>Due to the tight timescales for the procurement of the Technology Enabled Care Service and contract award in March 2023, it is necessary to build in a lengthy mobilisation period for the service. This period will enable the provider and KCC to work in partnership to develop the service and business processes</li> </ul>	

	<ul style="list-style-type: none"> <li>• Additionally, this option will ensure that existing Telecare and KARA videophone users are prioritised for mobilisation to the new contract and are not adversely impacted by a gap in their provision</li> <li>• The delivery of a phased implementation offers the best opportunity to meet and exceed Critical Success Factors, and ensure that time is built into the timescales to accommodate effective partnership working which will deliver the best outcomes for people accessing care and support</li> </ul>	
<p><b>Imp 2</b></p>		<ul style="list-style-type: none"> <li>• This option is capable of meeting the majority of Critical Success Factors; however, it lacks the flexibility that is necessary to bring together existing Telecare and KARA videophone contracts under the new contractual arrangements. These existing contracts end in April 2023 and August 2023 respectively; transitioning existing users from the current services into the new contractual arrangement will therefore be the priority and ensure there is no gap in service provision</li> <li>• The delivery of a big bang implementation would give the same priority to new users of the TECS offer as existing Telecare and KARA videophone users, which is not appropriate</li> <li>• Additionally, the timescales for the procurement of the Technology Enabled Care Service are extremely tight and the contract will not be awarded until late March 2023. It is therefore not viable to mobilise the entire service ready for a big bang go-live on 1 April 2023</li> </ul>

Table 5 – Funding Options (The Funding)

Option	F1	F2	F3
<b>Description</b> <p>The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue</p> <p>All funding is identified from the ASC base budget</p>	<p>The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue</p> <p>All funding is identified from the ASC base budget</p>	<p>The TECS offer is split into two elements:  Short-term offer is considered preventative/ for purposes of assessment and is non-chargeable  Long-term offer is treated as a service and may be chargeable in the future  Funding is provided from the ASC base budget initially and in the long-term may be provided by a chargeable element of the service and private pay offer revenue</p>	<p>All TECS is considered to be a service, preventative elements are not distinguished and the service is chargeable</p>
<b>Objective</b> <p>To put in place an innovative digital technology enabled care offer that empowers a person and to support them to maintain or improve their independence, safety, and wellbeing.</p>	✓	✓✓	✗
<b>Critical Success Factors</b>			
<b>1</b> Develop a robust data evidence base which is used to proactively support independence, improve outcomes and generate insights about future service requirements and population-level need, and support a data-led approach to practice.	✓	✓	✗
<b>2</b> A clear and innovative offer that empowers people, supports independent living and provides greater choice and control.	✓	✓	✗

<b>3</b> Proactively considering assistive technology across the social care pathway, including but not limited to, at the first point of contact, care and support assessments and reviews and enablement support.	✓	✓	✗
<b>4</b> A flexible model that enables TEC to develop over time and explore benefits of partnership working.	✓	✓	✗
<b>5</b> To develop the private pay market, exploring options for promoting TEC to self-funders.	✓	✓	✓
<b>6</b> Maximise efficiencies in ASC and embed digital technologies to manage demand.	✓	✓	✗
<b>Conclusion</b>	<b>Carried forward</b>	<b>Preferred</b>	<b>Discounted</b>

### SWOT Analysis – Funding

Option	Reasons for carrying through	Reasons for discounting
<p><b>F1</b></p> <p>The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue</p> <p>All funding is identified from the ASC base budget</p>	<ul style="list-style-type: none"> <li>• This option is cable of achieving all the identified Critical Success Factors and the fact that it is not chargeable is likely to maximise service take up and the associated preventative/ avoidance benefits. Maximising service take-up will also support the development of a robust data evidence base which would enable effective population-level health and wellbeing management in the future</li> <li>• However, this option fails to consider exploring charging for the service in the long-term, which could adversely impact the budget and therefore limit opportunities for innovation in the future. This risk could be mitigated by engaging partners such as Health and CYPE to come on board and invest in the service</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>
<p><b>F2</b></p> <p>The TECS offer is split into two elements:  Short-term offer is considered preventative/ for purposes of assessment and is non-chargeable  Long-term offer is treated as a service and may be chargeable in the future  Funding is provided from the ASC base budget initially and in the long-term may be provided by a chargeable element of the service and private pay offer revenue</p>	<ul style="list-style-type: none"> <li>• This option represents the best opportunity to achieve the Critical Success Factors and embed the Technology Enabled Care Service across all care pathways by supporting best uptake. Splitting the service into a short-term and long-term offer will enable the service to be tailored according to differing requirements for reablement/ long-term care and ensure that technology is not put in place which stays with a person beyond the timeframe of its original purpose, e.g. to support hospital discharge</li> <li>• Whilst there is not time to explore charging before the service is implemented in April 2023, there may be an opportunity to explore charging for the long-term service within the life of the contract; the contractual arrangement will be structured to ensure this is available as an option</li> </ul>	

	<ul style="list-style-type: none"> <li>• Charging for the service could support improved outcomes, as revenue generated through charging could be re-invested into the service to continue developing the service offer</li> <li>• However, further modelling is required on the viability of charging, as other local authorities have advised that the cost of the resource required to invest in managing the charging process may outweigh the revenue generated by charging</li> </ul>	
<p><b>F3</b></p> <p>All TECS is considered to be a service, preventative elements are not distinguished and the service is chargeable</p>	<ul style="list-style-type: none"> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• This option fails to meet the majority of the Critical Success Factors due to its failure to incorporate a preventative approach. Feedback from other local authorities who have successfully implemented a Technology Enabled Care Service suggests that a critical element for success is preventing an escalation of need. If the service fails to do this and is chargeable, it is likely to miss a significant cohort of people who would benefit from technology and those who may not take up the service due to not wanting to be charged</li> <li>• Additionally, if the service is chargeable it can only be implemented once someone has had an assessment to determine Care Act eligibility and their financial position. Under this circumstance, people would not be eligible for the service to support hospital discharge or reablement; this would fail to meet the needs of a large cohort of people who could benefit from the service</li> </ul>

Summary of the Long List

Potential Categories	Option 1	Option 2	Option 3	Option 4
<b>Scope</b>	County-wide delivering TEC service flexible/ adaptive products. Incorporate existing contracts	County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With some innovation and service development	County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With innovation, service development and culture change	County-wide TEC service and products (digital telecare, assistive technology, remote monitoring and virtual solutions and apps), which is flexible and adaptive. Incorporate existing contracts KARA and Telecare and manage switch over.  Emphasis on delivering innovation, commercial capability and private pay. Strategic input on the delivery and development of TEC services. Embed innovation through practice (culture) and seek new ways of working. Develop our partnerships and opportunities Tracking and realisation of financial and non financial benefits.
	<b>Discounted</b>	<b>Discounted</b>	<b>Carried forward</b>	<b>Preferred</b>
<b>Service Solution</b>	The following service elements are managed in isolation from one another and possibly by multiple providers: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul> Data dashboards	The following service elements are managed by one provider: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>	A TEC Partner delivers core TEC requirements: <ul style="list-style-type: none"> <li>• Referrals</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data dashboards</li> </ul> TEC Partner provides strategic and extended management input for the implementation, development and management of TEC. The TEC Partner may deliver via sub-	

			contractors or consortia of providers	
	Discounted	Carried forward	Preferred	
<b>Delivery (The Who)</b>	<p>All processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul> <p>Data dashboard</p>	<p>Some processes are outsourced to external provider(s):</p> <ul style="list-style-type: none"> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul> <p>Assessment, referrals and data managed in-house by KCC staff</p>	<p>The TEC Partner works closely with KCC TEC Facilitators to implement the core service, manage data and embed the approach in practice, developing new working. Works with us to explore commercial opportunities/ private pay market/ self-funder offer</p> <p>The model enables KCC to upskill and embed innovation through practice over the life of the contract</p>	<p>All processes are managed in-house by KCC staff:</p> <ul style="list-style-type: none"> <li>• Triage and prescribing</li> <li>• Devices</li> <li>• Installation</li> <li>• Monitoring</li> </ul> <p>Data</p>
	Discounted	Carried forward	Preferred	Discounted
<b>Implementation Timeframe (The When)</b>	<p>Phased go-live which prioritises transition to the new contract for:</p> <ul style="list-style-type: none"> <li>• Existing Telecare</li> <li>• Existing KARA</li> <li>• Existing Build &amp; Test TECS</li> </ul> <p>Mobilisation period from April – July focuses on supporting migration</p> <p>County-wide contract go live July 2023 onwards</p> <p>Emphasis on innovation. TEC partnership will</p>		<p>Big bang – go-live on 1 April 2023 with a full county-wide service across the entire scope</p>	



	<p>evolve to reflect ongoing transformative nature of technology. Working with partners to develop opportunities and maximise potential commercial opportunities. Identifying additional cohorts of people that may benefit. Over the life of the contract activity will increase year on year</p>		
	<b>Preferred</b>		<b>Discounted</b>
<b>Funding (The Funding)</b>	<p>The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue</p> <p>All funding is identified from the ASC base budget</p>	<p>The TECS offer is split into two elements: Short-term offer is considered preventative/ for purposes of assessment and is non-chargeable Long-term offer is treated as a service and may be chargeable in the future Funding is provided from the ASC base budget initially and in the long-term may be provided by a chargeable element of the service and private pay offer revenue</p>	<p>All TECS is considered to be a service, preventative elements are not distinguished and the service is chargeable</p>
	<b>Carried forward</b>	<b>Preferred</b>	<b>Discounted</b>

## Identification of the Short List

### 1. Do Minimum

This option represents the current situation and provides a baseline against which the other short-listed options will be measured.

Scope:	County-wide delivering TEC service flexible/ adaptive products. Incorporate existing contracts
Service Solution:	The following service elements are managed in isolation from one another and possibly by multiple providers: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>
Delivery:	All processes are outsourced to external provider(s): <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboard</li> </ul>
Implementation Timeframe:	Phased go-live which prioritises transition to the new contract for: <ul style="list-style-type: none"> <li>• Existing Telecare</li> <li>• Existing KARA</li> <li>• Existing Build &amp; Test TECS</li> </ul> <p>Mobilisation period from April – July focuses on supporting migration</p> <p>County-wide contract go live July 2023 onwards</p> <p>Emphasis on innovation. TEC partnership will evolve to reflect ongoing transformative nature of technology. Working with partners to develop opportunities and maximise potential commercial opportunities. Identifying additional cohorts of people that may benefit. Over the life of the contract activity will increase year on year</p>
Funding:	The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue
	All funding is identified from the ASC base budget

### 2. Less Ambitious than Preferred

This option represents the desired level of service modification based on the minimum level of change and spend identified at each stage of the long list exercise:

Scope:	County-wide delivering TEC service and flexible/ adaptive products. Incorporate existing contracts. With innovation, service development and culture change
Service Solution:	The following service elements are managed by one provider: <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> <li>• Data dashboards</li> </ul>
Delivery:	Some processes are outsourced to external provider(s): <ul style="list-style-type: none"> <li>• Products</li> <li>• Installation</li> <li>• Monitoring and response service</li> </ul>

	Assessment, referrals and data managed in-house by KCC staff
Implementation Timeframe:	<p>Phased go-live which prioritises transition to the new contract for:</p> <ul style="list-style-type: none"> <li>Existing Telecare</li> <li>Existing KARA</li> <li>Existing Build &amp; Test TECS</li> </ul> <p>Mobilisation period from April – July focuses on supporting migration</p> <p>County-wide contract go live July 2023 onwards</p> <p>Emphasis on innovation. TEC partnership will evolve to reflect ongoing transformative nature of technology. Working with partners to develop opportunities and maximise potential commercial opportunities. Identifying additional cohorts of people that may benefit. Over the life of the contract activity will increase year on year</p>
Funding:	<p>The TECS offer is treated as 'equipment' and is non-chargeable; the service does not generate revenue</p> <p>All funding is identified from the ASC base budget</p>

### 3. Preferred Option

This option represents the desired level of service change and spends (£) predicated upon the **Preferred** way forward identified at each stage of the long list exercise:

Scope:	<p>County-wide TEC service and products (digital telecare, assistive technology, remote monitoring and virtual solutions and apps), which is flexible and adaptive. Incorporate existing contracts KARA and Telecare and manage switch over.</p> <p>Emphasis on delivering innovation, commercial capability and private pay. Strategic input on the delivery and development of TEC services. Embed innovation through practice (culture) and seek new ways of working. Develop our partnerships and opportunities Tracking and realisation of financial and non financial benefits.</p>
Service Solution:	<p>A TEC Partner delivers core TEC requirements:</p> <ul style="list-style-type: none"> <li>Referrals</li> <li>Products</li> <li>Installation</li> <li>Monitoring</li> <li>Data dashboards</li> </ul> <p>TEC Partner provides strategic and extended management input for the implementation, development and management of TEC. The TEC Partner may deliver via sub-contractors or consortia of providers</p>
Delivery:	<p>The TEC Partner works closely with KCC TEC Facilitators to implement the core service, manage data and embed the approach in practice, developing new working. Works with us to explore commercial opportunities/ private pay market/ self-funder offer</p> <p>The model enables KCC to upskill and embed innovation through practice over the life of the contract</p>
Implementation Timeframe:	Phased go-live which prioritises transition to the new contract for:

	<ul style="list-style-type: none"> <li>• Existing Telecare</li> <li>• Existing KARA</li> <li>• Existing Build &amp; Test TECS</li> </ul> <p>Mobilisation period from April – July focuses on supporting migration</p> <p>County-wide contract go live July 2023 onwards</p> <p>Emphasis on innovation. TEC partnership will evolve to reflect ongoing transformative nature of technology. Working with partners to develop opportunities and maximise potential commercial opportunities. Identifying additional cohorts of people that may benefit. Over the life of the contract activity will increase year on year</p>
Funding:	<p>The TECS offer is split into two elements:  Short-term offer is considered preventative/ for purposes of assessment and is non-chargeable  Long-term offer is treated as a service and may be chargeable in the future  Funding is provided from the ASC base budget initially and in the long-term may be provided by a chargeable element of the service and private pay offer revenue</p>

#### 4. More Ambitious than Preferred

This option represents the desired level of service change based on the maximum level of change and spend identified at each stage of the long list exercise:

Scope:	<p>County-wide TEC service and products (digital telecare, assistive technology, remote monitoring and virtual solutions and apps), which is flexible and adaptive. Incorporate existing contracts KARA and Telecare and manage switch over.</p> <p>Emphasis on delivering innovation, commercial capability and private pay. Strategic input on the delivery and development of TEC services. Embed innovation through practice (culture) and seek new ways of working. Develop our partnerships and opportunities Tracking and realisation of financial and non financial benefits.</p>
Service Solution:	<p>A TEC Partner delivers core TEC requirements:</p> <ul style="list-style-type: none"> <li>• Referrals</li> <li>• Products</li> <li>• Installation</li> <li>• Monitoring</li> <li>• Data dashboards</li> </ul> <p>TEC Partner provides strategic and extended management input for the implementation, development and management of TEC.  The TEC Partner may deliver via sub-contractors or consortia of providers</p>
Delivery:	<p>The TEC Partner works closely with KCC TEC Facilitators to implement the core service, manage data and embed the approach in practice, developing new working. Works with us to explore commercial opportunities/ private pay market/ self-funder offer</p>

	The model enables KCC to upskill and embed innovation through practice over the life of the contract
Implementation Timeframe:	Big bang – go-live on 1 April 2023 with a full county-wide service across the entire scope
Funding:	All TECS is considered to be a service, preventative elements are not distinguished and the service is chargeable