HILLINGDON
LONDON

Democratic Services

Location: Phase II
DDI: 01895 250185
CMD No: 2026/1785

To: **COUNCILLOR SUSAN O'BRIEN**
CABINET MEMBER FOR ADULTS, CHILDREN, HEALTH & CARE

COUNCILLOR EDDIE LAVERY
CABINET MEMBER FOR FINANCE

C.C. All Members of the Children, Families, Health & Care Select Committee
C.C. Sandra Taylor – Corporate Director of Adult Social Care & Health
C.C. Sarah Baker, Adult Social Care & Health

Date: 13 August 2026

Non-Key Decision request *Form D*

Review of Telecare Model

Dear Cabinet Members,

Attached is a report requesting that a decision be made by you as an individual Cabinet Member. Democratic Services confirm that this is not a key decision, as such, the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 notice period does not apply.

You should take a decision **on or after Friday 21 August 2026** in order to meet Constitutional requirements about publication of decisions that are to be made. You may wish to discuss the report with the Corporate Director before it is made. Please indicate your decision on the duplicate memo supplied and return it to me when you have made your decision. I will then arrange for the formal notice of decision to be published.

Liz Penny
Democratic Services

Title of Report: Review of Telecare Model

Decision made:

Reasons for your decision: (e.g. as stated in report)

Alternatives considered and rejected: (e.g. as stated in report)

Signed …… Date……..

Cabinet Member for Adults, Children, Health & Care / Cabinet Member for Finance

Executive Decision Report

Cabinet Member

13 August 2026

Review of Telecare Model

Cabinet Member Lead	Cabinet Member for Adults, Children, Health & Care (Cllr O'Brien)
Consulting Cabinet Member	Cabinet Member for Finance (Cllr Lavery)
Chief Officer responsible	Corporate Director of Adult Social Care & Health
Report author	Sarah Baker/ Assistant Director Commissioning and Business Delivery

Report classification and reason	**Public**
Relevant Committee	Children, Families, Health & Care
Electoral Ward	All Wards

1. Executive Summary

This report seeks approval to undertake a public consultation on proposed changes to the Council's Telecare service to ensure it remains sustainable, equitable and fit for the future whilst continuing to support residents to live safely and independently at home.

Telecare is a key part of the Council's wider Technology Enabled Care (TEC) offer and currently supports 6,534 residents through alarm monitoring, emergency response and assistive technology solutions. The majority of telecare users do not have a statutory need and, whilst the council recognise the value of the service, the council is introducing charging to move towards a cost recovery model in response to increasing demand, and in preparation for the national transition from analogue to digital telecare services.

Currently, more than 90% of service users receive telecare free of charge due to historic age-related exemptions. Whilst this has supported access to preventative services, it is no longer considered financially sustainable and is inconsistent with wider Adult Social Care charging arrangements.

The consultation will seek views on:

- Introducing a structured charging model for telecare services, including existing users.
- Directing new non-statutory referrals to an external telecare provider from an agreed implementation date.
- Transitioning existing non-statutory users to a fully outsourced telecare model, with an external provider responsible for service delivery and income collection.

The service operates with a gross annual budget of £856,250. Financial modelling indicates that introducing a structured charging model would support the long-term sustainability of the telecare

service, helping to ensure that resources remain available to meet increasing demand and future investment requirements, including the transition to digital telecare technology.

The consultation will engage telecare users, carers, families, advocacy organisations, providers and other stakeholders. Consultation findings, together with equality, financial and operational assessments, will inform a further report to Cabinet in November 2026 setting out the preferred approach and final recommendations.

The overall aim is to deliver a fairer, equitable and digitally enabled telecare service that continues to support residents to remain safe, independent and connected within their communities.

2. Recommendation(s)

That the Cabinet Member for Adults, Children, Health & Care in consultation with the Cabinet Member for Finance:

1. **Approve public consultation on introducing a structured charging model for telecare services, including charges for existing users of all adult ages, in line with Adult Social Care charging principles and subject to financial assessment where applicable.**
2. **Approve consultation on a revised access pathway, including a defined start date for directing all new telecare requests to an external provider, supported by appropriate information, advice and signposting.**
3. **Approve consultation on the development of a transition strategy to support existing users without eligible Care Act needs to move away from Council-funded provision to a fully outsourced telecare delivery model, with an external provider responsible for onboarding, monitoring, installation, maintenance and income collection.**
4. **Note that a further report will be presented following the consultation, setting out the outcomes, equality impact assessment and final recommendations for decision, including the preferred delivery model and implementation approach**

3. Reasons for decision

The recommendations respond to the Council ensuring that it undertakes a review of services such as telecare, which are helpful, preventative, and can continue to be delivered by alternative suppliers to the Council. In mirroring what other local authorities are doing, these recommendations aim to achieve full cost recovery of telecare for the Council, whilst continuing to ensure that services are available to those in need or wishing to use this type of support and prevention service particularly as the telecare services move to digital, with the switch over in January 2027.

The current model, which provides telecare free of charge to most residents due to historic age-related exemptions, now results in over 90% of users receiving services without charge. While this supported preventative access, it has created inequity which has resulted in inconsistent charging arrangements.

Under the Care Act 2014, the Council must meet eligible care and support needs, with telecare forming part of assessed care packages where applicable. A clear distinction is therefore required between statutory provision and preventative services, with contributions determined through financial assessment where appropriate.

The proposed consultation on introducing a structured charging model, including existing users, will support a fairer and more sustainable approach aligned to Adult Social Care charging principles, while maintaining protection for those with eligible needs.

It is proposed that a £5.00 per week charge is introduced for the standard telecare service Level 1, which includes the lifeline unit, pendant, monitoring and ongoing maintenance. This level has been set to bring Hillingdon more in line with other local authorities' charging levels, while remaining affordable for residents.

Benchmarking shows that adjacent boroughs such as Brent and Harrow currently charge £5.67 per week for a comparable baseline telecare service, with higher charges applied where additional response services are included. Setting the charge at £5.00 per week places Hillingdon slightly below these rates, ensuring the service remains competitive and proportionate, while supporting the long-term sustainability of the telecare service.

Consultation is also proposed on a revised access pathway, directing all new telecare requests to an external provider from a defined start date. This will establish a market-based approach, enabling the Council to focus resources on statutory duties, with residents supported through information, advice and signposting where needs are not eligible.

A transition strategy will be developed for existing users, focused on introducing charging and supporting those without eligible needs to move away from Council-funded provision to a fully outsourced telecare model, transferring delivery responsibilities to an external provider. This will support a more streamlined and manageable transition as the non-statutory cohort reduces.

The consultation will ensure residents, stakeholders and partners can inform the future model. Final recommendations will be reported following consideration of consultation feedback, equality impacts and financial modelling.

4. Proposal

Telecare is a key component of Technology Enabled Care (TEC), providing 24-hour monitoring and alert systems that support residents to live safely and independently in their own homes. The service offers reassurance to residents, carers and families by ensuring that emergency assistance is available when needed. It includes a range of innovative and preventive solutions, such as:

- Personal and environmental sensors
- Continuous monitoring via an Alarm Receiving Centre (ARC)
- Immediate and appropriate emergency responses
- Integration of preventive and digital technologies

In Hillingdon, the telecare service currently supports a large resident cohort, with the majority of users aged over 75. The current model provides telecare free of charge to most residents due to historic age-related exemptions, resulting in over 90% of users receiving the service without charge. While this has supported access to preventative services, it has created inequity and is not financially sustainable in the longer term.

In addition, a proportion of users receive telecare as part of a statutory care and support package under the Care Act 2014. This requires a clear distinction between services provided to meet eligible needs and those that are preventative in nature.

There are currently 6,534 residents in receipt of telecare broken down as follows:

Client Type	Number of clients	Hillingdon/Own responder
Self-Monitoring	89	Does not go through to the Alarm Response Centre (ARC)
Sheltered/Extra Care (21 Sheltered Schemes and 3 Extra Care settings)	1,104	Hillingdon Responder
TCL Level 1	2,091	Own Responder
TCL Level 2	2,873	Hillingdon Responder
TCL Level 3	146	Own Responder
TCL Level 4	231	Hillingdon Responder
Totals	6,534	

Strategic Context and Drivers for Change

The telecare service is operating within a context of:

- Increasing demand associated with an ageing population and increasing complexity of need
- Inequity in the charging arrangements for people using telecare.
- Ageing infrastructure and the requirement to transition from analogue to digital telecare systems
- The Council's wider ambition to embed Technology Enabled Care as a core component of service delivery, supporting prevention, independence and demand management.

The current delivery model, which is largely subsidised, does not fully reflect the cost of provision, the level of service received, or residents' ability to contribute. This limits the Council's ability to invest in modern, scalable and resilient services. The recommendation proposes that the council

firstly moves to a full cost recovery model and secondly reviews the ongoing service model for the delivery of telecare.

Telecare may form part of a statutory care package where needs are assessed as eligible under the Care Act 2014. However, where telecare is provided as a preventative or non-statutory service, the Council has discretion to determine how the service is delivered and funded. This requires a clear and consistent approach to:

- Differentiating between statutory and non-statutory provision
- Aligning charging arrangements with Adult Social Care policy
- Ensuring compliance with legal and equality duties

Proposed Changes

The report seeks approval to consult on a set of interrelated proposals that, together, establish a sustainable and future-proof telecare model.

1. Introduction of a Structured Charging Model

Consultation is proposed on introducing a structured charging model for telecare services, including for existing users, aligned to Adult Social Care charging principles.
This would:

- Support a fairer and more equitable approach, reflecting ability to pay and level of service
- Support the long-term viability and resilience of the service
- Maintain protection for residents with eligible Care Act needs through financial assessment

2. Revised Access Pathway

A revised access pathway is proposed, whereby new telecare requests from a defined start date would be directed to an external provider. Residents would be supported through information, advice and signposting where needs are not eligible

This will:

- Establish a market-based approach for preventative services
- Enable the Council to focus its resources on statutory responsibilities
- Align with wider commissioning and market-shaping objectives

3. Outsourced Delivery Model

Consultation is also proposed on moving to a fully outsourced telecare model which will include a transition strategy to support existing residents without eligible needs to transition away from Council-funded telecare provision to an external telecare provider responsible for:

- Onboarding, installation and maintenance
- Monitoring and Alarm Receiving Centre (ARC) functions

- Income collection and customer management

This approach will:

- Ensure residents are supported through a managed and proportionate transition
- Simplify service delivery and create a more streamlined operating model
- Support digital transformation and innovation
- Reduce operational complexity within the Council

Financial Implications

The Gross Expenditure Budget for the Telecare service is £856,250 and funded through the HRA, General Fund and BCF Contribution.

Telecare Budget 2026-27				
	Budget	**HRA Funded**	**General Fund funded**	**Discharge fund (BCF) funded**
Staffing	346,250	50,778	295,472	
Apello (ARC)	304,000	202,000	102,000	
Responder Service	206,000			206,000
Gross Expenditure	**856,250**	**252,778**	**397,472**	**206,000**
Income	-25,400		-25,400	
Net Expenditure Budget	**830,850**	**252,778**	**372,072**	**206,000**

The table below provides the impact of increasing the weekly rates for the telecare service. The provision of services at Level 1 and 2 is mainly where the income to cover the costs of the service would be met. Based on the current number of users and applying sensitivity of users who would pay, results in the income recovery of £594k (40%), £742k (50%) and £891k at 60%.

Levels 3 and 4 income would be included in part of the Client's Financial Assessment as levels 3 and 4 would only be provided as part of a statutory Adult Social Care package.

Level	Type of service	Revised Number	Recomm weekly charge	Revised Total Income	Comment	Impact if 40% pay - Revised Rate	Impact if 50% pay - Revised Rate	Impact if 60% pay - Revised Rate
1	The standard service comprising of a lifeline unit. Pendant and maintenance, resident has own responders	2,091	5.00	543,660	Increase suggested to align more with other LAs	217,464	271,830	326,196
2	In addition to Level 1 support, this also includes access to a mobile response service	2,873	6.30	941,195	Increase suggested to align more with other LAs	376,478	470,597	564,717
3	In addition to the Level 1 service, the resident has access to a range of additional detectors and/or sensors appropriate to their assessed need	146	10.70	81,234	New users charges likely to be incl in Financial Assessment	32,494	40,617	48,741
4	This level of service includes access to the full range of TeleCareLine sensors and detectors to address needs and the Mobile Response Service	231	15.10	181,381	New users charges likely to be incl in Financial Assessment	72,552	90,691	108,829
	Sheltered	1,104	1.40	80,371		32,148	40,186	48,223
Total		**6,445**		**1,827,842**		**731,137**	**913,921**	**1,096,705**

If the Council recovers income from 60% of service users from options 1 and 2, this would be sufficient to cover the current costs of providing the service and be sufficient to exceed the medium-term financial strategy savings target of £700k from the Telecare service review.

Below are some charging comparisons with other Northwest London LA's

Local Authority	Type of Service	Weekly/Monthly Charge	
Brent	Standard baseline, pendant, maintenance and monitoring	£5.67 per week	Provided by Harrow so premium offer not available
Ealing	Ealing Careline closed on 31 March 2024. Ealing Council is no longer offering an in-house telecare monitoring service.		
Harrow	Standard baseline, pendant, maintenance and monitoring	£5.67 per week	

	Standard baseline, pendant, maintenance and monitoring plus emergency response call outs, smoke detector and key safe	£9.51 per week	
Hounslow	Bronze service is 24/7 monitoring, alarms and sensors	£19.98 per month	
	24/7 monitoring, alarms and sensors GPS, medication prompts when required, keysafe and responder service	£41.75 per month	

5. Corporate implications

Financial (mandatory)	**Y**	Equalities impact assessment	
Legal (mandatory)	**Y**	Workforce	
Alternative options (mandatory)	**Y**	Public Health	
Risk management (mandatory)	**Y**	External partners	
Asset		Communications	
Procurement		Committee comments	
Social Value (from contract)		Digital	
Planning		Other	
Climate Change		Other	

a) Financial

Corporate Finance have reviewed this report and concur with the Financial Implications set out above, noting the recommendations to approve to consult on the proposed structured charging model, revised access pathway to an external provider, and the development of a transition strategy to support existing users without eligible Care Act needs to move away from Council-funded provision to a fully outsourced telecare delivery model. To note that a further report will be presented following the consultation, setting out the outcomes, equality impact assessment and the final recommendations for decision, including the preferred delivery model and implementation approach.

Furthermore, it is noted there are no direct financial implications to the General Fund, in relation to the recommendations within this report. The proposed consultation on introducing a structured charging model, including existing users is intended to support a fairer and more sustainable approach aligned to Adult Social Care charging principles, while maintaining protection for those with eligible needs and to ensure that residents, stakeholders and partners can inform the future model.

To further note, the current Telecare Service has a gross annual expenditure budget of £856k, funded through a combination of General Fund, Housing Revenue Account and Better Care Fund. The proposed charging model for consultation under Options one and two, is forecast to generate

and estimated annual income of £594k, £742k and £891k based on income recovery rates of 40%, 50% and 60% of service users respectively. At the upper assumption of 60%, income generation would fully offset the current cost of the service provision on the General Fund and contribute to the savings target already contained within the approved 2026/27 budget for the telecare review. Under the 40% and 50% recovery scenarios, whilst the additional income would offset the current cost of the service provision on the General fund the level of savings would be lower, and further mitigation measures would need to be identified to ensure the saving target is achieved.

b) Legal

Legal Services confirm that the proposed public consultation on the changes to the telecare service is consistent with the consultation expectations set out in the Care and Support Statutory Guidance, including engagement with affected service users, carers, families, and relevant stakeholders before any final decision is made. Subject to the consultation being undertaken fairly, with sufficient information provided and conscientious consideration given to the responses received, there are no legal impediments to the recommendations set out in this report.

c) Alternative options

Option	Summary	Recommendation
Option 1: Do Nothing - Maintain Current In-House Model	Continue delivering the existing telecare service with most users receiving the service free of charge.	**Not recommended** as it would perpetuate inconsistent charging arrangements, limit opportunities for service modernisation and reduce the Council's ability to respond to future demand.
Option 2: Charging Only	Introduce charges for existing users while retaining the current in-house service model.	**Not recommended** as it only partially addresses sustainability challenges and retains operational risks within the Council.
Option 3: Partial Outsourcing (Hybrid Model)	Retain Council provision for statutory users and outsource non-statutory users to an external provider.	**Not recommended** due to increased complexity, potential resident confusion, and a more complex operating model, potentially resulting in inconsistent user experience and fragmented service delivery.,

d) Risk management

Risk	Mitigation
Residents disengage due to cost	Financial assessment, clear communicatior phased introduction

Impact on vulnerable residents	Exemptions and protections for those with eligibl care needs
Reputational risk	Strong communication and engagement strategy
Administrative burden	Clear processes aligned with existing chargin systems

e) Other implications

NIL

6. Consultation & engagement

The benefit or impact upon Hillingdon residents, service users and communities

Consultation & Engagement carried out (or required)

The proposed consultation will seek views from:

- Telecare users and their families
- Carers and advocacy groups
- Providers and system partners

The proposed consultation will provide:

- Information on the rationale for the proposed changes, the consultation period, who is invited to participate, how responses will be considered, and the next steps in the decision-making process.
- Clear explanatory information setting out the proposal to introduce charges for telecare services and seeking views on the proposed charging approach.
- The consultation will also include questions to capture demographic information to help assess whether responses reflect a broad and representative cross-section of residents and groups with protected characteristics.
- Opportunities to respond online, with paper copies available on request to support accessibility. A direct mailing will be issued to all current telecare users, their representatives where appropriate, and relevant stakeholders. The consultation will also be promoted through the Council's website and social media channels.
- A commitment that consultation feedback will be analysed and considered alongside financial, operational and equality considerations.

The consultation will inform:

- The final service model
- The charging approach
- The implementation and transition strategy

A further report will be presented following the consultation, setting out:

- The consultation outcomes

- Equality Impact Assessment
- Final recommendations for decision, including the preferred delivery model and implementation approach

7. Timetable for implementation

Activity	Timescale
Develop consultation proposal and supporting materials, including consultation questions, Equality Impact Assessment, communications and engagement plan	August 2026
Consultation document prepared and quality assured with support from the Communications Team	By end of August 2026
Consultation packs issued to existing telecare service users	By end of first week of September 2026
Wider public consultation launches	Week commencing 7 September 2026
Engagement activities with residents, service users, carers, providers and stakeholders	Throughout consultation period
Consultation period (6 weeks)	7 September to 9 October 2026
Consultation closes	9 October 2026
Analysis of consultation responses and preparation of consultation findings report	October 2026
Cabinet report setting out consultation findings and recommendations	November 2026 Cabinet
Communication of Cabinet decision and implementation planning	November to December 2026
Implementation of agreed charging arrangements	January 2027

List of appendices attached

None at this stage

List of Background Papers

Copies of any other documents supplied to in connection with the item. If no background papers, mark this as NIL