

# Liverpool 5G – a Smart solution



Not just technology, application in real services, impact on peoples lives.

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Liverpool  
City Council



# Network Ownership – Councils perspective



- Need to lessen the digital divide – not widen health inequalities
- People don't believe that they should pay for connectivity to support social care and health services that they are entitled to
- Change from analogue to digital telephone line – huge impact on telecare and preventative services
- Need to explore other network opportunities – IoT, 5G



# Demand

- Liverpool City Council Adult Social Care spending has been cut by £92m since 2010 while demand has risen 15%.<sup>15</sup>
- Forecast increasing demands on health and care systems from an ageing population living with co-morbidities.
- Combined LCC & CCG spend on health and social care in 2017/18 was over £232m. This pilot will demonstrate the potential savings 5G enabled technology could bring across services.
- We need new, innovative ways of working.
- Technology has a key role to play but not in isolation, as part of wider system changes, incorporating service users, social care providers, Local Authorities, NHS and technology companies
- At the end of this pilot we will have trialled our “Adoption Readiness Levels” (ARL) which will complement the TRL.







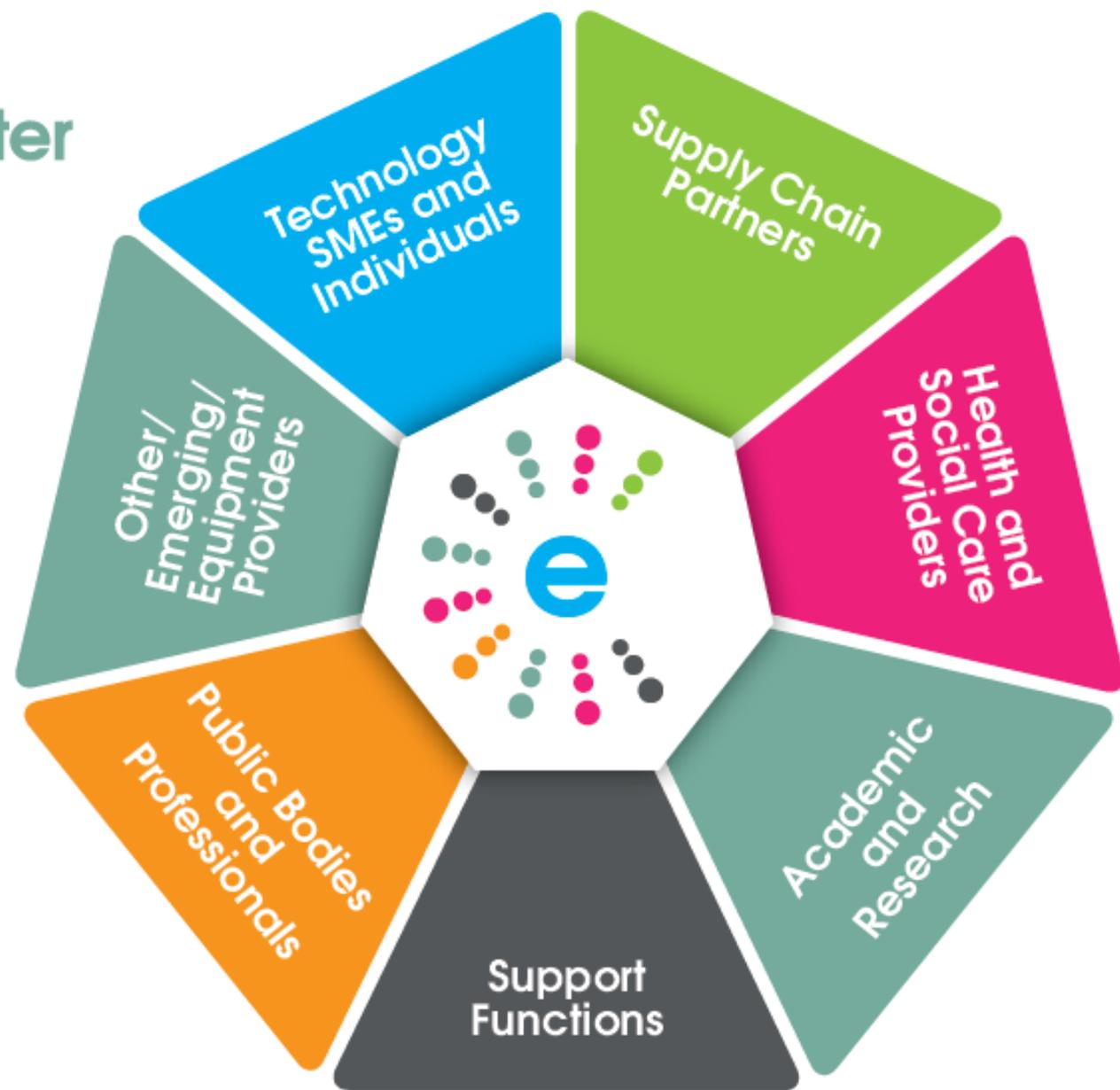
# Network Ownership

- We have embraced the ITU-R definition of the three main qualities for 5G.
  - They are Enhanced Mobile Broadband (eMBB),
  - Ultra Reliable Low Latency Communications (URLLC),
  - Massive Machine Type Communications (mMTC).
- 
- Selecting Use Cases to address needs



Bringing together  
Technology,  
Health and Social  
Care sectors.

A stimulus to the growth  
and success of the region  
by joining up developers,  
commissioners, suppliers  
and service  
providers in a structured  
and impartial way.



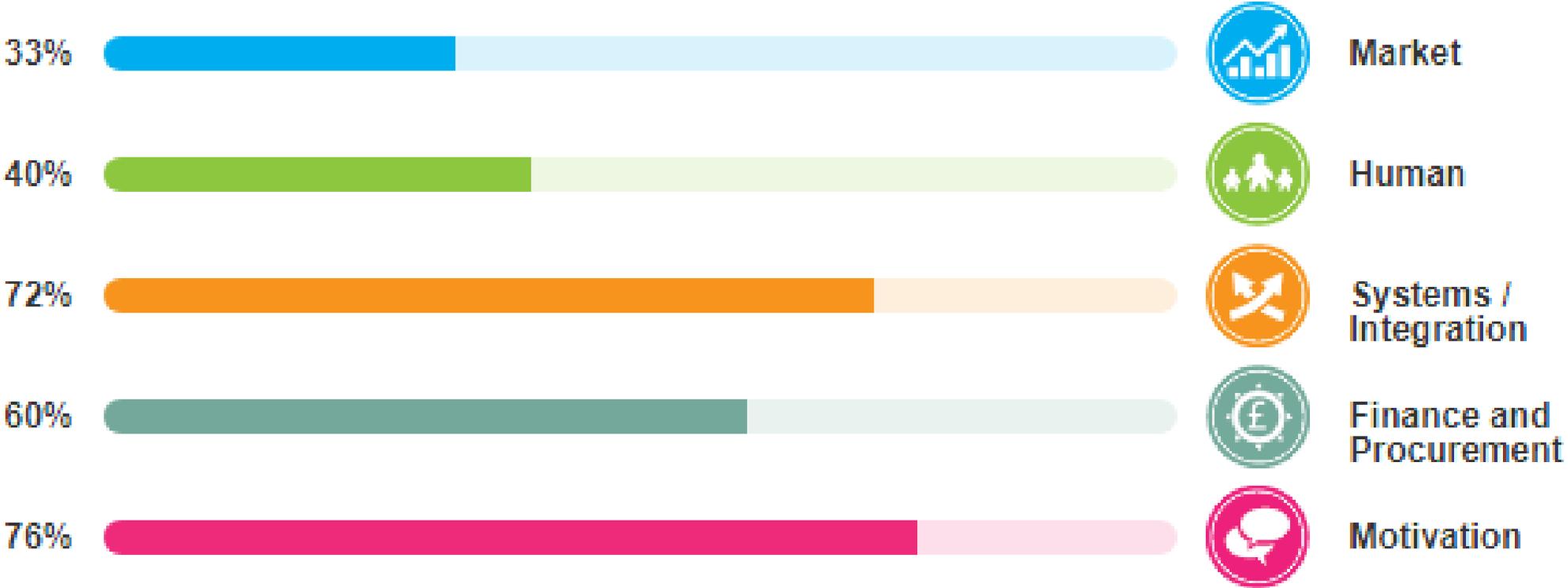
## eHealth Cluster Adoption Readiness Level Tool

This free self-assessment tool is designed to help organisations understand the barriers they will encounter in the adoption of new products. The Adoption Readiness Level (ARL) complements the Technology Readiness Level (TRL).

Dimension	
1. Market	Is the market ready for your innovation?
2. Human	Are the people involved open to your innovation?
3. Systems / Integration	How does your innovation interface to existing systems?
4. Finance & Procurement	Do contracting mechanisms and/or budgets for your innovation exist?
5. Motivation	Why should your innovation be successful?

**Please check it out at:** <https://www.ehealthcluster.org.uk/arl-tool/>

# Your Adoption Readiness Level is: 61%



Low = under 50%

Medium = 50% to 74%

High = 75% and over



# Use Cases to address needs

## Challenges Addressed:

- LCC funds 1,000+ meds prompts per week through home care services
- Recruitment crisis in home care sector
- Medication shortages post Brexit
- Cost of medication errors to care providers and LCC, effect on service users
- Medication wastage costs the NHS £500 million per year<sup>2</sup>
- “It is estimated that over-ordering, stockpiling and not using medication, costs the local NHS around £2.5 million per year.”<sup>3</sup>
- Estimated cost of people not taking their medicines properly and not getting the full benefits to their health is £500m/year.<sup>4</sup>

## Potential Impact:

- Reduction in number of medication visits/costs
- Increase capacity within care services
- Increase in support for care staff
- Increase in confidence/independence for service users
- Improvement in health outcomes for service users
- Identifying dysphasia (swallowing) related conditions early
- Improved Warfarin management

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Thanks for listening  
Any Questions?

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