

Consultation regarding protecting access to emergency organisations when there is a power cut at the customer's premises

Background to Response From TSA

TSA represents technology-enabled care (TEC) service and technology providers, ranging from telecare alarms to telehealth and beyond. The current number of TEC service users in the UK is estimated at 1.7 million, and they arguably constitute the most vulnerable telecommunications user group. Telecare alarms form the bulk of these TEC connections, and in the vast majority of cases they rely upon PSTN phone lines connections for the exchange of alarm data using voice-band signalling, with follow-on voice communication between users and care service providers. These systems provide 24hr back-up power at the home alarm unit, and they exploit current PSTN phone-line power back-up to ensure operation in the event of power failure. These are essential requirements of the systems in complying with harmonised standards for such alarms (see EN50134-3). The TSA Consultation Response includes references to numbered sections of the consultation document.

CPs should have at least one solution that enables access to emergency organisations for a minimum of one hour in the event of a power outage in the premises

(1.6) Typical alarm service users raise several calls per month, and the responding services typically resolve 95-97% of these calls without 999 call-outs. It is anticipated that most, perhaps all of these calls would fall directly upon 999 call centres in the event of alarm services being inaccessible. It is worth noting that the aggregated UK alarm monitoring centres receive in excess of 50 million calls per annum.

(1.6) Power failure in the home is of course only an occasional event, but we need to recognise that such events do themselves provoke alarm calls from vulnerable service users. Such users rely upon power for assistive technologies and other services around the home, and they need assurance in the event of power failure.

(1.6) It can be argued that any solution which facilitates continuity of 999 calls should also seek to deliver continuity of TEC alarm connections.

(2.12b) This consultation covers uninterrupted access to emergency organisations, and many would view alarm service providers as emergency organisations. Regardless of the classification of the alarm services, it is certainly the case that they cooperate closely with '999' services, in intercepting and resolving alarm calls.

(2.31) Technology-enabled care or alarm services need to be explicitly recognised as Over the Top services that offer uninterrupted access to emergency services.

(3.5) Where CPs need to have at least one solution for 'those at risk' it is worth considering that there are TEC products and services that offer this service already, and importantly meet the necessary regulatory requirements for monitoring vulnerable users.

(3.7) Where solutions for 999 access employ diverse communication solutions, they will likely use battery back-up facilities. The monitoring of battery performance and replacement cycles will present a new overhead to Comms Providers, whereas battery monitoring and management is already an explicit component of telecare alarm services. This should make the adoption of self-contained telecare continuity solutions (employing diverse cellular connection) an attractive alternative for 'those at risk' in the sizeable alarm user population.

(3.10) The guidelines indicate the need for a 1 hour solution. It is worth noting that standards for UK (and EU) telecare alarms stipulate 24hr battery back-up requirements, to cover extended power-outages resulting for example from storm damage.

(3.14) There will be a cost to Comms Providers in the delivery and onward management of back-up solutions for those at risk. TEC systems and service accreditations already address these issues for alarm systems, suggesting that such systems should be considered by CPs as solutions, or at least that the same practices be considered in any 999 continuity of access solution.

The solution should be suitable for customers' needs and should be offered free of charge to those who are at risk as they are dependent on their landline

(2.2) The delivery of different '999 continuity' solutions from various Communications Providers may hamper the 'promotion of competition in the interests of consumers'; The differing solutions will not interoperate between the different CPs in many cases, and the need to re-confirm 'those at risk' and reconstitute a solution will complicate the process of users switching their Comms Provider. An alternative for vulnerable alarm users would be to ensure that the alarm unit itself presents a back-up communication solution in the event of power failure. Consider the digitally-connected alarms used in Sweden, Australia and elsewhere, where dual connectivity over broadband and mobile networks is possible, employing self-contained back-up power in the alarm units. Such technology would be directly transferrable between Comms Providers.

(2.4) From a regulatory perspective we need to consider the standards applied to life-critical alarms that employ PSTN and phone-line power back-up. Here, the least intrusive solution would be to ensure that alarm service and alarm technology providers address power outages in their solutions, employing diverse and battery-backed communication (as described above). This would preserve compliance with EN50134.

(3.2c and 3.17) If cellular hub solutions are employed with 999 connectivity only, they will preserve connectivity of analogue devices and fail to encourage the necessary shift of social alarm systems to digital networks, and here we need to recognise that social alarms are the instrument of choice for a large population of vulnerable TEC users (1.7 million). It would be far more valuable to invest-in and incentivise a shift to digital alarm solutions.

(3.18) The requirement for free-of-charge delivery of a solution will of course pose an investment challenge to CPs. The costs go beyond the up-front cost of connectivity devices to include ongoing management costs of the supportive services (needs assessment, property/coverage assessment, deployment, monitoring, replacement, recycling). Here, CPs should consider that many of 'those at risk' already reside within the alarm user groups, that alarm providers already cover the supportive services, and a one-off cost for upgrade of alarm devices would offer a commercially attractive alternative.

(3.18) Alarms services would qualify as a suitable solution given that these alarms deliver a recognised service of filtering and forwarding calls to 999 services.

(3.18) A solution that employs upgraded alarm devices could be delivered through a simple 'voucher' system that supports the necessary upgrade of alarm systems to a digital and diverse communication. Such a voucher system could be managed through consultation with the TEC industry, and could offer a very simple solution for a large subset of 'those at risk'. TSA would be happy to facilitate such discussions.

CPs should i) take steps to identify at risk customers and ii) engage in effective communications to ensure all customers understand the risk and eligibility criteria and can request the protection solution

(1.8) The identification of 'those at risk' will likely be problematic for Communications Providers: CPs may not be skilled in such assessment. Here, we should recognise that many of the 'at risk' users are those already assessed for use of social alarms and other technology-enabled care services. This presents an easily identifiable and eligible list of 'those at risk'.

(1.8.2) TSA agrees that the solution provided to 'those at risk' needs to be suited to those customers' needs. It is evident that a telecare alarm is already the assessed and selected solution for a very large number of vulnerable users, and we should seek to employ this communication channel. Here, we should recognise that the alarm services already act as a qualified gateway to 999 services, and that 999 services value the filtering/validation role that alarm services play.

(2.17) Whilst the general population has seen a shift to mobile usage and away from PSTN calls, we still see a lag in this trend for older and vulnerable users, where PSTN-connected calling is seen as an essential service. The penetration of broadband into these user groups also lags the general population. It is therefore very important that we support the migration of TEC to digital solutions.

(3.29) Many 'at risk' users (1.7 million) are already identified through their engagement with supportive alarm services. Subject to GDPR and consent issues, TSA is happy to facilitate contact with alarm services to determine best practice for identification and onward communication with such vulnerable users.

CPs should have a process to ensure that customers who move to a new house or whose circumstances change in some other way are aware of the risk and protection solution available.

(1.2) TSA has engaged closely with Ofcom and Communications Providers on the retirement of PSTN, and TSA is actively promoting the need for technology-enabled care providers (of both services and technology) to move away from analogue communication solutions to those employing IP. It is important that we align our efforts and incentives to ensure that vulnerable users are migrated ahead of the planned 2025 switch-off. TSA believes that a coordinated means of communicating with 'those at risk' is needed, and will include coverage of any changes of circumstance.