Pricing Document: Skyral Decision Support and Problem Solving as a Service for Healthcare

Service Name: Skyral Decision Support and Problem Solving as a Service for Healthcare
Supplier Name: Skyral Defence Ltd
Framework and Lot: G-Cloud, Lot 3

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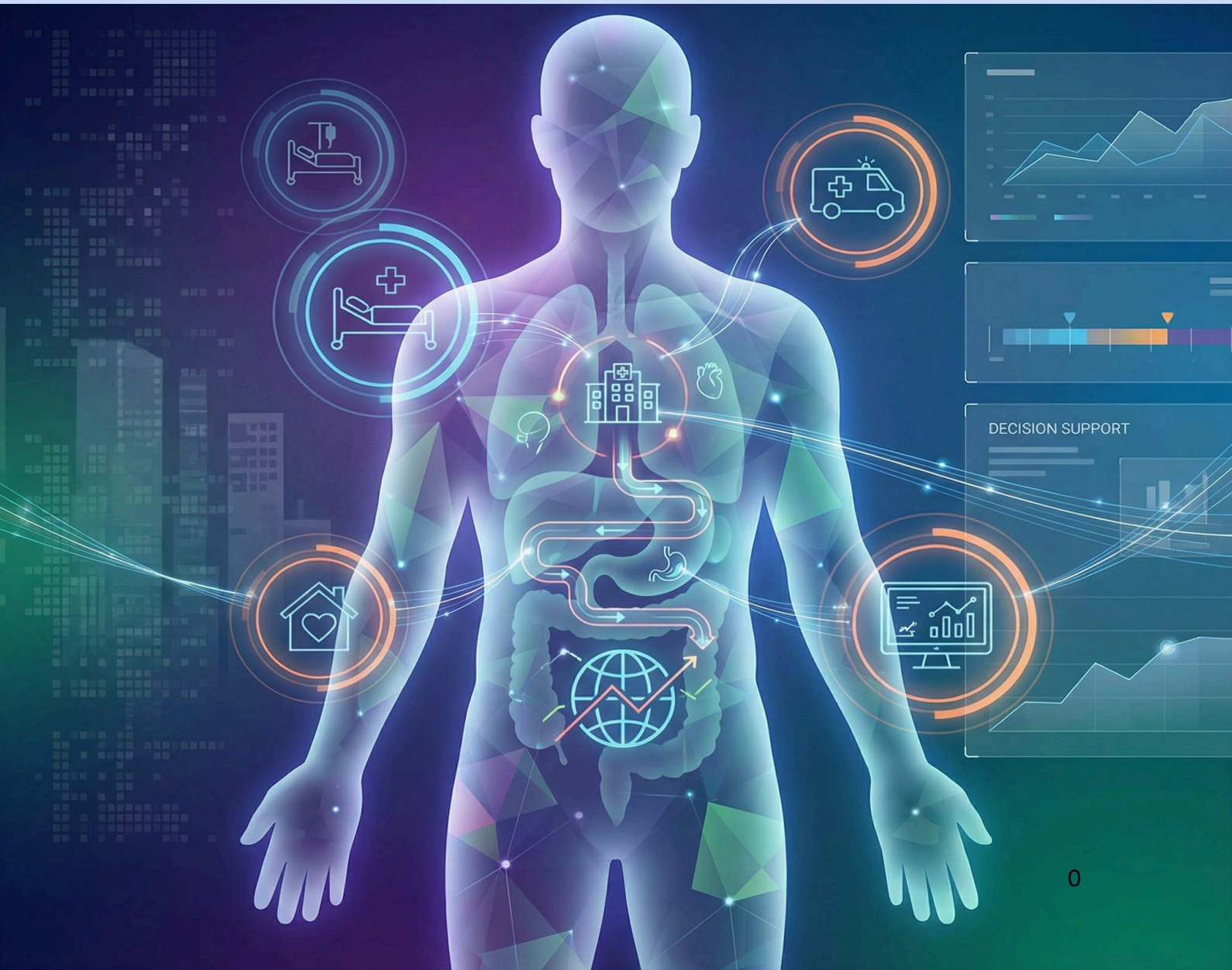

1. About Skyral

Skyral is a UK-headquartered modelling, simulation and decision-support company that helps governments, health ministries, providers and public-health agencies design and operate better health systems. Using large-scale digital twins and agent-based modelling, Skyral represents how patients, staff, assets, logistics and infrastructure behave and interact under different conditions.

Health customers use Skyral to:

- Test and optimise health strategies, programmes and service changes before implementation.
- Anticipate demand, bottlenecks and surge pressures across hospitals, clinics, community services and supply chains.
- Connect data, models and visualisations to surface the few levers—capacity, access, workforce, logistics, pathways—that most affect outcomes, equity and cost.

Skyral CORE and its components provide the underlying capability to build, run and govern complex simulation-driven digital twins of health systems as a long-lived decision-support asset.

2. Service Overview

Service name

Skyral Decision Support and Problem Solving as a Service

Purpose

This is an intensive, typically one-month engagement that helps health organisations clarify complex policy or operational problems, identify and prioritise the key levers, and define how modelling, simulation and digital twins can best support decisions.

The service is designed to:

- Turn diffuse challenges (e.g. waiting lists, workforce pressures, programme design, regional inequity) into a structured, decision-ready view.
- Produce a prioritised set of interventions, levers and use cases to focus limited resources on.
- Define a clear follow-on path into Skyral Modelling and Simulation Development as a Service or other delivery work to build a reusable health-system digital twin.

The service is delivered at a fixed scope and cost, using a Skyral methodology evolved from the Simulation Scaffolding Framework (SSF), refreshed as a modern decision-support and experimentation approach for complex systems such as health.

Typical duration and team

A standard engagement is one month of effort, delivered by:

- A health / public-sector Subject Matter Expert (SME) with experience in policy, system planning or operations.
- An Applied Scientist specialising in modelling, simulation and analytics.
- A Product Owner responsible for mapping outcomes to Skyral services, products and the customer's data and analytics estate.

Longer or multi-phase engagements can be scoped to cover multiple programmes, regions or agencies.

3. Method and Activities

The service follows a structured but flexible method that blends stakeholder insight, causal and probabilistic modelling, and early digital-twin thinking.

Core steps

1. **Clarify the health problem and outcomes**
    - Establish a shared understanding of the core problem (e.g. elective backlog, urgent and emergency pressure, workforce deployment, programme rollout, inequalities).
    - Capture desired outcomes and constraints: access, quality, equity, cost, workforce sustainability, public expectations, regulatory or political commitments.
2. **Map drivers, levers and programmes**
    - Disaggregate the problem using logic trees and causal structures across populations, services, workforce, infrastructure and social determinants.
    - Identify key levers such as clinic footprint, service models, workforce mix and rostering, referral and triage rules, outreach and prevention, logistics and supply.
    - Map how these levers interact across care settings, organisations, geographies and programmes.
3. **Define and refine KPIs and metrics**
    - Identify KPIs and metrics linked directly to key levers and programmes (e.g. waiting times, throughput, coverage, utilisation, avoidable admissions, travel time, cost per outcome).



    - Clarify how trade-offs will be assessed (e.g. access vs cost, speed vs quality, coverage vs workforce constraints, short-term vs long-term outcomes).
4. **Prioritise initiatives and levers**
    - Apply heuristics, cleaving maps and quantitative reasoning to rank candidate initiatives and levers by impact, feasibility, timescale and data availability.
    - Highlight the top few levers and use cases that are most suitable for simulation and digital-twin work, avoiding “boil the ocean” scopes.
5. **Develop a practical work plan**
    - Convert the prioritised levers and initiatives into a concrete work plan that can be taken into Skyral Modelling and Simulation Development as a Service or equivalent build phases.
    - Define data requirements (e.g. activity data, demographics, capacity, workforce, infrastructure, transport), stakeholders, integration points and decision checkpoints.
6. **Introduce modelling, simulation and optimisation options**
    - Show how modelling, simulation and digital twins can be applied to the top-ranked health problems: patient-flow modelling, demand forecasting, workforce optimisation, logistics and supply-chain modelling, access and equity analysis.
    - Discuss candidate approaches (agent-based models, causal graphs, scenario experimentation, optimisation) in terms that are accessible to clinicians, managers and policymakers.
7. **Build a high-level health decision model**
    - Construct a high-level probabilistic or causal representation of the problem—a “strategic scaffold” that can:
        - Capture key levers, outcomes and uncertainties across populations and services.
        - Support simple scenario exploration (e.g. “what if we move clinics?” “what if we change staffing?”) in the short term.
        - Serve as a blueprint for a more detailed health-system digital twin in follow-on work.

Service Outputs

At the end of the engagement, the customer receives:

- **Health decision narrative**
    - A clear articulation of the problem, context, constraints and desired outcomes across population health, service performance and sustainability.
    - A visual representation of key drivers, levers and dependencies (e.g. population, access, pathways, workforce, logistics, broader determinants).

- **Prioritised initiatives and levers**
    - A ranked list of programmes, interventions or redesign options with rationale and key assumptions.
    - Identification of the primary lever or small set of levers that offer the best value for simulation and digital-twin work.
- **KPIs and measurement framework**
    - Defined KPIs and metrics mapped directly to key levers and outcomes (e.g. access, quality, equity, cost, resilience).
    - Commentary on how these indicators will be tracked and used in future simulation, reporting and performance-management cycles.
- **High-level decision model**
    - A high-level probabilistic or causal model of the health-system problem, suitable as a scaffold for further modelling and as an aid for engaging boards, ministers or partners.
- **Follow-on delivery plan**
    - A concise plan for progressing into Skyral Modelling and Simulation Development as a Service or other delivery, including recommended focus areas, dependencies and phasing.
    - Options for building a full health-system digital twin, integrating with existing data sources and running structured scenario experiments.

Outputs are provided in accessible formats (e.g. slide pack, report and, where appropriate, simple interactive views) that can be used directly in governance and decision forums.

4. Pricing

Skyral Modelling and Simulation Development as a Service is provided as a fixed price service, deployed in 3 or 6 months of Sprints.

Price: £**60,000 (Sixty thousand pounds)**

Standard Rate Card

Standardised programme specifications can be tailored to an engagement with changes in pricing on time and materials basis. The SFIA rate card excludes rates for onsite development or DV cleared personnel. We are able to deploy the delivery team to any working location as required depending on the nature of work to be undertaken, rates for this can be detailed if requested based on the scale and duration of the services in question.

SFIA Level	Strategy & Architecture	Change & Transformation	Development & Implementation	Delivery & Operation	People & Skills	Relationships & Engagement
2. Assist	£949.09	£949.09	£949.09	£949.09	£949.09	£949.09
3. Apply	£1,120.00	£1,120.00	£1,120.00	£1,120.00	£1,120.00	£1,120.00

4. Enable	£1,565.41	£1,500.14	£1,434.87	£1,500.14	£1,304.33	£1,304.33
5. Ensure, Advise	£1,683.11	£1,612.49	£1,534.87	£1,683.11	£1,402.77	£1,402.77
6. Initiate, Influence	£1,926.00	£1,833.98	£1,833.98	£1,833.98	£1,833.98	£1,833.98
7. Set Strategy, Inspire	£2,378.61	£2,266.26	£2,266.26	£2,266.26	£2,266.26	£2,266.26
Consultant's working day: 7.5 hours exclusive of travel and lunch.						
Working week: Monday to Friday excluding national holidays.						
Office hours: 09:00 – 17:00 Monday to Friday.						
Travel/mileage subsistence: Included in day rate within M25. Payable at department's standard travel and subsistence rates outside M25.						
Professional indemnity insurance: Included in day rate.						

5. Pricing model and units (linking to framework pricing rules)

The pricing model for this service is a fixed-scope, time-boxed engagement, with options to extend into further phases through follow-on engagements (such as Skyral Synthetic Development Services).

Core structure:

- Core one-month engagement priced as a fixed-price package based on defined deliverables (decision narrative, prioritised initiatives, KPI framework, high-level model, roadmap) and agreed stakeholder footprint.
- Extensions or additional phases (e.g. extra domain deep-dives, expanded stakeholder scope, additional scenario families) priced either as additional fixed-price work packages or time-and-materials under the relevant framework rate card.
- Any subsequent Skyral Modelling and Simulation Development as a Service or digital-twin deployment would be priced separately, reflecting model build effort, platform usage and, where relevant, managed-service components.
- Exact pricing, units (e.g. person-days, work packages) and linkage to framework pricing rules are defined in the commercial schedule.

6. Key assumptions and exclusions

Key assumptions:

- The customer provides timely access to stakeholders and data sufficient to meet the agreed timeline and deliverables.
- The primary objective is decision-support, strategy and prioritisation across health policies, programmes and services, not the full production implementation or day-to-day operation of health services or IT systems.
- Initial models and scenarios are intended to compare options, highlight trade-offs and stress-test strategies rather than to deliver exact predictions at every organisational or facility level.

Key exclusions (unless explicitly brought into scope):

- Full-scale, production-grade health-system digital-twin implementation and ongoing integration with live operational systems (e.g. EHRs, PAS, command centres), which are covered by subsequent Skyral Modelling and Simulation Development as a Service and platform services.
- Detailed vendor-specific configuration of clinical or operational systems, low-level software engineering tasks or direct changes to live health-system operations.
- 24×7 operational support, incident management and availability SLAs typical of managed operational platforms.
- Formal regulatory submissions, clinical safety cases or statutory health-system plans; Skyral's outputs can inform these but do not replace formal assurance, clinical governance or regulatory processes.

7. Related services and optional add-ons

Related Skyral services:

- Skyral Modelling and Simulation Development as a Service (Health) – builds detailed health-system digital twins and agent-based models aligned to the prioritised levers and scenarios from this engagement, enabling ongoing "what-if" analysis, optimisation and operational decision-support.
- Skyral Modelling and Simulation Development as a Service (Mobility & Infrastructure) – builds detailed digital twins and agent-based models of cities, corridors, ports, airports, logistics networks and interdependent infrastructures, aligned to the prioritised levers and scenarios from this engagement.
- Skyral Modelling and Simulation Development as a Service (Network Edition): builds detailed network digital twins and agent-based models aligned to the prioritised levers and scenarios identified in this engagement.
- Mission Planning & Decision Support services for defence and national security, using large-scale agent-based modelling to explore courses of action, logistics and resilience across multi-domain operations.
- Health Policy & Programme Strategy simulation services, applying similar techniques to patient flows, resource allocation and intervention strategies for health systems.

Optional add-ons to this specific service:

- Additional deep-dive modules on specific health domains (e.g. urgent and emergency care, elective pathways, maternal and child health, public-health programmes, workforce or supply chains), delivered either as extended discovery within this service or as Skyral Advisory/Synthetics Development phases depending on need.

- Rapid proof-of-concept health digital-twin instances (e.g. for a specific region, programme or pathway) using existing data and synthetic agents to demonstrate interactive scenario analysis and optimisation beyond the initial decision narrative, delivered via Skyral CORE and Modelling and Simulation Development as a Service.
- Extended roadmap and business-case support, including structured inputs to investment cases, programme business cases and ministerial decision packs for new health programmes or reforms.

8. Contact, account management and reporting

- E. enquiries@skyral.io
- W. www.skyral.io