

## **ASSISTIVE TECHNOLOGY SERVICE**

### ***Executive Summary***

*This report, provides members with a progress report and information on the development of the Assistive Technology Service funded through the Preventive Technology Grant 2006/08.*

### **1 Background**

- 1.1 In 2001, The Department of Health produced a health and local authority circular (HSC 2001/008: LAC (2001)13) on integrating community equipment services. Reference was made to the emerging electronic assistive technology originally based on extensions to community alarm services (eg smoke and flood detectors, falls monitors etc). Much of the initial innovative work on telecare was carried out in housing environments.
- 1.2 Since publication of the 2001 circular there has been growing interest in the provision of remote technology to support housing, community safety and health options as well as supporting domiciliary care packages. With the development of intermediate care, long term conditions management and alternatives to acute hospital admission the technology has moved further.
- 1.3 In Summer 2004, a decision was made to include Government funding for preventative technologies (Preventive Technologies Grant) during the period 2006-2008. £30m to be available in 2006-2007 and £50m in 2007-2008. Wirral received £221,000 in 2006/07 and £368,000 in 2007/08. In January 2006, the Government published the White Paper 'Our health, Our care, Our say' which included specific references to telecare as part of a preventive approach.
- 1.4 'Building Telecare in England' (DH, 2005) stated that the Preventive Technology Grant should be used to increase the numbers of people who are supported to remain independent with telecare. It was expected that most of the beneficiaries would be older people. However, before advantage can be taken of telecare, local authorities needed to ensure that infrastructures are in place to deliver. These include:
  - Staff training and development
  - The supply and management of equipment

- The supply of relevant 24 hour/seven day contact services
  - The supply of 24 hour/seven day care response services.
- 1.5 The grant was intended to pump prime these processes and changes in the delivery of mainstream services using the existing infrastructure such as community alarms service as the platform for telecare services. For this reason Wirral had to look beyond the Preventive Technology Grant to the overall development of Assistive Technology Service including telecare and telemedicine. Wirral's 'Preventive Technology Plan' (agreed at Cabinet 27.4.06) went beyond simply the purchasing of a range of equipment for the next two years to setting a framework for service development.

## **2 Progress to date**

- 2.1 During 2006/07 a range of telecare and telemedicine equipment was identified to be commissioned as part of an individuals health and/or social care package. These included for example, bed and chair occupancy sensors, falls and flood detectors, pressure mats, and telemedicine monitoring units which monitor vital signs – blood pressure, pulse, oxygen levels, weight and lung capacity.
- 2.2 At the same time 150 assessors across Wirral Hospital Trust, Wirral Primary Care Trust and the Department of Adult Social Services, (Social Workers, POPIN staff, Hospital Occupational Therapists, Community Occupational Therapists and Community Matrons) were given full training on the commissioning of telecare and telemedicine.
- 2.3 Wirral Partnership Homes were commissioned to provide the monitoring, installation and 24 hours response service and Wirral Handypersons service were commissioned to fit the equipment.
- 2.4 A 'SMART' house was developed in a one bedroom flat in 'Flambards' on the Woodchurch estate. This facility is fully equipped with the range of technology and provides assessors, people who use services, the public and other professionals an opportunity to view and try out the equipment in a home environment.
- 2.5 At this point 56 people over the age of 65 have now benefited from equipment. In addition a further 8 people on Community Matron's case load have had telemedicine monitors installed in their homes. This figure will increase by a further 12 by September 2007. Telemedicine is particularly relevant in supporting people with long term conditions and the avoidance of hospital admissions.
- 2.6 Training is being expanded to Wirral Partnership Home 'Support Link Service' and other Registered Social Landlords who provide support to older people through warden type services and the Merseyside Fire and Rescue Service advocate for the over 65's.

- 2.7 Telecare and telemedicine also play a part in reablement services such as intermediate care, both bed and community based. Occupational Therapists have been trained within the Wirral Enablement and Discharge Service and discussions regarding training home care staff within the developing Home Assessment Reablement Team (HARTS) service is to commence shortly.

### **3 Project Evaluation**

- 3.1 All commissioners of telecare have completed project evaluation forms to establish whether the original outcomes set out in the Preventive Technology Plan have been achieved. These outcomes were:

- Enable people to stay at home
- Prevent falls and accidents
- Support timely hospital discharge
- Prevent hospital admission
- Support carers

- 3.2 Each assessor was asked to indicate the likely outcome for the service user telecare had not been commissioned. The result so far show:

Admission to residential care avoided	-	5
Admission to nursing care avoided	-	5
Increase in existing care package avoided	-	3
Implementation of new home care package avoided	-	4
Increase in carer stress avoided	-	21

- 3.3 A full cost benefit analysis will be presented as part of a future investment plan which will be presented to Cabinet. To date the highest cost telecare package has been £500 per annum. However the costs of residential care and nursing care placements range from £346.92 - £490.42 per week (excluding income).

- 3.4 Members should also note that in 21 cases telecare has reduced the concerns, and stress for carers.

### **4 Financial and Staffing Implications**

- 4.1 Government clearly wishes to see the preventive technology agenda developed beyond 2008. If Wirral intends to develop the preventive technology service beyond this date it will need to be sustained through mainstream funding, be responsive to demographic changes, individual need, technological developments and cost effectiveness.

- 4.2 Section 3 of this report begins to set out the potential savings to the Department of Adult Social Services. As the evaluation process progresses further information will be provided to support future investment plans.

## **5 Equal Opportunities Implications**

The Preventive Technology plan and project has focussed primarily on vulnerable older people. The future development of this service as it becomes mainstream will start to focus on people with learning disabilities, mental health needs and other vulnerable groups. The Preventive Technology Plan comprehensively outlines the benefits of telecare/telemedicine in supporting vulnerable people remain in their own homes by providing increased confidence, supporting early discharge from hospital, supporting falls prevention and enabling greater choice and independence.

## **6 Human Rights Implications**

The construction, delivery and removal of telecare and telemedicine packages is subject to the same ethical processes as any other care package. Some telecare equipment gathers information about the lifestyle and activities of the individual in their home. These packages will have specific ethical considerations around informed consent.

## **7 Local Agenda 21 Implications**

Preventive technology enables individuals to have more choice and control over their lives and managing their health conditions.

## **8 Community Safety Implications**

Some telecare equipment provides additional safety and security options for people who wish to remain at home. The Preventive Technology Project Group will continue to review and develop these options with community safety colleagues.

## **9 Planning Implications**

There are no planning implications as a result of implementing the Preventive Technology Plan.

## **10 Local Member Support Implications**

The Preventive Technology Service will be a Wirral-wide service

## **11 Background Papers**

'Preventive Technology Plan' Social Care and Health Select Committee – 15.3.06

'Preventive Technology Plan' Cabinet – 27.04.06

## **12 Recommendations**

That members note this progress report for the Assistive Technology Service.

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