REPORT TO:	Healthy Halton Policy & Performance Board
DATE:	9 March 2010
REPORTING OFFICER:	Strategic Director, Health & Community
SUBJECT:	Telecare Service Evaluation
WARD(S)	Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To present the Board with the results of the Telecare Service Evaluation of January 2010.

2.0 RECOMMENDATION:

That the Healthy Halton Policy & Performance Board:

i)   Note the contents of the report.

3.0 SUPPORTING INFORMATION

3.1 Telecare consists of electronic sensors installed in a person's home. Typically they include: fall detectors; smoke alarms, motion detectors, temperature sensors, a personal alarm pendant and a 24 hour 7 days a week emergency response service. When coupled with an appropriate support plan Telecare helps individuals to live more independently and safely at home. It can reduce risk by providing reassurance that help will be summoned quickly should a problem occur.

3.2 The report summarises the Telecare service in Halton over the past three years and examines it within a local and national context. The clear picture emerging is that Telecare has been operating successfully in Halton for this period and there is good evidence that it is broadly welcome and is making a difference to individuals, their carers and to the delivery of health and social care as a whole. Specifically, It is helping to improve people's independence and confidence by allowing them to remain at home longer. There is also evidence that it can relieve stress on informal carers and can improve clinical and care outcomes.

3.3 The service evaluation carefully defines Telecare and stresses its importance in Halton in terms of Partnership Agreements within the context of key national drivers and regional agendas. Early engagement with the voluntary sector as service user

representatives is considered important. In addition, the Widnes Practice Based Commissioning Consortium (PBC), Halton and St Helens PCT and HBC are currently commissioning a community based integrated care service known as the 'Virtual Ward.' An important component part of this will be the planned use of Telecare. This will support self-management at home among the most vulnerable individuals and those with long-term conditions in order to reduce unnecessary hospital admissions.

3.4   Telecare is likely to have a significant future role monitoring long-term conditions such as: Hypertension, Diabetes, Coronary Heart Disease and Dementia. The outcome of such monitoring would be a reduction in hospital length of stay among those with complex histories.

3.5   Halton is currently developing an Early Intervention/ Prevention strategy that will focus on individual dignity, independence and equality, as a means of reducing social isolation while enhancing reablement. Assistive technology in the form of Telecare will be central to this.

4.0   **POLICY IMPLICATIONS**

4.1   Telecare will be a significant part of HBC's Early Intervention/ Prevention strategy (currently in development), which stresses the importance of individual dignity, independence and equality.

4.2   Telecare can have a crucial role in 'Vital Signs Monitoring' to assist individuals to manage their long-term conditions such as diabetes at home. This will hopefully be offered via the PCT with HBC in a supportive role and would be a useful precursor to developments such as the Virtual Ward. In this respect, Widnes-based GP surgeries are interested in piloting Telecare/ Telehealth within the Virtual Ward Concept. This will result in an increase in referrals for current Telecare sensors as well as a possible installation and technical support service for Telehealth applications.

4.3   Halton, through its Community Extra Care (CEC) programme is committed to providing vulnerable people with fast dedicated help in the comfort of their own home among familiar faces and surroundings, where they can recover more quickly after a period in hospital. This is part of the general nationwide trend of offering people greater independence and choice. Telecare can also be a component part of Extra Care if the CEC rapid assessment team consider it necessary.

5.0   **FINANCIAL/RESOURCE IMPLICATIONS**

5.1   When Telecare is coupled with an appropriate support plan, the most significant outcome is that the individual is able to remain

safely and independently at home for longer. Thus safety and security monitoring is an important function of Telecare. As evidence of this, during the period 2007-2008, 17 service users eventually had to move into residential placements. However prior to their residential move and thanks to Telecare, 6 of these remained at home for over a year and the remainder between one and twelve months.

6.0 OTHER IMPLICATIONS

6.1 To meet future need in Halton, Telecare will have to be developed on a larger scale and involve many more sensors and devices. It needs to be fully integrated into the care system and be predictive in order to allow observation of longer-term trends and earlier intervention. Future qualitative analyses (reviews and surveys etc) would need to be able to demonstrate that:

- People are happy with its quality and accessibility
- Levels of self-management have increased
- Positive changes in behaviour have occurred
- Fewer symptoms are being reported

6.2 Halton's third area of focus 'vital signs monitoring' needs to be expanded and individuals assisted to manage long-term conditions such as diabetes at home. Monitoring would be done by the PCT with HBC in a supportive role providing the necessary Telecare/ Telehealth units. This would be a useful precursor to current developments such as the 'Virtual Ward.'

6.3 Halton is currently (January 2010) in the process of developing its Early Intervention/ Prevention Strategy. This will stress the importance of individual dignity, independence and equality while at the same time reduce social isolation. It is the intention that Telecare will be a means of achieving this kind of personal control for long-term conditions, especially when combined with Halton's Direct Payments facility and individual budgets. Page 20 offers a glimpse of what the immediate and more distant future of local Telecare may offer. Telecare in Halton has three principal areas of focus:

1. Information, advice and support – being able to demonstrate that as a form of support it has had an impact on clinical and care outcomes for vulnerable people with specific conditions.
2. Safety and security monitoring – being able to demonstrate that Telecare has enabled vulnerable people to feel safer and more secure at home.
3. Vital signs monitoring – putting a case for funding Telehealth as a cost-effective means of monitoring and assisting individuals to manage their diabetes (for example) at home.

6.4   The third of these has an important role in future plans to expand the service. The first two are evidenced by the fact that there has been an increasing trend year on year in the number of individuals connecting to a Level 2 or Level 3 lifeline package. There are currently almost 25% more people receiving Telecare in 09/10 than in the previous year 08/09./ There has also been a significant decrease in the number of call-outs. Such data would suggest that not only is the service becoming better known, but confidence in its ability to manage risk is growing among those who wish to maintain their independence at home.

6.5   There has also been a 145% increase in environmental referrals in the period 2008 – present, suggesting that people are becoming more aware of what the technology can achieve in terms of monitoring. Consequently, they have been more inclined to make use of environmental monitors such as heat, cold, water…detectors, as an additional 'safety blanket.'   Clearly Telecare has been a success in Halton.

7.0   **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

7.1   **Children & Young People in Halton**

       None identified.

7.2   **Employment, Learning & Skills in Halton**

       In order to raise awareness among staff of the current and future importance of Telecare all relevant staff will need to receive the new Telecare training as part of their normal continuing Professional Development.

7.3   **A Healthy Halton**

       Telecare will be a significant part of HBC's Early Intervention/ Prevention strategy (currently in development), which stresses the importance of individual dignity, independence and equality. Telecare can have a crucial role in 'Vital Signs Monitoring' to assist individuals to manage their long-term conditions such as diabetes at home. This will hopefully be offered via the PCT with HBC in a supportive role and would be a useful precursor to developments such as the Virtual Ward. In this respect, Widnes-based GP surgeries are interested in piloting Telecare/ Telehealth within the Virtual Ward Concept. This will result in an increase in referrals for current Telecare sensors as well as a possible installation and technical support service for Telehealth applications.

7.4   **A Safer Halton**

       None identified.

7.5	**Halton's Urban Renewal**

None identified.

8.0	**RISK ANALYSIS**

7.1	Risk is balanced against individual need and rather than being seen as imposed surveillance. Telecare operates as a carefully agreed set of responses that enable previously identified risks to be managed efficiently and safely.Vulnerable people who are receiving technological and professional support to live at home, feel more secure in the knowledge that help is readily available, should they require it.

8.0	**EQUALITY AND DIVERSITY ISSUES**

8.1	It is essential that the Council addresses equality issues, in particular those regarding race, gender, sexuality, age and disability when considering its Telecare policies.