

REPORT TO: Health Policy and Performance Board
DATE: 8th June 2010
REPORTING OFFICER: Strategic Director Adults and Community
SUBJECT: Telecare Strategy 2010-2015.
Ward(s) Borough Wide

1.0 **PURPOSE OF REPORT**

1.1 To present the local Telecare Strategy for 2010-2015.

2.0 **RECOMMENDATION**

That

- (1) PPB comment on the draft Strategy; and**
- (2) PPB comment on the implementation plan**

3.0 **SUPPORTING INFORMATION**

3.1 Introduction

The Griffiths report in 1988, into community care, placed a strong emphasis on the importance of establishing services to help people live in their own homes and retain independence, dignity and choice with an emphasis on early intervention and prevention. Since then a number of policy documents have reinforced this approach. The use of technology has been increasingly identified within the policy framework as one of the services, which is effective in maintaining people's independence without the need for intrusive costly care where it is not needed.

3.2 Local Authorities continue to be faced with the challenge of making best use of resources and evidencing value for money in frontline service delivery.

As the population of older people continues to rise, it is likely that this will have an impact on the number of people with additional health and social care needs requiring, care, treatment and support. The current resources available will be unable to meet this rise in demand, we therefore have two alternatives:

- Raise the threshold of when we offer care and support to people.
- Identify alternative and innovative ways of providing more for

less.

- 3.3 The most likely way that Local Authorities can release monies for future investment is to reduce the proportionate spend on residential care. This has been happening nationally and locally at a steady rate over the past 5 years. Residential care does provide an essential environment for people to receive the care and support they need, however by developing an appropriate range of community services to support people to remain at home for as long as possible, at a lower cost than residential care, we can continue to provide the level of care and support people needs effectively. One of these alternatives is telecare services.
- 3.4 Within the strategy a number of best practice case studies have been described, which support the direction of travel in mainstreaming telecare provision to achieve better outcomes for users and value for money for the local authority.
- 3.5 Telecare provision in Halton has been developing since 2005, as an enhanced service provided by the Community Alarm Service, this has resulted in an increase in the numbers of people supported year and year. The service is currently operating at full capacity. A recent evaluation of the service has demonstrated value for money and positive outcomes for service users.
- 3.6 A number of case studies have been identified as demonstrating best practice in the area of numbers on the service and efficiencies achieved; these have been identified within the strategy.
- 3.7 The most powerful case study to date is the North Yorkshire service; this service has also been highlighted in a number of Department Of Health Documents, as providing a service to a large number of people and achieving positive outcomes for people.

We have therefore used this case study to benchmark the current service capacity in Halton, and to establish a target number of users we should be aiming to support.

The population in Halton is 13% the size of North Yorkshire, adjustments on targets have been made accordingly.

*North Yorkshire provides an active telecare service to 12,265 people, at level 1, 2 and 3.

*Of these 20% receive a level 2 or 3 service

Based on comparisons with North Yorkshire, Halton should therefore provide a service to:

- * 1,594 active telecare users (1,2 and 3),
- * Of these 353 at level 2 and 3.

Currently we provide an active telecare service to **1765** people (1,2 and 3), however we only provide an active level 2 and 3 service to **70** people, to achieve a similar level of service as North Yorkshire Halton need to provide a service to an additional 283 people a year.

- 3.8 In addition Halton provide a telecare service within the Supported Housing Network, initial efficiencies of £49,260 have been achieved.

To expand on this initiative it is recommended that we initially evaluate the current service, and review the benefits to service users and address any risks to further implementation of this approach.

4.0 **POLICY IMPLICATIONS**

The strategy is consistent with current Health and Social Care policy direction, to support people to live as independently as possible in their own homes earlier, with dignity and choice in how they live their lives.

5.0 **FINANCIAL/RESOURCE IMPLICATIONS**

- 5.1 Within the strategy we have evidenced that the current telecare services have saved £690,494 over the last 4 years, when compared with traditional care provision. This has enabled us to meet the needs of more people for the same resource. This is particularly important when we consider the increasing older population, and the potential that public services will not receive growth funding in the near future to meet this challenge. These decisions will be taken during the coming budget process.

- 5.2 The use of telecare can defer or delay people needing longer-term services (the biggest single efficiencies can be made from reducing use of residential care) and creating better community-based services delivering better outcomes.

- 5.3 The strategy is based on an invest to save approach, by increasing the number of service users able to benefit from the service:

- The cost of increasing the service is £144,408 and once the service is fully operational will reduce community care costs by £444,932 annually. These efficiency targets have been reviewed and validated by the Department of Health CSED.

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

6.1 **Children and Young People in Halton**

None identified.

6.2 **Employment Learning and Skills**

None identified

6.3 **A Healthy Halton**

Investment in Telecare to support vulnerable adults can impact positively on their health and well being, one example is the use of falls monitors which can reduce the impact of the fall on the person.

6.4 **A Safer Halton**

The use of Telecare can enable people to remain in their own homes and feel safer and more supported.

6.5 **Halton's Urban Renewal**

None identified.

RISK ANALYSIS

7.1 This strategy outlines the key risks and issues for the Local Authority in relation to an increasing older population and the financial implications, which we will face if we do not find an alternative way to provide care services, and support people to maintain independent living for as long as possible.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 A Community Impact Review & Assessment (CIRA) will be completed on the final strategy.

9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None.