

case study



Sector: Health, Housing & Social Care
Client: Gloucestershire County Council

Application: Evaluation of telecare leads to mainstreaming

the challenge

Gloucestershire, in common with the rest of the UK, has a rising older population. The county is expected to see a 52% rise in the 75 and over age group and 76% in the 85 and over age group by 2025¹.



In addition to this, the dependency ratio (the proportion of people of working age to those who have retired) is set to fall to 3:1 within the next 20 years (compared with 4:1 at the turn of the 21st century)². This is likely to mean a significant shortfall in both the financial and human resources needed to provide support. Meanwhile the expectations of older people are changing, as they demand more independence and choice.

All of these factors mean that current methods of service delivery may soon become untenable and more efficient ways of caring for older people must be found, without compromising their health and well-being.

Faced with these statistics, and aware of the benefits already being brought to the area by existing community alarm services, in May 2006 the Gloucestershire Telecare project, TeleG, was launched using the DH Preventative Technology Grant.

Analysis of the two year TeleG project has revealed potential savings to Health and Social Care of over £4million across 368 service users.



All the reassurance you need



Gloucestershire County Council's vision is "To enable people to remain living at home through working together with all parties to achieve identified individual outcomes."

Kim Carey, Director of Operations & Development, Community & Adult Care Directorate, Gloucestershire County Council



Case Study Highlights

- Project savings estimated to be over £4m
- 94% of service users feel telecare maintained/improved independence
- Telecare acts as triage for health, housing and social care
- Admissions to residential care were prevented/delayed
- Home care and intermediate care costs were reduced
- Conclusion of the County Council is to mainstream telecare
- CSCI recommend greater use to be made of telecare



Telecare Values

At the instigation of the project, the following values were identified as central to delivering person centred care using the technology:

Acceptability - to users, carers, workers and the wider community. Telecare should not be viewed as an imposition, intrusion or 'cheap' alternative to existing provision

Effectiveness - reliably and discreetly fulfilling the intended task without the need for constant attention

Efficiency - provide satisfactory support without unnecessary use of financial, human and material resources

Flexibility - able to be installed/de-commissioned easily, fitted/removed using only basic skills

Sustainability - telecare has been developed to sit alongside existing services. Once established it can be funded long-term either as a response in its own right, or via a financial diversion from residential home care or other appropriate budgets

Accountability - telecare welcomes corporate, individual or public scrutiny. Quantitative and qualitative data collection facilities have been designed into the assessment and provision processes. Data analysis can validate telecare as an appropriate service response

Dignity - respect of the service users' dignity

background

As part of its Corporate Strategy and the Local Public Service Agreement for Older People, Gloucestershire County Council's Adult Social Care Directorate and its partners have agreed challenging targets based upon promoting older people's choice to live independently at home. Aligned to this, the County's Care at Home Strategy created priorities which mean that the necessity for care delivered at home will increase even more substantially. These include:

- Increasing the number of older people being helped to live independently at home
- Avoiding hospital admission and facilitating timely discharge from hospital
- Closer working between Health & Social Services in order to deliver integrated care (i.e. intermediate care, out of hours services, multi-disciplinary and specialist teams)
- Increasing/Improving Extra Care Housing facilities

Telecare is seen as pivotal to achieving all of these goals and the Community & Adult Care Directorate views telecare as an efficient and flexible way to support and enhance the way we care for local people.

Community Alarm services have been established across the County for some time (Forest of Dean Careline, Stroud Careline, Cheltenham Lifeline) and have offered some elements of telecare for several years, as far as funding would allow. The PTG has enabled the County to take a more holistic approach to the provision of telecare services, and the TeleG project examined the implications of mainstreaming the technology.

When embarking upon the project, a number of key stakeholders (in addition to the community alarm services) were identified by Gloucestershire Social Services, and representatives from the following organisations have been integral to its success:



implementation

The TeleG project team took a methodical approach to the introduction of telecare, examining and planning in the following areas:

Measurement

The Council set specific targets for telecare, ultimately that telecare should be provided in all homes where it was needed by 2010.

Eligibility

The TeleG project first defined who would most benefit from the service in order to inform the awareness, training and education process. The TeleG project first targeted the following groups for assessment:

- Those assessed as in need of moderate, substantial or critical needs of services (under FACS)
- Those assessed under SAP
- Those in receipt of intermediate care or polypharmacy
- Those vulnerable to extensive risk without telecare, or more capable of maintaining independence with technology
- Those at risk of hospital admission
- Those suitable for supported timely hospital discharge
- Those providing significant informal care to a vulnerable person
- Those with cognitive impairments and enduring mental health problems
- Those at risk of falling and being unable to get up without support
- Those with sensory impairments

Referral

The next step was to define clear referral routes, and promote these. Initially the Adult Helpdesk was used as a single point of access, with this later being expanded to enable staff to open cases on the Council's system directly. Staff were also encouraged to work together across in-house, health and independent delineations.

As the project progressed it became clear that the telecare monitoring centre was also acting as a point of triage by referring issues to emergency services, health, housing and social care as appropriate, thereby informing assessment, increasing efficiency and improving the end user experience.

Training

TeleG delivered training on two levels:

Awareness Training - explanation and demonstration of items that might be employed, giving clear examples of the benefits for service users and how telecare contributes to specific targets.

Telecare Technology Matching Training - targeted at those involved in assessment and identifying care packages, enabling them to prescribe equipment to meet client need.

It was found that staff awareness training needs to form part of a regular, ongoing programme in order to educate new team members, refresh the knowledge of existing members and support new product and application knowledge. These team members can then refer to specialist assessors in order to expedite installation of telecare equipment.

Installation

A specialist, in-house installation team was created to ensure timely and efficient access to the service. This resulted in 91% of installations occurring within the five day target.

Marketing

The marketing of telecare services plays a vital role in ensuring appropriate uptake of the services. As well as educating health, housing and social services professionals, potential service users and their carers must also be made aware of the possible applications of telecare in supporting their health and well-being.

Equipment

Equipment was initially purchased using the PASA agreement, but later commissioned via the Integrated Community Equipment Service in order to improve integration and tracking processes.

Charging

As the telecare service is largely provided as part of the community care assessment or NHS provision, it is not currently charged for. Potential savings generated by using telecare are such that it is likely to become self financing.

Review

Telecare equipment provision is kept under review in case of changing client needs in the same way as other services; review points are set to coincide with reviews of other services where possible to avoid duplication.

Quotes from clients and carers using the telecare service

"If you take telecare away from me you may as well take part of me away with you as well"

"I would be lost without telecare"

"I have to say it saved my life"

"I am not feeling stressed out so much anymore"

"I could not imagine going back to a service without telecare available - we would be back in the dark ages"

case studies

Mrs W

Mrs W is an 83 year old lady who lives alone. She has dementia, osteoporosis and rheumatoid arthritis, and was prone to falling. Her family were so concerned that they stayed overnight with her.

The telecare service provided a Lifeline unit and bed sensor. The bed sensor was set to alert the monitoring centre if Mrs W was out of bed for longer than 15 minutes during the night. It was also connected to a lamp in her bedroom that switched on when she got out of bed and off once she returned to bed.

Mrs W recently had a fall in the early hours of the morning. The bed sensor activated, and monitoring centre staff reassured Mrs W that help was on its way, and her family were contacted. Mrs W felt she could live more independently and still remain safe, enabling her to remain in her own home. The equipment has also considerably reduced the anxiety of her family.



Mr and Mrs X

Mr and Mrs X are an older couple, and Mr X often became agitated when Mrs X left the house. He would frequently phone her mobile phone demanding that she return home immediately, and Mrs X felt guilty and anxious if she did not curtail her trip and return home. The situation was beginning to adversely affect Mrs X's health.

Since having the Lifeline, fall detector, and smoke detector, life has become much easier for Mr and Mrs X. Mr X no longer becomes anxious when he is left on his own at home, knowing he can easily access a friendly voice at the monitoring centre should he experience a problem when his wife is out. Mrs X is able to leave the house for short periods of time, knowing her husband is safe, and the quality of life for both of them has improved enormously.



Mr Y

Mr Y is a 32 year old man, who lived with relatives due to various health problems including chronic epilepsy and thrombosis. He fell several times a month on average and was often hospitalised as a result. Both Mr Y and his family had become very anxious about his falls.

Mr Y was provided with a Lifeline unit and fall detector, which he feels has significantly reduced his anxiety and that of his family, as help will quickly be on hand should he fall. He recently felt confident enough to move into his own flat, where he undertakes everyday activities such as cooking and ironing.



Mrs Z

Mrs Z is 89 years old, lived on her own and had deteriorating health. Over recent years, she required increased medication and was suffering from blackouts and falls, which she had found difficult to come to terms with.

Mrs Z was given a fall detector which she found invaluable and took everywhere with her around the house. She even placed it near her when showering, in a waterproof location, and when one day she fell in the shower she was able to press the button on the fall detector to alert the monitoring centre. An ambulance was called, and the police gained access to her property to assist her, thus avoiding admission to hospital. Mrs Z made a full recovery.



“The staff really believe in telecare because they’ve seen for themselves the benefits it brings to clients and their families. This means they work really hard to make sure the right equipment is provided at the right time.”

Holly Gittings, Telecare Project Manager



outcomes

“Telecare has succeeded in providing processes which are logical and have proved to be effective in offering a service to hundreds of vulnerable older people in Gloucestershire.”³

Stakeholder outcomes for the TeleG project were assessed by means of 3 reports:

1. Health Psychology Report

At the conclusion of the TeleG Project, the Community Health Psychology Team surveyed 55 service users and their carers about their experiences.

The report concluded that telecare can provide cost effective interventions which are client centred, supporting the delivery of strategic goals for both Health and Social Care organisations. Generally the perception is that **telecare has increased independence, peace of mind and well-being for both service users and their families**. The report also states that an increase in factors such as independence and confidence is linked to well-being and improved health.

- 96% of service users rated telecare as important or very important
- 86% of service users found that the telecare service improved their confidence
- 94% of service users felt that the telecare service had maintained or improved their independence
- 73% of staff saw an increase in the quality of life for the service user



2. External Evaluators Report

In the context of community care generally, Gloucestershire sees an average of 550 new assessments every month, of these 240 will be eligible to receive domiciliary care. There are approximately 50 new telecare users per month, 20% of which are receiving domiciliary care and 15% receive domiciliary care services. Following the creation of a team of dedicated prescribers as part of TeleG, there are now nearly 100 new referrals each month, three quarters of which are eligible for telecare.

The report also found that:

- Average period of use of telecare equipment is approximately 2 years
- The average cost of equipment is £112.50 per service user

It concluded that with the end of the Preventative Technology Grant, it was necessary to mainstream the telecare service, and that it should be expanded to a total of 2,000 service users within 18 months. The report also found that although annual predicted costs would total approximately £800,000 per annum (see below), **immediate savings of at least £1million** would be made. This figure was based on a conservative projection of delayed admissions to hospital or residential care resulting in a saving of £10 per person per week (extrapolated evenly across the service).

Breakdown of annual costs (based on 2,000 users)

Equipment:	£200,000
Installation, Maintenance etc:	£160,000
Prescription and Administration:	£250,000
Monitoring:	£200,000
Total:	£810,000

This equates to £405 per service user - less than the cost of one week in residential care.

For further information
please contact marketing
on 01977 660206



3. Cost Saving Analysis

Gloucestershire County Council undertook its own review of cost savings generated over the two year life of the project based on data collected at initial assessment and again after 12 months, giving comparison data for such items as client support services, hospital admissions data, consideration of care, etc. The user experiences of 55 clients have been analysed so far, and where it has been possible to identify a clear cost saving for a service user they averaged as follows:

Average nett⁴ savings to Health per user =
£7,871.79

Average nett savings to Social Care per user =
£13,292.37

Total nett savings across 55 service users = £405,088.39

Breakdown of cost savings from 55 users	%	£ saving
Social Care		
Residential Care	71	£198,189
Meals on Wheels	5	£ 13,957
Home Care	19	£ 53,036
Intermediate Care	5	£ 13,957
Total Social Care	100	£279,139
Health		
Ambulance Call Outs & Hospital Admissions	100	£125,949
Total		£405,088

References

- 1 Gloucestershire Health and Social Care Community Joint Commissioning Strategy for Services for Older People 2007 - 2016 May 2007
- 2, 3 Telecare in Gloucestershire (TeleG), Mainstreaming Strategy 2009. Telecare Project Team
- 4 Costs of supplying, fitting and monitoring the equipment have been accounted for.

Savings to Social Care were largely generated by preventing/delaying admission to residential care, but also from reducing costs for Meals on Wheels, home care and intermediate care. Savings to health were generated by preventing hospital admissions and ambulance call outs.

Extrapolating these average cost savings noted above across the 368 people currently using the telecare service, Gloucestershire County Council have calculated the potential savings to be £4,273,645.90 over the two year life of the project.

On this basis, if the service is expanded to 2,000 users as recommended by the external evaluator, the potential annual cost savings could be £11,613,168.37.

Initial contributions to mainstream the service (approximately £810,000) could therefore be allocated pro rata 79% to the Community and Adult Care Directorate and 21% to the Health Sector.

Recommendations

Given the findings of the TeleG evaluation reports above, Gloucestershire County Council and its partner agencies intend to develop and mainstream telecare services with a view to supporting several hundred new households each year, supplying telecare wherever it is needed by 2010.

This decision is supported by CSCI (Commission for Social Care Inspection), who in their October 2008 report on Gloucestershire County Council's Social Care provision said 'Greater use should be made of telecare to enable older people to live independently'.

Further reading

If you found this case study useful you may also be interested to read:
Case Study - North Yorkshire County Council
Case Study - Stockton-on-Tees Borough Council
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