

# Innovation, Choice and Control - Telecare North Yorkshire



## The challenge

For the foreseeable future changes in demography and developments in policy will continue to transform the way services are delivered.

- By 2020 there will be 50% more people over 65
- Over 65s will represent 25% of the total population (18% in 2001)
- There will be a particular growth in the number of older people with more complex needs, long-term conditions and learning disabilities
- By 2020 there will be 68% more people with dementia than there are now

If the general model of social care service provision remains the same, by 2020 North Yorkshire County Council will need to provide 50% more services, for example:

- 3,420 more domiciliary care packages
- 1,817 additional places in care homes

At a cost increase of £43m per annum in real terms by 2020.

However, to deliver good quality social care and related primary care and support services to citizens, all stakeholders will need to work beyond traditional organisational boundaries, structures and systems.

North Yorkshire has recognised the potential of telecare and has already trialed it early in two areas to evidence new ways of thinking and working.

In the first year of the telecare programme NYCC has [saved over £1 million](#) that would otherwise have been spent on domiciliary or residential care. The net average efficiency was £3,600 per person, a 38% reduction in care costs.

Telecare is part of North Yorkshire's innovative approach to social care. "Telecare is now consolidated as a key component of our commissioning agenda. We have a significant range of training tools and case studies which highlight the positive outcomes for individuals and we expect that all social care assessments

will consider if its use could create a personalised package of care to safeguard the individual."



Derek Law, Corporate Director, Adult and Community Services, North Yorkshire County Council

Statistics Source: Strategic Commissioning for Independence, Well-being and Choice, 2007-2022.

All the reassurance you need

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## North Yorkshire's approach to telecare

In 2005/6 a pilot with 42 people tested use in an urban and a rural area. Key issues from that early work were the need to ensure telecare was part of mainstream referral, assessment and care management systems; the need to have good procurement skills, and the requirement to have in place systems to address installation, monitoring, maintenance, decommissioning, a response system when people need assistance, and excellent partnership working with providers, and in North Yorkshire's case local District Councils.

### Resources

The initial investments included LPSA funding of £70,000 for the two pilots and the Preventive Technology Grant of £871,000 to employ four telecare co-ordinators, SLA's worth approx £10,000 per annum with 7 housing providers for monitoring centres and the purchase of equipment. In addition, North Yorkshire invested a further £942,000 as well as £70,000 to Housing Providers for lifelines to increase prevention opportunities in the community; and additional equipment.

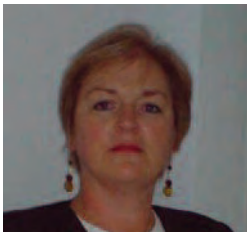
Today, telecare is available for all individuals needing Adult and Community Services support as part of the range of mainstream personalised solutions to suit their individual circumstances.

## Why telecare works in North Yorkshire

- Strong leadership/vision
- Passion
- Clear commissioning strategy
- Investment in telecare co-ordinators and equipment remains an investment priority
- It is a mainstream approach, part of standard care management process
- Performance managed - part of supervision and appraisal
- Staff must consider telecare as part of the initial care package
- Good working relationships e.g. housing, Police, Fire & Rescue, providers of telecare
- It is part of the personalised approach, meeting individual needs
- Excellent evaluation and evidence
- Train, train, train staff with portable training tools - demonstration cases bring it to life
- Council members have received training and awareness sessions

The key aim is to customise a package of care that maximises a person's dignity, choice and control whilst managing any risks to daily living that they may have to accommodate as part of their life.





*“Our telecare success is due to having very professional and knowledgeable members of staff to drive the telecare agenda. We work closely with our partner organisations achieving a personalised approach to safeguard and realise the chosen outcomes of people who need support.”*

Adrienne Lucas, Telecare Project Manager, Adult and Community Services, North Yorkshire County Council

## Evaluation

All new telecare users during Sept 2008 were subject to an evaluation. Their care managers identified what the traditional care package would have been if telecare had not been available, and what the actual telecare enhanced packages of care were.

- 46% of the traditional packages would have been residential, EMI or nursing
- 54% of the traditional packages would have been at home

Those who would have had more than 10 hours home care saw a reduction in the number of hours needed, whilst the trend for those who would have received 7 hours or less was a reduction in the number of hours with some people needing no further support.

Analysis indicated a net average annual efficiency per person of between £12,246 and £1,756 per area, averaging at £3,600 countywide - a 38% reduction in care package costs.

The average efficiency of the sample telecare users (131) was applied to a cohort of current telecare users (330) which indicated savings of £1.1 million

## Financial overview

Service type	Traditional package			Actual package of care used including telecare				
	Count of users	Annualised cost £	Traditional ave cost £	Annualised cost £	Telecare enhanced package ave cost £	Variance £	% reduction in traditional package £	Ave efficiency per person £
Residential care	60	784,775.16	13,079.59	417,511.19	6,958.52	355,053.06	45%	5,917.55
Community support	71	480,024.46	6,760.91	356,336.33	5,018.82	123,688.13	26%	1,742.09
All packages	131	1,264,799.6	9,654.96	773,847.52	5,907.23	478,741.19	38%	3,654.51

## Satisfaction survey

Two satisfaction surveys were undertaken in May 2008 and August 2009 for Adult and Community Services with the survey in August showing a further increase on May's already high results, that telecare had produced the following outcomes for people:

- 95% - Telecare equipment has given me more confidence/peace of mind
- 95% - Telecare equipment has helped me to feel safer
- 94% - Clients were happy with the installation
- 91% - Rated telecare excellent or very good overall
- 87% - Telecare has helped me to carry on living at home

# Telecare implementation

## Working with Housing Partners

North Yorkshire County Council has worked in partnership with seven housing providers in the county who have been providing lifeline services for many years. The partnerships mean that existing monitoring systems are used and housing support staff can fit and maintain equipment as well as being able to refer people who would benefit from the service.

## Telecare Co-ordinators

A key success factor for NYCC is having four dedicated workers covering the county to support the embedding of processes and procedures into Directorate practice.

Their role is to ensure performance monitoring systems are in place, to assist Social Care Assessors and other assessment staff to undertake overview, specialist and carers' assessments; to raise awareness, knowledge and skills regarding telecare within Adult Social Care Operations and partner agencies in the provision of telecare solutions.

## Training is crucial

During 08/09 4,595 multi-agency attendees received telecare training from basic awareness to installation of equipment thus gaining significant experience in a range of technology. This approach is assisting NYCC staff and those of our partner organisations to manage risks when providing customised services.

All assessment staff in social care have received training, with new staff targeted soon after arrival. Use of telecare in elderly person homes has prepared staff for work in extra care settings. The County has created a training pack and guidelines for fitting equipment and developed long-term conditions pathways for a range of conditions with PCT. Training is continuing in this year including independent sector, 3<sup>rd</sup> sector, health and social care staff.

## Telecare outcomes

**Medication management** - Betty needed 14 quarter hour visits per week to manage her medication needs. This was replaced by a medication reminder which prompted Betty to take the right pills at the right time.

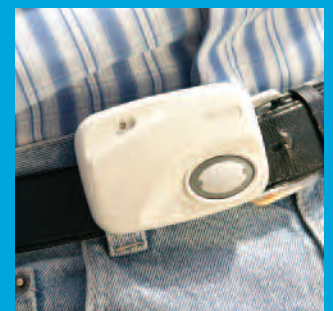
**Falls solution** - John needed 2 "pop-in" visits per day to make sure he hadn't fallen getting out of bed or visiting the bathroom etc. This was replaced by a fall detector which maximized his personal dignity and his respect and improved his emotional wellbeing because he now knows if he does have a fall someone will be alerted.

**Wandering issues managed** - Mary was due to go into a permanent EMI (elderly mentally infirm) placement as she was just starting with dementia. She was at risk of falls and going out of house inappropriately putting herself in danger. This was replaced by 10 home care visits of ½ hr per week, a property exit sensor and fall detector. Mary was where she wanted to be - at home and her family were greatly reassured.

**Dementia issues managed** - Marj, who has dementia, lives in a farmhouse with her daughter and son in law. She was due to go into a permanent EMI placement as she would leave the property at inappropriate times, putting herself at risk and also leave the taps on in the kitchen and bathroom. The telecare care package to manage risks for Marj consisted of a property exit sensor, flood detector, bed sensor, light module and pager. As soon as an alert is raised, the family would be paged and they would come to mum's aid immediately, wherever they were on the farm. This maintained Marj at home and happy in familiar surroundings.

*"When telecare has been implemented by authorities in a 'big way' the evidence is the results can be quite startling, notably in terms of releasing hard pressed resources."*

Councillor Gillian Ivey, Chair  
Scrutiny Committee, North  
Yorkshire County Council



## Case studies - improving quality of life

### Mental health issues managed

With Julie, certain things trigger the worsening of her mental health. During that time, she stops taking her medication, can be prone to leaving her home at inappropriate times and her eating/drinking is erratic. She hates people popping in all the time to check on her. We installed a telecare package consisting of a PIR in the kitchen to make sure she is preparing food, a property exit sensor to identify if she is leaving the property and a medication reminder which prompted her to take her medication. For Julie, it gave her choice and control back and her dignity and privacy were maintained.

### Hearing impairment solution for carer

Geoff is 59, has cancer and he lives with his wife who is registered as deaf. As he sleeps downstairs, his wife has been sleeping in a chair nearby wearing her hearing aid, as she is afraid of not hearing Geoff during the night. A telecare package was provided consisting of a Lifeline, DDA pager and vibrating pillow pad enabling her to be able to sleep in her own bed. Geoff is happier knowing his wife is sleeping comfortably and she is confident of being alerted if she is needed.

### Telecare for learning disabilities enables privacy and dignity

Mike is 21, has learning disabilities and lives in a supported living property. Staff carried out hourly checks during the night, as the client experiences epilepsy and has issues with continence. There were also concerns regarding another tenant who was entering Mike's bedroom during the night. An epilepsy sensor and enuresis sensor was installed which meant that staff only attend when required; ensuring privacy and a better quality of sleep is maintained. A universal sensor with door contacts (fitted to the bedroom door of the other tenant) alerted staff if the client who is entering Mike's bedroom uninvited leaves their bedroom. Telecare has reduced the number of night carer visits, reducing the cost and giving Mike more freedom and dignity.



Medication Reminders through the Lifeline home unit



DDA Pager



Epilepsy Sensor

*“Here in North Yorkshire we have proven the case for telecare. It will continue to be a critical part in our commissioning strategy and our investment plans.”*

Seamus Breen, Assistant Director -  
Commissioning and Partnerships, North  
Yorkshire County Council



*North Yorkshire County Council is ensuring that telecare is available in the fabric of extra care buildings and as the infrastructure is already there, anyone placed in Extra Care will have an assessment that includes assistive technology and telecare which will identify the best package to safeguard and support them.*

Sunnyfield Lodge, Extra Care Facility, Ripon, North Yorkshire

## The future

### Commissioning for Independence Well-being and Choice 2007-2022

North Yorkshire County Council's Commissioning Strategy, outlines a 15 year strategy and approach to delivering services to support the well-being of individuals and communities.

Telecare is a component of Commissioning Aim 7 to enable people to be supported to live as independently as possible in their own homes through innovative design and equipment.

### Supporting all Vulnerable Groups

North Yorkshire County Council is working with a range of providers to develop the market in such a way that it is flexible and able to incorporate telecare, where appropriate, for people with all disabilities including learning disability, physical disability and mental health issues. The key aim is to customise a package of care that maximises a person's dignity, choice and control whilst managing any risks to daily living that they may have to accommodate as part of their life.

## Next steps

- Staff targets - all people assessed are considered for telecare
- Increase % of care packages, including telecare, by 15% this year and review annually
- Elderly Persons Home's residents risk assessment includes telecare
- More work with learning disability services on personalised technology
- Market development - telecare as standard component of care in domiciliary care packages
- Launched telehealthcare with North Yorkshire and York PCT
- Regional work to pass on best practice

## Conclusion

The use of technology and telecare in particular, is playing an essential role in the future strategic development and commissioning of services within North Yorkshire.

For further information please call 01977 660479

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