



ASSISTIVE TECHNOLOGY AND TELECARE STRATEGY

2013-2016

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Foreword

By Ian James, Director of Adult Social Services, Solihull Metropolitan Borough Council

Telecare has a key role to play in the modernisation of social care. It offers a range of possibilities for individuals, through the application of technological advances in a social care setting. Telecare can help enable people to live independently for longer by preventing hospital admissions and premature moves to residential care.

Personalisation is based on offering choice and control to our customers, and working with them to co-develop individualised support plans. Telecare offers numerous possibilities depending on the customer's needs and desired outcomes. Assistive technology ranges from simple devices to prevent sinks flooding, to GPS tracking and Smart-phone applications. By ensuring that telecare is considered during the development of every support plan we can support customers to find the best possible solutions and achieve the vision described in 'Think Local, Act Personal'. Many others of course are happy to sort out their own care and support and we need to increase awareness generally about the possibilities that technology can offer.

We have some way to go in Solihull to make the best of what technology can offer and I welcome the findings and recommendations of the telecare evaluation which will help us build on the existing foundations of our service and work towards reaching the potential that is evident from the work of other councils. To do this we must work on raising awareness of telecare amongst staff and customers, provide clear and helpful information and ensure that the referral process is simple and straightforward. We are committed to working with partners to improve access to telecare and will work closely with health colleagues to join up developments in telecare and telehealth to the benefit of our mutual customers.

Technology can't, of course, replace human care but it can hugely assist in reducing the need for care particularly where the care is predominantly about monitoring and managing risks. This both increases independence and frees up carers to provide the human care that only they can provide.

Ian James
August 2012

1. Introduction

This document sets out a strategy for the improvement and expansion of a sustainable Telecare/Assistive Technology service in Solihull, to support better health and well-being. The ideas and proposals in the strategy have been built up from the current services offered in Solihull, the vision for supporting the citizens of Solihull and they are firmly supported by the Government's health and care policies and by a good range of local evidence.

It is well established that health and social care organisations are facing extraordinary challenges in meeting the needs of a rapidly growing older population who have increasingly complex needs. Economic pressures are also driving changes to the way resources are used to achieve greater benefits to health.

These pressures are prompting health and care services commissioners to help more people look after their health and wellbeing more effectively. This includes focusing on prevention, acting to prevent the crises that cause avoidable admissions to hospitals and care homes. Telecare/Assistive technology has an important part to play in supporting these changes.

1.1 Definitions

Assistive Technology can be defined by the following statements:

'any product or service designed to enable independence for disabled and older people'

Or

*'any device or system that allows individuals to perform tasks that they would otherwise be unable to do, or increases the ease and safety with which tasks can be performed'*¹

Telecare and Telehealth are both types of Assistive Technology that enable health and social care services to be provided 'remotely' to people in their own home and in the community; however, they are quite distinct in their definitions and uses:

*'Telecare is characterised by continuous, automatic and remote monitoring to manage the risks associated with independent living. Examples include sensors that can detect movement, falls, and bed occupancy'*²

*'Telehealth is the remote exchange of data between an individual and a health care professional, and aims to assist in the diagnosis and management of health care conditions. Examples include monitoring blood pressure and blood glucose levels for clinical review by a health professional using phone lines or wireless technology.'*³

Within this strategy document the terms 'Telecare, Assistive Technology or AT' will be used throughout, encompassing Telecare, standalone electronic technology and general assistive technology equipment.

¹ 14th June 2012 The Kings Fund www.kingsfund.org.uk.

² 14th June 2012 The Kings Fund www.kingsfund.org.uk.

³ 14th June 2012 The Kings Fund www.kingsfund.org.uk.

The use of Telecare / Assistive Technology is a way of supporting people with care needs, and those that care for them, to have greater choice and control over their own lives, in terms of supporting their decisions on where they wish to live and increasing their levels of independence. It can enable people to remain living in their own homes for longer with greater independence, confidence and safety, and in many cases reduce the need for unplanned care. Although originally focussed on the needs of older people it is now generally recognised as being of benefit across adult, carers and children's services, and can play a key supporting role for people in everyday life.

Assistive technology delivers benefits by ensuring that a minor event does not turn into a crisis by making sure that when anything significant happens an alarm can be raised and an appropriate response is provided promptly.

On a more advanced level technology can be applied to support assessment and early intervention using concepts known as 'monitoring activities of daily living'. Behaviour trends can be analysed in order to detect symptoms which may have a more serious underlying cause which requires intervention.

Assistive Technology provision can be divided into three types:

- Enabling – to compensate for functional decline
- Responsive – to alert others that an event has occurred and so minimise the consequences
- Predictive – enable interventions prior to the person reaching crisis point

It is usual to find different 'generations' of technology which are generally referred to as:

- First generation – handsets and pendants or 'community alarms'
- Second generation – home monitors
- Third generation – mobile and wireless technology

As technology develops these systems will become more technologically advanced to deliver increased benefits to citizens, while ensuring the focus is kept on individual needs and choices of how the technology can provide support.

1.2 Vision

The purpose of the Assistive Technology Strategy is: *'To promote independence, choice and quality of life for service users and to support a higher number of people in their own homes by developing a framework with which to deliver integrated, mainstream and equitable services across Solihull'*

Solihull's vision is to enable the majority of older people, people with disabilities, people with mental health problems and other vulnerable people to live as independently as possible in their own homes. Technology will play an increasing role in promoting such independence. This document sets out Solihull's plans for developing Assistive Technology services.

ATT can bring benefits to carers and parents of disabled children by supporting their roles via monitoring of key risks, enabling them to relax and take time off, instead of trying to maintain constant vigilance.

The concept of Assistive Technology is simple: technology does what technology is good at (constant monitoring and automatic feedback), freeing our staff to do what they are good at – the human touch. Assistive Technology is not just about equipment; it is a complete service which includes providing an appropriate response. For service users, the benefit is increased reassurance, with less intrusion in their lives. The main benefit to social care services is that staff may be deployed more productively and in a more targeted way. It can give carers more personal freedom and more time to concentrate on the human aspects of care and support.

However, Assistive Technology needs to be part of a 'whole systems' integrated approach, with the goals of

- Supporting independent living
- Keeping people safe
- Improving quality of life
- Improving quality of support/care
- Providing reassurance to service users and their carers
- Reducing face-to-face care/support – where this is for routine monitoring of well-being

Assistive technology helps people to manage risks to their independence. If the risk is falling, then a fall monitor can detect when a fall has occurred and automatically request a response. If the risk is from bogus callers, a bogus caller alarm can enable the person to summon assistance if they are confused or not sure what to do about a visitor.

Assistive Technology is complementary to the support and social care systems we have in place and is not a wholesale substitute.

The following outcomes, most of which have been adopted from the Government's guidance paper 'Building Assistive Technology in England', will form the basis of the work that will be undertaken within this strategy:

- Integrated delivery of Assistive Technology support packages in a range of dwellings (public and private)
- Improved choice and flexibility enabling older and vulnerable people to live independently and with dignity
- Reduced need for residential/nursing care
- Unlocked resources that can be redirected elsewhere in the system
- Improved personal freedom for carers and a reduction to the burden placed on carers
- Contribution to care and support for people with long term health conditions
- Reduced acute hospital admissions
- Reduced falls and accidents in the home
- Increased support for hospital discharge and intermediate care services
- Information about ATT is widely available

- People purchase appropriate ATT equipment via relevant retailers
- Contribution to the development of a range of preventative services
- Help those who wish to die at home to do so with dignity

1.3 Summary of Strategic Aims

The strategic aim for this Strategy is for the development of the use of Assistive Technology across the borough over the next three years. Solihull MBC is re-designing its social care pathway, to incorporate an enhanced 'Single Point of Access and Referral' and reablement service. The assessment and support planning process will include full consideration of assistive technology, so that it becomes a mainstream element of adult social care.

The main strategic aims are to:

- Integrate assistive technology within the mainstream assessment and support planning processes for adult social care to maximise people's ability to continue to live independently.
- Support the public to understand the help that can be provided by ATT, to support them to make their own decisions about which equipment to use. Support the public to 'self-serve' and make own purchases of ATT equipment and/or services.
- Enable people with long term needs to social care support to use Personal Budgets to purchase appropriate, personalised support, including the purchase of ATT equipment and services.
- Ensure that preventative services provided by the Council, Registered Social Landlord's and Voluntary Sector providers work together to provide maximum choice of Assistive Technology services for local vulnerable residents, both in terms of the range of equipment provided and the charging arrangements to ensure all needs can be met.
- Enable families with disabled children to make full use of the benefits of ATT
- Work in partnership to ensure that Assistive Technology services are more widely accessible, acceptable and understood by all those who could benefit from Assistive Technology.
- Increase the uptake of Assistive Technology services by communicating the potential benefits to service users and carers and by providing Assistive Technology opportunities in a diverse range of existing service settings across health, housing and social care.
- Work together to develop Assistive Technology services and associated initiatives which will assist Adult and Community Services, Housing Authorities and Health agencies to achieve key performance indicators

- Continue to explore innovative ways in which Assistive Technology can be used to improve efficiencies in health, social care and housing service provision to the benefit of local residents.

1.4 Background

Current Services

The use of Assistive Technology in Solihull grew from the partnership between Adult Social Care and Solihull Community Housing. Via the Safe & Sound community alarm service people have been able to use a range of Telecare peripheral equipment (like falls detectors and door sensors).

Overall, the take up of ATT in Solihull is low. Telecare is the most common form of assistive technology in use, and is currently provided to 70 people in the borough (August 2012), of a total of 1550 people supported with Community Alarms. A pilot scheme run in partnership with the Alzheimer's Society has loaned a further 200 items of stand alone assistive technology equipment to people with dementia.

Awareness of ATT amongst most ASC staff is patchy, but generally not sufficient to facilitate confident referrals. Many ASC staff are unclear about how to set up Telecare services, or what financial contributions people are expected to make towards Telecare. ATT has not been used in Children's services in Solihull.

The current Solihull Telecare Catalogue has a limited range of peripheral equipment that only operates via the SCH Safe & Sound service. In the past, there have been problems with equipment malfunctioning which undermined confidence in using Telecare. These problems have been eliminated.

The recent consultation found that people in Solihull (service users, carers and professionals) are very interested in ATT, and want to learn more about how it can help people to maintain their independence.

People using telecare said it was valuable, offering them reassurance that help was at hand should it be needed. One man in particular spoke of the crucial impact telecare has had in his life, when pressing his alarm had led to emergency medical response.

'It has saved my life! Twice!'

Others spoke of the importance of being able to summon help

'I fall and I can't get up, Safe and Sound gives me reassurance because I know they will help.'

ATT has a clear role in helping people to manage risks within their lives as they get older, or if they are disabled. Whilst assessments of eligibility for social care support focus heavily on identifying risks, ATT is not currently being used to help mitigate or manage these risks in Solihull.

There is clear, independent evidence from recent evaluations around the country that ATT helps create the right outcomes for citizens and contributes to the efficiency of services;

however currently the service in Solihull has been predominantly provided on top of existing care packages in more of a reassurance role.

Government Policy

The Government is clear about AT policy for the future. It wants local commissioners to expand their use of the technology as part of wider changes to improve prevention, raise service quality and extend personalised care. Performance towards the wider use of AT will be monitored.

Three Million Lives

In January 2012, the Government announced its '3millionlives' campaign, a concordat with the Telecare industry in which the four trade associations representing the Telehealth and Telecare industry agreed on the aim for expanded service delivery for people with long term conditions, and/or social care needs. Telehealth and Telecare within health and social care services are intended to enable 3 million people to receive the significant benefits evidenced in the UK's Whole System Demonstrator programme.

It is emphasised that Telehealth and Telecare can alleviate pressure on long term NHS costs and improve people's quality of life through better self-care in the home setting, when implemented effectively as part of a whole system redesign of care.

A Vision for Adult Social Care: Capable Communities and Active Citizens (Nov 2010)

The Government's view of AT in social care is described in this document.

'Assisted living is one of the most promising developments for ensuring the ageing population continues to be well served with high quality and affordable health and care services. Technologies such as Telehealth help people with long-term conditions to better manage and understand their condition..Telecare enables people to live at home independently for longer by providing technologies that make their homes more safe and secure ...Robust evidence on how to target Telecare and Telehealth to ensure both cost-effectiveness and successful outcomes is lacking'

The document indicating how the vision should be implemented (Making it happen) states that:

'Councils should exploit the many opportunities to improve preventative services by:

- developing community capacity and promoting active citizenship, working with community organisations and others across all council services, establishing the conditions in which the Big Society can flourish; and
- commissioning a full range of appropriate preventative and early intervention services such as reablement and Telecare, working in partnership with the NHS, housing authorities and others.'

NHS Operating Framework 2012-13

The following extracts indicate the new level of importance attached to the wider use of AT through the NHS.

'Telehealth and Telecare offer opportunities for delivering care differently but also more efficiently. Use of both of these technologies in a transformed service can lead to significant reductions in hospital admissions and lead to better outcomes for patients. Using the emerging *Assistive Technology and Telecare Strategy, 2013-16*

evidence base from the Whole System Demonstrator programme, PCT clusters working with local authorities and the emerging CCGs should spread the benefits of innovations such as Telehealth and Telecare as part of their on-going transformation of NHS services. They should also take full consideration of the use of Telehealth and Telecare as part of any local reconfiguration plans.'

'PCT clusters will need to work together with local authorities to agree jointly on priorities, plans and outcomes for investment of the monies allocated for reablement in 2012/13. This could include ...current services such as Telecare, community directed prevention (including falls prevention), community equipment and adaptations, and crisis response services'

Priorities for Health and Care

Prevention is already a clear priority for health and care services in Solihull, this strategy will play a growing part in the future as better and more affordable technology allows more people to monitor their own health or that of loved ones, keep in touch and support family or friends at a distance, or get skilled advice more easily.

Many people do this now, and do not necessarily use the NHS or adult care services. They may not qualify for financial support for care services from the council, due to the application of the government's framework of eligibility criteria. To achieve greater prevention Social Care and their partners will need to work together to make it easier for citizens and patients to monitor and manage their health and care.

1.5 The case for assistive technology

AT/Telecare is based on the premise that care should be delivered in the most appropriate place to allow the user to take an active part in their community and remain independent as long as possible, this in the majority of cases being the user's own home. Thus, the major benefits derived at an individual level concern:

- increased independence, choice and control
- increased safety
- improved dignity and respect
- increased support for carers
- quality of life improvements

Furthermore, at an organisational level Telecare can facilitate change management and lead to transformation of services through a requirement for skills development, culture change and the realisation of efficiencies which can drive increases in services across the citizen population.

There is now a good body of evidence that careful use of AT helps many people to manage their own health and independence. It improves safety at home, with the potential to support many more people: it reduces the number of events that lead to hospital and care home admissions, and gives reassurance to carers. In this way, it also helps citizens and the services to save money and to make best use of their resources.

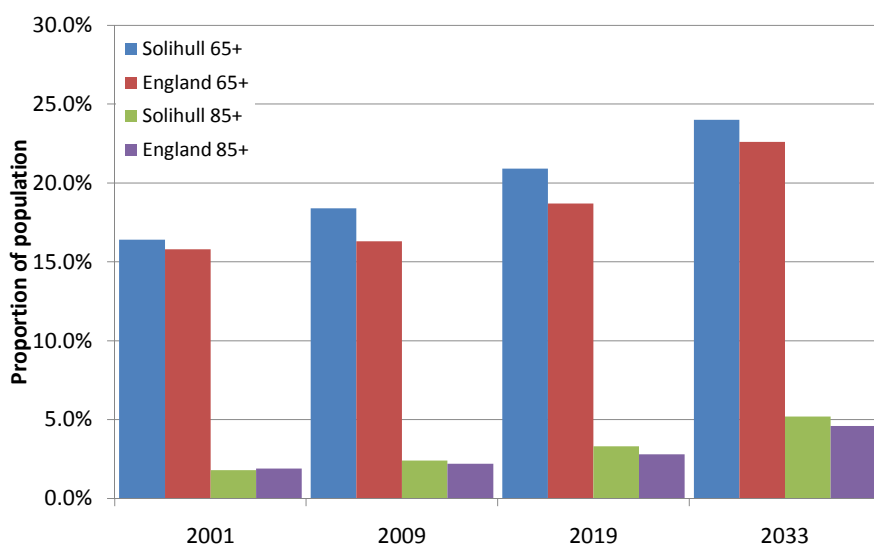
2. Local needs and demands

Solihull's Sustainable Communities Strategy 2008-2018 'One Borough, an equal chance for all' sets out a vision of Solihull in 2018 as being a place 'where everyone has an equal chance to be healthier, happier, safer and prosperous.' The strategy notes that 'as people become older they become more frail and vulnerable and at risk of losing their independence. Long term conditions that are associated with age, such as stroke, arthritis, diabetes, chest disease, heart disease, depression, and dementia are also increasing. Falls are a major cause of loss of well-being and independence in older people'.

It follows the guidance and advice set out in the Department of Health (DoH) paper *Building Assistive Technology in England* and the joint DoH/Audit Commission *Assistive Technology Implementation Guide*. It is also based on the guidance for the expenditure of the Preventative Technology Grant, the aim of which was to initiate a transformation in the design and delivery of health and social care services.

Demographic projections show a total population of people over the age of 60 in Solihull in 2011 of 51,300, and by 2021 of 53,800. The proportion of people aged over 65 is due to increase in Solihull by more than the national average, as is the proportion of people aged over 85 (see older people population growth figure below).

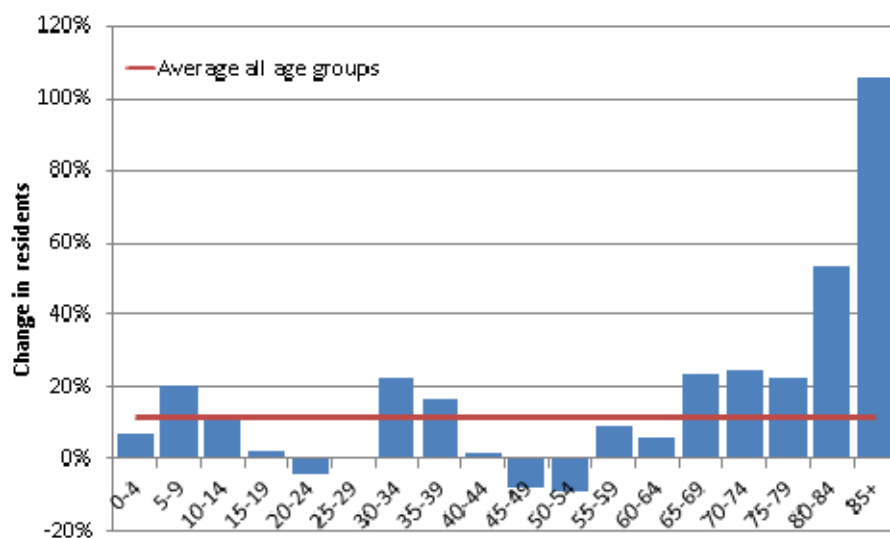
Older People Population Growth



Source: ONS Mid-Population Estimates, Sub-National Population Projections

The number of people aged over 85 in the borough is set to double between 2010 and 2030 (see 'projected change in Solihull population by age group' below). The need for social care increases by age, for example established prevalence data for dementia shows that the incidence of dementia increases with age. For people aged over 80 the incidence of dementia rises to 1 in 6 (Alzheimer's Society, 2012).

Projected Change in Solihull Population by Age Group 2010 - 2030



Source: ONS Population Projections

The number of people aged over 65 and living alone in the borough is predicted to increase from 11,924 in 2011 (census figures) to 14,729 by 2030, an increase of 24%. People living alone may particularly benefit from the use of ATT, as the risk of an undetected accident, fall or other danger is greater than for people who live with others.

This strategy aims to increase the number of older and other vulnerable people benefiting from Assistive Technology in Solihull. The strategy supports the move away from the institutional model of care and towards person-centred, community-based services and independent living, and supporting other key initiatives such as reducing hospital admissions and facilitating hospital discharges. It is anticipated that integrating Assistive Technology with mainstream care systems will deliver savings in social, residential and health care costs.

Data collected for Solihull suggests that the main reasons for loss of independence at home are as follows:

- Breakdown of informal support or carers/care networks
- Increase in personal care requirements which cause any home care support to cost more than residential care
- In the case of mental health needs, an increase in the supervision required to ensure personal safety to the extent that the person's home no longer provides sufficient security
- Absence of 24 hr home care support (i.e. at night)
- Sudden severe illness or injury (falls, fractures and strokes) or deterioration in longstanding conditions to a point where hospital care becomes necessary.

Some people are happy to receive a remotely monitored service but for others, Assistive Technology does not *replace* the existing service provision but can still make a valuable contribution towards preventing the loss of independence at home.

For the large number of people who need lower-level support services, rather than care in the home, Assistive Technology makes a valuable contribution by:

- Providing the confidence needed for people to remain living at home independently.
- Giving service users a sense of security in the knowledge that if a problem occurs they are able to raise a call for assistance.
- Giving peace of mind to carers and relatives in the knowledge that the Assistive Technology equipment will trigger a response in the event the service user raises a call or their behaviour triggers an alert for assistance.
- Acting as a prevention tool which results in outcomes for improved quality of life.

The growth of Personal Budgets means that informed health and social care service users could buy in technology-based support rather than more traditional services.

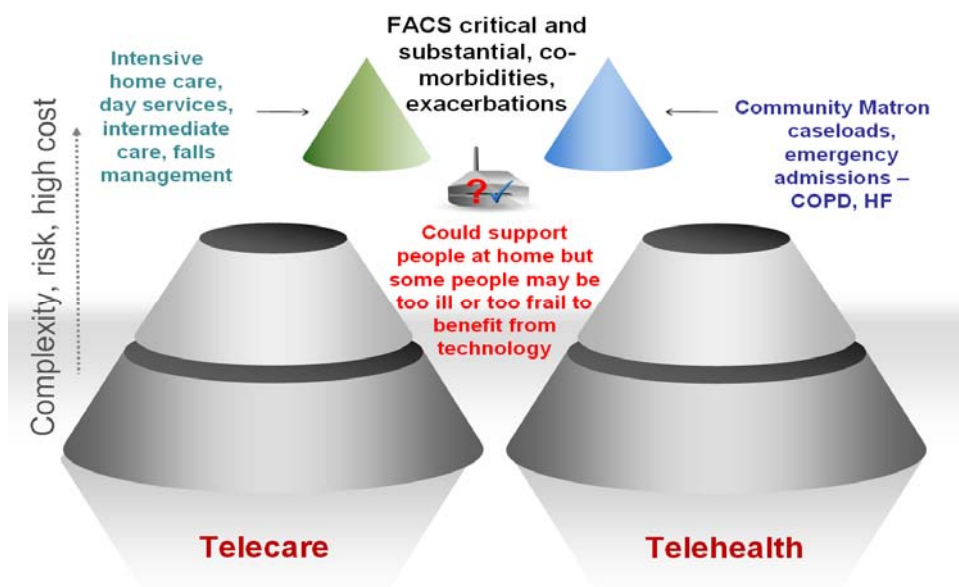
However, it must be recognised that Assistive Technology is not designed to replace other forms of care, but complement them. The use of technology can enable people to live independently with greater confidence and stimulate them to do things for themselves, which in turn support relatives and carers. It can offer alternatives to, or delay a move into, residential or nursing care, which for many people is a difficult and unwanted choice.

Assistive Technology has the potential as part of a support package to help people retain their independence and improve their quality of life. It enables people to feel constantly supported at home, rather than left alone, reliant on occasional home visits or their capacity to access local services.

3. Positioning Telecare and Telehealth

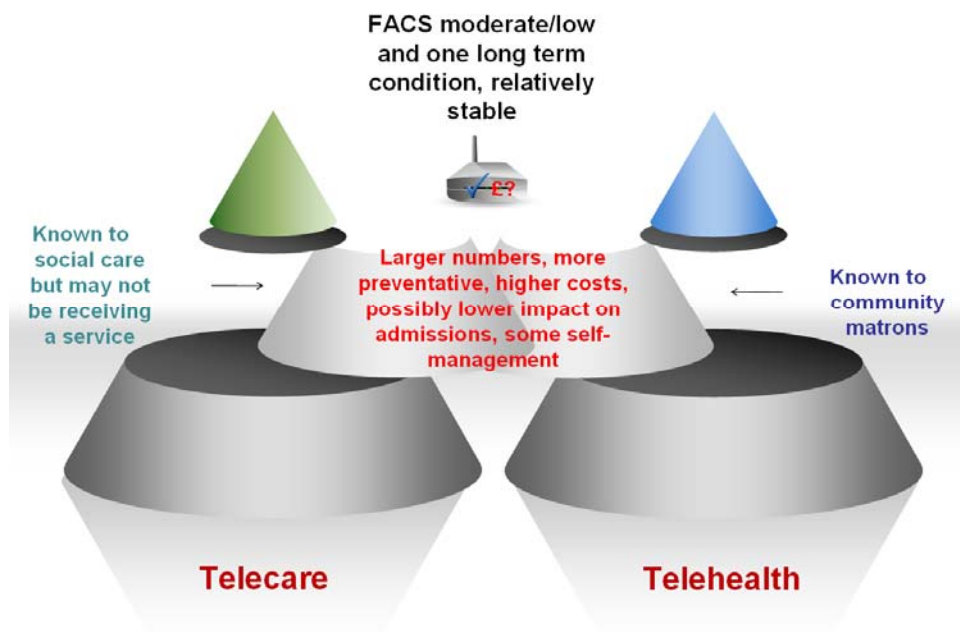
The range of current and potential beneficiaries is very wide. One of the main challenges is to find the right balance between care at home for those who have major and / or complex needs and those who would benefit from early intervention or preventative support and care.

The first diagram below, taken from a Department of Health presentation⁴, shows how an integrated service can respond to people with the highest needs, but highlights the risks of inappropriate use when an illness or disability presents too many challenges.



⁴ Department of Health 2009

In the second illustration below, the focus is on the wider group of people who may fall outside the social care eligibility criteria, and /or who may receive a health care service at home, typically due to a long term condition.



The challenge for the commissioning partners is to balance the use of AT resources both to deal appropriately with severe and complex needs, whilst building up the use of resources for preventative purposes in the longer term.

Telehealth plays a vital role for those with high level health needs, but for the larger population with medium and low health needs there is a role for both Telehealth and Telecare, with individuals being encouraged to self-monitor after a period of time, and Telecare providing the safety blanket and peace of mind for the user and their families

In care homes, the wider use of Telecare and Telehealth equipment can be used to provide more rapid alerts – for example in the event of an older person falling in a bedroom, so bringing help more quickly and reducing risks.

For people with learning disabilities, more freedom with safety will become possible for some people who have been accommodated in care homes, but could enjoy a more independent lifestyle in supported accommodation with modern communications and other assistive technology.

There is also a clear role for Telecare and Assistive Technology to play in Medication management, from the ability for Telecare responders to be alerted to medication issues, individuals to manage their own medication through the use of pill dispensers, and to provide simple prompts and reminders to take medication at certain times of the day – particularly as a less intrusive option for the individual and a more cost effective solution for the Council, instead of the use of 15 minute pop in visits.

4. Developing Services

The following approach to developing services fully reflects the findings and recommendations of the independent evaluation of Solihull's telecare service conducted by Community Gateway in 2012.

4.1 Promoting Assistive Technology Services

A key starting point for implementing the strategy is to promote the potential benefits of Assistive Technology services to the general public and to staff involved in all aspects of the assessment process. This can be achieved by using the following:

Assistive Technology Champions

Successful implementation needs champions, within all the participating health, housing and social care organisations including people involved in developing the service as well as users and carers.

As part of the implementation of the strategy a Project Steering Group has been formed. Members will be the internal and external champions who will remove barriers and help promote Assistive Technology. The makeup of this group will include key stakeholders in ATT including Council representatives from commissioning, reablement and assessment and care management, key provider organisations, users and carers and health organisations

Communications Strategy

Successful implementation of Assistive Technology services depends on all stakeholders having a sound grasp of what Assistive Technology is and how it can be accessed. One of the key barriers for increased use of assistive technology is the lack of knowledge amongst assessors and other key staff in partner agencies. The communication strategy will be jointly drawn up with key partner agencies and will include a robust and a detailed "Communication Plan". This plan will address the need to update people's knowledge about developments in assistive technology.

The main approaches to raising awareness with Service users and carers will be:

- Council website and 'Gadget Gateway' ATT website
- Council's Connect/One Front Door service
- Local press and radio
- Newsletters, website and e-bulletins of voluntary and community organisations
- publicity in GP surgeries and hospitals
- Product demonstration/Roadshows
- Libraries

The main approaches to raising awareness with Council staff and other professionals will be:

- Staff training
- E-learning / on-line videos
- Specific ATT Council intranet pages
- Workshops / briefings
- Joint publicity with partners
- Opportunities for demonstration of equipment

- ATT Champions within teams
- Printed and web-based information

Training and workforce development

Different levels of awareness training will be provided to people involved in assessing needs or delivering support / care services, depending on their roles. This will include domiciliary and support workers, volunteer visitors, carers and others. The training will positively encourage people to use the opportunities offered by Assistive Technology equipment wherever appropriate.

Key groups of staff are those working in providing preventative support services in the Reablement and rehabilitation setting. There are three Reablement teams across the borough which work within their local communities, along with a specialist Elderly Mentally Ill Reablement team.

One of the key barriers for increased use of ATT is the lack of knowledge amongst assessors and other key staff in partner agencies. Different levels of awareness training will be provided to people involved in assessing needs or delivering support / care services, depending on their roles; basic awareness training should be a mandatory element of any induction training.

Three levels of training and awareness are recommended:

- Awareness level (all staff) – basic awareness of equipment, internal processes and systems, how to access the service, charging, case study materials, and a chance to touch and feel the equipment
- Assessor level (front line Social Workers and OTs) – scenario based learning, using real examples
- ATT coach level (selected staff and some Telecare service staff that would be able to support and coach others in assessment for Telecare) – online e-learning courses such as the Coventry University Assistive Technology Learning Tool

Training materials should be developed for awareness level training together with a training roll out plan.

Familiarisation for Service Users in a rehabilitation setting

Intermediate Care and Reablement services are key points for introducing information and advice about assistive technology. Service users who receive a rehabilitative or respite service will have an opportunity to test out equipment set up in bedrooms and/or portable equipment for use around the home.

Demonstration sites in a domestic home setting

There is currently one demonstration flat in the borough based at Longview (Solihull). This facility is in the process of being updated and renovated. Further demonstration sites will be considered to provide opportunities to raise awareness of assistive technology, and offer the opportunity to see and use equipment in operation.

The range of technology in the public domain is ever increasing and a role of the Telecare service is to provide up-to-date information to staff on new technology and potential applications. Areas of expansion include increasing and making more use of the range of standalone technology such as automated medication prompts, standalone pill dispensers, memory aids, Magiplugs, GPS devices and mobile phones – some of which would also allow connection to the monitoring centre as a backup option. The use of virtual tools that

demonstrate assistive technology provide a further opportunity to promote and inform people about the use of assistive technology. They are flexible and portable, enabling information to be provided without the need for a physical visit to a demonstration facility (which can be difficult for some potential beneficiaries).

Information about low level assistive technology

A project will be set up to raise awareness about simple and affordable equipment that can support people to live independently. This will take the form of a 'box of tricks' that will visit clubs and societies used by older and disabled people to demonstrate various, readily available products which people can purchase for themselves. This project will form a significant preventative/low level support function and can be delivered at a low cost by the involvement of volunteers/voluntary organisations.

4.2 Targeting the right Groups

The work undertaken within the strategy will focus on key target services, groups and settings. This targeted approach will enable clear measurement of the impact of the strategy and a controlled rollout of Assistive Technology services.

Assistive Technology & Telecare will be embedded in the 4 stages of the redesigned ACM pathway. See below.

Groups will include:

- People at risk of falls
- Older People
- People with dementia
- People with learning difficulties
- People with physical and sensory impairments
- Family carers
- Disabled Children

Settings will include:

- People living in their own home
- Extra Care Housing and Independent Living Schemes including sheltered and supported living
- Intermediate Care and Rehabilitation at home

Outcomes will include:

- Older People and Younger Adults to live more independently with assistive technology
- People with mild or more advanced dementia that live alone or with a carer to live more independently with assistive technology
- Enabling Carers who care for an adult with a learning disability or physical or sensory disability to live more independently with assistive technology
- People in residential care who could live more independently with specialist equipment i.e. auditory equipment
- Enabling carers to receive support and reassurance from Assistive Technology

Packages will include:

- Individual and customised Assistive Technology packages that are integrated with the Reablement service and Long-Term Conditions services
- Stand alone packages that do not require a response service

4.3 Future Developments

The strategy supports the shift of resources necessary to enable more people to live at home for longer. This has implications for the assessment and care management, support planning, workforce development and residential care. Health, housing and ASC will need to work closely together to integrate the most appropriate Assistive Technology services into care and support packages, and ensure users and carers are central to Assistive Technology assessments, monitoring and reviews.

Given the importance of sub-regional working it is important that the opportunities for joint working with Coventry and Warwickshire are fully explored.

Adult Social Care

The ASC service pathway is being redesigned to increase emphasis on the effective assessment of need, safeguarding, information and advice, reablement and personal budgets. It is crucial that assistive technology is a central part of the assessment and support planning process, and is seen as a priority during the provision of reablement across a diverse range of service users.

Connect Service

At the first point of contact the Council will take the opportunity to provide information about ATT to the public, and to signpost to relevant sources of information and advice. This supports the aim of providing high quality information to the public and supporting them to 'self-serve' whenever possible, whilst providing a backup for those people who may not be able to afford to purchase ATT equipment or services.

Reablement Service

Assistive technology will play a central part in assessment and support planning within the reablement services. This will result in a customised assistive technology package that will meet the required outcomes in the support plan. The equipment provided will promote independence and give both service users and their families the confidence to live independently.

The Council will work in partnership with the Primary Care Trust to address issues concerning the risk of mis-management of medication, and explore the benefits of adopting telehealthcare solutions in Solihull via joint working between Health and Social Care.

Children's Services

The Council will undertake work to trial the use of ATT for parents of disabled children. This is not a service area that has used ATT previously but which might benefit significantly from its introduction.

Telecare Monitoring and Response

The Council currently uses Solihull Community Housing to deliver its Safe and Sound Assistive Technology service. A service specification for an ATT service has been developed following *Assistive Technology and Telecare Strategy, 2013-16*

the external evaluation of Solihull's Telecare service. This specification covers a range of services including monitoring and response. It is vital that ATT services include an appropriate response to alerts and alarms. The appropriate response will depend on the individual circumstances of the service user, and the type of alert or alarm. For example the appropriate response to a door exit alarm may be different to that to a smoke alarm. When a user begins using telecare it is important that a list of responders is agreed with them (and it is noted what the response to different types of alerts should be). Responders normally include family or neighbours in the first instance. The service specification includes provision of a 24 hour emergency response to act as a backup for people without family or neighbours to respond, or when people's family or neighbours are unavailable to respond. In some circumstances a request for emergency services may be the appropriate response – most commonly with smoke alerts or a panic button.

To facilitate access to people's properties by responders, service users are advised to use a key safe. Without access to this, the responder may need to force entry to the property which often involves the support of the Police, and is likely to result in a bill for repairs. 80% of Safe & Sound service users have a key safe.

The Community Equipment and Wheelchair Service (CEWS)

The Telecare Officer will be co-located with the Community Equipment and Wheelchair Service. This will enable an integrated management approach to a wider range of equipment, including telecare and assistive technology.

The jointly-funded service has extensive experience of working in partnership with NHS commissioners and providers. It is planned to build on this partnership to integrate the future development of telehealthcare services.

A number of opportunities to develop equipment display, demonstration and assessment are being considered, including ATT equipment.

Solihull Independent Living (SIL)

The SIL is Solihull's home improvement agency and is managed by Solihull Community Housing. Its key roles are to undertake adaptations, install equipment to promote independent living, and to carry out repairs.

SIL will be encouraged to identify people who could benefit from Assistive Technology, to make referrals to the "Connect/One Front Door" and circulate information to potential service users. This service is provided by Solihull Community Housing and naturally has strong links with the Safe & Sound service.

Personal Budgets / Direct Payments

Following reablement, people requiring ongoing social care services will be assessed for a Personal Budget. A support plan will be developed reflecting their choice of how their budget will be managed, and how it will be spent to best meet their assessed needs and personal outcomes. The support plan will fully consider the use of ATT.

5. Implementing the strategy

The elements of the necessary structure of the Telecare service need to be in place to deliver an efficient and effective service; enhancements are needed to the supporting systems,

processes and the culture in order to embed Telecare within Social Care and Health, and to raise awareness of technology and its potential application within the general public.

It has been complicated for citizens to understand how to access the services, and work out the best package of care and technology that will help support them at home. It has been even harder for them to make independent arrangements.

5.1 Telecare Steering Group

The Telecare Steering Group (TSG) is in place to oversee the implementation of Telecare across Solihull to enable citizens to live as independently as possible in their own homes. The TSG will ensure that the Telecare service links to other Adult Social Care services and to key objectives within the Directorate.

It will be the responsibility of this group to ensure a number of key activities are delivered

5.2 Embedding Telecare / Assistive Technology within existing and future strategies

ATT should be considered when any commissioning or strategic plan is being delivered which effects social care, health or housing. There is a role for Telecare to play in every element of the citizen's journey, from first point of contact and information requests, through to ATT supporting the achievement of outcomes and being an integral part of reablement delivery and on-going care needs. Examples of this work include the Independent Living and Extra Care Housing Strategy, the Health and Wellbeing Strategy and the Frailty Strategy.

Although it is clearly necessary to lead ATT improvements with a plan for integration and expansion, the most important effects will be in the delivery of the ATT service itself.

Commissioning staff will work with the Telecare service to ensure that future change plans for most service user groups and commissioned service contracts contain clear statements about the ways in which AT will be used to implement changes in the approach to care, improve care quality, and/or encourage better self-care.

Clear links are required between the ATTT strategy and the Reablement Strategy and Action Plan, to ensure Telecare is an integral element of Reablement delivery and ongoing care and support where applicable.

5.3 Change Management and ATT awareness

There is a clear need for raised awareness of ATT across Social Care, Housing and Health; this will require commitment to change management led by senior management.

In particular the following activities are required:

- Modifications to the assessment, review and recording process to ensure that /ATT is always considered carefully as an option or in combination with other services
- Increased levels of training and development to ensure that practitioners are confident in their assessments, advice on the use of equipment, and appropriately skilled in their responses to the information delivered by ATT
- Awareness training to form an element of induction training to all staff within Social Care across all levels.
- Changes to Social Care supervision and management practices to ensure that ATT is considered at every stage of the social care pathway.
- ATT interventions based on individual needs must be considered before cases are presented to panel.

- Changes to recording and monitoring of ATT using the Carefirst database.
- A Telecare performance dashboard is being created, providing key metrics and measures relating to the delivery of the ATT service – to be used to review progress, identify barriers at client group level or operational team level, target areas of focus for further development. The dashboard will be a key tool for the Telecare Steering Group and for presentation to the senior management team where appropriate.

It is not the aim that ATT services should become a separated or parallel branch of Social Care services; equally it is not the aim that ATT should replace the vital face to face contact that is so essential to good care.

5.4 Provision of ATT services

Delivery of ATT equipment and services will be delivered by a small number of external providers. A framework agreement will regulate this activity, and be based upon a robust, locally agreed service specification. The specification will include:

- Provision of appropriate ATT equipment (including both telecare and stand alone equipment) to meet requirements of ATT assessments
- Installation of ATT equipment
- Removal of ATT equipment
- Demonstration of equipment to users, carers and family members
- Maintenance of ATT equipment
- Provision of call handling for telecare equipment, including setting up appropriate responses to the different alarms/alerts that are installed
- Proactive calling
- Provision of 24 hour mobile response service where this is necessary
- Provision of monitoring information as required

6 Client Groups and Settings

The role of Telecare and appropriate targets for each client group and setting below should be established and measured

6.1.1 Older People and People at risk of falls

Older people and those at risk of falls will be able to access customised Telecare/Assistive Technology package either standalone or a monitoring and response service.

6.1.2 People with Dementia

Telecare and standalone equipment such as pill dispensers, automated medication prompts, GPS devices and tablet IT equipment will be explored to provide support to people with Dementia and their carers; along with partnership working with third sector organisations such as The Alzheimer's Society and the provision of information and awareness to local GPs and Health partners.

6.1.3 Carers

The role of ATT in providing support to Carers has a strategic fit with the Carers Strategy. Introduction of a monitoring service could be beneficial and cost effective where the Carer may

benefit from respite from caring. Carers may wish to spend Carers Direct Payments on ATT equipment.

6.1.4 People with Learning Disabilities

Telecare can greatly increase independence for people with Learning Disabilities in the community and their families/carers on a case by case basis. Working with care providers to increase the use of ATT and to encourage providers to increase their awareness and usage of ATT; there is a significant opportunity to incorporate ATT at the heart of the care and support to the individual, and to realise cashable benefits for the authority through the reduction of unnecessary levels of night cover – for example, a service user with epilepsy may not need a waking or sleeping night provided by a carer in their home if they have a care alarm, pendant and epilepsy sensor that will alert someone on call to respond in the event of a fit – it is less intrusive, it is more cost effective. There are opportunities for the role of ATT within Transitions, and to work with children and families, as well as schools to develop awareness of technology and the support it can provide.

6.1.5 People with Physical and Sensory Disabilities

Often equipment currently available is unsuitable for people with auditory impairment. Expanding the use of SMS texting via mobile phone technology will be particularly valuable for the deaf community, alongside careful selection of equipment for people with visual or hearing impairments to ensure alerts are communicated effectively. For example, RNID kits that include strobe light and vibrating alerts are appropriate for people who are deaf/hearing impaired.

6.1.6 Parents of Disabled Children

The use of ATT by parents of disabled children is an emerging market. The application of ATT equipment for this group has the potential to add significant benefits. The use of stand alone equipment has primarily been identified as a starting point. The alert need only be raised locally, within the house. Equipment detecting property exit, or that can detect floods or fire may be particularly valuable.

6.1.7 People using Reablement / Intermediate Care Service

ATT will be considered within every Reablement case and recommended to individuals requiring further services following Reablement – service users will be much more accepting of Telecare equipment if it is present during a period of Reablement, and acts as a safety blanket during the times when Reablement staff and carers are not present. The Intermediate Care Service will be encouraged to identify people who could benefit from ATT, and make referrals and circulate information to potential service users.

6.1.8 People Living in Extra Care Housing Schemes

ATT must be embedded into Extra Care housing and Independent Living schemes. The Council will work with schemes to identify the types of equipment that should be installed whilst also taking into account the ethical issues raised by equipment such as door sensors which could restrict an individual's right to privacy and risk-taking.

It is also recommended that awareness of ATT and evidence of its usage is included in contractual obligations when awarding future contracts in this area; providers should be

identifying ATT as a key component of delivering services and integrating technology into the initial design of new builds rather than installing it retrospectively.

6.1.9 People Living in Sheltered and Supported Housing

Strong links between appropriate support / care services within sheltered and supported housing schemes are important so that opportunities to develop use of Telecare and standalone technology can be identified, such as automated medication and home safety prompts.