TELECARE IN WALES

Lee Davis
Welsh Assembly Government
07808 727466
029 2080 1410
Lee.Davis@Wales.GSI.gov.uk

www.ssiacymru.org.uk/telecare
Helping to keep people in a lower care group for longer

Telecare: delayed frailty progression

No Telecare

- Low intensity needs (P5)
- Other long term care needs (P4)
- Case managed (P3)
- Requiring no formal care (P6)

With Telecare

- Low intensity needs (P5)
- Other long term care needs (P4)
- Case managed (P3)
- Requiring no formal care (P6)

EMH & Non-EMH

Care Homes

(P1 & P2)
Telecare to Manage Risk

Environmental And Security
- Fire
- Flood
- Gas
- Intruders

Social
- Nutrition
- Cognition
- Mobility

Medical
- Cardiac arrest
- Medication
- Asthma attack
Alarms – A Reactive Telecare System

Smart Sensors

Wireless alarm

Advanced Lifeline Unit

Contact & Coordination centre

Response Team

24 Hour Nurse

Community Alarm Centre

Fire Service

Ambulance

Relatives & friends

Out-of-hours GP

Lifting service

Fire

NHS Direct Wales
0845 46 47

24 hour Home Care

Mobile Warden

Emergency plumber

Duty Social

24 hour

Emergency

Gas fitter

24 Hour Gas Fitter

Police

Emergency

Police

GP

Out-of-hours

Police

Emergency

Police

GP

Out-of-hours

Police

Emergency

Police

GP

Out-of-hours
Are you currently delivering a Telecare service?

Yes = 22
No = 0

(last one began in October 2008)
All 22 Authorities are now delivering Telecare services
Each Authority has a Lead Officer for Telecare
Lead Officers are members of an all Wales LIN
Independent evaluation of Telecare in Wales will be presented to the Minister in February 2010
The evaluation will be based on the extent to which Telecare achieves outcomes such as later admissions to Residential care, reduced hospital admissions, reduced DToCs etc.
Individuals Offered Telecare = 15,641 (8,631)
Telecare not progressed = 2,433 (901)
Telecare Service delivered = 12,986 (7,514)
Telecare service removed = 1,450 (778)
New users since the inception of TCG funding = 12,117 (4,005)
Individuals receiving Telecare at 31 March 2009 = 13,384 (6,489)
Groups to which telecare service is specifically targeted (1)

- 21 Older People
- 20 people at Risk of Losing independence
- 20 Dementia
- 20 Falls
- 19 Hosp Discharge
- 19 DToCs
- 19 Critical & Substantial Needs
- 18 Receiving Social services
- 17 Community Reablement
Specifically targeted (2)

- 16 Physical Disability
- 16 People with Learning Difficulties
- 14 Carers
- 14 Mental Health
- 14 Home Care service Users
- 13 Chronic Diseases
- 13 people with Moderate Needs
- 13 Preventative Agenda
- 13 People Living Alone
Specifically targeted (3)

- 12 Intermediate Care
- 12 Long Term Conditions
- 12 Sensory Impairment
- 11 Open Access
- 7 Victims of crime
- 7 Domestic Violence
- 7 Extra Care Housing
- 7 Other
Yes = 18 (17)
No = 4 (5)

Average No. of Hours per week = 23
(lowest is 8)
WTE of 98 across 18 authorities
Previously 69 across 16 authorities and before that 46 across 14
Average of 4.45 per authority (4.33) (3.07)
Relatively evenly spread across Assessment, Installation, Review, Response & Removal
Are You delivering a formal response service?

Yes = 9

No = 13
<table>
<thead>
<tr>
<th>Status</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Piloting</td>
<td>1</td>
</tr>
<tr>
<td>Developing</td>
<td>3</td>
</tr>
<tr>
<td>Scoping</td>
<td>9</td>
</tr>
<tr>
<td>No Plans</td>
<td>2</td>
</tr>
</tbody>
</table>
Which Department leads on Delivery?

- Social Services: 10 (9)
- Social Services & Housing: 4 (8)
- Housing: 3 (4)
- Social Services & Health: 3
- Social Services, Health & Housing: 2
Active Partners (1)

- 21 Social Services
- 20 Housing Dept
- 19 Health Trust
- 18 LHB
- 15 Care & Repair
- 13 Supporting People
- 11 Fire & Rescue
Active Partners (2)

- 10 Voluntary Organisations
- 10 RSL
- 8 Ambulance
- 8 Primary care
- 6 Police
- 5 CSP
- 1 Community Equipment
- 1 CORGI Installer

- An average of 8.8 active partners per authority
Are you developing telecare as part of ICES?

Yes = 10

No = 12
Would you describe your telecare service as mainstreamed?

Yes = 19 (17) (15)

No = 3 (5) (7)
Is your Telecare service sustainable?

Yes = 15 (12) (9)

No = 7 (7) (13)

No Reply = 0 (3) (0)
The re-engineering of the way we deliver an integrated health and social care service.

Are we still doing this..... ?
The Social Care Battleground

- Tighter Eligibility Criteria vs. Low level Preventative Services
- Cuts to Services vs. Earlier Intervention to Promote Independence
- Traditional vs. Telecare
The Social Care Battleground

Question:
What will prevail? - Short term survivalism or long term sustainability.

Answer:
Organisations will need to work together in partnership and with innovation if we are going to meet the challenge to demonstrate that preventative services are more efficient in the long run.
Telecare in Wales

The re-engineering of the way we deliver an integrated health and social care service .....
Integration of Services Cost-effectively

County 1
- Coordinating & Contact Centre: 8am–6pm Mon - Fri
- Response Team 1
- Response Team 4
- Home

County 2
- Coordinating & Contact Centre: 8am–6pm Mon - Fri
- Response Team 2

County 3
- Coordinating & Contact Centre: 8am–6pm Mon - Fri

County 4
- Coordinating & Contact Centre: 8am–6pm Mon - Fri
- Clinic
- Response Team 3

TELECARE MONITORING CENTRE: 24/7
What would this mean? (1)

- Community Alarms would become a large scale plank of service delivery (integrating Social Care, Health & Housing Support)

- With the sophistication to manage different groups of needs reliably & robustly
The service would need the capacity to digest and make accessible the information that comes from delivering the service -- not just to enable more people to stay at home --- but also to gather the evidence needed to commission services more effectively
Because...
Note:
- Not Call Centre
- Not Control Centre
- Not Community Alarms
- Not Social Alarms
- Not even Monitoring & Response Centre

Contact & Co-Ordination Centre !!!
What would this mean? (3)

- A service to those who would have only very occasional contact when an emergency occurs … and
- A service to those for whom the the care technology is an intimate part of their everyday coping at home – supported by a close and trusting relationship with the staff at the contact and co-ordination centre. … and
- A service to everyone in-between
Actuality: December 2008

- Acute
- Complex
- Vulnerable
- Universal
Future Challenges

- BT21CN/Sky/Talk Talk
- Interoperability
- Codes of Practice
- Accredited Training – Professionalisation
- Charging for Telecare
- Integration of Telecare & Telehealth
- Partnerships and Pooled Budgets
- Regionalisation
- Where on the needs pyramid do we target telecare?
Telecare Capital Grant Evaluation

- External Evaluation from Imperial College London
- Aggregation/Summation/Analysis of All LA Evaluations
- Data from ‘Buying Solutions’ (PASA)
- ‘Desktop’ Survey of Telecare in UK & Beyond
- Economic Analysis – The effect of the Telecare Capital Grant on the Health & Social Care Economies (Randomised Sample Study)
- A WALES EVIDENCE BASE FOR TELECARE
So for 2010 – 2011

- We will have created a Wales-Wide Evidence Base for Telecare
- Identified the effect that Telecare is having on the Health and Social Care Economies in Wales
- Identified the Contribution that Telecare is making to the challenges set in *Fulfilled Lives, Supportive Communities and Designed for Life*