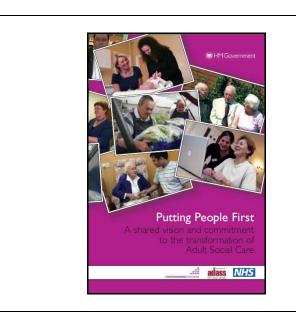


CSIP Telecare eNewsletter

Happy New Year

January 2008 (1)

Welcome to the January 2008 CSIP telecare eNewsletter. During the first quarter of 2008, CSIP Networks will be publishing additional newsletters. So make sure you are registered on the web site to receive them.



Section 3.3 "..... Person centred planning and self directed support to become mainstream and define individually tailored support packages. Telecare to be viewed as integral not marginal....."

Putting People First – 10 December 2007

We are building a database of 200 outcomes from telecare and telehealth since Building Telecare in England in 2005. As telecare and telehealth services are mainstreamed, we are now looking for good practice and best practice, the lessons learned, the gold standard care pathways, the involvement of users, patients and carers, the integrated services, the innovations. This is expected to link in with the CSCI performance assessment arrangements for April 2008 which will be finalised in the coming weeks.

Forthcoming CSIP 2008 telecare events – London (24 Jan), Leeds (29 Jan), Manchester (4 Feb), Taunton (7 Feb) and Birmingham (12 Feb) – Booking still available, places now going fast at most venues

The Care Services Improvement Partnership (CSIP) is responsible for providing general implementation support to organisations building their telecare and telehealth programmes.

If you are an organisation implementing telecare and have an interesting local telecare story for inclusion in a future newsletter then e-mail Mike Clark (newsletter editor, CSIP Networks) at telecare@csip.org.uk

If you or a colleague would like to receive future copies of the newsletter then all you need to do is register at <u>http://www.icn.csip.org.uk/index.cfm?pid=12</u>

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the local authority letters	
Appendix 2 – CSCI projections for additional users in 2007/8	Page 49

Item 1 – some of the current issues are considered for commissioners and service providers involved in mainstreaming telecare. This includes the structure of personal budgets and charging.

Item 2 – covers the recent DH publication on long term conditions

Item 3 – provides update information on the five CSIP events for January/February 2007/8 – have you booked?

Item 4 – Provides a brief update on the TSA codes

Item 6 – *lists a wide range of links on telecare and telehealth of relevance to organisations implementing telecare and telehealth*

Item 7 is out normal events listing including Housing LIN meetings

Appendix 1 covers the CSCI letters to social care authorities (Nov 2007) – what comments were made about telecare implementation in your area?

Appendix 2 covers the projections from 150 social care authorities for new users in 2007/8 – how is your local authority doing?

Next newsletter – Mid January 2008 covering telehealth and programmes for the events

Glossary:

ALIP – Assisted Living Innovation Platform AT – Assistive Technology BERR – Business Enterprise and Regulatory Reform CSCI – Commission for Social Care Inspection DCLG – Department for Communities and Local Government FACS – Fair Access to Care Services NHS CfH – NHS Connecting for Health NHS PASA – NHS Purchasing and Supply Agency PT Grant or PTG – Preventative Technology Grant TSA – Telecare Services Association

Prepared by Mike Clark for CSIP Networks

Local authorities and their partners will be mainstreaming telecare and some telehealth services during 2008.

How is your organisation placed to ensure that telecare is integral to person centred planning and self directed support as set out in 'Putting People First'?

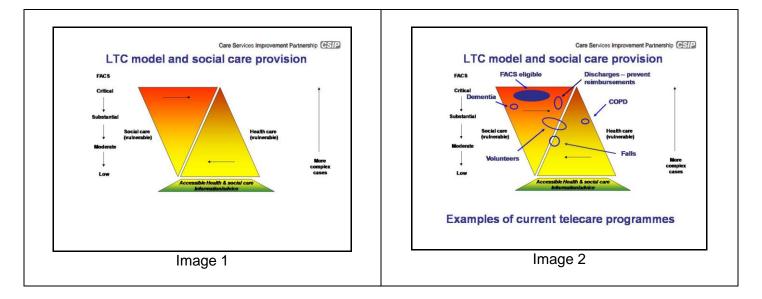
Here are some areas to consider as you take your services into the mainstream.

Note: image sizes can be increased in the Word Version – slides are also available at: http://www.icn.csip.org.uk/_library/Resources/Telecare/Support_materials/Jan_2008_newsletter_images.ppt

1.1 Commissioning - getting the balance right

Have you got the balance of services right between:

- FACS eligible eg critical/substantial
- Targeted eg falls, dementia support
- Preventative including Supporting People
- Self care and self directed support



In image 1, the right hand triangle is a typical long term condition management triangle with more complex case management at the top and self management at the broader base. The left hand social care triangle is upturned to show a broader area for FACS eligible service users. There is little overlap of the triangles as integration and data sharing is still limited locally for various reasons.

In image 2, current telecare and telehealth programmes are mapped onto the triangles. Although, specific programmes are carefully planned, there is often an unclear sense of where the telecare recipients are located within the overall picture so evaluation results may prove inconclusive. The majority of social care authorities are currently providing telecare for FACS eligible users - usually Critical/Substantial.



Image 3

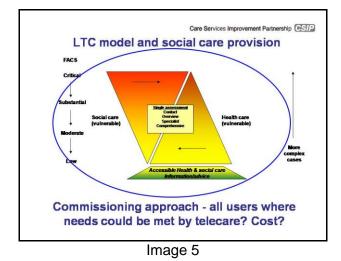
In image 3, the local commissioning emphasis is placed on the critical and complex cases that often become urgent when needs change or there is an exacerbation (eg COPD) or fall at home. These will be the intensive home care service users and some of the more complex (and sometimes frequent) admissions to hospital – local authorities and health trusts tend to separately know who they are but they will not know how many people with intensive home care also have COPD/heart failure. It is understandable that human contact resources are located in these areas eg care/case management visits and domiciliary care, but how many people that could benefit from telecare through direct support or self care miss out or have fallen of the social care radar as eligibility criteria have been changed? What is the cost of supporting these groups? How do telecare and telehealth make a difference as part of integrated health, housing and social care services?



Image 4

In Image 4, the commissioning emphasis is on Low/Moderate under FACS who often no longer receive a social care service and the self-management of long term conditions. Local authorities and health trusts are less likely to know who these people are. They are less likely to attend hospital for their long term condition or they used to be Low/Moderate under FACS and no longer receive a service. There could be large numbers in these groups – do you know who they are? What is the cost of supporting these groups? Have you established locally that these preventative care pathways work? Through telecare and telehealth support, can you help prevent someone who was 'Low' under FACS being unexpectedly entering a care home at £350+ per week or a smoker with respiratory problems attending hospital four times in the next year with shortness of breath at £1700 to £2300 per hospital stay.

How do telecare and telehealth make a difference as part of integrated health, housing and social care services?



With the Joint Strategic Needs assessment, local authorities, health trusts and their partners will need to look at the whole population. This means using risk stratification tools and high quality baseline data. (References were listed in the December newsletter).

In y	your area, how many people
Hav	ve dementia?
Fell	last night?
Hav	ve a long term neurological condition?
Hav	ve angina, heart failure, diabetes?
Live	e alone with poor housing at risk of crime?
Hav	ve intensive home care, COPD and depression?
Atte	end A&E regularly?
Cοι	Ild be in a care home in the next year?
Сог	Ild benefit from preventative support?
Cοι	Id benefit from integrated telecare/health services

Image 6

So, do you have the intelligence, record systems, data sharing protocols in place? Do you know how many people have dementia or fell last night and were admitted to hospital?

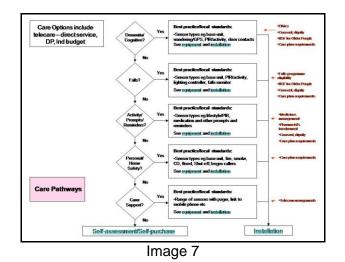
Increasingly, health, housing, social care and third sector organisations will need to bring their skills and expertise together to address these issues.

Croydon virtual wards approach Link: <u>http://www.networks.nhs.uk/uploads/06/12/croydon_virtual_wards_case_study.pdf</u>

Combined predictive model Link: <u>http://www.networks.nhs.uk/177.php</u>

PARR++

Link: http://www.kingsfund.org.uk/current_projects/predictive_risk/patients_at_risk.html



In Image 7, Have you identified the care pathways where telecare and telehealth make a difference and embodied service options for use by care managers, community matrons and other service commissioners and providers?

1.2 Costing and charging

If you plan to charge for telecare services from April 2008, you should have your arrangements in place and signed off ready to implement.

For the first year of telecare implementation, many organisations decided not to charge in order to build their numbers of users and sort out technical and other problems.

Charging (From Building Telecare in England, DH, July 2005)

Where, as a result of a community care assessment, telecare equipment is provided by a local authority as an aid for the purposes of assisting with nursing at home or aiding daily living, it should be provided free of charge.(1)

A charge may be made for the service elements (revenue) of telecare. Charging should be in line with local *Fairer Charging and Fairer Access to Care Services* (FACS) policies.

Where it is part of the local strategy to provide telecare packages to people who are not assessed as requiring them as an aid for the purposes of assisting with nursing at home or aiding daily living, for instance as a preventative service, a charge can be made for the equipment and the service (revenue) elements. In these instances the FACS means test can be used, in the same way as for Supporting People charging assessments.

Where telecare is part of a joint package of health and social care providers will need to agree their respective responsibilities and charge accordingly.

(1) See the Community Care (Delayed Discharges etc.) Act (Qualifying Services) (England) Regulations 2003 (S.I. 2003/1196). This applies only to aids provided after 9th June 2003.

Web link:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_54643 18

Charging is of course a local decision – local authorities have powers to charge for certain social care services.

However, it needs to be carefully thought through and set out within a legal and equitable framework. Local authorities will be familiar with 'fairer charging for non-residential services' and will need to make a decision on how to link telecare charging with other services where appropriate eg domiciliary care, day care.

Charging issues to consider:

- How are charges different for a 'user-assessed' service compared with a 'preventative' service?
- If telecare is used in a falls programme is it 'health' or 'social care'?
- If medication management/prompts are used as part of a telecare service is it 'health' or 'social care'?
- What happens if the user is on 'Supporting People' how are service charges calculated, what happens about housing benefits, could users end up paying twice?
- Are 'Installation' and 'maintenance' of telecare counted as 'equipment' or a 'service'?
- How are arrangements made for direct payments and individual budgets?
- What happens if the service is classified as 'intermediate care'?
- How do 'self care' arrangements fit in?
- If charges are too high, will people refuse the service?
- How do you move from a 'no charge' pilot into a mainstream service?
- What happens if the user has a financial assessment and the ceiling has already been reached?
- Could there be different service charges for a 'home visit' service following an alert?
- If charging did not apply during the pilot period, will it affect a local evaluation and user take-up of services in the long term if a charge is introduced?

See CSIP Telecare eNewsletter for May 2007- www.icn.csip.org.uk/telecarenewsletters

At this time, few telecare providers are making it explicit on web sites and in leaflets that users will not be charged for equipment under certain circumstances (see Building Telecare in England). CSIP has not heard of any challenges to charging policies for telecare in England, however, if charges appear to be high to the user, then it is inevitable that a challenge will follow somewhere over the coming months. Remember, also that Building Telecare in England and the CSCI performance assessment takes a wide view of telecare and would include pendant alarms.

If your telecare sensor charge is higher than your community alarm charge, you may need to explain why if challenged where there is no actual difference in the service provided (eg response/home visit). Effective telecare configurations should reduce the number of alerts in many cases compared to a community alarm, so local authorities need to be clear about any differences in service charges based on numbers and types of sensors to avoid being challenged about charges for equipment (see Building Telecare in England). An example where charging may be different to a community alarm weekly monitoring and response charge is where lifestyle monitoring is in place.

So what could happen if your mainstream services commence in April 2008 and you have not costed your service or if you have not set charges or your charges are too high?

Let's look at a few scenarios which could possibly apply where local authorities and their partners have not properly prepared for telecare mainstreaming but rapidly progress their Putting People First arrangements for personal budgets.

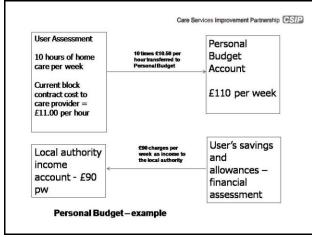


Image 8

In image 8, a user has been assessed for ten hours per week of home care. The user's care is currently included in a block domiciliary care contract. The user opts for a personal budget (PB) and an amount is paid into the user's PB account. At the moment, the user pays £90 per week in charges to the local authority under the fairer charging for non-residential services arrangements.

A variation to this includes a situation where the direct payment hourly rate is higher (eg £12.00) than the block contract rate for the current domiciliary care provider. If the £11.00 per hour is at the lower end of the rate scales, then the user has no choice unless he/she tops up the amount to change to another provider. Local authorities would need to be clear about direct payment rates.

If a user was receiving telecare at no charge as part of their care plan, the local authority would now have to release an amount equivalent to their weekly service costs into their personal budget so that the user can pay for the service or choose another supplier if they wish. Local authorities may be surprised at the weekly costs of telecare service provision if they have not already calculated them (remember, as it is a FACS-assessed user, Building Telecare in England indicates that users should not be charged for equipment).

10 hours of home care per week	10 times £10.50 per hour transferred to Personal Budget plus £15 per week for telecare	Personal Budget Account
Current block contract cost to care provider = £11.00 per hour		£125 per week
Telecare - £15 per week		
Local authority income	£90 charges per week as income to the local authority	User's savings and allowances –
account - £90 pw		financial assessment

Image 9

In Image 9, a weekly charge currently covered by an SLA/contract with a service provider is now transferred to the user's personal budget account. This impacts on the SLA when the money is taken from the budget transfer to the service provider and also if the user exercises choice and selects another telecare provider. If no charge has been set for telecare, then there is no increase in income to the local authority. If the charge is set too high, users may decide not to continue with the service and ask for the equipment to be withdrawn. If a ceiling is reached under financial assessment, then there may not be a charge for the telecare component. Telecare would include community alarms (see Building Telecare in England).

If a user's care package currently includes telecare and no amount is transferred to their personal budget to pay for the current or new provider and a charge is then made, then users will not have the money to pay a service provider from their account – they will no doubt ensure that their personal care is covered first. This could lead to requests for telecare services to be terminated by vulnerable users who are currently benefiting.

The situation becomes more complex if there is a health service, Supporting People arrangement, intermediate care etc as previously mentioned.

This means it is important that local authorities and their partners fully cost their services and examine all of the scenarios for service provision and charging. It also opens up the possibility of domiciliary care providers who are CSCI registered offering telecare and telehealth services to users as value-added services. It also identifies that local authorities and their partners need to consider seriously how users can access independent advice and guidance when using their personal budgets in future to access telecare services.

What are the current plans in your organisation for implementing 'Putting People First' and commissioning telecare for the longer term? e-mail Mike Clark at <u>telecare@csip.org.uk</u>

Note: a fuller discussion on the impact of Putting People First on Telecare Services was included in the December 2007 newsletter:

Telecare eNewsletter - December 2007 (pdf - 614Kb): <u>http://www.icn.csip.org.uk/nl/?l=181_1_1</u> Telecare eNewsletter - December 2007 (doc - 2.31Mb): <u>http://www.icn.csip.org.uk/nl/?l=181_1_12</u>

1.3 Telehealth, telemedicine and e-Health – just the beginning

CSIP are now receiving weekly and sometimes daily information about telehealth initiatives and the scope and innovation is moving well beyond vital signs monitoring to include disease management, public health management (eg obesity management and smoking cessation) video and text services.

Some early information is available from the White Paper Long Term condition Demonstrator programme as follows:

Links:

http://www.e-health-insider.com/news/3310/dh_telecare_demonstrator_trials_to_start_work http://www.e-health-insider.com/comment_and_analysis/278/2008:_the_year_telecare_grows_up_tcq

Here is a roundup of recent telehealth examples from the UK and around the world.

Note: CSIP does not endorse particular products or services and is not responsible for the content of external web sites.

Roll out of digital technology revolutionizes NHS Patient Care in England – picture archiving and communication systems

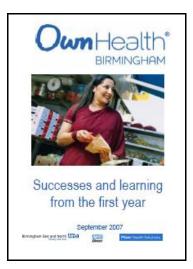


Link: http://www.connectingforhealth.nhs.uk/

NHS e- records programme

Link: http://news.bbc.co.uk/1/hi/health/7130627.stm

Birmingham PCT to extend its telephone-based care management programme from 2000 to 27,000 patients



Links:

http://www.ehiprimarycare.com/news/birmingham_pct_to_extend_telecare_to_27,000 http://www.ehiprimarycare.com/img/document_library0282/BirminghamOwnHealth_-_successes_and_learning_from_the_first_year.pdf www.hiicsg.bcs.org/~careadmin/16_October_Telehealth_Seminar_Pfizer.ppt http://www.publichealthconferences.org.uk/health_inequalities_2007/downloads/Birmingham_Mendelsohn.pdf

Southampton PCT – ECG monitoring

Links: <u>http://www.wirelesshealthcare.co.uk/wh/news/wk49-07-0006.htm</u> <u>http://www.ehiprimarycare.com/news/3272/southampton_city_to_use_cardiac_telemedicine</u> <u>http://www.bjhcim.co.uk/news/2007/n712009.htm</u>

Mobile Phone Based Services for Obesity Monitoring

Link: http://www.wirelesshealthcare.co.uk/wh/news/wk46-07-0001.htm

National healthcare action plan for Scotland in 2008

Includes references to the Scottish Centre for Telehealth and examples covering access to tumour specialists and other remote diagnostics.

Link: http://www.e-health-insider.com/news/3309/new_e-health_strategy_planned_for_scotland

Walsall & Hull use telehealth for COPD and Congestive Heart Failure

Link:

http://www.publictechnology.net/modules.php?op=modload&name=News&file=article&sid=13121 http://www.openpr.com/news/33547/Walsall-and-Hull-Launch-Mainstream-Deployments-of-Telehealth-for-People-with-COPD-and-Congestive-Heart-Failure.html http://www.tunstall.co.uk/news.aspx?PageID=14&NewsID=98

NHS text messaging implemented for 165,000 patients in Hammersmith & Fulham

Link:

http://www.publictechnology.net/modules.php?op=modload&name=News&file=article&sid=10421

Islington PCT uses texts for stop smoking campaign

Link:<u>http://www.ehiprimarycare.com/News/2528/islington_pct_uses_texts_for_stop_smoking_campaign</u>

New tool for managing heart health – American Heart Association and Microsoft

A new partnership between the American Heart Association and Microsoft can help consumers manage their blood pressure and track other health data online.

Link: http://www.register-herald.com/features/local_story_315171031.html?keyword=topstory

Microsoft Health Vault – includes links to compatible devices

Links: http://healthvault.com/ and http://healthvault.com/ConnectionCenter/

The cost-utility of a care coordination/home telehealth programme for veterans with diabetes

Link:

http://rsm.publisher.ingentaconnect.com/content/rsm/jtt/2007/00000013/0000006/art00010;jsessionid=aapjkac87job7 .henrietta

Alberta adds 14 projects to telehealth network - The funded projects include management of intravenous chemotherapy, pediatric surgery consultation, asthma and allergy education, telemental health outreach services, and care for HIV patients.

Link: http://www.canhealth.com/News736.html

Home telehealth in Long Island

Link: http://www.libn.com/article.htm?articleID=41017&cid=0&ei=76Z0R9yoF4ec-wHC34T-Dg

Telemedicine for diabetics focuses on prevention

Link: http://www.modbee.com/local/story/156459.html

FCC in USA dedicates \$417 million to expanding rural telehealth systems

Link: http://www.ama-assn.org/amednews/2007/12/17/gvsb1217.htm

Lucas Andreas Hospital (Netherlands) – Phillips Motiva

Links: http://www.hesmagazine.com/story.asp?sectioncode=196&storyCode=2047699 http://www.bjhcim.co.uk/news/2007/n711020.htm

Adoption of telemedicine in Scottish remote and rural general practices: a qualitative study Link: <u>http://articles.icmcc.org/wpc/?p=1019</u>

Patients' perceptions of a home telecare system

Link: <u>http://articles.icmcc.org/wpc/?p=932</u>

Mobiles are new health aid

Link: http://www.oxfordmail.net/news/headlines/display.var.1931624.0.mobiles are new health aid.php

NFC Technology and the delivery of care in the home

Link: http://www.prweb.com/releases/2007/11/prweb566465.htm

US Study estimates potential savings from telehealth technologies Link: <u>http://mhanewsnow.typepad.com/pressroom/2007/11/study-estimates.html</u>

Health text messaging

Link: http://www.dailyherald.com/story/?id=99286&src=120

Southampton Primary Care Trust Diabetes Patient Care - iPoint-media Link <u>http://www.pr.com/press-release/64746</u> http://www.newswiretoday.com/news/27476/

Cell Phones Helping To Keep You Healthy

Link: http://www.ktiv.com/News/index.php?ID=20834

Feasibility of epilepsy follow-up care through telemedicine: A pilot study on the patient's perspective

Link: http://www.blackwell-synergy.com/doi/abs/10.1111/j.1528-1167.2007.01464.x

The future of telemedicine - take the organizational challenge

Link: http://articles.icmcc.org/wpc/?p=1018

German industry group publishes telemedicine standards

Link: http://ehealtheurope.net/news/3302/german industry group publishes telemedecine standards

Albertans to monitor own health status using cellular technology

Link: <u>http://www.alberta.ca/home/NewsFrame.cfm?ReleaseID=/acn/200712/22760E8BEE0BC-DB7C-2380-27577D76B7FFCB69.html</u>

Using robotic teleconferencing to monitor patients after urologic surgery

Link: http://www.sciencedaily.com/releases/2007/12/071217162528.htm

Cellular telemonitoring system

Link: http://www.reuters.com/article/pressRelease/idUS112032+07-Dec-2007+PRN20071207

Walsall Primary Care Trust – diabetes management – t+medical

Link: http://forum.tplusmedical.com/viewtopic.php?p=216#216

Glucose monitoring

Link: http://www.vitalsignsreport.com/2007/11/the-future-of-glucose-monitori.php

Cancer care by mobile

Link: http://www.innovations-report.de/html/berichte/medizintechnik/bericht-96866.html

Smart technology developed to monitor wearer's vital signs

Link: http://www.technical-textiles.net/htm/f20071125.716561.htm

Digital Healthcare provides software for national retinal screening service

Link: http://www.hesmagazine.com/story.asp?sectioncode=196&storyCode=2047674

Sheffield PCT – COPD management

Link: <u>http://www.ukprwire.com/Detailed/Health_Wellbeing/Telehealth_Specialist_Tunstall_Teams_up_with_Sheffield_Primar</u> y_Care_Trust_to_Celebrate_World_COPD_Aw_12033.shtml

Hotspots for COPD

Link: http://www.lunguk.org/media-and-campaigning/media-

centre/latestpressreleases/BLFrevealsUK%E2%80%99stop%E2%80%98hotspots%E2%80%99forlifethreateninglungdiseaseCOPD.htm

Weather forecast information and COPD

Bradford and Airedale Teaching Primary Care Trust is one of the first in the country to work with the Met Office to pilot a system to alert people suffering from Chronic Obstructive Pulmonary Disease (COPD) about cold weather.

http://www.thetelegraphandargus.co.uk/news/newsindex/display.var.1870243.0.forecast_is_brighter_for_vulnerable_p atients.php

COPD patients use BlackBerrys to send reports on their health to researchers

Links: http://canadianpress.google.com/article/ALeqM5guymCGGvPlibe9i203FEZ18Ztriw

The cost of moderate and severe COPD exacerbations to the Canadian healthcare system *Links:*

<u>http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6WWS-4RD44BS-</u> <u>1&_user=10&_rdoc=1&_fmt=&_orig=search&_sort=d&view=c&_acct=C000050221&_version=1&_urlVersion=0&_useri</u> <u>d=10&md5=50fa613b0f8f0ebb3dfa7a0791101b6f</u> http://www.theglobeandmail.com/servlet/story/RTGAM.20071120.wlcopd20/BNStory/specialScienceandHealth/home

Impact of Chronic Obstructive Pulmonary Disease on Long-Term Outcome of Patients Hospitalized for Heart Failure

Link:

Link:

http://www.sciencedirect.com/science? ob=ArticleURL& udi=B6T10-4RD9FJ1-6&_user=10&_rdoc=1&_fmt=&_orig=search&_sort=d&view=c&_acct=C000050221&_version=1&_urlVersion=0&_useri d=10&md5=68a1b4739c68d4ea962b8a32ba4fffc3

Valley Care – heart failure monitoring in Northumberland

Link: http://www.tunstallresponse.co.uk/assets/literature/Telecare%20Times%20issue%2028.pdf

Telehealth and diabetes - recent reports

Link: http://www.connected-health.org/programs/diabetes.aspx

Lose weight with remote monitoring

Link: http://www.medgadget.com/archives/2007/11/get_serious_and_loose_some_fat_with_a_remote_monitoring_system.h tml

Health booths in Scotland

Link: http://www.e-health-insider.com/news/3140/healthcare_booths_go_on_trial_in_scotland

Telehomecare and remote monitoring technologies

Link: <u>http://www.advamed.org/MemberPortal/About/NewsRoom/NewsReleases/pr-10-30-07-</u> telehomecare_remote_monitoring_report.htm

Central Surrey and COPD

Link:http://www.ehiprimarycare.com/news/2565/central_surrey_use_telemedicine_to_tackle_copd

Wrap up warm in Scotland with help from telemedicine

Link: http://news.scotsman.com/ViewArticle.aspx?articleid=3589005

What Is Telemedicine? A Collection of 104 Peer-Reviewed Perspectives and Theoretical Underpinnings

Link: http://www.liebertonline.com/doi/abs/10.1089/tmj.2006.0073

Severe Comorbidities Lead to Neglected Diabetes Self-Care

Link: http://www.medpagetoday.com/Endocrinology/Diabetes/tb/7399

Cancer Patients May Benefit from Reporting Symptoms Online in Real Time

Link: http://www.mskcc.org/mskcc/html/82473.cfm

Heart check-ups by phone offered over Christmas in Manchester

Link: http://www.ehiprimarycare.com/news/3324/heart_check-ups_by_phone_offered_over_christmas

Telehealth Research Group in Bucks

Link: http://bucks.ac.uk/about/structure/faculties/society_and_health/faculty_research/telehealth_research_group.aspx

California's commitment to Health Information Technology under their comprehensive health care reforms



Link: <u>http://www.fixourhealthcare.ca.gov/index.php/facts/more/6775/</u> http://www.fixourhealthcare.ca.gov/

The next newsletter will provide an update of sites around the country working on telehealth and link to a new CSIP Networks telehealth briefing.

1.4 Telecare support for people with dementia

27 December 2007 saw the debate spring into action about 'electronic tagging' with a statement from the Alzheimer's Society.

Alzheimer's Society	Leading the fight against dementia Help support the Society Donate Search Accessibility settings Advanced search
Home About us Policy	Position statements
> About us	Electronic tagging
The Alzheimer's Society	
Policy	Alzheimer's Society position statement
Annual reports	Electronic tagging has the potential to offer benefits to people with dementia and their carers.
Contact us	But practical and ethical issues have yet to be fully addressed.
> About dementia	Background
> Local information	
News and media	Electronic tagging has the potential to ease the concern and worry that carers may have
> Support us	about the person they care for. It may enable some people with dementia to have greater freedom of movement and independence, and reduce the use of both behavioural drugs and
Researchers and	physical restraints.
professionals Talk	However, a balance needs to be struck between the benefits to the individual concerned and the infringement of a person's civil liberties. Technology, which is often used to 'secure' animals, retail products and prisoners, should not automatically be transferred to people with dementia without full consideration of the ethical issues.
	The Society is keen to point out that what is perceived to be 'wandering' is often not a problem for the person with dementia. Walking about in a safe environment provides enjoyable exercise and may help a person sleep better. It may also be symptomatic of something else - for example, pain or discomfort - that needs to be addressed rather than ignored by restraining the person.
	The Society campaigns for:
	 Further research on electronic tagging as well as other forms of surveillance such as infra-red, electronic and heat sensors to assess whether people with dementia are

The Department of Health has said: "We welcome the debate around safer walking technology and look forward to hearing people's views on this from the Alzheimer's Society."

It will be interesting to see how this debate develops as we also move into the areas of implants which could support a wide range of health and social care scenarios including dementia support, insulin pumps, nerve stimulation for stroke etc.

This issue will become an important one for the Government's planned Dementia Strategy for Autumn 2008.

What approach has your organisation taken to handling ethical and consent issues for telecare and other assistive technology devices? Let us know by contacting Mike Clark at <u>telecare@csip.org.uk</u> and we will build your feedback into the CSIP Networks input into the Dementia Strategy.

Note: CSIP does not endorse particular products or services and is not responsible for the content of external web sites.

News Links:

http://www.alzheimers.org.uk/site/scripts/news_article.php?newsID=239

http://www.alzheimers.org.uk/site/scripts/documents_info.php?categoryID=200167&documentID=551 http://news.bbc.co.uk/1/hi/health/7159287.stm

http://www.timesonline.co.uk/tol/life_and_style/health/article3097496.ece

http://www.dailymail.co.uk/pages/live/articles/health/thehealthnews.html?in article id=504694&in page id=1797 http://www.guardian.co.uk/society/2007/dec/27/longtermcare.socialcare

http://www.guardian.co.uk/society/2007/dec/28/longtermcare.socialcare

http://blogs.guardian.co.uk/joepublic/2007/12/dementia_tagging_is_the_way_ah.html

http://www.allheadlinenews.com/articles/7009554583

http://www.telegraph.co.uk/health/main.jhtml?view=DETAILS&grid=&xml=/health/2007/12/31/htag131.xml http://news.scotsman.com/uk/Charity-backs-dementia-patient-tags.3621482.jp

Alzheimer's Society statement:

http://www.alzheimers.org.uk/site/scripts/news_article.php?newsID=239 http://www.alzheimers.org.uk/site/scripts/documents_info.php?categoryID=200167&documentID=551

Use of RFID:

http://www.informationweek.com/blog/main/archives/2007/12/the_reverse_con.html

Implants:

http://www.verichipcorp.com/news/1196870556 http://www.verichipcorp.com/news/1197464691 http://www.verichipcorp.com/content/solutions/wander_prevention http://www.cbn.com/cbnnews/usnews/060918a.aspx http://www.rfidtechnology.qoqlo.com/verichip-human-implant.php http://en.wikipedia.org/wiki/VeriChip http://en.wikipedia.org/wiki/VeriChip http://www.washingtonpost.com/wp-dyn/content/article/2007/09/08/AR2007090800997_pf.html http://www.newswithviews.com/McIntyre/Liz6.htm http://www.businesswire.com/portal/site/google/index.jsp?ndmViewId=news_view&newsId=20071205005583&newsLa ng=en

California legislation on implants: <u>http://info.sen.ca.gov/pub/07-08/bill/sen/sb_0351-0400/sb_362_bill_20070627_amended_asm_v95.pdf</u> <u>http://www.aroundthecapitol.com/Bills/SB_362/</u> http://www.leginfo.ca.gov/cgi-bin/postguery?bill_number=sb_362&sess=CUR&house=B&author=simitian

Project Lifesaver – USA: <u>http://projectlifesaver.org/public_html/aboutus.htm</u> <u>http://www.zwire.com/site/news.cfm?newsid=19137406&BRD=2605&PAG=461&dept_id=523946&rfi=6http://www.sanl</u> <u>uisobispo.com/news/local/story/217643.html</u> <u>http://www.ledger-enquirer.com/news/story/199990.html</u> <u>http://www.denverpost.com/opinion/ci_7643183</u> <u>http://www.fayobserver.com/article?id=278964</u> http://action3news.com/Global/story.asp?S=7552985

Device examples (see also NHS PASA framework for telecare): http://www.ehiprimarycare.com/news/2257/new_gps_telecare_bracelet_to_go_on_sale http://www.prnewswire.co.uk/cgi/news/release?id=184581 http://www.hoise.com/vmw/06/articles/vmw/LV-VM-12-06-31.html http://www.newswire.ca/en/releases/archive/October2006/24/c3671.html http://www.wherify.com/wherifone/ http://www.wanderingindementia.com/index.html http://www.justchecking.co.uk/ http://www.tunstall.co.uk/main.aspx?PageID=44 http://www.vivatec.co.uk/dementia_wandering.html

The Scottish Telecare Learning Network have a draft factsheet on ethics and assessment based on their workshop that was held in October 2007.

Link: http://www.jitscotland.org.uk/action-areas/themes/telecare/learning-network.html

ATdementia <u>http://www.atdementia.org.uk/</u>

Radio tagging ethic needed: http://www.australianit.news.com.au/story/0,24897,22785408-5013038,00.html

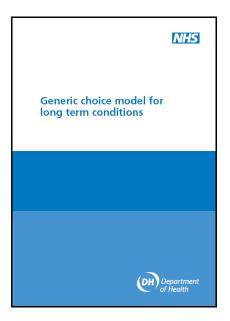
The Emerging Ethics of Humancentric GPS Tracking and Monitoring: <u>http://csdl2.computer.org/persagen/DLAbsToc.jsp?resourcePath=/dl/proceedings/&toc=comp/proceedings/icmb/2006/</u> 2595/00/2595toc.xml&DOI=10.1109/ICMB.2006.43

Children/school pupils: <u>http://news.bbc.co.uk/1/hi/technology/4268203.stm</u> <u>http://www.tech.co.uk/gadgets/phones/mobile-phones/news/kids-mobile-keeps-tabs-on-them-at-all-</u> <u>times?articleid=1926445250</u>

1.5 Good practice for medication support using telecare and other devices

Does your telecare programme include AT medication support for people with dementia, long term conditions, sensory impairment or difficulties with handling tablets? CSIP are currently bringing together examples of good practice for medication support using remote monitoring and standalone devices. We would be interested in hearing how your local programmes are working, arrangements for filling dispensers and handling alerts. Contact Mike Clark at <u>telecare @csip.org.uk</u>

a) Generic choice model for long term conditions



References are made to telecare and telehealth in this important document

Link: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081105



b) NHS Institute for Innovation and Improvement

Links:

http://www.institute.nhs.uk/care_outside_hospital/care/care_outside_hospital.html

http://www.institute.nhs.uk/images//documents/CareOutsideHospital/NSHI%20Bringing%20Care%20Closer%20to%20 home%20v3.pdf

http://www.institute.nhs.uk/option.com joomcart/Itemid,26/main page,document product info/products id,338.html

Update from Mike Clark, CSIP Networks

The scheduled CSIP events are as follows and booking will shortly reach the maximum numbers for most of the sites:

Venue	Date	Places Remaining at 31/12/2007
London	24 January 2008	14
Leeds	29 January 2008	13
Manchester	4 February 2008	17
Taunton	7 February 2008	39
Birmingham	12 February 2008	17

Link:

http://www.icn.csip.org.uk/index.cfm?pid=476§orID=170

Some of the events are proving popular and we may have to restrict some requests where a number of people are registering from the same organisation. Around 325 people have now booked so it is important to make your arrangements as soon as possible. We are monitoring the lower take-up for the Taunton event with 36 booked at this time, but places at the other sites are moving quickly. One discussion option for the Taunton event is to launch a longer term telecare and telehealth forum covering the South West - are you interested?.

The main aim of these five events is for organisations to share the impact of their services on stakeholders and hear what others are doing from neighbouring areas since the publication of Building Telecare in England in 2005. In addition, attendees will hear more about telehealth and the best practice approaches that will take local authorities, health trusts, third sector and partner organisations into the future as telecare and telehealth move towards mainstream services.

The outcomes events are about:

- ✓ Redesigning and restructuring services to include telecare and telehealth options
- ✓ Developing new ways of partnership and integrated working through telecare and telehealth
- ✓ Promoting care closer to home, dignity and choice using telecare and telehealth
- ✓ Adjusting care pathways to include cost-effective AT solutions
- ✓ Identifying implementation barriers and how they have been overcome
- Progress made with learning disability and other service users who are now benefiting from telecare solutions
- ✓ Balancing FACS-eligible, preventative, targeted and self care approaches
- ✓ Working with suppliers to develop innovative solutions to local problems
- ✓ Introducing self-assessment and supported self directed care, direct payments, personal budgets
- ✓ Identifying sensor configurations that are effective for dementia assessment and support
- ✓ Obtaining initial evaluations on vital signs and long term condition monitoring
- ✓ Reviewing AT arrangements for preventative services to include telecare and telehealth
- ✓ Extending housing schemes with telecare support
- ✓ Identifying and overcoming barriers to user acceptance of technology
- Examining impact on carers
- ✓ Establishing locally whether telecare has an impact on care home and hospital admissions
- ✓ Providing training and awareness to a wide range of stakeholders as well as longer term workforce issues
- ✓ Identifying individual outcomes and service cost-effectiveness

People who will be attending the events will receive an e-mail asking about their outcomes and achievements. This allows local authorities and their partners to review their progress and make adjustments as they mainstream care options in 2008 as part of health, housing and social care services.

Here is the current wording for the questions that we are using for the five events.

Your Organisation

1) What outcomes have been achieved by your organisation since 2005/6 following Building Telecare in England (2005) and the Preventative Technology Grant (2006)?

2) If you are commissioning or providing services for users, patients and carers, how do you plan to mainstream services and make them sustainable in 2008 and beyond?

We are not expecting full-blown evaluations but sometimes these can help in providing an external review and objective assessment of your work. We would like to see 'outcomes' for the investment you have made locally. Service redesign examples are as important as numbers of new users.

Local authorities and their partners will remember that the 2006 CSCI performance assessment covered 'description of the service'. The descriptions are included in each local authority's telecare profile included at <u>www.icn.csip.org.uk/telecareprofiles</u> and were listed in the November newsletter. All telecare profiles will by 2 January 2008 include the November social care star ratings and CSCI comments on Telecare – these are also included at the end of this newsletter.

The programmes for the events are now being finalised and will be available around 7-10 days before the events. The programmes for each event will differ.

The morning programmes will generally include:

- Summary information on progress in the area/regions generally covered by the event from CSCI data
- Feedback from local networks and groups
- Examples of local progress and developments from around the country on outcomes eg FACS eligible users, dementia support, falls programmes, telehealth, self care, preventative approaches, using remote monitoring and standalone AT approaches for a wider group of service users
- The challenges of mainstreaming and ensuring services are sustainable

There will be an opportunity for delegates to speak about their local achievements from the floor as well as from the platform. We would encourage all organisations to contribute. Please also bring along examples of your leaflets, evaluations etc – we will add this type of information to the CSIP web site.

The afternoon programmes will generally include:

- Future vision for telecare and telehealth including the developing programmes for the demonstrator sites as they commence in Spring 2008
- The importance of commissioning, Putting People First, risk stratification

- The developing interest in telehealth
- Quality standards in telecare
- Connectivity, standards, interoperability, data sharing and records

Not all of the speakers will be covering all of the sites so input will vary and the later events will get some coverage of the earlier events. These details are currently being finalised.

If there is an aspect of telecare and telehealth you would like to make reference to or wish us to cover in the events please contact Mike Clark at <u>telecare@csip.org.uk</u> by 14 January 2007.

4 Telecare Services Association (TSA) Codes update

Telecare LIN

Information provided by Paul Gee and Marian Preece from TSA

TSA reports that work on the review and updating of the TSA Code of Practice for Telecare is progressing well and is on target to launch the revised code in May 2008.

The main part of the project on drafting a new Code is nearing completion. This work has included consultation with a large numbers of key stakeholders, via one to one meetings, focus groups and a well attended workshop for key stakeholders, as well as comments and feedback via a webbased questionnaire. The consultation included meeting with industry representatives, service providers, service users and carers as well as members of the DH, NHS PASA and DCLG.

The first draft of the revised Code has been agreed in December 2007 by the TSA board and it will be circulated to TSA Members early in the New Year for consultation.

Comments and feedback will be invited on the revised Code ahead of its final revision and formal launch in May 2008. The launch will be accompanied by a series of workshops and training days for TSA Members who are already accredited so that they can move quickly and easily to the new standards.

Angela Single, CEO of Choose Independence who are undertaking this work, said "We are very excited about the content of the revised Code. We have engaged with a wide range of key stakeholders in its revision and this has been a key element in drafting a Code that reflects today's rapidly developing Telecare marketplace. This will ensure TSA's Code accredited Member Organisation's continue to deliver high quality services that are focused on the needs of the individual, and supports commissioners of Telecare services".

: Telecare LIN

A full list of telecare references from the 2007 CSCI letters to 150 social care authorities is included in Appendix 1 to this newsletter. (CSCI letters were published on 29 November 2007 and are available from http://www.csci.org.uk/default.aspx?page=1090).

Telecare references are appearing in coverage of star ratings announcements:

Bolton



Telecare services praised in Bolton

Link:

http://www.boltonnews.co.uk/display.var.1868907.0.adult care services awarded three stars.php

Kirklees



"Our key strengths include:Telecare options expanding to meet the needs of older people with dementia, for example the Carephone Home Safety Service"

Link:

https://www.kirklees.gov.uk/community/health-care/highfive.shtml

Milton Keynes



"Telecare, that monitors the health signs of people in the home, was singled out by the watchdog as a project that was helping people to stay out of hospital by alerting nurses to doctors to potential health issues earlier".

Link: <u>http://www.miltonkeynes.co.uk/news/Watchdog-praises-39ambitious39-council39s-social.3557227.jp</u>

Trafford

TRAFFORE COUNCIL Home Who You Are New	ABCDEFGHIJKLMNOPQRSTUVWXYZ
Where You Are Enter your postcode for information and services where you are: e.g. M33 3HY Find >	You are here: <u>Home > News > Press Releases</u> 'Three stars' for Trafford's adult social care 29 November 2007
Service Directory	Trafford Council's adult social care has continued to improve significantly in the last year and the Commission for Social Care Inspection has awarded it the highest three star rating, it was announced in a report released today.
Advice and Benefits Business Community and Living	The report, highlighting the strengths, improvements and areas where further work can be done, is the CSCIs annual assessment of the service, in line with national guidelines and criteria. The news that three stars has been awarded has been welcomed by everyone involved. It is seen as recognition for amount of work and improvement achieved in spite of greater demand for services placing increasing pressures on limited resources.
Council and Democracy Education and Learning Environmental and Planning	The inspectors awarded texcellent or 'good' grades in all but one of the seven delivering outcomes categories, with an 'adequate' grade being awarded for maintaining personal dignty and respect. The council's capacity to improve further was also classed as excellent, altogether leading to the highest fair rating.
Health and Social Care Housing	The report highlights the council's clear and ambilious vision for service modernisation, including the importance placed on service users, carers and the wider public helping shape and develop services, as key strengths. They reported areas of national 'good practice' such as involving people in settim ounlish standards for their own services and assessment of these services.
Jobs and Careers Leisure and Culture	Providing characteristics and enabling independence were also highlighted, especially as this has resulted in less local people having to rely on residuential or nursing care
Transport and Streets Have Your Say	Executive Councillor Michael Young said that this wouldn't have been achieved without the commitment and support of staff at all levels throughout the service, partners and importantly service users themselves. "Over the past five years there have been significant shifts in the way the council and its partners provide services. We've moved from a 'one size

The significant rise in people using direct payments, which give choices about what support they receive and how, together with increases in the number of homes where high tech 'telecare' equipment is installed, both of which provide greater independence and confidence were welcomed by the inspectors.

Link: <u>http://www.trafford.gov.uk/news/press/details.asp?ID=1217</u>

From time to time, Mike Clark from CSIP Networks provides links and news from around the UK and around the World. Here are some more examples:

Warwickshire



Link:

http://www.warwickshire.gov.uk/Web/corporate/pages.nsf/Links/F62CE18D0D676FD4802573AA004B849B

Fuzzy logic could aid monitoring and decision support in care for the elderly Link:

http://www.bjhcim.co.uk/news/2007/n712020.htm

SMART2 - Self Management supported by Assistive, Rehabilitation and Telecare Technologies

Link:

http://news.ulster.ac.uk/releases/2007/3525.html

Phillips acquisitions and links – Emergin, Visicu, Respironics

Links: http://www.wirelesshealthcare.co.uk/wh/news/wk49-07-0003.htm

http://www.tradingmarkets.com/.site/news/Stock%20News/936156/ http://www.newscenter.philips.com/about/news/press/20071221_pressrelease_respironics.page

Bosch Group and Health Hero Network

Links: <u>http://news.websitegear.com/view/33317</u> http://sev.prnewswire.com/computer-electronics/20071219/CLW006A19122007-1.html

New assistive technologies course at Coventry

Link: http://www.coventry.ac.uk/newsandeventsarchive/a/4010/\$/selectedYearId/selectedMonthId/tab/news

Little evidence that falls prevention for elderly is effective Link: http://www.onmedica.com/NewsArticle.aspx?id=e6e92484-9178-4e3c-8f1e-94d9c9822d9e

Barnsley



Link:

http://www.barnsley.gov.uk/bguk/Health_Wellbeing_Care/Services_for_Adults/Home_Care_Service/Telecare.htm

Nurse call technology

Link: http://www.wirelesshealthcare.co.uk/wh/news/wk46-07-0005.htm

Harrow Helpline

Link: http://www.harrow.gov.uk/site/scripts/documents_info.php?documentID=654&pageNumber=2

Bromley

Link: http://www.bromley.gov.uk/socialcareandhealth/Help+for+adults/Home+care/care_link.htm

Bucks

Link: http://www.buckscc.gov.uk/bcc/content/index.jsp?contentid=406272912

Hartlepool Telecare - TV example

http://www.hartlepool.gov.uk/site/scripts/download_info.php?fileID=2382

Herefordshire

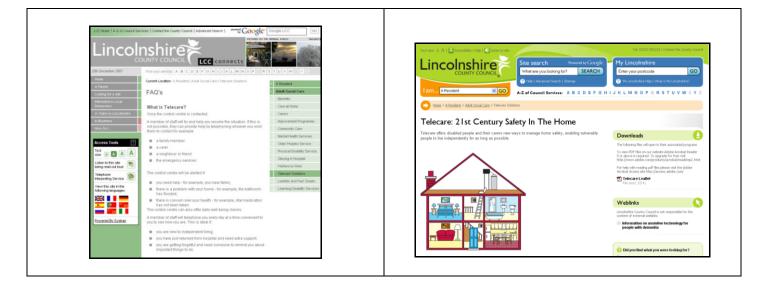
http://www.muchbirchparish.org.uk/Herefordshire_Matters_Sept07.pdf - see medication example

Leeds monitoring service celebrates birthday

Home Numb 5	iport Community Your Say Sheadhiz	Salto O web	Search	
Wateo Offens and O	ompetitions What's On Horoscopes Nightille Dus	iness Your Pictures Leeds Nostelgia		
Tuesday, 25th Decem	ber 2007			
News		E Frai a tierri	More News:	
Leeds News	Published Cate: 22 November 2007	B Print article	a 2007: Your top 10 news	
Waterfield Neuro	Source: EP Leeds First & County	E Increase text size	states	
Developy News	Location: Leeds	Decrease test size	 Blow for Leeds brother and sider who had 	
Strutit			and syster who had	
National News	 Leeds monitoring service f 	or elderly celebrates	Early start for Leeds "New Year's Eve freworks	
Video	birthday			
* Sport	,		 Officers break bones restruction officialers 	
Sports Headlines			Farecak campaign hots	
Loods Livited News	By Staff Copy		10	
Leeds Rhinos News	 A scheme which keeps a watchful eye over older, i successful first year. 	· United chairmon's pledge		
Leeds Camepie			 Calls to review Mundoch 	
News	Leeds Telecare was set up last November and special detectors have been installed in pathplants' homes which alert carers when screece has had a fail, if they move around al unsual times, get out of bed during the right or if there are long periods afina movement.		case as DNA tachnique supptionent	
• Entertainment			exectioned Christmas anow private	
Video			for hospice kids	
Clinia Chrown	Other equipment like smoke signme, pay or carbon monoxide detectors and pill		Beward of #5.000kto.get	
Buriness.	dispensers have also been installed, all aimed at	enabling people to like independently	sex shop raiders	
Business News	in their homes for longer.		Animal Shelter gets The best present ever. 1	
Features	Leeds Telecate was set up with a \$1.1 million gov	emment grant and builds on the	 Devastaling blow as 	
Features	existing Care-Ring emergency call-out service.		The attention of the second se	
Yorkshire Diany	Health and social care workers as well as police a	and fire services are insched and 400	arts funding cut	
Columnists	staff have been based in the use of the new equipment with over 1,000 homes filled with special equipment.		 Young farmers win £5,000 grant for healthy head. scheme 	
What's this?	Telefrealth, another Telecare project which is bein Trust, is currently being evaluated. If helps people monitoring their stal signs after discharge from ho	with long-term lung disease by	 Duo create business to help launch careers in the skies 	
	Last Updated: 21 November 2007 4:35 FM		 Rhinos drop in on hospita Nds 	
	Page 1 of 1		Top status for nursery	

Link: http://www.yorkshireeveningpost.co.uk/news/Leeds-monitoring-service-for-elderly.3510842.jp

Telecare in Lincolnshire



Links:

http://microsites.lincolnshire.gov.uk/section.asp?docId=53805 http://www.lincolnshire.gov.uk/section.asp?catid=13276

Telecare information for health care professionals in Oxfordshire

Home Council ser	Aces News About Oxfordshire Contact us Do it online Jobs	
OCATION: Home > Countil ser	vices > Health and social care > Older people > Staying in your own home	
∧ Council services ∧ Health and social care ∧ Older people	Telecare information for health care professionals Telecare is the means by which cares can be alleded to the needs of a disabled person living in their own homes.	Search Go A-Z index
 Staying in your own home Occupational therapy 	Treacter is the memory primiting construction of the memory of the memory of a subsortery present many in the own notices. It can be a simple pull cost alarm system as is common in sheltered accommodation or a pendant alarm linked to a response centre to a range of denores covering high risk areas in the home.	Contact details
 Home Support Service Alarm services Delivered meals Day centres and respite care 	Please find below the information and forms required to implement telecare as a service for users and carers. Sanah Pansans Telecare Coordinator Telecare Coordinator Telecare Coordinator	Access Team Oxfordshire County Council PO Box 221 Kidlington Delivery Office, Oxford, OX5 1YD
Laundty service Keeping warm in winter Shopping deliveries	fao Olio 202497 e-mail <u>leise and barbechina aou ai</u> s Porma	Tel: 0845 050 7666 Fax: 01865 854443 Out of hours emergency number:0600 833408
Safety pendant alarms and sensors ocal clubs and ocieties	Contact Assessment Num (doc firmul, 57263) Talecaw Order firm Innice() (doc formul, 5726) Terms & Conditions (doc formul, 5726) Terms & Conditions (doc formul, 5726)	(freephone) Maps to main offices Email this service Online contact form More about this service
	Other resources Telecare Written Process (doc formal, 67(0))	Report error on page
((CListen to this page Help with ReadSpeaker	Beford process for available some classes (Jung 27) (data format, 6774b) Beford gravess for new service users (Jung 27) (data format, 6774b) Takezon sensors available and when their may avail (Little format, 6774b) Checking for Takezon sensors (John format, 6774b)	External links Ordentahine County Council is not responsible for the content of ode websites.
	Summary on a strategy of the strategy of	

Link:

http://www.notimetowaste.org.uk/wps/portal/publicsite/kcxml/04_Sj9SPykssy0xPLMnMz0vM0Y_QjzKL94k3Mg8FSZnF 08WHOepHogtZIoR8PfJzU WD9L31A QLckMjyh0dFQEnurQ-

/delta/base64xml/L3dJdyEvd0ZNQUFzQUMvNEIVRS82X01fMU9C?WCM_GLOBAL_CONTEXT=http://apps.oxfordshi re.gov.uk/wps/wcm/connect/Internet/Council+services/Health+and+social+care/Older+people/Staying+in+your+own+h ome/SHC+-+OP+-+telecare+staff+info

Veterans Affairs – American TV clip

Link: http://www.abcnews.go.com/WN/story?id=3991225&page=1

Falls in elderly

Link: http://news.bbc.co.uk/1/hi/health/7079647.stm

Falls in Australia

Link: http://www3.griffith.edu.au/03/ertiki/tiki-read_article.php?articleId=11521

Internet provision of tailored advice on falls prevention activities for older people: a randomized controlled evaluation

Link:

I ink:

http://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle_600 18_30

Cellphones and vital signs monitoring

http://www.theglobeandmail.com/servlet/story/RTGAM.20071218.wlalberta18/BNStory/specialScienceandHealth/home

Consumer Health Awards - Cardiocom

Link: http://www.sys-con.com/read/471835.htm

Lancashire survey

GOING into a care home and losing your independence is the greatest fear for people in Lancashire when they hit old age. Research carried out by Lancashire County Council found that 67 per cent of those aged over 65 said having to move into a residential or nursing care home was the most important aspect they wanted to avoid in older age. *Link: http://www.blackpoolgazette.co.uk/blackpoolnews/Elderly-fear-39going-into-home39.3594429.jp*

ICT networks prerequisite for healthcare at home

Link: http://www.euractiv.com/en/health/ict-networks-prerequisite-healthcare-home/article-168901

Wolverhampton



"The bungalows and flats are also fitted with hi-tech Telecare sensors which will alert carers if, for instance, someone has a fall or an epileptic seizure".

Link:

https://www.wolverhampton.gov.uk/government_democracy/council/documents/news/press_releases/2007/november/ 261107d.htm

Idea for hi-tech care in the community wins first prize in UK Satellite Navigation Challenge Link: <u>http://www.bjhcim.co.uk/news/2007/n711021.htm</u>

Remodelling sheltered housing and residential care homes to extra care housing: Advice to housing and care providers

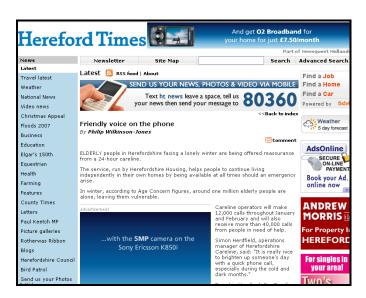
Link: http://www.kcl.ac.uk/content/1/c6/02/96/45/remodellingadviceversion151007.pdf

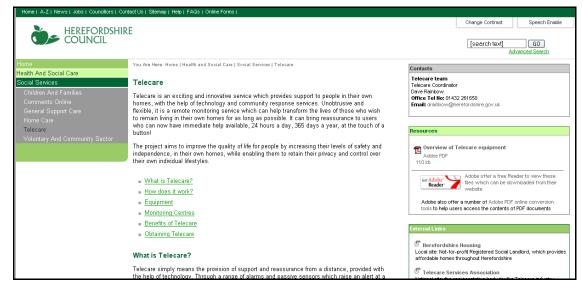
Delivering Telecare in Dorset – factsheet

Link:

http://www1.dorsetcc.gov.uk/CARING/Leaflets.nsf/dc5abe9cf494f6988025691c004b93b4/2424ed6e4904a980802573 b10041bc5a/\$FILE/Delivering%20Telecare%20in%20Dorset.pdf

Herefordshire





Links:

http://www.herefordtimes.com/news/latest/display.var.1931657.0.friendly_voice_on_the_phone.php http://www.herefordshire.gov.uk/health/social_services/32256.asp

Stand up against falls



Link: http://www.acislington.org.uk/pdf/standup_against_falls.pdf

North Yorkshire



Link: http://www.northyorks.gov.uk/index.aspx?articleid=3198

News services:

http://www.ehiprimarycare.com/news/

http://www.telecareaware.com/

http://www.telecare.org.uk/newslatest/45779/news_and_policy/

http://tie.telemed.org/news/#item1598

a) CSIP Telecare events

Venue	Date
London	24 January 2008
Leeds	29 January 2008
Manchester	4 February 2008
Taunton	7 February 2008
Birmingham	12 February 2008

b) Housing LIN events – booking now available:

16/01/08 South West Regional Housing LIN Meeting 31/01/08 West Midlands Regional Housing LIN Meeting 28/02/08 North West Regional Housing LIN Meeting 10/04/08 West Midlands Regional Housing LIN Meeting

Full list of Housing LIN events: http://www.icn.csip.org.uk/housing/index.cfm?pid=167

Latest Housing LIN Newsletter: <u>http://www.icn.csip.org.uk/_library/Resources/Housing/Support_materials/Newsletter/Newsletter26.pdf</u>

The Foundation for Assistive Technology (FAST) provides a full listing of forthcoming telecare events – see <u>http://www.fastuk.org/services/events.php?pg=2</u>. Suppliers also run telecare and telehealth events – check their web sites regularly for dates.

All previous telecare eNewsletters are available at: www.icn.csip.org.uk/telecarenewsletters

CSIP Telecare Services

You can send comments and questions about the CSIP Implementation Guide, factsheets or other resources or contact us via *telecare@csip.org.uk*. Also, use this mailbox to send in good practice examples.

If you or a colleague would like to receive future copies of the newsletter then all you need to do is register at http://www.icn.csip.org.uk/index.cfm?pid=12

Appendix 1 – CSCI summaries covering Telecare comments in the local authority letters (29 November 2007) together with 2007 star ratings

This Appendix contains the comments from the CSCI letters published on 29 November 2007. A full list of links are found in the Telecare LIN Briefing at:

<u>http://www.icn.csip.org.uk/_library/Resources/Telecare/Support_materials/Telecare_LIN_Briefing_</u> _CSCI_Summaries_November_2007.doc

CSCI report that implementation of telecare is generally good, so not all local authorities have a specific comment in their letter.

Barking and Dagenham - 3 Stars

Barnet – 2 Stars

Carer's assessments increased and telecare products are available to carers

Telecare provision is below the London average level, and the council needs to continue to focus on developing a robust 'Telecare' service in 2007/08.

Barnsley – 3 Stars

Key strength - the good level of telecare support

The independence of almost all people is promoted consistently as evidenced by a good performance on the indicators, the work on individual budgets, direct payments and telecare

Bath & North East Somerset - 1 Star

There is an increase in Telecare provision this year

Plans for delivering Telecare next year are low, especially that provided with partners

People living in the council area are much more likely to receive Telecare items this year but the provision is comparatively expensive in the council area.

Plans for next year will not increase the numbers of new people receiving Telecare equipment in line with other councils and the council is not developing this service sufficiently with partners.

Bedfordshire – 2 Stars

The independence of some older people has been promoted through the expansion of the telecare service and there is evidence that this is having a positive impact on the quality of life of those accessing the service.

Key strength - expansion of telecare services.

The independence of most people who use services and their carers is promoted within a range of services. In particular, the development of telecare has enabled people to live their lives in the way they choose

Bexley – 3 Stars

Key strength - progress made on increasing use of telecare

There was an increase in the number of new older people using telecare and the council is hoping to extend an existing telecare pilot project for frail older people and people with dementia during the coming year.

Birmingham – 2 Stars

Intensive home care support services such as telecare, delivery of equipment and waiting times for minor adaptations are helping people to live independently in the accommodation of their choice; there is an increase in the rate of direct payments used to purchase complex packages of care.

Blackburn with Darwen – 2 Stars

Telecare is contributing to improved outcomes in terms of independence and privacy and dignity for both older people and people with learning disabilities.

Blackpool – 2 Stars

Key strength – development in provision of telecare.

Area for improvement - promote use of Telecare

Preventative services including telecare, falls prevention strategies, home security services and intermediate care are leading to Improved outcomes for people, including an Improved perception of safety.

The council is making good progress in relation to preventative services, including increased provision of telecare and home security services.

Overall, during 2006-07, the council has provided more telecare than planned, though provision is lower than in comparator councils and the proposed increase of 80 older people to use the service, is also lower than other councils. The council has demonstrated the positive impact the provision of Telecare has on the outcomes of those receiving the service and is also piloting telehealth care jointly with the Primary Care Trust.

Area for improvement - the council is aware of the need to continue its focus on the provision of Telecare and plans to continue to ensure that the service is accessible by promoting its use through the appointment of a Telecare Champion.

The development of further preventative services including extra care housing, telecare and intermediate care should enable more people to live independently and reduce admissions further.

Bolton – 3 Stars

Key strength - expansion of the telecare service.

The council promotes the independence of people who use services and there is evidence that preventative strategies and services including use of Telecare, falls strategies, intensive home care and the provision of equipment and adaptations are improving the quality of life for people living in Bolton.

The independence of adults and older people has been promoted through the expansion of the telecare service and there is evidence that this is having a positive impact on the quality of life of those accessing the service.

Bournemouth – 2 Stars

Telecare services have been developed and are available to a good number of people, with a particular concentration on assisting people with dementia.

Bournemouth is clearly committed to supporting older people to remain independent, for example developing a good extra care housing scheme, increasing intensive home care and developing telecare services.

Bracknell Forest – 2 Stars

There is a major shift in the in house provision of Telecare equipment but no provision in partnership with other agencies and council planned expenditure and total planned expenditure is below similar councils and England average.

Bradford – 2 Stars

Brent – 2 Stars

Key strength - high rates of 'telecare' provision

Brighton and Hove – 3 Stars

Area for improvement - a range of Telecare services are available, although this area could benefit from further expansion and development.

Bristol – 2 Stars

Key strength - telecare is becoming more accessible

Telecare is becoming more accessible to older people in Bristol however opportunities to work in partnership with other agencies are not being used as much as in other councils.

Bromley – 2 Stars

Buckinghamshire -2 Stars

Area for improvement - the development and expansion of telecare

Bury – 1 Star

There has been a notable increase in the provision of 'telecare' support

More people were able to purchase intensive home care by using Direct Payments and from October 2006, there was a notable increase in the provision of 'telecare' support.

Calderdale – 2 Stars

Key strength - cost effective telecare provision

Additional preventative and support services such as telecare are also improving support.

Cambridgeshire – 1 Star

Camden – 3 Stars

There is good use of telecare equipment for older people and appropriate development of extra care housing provision has enhanced independence

Key strength - increased telecare provision

Cheshire – 2 Stars

Key strength - increased provision of telecare services

City of London – 3 Stars

Cornwall – 1 Stars

Cornwall's spend on Telecare services, equipment and infrastructure was lower than planned because of recruitment difficulties, which led to all projects slipping three to six months behind their original schedule.

Coventry – 3 Stars

Croydon - 3 Stars

Telecare is being effectively promoted through the council's partnerships with a range of organisations and further growth is expected following good progress this year. The council's successful POPP funding bid is being used to

more widely publicise new social care developments including Telecare and to promote access to advice, prevention and self-directed services.

Strong partnerships with Croydon Careline, the London Fire Services and service providers to ensure Telecare provision is cost effective and meets individual need

Cumbria – 1 Stars

Delivery of specific improvements, such as the development of telecare and Improved compliance with reviewing requirements demonstrate the council's strengths in project and performance management, but the effective use of management information is still hampered by legacy issues which make comparison over time problematic

Darlington – 3 Stars

Derby - 2 Stars

Derbyshire – 3 Stars

Area for improvement - further development of Telecare

Telecare is in the early stages of Implementation and should be closely monitored.

There were also examples demonstrated to the council that evidenced that there needed to be some further work on the language used to describe services – Telecare and direct payments were mentioned but not understood by all.

Devon – 2 Stars

Area for improvement - the utilisation of Telecare equipment by the council has increased, but needs to grow further to catch up with comparative councils.

The utilisation of Telecare equipment by the council has increased, and the approach recently reviewed. Overall levels of provision, particularly the joint delivery of Telecare services, need to grow further to catch up with comparative councils.

Doncaster – 1 Stars

Key strength - the development of a telecare strategy

There has been work in year to develop a telecare strategy, and provision is in line with comparators, however, the planned level of investment is low.

Dorset – 1 Star

Dudley – 3 Stars

Key strength – assistive technology/Telecare provision

Durham – 2 Stars

The introduction of Telecare services has not been as speedy as was anticipated and staff are being encouraged to discuss the available options with people who use services.

Area for improvement - the introduction of Telecare services

Ealing – 3 Stars

Key strength - falls strategy is in place and the Telecare Strategy is well planned

Areas for improvement - numbers of people supplied with Telecare equipment need to be increased The numbers of people provided with Telecare equipment are low. However the Falls Strategy is in place, the Telecare Project is well managed and the numbers provided with equipment is set to improve for 2007/08.

East Riding of Yorkshire - 2 Stars

Key strength - development of Telecare services. The amount and range of Telecare provided is significant with further plans to extend.

East Sussex – 1 Star

Enfield – 1 Star

Key strength - use of telecare

Large increase in use of telecare

Telecare has very significantly increased and with positive service user feedback.

Essex – 3 Stars

Areas for improvement - the provision of telecare should be increased.

As planned the council should increase the provision of telecare.

Delays in the bids for partnership funding have Areas for impacted on the provision of telecare which is relatively low.

Gateshead – 3 Stars

Key strength - more people provided with telecare services and equipment.

The council have provided more items of telecare equipment than planned. Expenditure on infrastructure remains high (upgrading of system technology), although expenditure on equipment is planned to reduce

Gloucestershire – 2 Stars

Key strength - there is evidence of trust between the Council and PCT; joint posts have been created (Director of Public Health, six General Managers and three joint commissioning posts, joint funding of telecare.

Area for improvement - the council should provide more telecare to support people living at home.

Council has not delivered on its target to provide telecare support in 2006/7.

Greenwich – 1 Stars

Key strength - Good use of telecare

The use of telecare is above that of similar councils with spend on equipment amongst the highest in London.

Hackney – 2 Stars

Key strength - Increase in telecare activity

Telecare activity increased significantly. The Council planned to link the potential of Telecare with other preventive and re-abling service innovations such as extra care and dementia support.

The completion of this plan will be a key factor in implementing Hackney's ambitious strategic goals (e.g. prevention through Telecare and extra care; rapid expansion of individual budgets; shifting the balance of care).

Halton – 3 Stars

Key strength - Increased provision of telecare services

Hammersmith and Fulham – 3 Stars

Key strength - provision of Telecare

The amount and range of Telecare increased steadily; a pilot began for people with dementia and accelerated take-up is expected in 2007.

Hampshire – 3 Stars

Area for improvement - the provision of telecare

The council are aware that they need to develop a partnership approach to the delivery of telecare services and significantly increase the availability.

Haringey – 1 Star

...however, deployment and usage of 'Telecare' was effective.

Harrow – 1 Star

Area for improvement - numbers in receipt of telecare

The council need to consolidate the improvement in the use of telecare to support older people, as this still remains

below the London average.

Hartlepool – 2 Stars

Other feedback gathered through consultation has influenced a range of policies and schemes, including the Hartfields

extra care project, the Telecare scheme, the transport plan, and user accredited interview and recruitment.

Havering – 1 Star

The Council had made progress in reconfiguring intermediate care resources, and had identified options for embedding a more preventive approach (e.g. linking roll-out of telecare with extra-care housing and intermediate care developments, which was already happening at Painesbrook Court).

Key strength - developments in telecare

Extra-care housing activity was linked with the significant development of telecare.

The provision of extra-care housing increased through the opening of Ethelburga and Painesbrook Courts, with links with telecare and PCT inputs.

Telecare developments were positive. They included 21 complex, diversionary applications for individuals

Herefordshire – 1 Star

Work has been ongoing with self-assessments for minor adaptations and telecare services, people who have been involved have found this successful however this needs to be linked into the overall engagement plan to enable this to be promoted with more people and carers. The council needs to build on this to enable the scheme to be expanded. Key strength - the roll out of self assessments for minor adaptations and telecare services

Hertfordshire – 3 Stars

Area for improvement- continue to develop intermediate care and telecare.

The number of people benefiting from telecare has increased through the Preventative Technology Grant. In partnership with other agencies, the number of people benefiting from telecare is above similar councils.

Hillingdon – 2 Stars

Key strength - The number of people receiving Telecare and assistive support packages is high.

The use of Telecare and assistive support is good.

The Telecare service will be used to test whether the council can help older people with dementia remain in the community.

Telecare assistive packages minimise falls and decrease time in responding to an incident of a fall. The number of people provided with Telecare equipment has continued to increase through effective joint working.

Hounslow – 3 Stars

Area for improvement - numbers of people provided with Telecare equipment Considerably lower than projected numbers of people have been supplied with Telecare equipment in their own homes. Although projections for 2007-08 outturns indicate this is set to improve, the current outcome is low.

Isle of Wight Council – 2 Stars

Isles of Scilly – 1 Star

Area for improvement - service modernisation needs to continue so that disabled adults and older people are provided with support to continue living independently in their own homes for as long as possible. Telecare is one area which needs further development.

Islington – 3 Stars

Kensington and Chelsea – 3 Stars

Key strengths - more people receiving Telecare, Telecare used to support carers

Telecare Implementation is at an early stage but there is already evidence of benefits, particularly for people with dementia and their carers.

Kent – 3 Stars

Key strength - The delivery of telecare services to people over 65 is good.

This year telecare services have been specifically developed for the use of people with dementia.

Comprehensive services such as telecare, falls prevention and staff awareness training on aiding independence ensures that appropriate support is provided to enable people to live as independently as possible.

To support the council's prevention agenda further expansion of telecare services is planned next year and delivery is on target.

Kingston Upon Hull – 2 Stars

Key strength - Successful Implementation of Telecare services

Outcomes are Improved through the delivery of equipment and adaptations and the success of the Telecare and Telehealth systems in encouraging, supporting and giving choice and control to people in managing their own health conditions.

Joint working with the PCT enables work on self care and Telecare and Telehealth

Successful Implementation with evidenced outcomes of Telecare system

Kingston Upon Thames – 2 Stars

Profile raising has progressed through a successful Telecare event for carers in March 2007 and the production of leaflets and newsletters, which promote the role.

Issues of specific relevance to vulnerable adults have been addressed e.g. linking Telecare with community policing and producing information pack key strengths regarding bogus callers.

Kirklees – 3 Stars

Telecare options expanding to meet the needs of older people with dementia

The use of telecare has been expanded to support people with dementia and the council are piloting telemedicine options with the PCT.

There has been significant growth in low level and preventative services and good investment in telecare, extra care facilities and other community based services.

Knowsley – 3 Stars

Lambeth – 3 Stars

Key strength - progress in use of telecare

There has been progress in extending the use of telecare with the council increasing it's use.

Lambeth is also, in conjunction with a housing association, exploring a greater range of telecare options by developing a show house.

Lancashire – 3 Stars

Key strength - Developments in provision of telecare.

There is evidence of a positive impact on improving the quality of life for people through Telecare and the Falls strategy, and also services to carers becoming more accessible through access to carers' assessments.

Although the council reports slow initial take up of Telecare, many initiatives during 2006-07 should impact on provision of the service in the coming year. There is evidence that the provision of Telecare is improving the quality of life of people in receipt of the service.

Leeds – 2 Stars

The council acknowledges that its introduction of telecare services has been short of the initial target although there have been over 1,600 installations in 2006/07. It is clear that the telecare component of the preventative strategy is to promote independence and better quality of life. This is evident in that all referrals ask for a summary of alternative outcomes if telecare equipment was not provided. The current data on this suggests that telecare is helping to reduce hospital and residential care admissions.

Preventative and early intervention strategies, including telecare

Continued development of telecare services

Leicester – 2 Stars

Leicestershire – 3 Stars

Lewisham – 2 Stars

Key strength - Increase in the number of new telecare users

The council considers telecare to be a fundamental element of its preventative strategy and following increased spending has increased the number of new telecare users to a level which is now above the London average. New telecare users increasing

Lincolnshire – 1 Star

Area for improvement - Telecare initiatives should be further developed.

The council's good Telecare initiatives should be developed further to ensure a greater take up of services.

Liverpool – 2 Stars

Luton – 1 Stars

The council has a range of services of reasonable quality, which is assisting in promoting the independence of some service users and carers within the services offered. Further provision of extra care housing and development of telecare and carer's services will improve outcomes in this area.

Area for improvement - the use of telecare services should be expanded.

Manchester – 2 Stars

Key strength - the amount of 'telecare' equipment purchased to assist people to maintain Improved independence and safety at home has increased

There is evidence, however, of a very significant increase in the amount of 'telecare' equipment purchased during 2006-07 that is assisting many people to maintain Improved independence and safety at home.

Medway – 2 Stars

Merton – 2 Stars

The "Home First" scheme has promoted use of a range of community services, assistive technology and telecare.

Telecare and assistive technology are being promoted.

Increasing use of telecare and assistive technology.

Middlesbrough – 3 Stars

Key strength - development of Telecare services

People in Middlesbrough are being very well supported to continue to live in their own homes and further support through the provision of Telecare service is progressing well.

The council has exceeded its own plans for provision of Telecare services and has done so at a lower cost than expected. Telecare provided in partnership with other agencies has also increased considerably more than originally planned. The council expect to open a new contact centre in September 2007.

Milton Keynes – 2 Stars

The approach to Telecare was thorough and imaginative.

Helping people live at home – including the use of intensive home care and Telecare - was a real Milton Keynes strength.

Older people with significant needs have been helped considerably by thoroughgoing application of Telecare to their circumstances.

Newcastle Upon Tyne – 2 Stars

Area for improvement - Increase the number of people provided with telecare services and equipment. The council provides telecare equipment and services in partnership with Your Homes Newcastle. There have been delays in developing the telecare strategy and subsequent rollout. The strategy is now in place and staff appointments have been made. This should result in an increase in activity and expenditure.

Newham - 1 Stars

Expansion of telecare services and achievement of Telehealth

Area for improvement - ensure developments in extra care housing, and telecare, maximise diversion and prevention Prevention was pursued through an innovative telecare programme. The integration of telecare with developments in extra care housing provided the foundations for a preventive approach which should be developed further, including through a specific prevention strategy.

Elements of a prevention strategy were in place based on telecare, extra-care housing and a joint falls prevention strategy.

Ensure developments in extra care housing, and telecare, maximise diversion and prevention

Modernisation had included integration with the PCT, prevention through telecare and Social Care Pathfinder and Total Transformation sites

The Council had ambitious strategic goals (e.g. application of telecare; 50% of social care transactions to be through individual budgets within three years). These were embodied initially in outline in a draft strategic commissioning plan.

Norfolk – 2 Stars

Key strength -the range and access to telecare equipment for people using services.

The range and access to telecare equipment for people using services is excellent.

North East Lincolnshire – 2 Stars

Key strength - Implementation and take up of Telecare

To further aid independence, the amount and range of Telecare provided increased and the delivery times of equipment improved

North Lincolnshire – 2 Stars

Key strength - launch of Telecare Services

North Somerset – 3 Stars

Key strength - Increasing numbers of older people are able to use Telecare

Increasing numbers of older people are able to use Telecare services and the council provides more Telecare services than comparators. However, the level of service provided with partners is lower than comparator averages and infrastructure costs are high.

North Tyneside – 2 Stars

Area for improvement - Increase the number of people provided with telecare services and equipment. The council provided less Telecare than other councils. Future plans are for a slight increase but provision will remain less than other councils. Expenditure on infrastructure, equipment and services is low but with an increase planned. The council anticipate significant improvement in telecare during 2008/09 and have plans in place to do this.

North Yorkshire – 2 Stars

Key strength - extended use of telecare

Extensive provision of telecare equipment is another part of the council's strategy to promote people's independence. This is also part of its local area agreement with the Government. While, it also innovatively has applied telecare to residential care settings, it is important that the council or providers are not tempted to use this as means of reducing staff numbers within these settings. It is also difficult to see how the use of telecare in these settings is a means of promoting independence.

It is evident that there is considerable work being done to identify carers and engage them so as to support them in the care they provide. This is also linked to the creative work being undertaken through telecare. Key strength - innovative work being undertaken through telecare

Northamptonshire – 1 Star

Key strength - good extra care and telecare.

There is a good extra care infrastructure in place and good provision of telecare to help support people to remain and feel safe at home.

Northumberland – 2 Stars

Area for improvement- the Implementation and countywide roll out of the telecare strategy.

The council has been slow in implementing its telecare strategy. Full development of the service, including Countywide roll out has been problematic.

Nottingham – 2 Stars

Nottinghamshire – 2 Stars

Oldham – 2 Stars

Key strength - the increased provision of telecare

Oxfordshire – 2 Stars

Although there is provision of Telecare items to older people and the expenditure on equipment was greater than similar councils the level of provision is lower and this needs further improvement. The council has provided evidence that for those individuals using Telecare there are significant benefits.

Peterborough – 2 Stars

Plymouth – 1 Stars

Poole – 3 Stars

Area for improvement - telecare services have not been developed as quickly as originally planned and more attention needs to be paid to this area of work.

Portsmouth – 2 Stars

Area for improvement - increase use of telecare to support people living in community settings

Reading – 1 Stars

Reading's progress on the delivery of telecare services has been slower than similar councils but improvement is planned.

People in Reading had relatively poor opportunities to improve quality of life through telecare

Redbridge – 3 Stars

Key strength - increased use of telecare and extra care housing

There was a wide range of high quality services including breaks for carers, expansion of the successful voucher scheme, prompt delivery of equipment, and more telecare equipment and extra care housing.

Good range of high quality services, including equipment delivery, carers services, telecare and extra care housing

Redcar and Cleveland – 2 Stars

Key strength - provision and integration of telecare services

People generally feel safe at home and the expanding use of Telecare systems is helping to generate more flexible and adaptive types of services. Preventative services continue to develop particularly in relation to reducing the incidence of falls. The council should nevertheless consider how grant funded services might be further developed. Telecare provision is improving, and at a greater rate than for other councils. The council is developing innovative ideas around the use of Telecare in providing "virtual extra care", which enables people to live independently yet with discreet and effective support as and when needed.

The council have a number of schemes to support independence and safety including telecare and the handyperson scheme.

Richmond Upon Thames – 3 Stars

Key strength - a Telecare Smart flat has been developed for ICT use in partnership with council, PCT and local housing provider, which has, falls sensors and devices.

A higher than average number of people have been supplied with at least one item of Telecare equipment in partnership.

Rochdale – 1 Stars

Key strength - expansion of telecare service.

There has been progress in the development of other preventative services including telecare and the falls strategy and there are signs that these are impacting positively on the outcomes for people in Rochdale . Further development of preventative services including the provision of extra care housing and widening the availability of telecare is needed. Further work is needed to develop ways to measure the impact on outcomes of the various preventative measures.

There has been moderate expansion of Telecare although the council should consider making this available to those vulnerable people currently excluded.

Rotherham – 2 Stars

Key strength - high levels of investment in telecare

There is a commitment to telecare and falls prevention as part of more enabling interventions for a wider range of people.

The high level of investment and rates of older people supported by telecare

Rutland – 2 Stars

Area for improvement - progress the plans for telecare

Salford – 3 Stars

Sandwell – 2 Stars

Sefton – 2 Stars Key strength - Increased provision of telecare services

Sheffield – 3 Stars

Key strength - the good level of telecare support

Shropshire – 3 Stars

Key strength - investment in assistive technology and telecare

Slough – 3 Stars

The provision of Telecare equipment and the numbers receiving this have risen considerably.

Solihull – 2 Stars

Telecare is increasingly contributing to people's quality of life, including enabling them to feel safe and stay safe in their own homes. This is set to expand further. Telecare forms part of a group of services, including those referred to under promoting health and emotional wellbeing that could be seen to prevent, reduce or delay the need for future more intensive services. The Trust is mindful that evidence of a causal link between prevention and future demand for services has not been established but it is beginning to monitor and evaluate the impact of these services and will use this knowledge inform future service developments.

Somerset – 3 Stars

Area for improvement - to develop telecare services

Telecare services got off to a slow start within Somerset and the council needs to develop this area of service provision.

South Gloucestershire – 2 Stars

Key strength - Telecare is being offered to more people but spending is low

This, alongside a good increase in carers' services and Improved access to Telecare, demonstrates an increasing range of support available.

By working in partnership with other statutory agencies Telecare is being offered to more people in South Gloucestershire, however spending is still comparatively low. The council has taken a measured approach and is now evaluating pilots in order to make decisions about the development and mainstreaming of the service.

South Tyneside – 2 Stars

Southampton – 3 Stars

Southend on Sea – 1 Stars

The council is developing its provision of preventative services, for example through the use of telecare and a strategy for increasing this further. There was evidence that the use of telecare is having a positive impact on people, for example by feeling safe and aiding independence. The reported performance in the provision of telecare over the past year is low and should be improved.

The council has made good progress in using telecare although this remains below that of similar councils. There was evidence of good support in providing the equipment to those who used the service.

The council should ensure it improves on the projected uptake of telecare for 2007/08, as its strategy for increased use is implemented.

There was some evidence that information about direct payments and other services, such as telecare, are not always easily accessible.

Southwark – 3 Stars

There has been an increase in the number of new users of telecare. However as a result of delay with a particular project leading to slippage on budgets the council has not invested as much in this service as anticipated. Plans to develop the service are now said to be back on track and initial indications suggest original targets will be exceeded in the coming year.

St Helens – 3 Stars

Key strength - an increase in use of telecare services for older people

Staffordshire – 2 Stars

Stockport – 2 Stars

Key strength - the performance on telecare through partnerships and other agencies is significantly above plan

Stockton on Tees – 2 Stars

Key strength - provision of Telecare systems

Telecare beds in the residential Intermediate Care facility

Stoke on Trent – 1 Star

The provision of Telecare systems to support the independence of older people in Stockton is developing well and will be rolled out substantially during 2007/08.

Person centred care for older people is being Improved by the expansion of community matrons, provision of more sophisticated telecare systems and the re-organisation of occupational therapy to tackle the backlog of pending assessments.

Suffolk – 2 Stars

Area for improvement - good progress has been made in providing telecare to enable people to remain independent in their own homes, however this needs to further improve.

The Council has substantially Improved the numbers of telecare equipment available to households through close work with an outside provider. Further improvements in telecare provision to promote independence are required. The council should continue to improve the provision of telecare, which has improved significantly over the past year.

Sunderland – 3 Stars

Key strength - Telecare linked to remote support services

The mental health of older people is a key Local Area Agreement priority for the council alongside health partners. The council is working innovatively to support people with dementia at risk of being admitted to care, notably through the provision of an Overnight Service in conjunction with Telecare systems to help sustain vulnerable people in their own homes.

The council's delivery and ambition for the use and integration of Telecare systems is impressive and is also helping to ensure that vulnerable people feel safer at home.

Telecare is provided by the council alone and not in partnership with any other agency. Telecare provision in Sunderland has progressed considerably and reflects a significant degree of investment and modernisation of a broad range of services. The council has clearly realised the potential for telecare services to significantly change the way people are supported in their own homes. Telecare contact processes are linked into the integrated contact systems for all council services and response/support systems for users of services are flexible, comprehensive and sophisticated. They provide significant levels of responsiveness, re-assurance, and security for users of services and their families. The emergency 101 call system integrates seamlessly into the call/contact systems. It is clear that that long term benefits of the systems that have been developed are both cost effective and are providing the kinds of service that people want.

In response to feedback from people who use services the council has extended the times for home care services, introduced an overnight care support service linked to telecare systems, and extended out of hours services for people with mental health problems.

Surrey – 1 Star

Alarms and telecare equipment are easily accessible to promote safety and security in people's homes.

Sutton – 2 Stars

The council achieved less than their planned level of Telecare expansion and may not be able to meet the more ambitious plans for 2007-08

Swindon – 2 Stars

Areas for improvement - provision of telecare should be increased.

Provision of telecare was low in 2006/7, due to key staff leaving during the year. However, in order to address recognised delays there has been significant investment in homeline which is already in 3000 homes. This has been extended beyond traditional warden control to link with telecare to include monitoring temperatures, doors, beds etc'.

Tameside – 3 Stars

Key strength - the performance on telecare has significantly improved

Telford and the Wrekin – 3 Stars

There is evidence that people who use services feel safe because of the innovative Home Improvement Agency and the increasing development of telecare.

Thurrock – 2 Stars

There is an improved use of telecare to support independence.

There has been a good improvement in the provision of telecare

Torbay – 2 Stars

Tower Hamlets – 3 Stars

Area for improvement - ensure that linked plans for expanding telecare, and extra-care housing, are realised. Accelerate progress in implementing telecare and extra-care housing by achieving already planned developments

Trafford - 3 Stars

There was a substantial increase in 'telecare' equipment installed in people's homes to enhance their safety, along with access to repair and fire safety improvements

Apart from the investment in 're-ablement' services, there has been a substantial increase, well beyond that originally planned, in telecare services installed in people's homes.

Wakefield – 3 Stars

Key strength - use of telecare reducing need for long term intensive support.

The use of telecare options is reducing the need for more intensive long term support in some cases

Walsall - 1 Star

Waltham Forest – 2 Stars

Area for improvement - increase the provision of telecare equipment.

Development of Telecare services was slow, especially when compared to other London Councils.

Wandsworth – 2 Stars

Key strength - Telecare with focus on dementia The amount and range of Telecare provided rose significantly and it was well focused on older people with dementia.

Warrington – 2 Stars

Increased provision of telecare services

Warwickshire – 2 Stars

Key strength – Telecare

Telecare has also been the subject of a great deal of planning and development work in 2006/07 with districts, boroughs and other partners. Contractual and other delays mean that the step change expansion of this service will not be achieved until 2007/08.

Areas for improvement - delivery of planned service developments and improvements to further promote independence such as Telecare and reduced waiting times for Disabled Facilities Grants.

West Berkshire – 3 Stars

West Sussex – 2 Stars

Westminster – 3 Stars

Key strength – high provision of Telecare

High numbers of older people are already in receipt of Telecare and development focused on promoting benefits and testing new equipment with accelerated take-up expected in 2007.

Wigan – 2 Stars

Wiltshire – 1 Star

The council needs to ensure there is sufficient support in order to help people to live at home including the development of services like extra care housing and telecare.

Budget cuts have also impacted upon telecare provision.

Windsor and Maidenhead – 2 Stars

Areas for improvement – further improvement should be made by the council to the provision of telecare equipment

available in people's homes.

The council has worked to improve the items of telecare equipment provided and further improvements are planned for 2007/08.

Wirral – 2 Stars

Key strength - Increased provision of telecare services

Wokingham – 1 Stars

People in Wokingham had relatively poor opportunities to improve quality of life through telecare - because of the relatively low level of activity compared to the average of similar councils - and despite ambitious plans for 2006/07. The Council planned to improve this for 2007/08.

Wolverhampton - 2 Stars

Worcestershire – 2 Stars

Area for improvement - Increase in use of intensive home care and Telecare.

Telecare developments have been slower to start than the council would have wished however progress is expected in 2007/08

The council is piloting self-assessment for Direct Payments, Telecare, people who require assistance with medication and to help carers of people with a learning disability to access carers' services.

Certain areas have been more problematic for the council, with plans around expansion of Telecare and the relocation of people from NHS campus accommodation being delayed, for example.

York – 2 Stars

Key strength - successful Implementation and delivery of Telecare Services

Increased access and take up to assistive technology services and telecare services

The council has invested in the provision of telecare services that it sees as part of its prevention strategy. It is aimed at preventing the need for admission into care settings and/or more immediately aimed at reducing the demand for home care services that are committed inappropriately. The financial savings that may accrue as a result can then be invested more appropriately.

...For instance, the consultation on telecare led to the instigation of the demonstration flat

Appendix 2 – 2007/8 new user projections with 75% figures shown

In the table below, Columns A to C are from the CSCI returns completed in April 2007. Columns D to F show 75% of the projections. This is the point that local authorities would have reached by 31 December 2007. Let us know if you are not going to meet your projection – <u>telecare@csip.org.uk</u>

	A	В	С	D	Е	F
Local authority	2.10P029 Local Authority 2007-08 Projected	2.10P030Local authority and agencies 2007- 08 Projected	2.1OP031 Other agencies 2007-08 Projected	75% of Column A	75% of Column B	75% of Column C
Barking & Dagenham	300	40	0	225	30	0
Barnet	200	350	0	150	263	0
Barnsley	600	228	98	450	171	74
Bath and North East Somerset	380	60	0	285	45	0
Bedfordshire	0	400	200	0	300	150
Bexley	585	414	500	439	311	375
Birmingham	500	3000	64	375	2250	48
Blackburn with Darwen	320	120	95	240	90	71
Blackpool	80	0	0	60	0	0
Bolton	500	50	0	375	38	0
Bournemouth	220	24	0	165	18	0
Bracknell Forest	279	0	0	209	0	0
Bradford	450	42	0	338	32	0
Brent	200	50	17	150	38	13
Brighton & Hove	500	38	0	375	29	0
Bristol	1070	110	480	803	83	360
Bromley	570	0	0	428	0	0
Buckinghamshire	388	200	0	291	150	0
Bury	4 70	0	0	353	0	0
Calderdale	2550	1300	0	1913	975	0
Cambridgeshire	150	232	1000	113	174	750
Camden	370	6	35	278	5	26
Cheshire	664	930	0	498	698	0
City of London	10	10	0	8	8	0
Cornwall	150	1500	1500	113	1125	1125
Coventry	370	260	0	278	195	0
Croydon	350	450	100	263	338	75
Cumbria	200	0	0	150	0	0
Darlington	100	42	0	75	32	0
Derby	300	0	0	225	0	0
Derbyshire	20	1667	1000	15	1250	750
Devon	850	0	950	638	0	713

Doncaster	500	250	0	375	188	0
Dorset	0	240	9040	0	180	6780
Dudley	975	0	0	731	0	0
Durham	35	1466	414	26	1100	311
Ealing	446	46	0	335	35	0
East Riding of Yorkshire	537	0	0	403	0	0
East Sussex	377	1006	6120	283	755	4590
Enfield	217	45	0	163	34	0
Essex	3000	866	2500	2250	650	1875
Gateshead	250	10	0	188	8	0
Gloucestershire	350	160	500	263	120	375
Greenwich	700	25	0	525	19	0
Hackney	200	250	0	150	188	0
Halton	300	40	0	225	30	0
Hammersmith & Fulham	310	16	144	233	12	108
Hampshire	350	100	1500	263	75	1125
Haringey	112	10	0	84	8	0
Harrow	283	0	0	212	0	0
Hartlepool	0	362	0	0	272	0
Havering	1171	267	0	878	200	0
Herefordshire	313	0	123	235	0	92
Hertfordshire	533	1473	12	400	1105	9
Hillingdon	160	120	0	120	90	0
Hounslow	365	60	0	274	45	0
Isle of Wight	450	0	0	338	0	0
Isles of Scilly	4	3	0	3	2	0
Islington	125	114	0	94	86	0
Kensington & Chelsea	300	0	200	225	0	150
Kent	1020	0	0	765	0	0
Kingston upon Hull	200	450	0	150	338	0
Kingston upon Thames	10	400	50	8	300	38
Kirklees	1000	150	20	750	113	15
Knowsley	120	25	70	90	19	53
Lambeth	400	15	50	300	11	38
Lancashire	0	1800	0	0	1350	0
Leeds	1500	0	2300	1125	0	1725
Leicester	300	57	0	225	43	0
Leicestershire	300	1200	40	225	900	30
Lewisham	609	0	0	457	0	0
Lincolnshire	600	200	0	450	150	0
Liverpool	250	190	0	188	143	0
Luton	160	0	0	120	0	0
Manchester	903	35	5	677	26	4
Medway	200	50	100	150	38	75
Merton	300	0	155	225	0	116
Middlesbrough	250	200	0	188	150	0
Milton Keynes	75	10	0	56	8	0
Newcastle upon Tyne	0	667	0	0	500	0

NewhamNorfolkNorth East LincolnshireNorth LincolnshireNorth SomersetNorth TynesideNorth TynesideNorth YorkshireNorthamptonshireNorthumberlandNottinghamNottinghamshire	1727 70 300 4900 500 750 0 1250 986 114 0 1500	0 630 923 12 100 0 1418 600 400 750	0 100 0 15 0 0 0 0 0	1295 53 225 3675 375 563 0 938	0 473 692 9 75 0 1064	0 75 0 0 11
North East LincolnshireNorth LincolnshireNorth SomersetNorth TynesideNorth TynesideNorth YorkshireNorthamptonshireNorthumberlandNottinghamNottinghamshire	300 4900 500 750 0 1250 986 114 0	923 12 100 0 1418 600 400	0 0 15 0 0 0	225 3675 375 563 0	692 9 75 0 1064	0 0 11 0
North LincolnshireNorth SomersetNorth TynesideNorth YorkshireNorthamptonshireNorthumberlandNottinghamNottinghamshire	4900 500 750 0 1250 986 114 0	12 100 0 1418 600 400	0 15 0 0 0	3675 375 563 0	9 75 0 1064	0 11 0
North SomersetImage: Second secon	500 750 0 1250 986 114 0	100 0 1418 600 400	15 0 0 0	375 563 0	75 0 1064	11 0
North TynesideNorth YorkshireNorthamptonshireNorthumberlandNottinghamNottinghamshire	750 0 1250 986 114 0	0 1418 600 400	0 0 0	563 0	0 1064	0
North YorkshireNorthamptonshireNorthumberlandNottinghamNottinghamshire	0 1250 986 114 0	1418 600 400	0	0	1064	
NorthamptonshireNorthumberlandNottinghamNottinghamshire	1250 986 114 0	600 400	0	-		0
NorthumberlandNottinghamNottinghamshire	986 114 0	400	-		450	0
Nottingham Nottinghamshire	114 0		0	740	300	0
Nottinghamshire	0	750	70	86	563	53
		1515	0	0	1136	0
Oldham	1300	50	0	1125	38	0
Oxfordshire	360	100	948	270	75	711
Peterborough	220	0	948	165	0	0
Plymouth	390	120	400	293	90	300
Poole	240	450	0	180	338	0
Portsmouth	931	40	0	698	30	0
Reading	150	40	40	113	30	30
Redbridge	602	0	0	452	0	0
Redcar & Cleveland	520	0	0	390	0	0
Richmond upon Thames	340	130	40	255	98	30
Rochdale	200	70	60	150	53	45
Rotherham	748	50	0	561	38	0
Rutland	50	60	10	38	45	8
Salford	514	0	0	386	0	0
Sandwell	125	450	0	94	338	0
Sefton	610	150	50	458	113	38
Sheffield	1351	39	0	1013	29	0
Shropshire	1400	280	200	1050	210	150
Slough	250	241	0	188	181	0
Solihull	0	475	140	0	356	105
Somerset	850	0	0	638	0	0
South Gloucestershire	280	100	0	210	75	0
South Tyneside	450	20	0	338	15	0
Southampton	4100	0	0	3075	0	0
Southend-on-Sea	40	80	0	30	60	0
Southwark	720	100	0	540	75	0
St Helens	600	0	0	450	0	0
Staffordshire	400	0	4420	300	0	3315
Stockport	0	325	500	0	244	375
Stockton-on-Tees	200	50	0	150	38	0
Stoke-on-Trent	1500	300	0	1125	225	0
Suffolk	400	500	530	300	375	398
Sunderland	750	0	0	563	0	0
Surrey	480	600	6000	360	450	4500
Sutton	164	0	250	123	0	188
Swindon	61	0	0	46	0	0
Tameside	185	100	0	139	75	0

Telford & the Wrekin	2	235	0	2	176	0
Thurrock	200	120	0	150	90	0
	A		A			
Torbay	350	50	0	263	38	0
Tower Hamlets	400	120	0	300	90	0
Trafford	300	60	0	225	45	0
Wakefield	20	350	700	15	263	525
Walsall	1200	250	0	900	188	0
Waltham Forest	250	0	0	188	0	0
Wandsworth	500	0	0	375	0	0
Warrington	494	290	25	371	218	19
Warwickshire	0	250	320	0	188	240
West Berkshire	0	60	250	0	45	188
West Sussex	0	300	0	0	225	0
Westminster	0	180	0	0	135	0
Wigan	0	504	0	0	378	0
Wiltshire	0	880	0	0	660	0
Windsor & Maidenhead	106	98	55	80	74	41
Wirral	487	10	0	365	8	0
Wokingham	240	18	0	180	14	0
Wolverhampton	696	15	0	522	11	0
Worcestershire	540	200	4950	405	150	3713
York	100	0	0	75	0	0
Total	72419	39159	49455	54314	29369	37091