Telecare LIN eNewsletter

December 2008

Welcome to the December 2008 newsletter. The Telecare Learning and Improvement Network (LIN) is responsible for providing general implementation support to organisations building their telecare and telehealth programmes.

Booking is now available for the WSDAN event in Birmingham on 12 March 2008.

If you are an organisation implementing telecare or telehealth in England and have an interesting local telecare or telehealth story for inclusion in a future newsletter then e-mail Mike Clark at *telecare@csip.org.uk*

Web site links:

www.networks.csip.org.uk/telecarefactsheets
www.networks.csip.org.uk/telecarenewsletters
www.networks.csip.org.uk/telecareservices
www.networks.csip.org.uk/telecareoutcomes

WSD Action Network:
http://www.wsdactionnetwork.org.uk/

Notes: The Telecare LIN is not responsible for the content of external links and does not endorse any suppliers or their products. Any claims made by organisations should be carefully evaluated as part of normal commissioning and procurement arrangements.

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__Item 1__ links to themed reports prepared from the CSCI 2008 responses
Item 2 provides information about the upcoming WSDAN events

__Item 3__ provides information for telecare organisations on the Care quality Commission Consultation

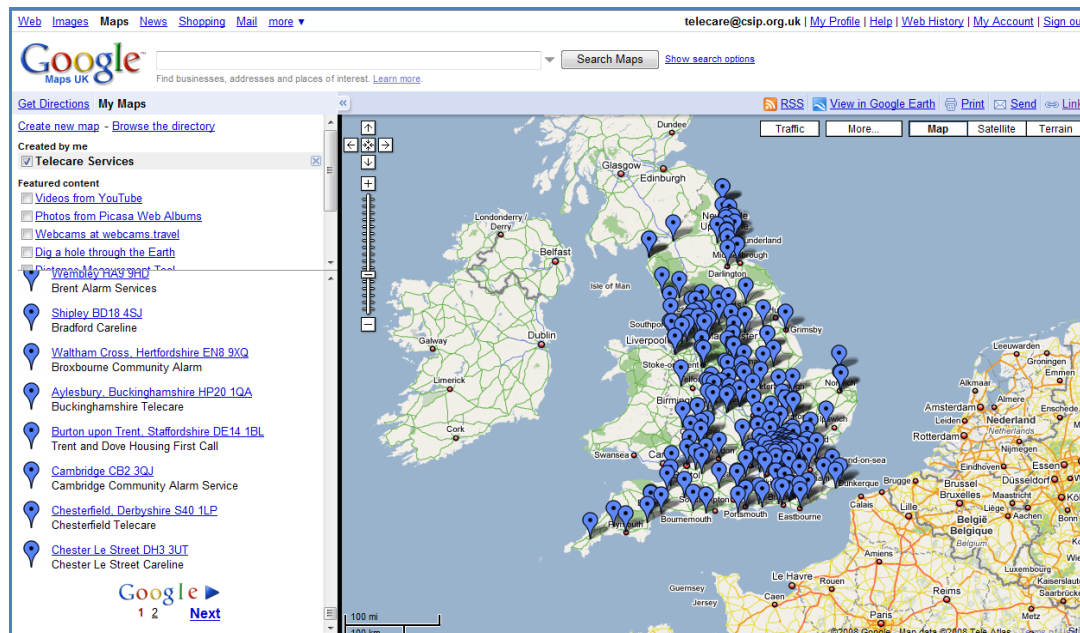*__Item 4__ provides a link to 150 updated telecare profiles*

__Item 5 and Appendix 1__ provide information for contributors about the March 2009 supplement

__Item 6__ provides a listing to news updates and links from around the world

__Item 7__ provides a listing of Network events

All previous telecare eNewsletters are available at: *__www.networks.csip.org.uk/telecarenewsletters__*

Telecare Services Map

For web site links to telecare services in England go to:
http://maps.google.co.uk/maps/ms?hl=en&ie=UTF8&msa=0&msid=100406857045032193451.0004540c22 3f16f2d1c9d&z=6
Note: 200 service links are on Page 1 and a further 114 on Page 2 (Click 'Next' at the bottom of the list to see sites on the second page)

Glossary:

ALIP – Assisted Living Innovation Platform
AT – Assistive Technology
BERR – Business Enterprise and Regulatory Reform
CSCI – Commission for Social Care Inspection
CQC – Care Quality Commission
DCLG – Department for Communities and Local Government
FACS – Fair Access to Care Services
IB- Individualised budgets
i4i – Invention for Innovation
NHS CfH – NHS Connecting for Health
NHS PASA – NHS Purchasing and Supply Agency
POPP – Partnership for Older Peoples Projects
PT Grant or PTG – Preventative Technology Grant
TSA – Telecare Services Association
TSB – Technology Strategy Board
WSDAN – Whole System Demonstrator (Long Term Conditions) Action Network

Themed reports based on the 2008 CSCI performance information are now being added to the web site.

These include reports on:

- Dementia
- Telehealth and Telemedicine
- Falls
- Intermediate Care, Hospital Discharge and Re-ablement
- Extra Care
- Evaluation, benefits, business case

The reports are prepared by carrying out keyword analysis on the outcomes and mainstreaming responses from 150 social care authorities initially collected during April/May 2008. Reference is made to the main aims of Building Telecare in England (Department of Health, 2005). Themed reports can be used to shape future local policies such as the commissioning and provision of dementia services, falls prevention strategies, intermediate care and re-ablement programmes or the use of telecare within extra care facilities.

For the full range of reports, go to www.networks.csip.org.uk/telecareoutcomes

Examples of dementia case studies reported in 2008 include:

Bath and North East Somerset have used a telecare assessment system as part of their dementia care programme. Outcomes have included improved assessment of behaviour leading to medication reviews, more effective prescribing, increased family/carer re-assurance, strategic use of services to support the individual and an overall reduction in placements. Their telecare pilot concluded that the most significant

benefits and the most positive outcomes could be evidenced for people with early to moderate dementia, who were supported to remain at home indefinitely, or for longer than anticipated periods, before being admitted to residential or nursing care.

In **Bexley**, The Telecare Dementia Project provided more detailed outcomes based on advanced equipment in situ in peoples homes. Carers have responded positively stating that anxieties have reduced and they are now able to undertake tasks such as shopping. In a case example, Mr A, an older man with dementia lives with his wife and daughter. Identified risks included leaving the property alone and becoming lost, flooding the bathroom, and unsafe use of the gas cooker. Various sensor and detector equipment were provided which alert his wife so she can immediately deal with the problem before it reaches a crisis. Mrs A is very pleased with the telecare system as it gives her the reassurance that effective systems are in place. Also she no longer needs to follow her husband around and says she is now able to do more in the garden which gives her pleasure and relaxation.

In **Bracknell Forest**, a 90 year old man with type 2 diabetes and high blood pressure with short term memory loss has been given a medicine dispenser which saves his son ringing several times a day to remind his father to take his medication. In another example, a 78 year old with Alzheimer's Disease, lives with her daughter and son in law who both work full time. She has good physical health and is quite active. She has a history of wandering during the day and leaving taps on. A flood detector in the bathroom, a property exit sensor and a passive infrared detector for inactivity were installed. Both family members are relieved to know that they will be informed in a timely manner for prompt action should their mother leave the house or leave taps on. They are both able to continue in employment.

In **Bradford**, carers report that they are reassured about management and reduction of risk and given more personal freedom and support. Assessment equipment (lifestyle monitoring) and a voice prompt system reduced risks to a service user with dementia to live on her own and prevented admission to a care home.

In **Richmond**, a pilot project assessing effectiveness of telecare for older people with Alzheimer's Disease & carers installed telecare devices (50 sensors) for ten people. This included smoke, natural gas & carbon monoxide detectors, property exit (for wandering) detectors & temperature extreme sensors. Flood, bed, sensor pillow alert & sounder/visual beacon sensors were also installed. Feedback from carers indicates decreased anxiety & stress. Users were supported to continue living at home through this risk management approach. The incidence of wandering, home safety (gas/smoke/carbon monoxide), flooding & falls has reduced.

In **Salford**, examples include: (1) An elderly man with dementia and a history of wandering, which often involved the police, remained in extra care housing for a further 12 months following the installation of door contacts. Without this provision he would have required residential care (2) A couple, Mrs A with dementia & a history of falls and Mr A is hard of hearing and was not getting any sleep listening out for his wife. The provision of a telecare bed sensor has provided a solution to the problem & enabled him to get a good nights sleep.

In **Solihull**, one client with Alzheimer's Disease had begun to leave gas appliances on unlit and as a heavy smoker, she also left lit cigarettes in ashtrays. Smoke detectors and a gas detector/shut off valve were installed to manage the risk and as a result the lady was able to continue to live safely in her own home. Carers were also reassured about her safety. Another service user with Alzheimer's lived alone and frequently left her home in the middle of the night. Sensors were installed which ensured assistance was summoned if she left the house and this meant the risk was reduced and her son felt reassured his mother could continue to live in her home rather than need admission to residential care.

In **Trafford**, Ms X has advanced dementia and due to issues of personal safety (wandering at night, leaving cooker on, bogus caller incident) her son was considering residential care as he could no longer sustain the caring relationship because of the impact on his job. The installation of a bed sensor, wanderer alarm, bogus caller warning and smoke detectors mean that Ms X has been supported to safely remain in her own home, promoting her choice and independence, while her son has been able to remain in employment and has reported a huge reduction in the stress he was experiencing.

In **West Berkshire**, an older person with dementia, receiving 24 hour care and supervision in own home, was restricted to living upstairs as mobility decreased. A bed occupancy sensor was used to alert the spouse and also to support live-in care to be arranged allowing the spouse to have a respite break.

In **Wokingham**, family stress and anxiety has been reduced with a wireless alert to the carer which signals when the service user who has dementia leaves her room at night (used to attempt to cook at night in the kitchen which was a gas safety hazard). The carer reported: "I worry a lot less since the equipment was installed". in another case, a husband is now able to sleep at night because he knows he will be alerted by a floor contact mat if his wife, who has dementia, gets out of bed.

Examples of *telehealth* case studies reported in 2008 include:

In **Bath and North East Somerset**, an evaluation report of the Telecare & Telehealth pilot was produced in December 2007. The pilot assessed five projects including a Heart failure service. Telemedicine has been used within an Extra Care setting and with Heart failure patients known to specialist nurses, outcomes were limited in this case however clients were enthusiastic about its use and felt re-assured about their vital signs. There was some reduction in the number of home visits by Heart failure specialist nurses. Specific recommendations from the Telecare & Telehealth evaluation report have been incorporated into the Joint Older People's Commissioning Plan, key actions for mainstreaming the pilot include mainstreaming and integrating telecare and telehealth equipment within the general assessment process for health and social care and to increase the number of people using it. The integraione of telecare and telehealth equipment within community services to support people with long term conditions and mental health needs, focusing on long term prevention and health education rather than acute hospital admission.

Blackburn Council has developed strong relationships with the PCT who have contributed £20k for telehealth for use alongside social care telecare funding to develop formal links to increase both the quality and quantity of service provision. Users potentially requiring telecare/telehealth packages are considered at the weekly joint panel (telehealth funding can help unlock for support for people not eligible via social care). Training including community nurses to be jointly delivered.

In **Cheshire**, 15 patients have received a telemedicine service in 2 PCT areas. Community matrons and GPs are already commenting on its value in targeting support to people with long term conditions. Telemedicine pilot will continue in West Cheshire funded by Innovations Forum.

In **Durham**, in addition to older persons' provision, a Telehealth pilot was conducted for 12 patients with long term conditions. Evaluation has demonstrated a 16% reduction in GP consultations, a 26% reduction in District Nurse visits and a 38% reduction in hospital bed days during the pilot period. The majority of patients found the system offered reassurance and improved their quality of life.

East Riding plan to complete & evaluate a telehealth pilot with the PCT focusing on COPD and Diabetes. 12 pieces of monitoring equipment are in use, this includes 1 machine in a sheltered housing scheme, giving all residents access. This enables the patient to take their own vital sign measurements in their own

home & healthcare professionals remotely observe the measurements. This allows early identification of deterioration resulting in a planned co-ordinated & proactive approach to LTC management.

East Sussex will run a Telehealth project in partnership with the PCTs and Wealden & Eastbourne Lifeline which will be jointly funded. It will enable them to evaluate the potential for multi-agency partnership and whole system working in the provision of care closer to home. The aim is to run this scheme as a preliminary to mainstreaming telehealth in the community on a long-term basis; this would place East Sussex in a leading position in the implementation of telecare and telehealth in the UK.

The **Kent** Telehealth Development Pilot, the largest in the UK with 250 participants, ended for evaluation purposes on 31 December 2007. Participants completed evaluation tools, namely QuIL on entry and exit to the pilot and SF12 was completed every 8 weeks during the Pilot period. Responses are still being processed along with the evaluation, prior and post trial, of interaction with services. Formal publication of the outcomes of the Pilot are anticipated later this year. Early indications are that participants felt more empowered, more confident and independent and as a result of that experienced less anxiety and thus interacted less with services but when they did access services it was more appropriately. As a result of that we've seen the number of bed days for the group decrease, emergency admissions decrease and where individuals have died, it's been at home rather than hospital which is better for the individual, better for their carers and better for services.

Whilst the evaluation of the Kent Telehealth Development Pilot has closed and the outcomes will be published, it has been hugely successful. The 250 participants or their successors still benefit from the technology as Telehealth delivery and monitoring continues in partnership with East Kent and West Kent PCTs. The technology is embedded in service delivery and will mainstream into the PCTs by April 2009. Also included in the pilot were other agencies such as Volunteer Groups and Age concern who support people who may not have a carer and need help with taking their measurements. More recently a group of service users from the Kent Pilot who've benefited from using the technology, have volunteered to support new and existing users by undertaking trouble shooting and answering general queries. They have recently undergone training on the technology and are fully supported by KASS. We're working closely with the PCTs to link the group in to other networks such as disease specific patient groups. We will continue to work in partnership, to improve our joint delivery of services to bring care closer to home in a seamless and positive way for service users. WSD will facilitate the installation of 1333 new users of Telehealth delievered and maintained through partnership working.

In **Kingston upon Hull**, a joint LA and PCT telecare and telehealth strategy has been drafted. This will support ambitions to develop a range of telecare and telehealth services based on 3 work programmes:

• self care/self serve – information and signposting services

• watchful waiting/assisted care telecare – remote monitoring

• vital signs monitoring/self directed care – telehealth

Funding will be budgeted year on year to deliver on these ambitions

In **Lincolnshire**, improved health and speedy discharge from hospital/intermediate care has been assisted through vital signs monitoring and the home from hospital scheme using Telecare.

In **Milton Keynes**, Telehealth services are also developing in partnership with the PCT and we have 18 monitors for people with long term conditions.

Newham Assistive Technology (NeAT) has been mainstreamed into service provision and is managed by a dedicated manager within the physical disabilities integrated service. Future projected benefits from the Whole Systems Demonstrator project have been factored into the Strategic Commissioning Plan by the PCT. Demand forecasting work that has been done and that is included within the JSNA has also projected forward a growth in telecare and telehealth installations that will increase numbers of people able to live in their own homes and therefore reduce institutional admissions. The NeAT project will continue to roll out telecare packages to both residents living in their own homes and those in sheltered accommodation with a target of 250 – 400 new users under mainstream services and 832 under the Long term conditions Whole System Demonstrator in 08/09.

Norfolk was the Telehealth Project regional winner of the Innovative Health and Social Care Technology Award. UEA currently evaluating the project - expected to show a reduction in acute admissions.

In **Northumberland**, telehealth services have been provided as an integrated part of the same pilot, and are judged to have been sufficiently successful to justify a bid for mainstream NHS funding for the future. In conjunction with telecare services, the Care Trust has developed telehealth initiatives, which pending successful application through the Annual Operational Plan process, it will implement in the community. There is also a telehealth model being designed to support

In **Sheffield**, from the multi agency assistive technology strategy group, we supported a telehealth project with the PCT which won the regional innovative information and communications category in the health & social care awards. The remote monitoring of COPD patients led to people spending less time in hospital. The use of stand alone assistive technology also contributed towards enabling people with a learning disability to move from a hostel into supported accommodation.

Contact Mike Clark at telecare@csip.org.uk for further assistance with analysis and benchmarking of telecare information from around England.

The first WSDAN open event scheduled for London on 22 January 2009 has now reached maximum attendance and booking has opened for the Birmingham event on 12 March 2008.

Events will continue at 2-3 month intervals around the country into 2010 and will continue to highlight the developing evidence base for telecare and telehealth.

After Birmingham, the likely next event is scheduled for June 2009 and the likely venue is Leeds. Following that, we are looking at Bristol for September 2009.

The programmes for the WSDAN events will follow the themes identified by the Whole System Demonstrators and the Action Network of 12 sites.

The draft programme for London on 22 January 2009 is:

Times	Areas to be covered
10.00am until 11.15am Integrated health and social care using telecare and telehealth	**Important progress points in 2008** • World Class Commissioning and Transforming Social Care/integrated care pilots/personal budgets • Other relevant policy – Carers Strategy, Dementia Strategy, Extra Care, Lifetime Homes, Digital Inclusion • Short background and progress across the WSD demonstrators • Stakeholder buy in, leadership, workforce and other big issues • The work of the Whole System Demonstrator Action network (WSDAN) in dissemination of learning and building the evidence base for telecare and telehealth in England • Evaluation approaches • How does the WSD methodology differ from mainstream implementation? • Lessons for local implementation from two years of progress
11.15am until 11.45am	Break
11.45am until 12.45am	Scaling telecare and telehealth programmes • Workshop 1 - Health records, interoperability, whole system approaches • Workshop 2 – procuring equipment and services, future of the telecare national framework (2010 onwards) – NHS PASA consultation • Workshop 3 – Partnership and consortium working, implementation and design - the Assisted Living Innovation Platform
12.45am until 1.30pm	Lunch
1.30pm until 2.30pm	Scaling telecare and telehealth programmes • Workshop 1 - Health records, interoperability, whole system approaches • Workshop 2 – procuring equipment and services, future of the telecare national framework (2010 onwards) – NHS PASA consultation • Workshop 3 – Partnership and consortium working, implementation and design - the Assisted Living Innovation

	Platform
2.30pm until 3.45pm	**Overcoming implementation barriers** • Moving to 'four figure telehealth' ("From 30 to 3000 users") • Barriers with examples of how they can be overcome • PARR++ and predictive modelling • Identifying who is most likely to benefit from telecare and telehealth • Virtual Wards and other innovative approaches • Tracking and evaluating progress in real time • Evaluation approaches – tools, surveys etc • Impact of commissioning/service provision arrangements in PCTs
3.45pm until 4.00pm	Closing remarks • Summary • Mapping out progress points and milestones for 2009
4.00pm	Close

As we progress through 2009 into 2010, we will continue to cover major themes around the business case for telecare and telehealth, regional monitoring, use of interoperable devices as they become available, standards, workforce issues as well as providing practical local examples of services that work.

The WSDAN web site (Department of Health and the King's Fund) will continue to publish the latest research and reports from the WSD Action Network. Contact the WSDAN mailbox for more information, to submit evidence of your own local evaluations or to suggest themes for the events.

You can register for WSDAN news updates at
http://www.wsdactionnetwork.org.uk/about_wsdan/register_for_updates.html
Mailbox: wsdnetwork@kingsfund.org.uk
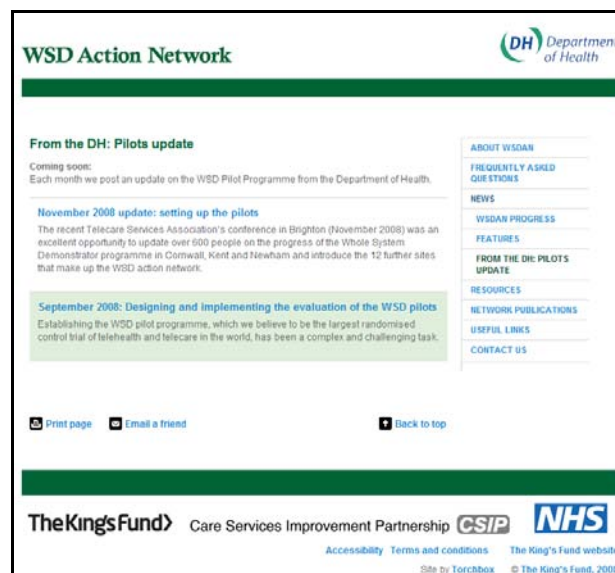
The Care Quality Commission (CQC) has set out its approach to reviewing the performance and activities of health and social care organisations in 2009/10 and is embarking on a consultation with stakeholders. The approach is underpinned by the CQC's aim of ensuring better care for people and its focus on high quality health and social care.

The CQC is the first regulator to launch an integrated consultation on the regulation of both health and adult social care, on both commissioning and providers and on the proposals for special reviews and studies. This demonstrates the inclusive approach that will be characteristic of the Care Quality Commission.

2009/10 is a year of transition between how health and social care services are assessed now and how this will be done in the future and the CQC is proposing a progressive approach to this change during 2009/10. From April 2010 new registration requirements for all health and social care providers will come into force and the CQC believes that providers need to concentrate on preparing for this. However, the CQC expects that providers will continue to meet the existing standards on safety and quality of care whilst preparing for the new registration requirements and check that they are doing so.

The CQC is consulting for 12 weeks (18 December 2008 to 12 March 2009) on the proposals, which have three main elements:

- Reviews of health and social care commissioning (by primary care trusts and local authority adult social services departments)

- Reviews of providers of health and social care services (such as hospitals, and mental health services)

- Special reviews and studies of aspects of health and social care, separately and together.

The consultation paper also sets out what the CQC means by quality in assessing health and social care services and how this definition will influence all of its work.

Reviews of commissioning

The CQC will assess how well primary care trusts (PCTs) and council adult social care departments are commissioning services. It will do this through periodic reviews of their performance.

PCTs and councils will continue to be assessed separately in 2009/10, but the CQC will also introduce a framework for assessing services that spans health and social care commissioning and which reflects its definition of quality care.

The CQC will publish a scorecard for PCTs and will continue to grade the assessment of delivery of outcomes for adult social care as has been done in 2008/09. Results will be published on the CQC website, including information about how well councils and PCTs are working together to meet the needs of the community.

CQC will issue a report on how well PCTs and councils have worked together on commissioning. This will be used as part of the evidence contributed to the Comprehensive Area Assessment.

Reviews of providers

For NHS providers, the CQC review in 2009/10 will replace the Annual Health Check. It is a transition year during which NHS providers will need for the first time to be registered under the Health and Social Care Act 2008 by the time the requirements come into force on 1 April 2010. Until then, Standards for Better Health will continue to apply. (Standards for Better Health are the standards health organisations are currently expected to meet).

Independent heath care and adult social care providers will continue to be registered under the Care Standards Act 2000 and compliance with registration will be reviewed in a similar way to previously.

For adult social care services, CQC's reports will show how well services have done and what they need to do to improve, with a quality rating from zero stars (poor) to three stars (excellent). As before, the quality rating will influence how often we review a service.

Special reviews and studies

The CQC's special reviews and studies can cover virtually any aspect of health and social care. Its aim will be to look at the outcomes for the people using services and ensure that the reviews and studies are informed by the experience of people who use health and social care services, their carers and families.

The CQC has chosen topics that it believes are of public concern; where services and practice need improving; or issues that have national policy implications. Importantly, some of the topics cover joint health and social care issues so we can examine how services work together. This demonstrates the important role that CQC brings to reviewing health and social care in an integrated way. The consultation asks for views on the issues to be addressed by reviews and for ideas for future reviews.

Reviews and studies will support the CQC's work to improve the quality and value for money of health and social care and make the best use of its evidence about the performance of health and social care services.

There are different types of reviews and studies. Some might involve scored assessments across all organisations or inspections of individual bodies, while others might be national studies that lead to general rather than specific recommendations for services, practice and policies.

The CQC will publish a single annual state of health and social care report and an annual report on the operation of the Mental Health Act (which may be a separate report, or included in the state of health and social care report).

The subjects being considered for special reviews in 2009/10 are:

Meeting the healthcare needs of people (adults of all ages) in care homes.

- Meeting the physical health needs of people with mental health problems and learning disabilities in hospital and residential settings.

- How well is the health and social care pathway working for a)people who have stroke and their carers; b) people with dementia?

- The impact of commissioning and health promotion on health inequalities.

- How well are health and social care services addressing equality and human rights – focussing on commissioning in two or three service areas?

- How well are councils responding to people's first contact with them? (to assess progress since the review of eligibility criteria)

- What measures and good practice are in place to ensure the safety of surgery and anaesthetics?

- A review of health and social care for families with disabled children and young people.

- Child and adolescent mental health services.

- A review or study focussed on value for money that covers both quality and cost of care in the areas of a) diagnostic services in acute hospitals; b) commissioning c) services for older people.

Link: http://www.cqc.org.uk/

Telecare profiles for 2008 are now available – one for each of the 150 social care authorities.

These have been developed from the CSCI telecare performance and summary reports.

They are available at www.networks.csip.org.uk/telecareprofiles

5 Telecare supplement for March 2009 Telecare LIN

If you would like to contribute to the next telecare supplement, then details are available for the March edition in the newsletter appendix.

The supplement is an opportunity for a wide range of organisations to share information on case studies, new products and services, innovations etc.

The December 'Housing with Care Matters' newsletter is now available at:
http://networks.csip.org.uk/_library/Resources/Housing/Support_materials/Newsletter/Newsletter33.pdf

Audit Commission briefing - *Clarifying joint financing arrangements (December 2008)*
http://networks.csip.org.uk/icn/News/NewsArticle/?cid=4891
http://www.audit-commission.gov.uk/reports/NATIONAL-REPORT.asp?CategoryID=ENGLISH^574&ProdID=A7A89F5F-9D04-4f92-B3B5-196731FA63A6

37 applications through to next stage of integrated care pilot selection process
http://networks.csip.org.uk/icn/Resources/Type/ICNResource/?cid=4888

The TV set that keeps an eye on Alzheimer's sufferers- STREAM (Hull)
http://www.dailymail.co.uk/health/article-1102785/The-TV-set-keeps-eye-Alzheimers-sufferers.html

Monitoring mental health by text
http://news.bbc.co.uk/1/hi/health/7797155.stm

Telecare plan spells independence – Wrexham
http://www.dailypost.co.uk/news/north-wales-news/2008/12/03/telecare-plan-spells-independence-55578-22391812/

EU internet access reaches 60 per cent
http://www.ehealtheurope.net/news/4381/eu_internet_access_reaches_60_per_cent

Celebrating the 60th anniversary of the NHS   **NHS**60

the operating framework
for the NHS in England 2009/10

high quality
care
for
all

(DH) Department of Health

"The Prevention Package for Older People will initially improve falls and fracture services, foot care, intermediate care, telecare and audiology services, with the aim of enabling older people to live longer, healthier and more independent lives. The package will evolve with new enhancements added over time".

NHS Operating Framework 2009-2010
http://www.dh.gov.uk/en/News/Recentstories/DH_091665

Telecare expected to play key role in improving care services
http://www.publictechnology.net/modules.php?op=modload&name=News&file=article&sid=18131

Telecare and dependability
http://thetelecareblog.blogspot.com/2008/11/telecare-and-dependability.html

Hungary signs e-health deal with GE Healthcare
http://www.ehealtheurope.net/news/4365/hungary_signs_e-health_deal_with_ge_healthcare

Public urged to feedback on NHS services
http://www.onmedica.com/NewsArticle.aspx?id=30b71ab3-a7ae-4166-ac1e-da0ea6e82e55

Health IT weighed for economic stimulus package
http://www.govhealthit.com/online/news/350700-1.html

Health ministers agree to share patient e-records
http://www.theaustralian.news.com.au/story/0,25197,24758462-23289,00.html

Dr Gray's plans to be e-health centre – Scotland
http://www.ehiprimarycare.com/news/4383/dr_gray's_plans_to_be_e-health_centre

EHTEL publishes e-health patient charter
http://www.ehealtheurope.net/news/4310/ehtel_publishes_e-health_patient_charter

Alberta Govt Plan for healthcare delivery reference to assisted living and supportive housing, telehealth
http://www.prairiepost.com/index.php?option=com_content&task=view&id=3237&Itemid=26http://www.health.alberta.ca/resources/publications/Vision-2020-Phase-1-2008.pdfhttp://www.gov.ab.ca/home/NewsFrame.cfm?ReleaseID=/acn/200812/24855F345C4C5-E36D-0A41-FE189CBA5195F6D4.html

UNITED STATES: E-Therapy: History and Survey
http://www.ibls.com/internet_law_news_portal_view.aspx?s=sa&id=1483

Telehealth Solutions-Time to Come Out of the Closet
http://my.barackobama.com/page/community/post/johnzauher/gGxvmL
TeleHomecare Conference Coming
http://telemedicinenews.blogspot.com/2008/11/telehomecare-conference-coming_30.html

Telehealth and EMRs - How can Physicians Use these Tools?
http://blog.canadianemr.ca/canadianemr/2008/11/telehealth-and-emrs-how-can-physicians-use-these-tools.html

Telemedicine for Urban Uninsured: A Pilot Framework for Specialty Care Planning for Sustainability
http://www.liebertonline.com/doi/abs/10.1089/tmj.2008.0008

Telemedicine M.D. Consultations Generate High Satisfaction and Usage Among Working-Age Adults
http://www.marketwatch.com/news/story/Telemedicine-MD-Consultations-Generate-High/story.aspx?guid=%7B3BDFD6D3-D11F-4670-ADA7-CB05FF2A05EA%7D

Text service provides more than a Band-Aid for rural health service
http://www.cnn.com/2008/TECH/12/03/db.malawicellphones/

Cordis - An EU funded project to achieve optimum health
http://cordis.europa.eu/wire/index.cfm?fuseaction=article.Detail&rcn=18360

Telemedicine Improves Outcomes
http://telemedicinenews.blogspot.com/2008/11/telemedicine-improves-outcomes.html

Sweet Charity, Connected Health
http://www.nextgenweb.org/news-and-blog-clips/sweet-charity-connected-health

TELEMEDICINE SAVES TIME AND MONEY: REPORT – University of Rochester, Children
http://www.wptv.com/content/health/mb/story/Telemedicine-saves-time-and-money/DM07BwL11kOXQdrJ3Opa7g.cspx

http://www.kirklees.gov.uk/community/health-care/independent/indepentliving.shtml

Tata Plans to Commercialize Healthcare Portal
http://www.pcworld.com/article/154464/tata_plans_to_commercialize_healthcare_portal.html

'VirtualRounds' Boost North West Patient Care – Tasmania
http://www.media.tas.gov.au/release.php?id=25372

Telemedicine aids stroke care
http://pingbuzii.blogspot.com/2008/11/telemedicine-aids-stroke-care.html

The Future of Healthcare
http://www.nanotech-now.com/columns/?article=257

Life-saving medical technology business is recognised with Award – Visensia hospital system
http://www.pharmiweb.com/pressreleases/pressrel.asp?ROW_ID=5207

Intel Health Guide
http://thefutureofthings.com/pod/5852/intel-health-guide.html

€250,000 for robot doctors – Dublin
http://www.irishmedicalnews.ie/index.php/component/content/article/1-news/562-250000-for-robot-doctors

Antibiotics cut COPD risk
http://www.healthcarerepublic.com/news/PracticeStaff/LatestNews/865166/Antibiotics-cut-COPD-risk/

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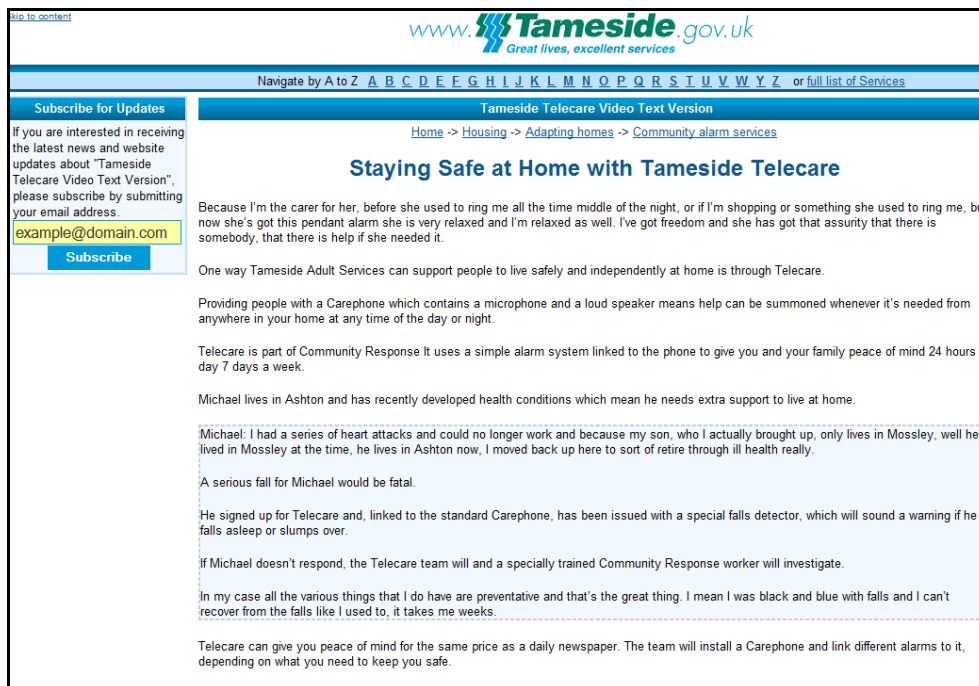Activities in Telehealth, Telemedicine, and Health Technologies (2009 edition)
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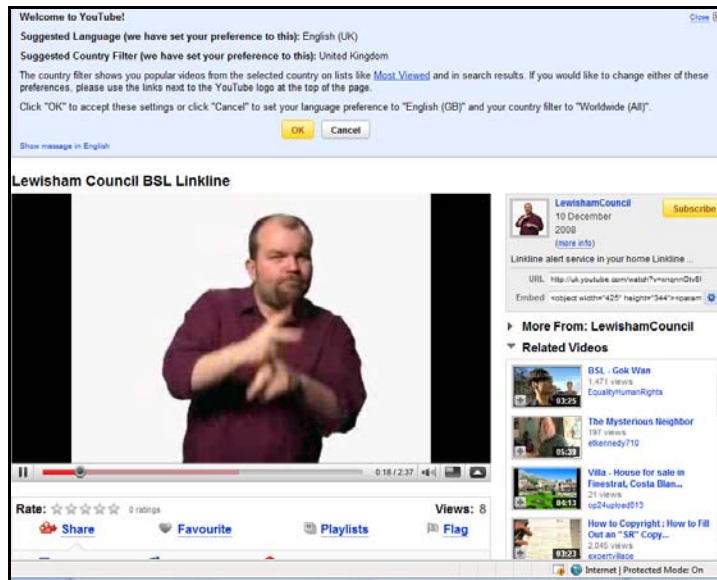
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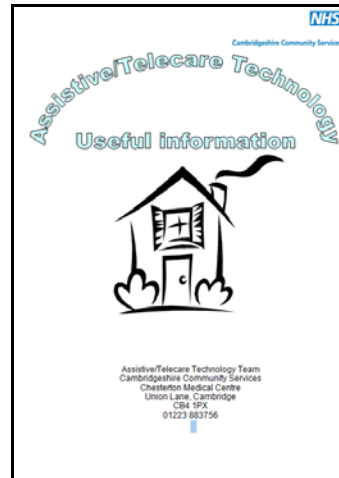
http://www.cambridgeshire-pct.nhs.uk/documents/Provider%20Services/Adult%20Services/assistive%20technology/ATT_useful_information_pack.doc?preventCache=05%2F12%2F2008+14%3A30

Keogh promotes use of the NHS Number
http://www.ehiprimarycare.com/news/4392/keogh_promotes_use_of_the_nhs_number
http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/DH_091407

'Self-Weighing Promotes Weight Loss for Obese Adults'
http://www.bewellbuddy.com/2008/12/self-weighing-promotes-weight-loss-for-obese-adults/

TRIAGE-CRT Telemonitoring in Patients With CHF and Indication of CRT-D
http://clinicaltrials.gov/ct2/show/NCT00395642?term=crt&rank=12

Acceptability of an Electronic Self-report Assessment Program for Patients With Cancer
http://www.mdlinx.com/NurseLinx/xml-article.cfm/2505170

Patient keeps hospital appointment over the internet for first time in Wales
http://www.walesonline.co.uk/news/wales-news/2008/12/11/patient-keeps-hospital-appointment-over-the-internet-for-first-time-in-wales-91466-22451281/

Raleigh's TeleHealth Services Creates Pediatric Health Channel
http://wake.mync.com/site/wake/news/story/21616/raleighs-telehealth-services-creates-pediatric-health-channel

Effect of Electronic Prescribing With Formulary Decision Support on Medication Use and Cost
http://archinte.ama-assn.org/cgi/content/abstract/168/22/2433

Delivering Care Anytime, Anywhere: Telehealth Alters the Medical Ecosystem
http://www.chcf.org/topics/view.cfm?itemid=133787

The Doctor Will E-Mail You Now
http://www.newsweek.com/id/173874

Hospital Goes HD with Telemedicine (Ohio)
http://www.healthdatamanagement.com/news/telemedicine27412-1.html

TOC IJBET Vol 2-1 2009

International Journal of Biomedical Engineering and Technology (IJBET), TOC Volume 2 - Issue 1 - 2009
Special Issue on Telemedicine and e-Health

Wireless monitoring of cardiac activity: a critical review
"Despite significant progress and improvement made in its prevention and treatment, Cardiovascular Disease (CVD) remains to be the main cause of mortality and morbidity in the industrialised world. Patients with the risk of acute heart problems need precise and continuous monitoring. Remote monitoring of patients' heart activity enables the healthcare providers to access the crucial data in real time and help the patients to benefit from mobility in the hospital, home or workplace. This paper critically reviews the current trends and significant challenges in this area and suggests the next steps toward upgrading the ubiquitous healthcare."
Hossein Fariborzi, Mahmoud Moghavvemi, IJBET 2009 - Vol. 2, No.1 pp. 4 - 28, DOI: 10.1504/IJBET.2009.021905
http://articles.icmcc.org/wpc/?p=3975

Functional and Clinical Outcomes of Telemedicine in Patients With Spinal Cord Injury
http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6WB6-4V2NC01-K&_user=10&_coverDate=12%2F31%2F2008&_rdoc=19&_fmt=high&_orig=browse&_srch=doc-info(%23toc%236702%232008%23999109987%23746242%23FLA%23display%23Volume)&_cdi=6702&_sort=d&_docanchor=&_ct=33&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=506b896c0594ea3654aebd37807d10fa

Technology allows hospital to escape its four walls
http://www.nationmultimedia.com/2008/12/09/technology/technology_30090557.php

Patient safety telemedicine watch saves lives (video)
http://doctors.findfastr.com/4/patient-safety-telemedicine-watch-saves-lives

For world's sick, 'help is just an e-mail away'
http://www.chicagotribune.com/news/nationworld/chi-telemedicine_slider_bdnov30,0,3264686.story

http://clinicaltrials.gov/ct2/show/NCT00781365?spons=%22HealthPartners+Research+Foundation%22&spons_ex=Y&rank=6

http://clinicaltrials.gov

Secure Telemonitoring System for Delivering Telerehabilitation Therapy to Enhance Children's Communication Function to Home
http://www.liebertonline.com/doi/abs/10.1089/tmj.2008.0003

The Home HF Study: A multi-centre randomised trial of home telemonitoring in a genral hear failure population with co-morbifity
http://spo.escardio.org/CongressPresentations/ESC2008/2542/2542.pdf

Independent living range hits 3,500 products - NRS
http://www.hesmagazine.com/story.asp?sectioncode=196&storyCode=2048854

Europe launches CommonWell project
http://www.ehealtheurope.net/news/4404/europe_launches_commonwell_project

Award for housing association's call centre
http://www.callcentrehelper.com/award-for-housing-associations-call-centre-2427.htm

Invicta Telecare welcomes new contracts
http://www.24dash.com/news/Housing/2008-12-09-Invicta-Telecare-welcomes-new-contracts

Telecare Providing Vital Support For People With Dementia And Their Families
http://www.medicalnewstoday.com/articles/133353.php

Creative approaches to care and support must be provided
http://www.publicservice.co.uk/feature_story.asp?id=10961

WORKING TOGETHER TELEHEALTH&TELECARE CONFERENCE 2009
http://www.sct.scot.nhs.uk/documents/SCT_Prog_4.pdf

World Blood Glucose Meters and Strips Market
http://www.businesswire.com/portal/site/google/?ndmViewId=news_view&newsId=20081216005685&newsLang=en

Home Diagnostics is Named One of Forbes Magazine's "200 Best Small Companies"
http://www.businesswire.com/portal/site/google/?ndmViewId=news_view&newsId=20081216005155&newsLang=en

Insulin Pump Therapy
http://diabeticdiets.wordpress.com/2008/12/21/insulin-pump-therapy/

Tender: Leicester: alarm-monitoring
http://www.publictenders.net/modules.php?op=modload&name=News&file=article&sid=72549&topic=202&newlang=eng

Quality framework improves care for long-term condition patients
http://www.healthcarerepublic.com/rss/news/article/868442/Quality-framework-improves-care-long-term-conditions-patients/

https://online.surreycc.gov.uk/sccwebsite/sccwspages.nsf/LookupWebPagesByTITLE_RTF/Surrey+Matters+-+winter+2008+-+When+I'm+64+-+74+-+84?opendocument

Health Technologies KTN is developing a UK directory of Assisted Living Organisations
http://www.cambridgenetwork.co.uk/news/article/default.aspx?objid=54850

Remotely tracking elderly's moves & vital signs, the future?
http://hv120.cn/index.php/article/diseases/2008-12-27/5188.html

Remote Physiological Monitoring System Gains Medical CE Approval
http://www.pcb007.com/pages/zone.cgi?a=46921

News sites

http://www.govhealthit.com
http://www.healthnewsdirect.com
http://www.ehealtheurope.net/
http://www.e-health-insider.com/

<http://www.telecareaware.com/>

Eight different versions of the Tameside Telecare video have been produced on a single DVD, to satisfy Tameside's requirement for accessibility of information. Five community languages, subtitles and British Sign Language versions ensure that every community member can find out about the new warden response and alarm service on offer

http://ftlimageworks.net/gallery_tameside.html

Remotely tracking elderly's moves & vital signs, the future?
http://hv120.cn/index.php/article/diseases/2008-12-27/5188.html

Remote Physiological Monitoring System Gains Medical CE Approval
http://www.pcb007.com/pages/zone.cgi?a=46921

Let a Roman goddess empower your services – Pellonia by Alertacall
http://www.pellonia.com/news02dec08.cfm

Creating nursing homes worth living in
http://www.pbn.com/stories/37065.html

http://www.aberdeenshire.gov.uk/about/departments/AberdeenshireTelecareProjectEvaluationReport.pdf
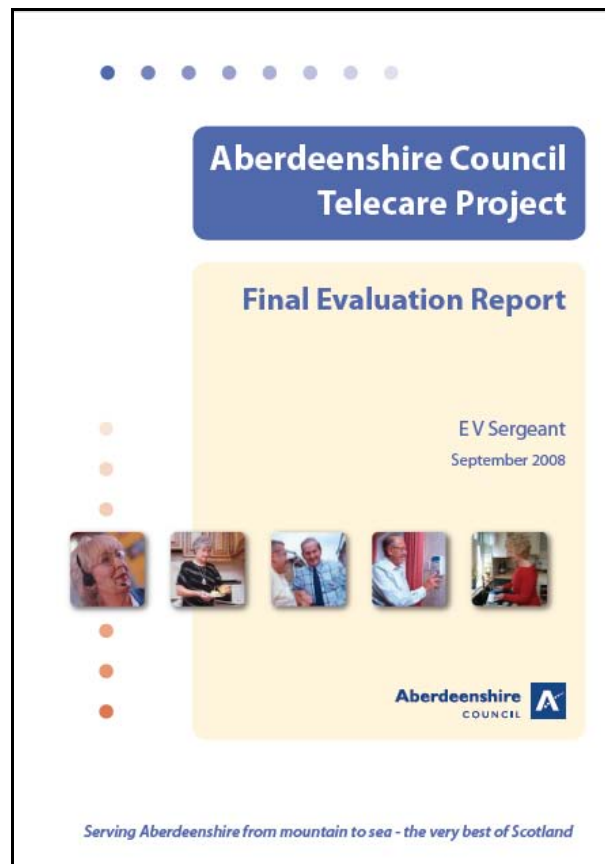
Lancashire OAP's homes 'may be fitted with high-tech sensors'
http://www.lancashiretelegraph.co.uk/news/4016484.Lancashire_OAP_s_homes__may_be_fitted_with_high_tech_sensors_/

New London Telecare Poster

http://www.londontelecare.com/

Delivering Lifetime Homes, Lifetime Neighbourhoods - A National Strategy for Housing in an Ageing Society

This publication is a follow up to *Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society* which was published in February 2008. It sets out a record of the actions and recommendations which were proposed in the above strategy and measure which been taken and progress made on these. It also describes the various key initiatives which are being taken or are due to be launched to implement the strategy.

http://www.communities.gov.uk/publications/housing/housingageingsociety

a) CSIP Networks events planner

Forthcoming Event List (28 December 2008)

Date	Event Title	Network	Places Remaining	Book
09/01/09	West Midlands Personalisation Event	Personalisation	4 of 75	**Book now**
13/01/09	Sixth Annual Drug and Alcohol Professionals Conference	Alcohol Learning Centre	-	N/A
13/01/09	Personalisation, Safeguarding & the No Secrets Review	Personalisation	14 of 60	**Book now**
15/01/09	Outcome-focused reviews	Personalisation	17 of 25	**Book now**
16/01/09	Resource Allocation System	Personalisation	20 of 50	**Book now**
22/01/09 to 23/01/09	Outcome-focused reviews. Event Timings: 22nd Jan 11am-6:15pm and 23rd 9am-3:15pm	Personalisation	42 of 50	**Book now**
22/01/09	Whole System Demonstrator Programme (WSDAN) - Integrated care using telecare and telehealth	Telecare LIN	FULL	FULL
22/01/09	Common Assessment Framework (CAF) for Adults Consultation Events – London	Personalisation	71 of 90	**Book now**
22/01/09	West Midlands Regional Housing LIN Meeting	Housing	Reserve places available	**Add me to the reserve list**
27/01/09	Common Assessment Framework (CAF) for Adults Consultation Events - Newcastle	Personalisation	76 of 90	**Book now**
27/01/09 to 28/01/09	Self directed support - The future for supported housing? - 15th Annual Housing, Care and Support conference	Housing	-	N/A
29/01/09	North East Regional Housing LIN Meeting	Housing	16 of 35	**Book now**
29/01/09	Common Assessment Framework (CAF) for Adults Consultation Events – Nottingham	Personalisation	84 of 90	**Book now**
29/01/09	Planning for Transformation Framework Review 29th January 2pm-5pm	Personalisation	FULL	FULL
03/02/09	Common Assessment Framework (CAF) for Adults Consultation Events – London	Personalisation	73 of 90	**Book now**

05/02/09	Common Assessment Framework (CAF) for Adults Consultation Events – Manchester	Personalisation	54 of 80	**Book now**
11/02/09	Common Assessment Framework (CAF) for Adults Consultation Events – Bristol	Personalisation	76 of 90	**Book now**
17/02/09	Common Assessment Framework (CAF) for Adults Consultation Events – Leeds	Personalisation	76 of 90	**Book now**
19/02/09	Common Assessment Framework (CAF) for Adults Consultation Events – Birmingham	Personalisation	80 of 90	**Book now**
26/02/09	North West Regional Housing LIN Meeting	Housing	21 of 35	**Book now**
04/03/09	South West Regional Housing LIN Meeting	Housing	33 of 35	**Book now**
10/03/09	Acquired Brain Injury - Current practice and vision for the future	Housing	-	N/A
12/03/09	Whole System Demonstrator Programme (WSDAN) - Integrated care using telecare and telehealth	Telecare LIN	50 of 50	**Book now**
30/04/09	West Midlands Regional Housing LIN Meeting	Housing	35 of 35	**Book now**
07/05/09 to 08/05/09	RCGP Conference 2009 Working with Drug & Alcohol Users in Primary Care -	Alcohol Learning Centre	-	N/A

Latest events http://www.networks.csip.org.uk/Events/.

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

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

Appendix 1 – Supplier supplement for March 2009

As you know, from time to time we offer some space on an equitable basis to suppliers in the CSIP Telecare eNewsletter newsletter.

We wish to continue to recognise the important work that suppliers have done in responding to their customers and working in partnership to implement telecare and telehealth programmes since 2005/6. For this addition, we are broadening the scope to other agencies and organisations involved in telecare and telehealth implementation.

For organisations that wish to contribute to the newsletter supplement here are the details:

a) Up to 5 pages of A4 (12 point Arial) per supplier in Microsoft Word (we can include a jpeg image/logo but keep the layout and margins simple for copy/pasting)
b) Please use the general definition of telecare from Building Telecare in England to include some form of monitoring/response. The definition is broad to include telehealth, community safety etc. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_4122310
c) Please include case studies, evaluation findings, innovations. (we are looking for telehealth, telephone support, weather forecast examples and some of the more complex assessment and integrated systems eg for dementia or extra care rather than simpler solutions)
d) We are not looking for advertisements as suppliers can include links to their web sites in the article, it is more about case studies (anonymised), evaluations, device/monitoring options, solutions, examples of products and services in use, achievements. Embedded web links are OK but we will not have time to check them all
e) If you are referencing local authorities, health trusts, housing associations by name please confirm that they are happy for you to use their names
f) The supplement is open to all suppliers/organisations as long as they meet a 5pm, 13 March deadline. Suppliers involved outside of the National Framework Agreement are eligible for inclusion. This would ensure that all suppliers are treated equitably
g) Where there are sub-contractors and affiliates in the National Framework Agreement, we will link to the NHS PASA current position from the supplement and cross references can be included in the submission.
h) Inclusion in the supplement does not imply any endorsement of the products/services by DH and there will be a reminder in the supplement to telecare organisations about the importance of making appropriate checks and following procurement and purchasing requirements
i) Word documents can be sent to Mike Clark (CSIP Networks) at telecare@csip.org.uk by the 13 March deadline
j) The Telecare LIN reserves the right not to include duplicated company/supplier examples and speculative advertisements without information about case studies, evaluations, achievements.