Tunstall

Connected Care

Best practice review

Tunstall LifeCare™

Health, housing and social care providers are under ever increasing pressure, as demand increases and budgets decrease. Providers are seeking new, more sustainable means of delivering services, with a focus on providing care in the community.

Connected Care and Connected Health services such as telecare and telehealth can enable more people to be supported at home, helping to delay or avoid the need for more costly interventions. However, to be most effective, such technologies need to be embedded into provision, and form part of a mainstream service delivery.

Tunstall LifeCare has been created to provide a framework for applying best practice to services, helping to integrate support and reduce future costs by shifting the focus to prevention strategies using technology as an enabler.

The LifeCare approach is based on the three Ds of Design, Delivery and Development. We work in collaboration with customers to understand their particular challenges and develop a strategy to address them, transforming services in order to achieve their desired outcomes. The approach is modular, meaning customers can choose support with specific areas or to partner with Tunstall for the whole service.

With years of experience working across the health, housing and social care landscape, Tunstall is uniquely placed to help its customers redesign their services, maximising the potential of Connected Care and Connected Health to support the delivery of integrated, efficient care and support which achieves financial efficiencies and improves outcomes for users.
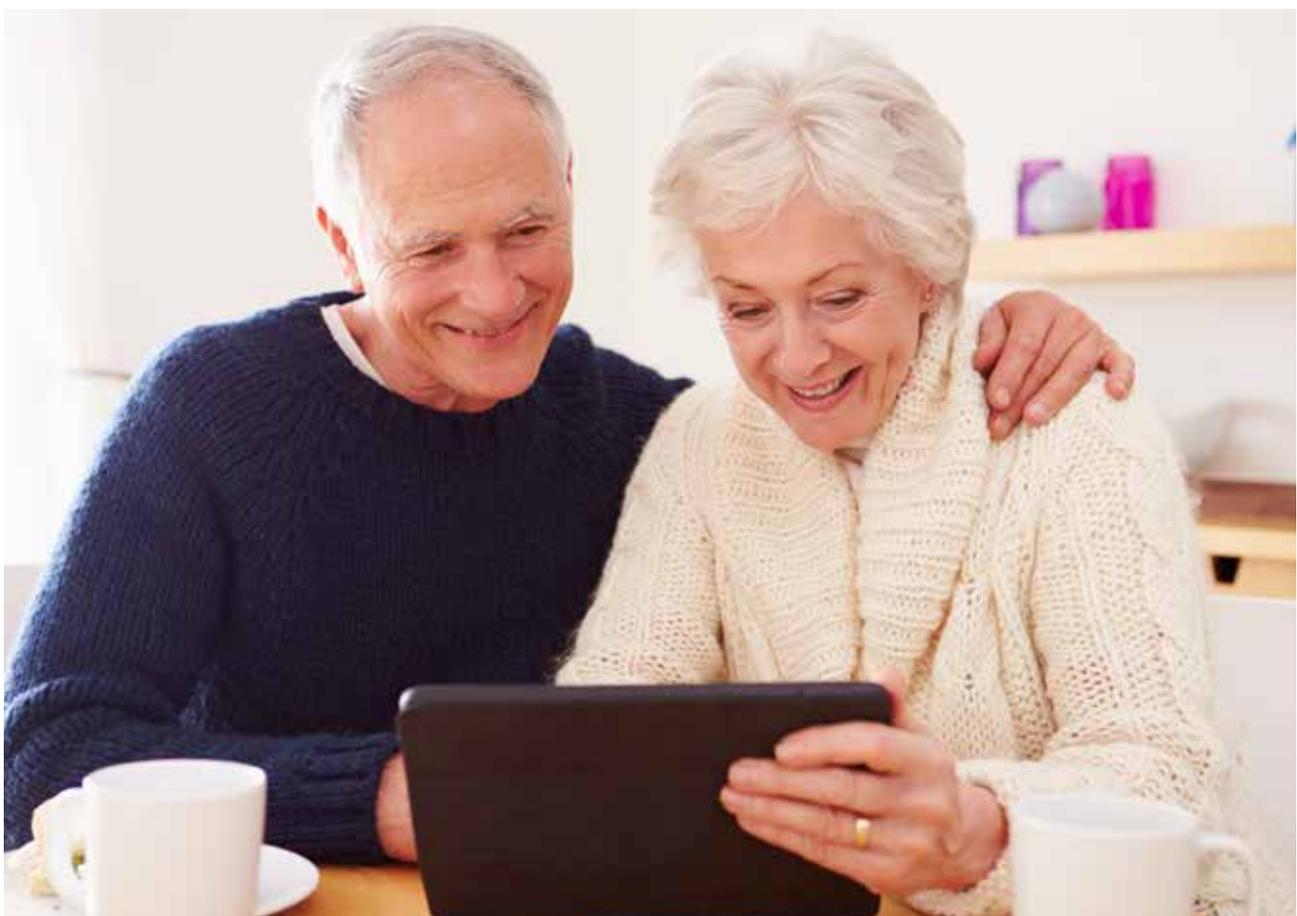
Tunstall LifeCare™

Creating efficiencies, improving care

CHALLENGES

OUTCOMES

DESIGN

- Consultancy
- Strategy
- Service analysis and design
- Profiling and benefit identification
- Engagement

DELIVERY

- Project management
- Software solutions
- Marketing
- Training
- Governance
- Service delivery
- Migration of service
- Product provision
- Change / transition management
- Commercials

DEVELOPMENT

- Performance and quality management
- Service optimisation
- Benefit realisation

Connected Care and Connected Health Solutions

Lancashire County Council

Using Tunstall LifeCare to transform service delivery

The challenge

Cuts to funding in recent years have placed huge pressures on health and social care services, leading Lancashire County Council to examine ways of providing these services in a different way. In addition to making care more efficient and affordable, the Council also aimed to make the support they offer more personalised and more responsive to people's needs, aspirations and circumstances.

How has expanding its use of telecare to become an integral part of its adult social care offer helped Lancashire County Council to deliver more effective care which supports people to live independently with better outcomes?

What we did

Tunstall was appointed as a Development Partner in 2015, working with Progress Housing Group (PHG) to guide and shape the way adult social care services are delivered for Lancashire County Council for up to seven years. Telecare is just part of an integrated care model across social care, housing and health, which aims to generate efficiencies through co-ordinated care delivery, deliver better outcomes and significantly improve the user experience for Lancashire's citizens.

In order to deliver a co-ordinated county-wide service, Tunstall is working closely not only with PHG but also the other local service providers; West Lancashire Borough Council, Lancaster City Council, and Together Housing Group.

In the first design phase of the project Tunstall has worked with partners to examine how to address the currently fragmented service model and optimise processes in the following key areas:

Maximising the benefits – changing access, eligibility, charging and referral to ensure the service reaches those who will benefit most.

Developing the workforce – creating ambitious Learning and Development goals to ensure across the health and social care workforce there is a sound understanding of the purpose and benefits of telecare.

Integrating services around the individual – to embed telecare within the mainstream assessment, support planning and review processes for adult social care and reablement services.

Delivering in partnership – supporting statutory, voluntary, private and community organisations to play a leadership role with the County Council to support the growth of the service, and ensure telecare is embedded within locality based care services.

Results

The design phase of the project, undertaking service analysis and design, strategy and engagement planning is coming to a close, in preparation for the delivery phase, following the completion and approval of the detailed delivery plan.

Service users have been migrated from separate monitoring centres to a single, central centre. New systems and processes have been designed to aid referral and the number of connections has risen to 2,100 so far.

The project is still in its early stages, but the expected outcomes include:

Service growth – increase the number of people receiving telecare from a starting point of 1,100 to 7,000 people by the end of 2017/18.

Cash savings – telecare will significantly contribute to the delivery of financial savings by reducing the demand for more costly and intensive services across the Lancashire health and social care economy.

Cost effectiveness – ensuring ready access to telecare for those who will benefit most from the service.

Co-ordinated care – housing, health, emergency services and social care professionals working together, underpinned by telecare, so people get the right care, in the right place, at the right time.

Quality assured and ethically based – a high quality and ethically based telecare service that balances the individual's right to autonomy, choice and control and wider strategic priorities to achieve better outcomes and financial savings.

Read the full case study
uk.tunstall.com/lancashire

Blackburn with Darwen

Improving efficiency through integrated telecare

The challenge

Blackburn with Darwen Borough Council faces significant demographic challenges including above average numbers of people with long-term conditions and mental health issues and high admissions to residential care. The Council needed to address these issues in order to manage current and future demand, and improve outcomes for local people. At the same time, budget efficiencies meant considerable savings needed to be made from the social care budget.

Aims and objectives

Having reviewed a range of options, the Council set objectives for supporting more people to remain independent at home by increasing its use of telecare:

• Increase the number of telecare users from 60 to 1,800 within three years

• Reduce/delay residential care admissions

• Incorporate telecare into the reablement process to reduce re-admissions to hospital

• Provide support to carers, improving their health and wellbeing

• Achieve overall savings of £1.9m

The adult social care department was charged with making efficiencies of £17m between 2011 and 2015, meaning that the promotion of independence became a crucial driver to the delivery of cost savings whilst at the same time looking to improve user outcomes.

Methods

Working in partnership with Tunstall and Care Services Efficiency Delivery programme (CSED), the Council put in place a 'hearts and minds' engagement/change management programme for stakeholders, identifying barriers to the successful implementation of the telecare service and putting in place plans to overcome them. Real life case examples were used as a powerful way of illustrating the benefits and impact of telecare to a wide and diverse range of stakeholders, and robust, transparent processes were put in place. It was also vital to integrate telecare into the community reablement process and rapid response service, creating a universally accessible service.

Results

The number of telecare service users in Blackburn with Darwen has increased from 60 in 2010/11 to 1,910 in 2013/14. The Council has undertaken an ongoing, robust evaluation of the service, tracking results by individual service users and reporting outcomes monthly and quarterly.

The latest evaluation shows that residential care admissions have been **reduced by 18%** (or equivalent to 57 people). Total **net savings achieved are £2.2 million**, £300,000 over the target set, made up of £1.4 million savings from the telecare and reablement service and a further £800,000 saved solely as a result of the telecare service.

Read the full case study
uk.tunstall.com/blackburn

Phase 2

In 2012, following the proven success of the telecare project, the Council took the decision to extend the service, working in partnership with Tunstall. From 2013 the service has been known as Safe and Well, and its preventative/early intervention approaches, in conjunction with telecare, produced a reduction in 2013/14 of £1.2 million (direct budget costs). The Safe and Well service was recognised as 'inspirational' and 'person-centred' at the Local Government Chronicle's 2015 awards, where it won the Service Delivery Model category.

Calderdale

NHS
Calderdale
Clinical Commissioning Group

Quest for Quality in Care Homes – using telehealthcare to enable integrated, anticipatory and sustainable health and care services

The challenge

NHS Calderdale CCG developed a commissioning plan for 2013/14 with a clear objective to establish a more consistent and sustainable model of care for older and vulnerable individuals in Calderdale; a truly person-centred approach which would best meet the needs of people with long-term health and care needs, and help to make efficient use of NHS resources.

Methods

The Quest for Quality in Care Homes pilot was developed, which aims to address the variations in practice across care homes, supporting the delivery of consistent, efficient, proactive care by upskilling and empowering staff. More than half of the care homes in the area (twenty four) have signed up to be part of the pilot so far. A key focus for the pilot has been to reduce admissions to hospital from the residents of care homes, typically for urinary tract infections, respiratory infections, falls and fractures. The pilot provides additional support to care home staff to help improve outcomes and prevent unnecessary hospital admissions.

The project has been implemented in three key phases:

1. **Providing access for GPs and Quest Matrons to real time clinical records through the provision of an IT system in the care homes.** This enables GPs and Quest Matrons to access their patients' medical records, enabling 'joined up' care and informed decision making.

2. **Development of telecare and telehealth systems to support prevention, diagnosis and treatment.** Tunstall has provided advanced telecare and telehealth solutions to support homes to improve the quality of care provided and proactively deliver care to residents to help prevent deterioration and exacerbation of chronic conditions.

3. **Investment in a Multi Disciplinary Team (MDT), providing an integrated social and clinical approach to support anticipatory care planning.** As part of the Quest for Quality in Care Homes model, NHS Calderdale CCG has commissioned Calderdale and Huddersfield NHS Foundation Trust (CHFT) to provide an integrated professional and clinical Multi-Disciplinary Team.

Results

The Quest for Quality uses technology as part of a multidisciplinary approach to help maximise efficiencies across health and social care economy, and enable people to live healthier and happier lives, with greater control of their own care.

The pilot has yet to be fully evaluated but results so far show that for Quest for Quality care homes:

- The cost of hospital stays has reduced from £3.23m in 2013/14 to £2.77m in 2014/15 **saving £456,166**

- Emergency admissions are down **25%** year-on-year

- Hospital stays are down **26%** year-on-year

- Hospital bed days used has decreased by **16%** year-on-year

- GP care home visits have reduced, with Quest for Quality care homes requiring **58%** fewer visits than non-Quest homes

Read the full case study
uk.tunstall.com/calderdale

London Borough of Hillingdon

Telecare and reablement: a new approach to social care

Introduction

In the London Borough of Hillingdon the number of people over 80 is 10,625, projected to increase by 13% over the next five years. In response to this and as part of a strong commitment as a council to improve preventative initiatives for older residents in particular, Hillingdon Council's Adult Social Care team is working in partnership with the NHS and Tunstall to develop a new model of care which mainstreams telecare and reablement services, as part of a new adult social care pathway, reducing reliance on residential care.

The aim is to create a fundamental shift in service provision away from institutionalised care, towards home-based support, risk prevention and early intervention.

Aims and objectives

The new model of care aimed to:

• Support 3,000 people by the end of 2014/15

• Reduce/delay entry into residential care

• Prevent people needing ongoing care

• Support confidence during the reablement process

• Achieve significant financial savings

Methods

Hillingdon has offered a community alarm service to residents for some years, and following a review of the evidence from other areas in the UK, took the decision to extend this service by offering a telecare support service free of charge to residents over the age of 85 in April 2011, extended to those over 80 in 2014. Similar telecare packages are offered free for the first six weeks as part of a reablement service and for those individuals who meet FACs (Fair Access to Care) criteria, subject to a financial assessment. In addition, all residents of the borough may choose to self-fund. Hillingdon's TeleCareLine service provides varying levels of support, with eligible residents provided with a Tunstall Lifeline home unit, a MyAmie pendant, bogus caller button and a smoke detector as standard, and additional sensors provided based on the residents' individual needs.

A comprehensive financial model has been created to monitor efficiency, ensuring that resources are used in the most effective way and that residents are able to remain in their own homes for as long as possible, enjoying a better quality of life than may otherwise be the case.

Results

More than 3,300 people are currently benefitting from telecare (March 2014). The telecare and reablement service has achieved the financial **savings target of £4.95m** by March 2014.

Long-term **residential/nursing care placements reduced from 8.08 per week** in 2010 to 2.13 per week by end 2013/14.

Reduction in homecare hours purchased of 10% from April 2011 to April 2012, with a forecast continued year-on-year reduction of 7.8%.

From January 2013 to February 2014 the percentage of **residents not requiring further services after the initial six week reablement programme was 46.44%**, and the number of residents who only **required a reduced service after their reablement period was 16.83%**.

Read the full case study
uk.tunstall.com/hillingdon

Stockton-on-Tees

Using telecare to support falls management in care homes

The challenge

Older people living in care homes are three times more likely to fall than older people living in their own homes, and there are ten times more hip fractures in care homes than in other environments. Approximately 40% of hospital admissions from care homes follow a fall.

How did Stockton-on-Tees Borough Council's project using telecare in a care home help to prevent falls and mitigate their effects?

Methods

In 2012 Stockton-on-Tees Borough Council secured NHS funding to assess the effectiveness of using telecare to reduce falls in residential care homes. The Council's community integrated assessment team identified 19 residents of a care home in Stockton-on-Tees as at high risk of falling and willing to take part in the project.

Many falls occur when getting up from or into a chair or bed unaided, therefore the telecare solutions provided focus on alerting staff when these activities took place. Tunstall bed and chair occupancy sensors and passive infra red (PIR) movement detectors and fall detectors were provided based on the individual needs of each resident.

If a sensor detects a possible fall a member of staff is notified of the nature and location of the fall on a portable CareAssist handset, enabling them to respond swiftly.

*Costs include number of falls, ambulance call outs, admissions to A&E, admissions to hospital, length of stay in hospital, GP call outs, and any fractures resulting from the falls, but do not include GP call out, care staff being with the resident who had a fall (reassuring, monitoring and attending A&E), cost of telecare sensors or input from health and social care.

Results

The project took place over a 3 month period and the evaluation included number of falls, ambulance call outs, admissions to A&E, admissions to hospital, length of stay in hospital, GP call outs, and any fractures resulting from the falls. A total of 17 residents of the 19 taking part in the project were reviewed, as no previous falls history was available in two cases.

Evaluation showed that since telecare was introduced the number of **falls was reduced by 67%** from 107 to 35. This has resulted in significant costs savings, with the cost of 107 falls estimated at **£35,444**, and the cost of 35 falls approximately £832, **saving of £34,612 (£2,036 per resident)** following the introduction of telecare.*

The project has demonstrated significant benefits in using telecare solutions to help manage the falls in high risk residents. When used in conjunction with training for care home staff and with input from other key stakeholders, telecare can radically improve outcomes and quality of life for residents.

Read the full case study
uk.tunstall.com/stockton
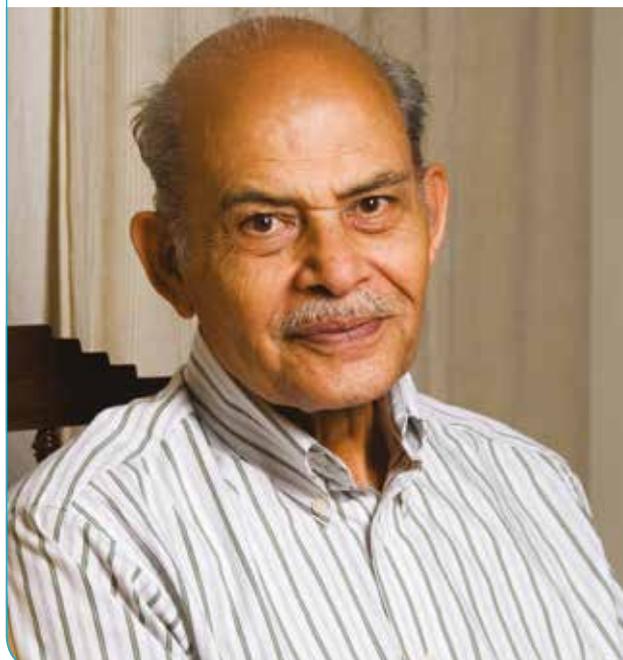
London Borough of Havering

Evidencing the cross sector benefits of telecare

The challenge

The London Borough of Havering's Adult Services team is committed to embracing the opportunity and need to transform the Health and Social Care provision in the borough to meet the challenges of the 21st Century. With demographic changes, limited resources, and increasing levels of dependency, it is imperative to strive for more effective and efficient care options that provide residents with the right outcome, giving local people the opportunity to remain independent in their own homes.

Methods

The Adult Services team is working in partnership with Havering Clinical Commissioning Group to deliver better integrated care for the older population, and part of this work has focused on increasing the use of telecare in order to maximise benefits realisation. Telecare, or assistive technology as it is also known, has been used to support adult social care (ASC) clients in Havering for some time.

However, funding from NHS Support for Social Care enabled the increased use of telecare by improving operational efficiency in assessing, referring, providing, installing and monitoring equipment. It also supported the evaluation of the service to measure the benefits. A basic telecare package consisting of a Lifeline home unit with pendant and 24 hour monitoring and response is being provided to over 1,500 FACs (Fair Access to Care) eligible individuals, with a further 2,500 or more eligible clients under consideration for telecare as part of their care package.

The service aimed to:

- Increase independence and safety, enabling people to remain at home

- Reduce the need for home care or residential care

- Reduce the need for hospital admission

- Improve quality of life

Results

The Council commissioned an independent evaluation of the telecare service, resulting in a robust, longitudinal analysis of three key measures to evaluate the benefits provided by the telecare service, comparing two cohorts:

- Cohort A - ASC clients who receive assistive technology and homecare (70 at outset)

- Cohort B - ASC clients who only receive homecare (407 at outset)

This analysis showed:

- Overall hospital admissions **reduced by 50%**

- Hospital admissions due to falls were reduced by 44%, with an **estimated annual saving of £2.24m**

- Admissions to residential care **reduced by 5.9%**

- Admissions to residential care delayed by 2-7 months resulting in projected **annual net saving of £937,500**

In addition, a survey of 69 service users and 29 carers indicated significant improvements to quality of life:

- **97% of service users felt more secure** knowing someone would respond in an emergency

- **95%** of service users felt safer at home

- **89%** of service users felt they were being helped to remain independent at home

Read the full case study
uk.tunstall.com/havering

Blackburn with Darwen

A new approach to supporting people with complex needs using integrated technologies

The challenge

There is an urgent and growing need across the UK for cost effective accommodation and care for adults with a variety of disabilities. More than 300,000 disabled people are on housing waiting lists across Great Britain and around one in five people with a learning disability lives in housing arrangements that need improving. How is technology helping to deliver a new model of care which is more cost effective than traditional provision and ensures vulnerable adults are given the same life choices as others?

Methods

Tunstall and ATEL offer a range of technology enabled care solutions for people with a range of complex needs living in supported living environments. Moorgate Mill in Blackburn is a development containing 20 apartments for people with complex needs including physical and sensory, learning disabilities, and some with behaviour that challenges. This Inclusion Housing run site was designed by HB Villages with the technology provided through a collaboration with Tunstall and ATEL and care provided by Lifeways.

ATEL and Tunstall have worked together to provide a managed service for the provision of a communications platform, telecare, environmental controls and access control at Moorgate Mill. Systems are provided according to the needs of the individual following assessment, but include sensors to detect risks such as falls, fires or floods and aids such as lighting and heating controls, automatic door openers and blind/curtain openers.

Results

Moorgate Mill is an exciting mix of care, accommodation and technology designed to create an environment that supports independence and is more cost effective than traditional provision. Not only empowering, the financial benefits of the concept will, it is envisaged, over time generate savings of around 20% on care and support costs.

Jayne's story

Jayne is profoundly physically disabled, and has been dependent on others for her care all her life. Moving to Moorgate Mill is the first time Jayne has been able to live in a flat on her own. She has 24-hour background support, and uses a reassurance pendant that allows her to speak directly to the office at the touch of a button whenever she needs assistance. Jayne can now operate her own blinds, lights, television and keep in contact with her family and friends via Skype, all at the touch of a handset, or with a pillow control. Jayne also has a wet room with a Clos-o-Mat toilet, giving her more privacy and dignity with personal care.

For the first time Jayne has a sense of control and independence.

Read the full case study
uk.tunstall.com/moorgatemill

Tunstall Televida

Teleassistance in Spain:
adding value with a preventative approach

Background

Tunstall Televida supports more than 250,000 people across Spain with telecare and associated services, and its eight monitoring centres manage more than 16 million calls each year. In addition to delivering Barcelona's municipal teleassistance service, which serves 75,000 users, Tunstall Televida also provides Barcelona's Local Teleassistance Service (SLT). The SLT provides 67,000 people who are older and/or have long-term care needs with a range of support including telecare systems, monitoring, home care, prevention and wellbeing services.

What is teleassistance?

The Tunstall Televida teleassistance service combines telecare monitoring and response, coordinates social care and third party services and delivers proactive outbound contact from monitoring centres. Teleassistance aims to provide continued contact and support to older and vulnerable people in the community, helping them to remain independent for as long as possible and delay or avoid the need for more complex interventions.

Preventative approach - 60% of calls are outbound, with operators proactively calling service users on a regular basis to check on their wellbeing, remind them of appointments, prompt them to take medication, confirm medication has been delivered or wish them a happy birthday.

Reactive calls - operators will also make outbound calls in the event of major disasters or in the event of service users experiencing a crisis, such as a bereavement.

Public Health - operators make calls to discuss issues such as fire safety in the home, advice on how to prevent the spread of flu, ways of dealing with periods of warmer or colder weather.

Integrated response services - the Barcelona SLT includes 11 mobile response units providing a 30 minute response anywhere in the city 24 hours a day. Each vehicle is equipped with medical equipment and manned by specialist trained social care technicians.

Telecare - the teleassistance service can provide more advanced telecare such as falls, smoke, gas and carbon monoxide detectors and sensors which monitor activity/inactivity. Today there are more than 5,500 of these sensors in operation.

Outcomes

By delivering a public teleassistance service under a single contract, public resources are used efficiently, there is greater consistency across the region and innovation is enabled and encouraged.

Delivering the service in this way also enables increased co-operation with emergency services.

Teleassistance provides preventative, proactive support to more independent service users. Vulnerable or at risk service users receive increased levels of support according to their need. Care services are prioritised and co-ordinated to ensure resources are used effectively and focused on the areas where they will deliver the best outcomes.

Including prevention in the delivery model has significantly reduced the number of emergency service escalations, improved the wellbeing of users and made effective use of public services.

The service has significantly delayed unwanted moves into residential care, and reduced emergency calls from end users and their families which has correspondingly reduced ambulance call outs and A&E attendances.

Read the full case study
uk.tunstall.com/televida
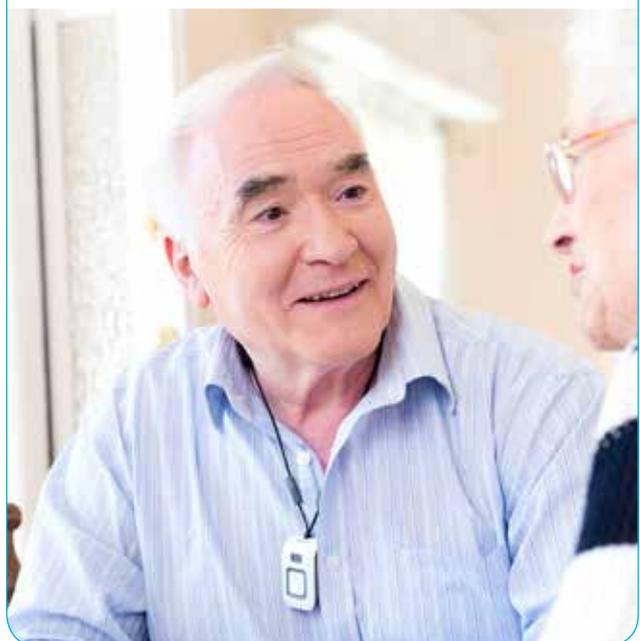
Tunstall Healthcare Group offers a range of Connected Care and Connected Health solutions across each of its main regions - UK, Nordics, Southern Europe, Central Europe, North America and Asia-Pacific. Through the use of smart technology underpinned by high quality, high touch services we support older people and those with long term needs to live as independently, securely, healthily and happily as they are able. As the market leading provider of technology-enabled care, we have been working with health, housing and social care partners for nearly 60 years. By effectively supporting health, independence and wellbeing, our Connected Care and Connected Health solutions improve outcomes and deliver efficiencies when compared to trad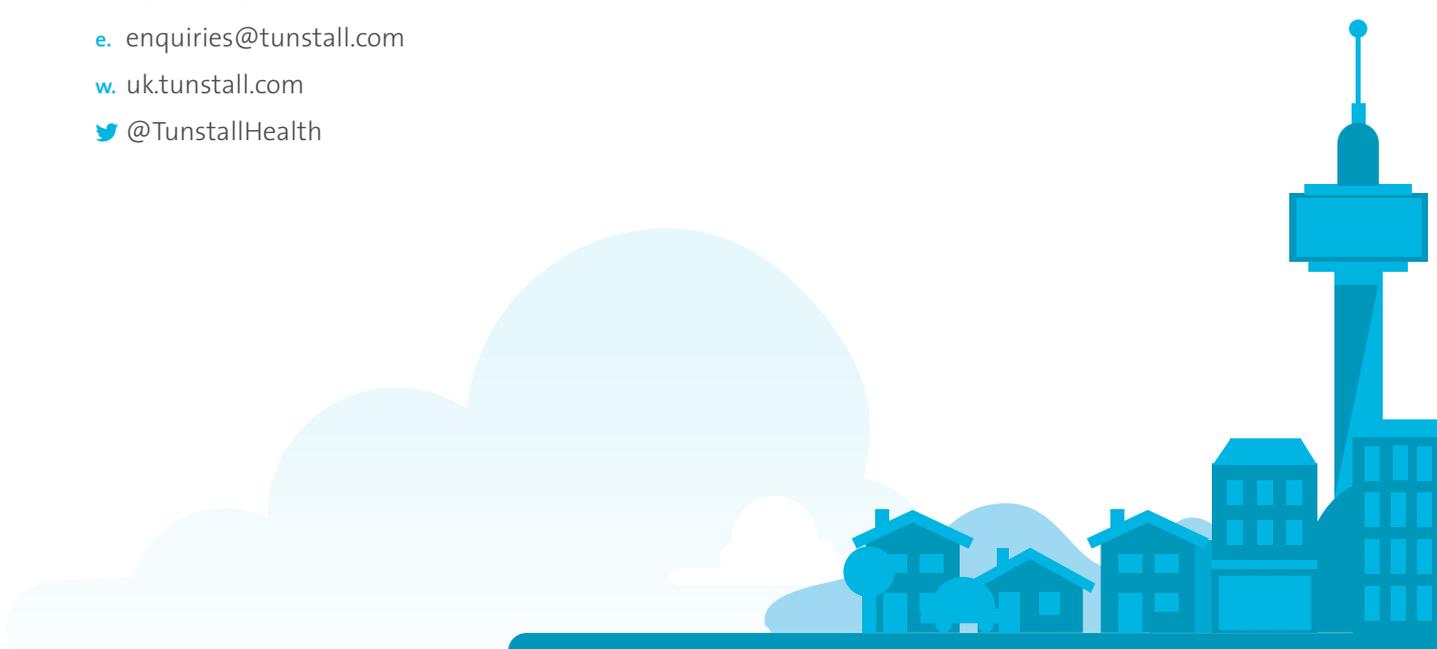itional models of hospital or residence-based care.