The challenge
The health and social care system is facing enormous challenges, and it is essential to find new approaches that enable more efficient and effective care. How has Lancashire County Council’s increased use of telecare supported the development of new service delivery models that enable more people to live independently at home or in their local community with better outcomes?

What we did
Lancashire County Council appointed Tunstall as a Development Partner in 2015, to guide and shape the way adult social care telecare 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 coordinated care delivery, deliver better outcomes and significantly improve the user experience for Lancashire’s citizens. Tunstall appointed Progress Housing Group as lead subcontractor, and is also working closely West Lancashire Borough Council and Together Housing Group to deliver a county-wide service.

Service delivery
The overall vision for the service is to ‘ensure more people benefit from the use of telecare, so they increase or maintain their independence, stay safe and continue living at home’. The old service model was fragmented, and the introduction of the new, more integrated model addressed the following issues to ensure the service reaches those who will benefit most:

• Simplifying the referral process to make it easier to use and more consistent, thereby encouraging referrals from professionals
• Embedding telecare into the mainstream assessment, support planning and review processes for adult social care and reablement services, rather than it being bolted-on to other services or not considered as a potential support option at all
• Simplifying the charging arrangements and the financial assessment process to ensure they do not act as a deterrent to potential users
• Training over 400 staff on the range of technology available and its application and benefits as well as how it can prevent the commissioning of higher cost services.

Results
The service is free to those eligible under the Care Act 2014 and is now being used by 8,458 (31 May 2018) people, with approximately 350 referrals being received each month.

York Health Economics Consortium (YHEC) is undertaking an economic evaluation of the Council’s telecare service, which is expected by the end of 2018, but initial results are as follows:

• Around 50% of the people using telecare don’t need any other long-term support from the Council
• Around 50% receive other support, including 35% with a home care package.
• For the 35% of service users receiving telecare and a home care package versus just a home care package the average saving is £12.77 per service user per week (April 2017 - April 2018, 2,716 residents)

This equates to a saving of £1,803,532 per year.

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

Quest for Quality in Care Homes

The challenge
NHS Calderdale Clinical Commissioning Group’s (CCG) commissioning plan for 2012/13 included a clear objective to establish a more consistent and sustainable model of care for older and vulnerable individuals in Calderdale, and the Quest for Quality in Care Homes pilot was developed as a result.

What we did
The Quest for Quality in Care Homes pilot aimed to address the variations in practice across care homes, supporting the delivery of consistent, efficient, proactive care by upskilling and empowering staff. A key focus for the pilot was to reduce admissions to hospital from the residents of care homes, typically for urinary tract infections, respiratory infections, falls and fractures. Of the 50 care homes in the area, 38 have taken part in the pilot.

The project was implemented in three key phases:
1) Access for GPs and Quest Matrons to real time clinical records through the provision of an IT system in the care homes.
2) Development of telecare and telehealth systems to improve the quality of care provided and proactively deliver care to residents to help prevent deterioration of chronic conditions and manage risks such as falls.
3) Investment in a Multi-Disciplinary Team (MDT), providing an integrated social and clinical approach to support anticipatory care planning.

Using telecare in care homes gives users continuous, discreet support, and enables carers to respond quickly to any incidents. More than 1,300 residents have been supported as part of the Quest for Quality over the last five years. A variety of sensors are used, including bed occupancy sensors, fall detectors and PIRs. If the sensors detect a resident may have fallen or be at risk of falling, they will automatically raise an alert on a pager carried by staff, letting them know the nature of the event and the location in the scheme. They can then respond appropriately. The systems are in operation 24 hours a day, and can alert staff of residents leaving their bed during the night, removing the need for staff to make frequent checks and disturbing the sleep of the resident.

Results
Results for the first two years of the Quest for Quality in Care Homes showed:

<table>
<thead>
<tr>
<th></th>
<th>Results to March 2015</th>
<th>Results to March 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital stays</td>
<td>26% reduction year-on-year</td>
<td>26% reduction year-on-year</td>
</tr>
<tr>
<td>Hospital bed days used</td>
<td>16% reduction year-on-year</td>
<td>30% reduction year-on-year</td>
</tr>
<tr>
<td>Emergency admissions</td>
<td>25% reduction year-on-year</td>
<td>33% reduction year-on-year</td>
</tr>
<tr>
<td>GP visits to Quest for Quality Care Homes</td>
<td>58% fewer visits than to non Quest homes</td>
<td>45% fewer visits than to non Quest homes</td>
</tr>
<tr>
<td>Cost of hospital stays</td>
<td>Reduced saving £456,166 year-on-year</td>
<td>Reduced saving £799,561 year-on-year</td>
</tr>
</tbody>
</table>

Latest results evaluating the benefits of using telecare to help manage falls in 28 of the homes taking part in the Quest for Quality in Care Homes showed:

Admissions to hospital related to falls have reduced by 7.7% year-on-year from 2016/17 to 2017/18 which has resulted in savings through the Quest programme in excess of £200,000.

50% of care homes (14 out of 28) have seen a reduction in falls year on year of at least 10%.

The percentage of falls to total incidents has decreased year on year from 25.7% to 23.7%.

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, a 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 home care 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
Coast & Country
Avoiding falls, ambulance call outs and A&E attendance using technology

The challenge
Teesside-based housing provider Coast & Country Housing has built relationships spanning a wide range of health and wellbeing stakeholders in an attempt to mitigate the impact falls are having on both the NHS and residential care homes. How has it used its HomeCall Independent Living Service to align the use of technology to the commissioning intentions of the regional CCG?

What we did
The Homecall Independent Living Service supports over 5,000 people, helping them to live independently at home with the support of a range of services including telecare. Many of the calls received at its monitoring centre are related to service users falling, and its response team have specialist training and equipment to enable them to help people who have fallen, avoiding unnecessary ambulance call outs. HomeCall and the South Tees NHS Falls Team approached the South Tees Better Care Fund representative to discuss funding for a project aimed at introducing telecare and revised protocols into care homes to reduce ambulance call outs and hospital admissions.

Aims
With the support of Local Authority contract management within care homes this six month pilot aimed to achieve the following in residential care homes:

- Aid towards the prevention of falls
- Educate care home staff to manage falls more appropriately
- Reduce North East Ambulance Service call outs to respond to falls and conversion of calls to hospital admissions
- Evidence a reduction in the number of hospital admissions as a result of improved education around falls and management of falls
- Utilise telecare equipment in the prevention of, and reaction to, falls
- Improve the patient experience

Results
Results comparing Q3 and Q4 of 2015/16 to Q3 and Q4 of 2016/17 showed:

Hospital admissions reduced from 167 admissions at a cost of £448,288 to 154 admissions at a cost of £427,373, equating to a reduction of 13 hospital admissions and a corresponding saving of £37,251.24.

A&E attendances reduced from 255 to 230, equating to a saving of £3,500.

The amount of hospital admissions via NEAS from the pilot care homes reduced by 41 when the pilot project was compared with the same period for 2015/16. The number of calls handled by NEAS from the pilot care homes reduced by 41 (310 to 269). The number of ‘hear and treat’ from the pilot care homes reduced by 21; with the number of ‘see and treat’ increasing by 21. Overall, the conversion of calls to NEAS which resulted in a hospital admission reduced from 49% in 2015/16 to 46% in 2016/17. Overall savings are £5,543.

Total savings: £46,294.24
Cost of telecare equipment: £26,728
Total savings to the health service: £20,107.24

Read the full case study uk.tunstall.com/coast-country
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
Tunstall Spain
Teleassistance in Spain: Adding value with a preventative approach

Background
Tunstall supports more than 475,000 people across Spain with telecare and associated services, and its eight monitoring centres manage more than 17.7 million calls each year. It provides 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. Tunstall supports over 165,000 people in Catalonia; 85,000 under Barcelona’s municipal teleassistance service, and 80,000 under Barcelona’s Local Teleassistance Service (SLT), which has been delivered by Tunstall since 2005.

What is teleassistance?
The Tunstall 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 or ways of dealing with periods of warmer or colder weather.

INTEGRATED RESPONSE SERVICES - the Barcelona SLT includes 29 mobile response units manned by specialist social care technicians which carry medical equipment: 16 primary response units which respond to emergencies within 40 minutes, and secondary response units manage scheduled activities.

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.

Results
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 coordinated to ensure resources are used effectively and focused on the areas where they will deliver the best outcomes. 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.

A study comparing 500 elderly people who had used the telecare service for 6 months with 700 elderly people who were on a waiting list to have the service installed found:

Impact of telecare services based on explicit evaluation

- Improved safety: 96.1%
- Improved family relief: 98.3%
- Decreased loneliness: 92.3%
- Improved ability to live alone: 78%
- Less calls to emergency services: 35%

Read the full case study uk.tunstall.com/teleassistance
About Tunstall

Over the last sixty years, Tunstall has pioneered the use of technology to enable independent living, creating the Connected Healthcare industry as we know it today, and supporting more than five million people and their families across the world. Tunstall was the first to develop alarm systems for older people, and has continued to lead the market ever since, remaining at the forefront of developments such as telecare and telehealth, right up to the present day where we are harnessing the power of digital technology.

We blend British design and manufacturing with externally sourced innovation to create a cost effective portfolio of services, underpinned by our global experience of enhancing care in the home for people in more than fifty countries. As the digital opportunity accelerates the speed of change, we continue to work in partnership with our customers to develop more ground-breaking, life-changing solutions.

This document provides an overview of some of our latest case studies, giving real life examples of the power of technology to transform care services.