

Health and Social Care Committee

Inquiry into residential care for older people

RC62 – Tunstall Healthcare

Executive Summary

With an increasing older population and ever tighter health and social care budgets, there is a real need for the Welsh Government to consider redesigning health and social care services to make services more efficient, higher quality and more tailored to the needs of the user.

Continuing to fund traditional methods of care for older people and those with long term care needs is not sustainable and there is an ever pressing need to deliver care closer to home, with a greater focus on prevention and personalisation.

Telehealthcare, the delivery of care closer to home for those with long term care needs has an important role to play in this transformation. Wales has taken important steps in recent years to encourage uptake of these services through a specific capital grant and the launch of long term condition trial sites to build the evidence base for their introduction.

However there is a real danger that progress in this area is in danger of stalling. The initial £9m telecare capital grant has expired and the findings from the trial sites have yet to be published. It is absolutely vital that the progress made in the last few years in this area is built upon in the coming years with concerted commitment at the highest levels of Government.

The Welsh Government should use the findings from the Chronic Condition Management sites in Wales to establish clear national leadership on the need for embedding telehealthcare in the delivery of health and social care, publish a strategy for increasing its uptake including support for commissioners to commission the service and appoint a dedicated lead to ensure the strategy is delivered.

Further and in order that Wales does not fall behind the other nations the Welsh Government should support commissioners to re-design care pathways and improve access to re-ablement services through the creation of a dedicated fund for re-ablement services to drive efficiencies in the delivery of health and social care and improve care for users.

Similar funds are in operation in Scotland and England, whilst Northern Ireland has recently committed itself to improving access to telemonitoring through the creation of a £18m investment.

This inquiry into residential care presents an opportunity for the Welsh Government to bring health and social care services closer together and to consider new ways to deliver care that will improve outcomes for users and efficiencies for commissioners. Telehealthcare's ability to integrate health and social care, its pivotal role in re-ablement services and keeping people independent at home for longer should ensure that it has a central role to play in the new system.

Introduction

Tunstall welcomes the opportunity to respond to the Welsh Government's inquiry into *Residential Care for Older People*.

Tunstall welcomes the broad reach of the inquiry to look at the availability and accessibility of alternative community-based services, including re-ablement services and a desire to explore new and emerging models of care provision. With health and social care budgets under increasing pressure it is important to explore high quality and more efficient ways of caring for those with adult social care needs.

The following submission addresses:

- Background to telehealthcare
- Telecare in Wales – including case studies
- Barriers to increasing uptake of telecare in Wales
- Recommendations for Government

Background to telehealthcare

Telecare is the continuous, automatic and remote monitoring of real time emergencies and lifestyle changes over time in order to manager the risk associated with independent living. Telecare involves placing a variety of discreet sensors around the home, to monitor for environmental risks such as smoke floods and gas, and personal risk such as falls, epilepsy and property exits.

Telehealth is the consistent, reliable and accurate remote monitoring of a patient's vital signs through the use of easy to use equipment that healthcare professionals can customise to each patient, enabling indiivudals to manage their own condition more effectively at home.

There is growing evidence of the benefits that telecare can bring to improving the care of social care users. Telecare has been proven to:

- Improve confidence and support independence
- Prevent unnecessary admissions to care homes
- Speed hospital discharge and reduce the number of re-admissions
- Save lives
- Save money
- Inspire confidence in relatives and carers

At its best, where telecare is mainstreamed, the following can be achieved (Main findings from 44,000 telecare users in Scotland between August 2006 and March 2011):

- Around 2,500 hospital discharges were expedited
- 8,700 unplanned hospital admissions avoided (44% of savings)
- 3,800 care home admissions were avoided (48% of savings)
- The gross value of the Telecare Development Programme efficiencies was estimated at **£78.6 million**

By achieving the above outcomes, partnerships saved around:

- 546,000 care home bed days

- 109,000 hospital bed days through facilitated discharges and unplanned admissions avoided
- 48,000 nights of sleepover/wakened night care
- 444,000 home check visitsⁱ

Tunstall currently works with over 80% of councils with social care responsibilities in England and those local authorities who are embracing telecare are already reaping the rewards. North Yorkshire County Council has saved £1 million that would have been spent on domiciliary or residential costs in the first year following the introduction of its telecare service. This represents a net average efficiency of £3,600 per person or a 38% reduction in care costsⁱⁱ.

Telecare in Wales

In the UK there are approx 1.7 million telecare users & 252 monitoring centres and in Wales there are approx 20,000 telecare users and 15 monitoring centres. The number of monitoring centres in Wales is decreasing as centres merge together to deliver efficiencies.

A series of initiatives under the last Government provided a strong platform for delivering telecare in Wales. £8.9m was made available through the Welsh Telecare Capital Grant between 2006-2010 with the aim of delivering telecare to 10,000 people.

The grant was a success and by March 2009 it had helped increase the number of people with telecare by 14,881.

The grant has enabled all local authorities to develop telecare service providing councils with the necessary technical infrastructure, skills and capacity, evidence and best practice.

It has also been a catalyst for new partnerships within health, public services, non-profit organisations and industry and has led to the delivering of a number of new services, improving access to care, choice and reducing the financial burden on health and social care services in Wales.

However there has been widespread variation in the speed and rollout of the services available, with some commissioners only providing limited services through the Grant.

In England the Government has just published its initial findings from the Whole System Demonstrator (WSD) randomised control trial of 6,000 telehealth and telecare users in Kent, Cornwall and Newham which ran from 2008-2010. The findings from the project revealed that the use of telehealthcare has significantly reduced pressures on health services and further data in relation to the benefits on social services is expected in the new year.

The Welsh Government established a similar series of Chronic Conditions Management (CCM) sites in 2008 and initial findings indicate that the results from the Welsh CCMs will show similar benefits to those in the WSD sites.

Where telecare has been introduced in Wales there have been clear benefits to users and local authority commissioners. The following case studies of the role of telecare in providing independent living for older people and intermediate care and support in the community illustrate the potential benefits.

Glyn Anwen is an Extra Care Housing scheme run by Linc Cymru Housing Association in Newport and is a joint project with Newport City Council. The Extra Care model allows older people with varying support needs to live independently in their own self-contained apartment with access to a home care service based on site. The site has 41 apartments, and Tunstall's Communicall Connect grouped housing communication was specified as a required part of the build, providing an integrated system for staff to communicate with tenants and each other.

Each apartment has several smoke detectors and a heat sensor which are linked to Communicall Connect and a fire alarm system. All tenants have a pendant which allows them to request assistance from a member of the care team 24 hours a day and Tunstall has also provided links to onsite CCTV which means that tenants can view callers to the main door via their televisions. Additional sensors are provided depending on the needs of the individuals – for example people who are frail and at risk of a fall are provided with a fall detector and bed occupancy sensor. The sensors allow the care staff to make rapid responses when complications are identified.

The feedback from those in the scheme has been very positive, with residents arguing that it is better than residential care. For example for Mr J the move to Glyn Anwen has seen a marked improvement in his health: “if it wasn't for Linc Extra Care I would have gone into a nursing home and there is no doubt in my mind that I would have faded away very quicklyⁱⁱⁱ.”

Case study - Torfaen

The Torfaen County Borough REACT project started in 2005 and is designed to support older, vulnerable people following discharge from hospital and help them to continue to live independently in their own homes.

A joint planning group was created to manage the project incorporating representatives from the Torfaen Borough Council Housing Department, Social Services and the Local Health Board. The Reablement team jointly funded by the Health Board and social services was chosen to lead the implementation of the project and initially the project focused on providing support to 12 community based residents with a range of complex care requirements.

The REACT House is a fully functional house which has been equipped with a full range of telecare sensors to demonstrate the extent of the benefits which telecare can offer. Although a demonstration facility it is also used to provide intermediate care to short term residents who agree to two weekly visitor sessions at the house.

At least 50% of the days utilised at the REACT House would realistically have been hospital days used for medically fit people awaiting transfer of care. Initial results are very exciting with a total year cost for the REACT house of £24,335 assuming 100% utilisation in the full year, against an equivalent cost of a hospital bed for 365 days being an average of £82,212.

The project is already delivering benefits for users. For example Mr X was admitted to hospital following a stroke. He was keen to return home and it was agreed that this would be in the best interests of his recovery but there was concern that this might place him at risk of falling and expose him to risk of further injury. Mr X was able to move into the REACT home and benefit from telecare package prior to returning to his home^{iv}.

Barriers to increasing the uptake of telecare in Wales

Whilst the Telecare Capital Grant was fundamental in the initial development of a range of telecare service across Wales, sustainability now depends on the ability and willingness to find the necessary resources to scale up and mainstream telecare. There is a concern that without sufficient resource and support that this progress may be blocked and result in people in Wales missing out on telecare services. There are further concerns that the lack of central support has also created a postcode lottery of access to telecare services in Wales and variations in charging policies between commissioners.

There is a danger that without extra support commissioners in Wales will not be able to mainstream their telecare services and that the progress made to date will halt or even more worryingly go into reverse. This will impact on the quality of care for social care users and will also lead to increased costs on health and social care services. Further, traditional models of care delivery remain primarily focused on filling existing bed capacity in residential care rather than transforming the location and type of care delivered. In such an operational environment mainstreaming telecare services remains challenging for both commissioners and providers.

On the issue of re-ablement Wales is in danger of falling behind. In England the Government has launched a re-ablement fund which is due to rise to £300m in 2012/13 to support the development of re-ablement services. In Scotland the Scottish Government's £70m Change Fund is also providing commissioners with the opportunities to deliver re-ablement services whilst the Northern Ireland Government's £18m investment in telemonitoring will also assist commissioners in implementing new models of care including re-ablement and home monitoring services.

The Welsh Government should introduce a re-ablement fund to enable local commissioners to redesign services, invest in new models of care and capacity as well as training and equipping their workforce to deliver greater efficiencies and better care for users through re-ablement services.

Recommendations for Government

In order to deliver improvements in the availability and accessibility of alternative community based services such as telecare and re-ablement services the Welsh Government should:

- **Embed telecare into the national care strategy for health and social care services** – This should address the issue of incentives, pooled budgets between health and social care as well as examples of mainstreaming the service
- **Use the publication of the Chronic Condition Management site results to publish a strategy for improving telecare uptake** – including:
 - Support for commissioners to deliver telecare at scale
 - A consistent national charging policy
 - A marketing strategy to increase demand
 - Training programmes for professional
- **Introduce a re-ablement fund for Wales** – To provide commissioners with the support they need to redesign services and to ensure that Wales does not fall behind the other devolved nations in this area

- **Improve information for health and social care users** – By providing better information for health and social care users and their carers, their will greater support available for people looking to self-care
- **Explore introducing greater financial incentives in the delivery of health and social care** – The introduction of quality premiums in the delivery of health and social care should be considered to encourage higher quality and more efficient methods of care delivery
- **Consider appointing a telehealthcare lead in Department of Health and Social Services** – Following the publication of the Chronic Condition Management site results a lead for telehealthcare should be established to ensure rollout and delivery of the telecare strategy

References

ⁱ Joint Improvement Team, *TDP in Scotland 2006-2011*, July 2011

ⁱⁱ Tunstall Healthcare Limited, *Innovation, Choice and Control – North Yorkshire County Council*, 2009

ⁱⁱⁱ Tunstall, *Extra Care – Communicall Connect*, 2011. Available at:

<http://www.tunstall.co.uk/assets/literature/Extra%20Care%20-%20Linc%20Cymru%20Housing%20Association%20and%20Newport%20City%20Council.pdf>

^{iv} Tunstall, *Intermediate care and support in the community*, 2001. Available at:

<http://www.tunstall.co.uk/assets/literature/540-Intermediate%20Care%20-%20Torfaen.pdf>