ROTHERHAM BOROUGH COUNCIL – CABINET MEMBERS REPORT

1.	Meeting:	Cabinet Member for Adult Social Care and Health
2.	Date:	13th September 2010
3.	Title:	Preventative Technology Grant - Final Report
4.	Directorate:	Neighbourhood and Adult Services

5.   Summary

This report provides a progress update on the roll out of Assistive Technology, summarises the learning from the Preventative Technology Grant (PTG) Project and identifies the next steps being taken.

6.   Recommendations

That the Cabinet Member notes the progress being made and agrees that the Scrutiny Panel for Adults, Social Care and Health also receive a copy of the report.

7. Background

7.1 The Joint Strategic Needs Assessment (JSNA) identified that the population of Rotherham is predicted to increase by 6% to 271,100 by 2018. Factors contributing to growth include longer life expectancy and increased net migration. There will be a significant growth in the population of older people. The number of people over 65 is predicted to increase by over 33% (from 42,200 to 56,365) by 2025. The increase in the number of people over 85 will be greater at 80% (from 5,200 to 9,360) by 2025. Assistive Technology offers local authorities a strategic shift away from the traditional delivery of service to a more technological based approach.

7.2 Assistive Technology can play an important role in enabling more people to remain independent in their own homes for longer and in improving their quality of life. Assistive technology has been defined by the Kings Fund Consultation in 2001 *as "any product or service designed to enable independence for disabled and older people."* Rotherham received a total of £441,948 Preventative Technology Grant from the Department of Health under section 31 of the Local Government Act 2003, a grant provided to all Local Authorities to help kick start the wider use of assistive technology to meet the broad preventative agenda.

7.3 To assist with this work, Neighbourhood and Adult Services (NAS) recruited a specific project management resource on a short term secondment in August 2008 to deliver the assistive technology project using the PTG funding. The aim of the project was to undertake trials on new assistive technology equipment and to ascertain the technologies capabilities and capture predetermined outcomes.

7.4 **Progress against the project's key deliverables –** At commencement of the project, the following key tasks were agreed:

- **A portfolio of Assistive Technology equipment should be implemented, recorded and monitored.** The Preventative Technology grant (PTG) has allowed the Council's existing community alarm service -Rothercare - to invest in a wider range of assistive technology device. It also enabled a new ICT platform to be installed, Answer link 3g, which has revolutionised the recording and monitoring of assistive technology equipment and has the ability to allow customer records to be migrated into the SWIFT social care management system.

- **Raised awareness about how Assistive Technology could assist service users.** Awareness was raised, and continues to be promoted with Social Workers, partner agencies such as NHSR, VAR. Various different methods are being used including a dedicated intranet site, team meetings, press releases and team briefings.

- **An Outcomes Framework that can be used to monitor service delivery and performance of the existing Rothercare service and any of the new developments implemented as part of this project.** The outcomes framework is attached to Appendix B. – This framework is being further enhanced by the Joint Commissioners in preparation for a new post to deliver the agenda for telecare. The new framework will identify the individual cost of the telecare package opposed to a more traditional care package, thus making it clearer to identify the actual financial benefits of telecare.

- **A Project Evaluation report to document the success against the project objectives and influence future commissioning and investment decisions.** This report will deliver this deliverable.

7.5 Other activities emerged during the timescales for the project which also were able to be achieved to assist the Council's ability to offer and support assistive technology, these included:

- Rothercare relocated to a more modern and equipped base from Greencroft to Bakersfield Court, allowing for improved telephony capabilities and an improved working environment for staff.

- Rothercare merger with Assessment Direct to provide an integrated and extended first point of contact for all social care enquiries as previously reported to the Cabinet Member in 2008/9).

7.6 **Key achievements**

- Creation of an assistive technology smart flat at Grafton House – This has allowed NAS to evaluate the effectiveness of dedicated properties enhanced with a suite of assistive technology. Whilst the flats offer suitable accommodation for clients with a multitude of needs the key challenge is moving the customer to other, more suitable accommodation. During the PTG project the smart flat was effectively bed blocked, on two occasions by customers.

- Undertaking trials on temperature extreme monitors, during the winter of 2009, one of the coldest on record. Temperature extreme monitors were deployed to ensure customers remand warm in their home. Whilst only limited alarm activations occurred this has led onto further work with Sheffield University and the Keeping Warm in Later Life Project (KWILLT). Further worker is now underway with telecare suppliers to reduce the parameters of the sensor and target even more vulnerable customers.

- Deployment of over 250 Bogus Caller Alarms in an initial trial, which in turn has led to additional funding from the JAG and South Yorkshire Police for further trials.

  Surveys undertaken during December 2008 and January 2009 suggest that customers feel safer by having the technology installed in their property. The comparative data from both surveys are

presented in Figure 1 below. It clearly indicates that during 2009 customers who had a bogus caller alarm installed felt safer

Figure 1 January 2009 Survey Compared to the December 2009 Survey
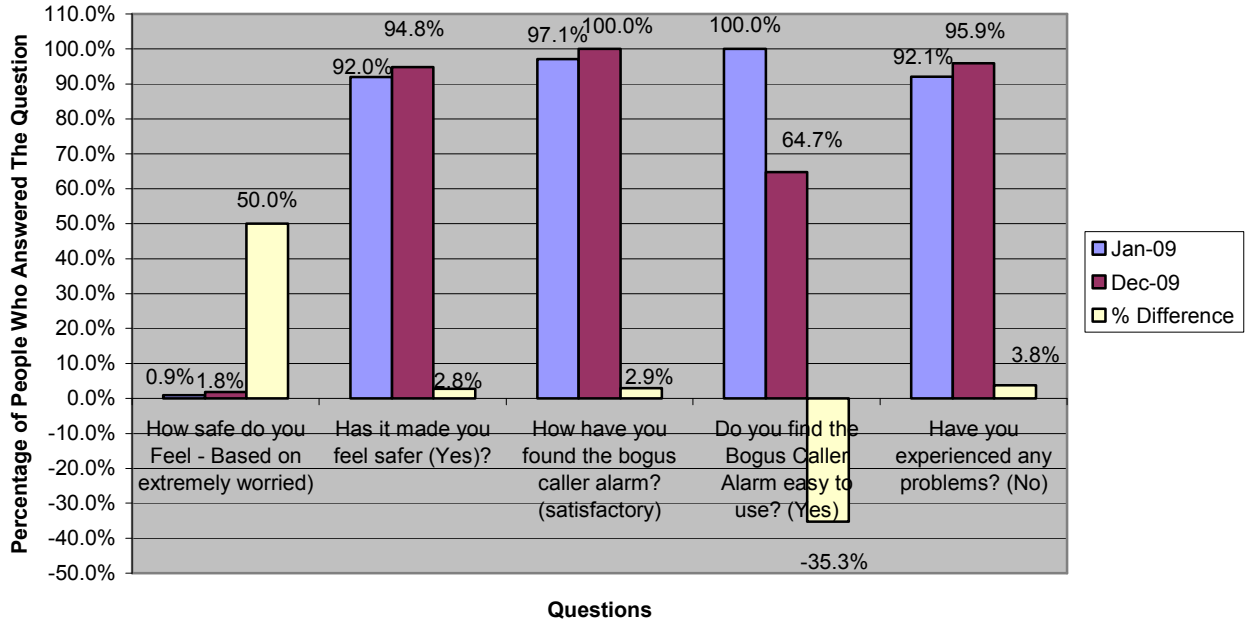
- Just Checking launch with Rothercare now undertaking the installation element of the operation. This has resulted in increased interest by social worker teams to use this recently developed technology, which enables the social worker or family member to monitor the daily activities of a customer , to provide additional assessment data or simply to ensure that they are carrying out their normal daily routines without requiring intervention.

- 40 x Big button telephones were procured and issued to the sensory team to assist visual impaired clients. Whilst being the cheapest item procured through the project, big button telephone have assisted visually impaired clients to remain independent.

- 10,000 electronic clients' records were successfully transferred from the old Rothercare system, Tunstall PNC4 to the new ICT platform, Jontek Answer Link 3g. This significant piece of work was carried out without a break in live service to customers. This technology has benefited both staff and customers. Staff are able to undertake functions that were unavailable on the previous PNC system such as effective stock control and easier reporting. Other components to be procured for the Jontek system such as the integrated voice recording system will allow all calls to be recorded and a click of a button. The call can be played back in real time and evaluated. This will allow opportunities for better staff

training through quality controlling calls and ensure that customer request have been met.

7.7 Assistive Technology Deployed

For the duration of the project a wide array of assistive technology items were deployed, upgraded and renewed. These have been identified in Figure 2.

Figure 2 Telecare Items Deployed During PTG Trial

Telecare Item	Total
4000+ Base Boxes	503
Connect+ Base Boxes	536
Chubb Base Boxes	50
Jontek ICT Platform	1
Just Checking	3
Minuet Watches	7
Temperature Sensors	80
Bogus Caller Alarms	1762
C O Detectors	59
Big Button Telephones	40
Lifeline 1000 upgraded	1719
Total Items of Assistive Technology Deployed	**4760**

7.8 Customer Feedback

To gauge the success of the PTG expenditure various surveys were undertaken during the duration of the project, to ascertain customer's views on specific items of assistive technology and telecare in general. Figure 3 indicates the surveys that were undertaken and key responses:

Figure 3 Telecare Surveys and Responses

Telecare Item	Comments
Bogus Caller Alarm survey	Appendix A Highlights the in-depth analysis of the responses for this survey.
Rothercare Alarm Survey April 09 -March 10	**Do you think that the £2.94 per week charge represents value for money for this service?** *Yes* .... 82.4% *No* 2.4%
Assistive Technology Survey	**Overall, how satisfied are you with the item of Assistive Technology that you receiv Rothercare?** *I am extremely satisfied* 26 *I am very satisfied* 41 *I am quite satisfied* 15 *I am neither satisfied nor dissatisfied* 5 *I am quite dissatisfied* 0 *I am very dissatisfied* 0 *I am extremely dissatisfied* 0
Temperature Extreme Sensor	**How would you rate the temperature extreme sensor?** *Satisfactory* .... 5.0% *Good* .... 70.0% *Very Good* .... 15.0% *Excellent* 10.0%
2nd Bogus Caller Alarm Survey	Appendix A highlights the in-depth analysis of the responses for this survey.

7.9 **Lessons Learnt** - During the project various internal departments and external originations were approached to ensure that the full spectrum of customers were engaged and had the opportunity to benefit from assistive technology -

- **Finance -** Funding streams, other than the PTG need to be identified to continually replace, renew and upgrade assistive technology. Through wider promotion of Rothercare Direct and a strategic pricing structure this additional expenditure could potentially be created from within the existing Rothercare Direct resource. Other funding streams are being pursued such as the JAG to build on the success of the bogus caller alarm pilot.

- **Voluntary Action Rotherham (VAR)** –During the project VAR were engaged to identify hard to reach customers unknown to NAS with a view of promoting assistive technology. After a lengthy publicity campaign including the use of flyers and promotion on the VAR website only a handful of customers were identified. In light of the limited numbers who engaged Rothercare the funding set aside for this area of the project was re-invested in other areas.

- **NHS Rotherham** – This organisation was engaged at the start of the project with a view at looking at undertaking telecare trials at the point of hospital discharge. Whilst the capital costs would be funded from the PTG, funding for the weekly revenue charge could not be gleaned from NHSR. Closer working has been undertaken between NHSR and Rothercare looking at expenditure from the Strategic Capital Grant (SCG). To date no telecare equipment has been procured by NHS R .

- **Technology capabilities** – Rothercare needs to keep updated telecare equipment to ensure that telecare peripherals still operate effectively. An assumption was made at the start of the project that bogus caller alarms would work with existing base boxes.   It transpired that the majority of base boxes were incompatible and resulted in the project updating in excess of 1700 outdated base boxes.

- **Long term outcomes monitoring** – The PTG funding allowed Rotherham the opportunity to test and trial a wide range of telecare peripherals. Whilst the evaluation of customers was based on user surveys during the PTG project, it was identified for the need for assistive technology to be embedded in the heart of the social care package.   From 2010 telecare is a default question in the Adult Integrated System (AIS) which places the onus on the social worker to justify why assistive technology has not been considered or used as part of a care package and allow for effective benefit analysis to be undertaken. It is anticipated that this will lead to improved uptake of AT and better outcomes for customers.

- **Preconceptions -** Using the PTG various assistive technology devices were procured as identified in section 7.7. In order to test deploy and evaluate this technology which was new to Rotherham, the project manager had to forge effective relationships with customers, partners and staff. The key lessons learnt are that no preconceptions should exist when testing assistive technology. Areas that had not been previously tested such as temperature extreme sensors faired well under testing. Minuet watches that were anticipated to prove popular proved unpopular with clients and had the added challenge of needing replacement watch straps when re-issued, increasing the cost and reducing convenience.

  Bogus caller alarms have had the greatest positive effect on Rothercare customers and Rothercare customers have embraced this technology.

  The renewal of over 1700 base boxes has also allowed Rothercare to interact with its customers and build on it excellent reputation.

  All this technology has been underpinned by the Jontek ICT platform. The strategic shift to move from Tunstall PNC4 to the Jontek system has proved effective. The Jontek system had a more advanced reporting and stock control function whilst being competitively priced.

In essence the Preventative Technology Grant has offered Rotherham the opportunity to test new technologies, revitalise its infrastructure whilst gaining a clear trajectory of travel for the future.

7.10 **Next Steps –** It is clear from the JSNA that Rotherham faces a population that is growing older whilst living longer. If traditional care packages were to be used for this group of customers it would increase pressures to the budgets that are available. Building on the lessons learnt it has been identified that assistive technology offers a cost effective alternative to traditional care packages. Additional funding of £225,000 from the Mid Term Financial Strategy (MTFS) has been achieved by NAS and will be used to build on the success of the PTG.

The joint commissioning team have been identified to lead on expenditure and will work with partner agencies to forge closer relationships. It has been realised that this cannot be achieved from existing resources so a dedicated post to fulfil the telecare agenda is being advertised and this post is now in the process of being recruited.

The new telecare post will work in tandem with Rothercare, joint commissioners, social workers, health professionals and other partner organisations to ensure that innovative ways of deploying telecare are maintained and an outcome focussed approach to the delivery of telecare is achieved. The remit of the telecare post will also involve the promotion of assistive technology through social workers teams to ensure that the delivery of telecare remains at the heart of any social care package.

8. Finance

8.1 Further funding has been approved in the MTFS of £225,000, as it is clear that additional annual funding will be required to support the development of further telecare initiatives.

8.2 Innovative collaborations are being forged with groups such as the JAG. A bid has been placed for £12,000 to build on the success of the bogus caller alarm trials and target crime hot spots. During 2010/11 further work is required to secure funding streams and promote telecare across RMBC. As the provision of telecare will enhance the personalisation of services this could be funded from the SCRG.

9. Risks and Uncertainties

9.1 The increased use of telecare devices in Rotherham could result in performance and staffing issues at Rothercare Direct. This will need to be continually monitored and reviewed.

9.2 Consideration needs to be given to developing a new charging policy for Rothercare Direct. Work undertaken during the PTG project identified

that charges were not consistent with other assistive technology providers. Areas such as lost and damaged equipment and abuse of the freephone facility required cabinet member approval to ensure that RotherCare could operate cost effectively.

9.3 Any increase in telecare provision within Rotherham needs to be tempered with the fact that Supporting People will fund the 2010/11 increase to £3.00 per week by reducing capacity. The maximum Supporting People capacity has never been achieved by Rothercare, however any increase in service could mean the requirement for a Rothercare waiting list.

10. Policy and Performance Agenda Implications

10.1 Performance Indicator NI136, relating to supporting people to live independently will only be measured for any new customers who are provided with telecare following assessment through the FACs criteria.

10.2 Currently the only statutory returns relate to the Self Assessment Survey (SAS).

10.3 Inclusion of telecare on the Adult Integrated System and the ISCA will allow performance monitoring of the effectiveness of telecare to be effectively monitored.

10.4 Yearly surveys to all Rothercare users will be interrogated to ensure that Rothercare continues to deliver a platinum service.

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Appendix A Service User Questionnaire Comparator Data

1	Which of the following statements best describes how safe you feel?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
	I have no worries about my personal safety	37	37.4%	34.6%	25	39.7%	43.9%	12	2.3%	-9.3%
	I have support to ensure that I have no worries about my personal safety	53	53.5%	49.5%	22	34.9%	38.6%	31	-18.6%	10.9%
	I have some worries about my personal safety	16	16.2%	15.0%	9	14.3%	15.8%	7	-1.9%	-0.8%
	I am extremely worried about my personal safety	1	1.0%	0.9%	1	1.6%	1.8%	0	0.6%	-0.8%

2	How would you rate the bogus caller alarm?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
	Very Poor	0	0.0%	0.0%	0	0.0%	0.0%	26	0.0%	0.0%
	Poor	2	2.0%	2.4%	0	0.0%	0.0%	2	-2.0%	2.4%
	Satisfactory	18	18.2%	21.7%	8	12.7%	15.1%	10	-5.5%	6.6%
	Good	22	22.2%	26.5%	16	25.4%	30.2%	6	3.2%	-3.7%

	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Very Good	22	22.2%	26.5%	21	33.3%	39.6%	1	11.1%	-13.1%
Excellent	19	19.2%	22.9%	8	12.7%	15.1%	11	-6.5%	7.8%

3 By having the bogus caller alarm, has it made you feel safer in your own home?

	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Yes	81	81.8%	92.0%	55	87.3%	94.8%	26	5.5%	-2.8%
No	7	7.1%	8.0%	3	4.8%	5.2%	4	-2.3%	2.8%

4 Do you find the bogus caller alarm easy to use?

	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Yes	73	73.7%	100.0%	22	34.9%	64.7%	51	-38.8%	35.3%
No	0	0.0%	0.0%	12	19.0%	35.3%	-12	19.0%	-35.3%

5 How did you find the explanation on how to use the bogus caller alarm?

	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Very Poor	1	1.0%	1.2%	4	6.3%	7.7%	-3	5.3%	-6.5%
Poor	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%

		01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Satisfactory		21	21.2%	25.3%	12	19.0%	23.1%	9	-2.2%	2.2%
Good		29	29.3%	34.9%	11	17.5%	21.2%	18	-11.8%	13.8%
Very good		18	18.2%	21.7%	18	28.6%	34.6%	0	10.4%	-12.9%
Excellent		14	14.1%	16.9%	7	11.1%	13.5%	7	-3.0%	3.4%

6	Overall, how have you found the bogus caller alarm?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Very Poor		2	2.0%	2.9%	0	0.0%	0.0%	2	-2.0%	2.9%
Poor		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Satisfactory		20	20.2%	29.0%	12	19.0%	27.3%	8	-1.2%	1.7%
Good		21	21.2%	30.4%	10	15.9%	22.7%	11	-5.3%	7.7%
Very Good		14	14.1%	20.3%	13	20.6%	29.5%	1	6.5%	-9.3%
Excellent		12	12.1%	17.4%	9	14.3%	20.5%	3	2.2%	-3.1%

7	Have you experienced any problems with the use of the bogus caller alarm?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Yes		6	6.1%	7.9%	2	3.2%	4.1%	4	-2.9%	3.8%
No		70	70.7%	92.1%	47	74.6%	95.9%	23	3.9%	-3.8%

		01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
	If you have experienced any problems please elaborate	0	0.0%		0	0.0%		0	0.0%	0.0%

8	Did anyone from Neighbourhoods and Adult Services contact you afterwards to check everything was ok?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
	No, I was not contacted	40	40.4%	50.6%	20	31.7%	36.4%	20	-8.7%	14.3%
	Yes, someone telephoned me	5	5.1%	6.3%	8	12.7%	14.5%	-3	7.6%	-8.2%
	Yes, someone visited me	19	19.2%	24.1%	13	20.6%	23.6%	6	1.4%	0.4%
	Yes, someone telephoned and someone visited me	2	2.0%	2.5%	2	3.2%	3.6%	0	1.2%	-1.1%
	Don't know/Can't remember	13	13.1%	16.5%	12	19.0%	21.8%	1	5.9%	-5.4%

9	Thinking about the control you have over your daily life, which of the following statements best describes your present situation?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
	I feel in control of my daily life	48	48.5%	60.8%	37	58.7%		11	10.2%	60.8%
	With help I feel in control of my daily life	29	29.3%	36.7%	17	27.0%		12	-2.3%	36.7%

		01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
I have some control over my daily life but not enough		2	2.0%	2.5%	2	3.2%		0	1.2%	2.5%
I have no control over my daily life		0	0.0%	0.0%	1	1.6%		-1	1.6%	0.0%
10	**Do you have any other comments about the bogus caller alarm or Rothercare in general**	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
		2	2.0%	N/A	17	27.0%	N/A	-15	25.0%	N/A
11	**Please provide your contact details.**	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
		91	91.9%	N/A	60	95.2%	N/A	31	3.3%	N/A
12	**Date:**	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
		79	79.8%	N/A	52	82.5%	N/A	27	2.7%	N/A

13	Are you:	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Male		29	29.3%	33.7%	24	38.1%	40.0%	5	8.8%	-6.3%
Female		57	57.6%	66.3%	36	57.1%	60.0%	21	-0.4%	6.3%

14	Age:	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
18-25		1	1.0%	1.4%	2	3.2%	3.8%	-1	2.2%	-2.5%
25-35		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
36-45		2	2.0%	2.8%	0	0.0%	0.0%	2	-2.0%	2.8%
46-55		3	3.0%	4.2%	0	0.0%	0.0%	3	-3.0%	4.2%
56-65		9	9.1%	12.5%	8	12.7%	15.4%	1	3.6%	-2.9%
66-75		18	18.2%	25.0%	13	20.6%	25.0%	5	2.5%	0.0%
over 75		39	39.4%	54.2%	29	46.0%	55.8%	10	6.6%	-1.6%

15	I would describe my ethnic origin as:-	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
White British		83	83.8%	96.5%	59	93.7%	98.3%	24	9.8%	-1.8%
White Irish		3	3.0%	3.5%	0	0.0%	0.0%	3	-3.0%	3.5%
Other White Background		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Caribbean		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
African		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Other Black Background		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
White and Black Caribbean		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
White and Black African		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
White and Asian		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Other dual background		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Chinese		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Yemeni		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Other Ethnic Group		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Indian		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Pakistani		0	0.0%	0.0%	1	1.6%	1.7%	-1	1.6%	-1.7%
Bangladeshi		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Kashmiri		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Other Asian Background		0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%

\16	Do you consider yourself to be disabled?	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Yes		49	49.5%	30.8%	29	46.0%	36.3%	20	-3.5%	-5.4%
Physical or mobility impairment		40	40.4%	25.2%	24	38.1%	30.0%	16	-2.3%	-4.8%
Sensory impairment(hearing, vision or speech		17	17.2%	10.7%	11	17.5%	13.8%	6	0.3%	-3.1%
Mental Health service user		6	6.1%	3.8%	0	0.0%	0.0%	6	-6.1%	3.8%
Learning disabled person		3	3.0%	1.9%	1	1.6%	1.3%	2	-1.4%	0.6%
Non-visible condition such as epilepsy or diabetes.		15	15.2%	9.4%	2	3.2%	2.5%	13	-12.0%	6.9%
No		29	29.3%	18.2%	13	20.6%	16.3%	16	-8.7%	2.0%

17	Month	01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n 99 Responses	% 01/01/2009 - Based 0n Responses to the question	01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based on 63 Responses	% 01/12/2009 - Based 0n Responses to the question	Difference in Responses	% Difference on actual responses	% Difference on responses to question
Jan-09		99	100.0%	N/A	0	0.0%	N/A	99	-100.0%	N/A
Dec-09		0	0.0%	N/A	63	100.0%	N/A	-63	100.0%	N/A

Appendix B Evaluation Framework

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
Jontek Answer Link 3g System	- Identify issues raised since go live - Issues on call out log - Jontek response times (if called out) - Effectiveness with other suppliers software i.e. Chubb - Undertake evaluation of staff	Effective alternative to Tunstall PNC ICT Platform. Offer effective alternative solution for all companies AT peripherals	Jontek has proved reliable from February 2009 to February 2010 in excess of 280,000 calls have been taken through the Jontek System. Jontek was upgraded in July 2009 as part of the annual service charge resulting in bug fixes being resolved and including further enhancements to the system. Resilience of Jontek has proved to be excellent with need to use the DR site only once in an emergency. Support from Jontek has been excellent and their helpdesk has proved useful during the transition from PNC. Staff have undertaken the change to Jontek seamlessly and whilst it should be noted that both Jontek and PNC5 have different strengths and weaknesses the decision to us Jontek has proved to be correct. During transition from PNC to Jontek minor issues were identified in the majority these proved to be training issues. Now that Jontek is fully embedded and the old PNC infrastructure staff have adopted	**Yes** Jontek ICT Platform is fully operational and resilient. The Rothercare Manager and staff undertook exceptional amounts of work to ensure that data was cleansed and staff were trained prior to go live. A rolling programme of data cleansing will be undertaken by the Rothercare Manager. Monthly checks are undertaken by the Rothercare Manager to monitor call durations, missed calls and time to answer calls.

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
			the change. In hindsight the key recommendation would have been not to move building and ICT platform at the same time and allow more time for staff to use the Jontek system before go live.	
Minuet Watch	• Test durability of devices by identifying numbers of broken and damaged stock • Determine number of calls made from devices • Determine number of false calls • Undertake evaluation of staff re installation	Suitability and resilience of equipment. Cost effective option for raising Rothercare alarm for people with weak hand grip	Only a limited amount of minuet watches have been deployed. This is due to the fact that key issues / flaws have been discovered which need to be resolved before main stream deployment can proceed. The main issues are: • Watches have been returned, as the customers kept accidentally activating the alarms • Staff feel the watches are unsuitable for female customers (due to the size) as the technology cannot be condensed into a female size watch. • When watches are returned the watch straps need replacing due to wear and tear. Tunstall do not provide replacement straps which increase the cost. This issue is being addressed by Tunstall •	**No** Deployment of minuet has been put on hold until a suitable source for replacement watch straps can be identified. Watches would need to be deployed on an individual basis to ensure suitability.
Bogus Caller Alarm	• Test durability of devices by	Improve perception of crime test	Bogus Caller Alarms have proved to be effective cheap and reliable pieces of technology.	**YES**

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
	identifying numbers of broken and damaged stock • Undertake survey on customer perception of devices • Evaluate if devices in targeted areas reduced peoples perception of crime • Undertake evaluation of staff re installation • Case studies	durability and resilience of equipment. Improve Rothercare customer's quality of life	Rothercare staff have stated that customers feel safer after the installation of the Bogus Caller Alarms. This can be further evidenced by the two surveys undertaken. Durability of the Bogus Callers Alarms has proved excellent with none of the 379 deployed being returned due to faults. Further funding is being sought to further roll out this initiative.	Survey results suggest that customers remain happy and feel safe by having a bogus caller alarm installed. The cost of £39.77 per unit offers good value for money over the five year life expectancy of the unit.
Chubb base boxes	• Test durability of devices by identifying numbers of broken and damaged stock • Determine number of calls made from devices	Determine effectiveness and resilience of equipment	This is the first trial of alternative supplier's telecare peripherals. Fifty devices were procured to test the market place. All the Chubb units remain in the field to test durability and sustainability. Rothercares most vexatious customers have received Chubb base units and to date in excess of 14,000 calls have been taken on Chubb devices.	**YES** Preliminary testing of the base boxes have proved positive further testing of more base units will be undertaken in 2010/11 and evaluated by the Rothercare Manager.

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
	• Undertake evaluation of staff re installation • Determine number of false calls		Under PASA NFA Chubb is approximately £30 per unit cheaper. This could offer Rothercare greater VFM. Alternative suppliers. Rothercare staff and customers have commented that Chubb pendants cords and wrist straps are superior to Tunstall. Negatives included the programming of the units was more difficult and the acceptance tone being very loud. As there is no interoperability between Tunstall and Chubb peripherals consideration needs to be given to which suppliers are to be used in the future. This will become apparent with the new relationship between the Rothercare Manager and the Commissioning and Partnership Teams. If it is decided to continue using Chubb more devices such as Chubb Bogus Caller Alarms will need to be procured. Further consideration is required moving forward to consider if Rothercare changes back to PNC in the future the impact this will have on the amount of Chubb units out in the field.	

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
Temperature extreme monitors	• Test durability of devices by identifying numbers of broken and damaged stock • Determine number of calls made from devices • Undertake evaluation of staff re installation • Determine number of false calls • Case studies	Test effectiveness and resilience of equipment. Reduce hypothermia admissions to hospital. This is based on the assumption that suitable data can be shared with Rothercare.	All temperature sensors deployed during Phase 1 remain in the field with no known errors. No automated calls have been received from this devices and a wider trial will be taken during 2010/11. This wide spread trial could lead the way to better joint working with Rotherham Health and more effective deployment of the devices. Installation of the devices has not been proved to be problematic and to date no false calls have been further generated.	**YES** These devices have proved reliable and offer the opportunity to work closely with NHSR to identify suitable recipients for this technology.
Replace 1000 units and upgrade with Ad Life Line Connect boxes	• Number of boxes that have been replaced • Test durability of devices by identifying numbers of broken and damaged stock • Determine number of calls	Confirm effectiveness of new technology. Modernise Rothercare equipment.	At the start of the project Rothercare had 1800 Tunstall 1000 units in the field. These pieces of equipment had been in use since approximately 2003. These devices were outdated and did not have the technology to programme other devices such as bogus caller alarms. After an upgrade programme less than 100 units remain to be upgraded.	**YES** This modernisation programme has allowed Rothercare staff to engage with its customers and deploy further technology in the form of bogus caller alarms.

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
	• made from devices • Determine number of false calls		A further push is underway to modernise these remaining units in the field. At the current PASA NFA Tunstall rate of £128 per unit this equates to a further spend of £55,680.	
Smart Flat (Grafton House)	• Test durability of devices by identifying numbers of broken and damaged stock • Determine number of calls made from devices • Determine number of false calls	Effective usage of deployed technology. Cost effective method of short term care.	Various pieces of technology were deployed into a flat at Grafton House to ascertain the value of a smart flat. It was decided at the initial stage that the flat would not be used as a Social Worker training aid but would reflect the various needs of live customer. Since go live in January 2009 6 customers have utilised the property. Two of the customers ended up as long term stays due to being homeless.	**YES** Limited investment was given to trial one smart flat which has proved positive. Robust policies to move customers into other accommodation need to be developed before further smart flats are developed.
The Just Checking service	• Test durability of devices by identifying numbers of broken and damaged stock • Undertake	The ability to monitor service user's lifestyles un-intrusively.	The case study below highlights the potential for savings in care packages when the Just Checking system is utilised by Social Workers. **Anonymised Case Study** The Rother care 'Just Checking system' was	**YES** The main challenges imbedding this technology within the Social Workers teams due to lack of

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
	evaluation of staff re installation • Case studies • Long term identify if any financial saving have been achieved • Determine number of times used		installed for ######### on the ######## following reports from her neighbours that she had been 'wandering at all hours of the day and night'. ######## ####### OT and I had been supporting ##### for several months prior to this and we discussed that the Just checking system would enable us to monitor ######## activities given the suggested risks in order to amend the care package as required. The Just checking system proved very informative, we checked ###### activities daily and I was able to amend her care package to include home care calls in the evening where it appeared that ######## became more active in her movement. The home care package enabled ####### to have support in order to re orientate her as to the time of day and to ensure that her property was secured for the night. The Just checking system helped ####### and I to see that ##### wasn't actually 'wandering' as first suggested and has given us the opportunity to safely support ###### to remain in her own home as she has always wished. The Just checking system stayed in longer than the suggested one month due to ongoing monitoring and amendments of the care plan, flexibility that both ##### and I were grateful of in supporting with	internet access.

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
			####### needs. Although Just checking has been a useful assessment support tool I feel that there are several points to help workers in the future. At times the just checking is difficult to gauge with regards to reading the outcome on the internet. It may have some lines indicating movement however at the same time indicate non occupancy which can be confusing. I have also had to rely on #######, who is employed by the PCT to 'track' the Just checking via the internet as neither I nor any other social workers in our team has access to the internet. When I requested this team manager at the time said this wouldn't be possible, not really very helpful if you are trying to make effective use of the system. However all in all the support of Just checking has been useful and the staff that visited ###### and have supported me in this have been very helpful and made the process much easier to use that I originally anticipated. I would definitely use Just checking again if required to support with my holistic assessments.	
Big button telephones	• Test durability of devices by identifying numbers of broken and damaged stock	Increased customer satisfaction	These devices cost £13.99 each, whilst on the periphery of the telecare arena. Anecdotal evidence from the Sensory Impairment Manager has proved positive.	**YES** This technology should be viewed as a one off stand alone. Investment in this area and could be factored

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
				into any budget forecast.
3rd sector trial to promote Rothercare	• Number of customers who take up service • Evaluation of customers perception • Undertake evaluation of Voluntary Sector	To identify hard to reach customers unknown to NAS	Voluntary Action Rotherham undertook awareness sessions leaflet campaigns, web information and promotional activities to encourage customers to undergo a free Rothercare trial. Internally, promotion was undertaken to raise awareness through media such as Managers Briefs, newsletters and papers. The response proved disappointing. The NAS Commissioning Manager undertook further work developing relationships with the voluntary community. Further publicity was undertaken yet again this proved un-successful. Due to the constraints of the project a report was submitted to DMT in September 2009 requesting approval to withdraw the free trial and utilise the money elsewhere in the telecare arena.	**No** Though the predicted outcome was not achieved engagement with VAR was positive. The main challenge was in finding suitable candidates to undertake the free trial.
Direct Payments for telecare	• Amount of customers requesting telecare	To offer a personalised approach to telecare	Twenty six Direct Payment customers received telecare equivalents as part of the project. The costs for these devices were considerably cheaper than an assistive technology alternate. However it should be noted that the items purchased by the Direct Payment clients did not have the capability to link directly to the Rothercare system. In the event of an emergency the Direct Payment users would not be able to use RotherCare as a support	**YES** These items proved cheaper however no linkages with Rothercare were available.

Item	Evaluation Method	Expected Outcome	Actual Outcomes Summary	Outcome Achieved Y/N
			mechanism. A few Direct Payment clients tried to use there Direct Payment to procure items that were outside of what was on offer, items requested included a full burglar alarm system	