

**ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBER**

<b>1</b>	<b>Meeting:</b>	<b>Adult Services &amp; Health Scrutiny Panel</b>
<b>2</b>	<b>Date:</b>	<b>14 February 2011</b>
<b>3</b>	<b>Title:</b>	<b>Assistive Technology – Update on Progress</b>
<b>4</b>	<b>Programme Area:</b>	<b>Neighbourhood and Adult Services</b>

**5 Summary**

The Adult Social Care and Health Scrutiny panel undertook a scrutiny review of Assistive Technology (AT) in October 2010. The scrutiny report provided the background to the development of AT within RMBC and made a number of recommendations. These recommendations have been considered and this report provides an update on progress to date and evaluates our current position.

**6 Recommendations**

**THAT CABINET MEMBER:**

- **Notes the NAS response to the scrutiny review.**
  
- **Notes the progress that has been made in delivering assistive technology within Rotherham.**

## 7 Proposals and Details

- 7.1 **Background** – Assistive Technology (AT) / Telecare involves the provision of equipment that can be used to enable people to live independently. The aim of the provided equipment is to monitor and assist customers in their daily living and to encourage confidence and independence. Appendix A of this report gives two case studies that illustrate the personalised outcomes that may be obtained from the provision of such technology.
- 7.2 A report was received in October 2010 from the Adult Services and Health Scrutiny Panel that evaluated the use of AT in Rotherham. The report contained certain findings and recommendations. This report shows how these issues have been addressed.
- 7.3 The recommendations that were made were as follows
- That the Council and NHS Rotherham produces a joint and overarching long term Assistive Technology strategy, with a view to developing a 'single point of entry' for service users and carers.
  - A robust monitoring system for AT is put into place to record savings in terms of the prevention of avoidable admissions to hospital, the prevention / delay of admission to long-term residential care, and savings from individualised homecare packages.
  - The Council continually seeks to expand and promote the Assistive Technology it has to offer.
  - The Council examines ways for more cost effective approach to excessive usage or repair.
  - That awareness of AT/Telecare across professionals, including domiciliary care providers, is continued and strengthened so that all view it as an option for all Service Users and Carers.
  - Good quality information and signposting needs to be provided by the Council and NHS Rotherham for both Carers and Service Users to enable them to understand their AT options and so to self assess with confidence.
- 7.4 A number of significant changes have been made to the delivery of AT that address the issues raised within the Scrutiny report. These include
- **The appointment of a dedicated Assistive Technology Officer.** In order to ensure that the advantages of AT were realised it was agreed that an officer should be appointed on a temporary secondment basis to raise the profile of AT and to address some of the issues that had been raised by Scrutiny. This had the added

benefit of giving a focal point to the provision of equipment so that staff find it easier to provide support easily and without blockages

- **A series of visioning events at which staff were able to identify the difficulties that they associated with the provision of AT.** From these events the process for recommending AT was simplified to take the onus away from bureaucratic complexity to simple and appropriate recommendations. This has seen a significant improvement in the numbers of staff who are now considering AT as a viable alternative to reduce expensive care packages.
- **The establishment of a system to monitor and demonstrate the savings that AT can bring about.** As part of the process of allocating equipment a database has been established to show the savings that have been occasioned by such provision. When staff are requesting AT support they are also asked to detail the provision that they would have made under traditional care packages.
- **A change in emphasis during the assessment process.** The introduction of a new Independent Social Care Assessment (ISCA) brought about by changes linked to personalisation also allowed the opportunity to include a question in the assessment process that involved the provision of AT. Whereas in the past the assessment had asked staff to give reasons why they believed that AT was necessary. This has now been changed to ask the Social Worker to give reasons why they had decided **not** to recommend AT provision. This change in emphasis has highlighted the importance of AT and engaged staff in greater deliberation about the provision of support.
- **Identification of simple and direct access to equipment.** Following comments made by staff and customers that they were confused about AT a session was held with providers, staff, customers and carers to identify the main items of equipment that would benefit vulnerable people. These packages were then presented as a series of cards that were allocated to all staff. The Carer Package, Medication Management Package, Epilepsy Package, Environmental Package, Purposeful Walking Package and Falls Package are included as Appendix B to this report. This innovative way of identifying the most frequently allocated packages has been seen by one of our major providers as an excellent way of raising the profile of AT and they will be rolling out the Rotherham example across the whole country.
- **Highlighting good news stories with an emphasis on outcomes.** In order to encourage and convince staff that there are significant benefits to the provision of AT a number of case studies have been circulated to emphasise the personal dimension to successful implementation of support. Such case studies have always proved to be an effective vehicle for demonstrating the benefits to the customer that can be shown by positive processes and the provision of AT is no exception to this rule.

- **Better use of our available information.** At the time of writing we are just about to introduce a piece of work that will give us credible data to demonstrate the benefits of AT provision in one particular area. One of the major benefits of AT is to vulnerable people who may suffer from falls within the home. We have established with Rothercare the one hundred customers who have contacted their service the most over the last 12 months with alerts related to falls. These people will be allocated a falls package that will monitor their wellbeing at home. The results will be studied to better understand the savings that can be made from the allocation of such packages. Analysis of changes in outcomes for these 100 people will help to demonstrate the improvements that can be made by such provision.
- **Prevention of avoidable admissions to hospital and the prevention / delay of admission to long term residential care.** The card scheme outlined earlier in this report places emphasis on a defined package matrix that clearly identifies how assessment for AT equipment can be linked to delaying residential care, supporting the provision of domiciliary care and improving the support we give to carers. This link between the issuing of equipment and improving our customers lives is essential to the success of AT. We are developing an ethos of preventing problems before they happen and AT is vital to this ethos. These cards are also included as part of Appendix B
- **The provision of information and signposting.** A campaign to raise the profile of AT in Rotherham has been started with a dedicated AT week to take place in March. A fixed display of available equipment has been set up in Rotherham Carers' Corner and visits have been arranged to various groups in order to demonstrate the benefits of AT.
- **Direct involvement of staff in developing AT.** Aside from the work that has taken place with staff to understand the main provision of AT outlined above we have also encouraged staff to pursue more unusual solutions to problems. The appointment of an Assistive Technology Officer has meant that we now have a resource who can research and benchmark equipment rather than relying on the same handful of solutions. This has meant that we are far more flexible in our responses to individual issues as the Officer works with the member of staff to ensure that the solution is the best individually personalised outcome for the customer. Such personalised solutions are then reported back to staff on a regular basis to encourage such thought and to showcase achievements.
- **Better use of resources.** We have started to demonstrate the financial savings that can be brought about by intelligent allocation of resources and at the same time assisted in the assessment process. An example of this has been encouraging staff to use the 'Just Checking' package. This package allows the 24/7 monitoring

of a customer in order that the Assessing Officer may develop a more accurate picture of the needs of the person being assessed. This process leads to more accurate allocation of packages and a better understanding of how to support the customer. We now have seven of these packages in Rotherham and they are all being used on a regular basis.

- **Better liaison with Rothercare.** A large proportion of the AT available depends on the customer receiving a service through the lifeline monitors that are issued as part of Rothercare. There has been closer working with Rothercare staff to solve issues related to the fitting of equipment and identifying exactly how Rothercare will respond to any given alert. This improved understanding of the process has been brought about by the training of Rothercare staff that has taken place since October.
- **Development of benchmarking opportunities.** Adrienne Lucas is the Regional Assistive Technology Manager for Yorkshire and Humber. She has provided Rotherham with excellent support for improving our processes and demonstrating outcomes based on AT provision. She recently used Rotherham at an Association of Directors of Adult Social Services (ADASS) meeting as the example of an authority that had improved provision of Telecare and suggested that she will use our card scheme across other authorities as an example of best practice. She attended the Fairs Fayre event that was held in October and paid particular attention to the promotion of AT at the event. She recently commented that, **'I was just having a look through the information for the conference in November and am struck by the pathway that Rotherham has travelled. I would like to use Rotherham as an indicator of success in a report to ADASS this week.'**

7.5 This section specifically addresses the recommendations that were raised in the original Scrutiny report

- **That the Council and NHS Rotherham produces a joint and overarching long term Assistive Technology strategy, with a view to developing a 'single point of entry' for service users and carers.**
- An AT strategy has been developed within NAS with an action plan that has monitored the improvements and progress that has been outlined above. The initial targets for the AT Officer centred around the promotion of AT and the collection of data that would demonstrate the outcomes and financial savings that can be achieved. The demonstration of achievable savings will lead to the discussions that are needed to ensure that RMBC are working with colleagues in health to develop a joint strategy. There are significant savings to be made by both organisations and this has been identified as the next major area for development.

- **A robust monitoring system for AT is put into place to record savings in terms of the prevention of avoidable admissions to hospital, the prevention / delay of admission to long-term residential care, and savings from individualised homecare packages.**
- A database has been built up to demonstrate the financial savings that can be made from the provision of AT. The next stage is to start to demonstrate that the provision of AT can lead to significantly improved outcomes for our customers. Two pilots are being set up in February based around provision to customers who are susceptible to falls and customers who have Alzheimers. A comparison between pre and post AT provision will start to give the kind of detail that is required to address this recommendation. The packages that have been established and the card scheme that supports their allocation focuses entirely on these areas. Copies of the cards will be made available at the meeting to demonstrate this.
- **The Council continually seeks to expand and promote the Assistive Technology it has to offer.**
- There has been a concerted campaign to raise the profile of AT among customers, carers, staff and Members. Case studies have been promoted to demonstrate the outcomes that are possible with AT and there are regular updates to staff and Members to demonstrate how AT can improve lives. Regular meetings are held with the major providers that we are always aware of the latest technology that is available. Staff have been encouraged to outline details of cases to the AT Officer who has been instrumental in suggesting solutions that would not have been considered before.
- **The Council examines ways for more cost effective approach to excessive usage or repair.**
- Previously a significant proportion of the AT grant had been used to replace lifeline units that were no longer appropriate. Discussions have started with the major supplier to bring about a change in such provision. New lifeline units are now put in when the customer has extra equipment added rather than as part of a rolling programme. This means that the units are fit for purpose. It is our intention to encourage the provider to provide these units at nil cost to RMBC based on the increased amount of business that is being generated through the strategy outlined in this report.
- **That awareness of AT / Telecare across professionals, including domiciliary care providers, is continued and strengthened so that all view it as an option for all Service Users and Carers.**
- The allocation of AT is now the default option in every social care assessment that takes place in Rotherham. Social Workers now

have to explain why they have **not** considered allocating AT and they have to show the savings that they have made by allocating the equipment. Training has taken place with all Social Workers in order to identify less bureaucratic and simplified processes. Training is about to take place with care enablers in order that they are fully aware of the benefits of AT. There has not been specific training yet with external domiciliary care providers but this is included in the next phase of the action plan.

- **Good quality information and signposting needs to be provided by the Council and NHS Rotherham for both Carers and Service Users to enable them to understand their AT options and so to self assess with confidence.**
- An awareness raising campaign will focus around an AT week in March modelled around the success of previous weeks that have focused on safeguarding adults and personalisation. One of the major AT providers is setting up a fixed display in the Carers' Centre in order that carers are made aware of the benefits of AT. The aim is that aspects of AT can be self assessed and available direct from the Carers' Centre. Work has begun on developing information for customers and this will be part of the campaign of raising awareness.

## **8 Finance**

- 8.1 RMBC continues to hold £232,351 on behalf of NHSR, in the form of the Strategic Capital Grant (SCG). An unspent total of £90,000 was carried forward to 2010/11 and this will be spent as part of the continuing development of AT outlined in this report.
- 8.2 RMBC increased it's spend on AT by £ 225,000. More staff have started to allocate AT solutions and the simpler pathways and removal of blockages has led to an understanding of the funding that is available and the outcomes that can be realised. Expenditure to date has centred predominantly around the packages identified in appendix B of this report. A significant indicator of staff being more aware of how to allocate AT may be illustrated by the fact that prior to October 2 members of staff has issued AT and since October 54 staff have allocated packages.
- 8.3 An example of the kinds of benefits that may be brought about by the allocation of AT can be seen by considering the allocation of an epilepsy package. The hardware available is fitted to the client's bed at the cost of around £ 280. It generates an alert whenever a seizure is detected and immediately lets the carer know that there is a problem. The package removes the need for waking night care. The care that is saved could cost the Council around £ 15,000 per annum.

## 9. Risks and Uncertainties

- 9.1 The increased staff awareness of AT is already leading to greater demand for equipment. The budget of £ 225,000 may be exceeded by demand. One area that may be considered is top-slicing the Adult Social Care budgets to provide AT. The case for achievable savings must be made in order to assure that this process would lead to savings.
- 9.2 The Assistive Technology Officer allocated to raise the profile of solutions and improve ease of access returns to her substantive post at the end of March. The secondment has been very successful and good practice in other authorities certainly suggests that a dedicated officer is needed in order to maintain profile, performance and outcomes.
- 9.3 Any increase in telecare provision within Rotherham needs to be tempered with the fact that Supporting People will fund the £3.00 per week cost of Rothercare for customers who qualify for support. The maximum Supporting People capacity has never been achieved by Rothercare however any increase in service could mean the requirement for Rothercare waiting list. This will be particularly important next year when the number of people qualifying for such support will, almost certainly, outweigh the funding available. Currently Supporting People fund the weekly charge for customers who need financial support but they only have the capacity to fund a further 200 customers.

## 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**

### **Two case studies outlining the benefits of Assistive Technology**

#### **THIS MAKES ME A BETTER CARER**

‘This is a great idea – it answers the question who cares for the carers’ – Mr Albert Corker

Mr Albert Corker’s life changed a year ago when his wife was diagnosed with Alzheimer’s / Dementia.

‘My main worry was that during the night she would get out of bed and I was so nervous that she would fall down the stairs which are so very steep in our home. It got to the stage where I could not look after her properly during the day because I was not sleeping at night. Even when she did not get up I would never get a deep sleep as I was worried.’

“Unless people have been through this experience they do not know what we have gone through. We had fantastic support from Social Services right from the start but night time was becoming a real problem – leading to me being worried about how I could cope in the day. We were on the verge of getting support at night but another solution was offered us.”

‘Before Christmas we had a Telecare system fitted. Now as soon as she gets out of bed a vibrator under my pillow wakes me up. If I am in another room I have a portable monitor that rings and vibrates. It even occurred to me that if the carer was deaf the system would still be brilliant as the vibration is enough to wake the carer. Now I get a good nights sleep and I feel more secure about my own health. We have also had a Rothercare box fitted as I have a heart condition and I can summon support at the press of a button. I would recommend Telecare support to anybody – it has literally given me back my sleep and I am much more alert during the day – I can care for my wife and have the security of knowing that I can care for myself. It probably saves money as well for the Council as we need less support and respite because I feel better in myself.

It’s a 24/7 job being a carer but at least you know that there is support and help available that can provide a simple solution to what could be a massive problem  
Well done to everyone in Rotherham Council for this support”

#### **SAFETY FIRST**

‘It’s not just a benefit to my Mum – I feel more confident that she is safe and sound when I can’t be there’ – Paul Hart

Mr Paul Hart lives in Sheffield but his Mum; Mrs Hart is Rotherham born and bred and lives in Rawmarsh.

They are both benefiting from innovative use of technology in the form of a special assistive home package that has been fitted into Mrs Hart's Rawmarsh home.

Mrs Hart already benefited from the peace of mind that being part of the Rothercare scheme gave her but both she and her son now feel even more secure due to an additional 'falls package' that has been added to her Rothercare unit.

Paul explained, "I used to worry about my Mum falling during the day. She lives alone and sometimes forgets to wear her Rothercare alert pendant. With this new technology if she falls over and can not reach the phone an alert goes directly through to Rothercare and help is on hand. It has made her more confident around the house and she is much happier now. They even fitted a sensor to her bed – if she gets up at night and does not come back in a set time then the alert is sounded. It's a fantastic and reassuring package – I think that everybody who wants to remain safe and confident in their own homes should have one. I think this is a great example of a Council offering first class support to help people help themselves "

Mrs Hart added, "It took them about 20 minutes to fit the system and straight away I felt better. I love living at home and this has made me more confident about getting about.. You don't have to worry about batteries or anything as all that is taken care of. I think this has changed my life and I know my son feels that I am much safer than I was."

**The difference that a simple telecare package can make to a person's life is immeasurable. They feel more confident and independent and in many cases there are significant financial savings as the person requires less expensive support. The falls package is just one of the innovative ways that allows customers, family and carers more independence and peace of mind.**

## **APPENDIX B**

**The AT packages identified in the report that have been developed with staff, customers and carers are included here as attachments.**