Agenda Item 10

Leicestershire County Council

ADULT AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

2 NOVEMBER 2020

TECHNOLOGY ENABLED CARE (TEC)

REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1   The purpose of this report is to inform the Committee of the results of diagnostic work undertaken to explore opportunities to maximise the use of technology enabled care across the adult social care pathway and to set out the proposed way forward.

Policy Framework and Previous Decisions

2   In September 2020, the Cabinet approved the Adults and Communities 2020-24 "Delivering Wellbeing and Opportunity in Leicestershire" Strategy. The Strategy places a strong focus on the development of digital solutions in service provision.

3   The Adults and Communities Overview and Scrutiny Committee considered the Strategy at its meeting on 7 September 2020.

Background

What is Technology Enabled Care?

4   Technology Enabled Care (TEC) is customer facing technology that can assist service users in achieving their outcomes, helping them to live independently for longer.

5   TEC may range from the use of off-the shelf products like Amazon Echo-dots to remind people to complete daily tasks, to more sophisticated monitoring systems that can alert relatives and carers of specific service user activity in their homes, for example to enable them to respond to an incident.

Current Offer

6   The Department's Assistive Technology Team currently provides service users with stand-alone care adaptations and technology equipment. Adaptations include grab rails and bed raisers. Technology includes calendar clocks, door and bed alarms. They also refer people to other agencies that supply products such as GPS locators and other daily living aids.

7   A number of local district and borough councils offer a lifeline pendant monitoring service, but the level of service varies.

Gaining Insight

8   To better understand the opportunities that care technology offers service users, the Department collected information on practice across a number of local authority services. Some authorities for example contracted with a specific supplier who supplied their own range of products.

9   As part of this work, specific consideration was given to the approach of Hampshire County Council (HCC) which has a strong track record in pathfinding the use of TEC and placing it at the centre of its social care offer. Over several years its TEC approach has enabled it to reduce cost, deliver cashable savings, and improve outcomes for people. Further details of such benefits and how these were delivered through the use of TEC is set out below.

10   The Department undertook a diagnostic exercise in partnership with HCC to assess and evaluate the current offer, identify whether there were opportunities to transform practices, and ascertain if there is a strong financial case for transformation. A summary of the findings is provided below at paragraph 12.

11   As part of the diagnostic exercise, HCC, together with their TEC partner (PA/Argenti), undertook analysis of the findings from each of the following areas:

- Data associated with the care pathway and TEC offer;
- Carried out interviews with key departmental staff and stakeholders;
- Undertook a survey to better understand staff knowledge and awareness of TEC in their work, which received a total of 141 responses.

Diagnostic Summary

12   The executive summary report is attached to this report as an Appendix. In summary the findings are that:

- The current approach to care technology in Leicestershire is fragmented across an Assistive Technology Team and a diverse district offer. This can lead to confusion for practitioners, service users, referrers and service users.
- The assistive technology and local district and borough council offer is limited when compared to a full end-to end care technology service model.
- There is appetite amongst practitioners within the Department for change, but there are some barriers in terms of knowledge and training.
- The application of TEC solutions must be based around service user outcomes and not "TEC for TECs sake".
- There are opportunities for avoiding cost through establishing an end to end TEC service model and cashable savings.

13   The report suggests that commitment and investment is required in a number of key areas to deliver the service model that will maximise the value of care technology across Leicestershire:

a) Develop a clear vision, strategy and business case for care technology in Leicestershire. This should make explicit: the desired role of care technology

across the health and care economy; service model design principles; benefits and the commitment to the required investment.

b) Develop clear commissioning intentions that set the direction for growth and achievement of desired outcomes.

c) Establish care technology as part of the first offer for adult social care, in doing so, creating an equitable service designed around service user outcomes.

d) Develop a program of cultural change and engagement that drives high quality referrals, better understanding of care technology amongst practitioners and better outcomes for service users.

e) Embed a quality assurance framework into the service model for care technology. This will ensure operational reporting feeds into continuous improvement, that service user feedback and equipment reviews are captured and acted upon.

f) Robustly measure the financial and non-financial benefits of care technology, using the benefits realisation approach, processes and systems put in place by the new service model.

g) Assign accountability for the management of the end to end care technology service to drive mainstreaming, integration, service development and improvement across value chain.

What might a changed approach look like in practice?

14 The diagnostic sets out some case studies which demonstrate how a TEC approach can benefit service user outcomes. These are anonymised real cases from HCC/TEC partner practice.

Case Study 1: Providing support, reassurance and increasing wellbeing

15 A service user receiving bed-based care, receiving four carers visits per day had an alert pendant. They were making increased volumes of calls for assistance and were becoming increasingly anxious. Following home visits by carers and the care technology service it was discovered that the person was making increased calls because they could not tell the time from their clock. This was resolved by the installation of a large digital clock that provided voice reminders of the time throughout the day. The service user's anxiety was reduced, and the alert calls decreased.

Case Study 2: Enabling people to manage a long-term condition and return to work

16 A service user with long term epilepsy working full time for the NHS was experiencing anxiety about accessing the community and commuting to work because of increased seizures thereby affecting their ability to work. A small personal alarm with a built in GPS tracker was supplied that enabled them to activate in case of an emergency. This increased their confidence and sense of safety and additionally avoided domiciliary care of up to seven per week to support them at home.

Benefits

17 In analysing the potential benefits of the proposed approach, HCC set out a number of scenarios that show net benefits of between £2-5m. These are detailed in the Appendix but summarised below:

- Scenario 1: TEC supports 3,500 users at the end of year five, and generates a cumulative net benefit of £5.4m, allowing for £2.8m of incremental care technology costs.
- Scenario 2: Reduced Growth - TEC supports 2,700 users at the end of year five, and generates a cumulative net benefit of £4m (25% reduction in installs vs scenario 1).
- Scenario 3: Reduced Benefit - TEC supports 3,500 users at the end of year five, and generates a cumulative net benefit of £3.3m (same number of installs as scenario 1, but 25% less TEC users generate benefits).
- Scenario 4: Reduced Growth AND Reduced Benefit - TEC supports 2,700 users at the end of year five, and generates a cumulative net benefit of £2.5m (25% reduction in installs vs scenario 1 and 25% less TEC users generate benefits).

Proposals/Options

18 The diagnostic report outlined three options for delivering TEC in the future:

a) Commission a county wide transformation approach - establishing a county wide service with the responsibility for driving TEC change.
b) Develop the existing Assistive Technology Service - commission support to develop the existing Assistive Technology Team in driving change.
c) Develop a hybrid model - commission the capability required to transform the new technology and have the responsibility for managing the Assistive Technology Team.

19 Based on the diagnostic report, the Department's preferred option is to progress the further exploration of option a) above which would establish a holistic end to end service. The Department has noted the importance and value of having specific expertise in this area to broker and deploy appropriate technology solutions in meeting service user outcomes and give the best opportunity to identify and deliver efficiencies and savings as set out in the diagnostic report.

Partnerships

20 It is anticipated that the service will need to engage with a number of stakeholders including the NHS, the Health and Wellbeing Board, Public Health and local district and borough councils to ensure that the approach aligns with related activity across their sectors.

Timetable for Decisions

21 A detailed business case is being developed using the outputs from the diagnostic, which will consider the requirement for supporting organisational structures, likely incremental investment and staggering of TEC rollout to specific service user cohorts, and approaches to procurement of an external care TEC partner.

22 A report on this issue is scheduled to be presented to the Cabinet at its meeting on 12 January 2021. This is anticipated to include the conclusions of the detailed business case and propose recommendations around appropriate procurements for agreement by the Cabinet.

23   The Committee will be provided with a copy of this report with a view to submitting comments directly to the Cabinet on 12 January 2021.

Resource Implications

24   Within the next Medium Term Financial Strategy, it is proposed to include an assumption as a starting point of a net benefit of c. £2m over five years after an investment to create a staffing infrastructure to drive the programme forward. More financial detail will need to be calculated as part of the full business case.

25   The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Conclusions

26   An opportunity exists to expand the use of TEC to support people to continue to live independently by the development of a technology partner to ensure that TEC is deployed in meeting the outcomes of service users, their families and carers.

27   The Committee is invited to comment on the proposed TEC approach being taken.

Background papers

Report to the Cabinet: 18 September 2020: Adults and Communities Department Strategy 2020-24 – Delivering Wellbeing and Opportunity in Leicestershire
http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=5997&Ver=4

Circulation under the Local Issues Alert Procedure

28   None.

Equality and Human Rights Implications

29   An Equality and Human Rights Impact Assessment will be required to assess the impact of this approach on the protected groups and will be included in the business plan and Cabinet papers . Although the approach does not propose to reduce care and will be based on individual assessments based on outcomes, there may be some concerns around the use of technology for protected groups.

Appendix

Care Technology Diagnostic Executive Summary – 7 October 2020

Officers to Contact

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