Background and History

1. Diagnostic Phase

In October 2020, a diagnostic of the current service was completed. The diagnostic outlined a compelling case for the transformation of the approach to Care Technology in LCC, identifying opportunities to enhance support for vulnerable adults and deliver financial benefits to the council.

2. Developing the Business Case

In early 2021, a Business Case was approved, building on the diagnostic phase by setting out the agreed strategy and preferred option for the future of care technology in Leicestershire. The BC proposed a transformed service which mainstreams CT effectively across social care, encouraging practitioners to consider it as part of the 'first offer'.

3. Planning, Mobilisation and Implementation

We have now entered into the implementation phase, working alongside Hampshire County Council and PA Consulting to transform Leicestershire's CT service offer. The implementation phase includes a series of workstreams to mobilise the transformation

Our Ambition

LCC's overall objective in working with HCC/PA is to jointly transform the Assistive Technology team, enabling a new CT service to be embedded as part of a transformed social care offer, resulting in the delivery of individual, organisational and systemic benefits.

To achieve this, the CT transformation will:

- 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;
- Develop a programme of cultural change and engagement that drives high quality referrals, better understanding of care technology amongst practitioners and better outcomes for service users;
- Embed a quality assurance framework into the service model for care technology;
- Enable robust measurement of the financial and non-financial benefits of CT.

Features of the transformed approach to $C\overline{V}$



The benefits

Outcomes for people with care

- Reaching a **broader range** of users
- Supporting individuals living to manage health and care needs with a range of support mechanisms
- Addressing social isolation and independence
- Support to younger adults with disabilities
- ightarrow Target to reach ~1,400 people in the service's first year

Example CT Case Study; Evidencing the Positive Impact of CT

Mr Bennett, an NHS worker, has long-term epilepsy. He has recently started having frequent blackouts and seizures and has expressed anxiety about accessing the community and commuting to work.

The CT Service recommended a small personal alarm with a built-in GPS tracker that he can clip to his belt. Since this, Mr Bennett reported an increased sense of safety at home and when travelling to work.

The CT supported Mr Bennett to return to work and regain his independence. The solution also avoided domiciliary care of 3 to 7 hours per week.

The new service will positively impact a wide range of stakeholders across the council and across the local health and care system, from care professionals and wider staff, to service users, their carers and family members:

Outcomes for care practitioners

- Wider and more responsive service
- Regular and automated tracking of benefits
- Full programme of culture change activity including training, case studies and regular engagement to ensure that the service is responsive to care professionals' needs

In the future service, there will be opportunities to utilise a broader range of monitored equipment and explore opportunities for service innovation and growth. Examples of the potential positive impacts are shown in a series of videos available <u>here</u>.



Financial outcomes for LCC

This project **transforms the CT service**, supports a larger number of **younger adults and expands the offer for OP**, leading to increased and measurable benefits. The transformed service is expected to deliver an incremental net benefit in the region of £5m by 2025/26 through the delay, avoidance and reduction of other costlier forms of care.

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Governance



Service Potential and Growth

Benefits and service development in Hampshire so far

£14m Net saving in **6.5** years

Over 2,000

health and social care practitioners trained and certified

93%

of users surveyed feel that care technology has **increased their feeling of safety and security**

13,000 active service users

nine out of 10 social workers say Argenti care

technology is "good" or "very good" at achieving desired user outcomes

98% Of users surveys would "recommend the service to

others"

full system benefits

Argenti drives wider take up of care technology across **health and social care** working with Councils, CCGs the Police and the third sector



- <u>Cobots</u> help with the physical demands faced by care sector staff Hampshire County Council and PA
- Touchless interfaces like Amazon Echo are becoming mainstream
- PA / Amazon Web Services <u>Automated Call Service</u> improved customer service while reducing costs with automated contact
- Using <u>care technology with children</u>: managing challenging behaviour, promoting safety and reducing carer strain

Future potential for CT in LCC

What are the key Adult Social Care challenges facing LCC?

What opportunities are there for LCC that technology can help to unlock?

What system partners could the CT service engage with to broaden its impact?

What are the strengths of LCC that the care technology service can tap into to maximise its potential?



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Workstreams and their Purpose

Governance: Establishing strong decisive governance structures that operate across Leicestershire to provide inputs at the right level throughout the transformation and ongoing development of the service.

Service Redesign: Establishing and embedding the new operational service model. Pathway and referral form co-design to co-produce new simplified referral pathway and embed service operating procedures.

Benefits: Designing and implementing a robust approach to benefits measurement and realisation that meets the needs of Leicestershire stakeholders, including a benefits dashboard.

Upskilling and delivery transformation: Working with the care technology team to enhance and embed ways of working to support the new service delivery model.

Comms and Engagement: Embedding and delivering sustainable change and benefits. Raising the profile of the service through a programme of activity around culture change and engagement.

L&D: Supporting referrers, commissioners, providers and leadership to have the capacity and capability to use the service and encourage higher rates of take-up.

Workstream Achievements to Date

Governance: Regular meetings of the Operations and Steering Groups involving multiple stakeholders from the relevant LCC teams to agree key decisions required for the transformation.

Service Redesign: Engaged with ~40 staff across all social work / AT / BI and Systems teams to co-design a new referrals pathway and form, resolving key service design questions. Created a user-focussed assessment process and begun development of the underpinning operational procedures.

Benefits: Worked with BI, Finance, Systems and operational teams to develop a set of performance/ financial KPIs and a measurement approach to track them.

Upskilling and delivery transformation: Liaised with the AT team manager and external delivery expertise to begin development of a role specific training plan.

Comms and Engagement: Identification of key channels of communication and messages to be shared, including Leics Matters, a CT Champions network and digital platforms, and creation of content for these channels.

L&D: Recruitment of a Champions network and a network of Trainers to deliver future BAU training and commenced design of a CT section of the LCC learning hub.



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