

The information outlined below has been drawn from Hartlepool Borough Council's website, Hartlepool Borough Council's recently approved Strategy for Assistive Technology, an article in the Hartlepool Mail and an interview with Steve Thomas, Modernisation Lead - Older People, Carers and Telecare on 20th October 2010.

Community Alarm System and Telecare in Hartlepool

On 30th September 2010 Hartlepool Councillors approved a five-year strategy which aims to help pensioners and people with dementia and learning disabilities stay independent for longer. The Hartlepool Strategy for Assistive Technology covers a variety of services that use communication technology to support people to live in their own homes.

Assistive technology can range from a basic community alarm to sensors that detect flood or fire and sensors that turn off cookers and gas supplies. Hartlepool Borough Council's cabinet committee met to approve the strategy, which includes the council-run Telecare system which sees staff from the Direct Care Team respond to a crisis after an alarm is raised.

The strategy also includes the NHS-run Telemedicine system, which allows people to manage their own health conditions.

Speaking after the meeting, Labour councillor Ged Hall, portfolio holder for adult's services, said: "The aim is to roll this out to as many people as possible for as cheap as possible to help people live more independently and make savings."

Officers hope the five-year strategy will lead to assistive technology becoming a mainstream service.

How much are customers charged for telecare?

In Hartlepool telecare is free at the point of delivery, as is the community alarm system. Both are supported through Housing Hartlepool, who provide the technical support as well as install and monitor the equipment.

Telecare is delivered as a non-contribution service. Costs for the service are currently not included in resource allocation for service users' Personal Budgets and support plans. The continued development of "extra care housing" in Hartlepool includes telecare overlays and use of the 'Tele' response services but using different response services.

What evidence is there that telecare is worth the up front investment?

There is now significant evidence for the successful use of assistive technology to use resources more efficiently. Where notable successes have been achieved the approach to assistive technology has changed significantly, with it moving to the centre of mainstream care and assessment processes and being seen as a "first option" not a "supporting player."

However, this approach requires a reprioritisation of existing health and social care resources.

North Yorkshire Council has gone quite a long way and are making some quite amazing claims about efficiencies. North Yorkshire are looking at technology as the “first option” and not “a supporting player” in helping to maintain an individual in their own home. The savings claimed are significant but this approach requires significant upfront investment.

How is telecare funded?

Core funding is allocated from revenue budget to cover elements of the service such as equipment purchase and strategic management. There is a contract in place with Housing Hartlepool for the ‘tele’ response part of the service. Operational staffing for the physical response service is met through the home care budget and delivered by the direct care support team. There is currently no allocated funding to increase the service provision and any further expansion would need redirected funding.

Supporting People Funding is used to pay for the basics and personal support is paid for via a social care contract.

How many people are in receipt of telecare?

Since the introduction of Assistive Technology in 2006 the utilisation of the service has steadily increased. There are currently 615 Telecare installations in the town, which exceeds the 2009 – 2010 target. The performance target for 2010/2011 is 700. Current capacity for Telecare to be provided in an extra care setting stands at 242 units. With the completion of planned extra care schemes at Laurel Gardens and other sites around the town in 2010 it is envisaged that Telecare will continue to rise significantly in the coming years.

How is telecare delivered?

The Hartlepool approach to Assistive Technology is a collaborative one. HBC and Housing Hartlepool have been directly involved in both telecare’s ‘call response service’ and ‘physical response services.’ In April 2009 a review of contracting arrangements led to the separation of the ‘tele’ and physical responses. The ‘tele’ response is now provided by Housing Hartlepool and the ‘physical’ response is now provided by Adult Social Care services Direct Care and Support Team.

Trained workers are present in all of Hartlepool’s extracare support schemes and staff from the Council’s Direct Care Team respond to calls after an alarm is raised. The Council’s Direct Care Team is fully trained in helping people to get up after they’ve had a fall. A centralised control system points calls in the right direction. The basic telecare set up is the same as the old community alarm system. However, the technology available has different eligibility criteria. To qualify for telecare an individual must present as having critical or substantial needs in line with the FACS criteria.

Those in receipt of the community alarm service, which is designed for those with low level needs, receive a floating support response from Housing Hartlepool staff.

Telehealth in Hartlepool

Telehealth was first introduced in Hartlepool in July 2009 as a pilot scheme to develop opportunities of self-care for patients with COPD.

NHS Hartlepool is piloting Telehealth for people with chronic obstructive pulmonary disease [COPD] through the community respiratory service provided by North Tees and Hartlepool NHS Foundation Trust and has plans to expand the service further. People who use services and their carers have also been involved in consultation throughout the development. There are currently 20 monitors installed and in use across Stockton & Hartlepool. Feedback from the majority of patients is positive.

Telehealth is used by several PCTs nationally and has delivered cost-efficiency savings by helping to reduce unplanned hospital admissions (up to 75% reduction in Blackpool) and create time efficiency savings for GPs and Community Matrons through more effective caseload management. The successful existing pilot has reduced emergency admissions and enabled more patients to stay in their own homes. A business case and application for funding has been submitted to expand the Telecare service to 68 units over the next 3 years.

Regional Projects

In August 2009 three separate bids to the Regional Improvement and Efficiency Partnership were made in respect of Telecare and all were successful. These are: -

- The Safer Walking Project (£4024) – aims to support at least 20 people diagnosed with dementia to continue their community life for as long as possible
- Tees Wide People with Learning Disability helped into Settled Care (£20,000) – to support people with learning disabilities who are currently placed out of the borough or in unsettled placements – 20 users are expected to return to Hartlepool by March 2011.
- Over 85's Telecare Project (£20,600) – funding has been secured to provide up to 150 units of Telecare to be placed with the over 85's.

An RIEP regional evaluation is being undertaken at the moment.

What new initiatives are being considered in Hartlepool?

The provision of the Buddi unit has been quite liberating for some people and has enabled older people / people with learning disabilities to set safe boundaries, which can be monitored by their family. If the person goes outside

the boundary the family can respond and ensure that the person is safe. The Buddi unit effectively works as a safety gate or if someone moves to a new address it can act as a learning tool. The individual can set the unit off if they become panicky and this would show an alert at the contact centre. Hartlepool have 29 Buddi units out at the moment (some people have more than one unit) with a total of 25 people on the scheme. The Buddi system features a little black box no bigger than a matchbox, and this is one of the areas Hartlepool is involved in with RIEP.

Has any funding for telecare been received from the PCT?

Hartlepool Council has not received any investment from the PCT for the delivery of telecare at the moment, although there is an understanding and recognition from the PCT that telecare does help to prevent hospital admissions and people's conditions deteriorating. There is a real difference, for example, in the treatment required if an older person who lives alone falls and is assisted within 20 minutes compared with them lying on the floor for a number of hours waiting for assistance. "For every hour someone is on the floor, it's an extra 24 hours in hospital," says Kerry Warner, a telecare co-ordinator for North Yorkshire Council.

The PCT are looking at the benefits of telehealth and have purchased another 20 multi-person telehealth units, which they are working on at the moment.

Are there any barriers to be overcome in increasing the take up of telecare?

There is an opportunity for people in Hartlepool to really benefit from telecare and there is a pilot up and running at the moment to encourage take up amongst older people. The eligibility criteria has been relaxed in cases where there are concerns over potential falls and the age dropped from 85+ to 80+. The aim is to get people used to the telecare equipment so that when the point is reached when they need more intrusive equipment they are already used to the system. It is simply a case of adding sensors to something they already have in their home. Yet the take up has been low, when suggested to people they say, "I'm not old enough for that yet" this was from a 96-year-old. His 70 year old daughter thought it was brilliant. One of the barriers for people is a general unfamiliarity with technology and there are still many older people who don't want to use this equipment. The cross over period is however being reached with the next generation of older people who are much better informed about the benefits of technology.

One of the real barriers to be overcome is counteracting the negative perception and the 80+ scheme is designed to get people hooked but it is a case of persuading people to get involved.