

CLACKMANNANSHIRE COUNCIL

Report to Council

Date: 11 March 2010

Subject: Clacks Telecare Service

Report by: Director of Services to People

1.0 Purpose

- 1.1. To seek approval from Clackmannanshire Council for the implementation of a major telecare programme for people in Clackmannanshire.

2.0 Recommendations

- 2.1. That Council approves the implementation of the Clacks Telecare Service as described within the body of this report.

3.0 Considerations

- 3.1. Clackmannanshire Council, alongside its public service partners, is determined to provide the best level and quality of service provision that it can within available resources. As members are well aware, this aspiration is held within a context of significant changes both in the demographics of our population, the challenging current economic environment, and the expectations of service users.
- 3.2. Clackmannanshire Council has provided and continues to provide a wide range of services designed to sustain and improve the quality of life of our citizens who require additional support and protection beyond that available through universal services. Part of that provision in Clackmannanshire has included the longstanding service provided through the Mobile Emergency Care Scheme (MECS) disaggregated from the former Central Regional Council in 1996, based largely round the use of simple technology (control unit and pendant in most cases) put into people's (mainly older people's) homes, the resultant alerts being routed through a call centre (currently provided by Stirling Council), with a staff response where necessary from Clackmannanshire's MECS staff.

- 3.3 Other support services, such as home care, meals on wheels, occupational therapy, and care home provision are also supplied following an assessment of need and are delivered through integrated working between services for people, most significantly in terms of adults and older people between Social Services, Housing and Health. We intend to take this successful integrated working further on a variety of fronts, including as described within this report.
- 3.4 I referred earlier to the changing demographics of Clackmannanshire. We know that many more people with learning disabilities are living longer and living more inclusive lives. More and more mental health services are provided in the community as opposed to hospital settings. Members are well aware of the changing nature of household composition, with associated increased demand on housing opportunities, including housing and support for people with additional needs.
- 3.5 In terms specifically of older people in Clackmannanshire, the number of older people (over 65) in the area will increase by 81% by 2031. Within that overall increase, there will be an increase of 109% in the number of over 75s, who are known to be the highest consumers of health and care services. At the current time, for every person of pensionable age in the area, there are 4.3 adults of working age. Members will be aware that adults of working age are by some considerable distance the biggest group involved in the supply of both formal and informal care of older people, and in the financing of care through local and national taxation. By 2031, there will be 2.3 adults of working age for every pensioner in Clackmannanshire.
- 3.6 Against this backdrop, the current pattern of service provision would not in the long run be sustainable, either in terms of the availability of formal and informal carers, or in terms of the availability of financial resources to increase at a parallel rate at the population in need of care and support.
- 3.7 In light of this, we are looking at different measures to help address these growing needs, and to look at better ways to provide support services for people, building further on the successful models of care supplied in Clackmannanshire so far. It is within this context that I am bringing forward the proposals in relation to the Clacks Telecare Service described below.
- 3.8 Wider developments in technology have included the use and application of relevant technologies which can promote the care, support and safety of vulnerable people in different client groups. The Scottish Government has continued to exhort service commissioners and providers to explore how using technology alongside all other approaches can improve the quality of people's lives and at the same time make the best use of whatever level of resources can be made available for care and support.
- 3.9 In the context of the Clacks Telecare Service, making best use of resources to help provide care, support and protection for people in need does not mean using technology as a means of saving money. Where the

- sensible use of technology alongside other complementary approaches to supporting people can allow the recycling of resources to meet additional future needs (not least from the demographics described earlier), then this is a welcome opportunity to maximise the value of the resources that are available in this area.
- 3.10 The aim of the Clacks Telecare Service is fundamentally about improving the quality of life for service users. For example the use of telecare has been proved to reduce the need for some older people to move into sheltered housing, to delay the need for some older people to require a care home placement, and to provide much more timely and effective support to older people. Across Scotland, when a frail older person experiences a fall, the average time they can expect to lie on the floor is around 4 hours. Experience elsewhere has demonstrated that with a sound telecare system which includes the use of a fall detector, the average response time can be reduced to 22 minutes.
- 3.11 Advanced telecare services consist of 3 main components. These are
- Sensors and other equipment based in the home, connected through a telephone line to monitoring software
 - a call handling capability, with pre-determined protocols established by an assessor in conjunction with the service user and/or their carer, which govern what the response should be to any alert raised by the service user or their equipment
 - response arrangements, potentially provided by keyholders, families or carers, or by a Council response team developed out of the current MECS staff team
- 3.12 The Clacks Telecare Service will be aimed at an initial target of 1300 households, mainly older people, but including also other client groups which could benefit from the service, including people with learning disabilities, people with mental health issues, victims of domestic abuse, and children with disabilities. Each service user will receive a core package of technology, initially comprising a control unit connected to a phone line, 2 passive infrared movement detectors, an extreme temperature detector identifying both excessively high or low temperatures in the home, 2 flood detectors and a smoke detector. This equipment will be wireless, and capable of easy and quick installation (within a day), and be equally easily removed and reused as necessary. Implementing this approach will remove the need for the continuation of the current practice of assigning some MECS service users as "telephone clients" who are simply provided with a phone number to call MECS staff if required (i.e. without any associated equipment support).
- 3.13 Externally sourced elements of the programme will be procured competitively through the UK Government's Buying Solutions, which is the national procurement partner for UK public services and is an Executive

Agency of the Office of Government Commerce in the Treasury, and through the Public Contracts Scotland procurement website.

- 3.14 In addition, further specialised pieces of equipment can be installed in the home where necessary to meet identified needs or risks. These could include examples such as
- Fall detector
 - Chair/Bed Occupancy Detector
 - Wandering Detector
 - Incontinence Detector
 - Automated Reminders
 - Video door entry
 - Carbon monoxide detector
- 3.15 In the event that a potential service user who would benefit from the Clacks Telecare Service does not have a landline installed, one would be arranged and funded by the Council.
- 3.16 In terms of call handling, there have been arrangements in place in respect of the MECS service for calls within that scheme to be handled by a Stirling Council call centre. There are established standards for the accreditation of telecare call handling, as well as assessment and service response arrangements, established and monitored by the Telecare Services Association (TSA). It will be a requirement of the Service to seek expressions of interest in providing the telecare call handling service from TSA-accredited providers, and for Clackmannanshire Council to seek TSA accreditation in due course in terms of assessment and response standards. It would be the intention to seek expressions of interest on a fixed term basis to allow subsequent consideration of whether the Council itself wished to develop an in-house capability which would meet TSA accreditation for telecare call-handling. A number of Councils and Housing Associations (not including Stirling Council) provide TSA-accredited call handling capabilities. The call handling element of the Programme will therefore also be procured competitively.
- 3.17 In terms of response delivery, I am proposing that each service user in the Clacks Telecare Service be invited to identify 2 keyholders of their choice who may be able and willing to play a part in responding to appropriate alerts. This will be supported by the provision of a key safe at each service user's home if one is not already in place. As described earlier, there will be a pre-defined protocol governing what response is given to each and every sensor in the home. These protocols can be customised to provide a different response at different times of the day, night or week, allowing families and carers to contribute to the support of the service user at times of their choosing/availability, but the default response in all circumstances

will be a response from the call centre/Clacks Telecare Team. The first stage of the programme will involve a re-assessment of the needs of the current 1300 MECS clients to establish which of them would benefit from a telecare package, and whether such a package could provide a better way of meeting their needs than any other service provision currently being provided in traditional ways. This re-assessment programme will involve staff from the current MECS team and potentially from our Community Care teams, once they have received appropriate training. Where a current MECS service user is not in need of a telecare package, their existing MECS-level service will continue. The existing MECS team will develop into the Clacks Telecare Service team, workers will be re-designated as Telecare Support Workers, and an appointment to a Team Manager post will be put in place following an internal recruitment process to provide in-house leadership and development of the service.

3.18 The Clacks Telecare Service will be funded by a variety of means, as indicated in the table below. As stated at 3.8 above, the Scottish Government has been keen to promote the rollout of telecare, and a further approach for additional resources to contribute to the implementation of the programme has been made. I have been informally informed that we can expect £120,000 from the Scottish Government for telecare in 10/11, a figure I understand which will be applied to most other Council areas. If this is confirmed, Clackmannanshire will benefit from this distribution formula on a pro rata basis. There is no indication at this point of the position from 11/12 onwards. The figures on both costs and resources are indicative at this stage, but are reasonable estimates from previous experience.

CLACKS TELECARE PROGRAMME

	10:11	11:12	12:13	13:14	14:15	5 years
Equipment			108,000	108,000	108,000	324,000
Equipment maintenance 15%	58,500	117,000	133,200	149,400	165,600	623,700
Call handling Staff (including Team Leader)	81,120	81,120	81,120	81,120	81,120	405,600
Project Management	232,000	232,000	232,000	232,000	232,000	1,160,000
	25,000					25,000
TOTAL	396,620	430,120	554,320	570,520	586,720	2,538,300
Sources						
Joint Improvement	120,000					120,000

Team (Scottish Government)

Community care savings							
Medication	25,000	50,000	50,000	50,000	50,000	50,000	225,000
Meals	50,000	50,000	50,000	50,000	50,000	50,000	250,000
Shopping	22,500	45,000	45,000	45,000	45,000	45,000	202,500
Check visits	50,000	100,000	100,000	100,000	100,000	100,000	450,000
Housing	200,000	200,000	200,000	200,000	200,000	200,000	1,000,000
MECS staff budget (part)	232,000	232,000	232,000	232,000	232,000	232,000	1,160,000
Communications Centre	57,000	57,000	57,000	57,000	57,000	57,000	285,000
MECS equipment	50,000	50,000	50,000	50,000	50,000	50,000	250,000
TOTAL	806,500	744,000	744,000	744,000	744,000	744,000	3,942,500

Assumptions

Training resources to support programme require to be identified
 1300 installs by March 12
 15 net new installs per month thereafter
 If call handling in-house, further one off £50,000 required for PNC5 software

The Council's existing General Capital Programme is currently being reviewed, and Council approved in February £780,000 over 2 years in the General Capital programme for support towards the initial outlay on equipment. Funding towards the replacement of/addition to equipment from 12/13 will be reviewed nearer that time.

3.19 The estimated costs involved indicate an average cost per service user of between £9 and £10 per week. It is intended to make the Clacks Telecare Service available without charge for those assessed as potentially benefitting from the service. As can be seen, it is anticipated over time that providing some services to people in different ways may allow for the freeing up of resources to meet future demographic pressures as described earlier in this report. For example, it is estimated that providing a care worker to supervise an older person taking medication would cost around £4000 per year, assuming 3 short visits per day, 7 days a week. For those people assessed as potentially able to benefit from a telecare package which included a medication dispenser unit linked to the main control unit, the annual cost of the equipment, the call handling service and the back-up response service would be less than £500 per year.

3.20 Options to make the service more widely available on a chargeable basis for those whose level of community care need does not meet the Service criteria will be explored.

4.0 Sustainability Implications

4.1. None

5.0 Resource Implications

5.1. *Financial Details*

5.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes

5.3. *Staffing*

5.4 As described above, a range of staff within Services to People will be central to the successful roll out of the Clacks Telecare Service.

6.0 Exempt Reports

6.1. Is this report exempt? Yes (please detail the reasons for exemption below) No

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities 2008 - 2011** (Please tick)

- | | |
|--|-------------------------------------|
| The area has a positive image and attracts people and businesses | <input type="checkbox"/> |
| Our communities are more cohesive and inclusive | <input checked="" type="checkbox"/> |
| People are better skilled, trained and ready for learning and employment | <input type="checkbox"/> |
| Our communities are safer | <input checked="" type="checkbox"/> |
| Vulnerable people and families are supported | <input checked="" type="checkbox"/> |
| Substance misuse and its effects are reduced | <input type="checkbox"/> |
| Health is improving and health inequalities are reducing | <input checked="" type="checkbox"/> |
| The environment is protected and enhanced for all | <input type="checkbox"/> |
| The Council is effective, efficient and recognised for excellence | <input type="checkbox"/> |

(2) **Council Policies** (Please detail)

8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?

Yes No

9.0 Legality

9.1 In adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

None

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Grahame Blair	Director	01259 452374

Approved by

NAME	DESIGNATION	SIGNATURE
Grahame Blair	Director	Signed by Grahame Blair