

Assistive Technology in Warwickshire:

Statement of Intent 2018 - 2021



Overview

Purpose:

The Statement of Intent sets out details of Warwickshire County Council's (WCC) Assistive Technology (AT) offer for Warwickshire residents.

Aims: to *improve* and *increase* the AT offer to customers across Warwickshire by;

- Supporting people in Warwickshire to stay safe, healthy and independent through the use of technologies
- Clearly position the use of AT as crucial to delivering WCC's prevention and early intervention agenda;
- Reducing, delaying or preventing the need for ongoing care by using AT at an earlier stage in people's lives;
- Promoting and providing opportunities for people to access AT products and information and advice;
- Promoting a culture of self-care within the population;
- Working with partners in health, the District and Borough Councils, the third sector and independent sector across Coventry and Warwickshire to develop a joined up approach to AT.

Scope: Relevant to all ages and client groups living in any setting and particularly relevant to current and future customers of WCC social care.

Why produce? AT products and services offer value for money and outcome focused solutions for people with care and support needs. Effective and appropriate use of AT helps to reduce cost pressures and also increases independence and control for citizens.

What is Assistive Technology

“Any device or system that allows an individual to perform a task that they would otherwise be unable to do, or increases the ease and safety with which the task can be performed.”

(The Royal Commission on Long Term Care, 1999).

Activity Monitoring: Is a mixture of activity, motion and door sensors within an individual's place of residence. The sensors can identify individual patterns of movement and alert where individual patterns of movement change which can help to identify risks earlier.

Apps and self-management: A growing area of support where a mobile device, smartphone or desktop PC is used to manage health and well-being. These can also be used by an individual themselves, paid staff and/or family carers to help with monitoring and care coordination.

Practical products/equipment: In broad terms, this covers any product designed to support or enable independence. This includes mainstream products and technology that provides assistance to people with specific needs, for instance; smartphones, smarter walking aids, medication dispensers, aids to hydration and nutrition, smoke and carbon detectors, flood detectors, bed sensors (not an exhaustive list).

Telehealth: Devices used in or away from the home that enable health 'vital signs' measurements such as blood pressure, glucose, weight, and wound management. This information supports decision making around personalised care planning/appropriate interventions.

Telecare: Devices used in or away from the home that support independence, that can be used as stand-alone or linked to a support service such as a call centre and/or physical responder service e.g. a Lifeline unit.

Video consultations and tele-diagnostics: Enables electronic 'face to face' consultation between service users or patients and staff. It enables decisions to be made without the need for anyone to leave their desk or home. Can be achieved via WebEx, FaceTime and Skype and relies on availability of appropriate infrastructure.

Priority 1:

Prevention -
Technological
solutions that
empower people to
enhance their own
independence and
well-being



Strategic Aim: To encourage our residents to use Assistive Technology to support themselves to remain independent, healthy and well within their communities.

Where are we now? There is a small range of traditional technology, including pendant alarms, available as 'contract' stock. Some telecare/AT is delivered locally by district and borough partners; we will work in partnership to maintain and increase their current offer. Our customers, partners and staff have limited awareness of assistive technology*.

Where do we want to be and why? The ability to self-support in this area is critical. There is already a significant amount of AT on the market, which is accessible and simple to use, however people often don't know what they need to help them. Our aim is to signpost our customers, prior to formal contact, via an online AT information and support offer to enable them to remain in their own homes without necessarily needing to come to the Council. People will have enhanced awareness of, and confidence to use, AT. People will have a clear idea of the AT available to them and any costs associated with this.

How are we going to get there? Develop the AT Information, Advice and Guidance offer and link this to a support tool that provides people with the ability to assess their own needs and purchase products themselves where required. This information and the associated benefits of using AT will be clearly promoted and understood via a communications strategy that links to the Council's digital awareness programme for staff, partners and community based providers. This also links to Public Health initiatives and the potential of using apps for self-support e.g. MyFitnessPal, Mindfulness, Headspace, Brain In Hand, use of Fitbits.

**Take up of AT via the Integrated Community Equipment contract is 1.7 % of the overall equipment spend*

Priority 1 - Prevention: types of AT



Apps e.g. Headspace App, Brain in Hand



Aids to enhance independence and wellbeing e.g. talking tiles, dementia day clocks, pill dispensers, Ulla hydration, activity trackers, falls detector



Communication aids e.g. smartphones, Google Dot, Amazon Echo



Telecare e.g. Lifelines

Priority 2:

Early intervention -
Technology that
supports people to
stay independent
at home for longer
and to access the
community,
education or
employment.



Strategic Aim: To make AT available as early as possible as a means of helping people to maintain their independence, wellbeing, choice and control.

Where are we now? There is limited awareness and use of AT by professionals, customers and service providers. There are also currently narrow routes of access to AT and a small range of AT products as part of contract stock, with pockets of innovative case examples across the county.

Where do we want to be and why? The AT offer is fully available at all points of the customer journey, with professionals having a clear understanding of the benefits and opportunities available to people with needs, as well as their carers. There should also be a clear rationale as to why AT has been introduced, what outcomes it has helped achieved and costs avoided. This change in culture and practice will be supported by a more varied and developed AT market and wider access points to AT across Warwickshire. The Council wants to link with partner organisations such as District and Borough Councils to ensure that the AT offer is fully spread across the county.

How are we going to get there? A small number of dedicated AT 'expert' staff to upskill and provide specific AT training to professionals with the creation of 'AT champions' across the health and social care workforce. Support and resources for service providers around AT and the creation of local 'trusted assessors' for AT. Increased information about a broader and more varied range of AT items available to staff and customers. Future commissioning and priority areas will be informed by AT pilot activity in order to understand the products and technology that benefit individuals and the organisation. Culture change and investment in AT will be required to ensure that AT usage can increase. Targeted use of AT as part of care packages, for example, as part of the Reablement journey. Maximising the opportunity presented by 'digital shift' of telecare from analogue to digitally based products*.

**BT have confirmed that switch from analogue lines to digital will happen by 2025 - this process is starting now and will effect approx 9,000 telecare users locally*

Priority 2 - Early intervention: types of AT



Aids to enhance independence and wellbeing e.g falls detector, aids to enhance hydration



Medication management e.g automated pills dispenser



Activity monitoring e.g. motion and movement sensors, GPs and plug



Telecare e.g. Lifeline

Priority 3: :

Long term/complex needs - Technology that helps support people with complex/long term conditions or health needs (telehealth)



Strategic Aim: Maximise opportunities that AT presents to support discharges from hospital, support complex care packages, and those with health needs or at the end of life, to ensure their dignity, independence and wellbeing is promoted and upheld for as long as possible.

Where are we now? Some use of telehealth and AT for those with complex needs but this is fairly isolated. No clear plan of how AT will be offered to these groups and limited understanding of potential benefits. However, AT pilot activity is assisting with a clearer view of who the priority groups are.

Where do we want to be and why? In conjunction with health colleagues, develop a clearer understanding of the use of AT for those with health or complex needs, with a strategic plan of how AT or telehealth will be offered to, or accessed by, target groups*. An element of this work will be about how the Council supports the provider market to offer and make the best use of AT to support the wellbeing of people with care needs and their carers, whilst also learning from best practice examples and innovation of AT being used by the provider market.

How are we going to get there? Exploring and maximising the role of activity monitoring to support night needs in residential care/ECH or in the community. Role of AT in enhancing dignity at end of life linking to compassionate communities. How AT can be used to support step up/down from hospital. Role of AT within care settings to manage hydration and nutrition and reduce falls and infections. Link with universities and sub regional colleagues to horizon scan in this area, considering use of robotics / telediagnosics and other innovative developments that support health needs or complex care.

**ADASS call to evidence survey (2014) 69% of 73 councils responding to the survey said that 'older people' had the greatest potential to benefit from telecare.*

Priority 3 - Complex types of AT



Telehealth e.g. apps, electronic care planning



Sensory aids e.g. comfort and reassurance
aids to stimuli and occupy the mind



Medication aids e.g. automatic pill
dispensers, monitored medication aid



Discreet health and motion monitoring e.g.
acoustic monitoring, embrace watch, short term
activity monitoring for assessment

Further information

A full needs analysis including demographics and legislative context as well as market shaping information can be found at:

[Link to needs assessment](#)

<https://www.warwickshire.gov.uk/telecare>