ANNEX 1 – Detailed Scheme Description

For more detail on how to complete this template, please refer to the Technical Guidance

Scheme ref no.
UP3
Scheme name
Assistive Technology
What is the strategic objective of this scheme?

Develop a unified prevention offer in the community to enable people to live independently for as long as possible.

The scheme will therefore broaden the use of Assistive Technology in the Community. Rutland citizens will be using a wide range of technologies which maximise their independence and improve their quality of life.

Overview of the scheme
Please provide a brief description of what you are proposing to do including:
- What is the model of care and support?
- Which patient cohorts are being targeted?

Through the Better Care Fund, Rutland County Council (RCC) and the East Leicestershire and Rutland Clinical Commissioning Group (ELRCCG) have established a commitment to developing telecare and telehealth options for residents within the County. Telecare and telehealth provision supports the following Joint Rutland Health and Wellbeing Strategy priorities:

- Avoidance of Hospital Admissions

- Living Independently

It is anticipated that telecare and telehealth provision will also contribute to achieving the following performance metrics as outlined in the Better Care Fund:

- reduction in permanent admissions to residential and nursing homes

- increase by 2015 in proportion of over 65s still at home 91 days after discharge
- reduction in delayed transfers of care per 100,000 population

- reduction in emergency admissions

- Reduce number of falls

A service will be commissioned for Rutland (initially for one year) to provide a technological response to promoting and supporting independence in the county.

Service Objectives

- To enable people in need of support to maintain their independence and health and wellbeing in their chosen home for as long as possible.
- To prevent people moving into institutional care.
- To prevent hospital admissions and assist with safe transfer from hospital to

home.
- To reduce the level of domiciliary care provision.
- To support carers to improve family life and reduce carer strain.
- To support positive outcomes for disabled adults, children and young people.

Key Features of the Telecare Service

It is proposed that the Council procures a provider to deliver a service within Rutland. The service will be mobile to enable it to visit people in their own homes across the county. The service provider will receive referrals from RCC initially – the need for telecare will be clearly outlined in the Support Plan in terms of identifying the needs that the equipment will address but not the specific items required. This is similar to the model used in Northamptonshire.

The provider will be expected to respond to these referrals from RCC by undertaking an assessment of the requirements of the individual and their carer jointly with the referrer if appropriate. Response times to referrals will be agreed through the contracting process but are likely to include emergency, urgent and routine categories. Once the requirements have been agreed the provider will suggest, provide and install equipment into the service users home. It will be the responsibility of the provider to undertake regular checks, maintenance and repairs of all equipment.

The equipment will remain the property of the provider at all times – thus encouraging them to maintain the equipment effectively and to collect and recycle promptly. The provider will be required to review the equipment usage and issue additional / replacement equipment as appropriate. Where the presenting needs are outside of the remit of the provider as agreed with the Council, the provider will refer back to RCC for further involvement.

The provider will be expected to provide training and support to those individuals who are the "responders" to any alarms raised by the equipment (eg. falls monitors) this will include care alarm service providers and carers both paid and unpaid.

The service will target people who are at risk of falls and a deterioration in their health condition. They would normally be eligible for a service from either health or social care. We are exploring the possibility of a smart house option – either virtual or placed in a flat or within a community building where equipment can be demonstrated to enable people to see what might be on offer. We are also developing early discussions about telemedicine and telehealth options.

The final element of this proposal is that some of the available funding is used to purchase a store of items of low value / small equipment which would be managed by the Supporting Independence Team. Typically this equipment would include items such as whiteboards and memory jogging equipment. As the costs of establishing and running a returns and recycling service would be prohibitive, the equipment would be given to the individual and not expected to be returned. This equipment could be issued to people with presenting needs through either the long term teams or at the duty desk.

The delivery chain
Please provide evidence of a coherent delivery chain, naming the commissioners and providers involved

Outline Timeline:

Task	Target Date	Responsibility
Telecare Service		
Complete the full specification document for the services	September 2014	Transformation Team / Contracts and Procurement - RCC
Commence Procurement	September 2014	Contracts and Procurement - RCC
Appoint Provider	January 2015	Contracts and Procurement RCC
Service operational	April 2015	Contracts and Procurement RCC
Equipment Store		
Agree operating procedures	October 2014	Transformation Team and Contracts and Procurement RCC
Source Equipment	January 2015	Transformation Team RCC
Commence service	April 2015	Supporting Independence Team RCC

The evidence base
Please reference the evidence base which you have drawn on
- to support the selection and design of this scheme
- to drive assumptions about impact and outcomes

The Department for Health 'Three Million Lives' report indicates significant numbers of people can benefit from technology resulting in savings across health and social care.

What are the key success factors for implementation of this scheme?

An assistive technology provider to be in place to issue small items of equipment and give advice. KPIs for the scheme to be effective at addressing admission avoidance and maintaining independence. The scheme will also contribute to the prevention and wellbeing agenda for the Care Act and support carers.

Factor	Explanation
Partner engagement	The success of the scheme is not just dependent on appropriately communicating with partners – it also depends on the community agents and information and advice service. The information and advice service must be able to identify those who would benefit from the service and the service must be widely publicised.

Assessment criteria and tools	The success of the project depends upon the ability to identify and support the vulnerable individuals in the community (i.e. those who are likely to enter the care system over the next 3-5+ years). The return on the investment will be helping individuals *who would otherwise have needed acute and secondary care.* Therefore it depends upon successfully identifying these through suitable assessment criteria. Some users of the scheme will be identified a long time before they may have otherwise prevented to acute services and the scheme must also support this lower level need.
Monitoring & KPI tools	In order to evaluate the progress of the individual and the success of the project, there must be realistic, measureable and agreed KPIs. These should be reported at regular stages to give an understanding of the progress and risks of the project as it develops.
Governance & escalation	Governance is a challenge in any partnership programme. The governance of this programme should enable clear and transparent assessment and escalation of risks. This can be achieved through: Agreement on the KPIs of the programme; Clear routes for issues escalation and resolution; Clear and transparent monitoring reports; oversight from the team manager from Rutland County council responsible for monitoring the contract and from the Health and Wellbeing Board who will receive reports on a quarterly basis.
Support System & tools	In order for the scheme to be as successful as possible, there must be appropriate supporting systems and processes in place. Part of the role entails advice and signposting of available community assets. The available tools to access these services will be a key enabler to this aspect of the role. Knowledge of an every changing market of assistive technology and the ability to respond to changes within this market will be an essential skill for the provider.