

CASSI Select Committee 4 October 2011

Stockton Council's Care Call & Telecare Services

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- Quality control

Mike Batty

Head of Community Protection

Passionate about Stockton-on-Tees

Care Call & Telecare in the context of Stockton Council

- DNS Service Group
- Community Protection Service
- Security Services section
- based in the Council's Security Centre

Services provided by Stockton Council's Care Call

The service provides three levels of monitoring and response, all on a 24/7 basis:-

Level 1 – traditional community alarm service - £3.70 per week

- via hardwired systems or 'plug in' units
- 24/7 call monitoring and response to site
- quarterly visits (customer's choice)
- with hardwired smoke alarms in most Tristar tenancies
- keyholding – optional extra at 50p per week

Level 2 - Telecare – as community alarm service, plus tailored range of additional devices e.g. 'wandering client', bed sensor, fall sensor, gas shut-off valve etc, all based on individual assessments, to support independent living

Level 3 - Enhanced Service

- installation within 4 hours to support discharges from hospital / residential care, enhanced devices e.g. 'buddi system' (GPS tracking)
- Telehealth – monitoring vital signs e.g. blood pressure, weight, oxygen levels
- Domiciliary care – bespoke packages

Care Call & Telecare service volumes (as at 4 August 2011)

	SLA	Self-funded	CESC	Pending	Total
Tristar Homes	1	722	1,656	8	2,387
Housing Associations	866	3	2	-	871
Private Sector	-	1,053	41	12	1,106
Telecare	-	2	633	-	635
	867	1,780	2,332	20	4,999

NB figures for households/connections, not individuals

Telehealth – 12 active clients

Calls per month (typical) – 12,780

Call-outs per month (typical) - 291

Planned home visits per quarter – 3,849

Care Call & Telecare finances - overview

- Historic requirement to generate surplus of £35k – contribution to the Council's General Fund ('Negative Resource Allocation')
- Support services costs (e.g. Finance, HR, Xentrall, etc) – Negative Resource Allocation increased to £211k
- Any surplus reinvested in SBC services – no shareholders, no export of profits
- New approach to charging for Telecare in 2011/12 (plus effects of housing stock transfer)

Care Call & Telecare income sources 2011/12 (projected)

•Tristar Homes self-funders	10%
•Tristar Homes – CESC funded	23%
• Housing Associations (all funding sources)	8%
• Private Sector – self-funded	15%
• Private Sector – CESC funded	0.6%
• Telecare	30%
• Telehealth	1.5%
• Domiciliary Care	5%
• Keyholding	0.9%
• Floating support in former sheltered housing schemes	4%
• Reinvestment of Managed Surplus from 2010/11	1.4%

Prices / benchmarking

Level 1 per week

Stockton £3.70

Sedgefield (Durham) £3.80

Coast & Country (R&C) £4.20

Middlesbrough £4.60

Darlington £4.99

Hartlepool £3.80 (prospective)

SBC keyholding 50p (optional extra)

Level 2

Stockton £12.94 (keyholding included) } “within

Level 3 } regional

Stockton £13.97 (keyholding included) } averages”

Domiciliary Care £10.77 per hour (days), £13.94 (nights)

Organisation

- } • 8 Duty Supervisors (shared with CCTV/ Community Security and Concierge)
- } • 3 Community Protection Officers (also covering CCTV/Community Security)
- 13 Care Call Officers
- 2 Call Handlers
- 2 Visiting Officers
- 1 smoke alarm cleaner
- 4 on days, 4 on nights (2 after midnight)
- Telecare team of 3
- 9 vehicles

Customers by Ward (1)

Ward Name	Telecare	Care Call	Total
Billingham Central	38	266	304
Billingham East	33	228	261
Billingham North	25	134	159
Billingham South	29	212	241
Billingham West	19	75	94
Bishopsgarth & Elm Tree	45	206	251
Eaglescliffe	34	141	175
Fairfield	31	79	110
Grangefield	18	119	137
Hardwick	48	472	520
Hartburn	29	75	104
Ingleby Barwick East	9	43	52
Ingleby Barwick West	2	5	7

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Customers by Ward (2)

Ward Name	Telecare	Care Call	Total
Mandale & Victoria	34	382	416
Newtown	19	143	162
Northern Parishes	2	21	23
Norton North	19	122	141
Norton South	31	86	117
Norton West	24	83	107
Parkfield & Oxbridge	32	92	124
Roseworth	34	207	241
Stainsby Hill	19	243	262
Stockton Town Centre	21	482	503
Village	14	141	155
Western Parishes	2	53	55
Yarm	23	169	192
<i>Outside Borough</i>	1	85	86

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Quality Control in Care Call & Telecare

- monthly random sample of customers using the service in the last month – 50
- compliment and commendation system via DNS Performance team
- monthly exception reports to Service Manager and Head of Service on % of calls over 1 minute / responses over 30 minutes
- CESC service specifications
- TSA (Telecare Service Association) – voluntary trade body

	TSA standards	SBC average performance
Calls answered under 1 minute	98.5%	96.0%
Response to site within 45 minutes	90.0%	98.0%
		(within 30 minutes 96.8%)

- Care Quality Commission Inspection poor / adequate / **GOOD** / excellent

Quality Control in Care Call & Telecare

“I like all the people who come, I’ve got used to them, it’s a reliable service, they stay for the time they should and they are friendly and helpful”

“At the moment the service is brilliant, we now have continuity of staff, they are lovely”

“We are aware of who is coming, it is a reliable service and they are there when you need them”

“Efficient, cheerful, punctual. Always ask if there is anymore they can do to help, overall an excellent service”

“I feel safer with my Care Call” - Mrs W, Harper Terrace, Hartburn

“I was very pleased at the quick response and the ladies were here in a few minutes” - MC, Rochester Road, Billingham

“The wardens kept in touch via the intercom until help arrived “ – AW, Lunedale Rd, Billingham

“Extremely happy with the service my father receives “

“I would just like to say a big thank you to your Care Call staff”

“The response when I needed assistance recently was excellent” - Mrs R, Brisbane Grove, Fairfield

“Colin and his lady colleague were very helpful and a credit to your team”

“Fantastic care would hate now to be without it” JT, Florida Fields, Whinney Hill

Meeting the Care Challenge

How embedding telehealthcare into care pathways can improve outcomes and help to create an integrated and sustainable health and social care service



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What is this booklet about?

How we solve the unsustainability of the current health and social care system is one of the most important challenges facing our country today.

This booklet demonstrates through ten examples of best practice from Local Authority and Primary Care Organisations throughout the UK, the profound positive impact that telecare and telehealth can have by:

- saving money in the health and social care system
- helping sick, disabled and older people remain at home for longer
- providing vital support to unpaid carers
- offering a low cost and resource efficient service to commissioners

Whilst telehealthcare is just one element of the overall solution and must be offered appropriately, it is a key enabler for the required transformation of our health and social care system.

Stockton evaluation leads to joint funding a mainstream telecare service



Background

Stockton on Tees' population is 192,400 and the number of over 65s is forecast to increase by 46% by 2021. One in five of the population has a long term condition.

Currently 6,932 people are connected to the Care Call community alarm service and 642 have active telecare packages. This follows joint investment from Stockton on Tees Borough Council social services and NHS Stockton on Tees under a local delivery plan arrangement to increase telecare provision in the area. This provided a six week telecare support package free of charge to clients leaving hospital, which they may then choose to continue with.

Evaluation

A review of the service undertaken in May 2009 revealed that:

- 195 telecare installations **delayed or prevented a care/residential care admission (77%)**
- 38 telecare installations have resulted in no economic benefits (15%)
- 20 telecare installations have resulted in reduced domiciliary care hours (8%)
- **117 ambulance call outs saved**
- **Overall savings** were estimated to be **£300,199 net based on 300 clients**

Outcome

Following this successful evaluation, Care Call and Telecare Services have secured new funding, including joint funding arrangements with partnering agencies and as a result:

- Care Call and Telecare Services continues to offer a 6 week intermediate care telecare service free of charge
- Telecare technology is embedded into adult community services and is one of the first considerations in managing risks for vulnerable people and their carers
- Care Call and Telecare Services is currently working with the PCT to include telecare and telehealth in long term conditions care pathways

"Telecare has been fundamental in transforming both adult community services and people's lives. The service respects and values people, helping them to maximise their potential and exercise their choice to stay in their own homes as long as possible. We continue to explore the ways in which telecare and telehealth can support people, helping them to remain safe and independent and making best use of resources." Liz Hanley, Adult Strategy Manager, Stockton on Tees Borough Council

Case study - Privacy and dignity enhanced for man with learning/physical disabilities

Mr A is 26 and has severe learning/physical disabilities. He had a tendency to self harm upon waking and as a result a dedicated team were monitoring his wellbeing through various systems as he slept. The introduction of Telecare (CareAssist and a Bed Occupancy Sensor) has enabled the team to reduce the amount of monitoring, as staff are now alerted when Mr A sits up in bed. His privacy and dignity has been enhanced without compromising his safety, and staff are now able to work more effectively, carrying out other duties but alerted if Mr A may need them. This bespoke package was designed by Care Call and Telecare Services acting on concerns voiced by partner agencies and is an example of how the team have the skills to adapt individual packages to meet the needs of their clients and their families.