

BCF 2016/17

Scheme Review
Lancashire Telecare

Guidance

- The intention of the review is to tell the story of each scheme's development, delivery and impact.
- Where there is quantitative evidence this should be highlighted.
- Where there is no quantitative evidence this should be explained
- Where qualitative comment is given this represents the LA or CCG's view.
- Each scheme is to have its own review slides completed.
- Any narrative to be kept brief, bulleted if appropriate and original i.e. not copied from scheme description.
- The logic model should reflect the planned and actual . An example logic model is provided separately.

Summary

Scheme Title	£s in 2016/17
Telecare	548,000
Total	548,000

Actual expenditure 2016/17	£1,795,569
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BCF14 – Telecare Services

Original rationale for scheme.

To deliver the council's 'Commissioning Strategy for Telecare Services 2014/15 – 2017/18'. The strategy's vision is:

To ensure more people benefit from the use of Telecare, so they increase or maintain their independence, stay safe and continue living at home.

As such, it was intended that a new and expanded Telecare service would promote people's independence and improve their outcomes, thereby preventing, reducing or delaying the need for more intensive health and/or social care to deliver savings.

Included in the strategy was a plan to increase the number of people supported with Telecare from 1,100 to 7,000 by 31 March 2018.

Primary prevention	Hospital	Community	Secondary prevention
No – Telecare is currently provided to people with eligible care and support needs only. It is not a universal service.	Yes – Telecare can prevent conveyance to hospital or help facilitate safe and timely hospital discharge.	Yes - Telecare can help people to remain safely at home and informal carers to continue in their caring role.	Yes - Telecare is a targeted service and is used as an example of secondary prevention in the Care Act statutory guidance.

BCF14 – Telecare Services

Activity during 2016/17

Scheme element	Planned activity	Actual Activity	Reason for any difference between planned and actual
Growth	4,650 people using Telecare on 31/03/2017	5,334 people using Telecare on 31/03/2017	Growth plan ahead of schedule
Home response procurement	Undertake procurement exercise for Telecare home response	Procurement for Telecare home response completed as planned	N/A
Service Development	Agree plans for staff training/engagement, communications and benefits realisation	Plan agreed for the three workstreams and work will progress into 2017/18	N/A
Service Development	Develop scope and proposals for a private pay offer by 31/03/2017	Plan in place on time, which will be delivered in 2017/18	N/A

BCF14 – Telecare Services

Barriers / Challenges to successful delivery	Managed by....
Capacity and availability of LCC operational staff to attend staff training sessions	Lancashire County Council
Fully embedding Telecare into adult social care practice so other forms of funded support can be shaped around Telecare	Lancashire County Council
Risks	Managed by...
The financial benefits of Telecare across health and social care cannot be sufficiently evidenced to justify ongoing investment	Lancashire County Council
A jointly commissioned (between LCC and CCGs) Telecare home response service with assisted lifting service may not be in place in time for when the current contract expires on 30 April 2018	Lancashire County Council

BCF 14 – Telecare Services

	Alignment with High Impact Change Model of Transfers of Care	Yes= X
1	Early discharge planning.	X
2	Systems to monitor patient flow.	
3	Multi-disciplinary/multi-agency discharge teams, including the voluntary and community sector.	
4	Home first/discharge to assess.	
5	Seven-day service.	X
6	Trusted assessors.	X
7	Focus on choice.	X
8	Enhancing health in care homes.	
Alignment with Plans		
Urgent and Emergency Care		
A&E Delivery Board		
Operational plan (s)		
Other...		

BCF14 – Telecare Services

Estimated impact	A reduction of?	Details
NELs	Not known	
DTOC	Not known	
Residential Admissions	Not known	
Effectiveness of reablement	Not known	
Other	See below	

How was impact measured?

Evidencing the benefits of Telecare is a challenge nationally, however LCC is in the early stages of progressing a benefits management workstream. Headlines from this work so far are:

- 45% of Telecare users receive no other state funded social care and support, which is a benefit in itself but further work is needed to understand the financial benefits
- 34% of Telecare users also receive home care and total spend is on average £624 pa less per person. For illustration, based on 1,760 people this would be a saving of £1.1m
- 17% of Telecare users receive other care & support and total spend is on average £891 pa less per person. For illustration, based on 861 people this would be a saving of £0.77m

It is expected there are benefits to the NHS but no quantitative evidence is currently available.

Preliminary talks are happening with York University about them also evaluating the benefits.

BCF14 – Telecare Services

Inputs	Activities	Outputs	Outcomes	Impact
<ul style="list-style-type: none"> • Funding • LCC Adult Services • LCC Commissioning • Tunstall Healthcare • Progress Housing Group • Partners • Technology 	<ul style="list-style-type: none"> • Needs assessment • Eligibility decision • Support planning • Telecare referral • Installation • Monitoring services • Response services • Signposting • Reviews • Embed within ASC • Scope wider service offer 	<ul style="list-style-type: none"> • Less NWAS calls/conveyance • Less hospital/care home admissions • More remain at home post discharge for 91 days • Lower care package costs • Reduced DTOC • Early intervention • Improved user and carer satisfaction 	<ul style="list-style-type: none"> • Freeing capacity • Improved independence • People feel safer and in more control • More peace of mind for carers • People supported to remain at home • Improved demand management 	<ul style="list-style-type: none"> • More sustainable health and care system • Savings

Learning from delivery of the scheme

Learning	How shared and who with ?
Staff engagement and training takes longer than anticipated	Telecare project board
Reaffirmation that evidencing the benefits of Telecare is challenging	Telecare project board

Qualitative assessment summary

1 –10 where 1 is “not at all” and 10 is “to a great extent”.

	Is working as planned and delivering on outcomes	Represents value for money in the long term	Builds long term capacity for integration locally; enables new models of health and social care	Evidently supports people effectively, improving patients /service user satisfaction	Has buy in from all stakeholders and workforce: Frontline staff and political, clinical, managerial leaders	Reflects a truly whole system approach	Supports shift towards prevention/ early help and community support/ self -help	Total / 70
Telecare Services	7	7	7	6	5	5	9	46

Summary

Scheme Title	Retain ? X	Expand? X	Cease? X	£s in 2016/17	£s in 2017/18
BCF14 – Telecare Services	X	X		548,000	558,000

Notes:

1) The amount of funding assigned to Better Care Fund for this scheme was £548,000 in 2016/17, however actual spend was £1.8m.