Expansion of the in-house Lifeline Service

To:	Adults & Health Committee
Meeting Date:	22 September 2021
From:	Will Patten, Service Director, Commissioning, People & Communities
Electoral division(s):	All
Key decision:	Yes
Forward Plan ref:	2021/041
Outcome:	Adults and Health Committee is being asked to approve: The expansion of the County Council's in house Lifeline Service thereby enabling the Council to provide services to other authorities and/or partner organisations. The expansion of the service would enable more people to be supported to live in the home of their choice with the support of assistive technology. Income generated from the expansion of the service would be reinvested in the local service thereby benefitting people across Cambridgeshire.
Recommendation:	The Adults and Health Committee is recommended to: a) Approve the expansion of the County Council's Lifeline Service thereby enabling the Council to provide services to other authorities and/or partner organisations. b) Note that the expansion of the service will enable more people to be supported to live in the home of their choice through the provision of assistive technology. c) Comment on the approach of expanding the service to reinvest in local technology enabled care provision with any surplus used to test emerging digital technologies that will benefit people across Cambridgeshire.

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1. Background – Technology Enabled Care (TEC)

1.1 Technology Enabled Care (TEC) services refers to the use of a range of technology devices that are an essential tool in enabling people to remain living independently and safely within the home of their choice and continue to contribute to, and benefit from, their local community. Practical and emotional support is available when it is needed 24/7 at the press of a button and the provision of appropriate technology can reduce and delay people's need to move into sheltered accommodation, and can avoid the need for long term care and support.

1.2 There are different types of TEC, all of which are available through Cambridgeshire's service:

- **Connected Telecare** equipment includes wired and wireless sensors and detectors that are programmed through a base unit and will alert a call receiving centre who can then make contact with a nominated responder – e.g. family member or neighbour. Lifelines, are an example of "connected telecare" and are sometimes known as community alarms, or pendant alarms. People who have a Lifeline installed in their home will wear a red button pendant or wrist band which they can press if they need assistance. Sensors and detectors can also be paired to these systems so that automatic alerts can be raised to the call centre, for example a falls detector that sends an alert automatically if the wearer suddenly drops to the floor, or a smoke detector sending an alert where there may be a fire in a person's property (see case example 4. in annex A)

- **Standalone Telecare** sensors and detectors are not connected to an alarm receiving centre but are programmed to link to pagers or mobile phones carried by a carer – often a family member. Such equipment includes bed and chair leaving alarms, fall detectors, door monitors and epilepsy monitors

- **Standalone technology** consists of individual pieces of electronic equipment that enhance a service user's independence by prompting or reminding them. Alerts are not sent to either a carer or alarm receiving centre. Such items include medication reminders, task prompt devices and smart phone apps

1.3 In Cambridgeshire County Council, we have a nationally respected and well established in-house TEC and Sensory Services Team that sits within Adults Early Intervention and Prevention services. The TEC element of the service covers the provision of a range of technology to meet people's diverse needs, including services detailed above at 1.2. The Sensory Services part of the team specifically works with adults who have sight or hearing impairment, or dual sensory loss.
The TEC service has seen year on year increase in referrals with the provision of interventions that ensure people are well supported with the optimum technology at the right time. Annex A offers an insight into the specific outcomes that can be achieved with positive responses from service users and carers. The TEC Team is a member of the Telecare Services Association (TSA) which is a national umbrella body that drives good practice across TEC services. The TEC Team are also an active member of the TSA Special Interest Group working on prevention and proactive technologies.

1.4   The TEC team receive referrals from a number of different sources including health and social care practitioners and are responsible for undertaking assessment of individuals, and for providing people with loan equipment that meets their assessed needs, and our statutory duty, under The Care Act 2014.

1.5   Cambridgeshire County Council's TEC team is an integrated service. The CCG contributes funding to the service so that it can provide interventions on behalf of the CCG. The integrated service is governed by a Section 75 Agreement between Cambridgeshire County Council and Cambridgeshire and Peterborough Clinical Commissioning Group (CCG). Section 75 Agreements were legally provided by the NHS Act 2006 and allow budgets to be integrated between health and social care. This facilitates integrated commissioning with the CCG and also promotes joint working with provider organisations including Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) and the acute hospital trusts.

1.6   In October 2020, the Cambridgeshire TEC Team became a Lifeline provider. This development was key following a soft market test exercise which highlighted that a similar service could not be matched by the private sector. The soft market test resulted in only two responses from the open market and neither were able to offer the end-to-end service that is provided by the TEC Team.

1.7   Prior to October 2020, people who needed a Lifeline, and connected Telecare equipment, ended up on two separate pathways. They would first need to be referred to one of a variety of different Lifeline providers operating across Cambridgeshire, and then a secondary referral to the TEC team for any sensors and detectors that needed to be linked to the Lifeline. This meant there was an extremely fragmented service which was confusing to the people using it and led to delays in people receiving services. With the TEC team now able to provide both the Lifeline and the connected telecare, the service is able to operate as a 'one stop shop' with a single point of referral. This also means there is a single assessment process to identify needs, and a single installation service for the Lifeline units, and connected equipment.

1.8   People are provided with a Lifeline on a free of charge six-week trial basis in order to encourage take-up. After six weeks people in receipt of a Cambs TEC Lifeline pay £5 per week to cover the costs associated with the alarm receiving centre which is available 24/7/365 and provided through a contract with *Astraline*. Charging for this element of the service is common practice across the Country as there is no statutory duty to provide Lifelines free of charge. A national benchmarking exercise was undertaken to determine the £5 per week charge that is levied in Cambridgeshire and, through consultation with the TSA, this was deemed to be both appropriate and affordable. For people who have a Lifeline, and are also being assessed for social care support, the £5 Lifeline charge is considered as Disability Related Expenditure (DRE) and therefore has the effect of an offset against a person's client contribution. The peripheral sensors and detectors (that link to the Lifeline) are provided, on loan, free of charge and in line with Care Act eligibility – this applies to both funded and self-funded users. If, after the six-week trial, the individual prefers not to continue to have a Lifeline, the equipment is removed and recycled for re-use. The Lifeline units themselves are digital which means they are fully compatible with the *BT Openreach* Digital Switchover due to be completed by 2023.

1.9   This report seeks acknowledgment of the success of the service so far, and approval to begin to actively promote the service across Cambridgeshire, and beyond, so as to enhance the customer base, generate additional income to reinvest in the service, and to provide an aligned service across the local authority area that is fit for the 21st century.

2.   Main Issues

2.1   The Cambs TEC Lifeline service has, so far, primarily relied on referrals from the County Council's internal Adult Social Care teams as there has been no external marketing of the service. The business case projected 448 new service users in the first eight months, but has actually achieved 638 and generated income of £24,000. The service has a take-up rate of 95%, i.e. only 5% of people refuse to continue with the Lifeline after the first six weeks and therefore pick up the ongoing costs.

2.2   A key benefit of the in-house service is that the Cambs TEC team have control over the activation history data that is captured by the alarm receiving centre operated by *Astraline.* This means that the service can be truly preventative and use the data to understand the best response in terms of early intervention and avoid unnecessary interventions – e.g. reducing ambulance call-outs and admissions to residential care. The case studies at Annex A demonstrate how this works in practice and also includes some scenarios that show how the service, as a whole, delivers savings and avoided costs for both health and social care in addition to great outcomes for people. The TEC team work hard to ensure that individual solutions are matched to people's needs and feedback from service users enables a co-production ethos within the team.

2.3   When CCC opted to provide its own Lifeline service, it recognised the fragmented and out-dated local services that were currently on offer, the impact of the impending *Open Reach* Digital Switchover and the opportunity presented by providing its own service. The Digital Switchover will have significant implications for users of analogue phone lines as the analogue Lifeline systems will be incompatible with the new digital communications within people's homes. This presents a risk that people may be left vulnerable if their existing Lifeline units are not digitally ready. The Cambs TEC Lifeline Service has embraced this situation and commenced operating with digital-ready technology that also provides high quality data in terms of early intervention and prevention.

2.4   It was an early intention that the Cambs TEC Lifeline service could be offered out to other local authorities to generate income and exploit the gap being created by the private sector. Across Cambridgeshire and Peterborough there are a number of areas of opportunity to grow the Cambs Lifeline service, particularly with current district and city council services so as to develop stronger partnerships across the County.

2.5   It is the TEC Team's view that marketing the Cambs TEC Lifeline service to external partners presents an exciting opportunity for CCC to expand its service offer of a cost effective service delivery model. As part of any agreement with other local authorities there would be a comprehensive service specification detailing the provision, finance schedule and reporting requirements.

2.6   In order to deliver the service expansion as outlined above, the TEC team will invest £102K per annum to cover the fixed costs of the service. These costs, in additional to variable unit

costs directly related to the roll-out of additional lifelines, are expected to be fully recoverable as part of the proposed financial model.

2.7 Based on the modelled expansion of the service, this will deliver a regular income which is expected to increase over five years to an estimated £282k per annum. It would be the intention of the TEC Team to invest any surplus in the trialling of new digital technologies. This will be kept under review and where there are opportunities to grow the service further, another paper could be brought back to Committee.

	Year 1	Year 2	Year 3	Year 4	Year 5
Fixed Costs	102,000	102,000	102,000	102,000	102,000
Variable Costs	82,000	105,000	127,000	147,000	150,000
Total Cost	**184,000**	**207,000**	**229,000**	**249,000**	**252,000**
Modelled Income	-208,000	-232,000	-257,000	-279,000	-282,000
Net Benefit	**-24,000**	**-25,000**	**-28,000**	**-30,000**	**-30,000**

3. Alignment with corporate priorities

3.1 Communities at the heart of everything we do

There are no significant implications for this priority.
or

The following bullet points set out details of implications identified by officers:
or

The report above sets out the implications for this priority in paragraphs 1 & 2

3.2 A good quality of life for everyone

The report above sets out the implications for this priority in paragraphs 1 & 2

3.3 Helping our children learn, develop and live life to the full
There are no significant implications for this priority

3.4 Cambridgeshire: a well-connected, safe, clean, green environment
The report above sets out the implications for this priority in paragraphs 1 & 2

3.5 Protecting and caring for those who need us
The following bullet points set out details of implications identified:
Technology Enabled Care enables the delivery of outcomes for people:
o Promotion and maintenance of independence, well-being and quality of life for customers in their own home
o Manage and minimise risk for people living at home

- o Reduce social isolation
- o Detect deterioration and enable more early intervention for people with long term conditions
- o Enhance people's sense of dignity and increased confidence
- o Reassurance and breaks for informal carers
- o Prevent, reduce, delay escalation of needs and hospital / care home admissions
- o Supporting safe hospital discharge
- o Supporting the prevention, reduction and delay in people needing formal packages of care and support
- o Embrace the use of new technology, as it becomes available

4. Significant Implications

4.1 **Resource Implications**
There are no significant implications within this category.
or
The following bullet points set out details of significant implications identified by officers:
or
The report above sets out details of significant implications in paragraph 2.2

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications
There are no significant implications within this category.

4.3 **Statutory, Legal and Risk Implications**
The report above sets out details of significant implications in paragraphs 1 & 2

4.4 Equality and Diversity Implications
There are no significant implications within this category.

4.5 Engagement and Communications Implications
There are no significant implications within this category.

4.6 Localism and Local Member Involvement
There are no significant implications within this category.

4.7 Public Health Implications
There are no significant implications within this category.

4.8 Environment and Climate Change Implications on Priority Areas (See further guidance in Appendix 2):
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4.8.1 Implication 1: Energy efficient, low carbon buildings.
Neutral
Explanation: n/a

4.8.2 Implication 2: Low carbon transport.
Positive:

Explanation: The TEC Service will lease vans that have low emissions and are fuel efficient for the Technicians who undertake the installation of the Lifeline and sensors. Travel is minimised by zoning the area covered by each Technician each day and they carry stock in their vans for several days reducing the need to return to the store for re-stocking. Assessments and reviews are completed by telephone whenever appropriate again reducing travel by the Technologists. Many TEC devices support reduction of unnecessary travel for Service Users and their families to stay in touch with each other, receive 'I'm OK notifications' and avoid check visits. The provision and installation of some technology can mean reduced or prevented packages of care meaning less vehicles on the road

4.8.3   Implication 3: Green spaces, peatland, afforestation, habitats and land management.
neutral
Explanation: n/a

4.8.4   Implication 4: Waste Management and Tackling Plastic Pollution.
Positive :
Explanation: Equipment can be recycled for re-use

4.8.5   Implication 5: Water use, availability and management:
neutral Status:
Explanation: n/a

4.8.6   Implication 6: Air Pollution.
neutral Status:
Explanation:

4.8.7   Implication 7: Resilience of our services and infrastructure, and supporting vulnerable people to cope with climate change.
Positive Status:
Explanation: Devices can support people in ensuring their living environment is a safe as possible and at the optimum temperature for their needs – ie can alert to excessive heat or cold

Have the resource implications been cleared by Finance?   Yes
Name of Financial Officer: Stephen Howarth

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?   Yes
Name of Officer: Henry Swan

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or LGSS Law? Yes
Name of Legal Officer: Fiona McMillan

Have the equality and diversity implications been cleared by your Service Contact? Yes
Name of Officer: Will Patten

Have any engagement and communication implications been cleared by Communications?
Yes
Name of Officer: Will Patten

Have any localism and Local Member involvement issues been cleared by your Service Contact?   Yes
Name of Officer: Will Patten

Have any Public Health implications been cleared by Public Health?
Yes
Name of Officer: Kate Parker

If a Key decision, have any Environment and Climate Change implications been cleared by the Climate Change Officer?
Yes
Name of Officer: Emily Bolton

5.   Source documents guidance

5.1   Source documents

None

Case examples detailing the early intervention and prevention benefits of provision of technology enabled care. These are based on real case examples from Cambridgeshire TEC Team. Names have been changed in all cases

1. Suzie made a referral to the TEC team as she was having difficulty supporting her parents, Jim and Anne. She was receiving numerous calls from them every day. Jim had dementia and was being aggressive towards his wife and displaying challenging behaviour. Anne was physically frail and becoming afraid of Jim, so was isolating herself upstairs. Suzie was working full time which often involved trips abroad. A lifeline was installed, with local services and neighbours set up as responders. Suzie is really pleased with how the Lifeline has supported her and her parents. She now has more peace of mind when she is abroad. Anne is able to summon assistance whenever she feels afraid, and she is reassured by the Astraline Call Operators and the local responders. Jim and Anne continue to live independently with no social care package, just a privately funded cleaner and a meal delivery service.

2. Alan made a referral to TEC for his mother, Sarah, due to her history of falls. Sarah had dementia but was still living in her own home with a social care package and had support with shopping, cleaning and meal preparation. However, she was unable to summon help if needed. A Lifeline was installed by TECS with a bed and chair sensor to monitor and detect if any falls had occurred. Alan is pleased with the Lifeline because it has saved the need to make repeated visits, especially overnight and the family are less anxious about the frequency of Sarah's falls.

3. Amanda made a referral to TECS for her mother, Jackie, who lives alone. The main risks identified were falls, wandering outdoors and over medication. TECS installed a Lifeline with smoke detector, door sensors and pivotell medication reminder. Two months after initial installation movement detectors were added to the system to enhance the detection of falls. Daughter likes the lifeline because she can be easily summoned in an emergency.

4. John was referred to the TEC team as he was not independently mobile but was keen to remain living in his own home. A Lifeline and linked smoke detector were installed. Three days after the installation, the smoke detector triggered a call to the alarm receiving centre who immediately called the Fire & Rescue Service. John was safely rescued but his property was severely damaged by fire.

The TEC Team utilises an approach that calculates preventative savings through an outcomes based model. The following bullets summarise some of the outcomes that TEC can help achieve and the associated costs avoided:

- **Desired outcome**: **Residential care prevention - intervention will potentially delay or eliminate need for this type of care.**
- **Social care avoided**: average cost of high level care package – might be care home or 24 hour live-in care
- **Cost**: £750 x18 p/wk (average length of time for which an escalation in care has been delayed because of a TEC intervention is 18 weeks.)

- **Desired outcome: Reduce or eliminate care package – intervention will reduce, delay or eliminate formal care required eg waking night care**
- **Social care avoided**: Difference between average cost medium level care package: three to four calls a day £232.26 and average cost of a high level care package might be care home or 24-hour live-in care £750
- **Cost**: £517.74 x18 p/wk (average length of time for which an escalation in care has been delayed because of a TEC intervention is 18 weeks.)

- **Desired outcome: Falls prevention plan – intervention will prevent a fall/hospital admission associated with a fall specifically**
- **Social care avoided**: Hospital Discharge – Average cost of one hour of Reablement £34 Average length of package x 21 hrs
- **Cost**: £714 on off