BT Cornwall



BT & 3 Million Lives – Learning from the past and developing the future

18th October 2013





We are still discussing telehealth despite this....!

- Patient developed unstable diabetes around 4 years ago, felt very poorly and activated a Do Not Resuscitate order
- She has only peripheral vision and reduced hearing.
- Started injecting insulin herself on discharge from hospital with district nurses visiting daily to do a blood glucose level
- Since telehealth was installed the nurses do not need to visit
- Carers help her day to day and help her take her own readings and pass on the information
- Telehealth has greatly improved her sense of independence and she feels empowered to go on trips out with carers for the day. She particularly appreciates this as she wants to experience as much as she can while she can.



Why focus on Assisted Living?

- 2013 15m in the UK with a Long Term Condition
- 2025 18m with increases in co-morbidity (20% increase)
- Death preceded by 10 years of chronic ill health
- UK Population aged over 65 will triple from 4.6 million to 15.5 million in 2074
- Care of people with LTC's accounts for 70% of health and social care spend
- We do not have the physical resources to be able to meet this demand within the current NHS
- Technology continues to advance and offers new opportunities



Assisted Living services can make a difference

- Whole System Demonstrator largest trial of assisted technology services in the world in 2010
 - 6000 people trial across health and social care
 - Focus on telehealth and telecare
 - 15% reduction in A&E attendance
 - 20% reduction in emergency admissions
 - 14% reduction in elective admissions
 - 14% reduction in bed days
 - 45% reduction in mortality
- Veterans Association
 - 76000 people currently receiving home based telehealth services out of 6.3m veterans (1.2% of their population)
 - Hospital admission savings of over 30%
 - 4600 video conferencing facilities across the country
 - 21000 people will have home based video services by end 2013
- Kicked off 3 Million Lives



Department of Health Concordat with Industry

Industry Supporters





What has 3 Million Lives achieved?

Industry Group – elements of a service

- 1. Service Design and Service Components: What factors to consider when designing 3ML Services: and what are the major components when a service is operational
- 2. Quality and Accreditation; what standards will 3ML Services adhere to in the categories of product, operational and information standards.
- **3. Finance and Economics** which looks at real life economic models and business cases that will apply when mainstreaming 3ML Services
- 4. Contact and Procurement which looks at standardising the legal and contractual frameworks to enable at pace roll-out

Dept of Health Pathfinder sites

• 7 pathfinder sites identified to commission 100,000 telehealth and telecare users in 2013

Has it worked??.....



What has 3 Million Lives achieved?

Industry is ready but there are barriers to overcome....

- Restructure of the NHS has refocused activities and slowed down the pace of change
- Evidence of assisted technology benefits are out there but are not being delivered to the right people
- Too much focus on what has been done in the past and not what we can do in the now or in the future
- Cost effectiveness at scale has yet to be proven
- Care in the UK is not integrated in the way that it needs to be

What now for 3 million lives?.....



3 Million Lives Reborn!

- NHS England have taken over the initiative from the industry concordat
- Re-launch took place 18th October with a Integrated care Stakeholder forum

Vision:

"3 million lives is underpinned by the idea of service integration to improve patient care & outcomes, facilitate collaboration between clinicians and empowering patients to better self manage their conditions with the use of technology"

Priorities for 2013/14:

- Focus on a wider range of assistive technology
- Patient stratification and definition of the market
- Incentivise integrated care
- Resolve information governance issues
- Develop and pilot new procurement models
- Pioneer sites due to be announced for integrated care in November



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What now for 3 million lives?.....



Overview of BT Cornwall

• What is BT Cornwall?

- Strategic partnership between BT, Cornwall Council, Peninsula Community Health and Cornwall Partnership Foundation Trust for the provision and development of specific services
- Term: 10 + 5 Years
- The scope of the partnership:
 - Internal help desk.
 - ICT provision including desktop, print, server and application support.
 - Data centre operations
 - Transactional Shared Services Finance, HR, Payroll.
 - Document and Information Management including print
 - Telehealth / Telecare and other assistive technology services
 - Process improvement linked to all of the above

What will it deliver?

JOBS CREATION: 'more' than 500 new FTE jobs supported by formal commitments and guarantees on delivery along with clarity on the nature and type of jobs.

TRADING AND INVESTMENT: In business development and marketing to sell services supported by business plan, sales and marketing team and guarantees - £2mpa

EFFICIENCY SAVINGS: target 20% savings by the end of year 2 plus year on year additional savings of 5%.

OTHER FACTORS: Service quality, staffing and Telehealth/Telecare











The past and now – Telecare and Telehealth in Cornwall

Telecare

- 11000 + telecare connections
- Mixture of private and state funded users
- Established links into wider Council initiatives such as Safeguarding, home fire safety checks, Carer emergency card scheme, Dementia pathways, Carers services, Learning Disability services, Hospital Discharge and winter well-being campaigns
- A recent evaluation of 153 installations undertaken in early 2012 showed potential cost benefits of £1,680 per service user per year across both health and social care

Telehealth

- Over 2000 people supported by telehealth with 1030 actively supported on a daily basis
- Largest telehealth service of its kind in the UK providing telehealth to over 20% of those receiving the service in England
- Supports a wide range of health and social care circumstances, some of which are pioneering
 - Falls Prevention
 - Urinary Tract Infection diagnosis and prevention
 - Post-natal blood pressure monitoring
 - Telecoaching
- Recent service evaluation of UTI telehealth showed a 4:1 investment return



Need to look to the future making sure we learn the lessons from the past.....

Assisted Living for Independence (ALFI) - Transforming the way care is delivered to people in the community

- 1. Our aim is to support a range of individuals from high risk, complex users to patients with chronic conditions requiring vital sign or movement monitoring needs or simply having the safety of an emergency alarm.
- We are technology agnostic bringing the best technology to support patients with a wide range of needs in the community. We can deliver to scale, have a broad geographical reach and can deliver and integrate across broadband, the NHS N3 network and 3G.
- **3.** Our portfolio is set to develop and expand to enable the treatment of larger sections of the population for long term monitoring, disease management and supported care

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Pathway Redesign	Service Interlock	Partnership	Management Reporting
 Review current pathways Redesign pathways to suit future state Bring the right technologies to support the redesign Agree measurable outcomes 	 Agreeing service operating procedures such as escalations and handovers Implementing clinical governance 	 Working in partnership to deliver the service Deliver the highest quality service Managed by BT 	 Reporting of outcomes through balance scorecards Identify service improvements through data analysis



What does this mean for customers?

- A new joint telecare and telehealth service run by one organisation working in both health and social care.
- A new monitoring platform which will enable new services to be provided, greater efficiencies and better integration
 - Telecare monitoring
 - Telecare maintenance
 - Automated call generation
 - Lone worker monitoring
 - Out of hours monitoring
 - Planned maintenance
 - Welfare check calls
 - · Geo-fencing for those with Dementia
 - Medication reminders
 - Telehealth services including setting up 'central' monitoring rooms
 - Telecoaching services
 - · Fully managed approach or bespoke offerings
- · An increased range of equipment from a number of different providers
 - Technology agnostic
 - · Integration of existing and new equipment
- Different arrangements for service and equipment payment



Demonstrating benefits – the key to AT development

- Whole System Demonstrator both helped but hindered due to the nature of the trial
- Lot of good evidence out there but this needs to be pulled together into an up to date review
- BT looking to complete the following:
 - Commission an independent literature review of the evidence across health and social care for assisted living technologies
 - Commission an independent service evaluation of the Cornwall telehealth & telecare services (subject to data availability)
- Create a centre of excellence in Cornwall for assisted living to demonstrate the evidence, showcase the services and create an environment for development / learning
- Introduce robust analytics to be able to demonstrate benefits earlier in an automated way
- Developing a stakeholder engagement programme ensuring involvement of key parties enabling the development of the services



How do we move forward?

We need to:

- Communicate and generate awareness nationally about assisted living, how it supports people and how it can save money
- Ensure that technology is seen as an 'enabler' and that it is imbedded into care pathways
- Build a model that works for those procuring services where they can understand and accept the benefits
- Listen to what people want and need adapting our services

"Its like having a little nurse sitting on my shoulder – its brilliant! It has helped to control my condition and I have had far less visits to the GP"

"I now have a better idea of when to adjust and increase my medication to combat symptoms. Before telehealth I tended to leave it too late thinking I would get better and sometimes I would be taken to hospital"



Q&A

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