Appendix 1: Kent County Council Telecare Equipment Prescription Guidance: A Supplementary Aid to support decision making

This Guidance is supplementary to the Telecare Operational Protocols and should not be used in isolation. Its aim is to support decision making when considering assistive technology for a person.

Telecare Overview

Telecare solutions have developed greatly alongside the digital world and can be sourced from a wide range of companies and outlets. These offer real opportunities to support adults with a wide variety of conditions to live as independently as possible, as well as offering support to their carers. With the continued trend in using smart phones, there are many apps that people can access using their own phones.

It is vital that a person is consulted about Telecare and that informed consent is gained before purchase and installation. Telecare although having many benefits, can be viewed as a restriction on a person's life as they are being monitored at all times, albeit remotely. If a person is not able to consent to telecare (and an assessment of mental capacity has been completed in respect to this decision where there are concerns), then a decision to have telecare would have to be made in their best interests and demonstration shown that this was the least restrictive option to meet their needs.

KCC do not routinely provide simple telecare equipment solutions in isolation, such as basic lifelines, sensors, and key safes and this is detailed within the Telecare Operational Protocols document. People should be offered advice on self purchase. This enables the person and their carers to select a system which allows them to have the support and monitoring tailored to their needs and even have the response routed to their own devices if this is preferred.

Where a person's needs are more complex and it can be evidenced that the person meets the national eligibility criteria under the Care Act 2014 and the telecare supports their unmet eligible needs; **or** where telecare would delay and prevent needs developing (a preventative intervention); certain packages of telecare might be provided by Kent County Council.

Prescribers will need to complete a Telecare Reasoning Form for orders over £350, GPS systems, bespoke equipment or when telecare equipment provision falls outside of the usual telecare prescription criteria. This should detail the person's situation, outline the range of options considered before requesting telecare and the reasons the particular items are required.

TELECARE EQUIPMENT AND CONSIDERATIONS

Falls detectors

These activate automatically if the person falls. They can be particularly helpful to support people who

- Have seizures, blackouts, lose consciousness as part of their falls risk, which might mean that they could not summon help or press a standard pendant if they fell
- Have a cognitive impairment, dementia or learning disability which might reduce their ability to recognise the need to press their pendant as part of their falls risk
- Have weakness/paralysis of one side of their body which might mean that if they fell on their affected side, they could not summon help or press a standard pendant, as part of their falls risk

Before prescribing a falls detector, there are a great number of issues to consider, the main being can you **prevent or reduce the risk of them falling**? Preventing someone falling is much more effective than a quick response generated from telecare equipment. Telecare will only support someone at home, but this leaves them at risk of falls in the community; leading to loss of confidence, isolation from a reluctance to leave home and dependence on others to support them with community activities. Before considering a falls detector, the following should be considered and addressed:

1. **Medical Diagnoses and Medications**- there are many medical reasons why a person falls. If the person has had a recent exacerbation in their falls, consider a GP or falls clinic referral first as it may be treatable.
2. **Pattern of Falls and History**- finding out when the person last fell and the circumstances around the falls. What is the history of their falls within the past year? It might be that this is related to their medication or medical diagnoses or environmental issues. Falls prevention services should always be considered.
3. **What happens when they fall?** Do they lose consciousness, do they fall rapidly or slump more slowly to the floor? This impacts on what equipment can be used as falls detectors work differently. Is the person able to get up after a fall? Do they injure themselves when they fall?
4. **Clothing and Footwear**- Are they wearing supportive footwear in and outdoors, this is particularly impartant with slippers. Are skirts/dresses/nightwear/trousers an appopraite length? These can cause a person to trip if they are too long, particularly on step/stairs

5. **Walking aids-** would the person benefit from a mobility assessment and walking aid? If they have an aid, are they using their walking aid correctly and does it appear to fit their needs? They may need a referral for physiotherapy or a walking aid assessment instead.
6. **Home Environment-** consider flooring- loose rugs and poorly fitted/worn carpet can cause falls, as can wooden/shiny floors. Advice should be given to improve safety. Community equipment and minor adaptations, such as rails and raised toilet seats might reduce the risk of falls and promote independence.

Alternative options to a falls detector

1. Lifeline pendant - In most cases, use of a basic/ standard Lifeline Pendant/ Community Alarm may be sufficient and should be considered first. This is a basic button on a watch or pendant that someone pushes when they need support or emergency, such as a fall or feeling unwell. A cover can be added to the alarm which makes it easier for people with reduced grip and dexterity (such as arthritis, neurological problems) to activate it. KCC would not routinely provide this equipment and people should be directed for self purchase.

2. For many people, keeping a mobile phone with them might help them summon help should they fall. These could be used on a neck strap or a waist pouch. Mobiles could be programmed with family numbers on speed dial.

Reminder Prompts

A basic lifeline unit can be utilised to support the person with daily reminders. Families can set recorded messages to the base unit to remind the adult of important things. This might be “remember your keys” to “remember to take your medication” or “it’s time to make your lunch”. They can be linked to sensors- for example to the door so that when the door opened, it could remind them to take their keys and to lock the door. This can support people to manage their daily routine without families having to phone several times a day. It is important to note that these systems will only work if the client has the cognitive ability to follow these instructions and require a simple prompt only.

Calendars, diaries and whiteboards are also strategies that might work when a person needs reminding to complete an activity/of an event.

KCC would not routinely provide this equipment as a stand-alone solution and people should be directed for self purchase.

Smoke detectors and carbon monoxide detectors

Consider if there is a specific need to have these linked to a monitoring centre and the risks of the person's particular situation at home. A linked system might be indicated where it was likely that if there was a fire, the person might not be aware of the problem or be unable to call emergency services themselves. For example, if a person living with dementia smoked and was prone to dropping cigarettes and falling asleep when smoking, and would not know how to alert help if there was a fire.

A referral to the Fire Service for a Home Safety Check to look at fitting smoke alarms and also providing equipment and services such as fire retardant sprays to carpet/chair/bed and specialist bedding/blankets/ash trays should be considered.

Carbon Monoxide detectors should not be used to replace the need for routine gas equipment safety checks and maintenance of the person's own home appliances.

Gas detectors

These will alert if gas is detected, for example if the person has left the gas on but not ignited on their cooker or gas fire. This might be indicated in cases where a person has cognitive problems and there are concerns about their memory when cooking or lighting their fire. A gas detector could avoid or delay the need to have the person's familiar equipment disconnected or the use of gas isolation valve when the person has been able to use these devices safely.

Consider what the person's normal routine is- for example do they now use a microwave or have meal delivery which means they are not using the gas appliance?

Gas detectors should not be used to replace the need for gas equipment safety checks and maintenance of the person's own home appliances.

Temperature extremes detector

These will alert if there is a marked change in temperature or if the temperature drops below a certain level. It may alert if a person routinely leaves the door open or if they are not using their heating appropriately- for example a person with memory problems who may repeatedly turning the thermostats up and down. We know that older people are at risk of hypothermia and this will help alert families/carers quickly where there might be concerns.

Use of the smart home hub systems might allow a family member to use this information from the sensor alert, to remotely adjust the thermostat controls.

Flood detectors

Can be used in bathrooms and kitchens to alert when the person has left the plug in the sink/bath and not turned the taps off.

Before using a flood detector, consideration should be given to how the flooding risk can be reduced or eliminated. Detectors rely on water getting onto the floor, which will cause considerable damage over time and also necessitate cleaning action, as well as being a falls hazard for the person themselves. The “magi-plug” (http://www.magiplug.com/) works by releasing the water when it gets to a certain level to avoid flooding and also changes colour when the water is too hot. This is available for private purchase at many retail outlets and would prevent the need for flood detectors in most situations.

Push down/ self closing taps might also be an option where the person continues to leave the taps on unattended to avoid flooding risks or continued loss of water.

Property Exit Sensors

These sensors alert when a door is left open and the system cannot detect movement. This might indicate that the person has left the property and might need support to be able to safely return, or that they have forgotten to close their door and might be at risk from this. These can be linked to times, for example from 10pm to 6am if the person needs support to reduce the risk of them leaving the property at night, if they do not understand the time of day. A delay can also be set, for example to enable the person to go outside for a set period of time such as putting the bins out and walking around the garden.

Property exit sensors do rely on a consistent responder and also knowledge of the person’s usual routine. They should always be used to promote a person’s independence and the principles of the Mental Capacity Act should always be followed when considering these.

Bed and Chair sensors

These are sensor pads that are placed on the person's chair and bed and will alert when there is a change to the person's usual pattern. They can be used in a variety of ways, for example

- The Service User has failed to go to bed by a specified time. This might support if the person has had a fall, or has a cognitive impairment and is not remembering to go to bed and may highlight issues with sleep and wake patterns.

- The Service User has not got up in the morning by a specified time

- The Service User has left the bed during the night – this can be an instant alert or be set to allow a period of absence to allow the Service User to use the bathroom, make a drink etc. The times set can be adjusted to meet the Service Users lifestyle. It might detect if the person has forgotten to go back to bed or has had a fall etc.

- The adult has left their chair for a period of time – this could have time built in for the person to make a drink/lunch and go to the bathroom but if they haven't returned, an alert will be raised.

When considering bed and chair sensors, it is important to be aware of the person's mobility and functioning levels, as well as their normal routine. They should not be used in a restrictive way to prevent mobility and functioning; especially if the person has the ability to mobilise and access their home environment. A person should not feel that they "must" return to their bed or chair by a certain time, as this could decrease their confidence in moving around their home and reduce their autonomy. A further risk of this is that their mobility may be compromised.

Pressure Mats

These can also be used instead of the bed/chair sensors. A mat could be placed by the bed or chair to detect if the person gets up unexpectedly, or by the front door etc. to alert if the person is there. They can also be used to monitor inactivity- for example if the adult normally gets up and walks from their chair every hour, then if they were forgetting to get up or unwell it would provide this information.

Consideration regarding the use of pressure mats and their potential impact on the person's autonomy should be considered the same way as above. In addition, such a device might be a trip hazard to someone with poor mobility.

PIR/Movement Sensors

These detect movement and can be linked to products such as lamps. For example if the person sits up in the night and needs the toilet- but would forget to turn on the light and be at risk of falls; it could be set to turn the lamp on. They can be used to detect when a person has gone to areas which might be hazardous to them and the person does not have the ability to keep themselves safe- for example the top of the stairs, kitchen or main door. They can also be used to alert when there is no activity- for example if the adult always goes to their kitchen or bathroom and they fail to do this.

Sensors should not be prescribed as a replacement for night lights. Touch lamps can be purchased for people who might struggle with dexterity to turn a light/lamp switch, as simply touching the lamp turns it on. Plug in night lights with and without PIR sensors are also widely available in shops and on-line. These could be placed in a bedroom and hallway, for example to support someone accessing their toilet at night.

Carer Assist / Pager

Although Care Assist can be linked to a monitoring centre, it is not always required and can be used as a standalone equipment package. Often, the person being supported might be living with an informal carer and is never left alone, or is only required for parts of the day/night. This equipment allows the carer to be alerted when the person presses their alarm, triggers a sensor etc. A common example is when the carer might be asleep and needs to be alerted to the person being supported waking in the night; or they are in the garden/completing other activities and need to remain connected to the adult. This system can greatly reduce stress and allow the carer to be able to confidently leave the person in another part of the home.

When considering a Carer Assist, the person's ability to alert their carer themselves should be ascertained. It might be that the person could use a mobile phone/bell to summon help if they have insight into their needs. Equipment such as "baby alarms/monitors" could be considered to allow the carer to hear if the person calls for support; or when they may not be aware of their immediate needs, when they hear them moving around.

GPS systems

Becoming lost in their community may be a concern for many people who might be living with a condition that impacts on their memory and ability to navigate around their local community. As a result, people may stop going out and become isolated. Some clients may also repeatedly wish to leave their home at different times of the day and night and can become very distressed if they are not able to leave.

GPS devices (such as Vega and Pebbell) operate in the form of a watch, pendant or "fob" that the person carries round with them in the community. If they get lost, they can simply press the call button on the device and a family member be alerted and support given to help them find their way home or locate them if this is not possible. They can be set to the adult's normal roaming range/pattern in the community, so that the person can attend to their daily activities but if the person leaves this area, an alert could be triggered. The person's location can be monitored and determined from the device.

Consideration should be given to who will be linked to the GPS as responders and that they would be able to support the person by giving them advice or physically supporting them to return home. GPS systems can be used as standalone equipment and are now very cost effective to self purchase; allowing the person and their family to set the system up themselves.

These GPS devices require the person to remember to wear them when they go out and to keep them charged. These factors should be discussed when a device is being investigated and a plan put in place if the person is unable to do this for themselves.

Consent and the principles of the Mental Capacity Act must always be followed, when assessing for a GPS device due to the fact that they can potentially cause restrictions to a person's liberty, as they monitor the location of the person.

The Pebbell is the more cost effective to KCC device for purchase and monitoring and should be considered before an alternative such as a Vega device. It is however recognised that at times the Vega will be the appropriate solution, for example where a person has advanced dementia and may need the device to look like a watch for them to accept wearing it, or a locked strap is required.

Alternatives to the GPS devices

Other equipment can also be used to support a person when they are out in the community. If the person is able to use a mobile phone, then this should be considered- some phones have a GPS system and app which allows a person's whereabouts to be located. Mobile phones can be programmed for speed dial and photos of family members can also be added to aid recognition. Simple mobile

phones such as the Doro mobile phones are easy to use and can be personalised with pictures of family members and can have GPS links to them.

A door exit sensor might be an appropriate solution for many people, where they have a person living with them who is able to respond immediately.

Other Technology

There is a wide range of additional assistive technology equipment that is available for private purchase that might support people at home with their daily living and environmental control needs.

Home Hub Smart equipment

These are becoming increasingly popular for everyday use. For example Apple, Philips, Samsung, British Gas, The Nest and Amazon are but a few companies that allows mobile devices to control home settings remotely via an app- items that can be purchased include wireless thermostats, radiator valves, temperature sensors, smoke detectors, motion detectors, lights and sensors, door and window sensors, cameras etc.

These allow people with severe mobility problems to have an enhanced control over their home environment, maximising independence.

For families who live some distance from the person that they support, these devices might help support the person; by being able to adjust aspects of their heating and lighting for them.

These systems can be added to as a person's needs increase.

Memrabel

This is a clock and calendar (which looks like a tablet) and can be programmed to give visual and verbal reminders for the person. It can have family photos and voices on it to give these and can be programmed to support the person throughout the day- such as it's time to take medication, time to have a drink, prompt to use the toilet, that a carer will be coming soon (and the time) etc.
(https://www.unforgettable.org/memrabel2)

Automated Medication dispensers

These open and dispense medication at particular times. The person needs to have the cognitive ability to then remember to take these immediately and dexterity to use the equipment.

Useful links and Resources used within the Telecare Equipment Prescription Guidance

Centra Pulse Specific product information concerning the equipment that KCC supply is located in the Library area of Centra Pulse's DAT ordering system

Kent County Council and Telecare

http://www.kent.gov.uk/social-care-and-health/care-and-support/help-to-live-at-home/equipment-and-changes-to-your-home/sensors-monitors-and-alarms

Telecare Information

http://www.athome.uk.com/useful-information/national

https://www.unforgettable.org/

https://myageingparent.com/technology/communication/mobile-apps-help-monitor-older-people/

Mobile Phone

https://www.unforgettable.org/technology/telephones?utm_source=bing&utm_medium=cpc&utm_campaign=G%20-%20Dementia%20Phones%20-%20Exact&utm_term=mobile%20phones%20dementia&utm_content=Mobile%20Phones%20Dementia

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