Telecare Transition in Highland Sheltered Housing Schemes

Published: October 2024

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Organisation Background

Highland includes 39 sheltered housing schemes managed by The Highland Council, encompassing over 500 properties, along with several amenity housing developments. These properties are primarily located in urban areas, though some are in more rural settings. Previously, services to these housing schemes were managed by nine different housing teams.

Change in Telecare Service Delivery Model

In a unique arrangement compared to other Health and Social Care Partnership (HSCP) models, all Adult Services in the region are delivered by NHS Highland.

In 2018, a strategic decision was made to revamp the Telecare service delivery model within these sheltered and amenity housing schemes. Previously, the telecare services, which included hardwired, interlinked systems, were provided by The Highland Council's Housing & Property department. However, it was decided that the responsibility for Telecare services would be transitioned to NHS Highland HSCP. This decision aligned with NHS Highland's existing role in delivering Telecare services for dispersed properties in North Highland.

The decision to transition was driven by several key factors:

- **Aging Equipment:** The existing Telecare infrastructure was becoming outdated, necessitating an upgrade.

- **Futureproofing:** With the impending phase-out of landline and analogue services, there was a need to ensure the Telecare system could adapt to these changes.

- **Enhanced Person-Centred Care:** The new model offered the potential to upgrade to a more personalised and flexible system. It allows for the addition of enhanced features such as heat or fall sensors, enabling tenants to maintain their independence while ensuring their safety and security. Previously, obtaining such enhanced Telecare options, like bed or door sensors, was challenging under the old system.

This transition reflects a commitment to providing more tailored and future-ready support for the residents in Highland's sheltered and amenity housing. This decision supported a personalised approach to care, meaning sheltered housing tenants could choose their level of service based on their own needs or preferences.

Seamless Transition to Modern Telecare Services: Collaborative Efforts and Strategic Implementation

Collaborative Transition Process

NHS Highland's TEC team and The Highland Council developed and implemented a collaborative process to ensure a smooth transition to the new Telecare service. At the operational level, there was close cooperation with Adult Services to determine responsibilities for telecare assessments and applications, which varied based on staff resources. For tenants requiring more than the standard service, Adult Social Care staff provided additional support during assessments.

Equality and Process Adaptation

An equality impact assessment screening was conducted to identify and mitigate potential issues, ensuring equal access to the new service. A process pathway was developed, tested, and adapted to fit the local context, with learning points documented and shared among the teams involved.

Tenant Engagement and Communication

Tenant Service Officers, Housing Management Assistants, Housing Officers, Wardens, and the NHS Highland TEC team actively engaged with tenants through participation events and scheme visits. These sessions were used to explain, demonstrate, and discuss the new Telecare service, ensuring tenants were well-informed and comfortable with the changes.

Customised Implementation

In some areas, the Council assigned additional staffing resources to expedite the transition to the new service for sheltered tenants. The pace of implementation was also dictated by the availability of local contractors and the availability of equipment.

Housing staff worked closely with each tenant to discuss their needs, identify preferred options, and regularly update individual service plans. Tenants were also reassured that they could change their options at any time.

Installation and Hardware Support

Housing staff assessed the hardware needs of tenants, facilitating the installation of electrical sockets and phone lines required for the new Telecare systems. The Highland Council funded the installation costs for the first 12 months to ensure the transition did not negatively impact the service. Referrals and installations were organised in batches to maintain consistency and efficiency.

During installation, local maintenance teams and contractors decommissioned and removed old Telecare systems to prevent confusion. New equipment was installed by local Care & Repair agents as part of their handyperson service level

agreement. The Highland Council staff supported NHS Highland and contractors by providing property access during installations.

The installers observed that the onsite installation of digital units was much quicker than that of analogue units, as all the programming and configuration had been completed in advance. On the installation day, the process was streamline, requiring only the fitting of the equipment and testing to the ARC.

Challenges and Delays

Most schemes transitioned before 2020 using analogue equipment (Lifeline Vi). However, these tenants will be included in future migration plans. The COVID-19 lockdown caused project delays, as NHS Highland prioritised addressing backlogs, and transitions were considered non-essential. Additional delays occurred due to supply chain issues and the discontinuation of analogue units by Tunstall. Post-pandemic backlogs in Care & Repair agents' work further complicated the timeline.

From September 2023 to July 2024, the final transitions in Inverness, Nairn & Ardersier, and Badenoch & Strathspey were completed using either Lifeline Digital or Smart Hub devices, with no reported connectivity issues.

Tenant Choice and Uptake

Tenants now have the option to purchase Telecare services, which were previously included as part of the standard sheltered service charge. Uptake rates varied significantly across different schemes, reflecting the diverse tenant profiles. In some schemes, 'younger' tenants who did not consider that they needed enhanced sheltered housing services showed lower uptake rates. Financial considerations also influenced tenants' decisions regarding Telecare purchase.

Planning for Telecare Eligibility: Addressing Responder Criteria Challenges

When implementing changes in service criteria, it's essential to allocate time for careful planning with tenants, particularly when new eligibility requirements are introduced. NHS Highland's criteria for purchasing Telecare services mandate that users must have at least two (preferably three) responders who are not from the same household and live within 30 minutes of the client's address. This requirement posed a significant challenge for many tenants and the Housing Service teams.

Housing teams collaborated extensively with tenants, their families, and potential responders to explore and identify suitable candidates. Although a wide range of options were considered, no viable alternatives were found for households unable to meet the responder criteria. Nevertheless, several innovative solutions emerged, particularly in communities with strong networks that foster resilience.

Tenants were also informed that they could choose to purchase Telecare services from alternative providers, as not all providers enforce the same responder criteria. Despite these efforts, some tenants were ultimately deemed ineligible for NHSH Telecare. In cases where tenants were considered at risk without Telecare, they were referred to Adult Social Care for further assessment. In several instances, Adult Social Care successfully identified responders for these individuals.

It remains crucial to inform households considering THC sheltered housing that meeting the responder criteria is a prerequisite for accessing Telecare services. This upfront communication can help manage expectations and ensure that tenants are fully aware of the requirements before committing to the service.

Key Learning Points

Effective Communication and Tenant Engagement

It is crucial to ensure that tenants are given ample time to discuss and fully understand the broader impacts of any service changes. For example, when The Highland Council installed new fire systems in each sheltered property, tenants with Telecare were provided with a Telecare smoke detector linked to the alarm receiving center. Wardens clarified that, under the new system, smoke alarms were no longer directly connected to the Fire Service. After a few tenants expressed concerns, sheltered staff were prompted to provide further updates, and an article was included in the tenant newsletter to keep everyone informed.

In the lead-up to the transition, tenants who previously used internal Telecare equipment to contact their warden were encouraged to start using the appropriate new contact methods.

Understanding and Communicating Service Costs

Previously, sheltered tenants were automatically enrolled in Telecare services as part of their combined rent and service charge, with no option to opt out. With the removal of THC Telecare, tenants were informed that their sheltered service charge or rent would decrease by approximately £5.00, while those opting for the new NHS Highland HSCP Telecare service would pay around £6.35 directly to NHSH. Financial assistance was made available to those on low incomes. However, some tenants were unhappy with the change, particularly those who may not have realised they were previously paying for Telecare as it was bundled with other charges covered by their benefits.

While many low-income tenants qualified for financial assistance after an assessment against NHSH's criteria, some tenants who received benefits like Attendance Allowance or PIP, intended to cover such expenses, did not qualify for additional financial help. The prospect of an extra cost led a significant number of tenants to opt out of the new Telecare system.

Addressing Technology Concerns

Several concerns arose related to the new digital equipment, particularly regarding its reliability during extended power cuts. This is an ongoing national concern, and solutions are currently being explored. In response, contingency plans for sheltered tenants and staff arrangements have been updated. Additionally, while NHS Highland checked the digital signal strength in each sheltered scheme before implementation and found no issues, concerns about weak or lacking signals were also raised.

Adapting to Operational Changes

The changeover highlighted the need for strategic responses to the evolving operational landscape. Previously, Wardens often served as the primary responders to call-outs in many sheltered schemes. Post-transition, the role of Wardens has varied—some continue to respond during working hours, while others no longer perform this function. This has led The Highland Council to consider prioritising a review of its sheltered services to better align with the current needs and expectations of tenants.

Suggestions for a Smooth Telecare Transition

As other Telecare Service Provider teams prepare to begin the change-over and transition process, several key learning points have been identified to ensure a smooth and effective implementation.

1. **Identify and Involve Key Stakeholders**
   Map out all essential participants in the process, including potentially overlooked stakeholders such as IT teams. Ensure they are informed about critical steps like system decommissioning to avoid disruptions.

2. **Prioritise Communication and Coordination**
   Maintaining clear, consistent communication, liaison, and coordination among all involved parties is vital for a successful transition.

3. **Review and Update Tenant Plans**
   Ensure that each tenant's review plan is current. If necessary, explore alternative options such as engaging frequent visitors or discussing potential backups with key contacts like family members or friends.

4. **Personalised Communication with Tenants**
   Hand-deliver letters setting out options and considerations and take the time to discuss it with each tenant individually. Document any questions or concerns they may have so these can be followed up and responded to

5. **Confirm Tenant Understanding**
   Ensure that each tenant clearly understands they have a choice regarding the new Telecare service. Make sure that they fully understand that their

current existing system will be removed.

6. **Make sure that tenants have everything in place before they apply for the new telecare service**
It may not be possible to process applications unless householders have responders in place. Actively encourage and help tenants to establish their responder network if they haven't already done so.

7. **Update on Service Charges**
If relevant, make sure that tenants understand that their sheltered housing service charge and their way of paying for telecare will change. For example, their sheltered housing charge may no longer include a charge for the telecare. However, in Highland, **all** sheltered tenants are still liable for the sheltered service charge to pay for other enhanced services. In Highland it was also important to help understand that they would be charged separately and directly   by the telecare provider for their telecare service.

Offer all tenants the opportunity for a personal discussion with the telecare provider about the costs, charging arrangements and financial assistance with costs. This is particularly important for tenants who get assistance with their housing costs as depending on their benefits, they may no longer be eligible for additional financial assistance to pay for telecare.

8. **Telecare System Requirements**
Consider if some households will have additional challenges or needs. The Equality Impact Assessment should help to identify issues. It may be appropriate for the service to provide or source additional assistance for a time e.g. if a phone or phone line is required.

9. **Coordination for Tenants with Limited Capacity**
If a tenant has been assessed as lacking or having limited capacity for decision making, coordinate with their Power of Attorney, Guardian or, where appropriate family member carers, or social worker to discuss issues with them and help arrange NHSH Telecare services.

10. **Options for tenants who may be reluctant to move onto the new service**
If a tenant indicates they no longer wish to purchase telecare and /or: they receive social care, or are believed to have unmet need for social care or there are concerns, Housing Officer have a role in preventing issues or risks. For example, consider arranging a case conference with relevant parties (e.g., the tenant, Social Worker services, Power of Attorney etc.). This should help to determine the best course of action. It may be necessary, to

formally make health and social care services aware of any concerns regarding the tenant's well-being. It is important to keep a clear and transparent record of all communications and decisions. Housing Officers have a role in helping to make sure that every tenant makes an informed, decision based on good information and clear understanding of issues, risks and concerns.

For a visual overview of the process used in Highland, please see Appendix 1.

Appendix 1: The Highland Council Scheme Switchover Process

To illustrate their switchover process, The Highland Council shared the internal flowchart used to manage the transition across their teams. Appendix 1 outlines the specific steps followed by THC's telecare teams.

Scheme Identified for transfer

1. **Initial Communication and Scheme Notification**
   The Highland Council Housing Officer to contact NHS TEC Services **and** local NHSH Adult Services to advise of scheme transfer and expected timescales. NHSH Team will check digital connectivity.

2. **Tenant Engagement and Communication**
   Housing Officer at The Highland Council to begin tenant engagement for switchover. NHS TEC Services can provide generic telecare leaflets on request

3. **Telecare Assessment and Referral Process**
   Housing Officer identifies who completes telecare assessment & referral form / request for financial assistance:
   - Housing Team (organise telecare training with TEC services)
   - **Or** Housing Officer agrees a process with NHSH at local level for assessment (i.e. SPOC Single Point of Contact)

4. **Property Inspection**
   Housing Officer inspects all properties to make sure that an electrical socket is available for the digital unit in an appropriate location. They also need to make sure that THC hard wired smoke alarms are installed.

5. **Coordination of Switchover and Installations**
   Housing Officer to liaise with NHS TEC Services to co-ordinate switchover and agree date of installations (considerations include who will be assessing clients, if THC need to install electrical socket near phone socket etc).

6. Electrical and Telephone Socket Installation

Housing Officer arranges for electrical sockets and telephone sockets to be installed in properties. Properties must have suitability before installation.

7. Removal of Existing Equipment

Housing Officer to liaise with Tunstall to remove existing equipment (e.g. confirm who remove) and the Highland HUB Response Service to advise that "Scheme Telecare" will be switched off on the date agreed with NHS TEC services. Tenants should be informed of the switchover date.

8. Referral Documentation

Referral documentation should be sent to NHS TEC Services in a bundle. Referrals for all tenants due to switch over should be sent in one email. If additional emails are required, please indicate the expected number of emails in the subject line.

9. Coordination of Telecare Equipment Installation

Housing officer emails System Support with changes and dates (so that tenant's rent charges is updated; prompts maintenance team to arrange works required e.g. painting etc. And emails to confirm the date of switch off and maintenance contract end to confirm switch completed.

10. Request for Alarm Line Removal

Contact ICT with request to contact Vodafone / remove alarm telephone line

Completion