



Health and Wellbeing Board 22 November 2013

Assistive Technology – working together across the local health and social care economy through a Memorandum of Understanding

Responsible Officer

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1. Summary

The Health and Well Being Board received a report from the Assistive Technology Group on 31st May 2013. This report outlined the work necessary to establish a collaborative approach to assistive technology across health and social care.

The Health and Well Being Board supported the approach and set up the Assistive technology group as a formal sub-group of the Board.

To this end the chair of the group met with senior leaders in all organisations represented on the group to discuss how best organisations could work together and what level of activity is already underway.

From the meetings a series of principles were developed. These were then shared with the organisations interviewed, members of the assistive technology group, the Shropshire Patients Group and the Health and Well Being Board Stakeholder Alliance.

The Principles – amended following feedback – are now being presented to the Health and Well Being Board for agreement and development into a Memorandum of Understanding so that the health and social care economy can be held to account by the board.

Feedback received has also suggested that a Memorandum of Understanding is developed based on the Principles, so that the health and social care economy can be held to account by the board.

2. Recommendations

The Health and Well Being Board are asked to:-

- Receive the presentation on the principles to apply to a memorandum of understanding
- Delegate the authority to the Health and Well Being Executive Group to finalise the Memorandum of Understanding and progress signing

REPORT

3. Risk Assessment and Opportunities Appraisal (NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

Risks	Impact	Mitigation
Coordinating an Assistive Technology (AT) approach across the health economy may have financial implications in the future. Adopting the AT principles outlining that future AT purchased or developed with the ability to integrate with other systems, may increase the cost of the equipment.	There is a greater emphasis across the AT sector to make systems that are compatible. The impact of this risk is likely to be low.	Planning carefully from the outset to ensure that decisions made across the health economy take into account the principles laid out in the MoU should reduce this risk.
Connectivity issues may lead to the exclusion of a section of the population who are unable to use AT (digital exclusion)	It is likely that rural areas will be impacted disproportionately through digital exclusion.	The Broadband Shropshire initiative will improve the access to broadband over the next 2 years. Technology that allows connectivity through satellite is also being investigated.
Opportunities	Impact	Action
Taking a coordinated approach to AT across the health economy will provide benefit to the patient/ client.	Potential for a high positive impact on patient experience while navigating health and social care services. Potential for small cost savings on care – however not proven.	Plan the purchase and development of AT carefully across the health economy.

4. Financial Implications

None arising from the memorandum of understanding

5. Background

The use of technology to support everyday life is routine for many people:-

- 92% of adults personally own/use a mobile phone in the UK (Q1 2012), with 81.6 million mobile subscriptions in the UK (Q4 2011) and an average number of SMS and MMS sent per person per month of 200 (Q4 2011)
- At the end of 2011 the number of fixed residential broadband connections in the UK was 18.8m, with 76% (Q1 2012) of adults having a broadband (fixed + mobile) connection
- The proportion of people who use their mobile handset to access the internet is 39% (Q1 2012)
- Proportion of adults who use social networking sites at home is 50% (Q1 2012) Assistive technology is a term that covers telecare, tele-health, remote monitoring and selfhelp/monitoring.

This paper outlines a number of principles that all organisations are being asked to sign up to in relation to how we will work together when considering the use of assistive technology now and in the future.

It is wholly appropriate that individual organisations will develop technology solutions to deal with individual problem areas – such as Shrewsbury and Telford Hospital using a teleconferencing/remote consultation system to hold multi-disciplinary team meetings between Shrewsbury Hospital and Princess Royal hospital or for the community trust developing a monitoring system for falls management within community hospitals or for a local authority to develop call systems for vulnerable adults.

However it is becoming increasingly obvious that many projects will become interlinked – such as the use of telecare to support people in their own homes by the local authority and the discharge process from acute units or the monitoring of patients in primary care who have diabetes and the need to liaise with secondary care as conditions change.

It is therefore essential that the health and social care sector have some form of principles to which they will work and that this is strengthened into a formal Memorandum of Understanding.

6. Additional Information

Assistive technology does not have to be complicated. Clinicians and practitioners use technology every day – whether it is a stethoscope, an MRI scanner or a computer for logging client details. Each day more people choose to use technology in their everyday lives. This includes technology designed to help understand physical fitness – such as a heart monitor while exercising,- or a phone application that allows a person to more effectively control their long term condition or monitors in the home that reassure people (and their carers and families) that they are safe from accidents, However the application of assistive technology into the routine management of clients and patients has not progressed rapidly in the health and social care sector of Shropshire, Telford and Wrekin.

Between July and September 2013, interviews were undertaken with directors and clinicians from all members of the local health and social care economy across Shropshire, Telford and Wrekin.

To improve the performance of the health and social care economy in this area a set of 6 principles were developed and shared with members of the health and social care community, patients and citizens.

The presentation to the Health and Well Being Board outlines the amended principles, following feedback.

It is intended that these principles should then be adopted into a formal Memorandum of Understanding so that the health and social care economy can be held to account by the board. Telford and Wrekin are in discussion regarding the formal way in which the Memorandum will be assured.

7. Conclusions

The Health and Well Being Board are asked to:-

- · Receive the presentation on the principles to apply to a memorandum of understanding
- Delegate the authority to the Health and Well Being Executive Group to finalise the Memorandum of Understanding and progress signing