



RAATE 2005 Workshops:

Telecare Workshop, RAATE Conference

5th December 2005 - Led by: Professor Mark Hawley

What is the relationship between 'assistive technology' and 'telecare'?

- There was agreement that the term 'assistive technology' was being used principally to refer to telecare in Government policy papers and related funding initiatives.
- Participants discussed whether this was something to be concerned about; while some were concerned that this would lead to confusion at a time when assistive technology as a term is only recently established, others proposed that if assistive technology is valid as a term to cover the wide range of products and services, then use of the term will evolve back to the original definition.
- Reasons for the restricted use of the term assistive technology were proposed as:
 - o Government wishing to keep the focus on equipment which is potentially low-cost and does not involve complex health and social care assessment;
 - o Manufacturers who push the high-tech aspect of the equipment and prefer not to focus on the more complex issues of the service which supports the equipment.
- It was recognised that there should be greater dialogue between service providers, such as electronic AT providers and the social care/housing providers of telecare.

What might restrict the take up of Telecare?

- It was felt that the major barrier to greater take up of telecare was a lack of information. The need for greater information was widespread:
 - o The public needs information;
 - o Greater information should be available about the relevance of telecare for people with learning disabilities;
 - o There should be more information about low-tech options, particularly aimed at service provider staff who have to implement a range of solutions;
 - o A range of staff, from AT 'professionals' to support workers need information.

- Participants questioned the possibility of High Street availability of telecare:
 - o Was this something ICES was meant to achieve?
 - o How long before telecare becomes mainstream in B&Q, etc?
 - o There will still be a need to inform professionals, who can then advise individuals, the alternative is to rely on PC World level of advice.
- In addition to increased information on the range of products available, there was a need for evaluation to enable individuals and professionals to make an informed choice. This needed to cover the service options as well as product information.
- There is a need to establish the charging models for telecare as equipment provided by social services can not be charged for, although a charge can be made for the service element. There are differences between how health and social care can charge, this needs to be considered when implementing a service.
- In order to encourage local authorities to provide a telecare service, potential users need to be asking them for a service.
- There is also concern about how the services will be monitored for effectiveness. The current plans to cover telecare under the social services 'Delivery and Improvement Statement' (DIS) audit, focus on numbers of telecare systems installed and do not include a qualitative assessment. (This audit affects the star rating of local authorities and is likely to influence strongly the service focus.)

<p>What are the skills people will need to develop and implement a telecare service?</p>

- There needs to be training to support staff to be able to consider risk management confidently.
- There are also support considerations for support workers and carers, formal and informal, as a range of people are involved in supporting potential telecare users.
- Professionals need to be careful about stating what telecare can achieve as there is little evidence to support such statements.
- There is a requirement to build-in an assessment for all assistive technology, including telecare, into the single assessment process. This has not been achieved so far, has it been tackled?