Proactive Telecare Services

Summary of Study Findings

January 2021

What are Proactive Services?

The study developed and uses the following definition of proactive telecare:

**Proactive telecare:** Support to maintain or improve a person’s health and wellbeing, or to anticipate and prevent crises, provided using an outgoing call made to a person’s home (or home-like setting). Outgoing calls are made regularly based on a person’s choice, or in response to a need or another trigger event.

The study focussed on telecare and so the definition specifies services that are based on outgoing calls. This means some closely related preventative services (including lifestyle monitoring) are excluded from scope.

What does this mean in practice?

There is a broad range of care and support that fits within the definition of a proactive service. The figure below shows typical proactive services and their primary benefit (the list is not exhaustive). Proactive services will be tailored to a service user’s needs, delivering a co-ordinated mix of several elements of care and support as shown in the figure.

![Figure 1: Potential Proactive Service Offerings and their Primary Benefit](image)

Delivering Proactive Services

There are existing examples of Proactive Telecare and other outbound calling services being offered in Scotland and worldwide. This includes several services introduced as part of Partnerships’ response to COVID19. However, these existing services tend to be relatively narrow in scope, or are in the early stages of deployment. This means that there are no existing mature operational processes covering the complete proposed service scope that can be directly transferred to a Scottish service, and so these will need to be developed.

Existing telecare operational processes need to be significantly updated to support delivery of proactive services. The study examined the changes that need to be made to these processes; key messages include:
Proactive telecare is fundamentally not a technology-led service, in its most basic form it is delivered using existing alarm receiving centre solutions, or just a telephone, to a person’s home phone or telecare alarm. Instead, the range of services provided, and number of people offered the services, is defined by the number and skills of the staff available to deliver the services.

Proactive telecare enables a deeper relationship to be established with the service user. The conversations held could highlight a wide range of support needs. Providing this support could involve a range of care, support, and health providers, including the third sector and community groups.

There is a need to co-ordinate the support provided by these health and care providers. This co-ordination role is key and may be fulfilled by staff from any of the health and care organisations (i.e. not necessarily the telecare provider). The co-ordinator is responsible for working with the service user to agree the range of care and support required, and then for liaising with the other organisations to deliver, monitor, manage and re-assess all the elements of care.

Call handling resource is likely to need to be significantly increased to deliver proactive services. Scenarios modelled for a ‘typical’ Scottish Telecare Partnership (with 4,500 service users and 16 FTE call handlers) show that it requires between 7.5 and 15.4 FTE additional call handlers to deliver proactive services. The level of resource is dictated largely by the number of people offered the service, and the frequency of calls (the duration of calls also impacts resource, but to a lesser extent).

The nature of proactive telecare calls is likely to be different to existing telecare alarm and response calls. This could impact on call handler skills, training, grading, and qualifications. This in turn, could limit Partnerships’ ability to move call handlers between alarm response and proactive call duties, potentially meaning a need for separate teams.

It is desirable that Partnerships use a common delivery approach to support development of standard best practice, data sharing, benchmarking and shared service delivery. Though it is recognised that the proactive telecare service scope comprises a wide range of interconnected service elements, Partnerships need to determine which service elements they wish to offer and tailor the processes and resources required to deliver them.

Next Steps

It will be necessary to take an iterative approach to implementing proactive telecare services in Scotland given:

- The need to develop operational processes.
- The need to demonstrate the benefits of proactive telecare before scaling the services.
- The need for co-ordination between health and care providers that is likely to require time to put in place.

Initial limited scope proactive service offerings based on the existing telecare delivery model can be implemented, then broadened in scope, introducing additional service elements as operational processes are developed, as increased levels of co-ordination are put in place, and as the service benefits are quantified.