

London Region
JIP Efficiency Programme
Telecare Optimum Delivery Tool

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How to use this guidance

The Optimum Telecare pathway has been developed to detail the key overarching steps of any Telecare service. Within each of these steps there are a number of key questions and issues which can be used as a checklist by each local Telecare service to map their own progress with a view to further development.

This guidance is meant to steer people through the process and act as a support tool for directors, commissioners, Telecare leads and service providers. Whilst being an optimum mode, depending on the current position of the service some of the questions raised in the checklist may be more pertinent than others. Therefore, anyone using the tool should apply their judgement to its application.

Key principles underlie all of the stages and these have been detailed in the section headed 'Key Considerations'. However, there are some specific questions which relate to particular stages in the pathway and these are detailed under the section 'Pathway Stage Consideration'.

Terms

A number of terms or words are used within this guidance which have a variety of meanings. For clarity the following definitions apply when used in this documentation.

Telecare

Throughout this document Telecare is used as a generic term to describe all care provided at a distance using communication and wireless sensors that can detect and transmit alerts automatically. For the purpose of this pathway, it is also used to refer to stand alone equipment (which does not trigger an alert). For example, memo minders.

Prevention is:

- Services for people with poor physical or mental health.
- To avoid unplanned or unnecessary admissions to hospital or residential care.
- Can include short-term and longer term low-level support.

Rehabilitation provides:

- Services for people with poor physical or mental health
- To help them get better

Re-ablement provides:

- Services for people with poor physical or mental health
- To help them accommodate their illness [or condition] by learning or re-learning the skills necessary for daily living

(Definitions from an evaluation report by De Montfort University)

Service provider

Throughout this guidance the term 'service provider' is used interchangeably to refer to the commissioning authority or the provider of the whole or part of the Telecare service.

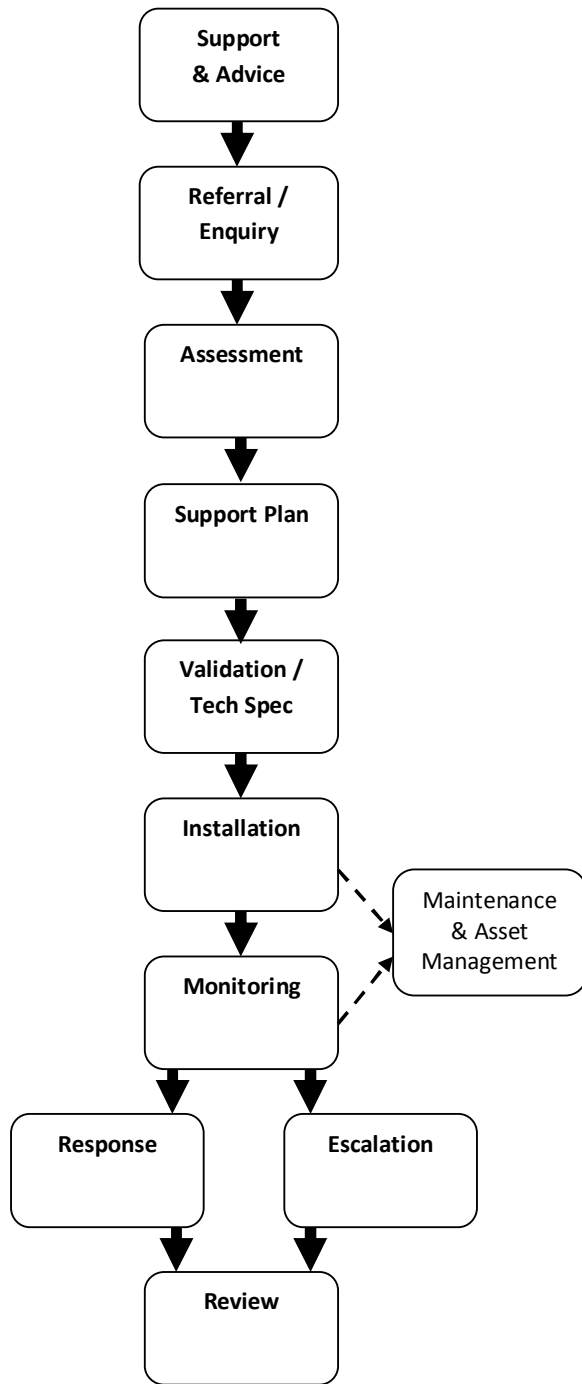
Personalisation

The White Paper 'Our health, our care, our say' (Department of Health, 2006) confirmed that people want support when they need it, and they expect it quickly, easily and in a way that fits into their lives. They want adult social care services to consider their needs with a greater focus on preventative approaches to promote independence and wellbeing. To make this happen, the social care sector is adopting a shared vision and this is personalisation. This includes a strategic shift towards early intervention and prevention, will be the cornerstone of public services. This means that every person who receives support, whether provided by statutory services or funded by themselves, will be empowered to shape their own lives and the services they receive in all care settings. Local authorities, government departments and partners from independent, voluntary, and community organisations are all playing a vital role in transforming social care services, taking into account housing, benefits, leisure, transport and health needs.

Mainstreaming

This term is used in the context of Telecare being a core function of health and social care assessment, support planning and service delivery.

TELECARE OPTIMUM DELIVERY PATHWAY



Support & Advice

Information provided which may signpost to 3rd sector, self support, assistance from family and friends or direct person to next stage in the pathway. Standard local Telecare information available.

Referral / Enquiry

Entry into the pathway. Will be recorded on local systems.

Assessment

A proportionate, person centred assessment in response to the persons presenting needs. This may include self-directed assessment or supported self-directed assessment. It may also include assessment by any trusted assessor. Transparent calculations of the indicative budget occur at this stage. Targeted interventions may begin such as enablement/reablement and other services which aim to help the person remain safe & regain independence.

Support Plan

Support plans are led by the individual, are outcome based and proportionate. This is where it will be identified with the person/carer what needs/risks Telecare can minimise and how it can enable the person. Currently in the majority of cases the practitioner will be developing a proportionate plan with the person. In future they may assist the person/carer if appropriate.

Validation / Technical Specification

The equipment is checked to ensure it is suitable and appropriate. A site survey may be required to determine best package. Final agreement of package made.

Installation

Installation of equipment, testing and ensuring person knows how to use it. Liaison with all relevant partners.

Monitoring

Monitoring of triggered sensors and provision of other services e.g. proactive calling. Link to referrers and into pathways to feedback on issues, action already taken and to be taken. This does not apply to stand alone equipment.

Maintenance & Asset Management

Direct links from both installation and monitoring and integral to a fully functioning safe service for the person.

Response

Response (formal or informal) which has been agreed with the person is actioned by monitoring of the sensors. On occasions equipment may be directly linked to alerting the carer and not the monitoring centre. This does not apply to stand alone equipment.

Escalation

Escalation relates to how the service plans to act in specific situations and primarily to the response specified for the person.

Review

Review refers to either scheduled or unscheduled reviews which are triggered by the monitoring service or by a scheduled review period. In cases where it needs to be determined whether the system is meeting the person's needs the review will be carried out in most cases by the monitoring service. However formal annual reviews of the persons needs are likely to be carried out by the commissioning service.

Charging: the local charging policy guidelines should be applied at the most appropriate stage.

Key Considerations

The following key considerations are integral to every stage of the pathway and have been grouped under themed headings. These are detailed as a series of questions.

1.0	STRATEGY AND SERVICE DEVELOPMENT	ACTION REQUIRED
1.1	Is high level leadership and support in place?	
1.2	Are there Telecare champions at senior and staff level?	
1.2	Have all partners been identified and engaged?	
1.4	Has the potential scale and scope of Telecare been agreed by all partners?	
1.5	Is there a vision for Telecare which is incorporated into appropriate commissioning strategies?	
1.6	Is Telehealth included?	
1.7	Is there an identified Telecare lead?	
1.8	Have all elements of the current Telecare service been mapped against the optimum delivery tool?	
1.9	Have all the gaps been identified?	
1.10	Has the potential scale and scope of Telecare been determined?	
1.11	Which client groups will Telecare potentially be available to?	
1.12	How will the needs of clients with complex needs (i.e. dementia) be met?	
1.13	How many people would Telecare potentially be suitable for or how many people would potentially benefit from Telecare within the proposed geographical coverage area of the service?	
1.14	Is demand and capacity clearly mapped (using the Business Case)?	
1.15	Has the integrated support and care pathway been mapped?	
1.16	Does this link into other pathways?	
1.17	Are funding sources clearly identified?	

	STRATEGY AND SERVICE DEVELOPMENT	ACTION REQUIRED
1.18	Is the service jointly funded?	
1.19	Is the budget in place?	
1.20	Is Telehealth included within this budget?	
1.21	Is there any benefit in working collaboratively with other London Boroughs?	
1.22	Has the strategic vision of the Telecare service been reviewed to ensure it reflects current thinking?	
1.23	Has the range of equipment and services required for the Telecare service been determined?	
1.24	Is there a comprehensive eligibility criteria?	
1.25	Is the service mainstreamed?	
1.26	If not, are there plans in place to achieve this?	
1.27	Where does Telecare sit within the organisation and what does it link into i.e. reablement or prevention?	
1.28	Does this allow for preventative services to be accounted for?	
1.29	Is there a clear charging policy?	
1.30	At what point is charging discussed?	
1.31	How will the service be marketed?	
1.32	Is there a Business Continuity Plan in place for Telecare?	

2.0	PROCUREMENT	ACTION REQUIRED
2.1	Has the service been fully scoped including monitoring, installation, response, maintenance and asset management?	
2.2	Is there a clearly defined service specification containing specific outcome measures and activity levels?	
2.3	Is a formal response service required?	
2.4	Is the installation service to carry out all installations or only more complex cases?	
2.5	Is the service provided by an accredited service e.g. TSA?	
2.6	Is Telecare included in all service specifications?	
2.7	Is Telehealth in scope?	
2.8	Will procurement be undertaken jointly with the PCT?	
2.9	If not, have plans been developed to achieve this?	
2.10	Are there contracts or service level agreements in place for each stage of the process?	
2.11	Is Telecare being considered in the planning of any new/prospective housing build?	
2.12	Should equipment be leased or bought?	
2.13	Are all systems BT 21CN (BT's 21 st Century Network) compliant i.e. they will work on the new digital telecommunications network being implemented across the UK?	
2.14	Has the compatibility of equipment from different providers been considered to ensure all packages of equipment provided work as intended?	
2.15	Is it possible to commission a 'Just in time' service so that large stocks of equipment are not held on site?	
2.16	What business continuity plans does the service provider have in place?	

2.0	PROCUREMENT	ACTION REQUIRED
2.17	Does the service provider take full responsibility for the standards and levels of service for any work that it sub-contracts?	
2.18	Are safeguarding issues and specifically relevant checks of any staff included in all contracts?	
2.19	Has the PASA Framework been reviewed and informed the buying solutions?	

3.0	SAFEGUARDING	ACTION REQUIRED
	<p>Any safeguarding issues should be dealt with in accordance with the organisation’s Safeguarding procedures. All staff should be aware of what triggers a contact with this service. Triggers should be incorporated into any Telecare specific documentation to ensure that Safeguarding issues are considered at every stage of the process. Considerations which specifically relate to Telecare services and Safeguarding are listed below.</p>	
3.1	Have you determined which staff must be checked with the Criminal Records Bureau (CRB) and / or Safeguarding of Vulnerable Adults (SOVA) and children (POCA), and made appropriate checks?	
3.2	Does your monitoring centre have voice recording facilities in place?	
3.3	Have you taken reasonable steps to ensure both parties are aware that the call may be monitored or recorded and be able to demonstrate if required that this has been done?	
3.4	Is there a voice recording policy and procedure?	
3.5	Have you reviewed the information that your service provider gives at an enquiry stage, pre-contract and contract stages, and once the service user is using Telecare?	
3.6	Has consideration been given to how you market and sell your services to potential users of Telecare who may be vulnerable and frail; ensuring that they also meet the requirements of the Advertising Standards Authority?	

4.0	GOVERNANCE	ACTION REQUIRED
4.1	Are service providers accountable to a governing body within each organisation (e.g. board of directors, service committee or contract renewal body) that has responsibility for establishing service values, business direction, aims and policy, legislative compliance and key performance measures?	
4.2	Are service values, aims, business policy and strategy, quality assurance and operational performance reviewed annually?	
4.3	Are there written policies for staff covering the legislative requirements, key strategies and regulatory processes that relate to the provision of a Telecare service?	
4.4	Are there processes in place for service users to be informed of the legislative framework within which Telecare services fit?	
4.5	Are all policies and procedures reviewed on a regular basis (at least every three years) to ensure they are up to date and relevant to the delivery of the Telecare service?	
4.6	Does the service provider review immediately any individual policy or procedure affected by legislation, change in operation, technology changes or new business?	
4.7	Is a record of the review process and actions maintained and are staff informed of changes?	
4.8	Are there procedures to cover the account management of the individual service user?	
4.9	Are risks assessed annually arising from the operation or failure of any equipment or services provided by them to service users and measures taken to minimise these risks?	
4.10	Is an immediate assessment undertaken in the event of a risk being identified?	
4.11	Are all appropriate insurances in place?	
4.12	Are the levels and types of insurance reviewed on an annual basis?	
4.13	Does the service provider adopt and implement Key Performance Indicators (KPIs), (such as those determined by the TSA) as effective measures of service delivery, service values, and service user satisfaction?	
4.14	Where any part of the delivery of services is sub-contracted to another provider, are the actions to be taken in relation to the service user by the sub-contractor detailed?	

5.0	HUMAN RESOURCES	ACTION REQUIRED
<p>Staff recruitment, employment and development of related policies and procedures will be standard within each partner organisation and do not need to be detailed within this guidance. Listed below are the specific elements appropriate to Telecare.</p>		
5.1	Have appropriate, CRB and / or SOVA / POCA checks (or their equivalents) been completed prior to a member of staff starting work?	
5.2	Is regular support and supervision provided to all staff and are they supported in their continuing personal and professional development?	
5.3	Are staffing levels designed to meet the requirements of the service and the needs of the service users, and reviewed on a regular basis?	
5.4	If required, is appropriate and timely support (e.g. counselling) provided to staff who have been involved in emergency situations?	
5.5	Is there a lone worker policy and set of procedures based on the requirements of the TSA Code of Practice or other lone worker policy document?	
5.6	Are staff equipped with a two way means of communication of a radio or mobile phone, a personal safety alarm, and a torch?	
5.7	Has the use and development of Trusted assessors been considered?	

6.0	LEARNING AND DEVELOPMENT	ACTION REQUIRED
6.1	Are all new employees required to attend an induction programme, which includes Telecare?	
6.2	Are policies and procedures implemented for ensuring staff are trained and competent in order to undertake their roles in the delivery of Telecare services?	
6.3	Is training provided appropriate to a wide range of staff from health, social care, housing and other partners?	
6.4	Is there an agreement to work jointly with all partners to deliver training?	
6.5	Is training jointly funded?	
6.6	Can efficiencies be made by training together?	
6.7	Are staff released to attend appropriate training?	
6.8	Are staff trained to appropriate levels of competency in line with their role?	
6.9	Who will provide the training?	
6.10	Who should be trained?	
6.11	Has thought been given to the needs, skills, knowledge and behaviours needed by all those working within Telecare and in services related to it?	
6.12	Is the Telecare Installer (TI) trained to a level sufficient to deliver a Telecare installation and/or maintenance and repair service?	
6.13	Are mentoring or champion arrangements available to ensure staff have access to support and advice?	

The Learning and Skills Matrix detailed in Appendix 1 provides guidance on the learning and development considerations to be made with regard to specific staff groups.

7.0	PRIVACY AND DATA PROTECTION	ACTION REQUIRED
	<p>All service providers have a duty to comply with Data Protection legislation and where appropriate, Caldicott guidance, NHS Confidentiality Code of Practice, or their equivalents. Each service provider within the Telecare service will work to these and also have confidentiality, privacy and freedom of information policies in accordance with relevant legislation and best practice and will apply all of these to their Telecare service. In addition consideration should be given to the following.</p>	
7.1	Are there standardised systems for the inputting, checking and maintenance of accurate and up to date service user information?	
7.2	Are there procedures to check the details of the service user at least once a year?	
7.3	Are there data sharing agreements in place between appropriate partners?	

8.0	PARTNERSHIP WORKING	ACTION REQUIRED
8.1	Are there established, close and effective working relationships between partner agencies?	
8.2	Is Telecare integrated within community health, mental health, acute services, housing, social care and the third sector? Please see appendix 2 for a list of possible services / staff groups for inclusion.	
8.3	Has the role of GP's been considered?	
8.4	Has the role of pharmacists been considered e.g. for medication issues?	
8.5	Are the responsibilities and actions of each party clear and documented?	
8.6	Are staff aware of referral routes to these and other agencies in support of service users?	
8.7	Are service providers undertaking an annual review, in conjunction with the partner agencies and corporate customers, on the effectiveness of the working relationship in delivering Telecare services?	
8.8	Are staff knowledgeable about and able to signpost service users to support and services provided by partner agencies and other organisations and that may be able to meet the service user's wider needs?	
8.9	Is any eligibility criteria and/or application process distributed (at least annually) to relevant agencies, commissioners, advice services, other providers and any other agencies in regular contact with members of the target service user group(s)?	
8.10	Are service providers acting in a responsible and managed way in relation to informing partner agencies and others involved in the support of the service users where the Telecare service has or is being terminated for whatever reason?	
8.11	Are there agreed procedures for notifying partner agencies and others involved in the support of service users?	
8.12	Do service providers have procedures in place that determine their working relationships and responsibilities with Telecare Service Centres (TSCs), installers / maintainers, informal and formal responders, and corporate customers?	

9.0	SERVICE USER COMMUNICATION	ACTION REQUIRED
This section considers how to ensure that service users receive appropriate information, in a suitable format to enable them to make informed choices regarding the Telecare service. It also considers the marketing and awareness raising required.		
9.1	Are the eligibility criteria and details of the application process freely available to all enquirers and in appropriate formats?	
9.2	Are service users provided with information in writing, enabling them to make informed choices when considering Telecare?	
9.3	Is current information available to sign-post them to other sources of information e.g. websites and organisations?	
9.4	Where the service user has made a self-purchase of the Telecare equipment does the service provider ensure they are informed of their responsibilities for maintenance / repair of the equipment?	
9.5	Is an agreement in place between the service provider and the service user which the user has signed (provided that they have the cognitive ability to understand this information)?	
9.6	Does this clearly detail the person and the service provider's responsibilities?	
9.7	Are service users and advocates consulted on all significant proposals in relation to the Telecare service which affect their lives or the quality of service provided, and their views taken into account?	
9.8	Is information provided during installation to the service user detailing how the Telecare equipment works, the support that the TSC provides, and the service requirements placed on the service user?	
9.9	Does the service provider explain and demonstrate to the service user the equipment and its usability?	
9.10	Is it checked that all the necessary operations are understood and can be carried out by the service user, including a test of the Telecare equipment through to the monitoring centre?	
9.11	Is there a communication strategy in place to raise awareness of Telecare?	
9.12	Is there a marketing strategy to promote the private pay market and to support the retail model?	
9.13	What is the service provider's complaints handling policy and procedures? Is feedback given to the complainant on action taken?	
9.14	Is an annual report produced by the service provider for service users detailing achievements, improvements, complaints, action taken, and other information relevant to the provision of service?	

10.0	LEGISLATION (including health and safety)	ACTION REQUIRED
	All service providers must comply with relevant legislation and measures should be incorporated into any contract to ensure that this can be reviewed. (Guidance on the range of legislation relating to Telecare services can be found in the TSA Code of Practice).	

11.0	BUSINESS CONTINUITY	ACTION REQUIRED
	<p>Business continuity is about anticipating the crises that could affect a company and planning to make sure that the business can continue to function in the event of an emergency. A Business Continuity Plan (BCP) sets out clear roles and responsibilities. It lists a series of contingencies that enable key business activities to continue in the most difficult circumstances, such as when a vital computer system or other equipment is unavailable. Importantly, it also details clear emergency procedures to ensure that the safety of employees is a top priority. While disaster recovery planning has traditionally focused on the IT recovery of the business such as tape backup systems, storage systems, and hot sites, Business Continuity Planning addresses all the requirements essential to keeping the business running and includes processes to keep disruption to service users and employees to a minimum. In short, it is about ensuring that a crisis is managed effectively before it escalates to a disaster. Service providers should ensure that a BCP is in place for the Telecare service. A few of the issues to consider are detailed below.</p>	
11.1	Has a full risk assessment been carried out which informs the BCP for the service?	
11.2	Does the BCP set out the policy and procedures in the event of an incident or disaster affecting the business, and include the partial or full evacuation of the premises, as well as temporary re-location?	
11.3	Is the BCP tested and reviewed at least twice a year by simulating an incident?	
11.4	Does the BCP include arrangements with local contractors to enable, where possible, for the service to be maintained whilst an emergency incident is investigated and/or the damage contained or repaired?	
11.5	Have reciprocal arrangements with neighbouring Borough's been considered?	
11.6	<p>Service Providers operating a Telecare monitoring centre must ensure that the BCP includes the following requirements for switching the TSC service to an alternative location(s):</p> <ul style="list-style-type: none"> • diversion of the service must be capable of being undertaken immediately and remotely from the Service Provider's main site. • diversion of the service must be to an alternative location that is fully commensurate with the service at the main site and able to meet the same Key Performance Indicators (KPIs) until the incident is resolved, or re-location of the business operation is completed and fully operational. • the business re-location site must <ul style="list-style-type: none"> ○ provide appropriate and adequate staff facilities ○ have full voice recording facilities ○ be on a separate local electricity supply from the main site. 	

12.0	PERFORMANCE MANAGMENT	ACTION REQUIRED
	<p>Any organisation or service needs to know where it is going and whether it is achieving its own goals and those set for it. While setting the direction is a matter addressed via the business plan and identified through the mission statement and strategic aims, achieving the desired outcomes and changes is a matter for performance management and measurement. It follows from this that all performance indicators adopted by an organisation should be relevant to the business aims of the organisation and to the effective management of the business processes of that organisation.</p>	
12.1	Is it clear what the strategic and process indicators are?	
12.2	Have they been clearly defined?	
12.3	Are service user opinions sought regularly?	
12.4	Have the appropriate performance indicators been agreed with each service provider?	
12.5	Does the service provider meet the required key performance indicators as specified?	
12.6	Has the service provider been asked to provide performance management information?	
12.7	Is there an established, effective and regular assessment and review processes?	
12.8	Are regular reviews of the contract and its performance undertaken?	
12.9	Is the service provider required to produce a monthly report on each KPI and record any reasons for failure to achieve them, along with an action plan?	
12.10	Who is responsible for reviewing information received?	

13.0	TECHNOLOGY MANAGMENT	ACTION REQUIRED
13.1	Technology management is one theme which cuts across a smaller number of the stages in the Telecare pathway. Primarily it relates to installation, monitoring, maintenance, asset management and response. This theme covers both the equipment that is provided to service users as part of their Telecare package and the equipment used by the service provider for service delivery. Issues for consideration include:	
13.2	Has a technology strategy been agreed between partners?	
13.3	Do storage conditions of the equipment comply with the manufacturer's recommendations?	
13.4	Is there a procedure in place to ensure that equipment is tested ahead of it being installed in the service user's home?	
13.5	Is the ownership of the equipment by the Telecare service clearly identifiable i.e. by the use of a sticker or marking?	
13.6	Is there an agreed contract in place and process for cleansing equipment which covers the processes of decontamination, cleaning, sterilisation or disinfection?	
13.7	Does the contract also cover the testing of cleansed equipment?	
13.8	Are arrangements in place for the cleansing of Telehealth equipment?	
13.9	Has it been agreed how and when equipment will be reused?	
13.10	Is a contract or service level agreement required for this?	
13.11	Is there a procedure in place for the disposal of obsolete equipment?	
13.12	Is a contract or service level agreement required for this?	
13.13	Is there a maintenance contract in place?	
13.14	Is there a contractual agreement for the replacement of equipment?	

13.0	TECHNOLOGY MANAGMENT	ACTION REQUIRED
13.15	Does the service provider have a procedure to covering the identification and diagnosis of equipment failure and the remedial action to be taken?	
13.16	Are timescales agreed for responding to maintenance requests at all times?	
13.17	With regards to computer systems used, do service providers have procedures in place to cover system security, data integrity, data validation, system maintenance, system upgrade, user procedures and training?	
13.18	Does the service provider have mechanisms in place to ensure that all critical computer equipment is protected from power interruptions and surges?	
13.19	Would service users and practitioners benefit from a Telecare demonstration space or site?	

PATHWAY STAGE CONSIDERATIONS

Below are detailed the issues for consideration in relation to specific steps in the optimum Telecare Pathway.

14.0	SUPPORT AND ADVICE	ACTION REQUIRED
14.1	Is central access to skilled Telecare advice available?	
14.2	Is standardised Telecare information available?	
14.3	Is this used by all access points and by all partners?	
14.4	Is there a central repository for information updating?	
14.5	Is a single point of access for Telecare information required?	
14.6	Does everyone have to come through the front door for Telecare?	
14.7	How much information should be given to minimise risk where someone may purchase equipment from high street stores and other providers?	
14.8	Are people made aware of the benefits of Telecare?	
14.9	How do you direct self-funders?	
14.10	Are people given information about links to other sources of information?	

15.0	REFERRAL AND ENQUIRY	ACTION REQUIRED
15.1	Who makes referrals?	
15.2	How are referrals to be made?	
15.3	What are the eligibility criteria?	
15.4	Are routes into the service for service users being referred by a range of partners specified? I.e. does everyone come through the front door or can some assessments go straight to the validations stage?	
15.5	Has the level of referral information required been set?	

16.0	ASSESSMENT	ACTION REQUIRED
16.1	Who is going to assess for Telecare?	
16.2	What type of assessment is required?	
16.3	Is the assessment proportionate to need and stage of pathway at which requested?	
16.4	Can some pieces of equipment be prescribed following self-directed assessment or by the single point of access?	
16.5	If yes, is a minimum data set required for completion?	
16.6	What will the assessment timescale be?	
16.7	Are Telecare triggers included within the generic assessment documentation within each partner organisation?	

17.0	SUPPORT PLAN	ACTION REQUIRED
17.1	Is Telecare a mandatory consideration when support planning to meet needs and risks?	
17.2	Are details taken from any assessment completed or is duplication of data collection taking place?	
17.3	Is the support plan proportionate? I.e. a letter or a full support plan could be used depending on the complexity of need.	
17.4	Is the support plan person-centred and is the equipment package bespoke?	
17.5	Are the response details and escalation procedures part of the support plan?	
17.6	Is the information detailed enough for the Brokers?	
17.7	Has it been determined how Telecare fits within the retail equipment model (TCES)?	
17.8	Is the Telecare Plan integrated into the support plan and is this proportionate?	
17.9	Can the computer systems support entry of Telecare information?	
17.10	Are other environmental changes required which are beyond the scope of Telecare (e.g. adaptations)?	

18.0	VALIDATION AND TECHNICAL SPECIFICATION	ACTION REQUIRED
18.1	Who will provide specialist technical support when it is required?	
18.2	Who will carry out site surveys?	
18.3	What is the sign off mechanism for the Telecare equipment?	
18.5	Is there a ceiling on the cost / type of equipment that is provided before further authorisation is required?	
18.6	Should Telecare be funding this equipment or should it be funded by another source?	

19.0	INSTALLATION	ACTION REQUIRED
19.1	What is the timescale(s) for installation?	
19.2	Are different response times required to meet different levels of need?	
19.3	If supporting hospital discharge, is the whole package put in immediately or only part?	
19.4	Who will do the installation?	
19.5	Who arranges the installation?	
19.6	Who arranges any follow up visits?	
19.7	Can the installation be completed in one visit?	
19.8	If not, who else needs to be involved?	
19.9	Has the manufacturer's installation guidance been adhered to?	

19.0	INSTALLATION	ACTION REQUIRED
1910	Who liaises with the carer and others?	

20.0	MONITORING	ACTION REQUIRED
20.1	Is the data to be captured by the monitoring service clearly defined?	
20.2	Can this be captured by the call handling system?	
20.3	Are clients of concern identified?	
20.4	How is this information fed back to the involved care team?	
20.5	Who is responsible for doing this?	
20.6	Can direct referrals to services be made by the monitoring service i.e. falls clinic, falls exercise group?	
20.7	Can information be captured from the emergency services?	
20.8	Who acts on this information?	
20.9	Are IT systems able to share this information electronically?	

21.0	MAINTENANCE AND ASSET MANAGEMENT	ACTION REQUIRED
21.1	Is an asset management register in place?	
21.2	Who maintains asset data?	
21.3	Does there need to be a contract for this?	
21.4	Is there a maintenance contract?	
21.5	What is the timescale for planned and emergency maintenance?	
21.6	Are different response times required?	
21.7	Is the battery management routine clearly defined?	
21.8	Is this managed and triggered by the asset register?	
21.9	Is battery management linked to the disposal procedure?	
21.10	Does the asset register capture warranty details?	

22.0	RESPONSE	ACTION REQUIRED
22.1	What level of response is required?	
22.3	Is a dedicated Telecare response service needed or could it be provided by an existing service?	
22.4	Does the geographical positioning of response need to be considered?	
22.5	Is response available 24/7?	
22.6	Are the response times agreed?	
22.7	What is the policy regarding informal carers, friends and family as responders?	
22.8	What is the policy regarding informal carers, friends and family as responders?	
22.9	What is their role?	
22.10	Will formal and informal responders feedback their actions to other partners?	
22.11	Is information from the response phase fed back to workers and into specific pathways i.e. falls?	
22.12	How will you gain access to someone's home?	
22.13	Are there agreed protocols?	
22.14	Is there a key policy which includes details of key and key box data management?	
22.15	Is there a contract or service level agreement for formal response?	

23.0	ESCALATION	ACTION REQUIRED
23.1	Who will be responsible for getting engagement with key stakeholders and agreeing the pathways / escalation protocols?	
23.2	Who will review these protocols and update as appropriate?	
23.3	Are there clear escalation protocols in place for the service providers i.e. who they can contact and who they can't?	
23.4	How will feedback be given regarding failed equipment to equipment providers?	

24.0	REVIEW	ACTION REQUIRED
24.1	What triggers a review?	
24.2	What indicates if a review of whether the equipment/system is meeting the need or a full assessment of the person's needs is required?	
24.3	When is the scheduled review period set?	
24.4	How is the review period determined?	
24.5	Who liaises with the service user, carer and involved care team?	
24.6	Who actions any changes?	
24.7	What procedures are in place to link back to the originating assessor, referrer or key worker?	

APPENDIX 1 - LEARNING AND DEVELOPMENT MATRIX

Level	Example roles	Knowledge	Skills	Behaviours
1	All involved partners, team members and individuals should receive introductory level awareness training			
2	<ul style="list-style-type: none"> • Commissioners • Brokers • Partners • Reablement teams • Single Point of Access 	<ul style="list-style-type: none"> • <i>Customer Pathway / Personalisation</i> • <i>Reablement / Telecare Plan</i> • <i>Telecare Optimum Delivery Pathway</i> • <i>Equity and Diversity</i> • <i>Privacy, Confidentiality and Data Protection</i> • <i>Roles and responsibilities</i> 	<ul style="list-style-type: none"> • How to find further information/ contacts • How to refer • How to commission Telecare (if relevant to role)- market, suppliers, financials, standards etc 	<ul style="list-style-type: none"> • <i>Customer service communications</i> • <i>Partnership working</i>
3	Monitoring Centre Suppliers	<ul style="list-style-type: none"> • Referral procedures • Assessment procedures • <i>Safeguarding</i> • Voice recording and voice recording procedures • Performance management procedures • Key policy • Escalation protocols • Technical • Equipment • IT • 	<ul style="list-style-type: none"> • How to complete an initial assessment • How to deal with difficult calls • How to prepare basic reports • How to use IT systems as appropriate to response 	<ul style="list-style-type: none"> • <i>Analytical skills</i> • <i>Problem solving</i> • <i>Disability awareness</i>
4	Reablers Telecare team members Trusted Assessors Providers Carers (formal) Responders (formal)	<ul style="list-style-type: none"> • Health & Safety • Manual Handling • Specialist topics e.g. stroke, falls, dementia • Signs of abuse or neglect • Complaints Policy • Personal Safety • Assessment • Risk assessment 	<ul style="list-style-type: none"> • How to complete a full assessment • How to help customers with daily living skills • How to access / secure customer's home • How to deal with difficult behaviour / aggression • Basic technical skills • Basic equipment/ service monitoring / review skills • Instructing service users and carers on how to use equipment 	

Level	Example roles	Knowledge	Skills	Behaviours
5	Installers/ Technical	<ul style="list-style-type: none"> • Equipment installation of any provider • Standalone equipment 	<ul style="list-style-type: none"> • Advanced technical skills • Advanced equipment/ service monitoring/ service review skills • Understanding risks of specific equipment / use of equipment with other items 	
6	Telecare Managers Reablement Managers	<ul style="list-style-type: none"> • Service Structure • Governance • Legislation • Business Continuity • Performance Management • Technology Management • Standards of service e.g. TSA Code of Practice • Equipment 	<ul style="list-style-type: none"> • Report preparation e.g. performance management and quality. • Presentation • Marketing 	

Notes

The use of italics denotes that the knowledge and/or behaviour is cumulative as the person progresses through the different levels of the learning and development matrix.

For example:

- 1) At Level 2, the knowledge of the Telecare Optimum Delivery Pathway will be basic and provide an overview. At Level 3 it will be intermediate and provide a good understanding of relevant elements and at Level 4 and above, advanced, giving a comprehensive and detailed understanding of each element.
- 2) At Level 2, Equity and Diversity will be basic, this will also need to be completed at Level 3 at an intermediate level and at Level 4 and above at an advanced level.