



The voice of technology
enabled care

TSA special case study

If you want TEC to work, shut up and listen

Overview

As chief executive of TSA, Alyson Scurfield's job is telling people about the power of technology enabled care. But recently, she experienced this impact herself. Alyson's dad has dementia and her family have been using technology to keep him out of hospital and residential care.



From his living room in Newcastle, 81-year-old Albert is about to call his granddaughter. This happens at tea time every Tuesday and it's important because yesterday Albert forgot his granddaughter's name. In fact, last week he couldn't even remember where she lived.

But today, Albert has a screen on his lap. He sees a reminder to 'Call Charlotte' and photos of her latest diving trip in Dubai pop up. Albert touches a picture of his granddaughter's face to video call her. When he doesn't want to skype, he presses 'Message Charlotte' and writes a letter instead.

Albert has dementia and last January he lost his driving licence. Six months later, his granddaughter, Charlotte moved to Dubai. Both were big blows. A former engineer, Albert was the 'go-to' person in his family for emotional and physical support. He also cared for his wife who has osteoporosis.

"Before he was diagnosed, my dad would walk around the block and chat to the neighbours", explains his daughter, Alyson. "He had a hip replacement and keeping active was important.

But now he has to have someone with him. The problem is that my mum's mobility is really poor."

This sudden loss of independence meant Albert became withdrawn. His delusions quickly escalated, and he began having mini-strokes. In just five months Albert went to A&E seven times, with two overnight stays. He was then transferred to respite care for eight weeks.

"He presented himself well in the nursing home but underneath he wasn't coping", says Alyson. "He didn't know the difference between the men's and women's toilets." At the end of his stay, Albert was diagnosed with Parkinson's and mixed vascular dementia.

No co-ordination of care

"Dad was depressed", Alyson explains. "On top of the new diagnoses he also had angina, diabetes, mobility problems and bleeds behind the eye. Different consultants were dealing with him and it felt like no-one was looking at dad as an individual and co-ordinating his care."

This frustration continued when Albert was discharged. Alyson works as chief executive of the national body for technology enabled care services, yet her father was offered no telecare or digital tools to support him at home.

"All we got was an assessment for adaptations; physical things like grab rails. I knew there were lots of technology that could help dad and us as a family", Alyson comments. "But I also knew that kit on its own wasn't going to work."

The family asked Albert what he wanted. His answer was clear: conversation. "I get up and I don't know what date or month it is. I don't know what the weather is like. I don't know what to talk about."

But there was also something else he wanted support with. "I need your mam to be ok."

The problem was that Elizabeth wasn't ok. She was constantly worrying about him. She wanted someone to make things simple. "There are so many appointments – I feel confused. And I want your dad to feel like he is still the person he's always been."

Digital programme

The family found a simple digital programme that could help. Daily prompts on a tablet now remind Albert to take his medication, do his exercises or listen to his favourite music. Images pop up of today's weather or his grandchildren's travels. When his 12-year old grandson comes over, Albert can press a button and they play online games together.

This app has also made things more manageable for Elizabeth. The same programme that helps Albert connect with his family also helps his wife manage his care. Diary alerts remind her of his next appointment and she brings the tablet along, so specialists can see his health data.

A small device also goes into Albert's shoe and tracks his location. If he falls, sensors alert a mobile warden service. A blood pressure cuff, weight scales and pulse meters feed his health information through to the tablet.

Remarkable results

The results have been remarkable. Since coming out of the nursing home 18 months ago, Albert hasn't once had to visit A&E or go back into respite care. He hasn't needed a care package from the local authority.

“It’s about progression of need”, Alyson explains. “If we hadn’t got my dad - and mum - the support they really wanted then I’m sure my dad would now be in a care home and the mini-strokes would have got worse. He would have hated an off-the-shelf arrangement where a different carer comes in every day. From day one he told us that formal care was something he didn’t want.”

Importantly, Albert’s family don’t feel it was the kit alone that slowed his illness. “Technology met my dad’s needs partially but it was the human touch that made it really work,” Alyson believes. “If we’d just bought some boxes of equipment - a pendant alarm, a GPS tracking device and put skype on his tablet then we wouldn’t have got those 18 quality months. But we listened to what he truly wanted and gelled the technology with everything else that was going on in his life. We use the technology as a family, his health doctors use it and so do his friends. The result is dad feeling relaxed and empowered and, importantly, himself.”

About TSA

TSA is the industry body for technology enabled care (TEC) services, representing organisations including telecare and telehealth service providers and suppliers, commissioners, digital health businesses, housing associations, emergency services, academics, charities and government bodies.

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