



Testing the effectiveness of telehealth and telecare at scale in England

Outline of progress on the Whole System Demonstrators

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Session Aims

- Reminder of WSD Drivers & Goals
- Designing the trial
- Progress on the trial
- Practical lessons
- Policy Fit
- Questions



Context – a changing population

Throughout most of the world birth rates are declining, life expectancies are increasing, populations are ageing and the prevalence of chronic conditions is growing. People are living longer but they are less likely to have the support of an extended family.



Over 15M people, or almost 1 in 3 of the population, in England suffer from a long-term condition (LTC).



What is the scale of the challenge?

69%

NHS spend on LTCs

65%

Outpatient and A&E attendances

80%

Inpatient bed days

2.6m

More people with LTCs by 2025

55%

GP visits

£559

Cost per week of intensive adult social care

£8bn

Spent on adult intensive social care

2.9m

Forecast rise in 85 year olds
By 2051

1.25m

Providing 50 hours or more of care each week

£3.9 bn

Cost of Co-morbidities

£1bn

Annual savings from care planning

6m

People with LTCs who may be suitable for AT

<5,000

Telehealth users

1.6m

Telecare users



White Paper Commitment

2007

WSDs will explore the exciting possibilities opened up by truly integrated health and social care working supported by advanced assistive technologies such as telehealth and telecare.





Three WSD sites

Cornwall



- The poorest County in England, with a dispersed rural population
- Population of >500,000
- 46% of the population live in settlements of <3,000 people
- 99.1% White British
- 10.3% of the population are aged 65+; 7.2% 75+ and 2.6% 85+
- 21% of the population report a limiting long term illness

Newham



- One of the most deprived areas in the UK
- Population of 270,442 - GP registered population of 300,000
- Population increasing at a higher rate than the London average
- 2nd most diverse population in the UK - >68% BME; >140 first languages
- 8.5% of the population are aged 65+
- 17.3% of the population have a limiting long term illness
- Highest death rate from stroke and COPD
- Highest diabetes rate in the UK
- 2nd highest CHD rate in London

Kent



- Combination of rural and urban populations
- Population of 1.37m (excluding Medway UA). Two areas already piloting telehealth Ashford / Shepway population of 211,100 & Dartford / Gravesham / Swanley population of 210,000
- 3.5% BME
- 17.3% of the population are aged 65+; 8.4% 75+ and 2.2% 85+
- Within the target population, individuals report having an average of 1.6 of the three target conditions of HF, COPD, Diabetes



WSD Goals

We want to know to what extent the WSD model of care:

- promotes individuals long term well-being and independence
- improves individuals and their carer's quality of life
- improves the working lives of staff
- is more cost effective
- is more clinically effective

Provide an evidence base for future care and technology models.



WSD Technology

Telecare

Electronic sensors and aids that make the home environment safer so that people can live at home, independently, for longer. The sensors automatically raise the alarm by contacting a family member, friend, neighbour, nurse or warden (in sheltered housing)



Telehealth

The delivery of healthcare at a distance using electronic means of communication – usually from service user to clinician e.g. a service user measuring their vital signs at home and this data being transmitted via a telehealth monitor to a clinician





WSD Characteristics

Client centred & large scale. We believe WSD to be the largest randomised control trial of telehealth & telecare to date.

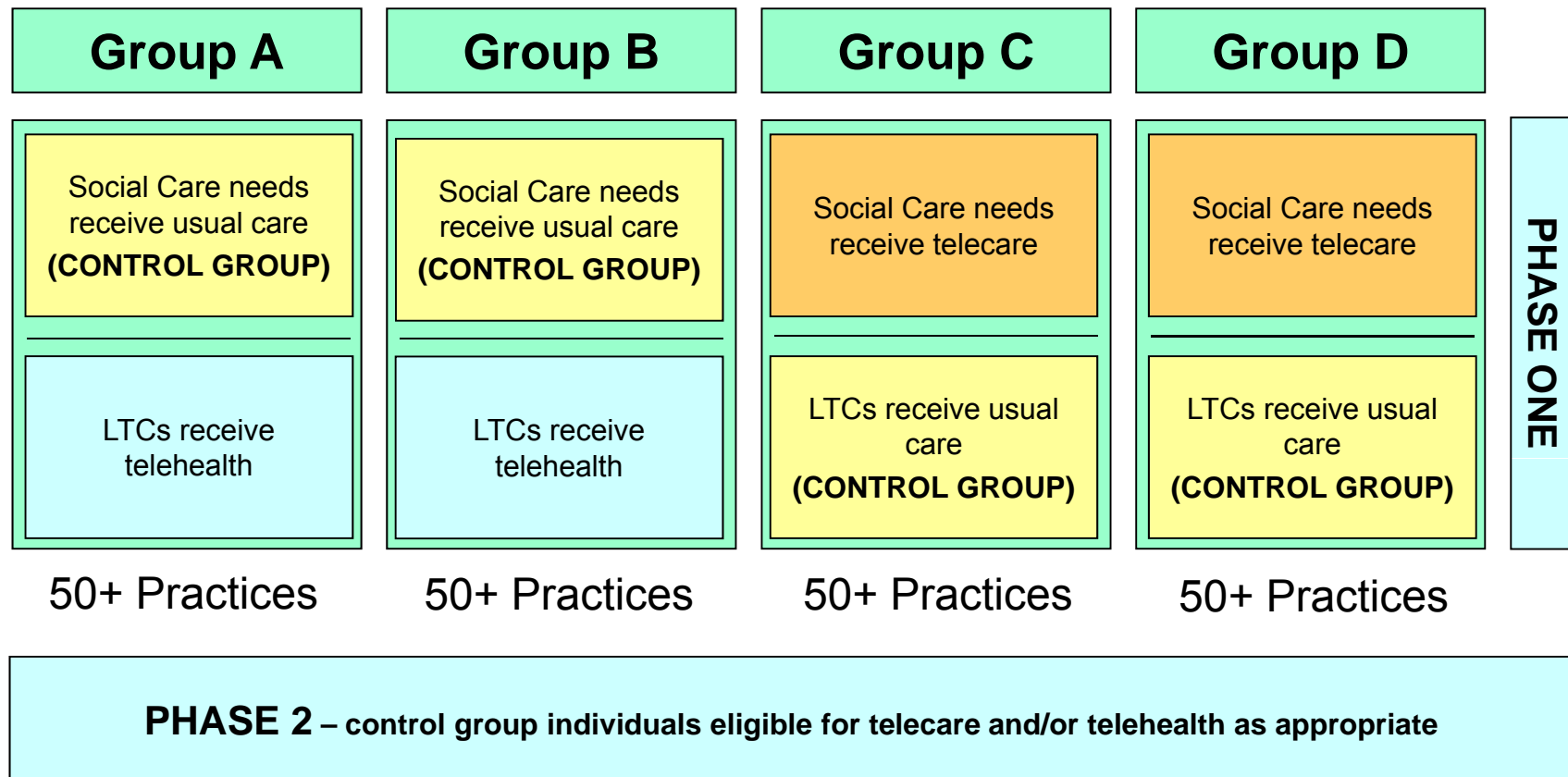


real time, pragmatic, rigorous



WSD Evaluation

RCT design has evolved





WSD Evaluation Eligibility reviewed

CRITERIA A

At least one of three long-term index conditions (COPD, CHF, Diabetes) as defined using QOF criteria.

In all cases of the index LTC, additional physical co-morbidities may be present and these individuals will still be eligible.

CRITERIA B

At least one of the unplanned following events in the last 12 months in relation to their long term condition.

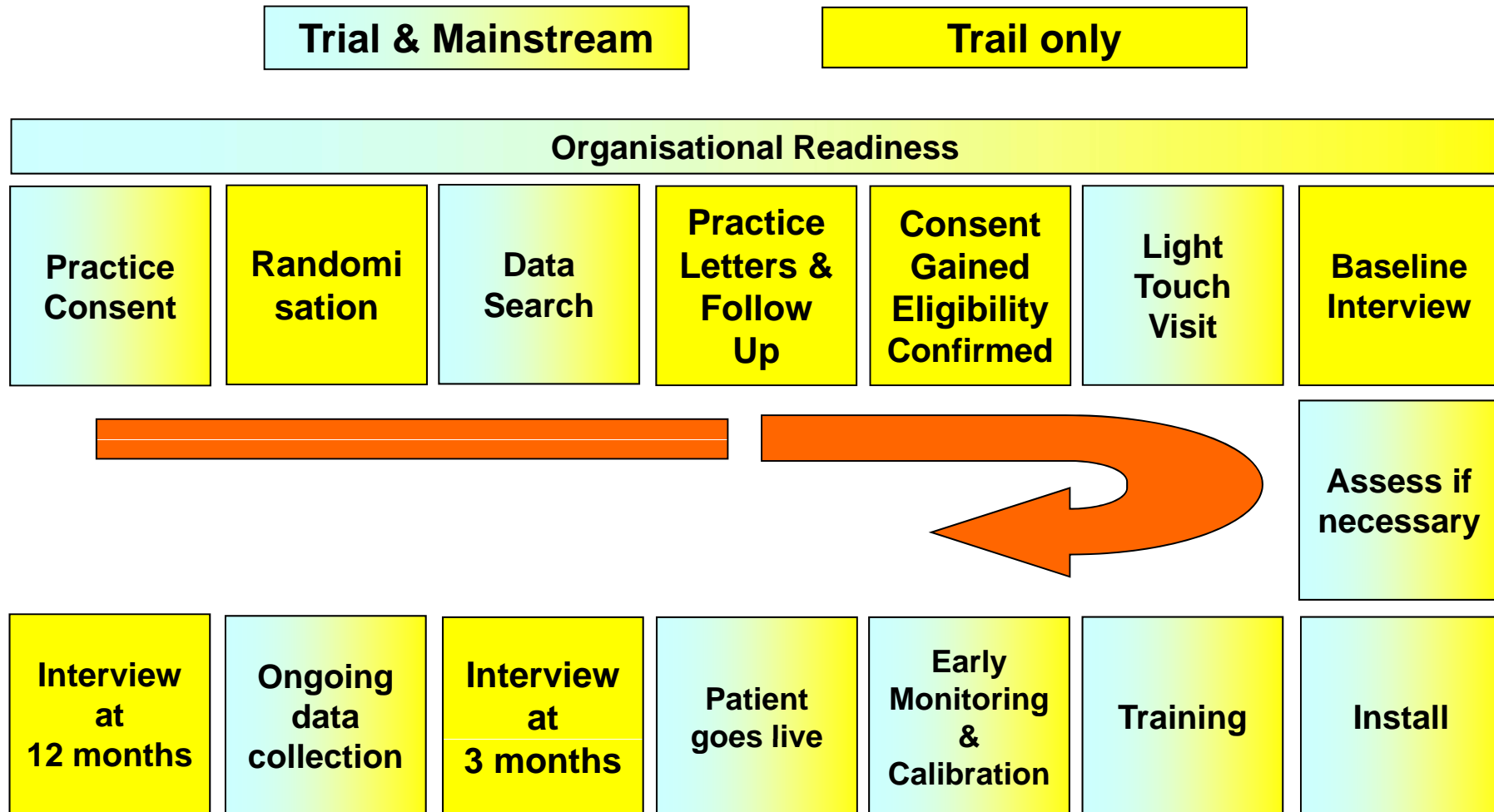
CRITERIA C

Individuals aged 18 and over with social care needs who would benefit from Telecare. They must meet one of the criteria related to levels of service use or risk.

Criteria B is now optional.



Many of the trial processes/issues are common to mainstream roll-out





WSD Recruitment Progress

- **239** GP practices signed up



- **>27,000** letters sent out

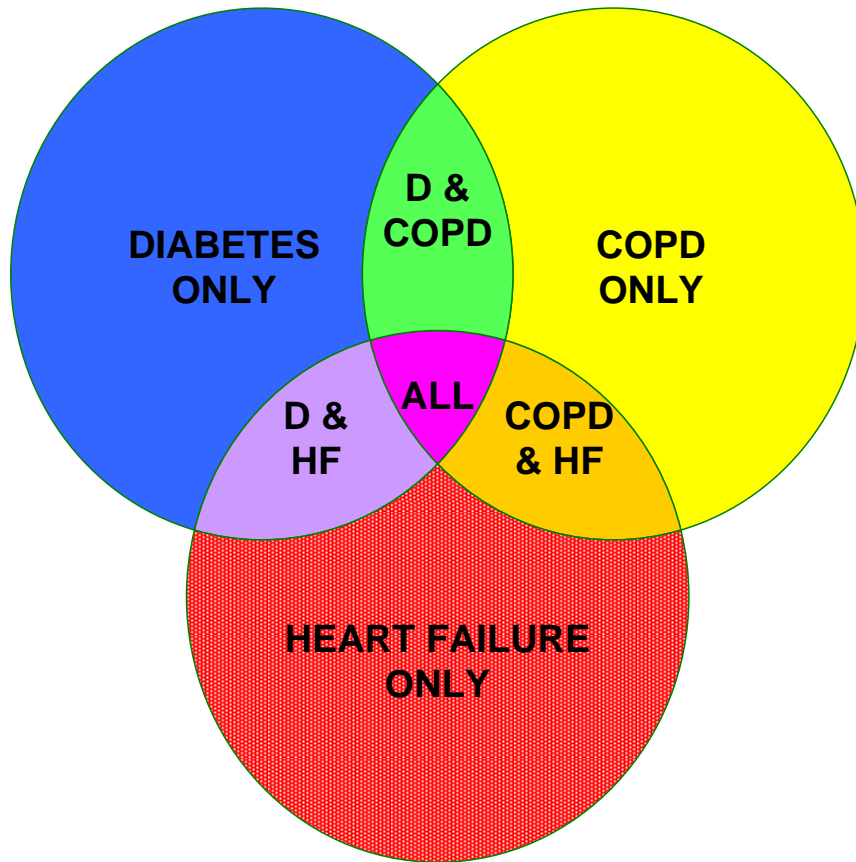
- **>9,000** home visits



>6000 participants on trial



LTC Breakdown



	% of total
Diabetes only	20%
COPD only	38%
HF only	27%
Diabetes & COPD	5%
Diabetes & HF	4%
COPD & HF	4%
ALL 3 LTCs	2%



Qualitative Progress

- **>4,100** participant interview leads
- **>500** carer interview leads
- **>3,600** leads followed up
- **>400** 3-month questionnaires complete



>3160 baseline interviews complete



WSD Challenges

Evaluation – complex & costly

Recruitment – no crossover

Demand – unmet demand

Data – quality, sharing complex

Project Mgmt – not routine

Clinical Measures –
reluctance

Drop out – reasons

Availability – OOH,

Supplier – recall, receivership



You are successful in knocking down barriers.



Evaluation Progress

- The evaluation work is already underway but it is currently too early to provide any robust results from the trial
- However, lots of promising case studies from across the sites.
- Early results will be shared with DoH



WSD Action Network

Developing the lessons from the 3 WSD sites and the 12 WSDAN members & setting the goals

Croydon

Birmingham

Barnsley

Southampton

Nottingham

Leicester

Leeds

East Riding

Norfolk

Lincolnshire

Lancashire

Hull

WSD Action Network

Department of Health

WSD Action Network

WSDAN – or the Whole System Demonstrator (LTC) Action Network – is an online resource on telecare, telehealth and the management of long-term conditions. The Network is run by The King's Fund and CSIP Networks and is funded by the Department of Health.

Anyone can register with WSDAN to benefit from regular updates and to access the latest evidence, learning and practical lessons in the implementation of telecare and telehealth ([register for updates](#)).

WSDAN will soon launch a members-only Network for selected sites across the country.

- [Find out more about WSDAN](#)
- [Read our frequently asked questions](#)

News

- [New conditions added to NHS Choices website](#)
- [Study published on impact of telehealth on patients with heart failure](#)

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Why don't we just do it?

Growing evidence base from across the world



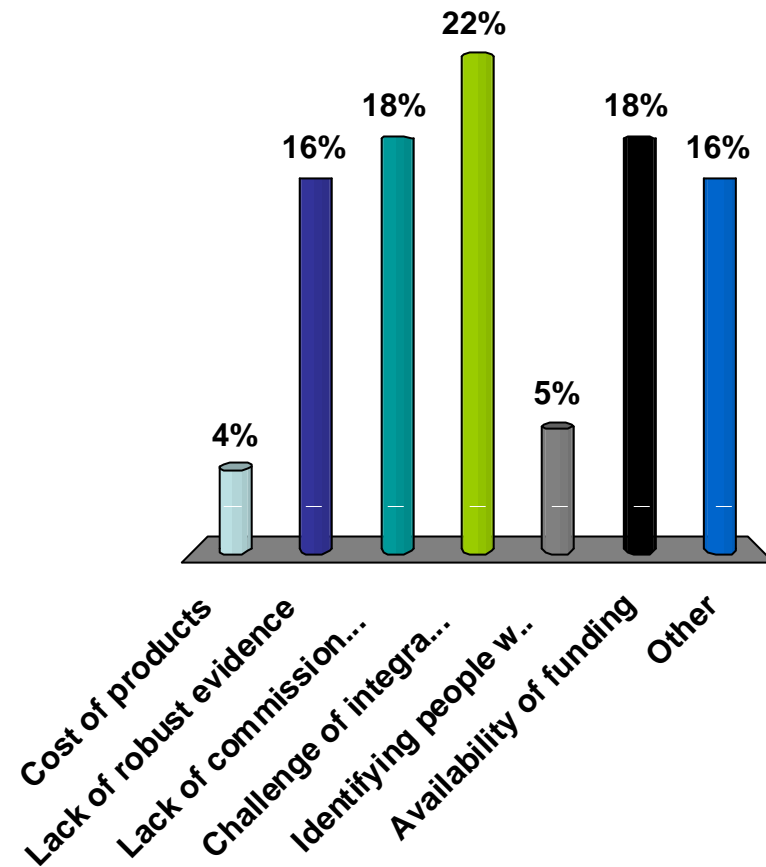
Implementation results from early adopters variable or lack
robust evidence of benefits



Recent WSDAN survey (100 people)

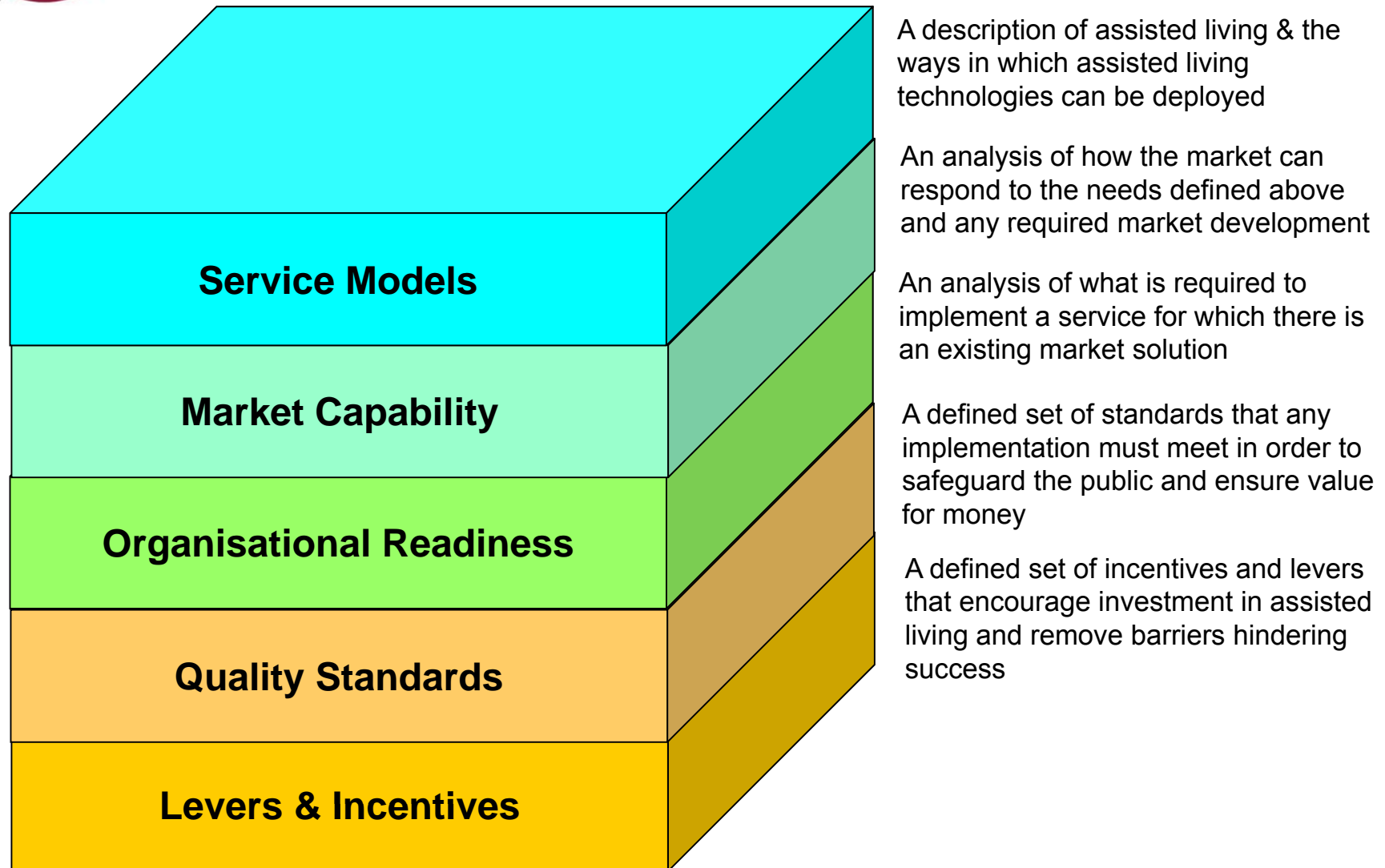
What is the main barrier you are facing in delivering telecare and/or telehealth services?

1. Cost of products
2. Lack of robust evidence
3. Lack of commissioning guidance
4. Challenge of integrated working
5. Identifying people who would most benefit
6. Availability of funding
7. Other



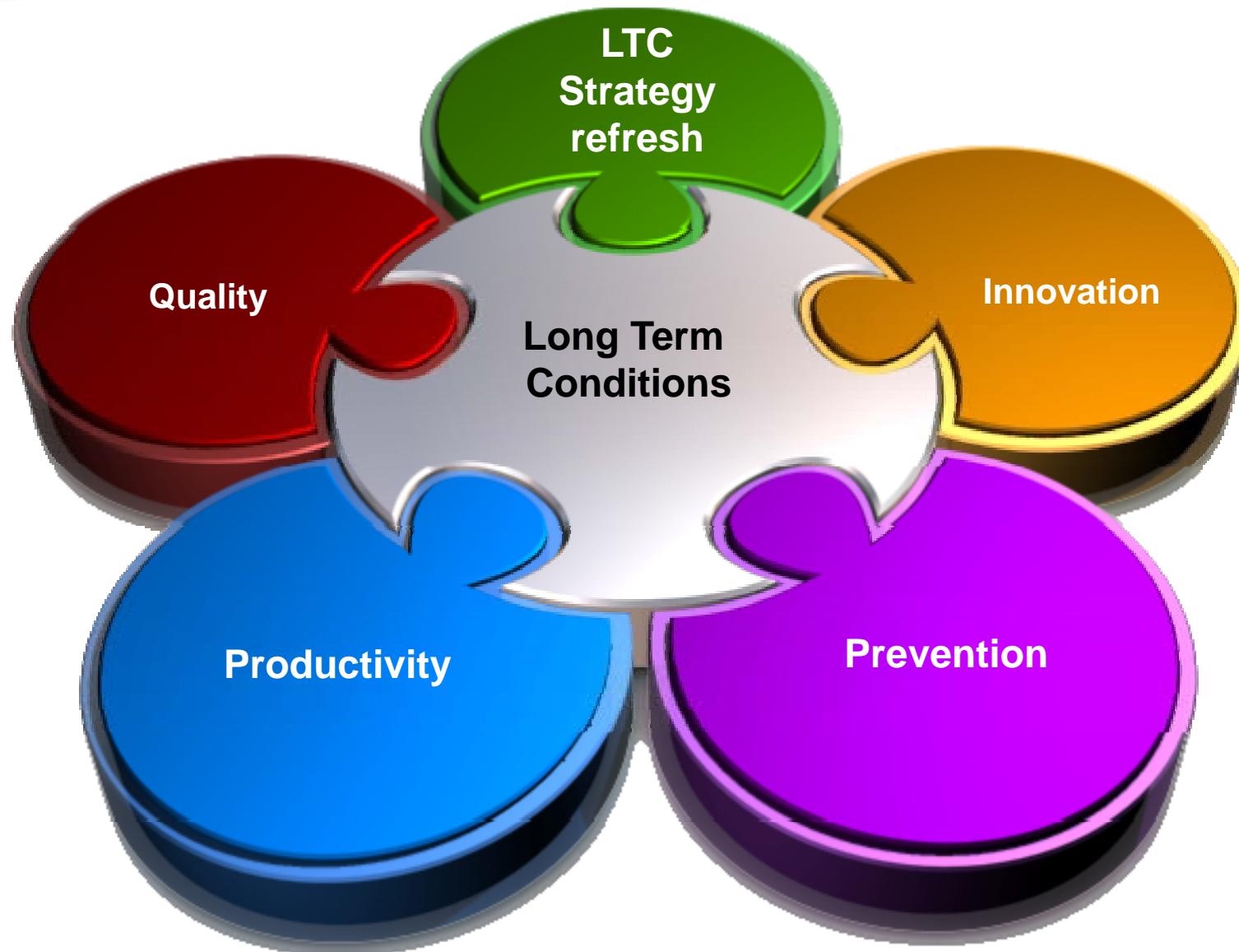


Next Steps - Key building blocks





Revised Long Term Conditions Strategy





Questions?



Many Thanks