



**Bedfordshire, Luton  
and Milton Keynes**  
Health and Care Partnership



# **BLMK Future Digitisation of Social Care 2023**



**Thursday 6th July 2023**  
**9.30am – 3pm**

**The Rufus Centre,  
Steppingley Road,  
Flitwick, MK45 1AH**







## Digitisation of Social Care

**Patricia Coker**, Senior Responsible  
Officer

Head of Integration (Health & Social Care)  
Social Care Health & Housing

**Central Bedfordshire Council**

# Welcome to 'BLMK Future Digitisation of Social Care' Conference 2023



This conference is a unique forum connecting Social Care with Care Quality Commission (CQC), NHS England (NHSE), Integrated Care Board (ICB), NHS leaders, decision-makers, health services and healthcare organisations to:



**Share knowledge and good practices** in digital transformation, leadership, management and service delivery



**Exchange** new ideas and innovations



**Network** with colleagues, system providers, regulator, NHSE, and professionals from across the healthcare community



**Showcase** DiSC accomplishments and share future plans



**Listen** to your peers' experiences of using digital technology



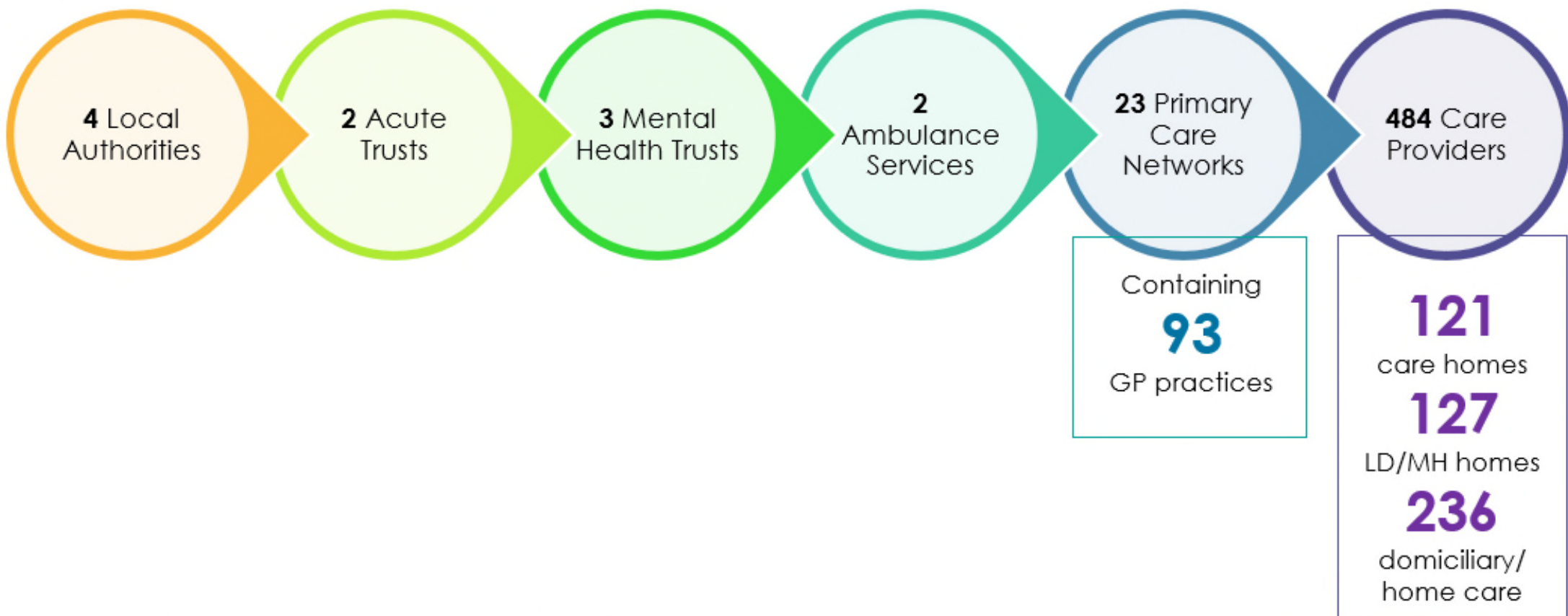
**Share your experiences,** views, and requirements

Health and Safety – fire alarms // Toilets // Facilities // Feedback



# Our partners

## One Integrated Care System:



# Challenges in the care sector



**Staff shortages**  
– lack of time for  
training and  
development



**Limited sharing of data**  
between health and  
social care  
organisations



**Different tools and ways  
of working** across  
health and care  
organisations



**Limited use of learning**  
from the COVID-19  
pandemic



Current digital tools are  
**not embedded in the  
care pathways**



**Perception that digital  
tools are complicated**  
and difficult to use



**Lack of knowledge**  
about what digital tools  
are available



**Lack of funding** to buy  
digital products and  
services.

# It's all about supporting care providers and the people they care for



**Health and care partners are under pressure to support frail, elderly residents who** may have to wait a long time for an ambulance, prior to an avoidable ambulance conveyance and hospital admission.

Residents can fall as a result of **poor hydration, forgetting to take their medication, uncontrolled blood pressure and poor mobility.**

We also know that the **information between health and care providers continues to be fragmented and not readily available.**

Our Raizer Chair seeks to support residents like Kathleen with the use of **dedicated apps to check on health and if an ambulance is required.**

***"I can vouch for it, it is wonderful. You feel so secure when you're on it and you're starting to rise up, all the tension dissipates from the body. It's wonderful."***



# Programme



We have speakers from:



# Programme

- 10.10 Digital Strategy // Shared Care Record
- 10.20 BLMK Digitisation Programme
- 10.35 Care Quality Commission
- 10.55 Coffee break and marketplace**
- 11.15 Care home's digital experience
- 11.30 Domiciliary care challenges and opportunities
- 11.45 NHS England
- 12.00 Training
- 12.05 Lunch and marketplace**
- 13.00 What's on offer to providers in BLMK?
- 13.10 Current digital projects across BLMK
- 14.40 Feedback and panel Q&A
- 15.00 Closing remarks and evaluation



# **Mark Thomas**

**Chief Digital and Information Officer**

Bedfordshire, Luton and Milton Keynes  
Integrated Care System

- BLMK Digital Strategy /  
Shared Care Record



# What's the Digitising Social Care (DiSC) programme?

To date the BLMK DiSC Programme managed to secure £3.1m national Government funds to promote **efficiency in the care sector through use of technology** across BLMK.

The programme is **recognised as a leading the way nationally** and aims to accelerate the **demonstration, evaluation** and **adoption** of new technology and services into general use and provide service users with better outcomes.

It has **three key areas of focus:**



**Digital records**



**Falls prevention**

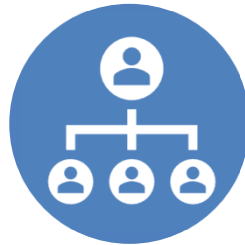


**Remote monitoring**

# Relationship building and co-production



**Embedded system-wide approach**  
built through  
co-design with partners



**Senior Responsible Officer**  
– local authority lead



**Dedicated Programme Director oversight**



**Valued ICS DiSC Programme Team** responsible for programme management



**Dedicated Digital Leads**  
leading on individual projects across the system



**Effective relationship-building** at all levels.  
National leader in this work

# Meet the team



**Patricia Coker**  
Senior Responsible  
Officer



**Clare Steward**  
Programme  
Director



**Amtar Ali**  
Programme  
Manager



**Joyce Baskerville**  
Digital Benefits  
Realisation Manager



**Tia Corcoran**  
Programme  
Support



**Lisa Burke**  
(MiiCare,  
Smplicare)



**Cheryl Stimpson**  
(DSPT, Raizer  
Chair II)



**James  
Dawson**  
(DSCR)



**Paul  
Underwood**  
(Whzan,  
Proxy Access)



**Terry Wright**  
(Acoustic  
Monitoring,  
NHSmail)

# Our three unique features



1.

System-wide **relationships**  
supported by a **dedicated**  
programme team



2.

Highly effective  
**partnership-working**  
based on true co-design



3.

**Significant benefits**  
for our **residents** and  
our **care providers**

# What helps our approach to ensure effective partnership working

We have effective **collaboration between health and social care partners**

We are **increasingly familiar with working together**

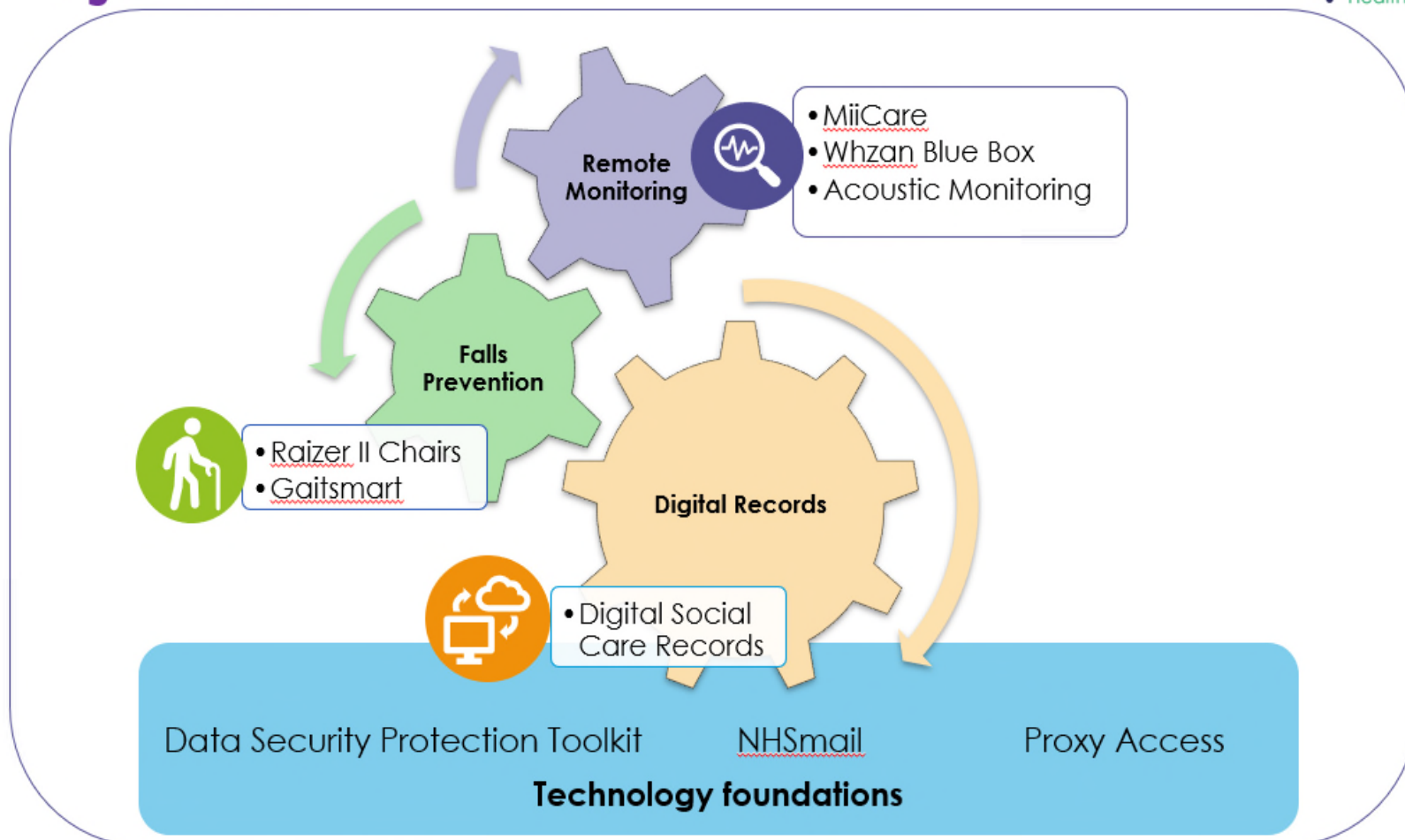
The way we do business is to **co-design with care providers and product companies**

Our annual **Digitising Social Care event** is open to the care market and digital system providers

We attend **regular meetings** to ensure our partners are updated on our progress

We **regularly review how are products are working** to ensure they meet the needs of care homes and residents

# Our projects



# Lessons learnt



Identify **dedicated staff** to support the care sector on its digital journey



Work closely with the **care sector** to understand their challenges and how we can help them



Understand what products and services are **available on the market**



**Careful selection** to ensure our products and services meet care sector needs and are future-proofed for new innovations



**Regularly review the results** to ensure products continue to benefit the care sector



Provide **training and support** to care staff



Provide **clear and regular communications** about the products and support available.



## And finally, a reminder of why we're doing this

### The experience of our residents and their families...



#### Jean Jackson, wife of a resident at Elcombe House talking about Acoustic Monitoring

*“Having something like that in my husband's room is brilliant, absolutely brilliant. For Colin personally, because he was having such horrendous nights and nightmares, the staff will be able to go and comfort him but if they were busy somewhere else, they wouldn't hear him perhaps shouting out for them. Since he's been here, I'm feeling better in myself and I'm very very happy with him here. I feel he's being really looked after.*”

*“When you've been married to somebody this long, you want to look after them. I can't do it so I'm trusting the people here to do it and every bit of technology they've got, good on them.”*



# Thank you

You can find more information on our website:

[www.blmkhealthandcarepartnership.org](http://www.blmkhealthandcarepartnership.org)

Or email us:

[blmkicb.digital.socialcare@nhs.net](mailto:blmkicb.digital.socialcare@nhs.net)

# Digital change

## The regulator's role



- Mark Sutton, Chief Digital Officer
- *BLMK Care Conference, 6 July 2023*

***Better data and data sharing are the critical components before providers can begin to address system-wide issues in a meaningful way***

CQC's State of Health and Social  
Care, published Oct 2022

## Our ambition for the future

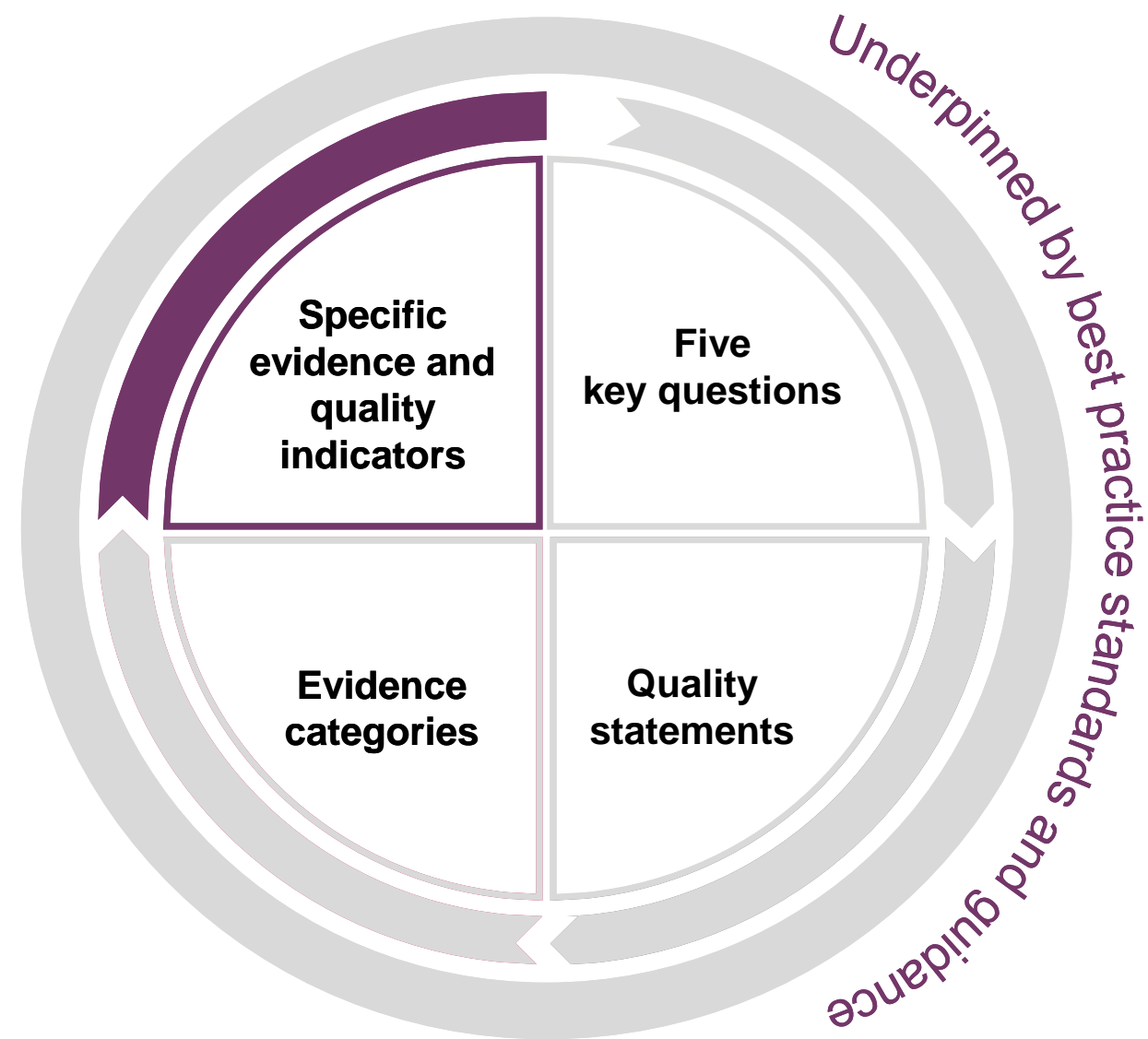
- A smoother, more functional experience for providers to have dialogue with us
- Better data to look at local areas and respond more effectively
- Share that information with you to support benchmarking and improvement

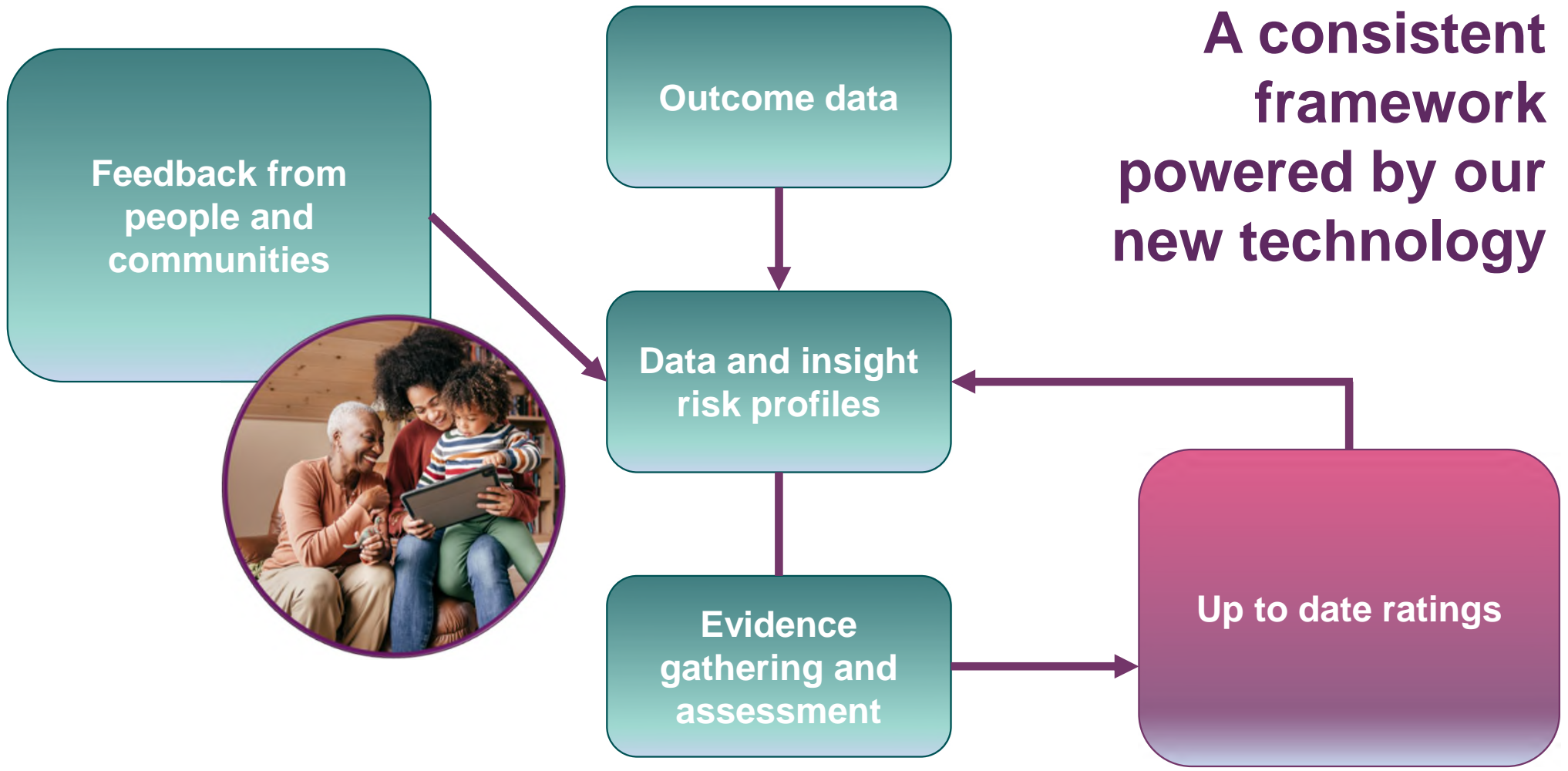


# Our single assessment framework

Our framework will assess providers, local authorities and integrated care systems with a consistent set of key themes

- Giving us an up-to-date view of quality
- Helping us better identify trends and patterns across areas





# Digitisation in social care: CQC's role

Our new assessment framework is pitched at "Good"

CQC supports digital social care records and digitisation

Lots of support on offer now

CQC will provide better digital services for providers...

...and we'll share better information to help you improve



# What do good digital social care records look like?

Minimum requirements:

- each person using its service
- the employment of staff
- the overall management of the regulated activity.

This applies to paper and digital records. Records must be accurate, complete and up-to-date.

We routinely look at a provider's records as part of our inspection activity, focusing on:

- the information in the records
- how that information is used
- the security measures to store and share the information.

We do not endorse or recommend a specific digital social care record system.

The [Digitising Social Care](#) programme provides resources to help you when choosing a digital social care record system.

# The benefits of a good digital records system

## For people using services:

- It's easier for people to access their own records.
- People will be able to spend more time with staff and engage in meaningful interactions with them.
- When people's needs change, services will be able to respond quickly and share information with partners in their care, making care safer.
- Risks such as medication errors, dehydration or missed care visits will be minimised.

## For providers and staff:

- Recording information in real time will allow people in different locations to access and update it wherever they are.
- Staff will be able to do their job more effectively and efficiently.
- Digital systems will support effective quality monitoring of the service, enabling services to share and compare data to improve people's care.
- Storing information digitally is easier and needs less physical space.
- People's information will be handled more securely through automatic back-up of data, the cyber security of cloud-based services, and by using multi-factor authentication.

## For the wider health and social care system:

- People's information can be used across the local health and care system to make sure their care is joined up and to support the needs of the local population.
- There will be better use of resources across the local health and care system, which can help to support other important health and care functions, such as service management, planning and research.

## Working with CQC – points to consider

- We are aware that you need to meet your own data governance requirements, particularly around preventing accidental changes or loss of data. Read-only access to records means you can be confident that you can prevent accidental data changes or loss.
- If you have guest log-in details for the system, you should provide these where you and the inspection team member are confident that they can independently access the records they need to see. Where available, this should be read-only access. You should not use the log-in details (including smart cards) of anyone who is not present.
- If read-only access is not available or the inspection team member needs support to use the system, you should help them to access the records they ask to see. For example, you could have a staff member available.

## Find out more



- We are here to help you
- We are here to support you
- Sources of best practice and much more, can be found on our webpage
- <https://www.cqc.org.uk/guidance-providers/adult-social-care/digital-record-systems-adult-social-care-services>

# We want to know more - innovation

- We've been conducting innovation roundtables to learn about the great things that are happening across social care
- Understanding experiences and sharing that information is vital to the vibrant and innovative culture we want to promote and be a part of
- Adult social care are leapfrogging the NHS in adapting to innovative change
- We are talking to our regulatory counterparts across the world to hear about what they are doing
- **Engage, inspire and share**



**PainChek**

Intelligent Pain Assessment

East London NHS Foundation Trust (ELFT) rolled out a digital patient monitoring system to support the remote home management of patients with long-term conditions such as heart failure – find out [more](#).

# Our new online portal

We've created a new online portal – a one stop shop for providers.

We want to make it easier for providers to work with us and give our teams better information. The portal will be simple and intuitive and allow us to collect data in a more structured format.

Once fully launched, all providers will be able to:

- Register or apply to make changes to their registration
- Submit notifications and share information
- Manage their user accounts
- Access and update the registration data CQC holds about them



# Provider portal: in development

Care Quality Commission | Airdale General Hospital | Change location ▾ | 2 new messages | Jay Harper-Harrison ▾

Home  
Notifications  
Registration

## Welcome Jay

### Notifications

Tell us about incidents and see notification history

Notifications

### Registration


See and make changes to your registration details

Your registration

### Notification activity

Created by	Notification type	Status	ID	Date created ▾	
Jay Harper-Harri...	DoLS	Submitted	DoLSN12345	30/05/2022	⋮
Jay Harper-Harri...	Event that stops s...	Submitted	EventN12345	23/05/2022	⋮

# Provider portal: in development

CQC Provider Portal  
For health and social care in EnglandJay Harper-Harrison ▾

- Home
- Notifications
- Registration

[< Back to homepage](#)

## Notifications

Send us a new notification

**Death**  
Tell us about the death of a person using your service

**Death of detained patient**  
Death of a person detained under the Mental Health act

**Deprivation of liberty safeguards**  
Tell us when you know the outcome of a Deprivation of liberty application

**Event that stops service**  
Tell us about events that stop or may stop running the service safely

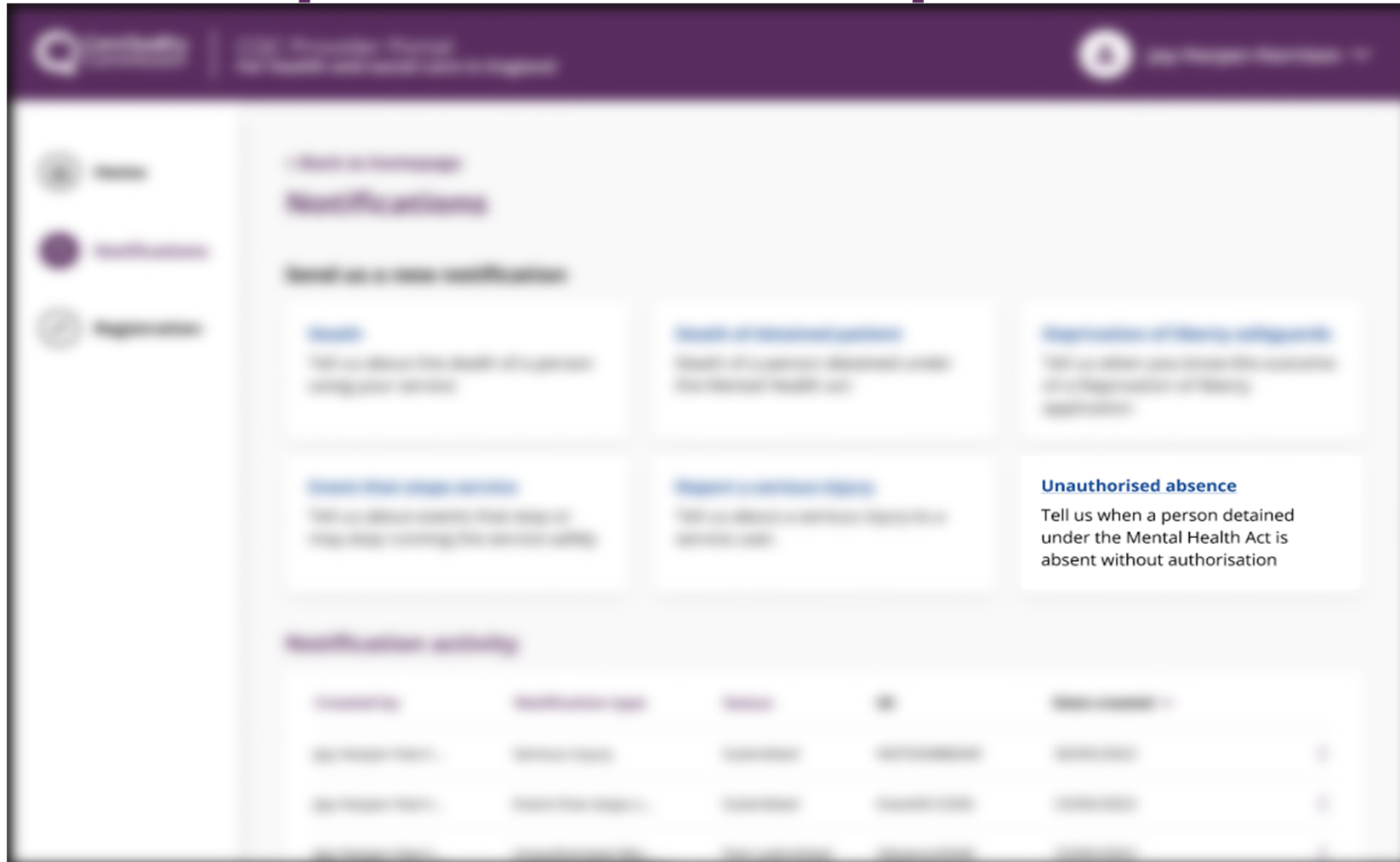
**Report a serious injury**  
Tell us about a serious injury to a service user.

**Unauthorised absence**  
Tell us when a person detained under the Mental Health Act is absent without authorisation

### Notification activity

Created by	Notification type	Status	ID	Date created ▾	
Jay Harper-Harri...	Serious injury	Submitted	NOT03488340	30/05/2022	⋮
Jay Harper-Harri...	Event that stops s...	Submitted	EventN12345	23/05/2022	⋮
Jay Harper-Harri...	Unauthorised Abs...	Part submitted	Absence3546	23/05/2022	⋮

# Provider portal: in development



# Provider portal: in development

**Notification of the absence of a person detained under the mental health act**  
Notification ID: NOT-81681670

- Your organisation
- Their location
- The absent person
- About the person
  - Physical health
  - Neurological health
  - Other health conditions
- About the absence
- Contact information
- Check your answers

### Their location

Information about the absent person's location

**Where was the person detained?**  
As you type the name a list of options will appear. Select the correct one.

**Ward name**

**Level of ward security:**

Low secure     Medium secure

High secure     Other

[Previous](#)    [Save and continue](#)

# Provider portal: in development

The screenshot displays the CQC Provider Portal interface. At the top, the Care Quality Commission logo is on the left, followed by the text 'CQC Provider Portal' and 'For health and social care in England'. On the right, a user profile for 'Jay Harper-Harrison' is shown with a dropdown arrow. A left-hand navigation menu contains three items: 'Home' with a house icon, 'Notifications' with a document icon, and 'Registration' with a pencil icon. The main content area features a large purple notification box with the text 'Notification received' and 'Your reference number NOT-814323456'. Below this, a paragraph states: 'You've told us about the unauthorised absence of a mental health patient. They have not returned yet.' A section titled 'What happens next' follows, explaining that the notification will appear in the user's history and that they will be contacted for more information. It then provides instructions: 'If the person has not yet returned, you do not have to do anything until they do so. Then you need to **complete return of a person notified as absent notification.**' and 'If the person does not return to the service but you learn of their death, **complete a Mental Health Act death notification.**' At the bottom of the notification area, there are two buttons: 'Download notification' and 'Back to home'.

CareQuality Commission | CQC Provider Portal  
For health and social care in England

Jay Harper-Harrison

Home  
Notifications  
Registration

## Notification received

Your reference number  
NOT-814323456

You've told us about the unauthorised absence of a mental health patient. They have not returned yet.

### What happens next

This notification will appear in your notification history and we'll contact you if we need any more information.

If the person has not yet returned, you do not have to do anything until they do so. Then you need to **complete return of a person notified as absent notification.**

If the person does not return to the service but you learn of their death, **complete a Mental Health Act death notification.**

Download notification | Back to home

# When these changes will happen

Now

## We'll focus on:

- Putting technology in place and testing with providers and the public
- Being confident that our new regulatory approach is ready to launch and getting our teams in place

Summer

## We'll launch our new online provider portal in stages providing support and guidance.

### We'll start with:

- Providers being able to submit statutory notifications
- We'll improve how we use information we receive from both providers and the public

Later in 2023

## We'll gradually start to carry out assessments in the new way:

- Using our new assessment framework powered by new integrated assessment teams and supported by our new technology
- Providers will be able to apply to register with us and make ongoing changes to registration through the portal
- All of our online interactions with providers will be on the portal, including enforcement activity

## In summary..

- Shaping the way that data will and can be used for the future to support better outcomes for people
- The new regulatory approach together with our new powers will be transformative in how we bring together a view of quality across a local area and help to drive improvement in care
- Our vision of being a smarter regulator means we have needed to adopt new technology platforms to allow us to be more agile, dynamic, and collaborative.
- It's important to make sure we are doing the right things at the right time – and adapting as we go.
- We'll use the voices of those involved to tell the story.



# Mark Sutton

## Chief Digital Officer

*[www.cqc.org.uk](http://www.cqc.org.uk)*

*[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)*

 [@CQCProf](https://twitter.com/CQCProf)

 [youtube.com/user/cqcdigitalcomms](https://youtube.com/user/cqcdigitalcomms)

 [facebook.com/CareQualityCommission](https://facebook.com/CareQualityCommission)



# Refreshment break and Market place

#BLMKdigitalhealth2023

Please return by 11.15





# Anda Marin

Registered manager  
Burlington Hall



# Introduction to Burlington Hall



## Background of Burlington Hall

Based in Woburn Sands, surrounded by Woburn and Bow Brickhill woods, Burlington Hall is part of the Adara healthcare group. Burlington Hall has a capacity of 53 single rooms, all equipped with ensuite facilities.

Soon after I started as the care home manager at Burlington Hall in October 2019, I found out how important data protection and cyber security are in a care home. This happened in 2020 when Paul Underwood introduced us to the data security and protection toolkit (DSPT) and that is when this exciting journey started.

## Digital Transformation

Engaging with the digital transformation has enabled our home to be equipped with state of the art technology, aiding our residents to a great extent.

# Data Security Protection Toolkit



**The Data Security and Protection Toolkit (DSPT)** - Helps you ensure you store and use people's data securely. Shows you how to keep people's information safe and protect your organisation from risk. Enables you to have secure email to exchange information directly with GPs and other healthcare services.

- Completing the DSPT has made us all aware at Burlington Hall the importance of maintaining and complying with the data security and protection requirements of a healthcare organisation.
- We completed this process alongside our IT company to maximise the level of digital and cyber security within the organisation. The templates that the Digital Social Care website provides are useful and accessible to use and aided our completion of the DSPT.

# Whzan Kit/Blue Box

**Whzan Blue Box** – contains everything needed to enable staff to make regular health checks on their residents.

- Measurements such as heart rate, blood oxygen levels, temperature and blood pressure can be taken with the kit.
- It also works out the National Early Warning Score (NEWS2) to check if someone who is already ill is becoming worse.

**Benefits:** The Whzan kit/Blue Box electronically transfers information from each machine onto our tablet.

“It is extremely useful for staff to have, especially if a resident is unwell, or a new resident comes to the home. Since Covid, something like this to use has become more important.” - **A resident who was a psychiatric & general nurse in the NHS for over 40 years**



# Raizer chair



**Raizer II** is an emergency chair that's put together around a person to lift them from the floor after a fall when they haven't been injured.

After the success of having the Raizer Chair at BH, we now are lucky enough to have **two** Raizer Chair's in the home. In the unfortunate event that a resident has a fall, the use of the Raizer Chair to safely manoeuvre them off the floor and into a comfortable position.

Here is what some of our residents have had to say about it:

- 'The staff members have used the Raizer Chair previously to help me after I unfortunately had a fall. I think it is very good to have in the home as for me, it is not always as easy to get up a fall as it has been in the past'- **JG (resident at BH for over 8 years)**



# NHS Mail

**NHS mail** – a secure email system. Hospitals increasingly require this as the only method by which they will share information with care providers.

The use of NHS Email gives us secure access and enables us to communicate efficiently with other NHS professionals throughout Milton Keynes.

## Resident/staff feedback

'NHS email is easy to use and lets us communicate with the GPs and other healthcare workers regarding the residents.'

'NHS email enables us to discuss resident details with healthcare professionals securely. It is straightforward to use.'



# Acoustic monitoring



**Acoustic Monitoring** uses sensors and artificial intelligence to monitor care home residents when alone in their rooms during the night. The system alerts staff instantly when residents require care, freeing staff from time-consuming regular checks that often wake up sleeping residents.

## Benefits

The use of acoustic monitoring during the night has allowed night staff to ensure the safety of the residents whilst sleeping, without disturbing them or waking them up unnecessarily. The sensor will detect movement from the resident in the night that will prompt staff to check on the resident if required.

The potential this technology has is extensive, with the opportunity it provides for the constant monitoring of residents. This piece of technology gives family, staff, and resident's peace of mind.

'Acoustic monitoring has been a great help in ensuring the safety of the residents without disrupting their usual sleeping patterns. It is easy to use and reduces the likelihood of resident falls during the night' - **MK (Night Manager)**

'Acoustic monitoring has been put in my mum's room and it means she doesn't get disturbed during the night when it is not needed. When she was in an Assisted Living Facility, she was at a higher risk of fall because she only wanted to be checked on once in the night as she didn't like being disturbed' - **KS (daughter of resident & NHS nurse)**

# Proxy access



**Proxy Access** is a secure way for staff with the correct approval to carry out safer, easier and quicker ordering of repeat medicines on behalf of care home residents using a direct link to a resident's GP records.

The use of System One & Proxy Access has allowed staff members to check residents' test results easily, as well as requesting medication quickly and efficiently.

'SystemOne also allows us to send GP requests for residents if we have any concerns. We can send pictures of anything that concerns us too so that the doctor can review it.'- **MK (Night Manager)**

'SystemOne allows us to order medication for the residents quickly. I can say it is definitely much easier and a better process for us at Burlington Hall now'- **TN (Team Leader)**

The continued support and encouragement from Paul made the set up of this system easy.

# Contact details



Anda Marin

Care Home Manager

Mobile: 07445 485 468

Work: 01908 533 337

Email: [manager.burlingtonhall@adaragroup.co.uk](mailto:manager.burlingtonhall@adaragroup.co.uk)

[www.adarahealthcare.co.uk](http://www.adarahealthcare.co.uk)

Burlington Hall

9 Station Road, Woburn Sands

Milton Keynes, MK17 8RR



1st Homecare

# 1<sup>st</sup> Homecare

John Rennison

## Our Digital Journey

# Early days

- We bought 1<sup>st</sup> Homecare, a Home Care Provider in Leighton Buzzard in 2012 with the following systems:
  - paper rotas for carers – delivered by hand or posted
  - paper payslips
  - paper rotas for clients delivered or posted to clients
  - paper daily record sheets- gathered monthly, audited and filed in cabinet
  - paper care plans & risk assessments
  - paper MAR charts
  - paper supplier invoices filed in a cabinet
  - paper notes recording conversations with clients and their families
  - Post it notes, lost paperwork, shredding, offices full of cabinets, scanners, copiers etc

## And then:

- We subscribed to a new Rota system (2012)
- Added logging in and out using phones for carers (2013)
- Scanned electronic daily record sheets onto dropbox (2014)
- Then we bought two more care providers (in Oxfordshire and Hertfordshire (in 2016 & 2018)) and put them on the same systems
- Then added a care management system allowing for digital care plans, digital task lists for carers and instant digital update of care records to the office allowing management of care to take place in the office (in 2019).

## And....

- Introduced eMAR charts (2020)
- Introduced 'next of kin' app allowing family of clients to access visit records as soon as they are performed (including all details of clients eg what was eaten at last meal, mood of client, progress re any previous concerns etc (2020)

## So what..

- Lots of benefits which make life easier for staff and at lower cost (which could be analysed in more detail) but, **most importantly**, how do the client and family benefit?
  - The app provides extra peace of mind to family - CARING
  - Carers can spend more time caring and less time hand writing care records - CARING
  - Care records are filed digitally so less scope for mis-filing (eg Smiths and Jones) and less scope for lost records (in the boot of the car owned by a carer who has just left the company) EFFECTIVE
  - eMAR charts can be sent to social workers, doctors etc when required – simply send as a pdf. - SAFE
  - Care issues are seen and dealt with more quickly - RESPONSIVE
  - Carers feel better valued when their concerns are seen to be dealt with more quickly. WELL LED

## And we finally now have....

- three offices and a Live-in service providing care to 180 clients across 4 counties – all with the following identical systems:
  - Electronic carer rotas
  - Electronic payslips delivered to a secure app on carers' phones.
  - Electronic client rotas sent by email.
  - Electronic daily record sheets
  - Electronic care plans and risk assessments
  - Electronic MAR charts – available as pdfs when required.
  - Electronic supplier invoices filed in dropbox
  - Electronic notes recording conversations with clients and their families
  - All data can be accessed from any office (or home)

# Security

- In the paper era we needed secure offices, secure cabinets, and fire and burglar alarms. These types of security are now largely obsolete.
- Instead we need to protect the company's and clients' data and to help us do that is the Data Security Protection Toolkit (DSPT).
- This is a questionnaire designed to make you think about all aspects of data security – back-ups, 3<sup>rd</sup> party software, passwords, firewalls, encrypted emails etc
- Help is available with local Care Provider Associations. No prizes, no awards just certification to give some comfort that you have questioned and addressed your data security issues.

# Funding

- Government has provided funding (50% of installation costs and 1<sup>st</sup> year running costs) through Digital Social Care for Care providers (Homecare and care homes) for migration to a new Care management system.
  - Different ICBs have different eligibility criteria (we were able to obtain funding in Oxfordshire for migration from an existing platform to a newer, better platform, but other ICBs only provide funding of moving from paper to digital platforms).
  - Care management providers must be on the Assured list (as per Digital Social Care)
  - Must have DSPT certification
- <https://www.digitalsocialcare.co.uk/funding-opportunities/adult-social-care-digital-transformation-fund/>
- <https://www.digitalsocialcare.co.uk/social-care-technology/digital-social-care-records-dynamic-purchasing-system/assured-solution-list/>

## Comments from clients (as published in Homecare.co.uk)

The assessor has kept in regular contact making sure everything is okay and **I find the app a real bonus** as I can keep an eye on Mum while I'm at work. *Helen C Nov 2021*

**There is an app families can use** to see notes from each visit, which is brilliant. I would highly recommend 1st Homecare. *Annabel H, Feb 2021*

Communication has been spot on, with helpful advice, weekly rotas and information updates **via the app (easy to use)**. *Sue S, May 2023*

## Comments from clients (as published in Homecare.co.uk)

The assessor has kept in regular contact making sure everything is okay and **I find the app a real bonus** as I can keep an eye on Mum while I'm at work. *Helen C Nov 2021*

**There is an app families can use** to see notes from each visit, which is brilliant. I would highly recommend 1st Homecare. *Annabel H, Feb 2021*

Communication has been spot on, with helpful advice, weekly rotas and information updates **via the app (easy to use)**. *Sue S, May 2023*

The **online app worked** very well so that I could see what the carers had done on a daily basis and it was a good method of communication. *Sally C Nov 2021*

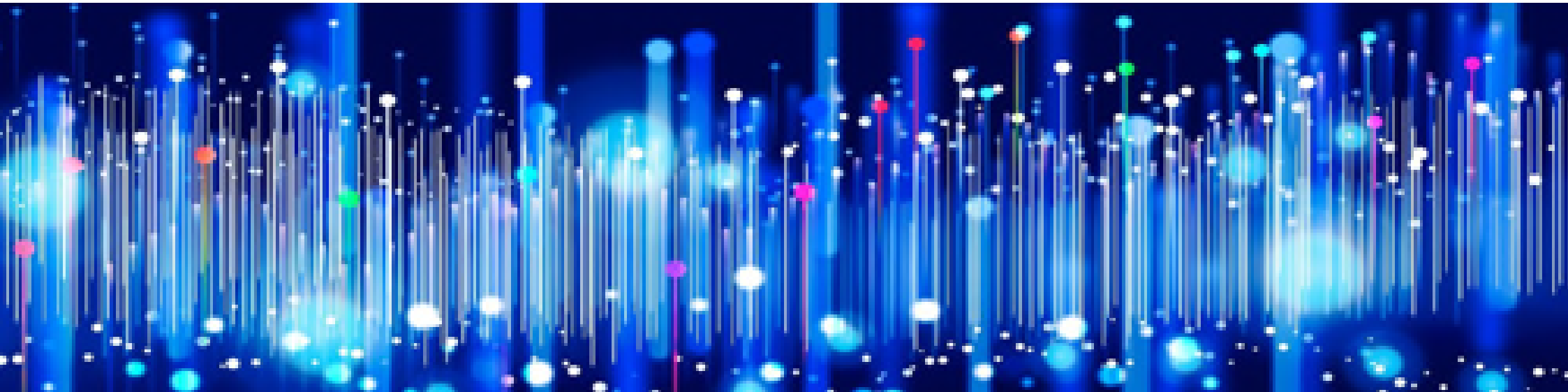
# Summary

- Digital is definitely the way to go. Yes, there are costs but the benefits outweigh the costs.
- Take a step-by-step approach – as we have done.
- Don't delay – it's easier than you think. Systems are getting more intuitive and even 60 year olds have their own smart phones so won't be too scared of change.
- Do go through the DSPT to ensure you have minimised your risks.
- Do apply for funding for new care planning systems.

# Digitising Social Care

NHS England Programme

Caroline Day



# People at the Heart of Care



On the 1 December, The Department of Health and Social Care published the White Paper [People at the Heart of Care](#) which outlines the 10-year vision for the reform of the sector.

The White Paper recognised that when technology is embedded seamlessly into care and support services, it can help people to live happy, fulfilled lives in their homes and communities.

To support this goal, and the government's wider ambitions for reform, the White Paper committed to **invest at least £150m** in digitising the social care sector.



# Why digitise?

CARE NHS

46% of care providers are still working from paper care records.

These providers are missing the benefits of digitising including supporting **high quality** and **safe care**, improving the **efficiency** and **freeing up precious time** with people by **reducing administrative tasks**.

```
31 def __init__(self, settings):
32     self.file = None
33     self.fingerprints = set()
34     self.logdupes = True
35     self.debug = debug
36     self.logger = logging.getLogger(__name__)
37     if path:
38         self.file = open(os.path.join(path, 'records.txt'),
39                         'w')
40         self.file.seek(0)
41         self.fingerprints.update(e.strip() for e in self.file)
42
43 @classmethod
44 def from_settings(cls, settings):
45     debug = settings.getbool('debug', False)
46     return cls(job_dir(settings), debug)
47
48 def request_seen(self, request):
49     fp = self.request_fingerprint(request)
50     if fp in self.fingerprints:
51         return True
52     self.fingerprints.add(fp)
53     if self.file:
54         self.file.write(fp + os.linesep)
55
56 def request_fingerprint(self, request):
57     return request_fingerprint(request)
```

# Why are we here?

**CARE** **NHS**



- Meet Beryl
- 93 years old, lived at home independently
- Partially sighted and mobility issues
- Fell and broke her left hip and fractured her wrist
- Admitted to hospital for 14 weeks, unable to see family and friends
- Returned home with care visits 4 times a day
- Within 4 days of discharge, fell and broke her right hip, and the cycle starts again...

# Why are we here?

**CARE** **NHS**

- Within 4 days of discharge, fell and broke her right hip, and the cycle starts again...
- During the pandemic Beryl moved to a Care Home
- The home did not have technology to support Beryl to keep in touch with her family
- Beryl's behaviour changed and her mental and physical health deteriorated
- ... and then the home started to support the use of devices including iPad, touch tables and robopets.



# Why are we here?



- Acoustic monitoring to help in managing night time checks
- Robo-companions to support in reducing isolation and loneliness
- Electronic care planning to help communicate care needs, evidence care given and identify trends

# Why are we here?

# CARE NHS





Quick and easy to input data and find information on individuals - all in one place



Graphs, charts and reports can be automatically produced reducing some administrative tasks/time



The data you provide informs the right people, at the right time to respond to changing needs of the people you care for



Prompts and alerts will further enable personalised and consistent care provision



Supporting or improving digital skills confidence



“In Hampshire and Isle Of Wight ICS, we have already seen unprecedented benefits to providing our care homes with secure access to our HIOW DSCR (CHIE). **Care homes can review new and existing admissions, test results, and meds and allergy detail. This often prevents the need to call the hospital or get stuck on the phone trying to call the GP,** and then the time spent time discussing details with them. This is a time saving for the care workers, and the GP’s enabling more time care.”

- “Do you have a digital social care record system?”  
now part of annual return to CQC
- National team working with CQC to develop a minimum data set for social care – data will be available through all DSCR suppliers on the assured provider list
- Sharing evidence base for DSCRs with the CQC to demonstrate impact on quality of care



# What next?

- Up to 50% Grant funding being made available to support the adoption of digital social care records
- Grant application form is available to complete now
- Choose from a list of Assured Suppliers
- Resource, support tools and templates available to help you on your journey
- **This is a time limited offer from NHS England**

**CARE** **NHS**



# BLMK ICB Care Home Medicines Optimisation Team

Sharon Tansley, Care Home Pharmacy Technician

Kasia Wolska, Care Home Pharmacy Technician

Meet the Team - NHS BLMK ICB Care Home Medicines Optimisation Pharmacists & Pharmacy Technicians



Bedford Borough Place

Team Email:  
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Lindsey Jones  
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Luton Place

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Kaylie McNaughton  
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Tel: TBC



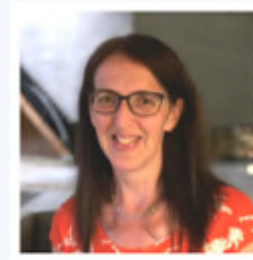
Lisa Woods  
Care Home Pharmacy Technician  
[lisa.woods5@nhs.net](mailto:lisa.woods5@nhs.net)  
Tel: 07557 084888



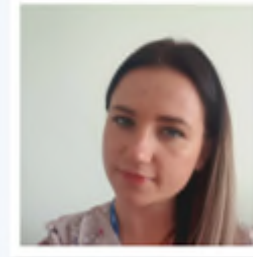
Milton Keynes Place

Team Email:  
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Hazel Gervais  
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Tel: 07765 254188



Kasia Wolska  
Care Home Pharmacy Technician  
[k.wolska@nhs.net](mailto:k.wolska@nhs.net)  
Tel: 07901 755443



Please send details of your query/referral to the relevant area's team email address (no proforma required). Individual contacts can be used if needed.

Emails are monitored Monday—Friday, 9am—5pm (excluding Bank Holidays) and will be triaged to the most appropriate member of the team.

*Patient identifiable details should ONLY be sent from and to secure email addresses (e.g. NHS.net to NHS.net).*

More information, guidance documents & newsletters can be found on the [BLMK ICB Care Home Medicines Optimisation \(MO\) team website](#).



# Our role



- Supportive – the ICB is not a care home regulatory body.
- Work alongside the ICB Quality Team and/or Local Authority:
  - Routine visits to care homes including joint visits with the ICB Quality Team
  - Attendance at meetings (e.g. LA intelligence sharing and serious concerns meetings)
  - Performing visits to care homes as a result of concerns
- Work alongside PCNs / practices, for example:
  - Performing complex structured medication reviews (SMRs)
  - Clinical queries / Medicines Information
  - MDT / best interests meeting attendance

# Our role – Supporting Care Homes



Individual GP practices should be the primary contact for care homes, however the ICB Care Home Medicines Optimisation Team can offer support for issues such as:

- Reviewing and improving medicines management processes in care homes
- Observation of medication administration rounds and subsequent advice
- Medication supply provision issues & communication
- Homely remedies & Self-care support
- Care home staff training



# Our Training Offer for Adult Social Care – Tiered System

1

- Medication eLearning – PrescQIPP

2

- Online Medication Training Sessions – BLMK ICB

3

- Medication Champions Scheme

# BLMK ICB Care home Medicines Optimisation team

## Training offer to care homes – Tier 1



### Tier 1 – Medication eLearning:

- Hosted by [PrescQIPP](#) (Skills for Care and NICE endorsed)
- Fully funded by BLMK ICB and free of charge to care home staff across BLMK
- Provides foundation knowledge in medicines management within social care and supports the implementation of recommendations in the [NICE guideline SC1 \(Managing medicines in care homes\)](#)
- Staff to complete the eLearning courses entitled - '[Medicines use in care homes: courses 1, 2 & 3](#)'
- For more information and access instructions please see our [logon guide](#) and [Tier 1 Flyer](#)



# BLMK ICB Care home Medicines Optimisation team Training offer to care homes – Tier 2



## Tier 2 – Online Medication Training Sessions

- Provided by the BLMK ICB Care Home Medicines Optimisation team, free of charge
- On the selected topics below and will focus on local guidance and procedures:
- No booking required – MS Teams links can be found on [Tier 2 flyer](#)

Homely Remedies & Self-Care	Tuesday 23 <sup>rd</sup> May, 14:30 – 15:30
When Required (PRN) Medication	Wednesday 12 <sup>th</sup> July 2023, 14:30 – 15:30
Covert Administration of Medication	Tuesday 12 <sup>th</sup> September 2023, 14:30 – 15:30
Medicines Reconciliation & Transfers of Care	Wednesday 15 <sup>th</sup> November 2023, 14:30 – 15:30
Controlled Drugs (CDs) & Regulations in Care Homes	Tuesday 23 <sup>rd</sup> January 2024, 14:30 – 15:30
Medication Safety, Governance & Safeguarding	Wednesday 13 <sup>th</sup> March 2024, 14:30 – 15:30

## Tier 3 – Medication Champions Scheme – COMING APRIL 2024



# Our resources

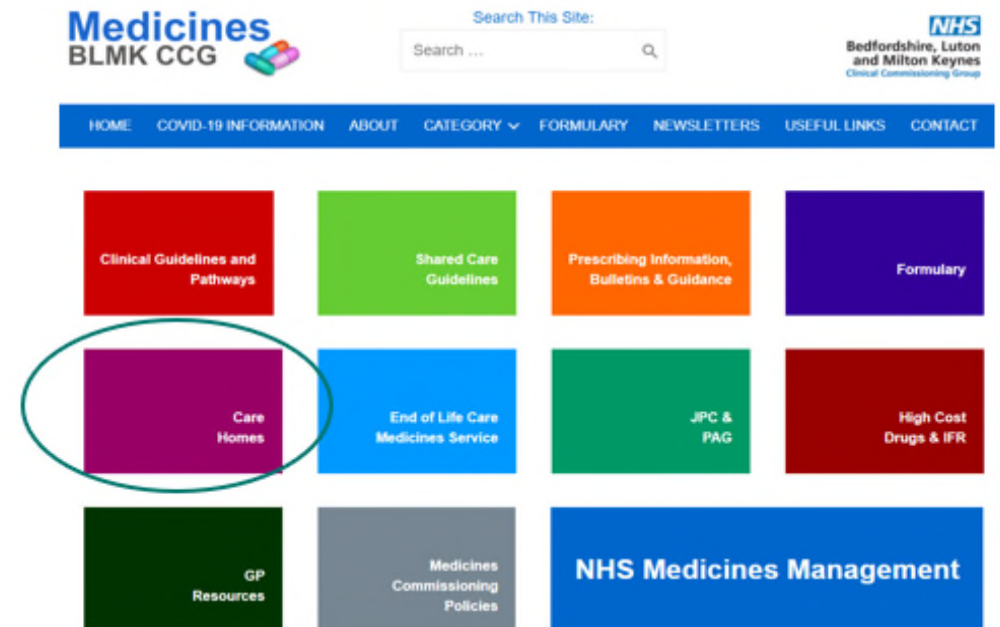
BLMK ICB Medicines website - [BLMKICB Medicines Management](#)

Care Homes page (purple box):

[Care Homes – BLMKICB Medicines Management](#)

## Key Documents:

- Care Home team Service Referral Pathway
- Homely remedies toolkit and First Dressing scheme
- Covert Administration guidance
- “When Required” PRN Medication guidance
- Self Care Toolkit for Care Homes
- Expiry dates for medication guidance
- Meds room and Fridge temperature guide
- Falls documents – leaflet and poster
- Care Home Newsletters



The screenshot shows the homepage of the BLMK CCG Medicines website. At the top left is the logo for 'Medicines BLMK CCG'. To its right is a search bar with the text 'Search This Site:' and 'Search ...'. Further right is the NHS logo and the text 'Bedfordshire, Luton and Milton Keynes Clinical Commissioning Group'. Below the search bar is a blue navigation menu with the following items: HOME, COVID-19 INFORMATION, ABOUT, CATEGORY (with a dropdown arrow), FORMULARY, NEWSLETTERS, USEFUL LINKS, and CONTACT. The main content area features a grid of colored boxes representing different resources. The 'Care Homes' box, which is purple, is circled in green. Other boxes include 'Clinical Guidelines and Pathways' (red), 'Shared Care Guidelines' (green), 'Prescribing Information, Bulletins & Guidance' (orange), 'Formulary' (dark blue), 'End of Life Care Medicines Service' (light blue), 'JPC & PAG' (teal), 'High Cost Drugs & IFR' (dark red), 'GP Resources' (dark green), 'Medicines Commissioning Policies' (grey), and 'NHS Medicines Management' (blue).

# Lunch and Networking

#BLMKdigitalhealth2023

- Please return 13:00





## **Clare Steward**

Programme Director

(Digitising Social care and ICS  
Strategic Data Platform)

Bedfordshire, Luton and Milton  
Keynes ICS

- What is on offer to providers in BLMK

# Digital Projects across BLMK – current initiatives

- Better Security Better Care – DSPT / NHSmail/Proxy Access
- Solcom – Whzan
- Felgains – Raizer Chair
- Allycare – Acoustic Monitoring
- MiiCare
- Smplicare

# An introduction to Better Security, Better Care



**DSPT**

Better security.  
Better care.

**Stephanie Johnson**

Engagement Manager

Better Security, Better Care/Digital Social Care

# Digital Social Care



**DSPT**  
Better security.  
Better care.

Run by social care providers for social care providers.

**Digital Social Care** is a dedicated space to provide **advice** and **support** to the sector on technology and data protection.

[Read More >](#)

[Contact Us >](#)

Made up of several membership organisations to support the care sector.

Regular masterclass webinars.

Special Interest Group.

Free advice and guidance to adult social care on all things digital.

Fortnightly newsletter with all the latest updates – stay in touch 😊

# Better Security, Better Care



**DSPT**  
Better security.  
Better care.

- We're funded by the Department for Health and Social Care.
- We provide completely **free** support to care services on data and cyber security issues.
- We're part of Digital Social Care.



# You're using more data and tech



**DSPT**  
Better security.  
Better care.

**88%**

**Registered managers** said there has been greater use of digital technology since Covid

**90%**

**Care providers** thought they would continue to use technology in the same way as during the pandemic

# Future policy direction is clear



**DSPT**  
Better security.  
Better care.

“£150m to drive technology and digitisation across social care”

“Comprehensive digital learning offer... to **build transferrable digital skills**”

“By March 2024, at least 80% of social care providers have a **digitised care record**”

# Prepare for the future



**DSPT**  
Better security.  
Better care.

What information do you use and share?

How can digital tech help manage that information?

What policies, procedures and practices do you have in place to store and share information safely?

Check and update your arrangements with the **Data Security and Protection Toolkit**.  
**Get free expert support.**

A cyber attack is any incident that you can face as an organisation



DSPT  
Digital Security  
Protect Your Data



DSPT  
Digital Security  
Protect Your Data



# Complexity of small, modern organisations



**DSPT**  
Better security.  
Better care.

- Emails
- Mobile devices
- Websites
- Social media
- Ecommerce systems
- Online banking
- BYOD and office policy
- Network management
- Backup and remote access



# Use the Data Security & Protection Toolkit



**DSPT**  
Better security.  
Better care.

- A comprehensive way for you to check and improve your policies, processes and procedures.
- The time will come when CQC will be requiring data to be available digitally – you will need good data protection procedures in place, and the DSPT can help with that.



# Your fellow travellers



**DSPT**  
Better security.  
Better care.

Better Security,  
Better Care -  
National support  
and resources



Better Security,  
Better Care -  
Local support



Template Policies  
and Resources for  
DSPT



Check your DSPT  
status



Use the DSPT for  
the First Time



Published Before:  
Review and  
Republish your  
DSPT



Free and official  
Online guidance, step by step films  
Webinars  
FAQs  
Template policies  
Helpline  
Tailored support from 28 Local  
Support Partners across England

[digitalsocialcare.co.uk/bettersecurity](https://digitalsocialcare.co.uk/bettersecurity)  
[bettercare](https://digitalsocialcare.co.uk/bettercare)

# 2 years of Better Security, Better Care



**DSPT**  
Better security.  
Better care.

**DSPT**  
Better security. Better care.



**30% more homecare providers are using the DSPT than two years ago**

- 12,000 more care services using DSPT than in 2021
- 80% of nursing homes use the DSPT
- 70% of care homes use the DSPT
- Better Security, Better Care might not be here forever – access support whilst it's available and free.

Source NHS Digital, Digital Social Care Data on file



# The Data Security & Protection Toolkit: What, Why, How?

**Cheryl Stimson**

Local Support Partner

Better Security, Better Care



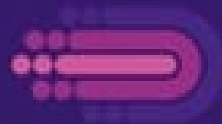
**DSPT**

Better security.  
Better care.

# Better Security, Better Care.

with the

## Data Security and Protection Toolkit



Digital  
Social Care



# The Data Security & Protection Toolkit



**DSPT**  
Better security.  
Better care.

- Annual self-assessment – if you missed the June deadline, keep going.
- Covers both **paper** and digital records
- Relevant to **all** CQC registered care services – size, structure and service type doesn't matter

# How will the DSPT help you?



**DSPT**  
Better security.  
Better care.



< It will help you reassure people who use your services and their families, and your staff that you keep data safe, and share it appropriate and securely



It will help protect your business from the risk of being fined for a data breach and from the disruption of a cyber attack



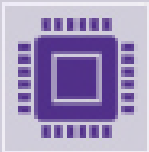
It gives guidance so that you can practice good data security and be sure that personal information is handled and processed correctly



# The DSPT & Insurance Claims



**DSPT**  
Better security.  
Better care.



The DSPT is an excellent tool to show insurance companies that you are serious about data breach prevention (and cyber in general).



It can lower premiums and speed up pay-outs if the worse does happen as you have a to-hand report of “here’s how seriously we protect our systems and train our staff”.



You can allow the insurer a temporary “viewer” account or print-out and they have read-only access to your DSPT.

# CQC and DSPT



**DSPT**  
Better security.  
Better care.

Better record keeping and accountability assist with CQC regulatory compliance.

- **Caring - KLOE C3.3** - How are people assured that information about them is treated confidentially in a way that complies with the Data Protection Act, and that staff respect their privacy?
- **Well-Led - KLOE W2.8** - How does the service assure itself that it has robust arrangements (including appropriate internal and external validation) to ensure the security, availability, sharing and integrity of confidential data, and records and data management systems, in line with data security standards? Are lessons learned when there are data security breaches?

# Access to shared systems



**DSPT**  
Better security.  
Better care.

Achieving 'Standards Met' on the DSPT opens up:

- GP Connect
- Local shared care records
- Proxy access to GP records
- Proxy access for medication ordering
- Summary care records
- NHSmail (can be accessed at 'approaching standards')

# Local Support Organisation



**DSPT**  
Better security.  
Better care.



Each area in England has a Local Support Partner who provide expert, tailored support for care services completing the DSPT.

## Better Security, Better Care – Local Support Partners

Home > Data Protection and Cyber Security > Better Security, Better Care. > [Better Security, Better Care – Local Support Partners](#)

The following organisations are acting as Better Security, Better Care Local Support Partners. They support local care providers to improve their data and cyber security, and complete the [Data Security and Protection Toolkit](#) .

*\*These organisations are also providing regional coordination.*





# Testimonials



**DSPT**  
Better security.  
Better care.

## **DSPT**

Better security. Better care.

"I urge everyone to use the DSPT and view it as the final checklist for ensuring they have all the necessary data protection safeguards in place. You can reassure your customers and your employees that their information is safe."

### **Nick Griffiths**

Head of Learning & Development,  
Bluebird Care



Service type, structure and size doesn't matter – everyone can use the DSPT.

You're not alone – free national and local support to help you through.

In 2 years, we have seen a four-fold increase in care services using the toolkit.

# Next steps



**DSPT**  
Better security.  
Better care.

1. Register on the DSPT
2. Contact your [Local Support Partner](#) or the Digital Social Care helpline [help@digitalsocialcare.co.uk](mailto:help@digitalsocialcare.co.uk) Tel [0808 196 4848](tel:08081964848)
3. Large providers – Contact Digital Social Care [help@digitalsocialcare.co.uk](mailto:help@digitalsocialcare.co.uk)
4. Check out the guidance on Digital Social Care
5. Start to answer questions on DSPT now – return to it later

[www.digitalsocialcare.co.uk/bettersecuritybettercare](http://www.digitalsocialcare.co.uk/bettersecuritybettercare)

Twitter [@DigiSocialCare](https://twitter.com/DigiSocialCare)

# BLMK Support



**DSPT**  
Better security.  
Better care.



• BLMK - Cheryl Stimson

[SCHHServicedevelopment@centralbedfordshire.gov.uk](mailto:SCHHServicedevelopment@centralbedfordshire.gov.uk)

Tel: 0300 300 5176

<https://dspt.bedscaregrouppltd.co.uk/>



Central Bedfordshire- James Dawson

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Bedford Borough- Terry Wright

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Milton Keynes- Paul Underwood

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Tel:07920 146730



Healthcare  
Care Home  
Care Home

telgains

# How BLMK ICS is Improving the Outcomes of Falls in Care Homes With The Raizer Chair

<https://www.youtube.com/watch?v=cqBJBck2SX0>

[How BLMK ICS is  
Improving the Outcomes  
of Falls in Care Homes  
With The Raizer Chair -  
YouTube](https://www.youtube.com/watch?v=cqBJBck2SX0)



# Whzan Systems in Health and Social care

**Blue Box - Telehealth**



Care homes  
LTC at home  
Dom care  
APHC Check kits  
Virtual Wards

**Guardian – Activity and Falls**



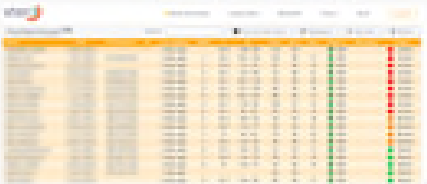
Smart things monitoring frail people at home and in care homes including Radar / Acoustic Monitoring

**WhzApp**



Supporting multiple conditions  
Step up/down to Blue Box  
Virtual wards  
Informal care network access.

**Cloud Dashboard**



Clinician interface, triage, reports, alerts, configuration...

**Interoperability**

FHIR Interface  
111 Adastra, EMIS, SystemOne, PARIS, Rio, NRL, PDS, regional EPRs, CIS2...

**Informal Care Networks**

Loved ones sharing the burden of care



**Cares – Digital Social Care Record**  
Care home social and health management system

# Blue Box



Bluetooth / Wi-Fi / 4/5G

- BP
- SpO2
- Thermometer
- HbA1c, Lipids, Glucose...
- Scales
- ECG
- Stethoscope
- Spirometer
- Reagent Strip
- Photos
- Video Conf
- Wearables

## NHS Assessments

- NEWS2
- Soft Signs
- SBARD
- Lifestyle (APHC)
- Hydration
- Oral Health
- Falls Risk
- Pain
- Head Injury
- Postural
- Change in mood
- Covid-19
- Significant 7+
- I-STUMBLE™
- LTC - COPD, CHF...
- Pre-HAB

Simple pricing model, includes unlimited use, patients, training and support

+44 1983 817000



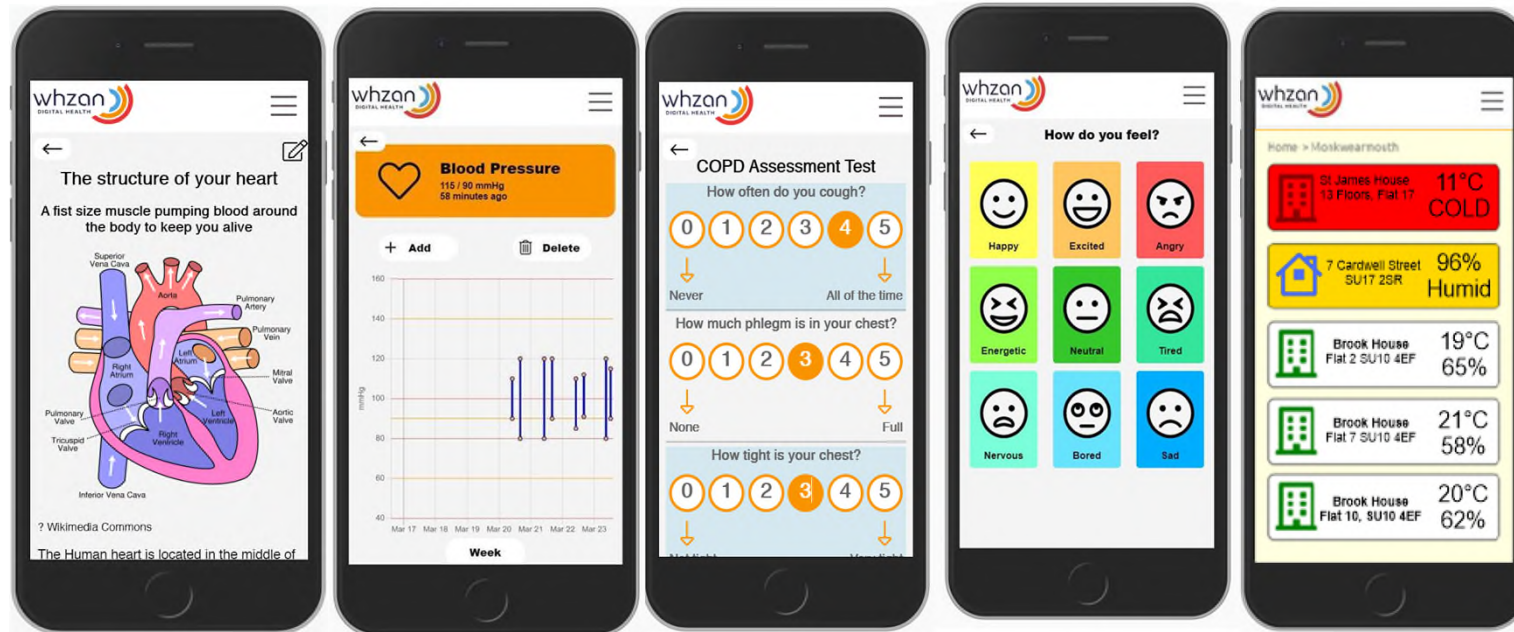
whzan.com

# Whzan Wearable



- Configurable interval readings and automatic NEWS2 calculation.
- Working very well in trials, can be worn day and night, 7 day charge interval.
- BP is approximated, NEWS2 – Air/O2 set from dashboard.
- Not a medical device, but working on frail patients that cant use Blue Box.

# WhzApp



- WhzApp library supports: COPD, asthma, falls, hypertension screening, heart failure, diabetes, SpO2 / BP @home, osteoporosis, continence, long covid, physio, physical activity monitoring, cold and damp homes, shared with loved ones.

# Guardian



## Monitoring

- Movement
- Falls
- Doors
- Appliances
- Environment
- GPS Tracking

## Smart devices

- Bulbs
- Blinds
- Locks
- Alexa...

- Battery powered (+1 year)
- IoT - Broadband / 4/5G hub
- LoRaWAN (no home infrastructure)
- 4/5G - Wearable GPS

## Family & Friends App



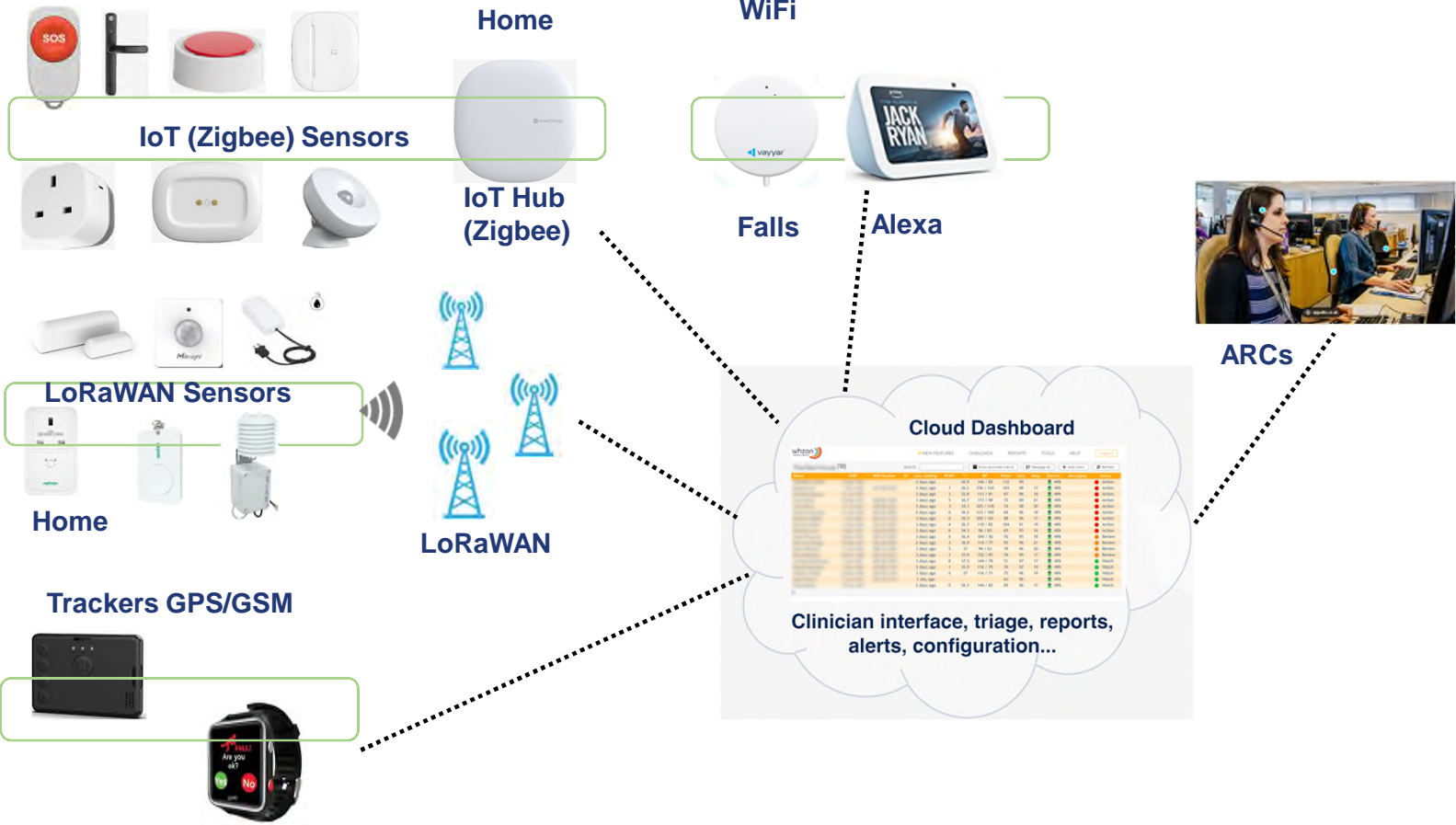
## Social Care Website

## AI Reports

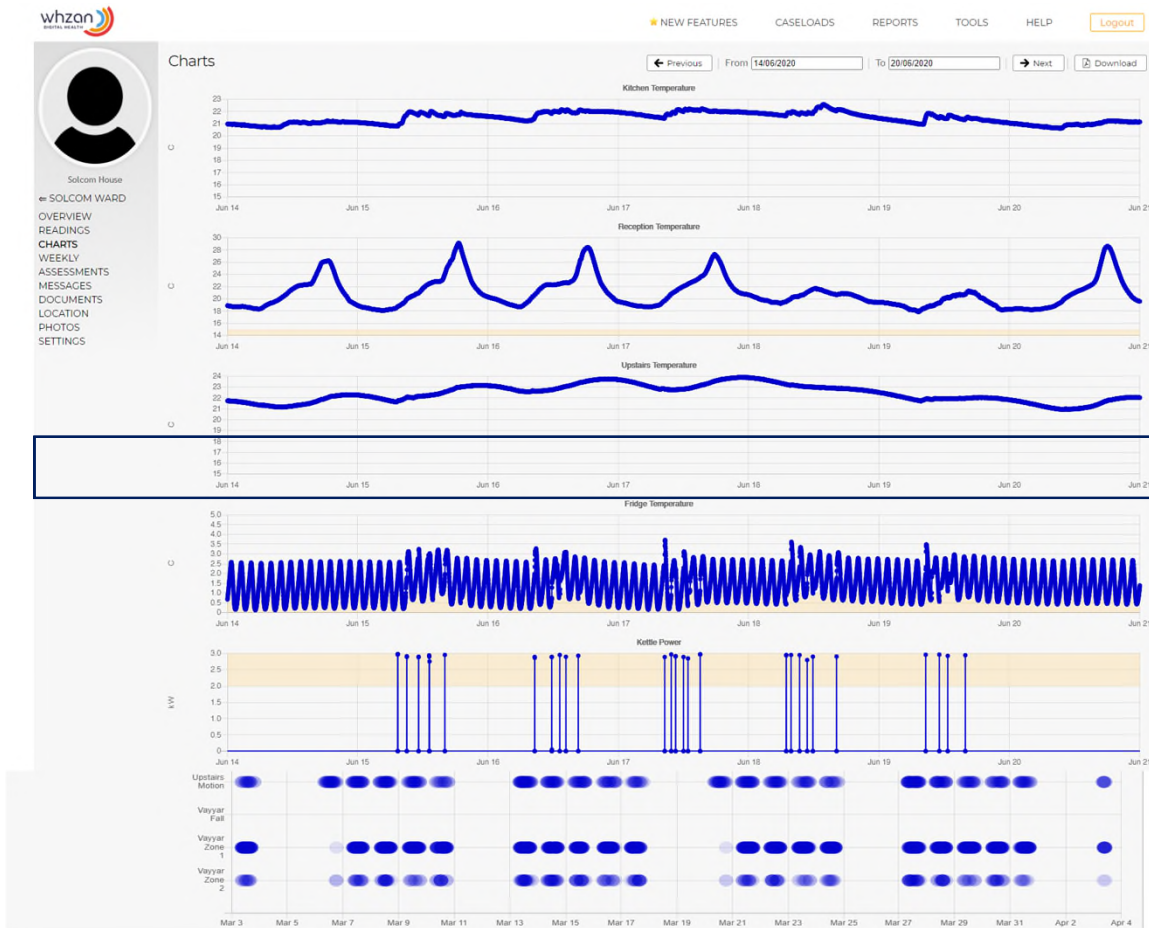


# Guardian Systems

Broadband / GSM



# Guardian - Dashboard



# Guardian - Reports

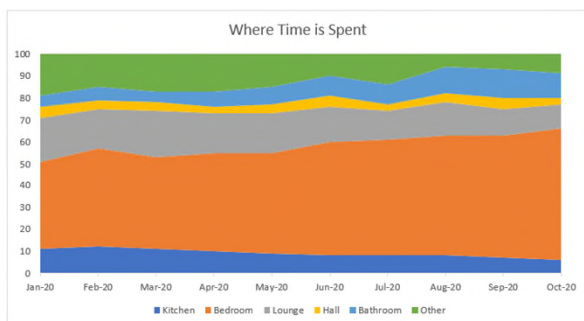


Sunderland Connected City

## SHEILA – Activity Monitoring Report

Resident ID: A123456  
 Name: Keith Chessell  
 Allocated Worker: Dave Young  
 Allocated Team: Social Care  
 Report Date Range: Jan 20 – Oct 20 (10 months)

Movement and activity data for this resident for the period Jan 20 – Oct 20



The trends for the period reported Jan 20 – Oct 20 shows:

They are spending less time in these rooms than before	They spend about the same time in these rooms	They are spending more time in these rooms than before
Lounge	Hall	Bedroom
Kitchen		Bathroom
Other		

### Health Indicators:

A reduction in time spent in the kitchen might mean that they are not eating or drinking as well.

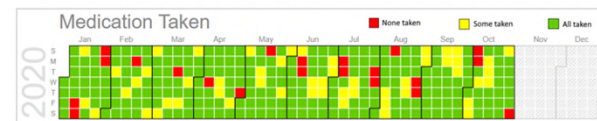
An increase in time spent in the bedroom and bathroom may indicate growing health issues.

Sunderland Connected City

## SHEILA – Activity Monitoring Report

### Medication Record

Medication record for this resident for the period Jan 20 – Oct 20



	First half of period (Jan 20 – May 20)	Second half of period (Jun 20 – Oct 20)	General trend
None taken	9 (6%)	12 (8%)	Increase
Some taken	23 (15%)	30 (20%)	Increase
All taken	120 (79%)	111 (72%)	Decrease

### Summary:

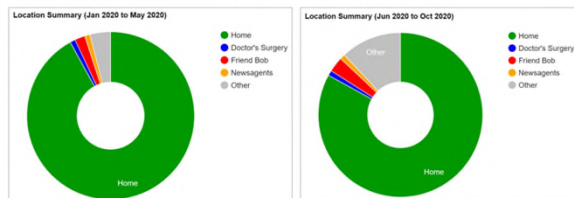
There has been a reduction in the number of times that the resident has taken all of their medication. Steps you could take to increase the medication uptake include:

- 1) Remind the resident when their medication is due; for example, set a voice reminder using a smart speaker such as Amazon's Echo or Google's Nest, triggered at the appropriate time of the day.
- 2) Set an alert using the SHEILA app for when the medication is missed. Follow up this alert with a quick phone call to the resident to ask how they're getting on... and reminding them to take their medication!

# Guardian - Reports

## Location History

Location record for this resident for the period Jan 20 – Oct 20



Location	First half of period (Jan 20 – May 20)		Second half of period (Jun 20 – Oct 20)		General trend
	Number of visits to location	Time spent at location	Number of visits to location	Time spent at location	
Home	Departed home 59 times	92%	Departed home 163 times	83%	Decrease
Doctor's Surgery	Visited 3 times	1%	Visited 3 times	1%	Similar
Friend Bob	Visited 68 times	2%	Visited 74 times	3%	Similar
Newsagents	Visited 28 times	1%	Visited 32 times	1%	Similar
Other	(Not applicable)	4%	(Not applicable)	12%	Increase

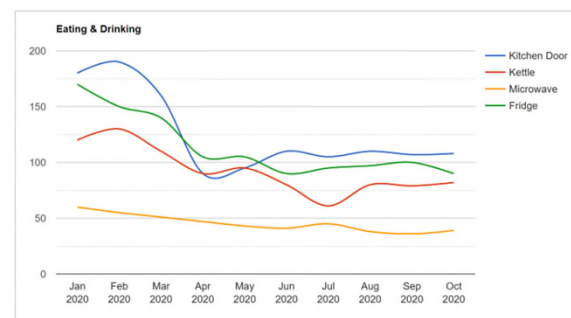
### Location Summary:

The resident is more active on their feet, as there has been a significant increase in the number of times they have left their home.

If the number of times they depart home increases significantly it may be an indicator of unrest, so try to establish the cause of this.

## Eating and Drinking

Eating and drinking record for this resident for the period Jan 20 – Oct 20



They are using this item less than before	They are using this item for about the same time	They are using this item more than before
Kitchen Door	(None)	(None)
Kettle		
Microwave		
Fridge		

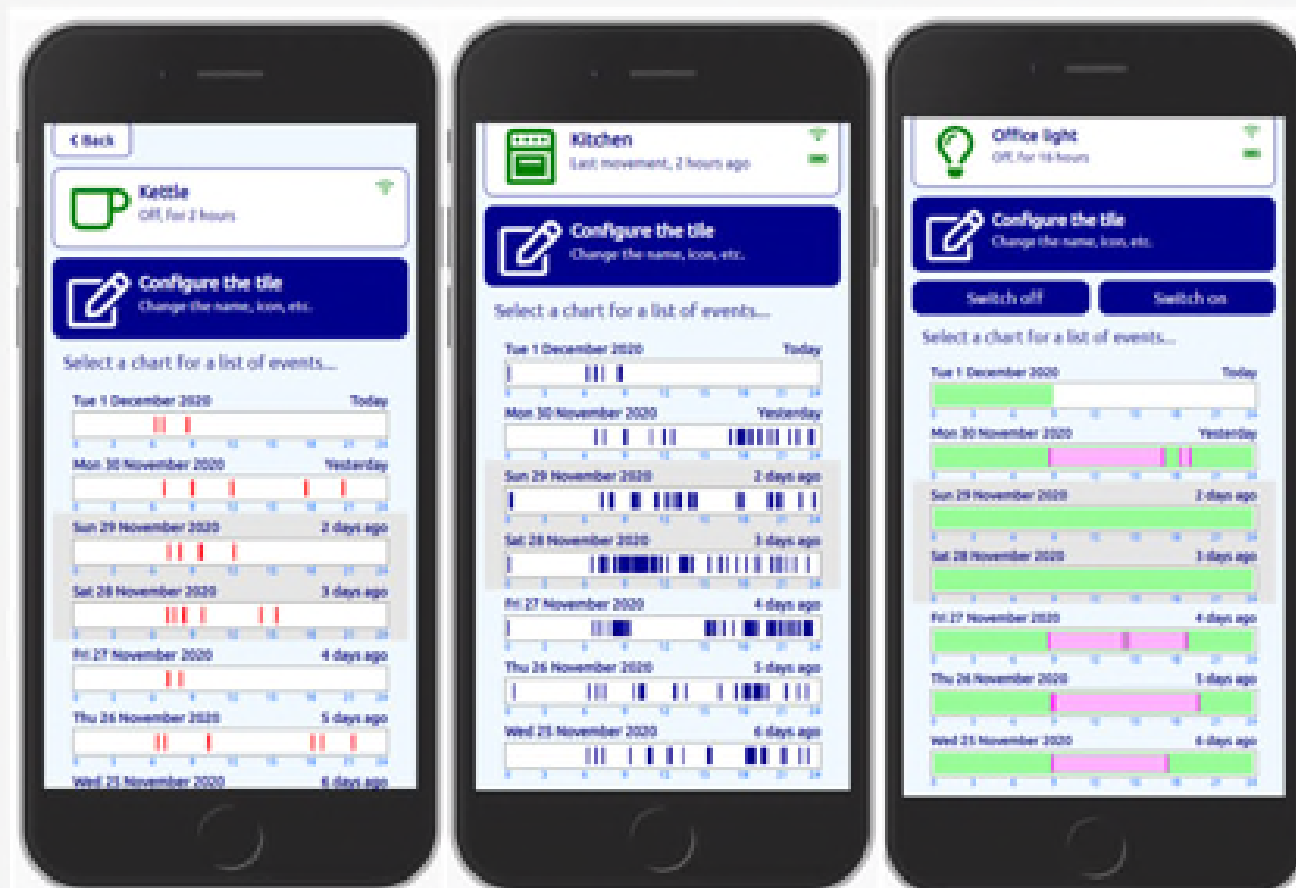
### Eating & Drinking Summary:

They are using the kitchen items much less than before. This may be an indicator of the following:

- 1) Nutritional problems
- 2) Hydration problems
- 3) Ill health
- 4) Anxiety or depression

Try to establish a likely cause, and encourage them to increase their eating and drinking activity.

# Guardian – Family & Friends App



+44 1983 817000



whzan.com

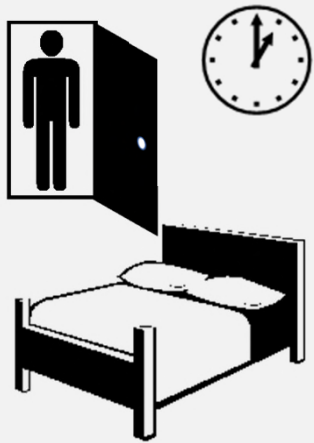


Thank you

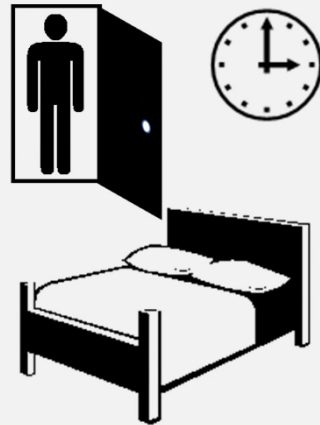




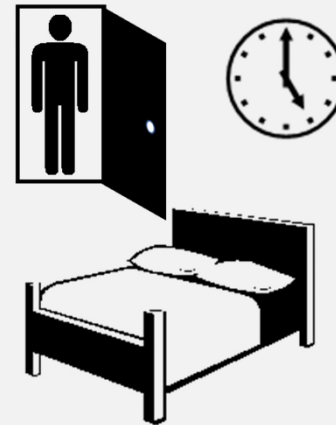
# Care home without Acoustic Monitoring



Carer checks resident



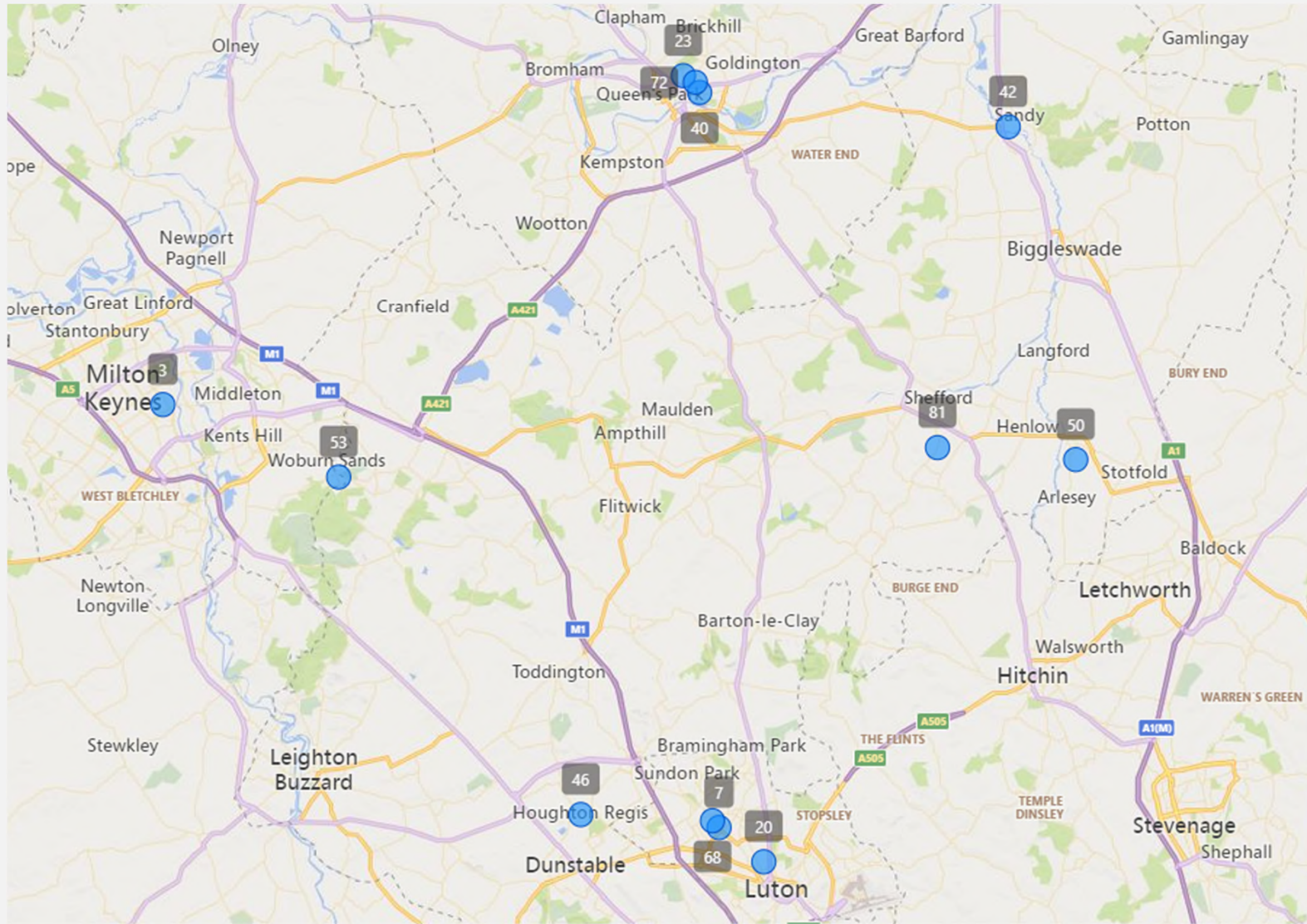
Carer checks resident



Carer checks resident







Bedfordshire, Luton and Milton Keynes Health and Care Partnership



# Benefits #1

## Remote Monitoring

**Reduced numbers of night-time checks by cares on residents**

**Reduced the number of night time physical checks by 30%** as can remotely monitor, **depending on residents' care needs this may increase up to 55%.**

**Improved resident privacy**

**Improved privacy for residents** at night owing to reduced interruptions by carers by 30%, **less interrupted rest time.**



## Benefits #2

### Sensor Based Falls Detection and Prevention (NHSE theme)

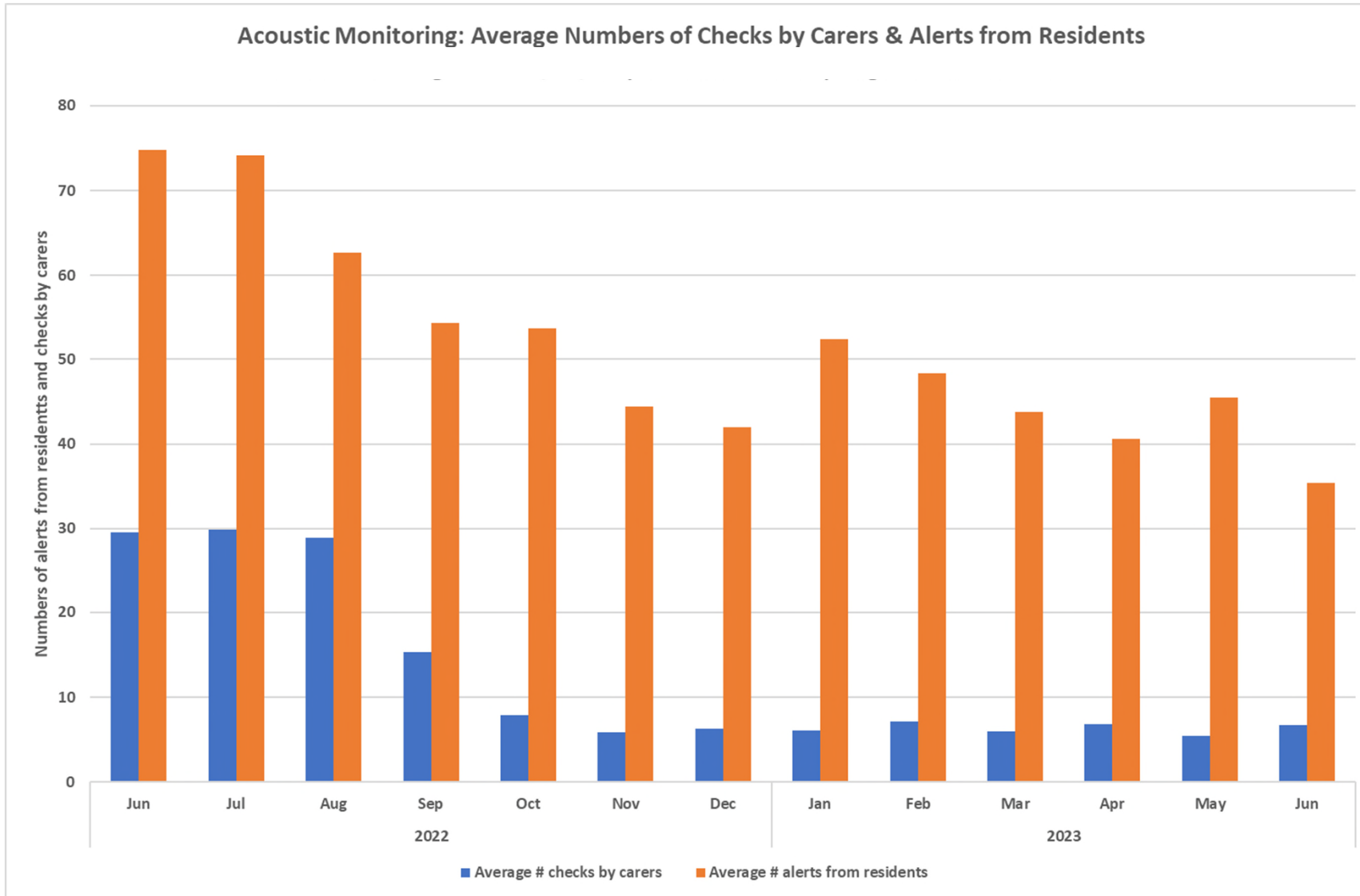
#### Falls reduction

A **25% reduction in the number of night-time falls in a care home over a 12 month period** since the introduction of the Acoustic Monitoring system

#### Reduced numbers of hospital admissions

A **10% reduction in the number of hospital admissions following a night-time fall in a care homes over a 12 month period** since the introduction of the Acoustic Monitoring system.

### Acoustic Monitoring: Average Numbers of Checks by Carers & Alerts from Residents





# Conditions for success

**IT infrastructure:** adequate wi-fi coverage and tech support to reconfigure infrastructure as needed.

**Leadership:** night time care workers may find the additional scrutiny of their performance to be threatening; strong, consistent and present leadership is needed to drive and sustain change.

**“Transformational” mindset:** System needs to replace existing night care arrangements to be truly effective (not just supplement old ways of working).

**Evidence led:** Management need to understand and use the reporting provided by the system to continue driving change.

**Residents without complex needs:** Not (yet) proven to be effective for anything other than frail/elderly residents.

**Night use only:** System can be effective at reducing falls in bedrooms (but not in corridors, lounges, etc).



A preventative care platform  
empowering older adults to  
live independently

Empowering the service  
user to self care whilst  
reducing readmissions and  
length of stay in hospital

Mr George Kowalski  
Business Development Director.



# The solution



## A DIGITAL HEALTH COACH

Our customers' clients receive an IoT hub (MiiCube) that hosts **Monica**, the health coaching **voice assistant**, designed to interact with the user and uniquely motivate them to live a healthier lifestyle through personalised **digital health therapies** for sleep, exercise, nutrition, and more

## AI-POWERED HEALTH INSIGHTS TOOL

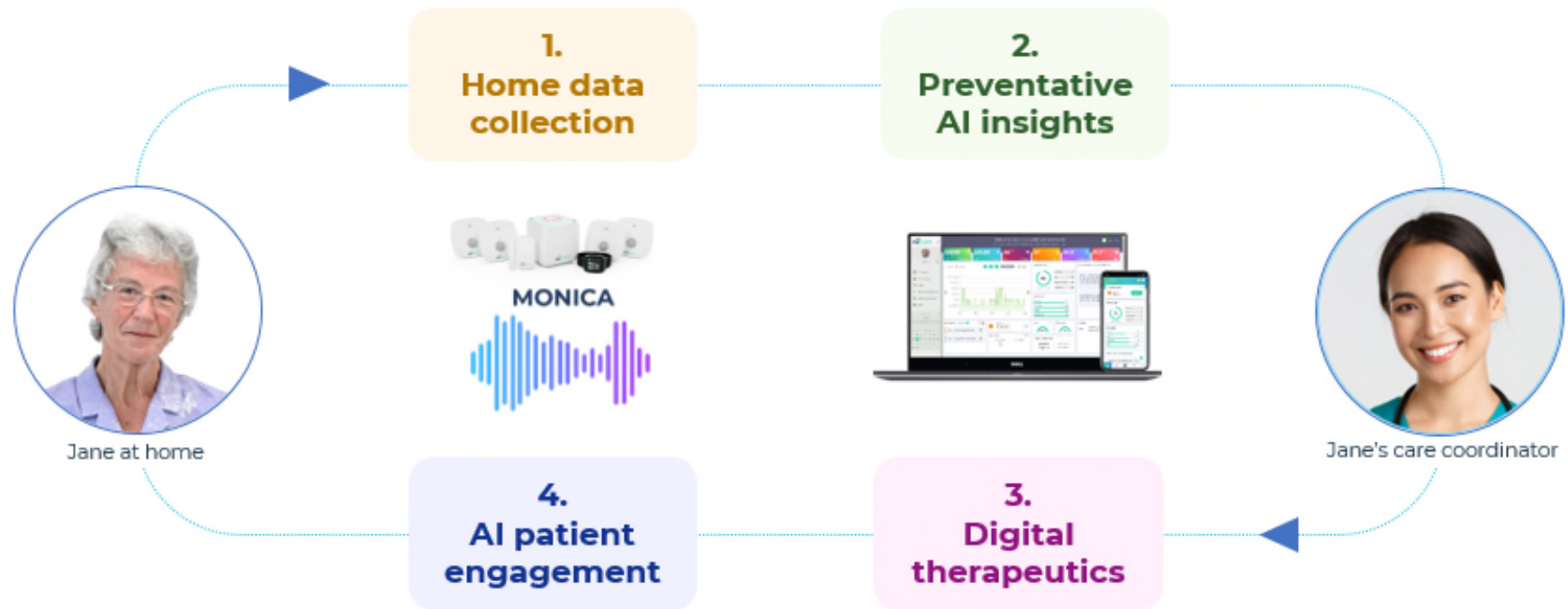
We collect the **health data** of our users and feed it into our **machine learning algorithms** for the early detection of health morbidities and to help them better manage their chronic conditions independently.

## A HEALTH NAVIGATOR FOR CAREGIVERS

Our **dashboard** tracks the health and well-being of users and makes this data available to those who care. Also available as a mobile **app**, with population views to **prioritise** and **monitor** care in one platform.



# How it works



MiiCare gathers data at home, generates preventative AI insights for care providers, and delivers digital therapeutics to older adults via 'Monica' the AI health coach.

# How it works



## Behavioural Pattern Analytics

Analyse daily movements around the house to learn behavioural pattern and identify abnormal activities



## Vitals Monitoring

Guides older adults to measure their vitals, including oxygen saturation and temperature through easy-to-use devices



## Digital Companion

Monica our digital health coach and companion, interacts with the older adults proactively and reminds them to take their meds, hydrate, etc.

**SOS**



## Incident response

Contact neighbours, carers and community nurses when something is abnormal



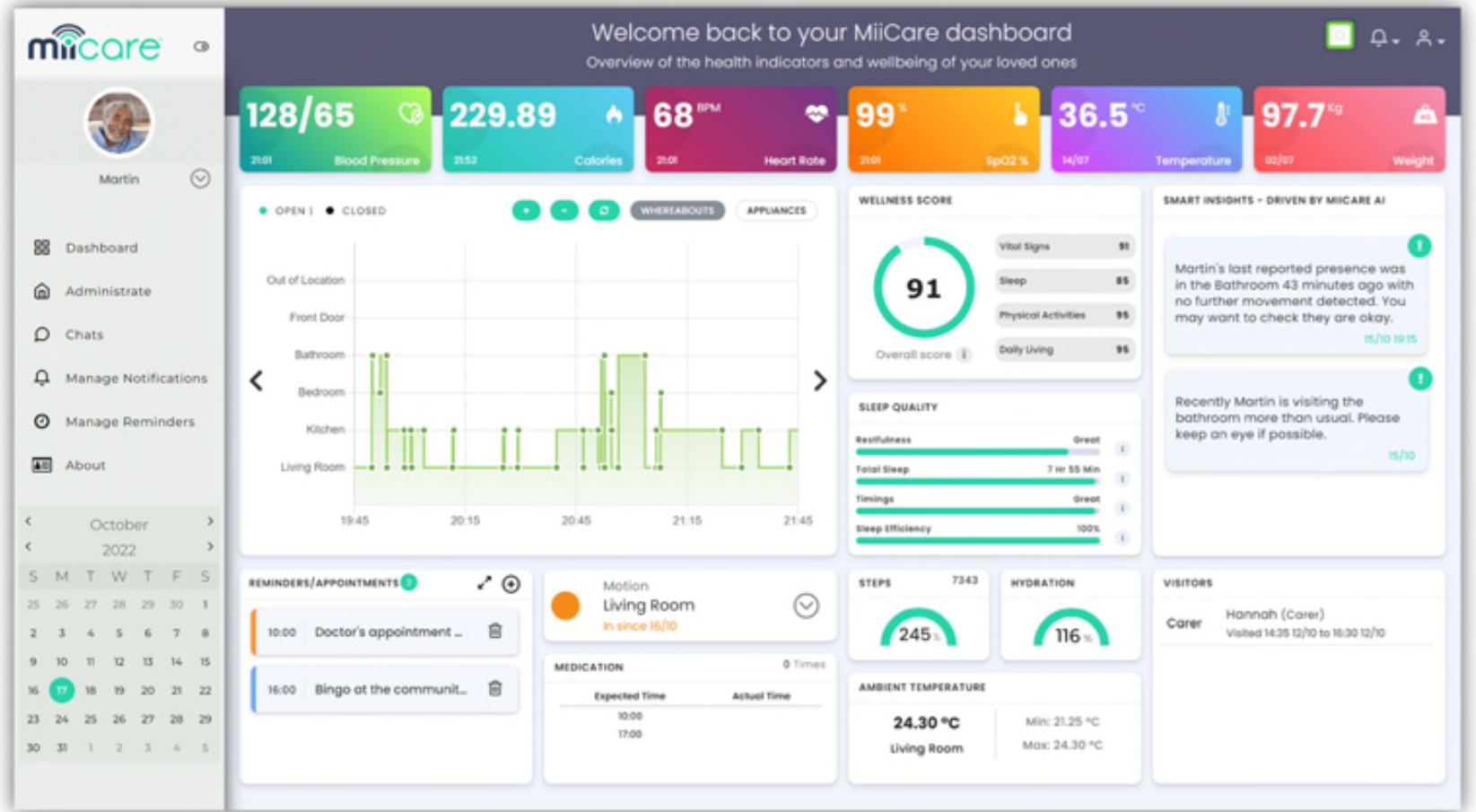
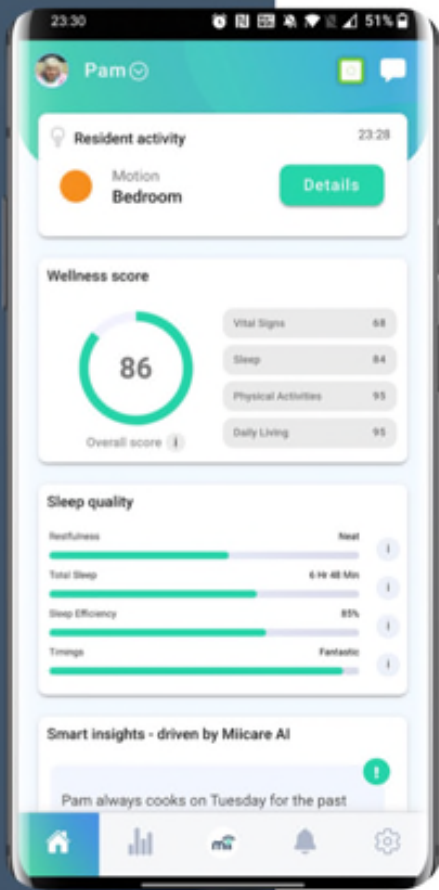
MiiCare

- Dashboard
- Administrate
- About

Location

<p><b>1 NEC</b></p> <p><b>Ben Smith</b> DOB: 11/07/1940</p> <p>76      128/63 98%      36.9</p>	<p><b>2 NEC</b></p> <p><b>Mary Harrison</b> DOB: 12/10/1940</p> <p>80      140/82 100%      36.7</p>	<p><b>Dan's House</b></p> <p><b>Dan Waller</b> DOB: N/A</p> <p>88      124/71 98%      35.5</p>	<p><b>Dexter</b></p> <p><b>Debayan Das</b> DOB: N/A</p> <p>0      251/3328 99%      N/A</p>
<p><b>E-MiiCare Offices</b></p> <p><b>Dan Waller</b> DOB: 08/02/1978</p> <p>60      135/84 99%      36.3</p>	<p><b>E-Room 101</b></p> <p><b>Martin Jones</b> DOB: 14/12/1940</p> <p>68      128/65 99%      36.5</p>	<p><b>Home</b></p> <p><b>Norman Johnson</b> DOB: 15/11/1942</p> <p>88      129/63 98%      36.6</p>	<p><b>MiiCare House</b></p> <p><b>Chris Blewett</b> DOB: 01/01/1970</p> <p>65      117/76 98%      36</p>
<p><b>MiiCare House</b></p> <p><b>Pratim Das</b> DOB: N/A</p>	<p><b>MiiCare House</b></p> <p><b>Olivia Zheng</b> DOB: N/A</p>	<p><b>MiiCare Lab</b></p> <p><b>John Smith</b> DOB: 03/05/1945</p>	<p><b>Oliver</b></p> <p><b>Oliver Dickson</b> DOB: N/A</p>

# MIICARE INDIVIDUAL USER'S DASHBOARD / APP



# Our Experience



## Home care

**2,661,696+**

hours of remote monitoring

**65%**

Reduction in hospital admissions

**53%**

Reduction in care costs



## D2A

**1,638**

Hospital nights saved in 6 months

**£2,850**

Cost reduction avg/month/life

**100%**

Of falls prevented vs baseline



## Virtual Wards

**8 months**

More independence before nursing

**50%**

Reduction in home visits

**£1,300**

Cost reduction avg/month/life

# Outcomes – Case Studies



## Before MiiCare was introduced

An older male with advanced dementia and recurring UTI infections.

**2 UTIs** (early 2021)



Care in the community for older adults with chronic conditions

**Multiple Falls & UTIs**  
(2020/2021)



An older female with frailty issues. Discharged into D2A pathway.

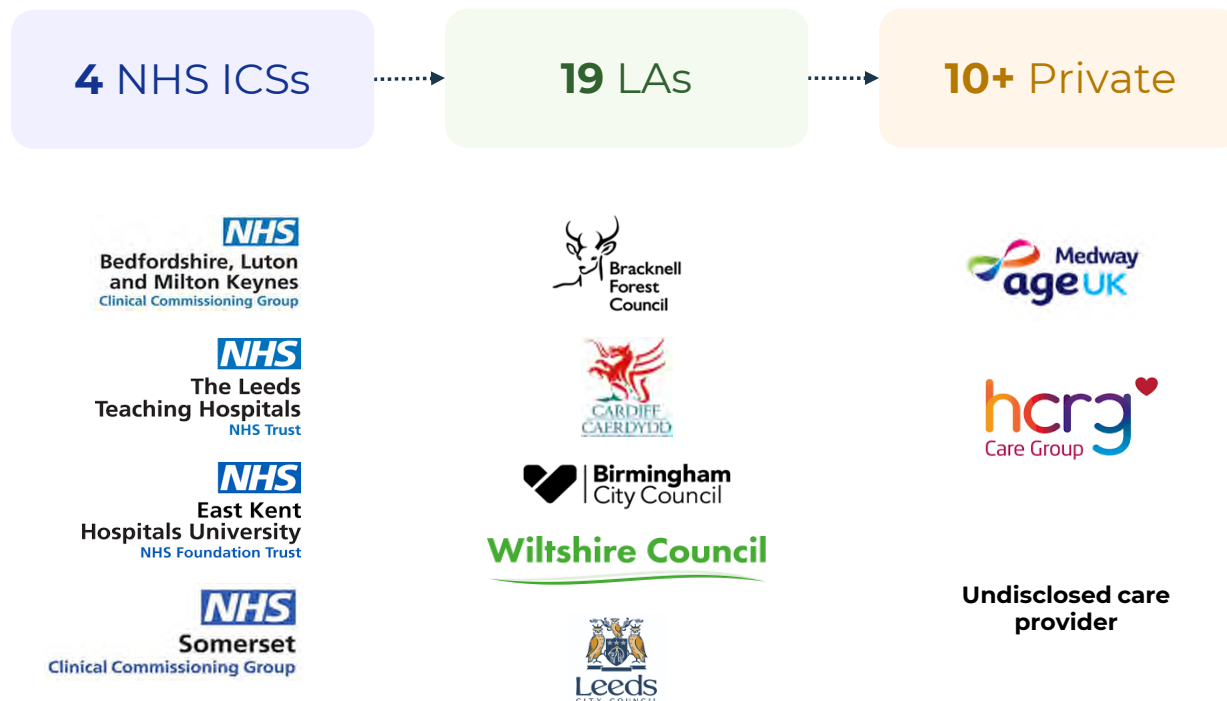
**3 falls** (early 2021)

## After MiiCare was introduced

- Early detection of **UTI** infection onset via RPM and toilet visit insights
- Hydration routine management through Monica engagement prevented further UTIs
- Fall prevention by acoustic gait analysis of abnormal gait audio features
- **No falls** during the months MiiCare was deployed
- **£2,900** average savings from reduced care visits per client
- **65% reduction** in hospital readmissions
- **1,638** hospital bed days saved over 6 months
- **2.6m** hours of remote monitoring delivered



# Our Customers



# Are you ready to transform your care?



UK



USA



Austria

Smplicare



# Smplicare Observational Falls Study: Partnership with BLMK



Alexandra Reissig, COO



We've been funded by UKRI  
to develop software that can  
**predict the risk of falls**  
using everyday wearables

**Smplicare**

- 34% of the UK population over-65 is at risk of a fall this year

## • Why Falls?

- 50% of people over 65 worry about falling because:
  - They happen a lot
  - They make things harder
  - They cost people and systems a lot of money:



• £4bn €25bn \$49bn

Smplicare

# Overall Progress to-date\*

1000+ Engagements

500+ Sign Ups

180+ Enrolled

35+ Partners

## Partners\*\*



\*As of June 2023  
\*\*Not the complete list

# •BLMK Progress\*

•30+

•Engagements

•14+

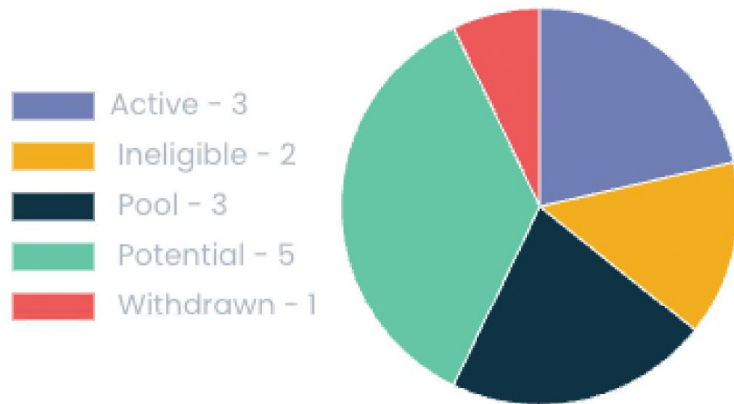
•Sign Ups

•8+

•Enrolled

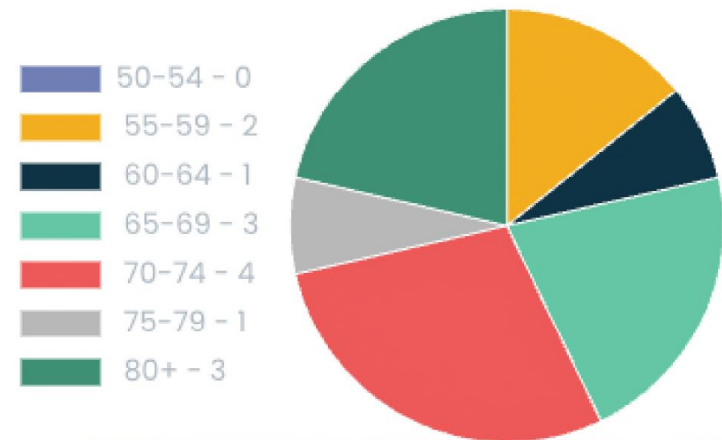
## Status Summary

Conversion Rate: 43%



## Age Range Summary

Average Age: 60



\*As of June 2023

## •Total Falls Reported

- We are capturing insights from the falls that don't result in hospital which are not often captured

•35

- Participants Reporting Falls

•59

- Total Falls Reported

•2

- Resulted in Hospital

•\*As of June 2023

- Who is the
- Study for?

•55+



- How long is the
- study?

6

•months

- Study close
- December

# •What does the Study require?

1



•Wearable



2



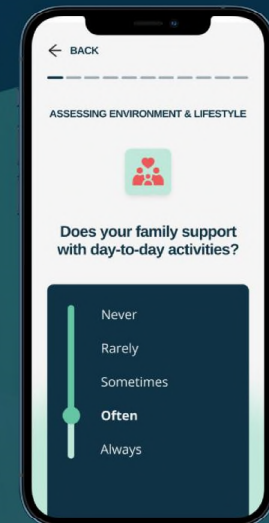
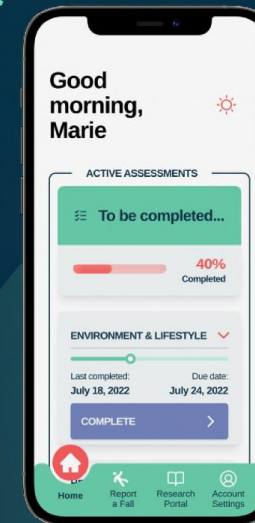
- Body
- Composition
- Scale

3



- Grip Strength
- Dynamometer
- (via selection)

4



•Assessments/ Questionnaires

FREE

- What other activities are
- in the study?



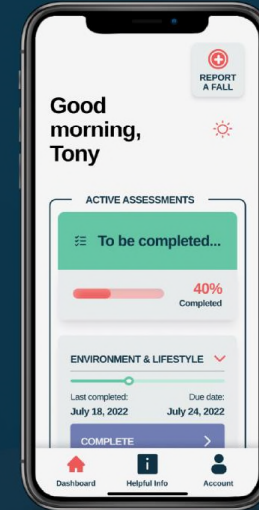
- one-on-one
- interviews



- focus
- groups



- co-design
- sessions





# •Smplicare Team



•Dr. Adrian Smales  
•Data Science



•Alexandra Reissig  
•COO



•Dayo Samuel  
•Design



•Garrett Sprague  
•CEO



•Janice Kimsey  
•Communications



•Dr. Atul Anand  
•Medical Advisor



•Joseph Haenlein  
•Project Mgmt (Device)



•Marie Guglielminetti  
•Project Mgmt (Compliance)



•Yidian Gao  
•Design



•Greig Fotheringham  
•Developer



•Dave Loudon  
•Sales Strategy



•Struan Clyne  
•Developer

# •Partnership Opportunity



- Path to maintaining
- independence



- Signpost people to
- additional community
- support



- Collaboratively develop
- technology and
- programmes



- Demonstrate efficacy and
- increase engagement

Smplicare

Smplicare

# Thank you



[hello@smplicare.com](mailto:hello@smplicare.com)



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[www.smplicare.com](http://www.smplicare.com)

## •Our Ask

- •Refer potential participants to our
- •website:[www.smplicare.com](http://www.smplicare.com)
- •Place brochures in communal
- •spaces
- •Contact us to schedule a group
- •enrolment session/ information
- •session

Smplicare

# Feedback and Panel Question and Answer Session



#BLMKdigitalhealth2023



Bedfordshire, Luton and Milton Keynes Health and Care Partnership



# Closing remarks and Evaluation

Patricia Coker and Clare Steward



QR Code



#BLMKdigitalhealth2023

