

# Scottish Experience of Telehealth Deployment

# Christie Commission Priorities

- 1. Recognising that effective services must be designed with and for people and communities - not delivered 'top down' for administrative convenience**
- 2. Maximising scarce resources by utilising all available resources from the public, private and third sectors, individuals, groups and communities**
- 3. Working closely with individuals and communities to understand their needs, maximise talents and resources, support self reliance, and build resilience**
- 4. Concentrating the efforts of all services on delivering integrated services that deliver results**
- 5. Prioritising preventative measures to reduce demand and lessen inequalities**
- 6. Identifying and targeting the underlying causes of inter-generational deprivation and low aspiration**
- 7. Tightening oversight and accountability of public services, introducing consistent data-gathering and performance comparators, to improve services**
- 8. Driving continuing reform across all public services based on outcomes, improved performance and cost reduction**
- 9. Implementing better long-term strategic planning, including greater transparency around major budget decisions like universal entitlements**

# Christie Recommendations

1. Introducing a new set of statutory powers and duties, common to all public service bodies, focussed on improving outcomes. These new duties should include a presumption in favour of preventative action and tackling inequalities
2. Making provision in the proposed Community Empowerment and Renewal Bill to embed community participation in the design and delivery of services
3. Forging a new concordat between the Scottish Government and local government to develop joined-up services, backed by funding arrangements requiring integrated provision
4. Implementing new inter-agency training to reduce silo mentalities, drive forward service integration and build a common public service ethos
5. Devolving competence for job search and support to the Scottish Parliament to achieve the integration of service provision in the area of employability
6. Giving Audit Scotland a stronger remit to improve performance and save money across all public service organisations and merging the functions of the Auditor General and the Accounts Commission
7. Applying commissioning and procurement standards consistently and transparently to achieve competitive neutrality between suppliers of public services
8. Reviewing specific public services in terms of the difference they make to people's lives, in line with the reform criteria we set out.

# Integration



## Public Bodies (Joint Working) (Scotland) Act 2014

# Community Empowerment and Renewal Bill

- Consulting now, the bill will be in three parts:
  - Part 1: Making it easier for communities to take part and have their say
  - Part 2: Helping communities to own land and buildings in their area
  - Part 3: Making the best use of buildings and land

# Delivery Plan



**A National Telehealth and Telecare  
Delivery Plan for Scotland to 2015**

Driving Improvement, Integration and Innovation



- Aiming for a “triple win” by 2020:
  - Enhanced wellbeing and quality of life.
  - Improved sustainability of care.
  - Increased economic growth in Scotland.

# Workstreams

- Workstream One – Improve and integrate health and social care by:
  - Helping people with long-term conditions to live independently at home by supporting them to manage their own health and care;
  - Embedding telehealth and telecare within whole system pathway redesign to enable people to move smoothly through transitions between services;
  - Using telehealth and telecare within preventative approaches; Ensuring appropriate synergies with the technical architecture of the eHealth Strategy, including standards, principles and access to enabling technologies.
- Workstream Two – Enhance wellbeing by:
  - Expanding innovative service models for community-based support and wellbeing;
  - Supporting people to be active participants in the design and delivery of their technology-enabled services.
- Workstream Three – Empower people by:
  - Raising awareness, evidencing and sharing benefits for individuals and carers;
  - Recognise the crucial role provided by unpaid carers and develop solutions to meet their needs and wellbeing.

# Workstreams

- Workstream Four – Improve sustainability and value by:
  - Establishing a baseline, and developing consistent outcome measures and indicators to track impact of telehealth and telecare on working practices, productivity and resource use;
  - Realising greater efficiencies in procurement, contact centre/responder services, and specialist advisory resources through ‘at scale’ deployment.
- Workstream Five – Support economic growth by:
  - Strengthening partnerships between users, practitioners, service providers, industry and academia to meet the needs and aspirations of our citizens and help grow the economy through targeted innovation and development.
- Workstream Six – Exchange learning, develop and embed good practice by:
  - Recognising and meeting the needs of health, housing, social care, independent and third sector providers for new skills, education and training;
  - Supporting leadership capacity and capability;
  - Raising awareness, publishing and promoting innovative approaches, good practice and illustrative user/patient experiences.



# What does Success Look Like?

- All tend to look like the NASA “better, faster, cheaper” programme
- It is hard to achieve all three together...
- We are deploying a service so success should be in terms of service delivery.
- But often it involves many other factors e.g how something gets built.
- KPIs often provide perverse incentives

# LiU Scope

**Budget** - £10.3m

**Timeframe** – June '12 – May '15

**Users** – 55,000

**Locations** – 5 regions (Lothian, Forth Valley, Moray, Western Isles & Highlands)





“Effective services must be designed with and for people and communities”

The future delivery of public services - Christie report

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LIVING IT UP

## Vision

LiU Services will help transform health, care and wellbeing the same way that the internet has transformed financial services, social interactions and information and advice

- Focussed on the person within their community
- Increasing digital inclusion
- Facilitating health and care integration



*dallas LiU aim*



**LiU** will co-design sustainable and innovative improvements and choices in health, care and wellbeing for 55,000 by 2015.



## By 2015

- LiU will provide a **choice** of access routes whilst at home or 'out and about'; - Web, TV or smart phone.
- LiU will provide a **personalised** and integrated menu of services, information, products and social activities to support social, health, care, intellectual and personal interests.
- LiU will '**keep you connected**' - creating and sustaining relationships with family, friends, neighbours, local communities and health and care professionals.
- LiU will stimulate **innovation** and wealth creation by open innovation of new products, services, applications, and creation of employment opportunities.

# High level outcomes

1. **Healthier living** – Individuals and communities are able and motivated to look after and improve their health and wellbeing, resulting in more people living in good health for longer with reduced health inequalities.

2. **Independent living** – People with disabilities, long term conditions or who become frail are able to live as safely and independently as possible in the community, and have control and choice over their care and support.

3. **Carers** – people who provide unpaid care to others are supported and able to maintain their own health and wellbeing.

4. **Effective resources** – The most effective use is made of resources across health and social care services, avoiding waste and unnecessary variation.

5. **Engaged workforce** – People who work in health and social care services are positive about their role and supported to improve care and treatment they provide.

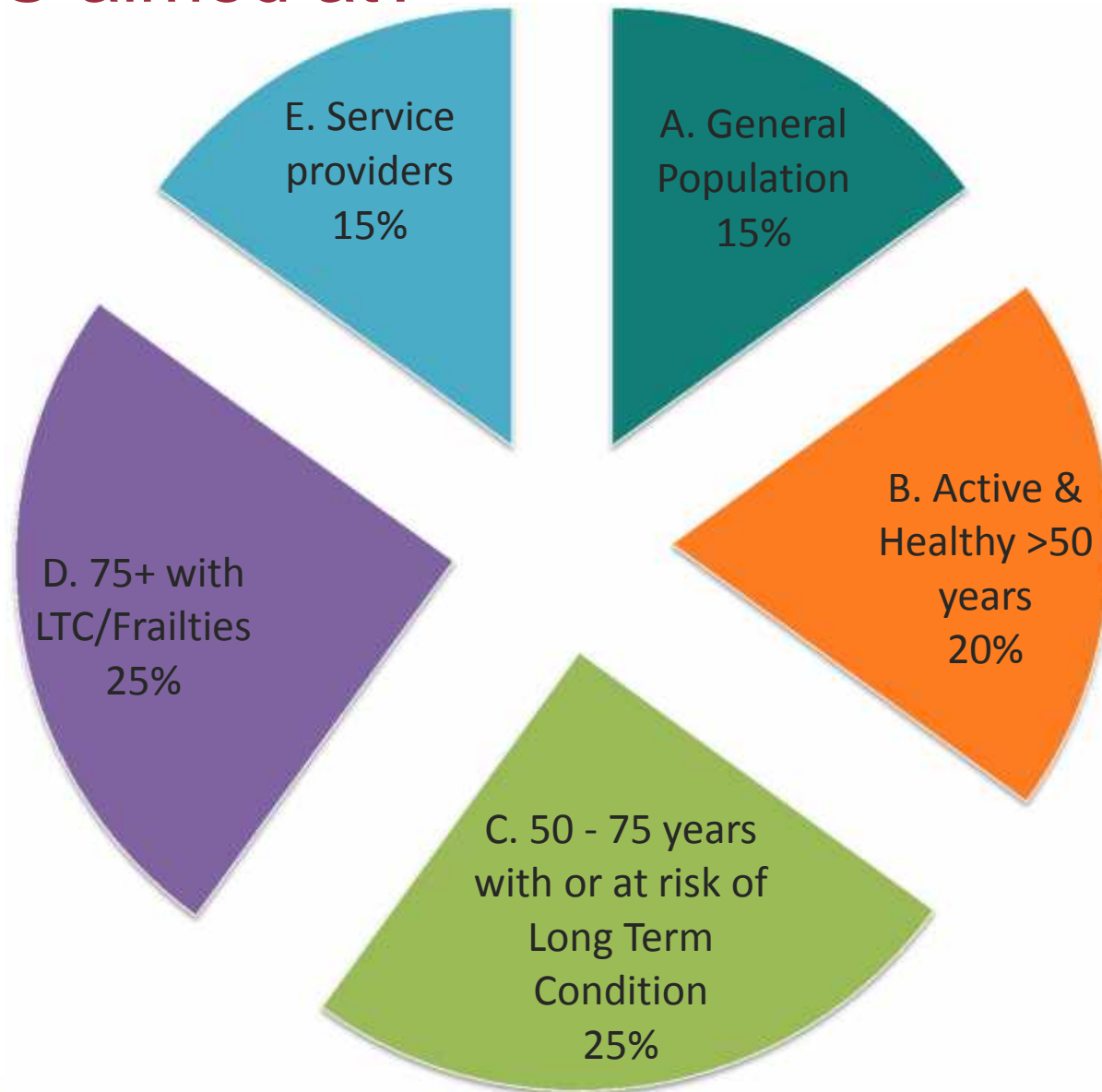
6. **Wealth creation** – Increase in GDP, innovation and employment opportunities

# Strategy and Management (SIG 1)

- Current List:
  - Ensuring Leadership Through a Champion
  - Aggregating Necessary Resources for Deployment
  - Cultural Readiness to New Technologies
  - Identifying a Compelling Set of Needs
  - Putting Human-Centeredness as a Condition for the Service
- Reflection:
  - Defining success carefully is a good idea
  - Needs, resources and solutions are not independent and they are critical
  - Champions are good but there are other possibilities.
  - Deployment always involves development so think about the process
  - Process has useful outcomes e.g. readiness and human centredness
  - Define early **failure criteria**



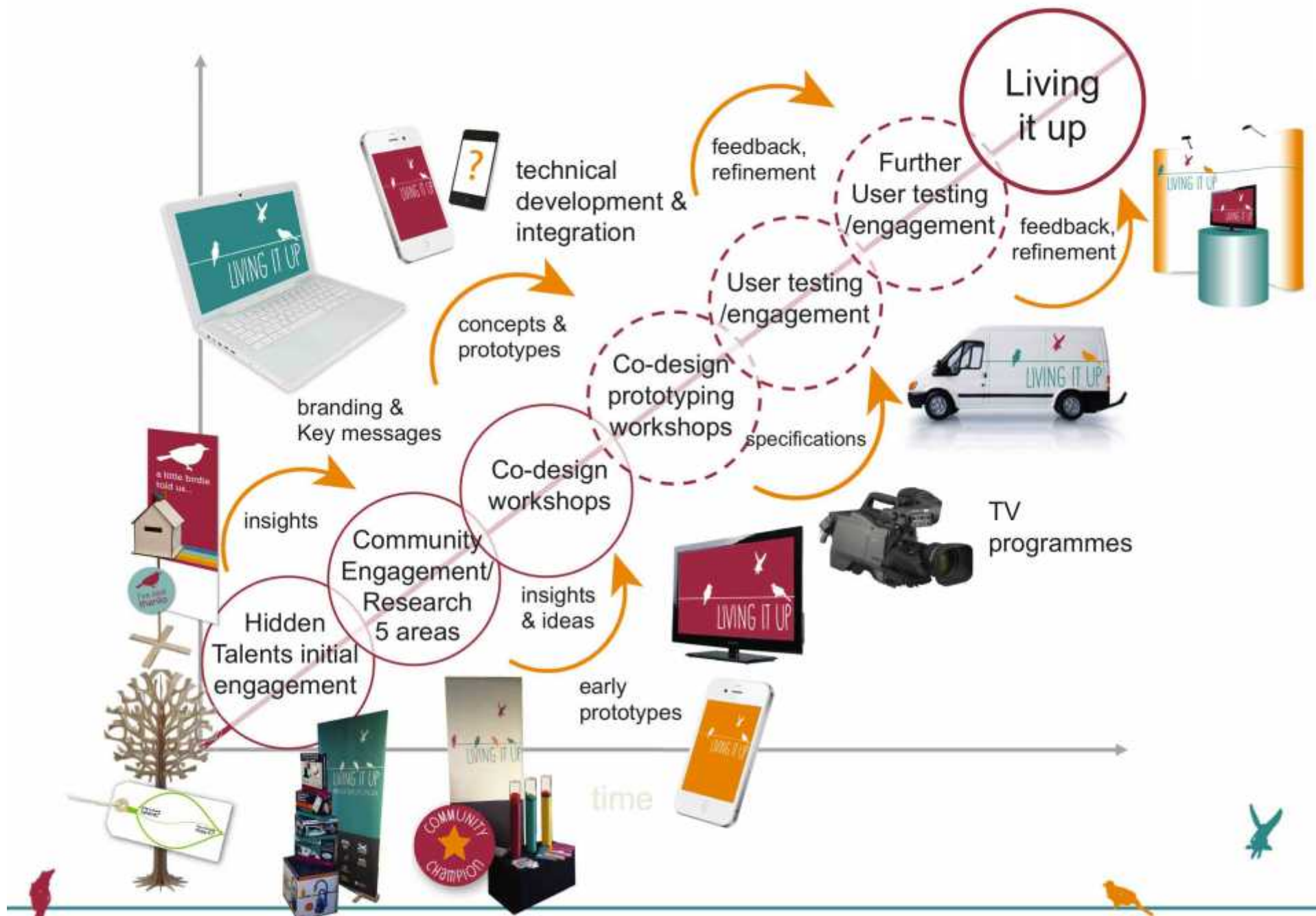
# Who is LiU aimed at?



# Target population – 55,000 users

<i>Total Population</i>		5,200,000	<i>Based on 2010 Census data</i>				
			<b>Lothian</b>	<b>Highland</b>	<b>Forth Valley</b>	<b>Moray</b>	<b>Western Isles</b>
	<b>%</b>		49%	24%	19%	6%	2%
<b>Age group 50 plus</b>		550,000	269,500	132,000	104,500	33,000	11,000
<i>Target size - 10% of 50+</i>	10%	55,000	26,950	13,200	10,450	3,300	1,100
<b>Sub Groups</b>							
A. General Population	15%	8,250	4,043	1,980	1,568	495	165
B. Active & Healthy 50 - 70 years	20%	11,000	5,390	2,640	2,090	660	220
C. 50 - 75 years with or at risk of Long Term Condition	25%	13,750	6,738	3,300	2,613	825	275
D. 75+ with LTC/Frailties	25%	13,750	6,738	3,300	2,613	825	275
E. Service providers	15%	8,250	4,043	1,980	1,568	495	165
<b>Total</b>	100%	<b>55,000</b>	<b>26,950</b>	<b>13,200</b>	<b>10,450</b>	<b>3,300</b>	<b>1,100</b>

<b>Recruitment timescales</b>			Lothian	Highland	FV	Moray	WIsles
March 2013		1,500	735	360	285	90	30
March 2014		13,000	6370	3120	2470	780	260
March 2015		40,500	19845	9720	7695	2430	810
<b>Total</b>		<b>55,000</b>	<b>26,950</b>	<b>13,200</b>	<b>10,450</b>	<b>3,300</b>	<b>1,100</b>



# Aims:

- Finding out what is important to people and communities
- Encouraging co-design
- Service Ideas
- Branding
- Prototyping



INSTITUTE  
OF DESIGN  
INNOVATION  
THE GLASGOW  
SCHOOL OF ART





## Community engagement (so far)

Our Community Engagement Team has engaged with:

Type of event	Number of events	Number of participants
Pop-Up engagement sessions	29	1466
Interviews/Focus Groups	38	55
Workshops	24	283
Feedback sessions	9	188
External presentations	9	N/A
<b>Total</b>	<b>109</b>	<b>1992</b>

Note: this does not include local engagement and recruitment activities.





NEARLY 2000 PEOPLE ENGAGED WITH...



...AT MORE THAN 100 EVENTS...



...ACROSS 5 REGIONS - SO FAR!

# Organization & Change Management

(SIG 2)

- Current List:
  - Involve healthcare professionals and decision makers
  - Preparing and Executing a Change Management Plan
  - Addressing the Needs of the Primary Clients
  - Prepare a Business Plan
- Reflection:
  - Involve relevant stakeholders:
    - at least professionals and clients
    - involvement should be directed towards achieving success.
    - Should avoid technical particulars
  - Business model is critical and it is either designed or co-designed
  - Communication is important – either as a plan or as a process
  - Change plan is good and should anticipate issues but this is hard
  - “Failure is not an option” meetings can be useful...



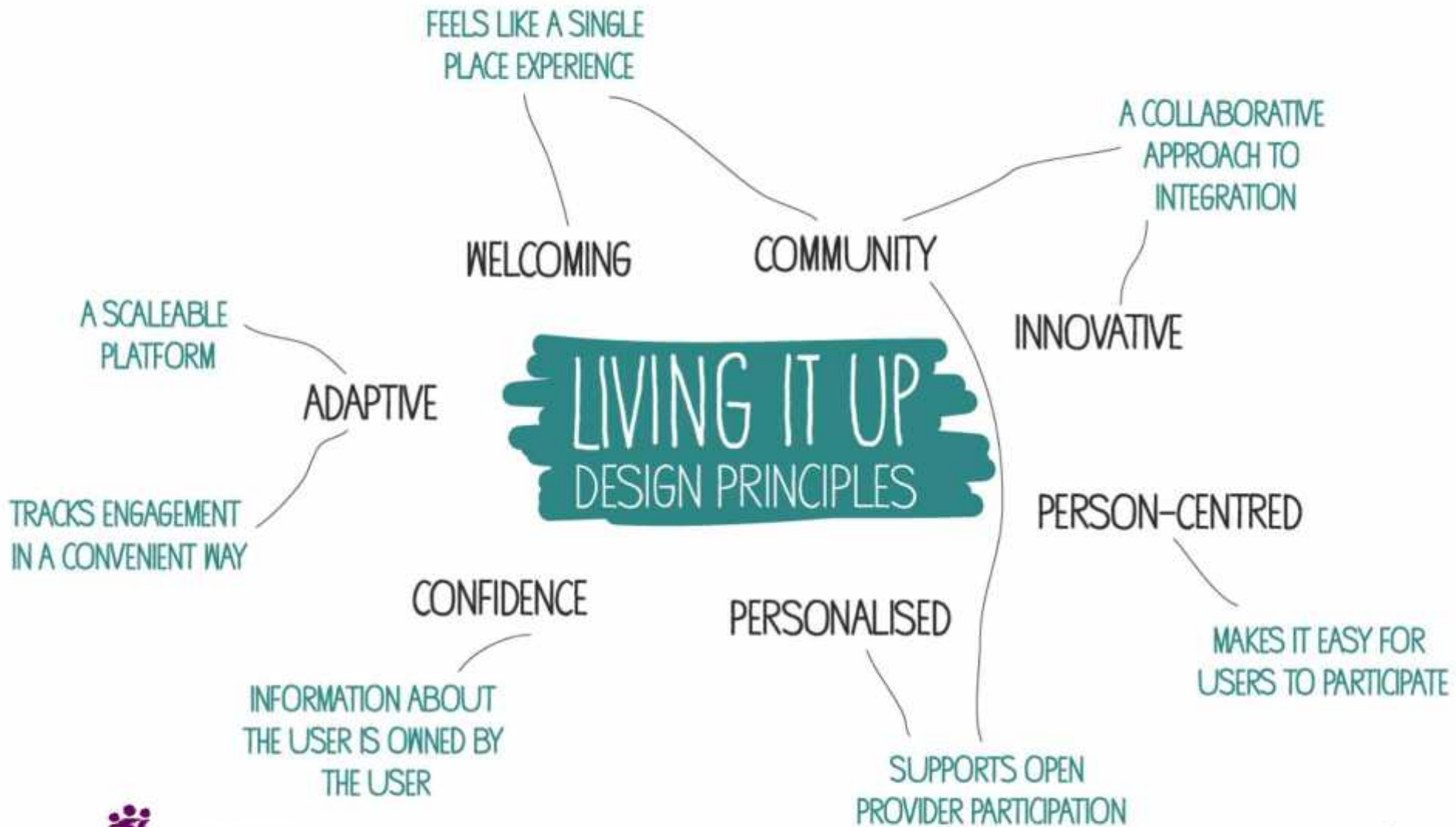
# Co-design workshops

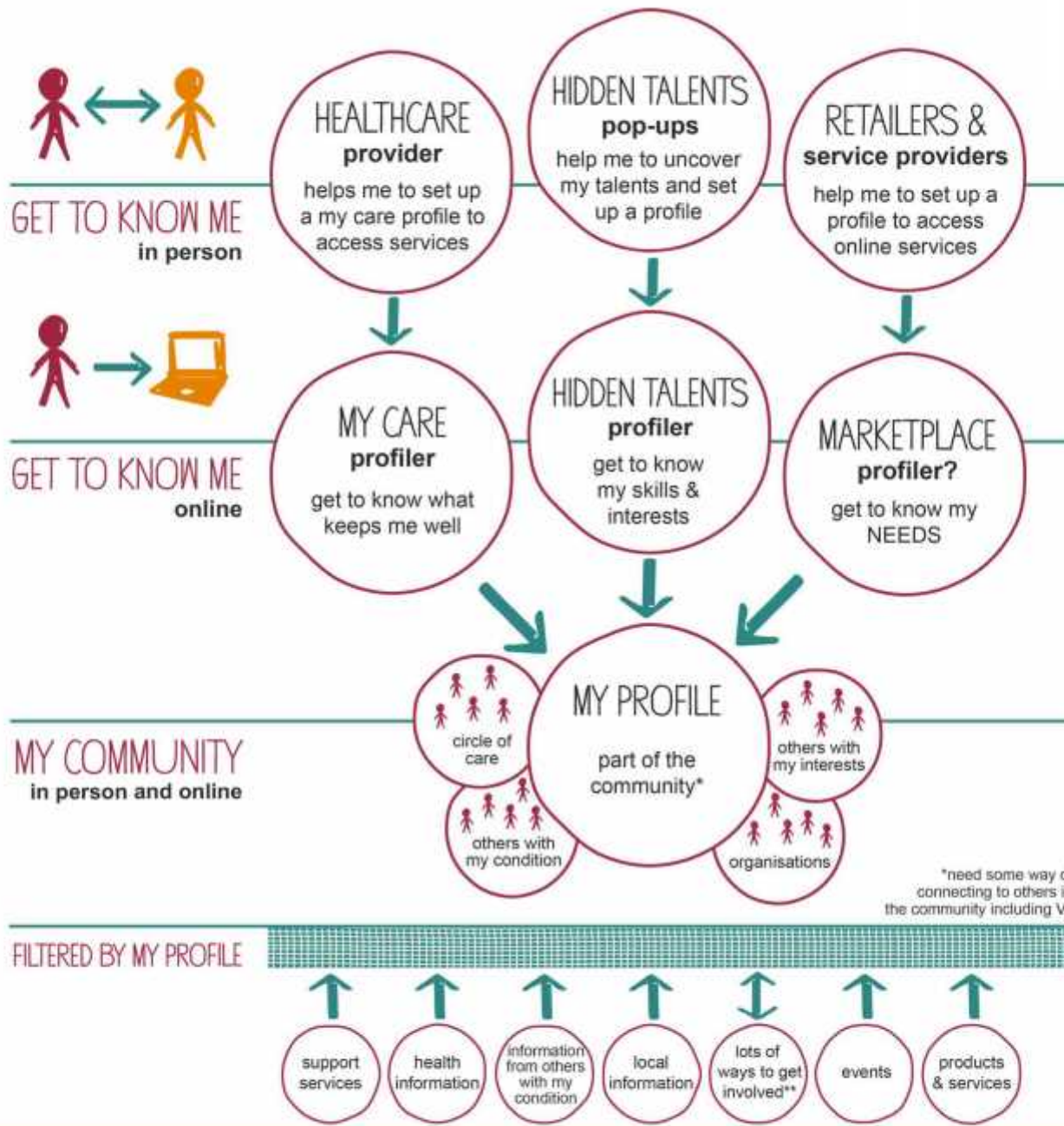






# LIVING IT UP DESIGN PRINCIPLES





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SCHOOL : ART**

\*\*e.g. join or set up groups, give advice, review products and/or offer skills/ knowledge and experiences to the community



# Legal, Regulatory and Security Issues (SIG 3)

- Current List:
  - Investigate under what circumstances Telemedicine is legal
  - Involvement of ethical, privacy and security experts
  - Identifying and Applying Relevant Operational guidelines in the Legal and Security Field
  - Creating Privacy awareness for both Doers and TM end-users
  - Establishing a Financing Scheme for the routine (upscaled)TM service
- Reflection:
  - Have the right skill sets in the team – where this is not possible identify reviewers with the missing skills.
  - Do “Privacy by Design”
  - Think about future Data Protection issues
  - Think about liability – is the system dependable enough, what are the consequences of a system failure? Is it safe?
  - Build a sustainability plan – this need not just be financial and need not just be new money:
    - Decide what to stop doing
    - Decide how to use human resource (e.g. data and content creation)
    - Think about how to decommission the service sustainably – think about end of life



# SHINE

What are you good at?



# FLOURISH

What keeps you well?



# DISCOVER

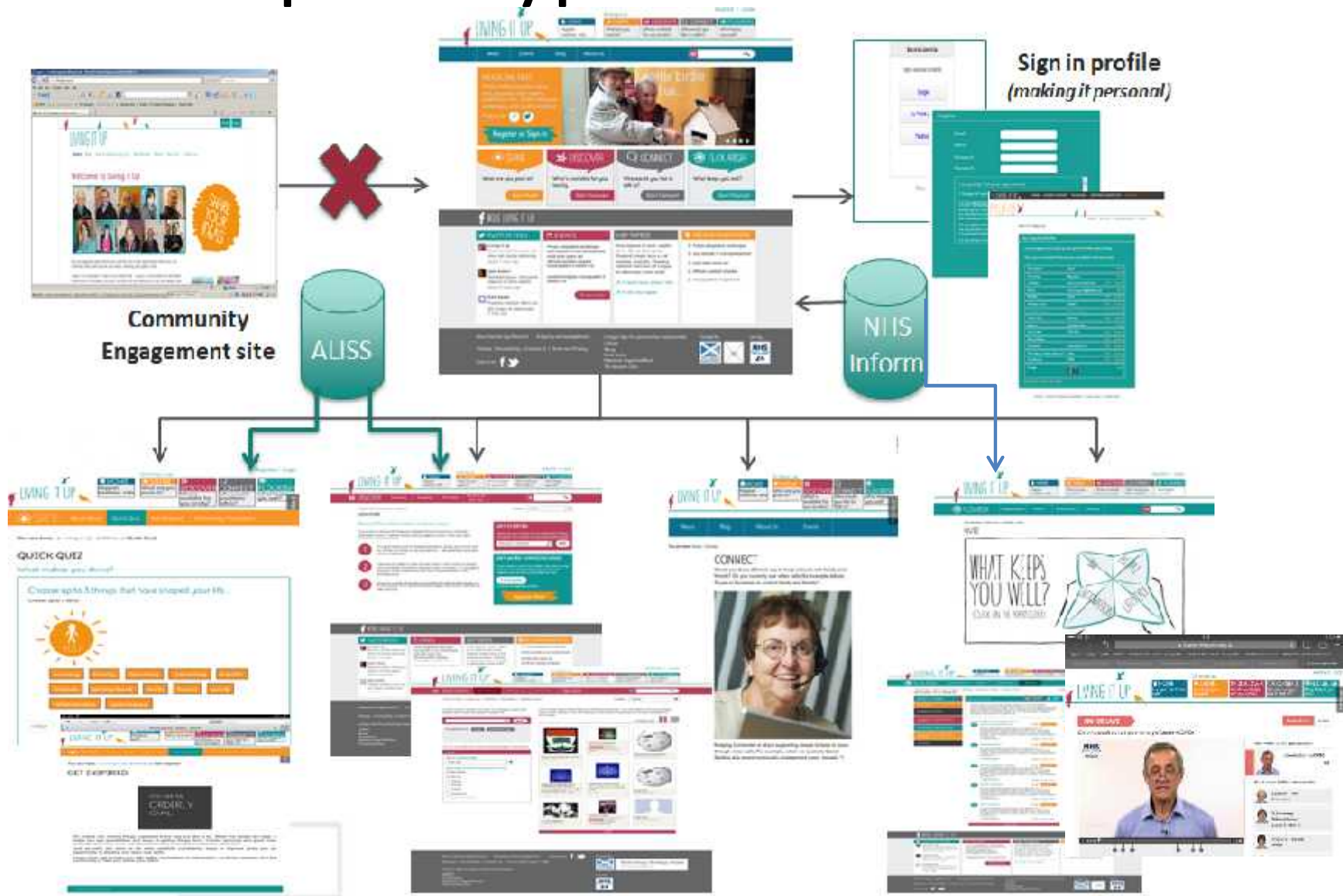
What's available for you locally?



# CONNECT

Who would you like to talk to?

# LiU prototypes – Version 3.0



# Portal The Hub



REGISTER | LOGIN

HOME  
Happier,  
healthier, safe

On being it up  
SHINE  
What are you  
good at?

DISCOVER  
What's available  
for you locally?

CONNECT  
Who would you  
like to talk to?

FLOURISH  
What keeps  
you well?

News Events Blog About Us

HEADLINE TEXT  
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Find us on:

Register or Sign in

SHINE  
What are you good at?  
Start Shine!

DISCOVER  
What's available for you locally  
Start Discover!

CONNECT  
Who would you like to talk to?  
Start Connect!

FLOURISH  
What keeps you well?  
Start Flourish!

## MORE LIVING IT UP

TWITTER FEED

- Living It Up  
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- Jane Anson  
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EVENTS

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HOT TOPICS

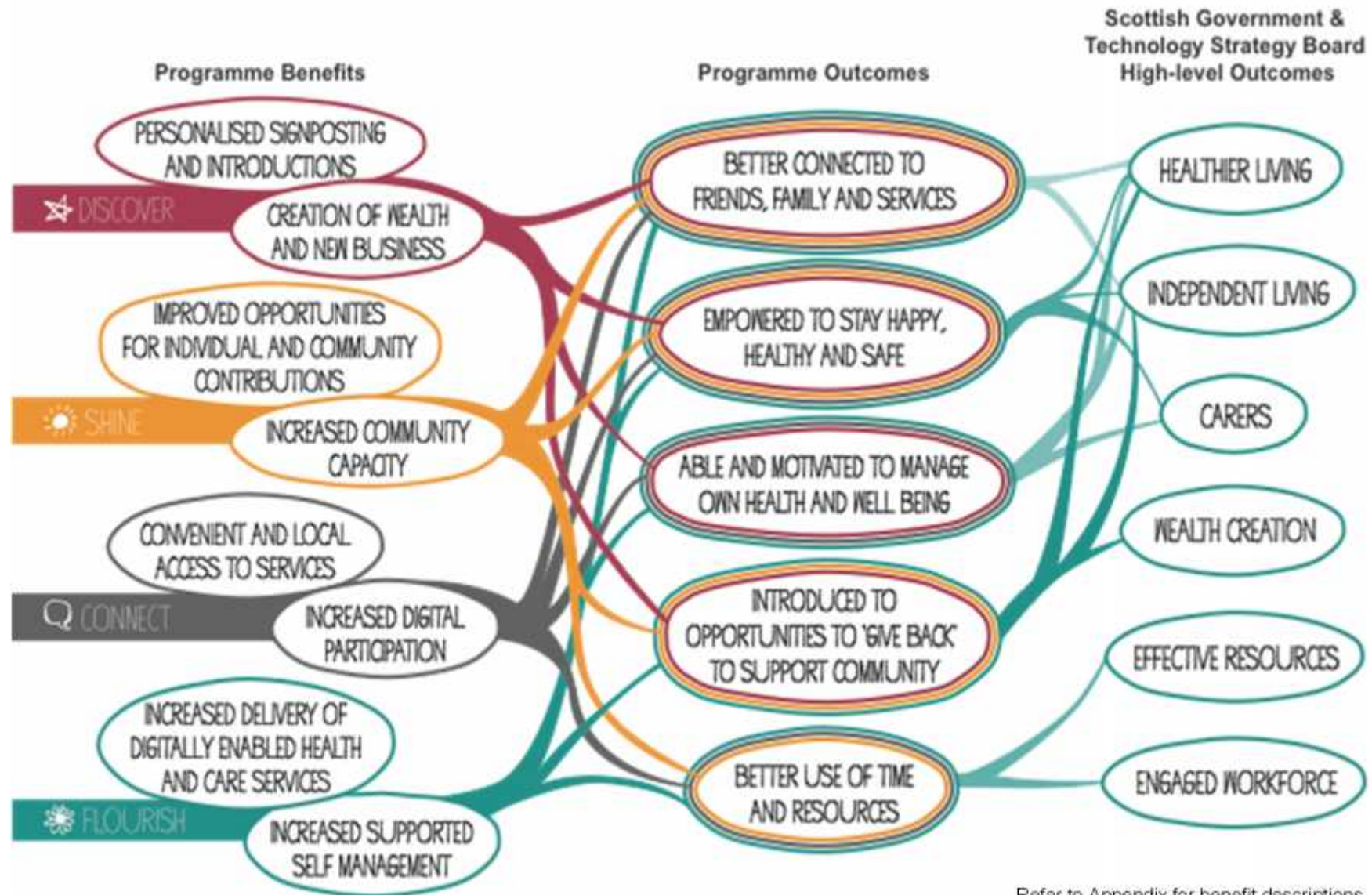
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RECOMMENDATIONS

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# Benefits



Refer to Appendix for benefit descriptions



# Technical Infrastructure and Market Relations (SIG 4)

- Current List:
  - Relying on Existing IT infrastructure
  - Relying on Existing eHealth Infrastructure
  - Ensuring that the Use of Technology is simple to understand
  - Maintaining Good Practices in Vendor Relations
  - Implementing a Service Monitoring Function
- Reflection:
  - Define the relationship to the Information Infrastructure within the delivery organisations (you might span several, you may want to obsolete some elements, ...)
  - Usability should be in the design/deployment process
  - Consider using mechanisms that make procurement more flexible and successful, e.g. PCP, try to avoid very rigid procurements (particularly around software)
  - Monitoring will change throughout the lifetime of the system is it easy to change? Who benefits from monitoring? Ensure who does the work necessary for monitoring has commensurate benefit.

# Summary

- Scotland has a legal framework in place that legitimizes change, provides guidance on success, and mandates some elements of process
- There is a tension between success factors and process – properly designed processes have success factors “built in”
- Systemic change is difficult to achieve

# Thanks to...

- Technology Strategy Board
- NHS 24
- Scottish Centre for Telehealth and Telecare
- The Living it Up team