Telecare Case Study 2

Aid to Independence

<table>
<thead>
<tr>
<th>Age at time of referral</th>
<th>35</th>
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</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Male</td>
</tr>
<tr>
<td>Equipment installation Date</td>
<td>5/8/2010</td>
</tr>
<tr>
<td>Equipment removal Date</td>
<td>17/2/2012</td>
</tr>
<tr>
<td>Reason For removal of equipment</td>
<td>No Longer required – full rehabilitation achieved</td>
</tr>
<tr>
<td>Number of days equipment Installed</td>
<td>548 (18 months)</td>
</tr>
<tr>
<td>Referral Source</td>
<td>Adult Social Care Team Social Worker</td>
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</tbody>
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Referral Form Indicators
- Loss of ability to live alone
- Reliance on others

Likely outcome without Telecare intervention
- Prolonged hospital admission

Telecare Objectives
- Enable independence
- Support for carers

General Health History
- Stroke March 2010
- Heart condition

Background
Edward suffered a stroke at the age of 35 and was initially treated at a hospital outside of Milton Keynes. Edward also had an ongoing heart condition for which he received treatment at the Papworth Hospital.

Following his stroke Edward was left with communication difficulties which made it difficult for him to express his thoughts or to explain to others how he was feeling or what he was experiencing.

On discharge from Hospital Edward moved in with his family who supported him with his rehabilitation however they were not able to be with him 24 hours a day and their concerns were principally about the times when Edward was on his own and being able to safely carry out normal activities such as using the cooker, adjusting the heating controls and being able to express himself should an emergency situation happen.

ASSESSMENT AND IDENTIFIED RISKS

Aid to independence
When the telecare assessment was carried out Edwards’s mother was also present. The Telecare Officer was able to suggest telecare equipment that could be installed to support Edward. This was significant to both Edward and his family as installing an alarm and telecare sensors provided them with the reassurance they needed.

The risks were specifically in relation to the times that Edward spent on his own and were concerning the safety of his environment and providing a way of communicating in order to raise an alarm.

Environmental sensors such as smoke detectors and heat detectors are linked to an alarm unit and will alert if a specific event such as a build-up of smoke is detected. This relatively simple solution allows people to continue with their normal routine in the home but manages a very specific risk which is particularly important when the person lives alone.
• Smoke Alarm
• Heat Sensor
• Minuet Watch

To manage the risk of alert Edward who was reluctant to wear the traditional pendant alarm was issued with a Minuet Watch this is a working watch with an alarm alert function. Edward was advised that if at any time he felt he needed help that he could use the watch in the same way as a pendant alarm to raise an alarm. The family also felt that this solution was more appropriate for someone of his age and that he was much more likely to wear it.

The family raised a concern they were not confident that Edward would be able to deal appropriately or be able to express himself if there was smoke present in the property or a possible build-up of heat which could be an imminent risk of fire. It was agreed that the installation of a smoke alarm and a heat sensor would provide peace of mind and reassure them that appropriate action would be taken if such a situation should arise.

If a telecare smoke detector or heat sensor activates because of the nature of the risk to the service user the control room operator will take immediate action and call out the fire service. The Fire Service in Milton Keynes regularly make referrals for telecare monitored smoke alarms and heat detectors when they identify people they consider to be high risk.

Installation History

Edward continued to be supported by the telecare service throughout his period of rehabilitation working towards regaining his full independence to live alone. As Edward’s health and communication continued to improve it was felt that telecare was no longer required and the equipment was removed.

Although there had not been any significant events which required intervention by the Alarm Centre during the time the telecare was installed both Edward and his family expressed their appreciation for the support that Telecare had given him during his rehabilitation and said that the equipment had given them reassurance and confidence during his period of recovery outside of a clinical environment.

Feedback from referrer-

Quote from Social Worker supporting clients who have had a stroke ‘All the telecare equipment when people have them installed it gives them an opportunity to start taking control back about what happens to them and regain some independence’