Enabling You with Technology -Transformation Programme – Case Studies

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Sarah's Story: Right-sizing care

Sarah's family members and her care agency raised concerns that she wasn't engaging with the care and her family felt that she required additional support at night. Sarah required a re-assessment, and sensors and smart plugs were installed in her home to support this process.

The data showed day and night-time activity which gave an indication of what was needed going forward.

The data presented a clear picture of Sarah's activity and was used to adjust her care and support to meet her increased needs to achieve the best outcome for Sarah, providing support at the appropriate time.

Danica's Story: Baselining needs

Danica is in her 80s and has been diagnosed with early dementia, she lives alone. 4 care calls a day alongside social calls were recommended to support her to establish a normal routine leading up to bedtime. Neighbours had been reporting that she was leaving her home at unusual times during the night.

Sensors and smart plugs were installed in her home with her agreement because of the concerns raised about Danica's ability to manage independently, which conflicted with her own view. The technology was an opportunity for Adult Social Care to gain an objective view of Danica's life at home.

The data initially showed that Danica was unsettled during the night but not leaving the property. The technology also flagged that the door was only being opened twice during the day, even though she was expected to receive 4 care calls daily. As there were no other doors leading into the property, concerns about the care agency's visits were raised and an investigation was initiated. With the planned support, (4 calls per day) in place, it has been possible to support Danica with her night-time routine. The plan is to keep the technology in place to enable Danica to remain in her own home in long as possible.

Sam's Story: Supporting independence at home

Sam has a history of falls and UTIs. After his most recent fall he was discharged from hospital into a care home on D2A.

At the D2A assessment Sam said he wanted to go back home and be with his dog. Sam has full capacity and agreed to explore technology options that could support him to maintain his independence safely at home. There were concerns that the stairs in Sam's property would increase his risk of falls. To reduce this risk, Sam agreed to set up a micro-living environment in his home and was supported to go home with 4 care calls per day and motion sensors. Within two weeks, Sam was at home and celebrated his birthday with family and dog.

The motion sensors reassured everybody that Sam was not using the stairs and was managing safely at home. The sensors also showed a reduction in falls and trips to the toilet (indicative of UTIs) and this was this thought to be due to the care calls providing Sam with regular food and fluids.

The technology enabled Sam to maintain his independence in an environment he wanted, Sam has not had any falls since being at home and continues to manage safely with 4 care calls per day.

Rita's story: evidenced based decisions

Rita was receiving 3 calls a day before going into hospital. Upon discharge, the hospital initially advised that Rita should return home with 24-hour care but with support from the Technology Enabled Care Team, it was agreed that it was safe for Rita to go home with 12-hours of care alongside smart plug and motion sensors. Rita has full capacity and was on board with this decision.

Rita's family do not live close by and they had concerns about her being home alone with a high risk of falls. There were also pre-existing concerns that she would not be able to make herself drinks or take herself to the bathroom outside of care calls. The data showed this wasn't the case, relieving the family's anxiety as well as increasing Rita's confidence.

The data helped to support the conversation with the family and enabled Rita to make her own decision about how and where she received her care - it was felt that the family may have encouraged Rita to consider a placement in residential care.