



Redditch and Bromsgrove Clinical Commissioning Group

Please contact: Access to Information Team

Email: MLCSU.FOITeam@nhs.net

Direct Tel: 01772 214 227

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Re: Request for information under the Freedom of Information Act 2000
Ref no: CAS-04878-L7M5L0-RB

Thank you for your correspondence dated 12 November 2019 making a request under the Freedom of Information Act 2000 for access to information which may be held by NHS Redditch and Bromsgrove Clinical Commissioning Group (CCG).

You requested the following information and our response is detailed below:

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

Could I possibly suggest that you direct these questions towards one or some of the following Trust employees: - the Matron in charge of the locality, Community Liaison team, Multidisciplinary health and Social care staff, Director of operations, Telecare and response manager if applicable, integrated services manager &/or Director of Nursing.

INTRODUCTION - With future emphasis being towards INTEGRATED CARE, this FOI is investigating how advanced all types of healthcare organisations are, in being able to access information about patients in their own home /other non-hospital settings and supporting the local population with long term conditions.

This part of the FOI survey is directed at CCG Trusts, (although other types of healthcare providers will also be polled) and relates to the use, endorsement or sub-contracting of a manned response and monitoring centre, to provide 24x7 monitoring and communication which may;

- address patients' concerns and questions
- act upon safety-related alarms and alerts
- include out of hours provision for NHS patients and private customers alike.

Some CCG's have already implemented monitoring centres and even promoted these to other NHS organisations as an income generating opportunity. We understand that the greater impetus has been to promote dignity, independence and safety in a patient's own home and as a way of expediting hospital discharge plus pro-actively reducing hospital re-admissions and A&E attendances as well as taking the pressure from over stretched GP services. Not to be confused with 111, (although a monitoring centre shares some similarities) a monitoring centre can pro-actively contact the patients, relatives and carers, as well as take data feeds from a number of devices and alarms, around the home and also attached to the patient at home.

In order to assist with this survey, could you please answer the following: -

(NB- if this FOI represents a multiple of CCG's please assume, we would like responses to reflect all CCG's covered by the same FOI address)

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1. Does your organization presently provide a Telecare operation centre to monitor your local population or monitor specific conditions?

IF the answer is YES please reply to the questions below – 1 to 8 ONLY

IF the answer is NO please skip to questions 9 to 10 ONLY

Yes – we do have/use a monitoring centre

- a. Is this service staffed by clinical or non-clinical staff?
 - b. Is this an internal support system using your own staff to monitor the calls?
 - c. Is this an external support system run by a GP consortium, other CCG or acute Trust/ NHS provider and does this team have a name/department title/ contact?
 - d. Is this an external commercially available centre or Local Authority centre and if so, could you disclose the name of the 3rd party provider?
 - e. Do you know your cost per patient commitment for using the monitoring service?
 - f. Do you know what Software is used to hold patient contact data and log calls – if any CRM system used at all? Also, if known, do you know the annual cost for use of the software?
 - g. How could the service/ software- be improved?
2. If CRM/ Call logging system is NOT used, would such a software system prove useful for audit, reporting, management information, communication – or any other reason?
 3. Do you know if calls logged are written into your PAS or the patients' GP system?
 4. Do you collect any data from the likes of? –
 - a. Glucometers/ Spirometers/ weighing scales/ECG
 - b. Future advances such as Body worn devices / smart watches that collect data such as Spo2, BP, Pulse, Temp, Movement
 - c. Manually taken vital signs at home sent into the cloud and then onto some other electronic record
 - d. Wellbeing questionnaires completed by the patient
 - e. Domiciliary visits notes
 - f. GP or Community Nurse or Social care notes
 - g. Smart Home devices such as alerts re Carbon Monoxide levels, Intruder alarms, Non-Movement etc.
 - h. Fall detection systems
 - i. Activities of Daily Living monitoring

Other devices – not named above (please comment)
 5. If you do not collect data from remote devices, would you see any advantages to incorporating data collected from any of the items listed above, by way of ongoing monitoring, establishing baseline health measurements or general patient & social safety/wellbeing? (please comment)
 6. Do you use a Video link to get visual contact with your patients? YES/NO
 - a. If YES – why do you see this as important
 - b. If NO – why is this not seen as important
 - c. If NO - is this an aspiration?
 7. Have you done any ROI analytics/ produced any research, to rationalize why telecare monitoring does have a place in an ACUTE setting? If YES – are you able to share these?

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8. Who is the main person(s)/ decision maker (s) / team – who are responsible for the Telecare monitoring centre?
9. If the answer is NO – you do NOT have a monitoring system
 - a. Within the next 2 years, would a Telecare Monitoring Service be something that the Trust would consider as a way of either reducing hospital admissions, supporting an earlier hospital discharge, promoting population health and wellbeing and/or recognizing and acting upon patient deterioration sooner or maybe managing employee workload (or any other possible advantage not listed)?
 - b. Could you explain your reasoning for any of the 3 possible answers given above please?
10. Who is the main person(s)/ decision maker (s) / team – who would be responsible for the decision to use a Telecare monitoring centre?

NHS Redditch and Bromsgrove CCG do not hold this information, it is held with the providers NHS Worcestershire Health and Care Trust, if you would like to redirect your request please use the link provided below;

<https://www.hacw.nhs.uk/our-services/freedom-of-information/>

Right of appeal

Should you require any further information or clarification regarding this response, or do not feel that your request has been answered as you would expect, please contact the FOI team to discuss. However, if you remain dissatisfied with the service you have received in relation to your request and wish to request a review of our decision, this can be formally requested in writing and must be within a reasonable period of time (two calendar months) from the date this response was issued

Initially you should write to the freedom of information officer, either by email on MLCSU.FOITeam@nhs.net or post to Jubilee House, Lancashire Business Park, Leyland, PR26 6TR, specifying why you feel you have been wrongly denied access to the information requested. The freedom of information team will make sure your request is investigated by an independent reviewer who was not involved in the original consideration of your request and a written response will be provided within 20 working days.

If you are not content with the outcome of your internal review, you may apply directly to the Information Commissioner's Office (ICO) for a decision. Generally, the ICO cannot make a decision unless you have exhausted the complaints procedure provided by NHS Redditch and Bromsgrove CCG. The ICO can be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF
www.ico.gov.uk

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<https://ico.org.uk/media/for-organisations/documents/1151/datasets-foi-guidance.pdf>

Yours faithfully

FOI Officer

On behalf of NHS Redditch and Bromsgrove CCG