Investment

Money allocated to sector not leading to change

Technologies How operators can become more efficient

Downing LLP Major milestone for Mysa Care

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In focus

Paradigm shift Digital transformation

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Dr Kristoffer Kenttä, engagement manager, and **Dr Leonid Shapiro**, managing partner, both at Candesic, and **Tony Thiru**, chief executive at Fulcrum Care Consulting, review technology in care homes for older people. How it makes operators more efficient and improves outcomes for service users



Leveraging technologies

he demand for elderly care has been growing inexorably above population growth, and this is not set to change in the medium term. This increasing burden on society is primarily driven by an ageing population and one living with more long-term conditions, particularly dementia, which is a major driver of care home use.

Despite care home placements reducing in the last five years, the sector is still plagued with high-cost inflation, staffing shortages, and a more demanding/acute service user population as care has shifted to homecare for those less in need (see Figure One).

As a result, operators are under financial pressure due to the growing discrepancy between local authority funding rises vs. inflation and minimum wage hikes. For instance, while inflation has risen at c.7–8% in recent years and minimum wage by 6.2%,¹ funding from local authorities has merely grown by 2.2% in homecare and 4% in residential and nursing homes.² This is especially worse for homecare operators where a larger portion of staff are on minimum wage.

Staffing shortages are another pressing issue. The adult social care vacancy rate in England has doubled from 4.3% to 9.9% over the last decade to 152,000 vacancy posts in 2022/23, according to Skills for Care.³

A closer look into care homes rated by the CQC as 'inadequate' or 'requires improvement' reveals a shortage of permanent staff and excessive reliance

FIGURE ONE ELDERLY CARE DEMAND IN ENGLAND

NUMBER OF ELDERLY CARE SERVICE USERS VS. ENGLAND'S ELDERLY POPULATION # OF USERS (IN 000s); # OF PEOPLE (IN MILLIONS)

CAGR % (2017/18-2022/23)



NOTE 1 ESTIMATED HOMECARE BASED ON GROSS CURRENT EXPENDITURE BY LOCAL AUTHORITIES, AV. UNIT COST (£/H) AND ESTIMATED AV. HOURS CONTRACTED PER USER SOURCES NHS DIGITAL; UK OFFICE FOR NATIONAL STATISTICS (ONS); LAINGBUISSON; CANDESIC RESEARCH AND ANALYSIS on temporary workers as one of the main factors. This compromises the continuity and quality of care while increasing operational costs.

As challenges continue to pile up, care home operators need something beyond incremental efficiency improvements to future-proof their business.

Improving care quality and protecting margins

Technology has reshaped the way we live and older people's care is no exception. Adoption of digital tools by operators is a powerful lever to not only save costs, but to also enhance quality of care, staff retention, regulatory compliance, and the allocation of resources.

We have categorised the elderly tech landscape for operators into five core segments, alongside two emerging segments that show promising potential (see Figure Two).

Back-end functions

FIGURF TWO

Care homes are under increasing pressure to provide efficient, error-free services, while managing limited resources, especially staff. Automating administrative tasks, such as financial controlling, payroll management, etc., significantly reduce workload and 'red tape' for staff. This area is already mature and use adopted in almost all care homes.

Care records and management

Care workers want to spend more time caring for residents as opposed to conducting mundane administrative tasks. Care planning is key to understand the service user's needs and preferences. Traditionally, paper has been used that requires time-consuming upkeep and sometimes leads to misinterpretations, such as medication errors costing the NHS up to ± 1.5 bn annually.⁴ Almost all corporate operators adopt this as well.

Staffing and workforce development

Given the staffing constraints within social care, digital solutions can help in recruiting, training, and retaining staff, as well as in efficiently scheduling and managing their work. Shift and rota planning tools will help ensure the right staff are available at the right times to meet the needs of the residents. Operators can also utilise e-learning platforms for ongoing staff training, ensuring they are up to date with latest practices. Most corporate operators adopt this too.

Resident engagement and communications

As the elderly population often faces challenges such as reduced mobility, cognitive decline, and social isolation, innovative patient engagement technologies can play a critical role. Digital platforms and virtual communications enable residents to easily stay in touch with family, friends, and caregivers, thereby improving overall wellbeing. These technologies can also provide personalised entertainment, cognitive exercises, and education, tailored to individual needs and preferences. These are less adopted due to lack of specific funding for this from payors; private pay focused home use this as a sales tool.

Regulatory compliance and safeguarding

Care home facilities must comply with CQC regulations to avoid damaging their reputation and risking closure.



SOURCES CANDESIC RESEARCH AND ANALYSIS

CQC inspections, often stressful and laborious for staff, can be streamlined with compliance solutions. Using software for incident reporting and monitoring safeguarding protocols helps identify areas of concern and improvements.

These tools aid in managing care quality, enhancing service ratings, and residents' outcomes. Opportunities exist for more adoption here.

Monitoring in care home settings

Monitoring technologies have successfully been implemented in care home settings in recent years and are a growing trend. Sensors and personal alarms provide alerts in case of falls, unusual behaviour, vital health indications or other emergencies, thereby facilitating prompt response and potentially life-saving interventions. On the operational side, such solutions aid workforce management as staff can be employed as and when needed based on real-time insights. Some operators have evidenced a 55% reduction in falls, 40% reduction in nightstaff time, and 20% reduction in hospital admissions.⁵ Many of the new approaches involve sensors that do not require resident interaction, automating the data collection and enabling 24/7 monitoring.

Robots

Although yet to be evidenced and still in a very early stage, we believe robots in elderly care settings represent an attractive opportunity for operators to advance their care offering.

These robots can assist in routine tasks, reducing strain on human staff. They offer residents companionship to combat loneliness, cognitive exercises, and entertainment.

Robots can also monitor key health indicators and alert staff in case of emergencies, ensuring appropriate medical attention and safety.

Case studies

Health Call Digital Care Home

The County Durham and Darlington NHS Foundation Trust (CDDFT) developed the Health Call Digital Care Home designed to streamline health information and enable remote monitoring.⁶

Via a four-month pilot and post-rollout engagement, the platform was further refined to meet the needs of the participating care homes. This system offers three key functionalities:

- 1. Referral to community services
- 2. Health records integrations
- 3. Monitoring

Adopted by 97% of the older people care homes in the region, the system

has significantly reduced hospital admissions, with an estimated two admissions avoided per month per care home. This has also led to increased staff satisfaction due to reduced wait times for referrals.

The council and CDDFT plan to roll-out this system to other care home types.

Acoustic monitoring technology

WCS Care, provider of 13 care homes, trialled night-time acoustic monitoring tech, aimed at addressing night-time issues like UTIs, falls, and confusion.⁷

The system was introduced to offer greater night-time privacy, timely care, and better sleep quality, thus improving the health and well-being of residents. Despite challenges such as cost and installation issues, WCS implemented the system due to the benefits it provided.

This project led to a 34% reduction in night falls in its first year. The system allowed for less disturbance during night checks and quicker response times when residents needed assistance.

Over time, WCS achieved a 55% reduction in falls in homes using the system. The successful outcomes prompted wider adoption across the country.

Operators can leverage technologies to achieve better outcomes for service-users, while simultaneously reducing costs and improving staff engagement, protecting operators' profitability. We encourage operators to explore such advancements, even if not directly reimbursed as they may find they save money and improve care done the line in ways they have not envisaged.

NOTES

1 CBP-7735.pdf (parliament.uk)

2 LaingBuisson

3 The state of the adult social care sector and workforce in England (skillsforcare.org.uk)

4 Errors and the inappropriate use of medicines in UK care homes - The Pharmaceutical Journal (pharmaceutical-journal.com)
5 Ally & Nourish Care Join Forces to Enhance

Night-Time Care (allycares.com)

6 Durham County Council and County Durham and Darlington NHS Foundation Trust - Care Quality Commission (cqc.org.uk)
7 WCS Care - Care Quality Commission (cqc. org.uk)