Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee

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Community Alarm and Telecare Service – Annual Audit Carried out by TEC Services Association (TSA) – October 2020

Purpose of Report:	To advise of the outcome of the annual audit of the Community Alarm & Telecare service provided by Glasgow City HSCP in respect of TSA's common standards modules and their service delivery modules.

Background/ Engagement:	Since June 2011, the Community Alarm and Telecare service has been an accredited member of TSA (formerly Telecare Services Association). Each year the Community Alarm and Telecare service undergoes an annual audit to ensure that services are provided and delivered which focuses upon common standards and service delivery modules.

Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the content of the report and audit findings in respect of the level and quality of services provided.

Relevance to Integration Joint Board Strategic Plan:

Care Services support a range of vulnerable citizens, with 9,035 service users supported to live independently for as long as possible in their own home. Community Alarm and Telecare services can minimise the impact to other areas of Care Services such as Homecare. Typically the services receives 303,000 calls a year and our responder service responded to 29,356 requests for assistance, care home admission and help to facilitate hospital discharge.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer. Outcome 2: People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community Outcome 3: People who use health and social care services have positive experiences of those services, and have their dignity respected Outcome 4: Health and social care services are centered on helping to maintain or improve the quality of life of people who use those services Outcome 5: Health and social care services contribute to reducing health inequalities Outcome 7: People using health and social care services are safe from harm

Personnel:	The audit findings include recommendations that will include the requirement for training/awareness raising amongst relevant staff.

Carers:	None

Provider Organisations:	None

Equalities:	None

Fairer Scotland Compliance:	None

Financial:	None

Legal:	None

Economic Impact:	None

Sustainability:	None

Sustainable Procurement and Article 19:	None

Risk Implications:	None

Implications for Glasgow City Council:	None

Implications for NHS Greater Glasgow & Clyde:	None

1.   Background

1.1   TEC Services Association (TSA) is a representative body for technology enabled care (TEC) services, working on behalf of and advising service users and organisations including Telecare and Telehealth providers, suppliers, care providers, emergency services, government bodies and health and social care commissioners.

1.2   While, at present, there is no legal requirement for Community Alarm and Telecare providers to be a member or an accredited member of TSA, the purpose of (accredited) membership is to demonstrate that services are provided in compliance of TSA's Quality Standards Framework.

1.3   The Quality Standards Framework confines its requirements, evaluation, review, decision and surveillance (if any) to those matters specifically related to the scope of certification unless an extension of scope has been agreed with the organisation concerned. The Audit Scheme has been established to provide independent external audit of an organisation against these requirements.

1.4   The audit process covers 10 common standards and 3 Service delivery areas.

Common Standards

- User & Carer Experience
- User and Service Safety
- Effectiveness of Service
- Information Governance
- Partnership Working & Integrated Services
- Workforce
- Business Continuity
- Ethics
- Performance and Contract Management
- Continuous Improvement and innovation.

Service Delivery

- TEC Monitoring
- Assessment & Installation of TEC
- Response Services.

1.5   The audit was conducted using a document sampling process and discussion with senior management and staff in all areas of the services delivery; assessment; installation; call handling and; responder services.

2.   Report

2.1   TSA's Quality Standards Framework (QSF) operates a rating system as detailed below:

Rating	Definition
Compliant	An organisation that has demonstrated compliance with all the QSF outcomes and minimum criteria. However there may be some development observations found during the audit, which can be worked upon for the next audit
Requires Improvement	An organisation that does not meet the minimum criteria and requires corrective action before certification can be granted. A three month window is allowed for this improvement
Inadequate	An organisation where safety concerns have been identified which need to be corrected prior to certification being granted. A one month period is allowed for this corrective action.

2.2   Evidence was uploaded to TSA web portal prior to the audit being conducted on 13th & 14th October 2020.

The outcome of the audit is as follows:

Standards Modules		
Module	**Rating**	**Improvement Need**
User & Care Experience	Compliant	No
User and Service Safety	Compliant	No
Effectiveness of Care	Compliant	No
Information governance	Compliant	No
Partnership working & Integrated Services	Compliant	No
Workforce	Compliant	No
Business Continuity	Compliant	No
Ethics	Requires Improvement	Yes
Performance and contract Management	Compliant	No
Continuous improvement and innovation	Compliant	No

Service delivery Modules		
Module	**Rating**	**Improvement Need**
TEC Monitoring	Compliant	No
Assessment of and installation of TEC	Requires Improvement	Yes
Response Services	Compliant	No

It should be noted that where the auditor stated that the service was compliant the report stated:

"From the evidence reviewed prior to and during the audit by the auditor, the service appears complaint with all the criteria for this module."

2.3 Within the auditor's summary there was recognition of the:

- attention given to preparing for the audit
- the improving quality of service given to service users
- risk management approach to each area of service delivery, particularly in relation to the Covid pandemic
- the continued partnership working approach between Telecare and social work colleagues.

3. Audit Recommendations

3.1 There were two areas which required improvement prior to TSA issuing reaccreditation. These areas were in the "Ethics" module and "Assessment of and Installation of TEC".

The improvement requirement were noted as follows:

QSF Requirement	Evidence	Improvement Need
Demonstrate an awareness of local agreed procedures relating to "Do Not Resuscitate/Treatment Escalation Pans"	The DNACPR procedure was sent as evidence. However, discussion with one of the responders did not confirm that this was being followed. They stated that details were held on PNC and that they would look for the DNR and, where in place, not resuscitate but call an ambulance. This is contrary to the procedure which states, *"It is not appropriate nor are we trained and skilled in making these health decisions thus we would follow our normal procedures with our duty of care to all service users."* It is also at odds with the	The DNACPR procedure needs to be reviewed so that it is very clear for all staff, then managers need to ensure that the procedure is fully understood and is followed. The procedure also needs to be explained to service users, where appropriate

	information given to the Auditor by Managers who said that DNACPR's were not recorded on PNC and would not be taken account of by responders.	
Have Procedures in place to ensure that TEC signals cannot be interrupted, or blocked by the use of any other equipment	Discussion with installer confirmed that "Off the hook" test was not performed	Introduce an off the hook test so that confirmation can be gained at each installation that signals cannot be interrupted. The call could then be recorded on PNC as an off the hook test.
Demonstrate that during the installation, all TEC equipment has been fully tested and confirmed to be working.	Discussion with an installer confirmed that "range Tests" were not done at each installation - only where the installer felt it was necessary.	Range tests should be completed at every installation: 1. To ensure that calls can go through from various points within and outside the property, if required. 2. To reassure the service user of the furthest point within the property where help can be called for. This and the "off the hook" test needs to be built into the installation process. The Auditor suggested that a checklist could be used which is signed off by the service user and a copy left for information. This is industry best practice.
Auditor will be seeking assurance that providers are familiar with the relevant requirements of BS5839 part 6. "Organisations should refer to the TSA briefing paper "installation and monitoring of Fire Detection Equipment	The auditor was not satisfied that the service provider was familiar with the requirements of BS5839 part 6. In discussion with the installer, the auditor ascertained that the last time training on the installation of smoke detectors took place was in 2012, and was provided by the manufacturers service engineer.	BS5839 Part 6 confers responsibilities on anyone installing fire detection equipment to make it appropriate to the circumstances – not a one size fits all approach. The auditor would suggest that training is repeated, ideally with the fire service, if that can be arranged.

3.2   With the Improvement needs identified an action plan was drawn up to address these Improvements. Please see Appendix 1.

3.3   Evidence was supplied to the auditor on successful completion of the improvement needs on 07/12/2020.

3.4   The auditor confirmed in an email on 08/12/2020 that the improvement needs had been satisfied and it was recommended that Glasgow City Council be certified to the Quality Standards Framework.

4.   Recommendations:

4.1   The IJB Finance, Audit and Scrutiny Committee is asked to:

a)   Note the content of the report and audit findings in respect of the level and quality of services provided.

Glasgow City HSCP
Health and Social Care Partnership
TSA Audit 2020 – Required Improvement Action Plan

Issue	Action	Owner	Comments	Date Completed
Ethics Module				
• Responder had given statement at audit that information was stored on PNC call handling system and that they would look for DNR. • Do not resuscitate is Health Service requirement not Social Care.	• DNR policy statement to be issued to all ARC and Responder staff. • All staff to receive training on policy document.	Response Centre Manager/Seniors/ AAOM	DNACPR document reviewed	Completed 30/11/20
Installation module				

Off hook testing required Range Test required Compliance with BS5839 Part 6	1. Checklist to be created for Installers (EquipU technicians) to ensure that they compete:
	   a. Off Hook Test
	   b. Range test
		Response Centre Manager	Version 1.0 completed and laminated for reference document	Completed 23/11/20

	2. Incoming Call actions to be added to PNC call handling system to record:
	   a. Off hook test call received
	   b. Range test call received
		Response Centre Manager/Senior	PNC update with call actions	Completed 23/11/20

	3. Training to be provided on
	   a. Fire Safety at home Awareness
	   b. Installation tests for off hook and range testing requirements
		Response Centre Manager/EquipU manager	Training arranged for Wednesday 2/12/20. Hand-outs of course available Laminates of installation requirement available	Completed 02/12/20