

# **Recovery at Home** **South Tyneside**



**TEC & UCR**

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**Spread the word!**

**THIS IS  
SOUTH  
TYNESIDE**

# TEC Background

- Restructure of the team in 2018
- Dedicated Manager role
- Development of the Assistive Technology Assessor role
- Externalised the responder service – Home Care Model in 2020
- Integrated into the UCR model 2022
- Divert focus away from physical response teams to equipment and assessment to maximise peoples independence



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# Responder Model

- 4 zone model linked to our Help to Live at Home model
- Supported by Tunstall PNC providing zone specific data
- Notifications to the ARC via use of tech products, e.g falls pendant
- Assistive Technology Officer triages the call using basic questions to ascertain whether a responder should be dispatched or 999 call is required
- Follow up calls to people who have had a fall from our Wellbeing & Independence Service (WIS)



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# Current Demand

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January - March 2023

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1722 responder calls

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58% did not require assistance

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34% required assistance but no medical input

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6% of these required a 999 call

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<1% taken to hospital – only 1 person between 8pm-8am

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# Urgent Community Response (UCR)

- Provide more care and support in or close to people's homes, or a place they call home, rather than in hospital
- Prevent avoidable admissions to hospital
- Enable people to live healthy independent lives for as long as possible in their own homes, or the place they call home
- Timely return to their usual place of residence following temporary escalations of care to non-home settings



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# What does the service do?

Our team will help people at home if they suddenly feel unwell or has a condition that has gotten worse and needs urgent treatment or support

- **Breathing problems, COPD**
- **Worsening symptoms of a long-term condition**
- **Stomach pain that is getting worse**
- **Water infections and blocked catheters**
- **A fall or trouble moving around**
- **Serious cuts and wounds**
- **A breakdown in care, i.e. if your usual carer is no longer able to support you**



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# Current Position

- Implementation of the UCR model  
1<sup>st</sup> July 2022
- Additional capacity
  - Home first practitioners
  - Assistive Technology/ Wellbeing & Independence Service
  - Additional clinical resource, Nurse Practitioners, AHP's, Support staff
- Dedicated UCR Home Care (Help to Live at Home) commissioned



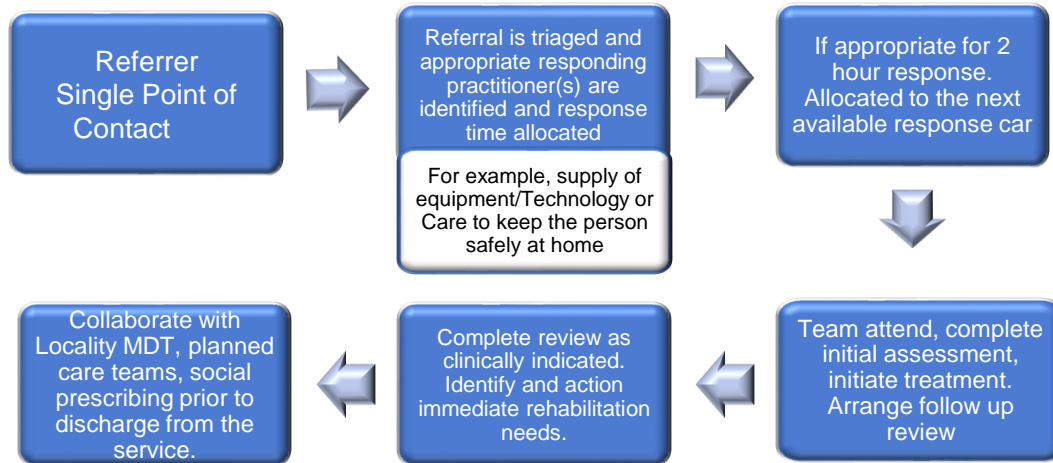
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# Current Model

One telephone number  
Examples of who can refer:  
GPs, ambulance services, care homes,  
self-referral and carers

- Does the person require a 2-hour response
- For example, has the person had a fall, or unpaid carer support broken down
- Can the person be treated safely in their own home



Complete referrals to partner agencies for example Social Care, Age Concern Tyneside South



# Current Issues

- Under utilisation of UCR across the full pathway. Referrals to health teams have increased. Compliance with 2 hr target is 72%
- Could keep more people at home if pathway more integrated
- Increasing waiting times for ambulances
  - Impact on the person
  - Impact on responders causing delays in responding to the next person
- Disconnect between UCR, TIS & NEAS

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# What are we going to do differently?

- Utilise the New UCR Technology-Enabled Care Decision Support Tool
- Connect falls response with Recovery at Home 8am – 8pm
- Collaborate with NEAS to co-design the appropriate response
- Utilise support from TSA colleagues



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