

NEWSLETTER September 2013

Welcome to the September 2013 newsletter from the Technology Strategy Board (TSB) Knowledge Transfer Network and the Telecare Learning and Improvement Network. We are grateful to the HealthTech & Medicines KTN and the TSB's Assisted Living Innovation Platform for providing newsletter funding for another year enabling us to continue to provide the most comprehensive newsletter available serving the telecare, telehealth, mobile health, digital health and assisted living communities.

Our free monthly newsletter is distributed to 48,000 subscribers in the UK and worldwide via e-mail and archived at www.telecarelin.org.uk. You can also find highlights on Prezi (monthly) or Rebelmouse (daily) or by following Mike Clark on Twitter (@clarkmike). With over 700 news and events links over the last month, we hope that you find this newsletter useful.

Following the summer break, the NHS prepares for the winter period with the prospect of serious pressures on hospital services. To address the pressures, the Government and Department of Health in England are looking at funds to support A&E and looking closely at primary care, out of hours and GP services particularly for people with long term conditions including personalised care plans and named lead clinicians. Plans continue to move towards online records and more integrated services. Technology is being used to develop digital health and care services and engage patients and users through new platforms via NHS England. There is a continuing mixed picture for telehealth in the UK as some services invest (eg Liverpool) whilst others are reviewing arrangements (East Riding). Smillionlives is now led through NHS England and the development of a new stakeholder forum from October 2013. Autumn is conference season and there are plenty of choices in the coming weeks in Edinburgh, Birmingham and London (see event lists). There is also a telehealth and telecare week in Scotland (from 28 October 2013). For practitioners, recent events in Salford and Crawley show the continuing interest in finding useful products and services to support users, carers and their families particularly as services become more personalised.

The newsletter contains a list of KTN/ALIP activities, conferences and workshops from the UK and Europe over the coming weeks as well as news from the UK and around the world. For weekly news, updates and information, you can register with the Technology Strategy Board, <u>ALIP</u> group and the <u>dallas</u> sub-group. You can follow the dallas programme on Twitter at @dallas_connect. <u>3 Million Lives</u> is on Twitter at @3MillLives and also at <u>LinkedIn</u>. You can also access a <u>Twitter Stream</u> via the TelecareLIN website.



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Additional links supplement (over 700 this month) - doc, pdf formats

The newsletter is Prepared by Mike Clark (Twitter: @clarkmike and http://storify.com/clarkmike) for the ALIP Knowledge Transfer Network and Telecare Learning and Improvement Network.

Item 1 – News from ALIP (Assisted Living Innovation Platform), the Knowledge Transfer Network (HealthTech and Medicines KTN) and dallas

(i) Ambient Assisted Living Forum Sweden on 24-26 September 2013

The <u>HealthTech KTN</u>, Assisted Living Platform will be attending and exhibiting at the 2013 Ambient Assisted Living event on 24-26 September in Sweden. We will be using this space to showcase to the AAL forum the achievements the UK has to offer within the Assisted Living markets. You can find out more about this year's meeting from the <u>website</u>.



(ii) Edinburgh B2B Event @ European Telemedicine Conference

European Telemedicine Conference, Edinburgh, 29-30th October 2013

There are targeted networking opportunities on Day 2 of the European Telemedicine Conference, Edinburgh, 29-30 October 2013 - meet NHS24, Samsung, Atos and others in one-to-one meetings.



For more information or to register please click <u>here</u>. A list of participants for possible meet-ups is available.

(iii) Stratification of Neurodegenerative Diseases

The <u>Health KTN Stratified Medicines Innovation Platform</u> (SMIP) and the <u>Technology Strategy Board</u> are designing an invite-only led event to build on the UK's strength within the global healthcare industries and put it at the centre of the next generation of medicine. Its seven partner organisations will together invest around £200m over five years in the area of stratified medicine.

In discussion with its partners and other experts, SMIP would like to explore the opportunities afforded by patient stratification to support the treatment selection and disease management of patients with neurodegenerative diseases.

SMIP will be holding two neurodegenerative disease workshops to inform its fifth round of competitions. The workshops will include representation from the Technology Strategy Board's Assisted Living Innovation Platform and stratification of patients for a wide variety of treatments and interventions in multiple locations (e.g. primary and secondary care and in the community) will be considered.

The first workshop is by invitation only and will focus on the needs of the customer; it will bring together key academics, clinicians, and others to consider unmet needs and debate opportunities.

The workshop will consider all neurodegenerative diseases and will not limit its thinking to dementia.

The second workshop, to be held in London on the 18 November 2013, will pick up on the needs and opportunities expressed in the first and will bring in providers and developers to consider solutions to the unmet needs. It is hoped that the attendees of the first workshop will attend the second and engage with the developers – the second workshop will also offer networking and consortia building opportunities so that attendees can begin to consider how they might work together.

Registration and partnering opportunities will be available from the end of September 2013. For more information please contact sarah.forson@healthktn.org

(iii) AAMI/FDA Summit on medical technologies in the home

The AAMI/FDA Summit on medical technologies in the home <u>event</u> is being organised by the Association for Advancement of Medical Instrumentation (AAMI) and the US Food and Drug Administration (FDA), and will take place on 9-10 October 2013 in Herndon, VA (close to Washington Dulles airport). The event will bring together the medical device industry and regulators with healthcare institutions and researchers. It will formulate initiatives and priorities for the safety of medical technologies in the home, including aspects related to design, usability and instructions, human factors and telehealth monitoring.

BSI is a supporting organisation of this event. For further details, including a full programme of the event, follow the link or contact Robert Turpin (robert.turpin@bsigroup.com).

(iv) More independent programme in Liverpool





Mi digital inclusion

A host of new opportunities to help people get on line for the first time is being offered throughout Liverpool. By the end of 2013 there will be 50 digital 'hubs' operating from community venues and workplaces across the City. Some hubs will be building-based in community centres, offering online access through desk top computers whilst others will bring learning into the community using laptops and tablets.

Mi, Liverpool's <u>dallas</u> programme, recognises that telecare and eHealth will only achieve scale if individuals and communities are digitally included. Mi partners <u>Liverpool Vision</u> and <u>unionlearn</u>, the learning and skills arm of the TUC, are delivering this element of the Liverpool dallas programme.

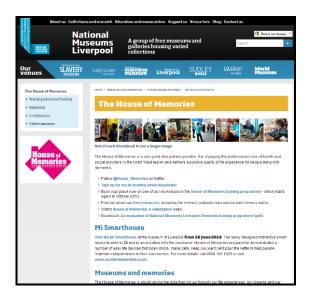
Unionlearn's Tony Saunders, says "the key to helping adults get online for the first time will be a network of Digital Champions, over 150 volunteers from the community and workplaces across the city have been trained to work on a one-to-one basis to find the link to help someone get on line for the first time, whether this a is for a personal interest, to make financial savings, improve contact with others or any other reason, once the connection is made the opportunities are endless. People will also have the opportunity to access a range of services and look at ways of improving their health and wellbeing online."

The target is to help a minimum of 1500 adults to get online for the first time but early signs indicate that this number will be easily exceeded. The hub model is very flexible – static, mobile and "pop-

up" – enabling wide and deep reach – situated in places that people like and need to go.

Mi house of memories

<u>House of Memories</u> (@house_memories) is a tailored dementia awareness training programme, developed by <u>National Museums Liverpool</u> (NML), which enables professional health and social care workers to help those directly affected by the condition to live well with dementia. The training introduces basic knowledge about the various forms of dementia and uses memory activity resources linked to the museum experience, which can transferred to the care setting.



The initial phase of the programme ran from January-March 2012 with funding from the Department of Health. More than 3000 participants have attended House of Memories training to date. Evaluation shows that the training has an overwhelmingly positive impact on participants, increasing their understanding of dementia and building confidence. With support from Mi - More Independent, House of Memories has been expanded to run until March 2015 at the Museum of Liverpool.

In May 2013, the programme won the NHS Health Education North West Adult Learners' Week Award 2013 in the category of 'Learning Together in Health and Social Care'.

Next Month (October 2013) House of Memories will be running its first dedicated dementia awareness scheme in partnership with four housing providers: <u>Liverpool Mutual Homes</u>, <u>Knowsley Housing Trust</u>, the <u>Regenda Group</u> and <u>Riverside Housing</u>. This latest development for the project will see staff from housing associations attend training sessions geared specifically to situations and scenarios that can occur in their daily work concerning people living with dementia.

We recently launched a new House of Memories <u>newsletter</u> to keep you up to date with all of our news and developments.



To find out how to book the training and to sign up for the newsletter, visit the website.



Mi international festival for business

Liverpool is gearing up for next year's <u>International Festival for Business</u> and Mi, the Liverpool dallas seed, is looking to use the event as a platform to promote eHealth.

As previously reported, Mi partners have already began to bring together people using care and health services, practitioners and creative and digital 'types' (You Tube video). This environment is beginning to identify new and novel approaches to address health care challenges. These will be practical, problem solving and creative sessions that will challenge existing business and operating models.

(v) Scottish Telehealth and Telecare Week

A WEEK of events showcasing the innovative and valuable work of telehealth and telecare will take place in Scotland next month (October 2013) and will feature key presentations from the Scottish dallas project, <u>Living it Up</u>.

The Scottish Telehealth and Telecare Week, which runs from October 28 to November 1, is being organised by the <u>Scottish Centre for Telehealth and Telecare</u> (SCTT) and the Scottish Government's <u>Joint Improvement Team</u> (JIT) with involvement from telehealth and telecare organisations from around the world.

The week commences with the formal launch of Scotland's new innovation centre for digital health, the Digital Health Institute (DHI) on October 28 (See <u>BBC Report</u>). The Digital Health Institute is collaboration between Scotland's leading academic institutions, the public sector and industry, to

foster innovation, generate economic growth as well as delivering innovative services and products to benefit the people of Scotland.

The inaugural European Telemedicine Conference, on October 29 and 30th, will focus on all aspects of telemedicine – telehealth, telecare, e-health and m-health. The event is being organised by SCTT and Healthcare Information Management and Systems Society (HIMSS) Europe and will feature experts in telemedicine from the USA, Spain, Norway as well as the UK. The Scottish conference sessions will focus on technologies that support an individual throughout their life stages – childhood, midlife and older age and will feature a key presentation from the Scottish dallas project, Living it Up.

Day Two of the conference will feature a European Innovation Showcase with live demonstrations of emerging health, care and mobile technologies. It will also incorporate a series of panel debates on innovation as well as 'Dragon's Den' style sessions which offer SMEs and start-ups the opportunity to pitch their new ideas to a panel of industry leaders including IBM, Samsung, Deutche Telekom and Atos.

An event for members of the public, including carers, is being held on Thursday 31 October 2013 at Hampden Football Stadium in Glasgow. This event will help raise awareness of new developments and enable participants to try out available technologies. The Living it Up project will also be making a key presentation at this event.

SCTT's Medical Director Professor George Crooks said: "We are very proud of the progress we have made in Scotland in implementing at-scale telehealth and telecare services. This has been achieved through a strong strategic commitment from the Scottish Government, NHS Boards, local authorities, third sector and industry partners to delivering on this important agenda.

"We are therefore delighted to be host country for this inaugural European Telemedicine Conference which will showcase best practice in telehealth and telecare from across Europe. We would encourage health, care and housing providers involved in telehealth and telecare in Scotland to get involved in the Scottish Telehealth and Telecare Week to help highlight the excellent work going on that is delivering real benefits to people in this country."

For further information and to register for the conference and showcase programme, please visit http://telemedicineconference.eu



For more information on the Scottish Telehealth and Telecare Week, visit the SCTT Facebook page www.facebook.com/TelehealthcareScotland or the JIT website http://www.jitscotland.org.uk/news-and-events/newsletters/?id=143.

Item 2 - International Telecare and Telehealth Conference 2013

Contributed by Mark Leivesley at Telecare Services Association

The International Telecare and Telehealth <u>Conference</u> 2013 takes place at the Hilton Birmingham Metropole Hotel on 11-13 November 2013.

"Telecare and Telehealth can be transformational in terms of enabling independent living much longer than would otherwise be the case"

Norman Lamb MP, Minister of State for Care and Support



This event is the largest specialist conference in Europe focusing on technology enabled services such as telecare, telehealth or telecoaching and attracts delegates from across the globe.

With the need to drive change across health and social care, technology enabled services can play a vital part in service redesign and integration and provide real cost savings and better use of invaluable resources. This key event will cover vital issues including:

- How are we addressing the national care crisis?
- How is technology supporting the transformation agenda?
- Are we achieving true integration across our care system?
- Practical ways to do more for less with your health and social care budget
- What are we doing to ensure that patient and carer needs remain central?

Details of the conference programme are available on the <u>TSA website</u>, with confirmed speakers including:

Norman Lamb MP, Minister of State for Care and Support
Edwin Poots MLA Minister for Health Social Services and Public Safety
Professor Stanton Newman, Dean, School of Community and Health Sciences, City University, London
Sandie Keene, President, Association of Directors of Adult Social Services (ADASS)

Colin Williams, Director of Transformation,
Newcastle City Council
Jonathon Linkous, Chief Executive, American
Telemedicine Association
Professor George Crooks OBE, Medical
Director and Director, Scottish Centre for
Telehealth and Telecare, NHS 24, Scotland
David W. Morgan FRCS, Medical Director SPS
& Associate Professor, University of Warwick

We will also welcome <u>Fabrice Muamba</u>, who survived a potentially catastrophic heart attack thanks to medical expertise and technology.

You can personalise your conference experience with a choice of over 20 breakout sessions, including interactive workshops, seminars and masterclasses – and gain CPD credits.

Registration also includes access to the Exhibition Zone, where delegates can experience the very latest in assistive technology and remote care product and service innovation, and network with the leading organisations that are setting the pace for change.

Places are filling fast. To guarantee your conference place book now to avoid disappointment.

Item 3 - RSM Conference - Ageing well – how can technology help?

Contributed by **Charles Lowe** for RSM

This year's conference, on 25-26 November 2013, at the Royal Society of Medicine at 1 Wimpole St, London will focus on how technology can help people to age well. It will cover a wide palette of issues relating to technology and ageing, including both physical & mental conditions, and the importance of social & spiritual considerations too.

Keynote speakers include Jon Rouse, Director General for Social Care, Local Government and Care Partnerships, Department of Health who will cover social care. Mary Baker, President of the European Brain Council and Professor June Andrews, the dementia management expert, will discuss mental health issues. Adam Darkins, who heads up the Dept of Veteran Affairs' telehealth activities will discuss technology use in the US to support people with long term conditions. Sadly the Most Reverend Desmond Tutu is unable to attend in person to close the conference; however he is sending a video message on how technology can help support spiritual wellbeing.

Registration is now open, with particularly attractive early bird rates.

Item 4 – 3millionlives - update

Contributed by Lois Quayle 3millionlives Lead, NHS England (email: lois.quayle@nhs.net)

NHS England recently published its vision statement for delivery of the 3millionlives programme, which sets out how NHS England proposes to deliver 3millionlives through a genuine partnership across NHS England facilitating collaboration between clinicians, and empowering patients to better self-manage their conditions, with the use of technology.

NHS England has established an 'Integrated Care for '3millionlives' Stakeholder Forum, which will bring together CCGs, providers, industry, AHSNs, and colleagues from social care, the third sector, as well as Local Government and housing, to form a collaborative group to collectively debate and resolve key system-wide issues around the delivery and implementation of Integrated Care for 3millionlives.

The Forum will meet on a quarterly basis, with the first meeting taking place in Leeds on Wednesday 16 October 2013.

The *3millionlives* programme will also have a presence at the Annual Commissioning Assembly event on 25 September – a poster presentation and hand-outs will be on display at the event, to

help further encourage commissioners to get involved in working in partnership with NHS England to deliver the 3millionlives ambition.

Item 5 - Recent Telecare events at Salford and Crawley

(i) North West Telecare Innovation and Best Practice summit

A North West Telecare event has been deemed a roaring success by a North West MP after the latest innovations and research in the sector were revealed. The North West Telecare Innovation and Best Practice <u>summit</u> held at Salford City Stadium in September was praised by <u>RT Hon Hazel Blears MP</u>.



The event, organised by <u>Contour Homes</u>, part of Symphony Housing Group showcased how technology can help the elderly and vulnerable to live more independently.

RT Hon Hazel Blears MP said: "It is vitally important to showcase all the good practice and innovation that has been developed in our region to make sure we help as many people as possible to live well with dementia. I will ensure that the ideas and ways to help people are fed back to the Secretary of State and ask him to support making use of Telecare and new technologies in the future."

Hazel spoke at the event about her own personal experiences with the Telecare industry and how she uses her role as an MP to make a difference to the sector. Hazel encouraged delegates to pass on their 'beacon' of knowledge so that others can learn from experience.



Left: Dawn Thornber, Telecare and Mobility Officer, Contour Homes. Centre: Alyson Bell, Managing Director at Telecare Services Association. Right: RT Hon Hazel Blears MP.



























Guest speaker Alyson Bell, Managing Director at <u>Telecare Services Association</u> (TSA) talked about how the TSA's inspiring vision is to lead technology enabled care and support to enhance people's independence and quality of life by inspiring, promoting and driving strategy, innovation and standards. "Our goal is to enable people to choose technology enabled care and support to enrich their everyday life."

Professionals from the housing, health and care sectors could also choose from a wide choice of workshops, training and networking opportunities throughout the day. One of these workshops was led Dr Malcolm J Fisk from Coventry University, who has pioneered new research to develop a code of conduct for Telehealth, which will ensure that there are standards in place for the sector to adhere to. Contour Homes Telecare and Mobility Officer, Dawn Thornber, who organised the event, said: I am thrilled with the positive feedback from the event. It was fantastic to be able to bring key suppliers and professionals together, here in the North West." The day concluded with a fundraising event in aid of Dementia UK. The event was funded by Contour Homes – part of Symphony Housing Group – and Trafford Housing Trust.

(ii) Crawley Marketplace event

Contributed by John Chambers and Doug Miles from UK Telehealthcare

The Charis Centre at Crawley, West Sussex was the venue for London Telecare's 11th Marketplace Event - and the first under the new trading name of UK Telehealthcare. With the support of West Sussex County Council including Social Care and Health, over 100 visitors attended, with some 27 suppliers of goods and services exhibiting all the latest devices and applications available.

Guests and exhibitors were warmly welcomed by Laura Hill, Clinical Executive Director of Crawley CCG, Andrea Hill from NHS Horsham and Mid-Sussex CCG and Beverley Burrell from West Sussex CC.

There was a wide range of attendees from the local NHS and Care Groups, Community Trusts, Commissioning Groups and many Call Centre managers and staff. Comments were very enthusiastic about the informal and relaxed way of gaining information on the services available. Also well attended were the break-out sessions with presentations from Seamus Flood, Medvivo; Bernard Wignall, Halliday James; John McLaughlin and Amy Sturgess, Invicta Telecare; Janet Jadavji, Yecco; Mark Stratford, CSL Communications; Alex Page, Welbeing; and Mike Dines, Easylink UK.

UK Telehealthcare's sincere thanks go to all the presenters, and especially to Beverley Burrell, our West Sussex contact, who worked tirelessly to promote the event locally.







L to R: John Chambers, UK Telehealthcare, Andrea Hill from NHS Horsham and Mid-Sussex CCG, Laura Hill, Clinical Executive Director, Crawley CCG, Beverley Burrell, West Sussex CC and Doug Miles, UK Telehealthcare (pictures courtesy of John Chambers and Doug Miles at UK Telehealthcare)

Item 6 - UK policy announcements

Here is a roundup of UK policy news over the last month. A fuller listing is available in the supplement (doc, pdf).

(i) Grant details for adult personal social services specific revenue and capital grant funding for local authorities for 2013 to 2014 are now <u>available</u>.

In addition there are details for:

- Guaranteed Income Payment (GIPs) disregard for 2012 to 2013
- Local Reform and Community Voices grant for 2013 to 2014
- Community Capacity grant for 2013 to 2014

Social care authorities should consider how their grants can be used to support a range of services that could include extra care, telecare, integrated support for older people where considered cost-effective.

(ii) GPs are likely to become the named clinician for vulnerable older people according to the Department of Health as a consultation closes (27 September 2013). Over 600 comments had been received by a week before the closing date.

The proposals centre on:

- appointing a single accountable clinician responsible for the overall management and review of a person's health needs
- providing more integrated out-of-hospital and out of hours services
- establishing a stronger role for general practice, building on its existing strengths and the values of the family doctor
- finding new and effective ways to provide improved access and support for people to manage their own care
- enhanced information sharing between clinicians and services
- giving people more choice and control over where, when and how they receive health and care

By the end of 2014 at least one third of A&Es should be able to see the GP records of their patients and at least one third of NHS111 services should be able to see the GP records of their callers.

The <u>changes</u> are planned to reduce the need for repeated trips to A&E, and speed up diagnosis, treatment and discharge home again, when patients do need to go to hospital.



- (iii) The government has <u>accepted</u> all the recommendations of the recent Caldicott report. The Health and Social Care Information Centre has <u>published</u> new guidance that sets out five rules so that staff can make sure they deal with confidential patient information safely and securely (<u>further coverage</u>).
- (iv) Secretary of State for Health in England, Jeremy Hunt has set out <u>plans</u> to help prevent future failures of care and safety at NHS hospitals based on the recent <u>Keogh Review</u>. NHS hospitals with the highest standards of patient care and safety will help those with problems. Each of the 11 Trusts now in special measures will be partnered with one of the best NHS Trusts in the country in innovative improvement contracts. Each of the 11 Trusts will publish their improvement plans via <u>NHS Choices</u>, and will update them on a monthly basis.
- (v) In a <u>speech</u> at the King's Fund on 12 September 2013, Jeremy Hunt outlined his vision for the future of primary care. This is an important speech and a number of extracts are reproduced below.

"The central challenge facing the NHS today is an ageing population. The over -85s are the fastest growing population group in the world, and will double by 2030. Sooner than that, we are likely to have 1 million people with dementia in this country.

And already one-quarter of the population, mainly elderly, have long-term conditions such as arthritis or chronic lung disease. For these people, quality of care at home is just as important as quality of care in hospital.

Hospitals, of course, will always be there for the most complex treatments and the most specialist care. But getting the best possible care outside hospitals means we enjoy a higher quality of life, spend fewer days in hospital, and keeps people happy, healthy and safe at home.

Not only is this better for us as patients, it is better for the NHS. It saves precious hospital resources for people who really need them. And it saves money overall - so that as we get older and need more care, we can be more confident the NHS will be there to deliver for us".

Four Principles

"For vulnerable older people in particular, it means we need a radical shift in our model from reactive to proactive care, from cure to care, from care to prevention and from paternalism to participation. So that's the first principle.

The second principle is clinical leadership. Local doctors know what's best for local patients, and they'll be the drivers for change. The vision I am presenting would not have been possible without the reforms to commissioning, which placed budgets in the hands of GP-led commissioning groups. It is their ingenuity and enterprise which is already allowing trailblazers to deliver this vision in parts of the country already.

The third principle is accountability. If we are going to transform out of hospital care, we must ensure that someone in the system is responsible for making it happen. Well-led multi-disciplinary teams are important – but as a member of the public I want to know who in the NHS is responsible for the overall care of my elderly mother or granddad. The person who is responsible needs not just responsibility but the power to make things happen quickly in a large and complex system.

The fourth principle is that any changes we make must stay true to the founding principles of the NHS. The highest quality care and treatment for all, no matter who you are. This means a special focus on vulnerable older people who live on their own and at risk of social isolation. And a particular determination to ensure that those without a strong voice, without pushy relatives, without the money to buy better care also get looked after in the way that we would want for our own friends and family".

The challenges

"By 2016 we will have three million people with not one, not two, but three long-term conditions.

Many of them will be elderly. When they are discharged from hospital they will not be 'cured' in the conventional sense. They will still need help, sometimes a lot of help, to manage a complex cocktail of illnesses and often disability and loneliness as well. Sometimes we do primary care well. Many GPs pride themselves on good continuity of care and we have many extraordinary district nurses.

But often we fail. 15-minute homecare visits when there is time to dress someone or feed them but not both. Patients left stranded at home because they have slipped through the cracks of the system. Care homes that struggle to get GP visits.

From next April I've proposed in the draft NHS Mandate that there should be a named GP for all vulnerable older people...

- to take responsibility for ensuring these patients have proper care plans and are supported to look after themselves
- to have the time to contact their patient proactively and not just when they walk through the surgery door
- to be able to decide how best out of hours care should be managed in their local areas, including, for example, choosing to take back responsibility at a practice level for delivering out of hours care
- to be able to decide what support their most vulnerable patients get from district nurses".
- (vi) The Department of Health <u>reports</u> that since April 2013, teams of patient inspectors have carried out more than 4,600 ward inspections across the country covering things that matter most to patients being treated in a clean, safe environment, tasty nutritious food, and high standards of privacy and dignity.
- (vii) The Government has made an extra £500 million funding <u>available</u> over the next two years to improve care for vulnerable older people and alleviate pressure on A&E hospital services. £250 million will be used by 53 English NHS Trusts this winter.

Of the £250 million:

- Around £62 million for additional capacity in hospitals for example extra consultant A&E cover over the weekend so patients with complex needs will continue to get high-quality care
- Around £57 million for community services for example better community end of life care and hospices

- Around £51 million for improving the urgent care services for example for patients with longterm conditions
- Around £25 million for primary care services for example district nursing, to provide care for patients in their home, preventing them from being admitted to A&E
- Around £16 million for social care for example integrating health and social care teams to help discharge elderly patients earlier and prevent readmission and
- Around £9 million for other measures for example to help the ambulance service and hospitals work better together.

£15 million of this money will also be spent on NHS 111 - to increase the number of clinicians and call handlers so that non-emergency visits to A&E can be avoided.

For the first time, any NHS Trust eligible for a share of the £250 million A&E funding for next year will need to ensure that at least 75 per cent of its own staff have been vaccinated against 'flu this year.

(viii) Fifty two projects have been <u>awarded</u> a share of £10 million to ensure homeless people receive better help once they leave hospital. It is estimated that homeless people attend A&E up to six times more than people with a home - and that currently 70 per cent of homeless people are discharged back onto the street without their housing or on-going care needs after hospital being properly addressed.

(ix) The government and NHS will join forces to invest £1 billion in technology to improve patient care and ease pressure on A&E departments. The money will form part of the government's long <u>term solution</u> to pressures on A&E by freeing up doctors, nurses and care professionals' time to care for patients and cut down on paperwork and bureaucracy.

This new funding will help deliver the government's commitment to allow everyone to book GP appointments and order repeat prescriptions online by March 2015, as well as give everyone who wants it online access to their GP record.

The Department of Health will be putting up a total of £500 million funding, and local health and care systems will be matching all the funding they receive. The total that will be made available for technology will be £1 billion. The £260 million announced earlier this year forms part of the Department of Health's contribution. NHS England is currently running second stage evaluation of this fund and expect to announce successful bidders at the end of October 2013.

The Integration Transformation Fund includes a number of national conditions, one of which is that local plans for use of the fund must include proposals for better data sharing between health and social care.

- (x) The UK is to host the first G8 <u>dementia summit</u> on 11 December 2013 to lead international action on tackling the condition (New <u>Blog</u> by Summit Team).
- (xi) There is updated Department of Health <u>guidance</u> that provides information and advice on determining ordinary residence for people requiring local community care services.
- (xii) In a new <u>blog</u>, NHS England's Deputy Medical Director, Mike Bewick, calls for GPs to help shape the future of primary care.

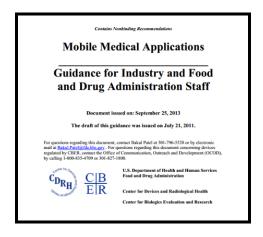
(xiii)NHS England has issued Clinical Commissioning Group (CCG) Bulletins 41 and 42.

(You can follow the Department of Health in England, Jeremy Hunt and Norman Lamb on Twitter at @dhgovuk, @jeremy_hunt and @normanlamb. In Scotland, you can follow the Scottish Government's Health Department on Twitter @scotgovhealth and Alex Neil @AlexNeilSNP (also @NHS24). In Wales follow @WelshGovernment)

Item 7 - Other news

Here is a roundup of other news over the last month. A fuller listing is available in the supplement (doc, pdf)

(i) The FDA has finally published its guidance on mobile medical apps – Mobihealthnews has the story (FDA press release).



- (ii) Warwickshire Telecare company 'Just Checking' has opened a new office in Sydney, Australia.
- (iii) The Worcestershire procurement process for telecare and telehealth seems to have come to a halt <u>according</u> to <u>www.telecareaware.com</u> sources suggest that the telecare part of the tender is to be retendered on a standalone basis there is no information on tendering the telehealth part.
- (iv) EHI <u>reports</u> that Liverpool Community Health NHS Trust aims to have 1000 telehealth patients within the next two years. The Liverpool programme has enrolled more than 50 patients so far. The initiative is part of the 'More independent' (Mi) programme which is part of dallas.
- (v) Following the roll out of the Friends and Families Test (FFT) for acute hospitals, All GPs, community and mental health services must be collecting FFT data from January 2015 (EHI story).
- (vi) East Riding of Yorkshire CCG is decommissioning its current telehealth services by the end of 2013. According to a letter seen by <u>EHI</u> it appears that an evaluation of the programme did not indicate cost-effectiveness for the 210 units deployed. The article refers to the importance of evidence for its use and the consideration of pay-as-you-go options (<u>Evaluation Report</u>).
- (vii) The Royal College of Physicians has <u>published</u> a 'Future Hospital' Report.

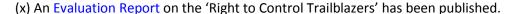


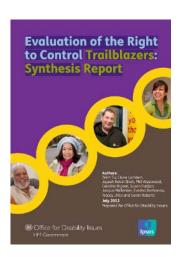
Sections 9.22 to 9.31 of the report cover 'Technology to improve the patient experience' and 'access to knowledge' and include references to the following:

Making appointments online, access to records, patient and carer engagement in management plans and design, reminders, access to test results, e-mail and text communications, mobile information, community support arrangements, self-management and support using helplines, telehealth and remote monitoring, virtual clinics and video-conferencing/instant messaging.

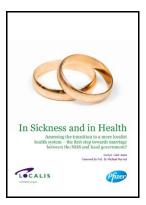
(viii) Health secretary Jeremy Hunt has <u>announced</u> a further £240m for the technology fund, in addition to the £260m 'Safer Hospitals, Safer Wards Technology Fund' making the total figure for investment £500m by 2016. All successful applications must be matched by local health and social care organisations, bringing the total to £1 billion. The fund is open only to NHS trusts, not GPs or other primary care organisations.

(ix) Work on the Hospital Episode Statistics system (more than 125m records a year) has reduced processing from 20 days to just five. This will be of value in analysing admission and outpatient data (EHI Report).





(xi) <u>Localis</u> has <u>published</u> a report 'In Sickness and in Health - Assessing the transition to a more localist health system' – the first step towards marriage between the NHS and local government?



(xii) In a new report, <u>Carers UK</u> consider that the 'Switched-on' generation are switched off to life-changing care technology.



The report, <u>Potential for Change</u>, shows that while over 7 in 10 UK adults routinely turn to technology for banking, shopping and communications, only 3 in 10 are embracing health and care technology to help care for older or disabled relatives. The national YouGov poll, commissioned by Carers UK and supported by <u>Tunstall Healthcare (UK)</u>, highlights that all generations are failing to switch-on to care technologies – with young and old, middle class and wealthier respondents and social media users all reporting low use of gadgets and online health and care support.

Telecare, the use of monitors, sensors and alarms to maximise independence and minimise risks, is one of the most established care technologies. Yet, when asked if they would use telecare without a description of what it is, just over 1 in 8 (12%) UK adults said they would use it, with 80% stating that they were not sure what telecare is.

Carers UK says the polling indicates the barrier to using care technology is often a lack of knowledge, advice and information rather than a public resistance to health and care technology.

When telecare was described to respondents, the percentage saying they would use it to help them if they were caring rose to almost 8 in 10 (79%), so long as it was affordable. This was even higher amongst over 65s (85%). Only 5% of UK adults said they definitely would not consider using it.

(xiii) Bristol Community Health, in partnership with Bristol Clinical Commissioning Group (CCG) and Safe Patient Systems is using a web-based telehealth solution linked to mobile phones as a tool to support patients with COPD (Chronic Obstructive Pulmonary Disease) and heart failure to manage

their condition in their own homes. Some <u>evaluation results</u> have been made available based on telephone interviews. Since the launch of the telehealth service in 2011 more than 700 people in Bristol have benefitted (Bristol Telehealth website).

(xiv) A three month consultation exercise by Sunderland City Council, which began last November, asked 18,000 Telecare customers for their views on paying for the service. The majority thought it was fair to have a small increase to £12.50 per month, which was implemented in April 2013, however, there was some concern from users (Sunderland Echo Report).

(xv) As the number of medical and health apps increases, there is growing interest in app stores – here is a <u>new one</u> from Allscripts.

(xvi) Up to 180,000 people with dementia feel trapped in their own homes, according to research <u>published</u> by the Alzheimer's Society. The report, 'Building dementia friendly communities: A priority for everyone', shows that 1 in 3 people with dementia surveyed only leave their homes once a week and 1 in 10 get out just once a month. The research also found that 44% of people with dementia feel like a burden and so avoid getting involved with local life. An economic analysis commissioned by Alzheimer's Society shows that dementia friendly communities could save £11,000 per person per year by helping people with dementia to remain independent, stay out of care for longer and have a better quality of life. A dementia friendly community is a city, town or village where people with dementia are understood, respected, supported, and confident they can contribute to community life (Dementia Challenge Website).

(xvii) The U.S. Department of Veteran Affairs is taking its telehealth program to a new level in a partnership with AMC Health with a five-year contract worth up to \$28.8 million according to mHealthNews.

(xviii) The Knowledge Transfer Network (IT) <u>asks</u> 'whether we are reaching a tipping point for mobile health apps?' - accompanied by an infographic.



(xix) Australian telehealth and telemedicine initiatives continue to be in the news – here are some recent links:

Australian University rolls out telehealth project

Claydata launches browser-based telehealth for aged care

Making Telehealth part of the future for Aboriginal Community Controlled Health Services –

Telemedicine Saves Australian Hospital \$705,000 in Travel Costs

Telehealth equipment sits idle in Queensland regional hospitals

<u>Telehealth Remote Monitoring for Community-Dwelling Older Adults with Chronic Obstructive</u> Pulmonary Disease

<u>Telehealth technology to close gap on rural isolation for Queensland patients</u> Time to focus on the national telehealth strategy

(xx) Up to 42,000 deaths from kidney problems could be prevented every year if patients received the best possible care, including giving them enough water and the right drugs, NHS guidance reveals. About 100,000 cases of acute kidney injury (AKI) could also be stopped across England with simple checks such as ensuring patients are hydrated and their medicines are reviewed. A new guideline report issued from the National Institute for Health and Care Excellence (NICE) says AKI costs the NHS between £434m and £620m a year – more than it spends on breast, lung and skin cancer combined (Guardian Report).

(xxi) Bosch Healthcare and Remedy Health Media have <u>formed</u> a strategic partnership to enhance patient engagement in telehealth.

(xxii) Playing brain-training video games may help reverse the natural decline in cognitive abilities among older people, according to scientists. They found that 60-year-olds who played a custom-designed video game for 12 hours over the course of a month improved their multitasking abilities to levels better than those achieved by 20-year-olds playing the game for the first time. The subjects retained those improvements six months later (Guardian Report).

(xxiii) Disruptive Social Care <u>Podcasts 20,21 and 22</u> are available from <u>Shirley Ayres</u> and <u>Stuart Arnott</u> – podcasts also feature <u>Dominic Campbell</u> from <u>FutureGov</u>.



(xxiv) Two-thirds of people aged 80 or over could be diagnosed with dementia in future because doctors are subjecting patients to needless investigation for and potentially damaging treatment of the disease, experts say. "The current prevalence of dementia is thought to be 10-30% in people over the age of 80, but the adoption of new diagnostic criteria will result in up to 65% of this age

group having Alzheimer's disease diagnosis and up to 23% of non-demented older people being diagnosed with dementia," say the British and Australian experts, writing in the British Medical Journal (Guardian Report).

(xxv) EHI <u>reports</u> on the Brussels to Barcelona mHealth 13 day Cycling Tour to monitor cyclists with and without diabetes (Tour <u>website</u>).



(xxvi) In a Telegraph Article, Some 71 per cent of adult women and 73 per cent of men are thought to be getting less than 150 minutes of moderate physical activity per week, which experts claim is needed to stay healthy. Researchers found that prescribing a 24-week program of exercise classes, such as swimming or pilates, to older adults encouraged them to be active for an extra 29 minutes per week on average.

(xxvii) Invicta Telecare commissioned a poll of 2,000 British adults aged between 65 and 93 which found that, with over-65s now totalling a sixth of the population, only six percent think of themselves as old and say it has an impact on how they live their life. More than eight out of 10 (83%) believe their age group can make a huge difference to the country. But 47% who took part in the survey by YouGov said "old fashioned" views about growing older still hold their generation back while 62% feel that they are more likely to be seen as a problem by society. One in five (21%) fear they will be classed as a burden to friends and family by other people as they get older. More than three out of five over-65s (65%) went on to admit they hadn't seriously thought about the type of care and support they would prefer as they get older during the last five years, leading to Invicta Telecare to call for adults to take control of their future independence.

(xxviii) Esther Rantzen has launched 'Silver Line' helpline for lonely older people (<u>Telegraph Report</u>, <u>website</u>).



(xxix) There is a short video on developing telecare services in the London Borough of Greenwich.

(xxx) Hub Launchpad has launched in London and is seeking to engage public service innovators.

(xxxi) The Guardian <u>reports</u> on estimates of the numbers of older people subject to abuse from carers and relatives.

(xxxii) Instead of a 782 Km roundtrip to see a specialist, a Vancouver Island resident took a 10 minute trip to a telehealth room at his local hospital for the 10,000th consultation on the Island.

(xxxiii) Treatment statistics obtained by the former health minister Paul Burstow show dramatic variations between the availability of surgery for people over 75 in different parts of England according to a Telegraph report. Patients over the age of 75 are six times as likely to be allowed cancer surgery in some areas as in others and procedures such as hip and knee replacements are 12 times more common for elderly people in some places than in others.

(xxxiv) Lung conditions are the cause of one in 10 of all deaths in Europe and smoking is a major factor, says a report from the European Respiratory Society. Deaths from lung cancer and chronic obstructive pulmonary disease (COPD) are expected to rise over the next 20 years because of past smoking rates. (BBC Report).

(xxxv) Improving general practice – a call to action – NHS England want your <u>comments</u> (open till 10 November 2013).

(xxxvi) Older people should be supported to carry on living at home argues Catherine Murray-Howard in this Guardian article.

(xxxvii) Professor Steve Field has been appointed as the first chief inspector of general practice (<u>Guardian article</u>).

(xxxviii) NHS Highland has ordered <u>tests</u> on its telecare systems following the death of a resident from fire in the home.

(xxxix) Smartwatches may start to play an important part in mobile health – The Telegraph has some <u>first impressions</u> of the Samsung Galaxy Gear smartwatch.

(xl) Carl Attkey makes some suggestions for raising awareness following the recent Telehealth Forum survey.

"This year, our survey revealed that there had only been a very slight increase -1% – in public awareness of telehealth, with 90% of the population stating that they were unaware of the technology. And again, many who thought they knew what it was had got the definition wrong, with some mistaking it for: "how much TV you watch", "telehealth advice line -111", and "a new programme on TV".

(xli) There is a new <u>map</u>, <u>animation and resources</u> on integrated care available from the King's Fund together with a new <u>blog</u> from Professor Chris Ham called 'Making integrated care happen: a marathon not a sprint'.



(xlii) There is a new Insights <u>dashboard</u> from NHS England that is tracking sentiment for the NHS, GPs and hospitals.



(xliii) The Health and Social Care Act 2012 introduced significant amendments to the NHS Act 2006. New guidance from NHS England supports two legal duties, requiring clinical commissioning groups and commissioners in NHS England to enable:

- patients and carers to participate in planning, managing and making decisions about their care and treatment through the services they commission
- the effective participation of the public in the commissioning process itself, so that services reflect the needs of local people

Transforming Participation in Health and Care has been developed by NHS England with a wide range of stakeholders and partners and its purpose is to support commissioners to improve individual and public participation and to better understand and respond to the needs of the

communities they serve. (<u>Press Release</u> and <u>Personalised care plans will give patients control of their own health – Tim Kelsey</u>)

(xliv) 'Learning from those who are doing it' – Dr Martin McShane, NHS England's Director for Enhancing the Quality of Life for People with Long Term Conditions gives his views in a <u>blog</u> on the latest innovations in joined-up care.

(xlv) According to <u>Pulse Today</u>, GP commissioners have put three quarters of all new contracts out to competition since taking over in April 2013. Figures obtained by Pulse reveal that 63% of the contracts offered by CCGs since April were put to full competitive tender and 9% out to Any Qualified Provider.

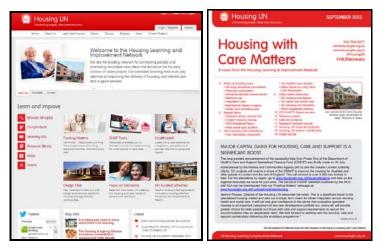
(xlvi) From Northern Ireland, Enterprise Minister Arlene Foster <u>Launches</u> the £7m Connected Health Innovation Centre. She said: "The Connected Health Innovation Centre will bring together leading academic and industry researchers to carry out strategic research focused on connected health solutions. This collaboration will see businesses, universities and health providers innovating together to create new products and services that will improve healthcare provision and deliver real benefits for Northern Ireland companies".

(xlvii) Tesco has announced a tablet with a price point of £119.

(xlviii) There is a 'concerning' north-south divide in the number of over-65s in England who use the internet, says Age UK - Surrey's older people were more than twice as likely to have web access as those in Tyne and Wear (BBC Report).

(xlix) 'Telehealth: let's hear from those who have used it' – Lynn Young, Primary Care Adviser from RCN writes for the Guardian.

- (I) 'Competition in the NHS is harming efforts to improve patient care', <u>says</u> outgoing chief Sir David Nicholson.
- (li) MPathy Plus are <u>offering</u> a Telecare Service Benchmarking Survey that allows participants to compare their services with others and covers performance, best practice and value for money.
- (lii)The Housing LIN <u>website</u> provides extensive information and resources across the housing, health and care sectors. You can register to get regular notifications and updates.



The September newsletter is now <u>available</u>. Of particular interest to Telecare LIN readers are the following publications which were used to inform the Long Term Care Revolution <u>Programme</u>:

(a) The Long Term Care Revolution

This Housing LIN Report comprehensively outlines the case for a revolution in long term care and captures some of the supporting material that has aided the development of the TSB's Assisted Living Innovation Platform's, 'Long Term Care Revolution' programme.

It sets out a vision for an alternative to institutional care, drawing on substantial evidence about the views of older people and their carers in the UK, lessons from abroad, the implications for industry/providers and makes recommendations to government and industry leaders on key factors for revolutionizing long term care for older people, including mainstream and specialist living environments (Report).

(b) Assisted Living Platform - The Long Term Care Revolution: A study of innovatory models to support older people with disabilities in the Netherlands

This Housing LIN Case Study no 76 was carried out by researchers at the Institute of Gerontology King's College London, to see what can be learned from the experience of the Netherlands about long term care in order to inform policy, research and opportunities for business in the UK. The comprehensive analysis of the two countries showcases examples of innovation and best practice in adult social care provision in a country similar to the UK in many ways. Of particular interest is that while the two countries are very similar in demographic profile and the experiences of the older generation, it is notable that according to official statistics older individuals remain disability-free for nearly half a decade longer in the Netherlands than in the UK (Report).

Also of interest is the recent Demos <u>report</u> 'Top of the Ladder' which highlights a shortfall of good quality housing for our ageing population and considers how a new generation of retirement housing could be a triple win for older people, the housing market and government.

The Housing LIN has regional networking <u>activities</u> which will be focusing this Autumn on housing with care. Also, in conjunction with the Chartered Institute of Housing a series of half-day events are planned looking at the future of sheltered housing and making the case for improvements in existing stock and developing 24/7 'care ready' approaches that can 'future-proof' housing and related care and support services, including the use of assistive technology(CIH Events).

Item 8 – Summary list of recent journal articles and evaluations

Each month, our supplement (doc, pdf) provides a comprehensive list of recent journal articles. Here are a few links from this month's list.

- Telehealth Remote Monitoring for Community-Dwelling Older Adults with Chronic Obstructive Pulmonary Disease
- Telemedicine can improve the quality of oral anticoagulation using portable devices and selftesting at home
- Effects of care management and telehealth: a longitudinal analysis using medicare data
- An internet-based intervention to promote mental fitness for mildly depressed adults: randomized controlled trial

- Telemonitoring and self-management in the control of hypertension (TASMINH2): a costeffectiveness analysis
- > Staff acceptance of a telemedicine intensive care unit program: A qualitative study
- Telemedicine collaboration improves perinatal regionalization and lowers statewide infant mort ality
- Automatic Wireless Monitoring Shows Benefits in Chronic Heart Failure InTime Trial
- A Retrospective Study on Patient Characteristics and Telehealth Alerts Indicative of Key Medical Events for Heart Failure Patients at a Home Health Agency
- A systematic review of evidence on the association between hospitalisation for chronic disease related ambulatory care sensitive conditions and primary health care resourcing
- Acceptability of Telemedicine and Other Cancer Genetic Counseling Models of Service Delivery in Geographically Remote Settings
- Access to chronic disease care in general practice: the acceptability of implementing systematic waiting-room screening using computer-based patient-reported risk status
- ➤ Can Telemedicine End the "Neurologist Gap" in Parkinson's Disease?
- Cyberhealth serving to support individual intake of medication
- Elderly Persons and Internet Use
- Family Caregivers of Patients With Heart Failure: A Longitudinal Study
- Giving rheumatology patients online home access to their electronic medical record (EMR): advantages, drawbacks and preconditions according to care providers
- Health and Illness in a Connected World: How Might Sharing Experiences on the Internet Affect People's Health?
- Home telemonitoring or structured telephone support programmes after recent discharge in patients with heart failure: systematic review and economic evaluation
- Improving outcomes for patients with type 2 diabetes using general practice networks: a quality improvement project in east London
- IN-TIME: HF outcomes improved with home monitoring
- > JAMA The HIPAA Conundrum in the Era of Mobile Health and Communications
- ➤ mHealth innovations as health system strengthening tools: 12 common applications and a visual framework
- New Media Use by Patients Who Are Homeless: The Potential of mHealth to Build Connectivity
- Participants, Usage, and Use Patterns of a Web-Based Intervention for the Prevention of Depression Within a Randomized Controlled Trial
- Pedometer-Based Internet-Mediated Intervention For Adults With Chronic Low Back Pain: Randomized Controlled Trial
- PLOS ONE: The Impact of Telehealthcare on the Quality and Safety of Care: A Systematic Overview
- Principles and Framework for eHealth Strategy Development
- > Smoking cessation in primary care: Implementation of a proactive telephone intervention
- > TalkMeHome: an in situ evaluation of a service to guide a lost person with dementia home safely
- Tele-accelerometry as a novel technique for assessing functional status in patients with heart failure: Feasibility, reliability and patient safety
- The cost-effectiveness of smoking cessation support delivered by mobile phone text messaging:

 Txt2stop Springer
- > The experience of young adult cancer patients described through online narratives
- The Impact of Social Media on Medical Professionalism: A Systematic Qualitative Review of Challenges and Opportunities

- Using the patient engagement framework to develop an institutional mobile health strategy
- ► Home Telehealth: Facilitators, Barriers, and Impact of Nurse Support Among High-Risk Dialysis
 Patients

Item 9 – Learning and Events

Featured Event: "Solving ICT and IoT Interoperability challenges to enable next generation Health & Social Care Systems"

Wednesday 23rd October 2013, 0930 to 1600 hours

Venue: Baker Tilly, 2 Bloomsbury Street, London WC1B 3ST

One of the biggest challenges facing all countries is that of maintaining wellbeing, delivering care to those with chronic long term conditions and supporting vulnerable people in society.

The need for more intelligent systems, lower operational expenditure and deployment costs, is driving new ways of thinking about how we generate, create, use, and share data and information. Connecting disparate health and social care systems and services is creating interoperability challenges which if not addressed will be a barrier to adoption and scaling to UK wide deployment.

The Technology Strategy Board dallas programme is addressing this interoperability challenge and is thinking beyond statutory health and social care to consider how new ideas and technology can be used to improve the way people live.

This workshop will explore several aspects of health and social care products (things), service design, data generation, collection and management, with particularly emphasis on solving interoperability challenges generated from multiple sources and/or the services.

For more information click here; https://icthealth23october.eventbrite.co.uk/

Click on the following links for further conferences and learning events over the coming months.

Technology adoption in healthcare: What's the problem? Manchester 1 October 2013 http://www.mbs.ac.uk/about-mbs/news/view/?guid=8d37d120-1b6d-458d-85b8-98162e5e5c7e

Horizon 2020 for Health – Funding and Collaboration, the opportunity for SMEs and UK Health sector, London, 2 October 2013, London https://connect.innovateuk.org/web/healthktn/events-view/-/events/6885117?p p auth=LeZZK8bz

Future of Health Conference, 3-4 October 2013, London http://www.futureofhealth.co.uk/

Health 2.0 London: Digital Health: How do we avoid 'Digital Exclusion' in society?, London 9 October 2013 http://www.meetup.com/Health-2-0-London/events/123909182/

Quantified Self Global Conference, San Francisco 10/11 October 2013 http://quantifiedself.com/2013/08/conference-preview-kostas-augemberg-and-the-quantified-summer/

A New Dynamic of Ageing: The NDA Programme & Age UK research showcase of the decade, London 21 October 2013 http://www.newdynamics.group.shef.ac.uk/showcase.html

Making health and care services fit for an ageing population, London 22 October 2013 http://www.kingsfund.org.uk/events/making-health-and-care-services-fit-ageing-population

Solving ICT and IoT Interoperability challenges to enable next generation Health & Social Care Systems, Londond 23 October 2013 https://icthealth23october.eventbrite.co.uk/

Centre for Connected Health Symposium, Boston 24-25 October 2013 http://symposium.connected-health.org/

Healthcare innovation: medicines, technology, service delivery and regulation, London 29 October 2013 http://www.westminsterforumprojects.co.uk/forums/event.php?eid=606

European Telemedicine Conference Edinburgh 29-30 October 2013 http://telemedicineconference.eu/

FutureMed San Diego 3-6 November 2013 http://futuremed2020.com/

EHI Live 5-6 November 2013 Birmingham http://www.ehilive.co.uk/

8th Annual UK Dementia Congress Nottingham 5-7 November 2013 http://www.careinfo.org/2013-events/uk-dementia-congress/

Successes and Failures in Telehealth – Brisbane, 11-12 November 2013 http://www.icebergevents.com/sft13/#.UcdN4jvuvWR

The International Telecare & Telehealth Conference 11-13 November 2013 Birmingham http://bit.ly/14T8FIO

Health 2.0 Europe Conference, London 17-19 November 2013 http://www.health2con.com/events/conferences/europe-fall-2013/

HSJ Telehealth 2013, London, 20 November 2013 http://www.hsj-telehealth.co.uk/

RAatE 2013 Coventry 25 November 2013 http://www.raate.org.uk/

Telemedicine & eHealth 2013: Ageing Well - how can technology help? London 25-26 November 2013 http://www.rsm.ac.uk/academ/tee01.php

Digital evolution: Making good things happen London 4 December 2013 http://www.communityhowto.com/news/digital-evolution-making-good-things-happen

mHealth Summit Washington DC 8-11 December 2013 http://www.mhealthsummit.org/

4th International Conference on Wireless Mobile Communication and Healthcare Washington 11-13 December 2013 http://mobihealth.name/2013/show/home

CUHTec telecare strategy course: Learning disability services Newcastle 20 March 2014 http://www.cuhtec.org.uk/wp-content/uploads/2013/04/20140320 LD.pdf

CUHTec telecare strategy course: moving to digital and mobile telecare Newcastle 21 March 2014 http://www.cuhtec.org.uk/wp-content/uploads/2013/04/20140321_mCare.pdf

eTELEMED 2014 - The Sixth International Conference on eHealth, Telemedicine and Social Medicine Barcelona 23-27 March 2014

http://www.iaria.org/conferences2014/eTELEMED14.html

Item 10 - Other useful links

HealthTech and Medicines KTN - https://connect.innovateuk.org/web/healthktn

Assisted Living Innovation Platform - https://connect.innovateuk.org/web/assisted-living-innovation-platform-alip

dallas Connect Sub Group - Join the Sub Group at: https://ktn.innovateuk.org/web/dallas

Housing Learning and Improvement Network www.housinglin.org.uk Now on Twitter: @HousingLIN

Telecare Learning and Improvement Network <u>www.telecarelin.org.uk</u>

King's Fund web site - http://www.kingsfund.org.uk/topics/technology and telecare/index.html

Telehealth and Telecare Aware – daily news and comments <u>www.telecareaware.com</u>

Three Million lives - http://www.3millionlives.co.uk/ Twitter: @3MillLives and now on LinkedIn

Newsletter prepared by Mike Clark (@clarkmike) and brought to you by the Telecare LIN on behalf of the Technology Strategy Board and Healthcare KTN.

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