



Evaluation of myhomehelper
Assisted Technology pilot programme

April 2012

March 2012
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Acknowledgements

Alzheimer's society would like to thank the service user and her family who took part in the evaluation of **myhomehelper** and thank them for their time and patience whilst taking part in the pilot scheme.

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myhomehelper evaluation

1. Introduction

My home helper is a new computer system developed to assist in daily routines for individuals living with memory loss in their own home.

Regular, random and timed reminders/memos/photos assist with daily activities whilst integration with Facebook and BBC news help to relieve boredom, anxiety, depression and feelings of isolation.

A simple maintenance system which can be easily accessed via the internet with family/friends/carers means that the person receiving the messages needs no computer experience at all to benefit from myhomehelper.

The Myhomehelper Pilot was developed and implemented collaboratively between the provider simplasolutions, Barnsley Councils Independent Living at Home Service, the Alzheimer's Society, Digital Region and the son of the service user Mrs X, with the aim of making learning's in practice which could potentially be translated to support mainstreaming.

2. What specific improvements and outcomes were expected for this pilot service user and family?

The intended outcomes of the service were:

To reduce the number of phone calls made to the family business on a daily basis/ thereby reducing stress on the family members answering the phone, freeing up the phone for business use only

To orientate the service user to daily/weekly events

To promote independence

To enable the person with dementia to stay in their own home longer

To relieve boredom, anxiety and depression

To reduce the reliance of family and friends

3. myhomehelper evaluation background

The service user who took part in this pilot became increasingly demanding on her son's time following the recent death of her husband and took to phoning the family business several times an hour – amounting to over 7000 phone calls in one quarter alone.

The pressure of this led her sons to seek out ideas to reduce this amount of time spent on the phone reassuring Mum and they agreed to take part in Barnsley's pilot scheme for myhomehelper.

The monitor was put in place early in December 2011 therefore the pilot has been running just over three months.

4. Case study

Mrs X is a lady in her late 80's who led a very active and productive life supporting her husband and sons in their local garage business, so much so that as her dementia progressed she took to phoning the garage number repeatedly over the course of the day.

Mrs X has a short term memory of less than 5 minutes and denies that she has any memory problems, she suffers from delusions, hallucinations, is very repetitive and becomes very agitated when she has misplaced items around the home.

Prior to the 'myhomehelper' being installed I had been supporting the family in my role as dementia support worker by providing emotional support and information about the illness, my initial visits were all about being accepted by the person with dementia as a regular visitor to the home.

Around the time the Alzheimer's Society became involved with Mrs X, no services were in place to support her socially. A befriending assessment was undertaken by BIADS but this proved too unsettling and upsetting and it was deemed that she wouldn't be able to have a volunteer befriender, fortunately day care had been arranged at Highgate and it seemed she was settling in really well.

Although initially suspicious of my role of visiting her at home, Mrs X was able to relate to me personally and on the visits we focused on reminiscence work around her married life, family, holidays and if the occasion arose we spoke about the loss of her husband and her feelings about her bereavement.

I was present when Myhomehelper was installed and although Mrs X was very suspicious and not at all keen to have the monitor in the room initially, it was ideally positioned so that it could be observed from her regular sitting place on the settee, it was unobtrusive but in constant eyesight.

Regular phone calls and updates from the family following the equipment being installed revealed that the monitor had been accepted as an early Christmas present from her sons and that she became used to the idea that it had to be left on all the time and the monitor soon became a focal point in her daily routine.

A home visit in mid December revealed that Mrs X had become very protective of her 'new present from her sons' and although we could talk about how it kept her orientated to the daily events and the photos that were on the screen throughout the visit, under no circumstances should I touch the screen or upset anything connected to it.

Early January a home visit was arranged and I put a message on Myhomehelper stating I would be visiting at 3pm. Having pulled up outside the home on time I noticed that I was being observed through the living room window and was actually welcomed into the home as "you must be Carol, oh you are the lady that's coming at 3pm". The conversation from this visit proved that Mrs X had quickly come to accept the monitor and could inform me that messages, information and photos were left there for her to read.

Throughout January and February Mrs X sons reported that the number of telephone calls to the Garage from Mum had greatly reduced, in fact on one occasion there had only been two calls that day.

A review of Myhomehelper was undertaken at the end of February with the Mrs X and family members, this revealed that 'myhomehelper' had been effective in reducing the number of telephone calls to the family business, it was useful to inform her of the days event, visitors to the home, update family photos and was used on one occasion to reduce agitation when the person with dementia was convinced that something had been stolen from the home, reassurances given via the monitor calmed her when no logical answer or reasoning could be conveyed to Mrs X. .

The family stated that messages had to be relevant and not ambiguous in any way as this could lead to confusion and with only basic knowledge they could input messages as required but did struggle on occasions putting photos on the system or other items that could have been of interest.

5. Pilot Outcomes

Target Outcome	Actual Outcome
<p>To reduce the number of phone calls made to the family business on a daily basis/ thereby reducing stress on the family members answering the phone, freeing up the phone for business use only</p>	<p>The number of calls was reduced significantly, from 7,000 calls for the initial period, reducing to 5,000 with the last period reported at 2081.</p> <p>Total telephone call reduction of 70%.</p> <p>The very latest call figures indicate that the actual average daily telephone calls continue to drop, from 77 initially to 8, a total reduction of 90%.</p>
<p>To orientate the service user to daily/weekly events</p>	<p>Mrs X is more engaged and better orientated and aware as a result of the information communicated via Myhomehelper.</p>
<p>To promote independence</p>	<p>Mrs X independence has been improved, with the addition of a tailored, passive Safe & Secure at Home Telecare Package helping to manage the risks associated with her daily living.</p>
<p>To enable the person with dementia to stay in their own home longer</p>	<p>Mrs X greater engagement and orientation would typically enable her to stay within her own home for longer.</p>
<p>To relieve boredom, anxiety and depression</p>	<p>The information communicated through Myhomehelper helped to stimulate Mrs X , who appeared less agitated with improvements to her emotional wellbeing.</p>
<p>To reduce the reliance of family and friends</p>	<p>The 70% reduction in calls to her sons has reduced the reliance on family, improving their quality of life.</p>

6. Conclusions

All of the targeted outcomes were achieved in respect of the Pilots evaluation.

There was very positive feedback from all parties involved in the pilot scheme although the family reported it would have been useful to have a user guide/handbook and additional training on how to get the best use from the 'myhomehelper' system.

Overall the family were confident that myhomehelper could give additional support to the person they care for on a daily basis.

6. Recommendations

1	Tailored Training to be offered with handouts or users guide to enable family members and friends to use the system to its maximum potential.
2	3 rd sector carer contact to provide Initial support for people with dementia and their carers as the system is installed, with ongoing support to ensure that the system is used to its full advantage.
3	Time and resources are needed to raise awareness of how Myhomehelper could assist in other areas within the community i.e. deaf/hard of hearing, nursing/residential/dementia homes. To this end an Equality Impact Assessment should be completed on the product/service along with a Communications Plan.
4	A workshop to take place with key stakeholders with the aim of looking to embed Myhomehelper across all of the appropriate integrated care pathways with key links made to the Memory Support Team and GPs. The product/service should also be embedded into the personalisation process supporting individual budgets.
5	Meetings with health & social care professionals and specialists in dementia care to inform the products development, for example around information provision and standard information sets.
6	It is important to ensure a positive user experience for both the cared for person and informal carers in respect of connectivity with the internet, particularly when updating information remotely.
7	It would be useful to have a smaller bed side version of the product for example where Myhomehelper was typically placed in the Lounge.
8	A remote alarm would be helpful to alert the informal carer that the system had been turned off, given that Myhomehelper should ideally be left on at all times.
9	Product/service charging needs to take into account affordability to support early intervention and encourage self care, with a potentially more robust service offer further down the care pathway reflected by a higher price, potentially funded through Individual Budgets as part of a

	wider care package.
10	Myhomehelper to be provided as part of a wider deployment of complementary interchangeable assistive technologies which are tailored and needs led.