HEALTH AND WELLBEING BOARD

15 January 2019

Title:	Update on 'Breezie' Pilot Project					
Report of the Cabinet Member for Social Care and Health Integration						
Open R	eport	For Information				
Wards A	Affected: ALL	Key Decision: No				
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Sponsor:

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Summary:

This report provides an update on the Breezie pilot project which aims to help isolated residents to get online. Data attained from the user surveys undertaken so far indicate that Breezie is having a significant impact on the key aims of reducing social isolation and increasing digital inclusion.

Recommendation(s)

The Health and Wellbeing Board is recommended to note the progress and current status of the Breezie pilot project and consider further expansion and integration opportunities to deliver on the outcomes of the Joint Health and Wellbeing Strategy

Reason(s)

The Board is responsible for encouraging integration and innovation in health and social care in Barking and Dagenham, and delivering improved health outcomes and reduced inequalities for its residents. The Breezie pilot is relevant work to this remit, and so it is to the Board's advantage to me made aware and updated of its progress.

1. Introduction

1.1 At the portfolio meeting of the Cabinet Member for Adult Social Care and Health Integration on 12 September 2017, it was agreed that a pilot project would be implemented over the coming months to trial 'Breezie', which aims to help isolated older residents to get online.

- 1.2 Breezie is a tablet device that makes the internet accessible by removing jargon, clutter and confusing set-up processes. Each of these Samsung tablets is built with personalised home screens, featuring pre-installed apps that are picked according to the interests and needs of each user, like Skype so they can communicate with family and friends. Each device has a 4G sim built in, so runs off the mobile network, therefore users do not need to have the internet installed at home to use them. All users are shown how to use their devices through initial orientation sessions and ongoing phone and web-based support.
- 1.3 Breezie was identified as being the most appropriate device to support getting the older population in Barking and Dagenham online following an appraisal of technological options conducted in partnership with Care City. This decision was predominantly due to the personalised, simple and clutter free design of the user interface, which tackles the two main barriers to internet adoption: over-complication and lack of relevance.
- 1.4 Adults' Care and Support Commissioning completed the necessary procurement procedure and subsequently awarded a contract for the provision of 75 Breezie units with the software, support service and 4G internet connection for a total value of £70,995 for a three year period funded from the Social Grant Fund. This three year period is comprised of a 12 months set-up and onboarding period followed by a 24-month subscription period for each unit once allocated to a Service User.
- 1.5 This paper is intended to update the Health and Wellbeing Board on the implementation of the pilot and provide the initial evaluation findings of the effectiveness of Breezie based on user survey data. Options for next steps of this pilot are also provided for discussion.

2. Project planning and implementation

- 2.1 During the procurement phase, Adults' Care and Support Commissioning worked with the provider to develop the necessary supporting documentation for the pilot project, including a User Participation Agreement and Personalisation Questionnaire. Additionally, a library of applications and websites was curated to meet the specific needs of prospective Breezie Users, whilst promoting key digital content which supports the council's priorities.
- 2.2 A user survey was developed to evaluate the impact that Breezie has on reducing social isolation and increasing digital inclusion. To establish a baseline, this survey was completed with each respective user when they first received the device and has subsequently been revisited quarterly to track progress and enable Commissioners to better understand the effectiveness of the intervention.
- 2.3 The Breezie pilot was promoted through a range of media. This included working with the Communications and Campaigns Team to develop a <u>short video</u> and accompanying webpage. This was promoted following the Council's '12 days of Christmas' social media campaign and sits within the Health and Social Care section of the council's website. The Breezie webpage contains further information about the pilot, and includes a webform for friends, family members and professionals to nominate prospective users.
- 2.4 In addition to the online promotion, the Breezie pilot project was also promoted at Carers Rights Day and Older Peoples Day and specific training has been provided

to the Red Cross, as a part of the *Home Not Hospital* service. A press release on the pilot was also circulated via the Barking and Dagenham Post and the Cabinet Member for Adult Social Care and Health Integration was interviewed by BBC London Radio.

- 2.5 During the initial user nomination process, those making the referral are asked to state why they think the prospective user would benefit from Breezie. The key reasons cited are as follows:
 - Loneliness
 - Reduce isolation
 - Improve confidence
 - Increase independence
 - Combat depression
 - Entertainment
- Websure

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2.6 Over 60 devices are currently

in regular active use. There have been a small number of cases where users have either returned their Breezie device or passed away. In all cases the device will be repurposed and allocated to a new user. Almost all users are over the age of 65, with an average age of 71. The oldest user is 98 years old. 82% of users are female. The average usage per day has progressively increased from February (1 hour per day) to September (5 hours per day). Users are using social channels (email, Skype, Facebook), entertainment services (BBC, ITV, radio), keeping mentally engaged (Solitaire, Bingo) as well as accessing the news, weather and local services.

2.7 Breezie is generally being used in community settings, except for a specific cohort of users with dementia based within Kallar Lodge. Several minor adaptations have been made to ensure Breezie is more accessible for these users, including colour-coded device cases with carry handles, headphones and attached styluses. As with all users, the devices content has been tailored to suit the interests of each person and takes account of their



health and wellbeing needs. Several personal accounts from users at the site has indicated the positive impact that Breezie has had, including people seeing family members for the first time in several decades.

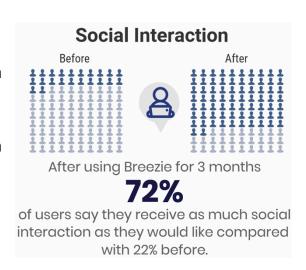
3. Survey findings

3.1 The findings below provide an indication of the impact of Breezie. The roll out of Breezie was staggered over several months. For consistency, the figures within this

report compare the responses provided by users at the start of the project, with those collected after 3 months of usage. The baseline responses are collected via telephone during the initial onboarding process. The follow up survey is completed on screen by the user through their Breezie device.

	1 Strongly Agree	,	3	*	5 Strongly Disagree
I find it easy to keep in touch with triends and family who are local		L		<u> </u>	
I find it easy keeping in touch with friends and family who live further away					
I find it easy to find out about what services are available locally					
I find it easy to access inselfficere information			Τ-		
I feel confident in my use of the Internet.		I^-		<u> </u>	
I have an ownall sense of wellbeing.		\vdash	†	 	
I got as much sodal interaction as I would like			 	 	

- 3.2 Users are asked a range of questions based on a number of 'I' statements
 - across a variety of areas including social interaction, wellbeing, access to services and confidence in using the internet. Respondents were invited to self-score their level of agreement with each statement.
- 3.3 A key aim of the Breezie pilot was to **reduce social isolation** given the impact this can have on an individual's wellbeing. This is a priority area for Barking and Dagenham as reflected within the Borough Manifesto and Ageing Well outcomes proposed within the new Joint Health and Wellbeing Strategy. The findings so far indicate that Breezie contributes positively to these areas, with users reporting significant improvements following the first three month of using the device.
- 3.4 72% of respondents either 'strongly agreed' or 'agreed' with the statement 'I get as much social interaction as I would *like*'. This is a significant improvement from only 22% who agreed with this statement at the beginning of the pilot, which indicates the positive role that Breezie can play in enabling users to keep in touch with friends and family, particularly those who live further away. This enables users to build their social capital and resilience, which can in turn support independence and prevent, reduce and delay the development of health and social care needs.





of users say they have an overall sense of wellbeing compared with 39% before.

- 3.5 Associated to the increase in social interaction, users also reported a significant increase in their overall sense of wellbeing from 39% at the project outset to 83% after 3 months. This is very positive from a health and social care perspective given the positive outcomes associated with wellbeing.
- 3.6 One of the key benefits of digital inclusion is the ability to access online information, advice and guidance particularly regarding Healthcare and

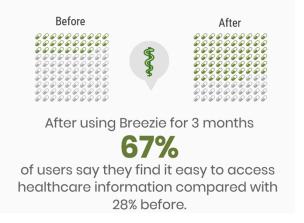
Local Services. Empowering residents to access this information independently is aligned to the Council's Prevention Strategy and enables social care users to exercise choice and control which is in the spirit of personalisation as outlined in the Care Act 2014.

- 3.7 At the beginning of the pilot, 28% of Breezie users either 'strongly agreed' or 'agreed' with the statement 'I find it easy to access healthcare information'. This increased to 67% after 3 months of using Breezie.
- 3.8 Similarly, a significant improvement was seen in users' agreement with the statement 'I find it easy to find out about what services are available locally', which rose from 18% to 73%.

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local services compared with 18% before.

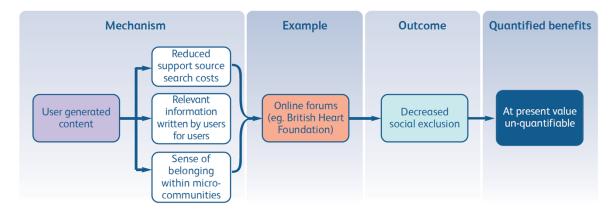
Accessing Healthcare Information



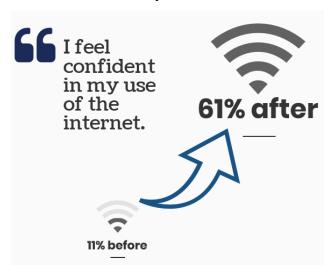
- 3.9 The improvement in these areas is believed to be in part due to the specific content which have been loaded onto users' devices, such as the Care and Support Hub, NHS Choices and Band Together Routemaster along with other health related apps specific to each respective user's needs.
- 3.10 Additionally, Breezie has enabled access to a range of online user-generated content. The British Heart Foundation, for example, operates an online forum for people

seeking support and motivation in stopping smoking. Users can sign up for email hints and tips, post advice to others on a message board and keep a blog of their progress. Stopping smoking has clear public health benefits, but further social impact arises from the online support network. Whilst it is not possible to directly quantify this in financial terms, communicating with people with similar worries,

problems or difficulties can reduce feelings of marginalisation and foster social inclusion.



3.11 Underpinning the ability to access information about healthcare and other services, as well as participate within the online community, is users' confidence in using the internet. This is a key metric of the aim to **increase digital inclusion** – as set at the



outset of the Breezie pilot. After 3 months of using Breezie, 61% of Breezie users reported feeling confident in their use of the internet compared with just 11% at the outset.

3.12 Increasing digital inclusion has the potential to bring about numerous benefits and improved outcomes for both the individual and public services across a range of areas. There is also a significant benefit for society in getting an isolated or vulnerable person to use the internet to reconnect with their

community. These include decreased social exclusion – through involving members of marginalised groups in local activities and events.

3.13 A key feature of the Breezie service is the ability to remotely add content to a device at a later stage which will facilitate the future-proofing of the intervention for the user in the event of their health and social care needs changing. Additionally, there is the option to push content to multiple devices which provides the Council with an additional channel of communication to Breezie users to notify them of important information or promote upcoming events which can further increase civic participation.

4. Pilot extension options

4.1 The data attained from the user surveys undertaken so far indicate that Breezie is having a significant impact on the key aims of reducing social isolation and increasing digital inclusion. Despite the wide promotion of the pilot, referrals were slow, and there was an understandable apprehension from many prospective users given the perceived complexity of using technology and the internet despite the comprehensive end-user support offer from the Provider. Any expansion or

- extension of the project would need to be considered within this context and would likely require a greater level of integration with front line services.
- 4.2 Given the flexible and personalised nature of Breezie, there are a range of options available for how the project could be expanded to address a range of priority areas within the Health and Social Care economy and support the outcomes of the Joint Health and Wellbeing Strategy. For example:

To increase residents' healthy life expectancy by removing barriers to early diagnosis and intervention in 5 key areas - (Cancer, Diabetes, Liver Disease, Mental Health and Sexual Health).

Diabetes

- People with diabetes spend only three hours a year with a healthcare professional on average. For the remaining 8,757 hours they manage their diabetes themselves
- 80% of diabetes spending is on the complications, which can largely be prevented through education and lifestyle changes
- Annual inpatient care, to treat short and long term complications of diabetes, is estimated at between £1,800 and £2,500 per patient.
- 4.3 Breezie could be piloted as an intervention tool, education and self-management, for diabetes patients. This could include the integration of wearables, such as glucose and activity monitors, connected to Breezie, which can provide real time information to enable individuals to monitor their condition. This could be supplemented with condition related information, online education materials e.g. MyDESMOND, healthy eating tips, and group exercise programmes as recommended by NICE.
- 4.4 The total cost per user of implementation and 24 month Breezie subscription with end user support and 4G internet is £896 per device. Integrated wearables such as an iHealth gluco-monitoring System cost an additional £47.99 per device. The ongoing cost per user beyond the initial 24 month period works out at around £20 per user, per month.

5. Next steps

- 5.1 As outlined in Section 2.2, the survey will continue to be undertaken with each Breezie user quarterly which will enable Commissioners to track progress and better understand the effectiveness of the intervention.
- 5.2 Further options for expansion are being explored including the use of direct payments, personal budgets and other funding mechanisms to sustain the project beyond the initial 2 year pilot phase.
- 5.3 Adults' Care and Support will work with partners to further integrate Breezie with other digital solution across the health and social care economy, including the innovations which will be piloted by Care City through Wave 2 of the NHS Innovation Test Bed programme.

6. Mandatory Implications

6.1 **Joint Strategic Needs Assessment**

6.1.1 The Breezie pilot survey findings reflected within this report indicate the positive impact that the intervention can have on a range of areas reflected within the Joint Strategic Needs Assessment, with a particular focus on reducing social isolation and the wider health outcomes associated.

6.2 Joint Health and Wellbeing Strategy

6.2.1 The Joint Health and Wellbeing Strategy outlines our aim to support older adults in Barking and Dagenham to live with dignity and independence enabling them to achieve their full potential in older life as they would in any other life stage. Given the flexible and personalised nature of Breezie, there are a range of options available for how the project could be expanded to address a range of priority areas within the Health and Social Care economy and support the outcomes of the Joint Health and Wellbeing Strategy.

6.3 Integration

- 6.3.1 The Breezie intervention can improve health and social care outcomes through the integration of services accessible to residents through the user interface including access to local healthcare services and resources.
- 6.4 **Financial Implications** (completed by: Abdul Kayoum, Finance Business Partner)
- 6.4.1 The cost of renewing for a two-year period is £896 per device and for 75 units the cost of the contract will be £67,200.
- 6.4.2 If a decision is made to renew the contract, the service would need to ensure there is sufficient grant funding available.
- 6.5 **Legal Implications** (completed by: Dr. Paul Feild Senior Governance Solicitor)
- 6.5.1 The Health and Social Care Act (2012) conferred the responsibility for health improvement to local authorities. The evidence in this report is that by providing easy to use tablet devices the lives of the target groups approach as set out in this report can be improved in terms of heath outcomes and through augmentation of additional monitoring devices, chronic health conditions can be better monitored. The evidence supports the interpretation that such devices may provide the opportunity to be a key component in furthering the Councils legal responsibility to work to improve the health of its community.
- 6.6 Risk Management None
- 6.7 Patient / Service User Impact None

7. Non-mandatory Implications

None