Conference Abstract

Advancing Knowledge of Telecare for Independence and Vitality in later life project (AKTIVE)

Claire Smith, Tunstall Healthcare (UK) Ltd, United Kingdom

Richard Farrell Smith, Tunstall Healthcare (UK) Ltd, United Kingdom

Sue Yeandle, CIRCLE, University of Leeds, United Kingdom

Kate Hamblin, Oxford Institute of Population Ageing, United Kingdom

Correspondence to: Claire Smith, Tunstall Healthcare (UK) Ltd, United Kingdom, E-mail: claire.smith@tunstall.com

Abstract

Introduction: The AKTIVE project explored how telecare can improve the lives of older people prone to falls or with memory problems. With funding from the Technology Strategy Board (2011-14), AKTIVE was an academic / industry partnership project led by CIRCLE at the University of Leeds, with partners OIA (University of Oxford), Tunstall Healthcare (UK) Ltd and Inventya Ltd. Results from AKTIVE will be key enablers to ensure UK telecare manufacturers, distributors and support services have access to the user analysis needed to get telecare products and services to market.

Aims: AKTIVE explored telecare use among older people to identify how it could be developed to help them live full and independent lives at home and support those caring for them. Its core objectives were to:

• improve the quality of life of older people with these conditions and sustain their independence

• enable carers to continue their support of older people alongside work and other roles

• enhance and modernise social care / support in a cost-effective way.

• provide intelligence to support development / commercialisation of telecare products and services

Methods: AKTIVE comprised social research, product exploration and market research. Its ‘Everyday Life Analysis’ of older users of telecare was supported by investigation of design and risk issues and the impact of equipment upgrading and involved up to six visits to 60 older people living in Leeds and Oxfordshire over six to nine months. The research with them, and those involved in their care, used interviews, observations, diaries and photographs to generate rich, contextualised accounts focused on their experiences, practices and attitudes.

Results: The results highlight: how telecare fits into different kinds of ‘caring network’ around frail older people; how it affects their social relations; its relevance to older people coping with different kinds of frailty; and how its use affects lifestyle in later life, including issues of identity, choice and
stigma. The findings highlight many positive outcomes which helped older people and those involved in their care when appropriate telecare was in place (feeling ‘connected’ to assistance and to others; improved personal relationships; maintenance of ‘weak ties’) as well as access to emergency help, peace of mind and timely warning of risks. Frustrations in using telecare and engaging with telecare systems (often arising from inadequate information or training) included oversensitive or unattractive devices, misunderstandings about how devices worked, and false alerts. Missed opportunities identified showed the need for better information; more regular contact and interaction with monitoring centres; holistic assessment that takes account of other care and support; and the involvement of older people in discussions that reach beyond their care needs and explore their aspirations for independent living and enhanced wellbeing.

Keywords

telecare; falls; independence; older people