SUBJECT: ASSISTIVE TECHNOLOGY IN CARE TRANSITION PLAN UPDATE
MEETING: PEOPLE SCRUTINY COMMITTEE
DATE: 31ST MARCH 2026
DIVISION/WARDS AFFECTED: ALL

1. PURPOSE

1.1 To brief the Committee on the positive progress being made with the Council's Social Care workforce development-based approach to increasing the use and take-up of Assistive Technology in care as an enhanced option to help people remain living at home safely and independently.

2. RECOMMENDATIONS

2.1 To consider and comment on the progress of increasing take up and use of Assistive Technology.

2.2 To consider the identified risks and the proposals for mitigation, to ensure the service is resilient going forwards and the aims and objectives of the service are maintained, with no dips in performance or risks not managed.

2.3 To consider the proposed next phase of the project relating to Reablement at Mardy Park and Oak House, rehabilitation wing at Severn View Park and the proposal to explore establishing a presence in an acute hospital setting.

3. KEY ISSUES

3.1 Assistive Technology is delivered through the Assistive Technology Team, formerly known as the Careline Service, in Housing & Communities. The core offer of the former Careline Service was a dispersed Lifeline service, with only a small number of clients being provided with telecare equipment, typically environmental sensors.

3.2 Key conclusions of a joint review in 2023 between Housing & Communities and Social Care included:

- The service was more of a reactive service rather than a preventative service;
- There was significant scope to expand on the availability of assistive technology provided;
- Assistive technology wasn't part of the Social Care assessment.
- Knowledge of assistive technology was deemed to be generally limited, particularly with professionals. There was a need for assistive technology to be better understood in how it could potentially contribute to Social Care & Health priorities to support living safely and independently.

3.3 The review established a transformation plan to expand the use of assistive technology in Monmouthshire. The vision of the plan is *'Assistive technology contributes to enhancing and enriching living at home, supporting people to remain living safely and independently in their own homes for as long as possible.'* Key aims to expand the use of assistive technology include:

- Embed in future Social Care practice and to be available as part of solutions for care and support by complementing other forms of care and support
- Provide a more preventative approach supporting a wider range of circumstances through a wider choice of equipment.
- Increase information and awareness about Assistive Technology to facilitate access to Assistive Technology without the need for a Social Care referral (in line with intervention and prevention), although this will be for the more basic equipment.
- A knowledgeable and confident Social Care workforce, who can refer and access the service **easily**.
- Service delivery to be outcome and assessment driven and to be centred around digital coaching for professionals, clients and families/carers.

- Initially to mitigate against **falls** and **isolation** and to support **dementia** and **reablement.** This has now been extended to include **Hospital Discharge.**
- For the service to be highly visible and well marketed to professionals, potential clients and carers, who are easily able to familiarise themselves with equipment.

3.4 An action plan is in place as the basis for implementing the plan and achieving the service transformation. The following provides an overview of the current situation in terms of key outputs and outcomes, areas that still need development and ongoing risk.

3.5 Current Situation & Progress

3.5.1 **Working Group –** A joint working group meets regularly to drive and successfully implement the transformation plan.

3.5.2 **Simplifying Access to Assistive Technology – for Clients, Professionals & Carers**

- An online referral form was established for new clients and professionals.
- A Flo Social Care Assessment Form has been revised to prompt practitioners to consider assistive technology.
- A digital Diagnosis Tool has been created as a phone app to support Social Care professionals.
- Webpages have been improved to include access to application forms and product guides

3.5.3 **Branding & Marketing -** The previous Careline branding, considered to be outdated has been replaced by @***ssistivetech Monmouthshire*** to better represent the provision of other types of smart technologies. This is now widely used in a range of ongoing marketing. For example:

3.5.3 Marketing activity is believed to have contributed to the positive increase in referrals and includes:

- Undertaking regular marketing activity e.g. social media, Leisure Centre and Hub drop-ins, newsletter, branding, video Assistive Technology Chepstow NCN short ENG on Vimeo
- In addition to Tech Hubs, establishment of display stands at Bridges, the Palmer Centre, Mardy Park and the Bus Station, Abergavenny.
- Assistive Technology Chatbot through the My Monmouthshire platform.
- Attendance at themed drop-in events.

3.5.4 The team works closely with the Council's Communication Team, who provide valuable marketing and publicity support for the project.

3.5.5 **Staffing & Capacity –** The former Careline team was restructured to support the transformation plan. There was a need for staff to understand, install and maintain more complex assistive technology, compared to the historic lifeline focus. This included the creation of the Assistive Technology Coach, whose role is to promote and demonstrate the benefits of equipment, particularly targeting professionals. This was recruited to in May 2023.

- Sustainable Living Team Manager (job-share) (1.1 full time equivalent)
- Assistive Technology Digital Coach (initially temporary, but now permanent, 37 hrs pw)
- Assistive Technology Installation Officer (30 hrs pw)
- Assistive Technology Installation Officer (15 hrs pw)
- Assistive Technology Installation Officer (15 hrs pw)
- Assistive Technology Customer Liaison Officer (30 hrs pw)

3.5.6 Going forwards there will be a need to ensure the staffing and team continue to be fit for purpose to ensure that the increase referrals and larger client base can be managed. As referrals increase and the client base increases, so do installation visits, maintenance and activities such as billing.

3.5.7 There has been an increasing need to pull the Digital Coach off training and awareness activity to cover installations at times of absence. The situation is a key risk going forwards.

3.5.8 A short-term arrangement has been established with Care & Repair to support maintenance, using Social Care Pathways of Care funding, which will release the team to focus on installing equipment.

3.5.9 **Social Care Staff Awareness, Training & Development**

- Establishment of interactive Tech-Hubs initially at the Social Care Training Unit and subsequently at Chepstow Community, Monnow Vale Hospitals and Caldicot Health Centre. Unfortunately, Chepstow Community Hospital has recently withdrawn ward space for hospital purposes, so this Tech Hub has been lost
- Assistive Technology training now forms part of the Social Care Induction training programme, which covers equipment availability. **Appendix 1.**
- The Assistive Technology Coach facilitating staff awareness and 'show & tell' sessions (**See Appendix 1)** plus regular attendance at QALG.
- The Coach attendance at Social Care Team Meetings

3.5.10 **Practical Support for Practitioners to Prescribe Equipment**

- Establishment of a staff Diagnosis Tool that can be accessed via staff mobile devices.
- The Tech Hubs, now only available at Monnow Vale and Caldicot Health Centre, have been an important tool in this regard.

3.5.11 **Alignment with Health Priorities**

- There is a continued need to strategically align with Health and neighbouring local authorities. Minimal progress has been made on this despite discussions directly through the Health, Social Care & Housing Partnership and officers of the Partnership Board. A proposal by Health to establish a Regional Strategy have not come to fruition.
- Broadening the assistive technology product range. **See Appendix 1.**
- Provision of equipment being offered to in-house Residential Homes

3.5.12 **Digital Transition**

- Necessary transition from analogue to digital lifeline units in line with the digitalisation of telephone lines. Approximately 93% of clients now have a digital unit.
- Upgrade of Alarm Receiving Centre Platform to digital to improve connectivity and communication for the service users
- Chip n Pin will be introduced shortly to enable visiting staff to take card payments for installations to maximise income and make it easier for clients to pay.

3.5.13 **Evidence & Outcomes**

Whilst there is an established suite of service activity, this does not include comprehensively capturing the benefits, outcomes and impact of the use of assistive technology, particularly from a Social Care perspective e.g. has an installation avoided a Social Care intervention or facilitated a lower level of Social Care intervention and avoided a cost.

3.5.14 **Social Care Wales Accolades 2026**

A submission was made to this award under the **Effective use of Digital and Technology** theme. The submission (one of eleven) was successfully shortlisted to the second round with four other submissions. Unfortunately, the submission wasn't shortlisted to the final three.

3.6 **Performance 22/23 to Q3 2025/26**

The following provides an overview of service activity to the end of Q3 2025/26, which generally high-lights positive progress in terms of referrals, growing client base and increased use by professionals. Whilst progress is positive, as the number of referrals and the client base increases, so does administration (such as customer contacts and billing), installation visits maintenance visits and general stock management

Indicator	2022/23	2023/24	2024/25	25/26 Q3
No. of Clients	850	927	996	1074
Average Client Age	87	85	92	88
Account Closures	176	183	184	169
Total referrals	250	446	474	416
No. of Professional Referrals	70	158	172	205
Type of Professional Referral Falls Reablement Dementia Other e.g. Social Isolation, Reassurance etc	Not collected	77 8 29 44	70 13 43 46	103 17 57 28
Urgent Referrals	Not collected	68	75	89 (21%)
Reasons for Urgent Referrals Hospital Discharge Hospital Prevention Terminally Ill Critical Need	Not collected	Not collected	Not Collected	33 33 3 20
Installations	203	317	310	254
Waiting List for Installations	Not collected	Not collected	15	113 (24.02.25)
Waiting List for Maintenance	Not collected	Not collected	Not collected	50 (24.02.25)
Average Retention of Client	1311 days	1219 days	1453 days	1311 days
Level of Digital Provision	50%	75%	88%	92%
Identified Care Costs Avoided	Not collected	£122.096	£124,127	Information not available
No. of Newport City Council Referrals	57	25	31	80
No. of Newport clients	87	91	103	99

3.7 On-Going Priorities and Key Next Steps

3.6.1 The overall priority going into 2026/27 is to maintain momentum and continue to build on the successful achievements and positive progress made over the last couple of years. On-going activity will include continuing to engage with and supporting Social Care staff and teams; marketing of the service; engaging with existing and potential new equipment suppliers to identify new equipment opportunities and aligning more closely with Social Care Reablement. Specific priorities include:

Reablement Transformation

- It is proposed that Assistive Tech becomes an integral element of the service delivery models at Mardy Park and Oak House, rehabilitation wing at Severn View Park. The aim is that residents of both settings will use Assistive Tech as part of their rehabilitation and their pathway to returning home. Resident users will, therefore, become familiar with Assistive Tech equipment

within a supportive setting and will be encouraged to take a package of equipment home with them to help facilitate both a safe return home and safer independent living.
- A further benefit is that Mardy Park and Oak House staff will be upskilled in Assistive Technology.

Prevention & Alignment with Health
- Continue to identify opportunities to further transition the service away from a reactive model to a more preventative model, in line with the Monmouthshire Living Well Strategy.
- Whilst in-roads with Health have been limited, it is considered appropriate to continue to look to engage with Health to identify opportunities to collaborate on Assistive Tech.

Better Understanding of the Benefits & Outcomes
- The need to capture improved Social Care related evidence and outcomes that demonstrate the impact of assistive technology. This will include evaluating the impact of Assistive Technology now forming part of the Social Care assessment.
- This will help to inform the strengthening of the preventative model.

`Staffing
- The need to ensure the Assistive Tech team continues to be fit for purpose and able to deliver key functions such as installation and maintenance visits. Not only are there Health and Well Being related risks, there is a financial and income value to any uninstalled equipment.

Marketing & Raising Awareness
- Continuing to promote the service and benefits through regular marketing and providing Induction training.
- Providing equipment as part of the Mardy Park delivery model targeting Reablement Service Users. As residents of Mardy Park, service users will utilise the equipment as part of their recovery and pathway to returning home. The aim is that service users will take equipment home with them. Staff will need to be trained to support service users with the on-site equipment.

Social Care Priorities – Hospital Discharge
- There is a need to ensure the service maximises its alignment with hospital discharge. It is proposed that Hospital Discharge is an additional priority to dementia, reablement, falls and isolation.
- Hospital Discharge referrals are given priority for installation.
- A possible opportunity has been identified in regards to having a specialist Assistive Technology presence, perhaps similar to the existing Digital Coach, in acute hospital settings. This is currently being explored.

Financial Sustainability
- Consider the future funding arrangements of the service to ensure future financial sustainability.

Digitalisation
- Continuing the necessary switch from analogue to digital. Approximately 7% of service users need to be upgraded to digital equipment

Monmouthshire Housing Association
- Preliminary discussions are in progress about the possibility of a partnership opportunity.

3.8 **Risk**

3.8.1 There are two main risks associated with the delivery of the Assistive Technology Plan.

3.8.2 The first main risk relates to ensuring the service is financially sustainable.

3.8.3 The second main risk relates to ensuring as the capacity of the Assistive Tech team continues to meet the growing need and demand for the service and any capacity issues don't impact on individual well-being risks or are not detrimental to meeting service priorities.

3.8.2 A more detailed overview of risk is attached in **Appendix 2.**

4. EQUALITY AND FUTURE GENERATIONS EVALUATION (INCLUDES SOCIAL JUSTICE, SAFEGUARDING AND CORPORATE PARENTING):

4.1 The evaluation hasn't not identified ant negative implications. **See Appendix 3**

5. OPTIONS APPRAISAL

5.1 As this is a briefing report there are no options to consider.

6. REASONS

6.1 There is a joint transformation agreement between Housing & Communities and Social Care.

6.2 Assistive Technology supports:

- the Community & Corporate Plan and particularly contributes to the priority of 'Safe Place.'
- the Living Well Monmouthshire Strategy
- the For Purpose on Purpose and the Council's need to adapt and stay relevant and helping the Council learn and continue to evolve.

7. RESOURCE IMPLICATIONS

7.1 There are resource implications associated with the delivery of assistive technology.

7.2 The 2025/26 budget projection is an overspend of £39,350.

7.3 The cost centre has received one-off support funding from the following during 2025/26.

- £6,000 grant funding has been provided to provide short-term assistance with maintenance.
- £21,000 fee income over and above client fees.
- £11,298 for the purchase of equipment.

8. CONSULTEES: Service Manager Transformation, Social Care; Strategy & Sustainable Living Managers (J/S); Digital Coach.

9. BACKGROUND PAPERS: Transformation plan to expand the use of assistive technology in Monmouthshire

9. AUTHOR: Ian Bakewell, Housing & Communities Manager

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Appendix

Assistive Technology Equipment Availability

Assistive Technology				
Item of Equipment	**Priority Application**			
	Falls	**Dementia**	**Isolation**	**Reablement**
Lifeline & pendent	√	√	√	√
Falls detector	√			
Bed activity absence sensor	√			
Property exit sensor		√		
Smoke detector		√		
Carbon monoxide detector		√		
Epilepsy sensor	√			
Smart Technology				
GPS Tracking – Wrist		√		
GPS Tracking – Neck		√		
Echo Show		√	√	
Echo Dot		√	√	
Ring Doorbell	√			
Smart Lightbulb	√			
Smart Plug	√	√		√
Smart Motion Sensor	√			√
Smart Plug in Motion Lights	√			√
Smart Window Door Alerts		√		√
Smart Curtain Open/Closer	√			√
Komp Screen		√	√	√
Cascade – (in home motion detector)		√		√

Appendix 2

Overview of Risk

Risk	Implications	Mitigation
Not having a robust evidence base informing the impact and benefits of the service.	The benefits of assistive technology may not be being fully realised e.g. unnecessary use of traditional care and cost avoidance opportunities not being exploited	Engage with working group Engage with Social Care management about options
Social Care Teams do not have understanding, ownership and responsibility of Assistive Tech	The use and growth of Assistive Tech will not develop.	Continue with the Digital Coach undertaking Social Care training and attending QALG and attending team meetings Proposal for additional Assistive Tech staffing will mitigate against the likelihood of the Digital Coach being used for installation Mardy Park and Oak House proposal will involve Social Care staff needing to be familiar with Assistive Tech and support residents to use it.
The service isn't financially sustainable due to increased costs, (e.g. alarm centre monitoring, SIMs etc) reliance on self-funding and one-off grant funding	The budget is currently overspending	Monitor and review service delivery costs. Develop evidence base to inform the benefits and impact of equipment e.g. care hours avoided. Continue to engage with ABUHB and the Regional Partnership Board in respect of strategic alignment Review charging
The self-funding model may continue to act as a barrier to take up and use and the full potential and benefits of Assistive Tech not realised.	An increased charge could deter take-up and become unaffordable.	The cost benefits of Assistive Tech need to be fully understood.
Practitioners don't refer for assistive technology	More likely that use of traditional care will continue and cost avoidance opportunities missed.	Monitor referral rates from individual teams and liaise accordingly

		Monitor the AT related feedback from the Social Care assessment form. Continue to raise awareness of the benefits and use of case studies.
Practitioners don't understand the benefits of equipment and how it works, which impacts on individual confidence.	Less likely to refer clients for Assistive Tech.	Continue to attend Social Care Induction, team meetings etc Use the newsletter to promote and explain equipment Promote the Diagnosis Tool
Equipment is not upgraded to digital.	Analogue equipment will eventually be obsolete and, therefore, won't work, which would put service users at risk.	Maintain inventory of equipment and its location Continue to upgrade equipment to digital by team
Assistive technology is regarded as equipment for older people.	Unlikely to attract younger clients. An older client base means that the drop-off rate will be high due to clients either moving because they're unable to remain at home or passing away.	Target **all** Social Care and Health teams in respect of the benefits of AT e.g. Children's with Disability Team
Equipment is not regarded as attractive and is regarded as institutional/clinical.	Likely to impact on take-up	Engage closely and regularly with suppliers to identify well designed equipment.
Staff capacity is insufficient to meet the need to install equipment or attend to maintenance requirements within required timescales.	This may impact on wider priorities e.g. hospital discharge Reputationally, it doesn't reflect well on MCC. Some individuals may be less safe.	Monitor need and demand Management to identify and understand delivery issues e.g. shadowing. Posting equipment for self-installation is to be offered as an option from March 2026 and application forms will be updated.
Staff capacity is insufficient to engage with professionals, potential users, carers and families about the benefits of	Fewer staff and teams will be familiar with or understand the benefits of Assistive Technology	Monitor need and demand and Identify opportunities to streamline delivery. Consider identifying 'champions' in Social Care teams