

## **CHAPTER 6 COMMUNITY ALARM SERVICES**

### **1. Methodology**

As part of this research an overview of the social alarm services in Cambridgeshire was undertaken with the assistance of staff from Cambridge City Council. This work comprised two elements:

1. An email survey with housing providers in the county to establish the type of service received from their current Social Alarm Centre providers
2. A telephone survey with the Social Alarm Centres used by providers in Cambridgeshire

All providers of sheltered housing taking part in the review and the Social Alarm Centres used by them were invited to take part in the research.

### **2. Outcomes of email survey with housing providers**

#### **2.1 Respondent Profile**

- 12 completed questionnaires were returned for analysis
- The participation rate was 60%
- The respondents purchased monitoring services from a range of Social Alarm Centres
- A list of Social Alarm Centres used by providers was identified at the outset of the research. Of these two were not represented within the sample
- The number of connections per provider ranged from 24 to 2134
- All 12 providers had hardwired systems within their stock
- 7 providers provided dispersed lifelines

Some questionnaires were not fully completed and, had sufficient resource been available, we would have preferred to undertake telephone interviews as we believe that the outcomes would have been more robust.

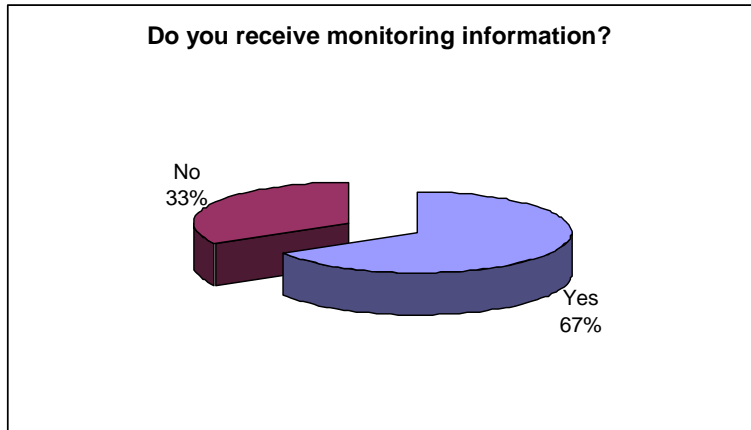
#### **2.2 Summary of key findings**

##### **2.2.1 Social Alarm Equipment**

- The majority of providers had installed Tunstall Telecom hardwired equipment. This was mainly Piper Haven while a minority of providers had the more modern Communicall or DECT equipment

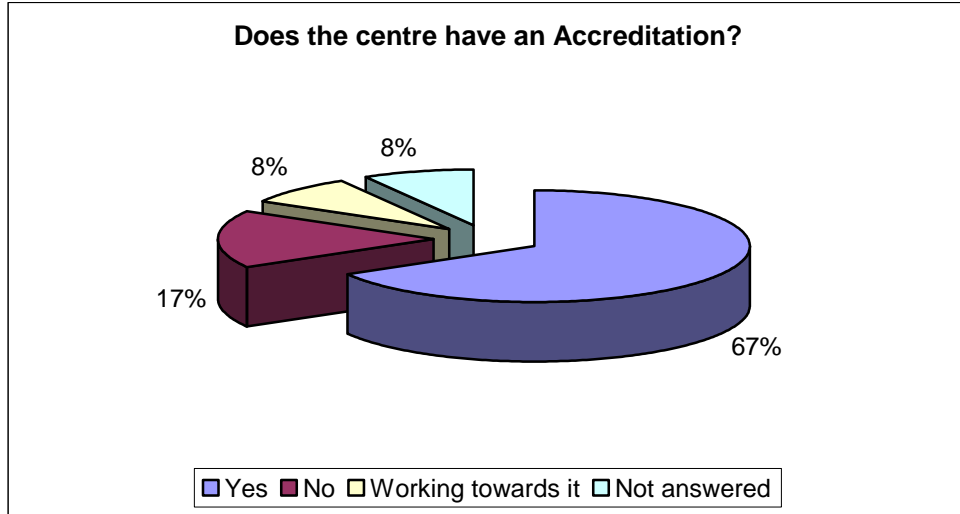
- Other providers had installed a range of manufacturer's hardwired systems including: Shorrocks; Tyntec; Davis.
- The vast majority of lifelines utilised were manufactured by Tunstall Telecom
- When asked if they received monitoring information from the Social Alarm Centre two-thirds responded *yes* while a third responded *no*

Chart 4



- Respondents stated that the type of information received included:
  - Response times
  - Number of calls received during a particular time span
  - The type of calls
  - The number of emergency calls
  - Number of out of hours calls
  - Number of log on/off site calls made by Scheme Managers
- Those that received monitoring information used it in the following manner:
  - As part of annual service reviews
  - To monitor performance - response times
  - To monitor service quality
  - To monitor exception reports against trends
  - To check on Scheme Managers
- When asked if their Social Alarm Centre held any Accreditation(s), e.g. Association of Social Alarm Providers (ASAP):
  - 8 responded *yes*, 2 responded *no* while 1 centre was working towards the ASAP Accreditation. One provider did not respond

Chart 5



- When asked to list the Accreditations held the majority 8 stated ASAP while one provider’s centre also held other Accreditations e.g. Charter Mark, Investors in People

**Number of Connections**

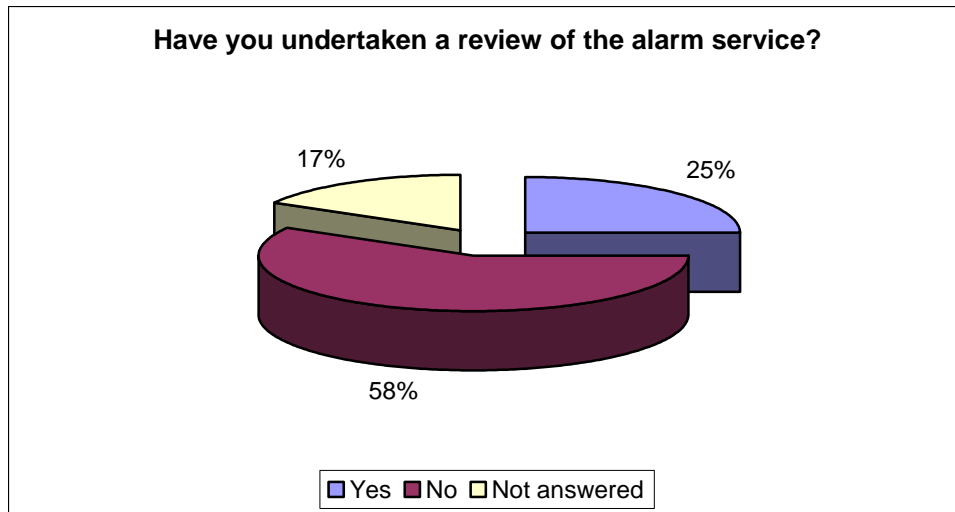
- When asked how many customers connect into the Social Alarm Centre(s). The responses were as follows:
  - Less than 100 connections – 2 providers
  - 100 – 500 connections – 6 providers
  - 1000 – 2000+ - 4 providers
- When asked how many connections are hardwired, the responses were as follows:
  - Less than 100 – 2 providers
  - 100 – 500 – 6 providers
  - 500 – 1000 – 3 providers
  - 1000+ - 1provider
- When asked how many connections are dispersed, the responses were as follows:
  - None – 5 providers
  - Less than 100 – 2 providers
  - 100 – 500 – 1 providers
  - 500 – 1000 – 4 providers

**Provision of pendants**

- 11 of the 12 providers offered pendants to more vulnerable tenants
- When asked how they allocated their stock of pendants the responses included:

- One to each sheltered housing resident (1 provider only)
  - According to need (3)
  - On request of SM (2)
  - Requested by service users / relatives (2)
  - On medical needs (1)
- When asked what percentage of clients had pendants, 50% of the sample did not respond or were unable to answer. Of the remainder one provider responded 100%; and another 100% for dispersed alarm users; The remaining three providers gave figures ranging between 10% and 35%
  - When asked if they had undertaken a review of the alarm service 3 responded *yes*, 7 responded *no* although one had planned a review for 2004. Two providers did not respond

Chart 6

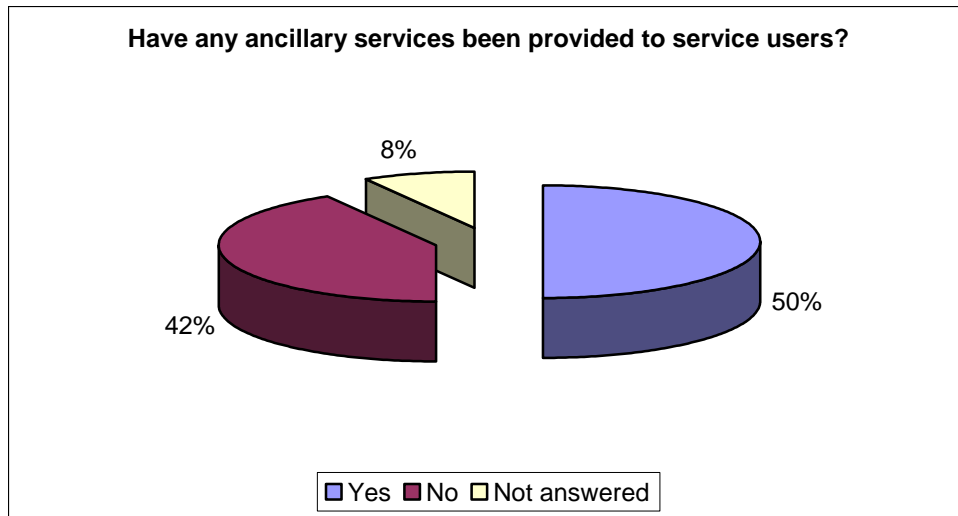


### **Services offered to customers**

- We asked about the services offered to customers and the cost of these services. Not all respondents offered responses and very few gave prices. The few responses of note included one provider's alarm service which offered lone worker monitoring and out of hours' repairs service. Clearly these services may be offered by other Social Alarm Centres but were not recorded in responses to the questionnaire.
- We asked if a mobile warden service was provided and by whom. Responses of note included:
  - North Herts social alarm centre is used by 50% of the respondents (but does not provide a mobile warden service)
  - Some providers use Care Call provided by Cambridge CC

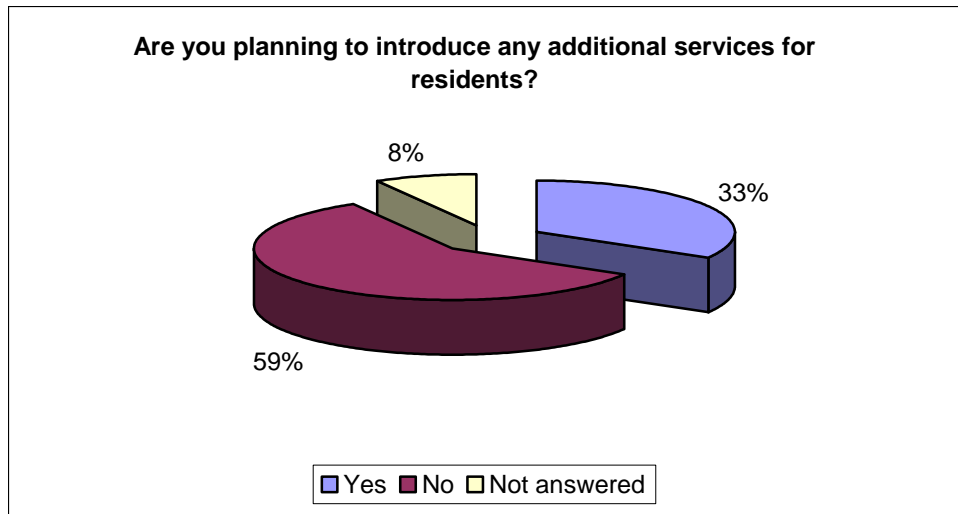
- Some providers use their own Scheme Managers who work on a rota basis to cover out of hours
- 2 providers have no mobile warden service
- One provider stated that Invicta planned to instigate a service
- When asked if any ancillary services were provided to service users, e.g. additional calls for more vulnerable residents, maintenance services or passive monitoring 6 responded yes, 5 responded *no* and 1 provider did not respond

Chart 7



- When asked to give details of the services provided the respondents offered the following:
  - The majority mentioned additional calls to vulnerable residents when the SM is absent. In relation to this one provider mentioned that they are working with other statutory services to help address some of the demands put onto the service
  - Capacity to provide passive monitoring but it is not used as yet
- When asked if they were planning to introduce any additional services for residents 4 responded yes, 7 responded *no* and 1 provider did not respond

Chart 8

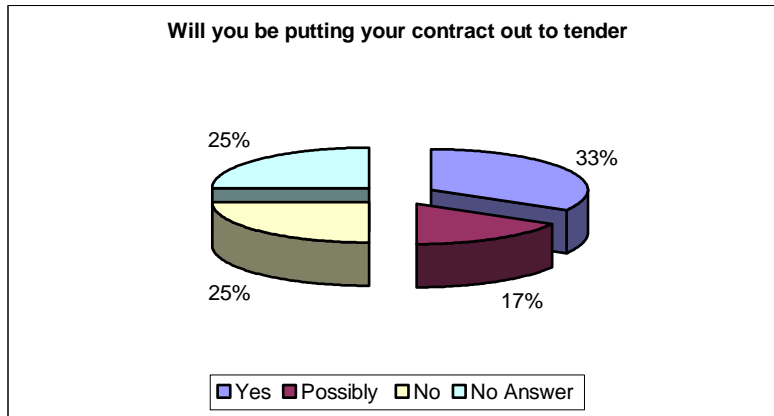


- When asked to give details of the services planned the respondents offered the following:
  - Mobile warden service from Invicta and possibly passive monitoring
  - Broadcast speech facility and potential linking of schemes

***The contract with the social alarm provider***

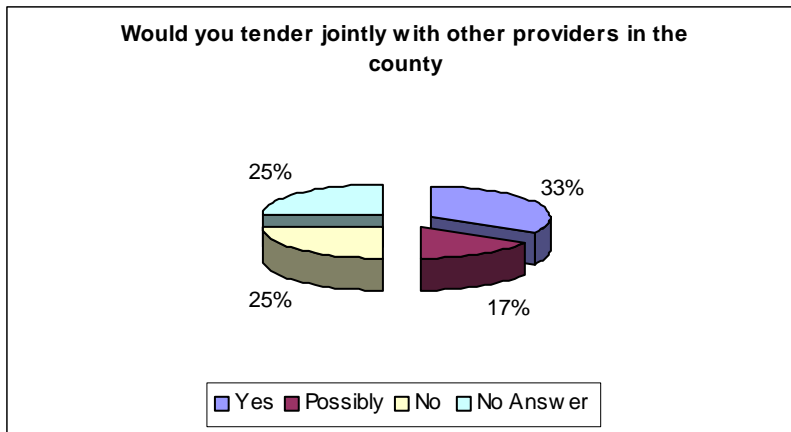
- When asked when their current contract came to an end the responses were as follows:
  - 2004 – 1 provider
  - 2005 – 3 providers
  - 2008 – 1 provider
  - Rolling contract - 2 providers
  - No contract – 1 provider
  - Not known – 4 providers
- When asked if they would be putting their contract out to tender 4 responded yes, 3 responded no and 2 responded possibly. Three providers did not reply.

Chart 9



- When asked if they would consider tendering jointly with other providers in the County 4 responded yes, 2 responded possibly, 3 responded *no* and 3 did not respond

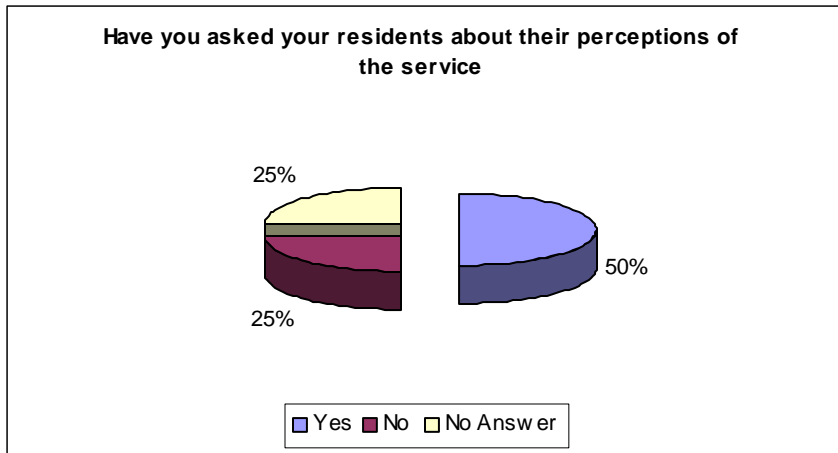
Chart 10



**Resident satisfaction with the service**

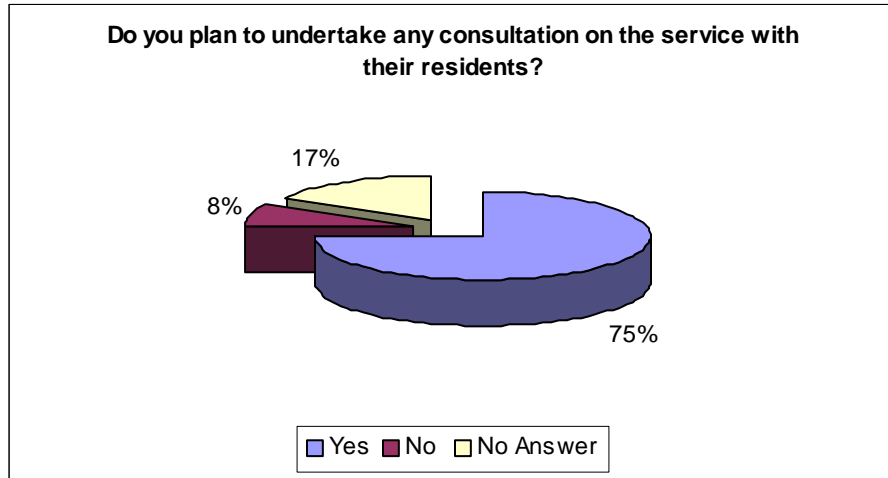
- When asked if they had asked their residents about their perceptions of the service 6 responded yes, 3 responded *no*, and the remaining 3 did not respond

Chart 11



- Asked to list their residents' 3 positives and 3 negatives about the service the following comments resulted
- **Positives**
  - Quick and prompt
  - The staff are really friendly and polite
  - Confident in service provision
  - Professional staff
  - Ease of use
  - Confidence in using the pull cord
- **Negatives**
  - Call centres do not always pass on messages to SMs
  - Response times too long
  - Lack of action on the part of the control centre
  - The control centre is too far away
- When asked if they planned to undertake any consultation on the service with their residents 9 responded yes, 1 responded *no* and 2 did not respond

Chart 12



When asked when they planned to undertake the consultation exercise the majority stated during 2004.

**2.3.1 Recommendations**

The outcomes of the research suggest that the services offered are in the main basic monitoring services. Also two providers utilised Social Alarm Centres that did not hold any form of Accreditation and we would recommend that they ascertain whether these centres are in the process of gaining an Accreditation, and if not, consider whether they remain a suitable provider.

In our view social alarm services will become an increasingly important element in providing services for older people in the future. Therefore it will be essential for providers to:

- Work with a Social Alarm Centre that provides additional services;
- Upgrade its own equipment to enable customers to access more extensive services including the range of assistive technology that is available in the marketplace.

It is likely that these services will increasingly be offered to customers in the community as government policy is centred on services being delivered in a home setting. This view has been further strengthened in recent weeks following the outcomes of the Robson Rhodes Independent Review of the SP programme which stated that on the one hand the programme was ‘not value for money’ and on the other that there was ‘unmet need’. It is considered that much of this unmet need is situated within communities so the monies saved will probably be targeted at people in their own homes across both the home ownership and rented sectors and providing dispersed alarms and ancillary services are likely to

be a major element in this. This is particularly pertinent in a County such as Cambridgeshire with rural communities.

If the above scenario is on the whole true it will be important for housing providers to ensure that they can provide more extensive services in the future. This will result in additional capital expenditure for housing providers 'but of equal importance' there will be a requirement for Social Alarm Centres to invest in sophisticated hardware and software to facilitate these services and it is unlikely that the smaller centres will be able to justify this capital investment. In the light of the above we would recommend that providers undertake:

- A more extensive review of alarm services to enable them to future-proof these services.

We would also recommend that providers consider forming a consortium or loose affiliation to purchase both alarm monitoring services and equipment. We recommend this despite the fact that only 33% of respondents in our survey stated that they would be prepared to tender a contract jointly. The reasons for this are:

- There are a significant number of Social Alarm Centres chasing available business so an exceedingly good price per unit for monitoring services can be achieved when the contract is large. Therefore Value for Money (VFM) can be achieved for customers which we currently suspect is not the case across all providers
- In addition to the core contract individual providers can specify individual services
- The consortium can also tender maintenance contracts and obtain considerable savings on the purchase of equipment through their buying power

It may be that there will be some reluctance on the part of some housing providers to embrace this process because they are concerned about losing autonomy. However, we believe that the savings achieved are likely to outweigh this objection. Also we wonder if some providers are aware that even with a contract of this nature the individual calls at the centre can be answered using their HA / LA name.

Another objection raised could be that larger national providers, if chosen as a result of the tender, often do not provide a mobile alarm service. In this context, it should be noted that one of the national providers contacted stated that they were planning to introduce a mobile service in the locality.

**Footnote**

*Some additional work around alarm services in Cambridgeshire has been undertaken to update Table 4, Appendix 8 of the Supporting People Strategy. A copy of this work is attached as Appendix 4.*