Kit4Care – Evaluation Findings

Kit4Care Final Project Meeting
23rd January 2025

Care City Kit4Care

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Challenges in the domiciliary care sector

Challenges

- **Communication between health and social care**
  - escalating concerns to GPs time consuming
  - no spaces for collaboration
- **Prevention in domiciliary care**
  - clients deteriorating quickly and ending up in hospital
- **Data sharing**
  - no syncing of data between organisations
- **Recognition for social care**
  - social care staff feeling undervalued
- **Funding**
  - little funding to test new innovative approaches

Responses

To address these challenges, the Kit4Care model has focussed on:

- Co-designing improved escalation pathways
- Introducing forums for collaboration
- Introducing remote monitoring equipment
- Creating data sharing agreements
- Upskilling domiciliary care workers and recognising training achievements
- Providing funding to support rollout of the project

Evaluation Findings

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Kit4Care in Numbers

Trial period	4-5 months (June/July - November 2024)
Number of providers participating	5
Number of care workers trained	51
Number of clients monitored	87
Number of individual readings taken between June and November 2024	176 blood pressure readings 327 pulse readings 191 oxygen readings 181 temperature readings - *Average - 175 readings / month*

Collaborative working

Forums for health and social care to connect and collaborate

- Introduction of forums well received (local delivery groups, weekly huddles)
- Unable to prioritise / commit to attending meetings on an ongoing basis

Unable to maintain engagement of all primary care representatives

- Some of the GP practices / PCNs offered verbal endorsement but disengaged from the process
- Primary care representation lacking at some of the collaborative forums (i.e. steering group)
- Briefing about the pilot reached some but not all practice staff

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Findings – Staff

Openness towards trialling remote monitoring tech

- Upskilling - training and application
- Valuing - certificates and branded reflection journals and bottles

Stress levels

- Tech issues
- Some staff members at GP practices unaware of pilot

Confidence levels & reassurance

- Reassurance for both care professionals and clients
- Supporting decision making

100% of care professionals in favour of continuing remote monitoring

Openness towards technology
- Mixed perception
  - mistrust, concern about losing human element in care
  - Understanding how technology can enhance their care

Homecare recipient
"I'm cautious with tech but do understand why we need it."

"[Because of the regular health checks from my care worker], I don't have to go to the doctors as much as I don't like going"

Experience with health checks
- Trusting relationship w. care staff
  - Reassurance
  - Indifference
  - Inconvenience

Clients have expressed preference for:
  - Dedicated times for health checks, frequency that is suitable
  - Results of readings and next steps being communicated clearly
  - Readings to be automatically shared with GP and can be discussed at appointments

Homecare recipient outcomes

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Detecting deterioration more quickly than usual and receiving quicker access to treatment

- Escalation process accelerated by 24 hours
  - Chest infection- antibiotics prescribed
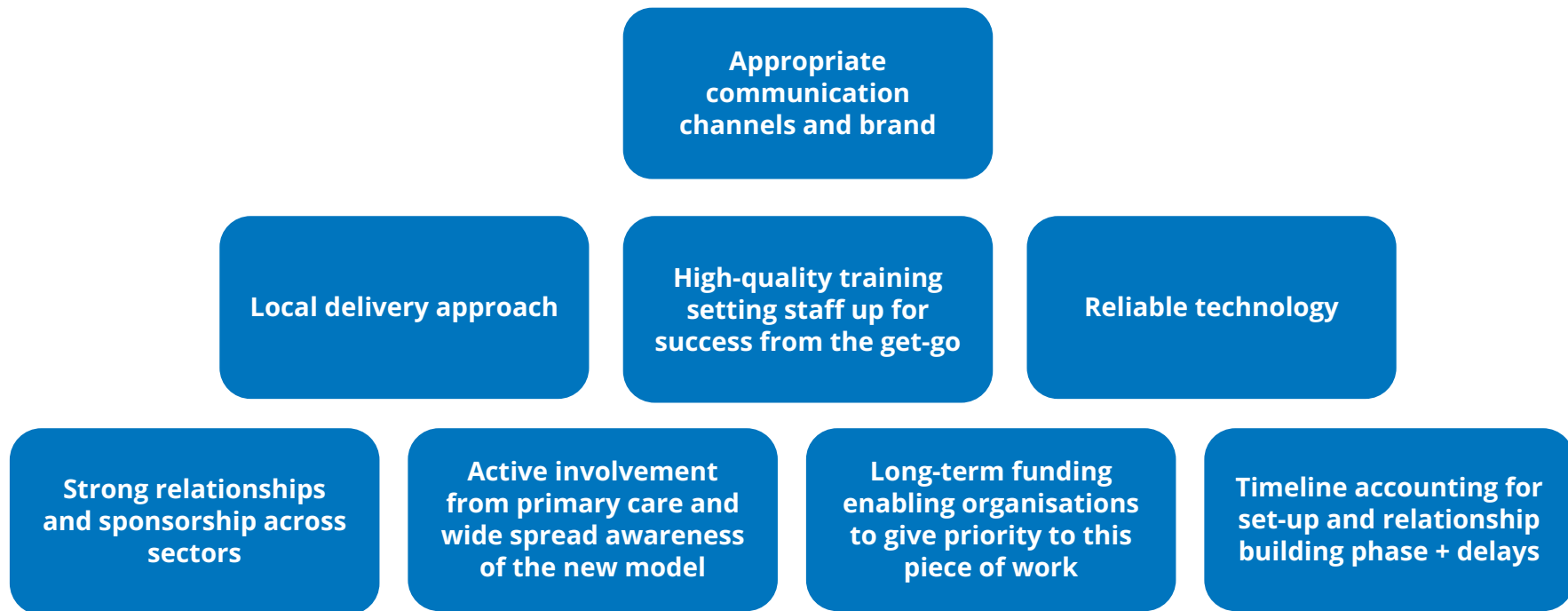 - Low blood pressure - medication adjusted

Life saving interventions

- Remote monitoring tech led to detection of sepsis
- Treatment was received early and individual recovered

Only calling GP / ambulance when there is a validated cause for concern

- Access to objective measurements reduces number of calls

Recipe for success

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Appropriate communication channels and brand

Local delivery approach

High-quality training setting staff up for success from the get-go

Reliable technology

Strong relationships and sponsorship across sectors

Active involvement from primary care and wide spread awareness of the new model

Long-term funding enabling organisations to give priority to this piece of work

Timeline accounting for set-up and relationship building phase + delays

What next?

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Continue

1 Primary care and social care jointly fund Blue Boxes for further use

2 Provider funds Blue Boxes for continued use

3 Further external funding is identified to help fund the equipment

Option: Payment plan is changed to a rental model, £40/month + VAT (for license payments)

Discontinue

4 Use of Blue Boxes is discontinued. Boxes have to be returned if not in use

Thank You!

Care City Innovation C.I.C.

E theteam@carecity.org

Twitter @CareCityUK

Facebook facebook.com/carecity.org

Linkedin www.linkedin.com/company/carecity.london

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