



Centre for Science and Policy

Policy Workshop

Emerging Technologies for Social Care

A summary of the discussions held on 23 January 2019 By Katie Cohen, CSaP Research Assistant

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Purpose and Summary

Populations are ageing in industrialised countries. There will be two million more people over the age of 75 in the UK in the next ten years; the proportion aged 85 and over is projected to double over the next 25 years. This extension of human life is something to be celebrated. But an ageing society will also place unprecedented demands on a care system which is already fragile and underfunded. In order to rise to this challenge, we need to take advantage of new technologies that support independence, provide more and faster access to data, reduce strain on the workforce, and make it easier for family and friends to combine caring responsibilities with other responsibilities.

This discussion brought together care sector experts, senior policy makers, practitioners, and researchers in the field to discuss what the care sector, NHS and government should do to speed up the development, evaluation, and uptake of effective health and care technologies. The workshop began with perspectives from invited speakers on current problems in social care and frontline views of opportunities for improvement. The roundtable discussion that followed fleshed out both the benefits and challenges of using technologies to address the sector's key issues.

Key Points

- The social care sector needs brokerage and intermediaries with both knowledge and market functioning.
- We need to value the role of both the human and technology in caregiving, improving the efficiency of the system while also protecting the individuals and quality of care.
- Sourcing and incentivising care is a pressing issue, and so attention to both supply and demand could help attenuate issues of funding and help to close the care gap:
 - Demand: how can policymakers open up the right technologies to decrease dependence on state actors?
 - Supply: how do we provide more and better care with every pound spent?
- Codesign and codelivery of technologies for social care will help to simplify and integrate approaches.
- Defining the role of regulators and improving their communication with care workers, users, and services will help to address barriers to uptake of emerging technologies.
- Using health outcome metrics (i.e. hydration, mental health, etc.) might be a better way to ensure improved overall population health than hours of home care.
- Focusing first on the system we want to design and what we want people within it to be able to do will help to determine where technology can support human efforts in social care; clearer targeting of what we want to see changed is necessary for change to be accomplished.

Roundtable Discussion

The key themes of the roundtable discussion have been summarised below.

Scene setting: current problems and potential opportunities

Although there is a dialogue about the benefits of new technologies in healthcare, we are lacking a clear conversation about benefits to social care services. Not only is the NHS's long term plan of better, longer lives contingent on care services, but there is also a huge (although fragmented) market to be captured. Why is this happening and what are the barriers to having this conversation?

As we wait for a social care green paper and uncertainty surrounding workforce and funding loom, it is most productive to focus on what the sector and national bodies can do and how they can help each other. Specifically, we must brainstorm an integrated approach to reducing labour intensity, increasing productivity, and releasing time to care.

Digital, data, and devices are the primary technological opportunities in social care and many platforms are emerging that capitalise on all three fronts. Such integration allows for improved deployment of the workforce, stripping of unnecessary costs, investment in frontline care workers, better alignment and collaboration of stakeholders, predictive capabilities, and avoidance of unnecessary hospital admissions and other health events. Those capitalising on these frontline opportunities have also effectively partnered with private companies, streamlining innovation and aiding expansion.

Those employing new technologies for care services feel that local and national authorities might need to shift their emphasis from time to outcomes, and regulators must adapt to the emerging technology landscape.

Moreover, a holistic approach that brings the whole care community together to deliver a solution will not only save time and effort, but also lead to the best possible outcomes. Focusing primarily on the formal care system ignores the large proportion of unpaid caregivers in the country; building a compliant care system entails including everyone from GPs to community nurses and families to patients while utilising technologies that can better source and incentivise carers.

Frontline workers across the country see different problems in the care system; they want honesty and transparency, spread of self-advocacy and skills, and better utilisation of the untapped workforce which could be paired with new technologies. Discussions around emerging technologies can often overshadow the vulnerability of the user population and ignore users' uneasiness with new technologies, so a conversation that better accounts for the recipients will inevitability improve evaluation and uptake.

Areas of debate

- The scope of social care must be defined in order to better implement system changes, and so we must include the informal care sector as well as decide whether learning disabilities and self-care are to be included in the agenda.
- Discourse often focuses on information technologies for social care but expanding the scope to include care robotics and exoskeletons could prove integral in transforming the sector.
- Should quality of care be a technologically-driven answer, and how do we determine the balance between automation and human contact in care?
- Ethical and surveillance issues surrounding data collection in social care must be weighed alongside benefits of new technologies; consumers fear that expanding technologies means carers will come less often.
- Clearer targeting of what we want to see changed and a better understanding of what society expects of local and state providers will make regulators better equipped to address emerging technologies.
- How do we come up with a consistent standard of care and concrete regulations when the sector is comprised of everything from informal care workers to SMEs to large private providers?

Principles for good tech

- Coproduction: engaging individuals who will be using the technologies will improve uptake.
- Simplicity: those creating technologies for social care must bear in mind the generational gap between the producers and consumers and recognise the consumers' inherent resistance to and difficulty using technologies of all kinds.
- Affordability: funding is limited, so we need to improve strategic use of current workforce and existing technologies.
- Ecosystem view: cost/benefit analyses of technologies for social care must consider how each technology is contributing to and improving the entire system.

Adoption Spread

- Good innovations are hindered partially by the sector's fragmentation, but also by lack of collaboration with the frontline from the design to implementation phases; many users have limited digital literacy.
- Bolstering the evidence base across all levels, from product design to complex service, requires facilitating collaboration within the sector and between providers and users.
- Policymakers could invest in a user-friendly platform to help people figure out which technologies they need and where to find them, which would help to break down barriers to utilisation, increase transparency, and create a market for direct consumers (i.e. an Amazon for healthcare technologies).
- Professionalising the workforce could unify the decentralised market and provide incentives to address the workforce shortage.
- Providing access to free training workshops for informal carers paired with a platform that makes technologies more accessible could help us take advantage of the informal market.
- A clearer voice from regulators and policy makers on what use of technology should now be expected in social care, based on conversations with people, carers and staff, will help to set expectations before going straight to formal regulatory interventions.

Attendees

- Tim Atkins, Head of Strategy, Care Quality Commission
- Simon Bottery, Senior Fellow, Social Care, The King's Fund
- Katie Cohen, Research Assistant, Centre for Science and Policy
- Christina Cornwell, Director, Health Lab, Nesta
- **Robert Doubleday**, Executive Director, Centre for Science and Policy
- Megan Eldred, Head of Science and Policy Forums, Centre for Science and Policy
- Malte Gerhold, Executive Director, Care Quality Commission
- Mark Golledge, Care and Health Digital Lead, Local Government Association
- Stephen Johnston, Cofounder, Aging2.0
- Halima Khan, Executive Director, Health Lab, Nesta
- Hoi Lam, Staff Developer Advocate, Google
- Michael MacDonnell, National Director, NHS England
- George MacGinnis, Challenge Director for Healthy Ageing, UKRI
- Sinead Mac Manus, Senior Programme Manager, Health Lab, Nesta
- Ben Maruthappu, Cofounder and CEO, Cera
- Jess Morley, Tech Adviser, Department of Health and Social Care
- Lydia Nicholas, Research Lead, Doteveryone
- Max Parmentier, CEO, Birdie
- Kevin Pyatt, Director of Digital Transformation, Skills for Care
- Amrit Sumal, Compliance Director, National Care Association
- Joop Tanis, Director MedTech Consulting and Business Development, Health Enterprise East
- John Taysom, Non Executive Director, Privitar
- Jamie Ward, Policy Intern, Centre for Science and Policy