“CARICT workshop”

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HealthAccess
Sweden

Ref: SIAT Sweden, NkA Sweden, Industries Sweden/Europe
Sweden

- 9 million citizens
  - 18.1% >65, 5.3% >80
- 21 County Councils
  - 57,000 - 2,000,000 citizens
- 290 municipalities
  - 2,500 - 830,000 citizens
- Self-governing
- High broad band, wireless coverage and technology use
- National policy
- Funding initiatives
ACTION is an acronym for Assisting Carers using Telematics Interventions to meet Older People’s Needs.

The service was developed in 1997 by the University of Borås together with universities and care providers in England, Northern Ireland, the Republic of Ireland and Portugal.
**ACTION – research and development**

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Description</th>
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<tbody>
<tr>
<td>1997-2000</td>
<td>- ACTION – EU-project</td>
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<td>2000-2002</td>
<td>- ACTION 2 – Swedish project</td>
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<td>2003-2006</td>
<td>- ACTION 3 – Person centred support in health &amp; social care</td>
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<td>2004</td>
<td>- Borås municipality implements ACTION as a mainstream service</td>
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<td>- University College of Borås sets up ACTION Caring Ltd.</td>
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<td>- ACTION Caring Ltd. and Telia co-operate</td>
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<td>2006-2009</td>
<td>- ACTION – Living with dementia</td>
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<td>2007-2010</td>
<td>- ACTION – Working in partnership to increase health and social care using ICT</td>
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<td>- ACTION in Norrland</td>
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The ACTION-service
Main lessons learned

Critical success factors

• User centred, participatory approach

• Based on research results

• Ongoing support by all key stakeholders

• Commercialization of the service

• Innovative appeal and flexibility as a technology based service
Gapet - ICT - Bridging the gap

- Started 2009
- Carers: 16-89 years, 100 different diagnosis
- 33 municipalities
- 2000 users
Assistive technologies, examples from “Technology for Elderly”, Sweden

- Building adaptions, new design (95% of 65+ live in ordinary housing)
- Safe home environment...lights, reading lamp, furniture, shower chair
  - Access to (older) buildings
- Mobile managed digital door lockers/keys (now 35,000+)
  - Memory support by notice boards/watch
    - Booking of laundry room
  - Physical training outdoor equipment
Assistive technologies, examples from “Technology for Elderly”, Sweden

- Lights during nights
- Video phones, adapted
- Mobile phones, adapted
  - Digital pen and paper (Anoto) for bankings
    - Web shopping
  - ICT for novice internet users
  - Optical aid for persons in bed
  - Power assisted wheelchair
  - Kitchen/bathroom equipment, furniture etc.
- Studies and metodolgiers for education and training
Sten’s vision: Independence for everyone, free to eat by yourself!

- Controlled by the user through finger, foot, mouth or head control.
- Advanced movements to reduce spilling
- Small and portable to bring to restaurants or outdoor
- Quite and discreet design
Possible to have a private conversation

• “I have eaten with Bestic together with others and I think it is a great assistive device. The perfect scenario would be that my girl-friend also gets her own Bestic, then we can have dinner without others being present.”

• “It is much more comfortable to eat by yourself than having an assistant. It is much more private and you can have a private conversation about anything. It is an intimate situation.”

• “It is so much easier to eat with Bestic because you are more independent.”
The future: eye control
Västerås - eHomecare 2013

- 140,000 inhabitants
- 7,000 80+
- 2,000 homecare
- 1,750 nursing care
- Cost in elderly sector approx 1 billion SEK
Demographic Västerås

Graph showing the demographic trends from 2014 to 2029 for two age groups: 20-24 år and 80- år.
Tillsyn nattetid
”Visit” by night
Giraff, Robot – Homecare service & support

- Mobil tele-presence
- Remotely controlled – invitation by the user
The Giraff experience

- **Elderly response**
  - Nothing is required of me
  - I control who visits
  - I maintain integrity

- **Caregiver response**
  - I can visit more often
  - I can visit more conveniently
  - I have more confidence that my cared for are safe
Västerås
“Some barriers for implementation”

- Uns sureness about implementation
- ……it is not only to procure and implement…..
  - Responsibilities
    - ICT security and privacy
    - Ethical issues
  - Legal framework and issues (lack of practice)
- Show in practice (for politicians) the solutions and benefits
Västerås
“Success factors towards a political decision about introducing eHomecare”

- "In house” experience (projects) over the years
  - Hands-on experiences by the care teams
  - Work closely with the end user, the Elderly
  - Focus on needs and usefulness (not technology)
    - To show the benefit in practice is key
- Close cooperation with the ”central unit” and the care teams
  - Best practice visits and collaboration
  - Regular contacts with politicians
  - This is about social innovation
300 eHomecare users 2013-2015

Costs: 5.3 MSEK

Reduction in costs (Conserv. calculation): +5.2 MSEK

Reduction in costs: 10.5 MSEK
....and finally:

VIDEO "Robot Rose"
Homecare service and support robot

(3 min)