

THE WAY FORWARD

**MANAGING THE BIGGEST CHALLENGE
FACED BY THE CARE SECTOR**



**An interview with
Joanne Balmer, Chief Executive
Oakland Care**

Extract from a report commissioned by:



Powerful Accounting Software

Introduction

As yet, the digital revolution might not have taken hold across the care sector – but it's going to happen, probably sooner rather than later.

The impact of robotics, artificial intelligence, machine learning, the internet of things will be significant, and should improve both quality of life for those who are being cared for and the viability of the companies providing that care.

Coupled with technology which optimises operational and administrative tasks, providing information which is of value to the provision of services rather than simply score keeping.

Such change could be the biggest challenge the sector has ever had to address. As one CEO put it, managing technology could be like constantly pressing on the fast-forward button on the television remote and trying to make sense of what you're watching on the screen. But how do we synchronise technology with humanity, a question which is going to be mission critical.

In a report commissioned by iplicit, the cloud accounting software company, to be prepared and published by DECISION magazine later this year, owners and directors in the care sector will be talking about the issues and how they can be reconciled.

This is one of the interviews to be included.



Where legacy is not a problem

You could say they've consigned legacy, a kryptonite factor in whether technology can be successfully implemented, to the history books.

"All of our care homes are purpose-built, which means we aren't having to strip out old IT or paper based systems," explains Joanne Balmer, chief executive of Oakland Care and board member of Care England. "That means the investment in the latest technology is there in the business model.

"Every time we have a new build, and we hope to grow by two or three homes a year, then we automatically budget for a technology infrastructure."

Today, with the 'philosophy' of 'live, love, and be loved', Oakland Care have ten 'luxury living' homes. And Balmer stresses there is a balance definitely to be struck between the use of resident facing technology and maintaining human interaction.

"We did do a trial not too long ago with robotics helping a care assistant with serving meals and drinks," she reveals. "Although the residents did find it quite fascinating, it didn't give us the





Joanne Balmer

level of benefits that we were perhaps hoping that it might, and on balance, we decided it wasn't quite the right time to proceed with that type of intervention. Something that's really going to help sooner I think is more automated cleaning.

"I would say most of the care home sector has embraced technology particularly around electronic care records and electronic medication management, which are pretty standard now," says Balmer. "There can't be many care providers out there that are still running on paper.

"Our compliance audits are all electronic. Housekeepers aren't walking around with clipboards and checklists for example. All of that is digital now on hand-held devices, which really enables



us to have much better oversight of compliance. Then of course from a team member's perspective, we're also using deploying technology for rota scheduling and electronic communication with everyone. All of our HR systems are on a digital platform, including the onboarding process for new team members, providing on-line learning, performance management; everything is digital."

And Balmer provides a micro-example of the impact of technology. "We now have remote monitoring for refrigeration so we no longer have to rely on staff checking and writing down the temperature readings of each individual fridge in a building, including those which store medications. It means we don't have to rely on people remembering to manually check the temperatures each day and write the figures down on a piece of paper. The data is captured and entered into the system without human intervention.

"But to get to the point where everything is digital you can't change multiple things at the same time if that's going to put pressure on those working in the care homes trying to get on with their day job."

The deployment of technology though is a continuum, and what has also changed is the pace at which new iterations of technology are being introduced. "Initially technology would have been deployed to reduce the incidence of residents falling in a care home, with the use of door exit, motion, and light sensors," says Balmer. "But they only provide an alert when someone can be halfway to falling. That doesn't prevent falls and doesn't predict



them. A carer might be able to get there in time to prevent it; they might not.

“Whereas the newer use of technology and wearable devices and the data they provide will help to predict when somebody’s health status has changed which might not be visible to the naked eye but makes them more susceptible to falling.

“I’ve done work previously where I’ve used more manual methodologies with statisticians where we’ve looked at a KPI relating to falls. Just because one home has had more falls in a month compared to a home down the road, it doesn’t necessarily mean that it isn’t delivering care which is as good as the other home.

“It might be that their particular resident demographic is more complex or they may have residents who are perhaps not compliant with certain ways of doing things. A resident can be asked multiple times not to get out of their chair unless they’re using their Zimmer frame, but they might not necessarily follow that instruction. So it doesn’t automatically follow that the care home is inherently providing worse care than homes with lower fall rates.

“There’s also the converse way of interpreting data where you could say, well actually, it might not be that a particular home has a lower number of falls but that its governance isn’t as strong and not every incident has been logged.”





One of the purpose-built Oakland care homes

“What technology means,” says Balmer, “is that with digital healthcare records and incident management recording, data can then be analysed to draw out trends and predict how a home may or may not perform in the coming months. That will enable a care home to identify challenges before they escalate into problems and the care home operator will be able to direct their resources much more effectively.”

So is artificial intelligence already having an influence? “I think the one thing that probably could slow the use of predictive AI is the amount of integration between various systems,” muses Balmer. “We have to address collaboration between systems in a much better way because it means otherwise there could be gaps in machine learning.”

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About iplicit

Providing a cloud-based finance and management software solution that allows the care sector to focus on what really matters.

Tailored for those frustrated by on-premise legacy software, iplicit provides greater flexibility and enhanced levels of reporting, integrating with other cloud applications for a seamless migration path from a user's existing system, enabling organisations to 'step up' to next generation finance software without losing the functionality they currently enjoy.

iplicit received the Accounting Excellence award for mid-market and enterprise software of the year in 2020, and the top product for enterprise accounting/ERP in the Accounting Web software awards, 2021.

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The interview with Joanne Balmer was undertaken with Tim Bryars, specialist at iplicit in working with the care sector.



About DECISION magazine

First published in 1988, DECISION magazine reflects the business lifestyle, the trials and tribulations, the hopes and aspirations of directors and managing partners responsible for businesses with a turnover of £5million and above.

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