



The forecast is for a winter of unprecedented pressure

The Tunstall remote patient monitoring and management platform is a comprehensive and versatile telehealth solution that can be deployed quickly and easily to help you protect vulnerable patients – and your staff







With forecasts of unprecedented pressure on the NHS this winter, the role of robust telehealth solutions has never been better recognised – nor the need for them more acute.

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Triagemanager™











Case studies



myMobile







Summary







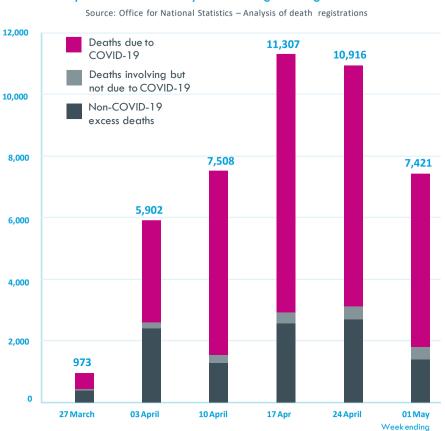


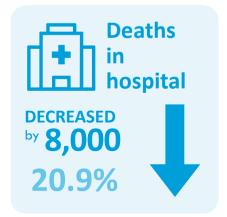
COVID-19 peak: what did we learn?

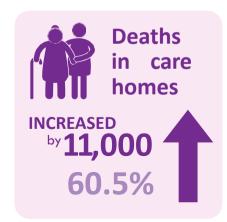


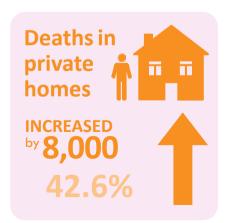
COVID-19 first peak – excess deaths

Weekly deaths above 5-year average in England and Wales









- During the peak of lockdown, a significant proportion of excess deaths in England and Wales were not from COVID-19 possibly due to the lack of availability of routine care for long-term conditions and/or a resistance to seeking acute care.
- Increased deaths occurred not in the acute-care setting, but in the community the majority in residential care homes.







Living with COVID-19 this winter: what should we expect?







When asked by the Government's Chief Scientific Advisor to look ahead to winter 2020/21, The Academy of Medical Sciences identified four serious challenges:1



Rising cases of COVID-19

peaking in January/February 2021



NHS disruption

caused by COVID-19



Reorganisation of staff, beds and services



The challenges of dealing with non-COVID-19 patients



Backlog of routine care

NHS waiting lists could increase from

4.2 million (pre-COVID-19)





Winter flu season

is likely to coincide with another wave of COVID-19





The UK must prepare now for another potential wave of COVID-19 this winter that could be more serious than the first. Combined with a growing NHS waiting list, the disruption to the delivery of care caused by the first wave of the coronavirus and the risk of a winter flu epidemic, this poses a serious risk to health. We do not have long to act...

* Worst case scenario, not accounting for new drugs/treatments/vaccines and assuming no lock-down as strict as March 2020









Living with COVID-19 this winter: what should we expect?







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NHS disruption



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'Long COVID' is now a recognised challenge many survivors in the community require support and monitoring of physical or neurological symptoms²



More **95,000**

hospitalised in England with COVID-19 - most have been able to leave hospital³









It is clear that for COVID-19 survivors, the virus and the treatment required to combat it will have alasting impact on their health.3

^{3.} Aftercare needs of inpatients recovering from COVID-19. August 2020. NHS England publication reference 001559. Available to









^{2.} Greenhalgh T et al. Management of post-acute covid-19 in primary care. BMJ 2020:370:m3026. Available to download h

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flu led to 17,000

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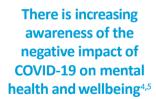








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People with LTCs nearly **2X**as likely to report
having difficulty coping*4

46% worry about exacerbating existing mental health conditions⁴



The Centre for Mental Health recommends **proactive mental health support**⁵ for specific groups, including:





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Additional mental health support is also needed for people with long-term physical and neurological conditions whose mental health has worsened during the pandemic.⁵

LTC: Long-term condition

* Compared to the overall population (26% vs 14%)

^{3.} Aftercare needs of inpatients recovering from COVID-19. August 2020. NHS England publication reference 001559. Available to download here













^{1.} Preparing for a challenging winter 2020/21. The Academy of Medical Sciences. July 2020. Available to download here

^{2.} Greenhalgh T et al. Management of post-acute covid-19 in primary care. BMJ 2020:370:m3026. Available to download here

A COVID-19 winter: a compelling case for telehealth







Telehealth programmes that enable remote patient monitoring protect the wellbeing of vulnerable patients without the need for face-to-face contact with primary or secondary care teams. They are proven effective for:

- Improving outcomes in patients with long- term conditions, empowering them to take responsibility for managing their care and reducing the risk of emergency hospitalisations
- Monitoring at-risk patients in the community for physical or mental health issues
- Enabling faster discharge of patients from hospital and reducing the risk of readmission by providing continued monitoring and management in the community



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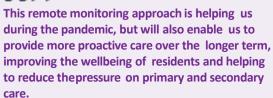
The use of Digital Health Technology to support patients is a key part of the novel coronavirus (COVID-19) standard operating procedure: Community Health Services.

Vicki Slade

Digital Health Lead, Cornwall
Partnership NHS Foundation Trust



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Joanne Dorsman

Bolton NHS Foundation Trust



Remote patient monitoring appears to be an effective approach for managing COVID-19 symptoms at home.¹

This program provided a safe and satisfying experience for patients while minimizing COVID-19 exposure and in-person healthcare utilization.¹

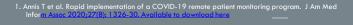


Telehealth with remote patient monitoring improves outcomes and drives efficiencies in the management of patients with long-term conditions living at home or in care. It is now also being successfully used to monitor vulnerable patients for signs of infection and to manage those infected with COVID-19 in the primary-care setting.¹









A COVID-19 winter: a compelling case for telehealth







The Government has announced an additional £588 million, available to CCGs via the NHS until 31st March 2021, to help cover the cost of recovery and support services for up to six weeks following discharge from hospital.¹





Hospital Discharge Service Requirements

CCGs & LOCAL SYSTEM COMMISSIONERS

What will I do differently?

 Support greater use of personal health budgets and individual service funds to support mainstream care at home, provided by directly employed carers.

Graphic adapted from: Hospital discharge service requirements: action cards for staff.

Available to download from https://www.gov.uk/government/publications/hospital-discharge-service-action-cards1









A COVID-19 winter: a compelling case for Tunstall



Trusted by providers and patients around the world and successfully used by NHS Trusts for a variety of needs. Tunstall offers a proven, easyto-use and versatile telehealth solution with remote patient monitoring (RPM) and management.

While many systems look at individual conditions. Tunstall's RPM platform can be personalised to monitor underlying health issues with complex comorbidities - and has the flexibility to incorporate screening for any emerging risk to physical and/or mental wellbeing.

Backed by our experienced UK-based Workflow Consulting Team, dedicated programmes can be developed and deployed guickly, and scaled and adapted responsively according to clinical need seasonal and environmental risks, and technological innovation.



Class 1 Medical Device

Tried and trusted platform

informed by insights and learnings from over



countries

10,000 users

(patients and clinicians)



- Long-term conditions (LTCs)
- Complex comorbidities
- Infection risk



Workflow consulting,

ongoing support

from our

experienced clinical and

technical teams

system integration and



Personalised. holistic solutions



monitor overall patient wellbeing rather than a single condition





Versatile. scalable and responsive

Tunstall's RPM platform can be deployed rapidly with remote updates that are quick and easy to implement

You can be confident in the proven Tunstall remote patient monitoring and management platform – and there is still time to implement a programme to support and protect your patients and staff this winter.







Triagemanager™





Triagemanager enables remote monitoring, risk stratification and management of patients by your clinical and service teams with:

- Customised or pre-approved questionnaire templates for:
 - Long-term conditions such as COPD, asthma, heart failure and diabetes
 - Existing or potential physical and mental comorbidities
 - Symptoms of infection (COVID-19, seasonal flu, norovirus, other)
 - Recovery of patients discharged into the community after hospitalisation
 - Mental health conditions, including eating disorders and loneliness
- Traffic-light prioritisation system that triages patients. enabling users to identify those most in need of intervention
- Video-conferencing and bi-directional messaging to allow direct communication without the need for face-to-face contact
- Library of educational content that can be selected and made available to patients to improve their awareness and responsibility for self-management









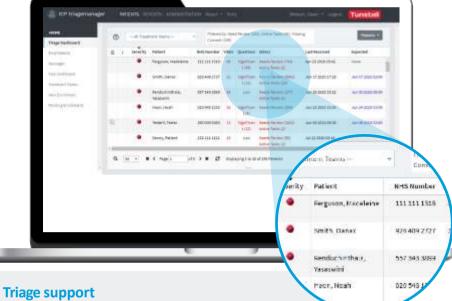


New questionnaire templates for customisation include:

Monitoring recovery of COVID-19 survivors



Monitoring seasonal flu symptoms



To streamline workload and drive efficiencies, Tunsfall can complete technical triage to understand missed readings or lost contact from patients







myMobile

single-user app developed for individuals in the community

myMobile is an easy-to-use and intuitive app that enables patientengagement in the management of long-term conditions, comorbidities and riskfactors.

- Versatile, easy-to-adopt system that uses:
 - Patient's own device(s) or supplied tablet to host the app
 - Patient's own smart watch or supplied best-in-class peripherals to record vital signs
- Customised health questionnaires that capture clinical and other wellbeing information not recorded by peripheral devices
- Video-conferencing and bi-directional messaging to allow direct communication without the need for face-to-face contact
- Educational content and engagement in recording relevant measures encourage patient awareness of factors impacting their condition and increased responsibility for selfmanagement





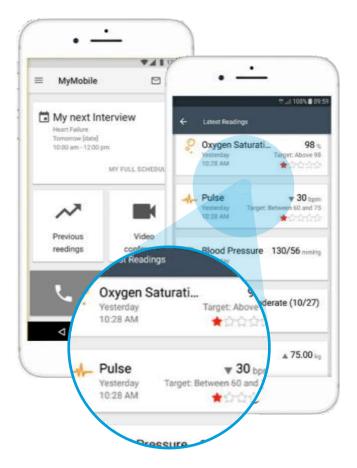
No Wi-Fi required

myMobile is supported by Android OS and iOS devices and operates with 3G, 4G or Wi-Fi connectivity











Personalised, holistic solutions Single app monitors overall patient wellbeing rather than single condition









myKiosk

multi-user app developed for group-living environments, such as care homes



myKiosk is an intuitive multi-user app, specifically designed to monitor residents in group-living environments, and ideal for use in care homes. It is well established that care-home residents are particularly at risk from seasonal infections, and that the impact of COVID-19 has been devastating onthis vulnerable population.¹

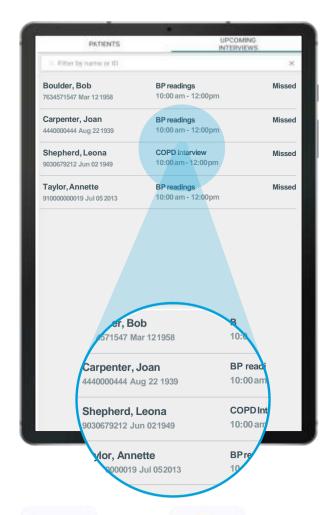
- Staff gain increased awareness of residents' health after training on best practice for managing infection risk, with an easy-to-use app that records:
- Vital signs from Bluetooth-enabled monitoring devices
- Observations from other questionnaire-based health measures
- Data is automatically transmitted to Triagemanager, where the level of risk and need for intervention are assessed by clinical staff without the need for face-to-face contact, and potentially reducing the need for acute-care admissions
- Data is also collated for the home, providing a clear picture of each resident's health as a valuable reference for discussion with other medical professionals, such as GPs





No Wi-Fi required

myKiosk is supported by Android OS or iOS devices (supplied by Tunstall or by the home) and operates with 3G, 4G or Wi-Fi connectivity























Case study: Remote patient monitoring for eating disorders using myMobile and Triagemanager™

The challenge

Children with eating disorders would normally receive clinic-based care, but with the onset of the COVID-19 pandemic, an alternative approach was needed.



Background

Cornwall Partnership NHS Foundation Trust has a well-established Digital Health Service which provides remote patient monitoring to patients with respiratory and cardiac conditions using Tunstall Triagemanager and myMobile.

The Trust's eating disorder service offers treatment and support to children over the age of 11 with a range of eating disorders including Anorexia Nervosa, Bulimia Nervosa and Restrictive Eating Disorder. The normal care pathway includes children attending clinics for monitoring of their vital signs and symptoms, however, due to the pandemic and the risks to patients and staff, this was no longer possible.

What we did

Tunstall worked with the Trust to introduce remote patient monitoring, using the myMobile app and Triagemanager software. Aspecial health interview was developed in conjunction with the Tunstall Clinical Team, based on the Junior MaRSiPAN (Management of Really Sick Patients with Anorexia Nervosa) risk assessment framework. Once a week, patients use devices to take their vital signs (blood pressure, weight and temperature) and answer symptom-related questions. Through a patient dashboard and alert system, Triagemanager enables clinicians to monitor progress and prioritise patients for intervention.



Results

32* high-risk caseload patients have already been referred, and feedback from clinicians is very positive. Outcomes are expected to include:

REDUCED hospital admissions



wellbeing of patients and families as stressof exposure to infection elliminated...



INCREASED

...while maintaining monitoring and management of eating disorder

IMPROVED self-management





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The children we support are extremely vulnerable, and any delay or interruption to the treatment they receive could have serious implications for their recovery. Being able to deploy a solution so rapidly to enable us to continue helping them has been a real relief; it's been amazing just how quickly we've been able to adapt.

Michele Boyce Service Lead Nurse, Kernow Health

* Figure correct as of May 2020













Case study: Safeguarding care home residents and professionals using myKiosk and Triagemanager™

The challenge

Care-home residents are at particularly high risk during the COVID-19 pandemic. Bolton NHS Foundation Trust and Bolton Clinical Commissioning Group needed a way of delivering quality care while minimising the risk to residents and staff.

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The COVID-19 crisis meant it became critical to look at ways we could use technology todeliver more care without face-to-face contact. We have accelerated the transformation of our model of care, and the aim is to change working practices for the long term, improvingoutcomes using technology and multi- disciplinary teams.

Paul Beech Head of Strategic Commissioning, Bolton Clinical Commissioning Group

What we did

The Tunstall team worked with care-home staff to train them on the system and to measure vital signs using Bluetooth-enabled peripheral devices.

34* care homes in the area have been provided with tablets loaded with myKiosk, along with peripheral medical devices











Staff use the myKiosk tablet to record residents' vital signs and help them to answer questions about their health and symptoms using the touch screen. The information is then monitored via Triagemanager, and results which breach the parameters set for that patient raise an alert. This enables Advanced Nurse Practitioners to review the data and make an informed decision regarding next steps in the patient's care.

Results

The Tunstall Triagemanager and myKiosk system is enabling closer monitoring of vulnerable residents; care- home staff have been upskilled and the need for clinical staff attendance has been reduced. It is also helping clinicians to prioritise residents' care, as the system clearly identifies those most in need of interventions.

The success of the programme will be measured over time, with metrics such as reduced ambulance call- outs, resident outcomes and the impact on caseload management.

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The systems give us objective information to support effective clinical decision-making. This remote monitoring approach will help usduring the pandemic, but will also enable us to provide more proactive care over the longer term, improving the wellbeing of residents and helping to reduce the pressure onprimary and secondary care.

Joanne Dorsman Bolton NHS Foundation Trust

* Figure correct as of May 2020









Summary





This winter will be challenging, but there is still time to protect vulnerable patients and your staff with the Tunstall remote patient monitoring and management platform that is trusted around the world to ensure quality care.

Class 1 Medical Device

Tried and trusted platform

with clinical algorithms informed by insights and learnings from over

12 countries and

10,000 users (patients and clinicians)





Workflow consulting, system integration and ongoing support

from our experienced clinical and technical teams



Versatile, scalable and responsive

The Tunstall RPM platform can be deployed rapidly with remote updates quick and easy to implement





Personalised, holistic solutions

monitor overall patient wellbeing rather than a single condition





Funding for CCGs available now

until March 31st 2021 to invest in telehealth











Triagemanager





Contact us for more information

call: **01977 660206**

email: Hello@tunstall.com

or talk to your local account manager







