

Technology Research for Independent Living







## **Convergence of Forces Driving Change in Today's Healthcare System**



## new models of care required

## 6-P's Paradigm....



how healthcare decisions should be made what kind of healthcare decisions should be made

Poon & Zhang (2008)

## **User Centred Delivery of Care**





## **Our Goal**



Technology Research for Independent Living

# **Our Challenge**



Technology Research for Independent Living

# **Global Opportunity**

- Clever technology can help solve two big problems in health care:
  - overspending in the rich world
  - limited access in the poor world.
- Biggest winner is the empowered patient that will result



#### **Economist Special Report**



## How can we make this happen?

- Multiple stakeholder input needed to deliver:
  - Comprehensive understanding of the needs of and issues facing the ageing population
  - Enhanced insight into complex interactions between biopsychosocial variables in determination of capacity for independence
  - Identify critical variables that are appropriate for remote monitoring of healthcare status
  - Identify potential role of technological solutions and design and evaluate new technology enabled care models for promotion of independent living and delivery of healthcare in the home
  - Business case for new models of care that result



### academic

Multisensory Cognition Old Age Psychiatry Medical Gerontology Neuropsychology Ethnography Respiratory Medicine

Interaction Design Biomedical Engineering Neural Engineering Exercise & Muscle Physiology Biomechanics & Rehabilitation Science Nursing & Health Systems

## business

clinical

## EXPERTISE

Technology Research for Independent Living

#### academic

Multisensory Cognition Old Age Psychiatry Medical Gerontology Neuropsychology Ethnography Respiratory Medicine

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## EXPERTISE

clinical



CORE RESEARCH FOCUS AREAS

RESEARCH ENABLING PLATFORMS











#### **TRIL Clinic & Community** Clinic Dataset 10 Cohort Social & Chronic CV & Muscle Falls Perceptual Cognitive Mental Disease Health Prevention Function Function Deployment Health Management ..... & Evaluation Development Ethnography Design **TRIL Technology and Design**



# **TRIL Community**



- TRIL cohort assists with ageing research, and technology design and evaluation.
- Rich biopsychosocial dataset collected from over 600 volunteer participants
- Longitudinal follow up on 400 participants to date

## **TRIL Technology & Design**





SOFTWARE ENGINEERING BIOMEDICAL ENGINEERING INTERACTION AND INDUSTRIAL DESIGN ETHNOGRAPHY INFRASTRUCTURE AND DATABASE MANAGEMENT HUMAN COMPUTER INTERACTION FIRMWARE / HARDWARE DESIGN ENGINEERING

## **User-Centred Design**







## rapid prototyping with scalable & reusable platform

Kinematic Sensing	Physiological Sensing	Ambient Sensing
Accelerometer	ECG	PIR Motion
Gyroscope	EMG	Temperature
Magnetometer	GSR	Vibration
		Light
		UVB



## **Remote Deployment Framework Manager**



# Secure data communication, storage and access infrastructure in place to facilitate deployment programme

- **§** Single console to manage multiple trials simultaneously
- Secure data capture, transport and storage model
- **§** Remote access allows:
  - § Device Management
  - § Real-time trial data

# Home/Community Technology Evaluations

#### Taking research from the Lab to the Home

- STRIL specialises in deployment and evaluation of technologies in an uncontrolled real world environment
- § Purpose
  - Monitoring
  - Evaluation & Assessment
  - Prevention & Intervention
  - Communication
  - Caregiver Support
- § Focus on
  - Usability
  - Clinical Efficacy
  - Robustness

#### To Date.....

- 27 Design Workshops
- 16 Home Trials
- 563 Homes visited
- .5 TB Data Collected









## **Evaluation of Potential for Technology Enabled COPD Management in Home**

#### & St Vincent's University Hospital Clinical Research Centre

**TRIL Centre** 



## COPD

Technology Research for Independent Living

S Respiratory diseases, largely represented by COPD, are the third most common cause of acute hospital admission.

## S Cost of COPD:

- The average cost of COPD per hospital in-patient case is 39% higher than the average case cost.
- 2<sup>nd</sup> most common cause of A&E presentation
- Average Length Of Stay in Ireland (LOS): 7 days
- 30% chance of early readmission post discharge
- Average LOS post readmission: 11 days
- Cost in USA in 2010 estimated at nearly \$50billion(1)

## **§** Increasing prevalence:

 The health burden of COPD will continue to increase in line with population ageing.

COPD increases with age; 50% of those over 70 have the disease

## **Progression of COPD**

- Separate exacerbations requiring expensive hospital admission usually through ER
- Gradual decline in functional independence and reliance on healthcare services
- Solution High incidence of depression and poor quality of life



## **Reducing the impact of COPD**

- Seed to find home based solutions for managing COPD
- Home based care can deliver...
  - Reduced economic cost due to reduced admission rate
  - Enhanced quality of life for patient due to maintaining ability to live at home



Significant opportunity to use technology solutions to deliver efficient care model if all stakeholders can be connected

## Home Based Care for COPD

§ Home based care can operate in different scenarios.....

#### § Effective management of acute exacerbation

 Facilitation of early supported discharge from emergency room instead of admission to acute hospital or from inpatient care

### § Effective long term management

 Facilitating ongoing monitoring of critical clinical variables, compliance with therapy, and home based delivery of ongoing care









Care Innovations Health Guide

care nnovations"

an Intel · GE company

Bianca



**Analyses Performed** 

Data reviewed post hoc for potential indicators of exacerbations

Ethnographic evaluation of process, focussing on usability evaluation from patients and clinical staff

Evaluation of potential impact on future care pathways

# Falls Risk Assessment & Prevention Research

- **§** Falls are a geriatric giant:
  - Significant causes of injury in the elderly
  - Approximately 28-35% of people aged 65+ fall, increasing to 32-42% for 70+
  - Frequency of falls increases with age and frailty level
  - The cost of falls in older adults expected to reach \$54.9 billion by 2020(1)
- § Gait & balance parameters have utility in assessing mobility and balance impairments and can indicate risk of falling
- S However, their use has been limited up to now doe to accessibility issues



1) http://www.cdc.gov/NCIPC/factsheets/fallcost.htm

## **Motion Analysis Platform**

- S Development of wimu based motion analysis applications for falls risk assessment and evaluation
- Strong emphasis on usability for non-specialist clinicians and patients
- S Deployment of platform in cohort for
  - Falls risk assessment using instrumented gait tests
  - Biofeedback during targeted exercise intervention for falls risk reduction







for Independent Living

# validation





- S Validation for measurement of temporal and spatial variables against gold standard systems
  - § Marker based motion capture
  - § Force platform
  - Pressure sensitive walkways





## **Instrumented TUG Test**

- Evaluated against datasets from 349 volunteer participants
- Mean faller identification accuracy >80%
- Serforms better than standard approaches
  - Standard TUG 60.6%
  - Berg Balance Score 61.4%



60

Specificity [%]

80

100

BBS: 0.66 Manual TUG: 0.68

20

40

ROC curves for gyroscope based model compared to TUG and BBS





## **Fall Risk Reduction**





Otago falls prevention exercise programme implemented using biofeedback system





HI Mary, Your doing great. Its a great achievement that you were able hit your target of three exercises this week. Keep it up. Niall. Your Records.







Go back to main menu.

#### Tea Room.

Y



# **Building Bridges**

Leave Broadcast.	Go back to main menu		
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Finniir Boyle Sheelin Durke		Send Message	
	a b c d e f g j k l m n o p	h i	
	ABC S T U V W X	y z	
C 73 sec	Space	Delete	

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	Create a Chat	tint
2	Write a Message	
	Read Messages	t
	JA P	

# Stepping Stones







Welcome back Mr. X. Please attach the sensors and touch in to start.

Step 1. Put on your Stiminers

they 2. Setup your step like this.







ROUSE WAS

Hi Mr. X. Please select the song from the list below.

0

02:41

Congratulations, another session complete.

Availage ## was Utiligen 2004 Dayte Complete U. Secondo Longon

# Summary

- S Multiple stakeholder input required
- § Enabling platforms needed to facilitate convergence of academic, industry and clinical inputs
- Sessive to applied research continuum needs to be addressed
- Subset centred design, development and evaluation is key to delivering user centred care
- Sewards are great if we are successful; converse also true



# **Thank You!**

## § For more information....

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## Telephone Cognitive Assessment

Development of an automated system for remote assessment of cognitive function using analysis of vocalisation, speech markers and mood.





#### **Research Background**

Speech may provide a cost effective, easily implementable means of monitoring and assessing cognitive function

#### **Research Questions**

- Can the status of one's cognitive function be related to acoustic properties of speech?
- What is the protocol for successfully administering clinical cognitive assessments, remotely?

#### **Research Activity**

Ş

Older people participate in various cognitive assessments while at home via the telephone.

An Interactive Voice Response (IVR) system, conducts the assessment automatically.

Analysis of the participants' speech is conducted for correlations to cognitive function.

## Engineering Alertness

Development of a technology platform and training programme to support the improvement of attention alertness and focus in mature adults.





#### Research Background

S Declines in attention can lead to accidents, falls, and other negative consequences for elderly adults. Home based technology supports may provide an effective intervention.

#### **Research Questions**

Can self reported states of attentiveness and alertness be improved through technology supported home based coaching?

#### **Research Activity**

- In home mindfulness/attention training and coaching program
- Prototype Mobile biofeedback system use for biometric data capture and attention feedback











\* Using sensors integrated into a person's clothing, positioned around joints or on the floor, the monitoring system can provide accurate visual and physiological feedback of the person's physical activity and cardiorespiratory fitness during exercise.

\* A visual display shows the exercises to be done by the person with either virtual feedback or real-time feedback from a physiotherapist.



✤ By attaching an earpiece linked to the smartphone on his belt Sean can communicate with his family and friends with ease.

\* Using the same device Sean can respond to helpful reminders from "Shiela" the voice of his interactive monitoring system.







\* For someone at risk of falls, sensor technology can be used to detect an obstacle on the floor.

\* A signal is then sent to the person's Smartphone, which vibrates to warn them before they reach the obstacle.





\*A Smartphone can be integrated into a monitoring system in many ways!

\* Although mainly considered a communication device for calls and email, it can also be used for diet planning, GPS tracking and sleep, exercise and heart rate monitoring.