

# Integrated Commissioning Unit

Jane Warren, ICU

## Review of wheelchair service, Patient, Carer and Stakeholder consultation feedback.

### Background

In June 2013, Portsmouth City Council's Integrated Commissioning Unit, working on behalf of the Clinical Commissioning Group, commenced a review of the wheelchair service which is currently delivered by Solent NHS. The objective of the review was to ascertain the views and experiences of users, carers, children and their parents and supporting organisations to provide ideas and suggestions to improve the new wheelchair service from April 2014.

### Participation

PCC are very grateful for all the contributions to the review. The response to wheelchair questionnaires and face to face consultation with the broader health and social care community meant PCC obtained feedback from over 60 connected stakeholders. This insight into the service has identified areas where the service is performing well along with areas where significant improvement is required. This has been invaluable in re-designing the service to benefit current and future users.

### General Themes

The feedback from the consultation identified a number of key themes where the service failed to meet user's expectation:

- Timely access to the service
- Access to Information and Communication
- Accessibility
- Individual's needs were not always considered

### 'You said'... 'We did'...

#### You said ..... You wanted timely access to the service

The most common dissatisfaction with the service was attributed to delays and waiting times. Feedback expressed unacceptable waiting times from referrals, to assessment, to chair issue, including the issue of specialist seating. Concerns were raised when user's needs changed, particularly with children, where it was felt the service was not responsive. Another recurring theme highlighted that the repair and maintenance service was not sufficient with no out of hours service and the absence of annual checks of wheelchair suitability.

#### We did...

As a result of your feedback there is now a requirement for the provider to have a clear holistic service pathway with defined maximum lead times for referral, assessment and issue of chairs. Where possible, standard stock chairs will be delivered within two working days (on occasions on the same day), with non-stock wheelchairs (excluding specialist) to be delivered

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within 15 working days. An annual planned maintenance service will be provided along with an emergency out of hours service.

### You said you wanted access to Information and Communication

Many users expressed concerns over the availability of clear information about the criteria, referral process and the patient pathway including estimated length of waiting times. Service Users and carers on many occasions said they had to 'chase' the clinic for the progress of their referral and/or chair. Many respondents raised the absence of central point of contact - a case holder/named person who users could liaise with about their wheelchair. It was also felt that the service was fragmented with IT Systems, information / communication not being shared between professionals or with service users.

We did ...

Providers have suggested solutions to integrate working with the wider health and social community - this will include the provision of timely communication and information. Full details of what service users can expect from the service will be communicated upon referral. Service users will be fully informed at each step of the wheelchair pathway for example - average waiting times, details of the assessment process, types of wheelchair available along with dedicated customer service to manage any concerns service user you may experience.

### You said you wanted an accessible service

Accessibility was raised as an issue; the importance for users and carers to have easy access to the service within easy transport links with appropriate facilities. Service users stressed appointments did not always provide sufficient time and an appropriate environment for assessment. It was felt assessments should be more holistic in approach considering other service users needs to avoid repeat assessments including home checks, and that information could be shared amongst professionals to avoid the need for service users to repeat themselves or attend further assessments. Clinics often over ran and this had an impact on rearranging transport or work. Service users also referred to the lack of flexibility of appointments.

We did...

Providers have suggested alternative methods in terms of location such as a mobile assessment service and the use of schools, health centres, community centres, home assessments and GP practices - we are looking at which of these can be practically taken forward to deliver an improved service. Assessment facilities should be sufficient in terms of capacity and equipment for the assessment. Where possible an integrated approach will be adopted where the wheelchair service will engage with other health services to enable a structured, holistic assessment of individuals' requirements for independence, function and clinical needs. For example the relationship with Occupational Therapists, living aids assessment from the equipment store or Adult Social Care Service.

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### You said Individual's needs were not always considered.

Feedback expressed that the wheelchair user's individual needs were not always considered. Sometimes clients felt that they were not listened to or given the opportunity to express their needs in respect of their lifestyle. There was a general feeling that the service was 'equipment and process focused' rather than 'people's needs focused'. Users felt they were not fully involved in choice of their equipment and factors including weight of chair and ability to manoeuvre within the house were not always considered.

We did...

Providers will now have to deliver a 'person centred' approach. The service assessment will encompass both clinical needs and lifestyle requirements. It has been recognised that there is a need for a more tailored approach to the delivery of the service. The key function of the service, to enable individuals to live as independently as possible through the provision of quality equipment, must not be forgotten - as such where the core service does not meet a service user's needs the provider will work with the individual to find a workable solution such as the use of a voucher scheme.

### What next...

The new provider for the service will be announced January 2014 following which service users will be informed of any changes that may affect them. We are excited about the new improved chapter of wheelchair service delivery. We will continue to engage with connected stakeholders to ensure that the service meets expectation going forward.

May I thank all the wheelchair users, parents, carers, support organisation and patient involvement (who have been involved in the selection of the provider) who have participated in this review, without your support we could not improve the wheelchair service.

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