

**Betsi Cadwaladr University LHB  
Response to the Health, Wellbeing and Local Government Committee**

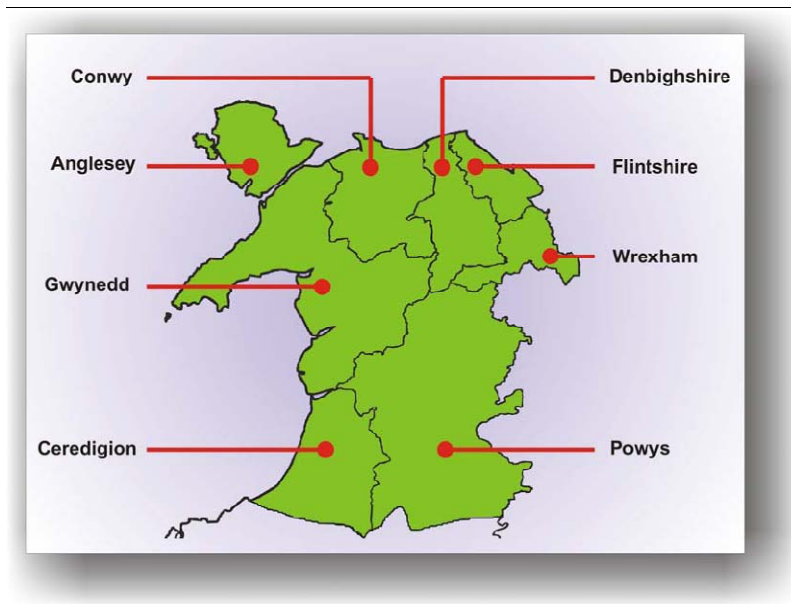
**Wheelchair Services in Wales**

**Call for Evidence for Committee Inquiry**

**Introduction**

The North Wales Artificial Limb and Appliance Service (ALAS) delivered through the Betsi Cadwaladr University LHB is commissioned by Health Commission Wales (HCW) to provide a service to people who have a permanent or long-term impairment. Its main activity is around the provision of standard and complex wheelchairs and the provision of an artificial limb service.

In Wales the only criteria in place for referral to the service is that the individual resides in the Principality and that they have a permanent disability. The North Wales service accepts referrals from a significant geographical catchment area including Wrexham, Flintshire, Conwy, Denbighshire, Gwynedd, Ynys Mon, and the majority of Ceredigion and Powys as set out below.



The main Artificial Limb and Appliance Centre in North Wales is based on the Wrexham Maelor Hospital campus at Wrexham. Services are provided in many other locations across the geographical area including community hospitals, homes, child health centres and schools.

- **Waiting times for Assessment and wheelchair provision**

The majority of referrals to the service, approximately 75%, are assessed as non-complex. This aspect of the service has a service standard that 95% of these referrals should be delivered within 21 days, although the average referral to delivery for this service is 10 days. In North Wales performance against this service standard was 87% in November 2009. This is largely an administrative process with the wheelchair being issued by the Approved Repairer (SERCO).

The remaining demand on the service is considered complex in nature by the requirement for a specialist clinical/technical assessment by appropriately trained staff to provide for a prescription to meet individual need. Referrals are a combination of new clients and re-referrals. It is this aspect of service demand that is placed upon a waiting list. These clients are likely to need life-long support which, in turn means that every new referral adds to the total client population that is being supported. Complex wheelchair users are rarely static with the requirement for periodic reassessment and re-prescribing of equipment according to individual need.

North Wales has had significant waiting times for complex referrals for many years, partly due to recruitment and retention of specialist staff and increasing demand. To address the situation Health Commission Wales made a non recurring sum of £525,000 available in 2007 for a waiting list initiative. Following the recruitment of staff to undertake this work the waiting list reduced from the longest waiter of 48 months in February 2008 to 15 months by February 2009. Unfortunately attempts by North Wales ALAS to secure recurrent revenue to sustain these improvements have not been successful although a further non recurring £85,000 was made available in 2009 to further reduce paediatric waiters.

Currently the service longest waiter is 22 months although average waits for complex assessment are around 15 months. There is no differential between adult and child waiting time targets although HCW stated their intention to review this during 2009.

The clinical/technical assessment may need to be undertaken by a therapist or a clinical scientist or a medical technical officer or a combination of all three. All referrals are managed through a single point of referral to ensure joined up working between the ALAS wheelchair service and the Rehabilitation Engineering specialist seating service.

Waiting times between assessment and provision are linked to the complexity of the provision and the availability of the equipment. Delivery is usually within 6–8 weeks although this can vary significantly. Wales provides the service users with a large range of equipment. Whilst this is a positive factor in offering choice to service users, it can have a negative impact on waiting times for delivery as the range has to be sourced from the international manufacturing base.

BUCHB recognises that the waiting times for service users are unacceptable and for this we apologise. It is our firm intention to focus on this provision over the next 12 months to bring about a more focused patient centred service and steps have been put in place to achieve this.

- **The arrangements for commissioning and providing wheelchairs through the Artificial Limb and Appliance Service and through local arrangements for short term use and the possibilities for developing new arrangements within the new NHS structures**

The provision of short term loan wheelchairs are not within the remit of ALAS and in North Wales are predominantly provided through the Red Cross Loan service.

ALAS provides posture and mobility assessment and provision for individuals with long term requirements (defined as 6 months or longer, or less than 6 months for those with palliative conditions).

In North Wales the service is currently commissioned by HCW and delivered by Betsi Cadwaladr University LHB. Health Commission Wales have a commissioning policy document available for assistive technologies under which, amongst other services, it classifies the provision of posture and mobility services. This is provided as an attachment to this document. There is no current commissioning strategy for the service. The Rehabilitation Services are responsible for the provision of specialised seating.

BCU believes that this service should be part of the core activity of the Health Board as this removes the uncertainty of responsibility and enables a more patient centred approach that can respond to the needs of the service users.

In addition other services linked to the provision are already part of core services such as Rehabilitation Engineering and the need to move this service closer to the patient group and community will involve devolving some of the activities currently undertaken by ALAS into local Therapeutic Services. This is easier to achieve within the LHB.

- **The effectiveness of wheelchair services in meeting individual needs, such as those of children and young people, adults in employment, war veterans and those with progressive conditions such as multiple sclerosis.**

The range of equipment available through contracting arrangements with manufacturers is extremely broad and across the four home nations, Wales provides its NHS service users with the largest range of equipment.

This broad range of equipment allows for the individual need to be catered for within the parameters of the service remit which is to principally meet "health

needs". Where need cannot be met from within the contract range, the service is able to purchase equipment outside of this range under out of range contracting agreements. Having this range, although increasing the complexity of assessment and provision, has meant the service has a wider range of options to meet increasingly complex needs of clients.

North Wales ALAS undertook a review of its external communication with both referrers and clients during 2009. A Project Board is currently overseeing the implementation of a range of recommendations to improve customer service with both these stakeholder groups and includes greater use of the website to improve transparency in service delivery and waiting times, acknowledgement of referral status at initial referral and at periodic intervals whilst on the waiting list and more accessible service information to improve individual expectation before, during and after service contact.

North Wales ALAS categorises referrals as urgent and routine:

**Urgent** cases are generally individuals who have severe clinical difficulties that demand complex mobility solutions and who are living alone, or who have carers who also have clinical problems. Alternatively, individuals are imminent risk of severe injury if they continue to use their current equipment.

**Exceptions:** *Those individuals with rapidly deteriorating conditions e.g. primary, progressive multiple sclerosis or motor neurone disease are prioritised as very urgent and will be seen as quickly as possible. Palliative care cases are screened and/or assessed as quickly as possible. Any person awaiting discharge from hospital who requires wheelchair assessment and provision for discharge is seen immediately*

**Routine** cases are those who have assistance in daily tasks or for whom a powered wheelchair is not required for essential daily activities. Generally includes those clients who already have a wheelchair which they are still managing to use. Routine cases will include people with very complex needs and/or who do have a deteriorating condition, but these are not immediately life-limiting and the individual is not at risk of severe injury.,

**Note:** *If a client's medical condition or their circumstances change then their priority can be reviewed and they may be re-prioritised. Their date of original referral is retained so that they are not disadvantaged and they will be slotted into the list at the appropriate point. This is one reason why a persons place on the list can alter.*

Provision for nursing homes is further defined through specific guidelines which are found within the commissioning policy document.

For War veterans ALAS follows the Welsh Health Circular (2003)65 and war veterans are always treated as urgent cases.

North Wales ALAS has been proactive in developing client pathways for groups with specific needs. Collaboration with the Motor Neurone Disease Society has improved communication across the extended Multi Disciplinary Team for the clients. Joint working with charities (e.g. WhizzKids, Caudwell Children) is established and there have been successful collaborations with health and education agencies to joint fund equipment to meet need across a wider remit than ALAS normally supplies.

Working relationships are established with employment agencies, and client requirements to meet posture & mobility needs in the work place are considered within the assessment.

Assessments are carried out in a wide variety of settings, clinics, home, education establishments, workplace, specialist centres, residential & nursing care provision & local communities. This flexibility allows for individual need and choice to be maximised. All clients are treated equitable with regard to access to the service irrespective of their geographical location.

- **The arrangements for reviewing individual need and for the updating, maintenance and repair of wheelchairs**

Review:

Within the current financial envelope provided to the service it is not possible to offer routine reviews for every client. However clinicians will make provision for review where a clinical need is identified. Equally all clients and their carers and linked professionals are always encouraged to refer to the service when they feel that their needs have changed. The Rehabilitation Engineering Unit will call clients for review where engineering changes to the equipment require regular monitoring.

Updating:

The range of wheelchairs provided through the service is continually reviewed and the service engages with manufacturers and others in the research and development process. A contract is held with manufacturers to supply wheelchairs to the service and this is tendered through the OJEU process. The current contract is for 3 years with a potential further 2 years extension. This allows the service to review the current market and identify a wide range of wheelchairs which can be used within its current remit.

The service participates regularly in product update training sessions and attends national and international events, e.g. European Seating Symposium, to ensure that provision and clinical skills remain current.

Maintenance and Repair Service:

The maintenance and repair of wheelchairs issued by ALAS is a sub-contracted service, the contract having been negotiated by the Cardiff and

Vale NHS Trust as the lead organisation. The contractor is responsible for the delivery of all standard wheelchair equipment within 21 days as well as providing a 24 hour, 7 day a week repair service. Service users contact the contractor directly when they have mechanical problems with their chair. The contractor also provides a six monthly routine check on all powered wheelchairs. The company SERCO currently provides the service.

A range of performance indicators are contained within the service specification but key components include the requirement for the Contractor to respond to an order/request within 3 working days of receipt of a request directly from the client or an order from the Health Board. If a repair task is considered to be a priority call, this must be actioned within 24 hours. In addition the Contractor maintains an out of core hours telephone service and contacts Clients within one hour of the Client making such a contact.

The contractor is also responsible for the collection of equipment when clients no longer require it. The contractor must decontaminate the equipment before it is reconditioned and re-issued.

The contract specification is to repair and maintain wheelchairs. Some attachments to wheelchairs will be repaired/replaced by ALAS technical staff e.g. harnesses. This work is carried out alongside assessment, fitting, delivery, and review of equipment.

- **Equality considerations in the provision of wheelchair services including, for example, geographical variation, provision across age groups, issues affecting BME groups and Welsh speakers, and the accessibility of wheelchair services in terms of location, opening times and location**

The North Wales ALAS uses a variety of approaches to ensure it offers a fair and equitable service across a large geographical area:

- Waiting lists are held and managed in line with national best practise guidelines based on clinical need and chronology. The service does not disadvantage any user by geography; all referrals are dealt with by clinical priority and chronology of referral.
- Although routine cases are seen in chronological order in order to use resources as efficiently as possible, and within reasonable parameters, whenever possible staff visiting a specific location will see clients in that area who may not be in chronological order.
- North Wales ALAS operates as a 'hub and spoke' model and thus clinics are held in a variety of locations to reduce the need for clients to travel to the Wrexham base.
- Clinics can be set up on an ad hoc basis to respond to local need (depending on suitability of clinic accommodation). The service also visits schools and residential accommodation as required.

- Home visits are undertaken where clients are unable to leave their homes, or where environmental factors are crucial in the assessment/provision process. Visits and times are always agreed flexibly with the client/carers.
  - The clinical team is split into two teams – paediatric and adult with team members developing their specialist expertise within these groups. This supports the lifelong learning process and allows development of close working practices between other age specific referring groups.
  - Clinical staff work flexible hours that support covering the area required and to try and meet individual client need.
  - Written information is produced bilingually, although it has not been possible as yet to develop a bilingual facility on the website and we will be working towards a fully bilingual website.
  - A database is kept of Welsh speaking staff and the service has staff available as translators where required.
  - The service accesses local interpreters for other ethnic groups (e.g. Portuguese and Polish speakers) and has access to Language line if required.
  - The Approved repairer operates Monday to Friday, but has an emergency repair service up to 11pm at night and over weekends.
  - The concept of ‘gatekeeper’ therapists has been established and is continuing to be developed across the area. These therapists are frequent referrers to the service and training for the role enables them to refer and prescribe a wider range of equipment than other therapists. They maintain their knowledge through regular contact and product update training and work in close collaboration with ALAS clinicians. This enables the ALAS therapists to concentrate on the very complex cases.
  - The service is fully aware of and strives to meet its requirement under the Betsi Cadwaladr University LHB Single Equality and Human Rights scheme.
- **The use and effectiveness of performance and quality indicators in wheelchair services**

The benefits experienced by service users in other specialties with mandated access targets have not been felt for posture and mobility services in Wales. However the overall awareness of the public in Wales to improved waiting times for NHS services has meant that the posture and mobility service has faced the raised expectations that this brings.

The lack of formally agreed service standards or key performance indicators for the provision of wheelchair services has meant that the performance management focus on the service is not as clear as for other specialties where waiting times are a key service driver. Health Commission Wales do receive monthly performance reports from the service but they are not linked into any current formal performance framework. These reports include information on indicators such as:

- Waiting times (adult and paediatric, further split into powered, manual and rehabilitation lists) from referral to assessment
- Assessment to delivery times
- % of standard wheelchairs delivered within 21 days
- Repair and maintenance by the contractor

Access targets to the service do not form part of any National Annual Operating Framework requirement.

The specified access targets for children and young people contained within the Children, Young People and Maternity Services in Wales NSF section 5.17 have not been made a priority flagged area since their publication in 2004.

Locally in North Wales the service also monitors a range of indicators which have enabled significantly increased efficiencies in the collection and refurbishment of wheelchairs and the ordering of stock wheelchairs.

New indicators such as 'length of episode of care' are being developed to enable the service to identify bottlenecks in the supply chain and improve processes.

- **The resourcing of wheelchair services in Wales**

HCW is currently responsible for allocation of resource to the services. This will continue until the April 2010. HCW have not identified posture and mobility services as a priority commissioning area in its annual operating plan.

The service in North Wales has had a waiting list for assessment for complex wheelchairs for several years due to previous recruitment difficulties and increasing demand.

Non recurring funding was allocated to the service in 2008 to address waiting lists. The Betsi Cadwaladr University LHB (and its predecessor North Wales NHS Trust) has supported the service by providing additional money from its own resource allocation.

The service, in order to manage within its constraints in the face of increasing demand, has undertaken a number of internal reviews and adopted several efficiency measures. Betsi Cadwaladr University LHB currently has a dedicated turnaround team in place which is reviewing the model of service delivery and the waiting times in order to improve the situation. Its progress is reported to the Board of Directors monthly.