

# Harrogate and District

NHS Foundation Trust

## WHEELCHAIR SERVICES

### Response to Healthwatch York report June 2015

#### Overview:

Both the Wheelchair service provided by Harrogate and District NHS Foundation Trust (HDFT) and the repair service that is sub contracted to Ross Care welcome the work undertaken by Healthwatch York and the opportunity to comment on the report that has been produced.

Both the wheelchair service and Ross Care are committed to working together to ensuring a high standard of Service and addressing issues identified by the users.

Wheelchair provision has been somewhat a “Cinderella service” within the NHS and the HDFT Service welcomes the increasing national profile of wheelchair Services and users.

The changing structure of commissioning of services from PCTs to CCG’s along with uncertainty over the commissioning responsibilities for “Specialist” wheelchairs –should this be local or national? Has not assisted development of specifications and services in the past, but the climate for discussions with CCG now appears to be much better that at any time in the past with previous commissioning arrangements. There have been discussions over wheelchair services and the development of the service specification both with HaRD CCG as lead commissioner for Wheelchairs across North Yorkshire and with VoY CCG for their own locally.

#### Comments on report.

We appreciate that the wheelchair users that contributed to this piece of work have genuine concerns over the provision of service, it was essential to the work of Healthwatch that these individuals contributed to it in an anonymous way, however the service would like to start our response by saying that if there are specific concerns over provision or repairs that we would like to know about these and are more than happy to meet with individuals to resolve any issues.

While this report focused on York Wheelchair Service, it should be stated that the service provided by HDFT is a North Yorkshire wide service provided from 4 centres across the county. With services such as wheelchairs that are relatively small in numbers of staff compared with many other areas of Health there are advantages in this set up as it enables learning and peer support between the staff, some economies of scale and better business continuity in the case of staff illness or other potential disruption in service. In addition there is some provision for Vale of York CCG patients to receive their wheelchair service from one of the other centres, for example in Ryedale Practices they may have provision from the Scarborough centre.

From the comments made there was a feeling that there was more representation at these meetings from parents with Children using wheelchairs than older people, this may be incorrect, but it may be useful to clarify this as it will assist in looking at areas of most concern.

In reading the report there are many areas where the service agrees with the comments, but there are others that the service feels are misperceptions or generalisations drawn from the comments of a small percentage of users.

In order to give a response the service has grouped our comments into some board areas.

### **Communications**

We are pleased with the positive comments about individual staff, and always work hard to engage with users over the options available for their NHS provision. However both the Wheelchair service and the repair service are always striving to communicate better with users.

There was concern expressed about communication between the Wheelchair Service and Repair service, it should be clarified that both services have access to the same computerised system (BEST) and that referrals, orders, specifications, repair issues are shared by this system. In addition messages between the Wheelchair centre and repair service are communicated via this system, in addition regular communication by phone around individual users.

The service is keen to receive feedback and has done various surveys over the years, in 2014 it piloted using the "Friends and Family" format, taking a random sample of users each quarter and asking for feedback,

while the sample is still relatively small the results from the last year are as follows.

We asked: How likely are you to recommend our service to friends or family if they needed similar care?

	Extremely Likely	Likely	Neither	Unlikely	Extremely Unlikely	Don't Know
Jan 2014	12	3	0	0	0	1
April 2014	3	3	2	0	0	
July 2014	9	0	0	0	0	1
Oct 2014	8	2	0	0	0	
<b>Total 2014</b>	<b>32</b>	<b>8</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>2</b>

As can be seen from above majority responded in a positive way with nobody saying unlikely or extremely unlikely.

In addition at the last review meetings with Ross Care we decided that we needed to have better feedback specifically on the repair service. The proposal therefore is for a customer survey card to be given out for each repair conducted in the period July/August to November in the North Yorkshire area. A key part of the survey is the final question - Is there anything we could do to make our service better? Please tell us!

The principle of this has been agreed in the Contract Review meeting with Ross Care, the format will be maintained to enable us to compare results on a like for like basis on previous surveys done in Scarborough, Harrogate and Hambleton. This is also the format that has been agreed with all other wheelchair centres. The Service is more than happy to share this information with Healthwatch York when completed.

In the work undertaken with Healthwatch York there was no mention of HDFT web site and the lack of information on this about wheelchair services, we feel that we should point out that this is an area that we have identified as a weakness and as a Trust are in the process of developing a more modern web site with much more detailed information on individual services, sending newsletters out by post to all users would

be difficult and expensive but putting better information on our web site could be accessed by many more individuals.

In addition this will give the opportunity to users to give feedback via electronic means, clearly this will need to be promoted the current survey monkey questionnaire on our current web site has had very few responses to date.

On an individual basis staff always aim to discuss with users the options that are available to them as users and engage with them over any choices that need to be made.

The wheelchair service and repair service has looked at ways of developing a service user group, this would need to represent the views of all types of users across North Yorkshire, as such because of the geography it was felt that a virtual groups would be better with communication and consultation via e-mail, while this is in early stages of development the service would welcome more users to join this as it can assist in helping design, deliver and review services.

Ross believe it would be helpful to all concerned if a fuller view than simply that of a straw poll could be obtained of the repair service.

### **Repairs**

Prior to October 2013 the repair service in York was provided in House and to the rest of the North Yorkshire Service by a sub contracted service. The contract for the service for the rest of North Yorkshire was due for renewal as such HDFT felt it logical to ensure equity of provision and went out to Tender for the whole service.

While it has been reported that at least one of the 10 people who took part in this review, used the drop in service at York Wheelchair centre, this was usually by prior arrangements i.e. "I have a problem can I bring my wheelchair down?" and was rarely used, the facility for this was continued after the new service started, with engineers at York wheelchair centre at specific times of the week but was stopped after a couple of months as there were no requests in the period for users to drop in.

In going out to tender the aim was to produce an improved service with increased opening hours for repairs of 8.30 to 17.30 Monday to Friday and Emergency out of hour's service 7.00 to 23.00 365 days a year.

The in house service only operated Monday to Friday, with no service weekends or bank holidays. As such a breakdown after 5PM on the Friday before a bank Holiday would previously not been dealt with until the following Tuesday.

For information the out of hour's emergency service has been accessed 73 times since October 2013

In addition while the individual engineers in York were very accommodating the service was vulnerable to peaks and troughs of demand and cover for annual leave etc. was difficult. Utilising the Ross Service centre in Leeds allows access to over 25 team members, this increased capacity allows for the running of the 'Out of Hours' service and the maintenance of the high level of service year round with the ability to respond to holidays, sickness and any activity peaks.

Feed back to the service, indicated that as a general rule, users preferred the repair service to come to them, than to have to bring wheelchair into the centre. To clarify repairs are carried out at users home or if more convenient at their place of work or in the case of children in School. However if a user requested that they brought there wheelchair into the York centre this can still be accommodated.

The speed of responses is all detailed within the specification. Repairs require a 2 day response for attending and completing a repair. An appointment will be agreed with the Service User on an AM/PM basis. The tender specified a 95% level of performance Ross Care as part of their tender submission added value by increasing the required level of performance from 95% to 97%, this highlighted their commitment to exceeding expectations and delivering continuous improvement. The performance for repairs over the last year is 99.4%. We also respond to emergency repairs where Ross Care contact the Service User within 1 hour and then again attend or complete within 1 working day.

As a summary the contract performance for York for Jan 15 to March 15 sits at 99.4%, this is a slight increase on the previous 3 months (99.3%). This high level of performance is consistent over the other 3 areas where the last 3 months performance has been Scarborough 100%, Harrogate 98.9% and Hambleton 100%.

Where possible repairs are carried out on the first visit, referred to as First time fix (FTF) but on occasions the engineer needs to return or the chair needs to be taken away back to a work shop to be repaired.

First Time fix performance for York for the 3 months up to 31.3.15 was 90.1% - just over the Ross Care target of 90%.

This compared to Scarborough 90.8%, Harrogate 92.5% and Hambleton 90.2%. The service is reassured by this consistent high level of performance from Ross Care over the 4 areas.

Ross Care work within the spirit of the specification so for all jobs the culture is to plan a visit as soon as possibly convenient for the Service User – this means, in reality for most jobs, the visit is completed well within the time detailed in the specification. Although an AM/PM time slot is detailed Ross Care work to give all Service Users the most convenient time – our Engineers call prior to visit to confirm timings and also call if there has been a delay with a job that then may knock on to arrival times for future jobs.

### **Concern was expressed about availability of spares**

Ross Care vans carry comprehensive spare parts stock – this is replenished on a daily basis from stores. This list reflects the requirement in the specification as a minimum and is added to if required.

Ross Care as a business holds 6000 separate lines – this adds up to 190,983 items and a value of nearly £800,000. In Leeds alone these figures are 2,125 lines, 44,672 items with a value of £151,157. Ross Care believe one vital component to delivering first time fixes to a high level is to invest in stock. This is an on-going process and improvements are made by analysing FTF reports and liaising with service RE's to ensure we buy in parts for new chairs or parts that are becoming more frequently required.

Ross Care purchased agreed stock from the York repair service on the commencement of the contract – the value of this was £26,505. There was some slight reduction in the spare parts held prior to transfer, but Ross Care are holding significantly more spares now than previously was available to York in House Service.

However it is not possible to hold all spares for all chairs, in particular as there are many variations even with in one model from one manufacturer, as such there will be occasions when a part is not available or where the part taken to the repair does not fit, but where this does occur, with any delay in repairs due to parts being ordered Ross

will communicate with the service user to ensure they are updated with waiting time for parts or any future unexpected delays.

### **MOT or annual checks**

Planned Preventative Maintenance (PPM's) are carried on power chairs within the contractual time.

These are a safety check but if repair work is identified then the Engineers will either complete using van stocks or a repair work order will be generated to ensure parts are sourced and the repair completed in a timely manner. This a basic requirement for all engineers across all Ross Care contracts.

With self-propelled chairs there is currently no annual check, if anything does go wrong with a chair it need to be repaired at the time and there is little that would be picked up at an annual, this is in line with National Practice. In addition any changed to an individual's needs should be addressed at the time these occur, as such apart from PPM & safety checks on powered chairs the need for a review is left with the user to implement.

The service could provide an annual check of user needs and any repairs but this would require considerable additional resources and would need to be part of the commissioned service.

### **Delays in Provision**

The service prioritises referrals both on the needs of the individual and if they already have a chair.

On occasions, in particular where the requirements of an individual are complex, it may take a number of assessments or visits to assess need and decide on best options for both chair and seating provision.

It is correct that there can be delays this is mainly due to the availability of funding and the requirement to work to budget. The service would welcome the opportunity to discuss with commissioners this and other service specification issues.

Once the chair has been ordered and delivered from the manufacturer. The specification requires Ross Care to deliver 95% of chairs within 5 working days. The performance on deliveries of new chairs sits at 98.7% for the past 12 months.

## **General issues about provision**

There are a number of comments about range of equipment, availability of new developments, availability of powered wheelchairs to more users etc.

There was a feeling in the report that the wheelchair staff are not up to date with latest developments in the wheelchair provision, and that users need to research what is available themselves.

The technical development of wheelchairs has accelerated in recent years, but not all of this is available on the NHS, the staff are aware of what is available, but can only advise and give individuals choices if it is not available free.

The service has already been in communication with the commissioners about the range of equipment available and believes that there needs to be some detailed work to specify what should be available on the NHS and what is down to personal choice.

The demands on service have increased significantly and as well as the concerns that have been raised by the individuals participating with Healthwatch York review there are a number of other areas of high demand that have not been mentioned for example provision of bariatric chairs and tilting powered chairs that the service has highlighted as areas of increasing demand along with the specialist seating, easy motion wheels, powered wheelchairs for increased range of users and specialised buggy's for children.

## **In conclusion**

The wheelchair service and Ross Care, welcomes the comments contained in this report

Where there are specific issues around specific users the service would suggest that they contact us so these can be investigated and resolved.

With reference to the Friends and Family question The service feels that there is a significant difference between the response of the 10 or so users that responded to Healthwatch and while not a huge number, the 44 who responded to the service against a similar question.

The use of this with in the service was piloted in 2014 and it is suggested that this is continued and expanded to get a larger sample of users across all sites.



Likewise the service has already got a planned review of users experience with the repair service this year.

As reported there have already been discussions with the CCG about the specification of the service and this report gives some good information to feed into that process, around the range of wheelchairs and equipment available, the choices to individuals and the needs of users.

Finally there are a number of comments around the difficulties users have in accessing various buildings and services in York and both the restrictions that being a wheelchair user brings but also that having a wheelchair enables an individual with a disability to access much more than they would be able to without such a provision, as such there are other messages and learning in this report that may be of value to share with other providers of service such as council.

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