## **Health and Social Care Committee**

HSC(4)-09-12 paper 2

One-day inquiry on wheelchair services in Wales - Evidence from North Wales Artificial Limb and Appliances Service

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Written evidence for the Health and Social Care Committee One Day Inquiry on Wheelchair Services in Wales March 2012

#### Introduction

In response to the recommendations of the 2010 Health, Wellbeing and Local Government Committee Report on Wheelchair services a considerable amount of work has been undertaken and is ongoing to achieve the outcomes required. This evidence report will aim to summarise the efforts, achievements and work in progress and will not repeat any evidence provided for the initial inquiry.

### **All Wales Working**

Several workstreams have been established on an All Wales level to progress and monitor compliance with the recommendations. The North Wales service has been actively involved in these workstreams, which have been facilitated via NLIAH and DSU, with performance monitored via the Partnership Board. These activities have been carried out in conjunction with service users and representatives as well as a broad range of clinical referrers and have been monitored using a 45 day cycle method. Joint working is outlined in the table below showing the activity adopted in North Wales and mapped to the recommendations.

Workstream Activity	Recommendatio
	n
Waiting List Management	
<ul> <li>Adopted RTT rules</li> </ul>	6
<ul> <li>Targeting of long waiters</li> </ul>	
<ul> <li>Software developed to manage RTT pathway</li> </ul>	
<ul> <li>Staff trained in RTT rules and software</li> </ul>	
<ul> <li>Reduction of lists</li> </ul>	
<ul> <li>Direct booking of appointments – client choice</li> </ul>	8
Validation of lists and data	
<ul> <li>NLIAH and DSU have been supporting services</li> </ul>	
to ensure waiting times are measured in line	6
with RTT. DSU is conducting audits to ensure	
these are in place.	
Capacity & Demand	
<ul> <li>Roll out project planned to start in April 2012</li> </ul>	

This is expected to help us understand the	11
future resource requirement for the service	
Service User Engagement	8
<ul> <li>3 year project funded by Welsh Government</li> </ul>	
<ul> <li>Services have been involved in working groups</li> </ul>	
with service users to develop communication	
strategy	
<ul> <li>User consultation progressing to capture</li> </ul>	
users' views and the project will target	
continuous improvement in service user	
engagement	
<ul> <li>Ongoing work will establish a platform for the</li> </ul>	
service to involve users in future planning	
Referrals	
<ul> <li>Streamlined procedures for handling referrals</li> </ul>	
<ul> <li>New All Wales referral form being developed</li> </ul>	13
Working towards electronic referral	
<ul> <li>Training of referrers</li> </ul>	
Training	
<ul> <li>Some Level 3 training has been carried out but</li> </ul>	14
this is on hold as the focus shifts to training	
the referrers. There is a need to review the	
benefits of level 3 training in the community	
due to requirements for keeping up to date	
<ul> <li>Training for referrers is delivered across Wales</li> </ul>	3
<ul> <li>A tender is being drafted by NLIAH to provide</li> </ul>	
training for users across Wales	23
Service Specification	
<ul> <li>Contributing to the development of an All</li> </ul>	1
Wales service specification	
<ul> <li>Performance indicators have been developed</li> </ul>	
and monitored	
<ul> <li>Working on development of decision making</li> </ul>	8
matrix for clarity of provision	
Partnership Board	1, 2, 4, 5
<ul> <li>Joint working with a range of organisations</li> </ul>	
and individuals on the Partnership Board	
<ul> <li>High level of commitment from the service</li> </ul>	
and Health Board with active participation	
from Chief of Staff, Clinical Director and	
Assistant Director of Therapies & Health	
Sciences	
<ul> <li>Performance targets and monitoring at</li> </ul>	
quarterly meetings	
<ul> <li>Quality indicators have been agreed and</li> </ul>	
reported to Partnership Board	
Contracts	
<ul> <li>Joint working between services and service</li> </ul>	21

	users to procure recent wheelchair contract	
•	Joint working established for current cushion	
	contract	

## **North Wales Posture & Mobility Service**

The North Wales service has been working hard to make improvements in line with the recommendations. In addition to targeting waiting times for children, effort has been focussed on establishing the foundations for improvement (in terms of structure and process) and we expect to realise further benefits over the next 12 months. The following table outlines some additional examples of ongoing work and achievements in North Wales; they are mapped to the recommendations for evidence of progress.

Activity	Recommendation
Significant progress with NSF Referral to assessment	7
time of 6 weeks for children achieved. Delivery to	
fitting time of 8 weeks forecast to be achieved by	
end of March	
Implementation of software to allow management of	7
pathways to RTT rules	
Process mapping of referral and admin pathways	Continuous
undertaken to streamline services and increase	Improvement
capacity (further process mapping planned in March 2012)	
Organisational restructuring by bringing REU and	4
ALAS into a single Posture & Mobility directorate led	
by a Clinical Director appointed in Oct 2011 with	
clear lines of responsibility via the Chief of Staff to	
the Executive Director of Therapies & Health Science	
Working with community therapy services to	3, 12
improve integration via regular meetings, rotational	
posts, secondment opportunities, training,	
supervision	
Developing detailed operating instructions and	Continuous
criteria	Improvement
Developing user links e.g. Disability Sports Wales,	8
MS Users Forum	
Improved communication with Approved Repairer	
service, monitoring of performance and improving service delivery	
Service delivery     Service provided for fast delivery of loan chair	10
if repairs cannot be done immediately	10
Higher stock levels of parts to avoid delays	10
<ul> <li>Quarterly review meetings held and monthly</li> </ul>	20
reports received monitoring performance	
Customer survey planned for April – Jun 2012	21
<ul> <li>Retendering process currently underway</li> </ul>	
- Retendening process currently underway	

involving service users and including	
specifications to improve delivery of service	
Joint clinics established between Rehab Engineering	3
and Wheelchair therapists	
Daily duty therapist in place to deal with referrals	9
and queries to reduce delays and improve	
communication	
Additional clinic sites established	3
97% of standard chairs are delivered within 21 days	Continuous
(target 95%)	Improvement
Maximum referral to assessment time for adults has	Continuous
reduced from 23 months to 15 months and is	Improvement
forecast to be 12 months by end of March	•
Referral to assessment time for powered wheelchairs	Continuous
has reduced from 12 months to 8 months and work	Improvement
is ongoing to ensure further reduction in waiting	-
times	
Information pack for clients on the website	8
Communication with Whizz Kidz and meeting	12
planned to discuss working better together e.g. on	15
joint funding and training for children	
Reorganisation of admin systems are in progress to	Continuous
streamline the processes and provide better	Improvement
communication with clients	8
All existing clients can be re-referred into the	22
service, children will be seen within 6 weeks whether	
new or re-referral	
Assistance provided from CPG Performance team	Continuous
showing evidence of commitment from Health Board	Improvement
to service redesign and improvement	

# **Future Progress Required**

It is recognised that we are continuously improving the service and we have focussed our attention on some priority areas initially. The following table outlines areas of the recommendations and general improvement still required.

Activity	Recommendation
Additional funding was provided in 2011 for the	11
paediatric service; however, further resources are	
required to sustain and progress improvements in	
adult services. Historically waiting times have been	
longer in North Wales and recurrent funding is	
required to bring these down to acceptable levels for	
adults.	
Further exploring of options for joint funding in	17
relation to equipment for service users	
Further consideration regarding regular reviews for	22
existing service users, in particular for children and	

those with changing conditions	
Work needs to be done to establish and monitor	5
meaningful outcome measures	
Further streamlining of processes and patient	Continuous
pathways	Improvement
Ongoing development of IT solutions to support	Continuous
improvements and changes	Improvement
Ongoing work on communications via the user	8,9
engagement workstream and between the service	
and all stakeholders	

# Summary

The overall picture is one of significant progress and achievement; the NSF access targets for children are being achieved and with further resources a similar improvement can be achieved for adult services. There is now a culture of continuous improvement within the service; the foundations have been set to achieve further improvements with the client at the centre of service provision and design. We are proud of the achievements to date and are looking forward to progressing at pace over the next 12 months.