# GOVERNING BODY

<table>
<thead>
<tr>
<th>Agenda Item No.</th>
<th>08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference No.</td>
<td>IESCCG 19-40</td>
</tr>
<tr>
<td>Date</td>
<td>23 July 2019</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Title</th>
<th>Adult and Children’s Community Wheelchair Services – Overview of Service and Performance Review</th>
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<tbody>
<tr>
<td>Lead Chief Officer</td>
<td>Jane Webster, Acting Chief Contracts Officer</td>
</tr>
<tr>
<td>Author(s)</td>
<td>Amy Osborne, Contracts Manager</td>
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<tr>
<td>Purpose</td>
<td>To provide an overview of the Adult and Children’s Community Wheelchair Services – Overview of service changes and performance review</td>
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### Applicable CCG Clinical Priorities:

1. To promote self care | ✓
2. To ensure high quality local services where possible | ✓
3. To improve the health of those most in need | ✓
4. To improve health & educational attainment for children and young people | ✓
5. To improve access to mental health services | ✓
6. To improve outcomes for patients with diabetes to above national averages | ✓
7. To improve care for frail elderly individuals | ✓
8. To allow patients to die with dignity and compassion and to choose their place of death where appropriate | ✓
9. To ensure that the CCG operates within agreed budgets | ✓

### Action required by Governing Body:

For information and update.
1. **Background**

1.1 Ipswich and East Suffolk Clinical Commissioning Group and West Suffolk Clinical Commissioning Group commission a Community Wheelchair service for adults and children in Suffolk. The service is managed as part of the Community Contract with West Suffolk NHS Foundation Trust (WSFT) as the lead Provider. The service consists of two elements:
   - Referrals, assessments and complex handovers are provided by Community Services
   - ‘Approved Repairer’ element provided by Ross Care (since 1st October 2018) and Medequip for standard handovers, modifications, maintenance and repair.

1.2 WSFT undertook a review of the Wheelchair service in 2017 at which time it was decided to bring the assess, refer and handover element of the service into Community Services and to tender for the Approved Repairer element. At the time, both elements were contracted on a block basis with Bartram’s.

1.3 At the beginning of 2018, WSFT undertook a procurement exercise and Ross Care were successful with the contract beginning from October 2018.

1.4 Unfortunately, prior to October 2018, Bartram’s went into administration and Medequip (Provider of the Equipment Service within the Community Services Contract) stepped in to provide support until the new contract with Ross Care commenced.

1.5 From 1 October 2018, Ross Care have provided the repair service from Ransomes Europark, Ipswich. There are 2 units, one with core stock for the Approved Repairer service held by Ross Care and one for Community Equipment Service stock (the wheelchairs) held by Medequip. Core stock was previously held at Ely and the move has meant that core stock ranges are available to service users sooner which has made a positive impact on the performance of the service.

2. **Children’s Wheelchair Service Updates and Performance**

2.1 As of 1 April 2018, NHS England introduced a national requirement for 100% of Children’s Wheelchairs to be provided to service users within 18 weeks of referral. Significant work was undertaken by the Wheelchair service to ensure that this target was met and children were receiving their wheelchairs within required timescales.

2.2 As of 1 April 2019, NHS England reduced the threshold for Children’s Wheelchairs to be provided to service users within 18 weeks of referral to 92%. However, the service continually strive to ensure that 100% continues to be met for all service users.

**Performance data (June 18 to May 19):**

<table>
<thead>
<tr>
<th>2019/2020</th>
<th>June</th>
<th>July</th>
<th>August</th>
<th>Sept</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of children whose episode of care was closed within the month where the equipment was delivered or a modification was made</td>
<td>22</td>
<td>13</td>
<td>13</td>
<td>18</td>
<td>11</td>
<td>13</td>
<td>15</td>
<td>15</td>
<td>40</td>
<td>40</td>
<td>31</td>
<td>36</td>
</tr>
<tr>
<td>Where equipment was delivered in 18 weeks or less of being referred to the service</td>
<td>21</td>
<td>10</td>
<td>10</td>
<td>18</td>
<td>11</td>
<td>10</td>
<td>10</td>
<td>9</td>
<td>32</td>
<td>32</td>
<td>30</td>
<td>26</td>
</tr>
<tr>
<td>Where equipment was delivered in 19 weeks or more of being referred to the service</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>No equipment prescribed</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>6</td>
<td>8</td>
<td>3</td>
<td>8</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>2018_2019 - 100% target</th>
<th>2019_2020 - 92% target</th>
</tr>
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<tbody>
<tr>
<td>100.00%</td>
<td>90.91%</td>
</tr>
<tr>
<td>100.00%</td>
<td>100.00%</td>
</tr>
<tr>
<td>93.33%</td>
<td>83.13%</td>
</tr>
<tr>
<td>85.33%</td>
<td>88.82%</td>
</tr>
<tr>
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<td>94.12%</td>
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<td>80.00%</td>
<td>100.00%</td>
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<tr>
<td>100.00%</td>
<td>100.00%</td>
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2.3 Over the past year there have been occasions when the NHS England target of 100% was not met and this was often due to 1 or 2 patients not receiving their wheelchair within the 18 week targets. On these occasions, breach reports were received which highlighted that this was often due to complex pieces of equipment having to be made bespoke to the patient which increased the wait time.
2.4 From November 18 to February 19 there were 2 breaches that occurred on a monthly basis as highlighted above. The CCG Contract Lead raised concerns with the Provider as this coincided with the commencement of the new contract with Ross Care from 1st October 2018 and a new IT system being implemented at this time.

2.5 It was highlighted to the CCG that the service had experienced some IT issues when the transfer of data occurred onto the new system, therefore, to mitigate any risk a number of staff were employed to undertake a full data cleansing exercise on the new system. This has now been completed. The transfer to the system is a positive step and will enable improved referral management and tracking of equipment once completed. In the interim, there are weekly calls between the Providers Contract Manager and the service to review the waiting lists and ensure that delays are kept to a minimum. The service believe this will have impacted on performance, however, a review is carried out after each breach and where necessary, new processes have been put in place to mitigate risk.

2.6 Thanks to the hard work of the staff within the service, the performance has returned to 100% from March 2019 and this occurred alongside increased referral numbers also from February 19. A review is taking place to understand if there are any reasons for this increase.

Current handover times for children’s services:

3. **Adult Wheelchair Service Updates**

3.1 Currently, the local standard for the Adult Wheelchair service is 18 weeks from referral to assessment (RTA) for adult wheelchair users. There is currently no national requirement for adults to receive their wheelchair within 18 weeks from referral as per the children’s pathway, however, the NHS Constitution sets out that patients should wait no longer than 18 weeks from GP referral to treatment.

3.2 It was recognised that adults are not receiving an equitable service and are currently experiencing long waiting times for wheelchairs and having to experience many steps in the pathway before being supplied with the necessary equipment.

3.3 Extended waits for patients have a negative impact on mental health as it limits the patient’s capability for independence and involvement with their local community, it can also impact on users developing medical complications as a result of equipment related delays such as pressure ulcers and posture problems.

3.4 A proposal was received from Community Services to transform this service to align to the 18 week referral to treatment pathway for children and to reduce the current backlog.

3.5 This proposal was approved in December 2018 and NHS transformation monies were awarded to the Provider to begin the implementation of this pathway. A project lead has been employed to lead the transformation of the service and the programme of change is expected to occur within the 12 month timeframe.
Implementation Plan

The transformation/implementation plan (Summary - Appendix 1) has been based on the principles within the ‘Right Chair, Right Time, Right Now’ Campaign and The Wheelchair Charter.

4. Other updates and service improvements

- There are currently around 2,000 prescribers across the county who are able to access a newly developed gateway to order standard wheelchairs once they have completed the Accredited Assessors training. The additional capacity to order wheelchairs should reduce waiting times for users.
- Documentation that is shared with service users on handover of the wheelchair has been improved to ensure that users are receiving appropriate advice and guidance and these are discussed with each individual at handover to ensure they understand the content and how to contact the service in the event of any problem occurring. (Patient Information Leaflet - Appendix 2). Patients also receive a patient experience questions, a handover certificate and useful tips relating to wheelchair ownership.
- Weekly calls to review all patients waiting and escalate concerns where necessary.
- The service will be running the ‘Return, Recycle, and Reuse’ campaign again in 2019 with the aim of retrieving equipment no longer required by users. This was previously a very successful exercise completed in 2018.
- Ross Care, as the Approved Repairer Service will collect and refurbish wheelchairs wherever possible dependant on damage. These wheelchairs are then available as stock reducing the amount of waiting time for users.
- Key Performance Indicators have been put in place for the wheelchair provider including indicators on response speeds, patient experience, new initiatives, mandatory training, and complaints, compliments and equipment reviews.
- Current service is working towards the Community Equipment Code of Practice Scheme (CECOPS) external accreditation to ensure that the service is the best it can be.
- Improved relationships with provider of wheelchairs – increase in consignment stock available for patients.
- Updated referral form to ensure there is only one being used for referrals into the service, these are available on DXS and include the criteria for supply of a wheelchair (Referral Form - Appendix 3).
- Service working with Healthwatch to develop a focused patient experience questionnaire to gain patient feedback and views on the service.

5. Transformation Funding Update

5.1 As stated previously, funding was approved for the Community Wheelchair Services to reduce the waiting list and to meet the 18 week referral to treatment standard, funding has been allocated to the following:

- Transformation Project Manager (1 year post) – To progress delivery of the transformation plan.
- Data Analyst Post (1 year post) – To develop a robust system to analyse wheelchair data.
- Additional funding for increased hours in the service to undertake the data cleanse of the IT system following transfer of data.
- Cost of Community Equipment Code of Practice (CECOPS) Accreditation for the clinical element of the service (Rosscare have already funded and completed within their service).
- Additional consignment stock used to decrease patient waiting times as more stock available on site and provided at patient visit.
• Further spend will be identified and monitored throughout the implementation period.

6. Summary

6.1 The above provides an overview of the vast amount of work that has gone into improving the wheelchair services already. As detailed in the transformation plan, there are many actions that have been identified to improve current services and to engage with a range of stakeholders such as users, carers and community providers such as care homes to ensure that views of users are being identified to promote changes that will positively impact on them. The CCG’s are assured that the wheelchair service is actively progressing these actions to ensure continued improvement.
Community Services - Wheelchair Services Transformation

Principle 1: A person-centred service that works in partnership with service users and their carers and makes the user/carer voice central to any design, innovation and service change.

Service actions:

• Explore best ways to approach engagement with patients i.e. virtual groups, existing forums.
• Signpost users to further information in a variety of platforms.
• Develop a more comprehensive questionnaire with the forum groups.
• Invite Healthwatch Suffolk to clinics to interview patients.
• Increase participation with Suffolk Disability Forum by regular attendance of quarterly meetings.
• Work with WSFT to develop webpages that signpost patients to options available in Suffolk for Wheelchair Users.
• Develop the feedback portal for other referrers to the service to view users journey.
• Share with users groups, number of appointments cancelled or DNAs to try and understand what improvements can be made to assist.
• Spot check quality calls to ensure that the service is performing to the requirements.

Current progress:

• Met with CCG, Suffolk Disability Forum, Suffolk Healthwatch, Suffolk Axis to discuss previous issues and to update the users about contractual changes, innovation and discuss how service improvements with benefit users.
• Sharing content of webpages with user groups prior to being submitted to the developers.
• Improvements have been made to the telephone systems, by clearer signposting of patients in simple language and overflow messages emailed through to generic shared inbox for call backs.
Community Services - Wheelchair Services Transformation

Principle 2: Equality of access and provision for all, irrespective of age or postcode and including essential user skills training as standard.

Service actions:

- Provision linked to CCG and GP post code, ensuring that responsibility for the correct CCG is able to be identified as soon as possible.
- New service user leaflets and posters developed, rollout to GP surgeries, Care Homes
- Develop user training workshops for specific chair types.
- Rollout of training videos for users.
- Identify with Rosscare main users requiring repair to understand if further training or provision is required.

Current progress:

- Standard referral template form developed and rolled out to professional groups.
- Worked with CCG for Wheelchair referral form to be input on DXS system.
- Removal of Fax and replaced with secure NHS.net email account.
- Boundary work completed and identification of OOA patients with planned care packages to transfer across to appropriate CCGs.
- Links available on Rosscare website and leaflet for training videos made available by Leeds teaching Hospital and endorsed by NMWF.
- Work completed with CHC to improve communication around additional funding requirements.
Community Services - Wheelchair Services Transformation

Principle 3: Entry to service via referral from an appropriately skilled professional. The time from referral to delivery will be at least within the constitutional right of 18 weeks with further substantial improvements by 2019/20 for all people using the service.

Service actions:

- Standard referral template form developed and rolled out to professional groups.
- Task and Finish groups for specific IT module requirements
- Work with performance teams to establish data sets.
- Continue the data cleanse programme and establish SOP for BAU.
- Regular weekly call to discuss specific cases and to ensure patients meet the 18wk RTT requirement as a minimum.
- Establish core stock lines and publish product codes.

Current progress:

- Referral form added to DXS system for GPs in Suffolk to refer into the service.
- Referral form added to ESNEFT Evolve system.
- Removal of Fax and replaced with secure NHS.net email account and to contact referrers where information hasn't been provided or correct route used.
- Task and finish group meet regular and work through actions required to address system issues.
- Regular call established and regular attendance from all stakeholders, ensures improved communication and outcomes for patients.
- Core Stock lines established, published and reviewed monthly at Wheelchair Operational Group.
Community Services - Wheelchair Services Transformation

Principle 4: Assessments for all wheelchairs and associated postural support within nationally mandated timescales and priorities taking into account all aspects of individual needs including those of carers.

Service actions:

• Monitor to ensure contact information is available and is acted on as part of the referral.
• Review the electronic triage process which will enable tasks to be generated within the system rather than via email.
• Use of standard operating procedures, monitoring of equipment issued to ensure consistency where possible.
• Review list of suppliers available to users should they wish to use PHB or have a notional wheelchair with top up.
• Update website with links to help and support groups.
• Feedback and training to team around innovations and national work streams.

Current progress:

• SOPs beginning to be reviewed and to deep dive in patient pathways to understand where anomalies occur.
• Leaflets produced with PHB and contact information available for users to contact service.
• Review meeting set up to refine the triage process.
Community Services - Wheelchair Services Transformation

Principle 5: Establishing regular reviews with the user/carer according to their individual needs.

Service actions:

• Ensure that the database of patient information is cleansed and reviewed.
• Integration of Wheelchair Services with Community Equipment where possible to ensure consistency.
• Establish quick reports enabling PPMs scheduled to be reviewed.
• Look into proactive training workshops for users across the county.
• Create mailshots to patients on how to look after your chair.
• Explore Facebook, twitter accounts and service user portals.

Current progress:

• Data cleansing completed.
• Monthly Integrated Wheelchair and Paediatric therapy team meetings review complex cases, improve communication.
Community Services - Wheelchair Services Transformation

Principle 6: Prescriptions which take into account the current and future needs for all adults and children including those of carers.

Service actions:

- Recruit Wheelchair Data Analyst.
- Set up meeting with TSA voice and CECOPs.
- Conference Call to ensure that data capture for notional, notional with top up and independent patients are recorded and seen within TCES system.
- Review refurbished stock weekly, understand issues regarding quality, volume and variety of chairs.
- Review criteria for lightweight chairs and accessories as per service specification.

Current progress:

- Data Analyst post to be advertised external w/c 8/07/19.
- Working party set up with Ross Care to work through IT specification for PHB and recording of data.
Community Services - Wheelchair Services Transformation

Principle 7: Delivery, maintenance and emergency backup provided to nationally mandated timescales.

Service actions:

• Meet with Chairman and Managing Director of Rosscare to understand the vision and action outstanding issues.
• Work shadow Blatchford's clinics to work through system requirements and to ensure kit is received timely and correct.
• Set up scheduled appointments or visits to suppliers and ensure terms are in line with expectations.
• Work with Rosscare to hold stock in depot.
• Consignment stock to be reviewed in both locations to ensure consistent availability and process management.
• Attendance of the National Wheelchairs Managers Forum with Service Manager.
• Arrange meeting with EOECPH as part of a regional programme to share best practice and forge greater links with other services.
• Arrange to visit other Wheelchair services.

Current progress:

• Arranged meeting with Chairman at Rosscare Depot.
• Attendance at National Association Equipment Providers (NAEP) - meeting with MD Rosscare, CFO Medequip, Operational and Managing Directors Medequip.
• Sunrise meeting set up for 22/07/19
• Work shadow Blatchford's clinic to work through system requirements, looking at kit received, timescales etc.
• Meeting with Rhiannon from EOECPH on 18/07/19.
Community Services - Wheelchair Services Transformation

Principle 8: Innovative and flexible budgeting working with key partners to strengthen integration across health, social care, work and education, enabling the accommodation of individual needs, independence health and wellbeing.

Service actions:

- Meet with performance team towards moving to Benchmarking Suffolk activity against other services nationally to improve and understand service.
- Review process for accredited therapist courses for prescription of basic chairs.
- Additional training provided to therapists on prescription of chairs on the TCES system, allowing ordering to be available on the day after attendance of the course.
- Contact local and national third sector organisations following meeting with EOECPH.
- Work with Rosscare to understand how other wheelchair contracts gift redundant or unused stock.
- Understand trends of stock in system and recycle, usage rates, prior to further ERG for equipment.

Current progress:

- Accredited therapist courses set up, advertised and being regularly attended - 40 additional staff per year being upskilled to prescribe basic wheelchairs.
Community Services - Wheelchair Services Transformation

Principle 9: Recruitment of qualified staff in respect of numbers and skills, with support for on-going development and training.

Service actions:

• Work with data analyst and CSS Europe to develop model for future demand.
• Review of scheduling of appointments for clinical appointments.
• Attend the care home forum meetings to discuss with care home managers issues being faced and how we can work together to overcome.
• Review PDRs against development objectives.
• Look at establishing 121 meetings with all team members to ensure we are in line with the vision of the service.
• Explore work experience, apprenticeships and rotation for service.

Current progress:

• To be confirmed
Community Services - Wheelchair Services Transformation

Principle 10: Supporting clinicians, manufacturers and independent organisations working together to develop innovative, affordable products and solutions.

Service actions:

• Review service user guides including fault fixes, help guides to enable service to be more proactive and less reactive.
• Monitor and check refurbishment rates by establishing a "Specials report" prescription equipment.
• Monthly meetings with RossCare set up to discuss patient pathway.

Current progress:

• Request to CSS for specials report - outstanding.
• Fortnightly call with services to discuss actions and move issues forward by brainstorming.
Suffolk Wheelchair Service User Guide

Designed to help you understand the service we provide

01473 351 805
WHEELCHAIR SERVICES
Select option 2, then option 2.
(For wheelchair assessment and fitting appointments)

01473 351 805
ROSS CARE
Select option 2, then option 1
(For wheelchair servicing, repairs and collections)
Aims of the Wheelchair Service

- The Wheelchair Service is designed to help people across the Suffolk area with permanent mobility problems (longer than six months). We aim to provide a high quality specialist assessment, provision of wheelchairs, postural seating and pressure care. This service is delivered by a specialist team of staff with skills in a wide range of clinical areas.
- We aim to promote and maintain user independence within your own homes, places of education, work and social settings.
- You will be supplied with equipment meeting your clinical needs. We always aim to reduce the time that you wait from when you are referred for assessment to when we issue your equipment.

Wheelchair Services

What are the contact details for the Wheelchair Service covering Suffolk?
For queries relating to Wheelchair Services, please call us via the number below where our friendly team will be happy to help.

Telephone: 01473 351 805
Email: suffolk@rosscare.co.uk

What do I do if my wheelchair doesn’t meet my needs anymore and is uncomfortable?
Please contact the Wheelchair Services on 01473 351 805 and select option 2, followed by option 2. Please indicate to us that you wish for reassessment as your needs have changed.

If I have to go for an assessment, can I get help with transport to the Wheelchair Service if I do not have access to a car?
Unfortunately we are not in a position to provide transportation. If you qualify for ambulance transport then please use this option. We are not however able to arrange these bookings on your behalf.

Do you provide power packs?
We do not provide power packs, however, we may consider compatible power packs to be fitted to certain wheelchairs with prior written consent. Please contact us to discuss this further.

In the event that a power pack is deemed appropriate, they can be purchased from Ross Care, we can also help with demonstrating and fitting a compatible model.

Can I take my wheelchair on holiday?
Yes, if it is covered by your holiday or home insurance. If your holiday company request the weight of your wheelchair it is detailed on the manufacturers label located on the frame.

How do I return equipment that is no longer needed?
Please make contact with us, selecting the option for Ross Care, will arrange a date for collection.

Approved Repairer Services

NHS Wheelchairs are repaired, serviced and delivered in Suffolk by Ross Care, in partnership with Medequip. Ross Care is the largest private Approved Wheelchair Repairer in the UK.

How do I request a repair to my manual, or powered wheelchair?
Call Ross Care on 01473 351 805 and select option 2, then option 1. Home appointments will be planned dependent on requirements.
What are the service standards that I should expect from the approved repairer – i.e. how long it should take for a repair?
We will make an appointment to attend your location for a repair within five days. Acquiring replacement parts for some complex chairs may require completion to take a little longer.

Is there an annual maintenance check for powered wheelchairs supplied by the NHS? Who arranges the annual check?
Yes, you will be contacted by Ross Care to arrange this. The inspection covers a comprehensive list designed to ensure your chair is kept in good, safe, working condition.

What happens when my wheelchair breaks down or develops a fault when I am out of area e.g. on holiday?
There is a shared arrangement across the country that the repairer in the area where you are on holiday will repair the chair. Contact your local service for assistance. If abroad please contact Ross Care on your return to arrange repairs.

What do I do when my wheelchair breaks down in an emergency situation e.g. when out shopping or in a country lane and I am effectively stranded?
Please be aware that the conditions of loan are that you are responsible for getting yourself and your wheelchair home. In this situation we are unable to provide an emergency service.

Can I take my indoor/outdoor powered wheelchair on the road, as opposed to the pavement or path?
The wheelchair should only be driven on the road when there is no alternative. It is meant to be a pavement vehicle.

Do I need public liability insurance for indoor / outdoor powered wheelchairs? Should I take this out myself?
Taking out insurance is not mandatory but is a sensible precaution. Insurance can be facilitated via Ross Care if desired.

Can I request a repair during evenings and weekends.
The Approved Repairs Service standard hours of operation are 8:00am to 5:00pm, Monday to Friday, however an out of hours emergency service is also in operation, call 01473 351 805.

Discover useful information through this helpful video series:
A Beginner’s Guide To NHS Wheelchairs

- The parts of a wheelchair
- Using a wheelchair
- Transportation
- Maintenance
- Your NHS wheelchair

Scan with your smartphone camera or visit: www.rosscare.co.uk/beginners-wheelchairs
Personal Wheelchair Budgets

The service offers a Personal Wheelchair Budget (PWB). This is an individual resource available to help you meet your clinical and mobility needs, with the support of your wheelchair therapist.

You will have the option to contribute to your PWB if you wish to choose additional accessories, features, or a higher specification of wheelchair than within the NHS range. You may wish to self-fund or approach wider agencies and charities for any additional funding.

There are three choices for using your PWB:

1) Use within the NHS wheelchair range (called a notional PWB)
   A notional wheelchair budget enables you to have a wheelchair from the NHS range free of charge through the wheelchair service. The value of the PWB is the cost to the NHS to provide a wheelchair to meet your identified needs. The cost of service and repair will be covered by the NHS.

2) Notional with contribution for additional features
   This option allows you or another agency (such as a charity) to contribute to your PWB to add extra features to your prescription. For example, this could be a seat riser on a powered wheelchair or patterned spoke guards on a manual chair. The NHS wheelchair therapist will be able to advise and support your choice of additional features. The value of the PWB is still the cost to the NHS to provide a wheelchair to meet your identified needs. By choosing additional features on your NHS wheelchair you or the supporting organisation will be contributing to the overall cost of the wheelchair package. This will include VAT for the additional features which may be reclaimable privately. Ross Care can provide a quotation for any extra features you wish to purchase. Please note that the cost of repairing additions / upgrades are not covered by the NHS.

3) The Independent Option (Voucher Scheme)
   The NHS Voucher Scheme is a means of offering wheelchair users greater freedom to choose a wheelchair. Following an assessment and in discussion with your NHS wheelchair therapist, if it is clinically appropriate, you can choose to have your PWB in the form of a voucher to the value of the chair which would normally be provided by the NHS. You can take the voucher to an approved list of suppliers as part payment towards the chair of your choice. You can only use your PWB for the same category of chair i.e. manual or powered. Ross Care can assist with a quotation for these items.

NHS Voucher scheme FAQs.
What do I do when I need a reassessment as the wheelchair I obtained no longer meets my needs?
When choosing the Voucher Scheme option, it is essential to consider whether the wheelchair you are purchasing will meet your needs for life of the voucher. You will also be responsible for the service and repair of your wheelchair.

What is the life of a ‘Voucher’?
Either three or five years and this is made clear on the paperwork you received. You can only apply for a new voucher at the end of this period.

Complaints, comments and compliments
We hope that you receive excellent service from Ross Care and Medequip but we always welcome feedback as we feel it allows us to improve the service further. If you feel you have not received the service you expect and require, or would like to make comments about the service, then please contact us through one of the below methods.

Call: 01473 351 805 • Email: suffolk@rosscare.co.uk • Visit: www.rosscare.co.uk

Ross Care, Unit 29 Bluestem Rd, The Exchange, Ransomes Europark, Ipswich, Suffolk, IP3 9RR

Ross Care • Medequip • NHS
**Suffolk Wheelchair Service Referral Form**

*Please complete all sections of this form clearly by hand or in Microsoft Word. Delays may occur if information is missing or not clear. Referral forms will be screened by the Wheelchair Service with relation to our service specification and criteria listed below.*

**CRITERIA FOR SUPPLY**

- Porterage wheelchairs are not supplied to Nursing Homes.
- Wheelchairs are supplied to clients who will be using them **regularly 4 days a week or more.**
- Manual Wheelchair – client has limited walking ability and a long term disability or illness which is likely to be in excess of six months or for a client who is terminally ill.
- Powered Indoor Occupant Controlled Wheelchair – client must be permanently unable to walk and not be able to satisfactorily propel a manual wheelchair and would gain a measure of independence in the home.
- Powered Indoor/Outdoor Occupant Controlled Wheelchair – As above but further local conditions apply (contact wheelchair services if required).
  
  **Note:** Occupant Controlled Wheelchairs for outdoor use only are not supplied.

Please note boxes with * are mandatory.

<table>
<thead>
<tr>
<th>Does the patient meet the criteria of supply? <em>(please state YES if in agreement)</em></th>
<th>Yes / No Details:</th>
</tr>
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<tbody>
<tr>
<td>Has this referral been made with the client’s agreement?</td>
<td>Yes / No Details:</td>
</tr>
<tr>
<td>Please tick the boxes which apply:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wheelchair is required to enable hospital discharge.</td>
</tr>
<tr>
<td></td>
<td>Client has a rapidly deteriorating condition/receiving palliative care.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Referrer</th>
<th>Name*</th>
<th>Job Role*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postcode</td>
<td>Telephone</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Client</th>
<th>Surname*</th>
<th>Title*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forename(s)*</td>
<td>D.O.B*</td>
<td></td>
</tr>
<tr>
<td>Address*</td>
<td>NHS Number*</td>
<td></td>
</tr>
<tr>
<td>Postcode*</td>
<td>Telephone*</td>
<td></td>
</tr>
<tr>
<td>Email</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does this person live alone?</th>
<th>Y / N</th>
<th>War Pensioner?</th>
<th>Y / N</th>
<th>Have Key safe?</th>
<th>Y / N</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Carer</th>
<th>Name</th>
<th>Relationship With Client</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Telephone</td>
<td>Contact Email</td>
<td></td>
</tr>
</tbody>
</table>

<p>| G.P. | GP Practice* | GP Code |</p>
<table>
<thead>
<tr>
<th>Address</th>
<th>Postcode</th>
<th>Telephone Number</th>
</tr>
</thead>
</table>

### Medical Diagnosis:
Please tick all boxes that apply and list conditions as required.

- **Neurological**
- **Respiratory**
- **Musculoskeletal**
- **Cardiovascular**

Conditions:

### Presenting Issues:
Please detail current concerns and clinical need for wheelchair provision.

### Reason for Referral:
(One must be ticked)

- **Self-Propelling Assessment (Manual wheelchair)**
- **Pushed by attendant assessment (Manual wheelchair)**
- **Powered indoor occupant controlled wheelchair Assessment**
- **Powered indoor/outdoor occupant controlled wheelchair assessment**
- **Buggy Assessment**
- **Personal Wheelchair Budget Voucher**
- **Postural Review in wheelchair**
- **Wheelchair Cushion/Pressure Issues**

### Functional Abilities:
Transfer method: How does client transfer in and out of the wheelchair?

- Independent (standing or sliding transfers)
- With assistance of carer x 1
- With assistance of carer x2
- Standing hoist
- Sitting hoist with sling

### Walking ability:

- Independent (walking without assistance)
- With equipment (walking using sticks or furniture to help, risk of falling)
- Unable (cannot walk, may be able to stand, risk of falling)

### How often would the wheelchair be used (approximately, on average)?

- Occasional (minimum 4 days per week)
- Every day (7 days per week)
- How long will the client be seated in the wheelchair at any one time?
  - [ ] Less than 2 hrs,  
  - [ ] 2-4 hrs,  
  - [ ] 4-8 hrs,  
  - [ ] More than 8hrs

- Will the client need to be transported in their wheelchair in a vehicle?
  - [ ] Yes,  
  - [ ] No

Please clarify the clients’ risk of pressure ulcers (PU)?

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Location of PU and PU Category:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No issues \ No History of pressure damage</td>
<td></td>
</tr>
<tr>
<td>At risk \ Has History of pressure damage</td>
<td></td>
</tr>
<tr>
<td>Pressure Ulcer present</td>
<td></td>
</tr>
<tr>
<td>(If ticked, please provide further detail of location and category)</td>
<td></td>
</tr>
</tbody>
</table>

Is the client currently at home?  
- [ ] Y  
- [ ] N  
If No, Please give details:  

Is there a medical reason why the client cannot attend a wheelchair clinic?  
- [ ] Y  
- [ ] N  
Reason:

Any other relevant information:

Best time to contact client:  
- [ ] Anytime  
- [ ] AM (8-12)  
- [ ] PM (12-5)  
- [ ] Evening (after 5)  

I confirm that, to the best of my knowledge, the information given is accurate and the above client will use the chair 4 days per week.*

Signature*    Date*    Job Role*
____________________  _________  ____________________

Office Use only:

Did this referral arrive prior to today submission?  
- [ ] Y  
- [ ] N  
Date referral received:

If acting on behalf of the original referrer, please state name:

Email: wsh-tr.wheelchairservices@nhs.net