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Pwyllgor Gwasanaethau Iechyd
Arbenigol Cymru (PGIAC)
Welsh Health Specialised
Services Committee (WHSSC)

Specialised Services Service Specification: CP59 All Wales Posture and Mobility Services

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1. Aim

1.1 Introduction

The document has been developed as the service specification for the planning of wheeled posture and mobility services (wheelchairs and postural support seating) for clients (children and adults) permanently resident in Wales or whose GP practice is in Wales and who lives within a PCT bordering Wales¹. This document sets out the current level of provision as funded by the Local Health Boards through the Welsh Health Specialised Services Committee.

The purpose of this document is to:

- detail the specification for the posture and mobility services for Welsh clients;
- identify which organisations are able to provide a posture and mobility service for Welsh clients.

1.2 Relationship with other Policy and Service Specifications.

This document should be read in conjunction with the following documents:

- Specialised Services Policy for Integrated Specialist Rehabilitation
- Specialised Services Policy for Assistive Technologies
- The All Wales Policy: Making Decisions on Individual Patient Funding Request (IPFR) Policy. The IPFR Policy is available online via the Welsh Health Specialised Services Committee website:
<http://www.wales.nhs.uk/sites3/page.cfm?orgid=898&pid=59092>

The Service Specification is also highly relevant to the Welsh Government's:

- Framework for Action on Independent Living;
- Welsh Language Measure and Strategic Framework for Welsh Language Services in Health, Social Services and Social Care;
- Strategic Equality Plan (see strategic objectives 5 and 6).

¹ Western Cheshire, Shropshire County, Herefordshire, West Cheshire, Gloucestershire

1.3 Meeting the Public Sector Equality Duty

The Equality Act 2010 places a positive duty on public authorities to promote equality for nine protected groups² and to demonstrate how they pay 'due regard' to equality when carrying out their functions and activities. In the context of this work, health organisations are required to pay due regard to promoting equality when they are designing and/or reviewing policies and services. Therefore the commissioning and procurement of services is viewed as a public function and WHSCC is required to pay due regard to equality when procuring and commissioning services.

The Act has also strengthened the provisions around disability, recognising circumstances whereby public services can treat disabled people more favourably than non disabled people in order to promote fairness and equality. The social model of disability is highly relevant to posture and mobility services which have an important role to fulfil in enabling children and adults who are wheelchair users to maximise their mobility, independence, inclusion and participation in society.

There is a specific duty to assess the relevance and impact of this service specification on equality and human rights and to ensure that as far as possible, in the delivery of posture and mobility services across Wales, the opportunities for promoting equality, human rights and the Welsh language are maximised and negative impact is eliminated or minimised. Accordingly, an assessment of the potential and actual impact on equality will be undertaken as part of the review of this service specification. A separate report will outline the findings of the equality impact assessment which will be informed by engagement and consultation with key stakeholders.

² Race; Sex; Gender Re-assignment; Disability; Religion, belief/non belief; Sexual orientation; Age; Pregnancy and Maternity and Marriage and Civil Partnerships

2. Service Delivery

2.1 Service Model

The Posture and Mobility Service for Wales (*the Service*) is an all Wales service that provides the following services for clients who require the long term use of a wheelchair:

- Clinical assessment
- Delivery of equipment
- Repair of equipment
- Adjustment/ replacement of equipment
- Disposal of equipment

The key objectives of the service are:

- To work in partnership with clients and their representatives;
- to assess the posture and mobility needs of people of all ages who have a permanent impairment or medical condition that affects their ability to walk and will need a wheelchair for more than 6 months;³
- to prescribe and provide wheeled mobility and postural support solutions to meet essential needs;
- to promote function, comfort and independence while minimising the risk of complications and incorporating the “social model of disability”.

The service is delivered from sites in North and South Wales. The South Wales service is based at Cardiff and Treforest, and serves approximately 42,000 clients in South, West and Mid Wales. The North Wales service is based at Llanfairfechan and Wrexham, and serves approximately 14,000 clients in North Wales, North Powys and Central Powys and North Ceredigion.

The service also incorporates three specialist Rehabilitation Engineering Units (REU). These units are based at Llanfairfechan, Cardiff, and Swansea. Referrals to the REU services at Llanfairfechan, Swansea and Cardiff are made through the single point of referral with the Services in Wrexham and Cardiff.

The service provides clinics within the five main centres and through a

³ An exception to this is that the service prioritises clients with rapidly deteriorating and life limiting conditions, in order to ensure that they receive wheelchairs within a clinically appropriate timeframe.

number of outreach clinics across Wales. A proportion of the service is delivered on a community basis, with service personnel undertaking specialist assessment in domestic or educational settings.

The service is delivered by a range of professional and support staff, some of whom may be contractor staff, which includes:

- Clinical engineers;
- Rehabilitation engineers;
- Occupational Therapists;
- Physiotherapists;
- Clinical Scientists;
- Clinical Psychologist;
- Medical staff;
- Administrators;
- Field service team;
- Medical Technical Officers; and
- Technicians.

A full list of clinic sites is provided in annex i.

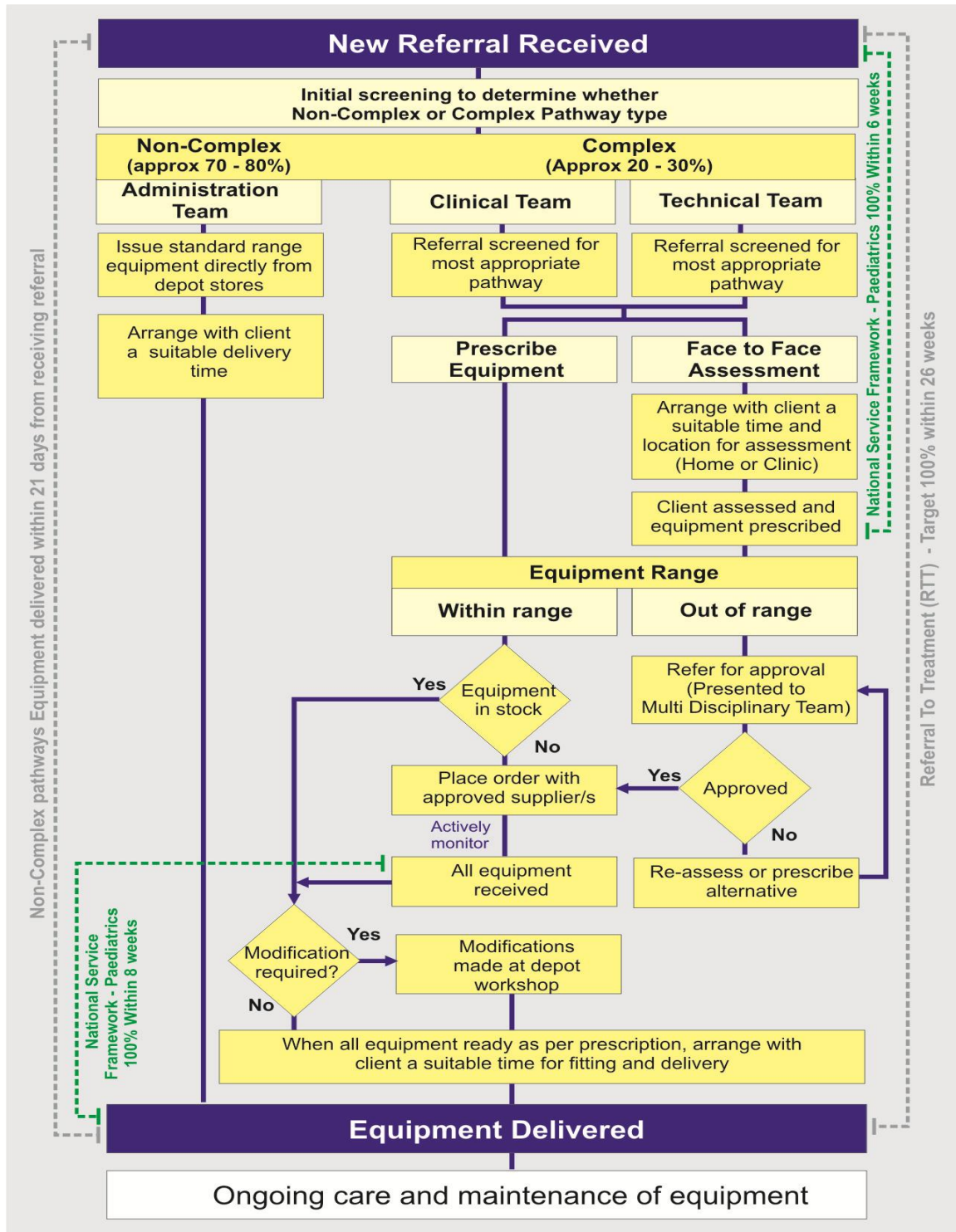
2.2 Care Pathway

The service is accessed through a written referral form from a registered healthcare professional with the appropriate knowledge and skills. There are two types of referral – Complex and Non-Complex. Current clients of the Service may choose to self-refer.

Complex Referrals requires an intervention to be undertaken by the service, in order to identify the most appropriate posture and mobility solution.

Non-Complex Referrals require no further assessment, prior to the delivery of the wheelchair, provided that the information on the referral form is accurate and complete.

The diagram overleaf illustrates in detail how the service manages Posture and Mobility (wheelchairs) referrals. Posture and Mobility (postural support seating) referrals are received at the same single point. The internal design and manufacturing elements of this work are not shown here. If the initial supplied equipment does not quite meet the posture or mobility requirements the provider will endeavour to meet the needs of the client.



Please contact your local centre if you require any advice regarding the referral pathway.

3. Scope

3.1 Service Definition

The Service provides the following:

- assessment of the posture and mobility needs of people of all ages who have a permanent physical impairment or medical condition that affects their ability to walk and will need a wheelchair for more than 6 months;⁴
- prescription and provision of wheeled mobility and postural support solutions to meet essential needs.

3.2 Equipment Procurement

To ensure the Service uses its resources effectively and efficiently, equipment is selected and provided from a nationally agreed and procured range of equipment. All equipment is provided on a loan basis to clients, and when it is no longer required it is returned to the service for refurbishment and is reissued or disposed of as appropriate. All equipment whether new or refurbished meets current standards and best practice, e.g. Medical Devices Directives http://ec.europa.eu/growth/sectors/medical-devices/index_en.htm,

Medicines and Healthcare Products Regulatory Agency
<https://www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency>.

Where it is agreed an individual is eligible for a particular type of equipment, according to the criteria described in section 4, the specific model will be selected from this range in partnership with the client.

3.3 Relationship with other providers

The Service also interfaces with other statutory and third sector organisations for the provision of equipment. This includes joint

⁴ The service prioritises clients with rapidly deteriorating life limiting conditions, in order to ensure that they receive wheelchairs within a clinically appropriate timeframe.

funding where the client wants a feature that is outside of the service specification. The service actively links with Access to Work and other organisations in order support access to education and the workplace.

4. Eligibility Criteria

4.1 Eligibility Criteria

The Service embraces a holistic approach to assessment in the course of providing for essential posture and mobility requirements. All new referrals to the Service should be made by a registered healthcare professional with the appropriate knowledge and skills. Current clients of the Service may choose to self-refer.

All referrals to the Service should meet the following criteria:

- The client is permanently resident in Wales or registered with a GP practice in Wales and who lives within an English commissioner area bordering Wales⁵;
- The client has a permanent physical impairment or medical condition that affects their ability to walk and will need a wheelchair for more than 6 months.⁶

There are no exceptions to the first criterion.

4.2 Duty of Care Considerations

The Service has a duty of care to ensure that equipment provided can be used safely by the client and where an appropriate carer, personal assistant or support workers. Equipment will be provided according to the eligibility criteria with any identified safety concerns appropriately addressed. Where a client is assessed for a powered chair for independent use, the Service will abide by current statutory regulations, e.g.

Department of Health

⁵ Western Cheshire, Shropshire County, Herefordshire, West Cheshire, Gloucestershire

⁶ The service prioritises clients with rapidly deteriorating life limiting conditions, in order to ensure that they receive wheelchairs within a clinically appropriate timeframe.

<https://www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency>

Driver and Vehicle Licensing Agency

<https://www.gov.uk/government/organisations/driver-and-vehicle-licensing-agency>

Further equipment specific considerations are included in this section.

4.3 Criteria for Provision

The Service provides seating and mobility equipment to those clients who meet the eligibility criteria. This equipment is identified from an agreed range of equipment and is chosen on the grounds of clinical appropriateness, ease of maintenance, value for money and availability. Wheelchairs and cushions supplied by the Service are for the exclusive use of the person they are provided for and remain the property of the NHS.

4.3.1 Provision of a Non-Complex Manual Wheelchair

Definition
A wheelchair issued from stock such as a standard attendant or self propelled manual wheelchair.
Criteria for provision
The Service provides, on loan, standard manual wheelchairs to clients who meet the following criterion: <ul style="list-style-type: none">• A client who is able to self propel or has a carer, personal assistant or support workers who are deemed able to push the chair.• NB for clients residing in a nursing home, please see section 4.4

4.3.2 Provision of an Active Manual Wheelchair

Definition
An active manual wheelchair, rigid or folding, capable of multiple configuration to optimise mobility for clients. Equipment will not be provided to meet work, education or sporting requirements specifically.
Criteria for provision
An active manual wheelchair may be considered for full-time users or if the client has a recognised deteriorating medical condition which may

lead them to becoming a full-time user. An active manual wheelchair may be provided for clients where this would improve their independence.

- If a full time user is unable to maintain independent mobility in a standard wheelchair and an active manual wheelchair would result in an increase in their level of independence.
- The client has a long term need, using the chair on a daily basis in order to increase their mobility and independence.
- A client who is an independent driver and can transfer independently into their car, but who is unable to put a standard wheelchair into their car on their own without detriment to their health.

4.3.3 Provision of a Buggy

Definition

A specialist buggy has the ability to meet postural / medical needs and may include a tilt-in-space facility.

Criteria for provision

Buggies may be issued as an alternative to a wheelchair where it best meets clinical and mobility need and the following applies:

- The child has a postural need and a shop-bought buggy is not available to meet the child's weight or size.
- The child has a medical need and requires the mounting of specialist medical equipment / accessories.

4.3.4 Provision of a Tilt-in-Space Wheelchair

Definition

Tilt-in-space wheelchairs are issued for clients where the tilt facility is the only reasonable way of maintaining sitting balance, and/or relieving pressure, and/or maintaining comfort within a chair.

Criteria for provision

A tilt-in-space wheelchair may be issued if:

- The client is unable to walk AND
- The client is likely to spend more than 4 hours per day in the wheelchair AND
- The client will gain significant improvements in one or more of the following:
 - Posture/stability
 - Pressure relief
 - Reduced level of carer, personal assistant or support worker support required

4.3.5 Provision of a Powered Wheelchair

Definition

Electrically powered indoor/outdoor wheelchairs are issued to clients to be used within the client's home environment and outdoors. Equipment will not be provided to meet work, education or sporting requirements exclusively.

Criteria for provision

A powered wheelchair may be issued if:

- The client is unable to effectively or safely walk and unable to propel a manual wheelchair effectively indoors and outdoors
- The client has the potential through frequent and regular use to benefit from the chair through increased mobility leading to improved quality of life
- The client can demonstrate the ability to use a powered wheelchair safely within their own home in accordance with manufacturers' instructions.
- For the use of attendant controls, relevant carers must be identified prior to equipment provision, and these persons will be assessed as is appropriate.
- The client has a suitable home environment
 - Including adequate space for the movement of the wheelchair
 - Including a suitable space with a power supply for charging batteries overnight
- The client meets the weight limits stated in the manufacturer's specification for the wheelchair.
- The client's home environment has been risk assessed as appropriate for a powered wheelchair and all necessary adaptations must be in place prior to equipment being provided.
- Powered wheelchairs will not be provided for sole use outdoors.

4.3.6 Provision of more than one wheelchair

Definition

A wheelchair is supplied in addition to the client's assessed provision for a variety of reasons.

Criteria for provision

A second wheelchair may be issued from the high-end manual wheelchair range (e.g. tilt-in-space) to meet a client's essential posture & mobility needs, however the following will not be considered:-

- | |
|---|
| <ol style="list-style-type: none">1. Environmental access e.g. relative's home, school access2. Vehicle access3. For use on holiday4. Work use |
|---|

4.3.7 Provision of Seating:

Definition
Provision of seating equipment to manage posture / function / pressure and comfort needs within a client's prescribed mobility solution.
Criteria for provision
<ul style="list-style-type: none">• Equipment may be issued as clinically and technically appropriate.• Equipment issued to manage posture / pressure relief and / or increase comfort.• Equipment will not be issued for armchairs or other types of static seating, but can be provided for use within privately purchased wheelchairs.

4.4 Exclusions

The Service does not provide equipment for resolving issues outside essential posture and mobility needs including:

- Non-complex wheelchairs to Residential or Nursing Homes for transit purposes only;
- Mobility equipment for restraint purposes, e.g. to keep clients in the seat when they have volitional movement;
- Tilt-in-space wheelchairs are not meant to resolve feeding / hoisting difficulties that would be improved through the provision of appropriate static seating;
- Seat risers;
- Lights;
- Sit to stand wheelchairs;
- Rain covers or sun canopies;

- Spare cushions;
- Cushions for armchairs or other seating;
- Chairs that are set to operate at more than 4 miles per hour;
- Mobility scooters;
- E-motion / powered assist wheels;
- Power packs;
- Accessories to access vehicles;
- Mobile arm supports;
- iPortal or similar interface systems; and
- Equipment for persons who are able to walk but for various reasons refuse to do so.

4.5 Exceptions

There may be clinical justification for the Service to provide equipment outside of the Service Specification in order to meet the client's essential posture and mobility needs. In these circumstances, the Service will discuss the client's case at a local MDT meeting to approve 'Out of Range' equipment.

If there are exceptional reasons for postural and mobility equipment provision, the Service will consider an Individual Patient Funding Request (IPFR). An application can be made to WHSSC under the All Wales Policy for Making Decisions on Individual Patient Funding Requests (IPFR).

Guidance on the IPFR process is available at www.whssc.wales.nhs.uk

4.6 Replacement of Equipment outside Service Specification

A number of clients have had mobility equipment provided in the past, which will now be considered to be outside of this service specification. Following a referral into the Service, an individual's posture and mobility needs will be fully assessed and the most clinically appropriate equipment will be provided. Any previous equipment issued will be taken into account when determining the prescription; however, there will not necessarily be an automatic like-for-like replacement, unless clinically indicated.

4.7 Joint Funding

The Service will consider joint funding with the client / family or statutory and third sector organisations for additional equipment but

not alternative wheelchairs.

The Service acknowledges that there are times when a client would like to add components to their chair that are outside of the “essential equipment” range. In some instances, and where they will be no adverse affect on either the essential features of the chair, or the medical needs of the service user, we will allow the client to purchase additional features to their chair. In these cases, the Service will work with the client to install the components. The Service is not responsible for service and maintenance of additional equipment.

The organisation seeking joint funding should abide by the following principles:

- Applications can only be considered at time of appropriate reassessment;
- Contributions must be confirmed in writing;
- The ownership of the chair must remain with the Service in order to guarantee ongoing maintenance and repair;
- For out-of-range products, consideration should be given to the need for an extended warranty for the additional features as part of the joint funding agreement.

In return, the service will:

- undertake an assessment of the client’s current posture and mobility needs and agree with the client on the optimum piece of equipment;
- order the chair / equipment and invoice the partners for their contribution.

A new funding agreement will be required at the point at which the equipment requires replacement.

5. Quality and Client Safety

5.1 Quality and Client Safety

The Service will work to written quality standards and provide monitoring information to WHSSC.

The Service will enable the client’s, carer’s and advocate’s informed

participation and will demonstrate this via the Partnership Board. Provision should be made for clients with different communication needs for example sensory loss, learning difficulties and for children. This should include communication and information in accessible formats, Welsh language provision and other language and translation support.

5.2 Quality Indicators (Standards)

The Service will work to written quality standards and provide monitoring information to WHSSC. The Service is expected to comply with the following:

- All Wales Quality Indicators for the Posture and Mobility Services (Annex ii);
- Equality monitoring data will be collected to promote equality and highlight any potential discrimination in relation to access to the service. This data is also essential to inform the future monitoring and review of the service specification;
- Monitoring will be via annual self assessment audit reports to the Partnership Board which comprises service users, statutory and voluntary organisations, WHSSC and ALAS management representatives.

5.3 Putting Things Right: Raising a Concern

Whilst every effort has been made to ensure that decisions made under this policy are robust and appropriate for the client group, it is acknowledged that there may be occasions when the client or their representative are not happy with decisions made or the solutions provided. The client or their representative should be guided by the clinician, or the member of NHS staff with whom the concern is raised, to the appropriate arrangements for management of their concern:

- When a client or their representative is unhappy with the decision that the client does not meet the criteria for provision of a service further information can be provided demonstrating exceptionality. The request will then be considered by the All Wales Individual Patient Funding Request Panel. The request will normally be made by the client's GP or Hospital Consultant in writing.

A client information leaflet is available via the following link, which explains the process:

<http://www.wales.nhs.uk/sites3/page.cfm?orgid=898&pid=59092>. The leaflet also explains how to make a complaint.

- When a client or their representative is unhappy with the quality of the service provided or the clinical decision to withdraw the service provided under this policy, the client and/or their representative should be guided to the LHB for NHS Putting Things Right
<http://www.wales.nhs.uk/sites3/home.cfm?orgid=932>

For services provided outside NHS Wales the client or their representative should be guided to the NHS Trust Concerns Procedure with a copy of the concern being sent to the Welsh Health Specialised Service Committee.

- If the client or their representative is not happy with the decision of the All Wales IPFR Panel the client and/or their representative has a right to ask for this decision to be reviewed. The grounds for the review, which are detailed in the All Wales Policy: Making Decisions on Individual Patient Funding Requests (IPFR)
<http://www.wales.nhs.uk/sitesplus/documents/867/All%20Wales%20NHS%20IPFR%20Policy.pdf>, must be clearly stated. The Local Health Board (LHB) in which the client is resident should undertake the review.

6. Performance Monitoring and Information Requirements

6.1 Performance Monitoring

WHSSC will be responsible for commissioning services in line with this policy. This will include agreeing appropriate information and procedures to monitor the performance of organisations.

For the services defined in this policy the following approach will be adopted:

- Service providers to evidence quality and performance controls;
- Service providers to evidence compliance with standards of care;

- Service providers to evidence equality of access and outcomes.

WHSSC will conduct performance and quality reviews on an annual basis.

6.2 Key Performance Indicators

The providers will be expected to monitor against the following target indicators:

- Acknowledgement of receipts
- Standard wheelchair referral to delivery time
- Complex wheelchair and/or posture management system ordered from manufacturer referral to delivery time
- Repaired on time (emergency)
- Repaired on time (non emergency)
- Collected on time (non emergency)

The provider should also monitor the appropriateness of referrals into the service and provide regular feedback to referrers on inappropriate referrals, identifying any trends or potential educational needs.

The service will provide commissioners with the following information on a monthly basis:

Key performance indicator	Description	Target
Acknowledgement of receipts	Measures time between receipt of referral and the issue of an acknowledgement to the referrer and user	Acknowledgement to be sent within 5 working days of appropriately completed form
Appropriate referral form	Measures the percentage of referrals received that have an appropriately completed referral form	Target is used to improve the referral process from a referrer rather than service perspective.
Standard manual wheelchair referral to delivery time	Measures time between point of referral to point of delivery of standard chair	90% of standard manual wheelchairs held in stock to be delivered within 21 days
Complex wheelchair and/or posture management system ordered from manufacturer referral to delivery time	Measures time between point of referral to point of delivery of complex chair	90% of complex wheelchairs to be delivered within the terms of referral to treatment standards (26 weeks total)
Repaired on time (emergency)	Measures performance for emergency repairs	90% of emergency responses will be within 24 hours of the service user contacting the service
Repaired on time (non emergency)	Measures performance for non emergency repairs	90% of non emergency responses will be within 3 working days of the service user contacting the service
Collected on time (non emergency)	Measures performance for collections	90% of collections will be within 5 working days of the service user contacting the service

Annex (i) Clinic Sites

North Wales clinic sites	South Wales Clinic sites	Swansea clinic sites
Posture and Mobility, Wrexham (ALAS) tel:01978-727524	Posture and Mobility Centre (Treforest) tel:(029)20313905	
Posture and Mobility, Bryn Y Neuadd (REU) Conwy tel:01248-682682	Posture and Mobility, Cardiff (ALAS Rookwood Hospital) tel:(029)20313930	
Newtown Hospital tel:01686-617200	Swansea/Neath Port Talbot Hospital tel:01639-862000	
Denbigh Children's Centre tel:01745-448287	Neville Hall Hospital, (Children's Centre) tel:01873-732732	
Ross Care Approved Repairer, Mold tel:01352-744640	Withybush Hospital, (Children's Centre) tel:01437-764545	
	RE Unit, Morriston Hospital tel:01792-702222	
	Brecon War Memorial Hospital tel:01874-622443	
	South Pembrokeshire Hospital tel:01646-682114	
Rehabilitation Engineering		
Posture and Mobility, Wrexham (ALAS) tel:01978-727524	Posture and Mobility Centre (Treforest) tel: (029)20313905	Heol Goffa School, Llanelli tel:01554-759465
Posture and Mobility, Bryn Y Neuadd (REU) tel: 01248682682	Posture and Mobility, Cardiff (ALAS Rookwood Hospital) tel: (029)20313930	Heol Goffa Social Activity Centre, Llanelli tel:01554-772546
Newtown Hospital tel: 01686617200	Bert Denning Centre Brynmawr tel:01495-315278	Portfield Social Activity Centre, Haverfordwest tel:01437-762762
Denbigh Children's Centre tel: 01745-448287	Bridgend Resource Centre tel:01656-815970	Portfield School, Haverfordwest tel:10437-762701

Ross Care Approved Repairer, Mold tel: 01352-744640	Brookland ATC tel:01633-615338	The Anchorage, Pembroke Dock tel:01437-776460
	Bryn Glas ATC tel:01633-821377	Tenby Social Activity Centre, Tenby tel:01437-776443
	Craig-Y-Parc School tel:(029)20890397	Canolfan Y Bont, Lampeter school tel:01570-422214
	Crownbridge School tel:01633-624201	Queen Elizabeth High School , Carmarthen tel:01267-245300
	Cyfarthfa High School Upper School tel:01685-721725	Awel-y-Mor Care Home , Gorseinon tel:01792-897346
	Danybryn Cheshire Home tel:(029)20842237	Lampeter Day Centre tel:01570-422565
	Ysgol Y Deri tel:(029)20352280	Ty Cwm Residential Home, Carmarthen tel:01267-228070
	Gadlys Resource Centre tel:01685-873647	Parkway Day Centre, Swansea tel:01792-207005
	Greenfield School tel:(01443)690468	Birch Grove Day Centre, Swansea tel:01792-321522
	Héronsbridge School Bridgend tel:01656-815725	Birch Grove Day Centre, Swansea tel:01792-321522
	Land Ward, Childrens Hospital of Wales tel:(029)20747747	Trewarren Day Centre, Swansea tel:01792-792160
	Llwynypia Day Centre tel:01443-436937	Swansea Vale, Llansamlet tel: 01792-785020
	Maes Ebbw Upper School tel:01633-815480	Maesglas Day Centre, Gendros Tel: 01792 585 546
	Monnow Vale Day Centre tel:01600-773113	
	New Horizons, Magor	

	tel: 0808-2235320	
	New Siblands School tel:01454-866754	
	Park Lane School, Aberdare tel:01685-874489	
	Penmaes School tel:01874-623508	
	Pen-Y-Cwm School tel:01495-357755	
	Sandbrook Day Centre tel:01685-721764	
	Scope Centre, Cwmbran tel:01633-482848	
	Scope Centre, Sully tel:01446-733418	
	Serennu Children's Centre tel:01633-748000	
	St Cenydd Comprehensive School tel:(029)20852504	
	The Hub, Barry tel:01446-724000	
	Treforest Day Centre tel:01443-841235	
	Trinity Fields School tel:01443-866000	
	Ty Gwyn School tel:(029)20838560	
	Ty Nant Ddu tel:01495-742261	
	Ysgol Hen Felin tel: 01443 431571	
	Ysgol Ty Coch tel: 01443 203471	
	Ystrad Mynach College tel: 01443 816888	

Annex (ii) – All Wales Quality Indicators for the Posture and Mobility Services

Aim

The Quality Indicators give guidance to the Health Boards that provide Posture and Mobility services on the standards of care and service delivery. They enable planners of the service to assess the achievement of specified Quality Indicators and promote consistency between providers.

The Posture and Mobility Services in Wales comprise two elements:

1. Artificial Limbs and Appliances Service (ALAS) – this service provides wheelchair services to long term users who require essential wheelchair equipment ranging from the direct issue of a standard wheelchair to individual assessments for specialised and powered wheelchairs.
2. Rehabilitation Engineering Units (REUs) – these units provide special seating services for individuals whose special seating needs cannot be met by the wheelchair services provided by ALAS.

Both ALAS and the REUs are familiar with and fully committed to working within the Social Model of Disability.

What the Quality Indicators Cover

The indicators are set out under three broad themes:

1. Information and Communication
2. Providing a quality service
3. Care pathway

Each indicator is as explicit as possible to ensure that interpretation is clear. **Level A** indicates the highest priority that providers should give to achieving compliance. **Levels B & C** will be set to allow time for improvement. Specified within each indicator are the measures of compliance that are necessary for assessment.

Key

Level A = Essential, mandatory.

Level B = To be met within 1 – 2 years

Level C = To be met within 3 – 5 years

Please note for ease of reference the term **user** has been used to cover the following:

- Service user
- Carer
- Enabler
- Support worker
- Family member
- Other appropriate nominated person

And the term **service** has been used to cover the following:

- Posture & Mobility Service
- REU

Glossary

CPD	-	Continual Professional Development
CRB	-	Criminal Records Bureau
MDT	-	Multi Disciplinary Team
SPRM	-	Single Point Referral Meeting

1. Communication and Information			
	Provision of Service Information to All Users	Measures of Compliance	Category
1.1	The service will provide information that enables users to make as fully informed choices as possible.	Service user survey.	A
1.2	The service will ensure that, as a minimum, all in-house information provided (as outlined in 1.3) is accessible to all to users, and therefore is available in a range of formats (initially Welsh and English, with a planned programme for provision in other formats).	Printed information available. Service user survey.	A
1.3	As a minimum the service will provide: <ul style="list-style-type: none"> ➤ Acknowledgement within 5 days to the user of receipt of referral (and others where appropriate). ➤ A description of the service that the user can expect, including the way in which need is assessed and clinically appropriate wheelchair and / or other equipment is prescribed. ➤ A range of key information to enable effective use of the service, including: <ul style="list-style-type: none"> ○ how to contact the service with queries, ○ what to do in the event of equipment failure to obtain repair and maintenance or other support, 	Printed information available. Service user survey.	A

	<ul style="list-style-type: none"> ○ how to access the service when the user feels their posture and mobility needs have changed, ○ how to register changes in their circumstances (e.g. change of address), ○ how to register a complaint. 		
1.4	On the delivery of equipment to the user, the service will ensure that users receive clear information about the equipment supplied, tuition on safe and appropriate use of the chair, and a single point of contact for any subsequent enquiries.	Handover sheets.	A
1.5	<p>The service will maintain regular contact with users who are waiting for assessment or delivery.</p> <p>At the point of initial referral users will be informed of the current waiting time for assessment.</p> <p>Those with urgent referrals will be assessed within the shortest time-frame possible but within a maximum of 6 weeks.</p> <p>At minimum, the service will contact all users still waiting for assessment at the 12th week from referral. Users will be able to negotiate with the service the frequency of contact that they receive</p>	<p>Printed information available.</p> <p>Data extracts from the posture mobility services information systems.</p>	B

	<p>subsequent to the initial contact (minimum timeframe – 6 weeks).</p> <p>Users should be given sufficient notice of a change in assessment or delivery dates (not less than 5 working days notice).</p>		
1.6	The service will respond to non-urgent calls from users in a maximum of 5 working days.	Data extracts from the posture mobility services information systems.	A
1.7	The service will ensure that users are offered opportunities to fully engage throughout the assessment process.	Data extracts from the posture mobility services information systems.	A
1.8	The service will review information on an annual basis to ensure that it is up-to-date and accurately reflects current demand.	Annual review / audit	A
2. A Quality Service			
	Staff Qualifications and CPD		
2.1	The service will ensure that all service staff are appropriately trained and competent to undertake their roles.	Personal Development Plans	A
	Delivery and Maintenance		

2.2	The service should ensure that, at handover, appropriate information is provided to the user on the use and care of the equipment. This will identify the responsibilities of the wheelchair service and of the user respectively, for appropriate and safe use of the equipment.	Service user survey Data extracts from the posture mobility services information systems.	A
2.3	The service must ensure that all wheelchairs and associated equipment undergo planned preventative maintenance based on risk analysis between: <ul style="list-style-type: none"> • 6 to 12 months for complex users • 6 to 36 months for standard users 	Data extracts from the posture mobility services information systems.	B
User Feedback			
2.4	The service should provide opportunities for user feedback.	Website Service user survey	A
3. Care Pathway			
3.1	The wheelchair service will respond to users' needs for follow-up reviews and assessments, recognising that the expected frequency of the need for a review will vary between users. The service will identify and agree a provisional review date on a case-by-case basis with those users whose need for review is identified as a priority.	Data extracts from the posture mobility services information systems. Annual review/audit	B