

Nottingham and Nottinghamshire Wheelchair Services Review

Engagement Report

April 2024

Version 1.1

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1. Executive Summary

1.1 Background

There are historic differences in wheelchair services provided across Nottingham and Nottinghamshire due to changes in commissioning bodies across the area. A review of Nottingham and Nottinghamshire wheelchair services was conducted to assess whether the difference in services create inequity across Nottingham and Nottinghamshire.

1.2 Aims

The aims of the engagement were:

- To understand what works well in Nottingham & Nottinghamshire wheelchair services for citizens/carers and professionals.
- To understand what citizens/carers and professionals would like to change about Nottingham & Nottinghamshire wheelchair services.
- To understand any barriers to citizens/carers in accessing wheelchair services.
- To understand barriers experienced by professionals in working with or within wheelchair services.
- To identify any inequity in wheelchair provision across the Nottingham & Nottinghamshire area.

1.3 Methods

Engagement activities were conducted to include citizens/carers and professionals from any sector that work within wheelchair services, refer into wheelchair services, or interact with wheelchair services to share their experiences of wheelchair services currently being provided within Nottingham and Nottinghamshire. The approaches used to capture the responses included the following:

- Online surveys
- Focus groups
- Group discussions
- Individual conversations
- Conversations during service visits

1.4 Findings and Recommendations

Findings and recommendations aligned with the following themes:

- Efficiency of wheelchair services
- Personalised care
- Positive attitude and capability of staff
- Consistency of servicing, maintenance, and assessments
- Accessibility of wheelchair services

- Inequity of wheelchair services
- Information sharing and education about wheelchair services.
- Integration of wheelchair services within the wider Nottingham and Nottinghamshire system.

Feedback collated in this report will help inform the rest of the system wide review of wheelchair services across Nottingham & Nottinghamshire. Recommendations based on feedback will be used to identify areas of improvement or service change where appropriate.

2. Recommendations

Conclusion 1: Whilst there was some positive feedback about current efficiency within services, long waiting times for initial appointments and delivery of equipment after assessment was one of the most common themes in this engagement activity. There is some residual impact from the pandemic and importation issues caused by circumstances such as Suez Canal and Brexit.

Recommendation 1: Increase efficiency within services.

- Efforts are being made to reduce inefficiencies and services should continue their efforts to reduce wait times for service users.

Conclusion 2: Personalised care was highlighted as a theme throughout engagement exercise and the positive attitude and behaviour of staff was highlighted by both professionals and citizens & carers.

Recommendation 2: Encourage personalised care and recognise positive staff behaviour.

- Personalised care that is already taking place should be supported and where it is not taking place successfully it should be encouraged.
- Positive behaviours and attitude of staff should be recognised and praised.

Conclusion 3: Servicing and maintenance arrangements were highlighted as working well but also as something that needed to change. This indicates an inconsistency with the level of service provided in each interaction. There was a theme to support wheelchair services to carry out more thorough assessments of wheelchairs when repairs are required.

Recommendation 3: Increase consistency for servicing and maintenance.

- Servicing and maintenance callouts should be carried out with a more pro-active approach, considering the condition of the entire wheelchair rather than

just considering the reason for the callout.

Conclusion 4: Professionals and citizens commented on the difficulty of physically accessing services due to issues with transport links and parking arrangements. Accessibility issues were not limited to physical accessibility; another common theme was the difficulty of the review and referral process.

Recommendation 4: Increase accessibility into services.

- Services should support and advise citizens with transport and parking options.
- Services should implement self-referral pathways so known services users can contact the service directly rather than going through a GP or HCP.
- Services should remain contactable and responsive to queries made by professionals and citizens.

Conclusion 5: Feedback highlighted differences in wheelchair service processes and differences in the range of equipment available across the Nottingham and Nottinghamshire area.

Recommendation 5: Reduce localised disparity of service provision.

- Inconsistencies should be reduced across the Nottingham & Nottinghamshire area. Where possible, service specifications, eligibility criteria, variety and type of equipment offered to service users should be harmonised.

Conclusion 6: Both professionals and citizens expressed uncertainty about wheelchair service processes. Citizens highlighted a need for transparency with regards to waiting times. Professionals would benefit from more regular training to support better quality referrals and patient advice.

Recommendation 6: Increase information sharing and education about wheelchair services.

- Services should be transparent and realistic when advising service users on waiting times for appointments and equipment delivery.
- Wheelchair services should implement training more consistently, to support carers with manoeuvring wheelchairs safely and to educate professionals on how to refer for better standards of referral.
- Clarity on referral routes and criteria should be established.
- Services should offer support to service users to understand the wheelchair assessment process and keep them informed.

Conclusion 7: Professionals and Citizens commented on disjointed care between wheelchair services and other health or social care services. Wheelchair services acknowledge that a lack of access to patient data systems e.g., SystemOne, can create barriers to effective and efficient joint up care.

Recommendation 7: True integration of wheelchair services.

- Wheelchair services should improve communication and collaboration with other services to increase joined up care and allow smoother transitions between services.
- Where access to patient information sharing systems cannot be provided, mitigations should be established for the lack of access to these systems.

3. Conclusion and Next Steps

The engagement activity carried out will help inform the rest of the system wide review of wheelchair services across Nottingham & Nottinghamshire, which should conclude later this year. Feedback and recommendations based on feedback will be used to identify areas of improvement or service change where appropriate.

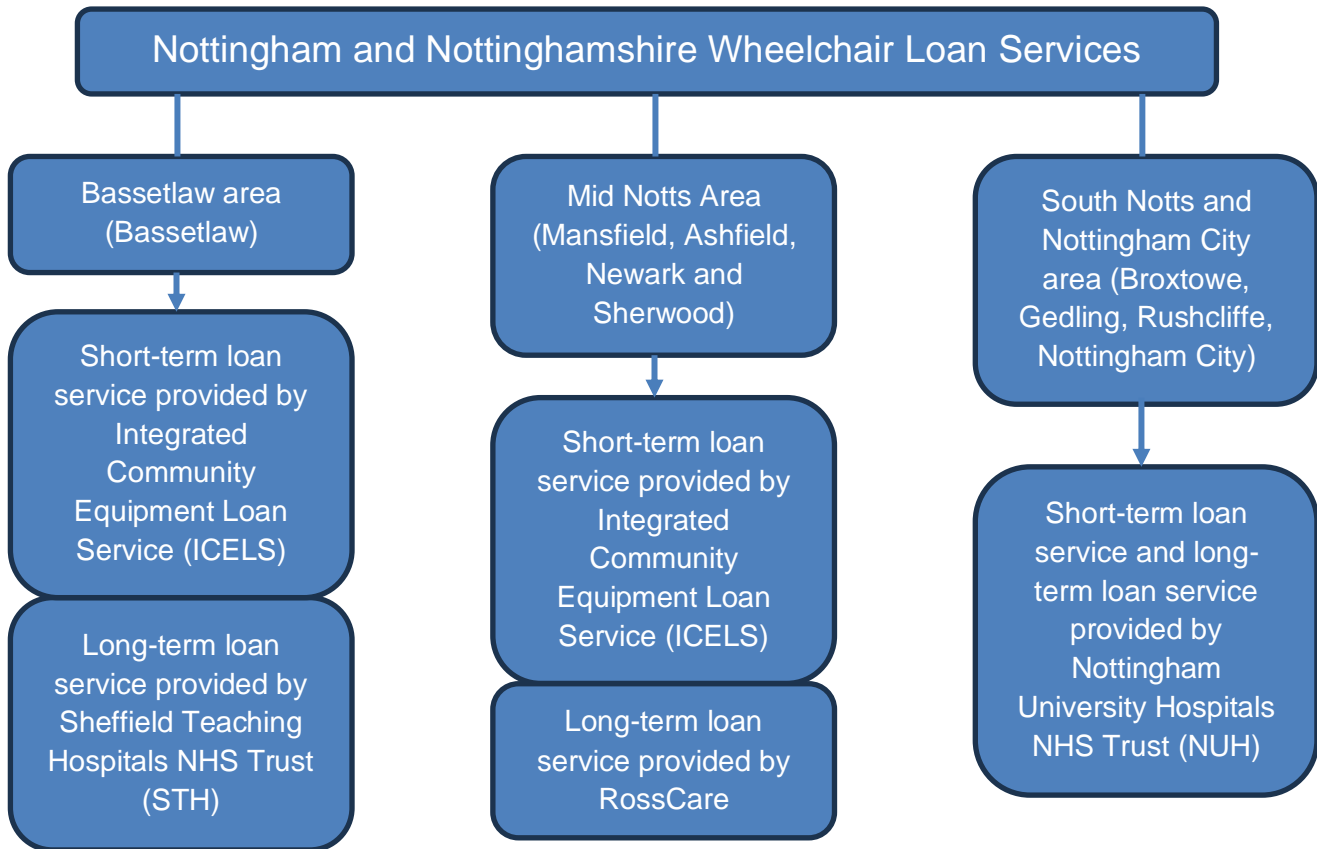
The Community Transformation Team would like to thank everyone who supported and/or were involved in this engagement. If there are any queries, please contact us via our shared inbox at nnicb-nn.communitytransformation@nhs.net.

4. Background

There are historic differences in wheelchair services provided across Nottingham and Nottinghamshire due to changes in commissioning bodies across the area. A review of Nottingham and Nottinghamshire Wheelchair services is being conducted to assess wheelchair services and whether the difference in services creates inequity across Nottingham and Nottinghamshire.

Wheelchair services across the Nottingham & Nottinghamshire area are provided by four different providers.

A breakdown of the different Nottingham & Nottinghamshire areas, and their corresponding wheelchair loan services.



2.1 Aims and Objectives

The aims of the engagement were:

- To understand what works well in Nottingham & Nottinghamshire wheelchair services for citizens/carers and professionals.
- To understand what citizens/carers and professionals would like to change about Nottingham & Nottinghamshire wheelchair services.
- To understand any barriers to citizens/carers in accessing wheelchair services.
- To understand barriers experienced by professionals in working with or within wheelchair services.
- To identify any inequity in wheelchair provision across the Nottingham & Nottinghamshire area.

3. Engagement Exercise

The outputs of the engagement exercise will be used to inform the system wide review and develop recommendations for Nottingham and Nottinghamshire wheelchair services.

3.1 Engagement Methods

Engagement activities were conducted to include citizens/carers and professionals from any sector that work within wheelchair services, refer into wheelchair services, or interact with wheelchair services to share their experiences of wheelchair services currently being provided within Nottingham and Nottinghamshire. The approaches used to capture the responses included the following:

- Online surveys
 - one for citizens and carers (appendix 1), and one for professionals (appendix 2)
- Focus groups
 - One for citizens and carers, and one for professionals (notes can be found in appendix 3)
- Group discussions
- Individual conversations
- Conversations during service visits

Online surveys were available from Friday 29 February 2024 and concluded on 25 March 2024. In total 111 surveys were completed, 66 were completed by citizens/carers and 45 by health and care professionals. The surveys were only provided in English and no requests were made for copies in different languages. The option to request paper copies of the survey was available. No paper copies were requested.

A combination of multiple choice, short answer, satisfaction scale and long answer questions were used. Multiple choice and short answer questions allowed for quantification of the scope of the engagement across the different Nottingham and Nottinghamshire services and identified the types of professionals that had responded. Satisfaction scales were utilised to highlight the satisfaction with specific elements of the services. There were three open questions in each survey, to provide qualitative data to support the understanding of the lived experience of individuals accessing and working for/with wheelchair services.

3.2 Distribution methods

Surveys were distributed virtually across communication channels for example:

- Community groups.
- Meetings that bring together health and care professionals.
- General Practice (GP) bulletins.
- Community and Voluntary Sector (CVS) newsletters.
- Social media.
- NHS Nottingham and Nottinghamshire ICB Website.
- Newsletters

Further methods were used to support engagement with professionals, citizens, and carers. These were:

- Visiting each service
- Two focus groups: one for professionals and another for citizens and carers
- Individual and group conversations with professionals

4. Survey Findings

4.1 Professionals

There was a total of 45 responses collected from professionals. All the professionals that responded were happy to proceed knowing the survey contained questions where you can write freely, and their response may be shared with other services.

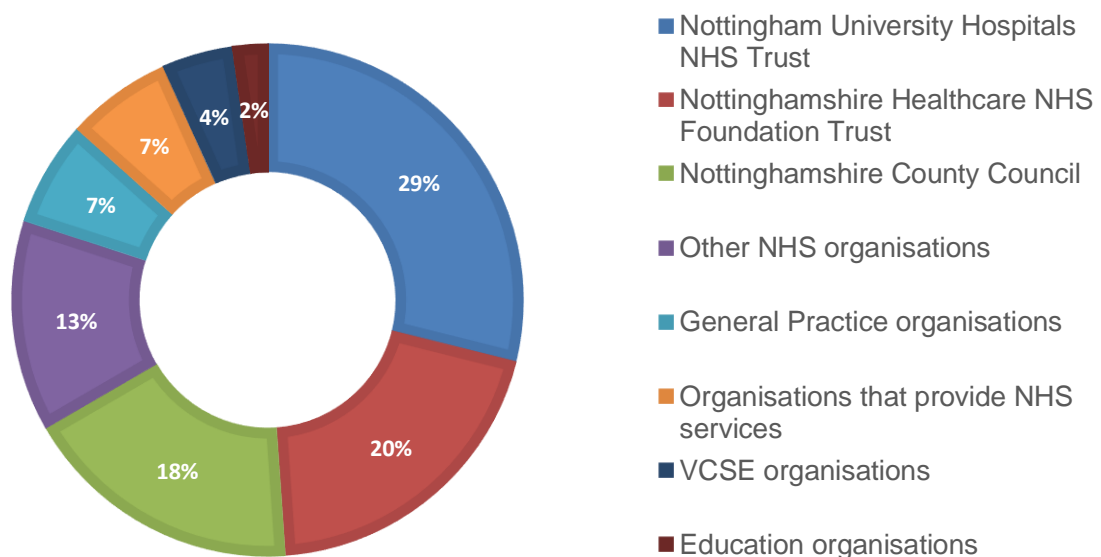
4.1.1 Demographic Profile

Demographic information was not collected from the survey targeted to professionals.

4.1.2 Overview of Respondents

Details of the background of professionals who completed the questionnaire can be found in the graphs below.

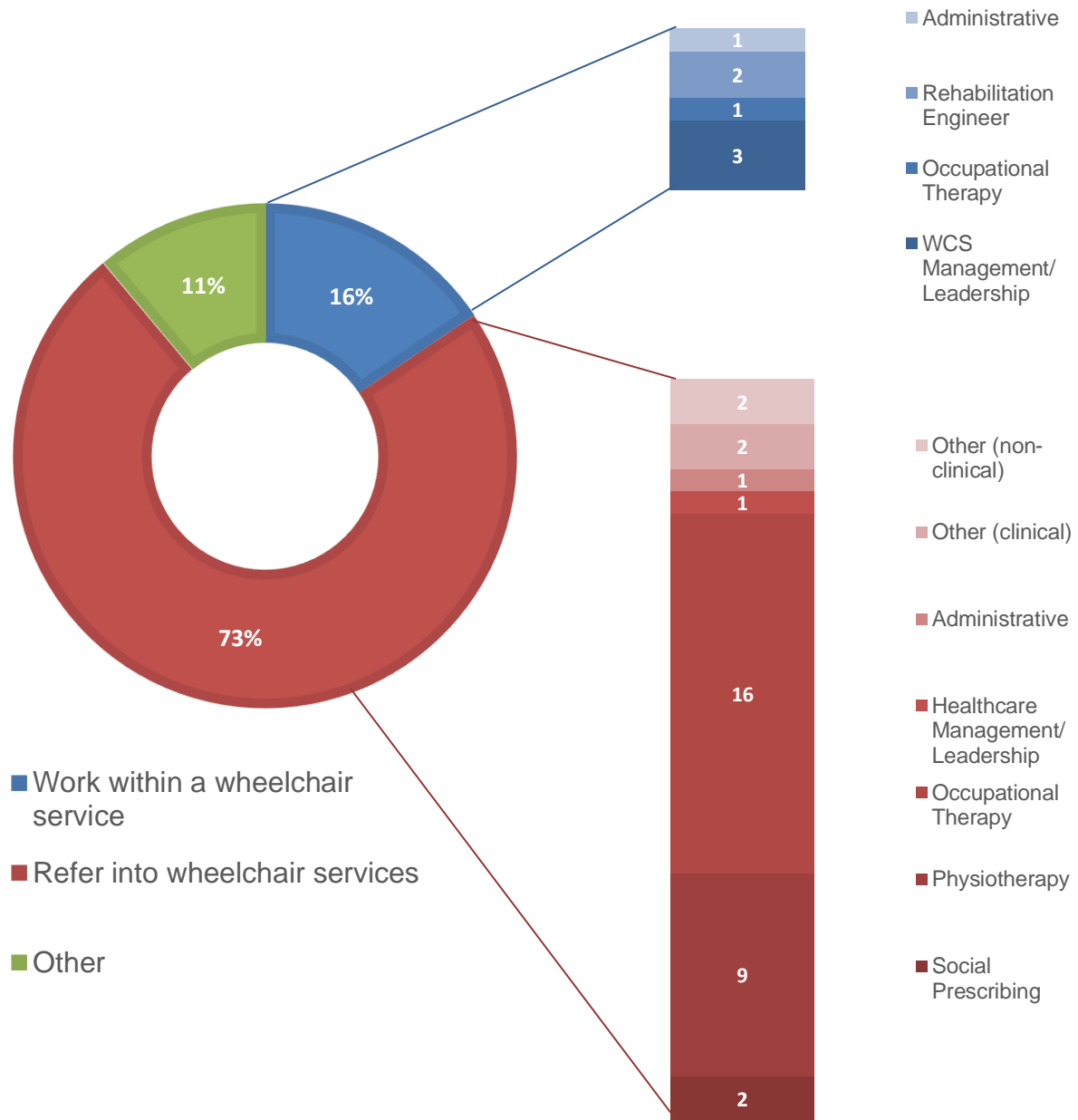
Graph 1: Organisations of respondents



There was at least one respondent from three of the four organisations providing wheelchair services to Nottingham and Nottinghamshire citizens. There were no respondents from the long-term loan service in the Mid-Nottinghamshire area (Mansfield, Ashfield, Newark and Sherwood), provided by RossCare.

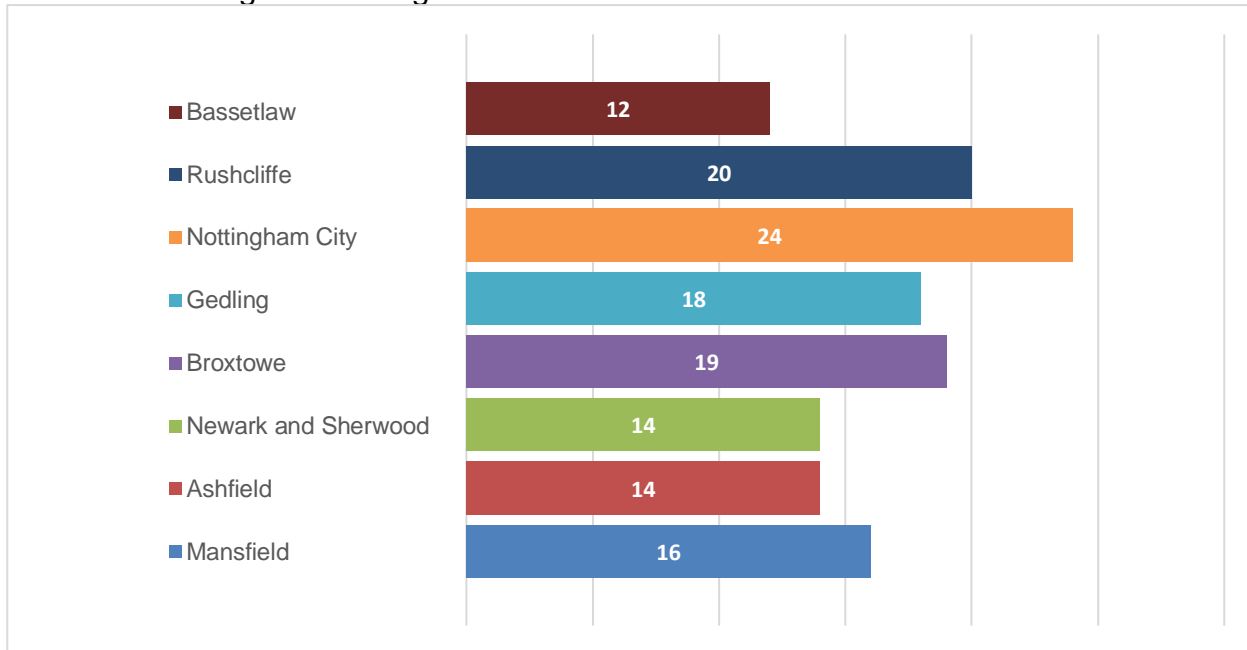
Graph 2: The job roles of the respondents and how they relate to wheelchair services.

There were 5 respondents who did not work within a wheelchair service or refer (or support referral) into wheelchair services. These 5 respondents have a mix of clinical and non-clinical roles that involve interacting with wheelchair service users in various ways. This included providing transport to wheelchair users, working in educational settings with children that use wheelchairs, and supporting management of long-term complex conditions.



Graph 3: The geographical area covered by respondents.

Out of the 45 respondents to the professional survey, there were at least 12 respondents working in each geographical district in Nottinghamshire. There were 27 respondents that worked across multiple areas. 2 of the respondents specified that they also worked in areas outside of Nottingham/Nottinghamshire.



4.1.3 Response to Survey: Supporting Patient Choice

Professionals that work within wheelchair services were asked what extent they agreed with two statements. Statement A: 'I feel supported to provide patients and service users with the right information regarding the personal wheelchair budget and related funding they can access.' and statement B: 'I support patients to think about the choices they have in relation to their wheelchair and/or related funding.' One respondent disagreed with both statements, one respondent agreed to statement B and answered neutrally to statement A. The remaining 5 respondents agreed or strongly agreed with both statements.

4.1.4 Response to Survey: 'What do you think works well in wheelchair services for patients and service users?'

43 professionals responded to this question. There were 4 individuals who responded to this question by identifying improvements that could be made, these responses have been included in section 4.4. The main themes identified of what works well in wheelchair services in Nottingham & Nottinghamshire were:

- Efficiency of the service (6 responses)
- Personalised care is demonstrated within the service (12 responses)
- Accessibility of the service, including physical accessibility, ease of access for referrals and ability to contact the service (15 responses)
- Existence of a service that caters specifically to wheelchair users. (4 responses)
- Positive behaviour and attitudes of staff (9 responses)
- Servicing and maintenance arrangements (4 responses)
- Thoroughness of assessments. (3 responses)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“Efficiency of the wheelchair team to provide an effective level of Patient care within current budget restraints”

“Holistic approach in empowering our clients to make decisions in their best interests and promoting independence. Providing postural assessments to ensure health and wellbeing and where possible prolonged quality of life.”

“The referral system is easy to use and standard wheelchairs are actioned and sent out relatively quickly. The staff working at Wheelchair Services are accessible to discuss more complex cases.”

“A dedicated service to assess and measure for wheelchairs”

“Experienced, skilled, approachable staff. Good facilities at Mansfield Community Hospital.”

“Provided with a free wheelchair that is serviced and repaired if broken”

“The chairs people receive are well assessed for.”

4.1.5 Response to Survey: 'If you could change anything about wheelchair services, what would you change for patients and service users?'

42 professionals responded to this question. The main themes identified of what professionals would change in wheelchair services in Nottingham & Nottinghamshire were:

- Efficiency of the service (24 responses)
- Joined up care between wheelchair services and other services to provide personalised care (15 responses)
- Accessibility of the service, including physical accessibility, ease of access for referrals and ability to contact the service (4 responses)
- The transparency and quality of eligibility criteria, pathways and assessments (6 responses)
- Disparity between wheelchair services across the Nottingham & Nottinghamshire area (3 responses)
- Servicing and maintenance arrangements (3 responses)
- The variety and quality of equipment provided (4 responses)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“The wait times, my pupils seem to wait an extended amount of time for a wheelchair, many, many months. This has impacted on their attendance and as a result their education and progress...”

“...Having a clear agreement that facilitates good joint working with HCP’s who know a service user/patient well, so that clinician can support the appointment if it is in the person’s best interests, (or when the patient has capacity, that the patient is in agreement). Relevant mainly for people with complex needs. This would allow more effective problem solving and best interests’ decisions...”

“Availability with Patient Transport to allow part time wheelchair users to access it - they are more likely to need a wheelchair for long or stressful days such as visiting hospital...”

“...Less restrictive criteria for power chair provision. Improved signposting and support to other providers if criteria not met. Improved communication / shared access to electronic records for better outcomes”

“Make provision of certain equipment/range of equipment the same across all areas to prevent confusion for clients and other health professionals/referrers”

“Prompt repair if a problem occurs with a user's wheelchair.”

“Wider range of chairs to be available- lighter weight, more customised, tilt in space wheelchairs to be provided before patients have left hospital to support rehab, seen sooner...”

4.1.6 Response to Survey: ‘Is there anything else you would like to tell us?’

25 professionals responded to this question. Many of the responses echoed the themes of previous questions, while providing further context. The main themes identified were:

- A need for increased training and education for healthcare professionals, service users and carers (5 responses)
- A desire for improved referral processes and relationships with referrers (7 responses)
- A need for increased variety in equipment or clearer signposting for service users to appropriate alternatives (5 responses)
- Positive behaviour and attitudes of wheelchair service staff (3 responses)
- A need for improved efficiency through increased resources and joined up care (6 responses)
- Provision of wheelchairs in the wider region is not equitable (1 response)
- The importance of physically accessible services (1 response)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“We would welcome shared training on postural management to ensure that all professionals working towards these goals within the ICB have the same understanding...”

“I think the referral and re referral process is laborious... It also wastes my time to fill in the entire referral form again to re refer a patient that is still on your system whose wheelchair needs reviewing...”

“...Ideally, would like to have the cost of provision eliminated for the likes of battery packs for carers who struggle to push.”

“When I have made referrals to the Mobility Centre, staff are always very friendly and quick to resolve my queries.”

“Increase funding. Increase staff to enable more appointments. More specialist adaptations are needed - need more specially trained staff and resources to do this”

“Patchy provision across the East Midlands. For out-of-area patients (Derbys, Lincs, Leics, and North Notts), we're unable to lend them one of our NUH interim wheelchairs so they sometimes have to go home just transferring between bed and commode until their long-term wheelchair is delivered.”

4.2 Citizens and Carers

There was a total of 66 responses collected from citizens and carers. 63 of the citizens and carers that responded were happy to proceed knowing the survey contained questions where you can write freely, and their response may be shared with other services.

4.2.1 Demographic Profile

The demographic profile detailed is based on the information provided by citizen and carer respondents.

Gender

62 respondents chose to answer this question. Of those, 62% described themselves as female with 33% describing themselves as male. The remaining 3% (2 individuals) described themselves as trans masculine and non-binary.

Relationship status

61 respondents chose to answer this question which related to their relationship status. 44% described themselves as single, 41% described themselves as married, 7% described themselves as living with their partner, 6% described themselves as widowed and 2% described themselves as divorced.

Sexual orientation

56 respondents answered this question which related to their sexual orientation. 82% described themselves as heterosexual or straight, 9% described themselves as asexual, 7% described themselves as bisexual and 2% described themselves as lesbian or gay woman.

Pregnancy and maternity leave

60 respondents answered the question relating to pregnancy and maternity leave. Only 1 (2%) respondent was noted as being pregnant, on maternity leave or returning from maternity leave.

Ethnicity

60 respondents answered this question which related to their ethnicity. 80% described themselves as White (73%: English, Welsh, Scottish, Northern Irish or British; 7% any other white background). 17% described themselves as Black, Black British, Caribbean, or African (10%: African; 7% Caribbean). 2% described themselves as Mixed or Multiple ethnic groups: White and Black African, and 2% as Asian or Asian British: Pakistani.

Religion

57 respondents answered the question relating to their religion. 49% described themselves as having no religion, 47% as being Christian, 2% as being Spiritualist and 2% as being Buddhist.

Disabilities and health conditions

There were three questions relating to disabilities and health conditions.

61 of the respondents answered this question. 18% described themselves as having no disability, 52% described themselves as having multiple types of disability and 30% described themselves as having one type of disability. Relating to the type of disability reported: 75% had physical disabilities, 18% had a disability relating to a mental health condition, 13% described themselves as neurodivergent (including autism), and 10% had learning disabilities.

63 respondents answered the question relating to whether they had any physical or mental health conditions expected to last 12 months or more. 83% of respondents reported that they did and 17% of respondents did not.

59 respondents answered the question about the extent to which their conditions or illnesses reduce their ability to carry out day-to-day activities. 58% reported their illnesses/conditions impacted their ability to carry out daily activities a lot, 22% reported it impacted them a little and 20% reported that their illnesses/conditions did not impact their ability to carry out daily activities.

Carers

62 respondents answered the question relating to whether or not they were a carer. 53% said they were not a carer, 40% described themselves as a carer providing unpaid support and 7% described themselves as paid carers.

Age

62 respondents answer the question relating to their age. The data collected is shown in table 2.

Table 2: The number and percentage of respondents that fall into specified age bands.

Age band	Number of respondents	Percentage of respondents
Under 16	6	10%
16-24	4	6%
25-34	14	23%
35-44	14	23%
45-54	12	19%
55-64	5	8%
65-74	5	8%
75-84	2	3%

Question: 'How satisfied are you with the arrangements in place to collect your views?'

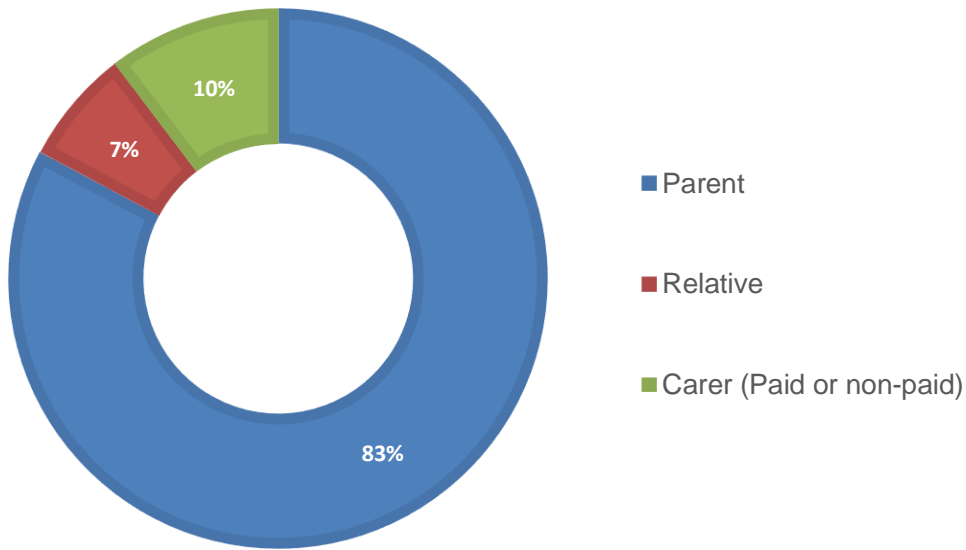
60 respondents answered this question. 57% were satisfied, 28% were neither satisfied or dissatisfied, 8% were dissatisfied and 7% were not sure.

4.2.2 Overview of Respondents

Details of the background of the citizen and carer respondents who completed the questionnaire can be found in the graphs below.

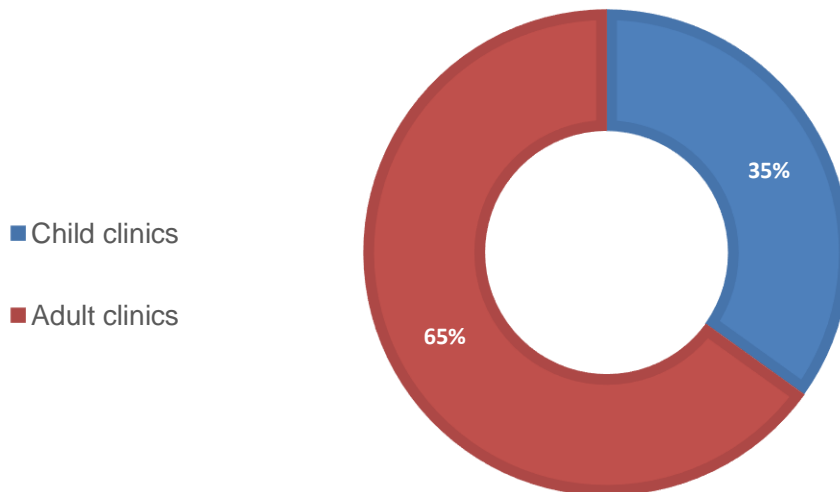
Graph 5: The relationship between the respondent and wheelchair user

Of the 63 respondents, 34 (54%) completed the survey on behalf of themselves and 29 (46%) completed the survey on behalf of someone else. 24 of the respondents completing the survey on behalf of someone else were the parent of the wheelchair user, 2 were a relative other than a parent and 3 were carers (paid or non-paid).



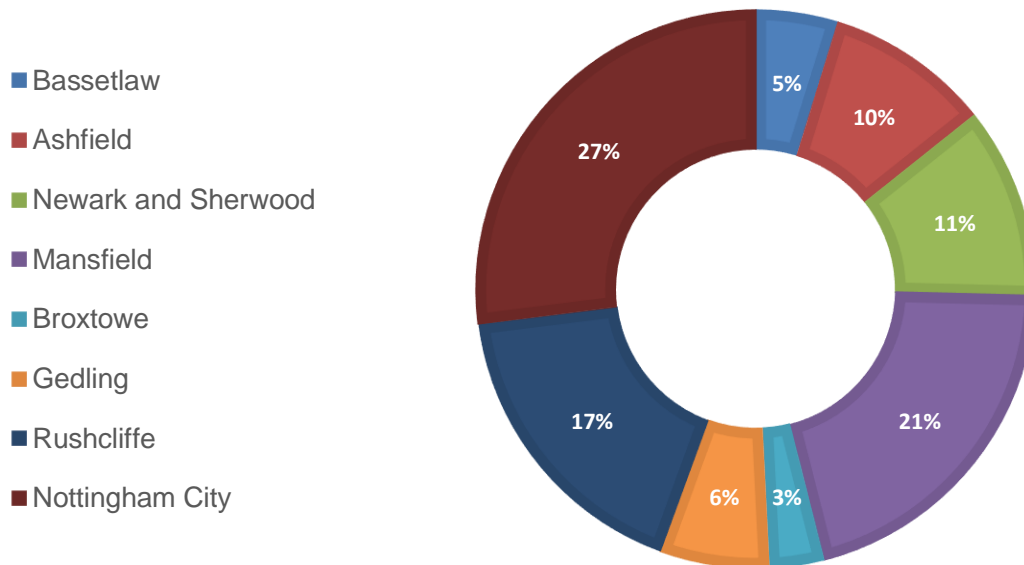
Graph 6: Whether respondents access child or adult clinics within wheelchair services

There were 41 survey responses about wheelchair service users that access adult clinics and 22 responses about wheelchair service users that access child clinics.



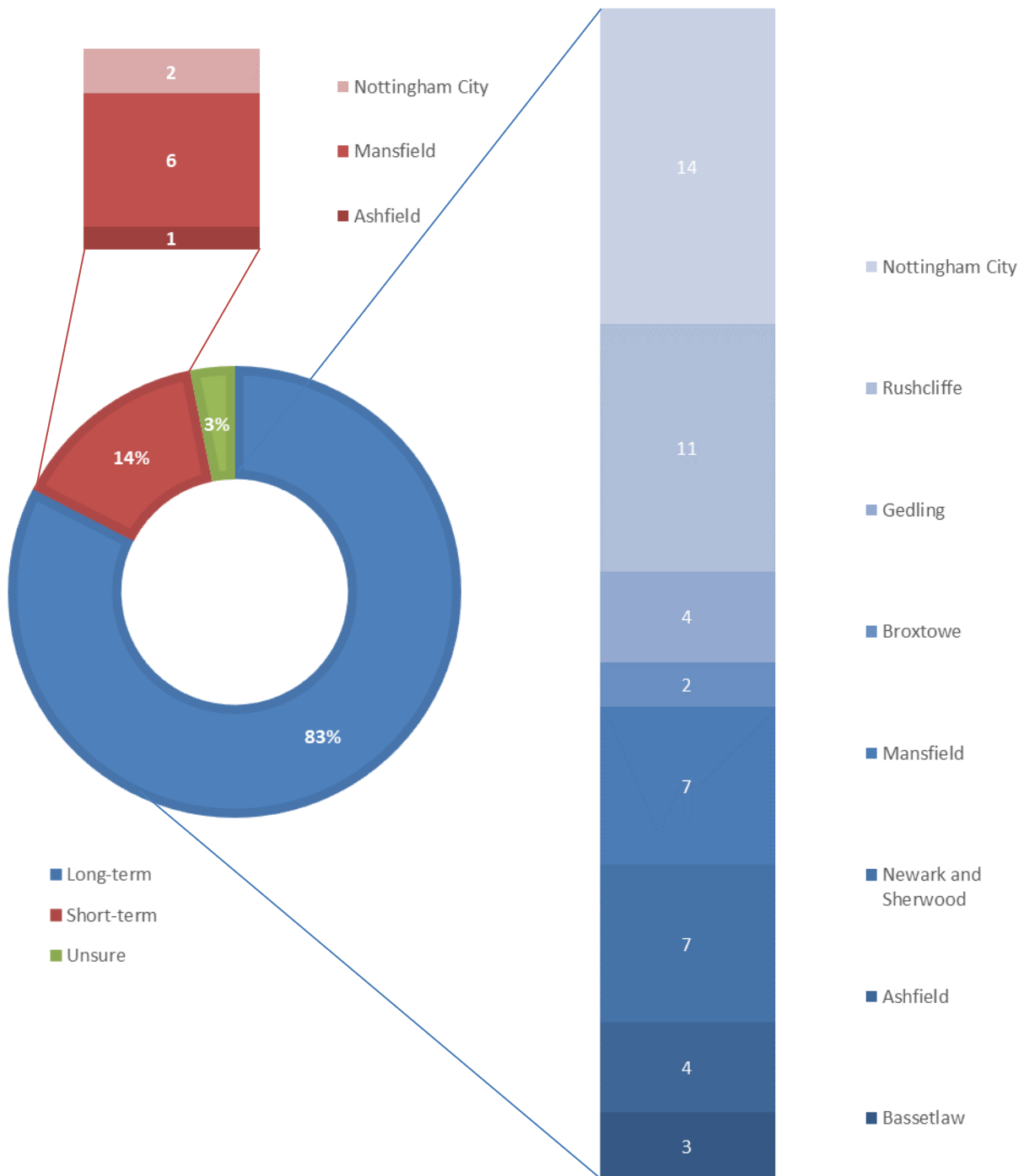
Graph 7: The locality of the services accessed by respondents.

At least 3 citizens or carers responded from each of the Nottingham & Nottinghamshire areas. In terms of wheelchair services, the wider Nottingham & Nottinghamshire area is split up into 3 distinct sections: Bassetlaw, Mid-Notts, and South Notts & Nottingham City. Mid-Notts comprises of Ashfield, Mansfield, Newark, and Sherwood. South Notts & Nottingham City includes the Broxtowe, Gedling, Rushcliffe, and Nottingham City Districts.

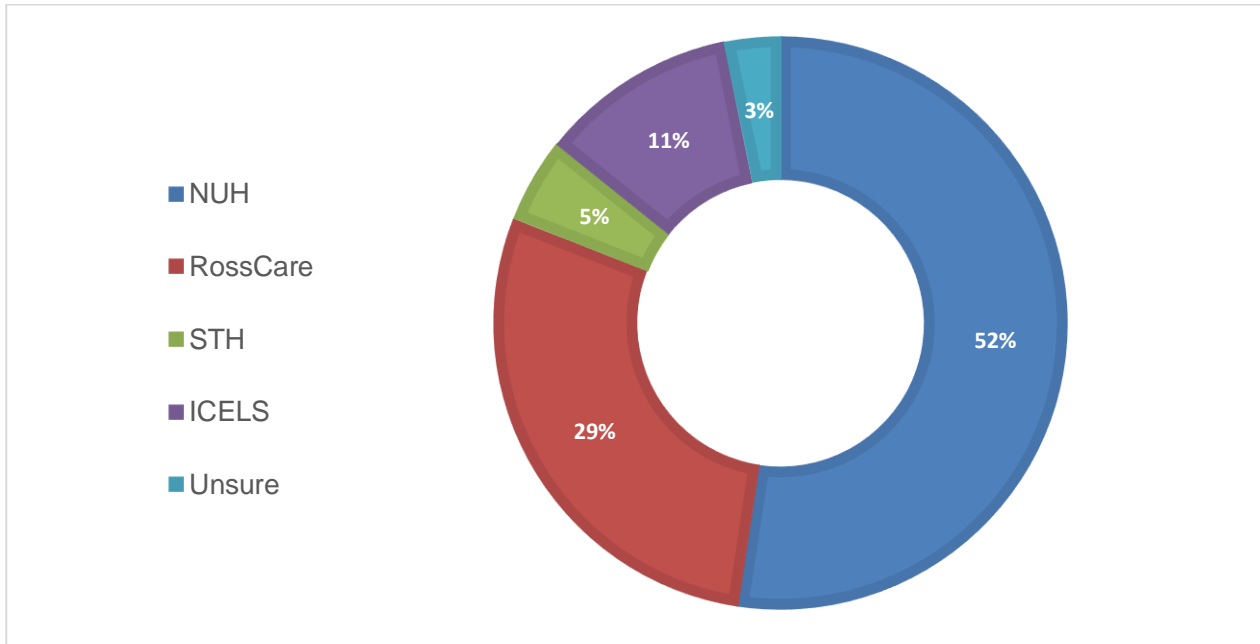


Graph 8 & 9: Wheelchair loan term and likely service accessed by respondents

Most respondents (52) accessed a long-term wheelchair loan service, with only 9 accessing short-term loan services. There were 3 respondents that were unsure of whether they had a short-term or long-term loan wheelchair. The locality of the respondents suggests that there were at least 2 respondents that access each of the four different wheelchair services across Nottingham & Nottinghamshire.

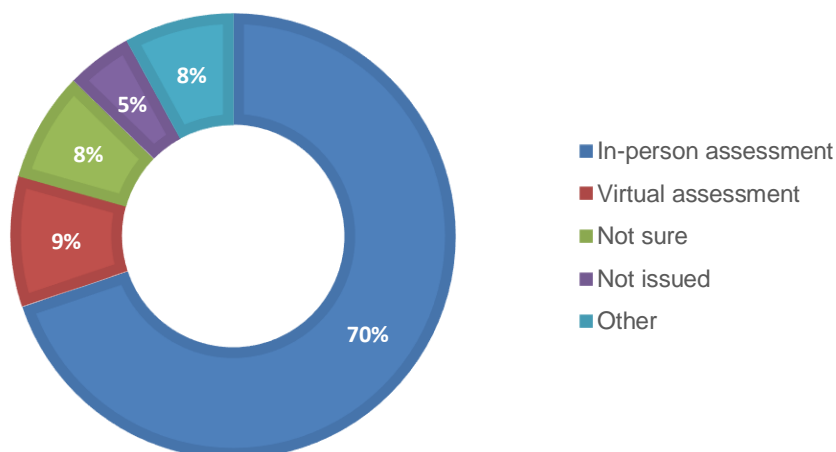


According to the loan-term length and GP postal code area, 33 of the respondents access NUH wheelchair services with at least 2 of these accessing the short-term loan part of the service. 18 respondents likely access RossCare, 3 likely access STH and 7 likely access ICELS. Of the 2 respondents that were unsure of their wheelchair loan term, 1 most likely accesses NUH services and the other likely accesses either RossCare or ICELS, depending on loan length. The most likely service accessed is illustrated in the following pie chart.



Graph 10: Assessment type

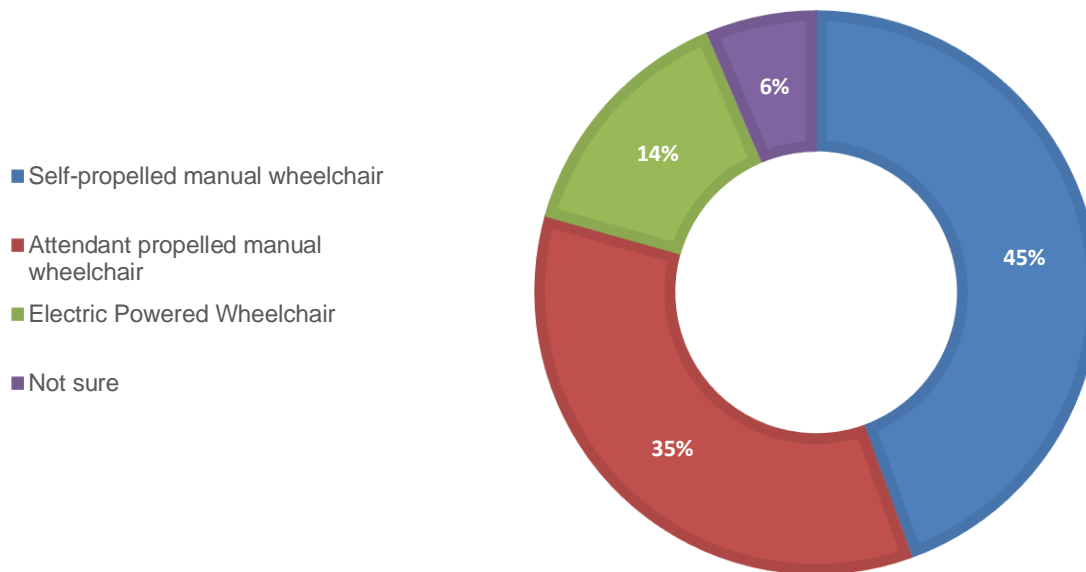
To be issued with a wheelchair, individuals must be assessed to ensure they receive the correct type of wheelchair. Most respondents (44) were issued with a wheelchair after an in-person assessment, 6 after a virtual assessment, 5 were not sure how they were issued with their wheelchair and 3 were not issued with a wheelchair at all. 5 respondents described their assessment type as other and listed: a mobility scheme, being an in-patient in hospital, self-funding, and urgent upgrades after malfunctioning, as the circumstances that led them to be issued with a wheelchair.



Graph 11: Type of wheelchair

28 respondents were issued with a wheelchair that is self-propelled (pushed by the person in the wheelchair), 22 were issued with an attendant propelled wheelchair or buggy (a buggy or wheelchair that requires someone else to push it), 9 respondents were issued with an

electric powered wheelchair and 4 respondents were not sure what type of wheelchair they were issued with.



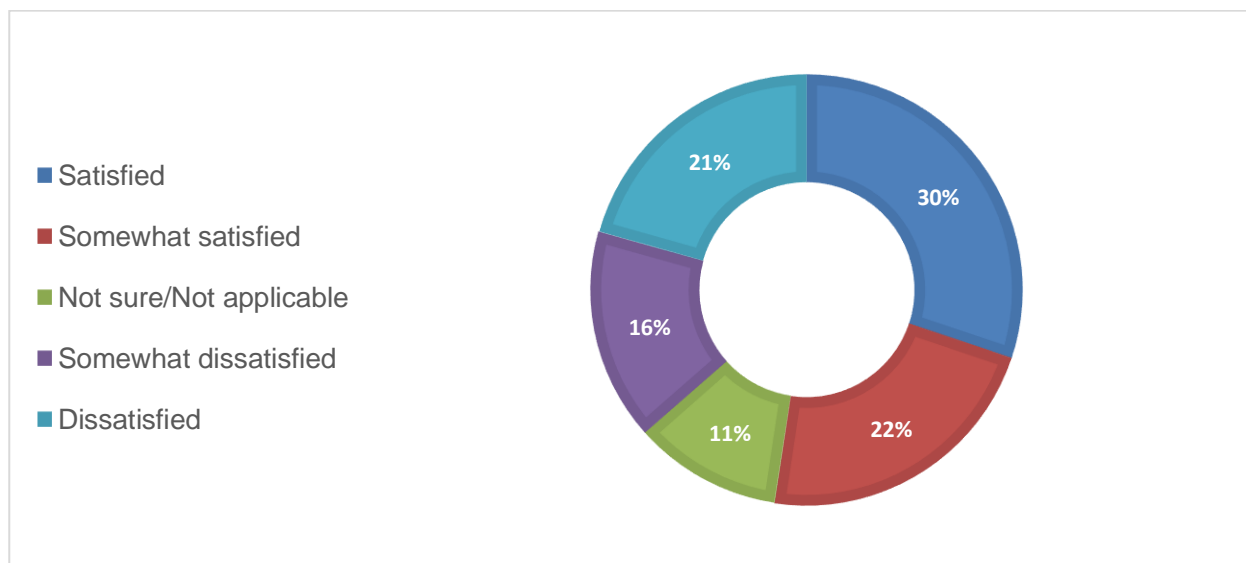
In addition to the type of wheelchair issued to them, respondents were also asked if their wheelchairs had any specialised seating for postural needs or additional modifications that required them to attend clinic. 40% of respondents reported they had specialised seating for postural needs and 51% reported they had additional modifications to their wheelchair such as trunk supports, leg supports or a head rest. These answers were not mutually exclusive 32% of respondents reported having both and 46% of respondents did not have either specialised seating or additional modifications.

4.2.3 Response to Survey: Satisfaction of Service Users

Respondents were asked to rate their satisfaction of seven factors of their experience with wheelchair services within Nottingham & Nottinghamshire. For each of the factors, the ratings they could choose from were 'Dissatisfied', 'Somewhat dissatisfied', 'Not sure/Not applicable', 'Somewhat satisfied' or 'Satisfied'. The responses from the 63 citizen and carer respondents are detailed in the following graphs.

Graph 12: The time taken to receive their first appointment.

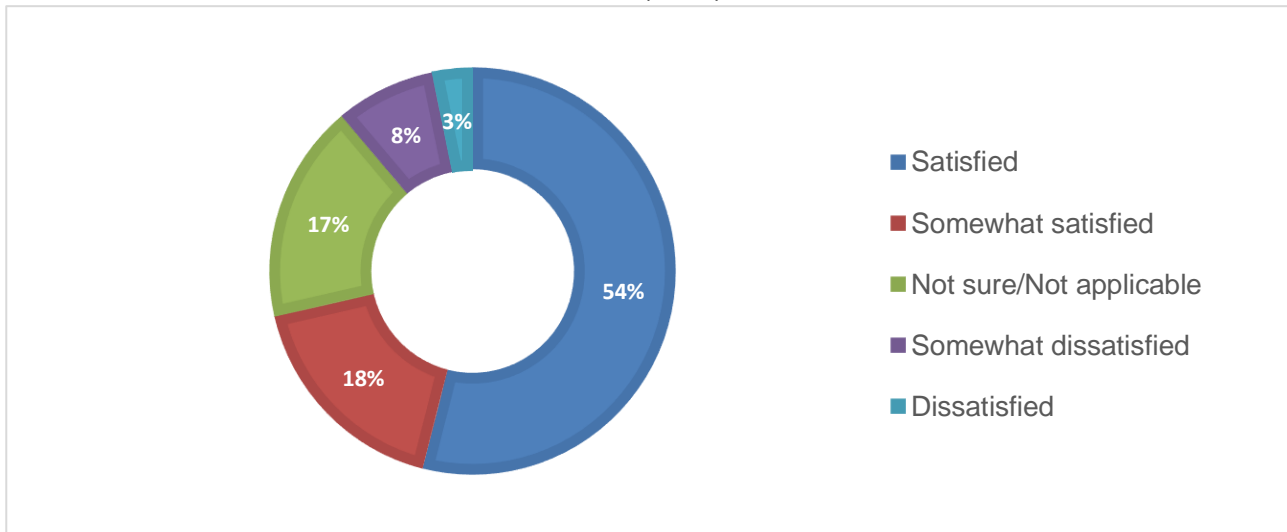
33 respondents were satisfied or somewhat satisfied with the amount of time it took to receive their first appointment after their referral to wheelchair services, 7 answered not sure or not applicable and 23 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with the time took to receive their first appointment had a GP in the Bassetlaw area. 2 (66%) respondents from the Bassetlaw area were satisfied or somewhat satisfied. 13 (50%) out of the 26 respondents that likely access Mid-Notts wheelchair services were dissatisfied or somewhat dissatisfied and 12 (46%) were satisfied or somewhat satisfied. 10 (30%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 19 (58%) were satisfied or somewhat satisfied.



Graph 13: The accessibility of the clinic and waiting room areas.

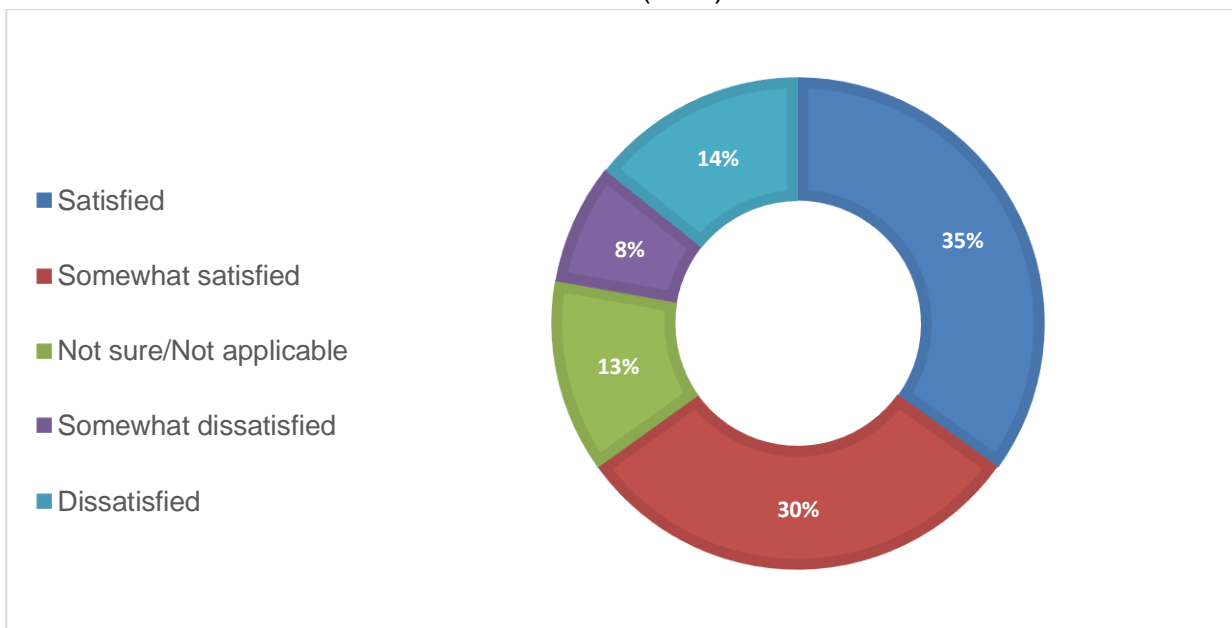
55 respondents were satisfied or somewhat satisfied with the accessibility of the clinic and waiting room areas of Nottingham & Nottinghamshire wheelchair services, 11 answered not sure or not applicable and 7 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with the accessibility of the clinic and waiting room areas had a GP in the Bassetlaw area. 2 (66%) respondents from the Bassetlaw area were satisfied or somewhat satisfied. 4 (15%) out of the 26 respondents that likely access Mid Notts wheelchair services were somewhat dissatisfied, and 22 (85%) were satisfied or somewhat satisfied. 3 (9%) out

of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 21 (64%) were satisfied or somewhat satisfied.



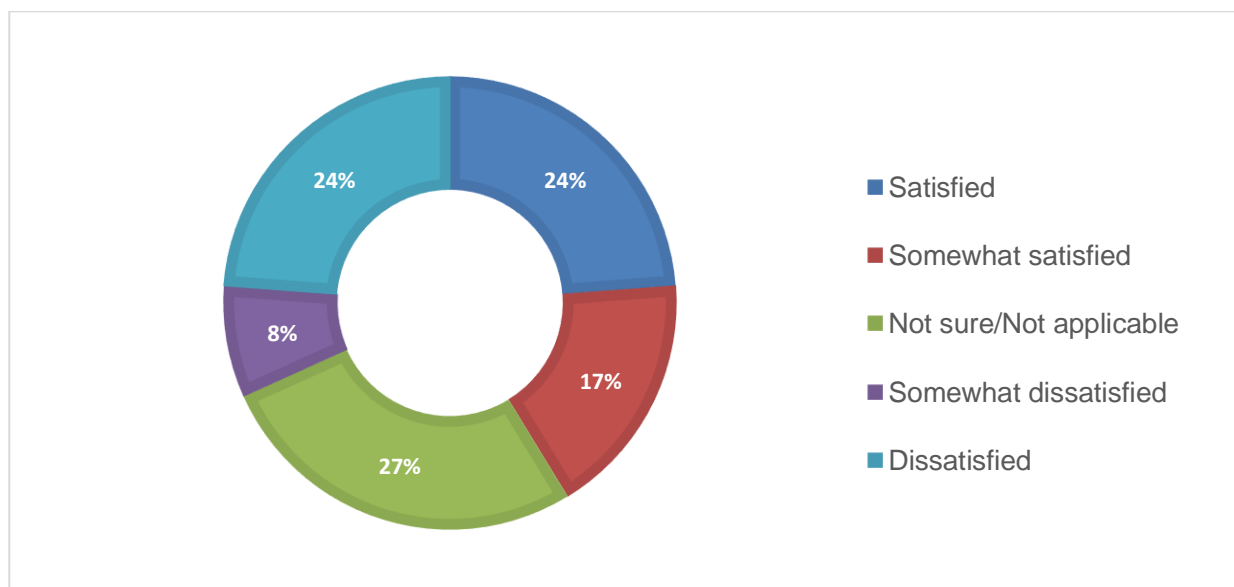
Graph 14: Their involvement in decisions about their/ the service user's care.

41 respondents were satisfied or somewhat satisfied with their involvement in decisions about the wheelchair users care, 8 answered not sure or not applicable and 14 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with their involvement in decisions about the wheelchair users care had a GP in the Bassetlaw area. 2 (66%) respondents from the Bassetlaw area were satisfied or somewhat satisfied. 6 (23%) out of the 26 respondents that likely access Mid Notts wheelchair services were dissatisfied or somewhat dissatisfied, and 18 (69%) were satisfied or somewhat satisfied. 7 (21%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 21 (64%) were satisfied or somewhat satisfied.



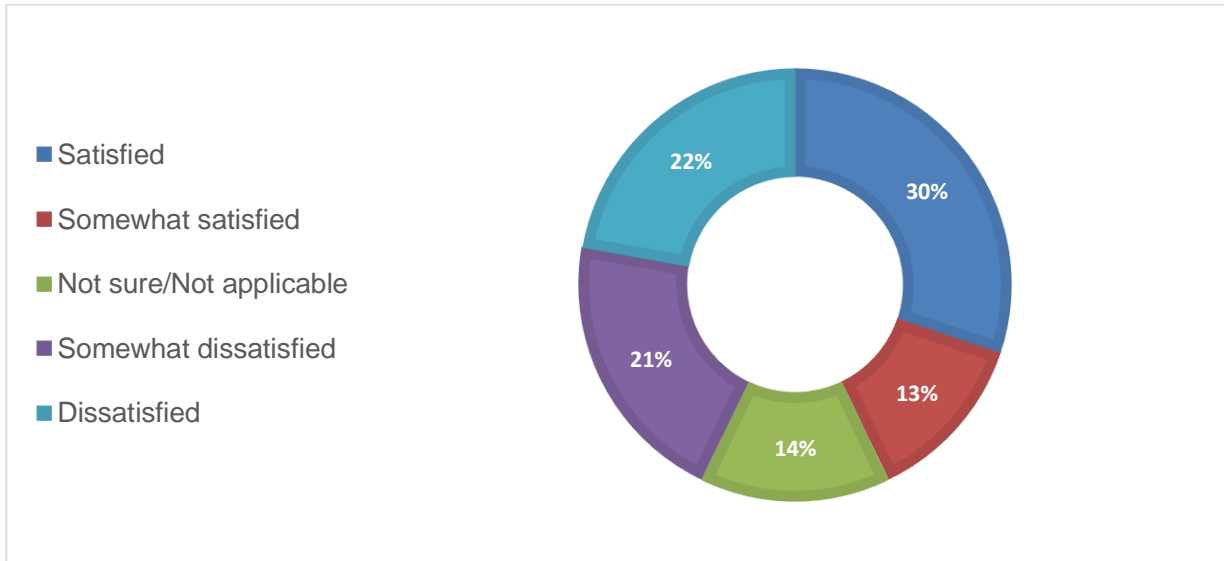
Graph 15: The discussion that staff had with them about the Personal Wheelchair Budget or other funding options.

26 respondents were satisfied or somewhat satisfied with the discussion had with them about the personal wheelchair budget or other funding options, 17 answered not sure or not applicable and 20 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with the discussion had with them about the personal wheelchair budget or other funding options had a GP in the Bassetlaw area. 1 (33%) respondent from the Bassetlaw area was satisfied or somewhat satisfied. 9 (35%) out of the 26 respondents that likely access Mid Notts wheelchair services were dissatisfied or somewhat dissatisfied, and 13 (50%) were satisfied or somewhat satisfied. 11 (33%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 12 (36%) were satisfied or somewhat satisfied.



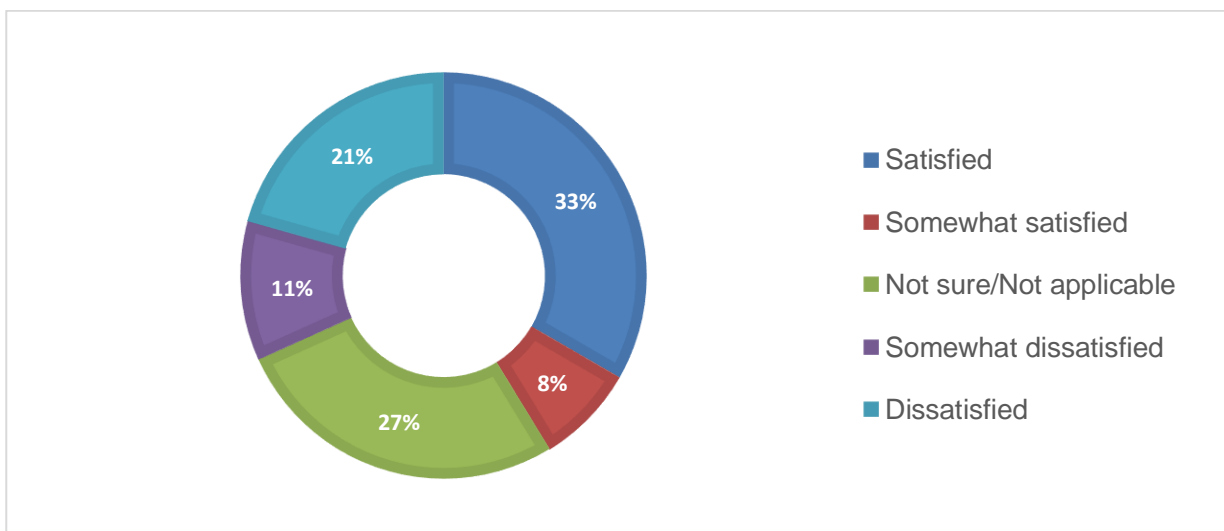
Graph 16: The time taken to receive equipment after assessment.

27 respondents were satisfied or somewhat satisfied with the time taken to receive their wheelchair, 9 answered not sure or not applicable and 27 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with the time taken to receive equipment had a GP in the Bassetlaw area. 2 (66%) respondents from the Bassetlaw area were satisfied or somewhat satisfied. 15 (58%) out of the 26 respondents that likely access Mid Notts wheelchair services were dissatisfied or somewhat dissatisfied, and 11 (42%) were satisfied or somewhat satisfied. 12 (36%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 14 (42%) were satisfied or somewhat satisfied.



Graph 17: The service received for repairs or component replacement and delivery.

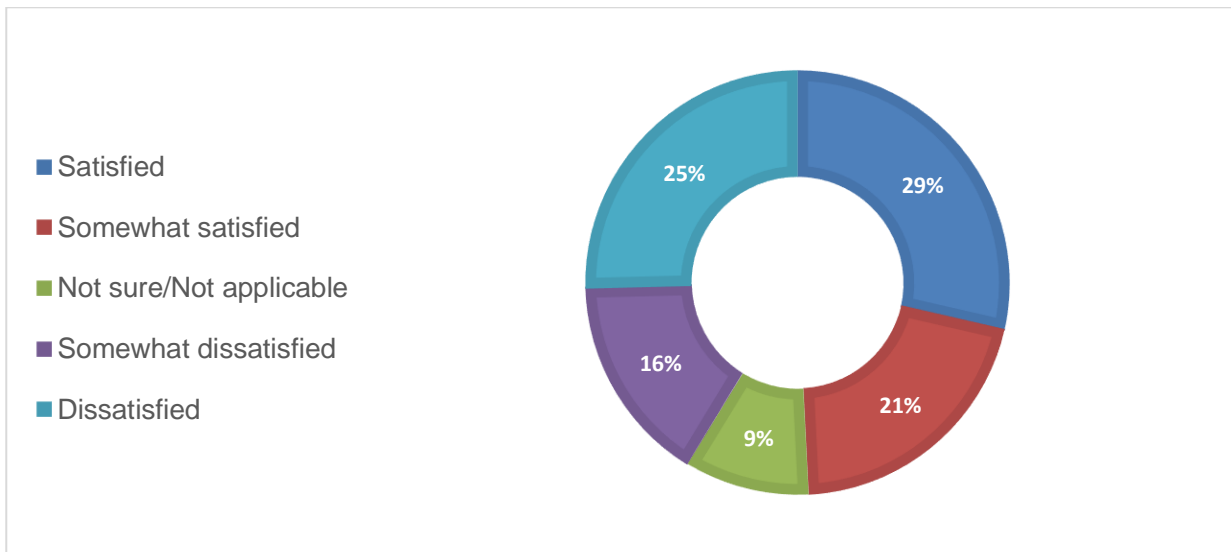
26 respondents were satisfied or somewhat satisfied with the arrangements in place for servicing and maintenance of their wheelchair, 17 answered not sure or not applicable and 20 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied the arrangements in place for servicing and maintenance of their wheelchair had a GP in the Bassetlaw area. 1 (33%) respondent from the Bassetlaw area was satisfied or somewhat satisfied. 12 (46%) out of the 26 respondents that likely access Mid Notts wheelchair services were dissatisfied or somewhat dissatisfied, and 11 (42%) were satisfied or somewhat satisfied. 8 (24%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 14 (42%) were satisfied or somewhat satisfied.



Graph 18: The overall experience with the wheelchair service.

31 respondents were satisfied or somewhat satisfied with their overall experience of Nottingham & Nottinghamshire wheelchair services, 6 answered not sure or not applicable

and 26 were either dissatisfied or somewhat dissatisfied. None of those dissatisfied with their overall experience, had a GP in the Bassetlaw area. 2 (66%) respondents from the Bassetlaw area were satisfied or somewhat satisfied. 12 (46%) out of the 26 respondents that likely access Mid Notts wheelchair services were dissatisfied or somewhat dissatisfied, and 12 (46%) were satisfied or somewhat satisfied. 13 (39%) out of the 33 that likely access South Notts & Nottingham City wheelchair services were dissatisfied or somewhat dissatisfied and 17 (52%) were satisfied or somewhat satisfied.



4.2.4 Response to Survey: 'What has gone well in your experience with Nottingham/Nottinghamshire Wheelchair Services?'

48 citizens & carers responded to this question. There were 3 individuals who responded to this question by identifying improvements that could be made, these responses have been included in section 4.10. The main themes identified of what works well in wheelchair services in Nottingham & Nottinghamshire were:

- Efficiency of the service (5 responses)
- Personalised care is demonstrated within the service (8 responses)
- Accessibility of the service, including ability to contact the service (2 responses)
- Existence of a service that provides wheelchairs (7 responses)
- Positive behaviour and attitudes of staff (11 responses)
- Servicing and maintenance arrangements (3 responses)
- Quality and variety of equipment. (5 responses)
- Everything (5 responses)
- Nothing (5 responses)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“Wheelchair services have been lovely, very fast turn around”

“My son has been quadriplegic since birth, he got his 1st wheelchair aged 2yrs when a standard pram couldn’t support his postural needs. He is now 23yrs old and has always had a tilt in space wheelchair frame and a moulded seat with a specialist headrest support, all provided from SOS (Specialised Orthotic Services) through the NHS. The service we have received over the years has always been excellent...”

“Usually able to contact relatively easily.”

“I have a wheelchair which means I can be independent”

“Excellent staff who go above and beyond to advise and make my child feel at ease in the appointment.”

“Repairs are quick and easy to arrange at home. I was able to change to a better wheelchair for my needs.”

“...The quality of the wheelchair is very good and meets dads needs”

“Everything really. I had little stress with their services”

“Nothing really”

4.2.5 Response to Survey: ‘If you could change anything about your experience with Nottingham/Nottinghamshire Wheelchair Services what would this be?’

50 citizens & carers responded to this question. The main themes identified of what professionals would change in wheelchair services in Nottingham & Nottinghamshire were:

- Efficiency of the service (17 responses)
- The service should make care more personalised (12 responses)
- Accessibility of the service, including physical accessibility and ability to contact the service (4 responses)
- Nothing (4 responses)
- Servicing and maintenance arrangements (12 responses)
- Education and information shared with citizens and carers (5 responses)
- Suitability and quality of eligibility criteria and/or equipment issued (7 responses)
- Suitability of facilities (2 responses)
- Increased resources (2 responses)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“I have been referred twice by my GP surgery and measured twice (by my GP surgery) and then I’ve never been contacted. The surgery said there was a long wait due to covid. That was in 2020/2021. I don’t understand what has gone wrong...”

“Yes I should have been treated with respect, my personal circumstances should have been taken into account, so that I did not feel a ‘Reject and a Nobody!’”

“A home visit please there's no certainty of being able to park.”

“Everything is okay”

“I have had 4 visits for the same breakdown having to take time away from work to be at home for them to fix it and could not be fixed as they brought the wrong part. Then they rounded off a bolt and it cannot now be fixed without being taken into the workshop which means I will not be able to drive my car and will have no means of transport.”

“Improved communication with people who need a wheelchair on services offered including a flowchart with rough timelines for assessment and provision of equipment...”

“Change eligibility criteria so that semi-ambulatory/not paralysed people can receive an appropriate electric or lightweight/active self propelling wheelchair...”

“The service doesn't seem very child friendly, in both location/setting - first time we accessed the service our child was quite young and felt a bit uneasy in such an adult focussed environment..”

“More funding to allow more clinics and staff.”

4.2.6 Response to Survey: ‘Please use the box below to tell us anything else that you would like to share’

32 citizens & carers responded to this question. Many of the responses echoed the themes of previous questions, while providing further context. The main themes identified were:

- Changes to servicing and maintenance arrangements (5 responses)
- Approachable staff (2 responses)
- The need to promote personalised care (10 responses)
- Increasing communication and information sharing with citizens & carers and between wheelchair services and other services (4 responses)
- Difficult review and referral processes (3 responses)
- Inflexible appointments (2 responses)
- A need to increase efficiency in wheelchair services (2 responses)
- A need for more resources for wheelchair services (2 responses)

Open questions were used in this section of the survey and more than one theme may have been present in each response. Quotes of responses to this question are shown below to provide context to the themes outlined.

“The engineers doing repairs don’t seem to have much knowledge, and it often takes 3-4 weeks for a repair to be completed. I’ve lived in 4 other parts of the UK and all 4 of those wheelchair service provisions were miles better than Nottinghamshire who just don’t seem to care if the wheelchair is causing pain or is broken leaving an otherwise independent adult housebound and unable to get out to work.”

“The staff themselves were knowledgeable and kind, and answered my questions.”

“...I feel that I would actually benefit from being able to move myself independently. Giving me an even better quality of life as I would gain some independence. I do appreciate the fresh air .”

“Feel that there is no communication between the clinicians and the wheelchair service... There is not much discussion with carers to help understand the world of wheelchairs. It would be ideal to have that conversation to help understand clearly how wheelchair world works”

“Process for reviewing unclear, who should we contact if we feel chair too small now etc”

“They cancel appointments and don't reschedule, they don't answer the telephone and people are left in limbo.”

“18 months to wait for a wheelchair that isn't suitable isn't fair or acceptable. I can't live without my wheelchair so i have to make do but I'm wrecking my arms and back in this broken chair and it's not suitable. But until they sort the new chair out I have little choice”

“More clinics, more regular reviews, more staff.”

5. Additional Engagement to Survey

5.1 Focus Group: Professionals

In addition to the online surveys, professionals also had the opportunity to take part in a virtual focus group. 5 professionals were in attendance from Notts Fire and rescue service and RossCare. Technical issues meant that some professionals were not able to attend, but they were offered the opportunity to share their views separately. 1 additional professional shared their views and they are included in the focus group summary. The areas of focus were:

- What works well?
- If you could change anything about wheelchair services, what would it be?
- Opportunities to make any further comments.

The main themes mirrored the themes in other areas of the engagement and included:

- Resource limitations in wheelchair services making engagement with service users more difficult.
- Accessibility to services are limited by referral processes and the need to be referred by a GP/HCP.
- Importance of creating and sustaining dialogue between services to support joined up care.
- Personalised care and knowledgeable staff are often highlighted in positive feedback received by wheelchair services.

5.2 Focus Group: Citizens

Citizens and carers also had the opportunity to take part in a virtual focus group. 4 citizens and carers attended the focus group. Two of the citizens who attended the focus group contacted the ICB to share further comments, which are captured in this focus group summary. The areas of focus were:

- What works well?
- If you could change anything about wheelchair services, what would it be?
- Opportunities to make any further comments.

The main themes mirrored the themes in other areas of the engagement and included:

- Information transparency and availability should be improved.
- Education on wheelchairs and wheelchair service processes would be helpful for citizens.
- The repair service and maintenance arrangements should be more thorough.
- Wheelchair services should communicate well with other services to provide joined up care.
- Some additional parts must be paid for, this can complicate organising equipment to be ready at the same time.
- Waiting times could be improved even when services are aware of a need for a wheelchair in advance. Some parts of the service are very efficient e.g. cushion reviews
- Approachable, helpful, and knowledgeable staff
- Eligibility criteria makes services less accessible sometimes.
- Importance of personalised care was highlighted.

5.3 Service Visits

In addition to virtual focus groups and online surveys, each of the four services providing wheelchairs to citizens across Nottingham & Nottinghamshire were visited. As part of these visits, clinics were shadowed, and conversations were had to support understanding and provide context to other engagement findings. The main themes mirrored the themes in other areas of the engagement and included:



- Inequity between service provision across Nottingham & Nottinghamshire. This includes large differences in service size and wheelchair service team size, and differences in equipment provided.
- Services have received inconsistent service user feedback around the quality of servicing and maintenance arrangements.
- All services are planning on implementing self-referral pathways in the near future.
- There is a recognised need for wheelchair services to provide more regular education to professionals (internal and external). Currently, NUH does offer training to professionals within the organisation on an ad hoc basis, and OTs also do a rotation there as part of their development.
- NUH and STH experience large numbers of appointments where service users either are not brought or do not attend.
- Efficiency of all services was impacted by the COVID-19 pandemic and various supply issues in recent years.
- Long-term services have or recently had issues with recruitment. This has particularly impacted RossCare and STH.
- ICELS are an equipment loan service and wheelchair provision is only a small part of their service.
- Short-term loan period differs depending on the wheelchair service. NUH provides short-term loans up to 26 weeks and ICELS provide short-term loans up to a period of 12 weeks.
- Wheelchair services do not have access to shared patient data systems e.g., SystemOne. This lack of access to systems for sharing patient data creates a barrier to joined up care.

5.4 Group discussions

Further to the above engagement methods a representative was invited to join a discussion with a group of Local Authority Occupational Therapists from Nottinghamshire County Council. Present at the meeting were OT senior practitioners and team managers from generalist social care service, who provide care to people of all ages and all conditions. They carry out seating and environmental assessments, which include assessments for individuals with complex postural and pressure care needs who use wheelchair services. The main themes mirrored the themes in other areas of the engagement and included:

- Inequity between service provision across the county, this makes it difficult for professionals to know which service is relevant for a particular individual.
- Accessibility to services is limited by referral processes and the need to be referred by a GP/HCP.
- There is a need for wheelchair services to provide training and education to professionals.
- Efficiency of services – some wheelchairs cannot be provided until adaptations are made to homes, even when adaptations are planned.

6. Glossary

Acronym	Term	Explanation
-	Professionals	A person who works for health, local authority or VCSE services.
-	System	A group of organisations working together as an interconnecting network
VCSE	Voluntary, Community and Social Enterprise	The voluntary, community and social enterprise (VCSE) sector is an important partner for statutory health and social care agencies and plays a key role in improving health, well-being, and care outcomes. VCSEs range from small community-based groups/schemes through to larger registered Charities that operate locally, regionally & nationally.
WCS	Wheelchair Service	A service that provides wheelchairs on a short-term or long-term loan.
-	Short-term loan	For Wheelchair Services, this refers to a loan period less than 6 months.
-	Long-term loan	This refers to any wheelchair loan that is likely to be required for the rest of the service user's life.
HCP	Healthcare Professional	A person who works for health services.
STH	Sheffield Teaching Hospitals	A hospital and community provider across Sheffield, South Yorkshire, Mid Yorkshire and other parts of England. They provide long-term wheelchair services to wheelchair users in Bassetlaw.
NUH	Nottingham University Hospitals	A hospital and community provider across Nottingham City, Nottinghamshire, and other parts of England. They provide short-term and long-term loan wheelchairs to citizens in Nottingham City and South Nottinghamshire.
ICELS	Integrated Community Equipment Loan Service	A service that provides equipment and/or adaptations to allow people to live independently. This service provides short-term loan wheelchairs to citizens across Nottinghamshire.
ICB	Integrated Care Board	An NHS organisation that commissions health services for a geographical area to meet the health needs of the population.
CVS	Community and Voluntary Sector	Made up of organisations and groups that are independent, value-driven, and not-for-profit. This includes charities, community groups, social clubs, churches, sports clubs, and more.
OT	Occupational Therapist	A healthcare professional who helps people with difficulties caused by physical or mental illness, disability, accidents, or ageing, by improving their ability to perform daily tasks.

7. Appendices

Appendix 1: Online Survey – Citizens and Carers

Nottingham & Nottinghamshire Wheelchair Services – Citizen Survey

Local community transformation leads would like to understand the current experiences and feedback of people with lived experience, carers, and professionals, with regards to accessing wheelchair services, in Nottingham and Nottinghamshire.

We want to hear your thoughts to understand together what we can achieve and to use information provided to develop your care around your needs.

You can also get involved by:

1. Attending a focus group. This will be held virtually on 13 March 2024 at 1pm. You can register your attendance by contacting us via email at nnicb-nn.communitytransformation@nhs.net or by calling 0115 883 9622.
2. Inviting the Team to your community group or event to seek feedback directly.

The survey should take about 10 minutes to complete and will close on 25 March 2024. A copy of the final report from the engagement activities will be published on the following website. <https://notts.icb.nhs.uk/get-involved/current-and-previous-engagement-consultations/>

To request further information please contact the Community Transformation Team at: nnicb-nn.communitytransformation@nhs.net or call 0115 883 9622. When leaving a message, please leave your contact details and a member of the team will get back to you.

This survey contains some questions where you can write freely. When providing responses to these, please do not write information that may identify you (for example, name and address). Your responses may be shared with other services but the data you provide will be anonymised so we will not analyse or share any information that will make you identifiable. To read about our privacy notice visit <https://notts.icb.nhs.uk/get-involved/privacy-statement-for-engagement/>

Are you happy to proceed?

Yes or No

The next set of questions are to support our understanding about what wheelchair services you access as a wheelchair service user.

1. Please indicate if you are completing this for yourself or on behalf of someone else.
 - a. Myself
 - b. On behalf of someone else
2. If you are completing this on behalf of someone else, which of the options below best describes your relationship with that person?
 - a. Parent
 - b. Relative
 - c. Friend

- d. Carer (paid or non-paid)
- e. Healthcare Professional
- f. Community and Voluntary Service
- g. Other (Please state)

3. Please indicate which age bracket best describes the wheelchair service user.
- a. 0 – 19
 - b. 20 or above

4. What is the postal code area for the GP service the wheelchair service user is registered with?

- a. Mansfield
- b. Ashfield
- c. Newark and Sherwood
- d. Broxtowe
- e. Gedling
- f. Nottingham City
- g. Rushcliffe
- h. Bassetlaw
- i. Other (*Please state*)

5. Is your wheelchair required for short-term use, e.g. recovery after a hospital stay, or long-term use, i.e. required for mobility indefinitely?

- a. Short-term
- b. Long-term
- c. Not sure

6. Was your wheelchair issued to you after a virtual/telephone conversation or was your wheelchair issued after attending a clinic to assess your specific needs?

- a. Issued after a virtual/telephone assessment.
- b. Not sure
- c. Not Sure

7. Which of the following best describes your wheelchair?

- a. Manual wheelchair that is self-propelled (pushed by the person in the wheelchair)
- b. Manual wheelchair (or buggy) that requires someone else to push it
- c. Electric powered wheelchair
- d. Not sure

8. Do you have any specialised seating for postural needs? (*Please choose no if you only have a wheelchair cushion*)

Yes or No

9. Do you have any additional modifications fitted to your wheelchair that required you to attend a clinic, e.g. special backrest fitted to your wheelchair or trunk supports, leg supports or a head rest?

Yes or No

The next set of questions are to support our understanding of 'what good looks like' for Wheelchair Services for you.

10. How satisfied are you with the following (considering the wheelchair service specifically):

The time taken to receive your first appointment	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
The accessibility of the clinic and waiting room areas	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
Healthcare professionals involving you in decisions about your/the patient's care	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
If staff discussed the Personal Wheelchair Budget or other funding options	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
The time taken to receive equipment after assessment	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
The service received for repairs or component replacement and delivery	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied
Your overall experience with the wheelchair service	Satisfied	Somewhat Satisfied	Not sure/ Not applicable	Somewhat Dissatisfied	Dissatisfied

11. What has gone well in your experience with Nottingham/Nottinghamshire Wheelchair Services?

12. If you could change anything about your experience with Nottingham/Nottinghamshire Wheelchair Services what would this be?

13. Please use the box below to tell us anything else that you would like to share.

Equality and Diversity Section

We are committed to providing equal access to healthcare services to all members of the community. To achieve this, gathering the following information is essential and will help us ensure that we deliver the most effective and appropriate healthcare. Responding to these questions is entirely voluntary and any information provided will remain anonymous – please can responses provided be on behalf of the wheelchair user.

1. What is your gender?
 - Boy/Man (including trans man)
 - Girl/Woman (including trans woman)

Non-binary (An umbrella term for people whose gender identity doesn't sit comfortably with 'man' or 'woman')

Prefer not to say

Other (you can specify if you wish)

2. Which age band do you fall into?

Under 16

16-24

25-34

35-44

45-54

55-64

65-74

75-84

85+

Prefer not to say

3. Which race/ethnicity best describes you?

Arab

Asian / Asian British – Bangladeshi

Asian / Asian British – Indian

Asian / Asian British – Pakistani

Black/Black British – African

Black/Black British – Caribbean

Chinese

Gypsy or Traveller

Mixed – White and Asian

Mixed – White and Black African

Mixed – White and Black Caribbean

Other Asian background

Other Black background

Other ethnic background

Other mixed background

White

White – Irish

Prefer not to say

Other (you can specify if you wish)

4. Do you have a health condition or disability that impacts on your life?

No known disability, health condition or learning difference

Yes - A long-standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy

Yes - A mental health difficulty, such as depression, schizophrenia or anxiety disorder

Yes - A physical impairment or mobility issues, such as difficulty using your arms or using a wheelchair or crutches

Yes - A social/communication impairment such as a speech and language impairment or Asperger's syndrome/other autistic spectrum disorder

Yes - A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D

Yes - Blind or have a visual impairment uncorrected by glasses

Yes - Deaf or have a hearing impairment

Prefer not to say

An impairment, health condition or learning difference that is not listed above (you can specify if you wish)

5. What is your religion/belief, if any?

- | | |
|---|---|
| <input type="checkbox"/> No religion | <input type="checkbox"/> Atheist (no belief) |
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Christian |
| <input type="checkbox"/> Christian - Church of Scotland | <input type="checkbox"/> Christian - Roman Catholic |
| <input type="checkbox"/> Christian - Presbyterian Church in Ireland | <input type="checkbox"/> Christian - Church of Ireland |
| <input type="checkbox"/> Christian - Methodist Church in Ireland | <input type="checkbox"/> Christian - Other denomination |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Jewish |
| <input type="checkbox"/> Muslim | <input type="checkbox"/> Sikh |
| <input type="checkbox"/> Spiritual | <input type="checkbox"/> Prefer not to say |

- Any other religion or belief (you can specify if you wish)

6. What is your sexual orientation?

- | | | |
|--|--|----------------------------------|
| <input type="checkbox"/> Asexual | <input type="checkbox"/> Bi/bisexual | <input type="checkbox"/> Gay man |
| <input type="checkbox"/> Gay woman/lesbian | <input type="checkbox"/> Heterosexual/straight | <input type="checkbox"/> Queer |
| <input type="checkbox"/> Prefer not to say | | |

- Other (you can specify if you wish)

7. Are you a carer providing unpaid support to a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction?

- Yes No Prefer not to say

8. Which District/Borough do you live in?

- | | | |
|--|-------------------------------------|--|
| <input type="checkbox"/> Ashfield | <input type="checkbox"/> Bassetlaw | <input type="checkbox"/> Broxtowe |
| <input type="checkbox"/> Gedling | <input type="checkbox"/> Mansfield | <input type="checkbox"/> Newark and Sherwood |
| <input type="checkbox"/> Nottingham City | <input type="checkbox"/> Rushcliffe | <input type="checkbox"/> Prefer not to say |

- Other (you can specify if you wish)

9. How satisfied are you with the arrangements in place to collect your views?

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Satisfied | <input type="checkbox"/> Neither satisfied nor dissatisfied | <input type="checkbox"/> Dissatisfied |
| <input type="checkbox"/> Not sure <input type="checkbox"/> Prefer not to say | | |

Thank you for taking part in this survey. Your responses are important to us, and they will be used to help shape health care.

To share your views further via telephone please contact nnicb-nn.communitytransformation@nhs.net or call 0115 883 9622 before Monday 25 March 2024.

Appendix 2: Online Survey – Professionals

Nottingham & Nottinghamshire Wheelchair Services – Professional Survey

Local community transformation leads would like to understand the current experiences and feedback of people with lived experience, carers, and professionals, with regards to accessing wheelchair services, in Nottingham and Nottinghamshire.

We want to hear your thoughts to understand together what we can achieve and to use information provided to develop your care around the needs of service users.

You can also get involved by:

1. Attending a focus group. This will be held virtually on 12 March 2024 at 1pm. You can register your attendance by contacting us via email at nnicb-nn.communitytransformation@nhs.net or by calling 0115 883 9622.
2. Inviting the Team to your community group or event to seek feedback directly.

The survey should take about 5 minutes to complete and will close on 25 March 2024. A copy of the final report from the engagement activities will be published on the following website. <https://notts.icb.nhs.uk/get-involved/current-and-previous-engagement-consultations/>

To request further information please contact the Community Transformation Team at: nnicb-nn.communitytransformation@nhs.net or call 0115 883 9622. When leaving a message, please leave your contact details and a member of the team will get back to you.

This survey contains some questions where you can write freely. When providing responses to these, please do not write information that may identify you (for example, name and address). Your responses may be shared with other services but the data you provide will be anonymised so we will not analyse or share any information that will make you identifiable. To read about our privacy notice visit <https://notts.icb.nhs.uk/get-involved/privacy-statement-for-engagement/>

Are you happy to proceed?
Yes or No

The next set of questions are about you and where you work.

1. What is the name of the organisation you work for?

2. What is your role?

3. What geographical area do you cover in your role? Please choose all that apply.

- a. Mansfield
- b. Ashfield
- c. Newark and Sherwood
- d. Broxtowe
- e. Gedling
- f. Nottingham City
- g. Rushcliffe
- h. Bassetlaw
- i. Other (Please state)

4. How does your work relate to wheelchair services?

- a. I work within a wheelchair service.
- b. I refer patients to wheelchair services.
- c. Other (please state)

If your answer to question 4 is b or c please proceed to question 6.

5. In relation to patient choices regarding their wheelchair and related equipment, how much do you agree with the below statements?

I feel supported to provide patients and service users with the right information regarding the personal wheelchair budget and related funding they can access	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree
I support patients to think about the choices they have in relation to their wheelchair and/or related funding	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree

The next set of questions are to support our understanding of 'what good looks like' for Wheelchair Services for you.

6. What do you think works well in wheelchair services for patients and service users?

7. If you could change anything about wheelchair services, what would you change for patients and service users?

8. Is there anything else you would like to tell us?

Thank you for taking part in this survey. Your responses are important to us, and they will be used to help shape health care.

To share your views further via email or telephone please contact nnicb-nn.communitytransformation@nhs.net or call 0115 883 9622 before Monday 25 March 2024.

Appendix 3: Focus Group Notes

Wheelchair Services Service Users and Carers Focus Group Feedback

4 Service Users/ Carers were in attendance who used services within Nottingham City and Mansfield

Katie Swinburn (Engagement Manager) and Isaac Till (Communications and Engagement Assistant), from the Communications and Engagement team, were in attendance to support the session.

Evy Walker (Transformation and Commissioning Manager), from the Community Care Transformation Programme team, opened the session by explaining the Wheelchair Service Review and the context to the group.

Q1 – If you could change anything about your experience with Nottingham/Nottinghamshire Wheelchair Services what would this be?

- Information transparency and availability is lacking in the service. User has come into the service later, and never really had clear info on what's available. When they have found information, it has always come from having to ask or carry out own research. They rely on the experts and haven't always had the support they need. Due to this they reported feeling at a loss/ uncertain on their entitlement and options.
- For example, not knowing that they could be entitled to a lighter chair to help with self-propelled.
- Issues with current service's wheelchair servicing, found to be very basic (including a PAT test and brief look over) Does not come close to comparing to private equivalent which is a thorough check over.
- Issues around "caring" about the parts that go in. Users experienced mismatched casters which then have to be complained about to get changed. "Felt like it was whatever they had in the back of the van". The chair is an extension of the user, and so the mismatched wheels impact how the user feels. Similarly, consideration over whether the user wants to try to self-propel isn't ever sought out.
- Lack of clarity around timelines. Often the service can take a long time to get work done and there is no indication at the outset. Often users and carers spend a long time chasing the service.
- Extras that have to be paid for can make it feel like people are penalised for wanting to do things. For example, lights and rises, which are needed to go out at night or do things like go to college. This makes the service feel cost led over needs led. Users and carers constantly have to challenge the service to get alternatives to their equipment that may work better for the user. Some things like multiple covers to

protect the seats etc aren't standard. Some considerations like being able to adjust seats due to other complex needs not considered as part of the whole condition.

- They found the service was not as joined up as it was. And due to the lack of transparency, it's getting harder to do things.
- Compared to a previous provider, Clark and Partners, which was local, Rosscare is based further afield, therefore they are cheaper without the service they provide. Prior providers did not have to travel as far and did more extensive works when needed.

Q2 – What has gone well in your experience with Nottingham/Nottinghamshire Wheelchair Services?

- Staff couldn't be more helpful considering their hands are tied, changing providers causes a big harm to getting things done. They are very patient and happy to oblige with people who are chasing them up. Similar, the reception staff are good, and therapists are very experienced (although some concern they may soon be reaching end of career, and the service will lose the familiarity with user's circumstances)
- Some services are very prompt, for example: after a cushion review, a temporary chair had been provided within a week while the other is off to be changed.

Q3 - Is there anything else you would like to share about your experience with Nottingham/Nottinghamshire Wheelchair Services?

- Amount of time to get equipment need to get more transparent. In December manual chair was ordered, and hopefully coming in late March. This is too long when they say 4-6 weeks. Seems like they didn't order chair when they said they would. This is a long time to be waiting in a poor fitting chair.
- Communication needs to be more honest. Takes the stress from carers, which in turn takes the stress off the service.
- More transparency. For example, with powered chair - Needs to be used inside the house, this means house needs to be adapted, users have had to move house to allow this to happen.
- When you turn 18 there is hardly any supports in the community for funding or help towards things. Due to budgets, in the past you often were better off waiting for fresh financial years.
- Sometimes in the NHS it can be hard to prove you need a chair so may end up having to go out and get one yourself.

More Qs/comments

- Discussion around the drivers behind the focus group, including if it will bring continuity between areas where the service is provided.
- Story about a service user who had major spinal surgery. Wheelchair service knew in advance when surgery was and yet had to wait months for new chair. For a while was in a cobbled together adapted version of old chair with homemade extras to get them supported in right way. Little flexibility in system.
- Users would find it helpful to have a flowchart of the process to understand how it works from referral all the way through to treatment/equipment, with rough timeframes to give some peace of mind (not holding it as set in stone though).
- When personal funding gets involved, it can be complicated to organise everything.
- For service users, the wheelchairs are their legs and life, so need to get it right. With right equipment it makes a huge amount of difference.

Wheelchair Services Professional Focus Group Feedback

5 Professional were in attendance from Notts Fire and Rescue Service, and Rosscare (Mansfield Wheelchair Services).

Katie Swinburn (Engagement Manager) and Isaac Till (Communications and Engagement Assistant), from the Communications and Engagement team, were in attendance to support the session.

Evy Walker (Transformation and Commissioning Manager), from the Community Care Transformation Programme team, opened the session by explaining the Wheelchair Service Review and the context to the group.

Q1 – If you could change anything about the service what would it be?

- If this question was limited to the finances, as the NHS is providing the services it needs to within it's current financial limitations. In a "blue sky" scenario, they would be able to take time to pause and engage fully with users, currently this is very hard to do.
- Nothing really to change but it would be good to work towards more dialogue. And a better understanding of safety procedures.
- Happy to reach out and discuss more links to do with fire safety. A big part of the work is just knowing the local teams around them that can help out. It would be a good time for them to review this as they are currently going through some service change and hopefully have more pathways coming out soon.

Q2 – What works well?

- The friends and family feedback is used quite a lot and has mostly positive feedback on it, and people report being comfortable with the therapists ect. The service has a big focus on personalised, individual care. Service users all typically are happy with their wheelchairs, with the majority of those who have an issue find it stems from personalisation made to them.
- A massive strength is the wealth of experience within the team. Members know everyone in the local area, both service wise and with service users. This makes them a valuable asset to ask any and all questions to. This is also reflected in the service user feedback.
- With everyone in the team having been there many years, they have an extensive knowledge.
- This is the first conversation that they have had around wheelchair users as up to this point they had to work around this using their limited understanding/knowledge. Their main priority is fire escape so although they get many referrals, its an area they want to work on with experts.

Any further comments

- Recruitment is currently taking place to roles. The team work really well together and have extensive knowledge of services available and signposting. The team work well with the Community Therapy Team and District Nursing Teams.
- Communication was shared around the referral into the Fire and Rescue Team which was agreed to be shared with Community and Voluntary Sector colleagues to raise awareness.
- Services users are happy with the services provided across Mansfield and the team go over and above to meet the needs.