

‘Wheelchair Services’

Report of Findings - Engagement

September - November 2017

Working in partnership:

Calderdale CCG

Greater Huddersfield CCG

North Kirklees CCG

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1. Purpose of the Report

The purpose of this report is to present the findings from the recent engagement activity for wheelchair services. This report describes the background to the engagement, the process followed to deliver the engagement and the findings with include equality.

The report also sets out the legal obligations for engagement and equality and the principles the CCGs must follow as set out in the local strategy for 'Patient Engagement and Experience'.

The engagement took place under the current service provider who are Opcare. Opcare deliver a wheelchair service to the CCG areas of Calderdale, Greater Huddersfield and North Kirklees. Greater Huddersfield CCG (GHCCG) is the lead commissioner for this service.

2. Background

The Clinical Commissioning Groups (CCGs) covering the areas of Calderdale, Greater Huddersfield and North Kirklees procured a wheelchair service to cover the patients of Calderdale and Kirklees in October 2014.

Opcare were awarded the 3-year contract for posture and mobility services across Calderdale and Kirklees in October 2014 providing a full 'one stop shop' service (including; clinical assessment, ordering of equipment, recycling, repairs and maintenance and in house specialist seating). The contract is now in year one of a 1+1 year extension. The patient list size in September 2017 is set out in the table below. It is worth noting that the patients list size is subject to change and updates are sent to NHS England on a quarterly basis.

Patients currently registered with the service	Adults	Children	Total
Calderdale	2537	310	2847
Greater Huddersfield	3009	280	3289
North Kirklees	2570	352	2922
TOTAL for Calderdale, Greater Huddersfield and North Kirklees for September 2017	8116	942	9058

The previous provider Calderdale and Huddersfield Foundation Trust (CHFT) had been delivering this service up to this date and all activity, staff and equipment were transferred to Opcare following the contract award. Opcare were asked to gather patient's views of services on an ongoing basis and as part of any system change to gather views of stakeholders and service users. By gathering patients views both Opcare and the CCGs will be able to decide which aspect of the services requires improvement and if there are any potential options for change which can be identified to inform the development of the service specification.

The CCGs are working closely with Opcare as a provider to develop this specification. The engagement report will ensure commissioners are able to understand the current views of a sample group of patients and stakeholders who use this service.

3. Legislation

Health and Social Care Act 2012

The Health and Social Care Act 2012 makes provision for Clinical Commissioning Groups (CCGs) to establish appropriate collaborative arrangements with other CCGs, local authorities and other partners. It also places a specific duty on CCGs to ensure health services are provided in a way which promotes the NHS Constitution – and to promote awareness of the NHS Constitution.

Specifically, CCGs must involve and consult patients and the public:

- In their planning of commissioning arrangements
- In the development and consideration of proposals for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them, and
- In decisions affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact

The Act also updates section 244 of the consolidated NHS Act 2006 which requires NHS organisations to consult relevant Overview and Scrutiny Committees (OSCs) on any proposals for a substantial development of the health service in the area of the local authority, or a substantial variation in the provision of services.

The Equality Act 2010

The Equality Act 2010 unifies and extends previous equality legislation. Nine characteristics are protected by the Act, age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation. Section 149 of the Equality Act 2010 states all public authorities must have due regard to the need to a) eliminate discrimination, harassment and victimisation, b) advance 'equality of opportunity', and c) foster good relations. All public authorities have this duty so the partners will need to be assured that "due regard" has been paid.

The NHS Constitution

The NHS Constitution came into force in January 2010 following the Health Act 2009. The constitution places a statutory duty on NHS bodies and explains a number of patient rights which are a legal entitlement protected by law. One of these rights is the right to be involved directly or through representatives:

- In the planning of healthcare services
- The development and consideration of proposals for changes in the way those services are provided
- In the decisions to be made affecting the operation of those services

4. Principles for Engagement

All CCGs have a 'Patient and Public Engagement and Experience Strategy'. The strategy has been developed alongside key stakeholders to support our strategic approach to involving local people. As Greater Huddersfield CCG is the lead CCG commissioner for this service the strategy for Greater Huddersfield is used to set out an approach to engagement. This approach ensures the public understand what to expect from any engagement activity.

The principles set out in this strategy state that the CCG will;

- Ensure that the CCG engage with public, patients and carers early enough throughout any process
- Be inclusive in all engagement activity and consider the needs of the local population
- Ensure engagement is based on the right information and good communication so people feel fully informed
- Ensure that the CCG are transparent in their dealings with the public and discuss things openly and honestly
- Provide a platform for people to influence thinking and challenge decisions
- Ensure any engagement activity is proportionate to the issue and that feedback is provided to those who have been involved in that activity

The strategy sets out what the public can reasonably expect the CCG to do as part of any engagement activity and the process required to preserve these principles to ensure public expectations are met.

5. Methodology

A survey was sent with an accompanying equality monitoring form (appendix 1) to all patients who have accessed wheelchair services in the past two years. The survey was developed in conjunction with Healthwatch Kirklees who had already engaged people who use wheelchair services using an existing survey. The purpose of the survey was to ensure that the CCGs could gather views from patients, families, carers and stakeholders.

The survey was divided into a number of key areas or sections. The first section of the survey asks patients to identify who they are, the type of wheelchair they use and to rank aspects of the service using 1-5 stars. By ranking the answers the CCG can understand why patients ranked certain service functions above others and identify the functions patients benefit from as well as those that score lower; including any suggested improvements.

The second section of the survey asks people to tell us more about the overall views of the service and to provide more qualitative information on what works well, what could be improved and any other comments.

Healthwatch also offered an opportunity on the survey to make direct contact with respondents who wanted to raise additional views or have a conversation. The findings from this work is captured in and appendix (see appendix 2).

6. What do we already know

Calderdale and Kirklees have been engaging service users on the wheelchair services they would like to receive since 2013. The overarching key themes and findings from each of these pieces of work are cited below in chronological order.

6.1 Calderdale and Kirklees service specification development and procurement 2011/14:

NHS West and South Yorkshire and Bassetlaw Commissioning Support Unit Communications and Engagement team, embarked on engagement with the public and key stakeholders over a six week period, from 4th November to 13th December 2013. The purpose of the engagement was to build on the data that had already been collated, by gaining the views of the public, key stakeholders and voluntary and community sector organisations on their experiences of wheelchair services in Calderdale and Kirklees and their suggestions on how the services could be improved. The information considered as part of this exercise was any patient feedback received in relation to wheelchair services, equipment or aids via the Patient Advice and Liaison Service (PALS) and complaints.

As part of the planned approach, two events were also held, one in Calderdale and one in Kirklees. The events consisted of a brief presentation which provided an overview of the current review of wheelchair services and the proposals for a new model. The event asked participants to discuss in their groups their views on the following questions:

- What is working well?
- What is working not so well?
- Are there any gaps in the service?
- Is there anything else the CCGs need to change?

The main themes taken from the engagement, workshops and existing data are set out below. There is also a full report to accompany this engagement process. The main themes were:

For some, the service was described as being quick and responsive with knowledgeable and professional staff. However, concern was expressed by many with regards to the waiting times for assessments and the provision and repair of wheelchairs.

The need for staff to receive training on:

- Disabilities /conditions to ensure that they understand the progressive nature of disabilities / conditions and how patient needs may change.
- Customer service training to ensure staff actively listen and respond to service users.
- Assessment and referral process to ensure that there is consistency in the application of the eligibility criteria.

It was felt that the current service does not cater for the needs of those that work or have

other commitments during office hours. Respondents wanted a service that would meet the needs of everyone, including those that work. Suggestions were made to have a one-stop shop that was accessible seven days a week.

The need for additional staffing and budget, including the provision of wheelchair therapists and an increase in technical support to meet demand and reduce waiting times.

Poor communication between services and with service users which impacted negatively on the service that they received. Service users wanted to be kept up to date on the progress of their case, receive information on types of wheelchairs available and to have an easy read guide and or charter.

People wanted the ability to have a wheelchair that meets their needs. Concerns were raised that they were unable to access a powered wheelchair for outside use, choice of equipment being limited by cost rather than suitability and the difficulties in obtaining a non-standard wheelchair and adaptations.

6.2 Healthwatch focus Group December 2016:

The procurement process identified Opcare as the new service provider in March 2014. Healthwatch set up a focus group in December 2016 following a number of concerns and issues raised about the current service provider. The findings from the focus group which consisted of four parent carers identified some gaps in provision. The top five themes were:

- Lack of funding
- Staff attitude - lack of empathy on the part of receptionists and therapists
- Communication – e.g. timelines, what options and information are available, no notice as to when Posture and Mobility Services are going into schools
- Speedy repairs
- Working together with other services
- Other - Participants also asked whether Posture and Mobility Services has maximum waiting times like the NHS for appointments (first and review)

This engagement process provided a snapshot of the views from parents and carers of wheelchair users on their experience of Posture and Mobility Services and what changes could be made to enable the service to work better. Healthwatch Calderdale produced a report on the workshop findings which included more detail behind each of the themes.

6.3 Healthwatch survey on wheelchair services

In May 2017 Healthwatch produced an additional report of findings following further engagement with an additional 91 parents/carers and services users. The methods of engagement are listed in the table below:

Method of engagement	Number of participants
Survey	27
Focus groups	38
Online reviews	22
Telephone/email	4

Parents/carers and service users were invited to complete an online questionnaire and give Opcare a star rating to reflect their experience of its overall service as well as for components of its service. A high numerical rating indicated a good service experience, whilst a low score showed a poor service encounter.

Overall the results from the survey provided an online review which indicated that parents/carers and service users collectively gave Opcare an overall star rating of 2.1 out of 5.

The average rating for each of the service areas are set out in the table below. Ratings have been classed as red (poor) if they score 1-2, amber (average) if the score is 3 and green if the score is 4-5 (good/excellent). The scores from this engagement demonstrates a number of services are rated as red:

	Average rating (out of a maximum of 5 stars)
Access to premises	3.4
Communication	2.3
Staff attitude	3.2
Confidence in technical staff	3.1
Confidence in admin support	2.9
Helpfulness	2.7
Flexibility of appointments	2.3
Waiting time	2.0

In addition the key themes from respondents were:

- **No regular reviews/assessments for growing children:** Parents/carers told Healthwatch they are incredibly frustrated by the fact that there is no regular, routine assessment in place for their child to ensure that the wheelchair they are using is suitable for their size and needs
- **Poor communication:** People told Healthwatch how they struggle to get information from Opcare and wanted it to be much clearer about when service users could expect their matter to be dealt with.
- **Waiting times:** People spoke of the frustration they felt during long periods when they were on a waiting list at various points when being assessed for a new wheelchair.
- **Repairs:** One member of staff in a school told Healthwatch how some of the technician's turn up with hardly any tools and say they've only have 2 weeks training.
- **Equipment not fit for purpose:** People raised concerns that service users' needs change so much between assessment and receiving their new or adjusted chair, that their new or adjusted wheelchair then doesn't fit properly.

- **Funding and Commissioning Issues:** Parents/carers and service users told Healthwatch that they had been informed by Opcare that it was not possible for the service to provide them with new wheelchairs due to “funding”, “no money” or “budgets”.
- **Accessibility of clinics:** Staff and service users in North Kirklees have been made aware that Opcare is paying to have a room at Eddercliffe Health Centre in Cleckheaton but it never uses this.
- **Order delays:** People mentioned that Opcare staff often told them that items were on order when they were not. They said they would rather be told the truth, even if the waiting time was going to be lengthy.
- **Choice of wheelchair:** Healthwatch also spoke to several people whose perception was there were “limited options for wheelchairs” and “limited choices for specialist seating”.

Respondents who provided positive feedback did so on the following areas of service:

- **Repairs:** a small number of people were impressed with the speed and efficiency of the repairs service and technical staff.
- **Staff:** some people seem happy with face-to-face interactions with Opcare staff.
- **Receiving a new wheelchair:** A few people are happy with the process for getting a new wheelchair and with the wheelchair they receive
- **Listening to people’s views:** Healthwatch also heard about instances where people had initially received a poor service but after contacting Opcare, and sometimes complaining, they then received an excellent service.

The Healthwatch report also includes a number of quotes and case studies to support the key themes. A full report of findings can be found on the Healthwatch website www.healthwatchkirklees.org.uk

7. Findings from the engagement process

The engagement process took place from late September 2017 and finished on the 24th November 2017. A letter and survey were sent to 4,000 patients registered with the service; the circulation of the survey was arranged by the current provider Opcare.

In June 2017 a stakeholder mapping process took place with a range of partners from the voluntary and community sector, health, education and included Healthwatch. The stakeholder mapping exercise identified 94 stakeholders. These stakeholders were contacted directly by both Healthwatch and Opcare and invited to circulate, promote and participate in the survey.

From this activity we received 287 **responses to the survey** and the findings under each of the question headings are set out below.

We asked people the following questions in the survey:

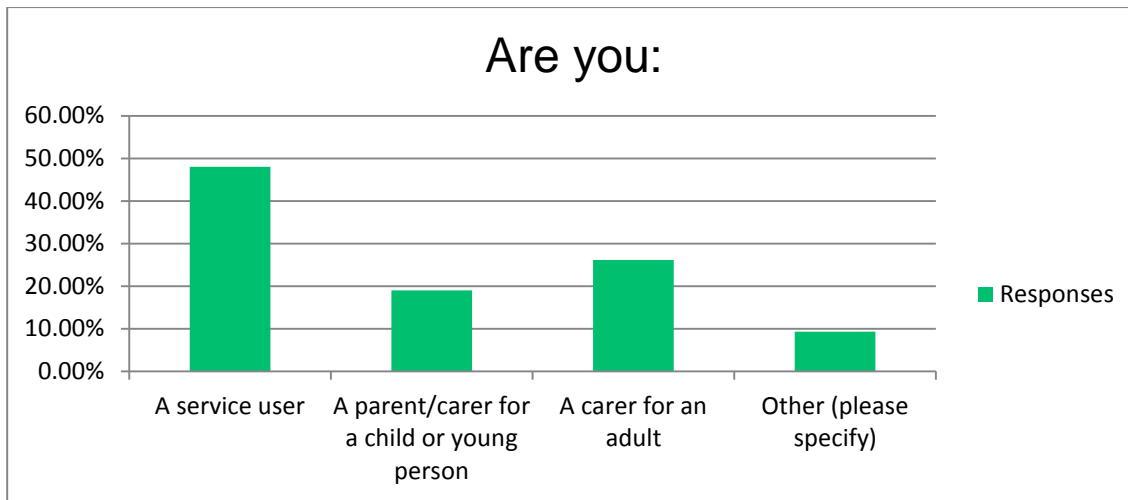
Q1. Have you used Opcare's posture and mobility service in the past 2 years?

Answer Choices	Responses	
Yes	83.62%	240
No	10.10%	29
Unsure	6.27%	18
	Answered	287
	Skipped	0

From the survey response we know that 83.6% of those responding had used the service in the last two years and so the survey findings would provide an up to date view of current services. For those who stated they had not used it within two years (10%) we have no further details of how long it has been since they used the service. We then asked people to identify themselves. We asked people to tell us;

Q2. Are you:

Are you:		
Answer Choices	Responses	
A service user	48.03%	134
A parent/carer for a child or young person	19.00%	53
A carer for an adult	26.16%	73
Other (please specify)	9.32%	26
	Answered	279
	Skipped	8



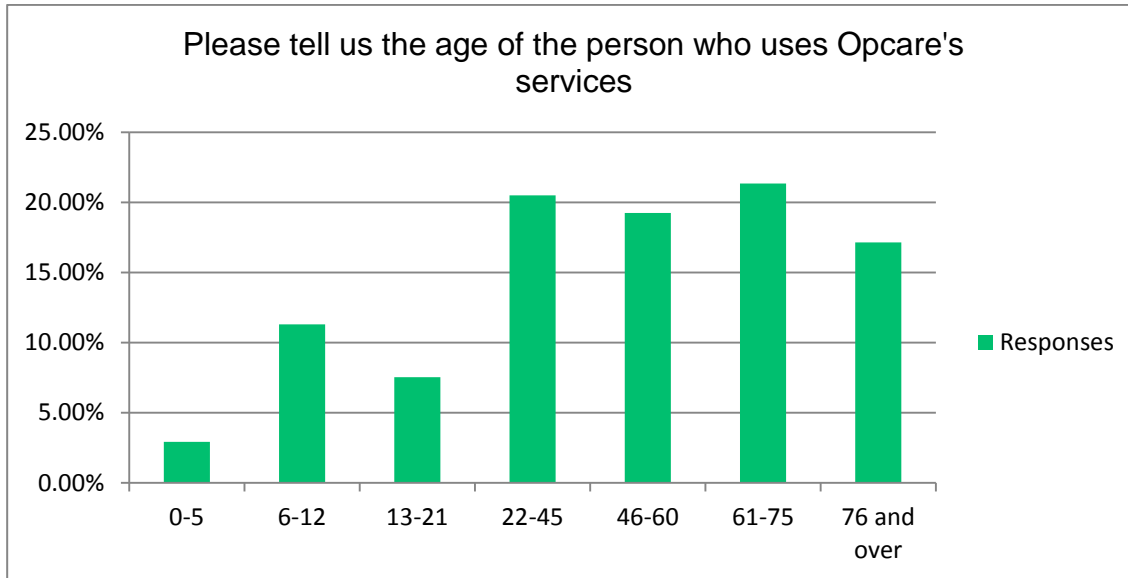
From those responding we know that 48% are a direct service user and 45% are a carer of either an adult or child who use the service. From the list of 'other' we received responses set out below, the majority of responses came from health care professionals. The responses to other are:

- health professional including nurse and nurse specialist (11)
- staff/provider (3)
- Occupational or physiotherapist (3)
- Nursing home (3)
- Specialist therapist in Posture and mobility
- Wheelchair Support Service Coordinator for the MND Association
- I am a wheelchair user
- Learning Disability Team Kirklees
- Spouse
- I was a carer up to 11/09/17 when my nana sadly passed away

Q3. Please tell us the age of the person who uses Opcare's services?

The age range of responses for service users was fairly representative across all service users. With children and young people collectively being represented at 20% (with most being represented via a carer rather than directly). However despite the carer representation of young people we have a broad range of ages to consider which will ensure we consider all clients by age.

Answer Choices	Responses	
0-5	2.93%	7
6-12	11.30%	27
13-21	7.53%	18
22-45	20.50%	49
46-60	19.25%	46
61-75	21.34%	51
76 and over	17.15%	41
	Answered	239
	Skipped	48



Q4. We asked people if they could you tell us the first part of the postcode?

We received **233 responses** to this question and there were 29 postcodes covered by the responses.

The data shows that we received 86 responses from Calderdale residents, 93 responses from Greater Huddersfield residents and 54 responses from North Kirklees residents.

The data shows we received a lower response from residents living in North Kirklees.

Q5. Do you (or the person you care for) use a wheelchair full time?

From those responding just over 65% reported that they used a wheelchair full time which suggests that the service users who have responded will be providing a view as a regular service user. This is balanced against 34% who will have one off experiences of using the service and may therefore provide a different experience or perspective of the service.

Answer Choices	Responses	
Yes	65.80%	152
No	34.20%	79
	Answered	231
	Skipped	56

From question 6 (table below) we also know that the feedback we have received will cover the period where the main provider was Opcare. Just over 5% reported that they had used the service over 2 years ago and may or may not have used the service whilst the current provider was in place, however over 93% are Opcare service users.

Q6. When was the last time you used the posture and mobility service (for yourself or someone your care for)?

Answer Choices	Responses	
0-6 months	61.09%	135
7-12 months	20.81%	46
13-18 months	6.79%	15
19-24 months	5.88%	13
over 2 years	5.43%	12
	Answered	221
	Skipped	66

In addition the responses to question 7 (table below) identify that over 71% of respondents had needs that changed over time and therefore were more likely to access the service repeatedly to ensure there needs are met.

Q7. Do your needs (or the needs of the person you care for) change over time?

Answer Choices	Responses	
Yes	71.74%	165
No	19.57%	45
Don't know	8.70%	20
	Answered	230
	Skipped	57

Q8. When you (or the person you care for) were first assessed for a wheelchair, how well did the assessment take account of your personal and lifestyle needs? (1 star is poor, 5 stars is excellent).

The scores of 1-2 have been rated as red – poor – below average

The scores of 3 – have been rated as amber – average

The scores of 4-5 – have been rated as green - good – excellent

1		2		3		4		5		Total	Weighted Average
12.68%	27	10.33%	22	19.72%	42	27.23%	58	30.05%	64	213	3.52

For this aspect of the service it has been **rated as average with an average score of 3.52.**

The key themes were:

- Assessments are not seen as timely and for some the care was not personalised enough or the equipment provided adequate to meet the lifestyle needs

- In general staff were helpful and caring with some instances of a bad experience of staff members
 - People did not always get the equipment they would like or what they felt they needed
 - Some people were not assessed by the service for a wheelchair, some were referred or health professionals arranged for a chair and others were assessed elsewhere
-
- *it was easy and convenient because it was nearby*
 - *Staff always very helpful however hands are tied because of budgets*
 - *We had a battle to get a bigger wheelchair and were being fobbed off re just get bigger cushion seat!*
 - *His real needs were discovered at a later assessment. He is paralysed and cannot move himself.*
 - *the assessment for personal and lifestyle needs is disappointing*
 - *Did not have an assessment GP referred for a wheelchair.*
 - *my daughter uses a wheelchair 24/7 but was told even though she was a priority she would have a long wait as there were no staff/ money to get right moulded seat made.*
 - *Wrong chair, new one ordered but took 3 months to come, after several phone calls*
 - *wheelchair only needed for occasional use*
 - *the first therapist had not read the notes, was very unkind + did not listen the next day she phoned to apologise as she had not read the notes and our case is complicated*
 - *we were given an appointment after almost 2 years to be seen in which my daughter had grown out of her wheelchair affecting her spine*
 - *The service does not understand personalisation and has no sense of urgency. No questions about what is important to you or for you, no questions about what you want to achieve. Lifestyle needs were not taken in to account at all. It was a case of this is what you are getting, take it or leave it!*
 - *When he out grew it (18 months onwards; feet hanging on the floor) -I was told I could not have another Chair as it was my fault for buying a mainstream buggy and that he was not entitled to another assessment or chair on the NHS*
 - *My husband is still waiting for a wheelchair since June*
 - *My daughter needed a priority mould seat change and it was only when it started leaving bruising did she get an appointment*

Q9. How long did you (or the person you care for) have to wait to receive a wheelchair? This is from being referred to getting the wheelchair.

Answer Choices	Responses	
0-12 weeks	41.10%	90
13-18 weeks	10.96%	24
19-30 weeks	5.94%	13
31-52 weeks	18.26%	40
Other (please specify)	23.74%	52
	Answered	219
	Skipped	68

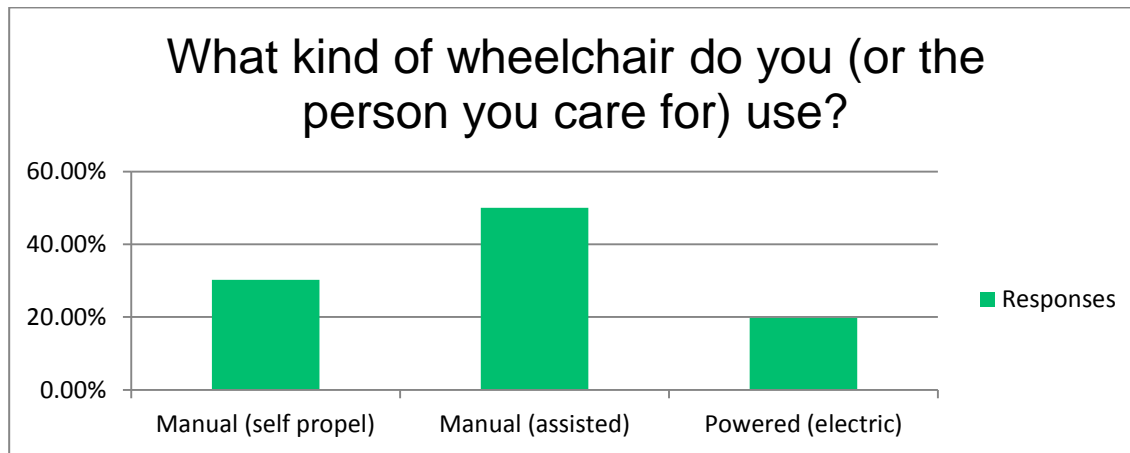
Then responses above demonstrate a range of waiting times for service users. Those that stated other either said they were still waiting. Most service users over 41% received their

equipment in less than 12 weeks; however 18.26% stated they had to wait between 31-52 weeks to receive the equipment.

Q10. What kind of wheelchair do you (or the person you care for) use?

From those responding the majority of respondents were using a manual assisted wheelchair (50%).

Answer Choices	Responses	
Manual (self-propel)	30.26%	69
Manual (assisted)	50.00%	114
Powered (electric)	19.74%	45
	Answered	228
	Skipped	59



Q11. What additional features does the chair have (tick all that apply)

Respondents told us they used a range of additional features with a lap belt being the most common feature at over 71%. Over 60% of respondents had additional features.

Answer Choices	Responses	
Head control	5.82%	11
Joystick	26.46%	50
Lap belt	71.96%	136
Ankle strap	36.51%	69
Head rest	38.10%	72
Profile back	25.93%	49
Tilt in space	24.87%	47
Other (please specify)	22.75%	43
	Answered	189
	Skipped	98

We then asked respondents using a series of questions to rate each aspect of the service from 1-5 (1 star is poor, 5 stars is excellent).

The data below has been pulled together into one table to demonstrate the aspects of the service rated from poor to excellent.

The scores of 1-2 have been rated as red – poor – below average

The scores of 3 – have been rated as amber – average

The scores of 4-5 – have been rated as green - good – excellent

Q.12 - 22 Respondents rated each aspect of the service as follows:

star rating	1		2		3		4		5		Total	Weighted Average
	%	Count	%	Count	%	Count	%	Count	%	Count		
12. Equipment meets your/person you care for needs	14.01%	29	11.59%	24	19.81%	41	27.54%	57	27.05%	56	207	3.42
13. Accessibility of the clinics	20.98%	47	11.61%	26	20.09%	45	23.66%	53	23.66%	53	224	3.17
14. Communication (written and verbal) information	26.03%	63	13.22%	32	20.25%	49	18.60%	45	21.90%	53	242	2.97
15. Staff attitude	10.13%	24	8.44%	20	17.30%	41	25.74%	61	38.40%	91	237	3.74
16. Getting issues resolved easily and quickly	33.33%	76	13.60%	31	12.28%	28	21.05%	48	19.74%	45	228	2.8
17. Assessment	17.62%	40	14.10%	32	14.10%	32	28.19%	64	25.99%	59	227	3.31
18. Choice of time and location of appointments	20.45%	45	13.18%	29	18.64%	41	24.09%	53	23.64%	52	220	3.17
19. Waiting for an assessment	36.09%	83	10.00%	23	19.13%	44	17.83%	41	16.96%	39	230	2.7
20. Waiting time from assessment to receiving a wheelchair	39.91%	87	13.30%	29	9.63%	21	18.35%	40	18.81%	41	218	2.63
21. Repair service	27.27%	39	9.09%	13	22.38%	32	23.78%	34	17.48%	25	143	2.95
22. How Opicare works with other professionals, such as physiotherapy or occupational therapy	23.26%	40	12.79%	22	21.51%	37	23.84%	41	18.60%	32	172	3.02

The table includes the mean average score for each aspect of the service. The scores have been coded according to the ratings above:

- Mean average scores rated as 1-2 have been coded red
- Mean average scores rated as 3 have been coded amber
- Mean average scores rated as 4-5 have been coded as green

These codes will provide an overarching view of each aspect of the service. However it is worth noting that within each service there are some significant differences of opinion. In a separate section following the table further analysis on those individuals scoring a 1 or 5 have been further broken down to provide additional information.

The key areas of improvement (red) based on the mean average score and in order are:

- Waiting time from assessment to receiving a wheelchair
- Waiting for an assessment
- Getting issues resolved easily and quickly
- Repair service
- Communication (written and verbal) information

The other aspects of service requiring some improvement (amber) based on the mean average score and in order are:

- How Opicare works with other professionals, such as physiotherapy or occupational therapy
- Accessibility of the clinics
- Choice of time and location of appointments
- Assessment
- Equipment meets your/person you care for needs

It is worth noting that there were no mean average scores rated 4-5 (green) and so all aspects of the service were rated as requiring some improvement. We then asked:

Q23. How do you rate your overall experience of the service? From 1-5 (1 star is poor, 5 stars is excellent).

The average score for the service in general was 2.91 which was ranked as below average and rated as red.

star rating	1		2		3		4		5		Total	Weighted Average
How do you rate your overall experience of this service?	28.63%	65	9.69%	22	21.59%	49	22.03%	50	18.06%	41	227	2.91

Scores of 1:

On further analysis of the respondents scoring the service a 1 for question 8 and questions 12-23 the following information was concluded:

- From the 287 people who responded to the survey 136 (47%) scored at least one or more aspect of the service as a 1.
- For those scoring only up to two aspects of the service as a 1 or less the main areas for concern were:

- Getting issues resolved quickly and easily
 - Waiting time
 - Communication
- For those who scored a 1 in more than two service areas there appeared to be a pattern of scoring a 1 across the board.
 - There was a mixture of service users scoring a 1 with 32 being manual (self-propelled), 55 being manual (assisted) and 25 Powered (electric).
 - The highest level of dissatisfaction was from Greater Huddersfield with 53 respondents in this sample group followed by 33 respondents from Calderdale and 24 for North Kirklees.
 - The majority of 1 scores came from carers (64) in total which were evenly split between parent carers at (32) and adult carers (32). There were 54 service users scoring a 1.
 - The majority of respondents scoring a 1 were full time wheelchair users (87) and 28 stating they were not full time.
 - Whilst a range of ages rated some or all aspects of the service as a 1 there was a higher response from service users under the age of 21 (38 in total) with a lower response from those over 76 (10 in total)

Scores of 5:

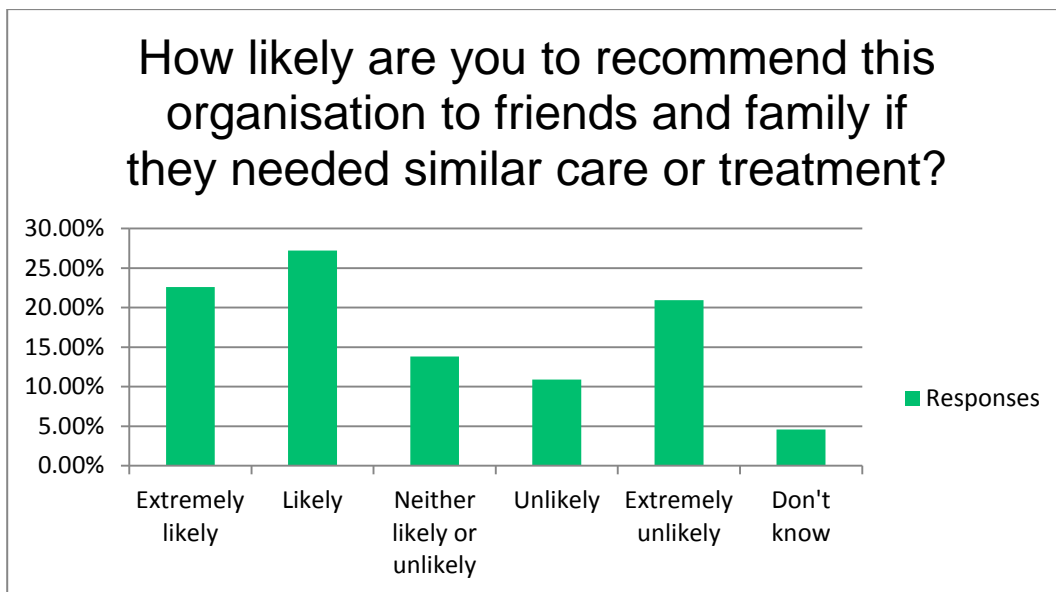
On further analysis of the respondents scoring the service a 5 for question 8 and questions 12-23 the following information was concluded:

- From the 287 people who responded to the survey 143 (49.8%) scored at least one or more aspect of the service as a 5.
- For those scoring only up to two aspects of the service as a 5 the main areas with a high score were:
 - Assessment
 - Staff attitude
 - Accessibility of clinics
- For those who scored a 5 in more than two service areas there appeared to be a pattern of scoring a 5 across the board.
- There was a mixture of service users scoring a 5 with 40 being manual (self-propelled), 67 being manual (assisted) and 24 Powered (electric).
- The highest level of satisfaction was from Calderdale with 51 respondents in this sample group followed by 44 respondents from Greater Huddersfield and 32 for North Kirklees.
- The majority of 5 scores came from service users (83) in total, carers totalled 54 and were split as 32 adult carers and 21 parent carers.
- The majority of respondents scoring a 5 were full time wheelchair users (78) with 54 stating they were not full time.
- Whilst a range of ages rated some or all aspects of the service as a 5 there was a higher response from service users aged between 22 -60 (58 in total) and 61-76+ (54 in total) with a lower response from those under 21 (20 in total).

Q24. How likely are you to recommend this organisation to friends and family if they needed similar care or treatment?

Answer Choices	Responses	
Extremely likely	22.59%	54
Likely	27.20%	65
Neither likely or unlikely	13.81%	33
Unlikely	10.88%	26
Extremely unlikely	20.92%	50
Don't know	4.60%	11
	Answered	239
	Skipped	48

When asked if people would recommend the service to friends and family the scores were higher. From those responding over 49% stated they were likely or extremely likely to recommend the service to friends and family and just over 31% stating unlikely or extremely unlikely.



Q25. Thinking about your recent experiences of using Opcare, what do you think is good about the service?

For this question the following themes are reported (in no particular order), a range of quotes have been selected to support the themes. It is worth noting that we received 24 negative comments to this question – most of these stated nothing or similar, 2 neutral responses and the 104 positive:

- **Staff:** Certain staff were reported as trying hard, being polite, knowledgeable and courteous. In particular occupational therapists and engineers were reported as

providing a good service. However there were some negative comments about people not being called back and improvements to communication.

- **Repairs:** Those responding stated that repairs were carried out promptly and that overall it was a good repair service.
- **Assessments:** some respondents stated that the service user felt involved in the assessment and their views were taken into account by the professional. There were a number of good reports about the assessment process.
- **Estates:** some respondents told us they thought the building was easy to find with good access.
- **Equipment:** There were mixed reviews about the equipment people received and whilst there were some positive comments improvements could be made. There were some reports of good information on how to use the equipment being provided, although the waiting time for accessories was mixed.
- **Waiting times:** Again mixed reviews for the waiting time to receive a chair. Not everyone was experiencing the same standard of service.

- *'I hope I never have any friends or family in the same predicament as I am'*
- *'The staff try very hard when assessing the needs'*
- *'Prompt action/courteous staff'*
- *'The OT staff are good but let down by the service department. They do the best they can due to NHS limits'*
- *'Had wheelchair delivered it was far too big, I wasn't able to push my husband in the chair'*
- *'Easy to find and access the building'*
- *'The service has good and bad points and could be improved. Assessors were friendly and thorough'*
- *'I cannot honestly say that there is a good thing about this service'*
- *'The assessment was good and detailed, however we were told it would be a month to six weeks before we got the chair. We are still waiting!'*
- *'Nothing, I received a bad service from this company'*
- *'I like the assessment is thorough and you are given good advise regarding your child'*
- *'The assessment was good and the ot was proficient, professional and understanding of my needs'*
- *'Ability to fix wheelchair in quick time'*
- *'Assessment was available in hospital to save time'*
- *'the moulded chair was made to fit Helen but by the time she got to the clinic her spine had got worse so they had to make changes to the mould. fit her great now'*
- *'the lady who walked my late wife came to the house and was very good at her assessment'*
- *'but still waiting for my new cushion for my new wheelchair be waiting nearly 3 months'*
- *'Most Staff are pleasant and friendly and try to help. Don't always ring back when they say they will'*
- *'I am sorry I can't think of anything this service has let us down so much that we can't even use the chair we were giving as it compromises my daughters safety'*
- *'The therapists are willing to carry out joint assessments with other therapists. The therapists work very well with the patients'*
- *'The repair service can see a patient quickly'*
- *'Good service, wheel chair came quickly .which enabled my now deceased Husband to go to appointments ...and have a better quality of life up to his death'*
- *'Each person should be seen after referral and on receiving wheelchair person should be given clear instructions and should be checked it is suitable'*

- *'Lots promise but no action'*
- *'The staff are friendly and when you finally get a wheelchair it usually meets her postural needs well'*
- *'Opcare has changed and is more user friendly than previously'*
- *'The Therapy staff are working to help others but lack of funding is the biggest problem'*
- *'Issuing of standard attendant pushed chairs is quick and efficient'*
- *'People are nice but seem to lack knowledge of chairs / parts they are assessing people for and the aftercare is appalling. Had to wait 1 week for them to come out and fix loose wheel. Said they were only in our area on a weds. Not good when your wheel might fall off and it was left loose after they came out to fix a problem with the wheel!!!'*

Q26. Thinking about your recent experiences of using Opcare, what do you think could be improved?

For this question the following themes are reported (in no particular order), a range of quotes have been selected to support the themes. It is worth noting that we received 15 positive comments to this question – most of these stated nothing or similar, 0 neutral responses and the 123 negative:

- **Communication:** this was the aspect of the service most reported as requiring improvement. There were a number of comments relating to phone calls not being returned and people not getting any information or the right information.
- **Waiting times:** waiting times for assessments, equipment, fitting and accessories were seen as taking too long. People reported that there were not enough professionals to support improvements. In addition delivery of equipment should be in morning or afternoon timescales.
- **Staff:** some staff were reported as not communicating clearly or not being available. Respondents told us that staff require training on working with people with a disability/learning disability and families.
- **Estates and access:** Travel time to the service was too long for some and there should be improvements to signage, to help people locate the service. The clinics should also operate on a weekend for additional access.
- **Equipment:** For some the quality of the product was not good or as expected. Unsuitable equipment and lack of choice were the most reported aspects that required improvement, and training on how to use the equipment once it was delivered.
- **Assessments:** Timely assessment for those whose needs are changing particularly for children and young people whose needs could be anticipated in a planned approach to reassessment. Improve how clients are prioritised and more clinics to provide assessment are needed.
- **Repairs:** the waiting time for repairs requires improvement. Respondents want to see more assessors and repair engineers.
- *'communication to clients between stages'*
- *'I had to use a taxi to access appointment which was in Halifax and cost me a lot of money'*
- *'I think it is a common courtesy to return phone calls especially when several messages have been left therefore communication needs to be improved'*
- *'waiting times, quality of product to meet need of patient instead of bet fit'*
- *'there is no after care or training for people as the NHS contract say nothing about training on how to use your chair'*

- *'bring the correct wheelchair we are still waiting for another assessment'*
- *'communication and the time it takes to deal with things. too many big gaps, even the simplest jobs! also not enough staff to deal with more than one task. having to wait until such a person is back off holiday or sick leave!'*
- *'communication - managers not returning to take calls. timely repairs, service users not having to complete themselves'*
- *'communicating the exact location of the pickup (collection) point for the wheelchair. needs to be signposted - also much clearer and larger sign outside the building. elland business park cannot remember the exact name'*
- *'happy with the service, nothing to change'*
- *'number of clinics'*
- *'waiting times for assessment and provision of equipment's. feedback re progress of application'*
- *'they need more funding to employ more physiotherapist'*
- *'location is poor, especially for the people who don't have their own transport. the wait for seating clinics is far too long, these people deserve a better service'*
- *'give a time either morning/ afternoon waiting all day'*
- *'expected time for repair needs to be known by all people involved including van driver'*
- *'giving wrong or insufficient equipment to client.'*
- *'appointments for assessments should be given sooner as children's needs change'*
- *'the wheelchair is heavy no waist strap and not proper measured'*
- *'waiting times for assessment and provision are far too long, even for patients with conditions like mind, range of wheelchairs is limited - a very lightweight option would be good as patients often buy their own. there is a lack of communication with referrers and we have limited knowledge of what is available'*
- *'waiting times for fitting a wheelchair from the time of assessment'*
- *'absolutely everything!!! including leadership & management. relevant children should be automatically reassessed before the outgrow their seating. we know children will grow so why don't they pre-empt that? it's not exactly rocket science.'*
- *'the service needs new staff. they are very rude and offensive regarding disabilities in children. I was told -during a period in which I didn't know if my child was going to live beyond 5 years old - that I shouldn't I had more children if I had a disabled child and would struggle to carry a newborn and push a single wheelchair buggy...the last thing people need is rude, uncompassionate and ignorant staff'*
- *'staff seemed completely uneducated about learning difficulties'*
- *'reduce waiting times by having more staff and more specialist seating clinics'*
- *'funding needs to be reviewed as most of the problems have come from a lack of funding as it was left in a mess from the last provider'*
- *'waiting for assessment for anything other than a standard attendant pushed wheelchair poor. had patients waiting for over 2months for assessment for electric wheelchair (took 4months from referral to receiving chair)'*
- *'they need to train their aftercare staff so they can fix problems when they come out'*

Q27. Please add any other comments about Opcare's posture and mobility service (wheelchair service)

For this question the following themes are reported (in no particular order), a range of quotes have been selected to support the themes. It is worth noting that we received 15 positive comments to this question – most of these stated nothing or similar, 0 neutral responses and the 54 negative:

- **Communication:** The theme of communication (written and verbal) was identified as requiring improvement overall. People wanted staff who communicate in a timely manner including returning calls and providing accurate information on everything from assessments to equipment, delivery times to waiting times.
 - **Funding:** the funding of the service was reported as the issue by some. This included lack of funding to provide the right equipment and enough staff to ensure the service waiting times were reduced.
 - **Privatisation of the service:** some people were worried about the service not being delivered by the NHS.
 - **Waiting times:** Timely support was reported as being essential if the service was to improve to meet the needs of clients.
 - **More monitoring of children and young people:** To ensure the growing needs of children are met there needs to be a more proactive approach to monitoring and assessing need and providing the right equipment.
 - **Repairs:** repair staff were seen as good although the repairs and parts aspects of the service require improvement so that repairs are completed quickly.
 - **Staff turnover (therapists) and attitude:** Some people are worried about the high turnover of staff and the attitude of staff including lack of communication and information.
 - **General satisfaction with the service:** The service for some was seen as not fitting around the needs of the client and not being customer focussed enough to offer a good service. Some people however were satisfied overall with the current service. Parents and carers comments were the strongest in this category with most reporting that the problems reported in the service can cause additional worry, stress and concern to families. A few respondents felt that the service was putting people at risk.
-
- *'it is a shame that the mindless privatisation of our once great NHS saw wheelchair services "outsourced" to elland'*
 - *'I received a call about a month ago confirming the arrival of a new wheelchair I am still waiting for it to be delivered. no further communication from Opcare'*
 - *'it's good for customers and patients for the service apart from waiting times. we are on our 6th wheelchair in 4-5 years because not suitable for very long.'*
 - *'they have done a good job with the NHS limits better than what we had'*
 - *'when I phone to speak to someone, I get hung up on while still talking. ability of MS has deteriorated'*
 - *'repair service needs to be improved and appointments needed on being able to check users growth especially in children that are constantly growing'*
 - *'getting the parts needed takes too long and the lack of communication between people as to what is needed. the wrong parts turning up, and then waiting again for months. couriers service slow and unreliable'*
 - *'this service has been extremely poor since the change from Calderdale wheelchair services.'*
 - *'if we had known how long it would take we would have bought our own. my husband has missed out on days out due to the wheelchair. he is not suitable anymore'*
 - *'pleased to receive the wheelchair'*
 - *'I'm now facing my third Christmas confined to my house, due to the excessive waiting times'*
 - *'speaking with other service users it seems to be that most complaints are very similar with also major concern over the turnover of therapist'*
 - *'more priority should be given to children who are growing and appointments should be every 6 months'*

- *'the man that comes to repairs of chairs is always prompt and friendly'*
- *'the service was only used for obtaining wheelchair that was suitable for requirements'*
- *'rubbish we are housebound waiting for them to even get us an appointment to try a chair'*
- *'we were told it would be a month before it was ready. after 6 weeks it hadn't even been processed. we were told they had to prioritise. my husband has mnd the wheelchair we already have us not comfortable or practical for him. if we had known it would have taken so long we would have bought our own. I wouldn't recommend the service.'*
- *'action must be taken. these people are human beings who could do without the additional stress!'*
- *'my son has been waiting since may, it is emergency situation, he is sliding down his chair to then end and has fallen out he has a chest strap so when this is fastened it comes to his neck when he has slid down, such, that respite are concerned has I am too more so me, the chair isn't helping at all, I've had to wait for a special seat, then got appointment for it to be cancelled as the back hadn't arrived, I've now got appointment on the 11 oct but this is at elland but would have been better to go to eddercliffe centre cleckheaton'*
- *'putting clients are at risk as waiting too long for suitable wheelchairs'*
- *'having to wait months for parts needed then told my chair is dis continued so no parts available'*
- *'I need to contact them about repairs to her chair but keep putting it off as I dread dealing with the service. like all services we are just getting there is no money to provide equipment / staff so just think it's going to get worse'*
- *'when someone has a terminal illness, they do not have time on their side and it would improve their quality of life to have things whilst they are able to use them.'*
- *'good work'*

8. Equality

The engagement was focused on users of the posture and mobility service provided by Opcare, their carers and others with a specific interest.

48% (134) of total respondents said they were service users, 45% (126) said they were carers of adults or children and young people, and just over 9% (26) were from other groups.

Given the relatively small numbers of people who took part in the survey, relevant equality data has been analysed where possible, to understand if service users and carers who took part were representative of the local population, based on the 2011 Census data. Areas of under- and over-representation are highlighted.

The responses have also been analysed to understand if there were any trends or differences in responses by particular communities or groups, where this is possible and meaningful.

Overall, approximately 22% of survey respondents chose not to complete the equality monitoring form, and some were partially completed.

Sex

	Respondent profile		% of Calderdale population with a disability (all impairments)*	Differential %	% of Kirklees population with a disability (all impairments)*	Differential %
	No.	%				
Service users						
Female	63	53.4	54.1	-0.7	53.9	-0.5
Male	54	45.8	45.9	-0.1	46.1	-0.3
Prefer not to say	1	0.8				

Carers						
	Respondent profile		Calderdale Census profile %	Differential %	Kirklees Census profile %	Differential %
Female	54	52.4	48.9	3.5	50.6	1.8
Male	40	38.8	51.1	-12.3	49.4	-10.6
Prefer not to say	9	8.7				

* Calderdale and Kirklees figures shown are the % of people with a disability who are female or male

The service user data has been compared to the populations in Calderdale and Kirklees who stated in the 2011 Census they had a long-term health problem or disability¹ - this includes physical or mobility impairment, sensory impairment, mental health condition, learning disability or cognitive impairment or a long term condition². Carer data has been compared to the local population as recorded in the 2011 Census.

This suggests the views of both male and female service users are represented and heard in this engagement.

The data also suggests that female carers are over-represented, and male carers are under-represented. This may be because women often take more responsibility for family health; this is based on evidence from previous surveys.

¹ Source: Census 2011, Office for National Statistics -'Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?' (Limited a lot and limited a little).

² A physical or mobility impairment (such as using a wheelchair to get around and/or difficulty using your arms), sensory impairment (such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment), mental health condition (such as depression or schizophrenia), learning disability (such as Downs syndrome or dyslexia) or cognitive impairment (such as head-injury) and a long term condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy).

Age

	Age of service users ³		% of Calderdale population with a disability (all impairments)*	Differential %	% of Kirklees population with a disability (all impairments)*	Differential %
	No.	%				
0-5	6	2.3	2.6	-0.3	2.2	0.1
6-12	29	11.3	3.7	7.6	3.6	7.7
13-21	18	7.0	4.6	2.4	4.7	2.3
22-45	50	19.5	8.7	10.8	8.5	11.0
46-60	46	18.0	18.0	0	19.3	-1.3
61-75	53	20.7	34.8	-14.1	36.3	-15.6
76 and over	40	15.6	67.6	-52.0	68.4	-52.8
Prefer not to say	14	5.5				

* Calderdale and Kirklees figures shown are the % of people with a disability from that particular age group

The service user data has been compared to the populations in Calderdale and Kirklees who stated in the 2011 Census they had a long-term health problem or disability⁴ - this includes physical or mobility impairment, sensory impairment, mental health condition, learning disability or cognitive impairment or a long term condition.

The data suggests the views of service users aged 0-60 years are represented well in this engagement. Those aged 6-12, 22-45 years are over-represented. Service users aged 61 years and above are under-represented.

No data is available on the age of carers.

Ethnicity

The service user data has been compared to the populations in Calderdale and Kirklees who stated in the 2011 Census they had a long-term health problem or disability⁵ - this includes physical or mobility impairment, sensory impairment, mental health condition, learning disability or cognitive impairment or a long term condition. Carer data has been compared to the local population as recorded in the 2011 Census.

³ It should be noted that the Census age categories do not match exactly those used in the engagement survey. The engagement data has been matched to the nearest Census age category.

⁴ Source: Census 2011, Office for National Statistics - 'Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?' (Limited a lot and limited a little).

⁵ Source: Census 2011, Office for National Statistics - 'Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?' (Limited a lot and limited a little).

It should be noted that:

- White includes English, Welsh, Scottish, Northern Ireland, British, 'White Other': Irish, Gypsy or Irish Traveller, any other white groups.
- Asian/Asian British includes Indian, Pakistani, Bangladeshi, Chinese and any other Asian background.
- Mixed/multiple ethnic background includes White and Black Caribbean, White and Black African, White and Asian and other mixed/multiple ethnic background.

	Respondent profile		% of Calderdale population with a disability (all impairments)*	Differential %	% of Kirklees population with a disability (all impairments)*	Differential %
	No.	%				
Service users						
Asian or Asian British	8	7.4	14.1	-6.7	14.3	-6.9
Black or Black British	1	0.9	9.2	-8.3	16.7	-15.8
Mixed or multiple ethnic groups	0	0	12.2	-12.2	11.0	-11.0
White	95	88.0	18.5	69.5	18.7	69.3
Other ethnic groups: Arab	0	0	12.6	-12.6	6.2	-6.2
Any other ethnic group	1	0.9	13.2	-12.3	15.3	-14.4
Prefer not to say	3	2.8				

	Respondent profile		Calderdale Census profile %	Differential %	Kirklees Census profile %	Differential %
	No.	%				
Carers						
Asian or Asian British	11	11.8	8.3	3.5	16.0	-4.2
Black or Black British	0	0	0.4	-0.4	1.9	-1.9
Mixed or multiple ethnic groups	5	5.4	1.3	4.1	2.3	3.1
White	75	80.6	89.7	-9.1	76.7	3.9
Other ethnic groups: Arab	0	0	0.10	-0.1	0.6	-0.6
Any other ethnic group	0	0	0.2	-0.2	0.4	-0.4
Prefer not to say	2	2.2				

* Calderdale and Kirklees figures shown are the % of people with a disability from that particular ethnic group

This data suggests the views of White service users and carers (including 'White other') are very well represented in this engagement – over 80% respondents were from this group. The views of Black and Minority Ethnic (BME) groups are under-represented in this engagement.

Disability

	Service user profile		Calderdale Census profile %	Differential %	Kirklees Census profile %	Differential %
	No.	%				
Has a disability	153	69.2	18.0	51.4	17.7	51.6
Does not have a disability	64	28.9				
Prefer not to say	4	1.8				

As expected, the views of disabled service users are over-represented, due to the nature of this engagement. It was not possible to evaluate disability data relating to carers.

Carers

	Respondents profile %		Calderdale Census profile %	Differential %	Kirklees Census profile %	Differential %
	No.	%				
Carers	126	45.2	10.5	34.7	10.4	34.8

Carer data has been compared to the local population as recorded in the 2011 Census. As with disability, the views of carers are over-represented, due to the nature of this engagement.

Analysis

Analysis has been carried out on the responses to a number of questions to understand if there is any difference among people from protected groups. Given the extent of over- and under-representation described above, trends or particular outcomes are only identified when the number of respondents is large enough for analysis to be meaningful.

The questions selected for further analysis are:

- How do you rate Opcare on
 - The average waiting time for assessments
 - The waiting time from assessment to receiving wheelchair
 - Overall experience
- Would you recommend this service to friends and family.

Areas where there is a difference between different groups are described below.

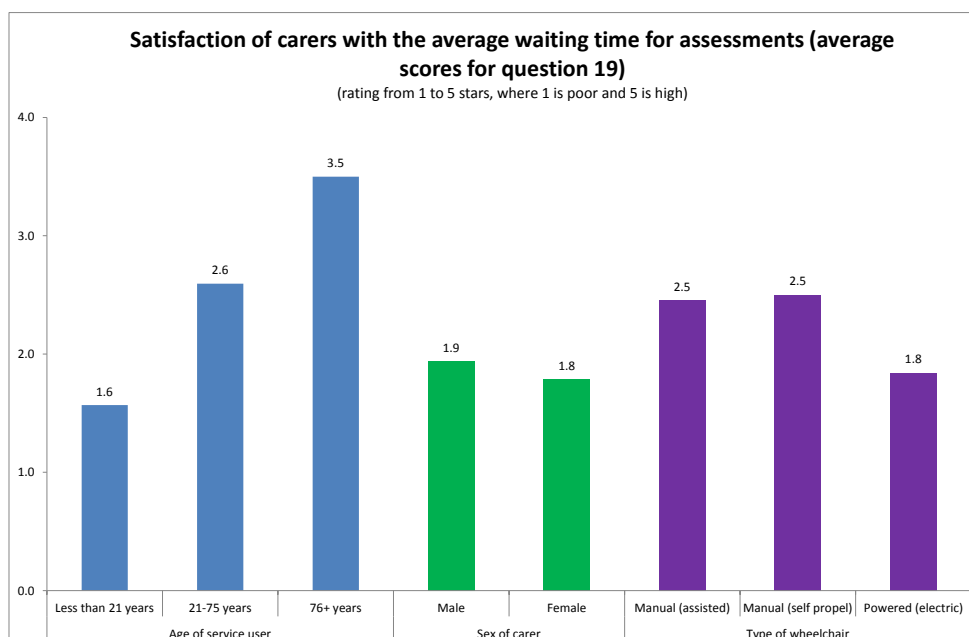
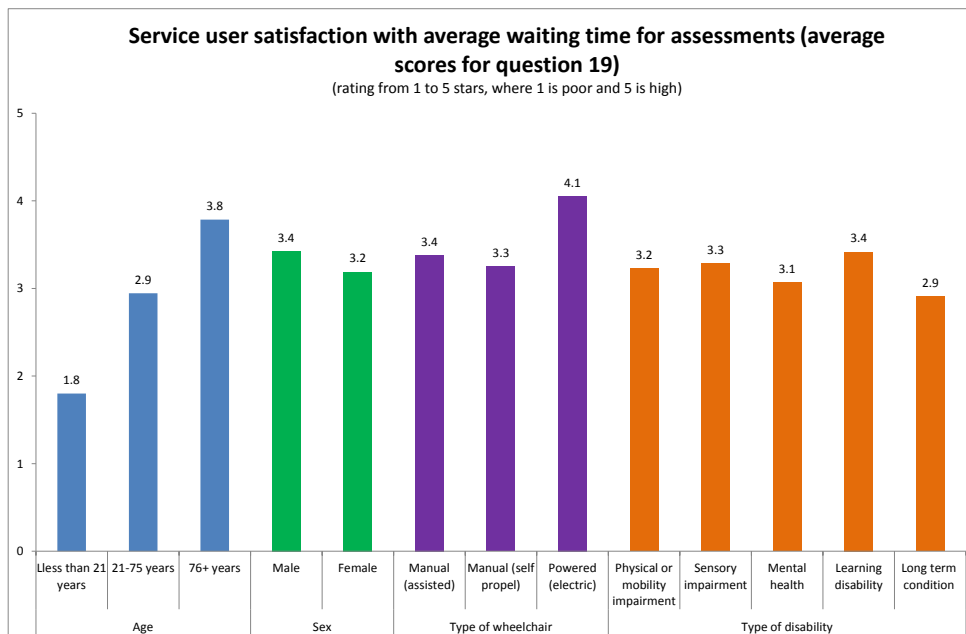
How do you rate Opcare on average waiting time for assessments?

Feedback from both service users and carers suggests that service users aged 76 years and above are the most satisfied with waiting times, while those aged 21 years and below are the least satisfied. This is important, given people aged 21 years and below are well represented in this engagement.

There is a mixed picture on the views of people based on the type of wheelchair they use: service users using powered wheelchairs are the most satisfied, in contrast with carers of those with powered wheelchairs, who are the least satisfied.

Service users with long-term health conditions are the least satisfied compared to those with other types of impairment.

Overall, service users tend to be more satisfied than carers.



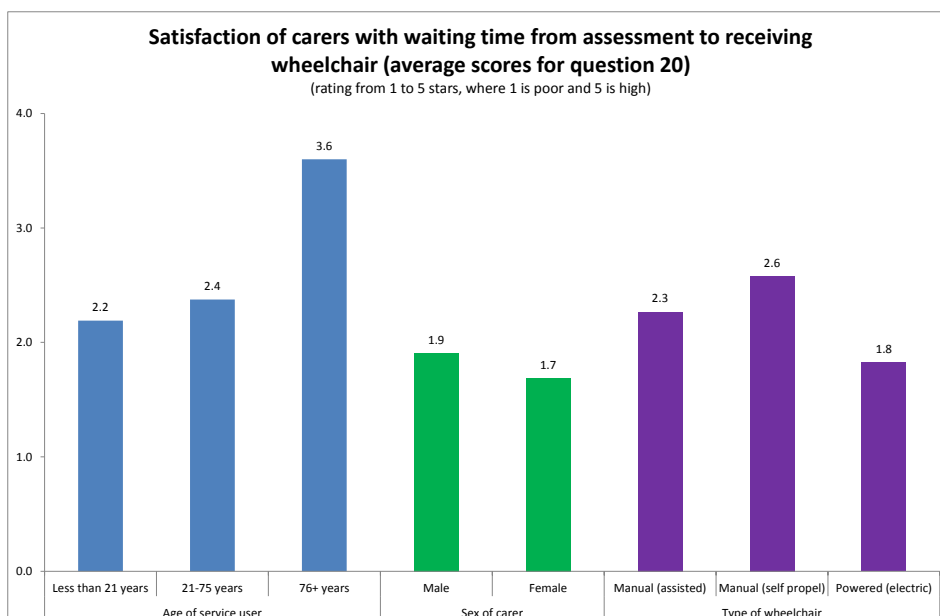
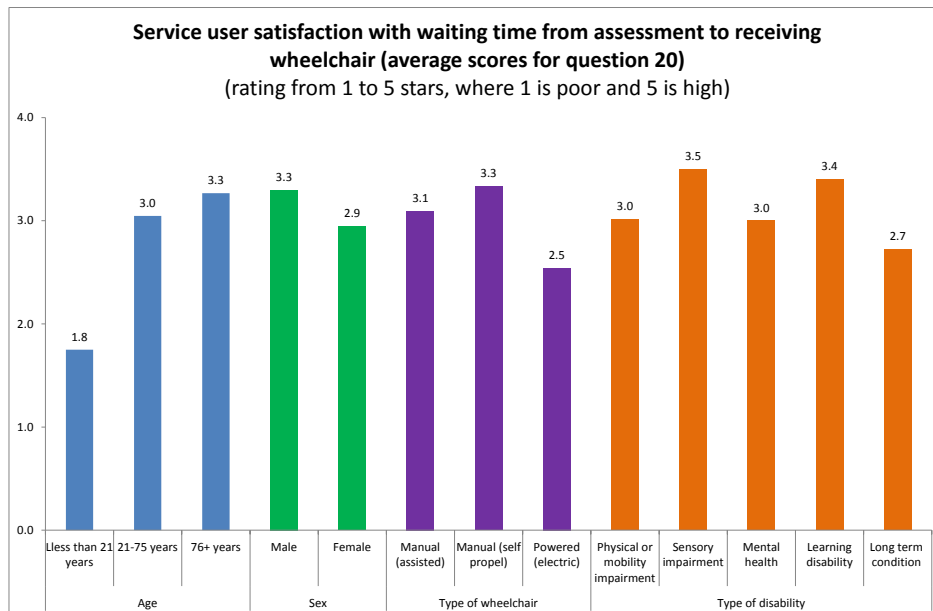
How do you rate Opcare on the waiting time from assessment to receiving wheelchair?

Feedback from both service users and carers suggests that service users aged 21 years and above are significantly more satisfied with waiting time from assessment to receiving a wheelchair, while those aged 21 years and below are significantly less satisfied. This is important, given people aged 21 years and below are well represented in this engagement.

Service users and carers of those using powered wheelchairs are the least satisfied, compared to service users and carers of those using other wheelchair types.

Service users with a physical or mobility impairment, mental health condition and long-term health condition are less satisfied compared those with a sensory impairment or learning disability.

Overall, service users tend to be more satisfied than carers.

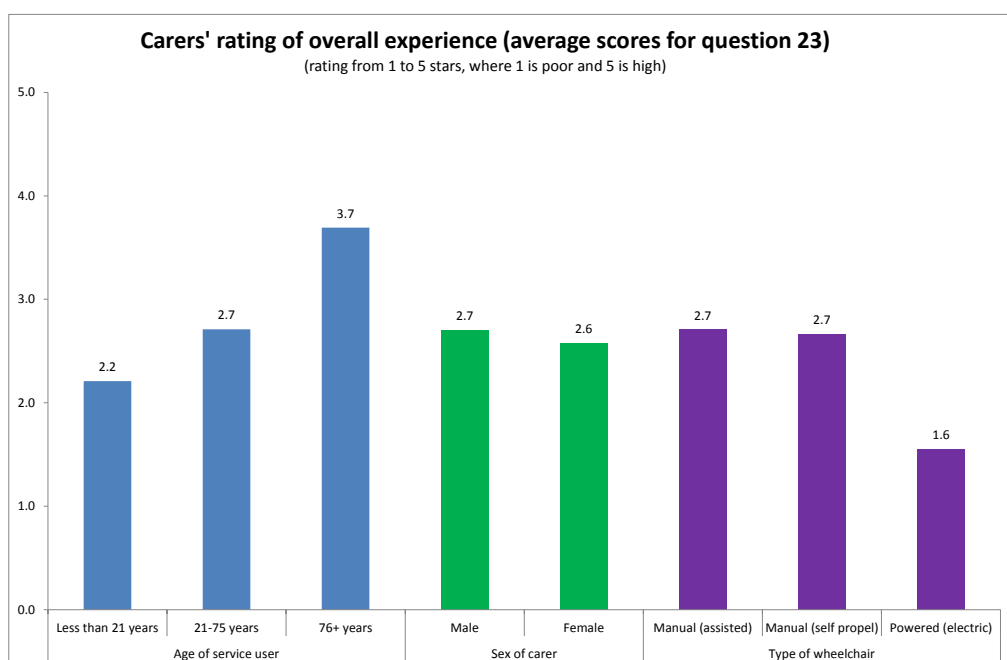
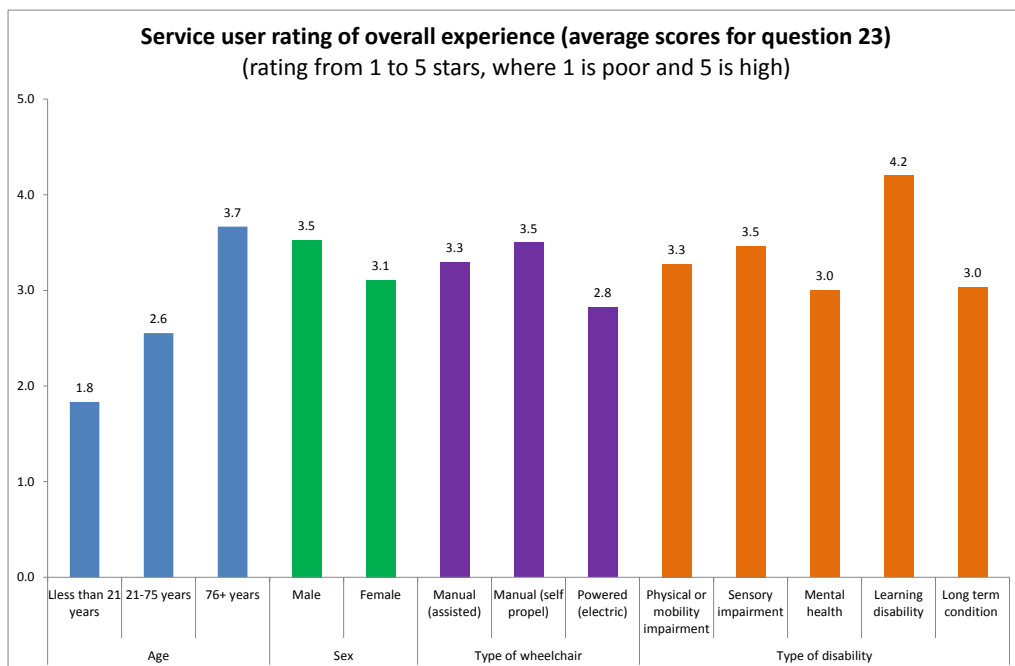


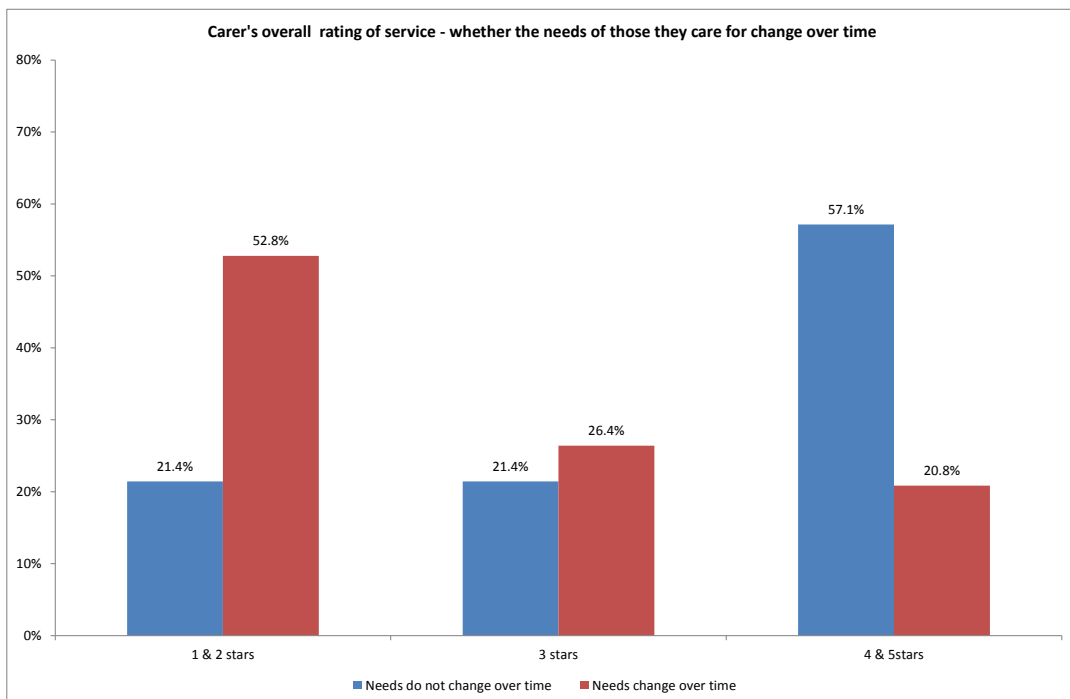
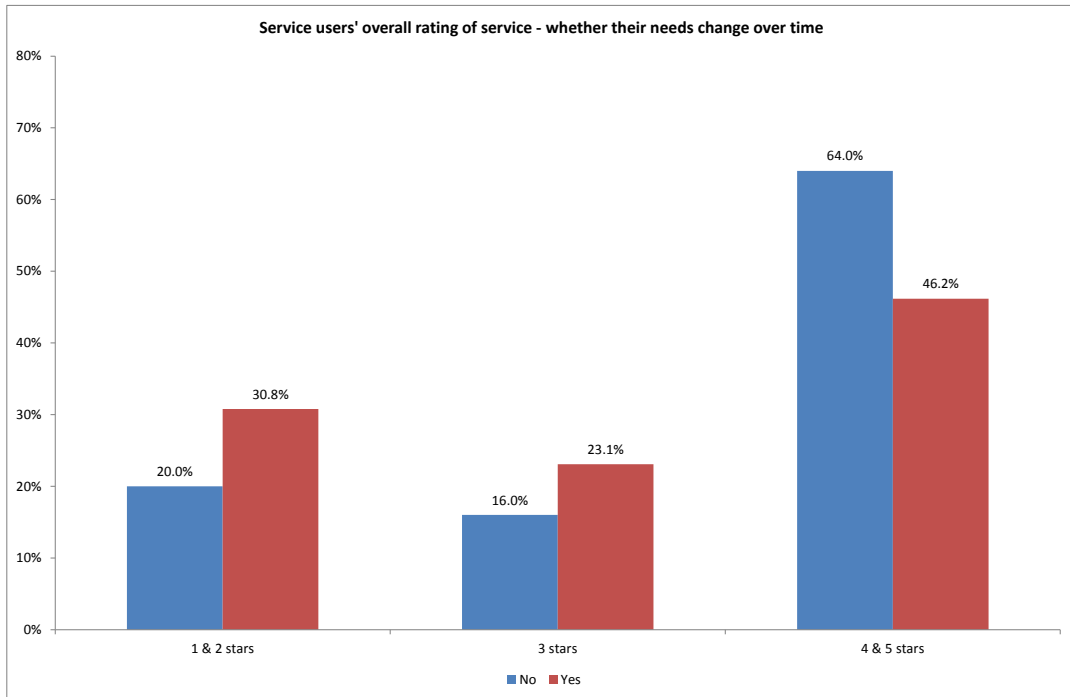
How do you rate Opcare on overall experience?

Feedback from both service users and carers suggests that those aged 21 years and below are significantly less satisfied than people of other ages. Satisfaction appears to improve with the age of the service user, however this should be treated with caution as people aged 61 years and above are under-represented in this engagement.

Service users and carers of those using powered wheelchairs are the least satisfied, compared to other wheelchair types.

Service users whose needs change over time tend to be less satisfied than those whose needs do not change over time. The level of dissatisfaction is significantly greater among carers of those whose needs change over time.





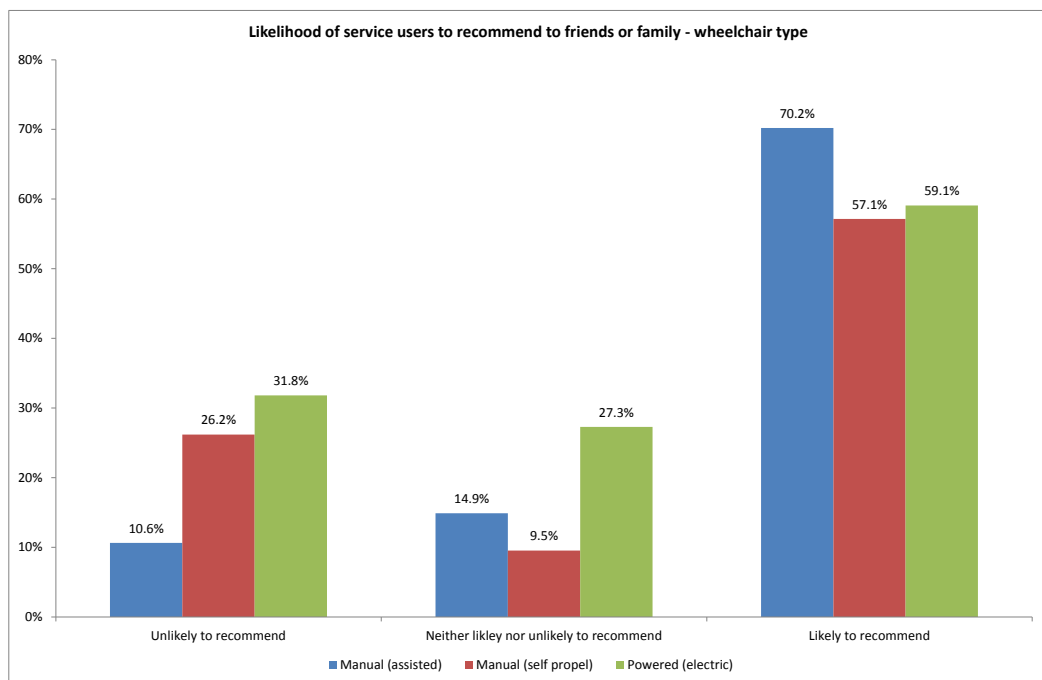
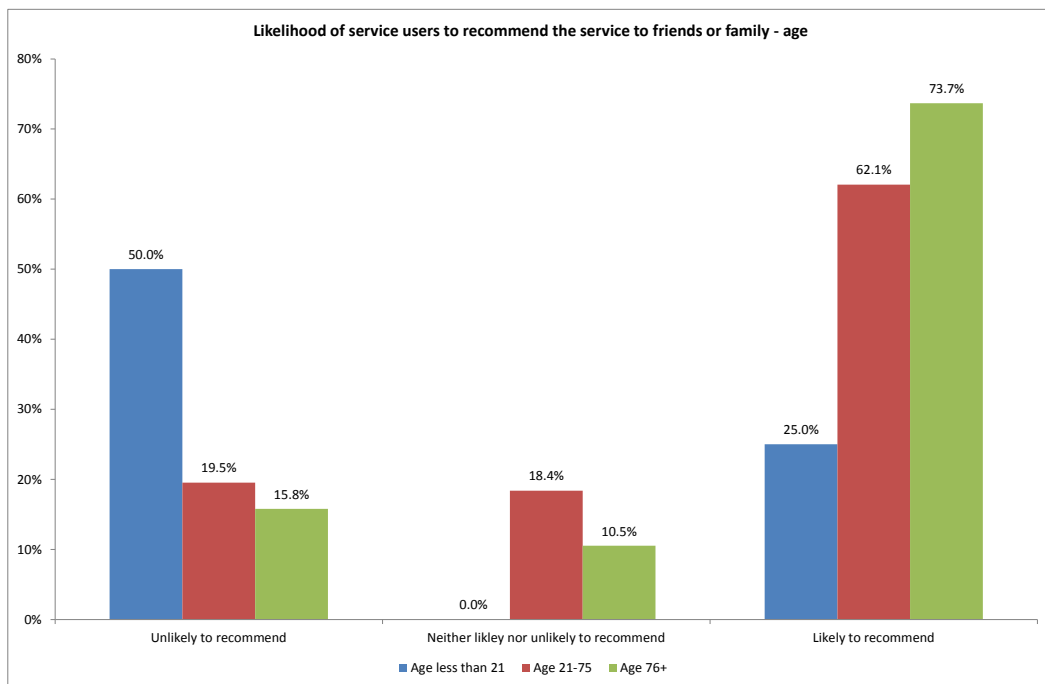
Would you recommend this service to friends and family?

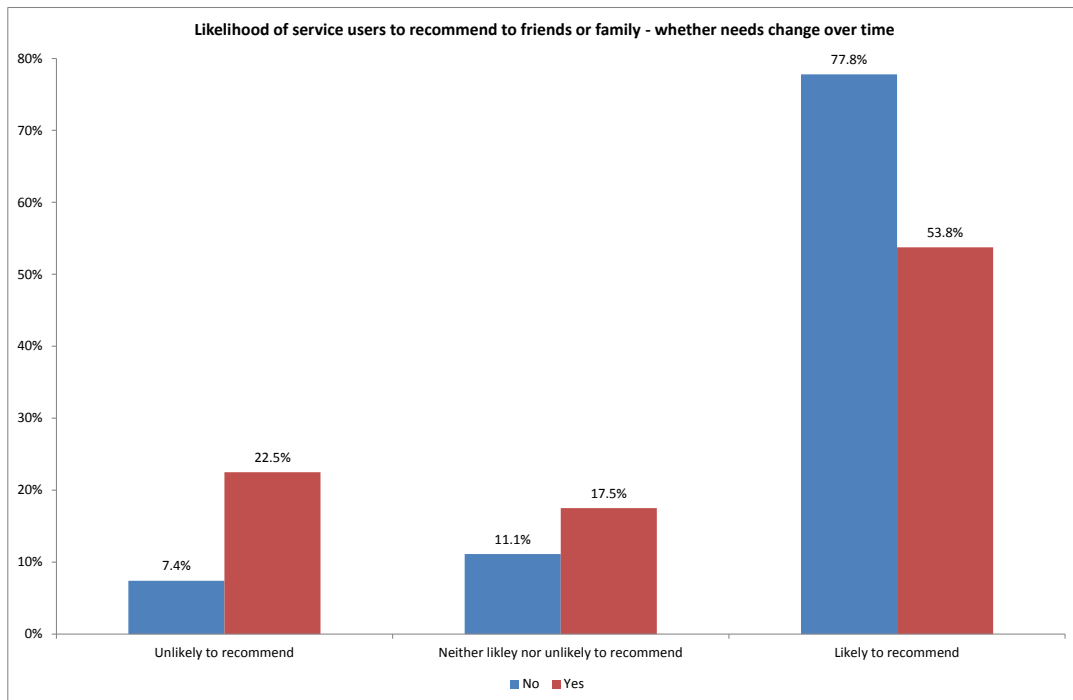
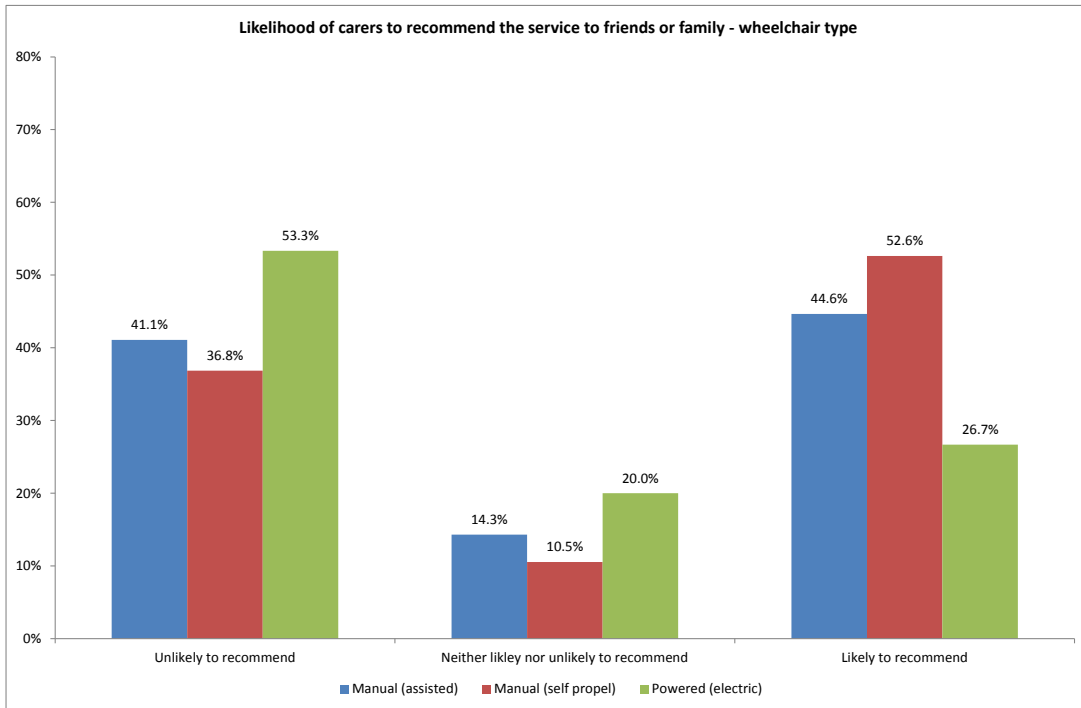
Likelihood to recommend the service increases with the age of the service user (noting that people aged 61 years and above are under-represented in this engagement). A relatively large proportion of service users and carers of those aged 76 years and above are likely to recommend the service. In contrast, a relatively large proportion of those aged 21 years and below is very unlikely to recommend the service to friends and family. This is important, given people aged 21 years and below are well represented in this engagement.

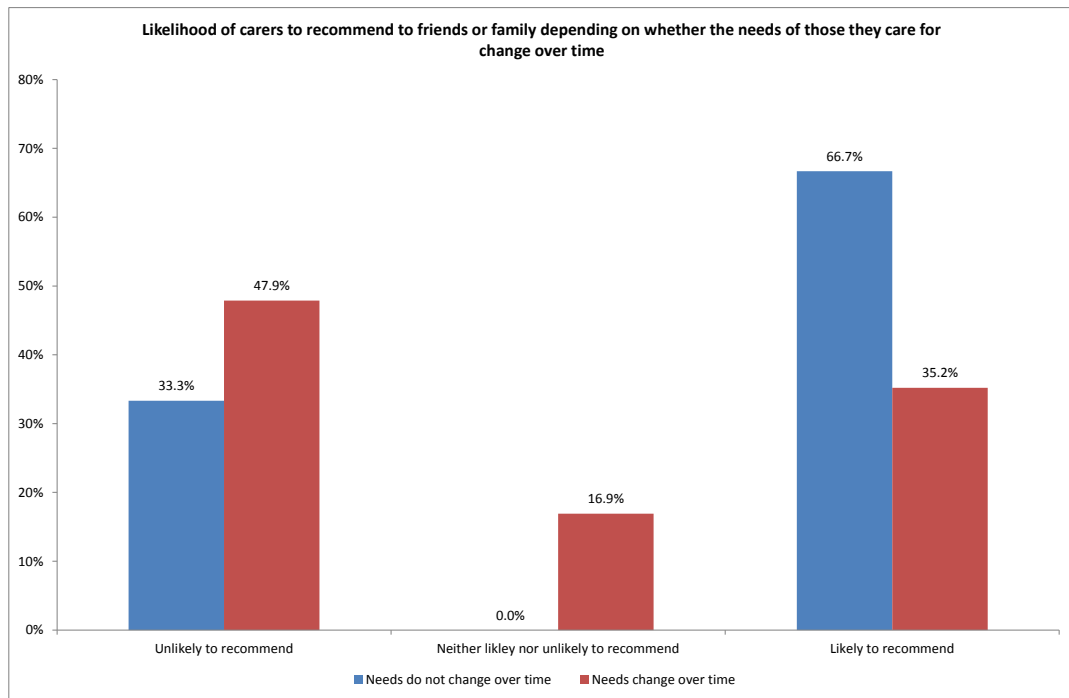
Those using manual assisted wheelchairs are very likely to recommend the service to friends and family. Service users and carers of those using powered wheelchairs are the least likely to recommend the service.

Compared to other impairments, those with long-term health conditions were the least likely to recommend the service. People whose needs don't change over time were more likely to recommend the service compared to those whose conditions do change. The level of dissatisfaction is significantly greater among carers of those whose needs change over time.

In the main, carers tend to be more dissatisfied than service users.







Recommendations

Analysis of the engagement indicates there are significant gaps among certain equality groups. Therefore, it is strongly recommended that further engagement is carried out in Calderdale and Kirklees, in order to fully understand how Opcare and the CCGs can best meet the needs of current or potential service users, their carers and families.

This should be aimed at **older service users/their carers** (aged 61 years and above) and **Black and Minority Ethnic (BME) groups/their carers** and should consider:

- Does a representative number currently use the service provided by Opcare and if so, what are their views?
- If these groups are under-represented as users of Opcare services, why is this the case, and what would they need from the service?

Feedback from additional engagement should be analysed in conjunction with these results. As a starting point, these initial findings suggest the specific groups requiring additional action as a priority are:

- **children and young people (aged 21 or below)** (whose needs change over time as they grow and develop, or due to the nature of their impairment/health condition) – speed and ability to respond to those with more complex needs will be important;
- **those whose needs change over time** – speed and ability to respond to those with more complex needs will be critical;
- **those with long term health conditions** – whose needs may be more complex;
- **people who use powered wheelchairs** – whose requirements may be more complex;
- **carers** – ensuring the needs of all carers are met effectively.

9. Overall findings and common themes

The overall common themes and key findings from this engagement and previous engagement activity are set out below:

Analysis of the engagement indicates there are significant gaps on feedback gathered from older service users/their carers (aged 61 years and above) and Black and Minority Ethnic (BME) groups/their carers. It is strongly recommended that further engagement is carried out among these groups in Calderdale and Kirklees, in order to fully understand how Opcare and the CCGs can best meet the needs of current or potential service users, their carers and families.

The key areas of improvement are identified as:

- Waiting time from assessment to receiving a wheelchair – particularly for children and young people and those using powered wheelchairs
- Waiting for an assessment – particularly for children and young people, and those with long-term health conditions
- Getting issues resolved easily and quickly
- Repair service
- Communication (written and verbal) information

The other aspects of service requiring some improvement:

- How Opcare works with other professionals, such as physiotherapy or occupational therapy
- Accessibility of the clinics
- How well the assessment took into account personal and lifestyle needs
- Choice of time and location of appointments
- Assessment in general
- Equipment meets your/person you care for needs

- From the 287 people who responded to the survey 136 (47%) scored at least one or more aspect of the service as a 1 and 143 (49.8%) scored at least one or more aspect of the service as a 5.

- The majority of respondents scoring a 1 were identified as full time wheelchair users (87) and carers (64) in total. There was a higher response from service users under the age of 21 (38 in total) with a lower response from those over 76 (10 in total)

- The majority of 5 scores came from service users (83) in total. There was a higher response from service users aged between 22-60 (58 in total) and 61-76+ (54 in total) with a lower response from those under 21 (20 in total).

Other considerations are:

- **Communication:** The theme of communication (written and verbal) was identified as requiring improvement overall. People wanted staff who communicate in a timely manner including returning calls and providing accurate information on everything from assessments to equipment, delivery times to waiting times. This was the aspect of the service most reported as requiring improvement. There were a number of

comments relating to phone calls not being returned and people not getting any information or the right information.

- **Staff:** some staff were reported as not communicating clearly or not being available. Respondents told us that staff require training on working with people with a disability/learning disability and families.
- **Assessments:** Timely assessment for those whose needs are changing particularly for children and young people whose needs could be anticipated in a planned approach to reassessment. Improve how clients are prioritised and more clinics to provide assessment are needed.
- **Waiting times:** Timely support was reported as being essential if the service was to improve to meet the needs of clients. Waiting times for assessments, equipment, fitting and accessories were seen as taking too long. This was of particular concern for children and young people, and those with long-term health conditions. People reported that there were not enough professionals to support improvements. In addition delivery of equipment should be in morning or afternoon timescales.
- **Equipment:** For some the quality of the product was not good or as expected. Unsuitable equipment and lack of choice were the most reported aspects that required improvement, and training on how to use the equipment once it was delivered.
- **Repairs:** repair staff were seen as good although the repairs and parts aspects of the service require improvement so that repairs are completed quickly. The waiting time for repairs requires improvement. Respondents want to see more assessors and repair engineers.
- **Staff turnover (therapists) and attitude:** Some people are worried about the high turnover of staff and the attitude of staff including lack of communication and information.
- **Estates and access:** Travel time to the service was too long for some and there should be improvements to signage, to help people locate the service. The clinics should also operate on a weekend for additional access.
- **More monitoring of children and young people:** To ensure the growing needs of children are met there needs to be a more proactive approach to monitoring and assessing need and providing the right equipment quickly.
- **General satisfaction with the service:** The service for some was seen as not fitting around the needs of the client and not being customer focussed enough to offer a good service. Those who were least satisfied were children and young people (aged 21 years and below), people whose needs change over time or have long term health conditions, people using powered wheelchairs, and carers.

- **Funding:** some people were worried about the service not being delivered by the NHS. In addition people were also concerned about adequate funding for the right equipment and to ensure there were enough staff.
- **Carers:** Improving services overall will improve satisfaction among carers. However they also need to feel the specific issues they encounter as carers are understood and responded to quickly.

People also told us the aspects of the service that work well, these were:

- **Staff:** Certain staff were reported as trying hard, being polite, knowledgeable and courteous. In particular occupational therapists and engineers were reported as providing a good service. However there were some negative comments about people not being called back and improvements to communication.
- **Repairs:** Those responding stated that repairs were carried out promptly and that overall it was a good repair service.
- **Assessments:** some respondents stated that the service user felt involved in the assessment and their views were taken into account by the professional. There were a number of good reports about the assessment process.
- **Estates:** some respondents told us they thought the building was easy to find with good access.
- **Equipment:** There were mixed reviews about the equipment people received, and whilst there were some positive comments, improvements could be made. There were some reports of good information on how to use the equipment being provided, although the waiting time for accessories was mixed.
- **Waiting times:** Again mixed reviews for the waiting time to receive a chair. Not everyone was experiencing the same standard of service.

10. How the findings will be used to inform our plans

The engagement process has provided the CCGs with the views of a range of local people on Wheelchair services. These views will be considered along with previous engagement findings cited in this document to inform the future service specification for wheelchair services.

If as part of the service specification there are considerable changes to the current service model then the CCGs will be required to formally consult on those changes.

Updates on this service including any reports will be found on Opcare, the local CCG and Healthwatch websites. This report will be made publically available in January 2018 and contact will be made by Healthwatch in the interim to all those respondents who requested this in the survey response. We would like to thank all respondents who have given their time to share their views.

Appendix 1: Survey and Equality Monitoring Form



We need your views on Opcare's Posture and Mobility Service (wheelchair service)

Opcare provide Posture and Mobility Services (wheelchair services) in Kirklees and Calderdale. The Clinical Commissioning Group (who fund the service) are undertaking a review and would welcome your views to develop and improve wheelchair services in the future.

Healthwatch are working with the Clinical Commissioning Group to gather feedback from people who use Opcare's wheelchair services and from staff who work with people who access Opcare's services.

You may have recently completed a similar survey for Healthwatch - don't worry, the feedback you have already given will still be considered as part of the review but you are welcome to complete this survey too if there is anything additional or new you would like to say.

Please note that any views you share will remain confidential, and no personal information will be shared, so feel free to talk to us openly. Anonymised comments may be used in Healthwatch reports and other communications.

You can leave your contact details at the end if you would like Healthwatch to contact you about your experience.

Closing date - Friday 3 November 2017. A summary of the data and feedback collected will be made available on the [Healthwatch Kirklees](#) website before the end of December 2017.

1. Have you used Opcare's posture and mobility service in the past 2 years? (please tick)	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Unsure

2. Are you:	
<input type="checkbox"/>	A service user
<input type="checkbox"/>	A parent/carer for a child or young person
<input type="checkbox"/>	A carer for an adult
<input type="checkbox"/>	Other (please specify) <input style="width: 400px; height: 20px;" type="text"/>
If you are not a service user, parent or carer then please go straight to question 13	

3. Please tell us the age of the person who uses Opcare's services					
<input type="checkbox"/>	0-5	<input type="checkbox"/>	6-12	<input type="checkbox"/>	13-21
<input type="checkbox"/>	22-45	<input type="checkbox"/>	46-60	<input type="checkbox"/>	61-75
<input type="checkbox"/>	76 and over				

4. Please tell us the first part of the postcode for the person who uses Opcare's services (eg WF12, HD1)	
<input style="width: 100%; height: 30px;" type="text"/>	






About your posture and mobility needs

5. Do you (or the person you care for) use a wheelchair full time?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

6. When was the last time you used the posture and mobility service (for yourself or someone you care for)?					
<input type="checkbox"/>	0-6 months	<input type="checkbox"/>	7-12 months	<input type="checkbox"/>	13-18 months
<input type="checkbox"/>	19-24 months	<input type="checkbox"/>	Over 2 years		

7. Do your needs (or the needs of the person you care for) change over time?	
<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Don't know

8. When you (or the person you care for) were first assessed for a wheelchair, how well did the assessment take account of your personal and lifestyle needs?
(1 star is poor, 5 stars is excellent)

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
Tell us more	

9. How long did you (or the person you care for) wait to receive a wheelchair?
This is from being referred to getting the wheelchair.

<input type="checkbox"/>	0-12 weeks	<input type="checkbox"/>	13-18 weeks	<input type="checkbox"/>	19-30 weeks
<input type="checkbox"/>	31-52 weeks	<input type="checkbox"/>	Other (please specify)		






10. What kind of wheelchair do you (or the person you care for) use?

<input type="checkbox"/>	Manual (self propel)
<input type="checkbox"/>	Manual (assisted)
<input type="checkbox"/>	Powered (electric)

11. What additional features does the chair have (tick all that apply)






<input type="checkbox"/>	Head control	<input type="checkbox"/>	Joystick	<input type="checkbox"/>	Lap belt
<input type="checkbox"/>	Ankle strap	<input type="checkbox"/>	Head rest	<input type="checkbox"/>	Profile back
<input type="checkbox"/>	Tilt in space	<input type="checkbox"/>	Other (please specify)		

12. Please rate how well the equipment meets your needs (or the needs of the person you care for)
(1 star is poor, 5 stars is excellent)






	
	
	
	
	
Tell us more	

About the posture and mobility service: How do you rate Opcare on the following (1 star is poor and 5 stars is excellent)

13. Accessibility of clinics

14. Communication (verbal and written information given to you)

15. Staff attitude	
	★
	★★
	★★★
	★★★★
	★★★★★

16. Getting issues resolved quickly and easily	
	★
	★★
	★★★
	★★★★
	★★★★★

17. Assessment	
	★
	★★
	★★★
	★★★★
	★★★★★

18. Choice of time and location of appointments	
	★
	★★

	★ ★ ★
	★ ★ ★ ★
	★ ★ ★ ★ ★

19. Waiting time for assessment

	★
	★ ★
	★ ★ ★
	★ ★ ★ ★
	★ ★ ★ ★ ★

20. Waiting time from assessment to receiving wheelchair




	★
	★ ★
	★ ★ ★
	★ ★ ★ ★
	★ ★ ★ ★ ★

21. If you have used the repair service in the last 12 months how would you rate it?

	★
	★ ★
	★ ★ ★
	★ ★ ★ ★
	★ ★ ★ ★ ★



Tell us more

22. How Opcare works with other professionals, such as physiotherapy and occupational therapy

Overall experience of using Opcare’s posture and mobility service

23. How do you rate your overall experience of this service?
(1 star is poor, 5 stars is excellent)

24. How likely are you to recommend this organisation to friends and family if they needed similar care or treatment?

	Extremely likely
	Likely
	Neither likely or unlikely
	Unlikely
	Extremely unlikely
	Don't know

25. Thinking about your recent experience of using Opcare, what do you think is good about the service?

--

26. Thinking about your recent experience of using Opcare, what do you think could be improved?

--

27. Please add any other comments about Opcare's posture and mobility service here.

--

28. If you would like Healthwatch to contact you regarding your experience of using Opcare's posture and mobility service please leave your contact details here.

--

Equality Monitoring Form

It's really important to Healthwatch that we ask a diverse group of people for their views. To make sure that we do this, we ask people to give us some information about themselves, and we review this regularly to check we are not discriminating against any group of people by not asking for their views. If you can, please answer the questions below for the person who uses Opcare's posture and mobility service.

1. What gender are you?

- Male Female
- Prefer not to say

2. Which country were you born in?

- Prefer not to say

3. Do you belong to any religion?

- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- Sikhism
- No religion
- Other (Please specify in the box below)

- Prefer not to say

4. What is your ethnic group?

Asian or Asian British:

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian background (please specify)

Black or Black British:

- Caribbean
- African
- Other Black background (please specify)

Mixed or multiple ethnic groups:

- White and Black Caribbean
- White and Black African
- White and Asian
- Other mixed background (please specify)

White:

- English/Welsh/Scottish/Northern Irish/British
- Irish
- Gypsy or Irish Traveller
- Other White background (please specify)

Other ethnic groups:

- Arab
- Any other ethnic group (please specify)

- Prefer not to say

5. Do you consider yourself to have a disability/impairment?

- Yes No
 Prefer not to say

Type of disability/impairment:

Please tick all that apply

- Physical or mobility impairment**
(such as using a wheelchair to get around and / or difficulty using their arms)
- Sensory impairment**
(such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment)
- Mental health condition**
(such as depression or schizophrenia)
- Learning disability**
(such as Downs syndrome or dyslexia) or cognitive impairment (such as head-injury)
- Long term condition**
(such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
- Prefer not to say

6. Are you a carer?

Do you look after, or give any help or support to a family member, friend or neighbour because of a long term physical disability, mental ill-health or problems related to age?

- Yes No
 Prefer not to say

7. Are you pregnant?

- Yes No
 Prefer not to say

8. Have you given birth in the last 6 months?

- Yes No
 Prefer not to say

9. Please select the option that best represents your sexual orientation?

- Bisexual (both sexes)
 Gay (same sex)
 Heterosexual/straight (opposite sex)
 Lesbian (same sex)
 Other
 Prefer not to say

10. Are you transgender? Is your gender identity different from the sex you were assumed at birth?

- Yes No
 Prefer not to say

Once completed please return the form by no later than **Friday 24 November 2017** to

**Healthwatch Kirklees
Units 11/12 Empire House
Wakefield Old Road
Dewsbury
WF12 8DJ**

Thank you for taking the time to complete this fo

Appendix 2: Healthwatch report of findings



Opcare Survey - follow up contacts by Healthwatch Kirklees

From 286 respondents, 100 asked for Healthwatch to contact them. Each person was contacted by phone call or email and they were asked “is there anything else you would like to add to the feedback you’ve already given?” Additional comments are shown below.

Some people wanted Opcare to contact them to give them an update - details were sent through to Opcare so that they could make contact.

Comments

“My child has been housebound since mid-October, no means of getting out of house without wheelchair as child is too heavy to lift. MP got involved and the appointment has been brought forward to 12 Dec 17”

“People are desperately trying to get a timely service and this is very rarely forthcoming, eg a recent case where the person passed away before the wheelchair arrived, taking away the person’s quality of life. I work to support people with wheelchairs on a national basis and Opcare is top of the list of services who present real challenges - a Cinderella service” Comments made by Wheelchair Services Co-ordinator from Motor Neurone Disease organisation.

“Still having problems with an ill-fitting wheelchair for child. We were promised a 6 month review but nobody has ever got in touch. The seat is tilted back. The paediatrician comments on it every time. OT has tried to get Opcare to look at it. It’s taken so long to sort out that the chair is already too small. How long will it take to get another?”

“The service is failing the most vulnerable. They don’t understand personalisation/urgency. They have no records of what equipment has been issued so can’t possibly turn up with the right equipment/parts for repairs. They have to make multiple visits to get repairs done, when it should be done in one trip”

“The service offer a ‘best-fit’ solution, rather than looking at long term needs. It’s more a case of ‘that will do’ when they would actually save money if they got things right from the outset. My partner’s osteopath and podiatry service are trying to strengthen the leg which has been affected by stroke but the wheelchair provided doesn’t support the position which would help her. Now waiting for a cushion from Opcare to hold her position and support her but I just can’t see this working. Would prefer old wheelchair back as the new one just isn’t right and it feels like we’ve gone backwards. Gemma at Opcare is lovely”

“It’s just not fit for purpose, it’s falling apart. I don’t get any updates on when things are likely to be sorted, just told it’s now moved from pending to purchasing but no timescales given. I always have to force the issue, constantly trying to chase up and always get fobbed off. I’m totally dependent on a wheelchair to move and I don’t want to go out

because I can't depend on the wheelchair I've got as it's just not fit. I'm now on anti-depressants because of all this"

"had a wheelchair but had to send it back because it was like a tank, too heavy to push. They sent someone 3 weeks ago to assess him but I've not heard anything since"

"I'm ringing on a weekly basis because my daughter is sat in a broken chair. The back of it has been broken since October 16, it's split down to the first set of bolts and we have to cover it with a cushion. No spinal support and scoliosis is getting worse. The Velcro on the footplates doesn't work anymore so her feet are not held in position. She kicks her feet out and there's a risk there. She has a fractured ankle and a torn ligament now and this may be as a result of the footplates not holding her feet, we just can't say for definite as she's non-verbal so can't tell us. We only knew when there was swelling. Consultant neurologist requested a seating review in Oct 16. Somebody from Opcare came 3 weeks ago and said it would be a priority and that an emergency chair would be provided in the meantime but we haven't had anything"

"My child has a severe 'head lean' due to wheelchair not being right. My child is damaged as a result. I have begged to be able to use another provider but the CCG wouldn't agree to it. They completely ignored a report we got from an independent OT - they did nothing. They just use excuses not to do anything. Still waiting for moulded seating and the chair is causing pressure sores"

"My main concern is that there are various things going wrong with the chair, some are simple things, but I still don't think the repairs will sort the problem. She's leaning to one side and the repairs won't fix this. I don't think the laterals are right. There are red marks at the bottom of her spine. Hoping changes to chair will work but I'm not holding my breath. Social worker, paediatrician and OT have emailed Opcare; they react to this and someone comes out but after this visit, still nothing happens. Some simple things such as having a spare set of covers and a harness would really help - if the nappy leaks the covers have to be washed - I had to fight for a spare set which I got eventually but they won't give a spare harness. These things get dirty and it's the same as putting your child in grubby clothes"

"Very poor. Still waiting for seating to be properly sorted and it's been 2 years. Daughter's condition is getting worse. The stress of sorting this out has been horrendous" (crying as she spoke to me)

"Wheelchair was condemned by OT in June. I was told a new one would be ordered but I haven't heard anything and I'm virtually housebound now"

"I'm permanently in a wheelchair. They took one for repair months ago and I've not had it back. Currently in old wheelchair"

"Frontline staff are very, very good. My gut feeling is that someone is sitting on the budget. It took from February last year to end of October to get a replacement chair, followed by 3-4 months waiting for a cushion, then 12 weeks for back rest to be sorted. Still waiting for replacement foot rest to be supplied. I'm using HD cardboard to stop my right leg from flopping out and I was told a solution would be manufactured. I've got doubts about the training and qualifications of staff doing the repairs. They just don't seem to have the right training and don't have right spares. There's a high turnover of staff. No updates are given by Opcare and this causes anxiety. They could do more to link with other organisations too"

"I'm paraplegic and can't stand at all. I had an electric wheelchair for a few years and was independent but I had to send it back. I always understood that if it broke down I would get help but I found out that there's no help if this happens. I have no family to help me. What would I do if I broke down away from home? I had to send it back because

I've got nobody to help me. My consultant at Pinderfields wanted me to have the electric chair and I loved it when I had it; it got me out and I was independent. I'm really sad it's gone. I wouldn't have minded paying for a break down service. I live in Elland and only go to Elland so I wouldn't have broken down far from home. I'm using my manual chair now"

"Recently had a problem with manual wheelchair, they came and had a look and wanted to provide a new one, even though it was just a problem with the arm rest but they couldn't get parts for it any more. I ended up buying the arm rest on ebay and doing it myself. Then there was a problem with the controller, it just needed a new little joy stick which they could have sent in the post but they insisted on replacing the whole thing which cost £180 instead of a couple of pounds. Wasting money"

"Daughter has missed 8 months of school, we've been waiting over 2 years for a chair. After waiting 12 months they gave her the wrong one, far too big for her. She falls from one side to another and once nearly hit her head on a lamppost. People from Opcare have said the chair is not good and that it's only meant to be sat in for 2-3 hours, not full days. They reviewed and measured everything in March and said it would be 6 weeks until we get a new one. Social worker, GP, Locala, Forget me Not have all contacted Opcare about it. Still having to use the chair that's not right for her. I have a very, very bad back as a result. She's 19 years old with a life-limiting condition and I've had to keep her indoors for almost all of the last 2 years"

"We've recently seen the therapist and been given a provisional date in Feb 18 for new wheelchair. Opcare use the issue of backlog to explain the delays - they need to be more transparent. Not the fault of the therapists working frontline"

"Wheelchair delivered last week but I have to wait until someone can come to take me out. I use sticks to get about in the house but can't get out without a wheelchair. Nobody has ever mentioned an electric wheelchair"

"Mum has no wheelchair, had to borrow one but it's too small. She had assessment June/July and we were told it would be sorted"

"Assessment was great but then didn't hear anything else. I rang Opcare this morning and was told they had the wheelchair and that it should be delivered after Christmas. If I hadn't rung I wouldn't know this. Just a phone call to explain what's happening would help"

Beechwood, Leonard Cheshire Disability Service - informed us of a resident who had sustained a broken leg because of issue with wheelchair. Notified CCG as serious incident. It has been reported to CQC and RIDDOR. Beechwood have invited Healthwatch to talk to other residents who are also experiencing difficulties.

Online reviews for Opcare can be seen on the Healthwatch Kirklees and Healthwatch Calderdale websites:

<https://www.healthwatchcalderdale.co.uk/services/calderdale-greater-huddersfield-and-north-kirklees-posture-mobility-service-Opcare-elland-hx5-9hb/#reviews>

<https://healthwatchkirklees.co.uk/services/Opcare-posture-mobility-services-elland-hx5-9hb/>