

<b>Report to:</b>	Health Overview and Scrutiny Committee	<b>Agenda Item:</b>	
<b>Date of Meeting:</b>	20 July 2018		
<b>Title of Report:</b>	Kent and Medway Wheelchairs Service Briefing		
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<b>Action Required:</b>	Approval	Decision	Discussion/ Assurance Information

<b>Context</b>
<p>Millbrook Healthcare took over the contract to provide NHS funded wheelchairs for children and adults in Kent and Medway on 1 April 2017 following a comprehensive procurement process. NHS Thanet Clinical Commissioning Group (CCG) manages the contract on behalf of the eight Kent and Medway CCGs.</p> <p>The service is for people with a long-term need for a wheelchair (six months or more). It provides manual and powered wheelchairs to children, young people and adults, following referral by a healthcare professional such as a GP or physiotherapist and an eligibility check. The service does not provide wheelchairs for short-term use (less than six months). These are loaned by organisations such as the Red Cross.</p> <p>Approximately 24,000 people in Kent and Medway use the NHS-funded wheelchair service at any given time.</p>

<b>Contract mobilisation</b>
<p>In the first year of the contract Millbrook Healthcare raised concerns regarding the people waiting to be seen who had been inherited at the start of the contract. CCGs also became aware that patients were experiencing long waits for equipment and repairs and concerns were being raised by patients. Millbrook Healthcare informed the CCGs that the backlog was affecting their ability to meet waiting time targets and requested additional funds. At the time the CCGs could not agree additional funding as the data provided by Millbrook Healthcare was not conclusive, and CCGs could not discount the possibility that Millbrook Healthcare may have underbid during the procurement.</p> <p>Instead, the CCGs requested additional data and agreed with Millbrook Healthcare a plan to ensure that patients with an urgent need for equipment or repairs were treated as a priority. An urgent need is defined as:</p> <ul style="list-style-type: none"> <li>• If the service user has pressure ulcers of grade 2 and above (i.e. broken skin) and already has equipment provided</li> </ul>

- If the service user already has equipment provided and is falling from it or having breathing difficulties when in it
- If the service user has a rapidly deteriorating condition (e.g. MND)
- If the service user has received an end-of-life prognosis, i.e. less than 6 months
- If the service user is a child
- If the service user is being discharged from hospital to their own home and provision of a manual wheelchair will enable them to be independently mobile (i.e. self-propel) and reduce or eliminate the need for a care package

When additional data was provided, it was still not conclusive so the CCGs and Millbrook Healthcare agreed for an audit to be carried out with the following aims:

- To evaluate the impact of the caseload inherited by Millbrook Healthcare at the start of the contract
- To consider whether there are any issues regarding the ongoing delivery of the service
- To review the quality of the data provided for managing the contract and make recommendations for data improvement.

At the same time a quality visit was initiated by the Deputy Chief Nurse for Thanet CCG to review the impact on patient safety and patient experience.

The outcomes of the audit and quality visit would enable the CCGs to then agree an improvement plan with Millbrook Healthcare to tackle the long waits experienced by some patients.

### Results of the Audit

At the point when Millbrook Healthcare took over the contract, there were 210 referrals relating to children and 1046 referrals relating to adults on the waiting list for the wheelchair service, for assessment, repairs or provision of NHS-funded wheelchairs. It is estimated that 40 per cent had been waiting for more than 18 weeks at that point in time.

By the end of March 2018, Millbrook Healthcare had:

- Closed 3,855 referrals including 499 relating to children
- Ordered and issued 3,225 prescriptions including 7,356 items (i.e. wheelchairs or pieces of equipment)
- Ordered a further 803 items to be issued
- Ordered a further 2,811 items so that repairs were carried out for a further 903 patients

However, by the end of March 2018, the waiting list had increased. There were 443 children and 1,971 adults waiting for assessment, repairs or provision of equipment. Of these, 251 children and 999 adults had been waiting for more than 18 weeks. This includes 272 adults and 62 children who were on the waiting list inherited from the

previous provider, who have thus been waiting for more than a year. The service is therefore not achieving its target for equipment issues within 18 weeks for either children or adults.

The audit found that the caseload inherited by Millbrook Healthcare included both a backlog of long waiters and a much higher complexity case-mix (i.e. a much higher proportion of patients requiring powered and specialist wheelchairs) than had been expected during the procurement. This higher complexity required a higher spend affecting the ability of the service to manage the ongoing referrals, hence leading to a growth in the size of the waiting list and an increase in the length of waits experienced. The CCGs have recognised that in order to resolve this, additional funds will need to be provided to Millbrook Healthcare to cover the additional cost pressure that has been absorbed. The exact value of the additional cost pressure to Millbrook Healthcare is currently under discussion but agreement is expected by the end of the month.

The audit also found that there appeared to be an imbalance in the case-mix of the monthly referrals received since the contract started but further work is needed to confirm that the categorisation of referrals and patients has been correctly applied. Initial findings estimate that:

- The demand for low and medium complexity equipment prescriptions is 16 per cent less than expected although average costs are higher than expected
- The demand for high complexity manual wheelchairs is 26 per cent lower than expected and average costs are lower than expected
- The demand for power wheelchairs is 79 per cent higher than expected although average costs are lower than expected
- The demand for specialist wheelchairs is 154 per cent higher than expected although average costs are lower than expected

Overall, any impact of an ongoing imbalance in referral case mix appears to be much less significant than the impact of the inherited caseload, but CCGs are mindful that any potential imbalance is quickly confirmed so that mitigation actions can be taken to avoid further backlogs developing in the future.

The audit work highlighted inadequacies in the regular data provided for contract management, but also led to significant work being undertaken by Millbrook Healthcare to improve data quality for the purposes of the audit.

### Results of the Quality Visit

The Quality visit found that Millbrook Healthcare were prioritising patients with the highest needs in line with the mitigations agreed with the CCGs. It also found that patients were not being harmed as a result of their wait. The clinical assessments and triage process have ensured that the risk around the wait for assessment and waits for equipment is reduced. The visit also concluded that patients' experience was not good and that waits were having a significant impact on their daily activities of living and

independence. It was also clear that clinical leads were fully aware of these issues and while they were doing everything within the resources available, staff morale was being affected by these concerns.

### Next Steps

The CCGs are treating this situation very seriously and have welcomed the involvement of Healthwatch Kent in highlighting patients' concerns. The time it has taken to get to this point is very regrettable but has been necessary given the issues with data quality and the very significant risks to service delivery for patients if due process is not followed.

The CCGs are pleased to now be able to set out the following next steps:

- Thanet CCG is in discussions with Millbrook Healthcare regarding the value of the additional cost pressure that came with the inherited caseload. Once a figure is confirmed the CCG will seek approval from all eight CCGs to release the funds on the condition that they are attached to a clear improvement plan to be delivered by Millbrook Healthcare. The funding and associated improvement plan is expected to be agreed by the end of July.
- Millbrook Healthcare is developing an improvement plan to attach to additional funds which will give a clear timeline for the issuing of equipment to all those patients who have been waiting for 18 weeks or more, prioritising those who have been waiting over a year initially. This improvement plan will enable the backlog to be tackled separately from the business as usual service, preventing new backlogs from growing. Consequently the improvement plan will include consideration of the additional staffing requirement and the risks and costs associated with recruiting those staff.
- The CCGs are commissioning a further audit in collaboration with Millbrook Healthcare to review the categorisation of the referrals received within the life of the contract from the beginning to the end of the pathway, to give clarity on whether there is a risk relating to the case-mix of the ongoing demand for the service.
- The Deputy Chief Nurse for Thanet CCG is working closely with Millbrook to continue to receive assurance that harm is not happening to patients while they wait for their assessment and receipt of wheelchairs.
- A single communication regarding these steps will be provided to all stakeholders by the end of the month.
- In addition, we are exploring options for a communication to those who have been waiting in excess of 18 weeks giving an indication of the time that their equipment is likely to be issued.
- The CCGs and Millbrook Healthcare have also committed to agreeing a data quality improvement plan so that much better assurance can be provided regarding the delivery of the service in the future.