The equipment needs of people with learning disabilities and additional needs attending Brightways and Rutwel



Enter and View report

The equipment needs of people with learning disabilities and additional needs attending Brightways and Rutwel

13th & 14th October 2016





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1 Introduction

1.1 Details of visit

Details of visit:			
Service Address	Community Support Services,		
	Catmose Campus, Huntsman Drive		
	Oakham, Rutland, LE15 6RP		
Service Provider	Rutwel and Brightways, Rutland County Council		
Date and Time	13/10/2016 Rutwel		
	14/10/2016 Brightways		
Authorised Representatives	Bart Taylor-Harris		
	Sarah Iveson		
	Stevie Jackson		
	Christine Spark		
Contact details	01572 772588		

1.2 Acknowledgements

Healthwatch Rutland would like to thank the service provider, service users, visitors and staff for their contribution to this Enter and View.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.



2 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

3 Purpose of Visit

Rutwel and Brightways are facilities run by Rutland County Council to provide day opportunities for adults with learning disabilities. Adults with profound and multiple learning difficulties attend Brightways while Rutwel offers a range of activities including work placements. Places at both are available by adults assessed by social care as being eligible for the service provided.

The purpose of the Enter and View was to find out:

- How easy/difficult it is to obtain specialist equipment such as: walking aids, standing aids, wheel chairs, toileting aids for adults attending these facilities.
- The impact the availability of equipment has on the lives of those with learning disabilities, their carers and Brightways/Rutwel staff.
- How often reviews of needs are held at Rutwel/Brightways and how this impacts on the appropriate provision of equipment.

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- The perceived role of occupational therapists and social workers in ensuring provision.
- If the transition from childhood to adult hood has an effect equipment provision.
- How the privacy and dignity of service users is respected and how it is perceived.

3.1 Strategic drivers

This visit came about because Healthwatch Rutland received conflicting anecdotal information about the way in which various aids for people with learning difficulties could be accessed. We learned of an excellent response to a crisis but also of a very confused response experienced by someone moving from the education system into adulthood.

3.2 Methodology

The Enter and View was planned with the full co-operation of Rutland County Council's Community Support Services. The planning process involved email exchanges, telephone conversations and a meeting between the officer in charge of Rutwel and Brightways and the Enter and View team leader. Agreement was reached over such issues as timing and advanced communication with staff, service users and service users parents/carers. Community support services distributed a letter and pamphlets to the above group on behalf of Healthwatch Rutland.

The E&V team visited Rutwel and Brightways on the afternoons of 13th and 14th October respectively. The team observed: the way in which service users needs were met by staff, the space in which each unit was accommodated and the equipment available. In discussions with staff, service users and their parents/carers the team explored how equipment is obtained, difficulties that have been experienced in obtaining and using equipment and the impact this has. The team also explored examples of good practice.

3.3 Summary of findings

- At both Brightways and Rutwell we observed friendly staff and smiling happy looking service users. Service users told us how much they enjoyed attending.
- The location of Rutwel in Oakham town centre is good but the facilities available in that location are not of a good standard. Space is restricted limiting the equipment available to service users and restricting the use of equipment that is in place. This impacts upon activities that can be



undertaken and presents privacy/confidentiality issues. It is also a significant issue during bad weather when many service users may be confined to this space.

- Brightways is in spacious modern accommodation on the edge of Oakham. General equipment is, for the most part, very good but there are issues relating to lack of equipment to aid the opening of doors and variable air extraction from personal hygiene spaces. The use of the audio equipment in the sensory room is limited due to sound proofing issues.
- It can be very time consuming to secure funding for the provision of specialist equipment.
- The service offered by the wheel chair service received considerable criticism.
- The Oakham Medical Practice and individual therapist were singled out for praise by staff at Brightways.

3.4 Results of visit

Rutwell is accommodated in a single room in Victoria Hall, a building in the centre of Oakham. Service users have access to tea/coffee making facilities and toilets shared with other building users. There is also a well equipped professional catering kitchen that is used for organised cookery sessions. Service users are adults with moderate learning difficulties. One was observed to use a walking frame, another a wheel chair. We were told that the majority of service users do not require specialized equipment.

Although Rutwel operates on five days a week most service users do not attend each day or for a whole day. The room is used as a base from which individuals or groups go to engage in a range of other activities including work and volunteering. The location of Rutwel is good for such activities.

At the time of our visit the room was full because people wanted to meet and talk to us. We were told that the room is often full when people are waiting for transport home at the end of the day. Despite the lack of space staff and service users appeared to get on well and be happy. We observed the use of first names, many smiles and much laughter. We also observed, and were told about issues relating to privacy. We observed a service user trying to work on a computer but clearly finding this difficult as a result of the general noise, a radio playing music, and proximity to people pushing past. A service user showed us her review documents. Reviews are carried out at least annually and have an important role to play in assessing achievements and needs, including equipment needs.

We were told that there is no private or quiet space at Rutwel for necessary confidential phone calls that often have to be made in the public areas of Victoria Hall.

The lack of space means that equipment necessarily has to be limited. For example:

- there is not enough room for easy chairs for people to use when they return from work or volunteering and are waiting for transport,
- wheel chairs and walking frames cannot be moved from one side of the room to another without furniture and people being moved,
- there is no proper storage for outdoor clothing and personal belongings,
- bags etc. occupy floor space alongside their owners because there is no space available for them other than under the large central table around which everyone sits.

Brightways is situated in new accommodation in the Catmos Campus on the edge of Oakham. The accommodation is spacious, on one level, with a wide corridors and wheelchair accessible doors. There is a large group room with a variety of furniture and equipment, smaller rooms that facilitates one to one activities, a sensory space and good spaces for personal hygiene. It has its own private garden area. Service users are adults who have significant learning disabilities and a large minority requires specialist equipment. We observed friendly staff and happy smiling service users. We were told of the dedication of staff, some of whom had worked at Brightways in a number of locations over many years.

We were told, and observed that for the most part Brightways is well equipped with general equipment that service users make full use of. However:

- we were told that the large doors that facilitate wheel chair access lack equipment to aid opening and closing and are too heavy for some service users to open and close by themselves so restricting their independence.
- personal care suites are generally well equipped but are windowless and rely upon mechanical ventilation equipment. We observed that this ventilation equipment seems to lack any facility to vary its operational intensity and does not seem to be powerful enough to remove the, unpleasant odours that can be associated with personal care in confined spaces.
- In one of the personal care suites the changing bed was too small for use by most adults.
- the sensory room is located below classrooms used by the school sharing the campus and is well equipped. However the volume of audio equipment has to be limited because it can disturb pupils working above. This sound proofing issue means that some service users cannot benefit fully from this well equipped facility.

There is a locally held budget for small items of general equipment.

Staff explain to us the processes for obtaining specialist equipment. Some service users are funded solely by Rutland County Council (RCC), others 100% by the NHS and others jointly by the NHS and the local authority.



We were told that if the service user lives at home, perhaps with their parents, responsibility for initiating annual reviews and any equipment assessment process rests with Rutwel or Brightways. If the service user is resident in council funded accommodation then this responsibility rests with the provider of that accommodation.

Most equipment can only be accessed via an occupational therapist (OT). The council has its own OTs who work as part of an integrated health and social care team. They are responsible for supporting major and minor adaptations to service users residences (private or supported). They are also responsible for reablement after hospital stays. Other OTs are employed by the NHS, The Leicestershire Partnership Trust (LPT) in this case. These OTs are responsible for the provision of equipment such as wheelchairs and walking aids for service users through the specialist Learning Disability Team. We were told that the OTs employed by RCC were much more responsive than those from LPT. We were told that it is sometimes so difficult to get a response from LPT for a specialist to advise on equipment assessment that staff of Community Support Services have had to call upon the local Oakham Medical Practice to help cut through the red tape. The Oakham Medical Practice were singled out by staff for praise over their responsiveness and helpfulness. This means that there is less delay for assessments for home adaptations as for other equipment such as wheelchairs and walking aids.

Staff told us that a five to six month wait from the initial request to LPT for the provision of specialist equipment was not unusual and that most of this delay was believed to be associated with obtaining a decision about funding. Once a funding decision is made progress in making the bespoke equipment is often rapid except in the case of the Wheel Chair Service which staff singled out as providing a service that is significantly worse than any other provider of specialist equipment. For example: whereas other providers would visit to measure and fit, the wheel chair service insist that a visit must be made to their premises in Leicester. They make no provision for transporting physically disabled people. We were told that they take longer than any other specialist equipment provider to manufacture. Staff gave an example of an emergency need for a wheel chair modification taking 3 months.

Our attention was drawn to the importance of specialist mobility equipment, such as wheelchairs, in giving access to transport. Without such equipment service users might be unable to use mini buses etc. to get to Brightways or Rutwel. The implication of this is that the person can be confined to their home so missing out on social interaction and the other facilities available through Community Support Services. Addition stress is also placed on carers/families. Staff praised the two wheel chair repair services for their responsiveness (Clarke and Partners and SOS). Simple repairs are often affected in less than 24 hours.

In contrast to the systemic issues referred to above considerable praise was given to individual speech and language, physio and occupational therapists.

3.5 Recommendations

- 1. Rutwel, while well located in the town centre, does not provide sufficient space for general equipment that could significantly improve the experience of service users. The County Council, in consultation with service users, local staff and carers, should review whether it has achieved the right balance between the location of the premises and their fitness for purpose.
- 2. RCC, in consultation with Brightways staff, should consider whether the spacious modern accommodation for Brightways could be further enhanced by addressing the issues relating to:
 - a. lack of equipment to aid the opening of doors,
 - b. the absence of variable high volume air extraction from personal hygiene spaces,
 - c. the sound proofing of the sensory room.
 - d. The provision of appropriately sized changing beds in all hygiene rooms.
- 3. LPT should develop procedures to remove delays in assessing the equipment needs of people with Learning Disabilities and additional needs. In particular they should address the poor service in the provision of essential wheel chairs.
- 4. LPT and the Local Authority should look at ways of streamlining the funding processes for equipment provision, with a view to improving the timescales for service users in accessing equipment that is so vital for their quality of life.

Following the receipt of the comments in section 3.6 an additional recommendation is:

5. That Healthwatch Rutland should undertake an investigation into the needs of wheelchair users in Rutland and the facilities available to meet these needs.



3.6 Service providers response

Rutland County Council responded:

Recommendation 1:

Rutwel is a base for service users to come and go as they choose between activities provided by Rutwel staff. It is therefore not a day centre in the true sense of the word where people go for care. However it is understood that at times a number of people can be at the facility at the same time. RCC will look at ways to resolve this.

Recommendation 2:

Rutland County Council are limited as to what they can do to the building as it does not belong to the council. However, we thank Healthwatch Rutland for highlighting these issues and we will investigate ways that these can be addressed satisfactorily.

Recommendation 4:

There is no delay in the financial authorization process in RCC as therapists are able to authorize funding for basic equipment themselves and if a greater level is needed senior therapists are on site to do so.

Additional Comment:

Rutland County Council welcomes this report from Healthwatch Rutland and we are interested in the findings.

Leicestershire Partnership Trust responded:

Thank you for the chance to respond to this report and it is good to note that considerable praise was given to individual speech and language therapists, physiotherapists and occupational therapists from our services. In relation to the systemic issues raised and the recommendations I would like to offer the following clarifications.

Under section 3.5 It is pointed out that some of the Occupational Therapists (OTs) working in Brightways and Rutwell are provided by Leicestershire Partnership NHS Trust's specialist learning disability teams. It then says these OTs are responsible for the provision of equipment such as wheelchairs and walking aids and it was very difficult to get a response from these services. Delays of five to six months in obtaining equipment were also reported with particular problems with the wheelchair services.

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The OTs from Leicestershire Partnership NHS Trust only assess and provide minor pieces of equipment, if they assess for specialist equipment this is authorised by the Local Authority OTs or continuing health care (CHC) depending on the individual's funding situation. Leicestershire Partnership NHS Trust does not manage the process for specialist equipment.

In relation to the provision of wheelchairs the physiotherapists are not able to prescribe these, their role is to refer to the specialist mobility centre run by Blatchfords. Mobility aids can be assessed and prescribed by the physiotherapists but the equipment is provided by Integrated Community Equipment Services (ICES). Due to the complexity of the equipment required by people with learning disabilities the ordering process can be complex with physiotherapists having to get a number of quotes which are submitted to ICES with clinical reasoning on why the equipment is needed.

In light of this information recommendation 3 which says that LPT should develop systems to remove delays is not possible as they are not responsible for commissioning or providing the equipment

Recommendation 4 needs to include all providers and commissioners of services and LPT would be happy to contribute to any partnership work to improve the situation. The service is working hard to see people as quickly as possible but the delays unfortunately are often in other parts of the system.

Batchford Prosthetic and Orthotic Services responded:

Thank you for providing us with a copy of the draft report highlighting areas of concern around the provision of the wheelchairs to this group of patients. I am sure that you appreciate that without specific details it can be difficult to provide a clear response to this report but we welcome the opportunity to comment more broadly on the provision of wheelchairs to patients in the Rutland, and wider Leicestershire Community.

The area of wheelchair provision can be very complex with multiple referral pathways into the service. We also follow an eligibility criteria which forms part of the specification for the contract, and within this specification is that we provide a service to those registered with a GP within the boundaries of LLR so we do not need to gain any additional approval of funding to provide equipment; so we are unsure where this perception has come from. This is also the case with the waiting time for assessment following referral; the delays being quoted in the report do not reflect the level of service provided out of the Specialist Mobility Centre (SMC).

For ease of reference we have commented on the main points raised in the report, however, if we have missed anything please do not hesitate to contact me for more information. Our comments have been highlighted in red.

• "It can be very time consuming to secure funding for the provision of specialist equipment".



To be able to respond fully the report needs to quantify what type of specialist equipment these comments relate to. For wheelchair provision, we have been commissioned to provide equipment for users registered with a GP within Leicester, Leicestershire and Rutland and who requirements meet the agreed eligibility criteria. If they do then there is no requirement for any funding decision

• "The service offered by the wheelchair service received considerable criticism".....

"Staff told us that a five to six month wait from the initial request to LPT for the provision of specialist equipment was not unusual and that most of this delay was believed to be associated with obtaining a decision about funding."

The waiting time for an assessment for a wheelchair from SMC is currently **up to** 3 weeks for an URGENT referral and **up to** 4- 6 weeks for a standard wheelchair referral. We are therefore unable to explain why the team are reporting these delays and would welcome the opportunity to work with the teams in Brightways and Rutwel to investigate individual cases. This would help us gain a better understanding of the referral pathways being utilised, provide clarity on the detail of the service eligibility criteria, identify any actions which could improve access to the service and provide Healthwatch with the assurance that appropriate wheelchairs are being provided to the patients highlighted in this report.

• "Once a funding decision is made progress in making the bespoke equipment is often rapid except in the case of the Wheelchair Service which staff singled out as providing a service that is significantly worse than any other provider of specialist equipment. For example: whereas other providers would visit to measure and fit, the wheelchair service insist that a visit must be made to their premises in Leicester. They make no provision for transporting physically disabled people. We were told that they take longer than any other specialist equipment provider to manufacture. Staff gave an example of an emergency need for a wheel chair modification taking 3 months".

Our service model ensures that once a referral has been received it is assessed and referrers are contacted within 48 hours with feedback on whether or not the individual being referred is eligible for a wheelchair from our service. Private providers of healthcare, such as care homes, are expected to be fit for purpose and provide standard wheelchairs for their residents for portering and outdoor recreation.

The wheelchair service provides wheelchairs for patients who can actively self-propel, those eligible for a powered wheelchair (as per the commissioned eligibility criteria) or have significant postural requirements which require our assistance. We actively share our criteria with referrers into the service to create a seamless pathway for patients who require our intervention.

The reason we ask people to attend the centre is because we have a selection of trial wheelchairs and cushions on site and can ask company

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representatives to attend to enable a holistic assessment and prescription of the right wheelchair. We aim to provide a "Chair in a day" and are regularly achieving this for 70% of the users assessed in the service. To do this we have multi-disciplinary clinics with Occupational Therapists and Rehabilitation Engineers and we hold a wide variety of stock wheelchairs, cushions and accessories and patients would not be able to access all this equipment if we were to undertake their assessments in the domestic environment.

In addition visits to the centre allows us to utilise equipment which can map the pressure areas whilst the patient is sitting in the chosen wheelchair and this enhances and focuses our prescription of pressure relief cushions providing improved care for this cohort of patients and supporting tissue viability management regimes. This approach ensures patients are actively involved in the decision making process and that we get it "right first time" for them reducing delays in delivery of the final chair and making best use of the funds available to the service.

Importantly though home visits are carried out where it would be detrimental for the user to travel and that is agreed in conjunction with the referring clinician.

- With regards to not making provision for attending the appointment. The wheelchair service is not commissioned to provide transport for patients to attend the Specialist Mobility Center in Leicester (SMC). If patients are eligible for hospital transport to attend appointments then the service provided by Arriva will bring them to the centre. Alternatively many users of the service receive a mobility allowance which they use for transport for outpatient appointments.
- "Our attention was drawn to the importance of specialist mobility equipment, such as wheelchairs, in giving access to transport. Without such equipment service users might be unable to use mini buses etc. to get to Brightways or Rutwel. The implication of this is that the person can be confined to their home so missing out on social interaction and the other facilities available through Community Support Services. Addition stress is also placed on carers/families".
- As indicated above if a user is eligible to receive a wheelchair on the NHS then this will be provided to aid their mobility and independence including the use of public transport and mini buses to and from Brightways or Rutwel.

"Staff praised the two wheel chair repair services for their responsiveness (Clarke and Partners and SOS)."

We are pleased to hear that the service users have had positive experiences from Clark and Partners; this is one of our sub-contractors. With regards to SOS, they are a company who used to provide a service for special seating for wheelchairs within the county and through this contract; however they are not one of our main providers currently. I cannot comment on whether





I would like to thank you again for the opportunity to respond; we would like to be able to work through some of the specific cases to clarify the points and learn any lessons so we can look to improve our service provision. I will be sharing my response with our commissioners to ensure there is transparency and an opportunity for us to reflect on the service and what we can do differently.

I would also like to extend the invitation for us to meet; either in Rutland or if you would like to come and visit our facilities in Leicester and we can demonstrate our model of working. If you have any other questions please do not hesitate to contact me.