Personalising Wheelchair Services – Your chance to influence the process:

A reflective piece

Reymund Enteria

Advance Practitioner Occupational Therapist

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I have been working as an Occupational Therapist (OT) for more than 13 years and had been given opportunities to work in different countries including the Philippines, Saudi Arabia and here in the United Kingdom. However, my first Posture and Mobility Group (PMG) Conference experience was in July 2014 when I became a member whilst working as a full time Band 7 Team Leader in one of the NHS trust wheelchair services. After more than 2 years in the service, I decided to change my career path and have tried working as Locum OT as it always makes me wonder on how it will impact my professional practice and on how it will help build my knowledge and skills as an OT.

I am grateful that I was granted a free bursary space to attend this year’s conference in Birmingham which allowed me to gain an up-to-date learning experience that help improved my knowledge in the areas of mobility equipment, current innovations and new research studies relating to posture and mobility conducted by different professionals and organisations. The conference allowed me to have access to different information relating to current NHS and wheelchair service development. PMG conference is a wonderful opportunity for professional networking and awareness of leading providers of posture and mobility equipment and great source for information and resources.

The conference was well designed and had an organised programme which contained the parallel session entitled **“Personalising Wheelchair Services – Your Chance to influence the process”**. This particular topic personally caught my attention and made me convinced to attend the session led by Mr. Steven Prunel, the Health and Budget Lead of NHS England. The session was held at Hall 7B of ICC Birmingham and was filled with cohort of professionals from the different services who likewise were interested in getting to know the content of the lecture.

The session was divided into four sections which include the introduction to Personal Health Budget (PHB) and its current picture, followed by the discussion of the wheelchair service budgets, discussion of information regarding the current programme and ended with the opportunity for delegates to ask questions and share their concerns. The session was quite intense as numerous queries were raised as to how Personal Health Budget will affect the current wheelchair service system, its budget as well as its service users.

Mr. Prunel was able to enlighten everyone when he explained that PHB is not about new money but different way of spending health funding to meet the needs of each service users as well as using the resources effectively. Mr. Prunel explained that PHB was created for transparency in order to know where the fund is being used and to give service users a greater choice and opportunity to work in equal partnership with the NHS.

It was also discussed that the UK government has a mandate requiring NHS England to develop a plan with specific milestone for improving service user a choice by 2020 particularly the Personal Health Budget. The session emphasised that the heart of PHB is a care plan developed by the service user in partnership with their health care professional.

The speaker also described the process of PHB that start with making contact and get clearer information followed by understanding the person’s wellbeing needs then working out the amount of money available, making a care plan, organising care and support followed by monitoring and review. This cycle can go back to care planning if needed to ensure that the clinical needs of a service user are met.

Mr. Prunel mentioned that the PHB is a part of wider drive to support commissioners to improve wheelchair services since not all CCG’s offer voucher scheme and wheelchair service provision varies across the country. Mr. Prunel also mentioned the lack of information and support to make an informed choice about the chair to purchase and the lack of information and guidance around the maintenance, repair and replacement as well as the limited number of retailers locally where voucher can be redeemed and voucher value is not based on chair required.

**Reflection:**

Following the lecture on Personal Health Budget, I have learned that the PHB will allow the service user to choose the health and wellbeing outcomes they want to achieve in partnership with their health care professional. PHB will also enable service user to know how much money they have for their health care and support which will give them the chance to create their won care plan with support if they want it and will enable them to choose how their budget is held and managed. In this way they will have the right to ask for direct payment and be able to spend money in ways and at times that make sense to them as agreed in their plan.

As a locum OT who had been with different wheelchair services, I can agree that the current system in the NHS has noticeable differences in terms of their eligibility criteria and provision of equipment. The wheelchair services have their own ranges which is sometimes not the preference of a service user. Wheelchair services often have their own way of dealing with referral, assessment, equipment provision as well as with maintenance and repair which is most of the time inconsistent and variable depending on the location or whoever is funding the service. These differences more often than not are the cause of complaints and delay of provision as well as delay with maintenance and repair of equipment.

I could say that NHS has made a good idea of introducing the Personal Health Budget to improve service user’s choice but it might also cause further confusion and conflict if not implemented properly. The implementation of PHB must be guided with good information dissemination and clear model specifications that can be easily understood and is accessible for those who wanted to obtain the service. I think that once PHB is well implemented in the main stream it will raise the standard of service provision that will meet the need of each service users. It would be nice to know the pitfalls once it comes to main stream as well as what choices service users have made for those who took part in the personal health budget. This information will enable professionals like me to have an idea of how they have use the PHB and see the positive impact it has on people’s health and well being.

**References:**

Personal wheelchair budgets

<https://www.england.nhs.uk/healthbudgets/understanding/wheelchair-budgets/>

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<https://www.emgalnd.nhs.uk/healthbudgets/>