

## **Results of a clinical audit, measuring the effectiveness and efficiency of special seating services across the UK and Ireland**

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### **Summary**

This study aimed to quantifiably measure the effectiveness of the seating process, from assessment to delivery. Analytical data, regarding the demographic of special seating clients, namely their age, diagnosis and seating history was gathered; providing insight into the types of individuals who have found this seating appropriate to their needs.

### **Aims and Objectives**

- To gain a client's perspective of the special seating service
- To provide a snapshot of the clients using the service
- To measure the effectiveness of the seating provided
- To measure the efficiency of the seating service
- To measure the clinical skills of the clinicians
- To give clients the opportunity to suggest improvements to the service
- To implement changes that seek to improve and develop the service and products

### **Background**

This survey is to gain a client's perspective of the service provided by the Ottobock Special Seating Service. This involves the manufacture and upkeep of the special seating provided. It is essential to provide a service that meets the needs and requirements of all the clients seen. To facilitate service improvement, clients could suggest areas for development to enhance their special seating experience. Basic demographic data will provide a snapshot of clients attending the clinic. All information gained will be shared with the clinic manager and governance staff. This data has been gathered from (list all the clinics)

### **Technique**

The aspects of care being surveyed are –

- Promptness and length of time of appointment
- Involvement of client in decision making process with sufficient information
- Length of time of manufacture
- Comfort, function, fit and appearance of the seating system
- Manner, listening ability, helpfulness, care received and efficiency of the seating engineer
- All respondents are asked to list ways of improving the service

A draft questionnaire was sent to Ottobock seating engineers for comments. Once piloted with three clinics and approved, 100 clients were asked anonymously to complete the questionnaire during their attendance at special seating clinics throughout the UK over a period of about 12 months.

(these are the current numbers, up until 2013, the up to date data will be added to the presentation, before the conference, making this study as current as possible)

**Standards:** Healthcare Standards for NHS-Commissioned Wheelchair Services May 2010

### **Results and Testing**

Of the 100 questionnaires returned, 46 (46%) were incomplete in some way but all questionnaires were used. The results are given as a percentage of the number of responses to each question, the number not completed is also given. 29 respondents gave their names as an indication that they wish to discuss their comments further. To maintain confidentiality a separate list of names will be given to the seating engineers, to enable either them or the clinic manager to contact the respondents.

### **Demographic information**

46 respondents were male (46%) and 46 (46%) were female; eight (8%) respondents did not complete this question.

### **Clinical presentation**

52% of the clients recorded cerebral palsy as their diagnosis. The other diagnoses recorded were; spina bifida (6%), multiple sclerosis (5%), spinal muscular atrophy (2%). 16 other conditions including Batten's disease, spinal injury, stroke, Rubella and scoliosis were recorded in the 'Other' category. Eleven clients recorded combined or more than one diagnosis, and a further eleven clients did not record a diagnosis.

78 clients (78%) were established service users of between 1 and 40 years.

58 clients (58%) spent more than four hours per day in their seating system (average 6.3 hours), 32% spent between two and four hours per day and 8% spent less than two hours per day in their seat.

Areas identified for service improvement will be highlighted during the presentation.

Full results of service/seating analysis provided will be reported at the presentation.

### **Discussion**

The findings of this audit have accurately identified the demographic of special seating users, the frequency of their clinical attendance and the efficiency of the seating manufacturer. With the data obtained from the results, wheelchair services can have a clear understanding of clients seating needs, over a sustained period, the renewal cycle of special seats, the modification characteristics, in correlation to the type and functionality of the user in question. This data is powerful in comprehending a realistic model of a special seating service, the efficiencies that can be measured, and the implications on the financial and time constraints, governing the clinical model. The effectiveness of the seating provider in delivering seating solutions can also be quantified in real terms, the type of seating with the most positive outcomes, the assessment procedure and the manufacturing techniques can also be evaluated, through this user led analysis. Ultimately this study provides a tool, with which the wheelchair service and the seating provider can assess the performance of a special seating service, identify areas for improvement and recognise strategies that are already successful in providing quality seating systems, efficiently. The results of this work have enabled Otto Bock Healthcare to audit our seating systems to assess the success of the system in use, and evaluate the users experience within a special seating clinic.

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