

Report To: Policy and Resources Committee **Date:** 21 May 2019

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Subject: Proposed Wheelchairs (Short Term Access) Scotland Bill

1.0 PURPOSE

- 1.1 The purpose of this paper is to inform the Policy and Resources Committee of Inverclyde HSCP's response to the Proposed Wheelchair (short term access) Scotland Bill.

2.0 SUMMARY

- 2.1 Please see attached response - Inverclyde HSCP are partially supportive of the proposal, however believe that further consideration is required around the issues identified in the questionnaire responses.

3.0 RECOMMENDATIONS

- 3.1 The Committee is asked to note the content of the questionnaire.

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Proposed Wheelchairs (Short-term access) (Scotland) Bill

A proposal for a Bill to ensure the provision of wheelchairs to anyone assessed as needing one on a short-term, as well as on a long-term, basis.



Consultation by Jackie Baillie MSP, Dumbarton Constituency

April 2019

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FOREWORD

Our mobility is something that we often take for granted.

Being mobile enables us to enjoy our freedom and autonomy, to go out to work, to get about our local community, to visit friends – the list is endless. Not being able to get about is very restrictive, it can be isolating and often leaves a person with impaired mobility wholly dependent on others.

If you have a long-term mobility need, of more than 6 months, then the NHS will provide you with a wheelchair, if you need one. The service provided is much appreciated; however if your need is short term, that is for less than 6 months, the help that you receive depends on where you live.

There is no duty on the NHS, or any other public body, to provide short-term wheelchairs for anyone with a mobility problem that is expected to last for less than 6 months.

For example, a patient well enough to be discharged from hospital in my area, but with a mobility problem that would require access to a wheelchair for a short period of time, simply wouldn't get one. This means patients with short-term mobility issues are forced to either pay for a wheelchair, out of their own pocket, despite only needing it for a short period, or rely on being able to access wheelchairs provided by charities.

One such charity is the British Red Cross. It does a fantastic job providing temporary wheelchairs in my local area but this service is not available in every part of Scotland. In addition, its funding is limited and the demand for wheelchairs is growing. There are other voluntary sector providers but whether you can get short-term access to a wheelchair is a postcode lottery.

Not being able to access a wheelchair when you have a clear short-term mobility need can lead to a delay in discharge from hospital; prolong your rehabilitation; slow down your reablement and have much wider emotional, social and financial impacts.

Creating a statutory duty to provide short-term access to wheelchairs where it is appropriate to do so is a relatively small change, but it is one that can make a real difference to people's lives.

I thank you in advance for helping to shape this Member's Bill. Your input is much appreciated.

Best wishes



JACKIE BAILLIE MSP

5 April 2019

HOW THE CONSULTATION PROCESS WORKS

This consultation relates to a draft proposal I have lodged as the first stage in the process of introducing a Member's Bill in the Scottish Parliament. The process is governed by Chapter 9, Rule 9.14, of the Parliament's Standing Orders which can be found on the Parliament's website at:

<http://www.scottish.parliament.uk/parliamentarybusiness/17797.aspx>

At the end of the consultation period, all the responses will be analysed. I then expect to lodge a final proposal in the Parliament along with a summary of those responses. If that final proposal secures the support of at least 18 other MSPs from at least half of the political parties or groups represented in the Parliamentary Bureau, and the Scottish Government does not indicate that it intends to legislate in the area in question, I will then have the right to introduce a Member's Bill. A number of months may be required to finalise the Bill and related documentation. Once introduced, a Member's Bill follows a 3-stage scrutiny process, during which it may be amended or rejected outright. If it is passed at the end of the process, it becomes an Act.

At this stage, therefore, there is no Bill, only a draft proposal for legislation.

The purpose of this consultation is to provide a range of views on the subject matter of the proposed Bill, highlighting potential problems, suggesting improvements, and generally refining and developing the policy. Consultation, when done well, can play an important part in ensuring that legislation is fit for purpose.

The consultation process is being supported by the Scottish Parliament's Non-Government Bills Unit (NGBU) and will therefore comply with the Unit's good practice criteria. NGBU will also analyse and provide an impartial summary of the responses received.

Details on how to respond to this consultation are provided at the end of the document.

Additional copies of this paper can be requested by contacting me at The Scottish Parliament, Holyrood, Edinburgh, EH99 1SP.

Enquiries about obtaining the consultation document in any language other than English or in alternative formats should also be sent to me.

An on-line copy is available on the Scottish Parliament's website (www.parliament.scot) under Parliamentary Business / Bills / Proposals for Members' Bills.

AIM OF THE PROPOSED BILL

This Bill aims to create a statutory duty to provide an attendant controlled¹ or occupant propelled² manual wheelchair on a short-term basis, free of charge, for people who have a short-term mobility need.

Currently, there is no statutory obligation on either the NHS, Health & Social Care Partnerships³ or local authorities to provide short-term wheelchairs. This leaves many people who have a short-term mobility need,

¹ An attendant controlled manual wheelchair is a wheelchair that is maneuvered and controlled by a person standing at the rear and pushing on handles incorporated into the frame.

² An occupant propelled manual wheelchair is like an attendant controlled wheelchair but generally has push-rims on the rear wheels to allow the user to manoeuvre the chair themselves.

which limits their ability to maintain their daily life, either without access to a wheelchair or having to borrow one from the voluntary sector or buy one themselves.

This consultation document sets out the case for introducing a statutory duty to provide short-term access to wheelchairs in Scotland. It explores the different methods for a statutory duty to be implemented and seeks your views on which body would be the most appropriate body to deliver this provision.

BACKGROUND

Why is short-term access to wheelchairs needed?

An individual may have a short-term need for a wheelchair in a wide variety of circumstances; however, the proposed focus of this Bill would be on:

- those who have a medical condition which is having a temporary impact on their mobility; and
- those who have a permanent need and have been assessed as requiring a wheelchair by an NHS Wheelchair Service but have a short-term wait before they receive their wheelchair.

The circumstances which may lead to an individual experiencing a short-term mobility need could include, but are not limited to:

- a fracture or other significant injury to their foot, ankle, knee, leg, hip or pelvis;
- surgery on their foot, ankle, knee, leg, hip or pelvis;
- a health condition or infection which impacts on their ability to stand or walk short distances such as arthritis, auto-immune conditions, respiratory conditions, strokes, sepsis; and
- a medical treatment which impacts on their ability to stand or walk short distances such as chemotherapy or surgery.

In these cases, the individual's mobility will generally improve after a period of recovery and reablement.

What does short-term mean?

A short-term mobility need, arising from a medical or clinical condition, is usually interpreted as a need which is expected to last less than 6 months.

This is a distinction which is used by NHS wheelchair providers to distinguish between people's long-term wheelchair needs, that they have obligations to meet, and their short-term wheelchair needs, on which legislation is silent.

Some NHS services will, on a discretionary basis, make provision for short-term access to wheelchairs, but the approach across Scotland is inconsistent and depends on where an individual lives.

Ultimately, this distinction results in a gap in wheelchair provision and short-term wheelchair needs are, in the main, not met. This can lead to a number of potential consequences for individuals which will be discussed later in this document.

What is the legislative framework in relation to wheelchair provision?

There does not seem to be an explicit duty on the NHS to provide wheelchairs. The current provision seems to stem from the more general functions and duties placed on Health Boards within the National Health Service

³ Health and Social Care Partnerships, (HSCPs) are the organisations formed as part of the integration of services provided by Health Boards and Councils in Scotland. Each partnership is jointly run by the NHS and local authority. HSCPs manage community health services and create closer partnerships between health, social care and hospitalbased services. <https://www.nhsggc.org.uk/patients-and-visitors/community/health-and-social-care-partnerships/>

(Scotland) Act 1978, for example, section 36 on accommodation and services and section 37 on prevention of illness, care and after-care.⁴

Section 46 of the 1978 Act deals specifically with the provision of vehicles for persons suffering from physical defect or disability, and states:

“The Secretary of State may provide invalid carriages for persons appearing to him to be suffering from severe physical defect or disability, and, at the request of such a person, may provide for him a vehicle other than an invalid carriage.”

⁴ Section 1: <https://www.legislation.gov.uk/ukpga/1978/29/section/1>

Section 36: <https://www.legislation.gov.uk/ukpga/1978/29/section/36>

Section 37: <https://www.legislation.gov.uk/ukpga/1978/29/section/37>

Section 46: <https://www.legislation.gov.uk/ukpga/1978/29/section/46>

In this context, an invalid carriage is defined as a:

“... mechanically propelled vehicle specially designed and constructed, and not merely adapted, for the use of a person suffering from some physical defect or disability, and used solely by such a person.”

These general functions and duties taken together could be read to require that wheelchairs should be made available. Section 46 of the Act contains the most explicit provision relating to transport for those with a disability, but it does not make specific reference to wheelchairs and does not amount to a duty. Additionally, the Act does not differentiate between a long and short-term need.

In practice, although there is no explicit duty to provide wheelchairs within legislation, NHS boards currently provide wheelchairs through NHS Wheelchair and Seating Services. These centres work to the same nationally-agreed eligibility criteria⁴ which states that in order for an individual to be eligible they must be, among other criteria, “permanently limited in their mobility.”⁵ In practice “permanently” is interpreted as 6 months or longer.

Clearly, this fails to recognise temporary or short-term mobility needs, which leads on to the resulting gap in short-term provision. An individual with a short-term or temporary mobility need could also derive significant improvement to their quality of life, during the time they are experiencing restricted mobility, from the provision of a manual wheelchair. However, the current legislation covering the provision of wheelchairs, and the nationally agreed criteria stemming from this, can and do act as a barrier to access.

Local authorities, through their social work and housing duties, and the NHS have responsibility for providing community equipment and adaptations.⁶ However nonbinding statutory guidance in Circular SDD 40/1985 (Provision of aids, equipment and house adaptations for disabled people living at home) suggests how the division of responsibility for providing adaptations and equipment might be identified between the NHS and local authorities. It suggests that responsibility for providing equipment relating to the management of an illness and required on medical grounds falls to the NHS. This specifically mentions wheelchairs as an example.

As a result of this, Local Authorities, the NHS, and Health and Social Care Partnerships can opt to offer short-term wheelchair provision but, unlike long-term provision, have no responsibility to provide it.

The focus of my proposal is to address the current unmet need for short-term access to wheelchairs, given the apparent lack of provision currently being faced by those in need. There is however a risk of unintended

⁴ ReTIS, Wheelchair and Seating Service Wheelchair Eligibility Criteria: <http://www.retis.scot.nhs.uk/wheelchaircriteria.html>

⁵ Criteria for the Provision of an Attendant Controlled Manual Wheelchair (AC), Version 23.7.2014
<http://www.retis.scot.nhs.uk/pdf/PACMW.pdf>

⁶ Social Work (Scotland) Act 1968; Chronically Sick and Disabled Persons (Scotland) Act 1972; Housing (Scotland) Act 1987, Part 8; National Health Service (Scotland) Act 1978.

consequences in passing legislation that requires wheelchairs to be provided on a short-term basis, whilst the current long-term provision is not underpinned by legislation.

I want to be clear that I do not propose to alter the way the current system works in practice for those with a long-term need for a wheelchair, as it works well. I will however consider further, in the light of consultation responses, whether that long-term provision also needs a clearer statutory basis. That said, I do not believe that a Members' Bill is the right place to do this. Your views on this issue will therefore be very welcome.

Current provision for short-term access to wheelchairs across Scotland

While both the NHS and local authorities can opt to provide short-term wheelchair loans, they have no obligation to do so.

Scotland has five NHS Wheelchair services, each covering different geographic areas. The criteria for accessing NHS Wheelchair services for short-term provision varies depending on NHS area.⁷

Organisation	Temporary Wheelchair Provision
Highland Wheelchair and Seating Service (HWSS) (NHS Highland)	No
West of Scotland Mobility and Rehabilitation Centre (WestMARC) (NHS GGC)	No
Tayside Orthopaedic and Rehabilitation Technology Services (TORT) (NHS Tayside)	Issued on grounds of immediate medical needs (e.g. post-op) only
Mobility and Rehabilitation Service (MARS) (NHS Grampian)	No
Southeast Mobility and Rehabilitation Technology (SMART) (NHS Lothian)	No

Out of the five NHS Wheelchair services, one offers short-term wheelchair provision on a restrictive basis to meet immediate medical needs only. A response to a Freedom of Information Request from one NHS wheelchair provider stated there were no formal criteria to define immediate medical needs and therefore it is difficult to clearly establish what needs it would incorporate.

The other three NHS wheelchair providers do not appear to offer short-term provision and would generally direct those with short-term needs to the British Red Cross.

One community equipment provider, covering a number of local authorities, has also piloted an approach to providing wheelchairs on a short-term basis through community equipment services.

This demonstrates the difference in approaches to providing short-term access to wheelchairs across health and social care. Such variation results in some people getting short-term access to a wheelchair and the positive impacts it can bring, and others not, resulting in negative impacts on their quality of life. These negative impacts will be discussed later in this document.

All other short-term wheelchair need is met through individuals borrowing wheelchairs from the voluntary sector or individuals purchasing the wheelchair themselves. However, there are even inconsistencies here which affect people's ability to access a wheelchair. For example, there is evidence from the British Red Cross report

"Maintaining mobility"⁸ that there are inconsistent approaches to advice given around short-term wheelchair provision by health professionals. Some suggest contacting the British Red Cross to individuals with a short-term need for a wheelchair, while others do not have this conversation.

⁷ Freedom of Information Requests sent on 14/12/18 to all five wheelchair centres.

⁸ Kantar Public (2018). Maintaining mobility – understanding the unmet need for short-term mobility aids. British Red Cross. <https://www.redcross.org.uk/maintaining-mobility>

This adds to the variation and inconsistency experienced by people with short-term mobility needs and results in unmet mobility needs, and the negative outcomes of that.

The case for a statutory duty

While there is some good practice in Scotland in relation to the short-term provision of wheelchairs, the current situation arguably demonstrates that without a legal obligation to provide short-term access to wheelchairs, Local Authorities, the NHS, and Health and Social Care Partnerships are unlikely to consistently and systematically offer access to wheelchairs on a short-term basis, and the viability of the voluntary or private sector to continue to meet this need is not guaranteed.

This limits the impact that short-term wheelchair provision can have in relation to the Scottish Government's policy aims outlined in the 2020 Vision,⁹ which states that:

“There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of readmission”

Similarly, the Health and Social Care Delivery Plan also covers the themes of prevention, self-management and returning and recovering in the home environment.¹¹ What research tells us

As the balance of care continues to shift from a hospital setting to people's homes and communities, access to appropriate aids, specifically wheelchairs, can play an important role in giving people the practical help that will assist them to recover outside of hospital.

Recent UK wide research by the British Red Cross¹⁰ found that many people with a short-term mobility need simply weren't aware that using a wheelchair would be of benefit to them, or if they were, didn't know how to access one. As the NHS does not usually offer wheelchairs on a short-term basis, the research found that this was not always an option which health professionals fully discussed with people. At the same time, individuals wanted and expected health professionals to tell them about, or even prescribe for them, the aids that would help their recovery. The lack of a consistent approach contributes to this variation in advice.

This research found that of those who were surveyed and had an unmet mobility need:

- 65% experienced significant negative impact on their quality of life;
- 34% of those who were employed and had an unmet need had to leave employment altogether; and
- 44% of people with an unmet mobility need thought that they would have benefitted from access to a wheelchair.

In contrast, the same report illustrated the positive impact that having short-term access to a wheelchair can have including; helping speed up recovery time, enabling someone to get back to work, improving mental health and wellbeing, increasing independence and reducing isolation.

- 90% said it was very helpful and enabled them to manage day to day activities;
- 87% said it made it easier for family and friends to help them;
- 49% said their wheelchair hastened their recovery time; and
- 72% saw the value of a wheelchair in preventing further injury.

In addition to this there are also potential economic benefits from providing short-term access to a wheelchair. They can enable people to stay in work, reduce caring responsibilities for families, and speed up recovery

⁹ Scottish Government (2011). 2020 Vision. <https://www2.gov.scot/Topics/Health/Policy/2020-Vision>. ¹¹ Scottish Government (2016). Health and Social Care Delivery Plan. <https://www.gov.scot/publications/healthsocial-care-delivery-plan/>

¹⁰ Kantar Public (2018). Maintaining mobility – understanding the unmet need for short-term mobility aids. British Red Cross. <https://www.redcross.org.uk/maintaining-mobility>

time. Giving individuals short-term access to a wheelchair could also reduce pressure on the NHS by facilitating timely discharge, avoiding costly home visits and reducing late or missed appointments.

Along with the survey, the report presented eight case studies from four geographic locations across the UK, including Edinburgh. These case studies identified several common themes and issues for people who experienced a short-term mobility need but did not access a wheelchair.

Participants in the case studies reflected that they felt increasingly isolated during the time their mobility was restricted. They spoke of the difficulties they faced as a result of becoming housebound, and reflected how this affected their emotional wellbeing, with more than one saying that they went on to develop depression and anxiety.

Other issues that were identified included difficulties managing everyday life which led to a dependency on others. People interviewed talked about how the challenges of not being able to get around, in some cases even within their own home, made it extremely hard to carry out normal day to day activities such as bathing, making dinner or going shopping. This frequently resulted in them having to be dependent on others, which also contributed to their declining emotional wellbeing.

Health professionals interviewed as part of the research acknowledged that not providing a wheelchair could result in additional strain and pressure on NHS resources. This could be in the form of missed or late appointments, costly home visits, or in some cases a deterioration in the individual's health.

It should not be left to an ad hoc approach to ensure that an individual's basic medical needs are met. The introduction of a statutory duty for the short-term provision of wheelchairs will ensure that people with a short-term need for a wheelchair can easily access one and benefit from the positive outcomes that it can help to deliver. It will also ensure that the health and social care system avoids the unintended and currently unreported financial consequences of this gap in provision.

Estimations of the demand

The British Red Cross conducted a survey of 1,105 people in Scotland, and found that 12% (130 people) had experienced a serious short-term mobility need at least once in the past two years.¹¹

Of the 130 people who had experienced a serious short-term mobility need:

- 81% (105 people) reported that they had issues with everyday living during their most recent experience of need;
- Of these:
 - 30% (31 people) had not been able to access any mobility aids; and
 - 9% (9 people) had access to a wheelchair.

Of those who had issues with everyday living and had not had access to a wheelchair (96 out of 105), 17% agreed that a wheelchair would have helped with daily living (this is 1.5% of respondents).

Based on the above it can be projected that around 1.5% of Scotland's adult population (around 68,000) may have had an unmet need for a wheelchair in the past two years.¹²

DETAIL OF THE PROPOSED BILL

The factors outlined above set out a strong case for the introduction of a statutory duty. This section sets out how I propose to achieve this through the Bill.

¹¹ This survey was conducted in January 2019 by the British Red Cross. The BRC currently have no plans to publish these findings more widely.

¹² Using a baseline figure of 4,507,358 (those over 16 in Scotland)

Source: <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/population/populationestimates/mid-year-population-estimates/population-estimates-time-series-data> 4,507,358 x 1.5% = 67,610.

There are a number of ways which a Bill such as this could be taken forward. I would welcome your views on which options you believe would be the most appropriate.

Establishing a duty to provide short-term access to a wheelchair

The Bill would establish a duty to provide a wheelchair on a short-term basis to anyone with a (defined) short-term mobility need.

This would include the provision of a wheelchair to enable discharge from an NHS hospital, or following treatment by a GP or another NHS professional. It would not apply to discharge from a private hospital.

The Bill would be focussed on providing access to attendant controlled or occupant propelled manual wheelchairs; it would not include access to specialist chairs. The reason for this is that as the mobility need is short-term, a standard wheelchair, which meets weight and height requirements for the individual using it, should be sufficient to meet their needs.

As part of this a timeframe for the provision of a wheelchair could also be set out. Given that needs are short-term, I propose that this Bill should set out a maximum acceptable and realistic timeframe for providing a wheelchair. This could be either 24 hours, 48 hours or 72 hours from when an individual is assessed and is ready to use a wheelchair. I would welcome your views on which option you believe would be reasonable both for the individual and the provider.

Definition of short-term need

This Bill would establish a statutory duty for the provision of short-term access to wheelchairs. Part of this would include defining the meaning of short-term. Given that current practice by NHS Wheelchair and Seating services determines that a need which is over 6 months is permanent, the proposal put forward for this Bill is that a short-term need would be defined as a need which is expected to last 6 months or less.

This definition would ensure that the current gap in provision for those with needs lasting for less than 6 months would be fully covered in the Bill. This would in effect mean that everyone with a mobility need resulting from a clinical or medical situation would have access to a wheelchair, regardless of how long their mobility need lasts, either through existing practice, or new obligations introduced through this Bill.

Where should this duty be placed?

Given how the responsibility for aids, adaptations and equipment is currently met, there are different options for where this duty could be placed. The options are that the duty is placed on the NHS (i.e. Health Boards) or that it is placed on Health and Social Care Partnerships. There are 14 regional Health Boards that together cover all of Scotland, and 31 "integration authorities" which are often referred to as "Health and Social Care Integration Partnerships".

The Bill would not propose to specify how the body should deliver this provision, it would only establish the responsibility for it to be provided.

Furthermore, whichever body has the duty placed on them could opt to meet their obligations by commissioning the provision from an external organisation.

Ultimately, it would be for the body itself to decide how to meet their obligations.

National Health Service

If the duty was placed on the NHS, one option could be that it delivers short-term provision through its established Wheelchair and Seating Services. These services currently provide wheelchairs to individuals with permanent needs, therefore they are already providing attendant controlled manual wheelchairs and occupant propelled manual wheelchairs.

These services usually require a referral into the service, and may have waiting times between a referral being sent, an assessment of need being made by an appropriate health professional, and the wheelchair being delivered. In addition to this, given they are currently focussed on long-term need it would be critical that adding the responsibility of short-term need to the remit would not result in delays for those accessing long-term provision.

Integrated Authorities (Health and Social Care Partnerships)

If the duty was placed on, or delegated to, Health and Social Care Partnerships, they could opt to provide short-term access to wheelchairs through their established community equipment and adaptation services.

In both cases it would need to be assessed whether or not the individual already has access to a wheelchair of their own, then if necessary either provide a wheelchair directly, or commission provision from an external organisation.

Given your knowledge, expertise and experience in relation to these issues I would welcome your views on where you believe the duty should sit, either with NHS or with Health and Social Care Partnerships.

How to deal with additional details

In setting up such a duty, aspects such as the assessment process, referral process, qualifying criteria will be relevant. It is my preference that the details relating to these aspects would not be outlined on the face of the Bill. Instead I would prefer to give Scottish Ministers powers to deal with these matters through regulations and guidance. Alternatively, these matters could be delegated to each NHS Board or Health and Social Care Partnership.

The benefits of such an approach include keeping the Bill simple, not being too prescriptive and allowing for potential changes to needs and demands to be reflected without legislative change. This approach would also enable Ministers, and those with expertise in this area, the discretion to implement the obligations as they see fit.

I want to stress that my proposal is about ensuring those who would benefit from a short-term wheelchair have access to one. It is likely that any assessment would need to involve the views of relevant medical professionals to help ascertain whether access to a wheelchair was the most appropriate mobility aid for that individual, in their particular circumstances; with the well-being and safety of the individual being paramount. For this reason, I believe those with expertise are best placed to set out the detail of how this should be done.

I am further proposing that this Bill should include a provision enabling Scottish Ministers to issue Directions to relevant statutory bodies on how to implement their duties.

This would ensure that Ministers are able to instruct the public body with responsibility for the obligations to implement their duties, ensuring that short-term wheelchair provision is delivered in practice.

Requirement for Scottish Government to monitor, review and report on the measures

Lastly, I propose that the Bill would require Scottish Ministers to monitor and review the legislation and report back to the Scottish Parliament on how it is working.

This would enable the Scottish Parliament to retain oversight of the performance, impact, quality and needs of short-term wheelchair provision. It could also be a mechanism to monitor whether the new legislation, and the

introduction of a statutory provision for those with a short-term need, was having an impact on the more general provision.

I am seeking views on whether you think this reporting should be required on a yearly, two-yearly, three-yearly or five-yearly cycle. My preference is for this to happen on a three-yearly cycle. This would allow a balance between effective oversight and the additional responsibility of reporting.

Who will be affected by this Bill?

It is expected that this Bill would impact on people who have a short-term mobility need, including children; and on the NHS, health and social care partnerships, GPs, voluntary sector wheelchair providers and private sector wheelchair providers.

Impact on people with a short-term mobility need

The Bill should have a positive impact on people with short-term mobility needs. Research discussed earlier in this document has shown that having access to a wheelchair can help people manage day to day life, maintain their social connections and hasten their recovery.¹³

Impact on the NHS

The Bill could have many positive advantages for the NHS. It could play a role in tackling delayed discharge and prevent people's needs from escalating. As mentioned previously, research undertaken for the British Red Cross found that providing a wheelchair could deliver cost savings through avoiding other more expensive interventions. Although this research was undertaken in England the issues it highlights are applicable to many people who experience a short-term mobility need. It found overall health and social care savings ranged from £469 to £4,607, with an average saving of £1,676 to the health system in the cases presented.¹⁴

Given the links between restricted mobility and increased risks of not being able to get out and about and the resulting negative impact on social connections, isolation and loneliness, providing a short-term wheelchair could limit these negative impacts, which are known to have significant health implications. Indeed, in the British Red Cross Maintaining Mobility report, 77% of participants who accessed a wheelchair stated that having it allowed them to get out and about more.

The Campaign to End Loneliness highlights that people who are lonely have a 26% increased likelihood of dying earlier. In addition to this, findings show that people who are lonely have a higher use of medication, higher incidence of falls and increased risk factors for long-term care. They are more likely to undergo early entry into residential or nursing care and use Accident and Emergency services when they do not have chronic illness.¹⁵

Depending on the delivery method chosen, the Bill could possibly place an additional duty on the existing NHS Wheelchair services. Meeting these duties would have an increased financial implication, even if there are savings elsewhere in the system resulting from this intervention.

Impact on Health and Social Care Partnerships

The Bill could have implications for health and social care partnerships dependent on where duties to meet this need are placed. This would have a financial implication for the partnerships, and their staff, who will be required to meet the obligations of the proposed Bill.

¹³ Kantar Public (2018). Maintaining mobility – understanding the unmet need for short-term mobility aids. British Red Cross. <https://www.redcross.org.uk/maintaining-mobility>

¹⁴ McNulty, A., Carter, C., Beswick, J. (2015). Putting the Wheels in Motion: Assessing the value of British Red Cross short-term wheelchair loan. British Red Cross. <https://www.redcross.org.uk/about-us/what-we-do/researchpublications>

¹⁵ Campaign to End Loneliness, Threat to Health, <https://www.campaigntoendloneliness.org/threat-to-health/> accessed on 16 January 2019.

Impact on GPs and other clinicians/health professionals

GPs and other clinicians/health professionals may also be impacted by the proposed Bill in that they may see individuals who require short-term access to a wheelchair and would be able to refer patients to facilitate access.

Impact on the voluntary and private sector wheelchair providers

The Bill may impact on demand for voluntary and private sector wheelchair provider services. It is not my intention that this Bill should displace the role currently played by the voluntary sector; however, depending on the method of provision chosen, the voluntary sector may be commissioned to provide services on behalf of the NHS or Health and Social Care Partnerships.

Financial Implications

Meeting the duties of the proposed Bill is likely to have a financial implication. There would be costs in relation to procuring additional wheelchairs, administering the provision and ongoing maintenance of the equipment. However, as wheelchairs and other forms of community equipment are already currently provided by statutory bodies for long-term mobility issues, it may be that some of the short-term provision of wheelchairs could be met through these already established services which would reduce any additional administrative costs.

A face-to-face survey conducted for the British Red Cross in Scotland estimates that those with an unmet short-term need for a wheelchair could be as many 1.5% of the adult population over a two-year period.¹⁶ When the survey results are extrapolated to the Scottish population as a whole this equates to approximately 68,000 people over 2 years.¹⁷

This figure provides an estimate, but it may be that need for short-term wheelchair access is higher or lower than this.

It is challenging to give an estimation of costs as current NHS wheelchair providers and community equipment providers who are providing some level of short-term provision were unable to indicate the financial costs associated with provision, as it is not systematically recorded.

The figures below from the British Red Cross, which is the largest provider of short-term wheelchair loans in Scotland, have been used to give an indication of costs. Whilst they may not necessarily represent the model of delivery that would be implemented, they do provide some understanding of the parameters that could help determine costs.

British Red Cross currently make short-term wheelchair loans across Scotland. In 2018 they loaned 5,381 wheelchairs to 4,818 people. In order to meet the 5,381 loans, they needed 1,700 wheelchairs. The estimated cost of a wheelchair is £150, and it costs the British Red Cross approximately £8,500 per year for replacement wheelchairs and spare parts for repairs. A wheelchair has an approximate lifespan of 10 years.

Based on their operating costs and model, which includes staffing and volunteer costs, training and development costs and building costs, a British Red Cross short-term wheelchair loan costs on average £51 per loan, based on an average loan duration of eight weeks.

There are also potential savings to be made through the short-term provision of a wheelchair. The British Red Cross undertook research in 2015¹⁸ which sought to examine the potential costs and savings of short-term

¹⁶ See "Estimations of Demand" section on page 11 of this document.

¹⁷ In person survey of 1105 adults (16+) in Scotland, carried out by Kantar/TNS between 21st November- 18th

December 2018. Estimate based on people who had a serious short-term mobility aid need, didn't have access to a wheelchair, and agreed that a wheelchair would have helped with daily living in some way, such as by enabling them to see their family and friends, get to work or get to doctor, hospital or physiotherapy appointments.

¹⁸ McNulty, Carter, C., Beswick, J. (2015). Putting the Wheels in Motion: Assessing the value of British Red Cross short-term wheelchair loan. British Red Cross. <https://www.redcross.org.uk/-/media/documents/about-us/researchpublications/health-social-care->

access to a wheelchair. The report examined nine case studies and found potential health and care savings ranging from £469 to £4,607 with an average saving of £1,676.

Research undertaken by Arthritis Research UK, Room to Manoeuvre (2018) also explored the issues surrounding aids and adaptations for people living with arthritis. From the survey it conducted it found that 95% of respondents using aids and adaptations felt they had a positive impact on their quality of life, and 79% said they improved their ability to live independently. Furthermore, the report cited a survey undertaken by the Royal College of Occupational Therapists in 2015 in which 96% of occupational therapists responded that home adaptations can reduce the need for formal care.²¹ While this is not specific to wheelchairs, what this survey arguably demonstrates is the role that provision of appropriate equipment can play in reducing demand for formal support services.

Equalities

An initial equalities impact assessment has been carried out by the Non-Government Bills Unit. This assessment identified advantages for several groups, in particular around disability and age.

It can be argued that the current provision of wheelchairs discriminates against those with a short-term mobility need. The proposal aims to address this inequality.

Older people are more likely to have mobility issues following medical treatment and are also more likely to be negatively affected by lengthy stays in hospital. The provision of short-term access to a wheelchair could allow, where appropriate, many older people to return home sooner following treatment, reducing the amount of time they need to spend in hospital and aiding their recovery.

Some individuals may not be properly made aware of the options that are currently available within the voluntary sector due to English being understood only a little or not at all. If short-term access to wheelchairs were to become routine for those patients that need them then it would be clearer what people were entitled to, making any language barrier less of an issue.

There were no significant disadvantages to any group identified. It was however noted that the proposal could result in some individuals with caring responsibilities being required to take on additional duties if the individual they care for leaves hospital earlier than they would have done following the provision of a wheelchair. This would need to be considered during any assessment for provision by medical professionals.

It was also noted that the proposal may lead to more wheelchair users making use of public transport and other facilities which may lead to those with long-term mobility needs finding it more difficult to access some facilities on occasion, though this is anticipated to be a rare occurrence.

Sustainability

The outcome of an initial sustainable development impact assessment suggests that the proposed Bill can be sustainably delivered.

The proposal aims to allow more people to leave hospital earlier, where appropriate, following medical treatment. This will allow those individuals to return to their community, maintaining a greater degree of independence. It could also allow these individuals to access green spaces, to maintain their links with family, friends and the wider community, all allowing them to continue to take part in the life of their local area. Leaving hospital earlier, in addition to the impact on delayed discharges which would allow more people to receive timely NHS treatment, could potentially also help to reduce the number of hospital-acquired infections.

This analysis also highlighted some areas for further consideration should the Bill be enacted. It was noted that short-term access to a wheelchair may not be appropriate in all cases. Some individuals may benefit from

[and-support/brc-wheels-in-motion-july-2015.pdf](https://www.versusarthritis.org/media/1671/room-to-manoevre-report.pdf) ²¹ Arthritis Research UK (2018), Room to manoeuvre. Versus Arthritis <https://www.versusarthritis.org/media/1671/room-to-manoevre-report.pdf>

a different type of mobility aid, and many homes will simply not be accessible with a wheelchair. It is for these reasons that an assessment process will be vital to ensure that wheelchairs are only provided to people who need them and can make use of them. Similarly care will need to be taken to ensure that the availability of a wheelchair does not put pressure on someone to return home who, for other reasons, may not feel ready to do so.

Consideration should be given to the quality of wheelchairs purchased to ensure value for money and that wheelchairs can be easily maintained and reused by multiple users. Consideration should also be given to establishing a system of collection, maintenance and, where necessary, recycling or disposal of wheelchairs.

QUESTIONS

ABOUT YOU

(Note: Information entered in this “About You” section may be published with your response (unless it is “not for publication”), except where indicated in **bold**.)

1. Are you responding as:

an individual – in which case go to Q2A on behalf of an organisation? – in which case go to Q2B

2A. Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose “Member of the public”.)

- Politician (MSP/MP/peer/MEP/Councillor)
- Professional with experience in a relevant subject
- Academic with expertise in a relevant subject
- Member of the public

Optional: You may wish to explain briefly what expertise or experience you have that is relevant to the subject-matter of the consultation:

2B. Please select the category which best describes your organisation:

- Public sector body (Scottish/UK Government or agency, local authority, NDPB)
- Commercial organisation (company, business)
- Representative organisation (trade union, professional association)
- Third sector (charitable, campaigning, social enterprise, voluntary, non profit)
- Other (e.g. clubs, local groups, groups of individuals, etc.)

Optional: You may wish to explain briefly what the organisation does, its experience and expertise in the subject-matter of the consultation, and how the view expressed in the response was arrived at (e.g. whether it is the view of particular office-holders or has been approved by the membership as a whole).

3. Please choose one of the following:

- I am content for this response to be published and attributed to me or my organisation
- I would like this response to be published anonymously
- I would like this response to be considered, but not published (“not for publication”)

If you have requested anonymity or asked for your response not to be published, please give a reason. **(Note: your reason will not be published.)**

4. Please provide your name or the name of your organisation. **(Note: The name will not be published if you have asked for the response to be anonymous or “not for publication”.)**

Name: Inverclyde HSCP

Please provide a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number. **(Note: We will not publish these contact details.)**

Contact details: Debbie Maloney Service Manager Innovation and Independent Living

5. Data protection declaration

X I confirm that I have read and understood the privacy notice attached to this consultation which explains how my personal data will be used.

YOUR VIEWS ON THE PROPOSAL

Note: All answers to the questions in this section may be published (unless your response is “not for publication”).

Aim and approach

1. Which of the following best expresses your view of establishing a duty to provide a wheelchair to anyone who has been assessed as having a short-term need for one (defined as less than 6 months)?

- Fully supportive
- Partially supportive
- Neutral (neither support nor oppose)
- Partially opposed
- Fully opposed
- Unsure

Please explain the reasons for your response:

I do not believe that the full implications of the proposal have been considered, there may be implications on service prescription and delivery that will warrant additional demand on services (outlined below) around safe processes. No consideration is given to safe access to people's homes.

2. What is your view on setting a target for providing a wheelchair to a person who (a) has been assessed as having a short-term need for one and (b) is otherwise ready to use it?

- Target of 24 hours (where practicable)
- Target of 48 hours (where practicable)
- Target of 72 hours (where practicable)
- Another target (please specify)
- No target in the legislation
- Unsure

Please explain the reasons for your response:

This would depend on local service availability and which service was providing.

3. Which of the following best expresses your view of where the Bill should place the duty to provide short-term access to wheelchairs to people assessed as needing them?

- Duty placed on NHS Boards
- Duty placed on NHS Boards, but with a requirement to delegate it to Integrated Authorities (Health & Social Care Partnerships)
- Duty placed on Integrated Authorities (Health & Social Care Partnerships)
- Other (please specify)
- Unsure

Please explain the reasons for your response:

Prescription of mobility aids currently sits within the AHP's or medical practitioners in hospital. Community PT's and OT's as well as GP's also prescribe from communities. To allow for fast prescription this would require all prescribers to access.

Could Shop Mobility services have a role in this work?

4. Which of the following best expresses your view of how further provision about wheelchair access (e.g. assessment criteria and eligibility) should be made?

- Ministers should have power to make regulations, give directions, and guidance.
- X It should be left to NHS Boards or Integrated Authorities (as the case may be) to develop the criteria for themselves.
- Other (please specify)
- Unsure

Please explain the reasons for your response:

Different localities, particularly rural communities may have to meet this need in a way that aligns to their current provision of services giving rise to the need for locality response to the requests.

5. Which of the following best expresses your view of requiring Scottish Ministers to report back to the Scottish Parliament on the operation of the legislation?

- Duty to report every year
- Duty to report every two years
- Duty to report every three years
- Duty to report every five years
- X Unsure
- Other (please specify)

Please explain the reasons for your response:

Will this involve another layer of reporting from organisations to Scottish Government?

Financial implications

6. Taking account of both costs and potential savings, what financial impact would you expect the proposed Bill to have on:

(a) Government and the public sector (including the NHS, local authorities)

- Significant increase in cost
- Some increase in cost
- Broadly cost-neutral
- Some reduction in cost
- Significant reduction in cost
- Unsure

(b) Businesses (including makers and suppliers of wheelchairs)

- Significant increase in cost
- Some increase in cost
- Broadly cost-neutral
- Some reduction in cost
- Significant reduction in cost
- Unsure

(c) The third sector (including charities and voluntary bodies supporting those with mobility issues)

- Significant increase in cost
- Some increase in cost
- Broadly cost-neutral
- Some reduction in cost
- Significant reduction in cost
- Unsure

(d) Individuals (including people with mobility issues and their relatives)

- Significant increase in cost
- Some increase in cost
- Broadly cost-neutral
- Some reduction in cost
- Significant reduction in cost
- Unsure

Please explain the reasons for your response.

Some areas in Scotland are looking at potential charges for equipment provision/delivery/uplift there may require to be charges of this nature.

There is no consideration with this bill around access to people's homes and the potential requirements around whether properties are suitable for temporary ramps and how people will manage to get in and out of their homes or lift a wheelchair over stairs and whether carers are fit to support propulsion of wheelchairs. There is also no consideration around assessment and prescription of wheelchairs.

There will be costs relating to assessment, processing, delivering, checking safety, recall of wheelchairs, uplifting, servicing cleaning.

Equalities

7. What overall impact is the proposed Bill likely to have on equality, taking account of the following protected characteristics (under the Equality Act 2010): age, disability, gender re-assignment, maternity and pregnancy, marriage and civil partnership, race, religion and belief, sex, sexual orientation?

- Positive
- Slightly positive
- Neutral (neither positive nor negative)
- Slightly negative
- Negative
- Unsure

Please explain the reasons for your response.

May relate to disability

8. In what ways could any negative impact of the Bill on equality be minimised or avoided?

N/A

Sustainability

9. Do you consider that the proposed Bill can be delivered sustainably, i.e. without having likely future disproportionate economic, social and/or environmental impacts?

- Yes
- No
- Unsure

Please explain the reasons for your response.

See comments in box 6 above. When people approached Red Cross for a wheelchair loan they took personal responsibility for the loan. Where a statutory service are providing this it requires a more robust approach around assessment and prescription which will impact on staff, services, transport decontamination etc where will the liability for this lie.

Further consideration is also required around safe access to people's homes.

General

10. Do you have any other comments or suggestions on the proposal?

HOW TO RESPOND TO THIS CONSULTATION

You are invited to respond to this consultation by answering the questions in the consultation and by adding any other comments that you consider appropriate.

Format of responses

You are encouraged to submit your response via an online survey (Smart Survey) if possible, as this is quicker and more efficient both for you and the Parliament. However, if you do not have online access, or prefer not to use Smart Survey, you may also respond by e-mail or in hard copy.

Online survey

To respond via online survey, please follow this link:

<https://www.smartsurvey.co.uk/s/Wheelchairs/>

The platform for the online survey is Smart Survey, a third party online survey system enabling the SPCB to collect responses to MSP consultations. Smart Survey is based in the UK and is subject to the requirements of the General Data Protection Regulation (GDPR) and any other applicable data protection legislation. Any information you send in response to this consultation (including personal data) will be seen by the MSP progressing the Bill and by staff in NGBU.

Further information on the handling of your data can be found in the Privacy Notice, which is available either via the Smart Survey link above, or at the end of this document.

Smart Survey's privacy policy is available here:

<https://www.smartsurvey.co.uk/privacy-policy>

Electronic or hard copy submissions

Responses not made via Smart Survey should, if possible, be prepared electronically (preferably in MS Word). Please keep formatting of this document to a minimum. Please send the document by e-mail (as an attachment, rather than in the body of the e-mail) to:

jackie.baillie.msp@parliament.scot

Responses prepared in hard copy should either be scanned and sent as an attachment to the above e-mail address or sent by post to:

Jackie Baillie MSP
Room M1.13
Scottish Parliament
Edinburgh EH99 1SP

Responses submitted by e-mail or hard copy may be entered into Smart Survey by my office or by NGBU.

If submitting a response by e-mail or hard copy, please include written confirmation that you have read and understood the Privacy Notice (set out below).

You may also contact my office by telephone on (0131) 348 5905.

Deadline for responses

All responses should be received no later than Sunday 30 June. Please let me know in advance of this deadline if you anticipate difficulties meeting it. Responses received after the consultation has closed will not be included in any summary of responses that is prepared.

How responses are handled

To help inform debate on the matters covered by this consultation and in the interests of openness, please be aware that I would normally expect to publish all responses received (other than “not for publication” responses) on my website <http://jackiebaillie.laboursites.org/>. Published responses (other than anonymous responses) will include the name of the respondent, but other personal data sent with the response (including signatures, addresses and contact details) will not be published.

Where responses include content considered to be offensive, defamatory or irrelevant, my office may contact you to agree changes to the content, or may edit the content itself and publish a redacted version.

Copies of all responses will be provided to the Scottish Parliament’s Non-Government Bills Unit (NGBU), so it can prepare a summary that I may then lodge with a final proposal (the next stage in the process of securing the right to introduce a Member’s Bill). The Privacy Notice (below) explains more about how the Parliament will handle your response.

If I lodge a final proposal, I will be obliged to provide copies of responses (other than “not for publication” responses) to the Scottish Parliament’s Information Centre (SPICe). SPICe may make responses available to MSPs or staff on request.