



**MAKING A MOVE:
INCREASING CHOICE AND
INDEPENDENCE FOR PEOPLE WITH
SHORT-TERM MOBILITY NEEDS**

Refusing to ignore people in crisis

Mobility Aids Foreword

At the Red Cross we know how important it is for people to be able to get out and about in their communities, live in their own homes and take part in social occasions with family and friends. Last year in Scotland we provided more than 7,000 wheelchair loans to help people with short-term mobility needs to do these things. Many of our service users told us of the great difference that a wheelchair made - helping to make sure that they were not housebound, hospital bound or entirely dependent on others.

This report shows that each year many people find their right to independent living compromised by a lack of wheelchair provision. The benefits are realised by more than just the individual. Our research found that without access to wheelchairs, people can find themselves unable to leave hospital, or to attend hospital appointments as outpatients. They are also at greater risk of injury and/or slower recovery, and more likely to be readmitted to hospital – all at a cost to the statutory sector.



We believe that everyone who needs a wheelchair should be able to get one for as long as they need it. This would help the Scottish Government achieve its 2020 vision of people living longer healthier lives at home or in a homely setting as well as making sure people across Scotland continue to enjoy active and fulfilled lives. This report sets out the changes we would like to see.

David Miller

Director - Scotland

Introduction

Research from the British Red Cross (BRC) finds that people in Scotland with short-term mobility problems can be left unsupported as the remit of health and social services is limited to those with permanent needs. Our report shows that a lack of provision of mobility aids on a short-term basis leads to social exclusion and other disadvantages for users and carers while adding to pressures on statutory services.

An increasingly stretched voluntary service from the BRC, and others, plugs the gaps through short-term loans of wheelchairs and other mobility aids. This is despite substantial Scottish Government investment in modernising wheelchair services.

This report outlines a straightforward set of solutions to make sure people's rights to independent living are realised.



Background

The British Red Cross in Scotland currently loans around 7,000 mobility aids every year for those with short-term mobility issues. Such short-term wheelchair provision has significant benefits which:

- > allow injured and disabled people to leave the house and engage in social and economic activities, enabling them to live independently
- > reduces pressure on carers
- > relieves pressure on health and social care services
- > reduces pressure on public funding.

However, the statutory support for short-term wheelchair provision is minimal. Currently BRC spends £1.1 million of charitable funding per year across the UK providing wheelchairs for short-term use – additionally 80% of service users contribute a donation. With a growing and ageing population this service is coming under increasing pressure.

This report looks at what needs to change to effectively deliver people's rights to independent living and highlights how the provision of an effective service is required in order to support Scottish Government policy initiatives and its vision for integrated health and social care.

"...short-term loans can allow people to leave hospital earlier to facilitate out-patient treatment, reduce potential for falls, promote recovery to allow daily living, enhance positive mood and reduce fear and anxiety."

Occupational Therapist

Andrew's Story

When retired postal worker Andrew Reid woke up, he found that he couldn't move his legs and get out of bed. Five years earlier, he had suffered a bout of spinal stenosis which had affected his left side and severely impaired his mobility for more than nine months.

After a frustrating two weeks of not being able to get out of the house, Mr Reid felt he needed help to get mobile again.

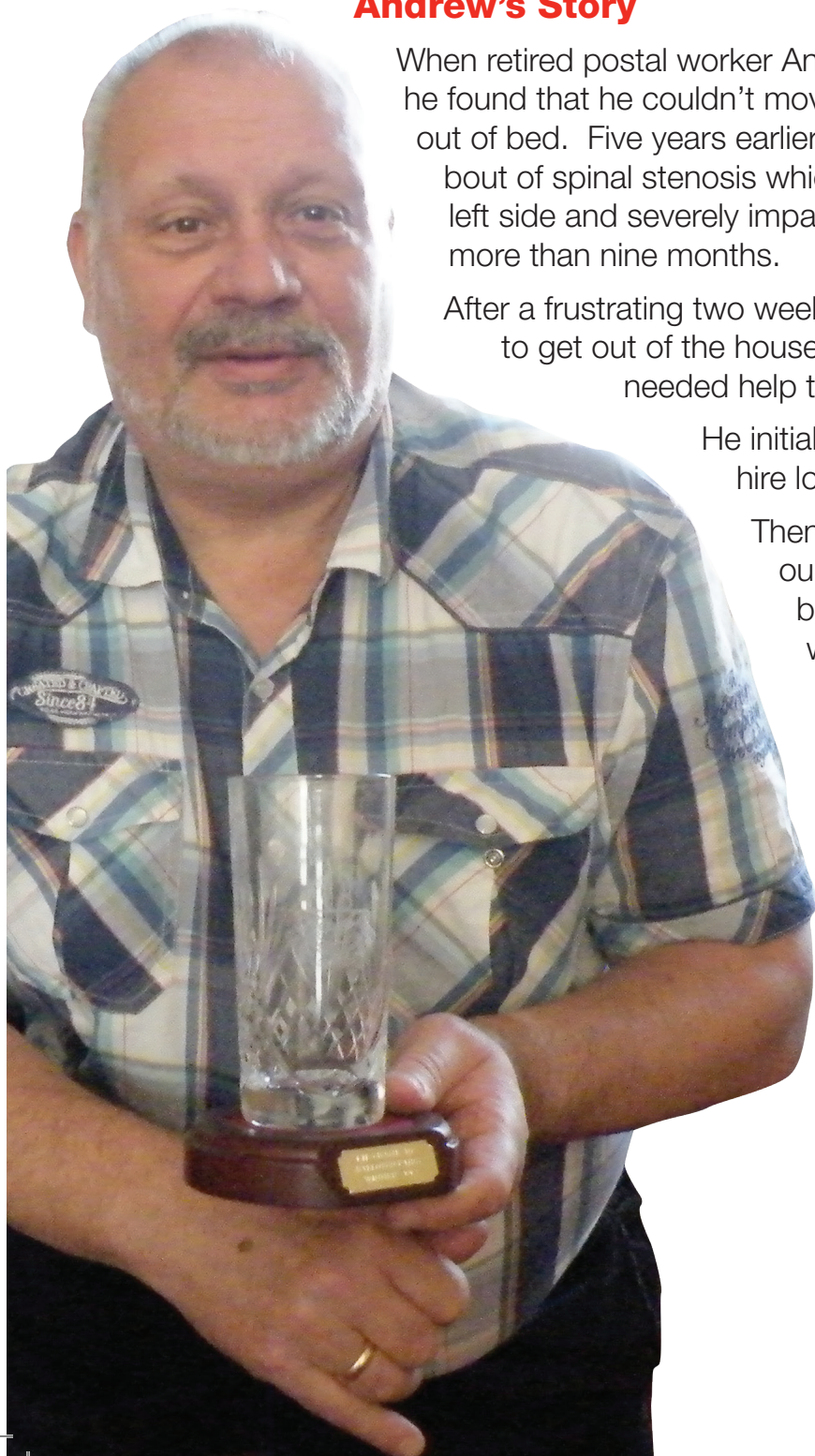
He initially found a private company offering wheelchair hire locally but the cost was prohibitive.

Then he found the British Red Cross website and our Glasgow office confirmed that they would be able to help him. Mr Reid borrowed the wheelchair for three months.

Thanks to the wheelchair – he was able to get to his bowling club several times a week and socialise with friends at his local pub. He was also able to get fresh air and exercise by wheeling himself around the local neighbourhood.

Since borrowing the wheelchair, Mr Reid's condition has gradually improved with medication and he is now able to get about with walking sticks.

Mr Reid said: "I was getting fed up staring at these four walls and was determined not to give in to it. Without the wheelchair I would have been housebound."



Diana's story

Due to increasing pain from severe arthritis, Diana Murphy, 61, from West Lothian was signed off work and recommended to undergo surgery to replace both her hips. She had a hip replacement operation for her right hip in June.

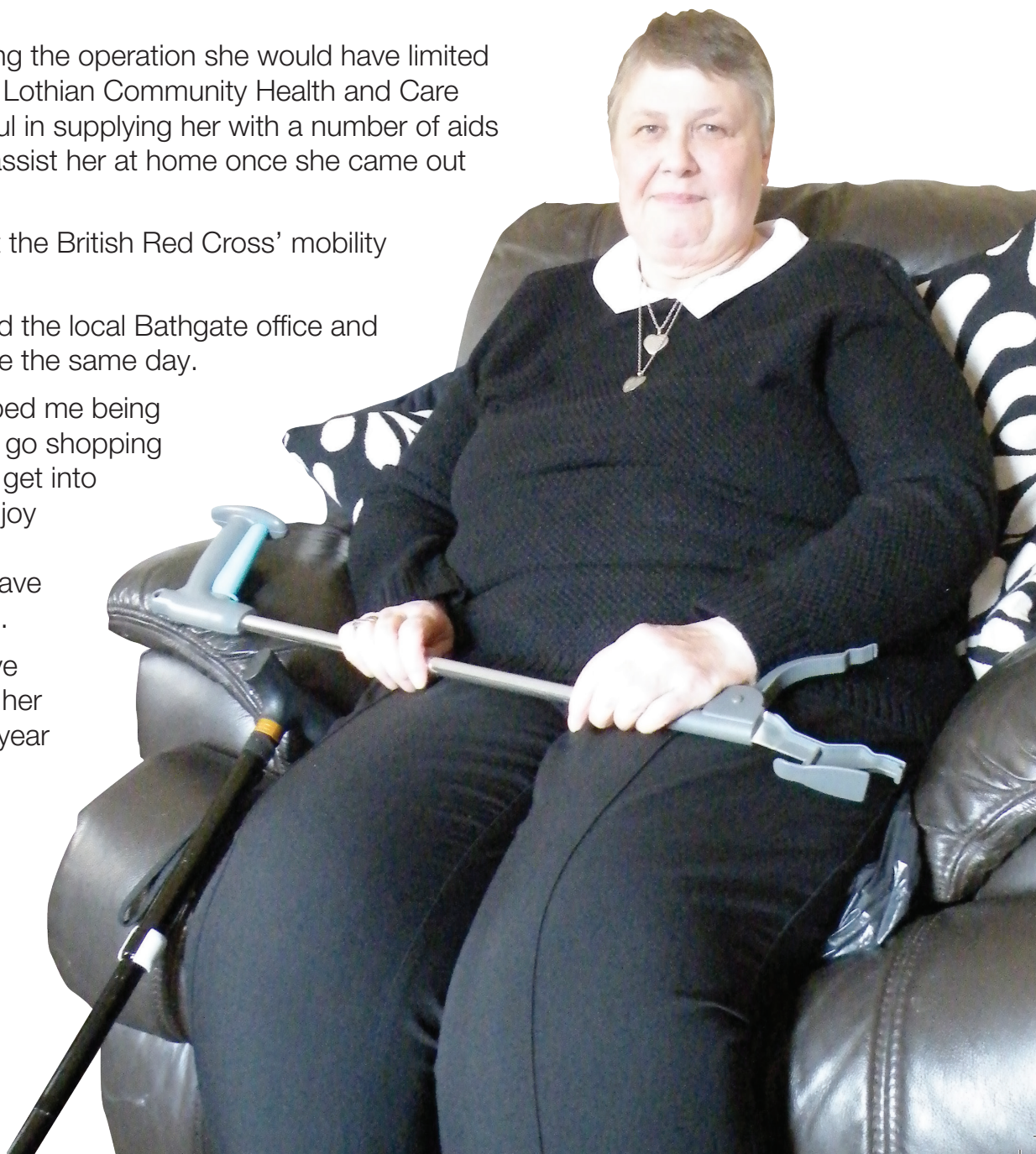
She knew that following the operation she would have limited mobility and the West Lothian Community Health and Care Partnership was helpful in supplying her with a number of aids and modifications to assist her at home once she came out of hospital.

Her GP told her about the British Red Cross' mobility aids service.

Diana's husband called the local Bathgate office and was able to collect one the same day.

"The wheelchair stopped me being housebound, it let me go shopping with my husband and get into the back garden to enjoy the summer sunshine. Without it I wouldn't have managed", Diana said.

Diana is hoping to have a similar operation for her other hip later on this year and is glad to know that the Red Cross mobility aids service will be there for her when she needs it.



Key findings

Thousands of people each year find their rights to independent living compromised due to a lack of statutory obligation to provide mobility aids for those with short-term impairments.¹ A lack of provision also means that many with longer-term conditions awaiting the outcomes of personal needs assessments are also excluded.

- > BRC meets these needs where we can, by annually providing over 7,000 short-term wheelchair loans through 22 outlets across Scotland
- > The people we support find themselves forced to depend upon increasingly stretched voluntary services to make sure they are not housebound, hospital bound, or completely dependent upon others for months on end
- > In the context of the independent living agenda and the rights of people with physical impairments "...to participate within society as full and equal citizens"² people's rights are too often unmet by statutory health or social services
- > With a growing and ageing population, the stress on BRC and other such service providers will increase
- > We found various examples of social and economic exclusion, such as people being unable to attend work or education, and events such as funerals, weddings and holidays. Many respondents reported that

without wheelchair access the pressure on carers was substantially increased

- > Our research found that without this service users may find themselves:
 - unable to leave hospital
 - unable to attend hospital appointments as outpatients
 - at greater risk of injury and/or slower recovery
 - more likely to be readmitted to hospital
- > Missed appointments, delayed discharge and longer treatment times will also lead to significant additional costs for the NHS
- > In terms of social services, the cost of providing additional short-term home care for those who are housebound and without a carer will be significant compared to that of wheelchair loans.

In Northern Ireland there is statutory provision of wheelchairs in all hospitals, with loan services delivered by BRC.

The Welsh Government has allocated £100,000 per year to roll out three pilot projects in partnership with three health boards.

In Scotland, while there are some examples of good practice, there is no national approach or requirement to provide support for those in need despite recommendations from Audit Scotland and others dating back to 2004.

¹ Short term is defined as up to six months

² Independent Living in Scotland, COSLA and Scottish Government Independent Living – a Shared Vision (2008)

Key recommendations

We call upon the Scottish Government to build upon its investment, and help people with shorter term mobility needs to access support that allows them to live an independent life.

In particular we call on the Scottish Government to:

- > place a duty upon the new joint health and social care integration boards to meet people's short-term mobility requirements
- > mandate those boards to explain how they will achieve this within their local area
- > make sure the boards are properly resourced to identify and meet these needs.



The case for change

Moving on - national policy

Problems with short-term wheelchair provision were identified in 2004 by an Audit Scotland report which noted a lack of clear responsibility in relation to clients. It found that restrictive eligibility criteria, along with lack of provision, meant people's needs were unmet and that they were being passed among various organisations and departments.³

In 2006, NHS Scotland produced the "Moving Forward" report on its Wheelchair and Seating Service (NHSWSS).⁴ A subsequent consultation recognised a chronic lack of awareness and resourcing within a context of increasing demand.⁵ It went on to highlight the need for the service to promote social inclusion and to be driven by need rather than funding. It recommended that adequate funding be put in place and that a multi-agency approach was developed to "... deliver a seamless service from the user and carer perspective and that this should be established at national level and delivered locally."⁶

The 2006 report led to the 2009 NHSWSS modernisation action plan, and from its 53 actions came the modernisation project. Subsequently, between 2008 and 2013, the Scottish Government invested £17.8 million modernising the service.

Our research shows that, despite these reports and substantial investment, funding remains inadequate while provision by statutory agencies

is insufficient, inconsistent and driven by resource availability rather than need. Indeed the majority of Occupational Therapists interviewed for our research stated they were heavily or quite dependent upon the voluntary sector for short-term wheelchair provision. It would appear that the very existence of voluntary provision perpetuates the lack of support from statutory agencies as one respondent from the NHS noted:

"There is no doubt that the historical practice has been one where the voluntary sector has met that need and I am not aware of any plans in the NHS to try and deliver and meet that need, so I would say that it's dependent on it."

(NHS service manager)

Thus people recovering from operations, with broken/damaged lower limbs and various other mobility impairments are rarely provided with mobility aids by either health or social services. Additionally, we found that those with longer-term conditions awaiting initial assessments, or re-assessments due to changing conditions, are also often left without mobility support due to lack of short-term provision.

³ Audit Scotland, Adapting to the future: Management of community equipment and adaptation (2004) pg.7

⁴ Scottish Executive, Moving Forward: Review of NHS Wheelchair and Seating Services in Scotland (March 2006)

⁵ Scottish Government, NHS Scotland Wheelchair and Seating Services in Scotland (March 2006)

⁶ Scottish Executive (2006), op cit. pg.10

Therefore, despite earlier recommendations dating back a decade, the voluntary sector remains, in many instances, the main option. Moreover, we would note that demographic changes are increasing the pressure on such services meaning that a growing number of people are likely to fall between the gaps and be denied their rights. We would recommend that the voluntary sector should be key to delivering government objectives within the integrated health and social care and independent living agendas, but that there should be statutory support in place to affirm its role and allow it to effectively meet people's real needs.

Whose responsibility?

There is currently no statutory duty on Scottish Ministers to provide wheelchairs or other mobility aids in the short-term.⁷ Similarly, while there is a duty on local authorities to promote social welfare,⁸ there is no obligation to provide short-term wheelchair loan.

This lack of a specific statutory duty means that in practice NHSWSS primarily provides wheelchairs for long-term use where impairment is likely to last more than 6 months.

Our research found that this lack of statutory duty is at the core of the problem.

Personal and economic costs

The typical users of the BRC short-term wheelchair service are older women. Nevertheless, the service is open to all and the 2006 Moving Forward report found that inadequate short-term provision of wheelchairs impacted on a wide range of user



and carer groups including children, young adults, those with a progressive disease, people with limited functional mobility and those with temporary disability.

Without such support there is significant detriment to users, their carers, and health and social care services.

"Well I wouldn't have been able to go out anywhere, because they [NHS] didn't give me the crutches right away. They told me that I would have to use a wheelchair. I would have been housebound until I got it [wheelchair loan] and I wouldn't have been able to get out and about."

(Service user)

⁷ National Health Service Scotland Act (1978), <http://www.legislation.gov.uk/ukpga/1978/29/section/46>

⁸ Social Work Scotland Act (1968), <http://www.legislation.gov.uk/ukpga/1968/49/part/11>

“Just knowing that I could get out, felt like a huge relief... If I hadn’t I would have been a lot more down and depressed I think. It would have put my walls up. When you’ve got a physical injury it’s also psychological.”

(Service user)

“I’m getting to the stage I’m not physically able, I’ve got back problems. I’m finding it quite difficult to move her and I think it would end up, she wouldn’t get to do things, whereas if she has a wheelchair she will be able to.”

(Elderly carer)

People use the BRC service for a wide range of reasons including allowing them to be discharged from hospital, maintain their independence, continue with education or work, participate in family and social events and to maintain dignity at the end of life. Fifty per cent of respondents stated they would not have been able to leave their homes without our support. This lack of independence and resulting social exclusion can lead to depression and anxiety which has an impact not only on the individual but on their carers and, as previous research shows, can create an added cost and pressure on health and social care services.⁹ Additionally, without adequate provision an additional pressure on social services may arise due to having to provide more complex support in the home, or ultimately requiring the admission of an individual to a care home.

The benefits of a well-funded joined up and consistent service are therefore clear:

- > people are able to lead independent lives in a period of reablement, carrying on in education, work and social interactions
- > the pressure and stress of caring for someone whose mobility is impaired is significantly reduced
- > recuperation times and risk of injury are reduced
- > savings to health services due to avoiding missed appointments, readmissions, longer recuperation times and delayed discharge
- > the avoidance of additional cost for social care services through people needing more complex care.

⁹ British Red Cross, Taking stock: assessing the value of preventative support (2012)

Meeting key policy objectives and delivering people's rights

A well-funded, resourced and joined up mobility aids service will make sure that the rights of people to live independently are realised and will enable the Scottish Government to achieve its vision that: "... by 2020 everyone is able to live longer, healthier lives at home, or in a homely setting." ¹⁰

The service should be based on the principle of independent living which means rights to practical assistance, and support to both participate in society and live an ordinary life.

As our research highlights, the main users of short-term wheelchairs are older people.

The Scottish Government initiative, Reshaping Care for Older People: 2011-2021 sets out the vision that "... older people are valued as an asset, their voices are heard and they are supported to enjoy full and positive lives in their own homes." ¹¹

It is clear that for this vision to be achieved the practice around short-term provision of mobility aids must change.

The integration of health and social care through the joint integration boards provides a new opportunity to deliver that change. The principles for implementation of the Public Bodies (Joint Working) (Scotland) Act

2014¹² are focussed on integrating services from the point of view of service users, taking account of the particular needs of different service users and respecting their rights. However, for people with short-term mobility needs this integration is clearly lacking as they are either passed to various organisations and departments to find appropriate care, or left unsupported.



¹⁰ Scottish Government, A Route Map to the 2020 Vision for Health and Social Care (2011) pg. 3

¹¹ Scottish Government, Reshaping Care for Older People: A Programme for Change 2011 – 2021 (2011)

¹² <http://www.scotland.gov.uk/Topics?Health/Policy/Adult-Health-SocialCare-Integration/Principles>

Making a move - solutions

The emphasis of the Scottish Government and Parliament is on an integrated, rights-based approach to health and social care that is focussed on independent living and the needs of service users.

It is in this context we are calling for:

- > A duty on the new health and social care integration boards to meet people's short-term mobility requirements – this statutory underpinning will give clear responsibility to boards to make sure service providers have a greater understanding of the need for, and provision of mobility aids. This duty will fit with wider requirements in the Public Bodies (Joint Working) (Scotland) Act 2014 for health boards and local authorities to deliver shared outcomes
- > The joint integration boards should be mandated to explain how they will achieve this in their local areas. While higher level policy initiatives are essential there is a real need for clear details on how policy will be implemented at local level and how boards will meet a specific statutory duty. A local implementation plan would take account of funding, multi-agency partnerships for delivery, user and carer involvement and monitoring, evaluation and inspection to make sure the service is effective
- > The Scottish Government should make sure the boards are properly resourced to identify and meet these needs – statutory underpinning, with clear plans for local delivery and implementation, needs to be supported by proper resources. Partnership working will continue but there must be a shift in the balance where funding to provide an effective service is not reliant on overstretched voluntary sector providers
- > The Scottish Government should work with external providers, such as BRC, to provide services to meet the needs of those who use them.



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