







# Millbrook Healthcare Hampshire Wheelchair Service: Improving the referral experience

#### **Background:**

Millbrook Healthcare Hampshire Wheelchair Service (HWCS) serves a population of 1,450,000 providing wheelchairs to over 17,500 service users aged 30 months and over with complex physical needs impacting their mobility, resulting in them requiring a wheelchair.

A comprehensive National Health Service (NHS) service review into the HWCS was undertaken in 2017 involving key stakeholders, which included service users and referrers. The review highlighted six key recommendations, one of which related to communication and included the need to improve information for service users and referrers. In response, HWCS initiated stakeholder engagement groups to collaboratively plan and prioritise actions.

A Quality Improvement (QI) fellowship team was formed and alongside HWCS, it involved members from an NHS Clinical Commissioning Group (CCG), community providers, a voluntary organisation and a service user.

#### Aims:

It was agreed at one of the engagement groups that the QI fellowship team would focus on improving:

- information given to service users at the point of referral
- community provider knowledge of the commissioned service
- community provider referral information.

#### **Data collection methodology:**

- service—user telephone surveys: to measure satisfaction with written information
- clinical audit: to measure quality of referrals into the service
- focus groups: to support the development of the written resources produced
- testing: we asked community link therapists to complete three knowledge tests.

# **Project design:**

Following data gathering with service-users and frequent engagement with community therapists who refer into the service, the team developed:

- an information leaflet for service users to be given to them at the point of referral by community therapists
- a community therapist link role to promote communication and knowledge of the service within community teams
- regular meetings with the link therapists aimed at improving communication and knowledge of the service as well as educational opportunities including how to complete referral forms correctly. To date, four link meetings have been held
- 'Frequently Asked Questions' live guidance which responds to new questions raised by community therapists.



#### **Results: improving information for** service users

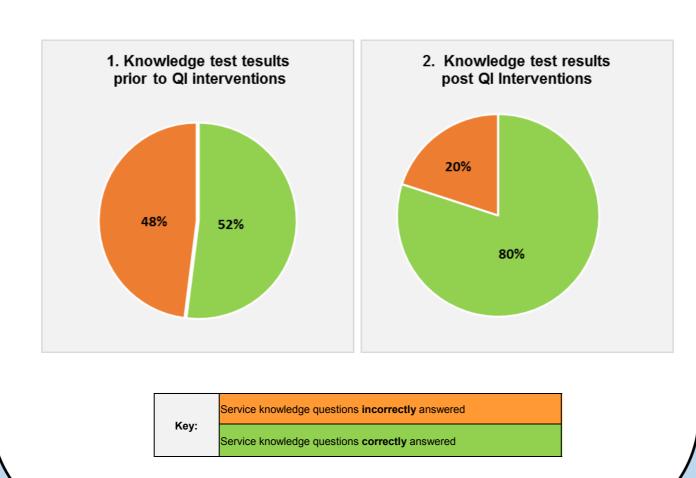
Prior to the QI project, community therapists did not have an information leaflet to give service users at the point of referral. As a result of the project, a leaflet has been developed and has received positive feedback from service users, including:

"Now know who to contact if there is a problem"

- "Like the leaflet easy to read"
- "Leaflet tells me what I need to know"
- "Really helpful, simple and straight forward"
- "Would have been useful to have the leaflet before, I like the leaflet but doesn't change the wait I have haď".

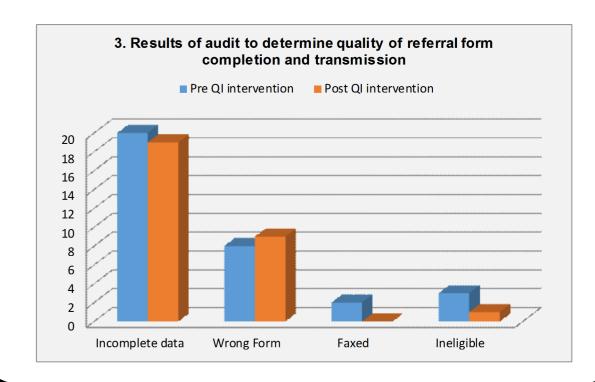
# Results: improving referrer knowledge

The results below demonstrate that the quality improvement interventions have resulted in a 53.8% improvement in referrer knowledge of the service (Figures 1 and 2).



# **Results: improving referral information**

Following the QI project, when compared with the baseline data from all community provider referrers, there has been a 67% improvement in the number of ineligible referrals received from the QI Link teams and 100% improvement with faxes no longer being used (Figure 3). Further work is required to ensure community providers use the correct referral forms and complete all the required fields.



# The lessons we learned have been:

- the value of having key stakeholders from different organisations, including a service user, as part of the QI team
- the importance of a QI fellowship team who have a shared vision and passion to make a difference
- that executive support from all organisations is crucial to support the QI fellowship team in having time to focus on the project
- that stakeholder engagement has been imperative at all stages of the project; whilst this sometimes led to delays in meeting planned deadlines, it was critical in ensuring satisfaction with the final products
- that it is important to view the work undertaken as part of a QI project in the wider system context. This project focused on a very specific element of improvement work alongside a number of other service improvement activities
- the need to plan quality improvement initiatives that will be sustainable beyond the life of the QI fellowship team
- that we want to build on the work already undertaken future plans include focusing on improving the referral form and its completion by community referrers.

# **Authors:**

Rebecca Burgos, Solent NHS Trust

Joanna Clifford, NHS West Hampshire CCG

Tracy Hammond, Southern Health NHS Foundation Trust

Rachel Harrison, Disabled People's Voice

Sue Lynham, Hampshire Wheelchair Service

Louise Rickenbach, Motor Neurone Disease Association

Alex Underwood, Millbrook Healthcare Wheelchair Service

For more information, please contact:

WHCCG.QualityTeam@nhs.net

**Adult Information Leaflet QR Code** 



