[](https://www.bing.com/images/search?q=nhs+wales+logo&view=detailv2&&id=C8AC4DC98960C0FE3D6A5F0BC43C749572D54D89&selectedIndex=0&ccid=47MVwG8f&simid=608028337973496273&thid=OIP.Me3b315c06f1f73a0b55ccc4e680ce0b9o0)

**Welsh Physiotherapy**

**Leaders Advisory Group**

Physiotherapy Neurological Conditions Equipment Report – Wales (2017)

Review - 2019

Physiotherapy Neurological Conditions Equipment Report – Wales (2017)

## This report scopes the current availability of equipment to support patients with neurological conditions in Welsh Health Boards, reviews the available evidence and makes recommendations for future provision.

## 1. **Background**

1.1 Service users and physiotherapists have highlighted concerns around the provision of equipment in Wales for people with neurological conditions.

1.2 Functional aids, equipment and technologies can enhance neurological rehabilitation and support people to lead healthier lives. Physiotherapists have embraced the principles of Prudent Health Care and recognise that provision of equipment can reduce dependence on rehabilitation services, enhance self-efficacy, improve quality of life and help people manage their symptoms independently in the longer term, potentially reducing hospital admissions.

1.3 There is a growing body of evidence to support the use of specific equipment and technologies for rehabilitation and long term, supported self-management. However, there is no base-line measure of equipment that is available in Health Boards in Wales or guidance for clinicians to support their clinical decision-making when recommending equipment provision. Scoping and review of equipment is a time consuming process and there is a value to doing this on a Wales wide basis. Variations in funding streams further add to the complexity for clinicians and service users.

1.4 There have been several reports and delivery plans that identify the benefits equipment can bring to a person living with a neurological condition:

* *Cross Party Inquiry into Physiotherapy Services for Neurological Conditions (National Assembly for Wales, 2013)*
* *Together for Health – A Neurological Conditions Delivery Plan (Welsh Government, 2014)*
* *Together for Health – Stroke Delivery Plan (Welsh Government, 2012)*

Specifically the *Cross-party Inquiry into Physiotherapy Services for Neurological Conditions* made a recommendation that:

*Health Boards in Wales evaluate and standardise the use of specialist equipment for patients with complex needs so a common level of service can be expected when patients transfer closer to home or to their own home for continued rehabilitation*.

The Neurological Conditions Plan, Delivery theme four: ‘Living with a neurological condition’ stipulates:

1. *People receive timely, appropriate assistive technology/ equipment and adaptations to their accommodation to support them to live independently; help them with their care;* *maintain their health and improve their quality of life.*
2. *People should have access to services which promote healthy living and prevent complications, such as: the national exercise referral scheme; guidance on accident prevention; healthy lifestyle, nutrition and self-care to minimise ill health. They should also be made aware of third sector organisations that can provide expert advice and support. People with a neurological condition, who would benefit from physiotherapy, should be able to self-refer to local physiotherapy services*.

The Stroke Delivery Plan states organisations are expected:

*To support and promote effective self-care, to help someone affected by a stroke to manage the impact of this on their daily life and to take responsibility for their own health*.

1.5 In response to these recommendations the Welsh Physiotherapy Leaders Advisory Group (WPhLAG)\* established an expert panel of Neurological Practitioners in June 2015 to produce an advisory report.

\* WPhLAG is a statutory group of the Welsh Therapies Advisory Committee (WTAC).

## 2. Expert Panel (The Panel)

2.1 The Panel are all highly specialist practitioners in the field of neurology and were selected due to their extensive experience of working with people with stroke and/or neurological conditions

## Chair - Debbie Davies WPhLAG & Cwm Taf UHB

Vicky Stevenson (WPhLAG) and Hywel Dda UHB

Adele Griffiths, Jill Haworth (Respiratory Specialist) Aneurin Bevan UHB

Claire Butterworth Cardiff & Vale UHB

Judith Constant Cwm Taf UHB

Richard Pawsey/Thomas Habgood - Abertawe Bro Morgannwg UHB

Michelle Price - Consultant Therapist Powys THB

Katelyn Falvey Powys THB

Leigh Campbell Betsi Cadwaladr UHB

## 2.2 This report scopes the current availability of equipment in Welsh Health Boards, reviews the available evidence and makes recommendations for future provision.

## **3. Aims & Objectives**

## 3.1 The panel met five times and agreed aims, objectives and the scope of the review

*Aim:*

The aim of the report is to advise and make recommendations to WPhLAG on the provision of equipment for people with neurological conditions in Wales.

*Objectives:*

1. To map the current provision of equipment in each Health Board and where possible identify current funding sources.
2. To agree the equipment to include in the review (scope).
3. To undertake an in-depth review of the evidence supporting use of equipment.
4. To identify existing good practice, documentation and clinical decision-making tools.
5. To make recommendations for future work.

*Scope*

The panel defined the parameters of the review recognising the potential for it to extend well beyond the resources and expertise available. It was agreed to limit the scope of the review to rehabilitation equipment that *should reasonably be available* for service users in every Health Board.

4. Approach to the Review

1. To take an approach based on neurological impairments and not specific to particular age groups, diagnosis or condition.
2. To scope aids and equipment to enhance physical function and rehabilitation i.e. focussing on core physiotherapy practice.
3. To agree inclusions and exclusions based on available evidence and professional consensus.
4. To map current access and availability of equipment for single or multiple service users.

**5.** Equipment Selection Criteria

5.1 The panel agreed the equipment to review (inclusions and exclusions) based on what would be *reasonable* for each Health Board to provide

Inclusions

1. Aids for posture management in lying e.g. Sleep systems and T-rolls
2. Aids to allow opportunity for standing e.g. frames and tilt tables
3. Bespoke aids to assist walking (beyond the standard issue frames, crutches and walking sticks)
4. Electrical stimulators to stimulate muscle activity e.g. Functional Electrical Stimulators (FES) and neuro-muscular electrical stimulators (NMES)
5. Aids to assist upper limb repetitive task training
6. Aids to maintain/regain cardiovascular and muscular strength e.g. active passive-trainers
7. Aids to maintain respiratory function e.g. Cough Assist

Exclusions

* Splints, Orthotics & artificial limb appliances
* Specialist Seating
* Robotics

Reasons for exclusion included: beyond the resources or area of expertise of the group; require multidisciplinary approach; being managed by other agencies e.g. Artificial Limb and Appliance Service (ALAS).

6. Data Collection

6.1 Panel members gathered the following information from their Health Boards in line with the objectives:

1. Scoping current equipment provision and funding source. Appendix 1. identifies the equipment available in each Health Board as of October 2016
2. Undertook an in-depth review of the evidence supporting equipment provision identified in the scoping exercise. Appendices 2 (a-g)
3. Developed a standardised clinical decision-making tool, based on existing work from Hywel Dda UHB, which can be used to assist clinicians (especially less experienced clinicians) in recommendations or *making the case* for equipment provision. Appendix 3
4. Cost effectiveness decision-making tool. Appendix 4.

## **Key Findings**

* 1. Equipment provision and funding streams are varied across Wales. All Health Boards provide some equipment but no one Health Board provides all recommended equipment. It must be noted that availability and provision of equipment is constantly changing and the *Scoping Exercise* is a snap shot in time (current as of Oct 2016).
  2. Criteria for provision of equipment changes between and within Health Boards over time with no consistent agreement on an All Wales basis. In some cases no funding source can be identified and in some instances charitable funds have supported the purchase of equipment.
  3. Larger exercise or rehabilitation equipment that can be utilised by many patients are generally purchased by physiotherapy services directly. They are usually housed in a physiotherapy department and are by and large only available as part of a time-limited, specific physiotherapy intervention. This includes equipment such as active-passive bikes, standing frames or tilt tables.
  4. Where larger pieces of equipment are recommended for long-term use in a person’s own home, funding streams are highly uncertain.
  5. Some physiotherapy services have purchased equipment that can be loaned to individuals to assess its benefit over a trial period. This is common practice for equipment that is recommended for personal use in the long term. Funding to purchase for individual use is inconsistent and causes challenges for clinicians who may have the equipment to try with a patient but unable to secure long term funding. Service users may be asked to self-purchase or explore charity/third sector funding. Equipment such as FES and upper limb repetitive training devices fall into this category.
  6. Equipment for personal use may require another person or carer support to use. This may have significant training and governance needs this would fall to the service providing the equipment.

Specifically:

* 1. **Walking aids and basic postural equipment** e.g. T-rolls are generally provided in all Health Boards except more specialised laser canes or Kaye walkers.
  2. **Standing Frames and Tilt Tables** are available for departmental use in all Health Boards, although not necessarily on all sites. Provision for individual use is available in about half of the Health Boards and criteria for access may vary within Health Boards.
  3. **Functional Electrical Stimulation (FES)/NMES:** Available in all Health Boards for trial purposes (though not necessarily equitably across Health Boards). Provision for individual use is directly available in 1-2 Health Boards only; others rely on regional services or the service is not available.
  4. **Active-Passive trainers (AP Trainers):** Becoming more available for departmental use over the last few years. Only very rarely available for home use and usually associated with Continuing Health Care packages. Betsi Cadwaladr have been innovative with AP Trainers being available in some leisure centres (part of a wider programme of physiotherapy).
  5. **Equipment to support upper limb repetitive training**: Becoming more available for departmental use in the last year with 3-4 departments having access. Funding for personal use has not yet been explored.
  6. **Sleep systems:** Are highly personalised items for long-term use that are more readily available for children than for adults with acquired neurological conditions.
  7. **Cough assist machines:** Primarily available from tertiary centres but not uniformly across Wales. Governance implications may impact on local physiotherapy services and further work may be required to explore best practice going forward.

## 8. Implications for Service users

## 8.1 One of the key drivers for this report was the inequitable provision of equipment across Wales for service users. The complexities and variability of provision have been explored in greater depth in this report and support the conclusions of the *Cross-party Inquiry into Physiotherapy Services for Neurological Conditions* that current systems can be complex and are inconsistent between Health Boards.

## 8.2 There are no clear guidelines or time frames that identify what equipment service users can expect to access or have provided to support their rehabilitation or long-term physical function.

8.3 Service users may be unaware of equipment that could benefit their condition and may find the process of provision convoluted and lengthy.

## 8.4 It is a reasonable expectation that a common level of service can be expected regardless of where a person lives in Wales.

## 9. Implications for Clinicians

9.1 Clinicians need to demonstrate robust clinical reasoning and review the wider implications and environmental requirements when recommending purchase of personal equipment. This must include a consideration of cost in relation to the benefits.

9.2 Clinicians/services need to enter into clear partnership (co-production) with the service user and/or carer to ensure safe use, storage and robust monitoring of equipment.

9.3 Clinical outcomes or health benefits must be evaluated regularly and relies on clinicians working in partnership with service users to ensure equipment continues to provide the predicted benefits.

## 10. Key Recommendations for Physiotherapy Leaders (WPhLAG)

10.1 On reviewing the findings from the evidence and data available the expert panel makes the following recommendations:

10.2 Develop an All Wales agreement on the equipment that *should reasonably be available* in all Health Boards for departmental, community and personal use.

10.3 Set up a register of existing equipment and new investments available in each Health Board.

Convene an expert group of clinicians as required to:

1. Provide on-going professional guidance and Governance overview of existing equipment.
2. Monitor the evidence and expert consensus around new equipment and emerging technologies and recommend where these may be considered as reasonable for Health Boards to provide.

10.4 Via Welsh Therapies Advisory Committee (WTAC) make recommendations for standardised funding streams across Wales.

10.5 Scope the need for pooled budgets across Health Boards to invest in highly specialised and/or very expensive equipment that is not currently available in Wales and could be utilised on a regional basis.

10.6 Explore how access to suitable or specialist cardiovascular equipment for people with long-term neurological conditions can be improved in community settings e.g. leisure facilities.

# 11. Future work

11.1 This scoping review highlights several areas for future activity that WPhLAG may wish to consider:

1. Link with Higher Education Institutes to seek collaboration with under and post-graduates students to increase the breadth of review of evidence.
2. Explore the ability to have an All Wales equipment procurement system to maximise opportunity for cost savings.
3. An expert panel should be convened as required to provide on-going professional guidance and Governance overview of existing equipment.
4. Working collaboratively with patient groups and 3rd sector an expert panel should be horizon scanning new equipment/technologies and what part they could or should play in NHS Wales. Consider organising showcases of companies that are able to provide specific types of equipment and make recommendations whether equipment should be made available across Wales.
5. Develop patient contracts to ensure that equipment is not left in patients homes not being used.
6. Identify a set of competencies on an All Wales basis for supporting training of carers and support staff in use of specialist equipment, including use of videos or other technologies.
7. Develop library of patient information to support provision of equipment.

Limitations of Study

This study was fortunate to be supported by a panel of expert clinicians and had the backing of WPhLAG. It should be acknowledged that the depth of scoping and degree of exploration of the available evidence was limited to their available time. In addition it recognised overlaps with paediatric provision but did not include a specific study of paediatric equipment.

Appendices



References

*Cross Party Inquiry into Physiotherapy Services for Neurological Conditions (2013)*

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*Together for Health – A Neurological Conditions Delivery Plan (2014) A delivery plan up to 2017 for the NHS and its partners - Print ISBN 978 1 4734 1365 8 Digital ISBN 978 1 4734 1108 1 © Crown copyright 2014 WG21465 (page 12 &14).*

[*http://gov.wales/docs/dhss/publications/140508neurologicalen.pdf*](http://gov.wales/docs/dhss/publications/140508neurologicalen.pdf)

*Together For Health – Stroke Delivery Plan. A Delivery Plan for NHS Wales and its Partners (2012) (pg9)*

[*http://gov.wales/docs/dhss/publications/121206nhsplanen.pdf*](http://gov.wales/docs/dhss/publications/121206nhsplanen.pdf)