



Hampshire Wheelchair Service

Eligibility Criteria for the Provision of NHS Wheelchairs

A guide for referring practitioners

November 2018

*For the supply of **NHS wheelchairs** by Millbrook Healthcare Limited*

Contents

1. Introduction	3
2. The scope of the Hampshire Wheelchair Service	3
3. General Service Conditions	4
4. Criteria for manual wheelchairs (attendant and occupant controlled)	6
5. Criteria for provision of electrically powered wheelchairs	6
6. Guidelines regarding attendant controlled power assisted wheelchairs and occupant controlled power assist	9
7. Guidelines for other “add-ons”	10
8. Criteria for the provision of special seating systems	10
9. Criteria for paediatric provision	11
10. Criteria for provision of more than one wheelchair	12
11. Criteria for the issue of a wheelchair that is lighter than a standard wheelchair	12
12. Criteria for the provision of pressure relieving cushions	13
13. Specific patient pathway criteria	13
14. Exclusions	14
15. Equipment not provided by the wheelchair service	15
16. Equipment provided under exceptional circumstances	16
17. The NHS Voucher Scheme	16
18. Independent Funding Review Panel (IFR)	17
Appendix A - Glossary	18
Appendix B - General conditions of loan of wheelchairs	20

1. Introduction

- 1.1 The eligibility criteria for wheelchairs and wheelchair accessories have been produced for the benefit of referrers and users of the Hampshire Wheelchair Service.
- 1.2 The Wheelchair Service has a responsibility to meet the mobility and related postural & pressure care needs of the local population in the most cost effective way, which includes initial purchase, repairs, and re-conditioning of equipment for use. The efficient operation of the service, its ability to maintain financial control, and to maximise available resources is a service requirement. This is to ensure public money is managed effectively within the NHS with as little waste as possible.
- 1.3 To ensure equipment is provided in the most responsive manner, wheelchairs will be prescribed from an equipment product matrix. Equipment outside of this range may only be provided in exceptional circumstances where the individual's needs cannot be met from within.
- 1.4 All equipment issued by the Wheelchair Service belongs to the NHS, except in the instance of independent vouchers (see point 17) and items provided on private top-up funding. When no longer required, equipment must be returned to the service, to enable it to be reconditioned and provided to other service users wherever possible.
- 1.5 Provision may be via a number of different routes, in order to achieve a timely but clinically safe outcome (e.g. direct issue [manual chairs only], external prescriber request, or assessment by a Wheelchair Service clinician) as determined by the Wheelchair Service.
- 1.6 At the time of this document, both provider and commissioners are developing the local Personal Wheelchair Budget offer to further support people's choice of wheelchair. At the time of implementation, this criteria document may be revised.

2. The scope of the Hampshire Wheelchair Service

- 2.1 The Hampshire Wheelchair Service is primarily commissioned to meet the mobility needs of the local population and within the mobility provision, the postural and pressure care needs of the service user. **In all cases, the individual must have a long term mobility need (i.e. over 6 months) to be eligible for the Hampshire Wheelchair Service.**
- 2.2 The Hampshire Wheelchair Service is an NHS commissioned service to provide for needs set out in 2.1 **only**. A prescription will therefore be based on the wheelchair or equipment that best meets these needs.
- 2.3 In line with NHS England's model specification for Wheelchair and Postural Services (a non-mandatory tool to assist CCGs in commissioning wheelchair services: <https://www.england.nhs.uk/wp-content/uploads/2017/07/wheelchairs-model-service-specification.pdf>), Millbrook Healthcare will assess Service Users for the provision of wheeled mobility equipment, both powered and manual, for those with long term mobility needs. Pressure relieving cushions and postural management wheelchair equipment will also be provided to facilitate the use of the wheelchair as a mobility device.
- 2.4 The service aims to undertake holistic assessments with all its service users, and wherever possible will take into consideration the individual's other health and lifestyle needs when prescribing a wheelchair. However, mobility is the primary reason for referral, and non-mobility related health and lifestyle needs will not take precedence over that. The service is not commissioned to prescribe any wheelchair, or wheelchair accessory to **exclusively** meet any of the following health needs (however, the wheelchair service may be able to provide information as to sources of funding and appropriate equipment):

- Behavioral challenges
- Functional needs with no associated postural need (for example power recline to enable eating and drinking)
- Pressure care (not related to the wheelchair)
- Comfort (not related to the wheelchair)
- Other health conditions not related to posture or mobility (e.g. oedema management, pain relief)

3. General Service Conditions

- 3.1 In order to be eligible for assessment and prescription of a wheelchair **all** individuals must:
- Be registered with a General Practitioner (GP) within the five CCGs (West Hampshire CCG, Portsmouth City CCG, Southampton City CCG, South Eastern Hampshire CCG, and Fareham and Gosport CCG), or if not registered with any GP nationally, be usually a resident within the above 5 CCGs, as per NHS England's "Who Pays?" guidelines (<https://www.england.nhs.uk/wp-content/uploads/2014/05/who-pays.pdf>) and;
 - Require the support of a wheelchair on a frequent basis defined as: greater than four times a week and over four hours each day and for permanent use, which is longer than six months. (*Shorter loan periods will be considered in support of terminal illness and palliative care with a prognosis of less than 6 months, depending on the clinical and lifestyle needs and individually assessed for under exceptional circumstances*).
 - Be aged 30 months or older (there is no upper age limit).
- 3.2 Modifications and accessories may be provided to address specific mobility and/or postural needs in the wheelchair (i.e. postural support accessories, pressure care items, trays, harnesses, and lapbelts). This may require further assessment by a Wheelchair Service therapist, Rehabilitation Engineer (RE) or RE Technician, or an accredited prescriber, but only if agreed by a Wheelchair Service therapist.
- 3.3 The term "special seating" includes both specialist modular seating and bespoke seating. In all cases, to be eligible for special seating, a service user must meet the general wheelchair eligibility criteria. Bespoke special seating will be provided when there is a clearly identified postural need to facilitate mobility that cannot be met by off-the-shelf products, as assessed by the Wheelchair Service therapist. Modular seating may require the input from specialist third party providers, which restricts the availability of appointment times. Similarly, bespoke seating is not an in-house service and only takes place on certain days of the month.
- 3.4 Where a service user has a privately purchased wheelchair or a wheelchair purchased through the voucher scheme (see point 17) that meets the criteria for provision (e.g. not outdoor only power chair), and suits the service user's clinical need, the service may provide postural accessories and cushions as if the whole provision was under the NHS. However, this will require an assessment by a Wheelchair Service therapist to establish the clinical need, safety and compatibility. Even where there is a clinical need, modifications affecting a manufacturer's warranty will not be undertaken for privately purchased equipment, including those purchased under the Independent Voucher Scheme.
- 3.5 As with the majority of NHS funded Wheelchair Services, the Hampshire Wheelchair Service works from an equipment product matrix, which is regularly reviewed. Following a holistic assessment of the service user's needs, the service will offer a wheelchair from the equipment product matrix in order to meet the service user's mobility and postural needs, taking account of other health and lifestyle needs wherever possible. Should the service

user wish to have another chair model (for example, a more expensive model, which may have additional features over and above their NHS eligibility), they can take up the NHS Voucher option (see point 17).

- 3.6 Tilt (i.e. where the whole seating is tipped so that the front of the seat is higher than the rear) and recline (i.e. open backrest angle) are only provided to assist with posture and accommodating joint range of movement, not for resting, sleeping or management of other health conditions such as urgent post-seizure assistance or respiratory life support.
- 3.7 The service user and/or carers will need to have demonstrated the potential to safely use the equipment in the intended environment, which will be established at assessment or in a separate appointment. The environment, the lifestyle and the care setting may impact on the chairs considered for each individual.
- 3.8 Equipment will only be replaced by the service if it ceases to meet the mobility or postural needs, if it is beyond economical repair (but not if this is due to misuse), or if it is obsolete, such that spare parts are not available. This includes vouchers (see point 16). The age of the equipment in use will not be a reason for replacement.
- 3.9 In the conditions of loan issued at handover, the service user signs to agree that they will look after the equipment and use it according to the manufacturer's instructions. If the service user declines to sign the conditions of loan document they will not be eligible for NHS provision. The Wheelchair Service will not take responsibility for replacing wheelchairs due to abuse/violence/neglect, or if medical conditions are not managed through service user choice (e.g. incontinence). The Wheelchair Service reserves the right to withdraw equipment that has been subject to misuse, or used in an unsafe way, as per the conditions of the loan agreement.
- 3.10 The home environment must be suitable for wheelchair use. Adaptations may be needed to ensure the service user's safety and to maximize accessibility (e.g. widening of doorways or re-arranging furniture). This is not the responsibility of the Wheelchair Service, but clinical staff in the service will liaise with, or signpost users, to other agencies to facilitate adaptations/alterations. As the home environment is integral to the prescription of a wheelchair, the clinical pathway cannot be taken to conclusion until adaptations are completed. The referral will not be processed until the service user or their representative contact the Wheelchair Service to advise that adaptations are complete, at which point an environmental assessment will be undertaken. It may be necessary to repeat previous elements of the assessment (e.g. driving assessment, information from the GP); especially where medical conditions are known to deteriorate or medication may have changed.
- 3.11 Equipment will be issued to meet the mobility need of the service user, not the environmental dimensions; specifically, equipment to fit into the environment will not be issued if it puts the service user at risk.
- 3.12 If a service user has been provided with a powered wheelchair and moves to a new home inside the registered service area, the service user or their representative would be expected to contact the Wheelchair Service to request assessment of the suitability of the new environment. If the new environment is not suitable the service user will be re-assessed, and in the interim period, if it is deemed the continued use of the original wheelchair would put the service user at risk, the Wheelchair Service reserves the right to withdraw the wheelchair or restrict its use.
- 3.13 The Wheelchair Service operates within the context of several pieces of legislation (for example, the Equality Act 2010, Health and Safety at Work Act 1974, Human Rights Act 1998 & Care Act 2014), impacting on service provision and equipment choice.

4. Criteria for manual wheelchairs (attendant and occupant controlled)

- 4.1 Manual wheelchairs are Class 1 type invalid carriages. The criteria for the provision of a standard non-powered wheelchair are:
- The service user has a permanent or long term disability (in excess of 6 months), which will affect their ability to walk.
 - The wheelchair is needed as an aid to mobility indoors and/or outdoors, for the length of time specified to meet eligibility (i.e. minimum 4 hours a day, 4 times a week)
 - The service user agrees to and complies with the terms and conditions of use of the wheelchair, as supplied by the Wheelchair Service on behalf of the NHS.
- 4.2 Low need wheelchairs are provided from a core range supplied by the Wheelchair Service. These may be supplied following an assessment by a trained referrer (i.e. healthcare professional with HCPC or registration) who has completed and returned an appropriately detailed form.
- 4.3 Medium, high and specialist need wheelchairs will only be supplied following an assessment by a Wheelchair Services clinician (an Occupational Therapist (OT) or Physiotherapist (PT), or Rehabilitation Engineer (RE)).
- 4.4 Accessories are generally 'off the shelf' parts, or readily available from the manufacturer (e.g. lapbelts, headrests). The service user may be subject to further assessment by the Wheelchair Service, if needed.
- 4.5 Standard modifications which are clinically justified may be requested by a trained referrer or recommended and supplied following an assessment by a Wheelchair Service clinician. This includes out rigging of armrests, adjustments of seat sizes, changing of wheel sizes or wheel position etc.
- 4.6 Manual propulsion is for mobility, not for exercise; the Wheelchair Service will not issue self-propelling wheelchairs for the purpose of exercise or fitness of the individual

5. Criteria for provision of electrically powered wheelchairs

- 5.1 The term electrically powered wheelchair refers to both indoor only versions; electrically powered indoor only chair (EPIC) and electrically powered indoor/outdoor chair (EPIOC). It should be noted that although EPIOCs can be used outdoors, their primary use must be indoors. NHS provision is strictly regulated in terms of speed, weight of the equipment and usage.
- 5.2 Driving a powered wheelchair involves a complex and rapidly repeating cycle that requires a level of skill and the ability to interact with both the powered chair and the external environment. In order to be considered as safe to drive a powered wheelchair, the service user will need to demonstrate the following skills at the wheelchair assessment:
- adequate vision
 - visuo-spatial perception
 - adequate hearing
 - attention and concentration for the whole time the powered wheelchair is to be used
 - memory
 - insight and understanding of the risks

- good judgement
- ability to use adaptive strategies
- good reaction time relevant to the intended use (e.g. other pavement users if outdoors, animals) and be able to cope with the unexpected
- planning and organisation
- self-monitoring skills
- sensation
- muscle power
- control and coordination

- 5.3 Given these requirements, it follows that many body systems need to be functional for safe driving, and injury or disease may affect any one or more of these abilities for safe driving. A service user must report any medical condition to the Wheelchair Service which involves situations where they could lose consciousness (e.g. seizures, including petits mals, narcolepsy). Referrals which indicate the service user has one of these conditions will mean that they will not be considered for a powered wheelchair.
- 5.4 With reference to conditions which involve the loss of consciousness, the Wheelchair Service adopts the Motor Vehicle (Driving Licences) Regulations 1999 (as amended) that govern the way in which epilepsy is prescribed as a relevant disability for group 1 drivers, but applies to any condition which may affect driving ability, including the use of medication.
- 5.5 If a service user has a diagnosis of a significant medical condition that affects consciousness, including epilepsy, and has had 2 or more episodes in the last 5 years they will not be considered for assessment for a powered wheelchair. The only time that this would be considered is if the service user experiences a loss of consciousness or seizure that is related to an adjustment of medication, and this occurred more than 3 months previously (i.e. must be 3 months free of loss of consciousness when resulting from medication change only).
- 5.6 In addition to the above, in line with DVLA notification requirements, the service user is required to notify the service of any other conditions that may affect their ability to drive. These include; strokes, other neurological and mental health conditions, physical disabilities and visual impairments.
- 5.7 The assessors may need to seek further medical advice about individual service users from their referrers, carers, other health or social care professionals, GP or consultant if appropriate. If consent is not given for further medical advice to be sought, the referral cannot be processed. If a powered wheelchair has already been issued and changes occur to the service user's condition, such that medical eligibility is in question, the Wheelchair Service will apply the same decision making.
- 5.8 The service user must ensure that the wheelchair will be adequately cared for and maintained, and charged either personally or by a carer.
- 5.9 The service user must agree to the terms and conditions of loan.
- 5.10 If the service user fails to meet any one of these criteria, deteriorates medically, or their driving skills are deemed to be dangerous, the powered wheelchair may need to be withdrawn, and their manual wheelchair utilised. This will be determined by reviews set on an individual basis, dependent upon their presenting needs and their diagnosis / prognosis.
- 5.11 Safe use of a powered wheelchair issued by the NHS must be independent. No powered wheelchair will be issued with the intention that the service user be supervised during use, except for example, age appropriate supervision of children, such as crossing the road. Unsafe use of a powered wheelchair may result in its withdrawal.

5.12 **Criteria for provision of Electrically Powered Indoor Wheelchairs (EPIC)**

- 5.12.1 These wheelchairs are intended for indoor use only (i.e. behind the service user's own front door). Limited use of the wheelchair outside, such as in the garden will be defined and discussed with the service user and their carer following a risk assessment by the Wheelchair Service. Any EPIC used beyond the threshold of the home must be suitable for the environment (e.g. stability). A Wheelchair Service clinician will review the environment in which the user needs or *intends* to use the wheelchair at handover. They must not be used in any indoor public environment e.g. shopping centres.
- 5.12.2 In order to be eligible for the provision of an EPIC, the service user must meet all of the criteria set out in 5.2, and the following:
- As a result of a medical condition, the service user must be severely and permanently restricted in mobility, and will need to use the powered wheelchair for all their mobility needs.
 - Be unable to walk or self-propel inside their own home
 - The service user must require a wheelchair to enable movement within an indoor environment (i.e. inside their own home) in excess of one individual room and be unable to self-propel a manual wheelchair to do so.
 - The supply of the EPIC will significantly improve the service users' independence and quality of life indoors (e.g. access to the toilet).
 - The service user is able to demonstrate the ability to use an indoor powered wheelchair safely and independently, without endangering themselves and other people.
 - The service user must have a suitable home environment including adequate space to drive the wheelchair (including the footplates) in the home, and a suitable space with a power supply for charging the batteries.
- 5.12.3 The service user will need to demonstrate by a driving test conducted by the Wheelchair Service all the skills required to independently operate an EPIC safely and responsibly, without endangering themselves and/or other people.
- 5.12.4 This equipment will not be issued for use **solely** in the school, college, work or day centre environment (however, the wheelchair service may be able to provide information as to sources of funding and appropriate equipment)

5.13 **Criteria for Electrically Powered Indoor/Outdoor Wheelchairs (EPIOC)**

- 5.13.1 There are two classifications for powered wheelchairs: Class 2 and Class 3 invalid carriages; only a person with a valid reason to do so may use a power chair in a public area (i.e. someone with a disability, or someone demonstrating the equipment to the service user); all powered wheelchairs provided by the Wheelchair Service are for pavement and pedestrian use.
- 5.13.2 **Class 2** wheelchairs travel under power, to a maximum speed of 6km/h (4mph), must have an unladen weight of less than 150kg (330lbs), and measure less 0.85m (33") across. Class 2 wheelchairs are not suitable for use on the road (except where there is no pavement access or the pavement is blocked), and this is the maximum classification that can be used by someone of 14 years and younger.
- 5.13.3 **Class 3** wheelchairs travel under power, weigh more than 150kg (330lbs), measure more than 0.85m (33") across and may be capable of travelling at more than up to 12km/h (8mph) and as such, may be suitable for use on the road. However, the NHS does not provide powered wheelchairs for use on the road, and therefore any wheelchair supplied under the NHS is speed limited by the manufacturer to a walking pace of 6km/h (4mph); this includes powered wheelchairs obtained on an independent voucher. Over-riding this will be considered mis-use

and the powered wheelchair will be withdrawn. Powered wheelchairs supplied by Hampshire Wheelchair Service will not be set up for road use (i.e. lights / horn) including in instances where there is no pavement in the local vicinity.

- 5.13.4 In order to be eligible for the provision of an EPIOC, the service user must meet all of the criteria set out in 5.2, and the following:
- Meet the criteria for an EPIC (see above)
 - As a result of a medical condition, the service user must be unable to walk at all, and be unable to self-propel a manual wheelchair inside their own home
 - The service user will need to use the powered wheelchair constantly, indoors and outdoors.
 - The supply of the EPIOC will significantly improve the service user's independence and quality of life, inside their own home.
- 5.13.5 The service user will need to demonstrate by a driving test conducted by the Wheelchair Service all the skills required to independently operate an EPIOC safely and responsibly, without endangering themselves and/or other people.
- 5.13.6 The service user will need to have a residential environment that is appropriate for the use of an indoor/outdoor powered wheelchair, and have suitable facilities to enable independent access to the outdoor environment (e.g. a permanent floor fixed ramped access, this does not include portable ramps). The local outside environment must be accessible in an EPIOC (e.g. slopes must be within the permitted degree of incline for safety), and must be compatible with its use. Referrals for service users who do not have the required residential environment will be closed, and the user advised that they are not eligible. To minimise delays, please refer service users for indoor-outdoor powered wheelchair when home adaptations are in place.

6. Guidelines regarding attendant controlled power assisted wheelchairs and occupant controlled power assist

- 6.1 The Wheelchair Service does not supply attendant controlled powered wheelchairs, nor does it supply add-on power-pack units to manual wheelchairs (either attendant or occupant controlled).
- 6.2 The Wheelchair Service may allow privately purchased attendant controlled power-pack units to be fitted to manual wheelchairs supplied by the Wheelchair Service; however written permission must be sought and obtained from the Wheelchair Service. Any power-packs fitted to the wheelchair must be compatible with the make and model of the wheelchair, and not affect the warranty, integrity or durability of the equipment.
- 6.3 The purchase, fitting or repair of any privately purchased power chair or power-pack is not the responsibility of the Hampshire Wheelchair Service.
- 6.4 The Wheelchair Service reserves the right to take appropriate action should it become apparent that a privately fitted power pack is affecting the integrity of the wheelchair. This action may include withdrawal of the wheelchair or a charge for incurred repair costs.
- 6.5 Where specialist controls are fitted for use by the service user (i.e. micro-joysticks, chin controls, head controls etc.), a standard joystick will be included for use by attendants in exceptional circumstances only – this may include driving into vehicles or narrow spaces that require a higher degree of control than may be possible with the specialist controls. However, if it is discovered that the service user is not using the specialist controls due to deterioration in their condition, and mobility is reliant on a carer using the standard controls, the power chair will be withdrawn.

- 6.6 Motorised third-wheels, powered tricycle attachments or similar equipment cannot be fitted under any circumstances.

7. Guidelines for other “add-ons”

- 7.1 It is acknowledged that privately purchased equipment is available to attach to wheelchairs that increase their versatility, but that they alter the nature of the NHS provision. For that reason, the fitting of “add-ons” to NHS wheelchairs must be strictly controlled.
- 7.2 Communication aids or brackets may be fitted to the wheelchair with the Wheelchair Service permission.
- 7.3 Provision of NHS loaned equipment will not exceed that of the clinical need in order to facilitate the fitting of any add-ons.
- 7.4 The fitting of vehicle docking-systems can only be with the full written permission of the Wheelchair Service, the equipment must be fully compatible with the wheelchair on loan, and the fitting must not affect the integrity of the wheelchair. NB: provision of the wheelchair on loan will not exceed that of the service user’s clinical need in order to facilitate a docking system, and the Wheelchair Service will not be responsible for any repairs to the docking system.
- 7.5 The fitting of cheaper docking station alternatives (i.e. not compatible with the wheelchair on loan) will not be accepted and must be removed; if not removed, the wheelchair on loan will be withdrawn

8. Criteria for the provision of special seating systems

- 8.1 Any type of special seating will only be prescribed following assessment by a wheelchair service clinician, and **will only be supplied if its utility is part of a 24 hour postural management programme.**
- 8.2 “Special seating” is a broad term used in reference to seating requirements when standard off-the-shelf accessories are no longer adequate to support the service user’s posture to enable mobility in the wheelchair.
- 8.3 Special seating may refer to modular systems, or to fully bespoke systems such as carved foam, or moulded seating. Special seating is designed to be extremely close fitting to help hold a service user’s posture upright against gravity in the least destructive pattern, which may be difficult for some people to tolerate.
- 8.4 Special seating is not suitable for service users who are capable of completing standing transfers or slide board transfers, or who have a high degree of active movement or functional ability, but cases are assessed on an individual basis.
- 8.5 It should be noted that special seating is not therapeutic (e.g. it does not provide stretch for soft tissues) but is provided to enable mobility, and provision by the Wheelchair Service is secondary to a mobility need.
- 8.6 Care will be taken in selecting the system which best meets the needs of the service user on a long term basis, taking into account cost-effectiveness.
- 8.7 Complex seating systems are not “perfect”, as their effectiveness depends on a number of factors, such as the level of the service user’s active movement, functional ability, carers’ precision in hoisting and positioning the service user, etc. For this reason, it may be necessary to investigate increasing the care package to provide a second person for hoisting, in order to increase the likelihood of success with the seating – a poorly positioned service user will be

uncomfortable, may be at additional risk, will not benefit from the positioning provided, and the seating will not be cost effective as required by the NHS.

- 8.8 It may be necessary to compromise on the seating or the intended outcome; for example, over-support of posture can limit function, and it is therefore necessary to compromise on one or the other.
- 8.9 Only one seating system will be supplied.
- 8.10 The Wheelchair Service will assess on an individual basis the appropriateness of fitting NHS special seating systems into private wheelchairs. In all cases it must be deemed by the Service that the user is eligible for the private wheelchair in accordance with the NHS provision (for example, seating and postural accessories will not be provided for outdoor only powered chairs). Eligibility must be documented in the service user's notes and permission for provision must be sought from the team leader or manager of the Service.

9. Criteria for paediatric provision

- 9.1 Assessment for provision and handover of a wheelchair and associated equipment will be carried out in the presence of the parent/guardian or designated other, unless it is deemed by the Wheelchair Service therapist appropriate for the parent / guardian to be absent (i.e. at school and only for provision of small accessories or minor reviews). In these cases, the clinical appointment will only take place with written consent from the parent / guardian. The referrer will be invited to attend.
- 9.2 Special pushchairs and special seating systems are issued to children or young people who have met the eligibility criteria for mobility, have significant postural problems, following an assessment by a Wheelchair Service clinician, and must form part of a 24 hour postural management programme.
- 9.3 Buggies will not be issued after a child's 5th birthday, or full-time school age, whichever is sooner.
- 9.4 Double (twin) buggies will only be supplied where there is a second child who is close in size, who also has a disability.
- 9.5 The model of double (twin) buggy chosen and any necessary postural support within it will be provided to meet the needs of both children. These will be sourced on a case by case basis due to the limitations in range of product.
- 9.6 Hampshire Wheelchair Service does not provide a wheelchair for sole use in the educational or social care setting. However, if the equipment provided by the service for use at home/in the community also meets the needs of the child or young person at school/college, the wheelchair may be used.
- 9.7 Indoor powered wheelchairs will be issued to children or young people who are unable to walk or self-propel inside their own home, but who are able to independently control a powered wheelchair safely indoors.
- 9.8 Indoor powered wheelchairs must only be used indoors at home. They must not be used outdoors, except in a private garden that has been assessed by a wheelchair therapist as being safe and suitable (see power chair information above).
- 9.9 Indoor/outdoor powered wheelchairs will be issued to children or young people who are unable to walk or self-propel, but are able to independently control a powered wheelchair safely. The child will need to use the powered wheelchair constantly, indoors and outdoors as a form of

mobility and meeting the safe driving requirements in Section 5. Up to the age of 14, there is a limit to the class of wheelchair that can be provided (see section 5).

- 9.10 For children and young people who are at an end of life stage (i.e. with a prognosis of less than 6 months), a 24 hour fast track service will be offered from receipt of referral; this will be a basic provision, but will only be considered where clinically safe to do so.
- 9.11 For Looked After Children (LAC) or children transferred out of area, management will be on a case by case basis involving multi agency professions.

10. Criteria for provision of more than one wheelchair

- 10.1 Generally, only one wheelchair will be issued to an individual, however, when a powered wheelchair is issued, a basic backup manual wheelchair will also be provided.
- 10.2 Requests for more than one wheelchair will be considered under special circumstances. For example, a second wheelchair may be issued to allow the service user to access the upstairs of their property.
- 10.3 A second wheelchair to support accessibility outside of the individual's permanent place of residence cannot be provided by the service.

11. Criteria for the issue of a wheelchair that is lighter than a standard wheelchair

- 11.1 Standard wheelchairs, when fully set up, typically weigh around 16 kg (35lbs), but this is reduced when the hangers, footplates, and potentially the wheels are removed.
- 11.2 Lightweight wheelchairs typically weigh around 14 kg (31lbs) when fully set up, and again, this weight is reduced when the items are removed from the seat frame.
- 11.3 Ultra-lightweight wheelchairs typically weigh around 11kg (25lbs), and this weight may not be reduced, as this type of wheelchair does not have items that can be removed from the frame.
- 11.4 Difficulty in pushing a wheelchair is rarely related to the weight of the wheelchair itself, but is due to the set-up of the wheelchair (e.g. wheelbase length, how the service user is positioned).
- 11.5 Provision of lighter weight wheelchairs will be on a clinical basis, as follows:
- Individuals who are full time wheelchair users (reliant on the wheelchair for all of their mobility needs) may be considered for a lighter than standard wheelchair to facilitate independent mobility, when their mobility needs cannot be met by a standard matrix wheelchair.
 - Individuals may be considered for a very lightweight wheelchair (otherwise known as ultra-lightweight, active user or high performance wheelchair) to facilitate maximum independence and mobility, if they are a full time wheelchair user, are capable of self-propelling long distances, and are physically capable of utilising the features of such a wheelchair. Please note that these wheelchairs are not suitable for consideration with certain medical conditions, especially those that are deteriorating and where posture is typically affected; push handles will not be provided on this style of wheelchair.

12. Criteria for the provision of pressure relieving cushions

- 12.1 The Service holds a range of cushions for all levels of risk / pressure relieving qualities. The cushion can be used in an NHS provided or privately purchased wheelchair which the service user would be eligible for (e.g. not outdoor only power chairs) and are not for use in any other form of seating.
- 12.2 A pressure-relieving cushion can be issued for use within the wheelchair as part of an individual's 24 hour pressure care prevention plan and not as a replacement for other pressure care management techniques such as correct positioning, and spending periods out of the wheelchair during the day.
- 12.3 Provision of higher risk pressure relieving cushions will only be considered after all other pressure management techniques have been considered; cushions with higher pressure relieving properties will not be provided in order to facilitate a service user sitting out for longer periods than are safe, or to reduce care packages.
- 12.4 Pressure mapping will be carried out when clinically justified (e.g. demonstrating pressure relieving techniques to a service user)

13. Specific patient pathway criteria

13.1 Nursing and Residential Homes

- 13.1.1 Service users may be provided with self-propelling manual wheelchairs to enable them to become independently mobile.
- 13.1.2 Wheelchairs to be pushed by a carer indoors are not provided. It is the responsibility of the home to provide wheelchairs for transit purposes, general portering and nursing use within the home.
- 13.1.3 It is anticipated that the Nursing Home will provide appropriate static seating with postural support (which is available on wheels) for use within the home. For safety and comfort, residents who are not independent wheelchair users should not spend long periods of time sitting in a wheelchair but should sit in a supportive armchair instead.
- 13.1.4 Where the service user has a need for postural support, provision of a wheelchair will only be considered if the service user will be taken off the Nursing Home grounds at least four times a week for four hours each day (as per the standard service criteria). The Wheelchair Service will require proof that a family member or carer will be available to do this.
- 13.1.5 Service users should be referred to the service by an Occupational Therapist, Physiotherapist or their GP.
- 13.1.6 It should be noted that the Wheelchair Service does not provide equipment for restraint, but for postural control (i.e. in the case of lapbelts to hold the pelvis in position). If Nursing Homes are not prepared to use lapbelts or other equipment issued by the Wheelchair Service as prescribed by the Wheelchair Service, the wheelchair will be withdrawn.

13.2 Hospital discharge

- 13.2.1 A five day fast track service will be offered from receipt of referral to support hospitals in the timely discharge of individuals and where a wheelchair is **required** to enable the individual to leave hospital independently mobile or with a reduced care package. If this is not the case, the five day fast track service will not apply, and the referral will be triaged and follow the appropriate pathway.

13.2.2 If a bespoke or specialist wheelchair is required which cannot be sourced within two weeks, the service will provide a temporary wheelchair which best meets the needs of the user, this to be strictly in consultation with Wheelchair Therapists to ensure that clinical needs are met. This will only be considered where the short-term provision is safe and appropriate for its intended use.

13.2.3 In all cases, the individual must meet the service's eligibility criteria outlined within this document.

13.3 Rehab inpatient placements

13.3.1 In addition to meeting the service's general eligibility criteria, individuals must have completed their rehabilitation goals before a referral for wheelchair provision can be processed by the Wheelchair Service.

13.3.2 As the home environment is integral to any wheelchair provision, the Hampshire Wheelchair Service can only provide a wheelchair once the individual's permanent discharge destination is known.

13.3.3 The five day fast track service (and conditions above) applies to discharge from Inpatient Rehab Units if the two points above have been met.

13.4 Rapidly Progressive Disorders and End of Life

13.4.1 For users with rapidly deteriorating neurological disorders (e.g. MND), a five day fast track service will be offered from receipt of referral. If a bespoke or specialist wheelchair is required which cannot be sourced within five days, the service will provide a temporary wheelchair which best meets the needs of the user and carer, this to be strictly in consultation with Wheelchair Therapists to ensure that clinical needs are met, but this will only be considered where the short term provision is safe and appropriate for its intended use

13.4.2 For users who are at an end of life stage (i.e. with a prognosis of less than 6 months), a 24 hour fast track service will be offered from receipt of referral; this will be a basic provision, but will only be considered where clinically safe to do so.

14. Exclusions

14.1 Wheelchairs are provided by the NHS to meet the mobility needs of the service user; for this reason:

- The Wheelchair Service cannot over-prescribe the equipment in order to meet the needs of the carer.
- The Wheelchair Service cannot prescribe off-roading or all terrain equipment as this is not considered part of the NHS wheelchair provision
- The wheelchair prescribed must be used for the intended purpose. For example they must not be used to carry individuals, such as up or down stairs, or in the gym, or in combination with fitness equipment such as foot cycles or weights.

14.2 Wheelchairs and accessories will not be provided for use as a restraint or as a replacement for, or use as, a static chair.

14.3 Attendant (transit) propelled wheelchairs will not be provided to residential, care or nursing home residents, unless the individual has a postural need that would mean a standard wheelchair provided by the care home for portering would be unsuitable, plus the service user must be taken off the premises at least four times a week, as above.

- 14.4 Tilt-in-space wheelchairs will not be issued in nursing homes, care homes or residential homes unless there are postural issues and are part of a 24-hour postural management plan and the service user is taken off the premises at least four times a week, as above. Tilt-in-space wheelchairs will not be provided in lieu of the service user not having an appropriate static seat.
- 14.5 Hampshire Wheelchair Service does not provide wheelchairs for sole use in the educational, work or social care setting (however, the wheelchair service may be able to provide information as to sources of funding and appropriate equipment).
- 14.6 The wheelchair service cannot provide specialist sporting equipment. However, the wheelchair service may be able to provide information as to sources of funding and appropriate equipment.
- 14.7 Pressure cushions will only be provided by the Wheelchair Service for use in the wheelchair, and pressure mapping will only be carried out in relation to wheelchair seating.
- 14.8 The Wheelchair Service cannot provide a wheelchair for service users with diagnoses of conditions such as frailty or autism unless there are underlying chronic mobility needs. In this instance, the referrers and service user will be signposted accordingly.
- 14.9 Attendant controls will not be provided by the Wheelchair Service on powered wheelchairs, nor can privately purchased attendant controls be fitted on NHS funded wheelchairs (including on voucher) for use when the service user is tired or fatigued; use of the power chair must be independent.
- 14.10 The Wheelchair Service will not supply and fit, or allow the fitting of E-fix wheels, or occupant controlled power-packs to NHS loaned wheelchairs. This would essentially turn a manual wheelchair into a powered wheelchair, and therefore the service user would need to be eligible for a powered wheelchair; if the service user is eligible for a powered wheelchair, a standard EPIC/EPIOC will be issued.

15. Equipment not provided by the Wheelchair Service

- 15.1 Mobility scooters (i.e. outdoors only, tiller driven, over weight limit for use on pavement, over speed limit of 4mph for use on pavement)
- 15.2 Accessories not related to mobility or postural needs, for example:
- Mountings for communication aids,
 - Trays for function, baskets or under seat trays for anything other than equipment to enable breathing (i.e. vent, O2)
 - Loopwheels or Softwheels (although permission may be sought from the Wheelchair Service for service users to supply and fit their own).
 - Bluetooth
 - Accessories specifically for safe transportation in public/private transport (e.g. headrests, harnesses, ankle huggers, hub brakes).
 - Equipment for decoration rather than function (e.g. spoke guards that are not issued for safety, flashing light castors, alternative colour framework).
- 15.3 Rear facing seats on buggies.
- 15.4 Recline of back rest angle, unless this is fixed to enable positioning of an open hip angle
- 15.5 Powered elevating leg rests
- 15.6 Powered recline

- 15.7 Extremes of tilt (e.g. 50 degrees)
- 15.8 Tilt, recline and elevating leg rests to manage oedema, pain or other health conditions, or to increase comfort.
- 15.9 Powered wheelchairs over a weight limit of 150kg
- 15.10 Provision to ease moving and handling, and transfers in and out of the wheelchair.
- 15.11 Second (“spare”) cushion cover except in the case of frequent incontinence despite proactive management.
- 15.12 Riser elements to power chairs (NB individuals can make contribution to have this as additional function in their provision; conditions apply).

16. Equipment provided under exceptional circumstances

- 16.1 *Occasionally, the wheelchair service may provide equipment for individual clients that would not usually be provided. This equipment will only be provided when there are clear clinical reasons for doing so and approval from the clinical team and the commissioners will be required prior to issue. Equipment that may be provided under exceptional circumstances includes:*
 - 16.1.1 Powered wheelchairs capable of travelling faster than 4mph to comply with DVLA legislation.
 - 16.1.2 Additional special seating systems (more than one)
 - 16.1.3 Second chairs (other than routinely issued manual backup chairs);
 - 16.1.4 Rain or sun covers for buggies / children’s provision, including where the service user has sensitive skin or other skin conditions, unless there is an identified postural need established through a clinical assessment
 - 16.1.5 Mountings for oxygen cylinders, suction machines, etc.
 - 16.1.6 Lights and indicators on powered wheelchairs
 - 16.1.7 Wheelchairs, cushions and accessories outside the equipment product matrix

17. The NHS Voucher Scheme

- 17.1 Some service users may prefer a different wheelchair to that which the clinician assesses as meeting their mobility and postural needs. The voucher scheme allows a service user to receive a voucher for the NHS cost of the wheelchair that would be provided through the Wheelchair Service, rather than receive the wheelchair itself. The service user can then use this voucher towards the cost of a privately purchased wheelchair.
- 17.2 In order to access the voucher scheme, the provision of a wheelchair must be considered appropriate to meet the mobility needs of the service user, i.e. the service user must meet eligibility criteria.
- 17.3 The service user must have been assessed by the Wheelchair Service prior to considering the voucher scheme; vouchers will not be issued retrospectively.
- 17.4 The value of the voucher will be based on the NHS price (excluding VAT) of the equipment that would have been issued, plus a maintenance amount to help with the cost of repairs and maintenance. **Please note the value of the voucher is often lower than the cost of**

the wheelchair purchased privately due to the discounted rate NHS services received.

- 17.5 The wheelchair will be the property of the service user under an independent voucher, including responsibility for repair and maintenance.
- 17.6 The equipment to be purchased by the service user with a voucher must be appropriate to meet the identified needs, as assessed by the Wheelchair Service therapist. The Wheelchair Service has the right to refuse release of the voucher, if the wheelchair to be purchased is not clinically suitable or puts the service user at risk.
- 17.7 Unless the service user's clinical or lifestyle needs change significantly, then the service user will not be able to access another voucher or wheelchair through the service for either five years (for adult service users) or two years (for children under 18 years old). After these respective periods of time, another voucher or wheelchair may be provided dependent upon the condition of the chair (i.e. beyond economical repair) and whether it is still meeting the clinical need. A new voucher is not automatically issued every five or two years respectively.
- 17.8 Until the Personal Wheelchair Budget scheme is in use within the local Wheelchair Service provision (<https://www.england.nhs.uk/personal-health-budgets/personal-wheelchair-budgets/>), the current NHS Voucher Scheme will continue to operate.
- 17.9 Prior to the implementation of Personal Wheelchair Budgets locally, in addition to the voucher scheme, a top-up scheme is available through Millbrook Healthcare. This allows the service user to purchase some additional features on an NHS provision wheelchair (for example a riser function on a powered wheelchair). The service user can request the additional features through Millbrook Healthcare and pay the additional cost directly to Millbrook Healthcare. Depending on the item, there may be a charge to repairs to the top-up equipment.

18. Independent Funding Review Panel (IFR)

- 18.1 Where eligibility criteria are not met and the referring clinician or OT wishes to pursue a specific item for the service user, an Individual Funding Request might be considered.
- 18.2 However it is essential that this is clinically-led and the referrer considers that there are either clinically exceptional circumstances related to the service user and/or they would have an exceptional capacity to benefit from the item. Those needs should be considered in the context of other service users who might equally benefit and be based on individual clinical circumstances.
- 18.3 Please note that if meeting a different health need would be detrimental to the core purpose of the wheelchair (e.g. hinders functional mobility, detracts from good posture or increases risk of pressure ulcers), the Wheelchair service is not obliged to approve the addition of IFR funded equipment to the wheelchair.
- 18.4 All details / resources related to this process can be accessed via the following link: <http://www.fundingrequests.cscsu.nhs.uk/clinical-commissioning-groups-hampshire/>.

Appendix A - Glossary

Term	Definition
Low Need	<ul style="list-style-type: none"> <input type="checkbox"/> Occasional users of wheelchair with relatively simple needs that can be readily met. <input type="checkbox"/> Do not have postural or special seating needs. <input type="checkbox"/> Physical condition is stable, or not expected to change significantly. <input type="checkbox"/> Assessment does not typically require specialist staff. <input type="checkbox"/> Generally self-assessment or telephone triage supported by health/social care professional or technician.
Medium Need	<ul style="list-style-type: none"> <input type="checkbox"/> Daily users of wheelchair, or use for significant periods most days. <input type="checkbox"/> Have some postural or seating needs. <input type="checkbox"/> Physical condition may be expected to change (e.g. weight gain / loss; some degenerative conditions). <input type="checkbox"/> Comprehensive, holistic assessment by skilled assessor required.
High Need	<ul style="list-style-type: none"> <input type="checkbox"/> Permanent users who are fully dependent on their wheelchair for all mobility needs. and <input type="checkbox"/> Complex postural or seating requirements (e.g. for high levels of physical deformity). or <input type="checkbox"/> Physical condition may be expected to change / degenerate over time. or <input type="checkbox"/> Very active users, requiring ultra-lightweight equipment to maintain high level of independence. <input type="checkbox"/> Comprehensive, holistic assessment by skilled assessor required.
Specialist Need	<ul style="list-style-type: none"> <input type="checkbox"/> Permanent users who are fully dependent on their wheelchair for all mobility needs. and <input type="checkbox"/> Highly complex postural or seating requirements (e.g. for high levels of physical disability) and/or are at greatest risk to their health and well-being. and <input type="checkbox"/> Physical condition may be expected to change / degenerate over time. or <input type="checkbox"/> Have complex and /or fluctuating medical conditions and multiple disabilities, which may include physical, cognitive, sensory and learning aspects. or <input type="checkbox"/> They are likely to require 24 hour postural management due to; poor trunk control, inability to sit without support, limited upper limb function, possible spinal curvature and joint contractures. or <input type="checkbox"/> They are at high risk of secondary complications due to their levels of disability such as contractures, chest infections and respiratory diseases. <input type="checkbox"/> The most common diagnoses for people who need specialist wheelchair services are: cerebral palsy, muscular dystrophy, multiple sclerosis, brain injury, motor neurone disease, high level spinal cord injuries. <input type="checkbox"/> Comprehensive, holistic assessment by skilled assessor required.
Equipment product matrix	A set range of wheelchairs and accessories provided by the service. The range is based upon the needs of the local population and regularly reviewed. This matrix can be found via the following link; http://www.millbrook-healthcare.co.uk/wp-content/uploads/2017/11/wheelchair-matrix-1117.pdf .
Visuo-spatial perception	The ability to process and interpret visual information about where objects are in space. For instance, it underlies our ability to move around in an environment and orient ourselves appropriately
Bespoke or specialist wheelchair	A wheelchair that requires customised adaptations, modifications or accessories to meet an individual's needs.
Invalid carriages	Manual and powered wheelchairs and mobility scooters are medical devices and in law are referred to as 'invalid carriages' There are three types of

	<p>'invalid carriage' defined in 'The Use of Invalid Carriages on Highways Regulations 1988':</p> <p>Class 1 - manual wheelchair , i.e. self-propelled or attendant propelled, not electrically powered;</p> <p>Class 2 - powered wheelchairs and mobility scooters, intended for footpath or pavement use only with a maximum speed limit of 4 mph;</p> <p>Class 3 - powered wheelchairs and mobility scooters, for use on the road, with a maximum speed limit of 8 mph but with the facility to travel at 4 mph on a footpath or pavement within specific size and weight limits.</p> <p>Please note NHS equipment provision is limited to 4mph</p>
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Appendix B - General conditions of loan for wheelchairs

- 1.1 The wheelchair service recommends the purchase of third party insurance with the provision of any powered wheelchair, insuring the chair against loss and to protect the client in case of them causing any damage to another individual or their property.
- 1.2 Alcohol should not be consumed when using any wheelchair; the wheelchair will be removed should alcohol consumption place the client or public at risk.
- 1.3 Should the wheelchair be subjected to repeated misuse by the client and/or carer, and regular repairs are required due to this misuse, then the wheelchair may be removed.
- 1.4 During the handover of the chair, the client will agree to the conditions of loan with a signature. The conditions of loan for wheelchairs issued by the wheelchair service are (this excludes wheelchairs issued under the voucher scheme):
 - The equipment belongs to the NHS
 - The wheelchair is kept in a good, clean condition and manufacturers' guidelines detailed in the handbook are followed.
 - The client will contact the service in case of any concerns/equipment faults.
 - The wheelchair must be stored in a safe place whilst not in use, and protected from damage at all times. The equipment must not be left unattended in a public place or in any location.
 - The wheelchair must not be disposed of, or passed on to another person. The client is responsible for letting the wheelchair service know immediately if the equipment is no longer required.
 - The wheelchair must not be used for sports activities or track events without prior agreement by the wheelchair service.
 - The wheelchair must not be altered or have any attachment fitted to it without agreement by the wheelchair service.
 - If the wheelchair is taken abroad for any period, the client must pay the cost of any damage, loss or repair incurred during travel and whilst outside of the United Kingdom. The wheelchair service advises that clients should have appropriate insurance cover prior to travel.
 - Powered wheelchairs will have an annual maintenance service and the client must permit access to the chair at an agreed date/time.
 - Posture/safety belts and/or harnesses fitted to the wheelchair must be fastened safely, correctly and appropriately.
 - The equipment must be given up for repair, when requested by the wheelchair service.
- 1.5 The equipment must be returned to the Wheelchair Service when it is no longer required by the service user it was issued to.