

Report to: **Adult Social Care Scrutiny Committee**  
 Date: **7 March 2013**  
 By: **Director of Adult Social Care**  
 Title of report: **Integrated Community Equipment Services (ICES)**  
 Purpose of report: **To report the initial findings of the ICES service review**

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## **RECOMMENDATION**

### **The Scrutiny Committee is recommended to:**

1. Note the initial outcomes of a service review which will be used to inform future commissioning requirements for ICES.

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## **1 Financial Appraisal**

1.1 ICES operates under a Section 75 pooled budget agreement, supported by joint eligibility criteria for adults.

1.2 The 2012/13 ICES budget is £3,267,464, shared 50:50 between Adult Social Care (ASC) and the East Sussex Primary Care Trusts. An additional one-off £438,000 has been provided from reablement funding to support budget pressures.

1.3 The 2013/14 ICES budget is proposed at £3,767,464. ASC's contribution has been approved at £1,883,732, with the remaining health contribution being presented to Clinical Commissioning Group (CCG) Board meetings for approval.

1.4 For 2012/13, the projected spend is: Equipment £2.27m, Contracted Logistics £1.18m and Management and Support £255,000.

## **2 Background and Supporting Information**

2.1 When the service contracts commenced in September 2011, 4 outcomes were identified:

- A better experience for service users and their carers
- Greater control and responsibility in the total process available to service users and the service provider to ensure greater service user satisfaction and better use of available funds
- Removal of waste and bad costs (e.g. failed and repeat deliveries)
- Effective use of all the existing resources and more efficient use of future resources.

2.2 The review is considering how well existing models fits with broader strategic commissioning objectives, the personalisation agenda, and the current financial backdrop, coupled with the growing demand for services in line with strategic and demographic changes.

2.3 This report focuses on the initial phase of the review where feedback via surveys from clients and practitioners has been evaluated together with feedback from the providers including financial, activity and performance information. Further reading is available in appendix 1.

2.4 A review of the clients who received sensory aids and equipment is also being carried out. The results of the survey will be analysed at the end of March 2013.

## **3 Initial Findings – community equipment and minor adaptations**

3.1 Client survey: more than 80% of clients were very satisfied and satisfied with all 6 aspects of the equipment and minor adaptation services that they were asked to rate. It is reassuring that being treated with dignity and respect was the highest satisfaction rating (at 98% and 96% for equipment and adaptations, respectively). However, being clear about follow-up contact arrangements with providers was the lowest (81% and 85%, respectively). (Appendices 2 and 3.)

3.2 Prescriber survey: 85% responded that ICES works well for them as a practitioner, delivering the best outcomes for their clients, and helps to avoid the need for more intensive services. Practitioners were most positive about the online ordering and tracking systems. This is pleasing as the systems are an essential tool needing to be reliable and efficient at all times. (Appendix 4.)

3.3 The community equipment service performs well consistently exceeding the performance targets. Having a direct relationship with clients to plan deliveries and collections enables the service provider to effectively manage logistics and stock levels. There are very few wasted or repeat journeys. Within existing resources, the provider has demonstrated increased productivity, delivering more equipment in fewer journeys compared to the tender baseline position.

3.4 The complexities of the minor adaptation service are being examined in light of performance and feedback. In regard to the timeliness, whilst client expectations were met, this aspect was rated with the highest level of dissatisfaction from practitioners.

3.5 An emerging theme is that there are different viewpoints regarding delivery. Speed of delivery and delivery arrangements are key elements as they impact significantly on service costs and efficiency.

#### **4 Recommendation**

4.1 Work has commenced with providers and others to improve the availability and accessibility of information about the contact arrangements for follow up (collections, maintenance and repairs).

4.2 An early action is to engage with senior managers of ASC and ESHT to understand priorities and the needs of the clients in regard to delivery and what support is needed from ICES.

4.3 To better understand the inter relationships/dependencies between the practitioners using the service as an essential intervention to meet assessed needs; versus the experience of the service user; versus the ability of the providers to efficiently deliver the service as commissioned is key to understanding what is the correct balance/model to ensure a positive client experience and best use of resources.

4.4 Feedback re training and development of staff to support ICES prescribing will be examined.

4.5 As the requirements of the new CCGs become known these will be considered in the next phase of the review.

4.6 A commissioning strategy will be developed drawing together the future plans for the service.

#### **5 Conclusion**

5.1 Overall the current community equipment and minor adaptation services are sound.

5.2 ICES underpins a number of community service initiatives increasingly designed to deliver QIPP savings and cost efficiencies across the health and social care economy. More work is needed to better understand the impact of initiatives such as Project Pathway and Neighbourhood Support Teams.

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Local member: All

BACKGROUND DOCUMENTS: client survey, prescriber survey – available on request

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Date: **7 March 2013**

## APPENDIX 1: Introduction

1.1 The ICES review is examining what works well and what could be improved to determine what future models of service delivery should look like. The service providers are

- community equipment service – provided by Millbrook Healthcare
- minor adaptation service – provided by Medequip
- sensory service – provided by East Sussex Hearing Resource Centre and East Sussex Vision Care commissioned through the commissioning grants prospectus.

1.2 Clients were invited to participate in a survey and provide feedback about their recent experience and contact with either community equipment and/or minor adaptation service providers.

1.3 Out of 500 survey letters sent to clients who had received either or both services, 172 responses were returned which is a response rate of 34%. See appendix 2.

1.4 Satisfaction levels are encouraging with a small number of dissatisfied or very dissatisfied responses against specific topics. These areas and other areas that were not consistent with expected results are being looked into. Further detail and the overall results are contained appendix 3.

1.5 All 730 practitioners who use the services were invited to feedback via an online survey. 80 responses were received which is about 11% of the prescriber population. See appendix 4.

1.6 The practitioner results are promising. It is reasonable to assume that those who did not respond are probably satisfied. This position is consistent with the low volume of feedback, negative or otherwise, received via all other channels confirming, that generally, practitioners are satisfied with ICES.

1.7 In regard to delivery arrangements for community equipment, 68% of clients in this sample said the delivery of equipment was arranged by their social or health care professional. This percentage rate is much higher than expected and not consistent with other supporting information. For example, taking an average for the past 7 months, over 90% of the equipment deliveries selected online by practitioners were coded as client led (although this does include deliveries where practitioners act as their client representative). As delivery arrangements are a fundamental aspect of the service model, this will be investigated further.

1.8 Whilst 86.3% practitioners responded that they think it is positive that clients can arrange their own deliveries, interestingly their comments suggest the model can create more work and be inefficient for practitioners.

1.9 Practitioners also commented frequently on the speed of delivery for community equipment, wanting more and faster response time options and suggested the cut-off time for urgent orders (for same or next day delivery) be extended beyond 1pm to facilitate afternoon assessments. Millbrook have reported an increase in urgent order activity. This may suggest clients' needs have changed and a priority action will be to better understand this trend.

Interestingly, practitioner comments also suggest uncertainty about the level of understanding they have about the service model and how it can be used effectively. It could be that urgent orders are easy to organise.

1.10 In regard to timeliness, clients reported that both equipment and minor adaptations were delivered within an acceptable time frame. For both services at least 45% of clients reported the service was quicker than expected with only 4% or 5% reporting the service for equipment and adaptations, respectively, was slower than expected.

1.11 An emerging theme is that there are different viewpoints regarding delivery. Speed of delivery and delivery arrangements are key elements as they impact significantly on service costs and efficiency.

1.12 For the minor adaptation service the activity has increased by 50% from the tender baseline position and therefore there is close work in hand with Medequip to make the most effective use of the commissioned resources.

1.13 Only two practitioners commented that is more time consuming to have 2 providers and no clients commented about this aspect suggesting that this is not significant.

1.14 A review of clients who received sensory aids and equipment is being carried out based on a sample of people who received sensory aids and equipment in November and December 2012. The results of the survey will be analysed at the end of March 2013.

## APPENDIX 2: Client survey – about you

Note: this section was optional. Not all 172 respondents completed this section.

Totals for some tables or charts may slightly more or less than 100% due to rounding in Excel.

### Gender

- 67% of respondents were female (104 people).
- 33% were male (52 people).
- 2 respondents said they consider themselves to be transgender.

### Age

Age	Number of respondents
18-24	0%
25-34	2%
35-44	2%
45-54	7%
55-59	6%
60-64	4%
65-74	24%
75-84	38%
85-94	16%
95+	1%

### Ethnicity

Ethnicity	Number of respondents
White	94%
Mixed	6%
Asian or Asian British	0%
Black or Black British	0%
Chinese	0%
Arab	0%
Prefer not to say	1%

### Disability

- 89% of respondents consider themselves to be disabled.

Impairment type	Number of respondents
Physical impairment	47%
Sensory impairment (hearing and sight)	11%
Long standing illness or health condition, such as cancer, HIV, heart disease, diabetes or epilepsy	32%
Mental health condition	3%
Learning disability	1%
Prefer not to say	0%
Other (* please specify)	5%

### Religion

- 71% of respondents consider themselves to have a religion or belief. Of those 71%, the majority are Christian (96%), while 1 person is Muslim and 1 is Jewish.

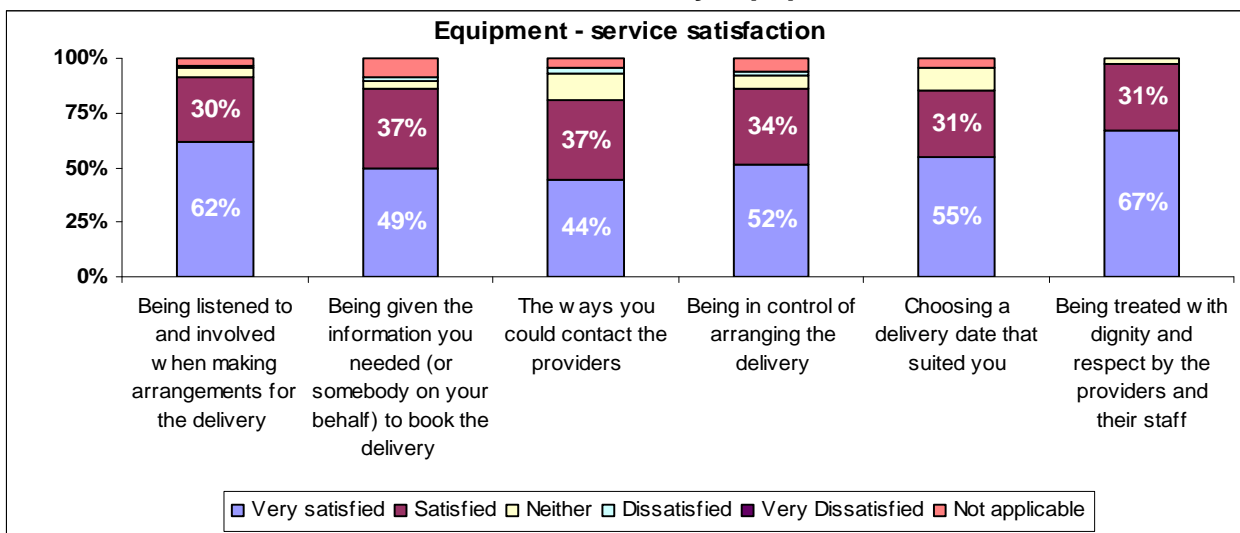
### Sexuality

- The majority of respondents (91%) are heterosexual, while 1 is a gay woman and 1 is bisexual. 7 people chose 'prefer not to say' and 4 chose 'other'.

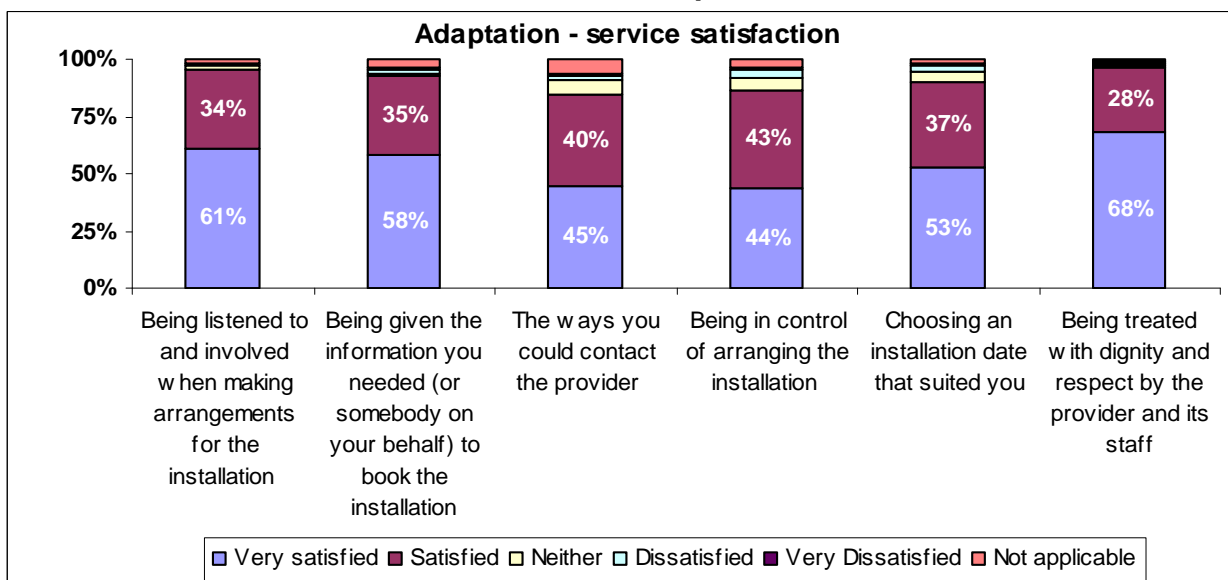
### APPENDIX 3: Client satisfaction with the community equipment and minor adaptation services

- More than 80% of clients were 'very satisfied' or 'satisfied' with all aspects of the community equipment service we asked them to rate. 'Being treated with dignity and respect' gained the highest satisfaction rating (at 98%) whilst 'the way you contact providers' gained the lowest (81%).
- At least 85% of clients were 'very satisfied' or 'satisfied' with all aspects of the minor adaptation service that we asked them to rate. This was slightly higher than the community equipment service. Again, 'being treated with dignity and respect' gained the highest satisfaction rating (at 96%) and 'the way you contact providers' gained the lowest (85%).
- Work has commenced with providers and others to improve the availability and accessibility of information about the contact arrangements for follow up (collections, maintenance and repairs).
- It should be noted though that the number of people who were 'dissatisfied' or 'very dissatisfied' was slightly higher for adaptations, with more of the equipment respondents choosing a neutral answer. (See table 1 for a breakdown of dissatisfaction results.)

**Chart 1: Client satisfaction with the community equipment service**



**Chart 2: Client satisfaction with the minor adaptation service**



**Table 1: Breakdown of client dissatisfaction totals**

- The survey showed a low number of ‘dissatisfied’ and ‘very dissatisfied’ client results.

Topic areas	Dissatisfied and very dissatisfied total	
	Equipment	Adaptation
Being listened to and involved when making arrangements for the delivery	1	1
Being given the information you needed (or somebody on your behalf) to book the delivery	1	2
The ways you could contact the providers	2	3
Being in control of arranging the delivery	2	4
Choosing a delivery date that suited you	0	4
Being treated with dignity and respect by the providers and their staff	0	2

**Table 2: Suggestions for improvement**

- Areas where there were suggestions for improvement are being looked at by relevant teams.

Client feedback
For the equipment service, the principal feedback and areas of dissatisfaction related to not having contact details for returning items, the difficulty arranging collection of items (which current ICES service providers are often not responsible for), and choice of mutually agreeable delivery times
Clients were mostly very grateful for the services provided. There were some negative comments about customer services, not having direct contact from the people making the delivery, and the workmanship of technicians fitting rails
Community equipment received mainly positive feedback but there were a few comments regarding aids for bathing, toileting, bed mobility, and ramps
Minor adaptations: more comprehensive explanations needed during site visits; better recording of where items are to be installed
Drivers to phone ahead to confirm timing, especially if they are expecting to be late
Communication: one suggestion was that we should make sure other potential clients are aware of ICES services so others can benefit from the services

**Table 3: Positive feedback**

Delivery people were A1.
Everyone involved was extremely helpful, thank you
I think the delivery service is excellent – very clear – no need to alter the service
Very happy with the service. Thank you.
You are doing a great job already
No suggestions because it is a good service.
Your service was very good, thank you. Keep up the good standards.
No. Think went very smoothly.
Very satisfied with the arrangement - thank you.

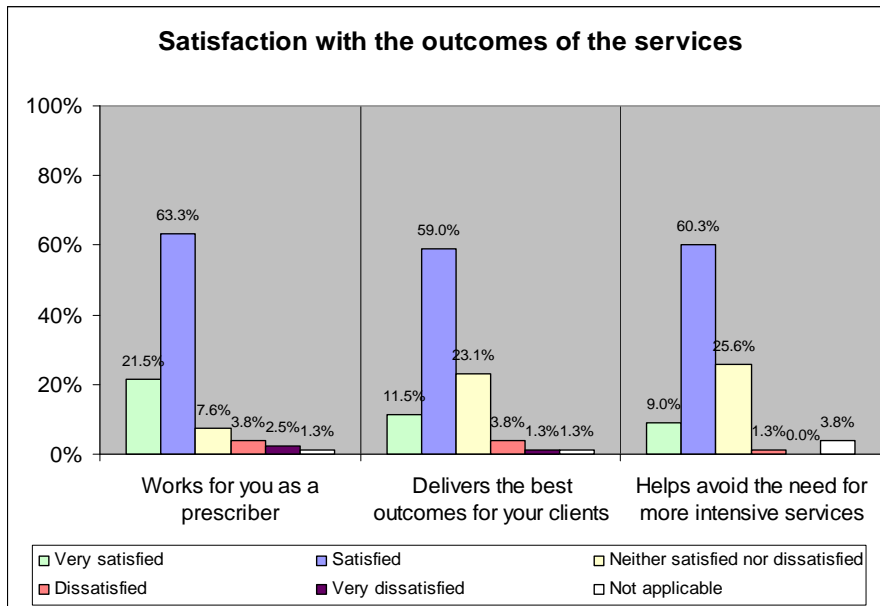


I am so grateful that the installation that you gave me as help me a lot. I'm so grateful for this. I think people could get in touch with you with your service. I thank you so much for your help.
Both times the whole procedures were very satisfactory. I am 90 and never had dealings before with these people.
Your service was very good, thank you. Keep up the good standards.
I have no suggestions. Why? Because I can not fault any of the process.
First class.
Very useful.
From a personal point of view, I can only say, my treatment in all aspects of the service provided was second to none. Thank you so much.
No, I found the service very good.
Only it was very good, could not have been easier.
Good work.
For me, everything is ok. Thanks.
Helpful & caring.
I think that our community is very fortunate to have this service excellent all round, the person who delivered the equipment was very helpful and gave a good demonstration of how to use it.
They are always polite and helpful.
I had improvements made to my outside steps. I am very pleased with the results. They were very well done and continue to make life much easier for me.
Very good service.
Not that I can think of as I have been quite satisfied with the type of services I received.
I am very grateful for all that has been done for me. The staff who installed the hand rails etc The people were efficient and cheerful so I have no complaints!
First class service - very much appreciated.
Very satisfied with all aspects of the system.
Very pleased and satisfied.
I think the service was excellent and I found no problem areas.

## APPENDIX 4: Prescriber satisfaction with the community equipment and minor adaptation services

**Chart 3: Prescriber satisfaction with the outcomes of the services**

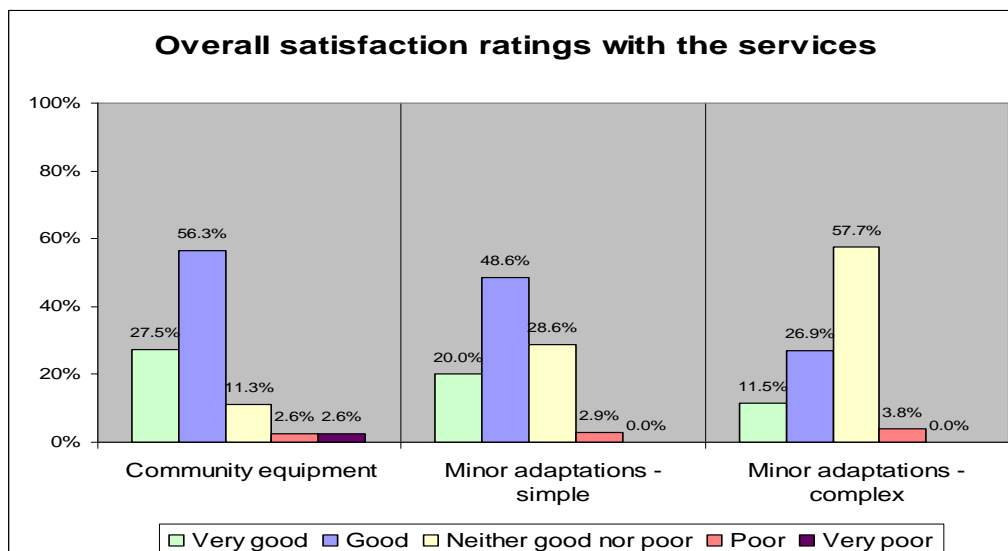
- The majority of prescribers (84.8%, i.e. 67 prescribers) responded that the services work for them. Only 6.3% (5 respondents) were 'dissatisfied'/'very dissatisfied'.
- The majority of prescribers (70.5%, i.e. 55 prescribers) responded that the service provision delivers the best outcomes for their clients. Only 5.1% (4 respondents) were 'dissatisfied'/'very dissatisfied'. Around a quarter of prescribers were neither 'satisfied' nor dissatisfied' on this point.
- The majority of prescribers (69.3%, i.e. 54 prescribers) responded that the services help avoid the need for more intensive services. Only 1.3% (1 respondent) were 'dissatisfied'/'very dissatisfied'. Around a quarter of prescribers were neither 'satisfied nor dissatisfied' on this point.



**Chart 4: Comparing overall prescriber satisfaction ratings for equipment / adaptation services**

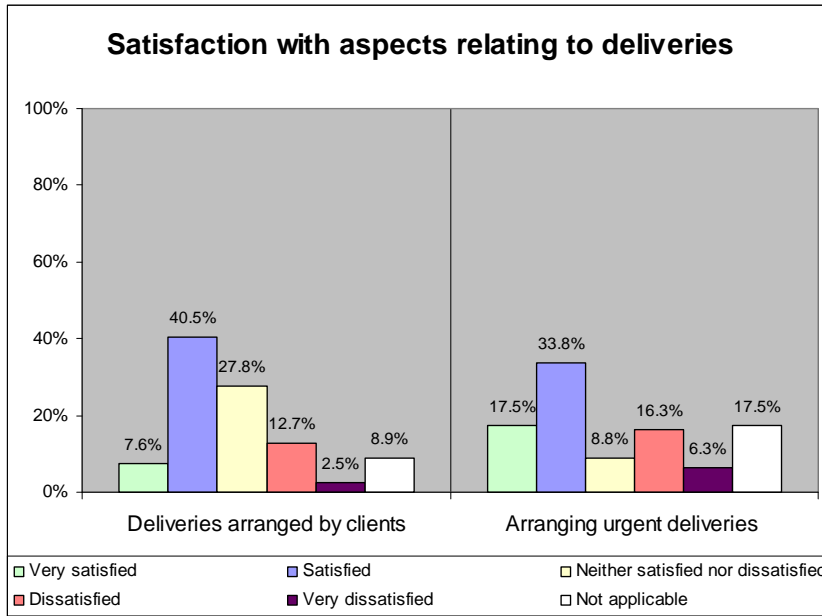
Note: The number of respondents who answered questions about adaptation was much lower: 35 for simple and 26 for complex compared to 80 for community equipment.

- The provision of community equipment received a much higher satisfaction rating than the minor adaptation service. The number of ratings showing 'neither satisfied nor dissatisfied' was higher for minor adaptations than community equipment, especially for complex minor adaptations.



### Chart 5: Satisfaction ratings with equipment deliveries

- 86.3% of prescribers responded that it is a positive aspect of the model that clients can arrange their own deliveries when answering question 12 of the survey.
- However, the breakdown in the following chart shows 27.8% of prescribers were 'neither satisfied nor dissatisfied'; 48.1% were 'satisfied' or 'very satisfied'.
- Survey comments highlighted potential misunderstanding about the speed of response options for deliveries and how the service model operates.



### Chart 6: Satisfaction ratings with adaptation installations

- With regards to the timeliness of the minor adaptation installations, none of the prescribers gave a rating of 'very satisfied'.
- Satisfaction ratings for installation times were overshadowed by 'neither satisfied nor dissatisfied' and also 'dissatisfied'. This is not unexpected and the higher than anticipated activity for minor adaptations and timeliness of installing minor adaptations is the subject of ongoing discussion with the service provider to make best use of commissioned resources.

