

Guidance for urgent referrals during COVID-19

Millbrook Healthcare wheelchair services

This guidance has been written to assist community therapists to determine when to contact the wheelchair service with an urgent referral.

Due to the current situation regarding COVID-19 we have been instructed to change our criteria to **urgent** referrals only. **The revised criteria for this are as below:**

1. Full time wheelchair user requiring their wheelchair to complete essential activities of daily living indoors, such as self-care and all indoor mobility
2. To support hospital discharge
3. Pressure ulcer prevention and management
4. Vascular service support
5. Prevent hospital admissions
6. Safeguarding issues/concerns
7. Collections – in order to maintain adequate stock levels

Always consider first the length of time the person is sitting in their wheelchair and whether they need to relax in other seating for a while. A wheelchair is a mobility aid and is not designed to be used continuously for long periods of time. It is not a substitute for an armchair or a bed.

Please use the questions and check-lists in this document to help you make a decision about the urgency of the request. We will continue to triage referrals and requests and will monitor service users that are referred to ensure we identify any potential risks or changing needs.

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Mobility and hospital discharge

- Does the service user have any alternative equipment to support essential activities of daily living indoors that could be used as a temporary measure?
- Do they have care support to mitigate any risks of not being able to use their wheelchair?

If the answer to either of the above is 'no' the service user may need urgent attention.

Pressure ulcer prevention and management

Does the service user have redness of the skin? If yes, does it persist after one hour of being out of the wheelchair?

If the skin redness dissipates within an hour, the referral is unlikely to be urgent.

If the skin redness persists after one hour, please check the following before referring:

- Is clothing or a hoist sling bunched up?
- Does the redness only occur with specific clothing?
- Is there enough space for a hand to just fit between the person's body and the wheelchair or supports?
- Is the redness associated with a particular part of the wheelchair/seating support?
- Is the cushion positioned correctly within the seat and the right way round?
- If the seat cushion has a soft gel section, has the gel been kneaded gently so that is evenly spread?
- Has the person's weight reduced or increased significantly?
- Is the service user sliding in the seat?

Vascular service support

- Are there any significant changes to service user's condition that affect the person's ability to use the wheelchair to complete essential activities of daily living indoors, such as self-care and all indoor mobility.
- Are any parts of the equipment impinging on a body part in such a way as to cause risk of skin trauma?
- Will the wheelchair facilitate an earlier hospital discharge following lower limb amputations?

Maintenance and working order of parts

- If straps have been replaced (pelvic belts and harness) after washing, ensure they are fitted firmly and securely. The pelvic belt should sit across the top of the thighs. Ensure that the straps have been fed back through in the correct position and are not twisted.
- Check the clips and fastenings on any postural supports/harnesses to ensure they are secure and working properly.
- Daily checks of the wheelchair should include testing brake function and identification of any loose/missing parts. Refer to the wheelchair manual for more information on wheelchair maintenance checks.

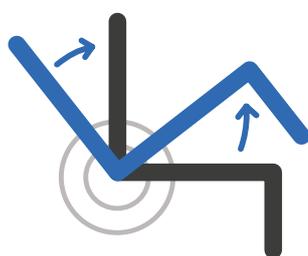
Please contact us to request a repair if you think this could resolve the issue.

Preventing hospital admissions

Including managing falls risks

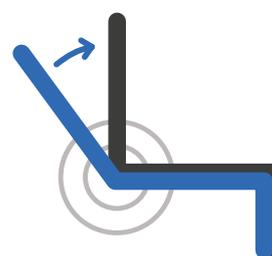
Here are some guidelines to help you check whether the service user is positioned optimally and whether the chair features are being used properly to minimise risks associated with sliding, poor posture and other unsafe situations:

- Is a wheelchair or modification the only way to reduce the risk of falls from the wheelchair or any other reason for hospital admission?
- If the wheelchair has the option to tilt-in-space, ensure that the wheelchair is tilted before you hoist the person into the seat. This will ensure that their bottom is positioned at the back of the seat. Please check which feature is being used as some wheelchairs will recline as well as tilt.
- Ensure that if there is a tilt-in-space option, that this feature is being used as part of the service users posture management.
- Check that they are sitting correctly at the back of the seat. You can test this by leaning them forwards to see if their bottom is against the backrest.
- If there is a pelvic belt fitted, ensure it is firm and secure. It should sit across the top of the thighs. A pelvic belt that is too loose will not support or maintain a good sitting position and this creates a risk to the person seated in the wheelchair. Pelvic belts are fitted for postural support.
- If the person is hoisted for transfers, the best seated position is achieved using the shortest strap of the hoist sling on their shoulders and the longest on their legs. There may be specific hoisting guidance for individuals. This should be recorded in their care plan.
- Check that the cushion has been positioned correctly within the seat and whether the cushion is sliding in the seat. This could be secured in place with Velcro.
- If the backrest recline is adjustable, check that the recline angle is correct for the person according to the positioning guidance provided when the wheelchair was issued. If the back angle is too open, this can increase the risk of the person sliding in the seat, particularly if the pelvic belt is not fitted/ secured correctly. The recline angle should match the service users maximum hips flexion.
- Check that the footplates are at the correct height. A general rule is that hips, knees and ankles should be at 90°, although always check the positioning guidance as this can vary. An incorrect height can cause increased pressure or reduce the overall support in the wheelchair.



Tilt-in-space

Hip angle stays the same



Recline

Hip angle changes