# The NHS Wheelchair Services Quarterly Dataset: is it fit for purpose?

## Executive summary

The Wheelchair Alliance (the Alliance) has collaborated with many stakeholders over the last 10 years to drive improvements in the provision of wheelchair services. It has produced three reports which highlight the lack of robust data, the need for improved funding and a lack of accountability at senior level to oversee efficiency, effectiveness and to ensure the very best outcomes for those who need a wheelchair.

One of the key methods of capturing data is through the mandated quarterly reporting that each Integrated Care Board (ICB) must submit. This is considered by some commissioners to be a 'tick box' exercise as the data does not enable them to drive service improvement or adequately understand the true demand and therefore cost of service resulting in uninformed commissioning decisions across the country. Should senior leaders within the NHS look at the data, there would be no way of identifying if a service provider was providing an outstanding, value for money service or if they are struggling and need some support. This is because most ICBs commission services from a number of providers, both NHS direct provision and NHS provision tendered out to private companies, and the data is amalgamated for the dataset submission. There is a lack of clarity and governance to ensure providers and ICBs are capturing and submitting accurate and consistent data, compounded further by amalgamating the detail.

There is also a concern that the interpretation of the data is misleading and could negatively influence any procurement process. In addition, and probably of greater importance, there is a lack of service user input to indicate quality of service or the achievement of their agreed outcomes showing the benefit of their wheelchair on daily living. Key messages have been highlighted following the survey

- 89% of commissioners say the data does not demonstrate the quality of the service
- 78% of commissioners say the data cannot support service planning
- 100% say the data does not inform budgeting and
- None of the services have ever been challenged by NHS England about the data.

The overwhelming message from the survey is that the dataset is not fit for purpose and urgently needs to be reviewed. The NHS 10-year plan stresses the need to move from

analogue to digital use and the recent publication of the Wheelchair Quality Framework could provide the NHS with a significant opportunity to devise a dashboard based on the Framework that looks across both qualitative and quantitative data. A revised dataset would drive up service quality and minimise the current 'postcode lottery' experienced by wheelchair users. Everyone involved in the survey expressed a desire for this change and the Alliance would be in a position to facilitate this in collaboration with all stakeholders.

## Introduction

The NHS commissions around 120 wheelchair services across the seven regions in England. These are either directly provided through the NHS or delivered by private companies via a tendering/procurement process on behalf of the NHS. Every wheelchair service commissioner must complete a quarterly dataset and submit this to NHSE. The data is accessible to public scrutiny via the NHSE website.

For many years the Alliance has questioned whether the dataset accurately reflects

- Robust quantitative data including numbers of wheelchair users and true cost of service provision
- The impact of the service provision on wheelchair users and their carers: sound qualitative data
- If the data is being scrutinised and used at all by NHSE

The Alliance believes that, without these components, commissioners are unable to effectively commission and appropriately fund efficient and effective services. In addition, the true national picture is unknown and therefore we see a missed opportunity for robust strategic thinking. In order to answer the questions wheelchair service commissioners across all ICBs and wheelchair service providers were asked to complete a simple survey over the space of 6 weeks and also given the ability to provide comment if they wished. It was stressed that all responses would be anonymous ensuring constructive criticism and suggested changes could be freely shared.

The report will be shared with Sir James Mackey (Chief Executive, NHS England), the All-Party Parliamentary Group for Wheelchair Users (the APPG) and other key stakeholders.

## The survey

The Alliance drafted some simple survey questions and had them tested by a group of commissioners and providers to ensure they were unbiased (Appendix 1 and 2). The final survey was circulated to all 42 ICBs in England, either directly to commissioners or, where there were no contact details on the ICB website, to either the media or PALS (Patient Advisory and Liaison Service) asking if they would kindly forward the survey to the appropriate person. A number of areas forwarded the survey to providers to complete, however the providers had received a slightly different survey via the National Wheelchair Managers Forum and other routes where available e.g. directly through managers of private companies providing services on behalf of the NHS.

An extension of the survey deadline was requested, and the final response date was 10th October 2025. The results and any themes arising from the responses received were captured and inform the recommendations within this report.

## Analysis

The analysis and any themes arising from the surveys of the two stakeholders (commissioners and providers) have been considered separately. As previously stated, all responses are anonymous.

*Commissioner feedback:*

There were responses from all seven NHS regions and of the 42 ICBs approached, over one fifth completed the survey (n=9, 21.4%). The small numbers indicate consensus around some important points with 89% of respondees saying the data does not demonstrate the quality of the service they commission, 78% saying the data does not support service planning 100% stating that the data does not support budgeting nor has the data ever been challenged.

The table below shows the survey question, the number of responses and the percentage this represents.

| | Question | Yes | No |
|---|---|---|---|
| 1 | Are you aware of the quarterly wheelchair dataset? | 8 (89%) | 1 (11%) |
| 2 | Do you complete the quarterly dataset? | 5 (55.5%) | 4 (44.5%) |
| 3 | Do you capture data from more than one wheelchair service provider? | 3 (33.3%) | 6 (66.7%) |
| 4 | Are the definitions underpinning the questions unambiguous? | 3 (33.3%) | 6 (66.7%) |
| 5 | Do the Wheelchair services (WCS(s)) providing the data to you interpret the questions in the same way? | 5 (55.5%) | 4 (44.5%) |
| 6 | Do you believe the dataset accurately demonstrates the quality of the services you commission services? | 1 (11%) | 8 (89%) |
| 7 | From the dataset, can you identify individuals who are waiting in excess of 18 weeks for their wheelchair | 3 (33.3%) | 6 (66.7%) |
| 8 | Have you ever been contacted by NHSE to discuss your quarterly submission? | | 9 (100%) |
| 9 | If the answer to 8 is yes, who contacted you: | | |
| 10 | Does the information in the dataset help you to plan service development? | 2 (22%) | 7 (78%) |
| 11 | Does the data accurately inform you of the budget needed to deliver the commissioned service? | | 9 (100%) |

The consensus was the information provided was more of a return than a useful dataset. The key themes emerging from the feedback from commissioners are:

- Lack of confidence in the data (not comparing like for like)
- No data on repairs or maintenance
- Differing views on the Refer to treatment (RTT) accuracy and usefulness
- Limited usefulness for service planning and budgeting
- Local interpretation of ‘stop the clock/start/pause’ leading to a skew in data
- Gives high level data on numbers of users/referrals etc
- No outcome or quality data

- To report based on key stages of the wheelchair pathway would be useful e.g. triage/ assessment/ delivery/ handover.
- No oversight of the data.

In addition the data return completely misses capturing deprivation levels, complexity of need and workforce factors – all crucial in service planning, funding and delivery.

One commissioner stated that they completed the return however did not use the data as they had no confidence in it and felt it could mislead and confuse the public. Looking at one area of the quarterly dataset return provides evidence that supports this:

The Q1 for 2025-2026 return is open to public view as well as NHSE scrutiny. The indicator showing how many under 18-year-old referrals during that quarter were closed under 18 weeks without issuing any equipment ranged from 0.5% to 60.3%. Such a wide variance across services should be questioned, however is not. It could be assumed that the cases are closed and then re-opened (otherwise a large number of young people are not getting any equipment at all). This analysis highlights two critical issues: the different interpretation of NHS rules and a lack of validation or scrutiny by commissioners and NHSE when such discrepancy in data is seen.

*Provider feedback:*

Unfortunately, there was very limited feedback from provider services. When asked about this, the response was that service managers were so pressured that they had little time to engage. There were responses from five providers (approximately 4.2% of all services) from three of the ICB regions. The comments from these providers are captured below and show that the majority of respondees find the data they provide of little value and does not support meaningful discussions with their commissioners.

| | Question | Yes | No |
|---|---|---|---|
| 1 | Are you aware of the quarterly wheelchair dataset? | 5 (100%) | |
| 2 | Do you complete the quarterly dataset? | | 5 (100%) |
| 3 | Are the definitions underpinning the questions unambiguous? | | 5 (100%) |
| 4 | Do you think all Wheelchair services (WCS(s)) providing the data interpret the questions in the same way? | | 5 (100%) |
| 5 | Do you believe the dataset accurately demonstrates the quality of your services? | | 5 (100%) |
| 6 | From the dataset, can you identify individuals who are waiting in excess of 18 weeks for their wheelchair, irrespective of the reason | 1 (20%) | 4 (80%) |
| 7 | Have you ever been contacted by NHSE to discuss your quarterly submission? | 1 (20%) | 4 (80%) |
| 8 | If your answer to 7 is yes, who contacted you: | | |
| 9 | Does the information in the dataset help you to discuss service development with your commissioner? | 2 (40%) | 3 (60%) |

It should be noted that providers are likely to forward the data to commissioners who submit the data return across all the services within the ICB.

The key themes emerging from the providers are:

- The definitions lack sufficient data and are open to interpretation
- Significant variation in reporting across services
- The dataset does not accurately reflect quality of service
- There is no capture of patient feedback

These points highlight concerns about the quality of the data and whether it can be utilised in a meaningful way. As one clinical lead put it: *"The dataset describes a piece of the job we do, but in isolation it doesn't reflect other areas of concern that, if resolved, would lead to development and improvement."*

## Recommendations

Whilst acknowledging that the survey had a limited number of responses, particularly from wheelchair service providers, there is clearly a universal consensus that the data collection in its current form is not fit for purpose and should urgently be reviewed.

The Alliance suggests the following recommendations based on the feedback received:

1. Consider temporarily suspending data collection as the content does not provide any meaningful information, is inaccurate and can mislead the public as well as procurement processes. The current situation means providers and commissioners are investing time and effort into reporting that is not scrutinised.
2. Name individuals at both the Department of Health and at ICB level who are accountable for the accuracy, monitoring and challenging of the data. They will also highlight and insist on the delivery of best practice.
3. Stop aggregation of data and produce more granular oversight of service provision enabling appropriate support for struggling services.
4. Redesign the dataset, using the pathway and quality standards described in the Wheelchair Quality Framework:
    a. Referral and triage
    b. Assessment
    c. Prescription
    d. Handover
    e. Follow-up
    f. Repair and maintenance
5. Simplify the domains to describe both qualitative and quantitative data that ensures a deeper understanding therefore driving service improvement and innovation
6. Agree outcome metrics to ensure service user input into service quality and satisfaction
7. Design and describe the domains with clear, standardised definitions to ensure there is universally consistent reporting and application of any rules.
8. Appoint an independent oversite body such as the Alliance

## Conclusion

The simple survey has shown that the data collected by NHSE is not analysed or questioned. The data is ambiguous, interpreted and reported differently across ICBs and differently again within ICBs who commissioner multiple providers.

Until there is meaningful qualitative and quantitative data there is limited ability to drive up service improvement, innovation, quality and value for money – all of which could lead to efficiency and a more effective service for wheelchair users resulting in provision of the right wheelchair at the right time and as swiftly as possible across England.

There is a clear appetite from both commissioners and providers for more robust, consistent and relevant data which all those who responded to the survey would be keen to support.

**Appendix 1:**

**Survey questions for wheelchair service commissioners**

**Survey of commissioners regarding the Quarterly Wheelchair Service dataset.**

**Responses by 3rd October please**

The Wheelchair Alliance (the Alliance) would value your thoughts on the collection and use of data to evidence qualitative and quantitative performance of the wheelchair services you commission.

Your responses will be completely anonymous, and the outcome of the survey will be presented to the All-Party Parliamentary Group APPG for Wheelchair Users on October 16th 2025.

The Alliance feels that now is the time to review the data collection currently in place to ensure quarterly data is comparable, reviewed, enables best practice to be shared, and if there are any challenges identified, support to be given where necessary.

We would like to thank you in advance for supporting this short survey and if you would like to be part of the stakeholder group, please contact andy.conway@wheelchair-alliance.co.uk

Kind regards

Nick Goldup, CEO

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If you have any specific comments to add, please add them below:

**Appendix 2:**

**Survey questions for wheelchair service providers**

**Survey of providers regarding the Quarterly Wheelchair Service dataset.**

**Responses by 3rd October please**

The Wheelchair Alliance (the Alliance) would value your thoughts on the collection and use of data to evidence qualitative and quantitative performance of the wheelchair services you are commissioned to provide.

Your responses will be completely anonymous, and the outcome of the survey will be presented to the All-Party Parliamentary Group APPG for Wheelchair Users on October 16th 2025.

The Alliance feels that now is the time to review the data collection currently in place to ensure quarterly data is comparable, reviewed, enables best practice to be shared, and if there are any challenges identified, support to be given where necessary.

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