



# Ten Years of a Regional Service for the Provision of Environmental Control Equipment

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## Introduction and Background

Environmental Control Equipment Systems help people with a severe physical disability maintain independence by giving them the means to operate a range of equipment such as door entry, telephone, lights and other appliances from a central control. They are crucial in enabling the user to summon help in an emergency. These systems were available through the Department of Health until 1994 when the Service was devolved to the NHS on a regional basis. In North Thames, the Service has been provided since then through the Hillingdon Hospital with a Lead Commissioner for the region, currently Mr Gary Collier (Joint Commissioning Manager for Hillingdon).

The original brief was to implement the recommendations of the BSRM working party report on Environmental Controls (1994)<sup>1</sup> The model of Service delivery was further developed to incorporate the hub and spoke structure recommended in the second BSRM working party report (2000)<sup>2</sup>. The NSF for long term conditions<sup>3</sup> has recognised the need for the provision of appropriate equipment to support people with long term conditions to assist them to live independently, help them with their care, maintain their health, and improve their quality of life.

## Model

The Service remains the hub and spoke model across the region with a team created around each individual case showing appropriate collaboration of specialists in the local district and the tertiary service. The role of the centre includes a central data base, contract monitoring, clinical governance, quality & audit.

## Equipment

With increased technological development there has been a transition from 2 EC controllers available through 2 companies in 1994 to 15 controllers from several companies in 2007, serving a greater range of clinical function. By enabling access to computer control, the scope of EC is set to enlarge to encompass modern home IT networking.

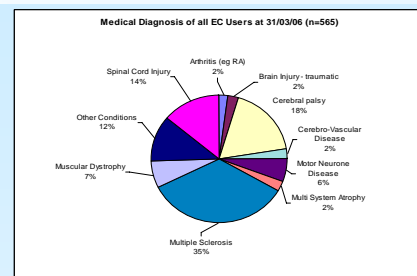
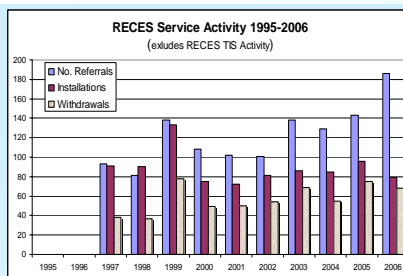
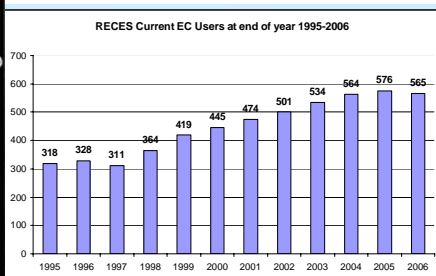
## Central Resource

The Regional nature of the Services has allowed development of a central pool of equipment used for temporary installations. This may be for speedy installations in urgent cases, or as an extended trial in patients to confirm suitability, rather than incur the cost of a permanent installation. An average of 20 temporary installations are made across the region annually with a saving of approximately £52 k.

## Activity and Funding

Activity levels for the last 10 years show a continuous increase in the number of referrals, installations and withdrawals with a progressive increase in the total number of EC users in the community from 318 in 1995 to 565 in 2006. The total number seen is over 1400 patients.

In contrast, the funding increase over the decade has been only in line with inflation. The growth and activity has been possible only because of the critical mass of the regional structure of the Service. The commissioning consortium has allowed budget consolidation with risk sharing between PCTs for the efficient use of funds and resources.

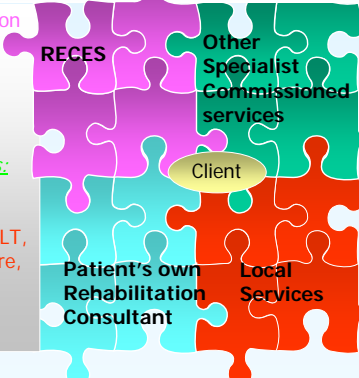


## Case Mix

The regional population served is 7.2 million from 27 PCTs in the North London, Hertfordshire and Essex region. The case mix over the years has remained virtually unchanged, MS being the commonest (35%). Recently an increase has been seen in the referrals of patients with MND but this is not reflected in the total number of users because of the shorter life expectancy.

## Who's Involved in Prescribing an ECS?

**RECES:** Consultant in Rehabilitation Medicine, Clinical Specialist Occupational Therapist, Clinical Scientist, Psychologist, Rehabilitation Engineer Service Manager & Administrator  
**Specialist Commissioned Services:** Specialist assessment centre & Specialist wheelchair services  
**Local Services:** Community OT, SLT, GP, Housing Associations, Telecare, Community Equipment and care providers.



## User's Views

- R, who suffered muscular dystrophy, often referred to the equipment as his hand and his wheelchair as his feet.
- R undertook his work and enjoyed life with a constant smile thanks to the equipment provided.
- Words can't express our gratitude to you for the system which gave my son independence, confidence, security, dignity and quality of life. He lived life to the full which would have been impossible without the equipment.

**Quote from "ECU use in cervical spinal cord injured patients in the North Thames Region" By S Paul, R Hanspal, A Woodcock, Ruth Groves. 2006.**

- Users most valued TV & Telephone control. 26% had used their ECU to summon emergency help.
- 78% said having an EC decreased dependency on carers.
- The mean number of devices controlled by ECU was 8.4

## References:

1. BSRM 1994 Working Party Report on Environmental Control. "Prescription for Independence"
2. BSRM 2000 Working Party Report on Electronic Assistive Technology
3. National Service framework for Long term conditions-Department of Health. 2005