



2025-26 QUALITY ACCOUNT

Quality Account

Delivering Better Outcomes

MOBILITY • POSTURE • INDEPENDENCE

REPORT NAVIGATION

Quality Account 2025–26

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Executive Summary

01 EXECUTIVE SUMMARY

Executive summary

AJM delivered outsourced NHS wheelchair services at scale during a year of mobilisation, growth and rising clinical complexity.

13.7m	100,112	29,594	437	0.44%	235
POPULATION SERVED	ACTIVE REGISTERED SERVICE USERS	TOTAL REFERRALS RECEIVED	FORMAL COMPLAINTS	COMPLAINTS AS % OF REGISTERED USERS	FORMAL COMPLIMENTS

The quality challenge is clear

Maintain strong experience outcomes while improving waiting times, communication and consistency of assurance reporting.



FFT good / very good

Executive narrative

AJM Healthcare continued to deliver outsourced NHS wheelchair services at significant scale in 2025-26, supporting a population of 13.7 million and more than 100,000 active registered service users.

The year combined growth, mobilisation activity and increasing clinical complexity. The improvement agenda for 2026-27 focuses on access, experience, reporting grip, workforce capability and operational efficiency.

2026-27 improvement focus

EXPERIENCE	Kindness, respect, fairness
ACCESS	Waiting times and communication
ASSURANCE	Improved consistency and oversight of quarterly reporting
CAPABILITY	People and operational capacity



02 About AJM

02 ABOUT AJM

Purpose and operating model

A clinically led provider focused on mobility, posture and independence.

Profile

AJM is a private limited company with turnover in excess of £30 million and a workforce of around 350 employees.

AJM's principal market is providing outsourced wheelchair services on behalf of the NHS. These services do not sit under CQC regulation, but AJM purposefully applies relevant CQC-style standards and methods to support quality, assurance and continuous improvement.

Company mission

Focus on our service users and in personalising their care

Provide equipment to empower staff to provide tailored solutions

Support staff to continuously develop skills and knowledge

Co-design our services with our communities

Embed a culture of compassion and respect for all

People

A relatively flat organisational structure supports an agile and flexible workforce.

Capability spans frontline clinical and technical teams, customer services, workshop, logistics, partnerships and head office support functions.

Company values

C.A.R.E.S



Collaborative
We are better together



Accountable
We are trusted partners



Respect Always
We prioritise wellbeing & safety



Excellence Driven
We take pride in delivering quality



Share Openly
We communicate with clarity

Board capability

AJM's board includes clinical, operations, customer relations, commercial and finance management directors with extensive industry experience.

02 ABOUT AJM

Services, footprint and key achievements

A broad outsourced wheelchair services network, plus approved repairer contracts and manufacturing support through Active Design.

Established outsourced services

Bexley	Bolton
Cambridgeshire & Peterborough	Hertfordshire
Hull & East Riding	Milton Keynes
North East London, including Waltham Forest and Tower Hamlets	North West London, including Harrow & Hillingdon
Plymouth, South Hams and West Devon	Portsmouth, Fareham & Gosport, and South East Hampshire
Somerset	Staffordshire & Stoke-on-Trent

Key achievements during the period

- ✓ Re-awarded the North East London integrated wheelchair service in July 2025, including Waltham Forest and Tower Hamlets
- ✓ Won and mobilised the Berkshire West integrated wheelchair service in August 2025
- ✓ Mobilised the North Yorkshire & York integrated wheelchair service in September 2025
- ✓ Continued to operate approved repairer contracts in Homerton, Brighton & West Sussex, and Camden & Islington
- ✓ Continued to support Active Design, manufacturing specialist seating and the Neo wheelchair base
- ✓ Maintained strong FFT results, with 97.6% rating AJM good or very good

Evidence-led stakeholder reporting

The designed report brings achievements, quality risks and improvement priorities to the front, rather than leaving them buried in narrative sections and dense tables.



03

Leadership Reflections

03 LEADERSHIP REFLECTIONS

Leadership reflections

Statements from Mat Pickering, CEO, and Dave Long, Clinical Director.



We are committed to providing high standards of care for our service users.

Statement from Mat Pickering, CEO

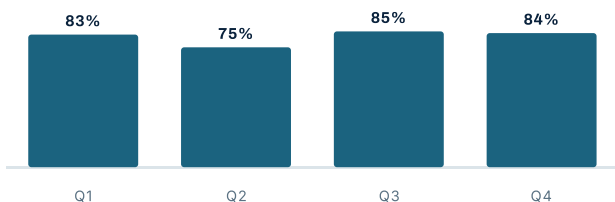
AJM's seventh Quality Account provides an update on progress over the past year and objectives for the year ahead. The year saw increasing complexity of referrals, requiring ongoing process review, learning and improvement.

Waiting times have been managed through the dedication of staff, who remained responsive, adaptive, creative and service users while addressing pressures across the wider NHS.

AJM mobilised two new NHS wheelchair service contracts in Berkshire West and North Yorkshire & York, and was re-awarded the North East London and Waltham Forest contract, now including Tower Hamlets.

18-week RTT performance

Adults and children (%)



Achievements reported

- ✓ ISO standards accreditation
- ✓ CECOPS accreditation
- ✓ Therapy and engineering apprenticeships
- ✓ Personal Wheelchair Budget development
- ✓ SBTi accreditation in pursuit of carbon net-zero



'I am enormously proud of all our colleagues, their contribution, and the passion they demonstrate whilst representing AJM.

My Leadership Team and I are deeply committed to driving the business forward and delivering great care for our service users'

Mat Pickering
Chief Executive Officer

03 LEADERSHIP REFLECTIONS

Clinical quality agenda

Clinical assurance, shared learning and professional development remained central themes in 2025-26.

Statement from Dave Long, Clinical Director

Progress with the quality agenda continued during 2025-26. Learning from quality assurance activity was applied across services, supporting policy and process development.

Actions taken in 2025-26

- Personalisation remained part of organisational culture, supported by continued promotion of Personal Wheelchair Budgets.
- Supplier performance was monitored in relation to KPI attainment.
- Incidents, near misses, safeguarding, complaints and compliments were reviewed for learning.
- Health and safety audit outcomes continued to inform improvement.
- Clinical Leads' Forum supported shared values, learning and service development.
- Apprenticeship programmes continued to support registration pathways for therapy and engineering staff.

Clinical Leads' Forum

The forum continues to address clinical service delivery, build shared values and support learning between leads working on both projects and day-to-day issues.



Dave Long
Clinical Director



04 Year at a Glance

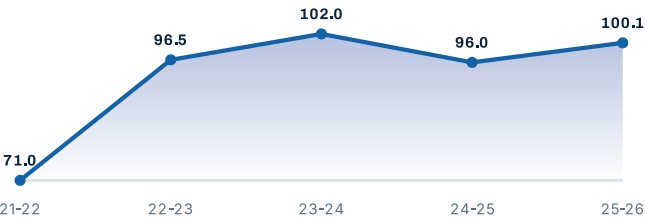
04 YEAR AT A GLANCE

A brief summary

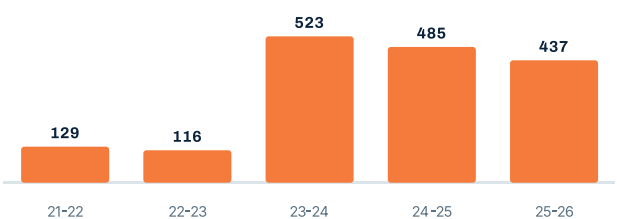
Headline operating, quality and workforce metrics for 2025-26, with trend context.

13.7m	100,112	29,594	6,118	379	13
POPULATION SERVED	ACTIVE SERVICE USERS	TOTAL REFERRALS	FFT RESPONSES	EMPLOYEES	ICB PARTNERS

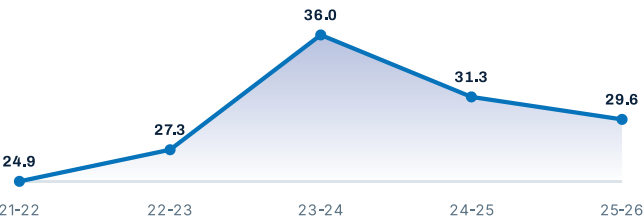
Active service users (000s)



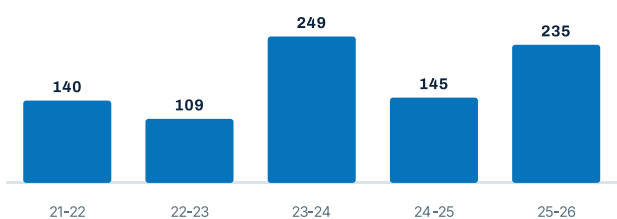
Formal complaints



Total referrals received (000s)



Formal compliments



04 YEAR AT A GLANCE

Service metrics

Five-year view of key measures used to contextualise quality, operational and workforce performance.

Metric	2021-22	2022-23	2023-24	2024-25	2025-26
Population served by AJM Healthcare	12.4m	13.3m	12.9m	13.3m	13.7m
Active registered service users	70,957	96,476	102,034	96,037	100,112
First referrals received	9,880	11,430	15,328	14,513	14,063
Re-referrals received	15,063	15,887	20,711	16,759	15,531
Total referrals received	24,943	27,317	36,039	31,272	29,594
Responses to NHS Friends and Family Tests	17,252	14,572	13,905	11,832	6,118
AJM Healthcare employees	288	337	385	350	379
Responses to our staff survey	75%	51%	48%	48%	49%
Formal complaints received	129	116	523	485	437
Formal compliments received	140	109	249	145	235
NHS Integrated Care Board partners	N/A	13	13	13	13
NHS Trusts commissioning AJM services	8	4	4	3	3

What the data says

- Scale remained significant, with 13.7m population served and over 100,000 active registered service users.
- Total referrals softened from the 2023-24 high point but remained above the 2021-22 and 2022-23 baseline.
- FFT responses reduced materially, making restoration of survey response rate a sensible 2026-27 priority.
- Formal complaints reduced year on year while compliments increased from 145 to 235.

05

Quality Strategy Review

05 QUALITY STRATEGY REVIEW

Review of 2025-26 quality strategy and priorities

Progress has been made, but several priorities have intentionally rolled forward into 2026-27.

01 Reduce waiting times for clinic appointments, equipment delivery and repairs

Progress has been made, but further work is required to reach the required levels; this continues into the next period.

02 Improve communications with service users, including DrDoctor service users portal deployment

DrDoctor was not deployed during the reporting period, but remains a firm target for the year ahead.

03 Ensure compliance with quarterly quality reporting to ICB customers

Success has been varied, with some services not keeping pace with expectations; this will be a key focus for the next period.

04 Attract healthcare professionals to AJM

Recruitment to HCPC registered positions remains challenging, but progress has been made through overseas sponsorship and therapy apprenticeships.

05 Optimise operational efficiency through daily escalation and process improvement

Ongoing work; many process revisions have been made to enhance service provision.

06 Develop close partnership working with acute, community and social care organisations

Work continues in a variety of settings to integrate services more cohesively with others.

07 Support manufacturing accreditation to ISO 13485:2016 Medical Devices QMS

Work on accreditation continues; this builds on the current ISO 9001 accreditation.

08 Invest further in ESG and carbon reduction pledges with SBTi

Work continued through the period and remains a priority, with a review of Science Based Targets planned.

06 QUALITY, SAFETY AND EXPERIENCE

Culture, standards and accreditations

Quality practice is supported by external standards, internal benchmarking and active professional engagement.

AJM has developed a culture of embracing change, sharing learning and adopting proven NHS initiatives into policy and practice. Regular horizon scanning, audit and review support alignment with national, CQC, NHS and ICB quality requirements and guidelines.

Professional and system partners

Academy for Healthcare Science (AHCS)
British Healthcare Trades Association (BHTA)
Chartered Society of Physiotherapy (CSP)
Health and Care Professions Council (HCPC)
Institute of Physics and Engineering in Medicine (IPEM)
Medicines and Healthcare products Regulatory Agency (MHRA)
National Wheelchair Managers' Forum (NWMF)
NHS England
Posture and Mobility Group (PMG)
Register of Clinical Technologists (RCT)
Rehabilitation Engineering Service Management Group (RESMaG)
Royal College of Occupational Therapists (RCOT)

Standards and accreditations

British Healthcare Trades Association Code of Practice
Caldicott Guardian registered
CECOPS accreditations
Cyber Essentials
Data Protection Officer registered
Disability Confident Employer
GDPR certified
Information Commissioner's Office registered
Information Risk Owner registered
ISO 9001:2015 Quality Management System
ISO 14001:2016 Environmental Management Systems
ISO 45001:2018 Occupational Health and Safety Management Systems
ISO 27001:2022 Information Security Management
NHS Data Security and Protection Toolkit
Working towards ISO 13485:2016 Medical Devices QMS

06 QUALITY, SAFETY AND EXPERIENCE

Contract quality reporting

Commissioner reporting includes performance, quality and experience measures, with quarterly reporting consistency identified as an improvement area.

Monthly Management Information reports

Performance KPIs

Quality requirements and audit reports

Customer satisfaction measures

Stakeholder engagement

Personal Wheelchair Budget uptake

Incident reporting

Staffing matters

Quarterly quality reporting

ICBs should receive quarterly quality reports covering service users safety, clinical effectiveness and experience, including safeguarding, incidents, IPC, risk, workforce, audit, external assessment, alerts, complaints, compliments and interaction with service users and stakeholders.

IMPROVEMENT FOCUS

This was not provided consistently across all contracts during the reporting year and will be addressed in the year ahead.

Assurance model

Data capture

LOCAL AND CENTRAL SYSTEMS

Review

MANAGERS, CLINICAL LEADS AND QUALITY FORUMS

Report

MONTHLY MI AND QUARTERLY QUALITY REPORTING

Improve

LEARNING, ACTION PLANS AND SERVICE CHANGE



06

Quality, Safety & Experience

06 QUALITY, SAFETY AND EXPERIENCE

Service user safety

Incident and near-miss learning is framed through PSIRF, with a focus on understanding context and sharing learning.

10	15	28	11
SERIOUS INCIDENTS — E.G., SAFEGUARDING REFERRAL, PRESSURE ULCERATION, HOSPITAL TREATMENT	MODERATE INCIDENTS — E.G., ANKLE TWISTED FROM FOOT GETTING CAUGHT IN DOORWAY	MINOR INCIDENTS — E.G., PINCHED SKIN WHEN BUCKLING PELVIC STRAP	NEAR-MISS REPORTS — E.G., TOPPLING WHILE TRANSFERRING

PSIRF-led learning

Using the Service Users and Incident Response Framework (PSIRF), AJM evaluates contextual information in incident reports to understand and apply learning, which is shared across the organisation for the benefit of service users and staff.

PSIRF supports a safety culture that avoids blame and seeks to understand how incidents arise in order to prevent recurrence.

Medical device alerts

Incidents and near misses relating to medical devices are reported to the MHRA. Device alerts from the MHRA and manufacturers are actioned using AJM's equipment database.

Psychological safety

Staff wellbeing is supported through supervision and internal networks, including the forum for clinical leads and the Freedom to Speak Up policy.

06 QUALITY, SAFETY AND EXPERIENCE

Service user engagement

Partnership, engagement activity and feedback mechanisms help AJM co-design and improve services.

A user-centric service focused on personalisation is a key priority in the design of safe, high-quality provision. AJM supports partnership and engagement activity with service users, healthcare professionals and stakeholders to deliver joined-up services.

Local stakeholders have been mapped in each service. Joint projects are established to meet locality needs, such as work with local schools. AJM also links with national organisations including the Motor Neurone Disease Association (MND Association).



97.6%

overall experience
good / very good

6,118 surveys were gathered in the reporting period. AJM recognises this reduction and aims to restore response levels in the period ahead.

Engagement mechanisms

Local service user groups and forums

National forum with representatives from local groups

Links into the Wheelchair Alliance User Engagement Group

Bespoke service websites with referral and contact information

Paper and web-based survey collection to support accessibility

Where poor experience is reported

Poor or very poor responses accounted for 1.6% of responses. Common themes were waiting times to appointment and/or equipment receipt, and communication from service centres. DrDoctor is identified as an enabler for better access and updates.

06 QUALITY, SAFETY AND EXPERIENCE

Complaints and compliments

Feedback is actively encouraged and used to improve practice across the organisation.

437

FORMAL COMPLAINTS ACROSS
WHEELCHAIR CONTRACTS — 0.44%
OF REGISTERED SERVICE USERS

235

FORMAL COMPLIMENTS RECEIVED —
USED TO REINFORCE POSITIVE
PRACTICE

1.6%

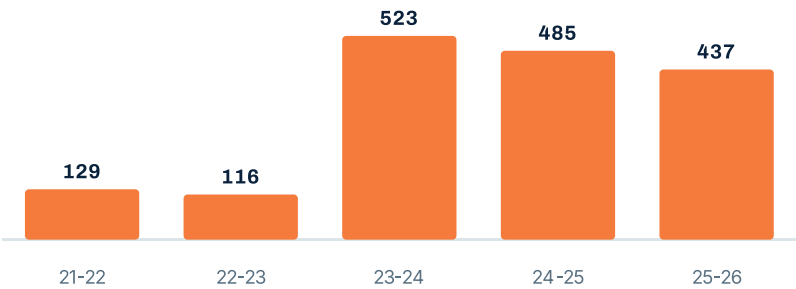
POOR / VERY POOR FFT RESPONSES
— COMMON THEMES: ACCESS AND
COMMUNICATION

Learning from feedback

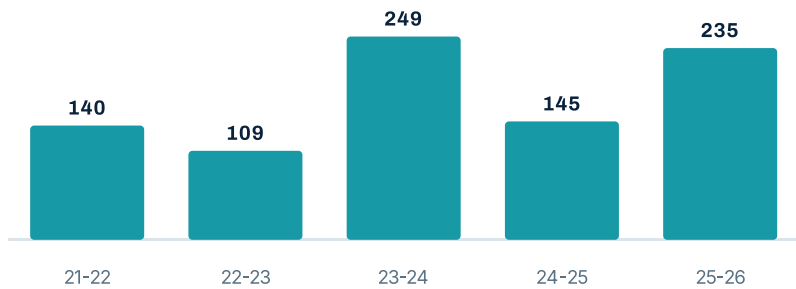
AJM actively encourages feedback, good or bad. Formal complaints are reviewed with commissioning and operational teams and suppliers, with improvement work focused on communication, repairs performance and timely delivery of equipment.

Compliments are also used as a source of learning and reinforcement. AJM remains committed to applying learning from both complaints and compliments to improve the quality of provision nationally.

Complaints trend



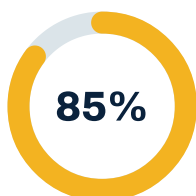
Compliments trend



06 QUALITY, SAFETY AND EXPERIENCE

Safeguarding

Safeguarding for children and adults at risk remains a core commitment, supported by policy, training and supervision.



85.0%
training compliance against
90% target

Safeguarding approach

AJM is committed to safeguarding for both children and adults at risk, encompassing the whole family. Safeguarding concerns are managed internally under a regularly reviewed policy, with input from external stakeholders.

Risks are logged, assessed, reviewed and actioned by local teams, with action plans developed for gaps in mitigation. The Clinical Director is the Designated Safeguarding Lead.

2026–27 focus

AJM aims to become more proactive in managing safeguarding concerns, working with ICB colleagues, local authority social workers and other relevant stakeholders to improve service user experience and outcomes.

Safeguarding supervision

Safeguarding supervision is part of clinical supervision and informs policy development. Learning from supervision and case reviews is applied within local teams and across national teams to promote effective practice.

07 PEOPLE AND WORKFORCE

People and workforce

Supporting staff through rising clinical complexity, wellbeing measures, training and internal development.

The workforce has contended with increased clinical complexity. AJM has continued to support staff wellbeing through its employee assistance programme and a closely engaged management team.

Mandatory training compliance for the period was 88% against a target of 90%. Most training is available as e-learning, with classroom sessions arranged for practical courses including manual handling, level 3 safeguarding and resuscitation.

2	3	11	24	10
RIDDOR INCIDENTS — STAFF OFF SICK FOR SEVEN OR MORE DAYS WITH WORK-RELATED INJURY	MAJOR STAFF INCIDENTS — E.G., STAFF HOSPITAL TREATMENT	MODERATE STAFF INCIDENTS — E.G., SIGNIFICANT GRAZE OR BRUISE	MINOR STAFF INCIDENTS — E.G., SMALL CUTS AND BRUISES	NEAR MISSES — E.G., TRIPPING BUT NOT FALLING

Annual staff survey — 49%

Response rate in 2025-26

Pay aligned with similar NHS services

Consistent manager support and process

Operational efficiency and capacity planning

Recruitment focus to meet demand

Mandatory training — 88%

Compliance vs 90% target. Focus remains on closing the gap to target, with classroom sessions arranged for practical courses.

Staff development — 38

Staff promotions. AJM values staff development and promotion from within, with progression examples from frontline leadership to company-wide clinical service roles.

08 GOVERNANCE AND ASSURANCE

Governance disciplines

Freedom to Speak Up, infection prevention, information governance and data quality provide core assurance disciplines.

NO EVENTS

Freedom to Speak Up

There were no whistleblowing events during the reporting period. Course compliance remains high and the policy has been reviewed. The Freedom to Speak Up guardian remains available; one interaction took place and was resolved.

ISO 27001

Information governance

AJM maintained ISO 27001:2022 accreditation. Cyber Essentials certification demonstrates that IT systems are interrogated for weaknesses. Four information security breaches occurred, none reportable to the ICO.

ATP SWAB TESTING

Infection prevention and control

Policies follow NHS procedure and guidance and are integrated into quality management and health and safety systems. A dedicated national manager oversees training, policies, procedures and audits.

DAILY CONTROLS

Data quality

Robust procedures ensure data standards are met through ISO 9001:2015 and CECOPS systems. Daily data quality reporting continues, with issues addressed locally and monitored centrally.

Data and information security as an operating discipline

Quality assurance depends on trusted data, controlled processes and clear governance. These disciplines support commissioner confidence and continuous improvement across services.

09 ENVIRONMENT AND ESG

Environmental impact and ESG

AJM continues to take a proactive approach to environmental impact, sustainability and corporate social responsibility.

AJM has maintained ISO 14001:2016 accreditation through the reporting period. The environmental, sustainability and corporate social responsibility policy includes reducing harmful emissions and energy use, and procuring from sustainable sources where possible.

ESG requirements remain at the forefront of operations and AJM will continue to work on this in the year ahead.

Electric vehicles

Continued investment in electric vehicles and exploration of renewable solutions

Reduced travel

Continued use of video conferencing software to reduce travel

Sustainable supply chains

Sourcing more products through local and sustainable supply chains

Science Based Targets

Signed up to SBTi with a carbon reduction target for the next four years

Direction of travel

In 2026-27, AJM will continue to review the application of Science Based Targets for carbon reduction, building on the SBTi direction highlighted in the prior year strategy review.

10 2026–27 PRIORITIES

Quality strategy and priorities for 2026–27

A focused improvement plan centred on experience, access, communication, assurance, workforce capability and operational efficiency.

Ambition

Remain a leading provider of wheelchair services in the UK by providing high-quality, service user-centred, efficient and innovative services which enable personalisation at every opportunity.

- 01** Provide clinical services with kindness, respect, fairness and empowerment to ensure high-quality service user experience.
- 02** Reduce waiting times for clinic appointments, equipment delivery and repairs in response to service user feedback.
- 03** Improve communications with service users and restore survey response rates to previous levels.
- 04** Ensure compliance with quarterly quality reporting to ICB customers.
- 05** Attract healthcare professionals by providing the information, facilities, tools, training, support and development opportunities they need.
- 06** Optimise operational efficiency through continuous process improvement and stakeholder engagement.

A APPENDIX

ICB Supportive Statement

Commissioner response reproduced as an appendix to the Quality Account.

NHS

West and North London

24 June 2026

West and North London ICB
15 Marylebone Road
London
NW1 5JD
0203 198 9743

**NHS North West and North London Integrated Care Board Statement
AJM Health Care (AJM)**

West and North London Integrated Care Board (WNL ICB) welcomes the opportunity to respond to the AJM Health Care Quality Account for 2025/26, which we received on 22 June 2026.

We would like to thank AJM for a comprehensive report which provides a clear overview of quality performance, achievements in the previous year and areas for further improvement.

We commend AJM for its outstanding achievements and commitment to driving a culture of continuous improvement, particularly, in reducing the waiting times and repairs.

We recognise AJM is eager to improve communication with service users in response to feedback and has invested in the deployment of *DrDoctor* patient portal. We note that this remains a firm target for the year ahead.

We are pleased that the Patient Safety Strategy and Patient Safety Incident Response Framework (PSIRF) are now business as usual. This shift ensures meaningful engagement for patients, families, and carers.

In the reporting year, AJM has worked with relevant stakeholders, to ensure patient safety and improved service user experience. Despite this achievement, we note there are still ongoing areas of work which include proactive management of safeguarding concerns and improved safety culture.

The ICB are supportive of AJM quality priorities for the year ahead, including treating service users with kindness and respect, reducing waiting times and improving service user experience.

We look forward to working collaboratively with you over the next year.

Yours sincerely,

Jennifer Roye
Chief Nurse Officer
NHS West and North London

Quality Account 2025–26

Stakeholder report

13.7m

POPULATION SERVED

97.6%

FFT GOOD / VERY GOOD

100,112

ACTIVE SERVICE USERS