



All-Party Associate Parliamentary Limb Loss Group

for the Promotion of the Prevention of Limb Loss and of the Provision of Prosthetic, Orthotic, Wheelchair/Special Seating, Medical and other vital Rehabilitation Services to persons of all ages suffering Limb Loss and associated Complex Physical Disabilities in the United Kingdom and Internationally

CHOICE IN NHS WHEELCHAIR AND POSTURAL SEATING SERVICES

“Much More Joined-Up Approach Needed”

The influential POSTURE AND MOBILITY GROUP has announced the publication of its commissioned report “SERVICE USERS’ VIEWS ON CHOICE IN NHS WHEELCHAIR AND POSTURAL SEATING SERVICES” – author Jo Goodship, Admiralty Consulting Ltd. The report is available to download from the PMG website <http://goo.gl/FJCCvg> (this is deliberately not a hyper link please cut and paste into your browser).



Limb Loss Group Member of Parliament **ALISON SEABECK MP** says: *“I and my colleagues are continuously aware of the vital importance of Special Seating in securing the sustained rehabilitation and highest possible quality of life and independence of people of all ages, including Veterans, with long term severe mobility and posture problems. We therefore welcome the work of the members of the Posture and Mobility Group and with it the outreach of the National Wheelchair Managers Forum and the guidance of the British Society of Rehabilitation Medicine.”*

The Report will be on the agenda for the meeting of the All Party Parliamentary Limb Loss Group on Wednesday 29 October.

This welcome report should obviously be read in full, but here are some taster extracts to illustrate the importance of the Report, starting with the Conclusion of the eminent Researcher, which provides a sensible and sensitive framework for the complex services pictures presented by Users.

CONCLUSION

This has been a rewarding, if at times, challenging commission. I have to conclude the Department of Health’s suggestion to PMG that it is not easy to consult with wheelchair users, something about which I was initially very sceptical, is probably a fair assessment of the situation. Recruiting user consultants for this scoping exercise proved difficult and resource-hungry, not least in terms of the time and effort needed by both WPS services and the author just to get to the point at which a service user could be contacted to ascertain whether or not they would be willing to take part in the consultation, either by attending a focus group or submitting comments in writing.

Considerable follow-up action and reminders were also necessary and, even then, some users simply did not attend their focus group or submit comments as agreed. Despite the problems, however, it is not impossible to engage with users and, as demonstrated by the findings outlined in this report, when given the opportunity to voice their perspective on service policy and delivery, they can offer useful insights to the ways in which services can be made to work more efficiently and effectively. The service users who helped with this exercise were wonderful people with a genuine desire to help improve NHS wheelchair and postural seating services. They were also grateful for an opportunity to express some of their frustrations about the false economies they observe within current service policy and practice.

When it comes to 'choice' one seasoned service user pointed out 'that wheelchair users, like everyone else, should be allowed to make their own personal choices about the wheelchair and equipment they use, even if those choices are perceived by others to be bad ones' ... which raises the question of whether 'consumer choice' in public services is realistic and anything other than rhetoric when there are insufficient resources available to meet the healthcare and social care needs of an ever-growing and increasingly ageing population.

GOOD EXPERIENCE OF SERVICE IN USER'S OWN WORDS

Wheelchair Services are a vital part of healthcare. The right wheelchair, in essence, means a better quality of life for the service user ... I had been in a Harrier Plus standard wheelchair for many years. The WPS Service came to re-assess my needs because the chair no longer fitted me. Being in a wheelchair full time means that I need one to "live" in essentially. My carer also had to constantly reposition my feet on the footplates which was tiring for her. We showed the Wheelchair OT and the wheelchair engineer my shower chair as a guideline. This is what is known as a tilt in space chair meaning the back can recline. My criteria for a new chair were: good back support; long levels of comfort; and, no repositioning of feet constantly. The wheelchair service came up with the Quantum 600 XL. What a difference it has made! I can spend the day in comfort as the chair has a large back support. I can make eye contact. People no longer have to look down at me during conversations. My feet do not require endless repositioning. My head is also supported by a headrest now. The only con is that I am limited in the taxis I can use due to the increased height of the seat. But the pros far outweigh the cons, I can assure you.

Wheelchair Services has been for too long a Cinderella service. [Wheelchairs] are not luxury items, but instead essential for independence and a fulfilled, fully active life.

CHOICE THAT REALLY MATTERS FIT-FOR-PURPOSE CHAIRS

There was universal agreement among user consultants that any wheelchair provided by the NHS (or through a provider service commissioned by the NHS) should be 'fit-for-purpose'. That is, it should be: suitable for a user's needs (often complex and multi-faceted); of a quality that could cope with the demands placed on it and withstand every day wear and tear; and, of a design and/or adapted to meet users' medical, physical AND social needs.

CONSTRAINTS ON NHS WHEELCHAIR AND POSTURAL SEATING SERVICES

The vast majority of user consultants were not critical of WPS service staff, who they perceived to be working under great pressure and centrally-imposed constraints that combined to make their work very difficult at times. Users were well aware of the financial pressures placed on wheelchair services from above – one user described wheelchair services as 'command rather than demand-led services'.

IMPROVING CHOICE

In terms of the key ways in which user consultants perceived choice in service provision could be improved, there was again universal agreement that the Government (through the NHS and WPS services) needed to adopt a more holistic approach to meeting wheelchair users' needs: medical, physical and social. Rather than individual Government departments, and divisions within those departments, operating in silos, looking only at reducing and guarding their individual budgets, there needed to be a much more joined-up approach to meeting users' needs and recognition, at the highest levels, that savings made in one service area often only led to increased costs in another area ... but, after all, it was all public money.

EVIDENCE FOR EFFECTIVENESS

Further to the welcome research from the Posture and Mobility Group it is relevant that the National Clinical Guidelines from the British Society of Rehabilitation Medicine state:

There is published evidence that specialised seating contributes to:

- Reduction in hip subluxation
- Fewer pressure sores
- Improved upper limb function
- Improvements in respiration and feeding
- Improved personal interaction
- Better opportunities in education and employment.

Editorial Note: For further information please contact OLWEN ELLIS at the POSTURE AND MOBILITY GROUP on olwen.ellis@pmguk.co.uk

If you would like a printed version (price £5) please contact Olwen.
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