



21 October 2008

**Draft - Wheelchair and Seating Services Modernisation: an action plan.
Consultation Comments**

There are many positive ideas and proposals contained within this draft and the plan to integrate management of the services to provide co-ordinated and seamless provision which is the ethos driving the consultation is welcomed.

From page 3 - The document mentions 'assistive technology' a number of times, however there is no definition given of what is meant by this in the document. It mentions the 'specific expertise' of wheelchair centres in this area – which, dependant on their definition of 'assistive technology' gives concern. This could mean environmental controls and / or high tech Augmentative and Alternative Communication (AAC) systems. Any role development of the Wheelchair and Seating Services to include provision of AAC needs to be clarified.

The 'Moving forward' review of wheelchair and seating service published in 2006 proposed the management of AAC Services with the Wheelchair and Seating Services. This was viewed positively however does not seem to be within the action plan.

At 'provision' stage of equipment there needs to be a double check of the compatibility of the wheelchair with any assistive technology currently used by the individual (high tech communication systems and environmental control).

Page 4 - The Multi Disciplinary Team (MDT) approach is to be commended. Collaboration and partnership working exists within the service and those professions for whom multi-disciplinary working is part of their core training are already skilled in this. Other staff groups may however require some further training.

Page 5 - The need for stakeholder groups for each health board area may be addressed through the PLG (Professional Liason Group) that currently exists.

Page 8 - It may be more appropriate for the Lead within each Wheelchair and Seating Service to provide the professional leadership for wheelchair and associated postural management as opposed to the AHP Director within each NHS Board who would not be in as strong a position to influence across multiple Boards.

Page 8 - Communication is important in ensuring that provision of wheelchair and seating, and the mounting of high tech communication systems and, where required, mounting of switches for individuals to access their system are compatible. With regard to this, direction to check any requirement for mounting of high tech communication systems and establish the method that the system is / will be accessed should be included in the standard protocols that are to be developed by WSS.

Page 12 - The setting for wheelchair and seating services should be within an established Rehabilitation Centre as opposed to another unit where the difficulty of establishing close links with the rehab teams will remain.

Page 14 - At present the local therapists within NHS Ayrshire and Arran are well supported by Westmarc staff and are able to see patients with complex needs at the Rehabilitation centre. There are however constraints within the current accommodation which will need to be addressed for the increased future capacity which is envisaged.

Page 17 - It would make sense as proposed, to link provision of standard wheelchairs and static seating through joint equipment stores however there will be some stock control issues and deciding responsibility for each aspect of the task will need clarified.

Page 17 - The use of the information gathered from Single Shared Assessment will require clarification. If the need for a wheelchair / review etc is identified then it needs to be clear who is responsible for ensuring this is followed-up.

Page 17 - Inclusion of a section to establish any requirement for mounting of high tech communication systems and establish the method that the system is/will be accessed should be included in the action point raised on page 17 to 'develop a standard assessment tool'.

Page 18 - The development of Service Level Agreements with local nursing and care home providers is welcomed as nursing home residents should have access to equipment that is suitable /safe and well-maintained in order to enable them to maintain links with the local community

Page 20 - Providing a service that is anticipatory will require additional resources as there are no planned review appointments at present. Patients currently need to re-refer into the system.

Page 24 - The document would benefit from explicitly identifying links between Wheelchair and Seating Services and the national and regional AAC Centres in the Collaborations and Partnership section.

Page 26 - 'Skill mix review' which is to be carried out by March 2009 needs to establish the knowledge base of mounting and accessing of high tech communication systems and identify key contacts in the specialist AAC centres.