

Scottish Government Consultation on the Wheelchair & Seating Service Modernisation Draft Action Plan

NHS Highland – Local Consultation Workshop

Workshops, 29 October 2008, Centre for Health Science, Inverness

Introduction

A mixed group of 23 service users, carers, and NHS staff participated in group discussion on the Draft Action Plan. The following response has been prepared from the notes of the group work, in accordance with the wishes of the participants.

Response

The Draft Action Plan is broadly welcomed, and if the proposed actions are implemented, it will make a difference to service users. However, the focus is clearly on making existing services more effective and more efficient, and there is a real concern that these actions alone will not deliver meaningful improvement in the quality of people's lives.

The actions on referral pathways and partnership working are positive, and while the 18 week referral to treatment target may also help to speed up the service, people are seeking greater clarity on the implications of this target. There is a view that there should be separate targets for services to children.

There is a strong feeling that the funding for WSS across Scotland should be based on people's needs, and a recognition that the funds available to the NHS cannot meet all the needs of all service users.

Some participants expressed a view that NHS funding for WSS should be targeted to people with more complex needs - for example to children and to adults with degenerative conditions – so that the funds follow the needs. This would allow people with more complex needs to have good quality products, selected for each individual's unique requirements. This would also allow service users & carers and staff to develop good working partnerships, an important ingredient in review and reassessment. It would also free up time so that service users and carers can be properly trained and supported by staff, helping individuals to maximise their comfort and independence.

The staff who work in any part of WSS need to be supported by relevant learning, and opportunities to develop and enhance their skills. There will be a need to grow this workforce as demands rise, so having an ongoing commitment to staff training is essential to maintain the existing staff and also to encourage new staff in the future. Training comes at a cost, so this has to have recurring funding. For obvious reasons, training packages should be able to be delivered locally as much as possible.

It is recognised that the detail of how services are provided will vary across Scotland, but the availability of local clinics is essential. There is no particular

view on the proposal that separate clinics are provided for children and for adults, but in view of the geography and dispersed locations of service users in Highland this may not be an effective or realistic way to arrange clinics in our area.

There is a requirement to explore more fully some definitions of “need”. In reality, the needs of service users are not just about the health conditions people experience, but about people’s rights as citizens. Linked to this is a clear message that this goes beyond the NHS, and that other public agencies also have responsibilities.

For example, local authorities have a key role in community care, and through their social work services provide equipment to support independent living, often through joint equipment stores. There is an obvious advantage to the 80% of people whose WSS needs are for fairly simple equipment if they could be catered for within local Joint Equipment Stores & staff. Typically these services are supported by local Handy person staff who could quite reasonably take on the delivery and routine maintenance of basic stock items. This would provide people with a quick, local service, and importantly, it would allow people with more complex needs to become the focus of the specialist NHS staff, so that the available expertise and NHS funds are targeted to people with the greatest health needs. This would require the local authorities to invest in basic wheelchairs as part of their core equipment stocks, and this must be considered during the Scottish Government review of equipment, currently in progress.

There is strong feeling about the range and quality of products provided at present, and a clear desire from service users and staff to have more flexibility in procurement decisions. Service users wish to be more actively involved in procurement – in the choice of products, providing feedback and evaluation of products, and informing future procurement decisions.

It is suggested that there should be one procurement process for Scotland, rather than each Board having its own contracts. The benefits of this approach would be to have a relatively small core stock list, but greater buying power for the NHS, and therefore the ability to negotiate more aggressively on prices for these items. It would also make it easier to keep up to date with changing technologies and new products, leading to better informed purchasing decisions for people with more complex needs. The disadvantage would be difficulty getting spares & repairs for the stock currently in use.

The service users who currently feel they have no choice but to buy their own products need better information to guide them in selecting items. It is suggested that a “Buyers Guide” is developed to advise on e.g. quality standards, kitemark or equivalents. In addition, it should provide a list of “approved” suppliers, i.e. reputable companies, and those who will provide a repair service to people in the highlands.

Service users and carers have been involved in previous reviews which have not delivered any meaningful improvements, and there is a strong feeling that these actions must be backed up by adequate investment in order to deliver improvement. It is recognised that the draft Action Plan is the start of a process of change and improvement. Service users need to continue to be involved as this moves forward to implementation, and to then be involved in ongoing monitoring and evaluation at national and local level.

Respondent Information

The above is a group response.

The group is – Consultation Workshop Group of Service users, carers, and staff from NHS Highland area.

Contact details – this is not a formal group so there is no single contact point. Group members can be contacted via NHS Highland through:

Maree Patience,
Rehabilitation Engineering Secretary,
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The Group members give consent to this response being published on the Scottish Government website, and to it being circulated within government departments.

Group members consent to being contacted again by the Scottish Government via the NHS Highland contact above.

Prepared by Gill Keel, Head of Public Engagement, NHS Highland, on behalf of the group.

