



Associate Parliamentary Limb Loss Group

for the promotion within Parliament and Whitehall of the prevention of limb loss and the provision of prosthetic, orthotic, wheelchairs & special seating, and other vital rehabilitation services/technologies for all persons with limb loss in the United Kingdom and Internationally.

Minutes of the Meeting held at 3pm on Wednesday 28th January 2009 in Committee Room 10 at the House of Commons, London, SW1A 0AA.

PRESENT

MEMBERS: Dr Doug Naysmith MP (in the Chair); Caroline Spelman MP; Angela Watkinson MP.

ASSOCIATES: Dr Neil Brown; Paul Charlton; Robert Chatfield; Colin Dance; Ray Edwards; Amy Edwards; Philip Garvin; Peter Graham; Christopher Harwood; Glyn Heath; Wayne Henderson; Sarah Hodge; Ray Hodgkinson; Jill Higgins; Clare Johnson; Zafar Khan; Denis May; Safak Pavey; Gary Phillips; John Reid; Ernie Stables; Bob Watts; Philip Yates.

Advisor – Sam Gallop CBE

Administrator – Alex Hyde-Smith

Apologies for absence were received.

88. MINUTES OF PREVIOUS MEETING HELD ON 5th NOVEMBER 2009

The Minutes were agreed as a correct record.

89. NHS SUPPLY CHAIN REHABILITATION COUNCIL

It was noted that the NHS Supply Chain was seeking applications to its new and welcome Rehabilitation Council. Nominations could be submitted via Gail Mackay on 019243288848. Patient and other representation was being sought, and the Parliamentary Group would be kept informed.

90. KNOWLEDGE SHARING NETWORK

The Knowledge Sharing Network document was agreed in principle. Consultations with other interested Parliamentary Groups would continue, with a view to tabling the final document at the forthcoming APLLG AGM, on Wednesday 22nd April.

91. INTERNATIONAL EARLY DAY MOTION

The draft International Early Day Motion (**attached as ANNEXE A**) was agreed in principle, in order that consultation with **JOHN BATTLE MP** and **JOHN BERCOW MP** for the All-Party Overseas Development Group, and **DR. VINCENT CABLE MP** and **ANN CLYD MP** for the All-Party Human Rights Group might proceed, and the EDM thereafter be published.

It was noted that the EDM was being commented on favourably in United Nations circles.

(Reports from **POWER International** and from the **CAMBODIA TRUST**, typical of the responsive and caring services of the Group's entire International NGO Associate Members, are attached as **Annexe B** and **Annexe C**).



Santar from Laos

92. SUSTAINING INTERNATIONAL SUPPORT

A Report from **RESPONSE INTERNATIONAL** (attached as **Annexe D**) emphasised the need to secure sustained funding so that projects for traumatic amputees, once started, could be concluded.

93. BLESMA

Reports from BLESMA on their first-class rehabilitation activities (see photo below of triple amputee skiing) and on the provision, replacement and maintenance of limbs for those who attend Headley Court and then leave service and come under the NHS, are attached as **Annexe E**.



Royal Marine, Mark Ormrod, Skiing (Triple amputee)

94. VETERANS' HEALTH NEEDS AND PRIORITIES

Government undertakings to improve understanding of **Veterans' Health Needs**, and to raise awareness with healthcare professionals – including drawing attention to **Priority Treatment** for Veterans with Service-attributable conditions, were discussed. Needs to be met would of course range far more widely than prostheses. **Dr DOUG NAYSMITH MP** offered to arrange meetings with appropriate Ministers in Health and in Defence, at this time Ben Bradshaw MP and Kevan Jones MP.

95. APPRENTICES

It was noted that it was planned to hold a South East Study Day, to be launched by **JUSTINE GREENING MP** at the **Douglas Bader Rehabilitation Centre**, to enhance opportunities for recruitment and career development for Apprentices.

96. DIFFICULTIES IN RECRUITMENT/RETENTION OF PROSTHETISTS/ORTHOTISTS

To meet growing needs, foster local commitment, and enhance recruitment and retention of Prosthetists/Orthotists, there continued to be requests for a **Third University School** in Prosthetics & Orthotics located in the South East. This should not be detrimental to, but rather collaborative with, the excellent Schools at Salford and Strathclyde. Discussions would continue. (Reports on the outreach of Salford and of Strathclyde are attached as **Annexe F**)

It was claimed that one reason for difficulties in recruitment/retention in the South East was the inadequate **London Weighting of Salaries of BHTA Company employees**, working alongside NHS colleagues who had more favourable terms and conditions. Patients were requesting that this claim be assessed and any necessary actions be taken.

It was suggested that the **protracted procedures of the Health Care Professions Council**, hindering the recruitment and the retention of Prosthetists/Orthotists from outside the United Kingdom, merited review.

97. WESTMINSTER CHILDREN & FAMILIES STUDY DAY

The participation of **ANGELA WATKINSON MP** in the Study Day for Children with Limb Loss (congenital and acquired) & Families, planned to be held in Westminster in November, and lead by the **Harold Wood Disablement Services Centre**, was welcomed. Wide audience participation would enable issues to be aired from the perspective of the different significant stakeholders – users, commissioners, health care professionals (clinicians), and others. Key objectives would address quality and maximising the outcome for commissioning, and allocations of resources which would focus upon gaps in service delivery and identifying best practices. This would also help to support the educational needs of the wider audience and health care professionals.

98. BIRMINGHAM VOCATIONAL REHABILITATION STUDY DAY

The participation of **CAROLINE SPELMAN MP** in the Study Day for Vocational Rehabilitation planned to be held at the **West Midlands Rehabilitation Centre** in Birmingham on a date to be agreed was welcomed. It was expected that the agenda would include helping to implement Government commitments to Veterans as well as the wider population who needed support in regaining and retaining independence through employment. The benefits of specialised services should be illustrated.

99. PHYSIOTHERAPY

On behalf of the **Chartered Society of Physiotherapy**, it was noted that a conference report on “Innovations in Amputee Rehabilitation would be available in the near future. Concerns continued about the possible break up of dedicated specialist teams because of service reviews.

100. OCCUPATIONAL THERAPY

On behalf of the **College of Occupational Therapy** it was noted that:

- The College welcomed the **Quality Framework for Community Services** to be launched by the Department of Health in June as part of the ‘Transforming Community Services’ programme for front line services. The College is consulting with the Department to ensure that multi-disciplinary centres of expertise for people with limb loss are maintained, and that there will be sufficient occupational therapists.
- The College had launched its **Vocational Rehabilitation Strategy** to help open pathways to employment for people with disabilities, and to support an occupational therapy workforce that is fit for the future.
- The **OT Prosthetics Group** was developing Practice Guidelines for working with lower limb amputees. Guidelines for upper limb amputees had been produced in 2006.

101. INTERNATIONAL SOCIETY OF PROSTHETICS & ORTHOTICS (ISPO)

It was noted that ISPO (UK) was hosting the prestigious Trent International Symposium at Loughborough on 18-20th May for upper extremity amputees and limb deficient children.

102. FOOT RISK PATIENTS

Continuing concerns of the **Society of Chiropody & Podiatry** are set out in their Note attached as **Annexe G**. Further information about the best practices referred to should be sought and assessed, and actions thereafter considered to help spread them more widely.

103. COURSE FOR SURGEONS IN AMPUTATION

It was noted that following the initiative of **LORD MCCOLL**, and with the benefit of a donation from the Limbless Association, and in accordance with tradition, a Course in Amputation would be held at the Royal College of Surgeons.

104. WHEELCHAIR SERVICES

It was agreed that, as the **National Wheelchair Managers Forum** was consultatively updating the National Standards for the Provision of Wheelchairs, there was no current need further to pursue requests to the Minister for comments on an unpublished report on the possible transforming of services. There were welcome indications that, although post-code prescribing could still be found, the 18 weeks standard in England was shortening waiting times, particularly for electrically powered indoor-outdoor chairs (EPIOCS). The Group would be kept informed.

105. ANNUAL GENERAL MEETING

It was agreed that the Annual General Meeting be held at the House of Commons at 3 p.m.

Wednesday 22nd April.

There being no further business the meeting then terminated.

**Feedback to
APLLG Administrator
feedback@apllg.org
www.apllg.org**

Please see ANNEXES below.

EARLY DAY MOTION

HUMAN RIGHTS TO PERSONAL MOBILITY & ACCESS & GROWTH IN DEVELOPING COUNTRIES

Sponsored by:

John Battle (Labour MP for Leeds West)

John Bercow (Conservative MP for Buckingham)

Dr. Vincent Cable (Liberal Democrat for Twickenham)

Ann Clwyd (Labour MP for Cynon Valley)

Justine Greening (Conservative MP for Putney, Roehampton and Southfields)

Mark Hunter (Liberal Democrat MP for Cheadle)

This House, mindful of the concerns of the All-Party Parliamentary Group for Human Rights and the Associate Parliamentary Limb Loss Group and the All-Party Parliamentary Group on Overseas Development, notes the adoption overseas of the United Nations Convention on the Rights of Persons with Disabilities which should empower Persons with Disabilities as a distinctive group, to be included in mainstream programmes such as, Gender Equality, Education, Employment and Growth;

realises that the eight important Millennium Development Goals 'MDGs' agreed by the United Nations and which Her Majesty's Government support contain no reference to disabilities;

advises that for the full achievement in Developing Countries of the aims of the Convention and of the MDGs it is vital to secure and sustain Human Rights to Personal Mobility and to Access;

and therefore urges Her Majesty's Government through the Department for International Development, the Foreign & Commonwealth Office and the Cabinet Office, collaboratively to ensure that access to Prosthetic and Orthotic and Wheelchair Services in Developing Countries is mainstreamed and adequate thus enabling people with disabilities to be included in pushing Growth up the development agenda.

POWER *International*

Human Rights & Economic Development

Singxay Lor in Laos 'Employment is key to equality'



Singxay contracted polio at the age of 3 and has been disabled ever since. He received free treatment at the National Rehabilitation Centre – one of POWER International's projects - and is now able to walk without a stick.

He has been a member of Lao Disabled People's Association, a partner of POWER International, since 2003, and is trained in Information Technology. He assists LDPA in its work in communicating the needs and rights of disabled people.

He supplements his income by teaching people computer skills in the afternoons and sees employment as key for disabled people to fulfil their potential and achieve their rights. He is working towards a future where there is equality for people with disabilities and they have better access to employment.

Voicing Opinions – Changing Lives The Story of Antonieta



Antonieta Nacucha lives in Mozambique and is 41 years old. She trod on a land mine when she was 21 and lost a foot.

In 2004 she joined a Radio Listening Club. Here people with disabilities are trained to produce and broadcast their own radio programmes.

Antonieta says, "My neighbours never used to call me by my name, they only used to say "that lame one", or "that cripple", but when they started hearing my voice on the radio, some came to apologise for what they had done, and now no one calls me names any more.

Domestic violence against women with disabilities was a big problem, but we are starting to address that now that our rights are understood."

Cremilde gets on the right wave-length for change



When Cremilde was 6 years old she was bitten by a cobra which resulted in her leg being amputated. She lives in Mozambique where there is no state assistance for people with disabilities and she finds life really tough.

Radio clubs set up by POWER International are helping to people with disabilities bring about change in society. They broadcast programmes about disability issues. Bus-drivers rarely stopped for people with disabilities but when radio club members held talks with the transport association and discussed the issue on radio bus-drivers were required to stop and make sure people with disabilities had the same service as everyone else.

Similarly before the radio clubs, children with disabilities were discouraged from attending school but they are now expected to attend school and gain an education.

Santar gets his childhood back!



Santar a young boy in Laos, was knocked down by a truck. He lost his right leg and his left leg healed very badly. Not knowing help was available he remained confined to his house in a small village.

There he stayed for 2 years until January 2007 when staff at one of the clinics set up by POWER International and its partner organisation COPE, heard of his plight.

It was agreed to send Santar to the clinic in Vientiane where he received free treatment: surgery on his left leg and a new artificial right leg. Soon he was walking slowly with crutches and then progressed to swimming and jumping in the pool. He couldn't wait to get home and show his family everything he had learned!

If you would like to see and hear more about his story go to www.bbc.co.uk/lifeline and access the June 2008 programme from the archive section.

CAMBODIA TRUST

International Schools of Prosthetics & Orthotics

The Cambodian School of Prosthetics and Orthotics, established in 1994, has graduated 133 students who are now staffing rehabilitation centres across the developing world. Students are trained from Cambodia and a number of other developing countries e.g. Afghanistan, East Timor, Iraq, The Philippines, Japan, Lao PDR, Myanmar, East Timor and Sri Lanka. In addition, nine former graduates have now completed Bachelor's degrees, upgrading their qualifications and skills to the level where they can become future lecturers and managers, reducing reliance on expatriate expertise.

The Sri Lanka School of Prosthetics and Orthotics was, established in 2004. Ten students graduated in July 2008, gaining their qualifications as Category II (ISPO) Prosthetist-Orthotists. These students were the first to train and graduate in Sri Lanka. They are now internationally recognised as qualified to prescribe and fit prosthetic limbs and orthoses. Sri Lanka needs around 115 prosthetist-orthotists to meet the needs of the disabled population which includes many victims of conflict.

Indonesia has an estimated 2 million amputees out of a population of 240 million. The new JAKARTA School of Prosthetics and Orthotics is now under construction and is expected to open its doors to its first pupils in February 2009.

27th January 2009

RESPONSE INTERNATIONAL

Report on two Incomplete Projects

2008 saw the suspension of two projects for traumatic amputees: AJK KASHMIR **and** PALESTINIAN refugees resident in LEBANON. Both were first phase work which achieved: the medical assessment and entry of amputees into a mine action/victim database, physiotherapy, early walking aids, the provision of wheelchairs, technical training and the fitting of a limited number of new or first time limbs.

In both cases the funding came from UK sources, albeit sources not specifically interested in service delivery or repeat/ programme funding. The largest HMG provision for disability is, we regret, not available to us in order to enable the conclusion of either project.

Although we are alone in the rehabilitation of amputees in both these geographical areas, legalised within country, delivering with the support of some of the UK's most eminent trauma and rehabilitation experts and in possession of a full patient data base, we are excluded from dedicated disability funds because of strategic partnership methods of disbursement of those funds.

To recall observations made before the APLLG in 2006: we seem to take funding support for our traumatic amputee/ war victim programmes from everywhere except from dedicated disability funding lines.

We are grateful for the proposed EARLY DAY MOTION on disability, and commend HMG for the provision of dedicated disability funding. We would like to urge HMG to examine the wisdom of engaging with only limited numbers of strategic partners, to the great detriment of well positioned and uniquely informed operators.

22 January 2009/PG/RI

ANNEXE E

BRITISH LIMLESS EX-SERVICE MEN'S ASSOCIATION *Reports on Rehabilitation and on Artificial Limb Provision*

BRITISH LIMBLESS EX SERVICE MEN'S ASSOCIATION REHABILITATION ACTIVITIES FOR INJURED PERSONNEL

BLESMA consider Rehabilitation Activity as absolute key in the overall rehabilitation of injured service personnel, and it has to be both challenging and enjoyable. Events are many and varied and we cater for all ages. Wherever possible we have amputee teaching amputee and have built up a band of instructors in many disciplines within the Association.

Most recent events (shown in the photographs) were an all amputee crew who crossed the Atlantic (Cape Verde) to Barbados, coming 3rd in the race out of 4, the other 3 crews being able bodied. The age range on the BLESMA yacht was 67 – 22.

In December we strengthened our association with the Wounded Warrior Project (USA) by sending 15 Members (11 still serving) skiing in Colorado.

Some of our party were seriously disabled from Iraq and Afghanistan, one who had lost 3 limbs. You can see him on the photograph skiing down the mountain, something he admitted he thought he would never be able to do.

To see their achievements is very humbling but inspiring, testament to the quality of our service personnel, and why we must do everything we can to help them.

Rehabilitation Activity restores confidence and self esteem. I witness first hand on a regular basis the difference it makes to our Members. In many cases it is life changing.

Provision Of Protheses Post Headley Court

On the other issue of Provision, Replacement, and Maintenance of limbs for those who attended the DMRC at HC-once they leave service, and then come under the NHS and attend their local DSC or Limb Centre. MoD Comd Paper of last year stated that they would get “at the very least” the same service they got from HC once they are discharged. The Comd Paper did not layout the mechanism to facilitate this and we have been chasing for clarity of the situation.

We have been in contact with the Director for Health Care in the MoD who is currently liaising with DOH and we have been given assurance that a Protocol is due to be published – we suspect soon – that will explain how the issue will be promulgated.

Currently, only a few amputees from ongoing conflicts have left the services and it is envisaged that only a handful will leave each coming year – so as yet – the situation is by no means critical. To give you an idea of numbers there are around 60 serving amputees at present – many will serve for some years hence.

If situation ref Protocol becomes protracted, then we may look to call on the good offices of this group, but at the moment BLESMA are relatively content that the mechanism and funding to facilitate the process is forthcoming. We are monitoring the situation carefully and would hope to be able to outline the process at next ~~the~~ meeting.

UNIVERSITY OF SALFORD

DIRECTORATE OF PROSTHETICS, ORTHOTICS & PODIATRY

Report on research and outreach work in the area of Prosthetics and Orthotics.

RUSSIA.

The University of Salford and Helsinki, Metropolia Polytechnic in Finland are currently assisting the St. Petersburg (Leningrad) Electro technical Institute (LETI) in providing the first Russian prosthetics and Orthotics course at Bachelor's and Master's level. The European Community has assisted this project to the tune of €300 000 through a TEMPUS teaching grant. LETI are currently devising a course which will provide clinical and academic training to student prosthetists and orthotists to both B.Sc. and Master's level and the course will be in compliance with the Bologna agreement, which means that it is modular and that the course structure and levels of attainment are compatible with Universities across the European Union. This grant is a continuation of collaboration by the University of Salford with Russian Institutes since 1996. The University was also a collaborator for prosthetic design projects in 1999 and 2000, with funding from the International Science and Technology centre to the tune of US \$270000. and in 1997 won a prestigious scholarship from the Royal Society to allow a Russian post doctoral fellow to do research at Salford for a year.

FENNO-SCANDIA

The Directorate of Prosthetics, Orthotics and Podiatry is twinned with three Universities located in Sweden, Norway and Finland. This relationship realises many of the essential goals expressed in the ERASMUS supported programmes, funded by the European Community. In essence this culminates in regular exchange programmes benefiting both staff and student development.

Typically two or three students from our fellow 'European partners' will spend one or two semesters studying at the University of Salford. Similarly a small number of University of Salford registered students will visit our partner Universities in one of the three host countries. The exchange programmes bring many benefits to all students enrolled on our educational and training programmes enriching the cultural experience and sharing practices and ideas. A member of staff from the University of Salford has taught regularly on the Finnish prosthetics and orthotics programme since 1996.

Members of the respective University staff are also actively engaged in the exchange programmes and this also renders many professional and educational benefits. This largely comes about by sharing in each others experiences and in particular by examining each others teaching programmes, methods of deliver and method of assessment. This refreshing exchange of ideas stimulates appropriate change and response within our own programmes. It has often been possible to stimulate innovative teaching programmes where students from partner Universities work together in exploring a variety of clinical approaches or treatment plans in neighbouring countries.

Research is a vitally important aspect of our collaborative programmes. In addition to the partnerships forged between University based staff the same links have facilitated the possibility of guest lecturers from Norway and Sweden sharing their experiences with the prosthetic and orthotic personnel in the UK. All parties involved in these programmes readily identify the advantages they offer and we hope to further develop and diversify our partnerships in a fresh and innovative fashion as our exchange programmes

HONG KONG

The University of Salford has well established contacts with the Hong Kong Polytechnic University, which have been centred around teaching. A member of staff has also been invited (January 2009) to hold a one-day seminar on the treatment of knee pathologies and in particular medium compartment arthritis. The same member of staff has just been invited to chair and speak at two sessions on Orthotic subjects at a three-day symposium in Hong Kong in August. This will be dedicated to Orthotic treatment of adult stroke and also cerebral palsy.

THE KINGDOM OF SAUDI ARABIA

The University has recently started a joint initiative with the King Fahad University Hospital in Riyadh. This initiative is to develop a Higher Diploma for Saudi students in Riyadh, which will allow them to train practitioners to assistant prosthetist/orthotist level. The Higher Diploma will be designed so as to be able to allow Saudi students to start the University of Salford's Bachelors Programme at the start of the second year so that those who chose to be qualified fully as a prosthetist/orthotist are able to. The British Embassy in Saudi Arabia is also involved in this project.

RESEARCH INITIATIVES BASED IN THE UK

Research in the development of intelligent orthotic knee joints with stance phase control has been ongoing for several years by the University in conjunction with the Robert Jones and Agnes Hunt Hospital in Oswestry, Shropshire. Other established research in the use of rocker soles for optimising the gait of claudicant patients in conjunction with the Arrow Park Hospital in the Wirral has also been ongoing for a similar length of time. More recently a study is commencing with the Spinal Injuries Unit in Southport General Hospital on the use of therapeutic walking for optimising orthotic intervention in the spinally injured community. Salford University has a proud tradition in applied research and staff development in prosthetics and orthotics with three members of staff obtaining Ph.D.s whilst lecturing at Salford.

VETERINARY PROSTHETICS & ORTHOTICS

The School has been developing specialist prostheses and orthoses for veterinary applications. This has generated a significant amount of publicity including television coverage. Currently, veterinary applications are being discussed for amputees from endangered species in Poland and China. We are also working in conjunction with the Veterinary field on the provision of prosthetic extensions for dogs using intraosseous transcutaneous amputation prostheses (**ITAP**), with obvious implications for future human prosthetic treatment. The developmental work associated with this initiative was shortlisted for the Times Higher Education Supplement awards in the technology section in 2007.

2nd February 2009/GH

UNIVERSITY OF STRATHCLYDE, GLASGOW

National Centre for Training in Prosthetics & Orthotics

Highlights report May 2008 to January 2009

International and National Knowledge Transfer

Tanzania

NCPO welcomes the Universities first three Commonwealth Professional Fellows. Three fellowships were awarded (£30,000) to specialists linked with The Tanzania Training Centre for Orthopaedic Technologists (TATCOT), Tumaini University, Moshi, Tanzania. The visitors Hortensia Mallya, Walter Tuni, and Joachim Moshy were selected on the basis of their existing skills and knowledge and because of their potential to lead on clinical education and professional developments in Prosthetics and Orthotics in Tanzania. Each Fellow represents specific areas of activity in prosthetics and orthotics education: namely clinical lecturer, clinical placement supervisor and technical teacher.

Effective collaboration with NCPO will strengthen the capacity for TATCOT to develop both staff motivation and retention strategies. It will facilitate the transfer of educational and clinical skills and expertise which are crucial to the development of the TATCOT curricula which impact throughout Africa. The NCPO has been a long time partner of TATCOT, delivering specialist clinical teaching modules (most recently spinal and upper limb modules) in response to needs identified by TATCOT. The six month programme began in November 2008 and crosses a number of Commonwealth priority themes, specifically education, engineering, public health and technology and targets important aspects of the Millennium Development Goals.

Pakistan

Three teaching faculty from the Pakistan Institute for Prosthetic and Orthotic Science (PIPOS), Peshawar in the North Western Province of Pakistan attended customised teacher training courses for upper limb, trans-tibial and trans-femoral prosthetics in September 2008. Earthquakes, political unrest and poverty mean that there are a disproportionately high number of persons living with amputation in Pakistan, and there is a distinct lack of suitably qualified professionals in the region to serve the needs of the population. PIPOS has been identified by the Pakistan Government as co-ordinators of a national rehabilitation programme. NCPOs involvement in this work forms part of a plan to improve prosthetic services for patients in Pakistan.

Czech Republic

A new partnership agreement with the University of Ostrava saw specialist clinical teaching in upper limb prosthetics delivered for two weeks to assist in the development of new professional education in the country.

Portugal

NCPO has been invited by a University team in Portugal to provide the countries' postgraduate courses in Prosthetics and Orthotics following a successful visit by a delegation in June 2008 from Escola Superior de Saúde do Alcoitão, an independent Higher Education establishment operating under the auspices of the Santa Casa da Misericórdia de Lisboa.

Australia

NCPO hosted Australian visitor and Churchill Travel Fellow Sarah Andersen in October. Sarah is a prosthetics and orthotics lecturer at La Trobe University, Melbourne and has expertise in lower limb orthotics and upper limb prosthetics education. Sarah joined NCPO Faculty in clinical teaching sessions with students and patients.

USA

The technical skills of four American colleagues were enhanced following attendance at a customised silicone limb manufacture course delivered on request. Silicone offers the possibility to create lifelike prosthetic body parts whilst being a material that can reduce forces at the body/device interface.

Scotland

1. NHS quality Improvement Scotland has awarded TWO contracts to NCPO this year: to replace an existing database with a web based database to allow each physiotherapist in up to 10 remote sites in Scotland to access amputee rehabilitation data from any computer with internet access using an authentication password and a web browser; to lead on a Best Practice statement on the use of ankle foot orthoses in stroke.

2. NCPO has contributed to the Clinical Practice Network for Prosthetics and Orthotics, completing a report on the use and usefulness of footwear.

United Kingdom

A University (CTA) pump primed network has been launched. The SPEEAD project - Sporting Prosthetics for Everyday and Elite Athletes with a Disability - will benefit people with lower limb amputation by combining academic excellence with industrial relevance and will build the level and nature of expertise and research capacity in the wider disability sports community. The project steering group includes experts from academia, prosthetic and orthotic companies and a charity involved in disability sports.

29TH January 2009/SS

ANNEXE G

SOCIETY OF CHIROPODY & PODIATRY

NHS Diabetic Service profile

In 1974 Podiatry/chiropractic services were transferred from local government to the NHS which allowed a drive toward fully integrated care pathway based on self referral. It also generated a single service budget, professionally lead under functional management which provided chiropractic services to a local population across Health, Mental Health, Social Service, Child Care, Residential and special needs. In fact it gave the public a fully integrated seamless service.

This allowed very effective targeting in terms of value for money, economies of scale and career and specialist development. One highly effective spin-off was the care pathway from Hospital to home and then into rehabilitation and return to work/independence for amputees. This podiatry pathway was mainly centred on diabetics, trauma or war veterans.

The move to PCT and GP commissioning has tended to undermine this seamless approach as cash has to follow care. Podiatric patients seen by hospital specialist units need a GP authorization for payment . This generates an administrative burden at a time when skilled and immediate podiatric intervention in support of the hospital team or individual patients is essential in the prevention of amputations.

In addition, budget management of podiatry staff across locations or cost centres tends to work against their mobility in terms of sickness/ leave cover or staff development as primary care localities would not want their services repeatedly raided and lost simply to cover staff shortages in another health provider.

The statement by the Secretary of State for Health on the 21st of October 2008 that the public have the right to self refer to podiatrists was welcome. However, as it failed to clarify funding streams or new pathways for patient choice, it both fails to address current negative impacts or provide new arrangements to deliver podiatric services. It fails to support the huge role of podiatry in prevention, rehabilitation and health/social maximization. Helping the limbless is a critical area and

podiatrists would like to play their part in its prevention and where necessary any subsequent management.

The Society has noted that examples of best practice in prevention are located in Kings College Hospital London, Portsmouth, and Manchester, where there is partnership working between primary and secondary care. We feel it is working models such as these which commissioners should be encouraged to demand for populations under their jurisdiction.

20th March 2009

-- END --