Suggested Guidelines for User Groups

Guidelines

The suggested guidelines (terms of reference) for a User Group are as follows:

• To provide a forum of discussion appropriate to the operation and development of the service and its facilities;
• To communicate and liaise with users and their carers and ensure they are kept informed of the services available, advances in limb technology and techniques;
• To gain feedback from users in order to help shape policy procedures and plans; and
• To assist in the development of a high-quality service and the obtaining of the necessary resources to provide this service.

Group membership should be open to upper and lower limb wearers, carers, representatives of organisations connected to the prosthetic industry (Limbless Association, BLESMA, REACH, STEPS, etc) and representatives from local organisations and the Community Health Council.

The Consultant, Centre Manager, Lead Prosthetist and Contract Manager (or their deputies) should be present at every meeting possible and, depending on the agenda, members of the multi-disciplinary team as well. Preferably, a Service User should chair the meeting with the Centre providing secretarial, administration and reasonable financial support (to cover basic costs).

We would not envisage a User Group dealing with individual complaints or problems normally, as the Centre management should formulate well-publicised procedures for dealing with such matters, with recourse by the individual to the Limbless Association, BLESMA or the NHS Ombudsman if they are still unresolved.

The frequency of meetings will depend on the number and variety of matters to be discussed and each individual User Group should decide upon this themselves.

Points for discussion

Here are some hypothetical examples of what a Centre's User Group might usefully discuss:

• The appointment system, plus the streaming of patients, who must see a doctor and those who only need to see a Prosthetist about straightforward repairs;
• Transport facilities - the ambulance service - use of volunteer car drivers;
• Facilities for refreshments at the Centre;
• The improvement of car parking facilities;
• Improved provision for children;
• Greater privacy for female patients;
• Special arrangements for late or very early appointments to assist amputees who find it difficult to get time off work;
• The general ambience of the Centre;
• Reception and porter services/arrangements;
• Average waiting times between first prescriptions and limb fitting;
• Time taken for repairs and new limbs;
• Literature and information/display material for amputees and their carers;
• Any other major issues which will impact on Users;

Committees may also play a part in arranging displays and social functions etc where these are felt to benefit the Centre.

Summary

We suggest that there should be regular (not less than quarterly) opportunities for users to consult with Centre staff. Where practicable, this should involve the creation of a User Group concerned with the well-being of all users and healthcare professionals at a Centre.

• No topic concerning the Centre should be deemed not to be of interest to Users;
• The Chair of the Group should preferably be a User, and each Group should contain a representative balance of users and staff;
• A clear and simple procedure for expressing satisfaction or dissatisfaction should be agreed, and should be on permanent display, including the opportunity of eventual recourse to a Health Authority Ombudsman, after the procedure has been fully explored. Everyone should regard referrals to the Ombudsman as the very last resort, when all other avenues have been explored fully and failed.