

Wirral Limb Centre

Mission Statement

Wirral Limb Centre aims to enable each patient to reach the best possible outcome in their recovery and rehabilitation by providing the highest quality of care and attention possible

June 2010

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ATTENDING THE CENTRE

GENERAL INFORMATION

The Wirral Limb Centre is a purpose built centre situated on the Clatterbridge Hospital site. It opened to the public on 2 April 1991 and provides treatment and rehabilitation for people who have had limb amputation.

SMOKING

PLEASE NOTE that in keeping with other hospital departments there is **NO SMOKING ANYWHERE ON THE HOSPITAL SITE.**

REFRESHMENTS

Refreshments are available at the Centre from a WRVS Tea Bar between 9.00 a.m. and 11.30 a.m. They offer a limited choice such as toast, confectionary and hot and cold drinks.

If you are diabetic or need to eat regularly you are advised to bring a snack. If you are taking insulin, painkillers or other medication please bring them with you.

Wheelchairs are available at the Centre so you do not need to bring your own.

There is a car park at the Centre with wheelchair accessible spaces. A location map and public transport services are also detailed in this pack. You will find it more convenient if you can make your own way to the Centre but if an ambulance is needed this can be arranged. Please bear in mind that the ambulance will probably have to collect other people and drop them off, so this could take some time. If you arrive at the Centre after your appointment time, please do not worry, you will still be seen.

An appointment system operates at the Centre so if you cannot keep your appointment, please let us know so that it can be offered to someone else. Please also notify us of any change of address, telephone number or doctor. The number required to do this is 0151 482 7812 (direct line) or 0151 334 4000 ext 4781

If you are on Family Credit or Income Support you will be entitled to claim back your travelling expenses. On production of your order book it will be possible for the staff to reimburse you at the Centre when you attend. If you are not receiving any benefits but are experiencing hardship with your travelling expenses, the staff will be happy to arrange for a Social Worker to see you.

GUIDE TO PUBLIC TRANSPORT

If you are going to travel to the Wirral Limb Centre by public transport from Wirral or Liverpool, the following buses all serve Clatterbridge Hospital:

17
17A
84
85
113
186
410
487
488

If travelling by train, get off at Bebington Station (Wirral) where you can catch the number 410 bus. This goes into the grounds of Clatterbridge Hospital very near to the Wirral Limb Centre.

The Wirral line trains run at 15 minute intervals and the 410 bus at 10 minute intervals.

WHAT HAPPENS WHEN YOU ATTEND

Arrangements for your first visit to the Centre will have been made while you were in hospital.

At your first appointment you will see the doctor and nurse. You will also meet other members of the rehabilitation team as appropriate – the Occupational Therapist, Physiotherapist and Prosthetist. Please bring with you any medicines which you take regularly. If you are coming to be assessed for an artificial leg, please also bring a pair of comfortable, well fitting shoes. You will need to wear clothes that allow access to your residual limb, for example shorts or a skirt.

We have a male and female fitting room each having individual curtained areas for your privacy. A member of staff is always available if you require a chaperone.

Not everyone will benefit from an artificial limb. Many factors affect whether it will help your independence. These include heart and chest problems, arthritis and neurological problems such as strokes. The doctor will therefore wish to examine you and discuss any such problems with you. Not everyone will be considered suitable for an artificial limb but a member of the medical team will be happy to discuss this decision with you and to arrange an assessment for alternative mobility. We will want to learn a little about your lifestyle, housing, hobbies and work as this can influence the type of artificial limb which is suitable for you. You may be referred to a local hospital or community rehabilitation team to help prepare you for prosthetic rehabilitation.

We will also discuss with you;

- The advantages and disadvantages of using an artificial limb
- The suitable artificial limbs
- The procedure for making your first artificial limb

Many people have a lot of questions to ask so it may be helpful to make a list prior to your appointment. If you need clarification or further information on any matter please ask a member of staff.

Following the fitting of your prosthesis your therapy will be arranged either at the Wirral Limb Centre or your local hospital. Once you are well established with your prosthesis and discharged from therapy you will only need to attend the Centre if you experience any problems relating to your prosthesis. If you are in discomfort or your prosthesis seems faulty in any way please contact the Centre as soon as possible so that an appointment can be arranged.

If the fit of the prosthesis seems a little loose the wearing of an extra stump sock can sometimes help. However, an appointment should still be requested as the socket may need some adjustments.

MEMBERS OF THE MULTI-DISCIPLINARY TEAM

There are many people who help you back to as full a life as possible.

Administrative staff provide your first contact with us when arranging appointments over the telephone.

The multi-disciplinary team consists of:- Consultant in Rehabilitation Medicine, Physiotherapist, Occupational Therapists, Therapy Assistants, Registered Nurse, Health Care Assistant and Rehabilitation Engineers.

A prosthetic company also works in the centre they provide the services of prosthetists, prosthetic technicians and administrative staff. All the members of staff link closely together to make your time at the Limb Centre as smooth and as efficient as possible.

The patient, their family and carers, are considered to be members of the team, their views are taken into consideration, and they are encouraged to participate in the treatment programme within the Centre and at home.

The roles of the team and how to identify them are explained in more detail below.

DOCTOR

The Amputee Rehabilitation Service is free to all NHS patients. The doctor is a Consultant in Rehabilitation Medicine, and a specialist in upper and lower limb prosthetics. He leads the multi-disciplinary team in order to provide a co-ordinated rehabilitation programme to meet the needs of the amputee.

The doctor may be involved before amputation is carried out, liaising with the surgeons to advise them on the best amputation for that individual. This will ensure that the stump (residual limb) will allow the best rehabilitation potential to suit the patient's needs and ability. The doctor will discuss with you, and your family and carers about the factors that will affect rehabilitation. These can include your general health, motivation, amputation level, the condition of your stump. Some people are not suitable for prosthesis, but the team will continue rehabilitation until you have reached a suitable level of independence.

The type of prosthesis you may be prescribed will depend on your needs and the factors described above. The decision will be made between the multi-disciplinary team and yourself.

If you live a long way from the Centre, many of the services you require will be provided at your local hospital. If necessary, the doctor will arrange for physiotherapy, occupational therapy, social worker, counselling, hospital doctors, etc., to be made available to you locally.

As the doctor is involved in the education of medical and other staff, you may sometimes be examined by a medical student or trainee therapist, prosthetist or nurse. Please let us know if you have any objections.

NURSE

The nurse wears a white tunic and navy blue epaulettes. Ideally you will meet the Limb Centre nurse while you are still in hospital or on your first visit to the centre.

The nurse can give you advice on stump care and general health issues, information about diet, healthy eating and how to give up smoking.

During your visits to the centre, there will be a member of the nursing team present when you see the doctor. They will explain how to look after your stump (residual limb) and will advise on how to try to prevent soreness or skin problems developing.

If necessary the nurse will decide on the appropriate wound care which may be required and she will liaise with your general practitioner and/or district nurse to ensure continuity of care.

THE PHYSIOTHERAPIST

The physiotherapist wears a white tunic with navy piping and navy blue trousers.

The physiotherapist will work with you throughout your rehabilitation. If possible you will meet the physiotherapist before your operation to discuss your rehabilitation process and answer any questions. After your operation a gentle exercise routine will begin within the first few days. These exercises concentrate on maintaining or increasing joint flexibility, muscle strength, balance and co-ordination. This will make daily activities easier and provide the doctor with information on your potential to use a prosthesis. On discharge from hospital you will continue your rehabilitation. This will either be at The Limb Centre or your local hospital as an out patient. It is important that throughout your physiotherapy you continue to do specific exercises that do not need direct supervision from a physiotherapist. These will be explained to you. Failure to continue these home exercises may reduce your suitability for, and choice of, prosthesis. Your exercise regime will increase in intensity to help you reach your maximum physical ability.

If you are to be fitted with lower limb prosthesis you will work with the physiotherapist who will teach you how to walk using your new limb. This will occur in the Limb Centre or local hospital. They will work with you to help you achieve your realistic goals which are agreed with you and the multidisciplinary team. These may vary from walking to making a cup of tea or to returning to sport, depending on your ability. Gaining a good walking pattern (gait) will depend on your ability and dedication to your rehabilitation.

If you decide to achieve independence in your wheelchair the physiotherapist will give you the same level of support.

OCCUPATIONAL THERAPIST

Occupational Therapists (OT) wear dark green trousers with white tops. Occupational Therapists work closely with Physiotherapists and specialise in helping you to tackle many aspects of independent living. Some of these tasks may be difficult initially but most of which you are going to want to do on your own again in the future. Practice with the Occupational therapist will help you master them.

The OT will initially work with you on the ward, and then, in the Occupational Therapy Department within the hospital, or Limb Centre where you can practice everyday activities with a view to your discharge home.

The main aim is to encourage personal independence, with or without a prosthesis. Activities might involve:

- Dressing practice
If you have problems balancing it might be difficult for you to get dressed. The OT will show you how to dress yourself safely and advise on suitable clothing.
- Personal care
This includes helping you to be independent in washing, getting in and out of the bath and on and off the toilet.
- Kitchen practice
If necessary the OT will make sure you can cope in the kitchen, starting by making a hot drink and maybe progressing to a full meal.
- Wheelchair
If appropriate the OT will provide a suitable wheelchair and cushion as early as possible to allow a degree of personal independence soon after the operation.

The OT may also carry out specific activities to strengthen upper limbs, in order to complete transfers and manoeuvre a wheelchair or walking aids.

- Home visit
In order to help you with any practical problems which you may have when you return home, a home visit will be arranged in advance of your discharge. The OT will note structural situations that will cause you difficulty and will work out practical solutions with you, perhaps in the form of ramps, rails and widening doors (for wheelchair access, etc). Assessment will be made for provision of equipment, e.g., for bathroom or kitchen which could be put into your home to make life easier for you.

The OT will continue to see you as an outpatient at the Wirral Limb Centre or your local hospital helping you to plan for the future. This could take the form of giving advice on driving, resuming and developing new hobbies/interests and also increasing tolerance to and use of your prosthesis.

- Children requiring upper limb prosthesis

For children who have been born without an arm, the OT will become involved at an early stage, often when they first come to the Limb Centre. When a child has their first working arm, the OT will explain how it works and what should be expected of the child. This involves working closely with parents throughout the child's development, so that the child's needs are met as they arise. The OT will be involved in training a child to use the different types of prosthesis as he or she grows older. They may also visit the child's school to ensure teachers are fully aware of the child's abilities with or without a prosthesis.

PROSTHETIST

The prosthetist wears an all white uniform.

You will meet the prosthetist when assessment is being made on suitability for prosthesis. They will add to this assessment and suggest components that would be appropriate to make a prosthesis that will allow you to achieve your potential.

Following this assessment the prosthetist will take relevant measurements from both your stump/residual limb and your sound limb, to ensure that the prosthesis matches the other limb as closely as possible. A plaster cast of your residual limb may then be taken. This is necessary for the socket (the part of the prosthesis that fits around your residual limb) to be manufactured.

Once you have been cast and measured for your prosthesis a fitting/delivery appointment will be arranged. This usually takes place one to two weeks later.

- Lower limb amputees

It is important that a shoe for the prosthesis is brought to the fitting appointment. At fitting stage the cosmetic cover will not be attached to the prosthesis, therefore it will be in its skeletal form and will not look like a leg. The cosmesis will be put on at a later date. This enables your prosthetist to make any necessary adjustments. You may take your first steps within the parallel bars at this appointment, the prosthetist will be concentrating on the fit and alignment of your prosthesis. Once your prosthetist is satisfied that the prosthesis is fitting correctly, the limb will be given to the physiotherapy department who will arrange for you to come in and start walking practice.

- Upper limb amputees

There are a variety of artificial arms available to you. The three main types are cosmetic arms (dress), functional arms (working) and myo-electric arms. Each type has advantages and disadvantages which will be explained to you. The team will work with you to decide on the most appropriate prosthesis for your particular needs. You will be regularly reviewed and it is important

to discuss your lifestyle and occupation with your prosthetist so that the most appropriate componentry and socket are prescribed.

When your limb has been prescribed and you and your prosthetist are happy with the fit, function and cosmetic appearance of your prosthesis, you will then spend some time training to use your arm with the occupational therapist.

During the early weeks or months of rehabilitation your residual limb may still be swollen. This swelling may reduce with time, causing your socket to become loose. If this occurs, the socket will be adjusted or replaced as necessary.

If you have any concerns about your prosthesis and the way it is fitting or working, you must contact the Limb Centre immediately by telephone. It is important that you give as much information as possible about your problem, so that a decision can be made as to whether an appointment should be made with your prosthetist or the Doctor.

Modern prostheses are sophisticated devices, therefore it is vital that they are only adjusted or repaired by persons that are trained to do so. Your prosthesis must be cared for, but not tampered with, as any attempt to do so by an unqualified person may render the prosthesis unsafe to use.

If you have any queries or problems you can contact the Limb Centre on **0151 334 4000 extension 4781 (or Direct Line 0151 482 7812)**.

TECHNICIAN

The technician will receive a limb prescription and a cast from the Prosthetist. The Technician is then responsible for making the prosthesis which has been specifically designed for you. This includes the careful shaping of the outside of the limb to match as closely as possible to your other limb.

On a normal clinic day the Technician is responsible for the repair and maintenance requirements of the artificial limbs. Some repair may take some time so please come prepared for a possible wait. This includes bringing some food if you are diabetic.

REHABILITATION ENGINEER

One of the roles of the Rehabilitation Engineers at the Limb Centre is to ensure the technical quality of the limbs assembled at our Centre. This allows the patient to receive the highest quality limb available to meet their personal needs. He is also able to resolve any queries relating to limb problems and to liaise with the NHS should there be any adverse incidents.

SHRINKER SOCKS

You may be supplied with a shrinker (Juzo) sock to reduce swelling in your residual limb. The nurse will explain how it is to be used.

If you get pins and needles, or it starts to feel too tight, take it off. Try again an hour or so later. If you continue to experience discomfort when wearing your shrinker sock, then contact the Limb Centre.

Wash your shrinker sock in a mild detergent and rinse well. It is okay to put it in the washing machine on a mild setting. Once it is dry put it on again.

STUMP SOCKS

A stump sock is worn over the residual limb before putting on the prosthesis. There are a variety of types to suit your needs made from cotton, nylon, wool or silicone. They vary in thickness to help with the comfort of fit of the prosthesis. The cotton terry towelling socks are very popular for below and above knee. If you are experiencing discomfort with the fit of your sock it may be due to the shape of your stump changing. You may need to vary the amount or type of socks you are wearing. This should will be explained to you during rehabilitation. If you are still unsure contact the Limb Centre.

You will be measured for your stump socks and issued with a supply. A clean one should be worn every day. Further supplies can be obtained from the Limb Centre please ask your Prosthetist.

All stump socks are machine washable but please follow the washing instructions. Wool socks should not be tumble dried; dry them flat if possible to maintain their shape. You may prefer to hand wash them using a soap powder rather than detergent. They should not be wrung out but squeezed. A fabric conditioner can improve softness.

Never stitch or darn your stump socks.

WHEELCHAIRS

Initially you may be provided with wheelchair on loan while you wait for your own to be provided. A physiotherapist or occupational therapist should teach you how to use it correctly.

It is important that you use the lap strap at all times. Brakes should be applied when you are stationary, this is especially important when getting in or out of the chair. Unfortunately many amputees will have a fall within the few months after surgery. It is important to take extra care when manoeuvring your wheelchair and more so when getting in and out of it.

If your amputation was below the knee you will be provided with a “stump board”. This is for you to rest your stump or residual limb on, it is very important as it reduces swelling to allow healing and also prevents your knee becoming fixed in a bent position.

FOLLOW UP PROCEDURE

APPOINTMENTS

During the first year following your amputation you will be seen regularly at the Centre. Please let reception staff know when you have arrived and when you are leaving. A letter will be sent for review appointments but do not hesitate to contact the centre if you are experiencing any problems. If you are unable to keep your appointment please let us know as someone else could benefit.

In the first year after amputation, reviews with the doctor occur every few months. Once you are established with your prosthesis, reviews will occur every 12 to 18 months.

PLEASE DO NOT ARRIVE AT THE CENTRE WITHOUT CONTACTING US FIRST.

CHILDREN are reviewed regularly and at frequent intervals throughout their growing years and re-assessed continuously as their needs change.

OTHER USEFUL INFORMATION

DISTRICT LIMB CLINICS (Satellite Clinics) are run for new patients who are residents in Halton and Warrington. These clinics are held twice monthly or monthly on Wednesdays, generally running alongside a physiotherapy amputee clinic.

CARE OF YOUR STUMP (RESIDUAL LIMB)

Wash your stump daily with mild soap and dry thoroughly but gently. Do not use antiseptic creams or plasters unless you have asked the medical team or GP first. Check your stump every day for red or sore areas or excessive swelling. If the socket is loose or poorly fitting, leave your limb off and contact the centre for an appointment.

CARE OF YOUR ARTIFICIAL LIMB

It is vital that the socket is cleaned daily with a damp cloth or moist cleaning wipes. Once weekly wipe the socket out with a damp cloth using antibacterial soap or alternatively use antibacterial wipes. Never use direct heat to dry the socket e.g. hairdryer or leave the limb near a hot radiator. Should the foot (or any part of the artificial limb) become wet, remove the shoe and allow the limb to dry naturally.

PHANTOM PAIN/SENSATION

It is quite common to feel that the part of the limb, which has been amputated, is still present. This sensation may be quite vivid at first, but should diminish gradually. If you are a leg amputee, you must be careful not to try and 'stand' on your phantom limb, for example when getting out of bed. There are a variety of treatments which may help, so please talk to your doctor, physiotherapist or prosthetist about this.

RETURNING TO WORK

Returning to work will depend on a number of factors. Discuss this with your doctor or therapist. The Disability Employment Advisor (DEA) at your local Job Centre can assist you. They will have the details of the Access to Work Scheme, which can provide practical and financial assistance to enable you to work.

SPORTS AND HOBBIES

A surprising number of activities are possible following amputation. Details of organisations which can help, are listed at the back of this booklet. Other prosthetic users can often pass on tips and advice. Other information may be available from the physiotherapist. The centre has helped patients return to swimming, running, football, horse riding, darts, and fishing to name but a few.

DRIVING

Most people can return to driving (or learn to drive) after having an amputation. If you have other medical conditions, those will need to be considered as well. The Driver and Vehicle Licensing Agency (DVLA) at Swansea will need to be informed, as well as your insurance company.

QUESTIONS AND CONCERNS

If you have any questions or concerns regarding your care or services at the Limb Centre, please ask any member of staff and they will be pleased to help you.

The support offered by other limb wearers is invaluable but every person is unique. One person's prosthetic solution may not be suitable for another, so it is important that you discuss your needs with the team involved in your care.

If you wish to discuss your concerns with an impartial professional, or have the support of an advocate, then please contact:-
Patient Advocacy and Liaison Service (PALS) On 0151 334 4000 ext. 4658

LOST PROSTHESIS POLICY

Patients should be advised that prosthetic limbs are medical equipment prescribed on clinical grounds and there is a responsibility on the amputee to take care of all limbs provided for their use. Patients should be made aware that all equipment on issue is NHS property, and loss of prosthetic limbs represents a loss of NHS resources.

Whenever a patient attends the clinic, medical or prosthetic, the clinician must on each occasion enquire about the whereabouts of all prostheses on issue. If the patient does not bring in all prostheses issued, as requested, then the clinician must ask the patient about the whereabouts and use of the prosthesis, and document the information in the notes.

If it comes to the notice of the clinician that a prosthesis is missing, it is necessary in the first instance to determine whether the prosthesis in question went missing whilst in our care at the Centre or in the care of the patient.

If a prosthesis went missing at the Centre, a full enquiry should be undertaken in order to establish the circumstances leading to the loss, and establish how and when the prosthesis was lost. If any changes in our established procedure are deemed necessary they should be instituted in order to avoid the same thing happening again.

If it becomes clear that prosthesis has been lost whilst in the care of the patient, a full explanation of the circumstances of how the prosthesis got lost will be obtained, and documented in the notes.

The patient will be requested to search for the prosthesis, and report back to the centre with the findings after a period of time, e.g. three to four weeks.

A decision will be made by the multi-disciplinary team as to whether the lost prosthesis should be replaced. A formal letter should be written to the patient confirming the loss of the limb, and including a statement about whether or not the limb is being replaced, and why. A meeting should be arranged for the patient to see the Limb Centre Manager if the patient is not happy with the decision.

COMPLAINTS PROCEDURE

The Board and Staff of the Wirral Hospital NHS Trust hope that you have been satisfied with the quality of care provided. However, as we continually aim to improve our services, we welcome your comments. From time to time you may be asked if you would participate in a patient satisfaction survey, so that your views or ideas can improve the service.

Please find below brief outlines of the way in which your complaint (or suggestion) can be made and will be dealt with.

- (1) You can discuss your complaint with the Centre Manager or Deputy Manager who may be able to deal immediately with the points you raise and provide you with satisfactory answers.
- (2) If you are still dissatisfied and feel that you require further information or other action, you can telephone or write to the member of staff who deals specifically with patient's complaints. The name and telephone number is as follows:

Mr John Eke
Complaints Manager
Arrowe Park Hospital
Upton
Wirral
Telephone – 0151 678 5111

Your complaint does not have to be in writing, as we can arrange for someone to take a record of what you say and provide you with a copy of this.

- (3) The Community Health Council can advise you on how to, if you wish, pursue a complaint at any stage in the procedure. The telephone number is in your local directory.
- (4) You should expect an acknowledgement to your complaint within two working days. As soon as your complaint is registered, we begin a thorough examination. Although we try to do this quickly and do, in most cases, provide a response within three weeks, some complaints involving many aspects of the service may take longer. If this is the case, we will keep you informed of progress, either by telephone or letter.
- (5) If you wish, we can arrange for a meeting to take place between the staff involved and yourself. Often this is helpful and can be an informal setting in which to air your views and resolve the problem with ease. We would remain with you during the meeting to keep notes of what is discussed, so that we can write to you following the meeting.
- (6) In order to assemble all the facts, the earlier the complaint is made the better and it is considered reasonable that a complaint is made within three months although there is no specific time limit.
- (7) If you are not satisfied with the answers you have been given to your complaint, there are further ways in which you can proceed. These are described below.
- (8) If your complaint is about the exercise of clinical judgement by medical staff, you may discuss this first of all with the doctor concerned or the Director of Operations. The Clinical Director would reply to your complaint. If you are still dissatisfied with the reply you may renew your complaint to the Trust, but this must be done in writing. The Clinical Director would then notify the Regional Medical Officer who will arrange for two independent medical staff to review the case. You may be asked to meet these people to discuss your concerns.

- (9) You may, if you wish, refer your complaint to the Health Service Commissioner (Ombudsman), but this must be within a year of the date the matter came to your notice. He will advise you whether he can investigate the complaint. At this stage, it must be in writing and must have been investigated by the hospital authorities. The Commissioner will want copies of all the papers you have relating to the complaint; he will return these to you following the enquiry. The Commissioner cannot investigate cases involving clinical judgement. The address is as follows:

Health Service Commissioner
Church House
Great Smith Street
London
SW1P 38W
Telephone – 0171 276 2035

- (10) In recent years, in accordance with the Data Protection Act, it is permissible for patients to have access to data held about them on computer. From 1st November 1991 patients can also apply for access to see their medical records. This applies only to those records after this date. Any member of staff will be able to tell you about the procedure and the conditions that apply. If there has been an entry into the records within the previous 40 days, there will be no charge. If this is not the case, a charge will be levied

YOUR QUESTIONS ANSWERED

Do I have to pay for any of my artificial limbs or repairs?

No, all artificial limbs available through the N.H.S. are supplied and maintained by the Limb Centre free of charge.

If I have difficulty getting around at home can I get any help in having alterations to my house?

Yes, you should contact the Social Services Department (listed in the telephone directory under your local authority), or your own social worker/occupational therapist.

What other help is available to me?

Disabled people may be entitled to a range of Social Security benefit. Details can be obtained from your local Social Security Office, Post Office, Citizen's Advice Bureau or Welfare Rights Office.

Can I do my own repairs and adjustments to the artificial limb?

NO. It is important that no repairs and adjustments are attempted under any circumstances. If you notice that your artificial limb is becoming noisy, uncomfortable or poorly fitting, please contact the Limb Centre.

If my artificial limb needs repairing when I am on holiday, what can I do?

There are Limb Centres (Disablement Services Centres) in Wales, Scotland and Northern Ireland as well as throughout England that will carry out emergency repairs to your limbs. Before you go, ask your Centre to give you the address of the nearest Limb Centre where you could attend for emergency repairs. If you go abroad, either on holiday or permanently, you should contact your Centre for further advice before you go. If you are visiting another country you may be able to have emergency repairs carried out by the National Health Care Service, but some countries do not provide services free of charge and you may have to contribute to the cost. For further information about medical care during visits abroad, leaflet SA30 is available from your local Benefit Agency.

USEFUL ORGANISATIONS – SUPPORT GROUPS

We have an established User Group at the Limb Centre. We meet informally every 6 months and discuss any issues raised and welcome any feedback and suggestions you may have to help deliver the best service we can. Please ask the nurse for more information.

Diabetes UK Central Office

Macleod House,
10 Parkway, London NW1 7AA
Tel 020 7424 1000
Fax 020 7424 1001

www.diabetes.org.uk/
Email info@diabetes.org.uk

BLESMA
(British Limbless Ex-Servicemen
Association)
185-187 High Road, Chadwell Heath
ROMFORD, Essex RM6 6NA
Tel: 020 8590 1124
Fax: 020 8599 2932
www.blesma.org
Email: headquarters@blesma.org

Disabled Living Centres Council
(For Independent advice on disability equipment)
Tel: 08707 702866
Ring for details of nearest centre
www.assist-uk.org/

Phab
North Divisional Officer
51 Chedlee Drive
Cheadle Hulme
Cheshire SK8 6BQ

RADAR
Royal Association for Disability & Rehabilitation
12 City Forum, 250 City Road
LONDON EC1V 8AF
Tel: 020 7250 3222

Tel: 0161 485 4740

www.phab.org.uk

DIAL

Disablement Information & Advice Line
See local directory for telephone numbers
www.dialuk.info/

Disabled Living Foundation
Helpline Telephone: 0845 1309177
Independent advice on all aspects of disability.

www.dlf.org.uk/

Email: info@dlf.org.uk

Wrightington Mobility Centre
(Driving Assessment)
Wrightington Hospital, Hall Lane,
Appley Bridge, Wigan WN6 9EP
Tel: 01257 256409
Fax: 01257 253809

<http://www.alwpct.nhs.uk/Patient%20Services/Community%20Services/Wrightington%20Mobility%20Centre/Wrightington%20Mobility%20Centre.asp>

Reach – the Association for Children with
Hand or Arm Deficiency

Sue Stokes

Reach Head Office

PO BOX 54

Helston TR13 8WD

Tel: 0845 1306225

Email: reach@reach.org.uk

Website: www.reach.org.uk

www.radar.org.uk/

BALASA

British Amputees and LesAutres Sports
Association.
Donna Charlton O'Malley
5 Bells Farm Close, Brandwood
Birmingham B14 5QP
Tel: 0121 605 9549 (evenings only)

Limbless Association

Roehampton Rehabilitation Centre,
Roehampton Lane
LONDON
SW15 5PR

Tel: 020 8788 1777

www.limbless-association.org

Email: enquiries@limbless-association.org

STEPS

National Association for Families of Children with
Lower Limb Abnormalities
Lymm Court, 11 Eagle Brow, Lymm
CHESHIRE WA13 0LP

Tel: 08717 170044

Website: www.steps-charity.org.uk

Email: Info@steps-charity.org.uk

Helpline: 08717 170044

SOCIAL SERVICES DEPARTMENTS

CHESTER AREA

Chester District
Social Services Department
429 Northgate Street
Chester
Telephone – 01244 603400

Ellesmere Port District
Social Services Department
Coronation Road
Ellesmere Port
South Wirral
Telephone – 0151 357 4500

CREWE AREA

Crewe District
Social Services Department
Delamere House
Crewe
Cheshire
Telephone – 01270 505100

Congleton District
Social Services Department
Albion Court
Wallworth Bank
Congleton
Telephone – 01260 285400

HALTON AREA

Halton District
Social Services Department
Albion Court
Wallworth Bank
Congleton
Telephone – 01260 285400

Vale Royal
Social Services Department
County Offices
Watling Street
Northwich
Cheshire
Telephone – 010603 814500

WIRRAL AREA

Birkenhead
Social Services Building
Cleveland Street
Birkenhead
CH41 6BL

Wallasey
Locality Office
52 Seaview Road
Wallasey
Wirral
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Town Hall
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Moreton
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Metropolitan Borough of Wirral
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