

# Your Orthotics service is changing



**Important for referrers on changes  
effective from January 2015**

## Why is the service changing?

As demand for the orthotics service increases and budgets remain relatively static, in line with other orthotics services nationally Livewell Southwest must review their service delivery to ensure those patients who benefit most will be able to access the service.

Although we provide high quality orthotic care for our current caseload, some patients have to go on a long waiting list before they can be seen. To address this we have been working with commissioning bodies and implemented changes to the access and referral criteria as detailed in this leaflet.

## Referrals

A patient is eligible for referral to the service if they present with one of the conditions mentioned in the access criteria and not listed in the exclusion criteria.

Referrals are accepted from Consultants, GP's, Extended Scope Practitioners (as part of a multi-disciplinary team), Physiotherapists, Podiatrists and Occupational Therapists. Referrals are also accepted directly from General Practitioners where the requirement for an Orthotic opinion has been identified or when a repeat or replacement device is required.

Referrals to the service can be made using the recognised electronic referral form, which can be downloaded by accessing the Livewell Southwest Orthotics website:

[www.livewellsouthwest.co.uk/project/orthotics](http://www.livewellsouthwest.co.uk/project/orthotics)

## Access Criteria

**The service covers a wide range of clinical areas where it is likely to provide health benefits, including:**

- Orthopaedics - pre and post-operative joint support
- Rheumatoid arthritis and osteoarthritis - pain relief from custom bracing, preventing deterioration of joints and prescription of footwear (specialist Occupational Therapy input may be required for Hand Splints)
- Stroke - improving independence
- Elderly medicine - improving mobility
- Diabetes - reducing ulceration and amputation rates
- Sports injuries - joint rehabilitation (we do not provide orthotics for sports use)
- Cerebral palsy - contracture prevention, improving mobility and independence
- Polio limb dysfunction - improve independence and mobility
- Trauma - post-operative / post-injury bracing
- Vascular complication - pressure relief
- Other musculo-skeletal complications such as knee instability, spinal fractures, ankle replacements - support and pain relief during rehabilitation
- Foot and ankle deformities such as cavovarus, hyper mobile flatfeet and drop foot
- Biomechanical alignment for pain relief and prevention of deterioration of associated joints
- Neurological condition - stabilisation and proprioception feedback
- Falls prevention
- Adults with Learning Disability - contracture prevention, improving mobility and independence
- Leg length discrepancy

## Exclusion Criteria and Out of Scope

**Patients who meet any the following conditions are not appropriate for referral and therefore not covered in this service:**

- Patients requiring compression hosiery (primary care provision)
- Patients requiring simple devices / splints (Consultant / OT/ Physio / primary care provision)
- Patients requiring a surgical opinion
- Patients with active Charcot joints, who are not under the management of orthopaedics or the diabetic MDT
- Patients with open ulcerated feet where not already under the care of a multi-disciplinary team, podiatry or nursing service
- Patients that do not meet referral criteria
- Patients who are not registered with a GP within the designated Clinical Commissioning Group's geographical area
- Suspicions of serious pathway - urgent referral to secondary care or as per locally agreed pathways
- Patients who are recognised at the point of referral / initial assessment as having little or no potential for further or sustained improvement through undertaking a course of treatment
- Forefoot deformity with no relevant co-morbidity
- Recurrent Patella dislocation
- Flexible flat fee with no associated symptoms and with no relevant co-morbidity
- Routine Ponsetti management for the treatment
- Patients requiring bracing for the wrist and hand
- Idiopathic toe walking
- Forefoot adductus with no relevant co-morbidity
- Hallux valgus / rigidus with no co-morbidity

## Devices excluded from provision

It is expected that for certain conditions, when no specialist clinical input is required from the Orthotics team, that patients will either be signposted by primary / secondary care for self-purchase of certain items or that simple stock solutions will be provided by primary / secondary care. This should include:

- Off the shelf (OTS) insoles for plantar fasciitis / metatarsalgia in the absence of relevant co-morbidities
- OTS Ankle braces for ankle inversion injuries
- OTS AFO's for flaccid foot drop, when the foot drop is in isolation and the patient has an available ankle range to at least 90 degrees
- Simple heel offloading devices for use at rest
- OTS soft knee braces for recurrent patella dislocation or Osgood schlatters etc
- OTS soft knee braces in the presence of mild osteo-arthritis and / or mild valgus/varus deformity
- OTS contracture management devices – Specialist Therapy teams
- Any wrist / hand provision
- Epicondylitis clasps
- Any stock elbow or shoulder device unless complex assessment is required

Note: There will be no provision by the Orthotics service for the management of the wrist and hand. This provision will be undertaken by specialist therapy teams or signposted for self-purchase where appropriate.

## **Domiciliary Visit Criteria**

The service will only see a limited number of patients in the Domiciliary setting. This includes those who are bedbound 24 / 7, or are temporarily too ill to travel and where urgent input is required.

## **Ward Visit Criteria**

The aim of the Orthotics inpatient service is to enable rehabilitation to facilitate discharge, or protect from deterioration during inpatient stay - e.g. contracture management or wound care. Inpatient visits will not be undertaken when these criteria are not met.

Certain simple devices should, where appropriate, be provided directly by the Therapy team or nursing staff. In addition, the Therapy team will assist with measurement and ordering of certain pre-agreed items such as prescribing raises for leg length discrepancy, measuring for hip braces and spinal orthoses.

The Orthotics team will still fit and supply these devices in conjunction with the Therapy teams where appropriate. The Orthotics clinical team will provide an ongoing educational programme to facilitate this provision.

## Additional Information

Livewell Southwest will not supply:

- **Safety / Work footwear**
- **Recreational footwear** unless it is prescribed as part of a recognised clinical pathway, for example - Weight Management programme.



## Please note

The detailed version of the Orthotics Service Level Agreement can be found on Livewell Southwest's intranet site and on request from [Livewell.plymouthorthotics@nhs.net](mailto:Livewell.plymouthorthotics@nhs.net)

## Contact details

If you require further information or wish to discuss the changes and how they could affect you, please contact our office:

### Orthotics Department

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**Tel:** 01752 434229

**Email:** [Livewell.plymouthorthotics@nhs.net](mailto:Livewell.plymouthorthotics@nhs.net)

Alternatively, you can also contact:

### Customer Services Department

First Floor  
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