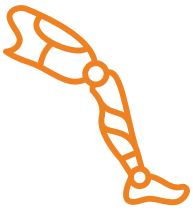




National Injury Insurance  
Scheme, Queensland



Treatment, care and support guideline 8

# Orthoses and prostheses guideline

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## Definitions

Defined terms are shown throughout in bold underlined text when they first appear.

<b>Certified orthotist or prosthetist</b>	is an orthotist or prosthetist certified by the Australian Orthotic Prosthetic Association.
<b>Definitive prosthesis<sup>1</sup></b>	<p>is a more permanent, or long-term prosthesis. A definitive prosthesis is provided after initial rehabilitation is completed and when limb volume has stabilised, indicated by consistent prosthetic fit over a period of time. A participant will ordinarily need to be assessed and deemed competent and suitable to use definitive prostheses by an amputee clinic including:</p> <ul style="list-style-type: none"> <li>• the issue of a valid <a href="#">Clinical Prosthetic Clearance</a> (the clearance must be issued within six months of the signature date)</li> <li>• completion of the <a href="#">Amputee Mobility Predictor Assessment tool</a>.</li> </ul>
<b>Interim prosthesis</b>	is the first prosthesis a participant receives, once the wound is seen to be healing well and swelling has started to be controlled. The interim prosthesis is normally provided between three and six weeks after amputation surgery. The purpose of the first prosthesis is to allow gait re-training to begin.
<b>K classification</b>	<p>are the prosthesis Medicare Functional Classification Levels which are:</p> <ul style="list-style-type: none"> <li>• Level 0: does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility</li> <li>• Level 1: has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence – typical of the limited and unlimited household ambulator</li> <li>• Level 2: has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs, or uneven surfaces – typical of the limited community ambulator</li> <li>• Level 3: has the ability or potential for ambulation with variable cadence – typical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion</li> <li>• Level 4: has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels – typical of the prosthetic demands of the child, active adult, or athlete.</li> </ul>
<b>MyPlan</b>	means a support plan prepared by the NISQ Agency and approved under the <i>National Injury Insurance Scheme Act (Queensland) Act 2016</i> .

<sup>1</sup> Some definitions have been adapted from material published by the [Australian Orthotic Prosthetic Association](#).



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<b>Prostheses socket</b>	is the socket which receives an interim prosthesis or a definitive prosthesis – the prostheses socket may be replaced multiple times after amputation surgery, as the residual limb changes and limb volume stabilises.
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<b>Public sector health service</b>	means any service provided by, or under any of the following (and includes ambulance transportation): <ul style="list-style-type: none"><li>• <a href="#">Cairns and Hinterland Hospital and Health Service</a></li><li>• <a href="#">Central Queensland Hospital and Health Service</a></li><li>• <a href="#">Central West Hospital and Health Service</a></li><li>• <a href="#">Children’s Health Queensland</a></li><li>• <a href="#">Darling Downs Health</a></li><li>• <a href="#">Gold Coast Hospital and Health Service</a></li><li>• <a href="#">Mackay Hospital and Health Service</a></li><li>• <a href="#">Metro North Health</a></li><li>• <a href="#">Metro South Health</a></li><li>• <a href="#">North West Hospital and Health Service</a></li><li>• <a href="#">South West Hospital and Health Service</a></li><li>• <a href="#">Sunshine Coast Hospital and Health Service</a></li><li>• <a href="#">Torres and Cape Hospital and Health Service</a></li><li>• <a href="#">Townsville Hospital and Health Service</a></li><li>• <a href="#">West Moreton Health</a></li><li>• <a href="#">Wide Bay Hospital and Health Service</a>.</li></ul>
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<b>Queensland Health Amputee Clinic</b>	is a clinic listed on the <a href="#">Queensland Health website</a> list of ‘Amputee Clinics’, as updated from time to time.
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## Supporting a participant who needs orthoses or prostheses

The NISQ Agency will identify a participant's needs (or relating to) for orthoses or prostheses and will fund these supports in accordance with the *National Injury Insurance Scheme (Queensland) Act 2016*, the *National Injury Insurance Scheme (Queensland) Regulation 2016*, this guideline, and other relevant guidelines.

There is a plain language version of this guideline which is shorter and uses simpler words. To access it, view [MyGuide 8 – Artificial limbs and other devices](#).

This guideline should be read in conjunction with the:

- [Necessary and reasonable guideline](#)
- [Medical and pharmaceutical treatment guideline](#)
- [Rehabilitation guideline](#)
- [Assistive technology and consumables guideline](#).

### Orthoses

An orthosis is an external device which is designed and fitted to a participant's body to achieve a functional goal and can improve a participant's engagement in daily activities. Commonly prescribed orthoses include:

- foot orthoses
- ankle orthoses
- knee orthoses
- ankle-foot orthoses, and more complex knee-ankle-foot orthoses.

Orthoses are intended to improve mobility and support a participant's rehabilitation. There are other kinds of orthoses for the upper body, including upper limb orthoses, fracture orthoses and spinal orthoses which are used to support injuries and to provide immobilisation or support for spinal injuries.

Orthoses can be prefabricated or custom-made depending on a participant's requirements. Orthoses are made by, or under the supervision of, an orthotist.

### Prostheses

A prosthesis (sometimes called prosthetic, or artificial limb) is a device which provides a proportion of functions comparative to functions that are provided by natural arms and legs. All prostheses are individually prescribed, designed, and fitted. Prostheses are made by, or under the supervision of, a prosthetist.

## Approval for orthoses or prostheses

For orthoses or prostheses to be funded under the NISQ, the NISQ Agency must provide written approval before any treatment or services are provided to the participant.



## Orthoses or prostheses must be necessary and reasonable

The *National Injury Insurance Scheme (Queensland) Act 2016* and the *National Injury Insurance Scheme (Queensland) Regulation 2016* describe how the NIIISQ Agency decides whether the orthoses or prostheses support is necessary and reasonable, and can be funded.

The NIIISQ Agency has published a guideline which explains how it decides whether a support is necessary and reasonable, and is for a treatment, care and support need (see: [Necessary and reasonable guideline](#)).

When the NIIISQ Agency is assessing if a participant's needs for orthoses or prostheses are necessary and reasonable, it will give particular attention to the following:

- whether the orthoses or prostheses will maximise the participant's independence, participation in the community and employment, and will empower the participant to manage their injury, having regard to:
  - whether the orthoses or prostheses relate directly to any goals identified by the participant and/or stated in the participant's **MyPlan** (for example, whether a prosthetic leg will improve following an amputation)
  - whether the orthoses or prostheses will improve or maintain the participant's ability to conduct daily activities, or participate in the community or employment
  - whether the effectiveness of the orthoses or prostheses has a measurable outcome
  - whether the orthoses or prostheses have associated risks, and how these risks are weighed against the benefit for the participant
- whether the orthoses or prostheses are consistent with current clinical practice and other industry best practice for persons with similar injuries, having regard to:
  - whether the orthoses or prostheses are consistent with the participant's future need for orthoses or prostheses
  - whether the orthoses or prostheses could be harmful to the participant
  - whether there is evidence to support the effectiveness of the orthoses or prostheses for the participant (refer to the clinical framework, as described in the [Necessary and reasonable guideline](#), and the [Guideline for non-established, new or emerging treatment, care and support](#))
- whether the provider of the orthoses or prostheses is an appropriate provider (see: [Orthoses and prostheses must be provided by an appropriate provider](#))
- whether the orthoses or prostheses are cost effective for the participant's treatment, care and support needs, having regard to whether there is a more cost-effective way to provide the prostheses support (for example, for a prostheses, whether the lease or hire of a **definitive prosthesis** is more cost effective, in a participant's particular circumstances).

The NIIISQ Agency will assess whether a participant's needs for treatment, care and support is necessary and reasonable by considering whether the orthoses or prostheses adhere to the nationally-recognised [Clinical Framework for the Delivery of Health Services](#) (see: [Necessary and reasonable guideline](#)).

The NIIISQ Agency will fund the associated transport costs incurred by a participant when obtaining necessary and reasonable orthoses or prostheses (see: *Transport-related expenses* in the [Attendant care and support services guideline](#)).



## Assessment of needs for orthoses or prostheses

In assessing a participant's needs for orthoses or prostheses, the NIISQ Agency will ordinarily require information from a **certified orthotist or prosthetist** to decide whether a support is necessary and reasonable.

Identifying a participant's treatment, care and support needs is done in collaboration with the participant, their family and/or other informal supports, and providers.

### Information required by NIISQ Agency to assess a participant's need for orthoses or prostheses

The NIISQ Agency will generally require any existing information about the participant's amputation, or accepted injury (in relation to orthoses).

For prostheses, the NIISQ Agency will generally require information provided through a rehabilitation program in a public hospital, as well as information provided by a **Queensland Health Amputee Clinic**.

In some circumstances, the NIISQ Agency may require information provided by a certified orthotist or prosthetist.

### Access to public sector health services

A person's participation in the NIISQ does not affect their entitlement to a broad range of rehabilitation supports provided as part of a **public sector health service**. These services include in-patient services, outpatient services, transition care, outreach supports, and community-based rehabilitation.

These public sector health services are not required to be funded by the NIISQ Agency and remain the responsibility of Queensland Health.

### Prosthetic funding through Queensland Health

There are a number of supports and services which are provided as part of a Queensland public sector health service, including:

- rehabilitation programs in a public hospital interim clinic, including support provided by a prosthetist and physiotherapist in the period following amputation surgery
- **interim prosthesis**.

Where a participant requires prosthetic funding for a definitive prosthesis, the NIISQ Agency will fund the prosthesis in accordance with this guideline.

### Orthoses and prostheses must be provided by an appropriate provider

Certified orthotist or prosthetists do not need to be a registered provider under the *National Injury Insurance Scheme (Queensland) Act 2016* or the *National Injury Insurance Scheme (Queensland) Regulation 2016*.

However, both provider types must be health professionals which are regulated by the Australian Orthotic Prosthetic Association, which is the professional association that is responsible for the self-regulation of the orthotic and prosthetic profession in Australia.



The NISQ Agency expects orthotist or prosthetists to comply with their obligations including:

- maintaining appropriate professional indemnity insurance
- complying with any requirements set out by the Australian Orthotic Prosthetic Association, including competency standards, and scope of practice guidance.

In Queensland, the NISQ Agency will generally fund prostheses provided by a [Prosthetic Service Provider](#), recognised by the Queensland Artificial Limb Service.

### Providers in states other than Queensland

Where a participant requires support while residing in another state or territory, the NISQ Agency will fund prostheses and orthoses from a provider listed by [Limbs4Life](#).

### NISQ Agency supports a multidisciplinary approach for orthoses or prostheses

It is expected that all orthoses or prostheses providers supporting participants will work within multidisciplinary teams.

The NISQ Agency will generally not fund recommendations for a prosthesis from a prosthetist without endorsement by the participant's treating team (for example, a Queensland Health Amputee Clinic, and where relevant, a physiotherapist, occupational therapist and rehabilitation physician).

### Consumable and supply items relating to prostheses

Where a participant requires consumable items relating to a prosthesis, the NISQ Agency will fund consumable items including:

- cosmetic gloves and foot shell covers
- stockings
- donning aids
- foam covers
- gel or silicon liners
- lotions, creams or sprays
- sheaths or gaiters
- shower or wet covers
- stump shrinkers
- suspension sleeves
- socks, including cotton, wool and gel varieties.

The supply limit for the above consumables will be based on advice provided by a prosthetist.





## Non-standard orthoses or prostheses

The NIISQ Agency recognises that some participants may require advanced or specialised components or features, and will consider funding non-standard orthoses or prostheses on a case-by-case basis.

This section is intended to be read in conjunction with other necessary and reasonable considerations (see: [orthoses or prostheses must be necessary and reasonable](#)), and is intended to illustrate how the NIISQ Agency will decide whether or not to fund a non-standard orthoses or prostheses.

The considerations described in this section are not exhaustive.

The definition of non-standard prostheses components is broad but will generally include:

- high-grade materials including titanium and carbon fibre
- design for specific uses (for example, waterproof or high working load)
- secondary, spare or emergency orthoses or prostheses, occupational or recreational use orthoses or prostheses
- higher cost cosmetic components or modifications
- myoelectric prosthesis.

To approve a non-standard orthoses or prostheses, the NIISQ Agency will generally require additional information about the proposed use of the orthoses or prostheses, including:

- the use of non-standard orthoses or prostheses in a vocational or occupational context
- proposed recreational activities
- information linking the need for the non-standard orthoses or prostheses to any goals identified by the participant.

## Microprocessor prosthesis or components

The NIISQ Agency may fund microprocessor joint and computerised components for a participant where:

- the participant has been assessed at **K classification** level 3 or K classification level 4
- there is clinical evidence supporting the safety and appropriateness of the support, with reference to any goals identified by the participant, in addition to their abilities and limitations.

Where a participant has been assessed at **K classification** level 2, the NIISQ Agency may consider funding a microprocessor prosthesis, where there is evidence which shows that the prosthesis is adaptable to rehabilitation, and improving or decreasing mobility situations, resulting in a lower likelihood of a subsequent prosthesis.

## Prosthesis review interval

The NIISQ Agency will assess a participant's needs for a replacement prosthesis (or parts of a prosthesis) typically every three years for most adults, and as needed, however generally no more than twice yearly.

For participants who are under the age of 18, the NIISQ Agency will assess needs for a replacement of a prosthesis on a more frequent basis as these participants are more likely to require shorter interval reviews, and replacements of prostheses or orthoses due to growth.

Prosthesis sockets may be replaced as often as once every six months, or otherwise as frequently as required.



### Manufacturer warranties

Where repair or replacement of a prosthesis or orthosis (or a part or component) is covered under a manufacturer warranty, the NISQ Agency will generally require a participant to pursue repair or replacement.

If a participant requires a prosthesis or orthosis during a repair or replacement, the NISQ Agency may fund the hire of a suitable, temporary prosthesis.

### Limitations on support for orthoses or prostheses

The NISQ Agency does not fund orthoses or prostheses which are required by a participant for a condition which existed prior to the event which caused their accepted injury.

The NISQ Agency does not fund orthoses or prostheses which are:


- provided as a part of a public sector health service (see: [access to public sector health services](#))
- inconsistent with relevant Australian Government or state legislation – for example, standards set by the Australian Therapeutic Goods Administration (TGA).

The NISQ Agency is not required to fund orthoses or prostheses provided on an experimental basis.

### Orthoses or prostheses generally not funded by the NISQ Agency

The NISQ Agency will generally not fund the costs associated with the repair or replacement of an orthosis or prosthesis funded under the NISQ, if it is as a result of intentional neglect, abuse, or misuse, and where there is no reasonable excuse for the neglect, abuse, or misuse.

## Contact us

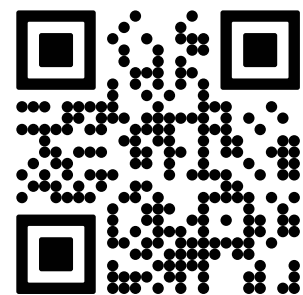
 **Telephone 1300 607 566** and we will call you back.

If you prefer to talk to us in your own language, call us and we will arrange an interpreter to effectively communicate with you.

If you are d/Deaf, hard of hearing, or have a speech communication difficulty, contact us through the National Relay Service. Choose your access option ([information here](#)) and provide 1300 607 566 when asked by the relay officer.

 **Email** [enquiries@niis.qld.gov.au](mailto:enquiries@niis.qld.gov.au)

Visit [niis.qld.gov.au](https://niis.qld.gov.au)  
or scan the QR code



**If you're in an emergency, please call 000.**

We're not a first response medical provider.

The information provided in the *Treatment, care and support guidelines* is intended to provide general guidance. The guidelines are not legal advice. Please refer to the *National Injury Insurance Scheme (Queensland) Act 2016* and *National Injury Insurance Scheme (Queensland) Regulation 2016* for more details about the National Injury Insurance Scheme, Queensland. It is intended that the guidelines will be modified and updated over time as the NIISQ develops.