|  |  |
| --- | --- |
| Service Specification No. |  |
| Service | **Provision of Paediatric Orthotic Services – Southampton** |
| Commissioner Lead | **Solent NHS Trust** |
| Provider Lead | **Solent Orthotic Services Ltd** |
| Period |  |
| Date of Review | **Annually** |

1. **AIMS OF THE SERVICE**
   1. The requirement is for the provision of an effective Orthotic service – this will involve the clinical assessment for prescription and the supply and maintenance of orthoses as well as some Orthotic manufacturing and repair/maintenance ability (on site).
   2. This service is managed by Solent NHS Trust and has operated for a number of years managed by the Solent Childrens Therapy locality managers. It exists to provide the NHS with specialist orthotics assessment and manufacturing skills. Solent will undertake a quality review once a year.
   3. The client group encompasses the following groups of children agreed 0 – 16 years (0 – 19 years if attending special school), residing in the boundaries of Southampton City (NHS) and the Solent West provided areas of South West Hampshire and North East Hampshire Excluding Farnham:
      * Children with orthopaedic conditions which affect their mobility
      * Children with neurological conditions which affect their mobility
      * Children with postural management needs
      * Children with developmental delay
   4. The key aims of the overall therapy service are:
      * Enable children to develop their maximum potential and life chances
      * Ensure the use of current evidence based practice to ensure a high standard of care
      * Improve communications with users, carers and primary health care providers about orthotics
   5. The Key aims for the Orthotics Service are:
      * To provide equipment to minimise the effect of disability, facilitate mobility, independence and ease of care. This will be achieved through the assessment of need and the provision of an orthosis which will either remedy or relieve a medical condition or disability and may prevent the development of more disabling conditions.
      * In addition, the service will offer a continuing programme of maintenance, repair and re-assessment of need once the orthosis has been supplied.
      * The Orthotist will be expected to recommend products to be ordered and using national framework pricing – the Orthotist will be required to continually review the national frameworks to identify the lowest cost but clinically acceptable products.
2. **SPECIAL SCHOOL CLINICS**
   1. The Orthotist will abide by all school rules and policies whilst attending school sites.
   2. Clinics will be held with the Orthotist and one other suitably qualified member of staff in attendance
3. **REFERRAL PROCESS**
   1. The Orthotic service can accept direct referrals from paediatricians, GPs and parents if both clinical and demographic criteria are met.  This data will be collected and produced within the monthly reports. There is a standard referral form which is used by the Physio to refer. The clinical assistant will receive all referrals and determine the level of urgency etc. The clinical assistant books all the appointments for the 2 clinics and manages the waiting list (currently standing at 32 children with a max wait of 15 – 16 weeks). There is no waiting list for urgent referrals (usually helmets). The Physios manage the special school clinics. Referrals will be received on the standard form issued by Solent NHS Trust (for authorisation) and be kept on file.
   2. Clinics are attended by the Orthotist and a Physiotherapist where clinically indicated with the clinical assistant sometimes present. The clinical assistant also runs their own clinic where simple fitting or boots is only required.
   3. Feedback to the referrer is provided on a standardised form which states whether the child attended or not, what happened and any future plan.
   4. There is no requirement to repeat the physio/orthotic form each time unless there has been a change from the previous time.
   5. The service provider shall not undertake any work for any private Patients or Patients not covered by the Contract in the accommodation.
   6. It is the service providers responsibility to ensure that if appropriate, it is a Registered Body or has an Umbrella Body which will make applications to the CRB as per the CRB’s Code of Practice on Disclosures. The service provider must ensure that all their staff, employees, agents or volunteers who may come in to contact during the course of their work with children or vulnerable adults have had an application to the CRB for the appropriate level of Disclosure made prior to commencing work with the Trust for the purpose of this contract. It is the service provider’s responsibility to ensure that they have received a satisfactory Disclosure certification in regard to any individual staff member, employee, agent or volunteer prior to such persons commencing contact with any children or vulnerable adults in the course of their work under this contract.
   7. The principles of this contract are that the service provider will:
      * Demonstrate an understanding of and willingness to provide a fully integrated seamless service for

patients, with all disciplines focussed on the provision of integrated patient centred care.

* + - Develop a future of true partnership between the service provider and the Trust which supports an interdisplinary team approach to patient centred care and enables greater operational efficiency
    - Maintain high quality services to patients through good working relationships between the Trust and service provider and clear communications with colleagues, other departments, external organisations and the public
    - Ensure seamlessness between service provider, NHS staff and other services in the delivery of the services and also that all patient contact and care is provided to the standards, policies and procedures as required by the NHS and the Trust
    - Continuously improve the quality and equity of the service and participate fully in all service development work as an integral part of the multidisciplinary team
    - Participate in all service development work, continually identify areas for development; implement agreed changes and measure improvements made on an on-going basis.
    - Encourage all staff to use their skills and knowledge to develop innovative services
    - Encourage involvement of users in both practice and service developments
    - Develop outcome measures, audit and goal planning in agreement with Clinical Specialists in line with agreed Trust and service objectives. Take equal responsibility to NHS clinicians in implementation of all measures and action plans
    - Have no objective or duties which may be contrary to the quality or efficacy of service provision by Solent NHS Trust

1. **SERVICE DESCRIPTION**
   1. The service provider shall provide the assessment and provision of custom made orthoses.

The service is delivered fortnightly at 2 clinic locations (alternate Wednesday’s at 9.00 – 12 noon and 1.00 – 4pm), and weekly at 2 special schools all catering for children with physical disabilities (Friday’s at Cedar 9.00 to 12 noon and Rosewood 1.00 – 2.30/3.00pm).

Fortnightly clinics at Aldershot Centre for Health, alternating between PM only (1 – 4:30pm) and all day 10 – 12:40 and 1 – 4:30pm)

Henry Tyndale School – once a month on a Thursday morning 10 – 12:30pm.

There is an additional monthly morning session at a Special School (term time only). Appointments will be made using the following timings:

* + - 30 minutes for a new referral/assessment or casting
    - 15 minutes for checks or minor adjustments or single casts
    - Patients shall return for first fitting at the next fortnightly clinic
  1. Lycra clinics
  2. The service provider shall appoint a HCPC registered Orthotist who must have paediatric experience to provide a fully comprehensive measuring, specifying and fitting orthotic service offering advice on the full range of orthoses. At present the service concentrates on lower limb orthoses but upper limb may be possible in the future. Specific experience is required in the following areas:
     + Made to measure and readymade footwear
     + Adaption of patient footwear
     + Repairs to footwear
     + Lower and upper limb orthoses
     + Repairs to lower limb orthoses
     + Spinal braces and collars, jackets and repairs
     + Helmets for head, neck and repairs

1. **ROLE OF THE ORTHOTIST**
   1. The Orthotist will work as part of a multi-disciplinary team including the consultant, a physiotherapist and an administrator. In addition, other professionals will be available when needed.
   2. The Orthotist will ensure that accurate and contemporaneous records are maintained although this may also be done by the Physio or by another clinical assistant. The Orthotist will ensure that the orthotic prescription reflects the most appropriate and cost effective solution to meet the clinical need, i.e. made to measure/ready-made; and that the child and family’s wishes are given a high priority when selecting the orthosis.
   3. The Orthotist shall be the single point of contact for the Trust regarding any issues over quality or delivery timescales with the product manufacturer and therefore will be expected to be available to resolve such matters within the 10 working days.
   4. The Orthotist will ensure the child and parent/carer understands and accepts the orthoses prescribed, and how to use and care for the product through the provision of accessible information both verbal and written taking in to account the individual communication needs of the child/parent.
   5. The Orthotist will document in the patient electronic notes, the orthosis, and its purpose, the objective for the prescription and review plan. Appropriate computer access will be provided by Solent NHS Trust
   6. The Orthotist will provide accessible information about the products supplied.
   7. The Orthotist will contribute towards the development of a sympathetic and helpful environment ensuring that arrangements are made to provide children and their parent/carer the opportunity to discuss proposed treatment.
   8. The supplier and/or their Orthotist will be expected to inform Solent NHS Trust of any product developments that will contribute to the cost effectiveness of the service.
   9. To work closely with other professionals to ensure that any product prescribed continues to be suitable and that continuity of care is provided as the children enter adolescence and transfer to adult services.
   10. The Orthotist is expected to provide their own equipment and to ensure the accurate measurement and prescription of the product.
   11. The Orthotist is also expected to ensure their equipment is suitably maintained and PAT tested.
   12. The Orthotist must provide their HCPC registration details.
2. **PRODUCTS REQUIRED**
   1. The following list is a guideline and will change and grow as clinical development occurs:
      * Ankle foot orthoses
      * Hinged ankle foot orthoses
      * Spring leaf AFO’s
      * Ground Reaction Orthoses
      * Dynamic foot orthoses
      * Insole/foot heel cups
      * Piedro boots (or equivalent)
      * Night resting splints / contracture correction device
      * Neuro inlays
      * Knee Ankle Foot Orthoses
      * Long leg callipers
      * Long leg callipers with hip joints
      * Gaiters
      * Soft and hard spinal jackets
      * Hip spine brace
      * Helmets
      * LYCRA
   2. The service provider is responsible for the goods until delivery has been affected and shall make good any loss or damage to the goods howsoever occasioned which may occur before delivery.
3. **LOCATION AND HOURS OF WORK**

7.1 For the Southampton and West Hampshire Provision a clinic is held fortnightly throughout the year in identified suitable accommodation in the New Forest and Southampton City areas (currently Totton Health Centre\*\*\* and Thornhill Centre for Healthy Living and Child Development Centre).

The Special School Orthotic Clinics are held in the Physiotherapy Department, with the Orthotist and minimum of one Physiotherapist present.

For North East Hampshire Provision

Fortnightly clinics at Aldershot Centre for Health, alternating between PM only (1 – 4:30pm) and all day 10 – 12:40 and 1 – 4:30pm)

Henry Tyndale School – once a month on a Thursday morning 10 – 12:30pm

For Southampton and West Hampshire localities the service is expected to be provided 54 sessions per year.

For North Hampshire the service is expected to be provided 23 weeks of the year to provide 46 clinical sessions.

*\*\*\* Totton Health centre is not always deemed an appropriate space to deliver the Orthotics service due to the limit’s space available and the orthotist has enquired whether access to a larger clinical area could be pursued. However at this time the service remains at Totton HC*