

FOI_1101_2022-23 – FOI Request Concerning – The Provision of Orthotic Services & Products

1. What are the contractual performance KPI's for this contract?

Solent procures for clinical services and the subcontractor purchases the products.

Clinical Service key performance indicators within the head contract:

Monthly	1. Fitting of routine orthotics will be within 10 working days (90%) of original assessment and measurement 90% threshold
Monthly	2. 90% Simple bespoke orthotics will achieve successful fitting within 1 fitting appointment 90% threshold
Monthly	3. 90% complex bespoke orthotics will achieve successful fitting within 2 fitting appointments 90% threshold
Annual	4. An annual survey will be completed and will be child friendly to be able to take into account their opinions. 80% of children, young people or parents surveyed will be 'satisfied' or 'very satisfied' with the service they receive. (No change) 80% threshold

2. Suppliers who applied for inclusion on each framework/contract and were successful & not successful at the PQQ & ITT stages

Direct award was made as the head contract was not in place at the time.

3. Actual spend on this contract/framework (and any sub lots), from the start of the contract to the current date

Total spends for Orthotics within Solent as below.

- 2019/20 - £138,878
- 2020/21 - £156,623

4. Start date & duration of framework/contract?

1st April 2020 to 31st March 2021. Currently providing under implied terms as the head contract is not in place. Service being provided under implied terms throughout Covid pandemic.

5. Could you please provide a copy of the service/product specification given to all bidders for when this contract was last advertised?

Service has been direct awarded by Solent to continue to provide a service to children whilst commissioning intentions are awaited. Clinical service specification under Head Contract:

1. Purpose

1.1 Aims

The key aims of the service are to:

- 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 orthoses 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 orthoses have been supplied.
- To provide the local NHS services with specialist orthotics assessment and manufacturing skills

1.2 Evidence Base

All advice and activities will be based on, or contribute to, evidence based research and will be compliant with relevant guidelines such as Guideline for Best Practice -British Association of Prosthetics and Orthotics; Guidance for Manufacturers of Prosthetic and Orthotic Devices – MHRA; local guidelines including consent; record keeping; manual handling, as well as standards for practice set out in the National Service Framework for Children and Maternity Services, Every Child Matters, and Healthy Lives, Brighter Futures: the Strategy for Children & Young People's Health

1.3 General Overview

The orthotic service will provide orthoses for children known to therapy services or Paediatricians in the Southampton City Primary Care Trust area (and areas of NHS Hampshire). Clinics will be held at special schools and 2 community clinic locations.

1.4 Objectives

As above.

1.5 Expected Outcomes including improving prevention

- Reduced need for operations for children to correct deformity
- Increase in child's mobility or range of movement

Other outcomes are based on:

- Every Child Matters – Be Healthy, Stay Safe, Enjoy & Achieve
- NSF Audit for Disability 2008
- Early Support Service Audit 2008

2. Scope

2.1 Service Description

- The Contractor shall provide the assessment and provision of custom made orthoses. In addition, the contractor will offer a continuing programme of maintenance, repair, and re-assessment of need once the orthosis has been supplied.
- The service will be delivered fortnightly from two community clinic locations (one morning and one afternoon) and fortnightly (term time only) at two local special schools, all catering for children with physical disabilities.
- The service will be supplemented by the use of a trained Limited Function Orthotic Practitioner for advice with regards to;
 - commercial footwear,
 - using/fitting orthoses
 - measuring for repeat provision
- Appointments will be made using the following timings:
 - 30 Minutes for a new referral/assessment or bilateral casting
 - 15 Minutes for checks or minor adjustments single casts
 - Patients shall return for first fitting at the next fortnightly clinic
- The Contractor shall appoint an experienced paediatric HPC registered Orthotist to provide a fully comprehensive measuring, specifying and fitting orthotic service offering advice on the full range of orthoses. Specific experience is required in the following areas:
 - Made to measure and ready made footwear
 - Adaption of patient's footwear
 - Repairs to footwear
 - Lower and upper limb orthoses
 - Repairs to lower limb orthoses
 - Spinal braces, jackets and repairs
 - Helmets for the head, neck and repairs – should this read helmets for head only? Neck can be inserted in the one above with spine/back.

The provider will ensure the service complies with MDA and COSSH.

Role of the Orthotist

- The Orthotist will work as part of and provide professional input into a multi-disciplinary team of the referring/prescribing consultant or physiotherapist and an administrator. In addition, other professionals will be available when needed.
- 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.
- The Orthotist shall be the single point of contact for the Provider regarding any issues over quality or delivery timescales with the manufacturer and thus will be expected to be available to resolve such matters within the 10 working days.
- The Orthotist will develop a policy that ensures the child and parent/carer understands and accepts the orthoses prescribed, and how to use and care for the product.
- The Orthotist will document in the patient notes, the orthosis, its purpose, the objective for the prescription, and review plan.
- The Orthotist will provide information about the product supplied.
- The Orthotist will contribute towards the development of a sympathetic and helpful environment ensuring that arrangements are made to provide children and their parent/carers the opportunity to discuss proposed treatment.
- The Provider and/or their Orthotist will be expected to inform the Purchaser of any product developments that will contribute to the cost effectiveness of the service.

- To work closely with other professionals ensuring continuity of care as the children enter adolescence and transfer to adult services
- The Orthotist will take clinical responsibility for training and supervising the Limited Function Orthotic Practitioner (LFOP)
- The role of the LFOP will be to accept work from the Orthotist to;
 - To offer advice to parents/carers on purchasing commercially available footwear and if necessary checking the purchases for suitability
 - Check and fit orthoses as made and orders by the Orthotist
 - Measure for repeat orthoses as requested by the Orthotist

Products Required

- The following list is a guideline and will change and grow as clinical development occurs:
 - Ankle foot orthoses
 - Hinged Ankle foot orthoses
 - Spring leaf AFOs
 - Ground Reaction Orthoses
 - Dynamic Foot Orthoses
 - Insole/Foot Heel Cups
 - Piedro Boots (or similar)
 - Night Resting Splints / Contracture Correction Device
 - Neuro Inlays
 - Knee Ankle Foot Orthoses
 - Long Leg Calipers
 - Long Leg Calipers with Hip Joints
 - Gaiters
 - Soft and Hard Spinal Jackets
 - Hip Spine Brace
 - Helmets

2.2 Accessibility/acceptability

The client group encompasses the following groups of children aged 0-16 years (0-19 years if attending special school) residing within the boundaries of Southampton City Primary Care Trust areas. In addition it is hosted to NHS Hampshire PCT for children registered with GPs in the New Forest area (excluding Ringwood and Fordingbridge), Test Valley South and Eastleigh Southern Parishes:

- Children with orthopaedic conditions associated with their long term condition which affect their mobility;
- Children with neurological conditions which affect their mobility;
- Children with postural management needs;
- Children with significant developmental delay.
- The Orthotic service also covers Hants hosted area

2.3 Whole System Relationships

Children's Community Orthotic Service has a relationship with health providers and referrers of Children with Disability and Complex Care.

- Services will be delivered and developed in line with local priorities as set out in the Southampton Children & Young People Plan and key strategies, e.g. Parenting Strategy, Teenage Pregnancy Strategy, Early Years Development and Child Care Plan
- Services will participate as is reasonable in multiagency planning groups, informing commissioning process
- To work in partnership with Sure Start Children's Centres, health visitors, the Family Nurse Partnership, locality teams and with General Practice, ensuring that maternity services are integrated and aligned
- To ensure that all staff are mindful of and consider the need for a multiagency assessment through the Common Assessment Framework, with the skills to be able to complete the CAF (partaking in local training)

2.4 Interdependencies

Community Children's Physiotherapy, Jigsaw, OT and Community Paediatricians

2.5 Relevant networks and screening programmes

British Association of Prosthetics and Orthotics. NSF Children & Maternity Services – Standard 8, Aiming High for Disabled Children, 'Fully Equipped' – Audit Commission

3. Service Delivery

3.1 Service Model

- Hub & Spoke Clinics
- Set-up appointments with follow-up appointments
- Services will be delivered in line with local safeguarding policies and guidelines with joint working arrangements in place
- There will be specific emphasis on the needs of vulnerable and disadvantaged children, young people and families to tackle health inequalities and promote positive health outcomes for all.
- Children, young people and their families will be treated with respect and dignity, and as active participants in discussion about their care.
- Children, young people and their families will be empowered to exercise choice wherever possible
- Services will fully respect diversity and cultural difference
- To adhere to local safeguarding arrangements and requirements, including Domestic Violence, to include training for all staff in recognising symptoms and presentations and in following local procedures
- To continuously review provision, ensuring that there is emphasis on the needs of vulnerable and disadvantaged groups and that areas of under-provision are identified and addressed
- To have in place arrangements for managing pressures associated with vacancies and staff absence to ensure that service safety, quality and consistency are not compromised, including early communication/warning to commissioners in the event of potential difficulties that may arise in order that the situation can be effectively managed
- To have effective risk management systems in place and report SUIs to commissioners
- Services will undertake audits of care and publish results to commissioners

3.2 Care Pathway(s)

Not Applicable

4. Referral, Access and Acceptance Criteria

4.1 Geographic coverage/boundaries

- Southampton City
- ETVS / NF

4.2 Location(s) of Service Delivery

The clinic to be held two weekly throughout the year in identified suitable accommodation in the Southampton City area.

There is also one clinic per fortnight in SC and one in Ashurst. The LOFP also holds ad hoc clinics or appointments to suit the child and family outside of the orthotist's clinic.

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

The following information is to act as guidelines for the Community & Special Schools Clinics. This is not an exhaustive list:

1. The clinics are held two weekly throughout the year in an identified and appropriate setting in Southampton City areas. Any changes to the location will be related to the provider in advance.
2. It is a joint clinic between a Senior Paediatric Physiotherapist and an Orthotist from the Solent Orthotics Services.
3. Appointments are offered to suit the child and parent by the LFOP if appropriate

4. The Orthotic Administrator collates and sends delivers the patients notes and clinic timetable to the clinic sites.
5. Referrals should be made on the standardised Orthotic form (for authorisation) which will be kept in the file.
6. Patients are booked in for:

30 minutes for a new referral / assessment or casting
15 minutes for checks or minor adjustments
7. After casting or measuring for a bespoke orthosis, a child should be able to come for fitting two weeks later.
8. Orthotic forms must be signed by an experienced senior Paediatric Physiotherapist or by a Consultant Community Paediatrician before being passed on to Orthotic Administration.
9. Information from clinics is entered on the Physio / Orthotic form and by form to the child's physiotherapist and consultant.
10. Statistics of contacts will be recorded for each child seen against the name of the physiotherapist attending the clinic and by the Orthotist or LFOP.
11. Parents will be provided with contact numbers in case of concerns about orthoses, information about the item and information about its use.

4.3 Days/Hours of Operation

See above.

4.4 Referral Criteria & Sources

- Children between 0 – 16 years (0 – 19 if attending Cedar or Rosewood School) in Southampton City Primary Care Trust area or the Hampshire Primary Care Trust contracted area.
- Children with neurological conditions which affects their mobility.
- Children with postural management needs.
- Children with a potential to develop contractures of tissue which may affect their range of joint movements

4.5 Referral Route

Referrals should be made on the standardised form which will be kept in the file.

There is no requirement to repeat the physio / orthotic form each time unless there has been a change from the previous time.

4.6 Exclusion Criteria

- Children with good joint range and no evidence of contractures
- Children with orthopaedic conditions
- Children with flat feet or podiatry type conditions

4.7 Response Time & Detail and Prioritisation

- Children will be offered an initial appointment with 18 weeks
- Following measuring or casting the appointment for fitting will be within 4 weeks

5. Discharge Criteria and Planning

- When a child transfers out of area
- No longer requires orthoses
- Transfers to Adult Services

6. Prevention, Self-Care and Patient and Carer Information

Leaflets are given to support use and care of orthoses.
Leaflets are given about appropriate types of commercially available footwear.

6. Is there an extension clause in the framework(s)/contract(s) and, if so, the duration of the extension?

No further contract is in place as there is no head contract in place at this time. Service is provided under implied terms to ensure a service is made available to children.

7. Has a decision been made yet on whether the framework(s)/contract(s) are being either extended or renewed?

Decision not made

8. Who is the senior officer (outside of procurement) responsible for this contract?

Clinical Director for Childrens Services