This folder provides relevant information regarding the Queensland Artificial Limb Service operations, procedures and processes associated with the funding of prostheses and prosthetic services to eligible residents of Queensland.

An artificial limb (prosthesis) is a mechanical device which requires ongoing maintenance and repairs to function at its optimum capacity. Under the Therapeutic Goods Act 1998, Therapeutic Goods (Medical Device) Regulations 2002, a prosthesis is listed as a custom made, single patient use only, Class 1, Medical Device.

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INTRODUCTION

In 1973, the Commonwealth Government, ‘Health Services for all Australians’ mandate included the ‘Free Limb Scheme’ (FLS), for the purpose of funding prosthetic limbs and services to Australian residents. The scheme was managed and funded through the Department of Veteran’s Affairs, as an extension to the prosthetic services already being provided to disabled veterans.

In the early 1980s, a proposal was submitted by the Department of Veterans’ Affairs (DVA) to the Commonwealth Government to transfer the operational governance of the scheme over to the individual State and Territory Governments, while the Commonwealth Government retained the funds. The FLS became known as the ‘Artificial Limb Scheme’ (ALS) effective on 1st September 1990 under a new policy agreement, with improved efficiency measures and funding expenditure identified on a state by state basis.

Transitions negotiations occurred between 1994 -1998, between DVA and individual State and Territory representatives to further devolve the administration of the ‘ALS’ to State Government level. Discussions were finalised between the Commonwealth and the Queensland Government with the introduction of the ‘Queensland Amputee Limb Service’ announced by the Department of Health on the 1st December 1998. The Queensland Amputee Limb Service (QALS) was established and given the responsibility for the administration of the ‘ALS’ as per the original legislation set in 1973, with operational and procedural guidelines set at State level. QALS remained a Commonwealth funded program with annual activity reporting provided through Queensland Health, Statewide Services to the Commonwealth Government.

The ALS scheme became a Queensland Health broad banded program under the 2003-2008 Australian Health Care Agreement with responsibility for the ongoing management of program placed under Queensland Government, in which they accepted the terms and conditions of the scheme agreeing to provide standard prosthetic services ‘free’ to all eligible, permanent Queensland residents. The Queensland Amputee Limb Service was renamed the Queensland Artificial Limb Service (still QALS) in 2009 to reflect the true nature of the service as a prosthetic funding scheme and not a hospital / clinical patient service.

The introduction of the National Disability Insurance Scheme (NDIS) and National Injury Insurance Scheme (NIIS) in Queensland on 1 July 2016 saw the beginning of a three year transition process, from for the State operating programs, such as QALS, to the new National Schemes. Existing QALS clients 64 years and under, will commence transitioning over to NDIS for their ongoing prosthetic funding support, on the 1 July 2016 and be finalised by 30 June 2019.

Any person injured in a motor vehicle accident from 1 July 2016, resulting in a permanent disability and requiring ongoing assistive technology support, such as prosthetic limbs, will be supported under NIIS, regardless of age. NIIS will expand their scope to incorporate work injuries and medical negligence over the next three years.

Permanent residents of Queensland, 65 years and older or not eligible for prosthetic funding support under the National Schemes (NDIS or NIIS), will continue to obtain funding support under QALS.
QUEENSLAND ARTIFICIAL LIMB SERVICE

The Queensland Artificial Limb Service is a state-wide service, responsible for the administration of the State Government ‘artificial limb scheme’ to ensure the funding and provision of prostheses and prosthetic services (artificial limbs and repairs) are provided in an equal and equitable manner to permanent and eligible residents of Queensland.

The Queensland Artificial Limb Service is also responsible for the administration of the new State Government, ‘Active Limbs4Kids’ Program, announced by the Health Minister, the Honourable Lawrence Springborg on the 1 July 2014. This program has been allocated 4 years of funding (2014 - 2018), primarily to provide prosthetic limbs for recreational activities for children and adolescents, to enable them to interact and participate in community, sport and other leisure activities.

ORGANISATIONAL STRUCTURE

The Queensland Artificial Limb Service (QALS) is a state-wide administration service, which interacts directly with clients, hospital and health services, other government agencies, private prosthetic manufacturing companies and client support groups in the interest of the client, to ensure a client focused service is provided.

Staffing

The staffing profile for QALS comprises of three full-time positions and one part-time position as outlined below.

Manager:

This position is responsible for all aspects associated with the operations of QALS services and outcomes, including the management of resources; planning and evaluation of services; developing and adhering to procedure and operational guidelines. This position is accountable for the management of the funding resources allocated to the ‘artificial limb scheme’ and ‘Active Limbs4Kids program’; and must ensure all funds are expended in an efficient and cost effective service delivery.

Client Service Officers:

These positions provide administrative support in the operations of QALS to ensure all clients access and receive their prosthetic services and funds in an efficient and time effective manner. In the course of their duties these positions will liaise with clients, member of the public, prosthetic manufacturers and suppliers, health care professionals, and other government agencies.

Contact Details

<table>
<thead>
<tr>
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OUR MISSION

QALS aims to ensure the efficient administration of an ‘Artificial Limb Scheme’ and ‘Active Limbs4Kids Program’ within available annual funding allocations. QALS adheres to a ‘client focused’ service approval processes, to ensure equal funding of standard prosthetic services for basic mobility needs, to all registered clients across the State of Queensland.

QALS supports interaction with all involved in the care and support of clients who have undergone an amputation in providing their ongoing needs. We will facilitate the processing of prosthetic assessment, provision of services, acquittal, repair and maintenance of prostheses and provide consumable supplies within our funding resources, in a timely manner and in an atmosphere that seeks continuous improvement.

QALS believes the research of evidence based practices and the documenting of best practice models are essential in providing quality, client focused services at all levels of client care. QALS believes that the sharing of information is essential to improving the standards and quality of services provided to people living with amputation and their carers and thus supports the education of all involved in providing care and ongoing support to the client.

PHILOSOPHY

QALS recognises that it contributes only one aspect of the client’s support need, that is, the administration of a service which funds the provision and maintenance of a prosthetic (artificial) limb.

QALS aims to establish standards of performance and service delivery which interlinks and co-supports other services involved in the client’s rehabilitation and ongoing life style needs.

QALS recognises that quality, both in processes and product, are key elements in client satisfaction, and as such, QALS will undertake quality assurance and improvement activities as appropriate.

QALS recognises that communication and co-operation are vital to the service, and as such, will strive to establish, maintain and enhance links with clients, their carers, the amputee support groups, the treating Health Professionals within the prosthetic manufacturing companies and hospital amputee clinics, as well as with other supporting agencies.

QALS recognises that its resources are finite and that efficiency and effectiveness are key concepts to maximising the benefits that the service can fund and provide to its clients.

QALS will explore avenues which seek the highest benefit to the individual client, within its funding limitations and consistent with its obligations to public health services as a whole.
CLIENT REGISTRATION

REGISTRATION

QALS is a state-wide service responsible for the administration and provision of ‘free’ prosthetic services through the Queensland Government’s ‘artificial limb scheme’. Administrative and funding approval processes, essential to QALS operations, are aligned with a network of hospital outpatient amputee clinics and private prosthetic manufacturing companies.

Following an amputation, the patient will generally be referred to a participating Queensland public hospital Amputee Clinic for interim rehabilitation program. Once the patient has completed their rehabilitation program successfully and identified as a being able wear and use an interim prosthetic limb safely, the treating rehabilitation team will refer the patient to QALS or NDIS or NIIS. Depending on age and location the person will be advised which government agency, they should register with, to obtain ongoing prosthetic funding support.

If the person is 65 years or older; a Department of Veteran Affairs’ Veteran or deemed ineligible for funding under the NDIS or NIIS, they will be referred to QALS. An ‘Information Kit’, which includes a Registration Form, is sent to the person by QALS. QALS is unable to process a request for prosthetic service funding, until the ‘Registration Form’ has been completed, signed, and returned to QALS. No prosthetic services will be approved for funding by QALS until the registration process is complete.

The patient will be notified in writing, when they become a fully registered client with QALS and eligible for ‘free’ prosthetic services funded through the Queensland Government’s ‘artificial limb scheme’.

If a person requesting prosthetic funding support underwent their amputation and/or rehabilitation program outside of Queensland and recently moved to live permanently in Queensland, they may be required to attend an recognised Amputee Clinic for a clinical assessment, as part of their registration process before their eligibility can be confirmed as a fully registered client with QALS.

CLIENT ELIGIBILITY

Public Health Clients
As a general guide:- if a person is an Australian resident and living permanently in Queensland; 65 year or older; holds a current Medicare Card; is not eligible for NDIS or NIIS support; has not received compensation for their limb loss injuries; OR visiting from interstate or overseas; they will most likely be eligible for prosthetic funding support through the Queensland Government’s ‘artificial limb scheme’.

Department of Veteran’s Affairs (DVA) Clients
DVA entitled clients may be eligible for prosthetic services funded through the Rehabilitation and Appliances Program (RAP). Prosthetic services are approved by the DVA RAP team, but processed through QALS to ensure product and service quality is maintained, manufacturing processes are compliant and all entitlements are provided.

Department of Correctional Services
People (new or long term amputee) who are in the custody of the Department of Correctional Services are able to access funding support for prosthetic services, if they are permanent residents of Australia and being held in a Queensland facility.
**Interstate Transfers**
When a person moves from interstate, QALS will request the person’s previous prosthetic service records and eligibility status from their state of origin ‘artificial limb scheme’ and/or National Schemes as part of the registration process and prior to approving any prosthetic funding support in Queensland.

**Overseas Migrants**
If a person has moved to Australia or Queensland from overseas, proof of permanent residency of more than 12 months and a current fully open Medicare Card, is required in determining their eligibility status for prosthetic funding support. QALS and the New Zealand ‘Artificial Limb Service’ also exchange prosthetic service history and eligibility status when people move from their country of origin.

**Interstate & Overseas Visitors**
As a courtesy to Interstate and Overseas visitors or persons waiting permanent residence status, QALS will consider funding basic emergency repairs only, on a ‘case by case’ basis and as funding availability permits. QALS will decline to fund any service, which could have been anticipated and carried out in the client’s place of origin. Travel insurance should be utilised when possible.

**Compensation Clients**
If a client is pursuing compensation, or has received compensation, associated with their injuries resulting in an amputation, they must inform QALS. There are legal responsibilities and specific procedures to be applied to the provision of services to these situations.

Clients, who are pursuing compensation associated with their amputation, and not eligible for NDIS or NIIS support, are able to apply for temporary funding support from QALS for basic essential prosthetic services, until such time their legal proceedings are finalised. Clients must inform QALS if they are pursuing compensation at the time of registration for services. If compensation is being sought, or pursued, after registration with QALS, the client must inform QALS when they begin proceedings with their legal representative.

Full reimbursement to QALS, of all incurred prosthetic service costs associated with their compensation claim period, is required once settlement is finalised.

Once compensation proceedings have been settled, clients are responsible for their own ongoing prosthetic services. Compensation settlements, associated with amputation and ongoing prosthetic use, include an element for future prosthetic / medical costs. **Compensable clients are not entitled to public health funding support from the ‘Artificial Limb Scheme’ for prosthetic services.** However, once they have expended the funds identified for their future medical / prosthetic needs they may then apply to QALS for re-admission. Proof of receipts of expenditure on prosthetic services (artificial limbs, sockets, gel liners, various components and repairs) will be required.

Any queries related to compensations and eligibility should be referred directly to the QALS Manager.
Once a patient has completed their interim rehabilitation program as an outpatient with a hospital Amputee Clinic they will undertake a definitive assessment. The hospital Amputee Clinic will complete a clinical prosthetic clearance (CPC) form and mobility assessment (AMPAT) form, confirming the patient is no longer under rehabilitation or care and is competent to use a prosthesis safely for mobility support and in their daily activities.

The CPC and AMPAT forms will be sent by the Amputee Clinic to QALS for processing. A ‘Registration Form’ will be sent to the patient from QALS.

The patient is to complete the QALS ‘Registration Form’, selecting which Prosthetic Manufacturer they would like to obtain their prosthetic services from and post the Registration Form back to QALS in the return envelope provided.

Confirmation of the person’s registration and eligibility for prosthetic funding support under the ‘artificial limb scheme’ will be sent to the patient in writing, indicating they are registered CLIENT with QALS.

Once the Client has been advised they are eligible for prosthetic funding support, they should contact their chosen Prosthetic Manufacturer for an appointment where their prosthetic needs will be assessed, quoted and submitted for funding approval to QALS.

Clients are to attend appointments with the Prosthetic Manufacturer for the casting, fitting and adjustments of their prosthetic limb (prosthesis) or repair as necessary.

When Clients take their new prosthesis (or repaired prosthesis) home for trial, they will be asked to sign the ‘Prosthetics Issue and Trial Form’, acknowledging they have taken possession of their prosthesis and understand the ‘conditions of use’ associated with the prosthesis. At this time the prosthetic manufacturer will also advise the Client ‘how to’ care for and clean their prosthesis. If Client is experiencing any discomfort or fit with the prosthesis, they should contact the Prosthetic Manufacturer to have this adjusted/fixed.

QLAS will contact the Client by phone or email 2-3 weeks after they have taken their prosthesis home for trial. QALS will ask questions such as:- “if they are happy with the fit and function of the prosthesis or prosthetic socket or repair”? “Does it meet their basic activity needs”? and “If they were satisfied with the services provided by the prosthetic manufacturer”?

Once the Client has worn and used the prosthesis for 4-8 weeks, they will be required to attend either the Amputee Clinic OR Prosthetic Manufacturer for a final inspection of the prosthesis and check it still fits properly (no rubbing or pain) and the Client is satisfied with it. An Acquittal Form will be completed at this inspection and sent to QALS.

QLAS will send the Client a ‘Client Service Evaluation’ questionnaire following each new prosthetic limb or major service funded under the ‘artificial limb scheme’. Clients are asked to complete this questionnaire, so that QALS is able to review and improve service provision and processes.
AMPUTEE SUPPORT GROUPS

QALS recognises the vital advocacy and assistance role played by organised voluntary amputee support groups and nurtures strong working relationships with these bodies.

- **Amputees & Families Support Group Inc**  
  9-11 Jacaranda Avenue  LOGAN CENTRAL  4127  
  P O Box 848  SPRINGWOOD  4127  
  Tel:  (07) 3290 4293  
  Website:  [www.afsg.org.au](http://www.afsg.org.au)  
  Email:  admin@AFSG.org.au

- **Amputees Advisory Association Incorporated**  
  PO Box 966  RUNAWAY BAY  4216

- **Amputee Support Assoc. Sunshine Coast Inc**  
  PO Box 1374  BUDERIM  4556  
  Tel:  (07) 5476 6837  
  Website:  [www.amputeesupport.net.au](http://www.amputeesupport.net.au)  
  Email:  debbie@amputeesupport.net.au

- **Queensland Amputee Golfing Association**  
  P O Box 274  ROBINA  4226  
  Tel:  (07) 5593 1820  
  Website:  [www.QAGA.org.au](http://www.QAGA.org.au)  
  Email:  admin@qaga.org.au

- **Limbs4Life**  
  Unit 5 / 321 Balwyn Road  BALWYN NORTH  VIC  3104  
  PO Box 282  DONCASTER HEIGHTS  VIC  3109  
  Tel:  1300 782 231  
  Website:  [www.limbs4life.org.au](http://www.limbs4life.org.au)  
  Email:  info@limbs4life.org.au

- **LimbKids**  
  PO Box 244  WEST BURLEIGH  QLD  4219  
  Tel:  (07) 5533 9754  
  Website:  [www.limbkids.asn.au](http://www.limbkids.asn.au)  
  Email:  secretary@limbkids.asn.au

- **Sporting Wheelies and Disabled Association**  
  60 Edmondstone Road  BOWEN HILLS  QLD  4006  
  Tel:  (07) 3253 3333  
  Fax:  (07) 3253 3322  
  Website:  [www.SportingWheelies.org.au](http://www.SportingWheelies.org.au)  
  Email:  mailbox@sportingwheelies.org.au

- **Sledge Hockey Australia**  
  Ph: 0417 622 707  
  Email:  Sledge.aus@gmail.com  
  Facebook Website:  [www.facebook.com/SledgeHockeyAustralia](http://www.facebook.com/SledgeHockeyAustralia)
AMPUTEE CLINICS

Amputee Clinics are public hospital outpatient services, available by appointment, at participating hospitals. **Amputee Clinics** provide clinical treatment and mobility assessments through a **multi-disciplinary team** of rehabilitation health professionals (Rehabilitation Specialist / Senior Medical Officer; Physiotherapist; Prosthetist; Occupational Therapist), as part of a patient’s rehabilitation program (4 to 6 months) following an amputation.

The patient, as a new amputee, will undergo a number of assessments with different members of the multi-disciplinary team (MDT), which will establish whether the patient is medically fit and able to use a prosthesis (artificial limb) safely in their daily activities and to what capacity. QALS supports regular and ongoing clinical assessments for people who have undergone an amputation. Appointments will be organised by the hospital outpatient services as deemed necessary by the MDT providing the patient’s post amputation treatment.

During the patient’s rehabilitation program a mobility assessment by a Physiotherapist will be undertaken. This generally occurs when the patient is coming to the end of their rehabilitation program on their interim (training) prosthesis and is being deemed suitable for ongoing prosthetic use with a definitive (permanent) prosthetic limb. The mobility rating on the Amputee Mobility Predictor Assessment Tool (AMPAT Form) will assist the prosthetic manufacturer in the selection of components when designing the first definitive prosthesis. The prosthesis will be designed to support the patient’s rehabilitation aims and provide basic mobility support for the patient in their everyday activities.

Once the patient has completed their rehabilitation program with the amputee clinic team, using an interim prosthesis, the Rehabilitation Specialist / Medical Officer will complete a ‘Clinical Prosthetic Clearance Form’ (CPC Form), indicating the patient has clinical clearance and is safe to use a prosthesis for mobility support.

The **CPC** and **AMPAT** Forms will provide relevant mobility, clinical and life style information and may also indicate the prosthetic component preferences, the rehabilitation team believe may best suit the patient’s rehabilitation aims / mobility needs. The completed and signed Forms will be sent by the Clinic Coordinator onto QALS for processing.

Once QALS receives the completed Forms from the amputee clinic, the patient will be sent an Information Kit, which includes a ‘Registration Form’ and other supporting information to assess if the person is eligible for State Government’s prosthetic funding support and thereby become a ‘registered’ Client under ‘artificial limb scheme’ with QALS. If the NDIS or NIIS would be the more appropriate funding support government agencies, the patient will be notified by QALS.

When a QALS client is funded a new prosthesis or major repair for the first time, they may be required to return to the amputee clinic for a final review with the outpatient services. This gives the MDT member completing the **Acquittal Form** the opportunity to ensure the client is now wearing and using their new definitive prosthetic limb in a safe and appropriate manner.

Established clients with QALS are to contact their GP (local doctor) when they are experiencing any medical conditions which interfere with the fit and function of their prosthetic limb. The GP may refer them onto a hospital Amputee Clinic for more specialised treatment, if deemed necessary.
AMPUTEE CLINIC FLOWCHART

Patient has amputation and remains in hospital for post surgery care and treatment as a hospital inpatient. Initial clinical assessments will determine if the patient would be capable of prosthetic use and indicated on Discharge Summary for patient to attend an outpatient rehabilitation program with an Amputee Clinic.

Following discharge from hospital, the patient is referred to an outpatient Amputee Clinic for rehabilitation treatment with medical and allied health services – Wound management, Physiotherapy, Occupational Therapy, Prosthetics etc; referred to as the Multi Disciplinary Team (MDT).

A rehabilitation program will be designed with the Patient by the Amputee Clinic MDT based on the patient’s rehabilitation and mobility aims and incorporates the use of an interim prosthesis. When the Patient has completed their rehabilitation program and is ready to progress onto a definitive (permanent) prosthesis, both clinical and mobility assessments will be completed by the Amputee Clinic MDT, refer to items (i) and (ii) as indicated below.

(i) the patient is assessed by the Rehabilitation Specialist who completes a CPC Form to confirm the patient is clinically suitable and safe to use a prosthetic limb. The completed and signed CPC Form is sent to commence the patient’s registration process with QALS and to confirm their need for ongoing prosthetic funding support. A CPC Form also provides essential clinical information and interim prosthetic design history, which will assist with the prosthetic assessment in designing the future definitive prosthesis.

(ii) the patient undertakes a mobility assessment by the clinic Physiotherapist which will identify the activity level of the client in the use of a prosthesis. The completed and signed AMPAT form is sent to QALS to assist in the selection of the most suitable prosthetic components for the patient. This mobility assessment is generally only required once by QALS.

The CPC and AMPAT Forms will start the patient’s registration process with QALS to become a ‘registered Client’. Once the registration process is complete the CPC form is sent to the Client’s chosen prosthetic service provider (PSP) to commence the definitive prosthetic limb manufacturing process. Subsequent CPC forms support the Client’s ongoing clinical condition and their continued prosthetic use.

The Client will need to attend appointments with their chosen PSP until they are given a definitive prosthesis for trial. It is recommended the Client take the prosthesis home for testing for several weeks, contacting their PSP if they experience any problems in the use or fit or function of the prosthetic limb. After the trial period is complete the Client may be referred back to the Amputee Clinic and/or PSP for an acquittal and final inspection. The acquittal should be performed within 90 days of the Client being issued the prosthesis for trial. A foam cover may, or may not, be fitted depending on the Client’s preference.

It is QALS recommendation to Clients that they attend appointments for regular clinical reviews as scheduled by the Amputee Clinic post amputation and maintain regular contact with their GP thereafter. If at anytime the PSP is aware of any medical conditions affecting the fit and function of a prosthesis, the client is referred to their GP and/or amputee clinic for a review.
### AMPUETEE CLINIC LOCATIONS

<table>
<thead>
<tr>
<th>Amputee Clinics</th>
<th>Address</th>
<th>Contact Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bundaberg Hospital</strong></td>
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<td>CC: Ms Ricki Weber</td>
<td>BUNDABERG QLD 4670</td>
<td>Fax: 07 4150 2599</td>
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<td><strong>Cairns Base Hospital</strong></td>
<td>165 Esplanade</td>
<td>Ph: 07 4226 6123</td>
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<tr>
<td>CC: Ms Kere Donald</td>
<td>CAIRNS QLD 4870</td>
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<tr>
<td><strong>Gold Coast University Hospital</strong></td>
<td>Robina Health Precinct 2 Campus Crescent</td>
<td>Ph: 07 5687 3329</td>
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<tr>
<td>CC: Ms Jenny Blay</td>
<td>ROBINA QLD 4226</td>
<td>Fax: 07 5687 3297</td>
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<tr>
<td><strong>Lady Cilento Children’s Hospital</strong></td>
<td>501 Stanley Street</td>
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<tr>
<td>CC: Shailendra Maharaj (Shall)</td>
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<td><strong>Mackay Base Hospital</strong></td>
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<td>CC: Lawrence Molloy</td>
<td>199 Ipswich Road</td>
<td>Fax: 07 3176 7047</td>
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<td><strong>Rockhampton Hospital</strong></td>
<td>GARS Canning Street</td>
<td>Ph: 07 4932 5100</td>
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<td>CC: Tristan Clements</td>
<td>ROCHEPAMON QLD 4700</td>
<td>Fax: 07 4920 6539</td>
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<tr>
<td><strong>Royal Brisbane &amp; Women’s Hospitals [RBWH]</strong></td>
<td>Level 2 - Ned Hanlon Building</td>
<td>Ph: 07 3646 7286</td>
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<tr>
<td>CC: Peter Bryan</td>
<td>Butterfield St &amp; Bowen Bridge Road</td>
<td>Fax: 07 3646 1665</td>
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<tr>
<td><strong>RBWH Outreach Clinics:</strong></td>
<td>Contact RBWH for details</td>
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<td>Redcliffe and Nambour</td>
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<td><strong>Townsville General Hospital</strong></td>
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<td><strong>Private Eden Rehabilitation Centre</strong></td>
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<td>COOROY QLD 4563</td>
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<tr>
<td>Dr: Pei Huang – Rehabilitation Specialist</td>
<td>TOOWOOMBA</td>
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AMPUTATION DESCRIPTIONS

- Trans Radial, Below Elbow, TR, BEA
- Trans Humeral, Above elbow, TH, AEA
- Trans Femoral, Above Knee, TF, AKA
- Trans Tibial, Below Knee, TT, BKA
- Knee Disarticulation, KD, KDA, Through Knee, TKA
- Hip Disarticulation, HD, HDA, Through Hip, THA
- Shoulder Disarticulation, SDA, Through Shoulder, SD, TSA
- Elbow Disarticulation, EDA, Through Elbow, ED, TEA
- Wrist Disarticulation, WDA, Through Wrist, WD, TWA
- Partial Hand, PH, PHA
- Hindquarter, HQ, Hemi-pelvectomy, HQA, TP – Trans Pelvic
- Ankle Disarticulation, AD, Syme’s, TAA, Through Ankle
- Partial Foot, PFA, Chopart, PF, Lisfranc, trans-metatarsal
AMPUTATION DESCRIPTIONS / ABBREVIATIONS

For the purposes of a consistent set of abbreviations, mostly to describe amputations for the purposes of QALS, the following list has been derived from ISPO standards, but has been modified so that each entry is unique.

This replaces the previous list which differentiated between Congenital and other causes of the amputation. QALS records this information elsewhere.

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>New Terminology</th>
<th>Old Terminology</th>
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</thead>
<tbody>
<tr>
<td>PH</td>
<td>Partial Hand</td>
<td>Partial Hand</td>
</tr>
<tr>
<td>WD</td>
<td>Wrist Disarticulation</td>
<td>Through Wrist, Wrist Disarticulation</td>
</tr>
<tr>
<td>TR</td>
<td>Trans Radial</td>
<td>Below Elbow BE</td>
</tr>
<tr>
<td>ED</td>
<td>Elbow Disarticulation</td>
<td>Through Elbow, Elbow Disarticulation</td>
</tr>
<tr>
<td>TH</td>
<td>Trans Humeral</td>
<td>Above Elbow (AE)</td>
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<tr>
<td>SD</td>
<td>Shoulder Disarticulation</td>
<td>Shoulder Disarticulation, Through Shoulder</td>
</tr>
<tr>
<td>FQ</td>
<td>ForeQuarter Amputation</td>
<td>Forequarter Amputation, Scapula-Thoracic, Shoulder Cap prosthesis</td>
</tr>
<tr>
<td>CLSU</td>
<td>Congenital Limb Shortening Upper</td>
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</tbody>
</table>

### Upper

- **PH** Partial Hand
- **WD** Wrist Disarticulation
- **TR** Trans Radial
- **ED** Elbow Disarticulation
- **TH** Trans Humeral
- **SD** Shoulder Disarticulation
- **FQ** ForeQuarter Amputation
- **CLSU** Congenital Limb Shortening Upper

### Lower Limb

- **PF** Partial Foot
- **AD** Ankle Disarticulation
- **TT** Trans Tibial
- **KD** Knee Disarticulation
- **TF** Trans Femoral
- **HD** Hip Disarticulation
- **TP** Trans Pelvic
- **CLSL** Congenital Limb Shortening Lower

⇒ **Partial Hand Amputation**: is the loss or part loss of the Hand (including all levels of the Thumb) below the Wrist Joint and above the Metacarpal-Phalangeal (MCP) joint.

⇒ **Partial Foot Amputation**: is the loss or part loss of the foot (including all levels of the Great Toe) below the ankle joint and above the Metatarsal-Phalangeal (MTP) joint.
NDIS IN QUEENSLAND

Queensland Rollout Timeframe/Location

From January 2016, the NDIS has been available in the early transition sites of Townsville and Charters Towers for children and young people (0-17 years) and all eligible people from Palm Island.

From 1 July 2016 the NDIS has been available for remaining children and young people (0-17 years) in Townsville and Charters Towers.

From 1 October 2016 all remaining eligible people in Townsville, Hinchinbrook, Burdekin, west to Mount Isa, and up to the gulf will be able to access the scheme.

The NDIS will become available in Mackay, Isaac and Whitsundays from 1 November 2016.

The NDIS will become available in Toowoomba and west to the borders from 1 January 2017.

The NDIS will become available in Ipswich, Lockyer, Scenic Rim and Somerset from 1 July 2017.

The NDIS will become available in Bundaberg from 1 October 2017.

The NDIS will become available in Rockhampton, Gladstone and west to the borders from 1 January 2018.

The NDIS will become available in Logan and Redlands from 1 July 2018.

The NDIS will become available in Cairns, Cassowary Coast, Tablelands, Croydon, Etheridge, Cape York and Torres Strait from 1 July 2018.

The NDIS will become available in Brisbane suburbs north of the Brisbane River and Brisbane suburbs south of Brisbane River from 1 July 2018.

The NDIS will become available in Fraser Coast, North Burnett, South Burnett and Cherbourg from 1 July 2018.

The NDIS will become available in the Gold Coast and Hinterland from 1 July 2018.

The NDIS will become available in Moreton Bay including Strathpine and Caboolture from 1 January 2019.

The NDIS will become available in the Sunshine Coast, Noosa and Gympie from 1 January 2019.
PROSTHETIC SERVICE PROVIDERS

Prostheses and prosthetic services are provided through private companies which register with QALS to become a recognised Prosthetic Service Provider (PSP). PSPs are required to employ experienced and qualified allied health professional and technical staff, known as Prosthetists and Technicians, to ensure professional standards in prosthetic manufacturing technics are maintained and competent services are provided to QALS clients.

The PSP will liaise directly with the client during the course of their service provisions, on a continuous basis - designing and manufacturing prostheses; providing adjustments and fittings of the prosthesis; repairs and maintenance to the prosthesis; and supply of consumable items such as stump socks and liners.

Some Queensland public hospitals may have a prosthetic department which provides interim prosthetic limbs during a patient’s rehabilitation program. Interim prosthetic limbs are provided and funded under public health services.

Once a person has completed their interim program and/or been reviewed in an amputee clinic and referred onto QALS for on-going definitive prosthetic services and government funding support. In the registration process with QALS the person will be asked to select which PSP they will attend to obtain their ongoing definitive prosthetic services from. There may be limited choices in the number of Providers available in some regional locations. QALS does not fund travel or accommodations expenses for Clients or PSPs.

Before a prosthetic service can be funded by QALS, a prosthetic assessment will be undertaken by a Prosthetist. The Prosthetist will check the CPC Form from the Amputee Clinic for relevant information and contact the amputee clinic if any additional information is required. The Prosthetist will discuss with the Client their mobility needs and physical capabilities; rehabilitation aims; and work / life style commitments, prior to designing and selecting the most suitable components available under government funding. The prosthetic limb will be designed with the aim to meet the client’s basic mobility needs.

The PSP will submit to QALS a written and comprehensive ‘Prosthetic Assessment Needs Form’ (APN Form), which will identify the limb type, component details and quoted cost to QALS. QALS will only fund prosthetic limbs which incorporate standard components and provide basic mobility needs, which may or may not, fully meet all the client’s needs and/or mobility expectations / capabilities. All major prosthetic services requests must be in writing and approved for funding by QALS, before any services are provided to the client.

The PSPs have their main offices and workshops located across the State of Queensland. PSPs providing definitive prosthetic services are not part of any health or hospital service. Some PSPs may also offer a mobile service to the more remote locations on a regular basis. PSPs are informed of, and required to familiarise themselves with, relevant sections of the Queensland Health ‘Code of Conduction’ requirements.

It should be noted, that once a PSP has been given approval to manufacture or repair a prosthesis and has commenced work on the prosthesis, or cast for the socket, the client is not permitted to change PSP. Warranty on PSP workmanship and quality of product and components applies to all prosthetic service. Socket warranty has 3 months on fit and 12 months on socket integrity. Components are as per the manufacturers’ specifications for both ‘warranty’ and ‘expected period-of-use’ for each specific item.
The PSP is able to provide prosthetic services directly to the client, once the client is registered with QALS under the ‘Artificial Limb Scheme’.

QALS will forward the CPC Form from the amputee clinic to the PSP indicating the client has selected their company to obtain their prosthetic services from.

PSP is contacted directly by a registered and existing QALS client for a repair to their current prosthesis or seeking a replacement prosthesis or supplies.

Client’s prosthesis and/or prosthetic needs are assessed by a qualified Prosthetist employed by a QALS registered PSP.

A new prosthesis or major repair to an existing prosthesis request will be sent to QALS on an APN Form for funding approval.

The APN Form is reviewed by QALS and returned to the PSP with a government purchase order if approved for funding.

Standard repairs requests are to be emailed to QALS for funding approval and will be returned emailed to the PSP with a MR & voucher number when approved.

PSP contacts client to commence approved services eg; casting for new prosthetic limb/socket or repairs to existing prosthesis.

Minor repairs, adjustments and supplies are provided to clients by the PSP by appointment and/or as requested by the client.

When the new prosthesis or socket is ready for testing at home, the client will sign an ‘Issue and Trial Form’ indicating they are taking the prosthesis for trial.

PSP will send electronic invoice to QALS for services provided, followed by hard copy invoices with attached original signed Forms to QALS for payment.

The PSP is to conduct follow-up reviews and check with the client that the new prosthetic limbs or socket is functioning correctly and ensure the client is comfortable with the fit, as per the 3 month manufacturing warranty clause.

The new prosthesis / socket should be ‘Acquitted’ within 90 days of Issue for Trial. A final review with the client should indicate the prosthesis is fitting well and functioning correctly.

An ‘Acquittal Form’ can be completed by either an amputee clinic staff member or by a senior Prosthetist at the PSP’s facilities, depending on where the service request originated from.

Funding approval for a foam cover can be requested as a major repair (MR) once the prosthesis is acquitted.

Note: Failure to complete Acquittal may delay future funding approvals for the client.
<table>
<thead>
<tr>
<th>Prosthetic Service Providers</th>
<th>Address</th>
<th>Contact</th>
</tr>
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<tbody>
<tr>
<td>Artificial Limbs &amp; Appliances Ltd</td>
<td>Unit 1 / 67 Depot Street BANYO QLD 4014</td>
<td>Ph: 07 3266 1255</td>
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<tr>
<td></td>
<td>Outreach services at:</td>
<td>Fax: 07 3266 7033</td>
</tr>
<tr>
<td></td>
<td>- Toowoomba</td>
<td>Email: <a href="mailto:admin@alaprosthetics.com.au">admin@alaprosthetics.com.au</a></td>
</tr>
<tr>
<td>Barry Leech Prosthetics and Orthotics Pty Ltd</td>
<td>7 Pinter Drive SOUTHPORT QLD 4215</td>
<td>Ph: 07 5532 0506</td>
</tr>
<tr>
<td></td>
<td>Outreach services at:</td>
<td>Fax: 07 5532 2151</td>
</tr>
<tr>
<td></td>
<td>- Cairns</td>
<td>Ph: 07 4045 4606 (Cairns)</td>
</tr>
<tr>
<td>Brisbane Prosthetics and Orthotics</td>
<td>Unit 8 / 107-123 Muriel Ave; MOOROOKA QLD 4105</td>
<td>Ph: 3392 8440</td>
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<tr>
<td></td>
<td>Outreach services at:</td>
<td>Fax: 07 3392 8550</td>
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<tr>
<td></td>
<td>- Toowoomba</td>
<td>Email: <a href="mailto:admin@brisbaneprosthetics.com.au">admin@brisbaneprosthetics.com.au</a></td>
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<td></td>
<td>- Townsville</td>
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<td></td>
<td>- Mackay</td>
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<tr>
<td>Freedom Prosthetics Pty Ltd</td>
<td>Unit 1 222-226 Hartley St; CAIRNS QLD 4870</td>
<td>Ph: 07 4035 1404</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mbl: 0409 478 391</td>
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<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:info@freedomprosthetics.com">info@freedomprosthetics.com</a></td>
</tr>
<tr>
<td>OAPL (Goodwill)</td>
<td>Unit 1 / 51 Secam Street MANSFIELD QLD 4122</td>
<td>Ph: 07 3849 8152</td>
</tr>
<tr>
<td></td>
<td>Outreach services at:</td>
<td>Fax: 07 3849 1354</td>
</tr>
<tr>
<td></td>
<td>- Hervey Bay</td>
<td>Email: <a href="mailto:goodwillortho@oapl.com.au">goodwillortho@oapl.com.au</a></td>
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<tr>
<td>Prosthetic Solutions Queensland</td>
<td>Unit 2 / 20 Valente Close CHERMSIDE QLD 4032</td>
<td>Ph: 1300 423 338</td>
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<td></td>
<td></td>
<td>Fax: 1300 425 558</td>
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<td></td>
<td></td>
<td>Email: <a href="mailto:info@prostheticsolutions.com.au">info@prostheticsolutions.com.au</a></td>
</tr>
<tr>
<td>Queensland Prosthetics</td>
<td>Unit 16 / 66 Jessica Bld BERRINBA QLD 4117</td>
<td>Ph: 07 3803 7317</td>
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<tr>
<td></td>
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<td></td>
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<td>Email: <a href="mailto:qprosthetics@outlook.com">qprosthetics@outlook.com</a></td>
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<tr>
<td>Skeletal Support Systems</td>
<td>Unit 2 / 196 McLeod Street CAIRNS 4870</td>
<td>Ph: 07 4041 4715</td>
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<tr>
<td></td>
<td>Unit 2 / 16 Casey Street AITKENVALE 4814</td>
<td>Townsville Ph: 07 4775 1323</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:admin@skeletalsupport.com.au">admin@skeletalsupport.com.au</a></td>
</tr>
<tr>
<td>Sunshine Orthopaedic Services</td>
<td>Shop 2D 29 Short Street NAMBOUR QLD 4560</td>
<td>Ph: 07 5441 2488</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fax: 07 5441 7644</td>
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<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:sales@sunshineorthopaedics.com.au">sales@sunshineorthopaedics.com.au</a></td>
</tr>
<tr>
<td>APC Prosthetics Pty Ltd</td>
<td>2 Redbank Road NORTHMEAD NSW 2152</td>
<td>Ph: 02 9890 8123</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fax: 02 9890 8124</td>
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<tr>
<td></td>
<td></td>
<td>Email: <a href="mailto:APC@APCprosthetics.com.au">APC@APCprosthetics.com.au</a></td>
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</table>
QLS PROCESSES

When a person has undergone major surgery involving amputation, they will spend time recovering in hospital as an inpatient. Prior to discharge from hospital, the patient will be assessed by a health professional to deem if they are suitable and strong enough to undertake an ‘interim rehabilitation program’ at an outpatient amputee clinic. As an outpatient, the person will be trained on how to wear and walk on an interim prosthetic limb provided by the hospital. The rehabilitation program can be ongoing for several months. The ‘interim rehabilitation program’ is primarily with a Physiotherapist and overseen by a Rehabilitation Specialist and supported by other health professionals trained in amputee rehabilitation.

Registration

A patient will need to complete their interim rehabilitation program before they can be deemed suitable for a definitive (permanent) prosthetic limb. The patient will be clinically assessed by a Rehabilitation Specialist and/or other member of the multidisciplinary team, at a recognised Amputee Clinic and the completed CPC Form is sent to QALS to commence the registration processing for prosthetic funding assistance. The CPC Form is evidence to QALS that the patient is clinically stable, has been trained in the use of a prosthesis, competent in its use and able to use a prosthetic limb safely. The cost of purchasing, maintaining and replacing a prosthetic limb every 2 – 3 years is beyond most people’s financial resources. As such the Queensland Government ‘Artificial Limb Scheme’ also known as the ‘free limb scheme’ is available for prosthetic funding support to permanent residents of Queensland. Funding is limited to standard components to assist with basic mobility needs. The patient must become a registered Client with QALS to access this government funding support under the ‘Artificial Limb Scheme’.

The CPC Form sent to QALS from the amputee clinic, is the first step in the registration process with QALS. Using the details from the CPC Form, a Registration Form is sent to the person’s home address for them to complete and return to QALS in the provided return paid envelope.

PSP Selection

The person completing the form is asked to select a Prosthetic Service Provider (PSP) from the listed provided by QALS in the registration kit and indicate their choice on the Registration Form. After the Registration Form is returned to, and processed by QALS, the applicant will be advised in writing, if they are eligible for funding support under the ‘Artificial Limb Scheme’ and listed as a registered client with QALS. The selected PSP is also notified and will contact the client for an appointment to undertake a definitive prosthetic assessment. The PSP completes an Assessment of Prosthetic Needs Form (APN Form) and sends it to QALS for funding approval. A copy of the APN Form will be sent to the amputee clinic, if the client’s service provision was initiated through their attendance at an amputee clinic.

When a person with an existing amputation, and already using a prosthesis for mobility, moves to live permanently in Queensland they will need to register with QALS (or NDIS) for funding support. Depending on the person’s circumstances (i.e. how recent was their amputation), they may need to be clinically assessed at an amputee clinic and have a CPC Form completed and sent to QALS. In most circumstances they are assessed by a PSP of their choice and the history of their previous prosthetic services will be sourced by QALS to assist with the registration process.

It should be noted, that once a PSP has been given approval to manufacture or repair a prosthesis and has commenced work on the prosthesis, or cast for the socket, the client
is not permitted to change PSP. Warranty periods on PSP workmanship and quality of product and components do apply to prosthetic devices eg; Socket warranty has 3 months on fit and 12 months on socket integrity and components and/or as per the manufacturers’ specifications.

Appointments
- Clients are encouraged to make appointments with their PSP as they deem necessary for their prosthetic services or needs.
- Clients should seek immediate assistance from their treating Specialist or Medical Practitioner (GP), if they have any concerns with medical issues or their health.
- Reviews for clinical and mobility assessments at a hospital amputee clinic will require appointments made in advance.
- Prosthetic assessment and repairs will require appointments made in advance with the PSP.
- Casting, fitting and adjustment appointments will be made with the client by the PSP as necessary.
- The client may be required to attend a number of appointments with the PSP for casting, fitting, gait management and adjustments during the course of the prosthetic / socket manufacturing process.
- Appointments at the amputee clinic for the acquittal of any new limbs or major repairs will be made by the PSP, after the prosthetic limb has been trialled at home by the client for a number of weeks.

Prosthetic Issue & Trial
Prior to the client taking their new or repaired prosthesis for trial, the treating Prosthetist will inform them on the limitations and correct way to ‘care for’ and ‘use’ their newly acquired artificial limb and/or components. The client will be required to sign a ‘Prosthetic Issue & Trial Form’ for the prosthesis they are accepting, stating that they understand and accept the terms and conditions of use. The client is expected to test and use the new prosthetic limb for several weeks in a safe environment, before a foam cover is finally fitted and/or the prosthetic service is acquitted. A QALS staff member will phone or email the client during this trial period, using the contact details provided on the Issue & Trial Form, to ensure the client has possession of the prosthetic limb recently issued and if they are happy with the fit and function of the prosthesis or socket or major repair, so far. Clients are encouraged to contact their PSP if they are experiencing any discomfort or issues with the fit of the prosthesis during this trial period.

Acquittal Process
After the client has completed the trial period of the new prosthesis/components, they will be required to return to the amputee clinic and/or PSP facility where the service episode commenced. The prosthesis is inspected to ensure it is of quality standard and consistent with the service request. To ensure the client is not at risk of fall or injury in using the prosthesis, they will be asked to fit and walk in the prosthesis. A member of the MDT at the amputee clinic and/or the senior Prosthetist of the selected PSP Company will examine the prosthesis prior to an Acquittal and Quality Control Form being completed. Failure to complete the acquittal process may delay future QALS funding approvals.

Service Evaluation
QLS Service Evaluation forms will be sent or emailed to the client at the conclusion of each major service funded under the ‘Artificial Limb Scheme’. The client is requested to complete and return the Service Evaluation Form in the envelope provided or by return email. This provides an opportunity for the client, free from outside influences, to
express their satisfaction, or dissatisfaction, with the services provided on all levels; from the initial visit to the amputee clinic and onto the final wearing and use of their prosthesis.

This process is to ensure the prosthesis and/or repair meets the client’s needs and prosthetic manufacturing safety standards are met. Any concerns raised by the client through this process will be taken seriously by QALS. QALS can improve services by understanding the client’s needs and following up with the feedback provided on the Service Evaluation form.

Complaints
Clients are encouraged to raise any concerns regarding the services they are receiving at any stage of their prosthetic service provision with QALS. All concerns, questions and complaints will be dealt with in confidence and through the appropriate Queensland Health’s complaints process. Amputee clinic staff and PSP staff are reminded of the Queensland Health’s Code of Conduct. Refer to ‘Complaint’s Procedure’ in the Procedure Section of this reference folder for more detailed information. Clients are supported, and at liability, to contact the office of the Health Ombudsman at any stage of their complaint and QALS will be fully supportive in finding a client focused resolution.

New Prosthesis
The prosthesis and associated accessories are to be maintained in a clean condition by the client. As daily mobility commences and the client begins to return to normal activities, the residual limb continues to condition itself depending on the demands placed on it. During the client’s rehabilitation period it is normal to expect several socket replacements on an interim prosthesis, until the residual limb settles around 6-12 months post amputation.

A new definitive prosthesis is expected to provide 30 to 40 months of use prior to needing replacement, depending on the client’s age, mobility and daily activities. It is acceptable for a prosthesis to be serviced and checked annually by the PSP at the client’s request, or if the prosthesis is not functioning as expected. However, any replacement prosthesis under the 36 months (3 years) period of use will require justification, especially if undamaged or undue wear is evident. Prostheses are not automatically replaced, just because the expected period of use has passed. QALS funding is finite and the government’s original budget allocation was based on the number of registered clients by the average cost of replacement prosthesis every 3 years. QALS funding is not based on medical or individual lifestyle needs, the client’s work demands or activities of interest, nor advancements component technology.

Emergency or Spare Prostheses
Emergency, shower or stand-by prostheses are no longer possible under the current funding resources available from QALS. QALS current funding allows for the provision of one (1) x standard prosthesis per amputated limb, to meet an eligible client’s basic mobility needs.

Recreational Prostheses
QALS does not fund recreational prosthetic limbs or attachments under the current ‘Artificial Limb Scheme’ funding arrangements for any person, regardless of age or amputation level. The ‘Artificial Limb Scheme’ covers funding for standard prosthetic services and components only.

A temporary four year Active Limbs4Kids program for children, adolescents and young adults commenced on 1 July 2014 to 30 June 2018. The Active Limbs4Kids program is being administered by QALS, in addition to and separate from, the ‘Artificial Limb
Scheme’ and available across the state. Children and their parents should speak with their PSP to identify which prosthetic components are available under the program and suitable for their child. The purpose of the program is to ensure all children and adolescents are provided with a prosthetic limb, which will assist them to participate in the community and everyday sporting and recreational leisure activities, the same as their peers are able to. Standard prosthetic limbs are not designed for recreational purposes.

Interested clients do not need to attend an amputee clinic to obtain this special funding; their treating PSP will submit a special request to QALS, on their behalf. Children do not need to attend an amputee clinic to obtain their recreational prosthetic limb funding, but may certainly do so, if they wish to avail themselves to public health professional support with assessments and training.

The Lady Cilento Children’s Hospital (LCCH), Limb Deficiency Clinic is offering specialised assessments for children to identify suitable recreational activities and provide training support for children in the use of their recreational prosthetic limbs. Parents should consider the specialised services being offered by the LCCH, as they will help with adjustments and mobility issues that may arise from the child using a new style prosthesis for a specialised mobility purpose – running, cycling, swimming, horse riding.

**Repairs**

There are three levels of repair services – Minor, Standard and Major. Only artificial limbs funded by QALS and listed as current will be repaired at QALS expense.

**[i] Minor Repairs**

Minor repairs can be arranged directly with the PSP by the client and must be less than $550.00 in total value. However, if the inspection of the prosthesis reveals that more extensive repairs are required, approval for a standard or major repair may be required before any further work can proceed.

**[ii] Standard Repairs**

A standard repair request is used if the value is between $550 and below $1,500. The request is emailed to QALS for a speedy approval by return email. The main items requested are liner replacements, cosmetic covers, packing sockets and replacement of the lower range foot units.

**[iii] Major Repairs**

Any repair over the value of $1,500 or a component that affects the fit and function of the prosthesis, will need to be submitted on an APN Form for funding approval by the QALS manager. The main services that fall into this category are socket replacements and/or the replacement of the main component items such as a knee unit or foot unit. Service requests are not to be split to suit the value ranges, this is called ‘split invoicing’ and not permitted in State Government services.

Repeated socket replacements due to a client’s medical condition (swelling or ulceration) will require medical intervention before repairs can be funded. Broken or cracked sockets due to a fall are taken seriously and must be indicated on the APN Forms. Prosthetic limbs (sockets or components) which are showing abuse due to mistreatment by the client will require an explanation.
Components are designed and manufactured to suit indicated mobility ratings and weight limitations. Broken or damaged components will require investigation by the Prosthetist as to the cause of the malfunction with the component. All components have been extensively tested and come with a warranty clause and expected period of use in day-to-day activities.

Repeated major repairs to a new prosthesis for a socket replacement or major components in the first 12 months of use will require justification as to the reason for the replacement and/or if the components failed to meet warranty or expected periods of use guidelines.

**Components**

QALS provides and maintains an approved list of components on a component database, which are suitable for use with all types of limb designs. All components approved for use and funded by QALS must be listed on the Australian Register of Therapeutics Goods by the Australian importer/supplier. The QALS component list provides an adequate range of components to cover all levels of amputation, mobility grading and component weight limitations.

QALS will fund the standard provision of services and *clients may upgrade at their own expense* to more advanced components, not listed under QALS funding availability.

It is advised that the client always discuss any components they are interested in with their treating Prosthetist. Not all components function safely or correctly when combined with other components and different limb designs.

QALS does allow a PSP to utilise components funded by the client or from provided by another recognised Provider into a QALS funded prosthesis under the following conditions:

- Components supplied on an interim prosthesis can be inspected by the Prosthetist and utilised if suitable on the definitive prosthesis.
- Components supplied on prosthesis from an interstate or overseas transfer client can be inspected by the Prosthetist and utilised on the QALS prosthesis.
- Upgraded components funded by the client and/or QALS and purchased new by the PSP through the normal purchasing process with Suppliers/Importers with associated warranty specifications, can be used on the QALS prosthesis.
- All identified components must be included on the Australian Register of Therapeutics Goods.
- Components will also meet the structural standards ISO 10328 or equivalent for lower limb prosthesis and ISO/DIS 15032 for hips.
- The maintenance of upgraded component/s, purchased fully or partially by the client’s, will be at the client’s responsibility and at their expense.

QALS must be notified if any upgraded, or special designed component, has been added to a prosthesis, regardless if it was fully or partially funded by QALS. PSPs are required to list all such components on the reverse of the APN Form, when the prosthesis is taken for trial and prior to invoicing. This includes upgraded components previously purchased by the client and not recorded on a previous APN, or not known to the PSP, which is to be moved across from an expired prosthesis and fitted to a new prosthesis.

**Components purchased over the internet** (second hand or new), or by any other method, by the client are not encouraged by QALS. If a PSP is willing to accept responsibility for the fitting of such a component, a ‘risk assessment’ report is to be
completed and signed by the client. QALS must be notified in writing if such a component is fitted to a QALS’s registered prosthesis. QALS takes no responsibility for the fitting or maintenance of such components and the labour to fit the component will not be funded by QALS.

Consumables & Supplies
QALS funds consumable items such as stump socks, cosmetic gloves etc, through the PSP. Annual funding limits apply with approximate quantities listed below:-

- Cosmetic Stockings - 12 per annum
- Stump Socks - 12 per annum in either wool or cotton or a combination of both.
- Sheaths - 4 to 6 (up to $200 total) per annum
- Gel Sock - 5 (up to $300) per annum
- Suspension Sleeve - 1 to 2 (up to $310) per annum
- Shower protection - 1 per annum if suitable (up to $100).

Surgical Footwear
QALS does not provide surgical footwear.

Partial Hand
Partial hand prostheses may be provided through QALS, however replacement digits are not funded under QALS.

Partial Foot
Partial Foot prostheses may be supplied by QALS for partial foot amputations, proximal to the metatarsal phalange joint. A client with a partial foot amputation may have the following supplied by QALS:

- A custom made prosthesis designed to fit the client’s stump as in Chopart and Lisfranc amputations.
- Inserts for their footwear including toe fillers and/or rocker soles and heels (as opposed to surgical footwear which is not provided by QALS).

Other Prostheses
Prostheses for conditions other than limb deficiency are not available through QALS.

QALS Consumer Advisory Committee
To ensure services are delivered in a manner which partners with consumer needs and requirements; QALS hosts a quarterly Consumer Advisory Committee meeting. The membership on the Committee incorporates consumers, consumer support groups / organisations, amputee clinic clinicians and prosthetic service providers.

The purpose of the Committee is to assist QALS with identify ways to improve service delivery in a consumer friendly manner; identify funding issues and service limitations; inform and educate consumers and advise of any changes in operations that may impact on the ‘Artificial Limb Scheme’ or delivery of a continuous service to the consumer.

The meetings are scheduled in advance and held quarterly in February, May, August and November. The meetings are minuted, with action and outcomes documented and reported to Executive Management.
QALS CONSUMER ADVISORY COMMITTEE

TERMS OF REFERENCE

Role

To act in an advisory capacity to QALS on issues related to the overall effectiveness and efficiency of the service.

Terms of Reference

- To assist in the review of policies and procedures.
- To advise on the quality and level of prosthetic and related services.
- To participate in quality improvement activities.
- To represent the concerns of the clients and providers as appropriate.
- To address issues as may be periodically submitted by QALS management.

Membership

- Client representatives:
  - a veteran
  - child amputee by parent / grandparent
  - a community representative
- Representative for voluntary amputee support group or association.
- Representative of the contracted Prosthetic Service Providers (PSP).
- Representative from public health prosthetic services/amputee clinics.
- Manager of QALS (acts as Chairperson).

Appointment

- Appointed by QALS from submitted applications.
- Appointment is for a two year period, with annual review by QALS Manager depending on attendance and participation in meetings.
- Appointment may be terminated if the group / profession they are representing no longer consider them as their representative.
- Confirming letters of representation may be required at times e.g. following AGMs of support groups and new contracts of PSPs.
- Representatives may resign by choice at any time.

Meetings scheduled for 20xx

- Quarterly – 2nd Monday of the nominated month at 9:30am –
  - February; May; August; & November 20xx.
- Emergency and adhoc meetings may be called by the Chairperson.
**QALS FLOWCHART**

Receive CPC Form and AMPAT Forms from Amputee Clinic. Or a client contacts QALS directly for registration, usually moved from inter-state to live in Queensland or re-admission following compensation settlement.

Send Registration and other appropriate forms to client. If the client is transferring from inter-state a history of previous services will be required from the previous ALS before registration with QALS can be finalised.

The returned registration forms will be processed by QALS and the client will be notified in writing if they are eligible for prosthetic funding support under the Queensland Government Artificial Limb Scheme. QALS will email the CPC form to the chosen PSP requesting an APN to be completed.

The APN will be submitted to the QALS manager for funding approval. Please Note: If the client is DVA, an eligibility and approval of services request will be sent to DVA for approval prior to processing by QALS.

An approved APN will be processed and issued an MR or Limb Number which is noted on the authorised APN, prior to being faxed/emailed back to the PSP. The APN is then posted back to the PSP, so they can enter the required information on the reverse of the APN Form and sign the TGA certification section on completion of the prosthesis.

The green copy of the APN is sent to the clinic, if relevant, and the yellow placed on the QALS client file for reference during the manufacturing / repair on the APN.

The client is sent an approval letter indicating funding has been approved and instructed to contact their chosen PSP for an appointment to commence the approved episode of service.

Client is issued their prosthesis (new or repaired) for trial and signs the Issue and Trial Form. Or the client is given their components or supplies and signs the appropriate repair or supply Form, indicating they have received the items listed. The PSP forwards an invoice with the signed forms attached for payment. QALS processes and confirms the episode of service is correct, is of quality standard and has been issued to the client before payment is authorised. APN is held by QALS until the Acquittal process is complete.

The PSP should review the client several times between the prosthesis being issued and acquitted, to check the prosthesis is comfortable and prior to fitting of foam cover (if the client wants one). PSP books client in for acquittal appointment.

Once the acquittal form is received by QALS the Client is sent a Service Evaluation Form. PSPs failure to complete the acquittal process may impede future prosthetic service funding approvals and services for the Client.
**FREQUENTLY ASKED QUESTIONS BY CONSUMERS**

**“How do I access the Artificial Limb Scheme?”**  
The consumer should be referred onto QALS from an amputee clinic and/or prosthetic service provider. In most circumstances, funding of prosthetic services is not initialised until the client has attended an amputee clinic for a medical assessment confirming they are able to use a prosthesis safely. If the consumer is transferring from another State to Queensland, QALS will contact the ALS which has previously funded their prosthetic services for a copy of their prosthetic service records.

**“Who pays for my artificial limbs?”**  
The Health Service is responsible for interim (training) prosthetic limbs while a consumer is undergoing their rehabilitation program with an Amputee Outpatient Clinic. Funding support for definitive (permanent) prosthetic services may come from a number of government agencies (eg QALS; NDIS; NIIS; DVA) depending on the consumer’s circumstances.

With the implementation of the National Disability Insurance Scheme (NDIS) to Queensland over the next 3 years, the funding of assistive technology, such as prosthetic limbs, will mainly come from either NDIS or QALS depending on the consumer’s circumstances and age. Generally speaking, consumers 64 years and under will apply for funding from NDIS, while consumers 65 years and older will apply for funding support through QALS. If in doubt, QALS should be contacted in the first instance to establish which government agency would be the most likely funding support service.

QALS funds basic prosthetic services to all eligible consumers. If the consumer holds a current open Medicare Card, 65 years and older and is a permanent resident of Queensland, they will most likely be eligible for prosthetic services funded through Queensland Health. Compensable clients are not eligible for prosthetic funding under the ‘artificial limb scheme’ until they have expended the funds from their settlement for that purpose.

**“Where do I get information?”**  
Consumers can contact QALS directly. Alternatively, consumers can contact any of the Voluntary Amputee Associations, Amputee Clinics or Prosthetic Service Manufacturers listed in this Reference Folder. QALS does not provide medical or clinical services to consumers; hence our information may be limited to the funding of prosthetic services.

**“Can I choose which Clinic I attend?”**  
The consumer may choose to attend any of the public hospital amputee clinics listed with QALS. However, the first appointment, which is generally to commence their interim rehabilitation program, is usually made at the hospital, or through the hospital where they underwent the amputation surgery. All current clinics accept appointment referrals and requests, without geographic limitation, via the other hospital service or the consumer’s GP (local doctor). It is strongly recommended that the consumer establish a relationship with one amputee clinic to assist in the rehabilitation and management of their overall clinical needs as an amputee.
“If I am not happy with the Amputee Clinic’s recommendations, how can I change them?”

If the consumer does not agree with the recommended treatment they are receiving, they may seek an alternative opinion via another amputee clinic. The consumer will need to contact the clinic of their choice and make an appointment. Travel costs to and from outpatient appointments at the listed amputee clinics are usually at the client’s own expense and arrangements.

“What is the benefit of attending appointments at the Amputee Clinics?”

Consumers are provided a comprehensive and specialised multi-disciplinary health care approach to their ongoing needs following an amputation at the Amputee Clinics. The staff are experienced and trained in the rehabilitation skills required to train a person to wear, walk and use a prosthesis in their everyday lives. As the consumer progresses through their rehabilitation program they will be given assistance on a range of needs such as wound management, strengthening exercises to gain mobility, getting back up after a fall; mobilising down stairs, slopes and uneven ground, returning to work, driving a vehicle, donning and doffing their prosthesis, using other mobility aids as well as their prosthesis. Appointments made for you with the Amputee Clinics should be attended. Failing to attend may delay rehabilitation or impede your full mobility capabilities. Consumers seeking registered with QALS for definitive prosthetic funding will need to have completed an interim rehabilitation program, which will result in a medical / clinical clearance by their Amputee Clinic for ongoing prosthetic use.

“What is the benefit of attending follow up appointments at Amputee Clinics once I have completed my rehabilitation program and returned to my normal life?”

The Amputee Clinic may schedule regular or annual reviews with the consumer after they have completed their rehabilitation program, to ensure they are progressing well and no other issues have come to light after wearing and using a prosthetic limb for some time. It is in the consumer’s best interest to attend these appointments especially if they are not as mobile as they would like, the prosthetic limb is causing pain or discomfort when used, constant pain presents anywhere in the body; poor wound health, residual limb changes or for any other medical condition which may effect the consumer.

“Do I need to attend both an Amputee Clinic appointment and see my PSP when I need a new prosthetic limb?”

Consumers who are registered with QALS for definitive prosthetic funding support can contact their PSP directly for a new prosthetic limb or repair, when they feel it is necessary. They do not need to attend an amputee clinic for a medical or physiotherapy review assessment, if they have no medical or clinical issue effecting the fit and function of their prosthesis.

“How do I get a new prosthesis or repairs to my existing one?”

The consumer should phone and make an appointment with their PSP.

- All new prostheses require a prosthetic assessment form completed by their treating Prosthetist and submitted to QALS for funding approval prior to any work commencing.
- Major repairs, such as socket replacements or knee component replacements, will also need a prosthetic assessment form or major repair request submitted to QALS for funding approval prior to any work commencing.
- Most minor repairs can be carried out by the prosthetic manufacturer without referral to QALS.
“Am I free to choose my prosthetic manufacturer and how do I know which companies are registered as Providers with QALS?”

Depending on where they live in Queensland, the consumer's location will most likely dictate the choice in Prosthetic Service Providers (PSP) available. Not all PSPs registered with QALS are available in all areas of Queensland. A leaflet listing the names of Providers registered with QALS is provided to consumers when they register for prosthetic funding support.

Where the client has a choice in PSP, it is recommended they contact or visit the premises and/or meet with the Prosthetist attending, before they make a choice, but this is not always possible.

QALS provides no financial assistance for travel or transport to attend a PSP or Amputee Clinic for services.

“Can I change PSP if I am not happy with them?”

Consumers may change PSP if they wish and will be responsible for all costs associated with travel to the PSP of their choice. Please be aware that once work has commenced (that is, a cast has been taken or repair work on the prosthesis has commenced) the consumer is required to complete that episode of service with that PSP. After the warranty period for the service has expired, the consumer is free to change PSP for ongoing services. In some regional locations, there is only one PSP available in that location and the consumer can not change unless they travel at their own expense to another location.

“How much will the prosthesis cost?”

There is no cost to eligible clients who are provided with a standard prosthesis and or services approved for funding by QALS. A new prosthesis can cost anything from $5,000 to $15,000 depending on the type of prosthesis being manufactured. QALS has formal arrangements with the PSP governing the type of services and components available for funding through QALS. Consumers can contribute to the upgrading of components if they desire and/or believe the components funded under QALS are not sufficient for their needs or activities.

“Who owns the limb?”

The prosthesis (artificial limb) is funded and maintained under the conditions of use and wear by the State Government through QALS. However, the artificial limb is considered to belong to the consumer, with an expectation they will only use the prosthesis in the manner it was provided for; abide by QALS procedures; and maintain the artificial limb in good condition. Expired or replaced prostheses will not be repaired or serviced by QALS. The consumer does not need to return expired limbs to QALS or the PSP, except on demand by QALS. If the consumer no longer requires their old prostheses they may give them to the PSP for disposal.

“Am I allowed to repair or modify the limb?”

NO. All consumers are specifically prohibited from making any changes, alterations and/or repairs which in any way could affect the function of their current prosthesis. If
the consumer is having difficulty with their prosthesis, they should contact the manufacturer (PSP). Please be aware that QALS will not fund any service resulting from a person tampering with the prosthesis, nor will it assume any responsibility for any outcome arising from the use of a prosthesis, that has been tampered with by the client.

“Can I get a second prosthesis?”
QLS funding limitations only extends to, one standard prosthesis per amputated limb for basic mobility needs. A new prosthetic limb is expected to provide approximately 30 - 36 months of use to the consumer before a replacement prosthetic limb is required. QALS does not provide any emergency, shower limbs or spare prosthetic limbs.

“Does QALS provide artificial limbs for my sporting activities?”
QLS has no funding available under the ‘Artificial Limb Scheme’ for prosthetic limbs for any recreational or leisure activities (eg water activities, musical instruments, running, jumping, ball activities, football; soccer, snow boarding, athletics sports, dancing, martial arts) under the ‘Artificial Limbs Scheme. The Active Limbs4Kids program launched on the 1 July 2014 is providing temporary prosthetic funding for four years for recreational prosthetic limbs for children and adolescents sporting and community activities.

“If the prosthetic service provider or amputee clinic is not meeting my expectations to whom do I complain?”
Generally, QLS recommends the consumer addresses the concerns they are unhappy about, with the service provider (i.e. amputee clinic or PSP). If the consumer does not feel comfortable with doing this, they should contact the QALS Manager. The QALS manager will advocate on their behalf to find a consumer focused resolution. If the consumer’s complaints are related to QALS services, the consumer should be directed to the Queensland Health complaints section for advice.

“Will I be penalised by lodging a complaint?”
NO. QALS considers complaints as opportunities to improve the overall quality of service delivery. QALS also routinely surveys consumers who have used the service as another means to seek feedback. QALS does not know if there is a problem in any area of service, or if QALS is failing to meet the required service expectations, if consumers do not inform QALS of their dissatisfaction.
FORMS INDEX

Samples of various forms attached
- Clinical Prosthetic Clearance (CPC) Form
- Assessment for Prosthetic Needs (APN) Form
- Amputee Mobility Predictor Assessment Tool (AMPAT)
- Clinic Interim Prosthetic Service Registration Form
- Acquittal Form – Clinic

QALS PROCEDURES

- Acquittal of Prosthesis
- Active Limbs4Kids Program
- Amputee Clinic Recognition
- Appeals
- Child Amputee Limb Replacement
- Client Responsibility
- Client Service Evaluation
- Complaints
- Completion of Clinical Prosthetic Clearance (CPC) Form
- Completion of Assessment of Prosthetic Needs (APN) Form
- Completion Time
- Components
- Eligibility to become a QALS registered client
- Home Visits by Prosthetic Service Providers
- Hospital Interim Prosthetic Services
- Identification of Prosthesis
- Interim to Definitive Prosthesis
- Osseo Components and Service Provision
- Processing Non Standard Prosthetic Requests
- Prosthetic Disposal Procedure
- PSP Referral to Clinic
- Second Issue / Emergency Prosthesis
- Recognition of Medical Practitioner
- Replacement of Prosthesis
- Weight and Prosthetic Component Limitations

CONSUMER RESOURCES

Available on request to support groups, individuals or organisations.

- QALS Leaflet
- Phantom Pain – The Pain is Real Leaflet
- Improving Pain Management for Amputees Leaflet
- Information for People Living with Amputation.
- Limbs4Life – Patient Information Handbook
- The Amputee Coach
- Living Independently with One Arm