

# Latest Developments in the Queensland Artificial Limb Service (QALS) and a Prospective Study into Functional Outcomes of New Prosthetic Users

Medical Aids Subsidy Scheme

5 February 2024



**Queensland**  
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# Session Outline

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QALS information and resources

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Waterproof components

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Applying for non-standard components

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Research – new prosthetic user mobility and prosthetic use

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MASS Education resources

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Questions

# Queensland Artificial Limb Service

[Queensland Artificial Limb Service](#)

[Guidelines for Queensland Artificial Limb Service](#)

[Guidelines for Queensland Artificial Limb Service Supplement](#)



# Waterproof components



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QALS Standard  
Components



QALS Non-  
Standard  
Components



Waterproof Components

“QALS, part of the Medical Aids Subsidy Scheme (MASS), has received a temporary funding increase for four (4) years, from **July 2023 to June 2027**. The funding boost will increase subsidies for upper and lower artificial limb components, including waterproof components, where deemed appropriate by the applicant’s prosthetist.”<sup>1</sup>

# Prosthetic Components/Consumable and Supply Items Temporary Increase

## *Prosthetic Components:*

- Feet and Terminal Devices - K1 - \$1,500, K2 or above: \$4,000 (increase from \$1,500)
- Elbow and Knee units - K1 - \$3,000, K2 or above: \$6,000 (increase from \$3,000)
- Connectors: inclusion of waterproof pylons, connectors and torsion adaptors up to \$1,000
- Foam covers: Below knee - \$100 to \$150. Above Knee \$200 to \$300
- Skinergy or Dream Skin external cover: \$375 to \$695
- 3D fairing: \$695 to \$1,000

## *Consumables and supply items:*

- Gel or silicone liners: from 2 to 3 annually
- Socks (cotton, wool, gel) and stockings: all quantities doubled, dependent on type
- Sheaths and sleeves quantities increased

# Water leg vs waterproof components

## WATER LEGS / WET PROSTHESIS



## WATERPROOF COMPONENTS



[Trias | Safe as expected. \(ottobock.com\)](http://ottobock.com)

# Benefits of waterproof components



1



2



3

# Levels of waterproofing

Weatherproof  
(do not submerge)



Echelon VT Foot

Waterproof but only  
freshwater



Horizon® HD

Waterproof  
(and corrosion resistant)



Xtend foot



Suitable for outdoor use

## ⚠ WARNING

- Do not expose this product to corrosive materials, salt water or pH extremes.
- Failure to follow these technical instructions or use of this product outside the scope of its Limited Warranty may result in injury to the patient or damage to the product.



Waterproof\* in fresh, pool and salt water

Waterproof\*

\*Waterproof note: Following exposure to chlorinated water, rinse immediately with fresh water and dry.

# What does this mean for prosthetists and prosthetic users?

Access during temporary funding period to:

- Higher funding levels
- More waterproof components as standard
- Higher subsidies to meet other core needs
- Larger range of components for mobility



# Waterproof feet (under \$1500)



Balance™ Foot S  
S, K1-2



Trias  
S, K2-3



META Core™  
S, K1-4

# Waterproof feet (\$1500 - \$4000)



Balance™ Foot S with Torsion  
S, K1-2



KOA LP  
S, K1-4



Xtend  
S, K2-4

# Waterproof feet (over \$4000)



RUSH H2O  
NS, K3-4



Taleo 1C50  
NS, K3-4



Pro-Flex LP with Unity  
NS, K2-4



Pro-Flex ST  
NS, K2-4



META Shock  
NS, K1-4



META Arc  
NS, K1-4



RUSH Rogue 2 Foot  
NS, K3-4



Pro-Flex Modular  
NS, K2-4



Pro-Flex XC with Unity  
NS, K2-4



UNITY for Pro-Flex  
ST  
NS, K2-4



Fiberglass META Shock X  
NS, K1-4

# Waterproof knees (under \$30000)



3W060 Modular  
Monocentric Knee Joint  
S, K1



KnieAgil WLD31  
S, K1-4

# Waterproof knees (\$3000 - \$6000)



Aqua-Knee  
S, K3-4



All-Terrain Knee  
S, K1-4

# Waterproof knees (over \$6000)



Capital

NS, K3-4

Note:  
freshwater  
only



3R80

NS, K3-4



KX06

NS, K1-4



Dynion

NS, K2-4



VGK

NS, K2-4

Note: water-resistant  
(occasional  
submersion only)

# Other waterproof components

Example components:

- Pylons
- Connectors
- Adaptors
- Locking systems

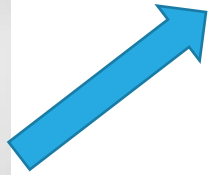
Increased subsidies allow wider material choice

TITANIUM

STAINLESS STEEL

ALUMINIUM

# What does this mean for other assistive technology prescribers and home modification professionals?



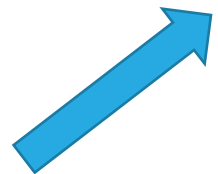
With water leg / hopping



With waterproof components



# What does this mean for other assistive technology prescribers and home modification professionals?



Removing  
prosthesis to shower



With  
waterproof  
components



# Non-standard componentry



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# QALS guidelines

## 4.2 Non-Standard Components

Prosthetic components that are over the QALS funding limits or deemed to be non-basic (titanium etc) are referred to as 'Non-Standard' components.

QALS recognises that in some instances, an applicant's essential prosthetic needs may not be fully met by the standard components within the QALS funding limits e.g. higher safe working load required.

Where an application is submitted to QALS for funding of the non-standard component/s, a [QALS Non-Standard Request Form](#) is required to be completed and submitted with the MASS-eApply application.

### Where necessary, QALS may seek advice from:

- Members of the QALS Consumer Advisory Committee.
- A subject matter expert / allied health or medical professional.
- Important: information provided for review is deidentified and in adherence to the QALS Privacy Policy.

### Where the application is approved:

Funding will be provided as an exemption on a 'once off' basis only and funding for future replacements/non-standard components is not guaranteed.

### Where the application is declined:

QALS may provide funding up to the approved funding limits and the client may wish to part fund the cost remaining above the funding limits.

- QALS Non-Standard Request Form
- Individual consideration
- Once-off funding
- Option for client co-pay if declined



## Is it in scope for QALS?

- **Basic** limb for day-to-day mobility and/ upper limb function
- QALS funding does **not** include upgraded components for **recreational/fitness pursuits** or **occupational or work-related** needs
- Funding is **based on clinical need** (e.g. reduces residual limb pressure, enhances gait – refer to applications) and **not on lifestyle choices and goals**

# Justification for non-standard componentry

- Outcomes, e.g., TUG
- Linked to MASS guidelines
- What clinical needs can't be met with current standard componentry within funding limits?
- Exceeds safe working load of standard components
- Certain environmental conditions within home environment, e.g., rural property

**Medical Aids Subsidy Scheme, Queensland Health**  
**QALS Non-Standard Request**

This form is used by the Prosthetic Service Provider to indicate eligibility criteria for fully funded non-standard componentry requests through the Queensland Artificial Limbs Service (QALS). The form supports consistent and transparent decision making to ensure equitable and cost effective service provision for all QALS applicants.

Medical Aids Subsidy Scheme (MASS) staff, in accordance with the MASS Privacy Statement, are committed to maintain strict confidentiality in all aspects of service delivery. You are assured that this information will remain confidential. Your information will not be divulged without your consent, except where required by law.

**Applicant Details**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ Post code: \_\_\_\_\_ MASS LHM: \_\_\_\_\_  
Suburb / town: \_\_\_\_\_

**Prosthetic History**

1. Is the applicant an existing QALS client?  No  Yes  
2. Have the non-standard components been applied for previously through QALS?  No  Yes  
3. Has the componentry previously been used by the applicant?  
 No  Yes - Specify funding:  QALS  Interstate or Federal funding scheme  Private/Compensation  
Period of time used, or approximate last date of approval (month/year): \_\_\_\_\_  
4. Are the components part of the QALS componentry list?  No - please add details below  Yes

Num standard componentry requested	Component Product Code/Name	Price
Type (e.g. foot, adaptor)		

**Non-standard componentry requirements**

Client weight is above to or exceeds safe working load (RWL) of otherwise suitable componentry within the QALS funding levels.  
Has the most cost effective option been selected? If no, provide details.

Environmental conditions in home environment (e.g. dust / remote location), water (household) Please describe these conditions and why standard components are not suitable.

**Clinical Justification**

- Please provide specific clinical diagnosis and reasoning of why standard componentry is not suitable.
- Comparative results of standard and informal assessment (e.g. number of falls in trial period) results with installed standard componentry and non-standard componentry (e.g. Timed Up & Go, Handing Chair-Walking Test, Four Square Step Test)

**Note:**  
QALS does not fund prosthetics or upgraded components for occupational / work-related needs or recreational / volunteering needs.  
QALS may provide funding at the level of the most basic componentry required and the client will be required to provide a contribution for the difference in price of the non-basic component. Clients requiring non-standard componentry for their occupation may need to seek support from Job Access to cover the difference in costs.  
QALS does not fund additional labour to fit outside scope or non-standard componentry.

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Page 2 of 2  
Reviewed June 2022



# Is it fair use of funding?

NDIS is an uncapped, demand-driven scheme<sup>1</sup>

DVA is a capped, budget-driven scheme –  
wider scope than QALS

QALS is a capped, budget-driven scheme

1. Parliament of Australia. Funding the National Disability Insurance Scheme. Available from:  
[https://www.aph.gov.au/About\\_Parliament/Parliamentary\\_departments/Parliamentary\\_Library/pubs/BriefingBook47p/FundingNDIS](https://www.aph.gov.au/About_Parliament/Parliamentary_departments/Parliamentary_Library/pubs/BriefingBook47p/FundingNDIS)

# Work-related needs

- Eligibility for EAF – Job Access
  - Australian resident
  - Tenure > 13 weeks
  - Hours > 8hrs/wk
  - Self-employed equivalent of above hours at National Minimum Wage

[Employment Assistance Fund \(EAF\) | Job Access](https://www.blatchfordmobility.com/en-gb/for-amputees/above-knee-prosthetic-limbs/prosthetic-knees/)





## Is it safe?

- Reputable – minimum warranty timeframe e.g. 12 months+
- All approved QALS components must be registered on the ARTG
- Has the amputee clinic deemed the limbs/components to be compatible with the user's mobility and function level e.g. AMPAT test

# Examples

## Example 1 – foot

XXXXXX has been using a XXXX foot on his transtibial prosthesis and his prosthesis now requires replacing. We have done a 2 week trial on a XXXX as we feel this is the best replacement foot for him.

We performed some outcome measurements with XXXXXX including the TUG, 6min walk test and FSST and these showed clear improved results on the XXXX, but we are aware this is an expected outcome so we are not presenting these in the case for supporting this application.

We also did the PEQ for his XXXX prosthesis and after the trial of the XXXX and the results clearly state that he had functional and emotional improvements with the XXXX foot.

He is currently unable to wear his XXXX prosthesis all day as he gets stump pain, sound limb pain and back pain. On the trial all of these improved and he was able to wear his prosthesis with the XXXX all day. He noted the heel compression on heel contact helped to prevent jarring through his stump and back allowing his standing comfort to increase from a 2.5/10 to a 8/10 and his back and stump pain reduced from very often to never.

He reported an increase in energy and stability with the XXXX, he had fewer trips and near misses. The energy it took to use his prosthesis reduced from completely exhausting to barely any required. He doesn't feel like he is relying on his sound leg as much and it isn't as sore as when he wears his XXXX prosthesis.

XXXXXX walks on uneven terrain for long periods of time and he has found his balance while using the XXXX to be far superior to the XXXX prosthesis. The PEQ showed that his ability to move around, up and down stairs, steep hills and slippery surfaces became no problem.

XXXXXX emotional wellbeing has greatly improved during his 2 week trial of the XXXX as he is comfortably and safely able to achieve his goals within the community with an increased trust and reduced frustration with his prosthesis from an 8/10 to a 0.5/10.

As shown through XXXXXX feedback and the results from the PEQ he would find many advantages from using a XXXX foot.

What products are being compared?

What outcomes are relevant?

How have they been measured?

How much of an improvement was noted?

How does this link with basic mobility requirements

[Link to examples](#)

# Shea Teevan

Physiotherapist, PAH



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# Quantifying prosthetic utilisation and functional mobility in new prosthetic users after discharge from inpatient rehabilitation

**Shea Teevan<sup>1,2</sup>, Dr Heather Batten<sup>1</sup>, Dr Salih Salih<sup>1,3</sup>, Dr Paulose Varghese<sup>1,3</sup>, Prof Suzanne Kuys<sup>2</sup>**

1. Physiotherapy Department, Princess Alexandra Hospital, Brisbane
2. Australian Catholic University, Brisbane
3. The University of Queensland, Brisbane

MASS Education series | 5 February 2024



# Background

- **Prosthetic rehabilitation:**

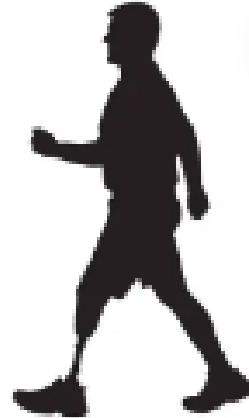
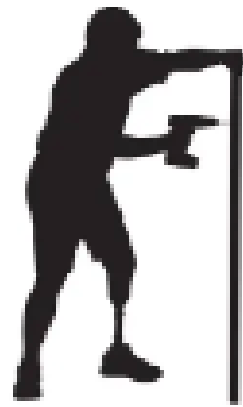


# Methods

 n = 24

Primary outcomes:

1. Prosthetic utilisation



2. Functional mobility; self-selected & fast gait speed, TUG, 6MWT

Time: At discharge (T0), 6 weeks (T1), and 12 weeks (T2)

# Sample Characteristics



88% male



Mean age: 59 yrs



83% trans-tibial



88% dysvascular



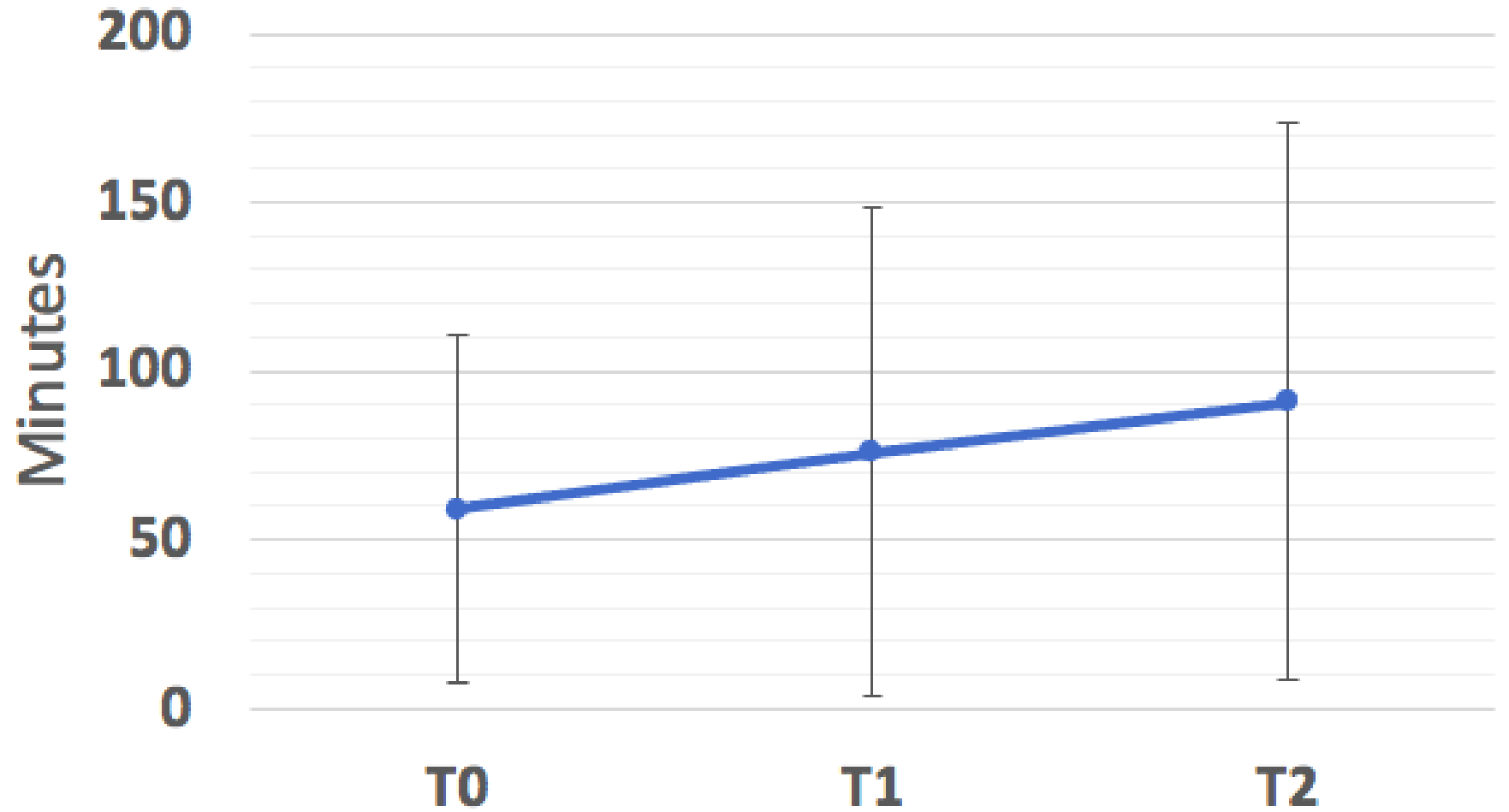
Mean BMI: 29.41



Varied no. co-morbidities:  
50% >6, 33% 2-5

# Results

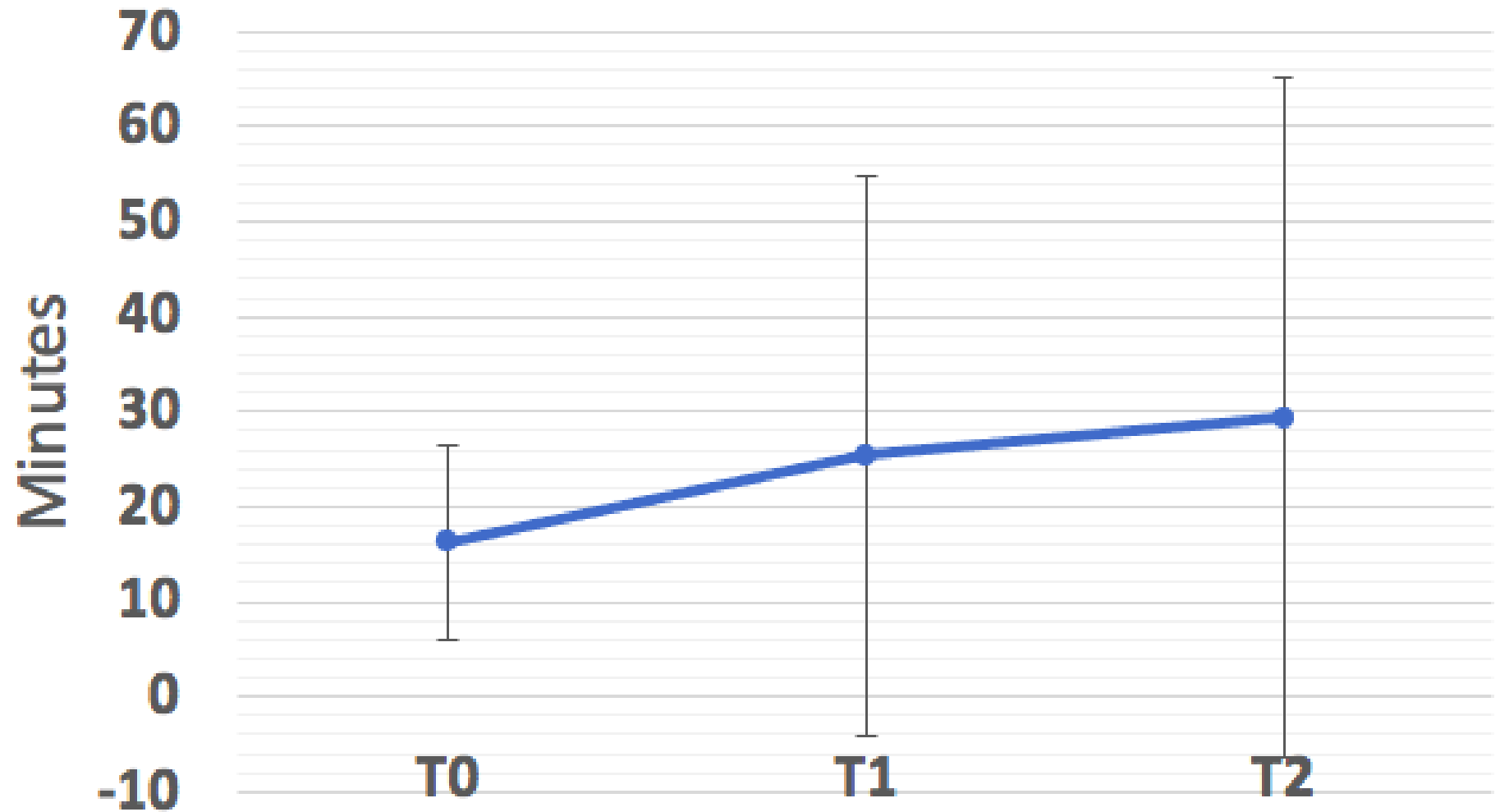
## Mean daily standing minutes



$p = 0.087$

# Results

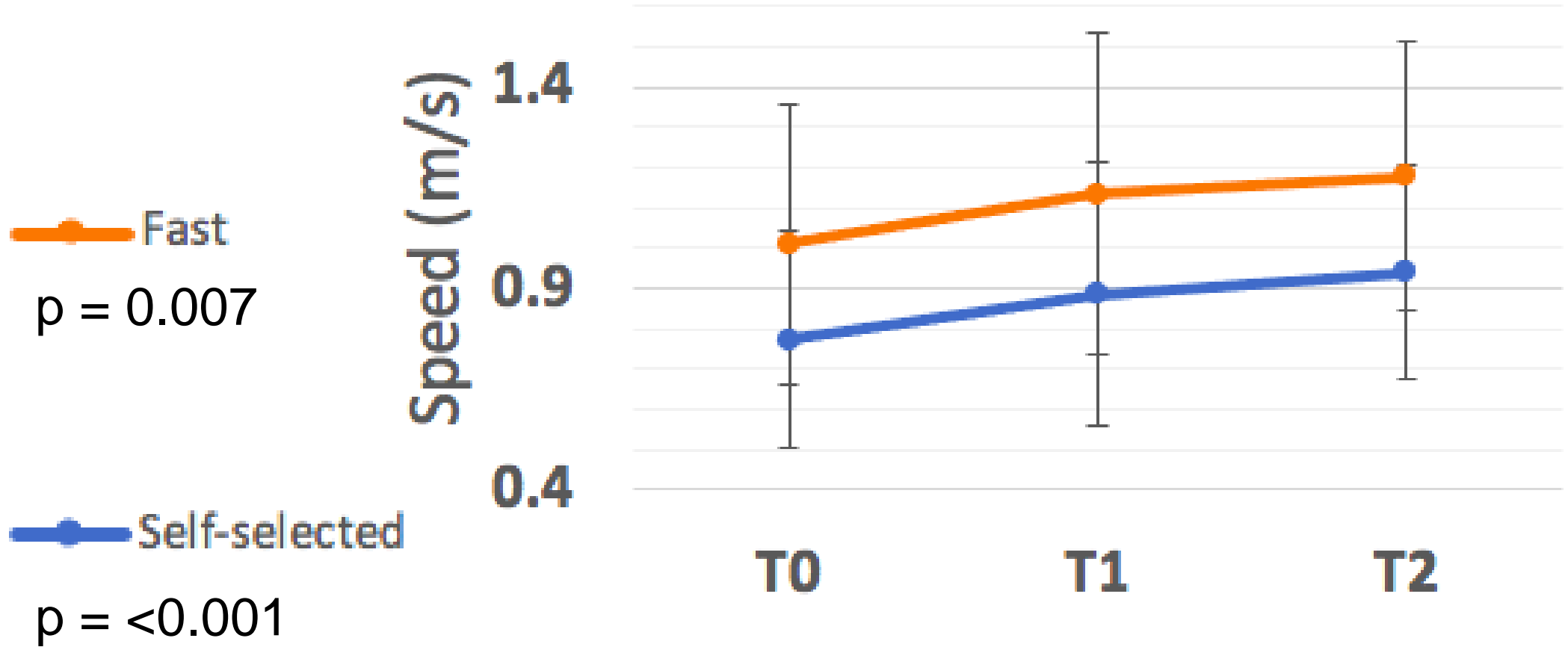
## Mean daily walking minutes



$p = 0.193$

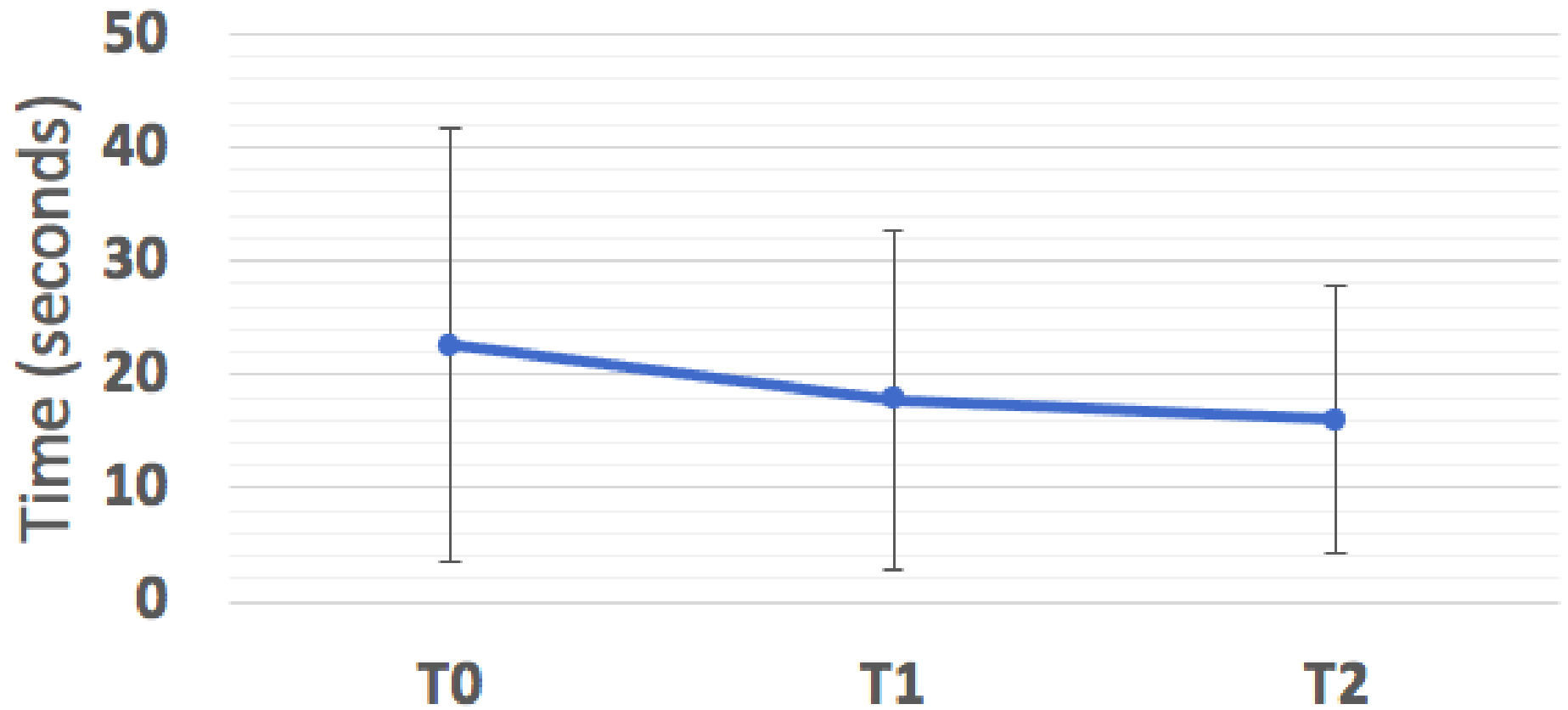
# Results

## Mean gait speeds



# Results

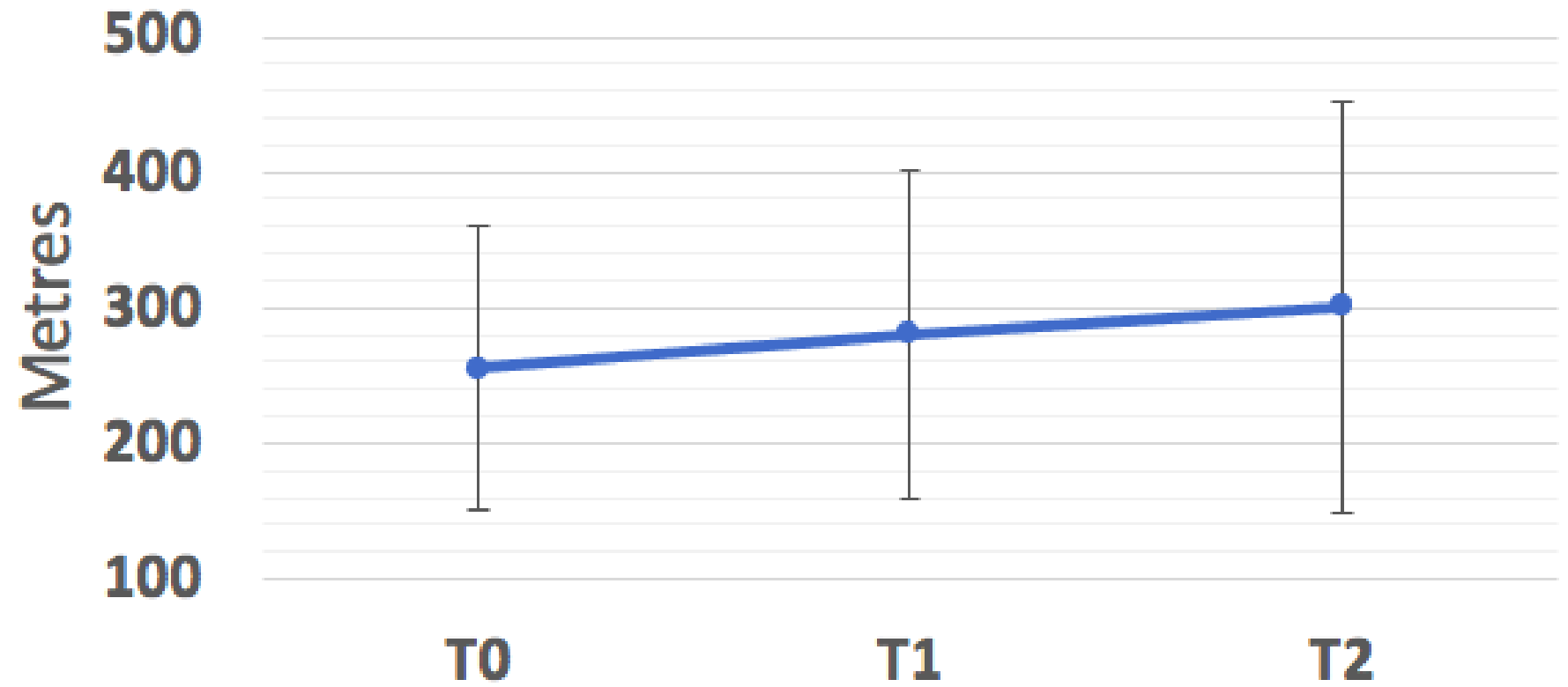
## Mean TUG



$p = 0.014$

# Results

## Mean 6MWT



$p = 0.124$

# Discussion

- Gradual increase in prosthetic utilisation over time
  - Utilisation varies
- Overall low activity levels
- Improved self-selected and fast gait speeds over time
- Reducing falls risk over time
- Walking distance might improve over time

# Take Home Messages

- Opportunities exist to increase activity levels in new prosthetic users during inpatient rehabilitation and beyond
- Inpatient rehabilitation teams should consider ongoing needs of new prosthetic users that manage and mitigate risks to utilizing their prosthetic limb

Thank you for listening.  
Questions?



# MASS Education



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# MASS Webinar Recordings for Further Learning

- [Outcome Measures for Adults with Upper and Lower Limb Amputations - March 2023 \(58 min\)](#)
- [MASS Recorded Webinars and On-Demand Library \(covering a range of topics in assistive technology\)](#)

# Upcoming MASS CPD - 2024

<b>DATE/TIME</b>	<b>TOPIC</b>
Wednesday 6 <sup>th</sup> March 1.00 – 2.00pm	<b>Ramps to the House and Slopes in the Garden: Will the Wheeled Walking Aid, Manual Wheelchair or Power Wheelchair Make It?</b> <a href="#">Webinar registration</a>
Thursday 2 <sup>nd</sup> May 9am – 12 noon	<b>In-Person Workshop: Pressure Cushion Prescription (cost = \$10 - \$15)</b> <a href="#">Workshop registration</a>
Wednesday 15 <sup>th</sup> May 1.00 – 2.00pm	<b>Assistive Equipment and People with Dementia</b> <a href="#">Webinar registration</a>
Wednesday, 5 <sup>th</sup> June 1.00 - 2.00pm	<b>Aboriginal and Torres Strait Islander Women's Experiences of Living with Urinary Incontinence</b> <a href="#">Webinar registration</a>

For all upcoming education events, please review the [MASS Education Calendar Feb - June 2024](#)

# Thank you!



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[MASS-Education@health.qld.gov.au](mailto:MASS-Education@health.qld.gov.au)

# Certificate of attendance



Complete the [webinar feedback form](#) to receive a certificate of attendance.