

Appendix 2 – Category Specific Information for Prescribers

Moving and Handling

Manual Handling Aids

Equipment to minimise the lifting component and effort required during a transfer or movement from one place to another. This may be independently used by the service user capable of doing so, or by the carer(s). It protects both the service user and carer during the process. They can be used as stand-alone items or as part of an overall manual handling solution in conjunction with other manual handling aids or aids and appliance equipment.

Powered Hoists

Motorised hoists with battery that is recharged from the mains. Service user is supported in a sling secured to the frame. Provides lifting action, in a certain range, from one surface to another. Some hoists will lift from floor level. Hoists with wheels have brakes and can be wheeled a short distance while the service user is supported in the sling, when the flooring surface and distance to be traversed is assessed to be safe. All hoisting equipment must be maintained as detailed in Lifting Operations and Lifting Equipment Regulations 1998 (LOLER) All hoist must be thoroughly examined by a competent person at least once in every six month period.

Slings for powered hoists

A range of slings are available for loan from the HSE, either a product-specific sling or a hoist compatible sling with a loop or clip attachment. Two slings are provided to facilitate washings. They are made of washable, easy-dry fabric.

Augmentative, Alternative Communication (AAC) and Assistive Technology and Mounts

Light Tech Basic Communication Aids (no voice output)

An alternative/augmentative communication (AAC) system that is not electronic and does not have a voice output function but allows the service user to communicate through a symbol system appropriate to the service user's cognitive or functional communication level. This system may be used in conjunction with mid and/or high tech options.

Mid Tech Electronic Communication Devices (with voice output)

An AAC aid that is electronic, generally battery operated, and functions predominantly at a pre-recorded speech delivery level. It allows the service user to communicate through a symbol system appropriate to the service user's cognitive or functional communication level. This system may be used in conjunction with light and/or high tech options.

High Tech Electronic Communication Devices, Speech generating Devices (SGD) and software

An electronic AAC system with voice output. It allows the service user to communicate through a text / symbol system appropriate to the service user's cognitive and functional communication level. This system may be used in conjunction with light and / or mid tech options.

High Tech ICT Devices and Software for use as the primary AAC Communication Aid

A mainstream electronic system adapted or used for alternative/augmentative communication. These systems are modular and multiple components may be required to meet a service user's needs. It allows the service user to communicate through a text / symbol system appropriate to the service user's cognitive and functional communication level. These are prescribed to be customised as the best fit for the communication needs of the service user.

Assistive Technology and AAC Access/Integration (switches) /mounts/ protection)

These are modular components enabling AAC access and integration and/or developmental activities and environmental control.

Switches are essential to the functioning of the following:

- A communication device. For communication devices these components may be required to retrofit to a pre-existing communication device or as part of a new prescription. They must be compatible with the communication device and multiple components may be required to meet a service user's needs.
- To enable experiential developmental learning by facilitating the activation of toys and/or games.
- To control essential functions in the environment that cannot be controlled by using available remote or WIFI controls.

AAC Replacement Parts and Miscellaneous

These are modular components and essential to the functioning of a communication device. These components may be retrofit or may be part of a new prescription. Typically equipment in this area will require supply, fitting and carriage.

Environmental Control solutions: Options

An environmental control component or accessory which enables a service user to independently access equipment in their environment. Items in this section may maintain or support a service user's ability to live independently. These may be additional components which are required to ensure full functionality of environmental control features of a high-tech AAC device or power chair to support increased participation and independence. These may also be prescribed as standalone items where a safety, independence or participation risk has been identified.

Voice Amplifiers and Accessories

An augmentative system that amplifies a service user's voice. It enables the service user to actively communicate across a range of environments.

Standing and Walking Mobility Aids

Mobility Safety Rails

Rails are a gripping device attached to a wall. A service user grabs hold of them to provide security and assist safety when sitting or standing up or sitting down, and to manage steps and stairs and to help maintain balance when standing. To maximise grip the rails on contract have a diameter of between 30-35mm (32mm is optima) and when mounted to the wall allow a distance of 50-60mm between the rail and wall for ease of grasping.

The design and rail grip finish make them suitable for use in both wet and dry situations and can be used for interior, exterior threshold use and bathroom or toilet use, except the wooden stair and banister rails which can only be used in dry, interior situations.

The HSE provides rails specifically to service users who have:

- A clinical presentation.
- A documented falls risk and an environmental issue that impacts safe mobility.
- Transfers and everyday living activities that warrant the use of the rail(s) and mitigate an assessed risk related to mobility.
- Transfers or everyday living activity in the service user's home and/or enhance the safe use of other HSE equipment that has been prescribed to assist mobility.
- Transfers or everyday living activities.

The HSE primarily provides rails for use at the following key mobility or transfer risk locations:

- Toilet and bathroom / internal step / stair rail (a second rail can be provided to augment the primary stair rail, resulting in a rail on both sides of the stairs* / newel post grab rail - rail for the bottom stair post / external entrance door threshold
- When necessary beside a bed, and / or armchair when clinically indicated
- When necessary a banister rail may be installed in the hallway to ensure safe mobilisation (with / without a walking aid)
- When the risk assessment determines it is a necessity at other locations as dictated by the clinical presentation of the service user and the environment they live in.

* Primary stair rails that are in a poor or unsafe condition are the responsibility of the private property owner and / or occupier, council, landlord (private or council) to repair or replace. Assistance may be available in certain circumstances. These are not replaced by the HSE.

Rail contract and installation

There is only one contract rail option and that is for the supply of the rail. The prescriber recommended rails must be installed by a **competent rail fitter** with due regard to the local area funding policy and installation practice.

Household Trolley

Assists a service user who needs support walking to move essential items from work surface to another space.

Aids for Daily Living

Toilet Commodes (Shower Chair/ Commode)

A commode is used to augment regular toilet use and routines when use of a toilet is not practicable or convenient, e.g. for night time toileting and when there isn't a toilet close enough or on the same floor of the house as the service user.

A commode has a metal seat frame with a chair back and has an attached plastic commode seat shape like a toilet seat, with a slightly larger hole to make toilet hygiene easier. A concealed commode pan sits underneath the seat to collect toilet waste. It comes with detachable arm rests, safety belt, steel toilet pan, and a lid to prevent spills when carrying the toilet pan for emptying. Some commodes are static, they do not have wheels and some have wheels which allows the service user to be transported a short distance in relation to toileting. They cannot be carried up and down stairs for use on different levels. Commodes are designed for sitting in for a short period of time only. Some commodes on wheels can also be used for shower chairs (refer to showering section).

Showering and Bathing Aids

The HSE provides a variety of showering and bathing equipment aids to assist service users with personal hygiene, when it is difficult. The HSE can loan equipment to support either showering or bathing, but not both. Select the most appropriate equipment option from the showering, manual bathing aids or powered bathing aid as indicated by the service user's clinical presentation and assisting carer's presentation.

Shower chairs have a back, and arm rests for support, and four legs fitted with wheels, so that the shower chair and service user in it can be wheeled in and out of a level access shower. It is perforated for rapid water drainage.

Manual Bathing Aids

Equipment that facilitates bathing or showering when the shower is positioned over the bath.

Paediatric Showering and Bathing Aids

Aids to assist children, teens and their carer(s) with the daily living activity of showering or bathing. The aids are provided to maximise the user's independence, minimise the effort of the carer assisting and to keep both safe. Refer also to Adult Showering and Bathing Aids.

Feeding, Eating, Drinking Swallowing (FEDS)

Tools to enable an individual with feeding, eating, drinking and/or swallowing (FEDS) difficulties to enhance their independence and/or swallow safety. These tools are used to support, develop, or respond to deterioration of FEDS skills across the lifespan. Multiples of some items may be required.

Specialised Chairs: Adult stools and chairs for use in a non-residential home setting.

To facilitate safe transfers, activities of daily living and stage appropriate participatory activities.

Orthopaedic High Back Chair and Riser Recliner Chair Chairs are a piece of everyday furniture. From time to time furniture needs to be changed. This may be because furniture has deteriorated and is no longer fit for purpose or as a result of age/ life stage change. Fit for purpose furnishings appropriate to the age/stage of life improve the ability to get in and out of a chair freely and thus promote movement, minimise the risk of falls associated with this, improve posture when sitting and thus breathing, which in turn improves ability to do activities while seated, like eating and drinking.

The HSE do not provide chairs for long term use as furniture is a normal long term requirement and as such it is expected that furnishings are sourced by the person themselves. In the following circumstances the HSE may loan a chair for short term use, for a determined amount of time:

- For a short term post-operative period, where the otherwise suitable home chair is not suited to the recovery restrictions.
- To assist a person who is diagnosed as being at an 'actively terminal stage' and their carer(s) to support end of life care in their home. Consideration must be given to suitability of chair for hoist transfers.

- A short term loan while the service user and or their carer(s) arrange a suitable home chair themselves, when there is an imminent falls or health impact that is likely to occur while the arrangements are concluded.

Rise and Recline chairs are commonly used comfort furniture items. The HSE does not provide Rise and Recliners by way of loan for comfort furnishing purposes. The HSE may loan a Rise and Recline chair to service users with a clinical presentation that requires the specification functions that the chair can provide as a means to essential service user function. Clinical presentation as it relates to the chair function must be determined by a prescriber's assessment. It is the intent of the HSE not to replace single motor Rise and reclines. In the meantime local areas may have an existing stock of single Motor Rise and reclines. These can continue to be requested from the loan pool until such time as they are decommissioned from use and replaced by dual motor Rise and Reclines.

Paediatric chairs for use at home

To facilitate safe transfers, activities of daily living and stage appropriate functional activities.

Domestic Bed Aids, Electric Profiling Beds and Pressure Reducing Mattresses and Elbow/Heel/Foot Protectors

Electric Profiling Beds and Attachments for Electric Profiling Beds

A domestic bed can be made suitable with the addition of domestic bed aids and a pressure relieving mattress. Domestic bed aids and modifications must be put in place where ever feasible.

Before proceeding to request an electric bed, prescribers must consider the option of making the domestic bed suitable with the addition of domestic bed aids and a pressure relieving mattress. Domestic bed aids and modifications must be put in place where ever feasible. Refer to the proceeding section 'Aids for Domestic Beds'

An electric profiling bed is not required If the use of domestic bed aids is feasible. A request for an electric profiling bed should never be proceeded with until such time as the feasibility of using domestic bed aids is concluded. An electric profiling bed is required if the service user and or their carer(s) cannot manage the user in a domestic bed with bed aids and when the height adjustability of the profiling bed is critical to the care & safety of the service user and/or their carer(s).

An electric profile bed is height adjustable and has an adjustable bed head. The bed is adjusted by using a hand control attached to the bed by a flexible cable positioned close to the service user if they are controlling it and positioned out of their reach if they are not safe to control it themselves. Safety must be exercised when moving the bed up & down to ensure that nothing is caught in this movement process.

An Electric profiling bed will be provided for loan to service users when domestic bed aids are unsuitable for the service user's clinical requirements and when a height adjustable bed and adjustable bed head and pressure relieving mattress are necessary. Electric Profile beds are not loaned to a service user whose domestic bed is in a deteriorated state but would be fit for purpose if it were upgraded by the owner. Sizes and types of electric profiling beds and service user

weight limits are detailed in the table below. In local recycling loan pool's there will be many differing bed products. They will vary in the height adjustability and the service user weight limit. Precise height ranges and service user weight limits cannot be given because of the product variances.

It is recommended that for matching purposes your recycling service records the precise weight limit of the product and the prescriber provides the service users up to date weight. It is important that the service user's weight is up to date and that the bed being issued is suited to the service user weight. Service user weight limits apply to mattresses too. Weighing scales that attach to hoists are on contract so that weighing in a primary care context can be facilitated

The HSE provides four foot beds to facilitate service users whose weight is greater than the weight limits of the standard three foot profiling bed. They are not intended to be provided to facilitate companion sleeping arrangements.

Beds can be classified as per table below according to the weight of the service user.

** Precise height ranges and service user weight limits have not been given because of product variations.

- Refer to loan pool or contract specifications for specific product specifications

	Bed Width and Service User Weight Limit		
	three ft/.900mm Up to 28 stone/177 kg service user weight approximately depending on product	4ft (1.2m) Up to 40 stone (254kg) service user weight limit approximately depending on product	4ft (1.2m) Up to 60 stone (381kg) weight limit approximately depending on product. Although some products might accommodate a weight above this. The safety of this in terms of manual handling poses additional risk in the home setting.
Height adjustability	Contract		
Standard height. Raised height is slightly higher than both the low entry and dual height beds. Lowest point allows most service users to sit with their feet on the floor.	No. Neither the standard height or low entry beds are now on contract for aids and appliances. Beds available in the local loan pool should be used before considering a purchase of the dual height bed. As these beds are decommissioned	Yes. Standard height.	Yes. Standard height.
Low entry. Can be lowered almost to the floor, raised height is slightly lower than the standard height bed.		No	No

	they will be replaced with the dual height bed.		
Dual height. Moves in a range from low entry to almost the upper height of the standard bed. This bed allows a range of heights to suit the dimensions of a range of carer's and service users.	Yes. This bed is on contract. As other standard height and low entry beds in the recycling loan pool are decommissioned they will be replaced with the dual height bed.	No	No

Electric rotating beds

This bed may be prescribed for service users with particular complex needs, who are unable to move or turn in bed, when all other available turning methods are not feasible in delivering quality safe clinical care interventions to patients. As this item is infrequently required it is not on contract. A CHO wide loan pool resource should be considered. An exceptional request must be made for purchase.

Profiling bed attachments and bed rails

There are a number of Electric profiling bed attachments that may be clinically necessary for use with a Profiling Bed. The prescriber will identify and request them if they are needed. Attachments are generally secured to the bed and should be specified with the bed on the request form. They can be added to the bed at a later date.

Bed rails: Fit, height and safety

It is recommended that rails are no longer issued automatically with the bed. The prescriber must conduct a bed rail risk assessment to determine if the bed is to be issued with or without rails. If a profiling bed is already in place, the prescriber in the course of their professional intervention uses the opportunity to review the bed and bed rail risk status to determine that the rail arrangement in place is still appropriate. Bed rails purchased on contract by the HSE should be compliant with the standards for widths between bars to minimise entrapment. To minimise entrapment risks further bed rails must also be a secure and compatible fit with the bed product to which they are fitted and must be a snug fit to the mattress which is to be used on the bed, both of which aid the prevention of any gaps occurring from poor fit. Dependent on the product in the recycling loan pool or on contract, rails may be integrated, hideaway, fold down or detachable. Older Bed rails purchased prior to the new standards may not comply with the new standards. It is recommended that when any bed rail is issued in a local area by the HSE or by a contractor on behalf of the HSE that the rails are checked for compliance and if not compliant they are retrofitted with compliant rails prior to reissue. Bed rails are not designed to be used as a grab rail to get into and out of bed .If used this way they will deteriorate, loosen and become unsafe. If a service user requires an aid to support turning side to side or to get into and out of bed, a bed lever that attaches to the profile bed must be put in place. The importance of fit, as above, applies to the bed lever attachment. The height of the bed rails must be checked against the depth of the mattress in use and the service user's girth, The height of the bed rails if in use on a profiling bed are correct when the rails are at height equal to that of the mattress or overlay and the service user combined when the service user is supine. Bed rails come in a standard height and a higher height if required.

Responsibilities to ensure fit and safety

The British standards (BS) state that responsibility for 'fit' is the responsibility of a number of people. In our Irish context the following applies:

- The issuing service (contracted recycling service or HSE Supplies Department) responsible for delivering and installing the combined item(s) or responsible for fitting another item at a later date should ensure safety and stability of the equipment to be used, at the time of delivery and fit. Complete installation of Bed, Mattress and accessories must comply with BS EN60601-2-52 :2010 Dimensional Requirements

- The prescriber and/or the trainer of employed carer(s) (HSE or contracted) must ensure the carer(s) (family and employed) are aware of the risks and how to identify them and avoid them.
- All workers should check equipment at any time they are on business in the service user's home. Prescribers, carers, the issuing or maintenance service and other Health workers
- The service user and/or their carer (family and/or employed) must comply with the advice given and must check for gaps at each use and if a gap is noticed should immediately rectify and notify the issuing service.

Bed Aids for use with Domestic or Electric Profiling Beds

A range of small aids that can be used with Domestic or Profiling Beds. Domestic Bed Aids are small equipment that can be added to a domestic bed to enable it to be continued to be used by the service user, with an illness or disability. Aids and adjustments to the Domestic Bed and use of a pressure reducing mattress on the Domestic Bed must be considered and excluded, before proceeding to request a profile bed.

Pressure Reducing Mattresses

Specialised mattresses with pressure reducing qualities for prevention and healing of pressure injuries. Some mattresses can be used on the domestic bed, others on the profiling height adjustable bed. Available in a range that covers pressure reducing qualities from at risk/preventative to very high risk/intervention/curative 9As part of 24 hour postural management) and in a range of widths and maximum service user weight limits.

Pressure reducing mattresses or mattress overlays, are designed specifically for Service users who have an illness or disability which may put them at risk of pressure ulcer development. They are designed to reduce the contact pressure of the mattress on the service user's body and skin. They are designed to prevent and/or aid healing of pressure ulcers. Pressure relieving mattresses or mattress overlays are divided into two groups :

- **Static mattresses** that don't move and are most often made of high density foam with pressure reducing qualities. They are most often used for prevention of pressure ulcers.
- **Dynamic mattresses/mattress overlays** that alternate /move gently. They are powered and are usually filled with air. The movement of the air within the mattress reduces the contact of the mattress on the skin. They are used to heal an ulcer and/or to prevent ulcers. Dynamic mattresses may be classified as providing pressure reduction for high risk or very high risk, depending on the specification of the mattress product.

Service users may move between a static and dynamic mattress depending on the status of their skin and healing, e.g. a high risk dynamic mattress may be in use for a period to heal a pressure ulcer. When healed clinical reassessment will be undertaken by prescriber to determine type of mattress for future use.

HSE Pressure reducing mattresses are provided to service users who have an assessed need for pressure relief.

HSE Pressure reducing mattresses are not provided to service users where the comfort and support of a domestic bed mattress provides an adequate level of pressure reduction or when the domestic bed mattress in use is in a deteriorated state and requires upgrading by the owner or their carer, which if upgraded would be sufficient.

Validated Pressure Reduction Assessment Tool and Pressure Reduction Risk Score/ Indicator

The prescriber uses a standardised pressure ulcer risk assessment tool to assess the service user's pressure care risk and pressure reduction requirement. The assessment tool score results in a prediction of the risk of developing a pressure area. This score supports the prescribers clinical reasoning in identifying is the type of mattress that should be selected to the appropriate level of pressure reduction as regards prevention, healing or both.

For the purposes of standardised operation of Aids and Appliances nationwide, specifically Pressure reducing mattresses, we have decided to use the 'Waterlow Pressure Reduction Assessment Tool' and 'Waterlow Risk Score' at this time (the Waterlow score card). This Pressure Reduction Assessment Tool has been selected as most people across the disciplines are familiar with it.

The Waterlow Score provides a framework for organising mattresses into categories of suitability. Pressure reducing mattresses provided by way of loan from the HSE are listed according to the Waterlow Pressure Risk Score and types of mattress product specifications suitable to that score. Prescribing criteria relate to the same Waterlow pressure reduction risk Scores.

This same structure can be used to arrange the multitude of mattress products in our local recycling loan pools as well as allowing for the inclusion of any new contract mattress purchases. It will facilitate easy matching of product to request and maximise reuse of resources in our pools and avoid unnecessary purchasing.

Pressure reducing mattresses arranged in Waterlow pressure reducing categories and according to compatible pressure reduction mattress qualities. * Same mattress product –for waterlow 10 -20 ** Same mattress product		Domestic Bed		Compatible Profile bed width Max weight of products in your loan pool may vary		
		3ft (0.91m)	4ft (1.2m)	3ft (0.91m)	4ft (1.2m) Mediatric	4ft (1.2m) Bariatric
Pressure reducing mattresses for those 'At Risk' = Waterlow 10+(10-15)	Waterlow 10+ (10-15)					
*Foam mattress: Specialised high specification high density foam or hybrid (foam and air cells) with pressure relieving qualities.	Static	✓	✓	✓	✓	✓
Foam and / or air mattress overlay	Static	✓	X	✓	X	X
Pressure reducing mattresses for those 'At High Risk' = Waterlow 15+(15-20)	Waterlow 15+ (15-20)					
*Foam mattress: Specialised high specification high density foam or hybrid (foam and air cells) with pressure relieving qualities.	Static	✓	✓	✓	✓	X
Foam and air mattress: Air top layer (or overlay if in existing stock)	Dynamic/Powered	✓	X	✓	X	X
**Air alternating mattress: Standard specification	Dynamic/Powered	X	X	✓	✓	

Pressure reducing mattresses for those 'At Very High Risk' =Waterlow 20+(20 ->20)	Waterlow 20+ (20 ->20)					
**Air alternating mattress: Standard specification	Dynamic/Powered	X	X	✓	✓	
Air alternating mattress: Specialised specification	Dynamic +/-Powered	X	X	✓	✓	
Bed and mattress turning system: (Refer Beds)	Dynamic specialised	X	X	✓	✓	

Therapeutic Aids

Exercise Aids

To improve mobility and arm function.

Positioning Support Aids

Positioning Aids are used to influence tone, weight bearing, proprioception and posture. This in turn provides positions that best facilitate opportunities for activity, general neuro - developmental progression and neuro - muscular skeletal development and maintenance. The positioning items in this therapeutic category may be used to facilitate passive positioning, or to provide the best position to undertake an age or stage appropriate activity. These items may be used in isolation or may form part of an overall postural management plan.

The desired outcome of postural management is to avoid permanent skeletal changes that can result in compromised functional activity, respiratory complications, aspiration and eating difficulties, pain, greater potential for surgical interventions, poor sleep quality and greater risk of pressure point ulcer wound.

Other positioning equipment can be found in other categories, e.g. Standing and Walking Mobility Aids Category (standing frames), Profile beds and Pressure Reducing Mattresses Category, Wheeled Mobility Category, Aids for Daily Living Category (Chairs to facilitate mobility and activity).

Sleep positioning systems are used on a bed to support and position a person's body during sleep or rest. Children and adults with a significant neuro - muscular -skeletal presentation or prognostic potential to develop such a presentation may require these systems to influence presenting reflexes, tone and posture while asleep or resting. These items are primarily used for those assessed as most at risk of developing postural misalignments and or pressure injuries and an overall 24 hour postural management plan should be completed (multi-disciplinary-multi positional).

Wedges, rolls and multi-purpose positioning aids are aids made of firm foam and covered in a waterproof fabric, that are used to position a service user for postural management, appropriate positioning to engage in activities, as a tool to develop neuro - developmental skills, and sometimes to assist respiratory management.

Compression Garments for the prevention and management of Lymphoedema and Chronic Oedema

Medical graduated compression garments, for the control of oedema associated with chronic vein disorders, Lipoedema and Lymphoedema which are available in a range of standard sizes and body parts. They have Quality mark CE and independent compression rating (e.g. RAI0) so that pressure applied is standardised. Have to be washable. They come in different knits and pressure ratings which are rated low, medium, high and very high as per the HSE compression garment guideline.

Compression Garments for the healing of Burns and reduced scarring

Burns compression garments, colloquially called compression garments, are garments worn after a partial or full thickness burn injury. Their purpose is to exert pressure on the healing skin to keep developing scars flat and to prevent raised (hypertrophic) scarring. The aim is to improve the appearance of skin, by helping scar tissue to mature, to prevent skin breakdown, and to assist the management of any residual fluid as a result of the burn injuries.

During admission for the acute episode of a burn, a range of compression methods may be provided as determined by the Multi-Disciplinary Team (MDT). These items are managed, funded and provided in the course of the acute process by the acute service.

When the service user's skin is sufficiently healed and can tolerate more pressure, provision is made for a made to measure burns compression garment. This generally coincides with discharge home to the community. If the patient's skin cannot tolerate made to measure garments then off the shelf interim garments may be used long term.

Dynamic lycra Compression Garments

Dynamic Lycra Garments, also known as lycra dynamic splinting/lycra splinting/dynamic movement orthoses/body suits.

Oral Motor Aids

A tool for the development and/or maintenance of oral motor movements, which impacts FEEDS and/or communication abilities. These items are typically recommended by Speech Language Therapists. However, Occupational Therapists may also recommend sensory aids. Multiples of some items may be required.

Wheeled Mobility, Compatible Seating Systems and Cushions

Paediatric Special Needs Buggies

Prescribers must fully utilise recycled Buggies and recycled or purchased parts that can be reconfigured to make good any buggie available in your local loan pool before proceeding to request a complete buggie purchase.

If requesting a purchase (complete buggie or part) the current National Aids and Appliances Contract must be used and the first awarded, best value product must be prescribed. This is compliant with the National Finance Regulations (NFR). Refer to the contract lot numbers beside the items below.

If the first awarded is not prescribed an explanation as to why award two or three are required as an alternative. If a buggie is requested for any award or cost greater than 2 or 3 on the contract list a full clinical rationale and cost comparison for essential specifications must be made as an exceptional request.

Paediatric manual wheelchairs

Prescribers must fully utilise recycled manual wheelchairs and recycled or purchased parts that can be reconfigured to make good any wheelchair available in your local loan pool before proceeding to request a complete wheelchair purchase.

If requesting a purchase (complete wheelchair or part) the current National Aids and Appliances Contract must be used and the first awarded, best value product must be prescribed. This is compliant with the National Finance Regulations (NFR). Refer to the contract lot numbers beside the items below.

If the first awarded is not prescribed an explanation as to why award two or three are required as an alternative. If a chair is requested for any award or cost greater than 2 or 3 on the contract list a full clinical rationale and cost comparison for essential specifications must be made as an exceptional request.

Paediatric powered wheelchairs

Prescribers must fully utilise recycled powered wheelchairs and recycled or purchased parts that can be reconfigured to make good any wheelchair available in your local loan pool before proceeding to request a complete wheelchair purchase.

If requesting a purchase (complete wheelchair or part) the current National Aids and Appliances Contract must be used and the first awarded, best value product must be prescribed. This is compliant with the National Finance Regulations (NFR). Refer to the contract lot numbers beside the items below.

If the first awarded is not prescribed an explanation as to why award two or three are required as an alternative. If a chair is requested for any award or cost greater than 2 or 3 on the contract list a full clinical rationale and cost comparison for essential specifications must be made as an exceptional request.

The service user must meet the HSE requirement for provision of a power chair. The home environment must be assessed for suitability regarding access, charging point and storage.

Adult manual wheelchairs

Prescribers must fully utilise recycled wheelchairs and recycled or purchased parts that can be reconfigured to make good any wheelchair available in your local loan pool before proceeding to request a complete wheelchair purchase.

If requesting a purchase (complete wheelchair or part) the current National Aids and Appliances Contract must be used and the first awarded, best value product must be prescribed. This is compliant with the National Finance Regulations (NFR). Refer to the contract lot numbers beside the items below.

If the first awarded is not prescribed an explanation as to why award two or three are required as an alternative. If a chair is requested for any award or cost greater than 2 or 3 on the contract list a full clinical rationale and cost comparison for essential specifications must be made as an exceptional request.

Available in size ranges 14" (35.6cm) to 24" (60cm) with corresponding maximum weight limit. Sizes and products will vary as per product specifications available in your local recycling loan pool or per current purchase contract.

'Add on' non powered and powered assistance for manual wheelchairs

A manual wheelchair requires a certain amount of arm strength and endurance to meet daily mobility requirements.

'Add-ons' should be considered, when a self-propelling service user or their attendant propelling carer are finding they are challenged or limited using the manual wheelchair. These challenges may be in respect to their current presentation, age, joint wear and tear, environment and terrain or the distance covered and time and speed to do so.

'Add-ons' are for self-propelling service users or attendant carers who prefer to use a manual wheelchair and when it is a more suitable option for their environment or transport arrangements or when a power wheelchair is not suitable for the service user/ carer for their environment or transport arrangements

'Add-ons' attach to a manual wheelchair to assist the service user or their carer to propel the manual chair with more ease. They make wheeling easier. They may be non-powered or powered and augment, minimise, or replace the service user's manual efforts.

Non powered options rely on mechanical details that link to the wheels that are activated manually by the service user's arms.

Powered options

Powered assistance is not currently included in the HSE Policy on provision of powered mobility equipment (PME) for adults 2013. In the meantime, we recommend that power assist equipment should be assessed and managed like a power wheelchair. The HSE Policy on provision of powered mobility equipment (PME) for adults 2013 must be used to ensure that the user in a manual wheelchair with add on power assistance, is capable of mobilising when using power assistance.

There are a number of listed power options that essentially convert the manual wheelchair to a motorised chair, a variety of quick release 'power assist wheel' with batteries and or drives embedded in the wheel hub or power packs or drives secured underneath the manual chair. Some high level, higher cost options are lighter and are designed for easy disassembly and allow active service users to complete car transfers.

These may be operated by a control unit in the push rim, in the wheel hub or by a control unit joystick or other switching option that is fixed to the wheelchair in a suitable position for the service user. There is an option of carer controls attached to the handgrips, for the attendant carer.

Where a power wheelchair is suitable (can/could be used by service user) and is more cost effective than power assist wheels it must be considered. A comparison between the costs, functions, benefits and limitations should be considered and presented to demonstrate the prescribers recommended option, whether the product is available from recycled loan pool stock or contract purchase.

There may be a discrepancy between what the service user desires and what the prescriber recommends. The prescriber must manage this as part of the therapeutic relationship and process of requesting equipment.

The manual wheelchair in use or to be selected may not have sufficiently large front castors and may not have sufficient anti tip to compensate for the powered assisted movement and speed and the different response to terrain this may pose. Adjustments should be made if required to ensure safe use of the manual chair with power assistance.

Where the carer is required to operate the 'Add-ons', the carer(s) have been assessed as competent in its use

Adult powered wheelchairs

Prescribers must fully utilise recycled powered wheelchairs and recycled or purchased parts that can be reconfigured to make good any wheelchair available in your local loan pool before proceeding to request a complete wheelchair purchase.

If requesting a purchase (complete wheelchair or part) the current National Aids and Appliances Contract must be used and the first awarded, best value product must be prescribed. This is compliant with the National Finance Regulations (NFR). Refer to the contract lot numbers beside the items below.

If the first awarded is not prescribed an explanation as to why award two or three are required as an alternative. If a chair is requested for any award or cost greater than 2 or 3 on the contract list a full clinical rationale and cost comparison for essential specifications must be made as an exceptional request.

The service user must meet the HSE requirement for provision of a power chair. The home environment must be assessed for suitability regarding access, charging point and storage.

Available in size ranges 14" (35.6cm) to 24" (60cm) with corresponding maximum weight limit. Sizes and products will vary as per product specifications available in your local recycling loan pool or per current purchase contract.

Expandable Electronic Controller and Drive. Add on Options for Adult and Paediatric Power chairs

Add on options

- Range of alternative driver controls (and cables) e.g. switch, chin, sip and puff, head, scanners.
- Power seating options: tilt and/or recline.
- Power foot rests.
- AAC and ICT interfaces and cables.
- Power attendant control or dual control options.

The actuator controls are integrated into the wheelchair driving controls. All functions can be operated from the driving control selected e.g. LED, Keypad, joystick, remote, alternative specialised control, dual user -carer control). Actuators control and power the wheelchair functions, e.g. lights, indicators, seating functions, leg rest functions, communication devices, alternative driving controls. More functions require additional actuators. The actuator control module with the correct number of actuator controls must be selected along with the suitable additional drive control that is compatible with the number of actuator control functions required. Bus cables support the connectivity of the actuator and control or switch option. The electronics of a power wheelchair actuators and drive control are powered by the power chair batteries.

Primary and Secondary Postural Support Devices (PSD) compatible with Paediatric and Adult Wheeled Mobility equipment - Seating Systems

A range of support device options, cushions for pressure reduction and/or postural support and seating options are available. Seating may consist of one system type, or may be a configuration of postural support devices, including cushions.

Detail of PSDs options, seating options and systems are found within the contracts for the specific buggies or wheelchairs where a company has offered a seating solution. These can be used as third party options for other wheelchairs chairs where compatible and may interface with the high postural support paediatric activity chairs

Pressure Reducing Cushions

Select the most appropriate cushion from the options provided, according to the service user clinical presentation, pressure ulcer risk and the correlating product specifications. In the first instance a cushion will be issued from the recycled loan pool. If stock is not available your local Aids and Appliances Budget Management Group will make a decision regarding funding the requisition pending improved stock levels (recycled or new purchases to augment loan pool stock). Equipment loans are issued according to stock availability, decision support prioritisation tool and availability of funding to purchase new equipment to augment the existing loan pool stock level.

Criteria applicable to the prescription of all cushions

Assessment

Assessment and determination of the most appropriate pressure reducing cushions is identified by the combined use of a pressure ulcer risk tool (Waterlow or Braden or Glamorgan paediatric pressure ulcer risk assessment), seating assessment when postural support is required as well as pressure reduction, other relevant clinical assessment and observations.

Pressure Ulcer Risk Tool

A Pressure Ulcer Risk Tool must be used to assess the service user in conjunction with clinical observations, to form an accurate picture of the service user's pressure risk and cushion requirements. The two most commonly used pressure ulcer risk tools currently used in Ireland are the Waterlow Pressure Ulcer risk Assessment (Waterlow) and the Braden Scale for predicting Pressure Ulcer Risk (Braden). The Glamorgan paediatric pressure ulcer risk assessment is suggested for use with children. The Waterlow is the most familiar pressure ulcer risk tool in cross disciplinary use. For this reason the cushion categories reference the Waterlow Pressure Ulcer Risk categories 'At Risk', 'High Risk', and 'Very High Risk'. These categories are intended to be reflected in the arrangement of cushions into those groups in your local recycling loan pool and have been used for the current cushion contract, when purchases are required. This facilitates the matching of the requisition of cushion to available loan pool stock and or current contract purchases when required. The Pressure Ulcer Risk Waterlow score or Braden Scale must be recorded on the cushion request form.

Other Relevant Clinical assessments and observations

When undertaking a comprehensive assessment four areas must be evaluated:

- Service user's clinical presentation including pressure ulcer risk
- The seat/wheelchair on which the cushion will be used
- The cushion
- The environment in which this will be used.

The correct selection of a cushion for the service user will be affected by the combination of these four things.

All of the following must be taken into consideration in determining the selected cushion:

Service user

Sitting pattern, weight of the service user, required distribution of pressure to disperse pressure, particularly off the Ischial tuberosity and back of thighs, function, age or stage occupations and participation in activities of daily living, are all considered.

Seat/Chair/wheelchair

Provides an appropriate and stable base for the cushion. Cushion is the correct depth and width. Seat inclination and back support angle required by service user is reflected in cushion selection.

Cushion

The depth, width, shape, cushion weight, stability provided, temperature, and air exchange qualities of the cushion are considered. The qualities and contribution of the cover are also considered. It is the correct size and fit (width and depth) for the service user and allows the level of postural support required by the service user when the cushion is in place. The height of the cushion will raise the service user. This must not adversely affect the stability of the service user or the angle of the service user's hips or knees or the desired sitting posture. Consideration must be given to the service user's ability to fit under essential height surfaces when using cushion. It allows for correct height leg and foot support as well as arm support when the cushion is in place, so that the user can push up to shift weight. Weight limit of cushion must be checked as products will vary in loan pool or current purchase contract.

Size: specify compatible size 12" (30.5cm)/14" (35.6cm)/16Wx16D",40.6cm) /18" (45.7cm) X18" (45.7cm),/20" (50.8cm) x18" (45.7cm),/22" (55.9cm) X18" (45.7cm_ /24" (60cm) x18" (45.7cm)

Trial

Refer to your local areas policy for arranging trials of cushions. Infection control must be abided by when trialling cushions that might be trialled or issued to another service user.

24 hour pressure risk and postural management

This multi discipline approach should be considered in relation to all pressure reducing aids and is considered best practice for all high risk pressure reducing presentations.

This multi discipline approach should be considered in relation to all pressure reducing aids and must be considered for all high risk pressure reducing presentations. For the best outcome other strategies must be identified apart from the prescription of pressure reduction equipment.

Positional changes throughout the day: This includes opportunities to lie, sit, stand and walk as appropriate to the user's presentation. Other equipment to support positioning may need to be identified. To reduce pressure on skin and joints and to facilitate the maintenance of posture, muscle strength, and bone strength through weight bearing opportunities.

Appropriate postural support to:

- Maintain posture and prevent postural deformities that can lead to the development of pressure point and risk hot spots.

- Maintain posture and postural deformities that exacerbate or lead to other health impacts for example respiratory and digestive and feeding, eating, drinking and swallowing difficulties. These impacts to health impact ability to recover from pressure injuries or secondary infections related to them.

Management of other contributing factors: Incontinence, medications to reduce the impact of the effect of these on skin viability and increased pressure risk.

Postural Support Cushions

Cushions with a design to provide postural support, for use as part of a seating configuration for users of wheelchairs. They have varying degrees of pressure reduction, as stated in the category specific description.