



GIG
CYMRU
NHS
WALES

Cyd-bwyllgor
Comisiynu
Joint Commissioning
Committee

Recreational and sport prosthetics for people under the age of 25 years

Commissioning Policy: CP221

Document Information	
Document Name	Recreational and sport prosthetics for people under the age of 25 years
Document No	CP221
Document Purpose	Commissioning Policy
Publication Date	September 2025
Version No	2.0
Commissioning Team Author	Neurosciences and Long Term Conditions
Target Audience	Chief Executives, Medical Directors, Directors of Finance, Chief Pharmacists, Specialist Care Centres and Health Boards, Artificial Limbs and Appliance Services (ALAS), Rehabilitation Consultants, Psychologists, Vascular Surgeons, Trauma and Orthopaedic Surgeons.
Description	NHS Wales will routinely commission this specialised service in accordance with the criteria described in this policy
Document Update Information	On new template Hyperlinks updated No changes to patient pathway

Contents

Abbreviations	5
Policy Statement	6
Welsh Language	6
Decarbonisation	6
Disclaimer	6
1. Introduction	8
1.1 Plain Language Summary	8
1.2 Aims and Objectives	9
1.3 Epidemiology	9
1.4 Current Treatment.....	10
1.5 What NHS Wales has decided.....	10
1.6 Relationship with other documents	10
2. Criteria for Commissioning	11
2.1 Inclusion Criteria	11
2.2 Exclusion Criteria.....	11
2.3 Continuation of Treatment	12
2.4 Acceptance Criteria.....	12
2.5 Patient Pathway (Annex i)	12
2.6 Designated Centres	12
2.7 Exceptions	13
2.8 Clinical Outcome and Quality Measures	13
2.9 Quality Requirements.....	13
2.10 Responsibilities	14
3. Evidence	15
3.1 References	15
3.2 Date of Review	15
4. Equality Impact and Assessment.....	16
5. Putting Things Right:	17
5.1 Raising a Concern.....	17
5.2 Individual Patient Funding Request (IPFR)	17
Annex i Patient Pathway.....	18
Annex ii Codes.....	19
Annex iii Glossary	20

Contact Us..... 21

Abbreviations

ALAC	Artificial Limb and Appliance Centre
ALAS	Artificial Limb and Appliance Service
BEST	Bringing Equipment Services Together (IT system)
EAT	Electronic Assistive Technology
IPFR	Individual Patient Funding Request
NWJCC	NHS Wales Joint Commissioning Committee
PREMS	Patient Report Experience Measures
PROMS	Patient Reported Outcome Measures

Policy Statement

NHS Wales Joint Commissioning Committee (NWJCC) will commission recreational and sport prosthetics for people under the age of 25 in accordance with the criteria outlined in this document.

In creating this document NWJCC has reviewed this clinical condition and the options for its treatment. It has considered the place of this treatment in current clinical practice, whether scientific research has shown the treatment to be of benefit to patients, (including how any benefit is balanced against possible risks) and whether its use represents the best use of NHS resources.

Welsh Language

NWJCC is committed to treating the English and Welsh languages on the basis of equality, and endeavour to ensure commissioned services meet the requirements of the legislative framework for Welsh Language, including the [Welsh Language Act \(1993\)](#), the [Welsh Language \(Wales\) Measure 2011](#) and the [Welsh Language Standards \(No.7\) Regulations 2018](#).

Where a service is provided in a private facility or in a hospital outside of Wales, the provisions of the Welsh language standards do not directly apply but in recognition of its importance to the patient experience, the referring health board should ensure that wherever possible patients have access to their preferred language.

In order to facilitate this, NWJCC is committed to working closely with providers to ensure that in the absence of a Welsh speaker, written information will be offered and people have access to either a translator or 'Language-line' if requested. Where possible, links to local teams should be maintained during the period of care.

Decarbonisation

NWJCC is committed to taking assertive action to reducing the carbon footprint through mindful commissioning activities. Where possible and taking into account each individual patient's needs, services are provided closer to home, including via digital and virtual access, with a delivery chain for service provision and associated capital that reflects the NWJCC commitment.

Disclaimer

NWJCC assumes that healthcare professionals will use their clinical judgement, knowledge and expertise when deciding whether it is appropriate to apply this policy.

This policy may not be clinically appropriate for use in all situations and does not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian, or Local Authority.

NWJCC disclaims any responsibility for damages arising out of the use or non-use of this policy.

1. Introduction

This policy has been developed for the planning and delivery of recreational and sport prosthetics for people under the age of 25 resident in Wales. This service will only be commissioned by the NHS Wales Joint Commissioning Committee (NWJCC) and applies to residents of all seven Health Boards in Wales.

1.1 Plain Language Summary

Children or young people accessing the prosthetic service either have acquired limb loss or are individuals with congenital limb deficiency/deformity. Often these individuals have more than one condition or complex needs, which include co-morbidities such as diabetes, cardio-vascular disease, neurological and musculoskeletal conditions.

An amputation is the traumatic (accidental) or surgical removal of part of the body. Significant multiple amputations comprise of the loss of more than one limb. Limb-loss or limbless refers to any individual who has undergone an amputation (i.e. above the level of ankle or wrist). This may include those with multiple amputations (e.g. a bilateral lower-limb amputee) those with amputations at different levels (e.g. Trans-femoral (above knee) or Trans-tibial (below knee) and congenital limb loss e.g. Limb absence relates to a birth defect (congenital birth defect) where all or part of a limb is missing'.

Specific activity prostheses are designed with essential elements for performance, including durability, strength, and being lightweight are customised to ensure they meet requirements where possible.

Recreational and sport limbs can enable children and young people to become more active and involved in physical activity that were previously inaccessible to them as they may have been previously restricted to standard everyday prosthetic limbs. These specialist limbs could provide them with the opportunity to participate in sport and activity with their peers, lead a fit and healthy lifestyle whilst helping them to build their social skills, maintain wellbeing, develops strength and endurance in the muscles for everyday activities and improve their self-confidence.

The Artificial Limb and Appliance Service (ALAS) is located in Cardiff, Swansea and Wrexham.

ALAS provides lifelong care to people with a congenital limb deficiency or who have had major limb amputations. Pre-amputation, re-amputation and antenatal consultations are also provided as required. The centres have expertise for all levels of amputation and limb loss and are able to provide the full range of advice and prosthetic rehabilitation for all levels of upper and lower limb loss.

The services included are:

- Posture and Mobility Service
- Prosthetics
- Orbital (not provided on each site)
- Orthotics
- Welsh Artificial Eye Service
- Electronic Assistive Technology (EAT) (not provided on each site).

Prosthetic limbs are medical devices that provide a portion of the functions normally provided by natural arms and legs. Often used when a loss of limb occurs due to an accident or birth defect, the prostheses make it possible for individuals to enjoy dexterity, mobility and a better quality of life.

1.2 Aims and Objectives

This policy aims to define the commissioning position of NWJCC on the provision and fitting of an upper and lower recreational limb for a person aged under 25 years.

The objectives of this policy are to:

- ensure commissioning for the use of recreational and sports prosthetics for people under the age of 25 is evidence based
- ensure equitable access to prosthetic services
- define the criteria for people under the age of 25 with limb loss to access the treatment
- improve outcomes for people with limb loss
- ensure the provision of recreational and sport prosthetics supports physical and psychological development.

1.3 Epidemiology

The last published UNIPOD report⁷ for 2011/2012 showed a total of 5,906 new referrals to prosthetic services in the UK for the year ending 31 March 2012.

Lower limb amputations accounted for 91% of total amputations.

The gender breakdown of new referrals is similar to previous years, with female referrals accounting for 30% of all new referrals to prosthetic services centre. Males (70%) present to the prosthetic services at an earlier age than females and the national median age of referrals for males is 65 years and for females it is 69 years of age. The commonest cause (52%) of amputation is due to vascular disease, nearly 42% of these with diabetes mellitus. Trauma accounts for 11% of all amputations and tumours for 3%, most patients

in these categories are of a younger age. We note that there were no data reported on causation in 1,047 (17%) of all cases.

1.4 Current Treatment

In Wales, NHS Prosthetic and Amputee Rehabilitation services are delivered in-house by three specialist Artificial Limb and Appliance Service (ALAS) located in Cardiff, Swansea and Wrexham.

The prescription and fitting of the Prosthesis is a specialist skill and therefore this process is directed by a professionally registered prosthetist in consultation and joint working with other members of the multidisciplinary team as required. The manufacture, maintenance and repair of the prosthetic limbs is undertaken by a team of specialised technicians who work closely with the prosthetists.

1.5 What NHS Wales has decided

NWJCC has carefully reviewed the evidence of recreational and sport prosthetics for children and young people under the age of 25. We have concluded that there is enough evidence to fund the use of recreational and sport prosthetics within the criteria set out in section 2.1.

1.6 Relationship with other documents

This document should be read in conjunction with the following documents:

- **NHS Wales**
 - o All Wales Policy: [Making Decisions in Individual Patient Funding requests](#) (IPFR).
- **NHS Wales Joint Commissioning Committee policies and service specifications**
 - o [CP89 Prosthetic Provision, Service Specification](#), December 2021
 - o [CP49 War Veterans Enhanced Prosthetic Provision, Commissioning Policy](#)
- **Relevant NHS England policies**
 - o Service Specification: Complex Disability Equipment – [Complex disability equipment prosthetics all ages](#)

2. Criteria for Commissioning

The NHS Wales Joint Commissioning Committee approve funding of recreational and sport prosthetics for people under the age of 25 in line with the criteria identified in this policy.

2.1 Inclusion Criteria

People who meet the following criteria could be considered for recreational and sports prosthesis:

- the child or young person is under the age of 25 when assessed for their prosthetic needs
- the child or young person has suffered limb loss or congenital limb deficiency. The prosthesis can be for any limb (or limbs if the child has multiple limb loss or deficiency). Upper and lower limb components can be included
- the child or young person has been assessed by ALAS as being fit to engage in physical activity.

As well as meeting the above criteria the Artificial Limb and Appliance Service (ALAS) will also need to be in agreement that:

- the child or young person will benefit from the prosthesis, and from engaging in the physical activity, such as, PE, sports or games at school, recreation, playing with friends, organised sporting activity etc
- the prosthesis is appropriate for the child or young person, and the activity for which it is intended
- there is a need for the prosthetic and that it will be used for more specialised activities (e.g., canoeing, rock climbing for example - there is a demonstrable interest in the sport, or a history of participation).

The Artificial Limb and Appliance Service (ALAS) is responsible for determining the appropriate prosthesis for the child or young person.

2.2 Exclusion Criteria

The following components would **not routinely** be considered:

- Components not CE marked and passed standards for use in this country.
- Components that are being used as part of a trial or to support a study.
- Limbs for those children and young people wishing to reach an elite athletic level.

Enhanced prosthetic limbs for War Veterans are commissioned under [CP49 War Veterans Enhanced Prosthetic Provision, Commissioning Policy](#).

2.3 Continuation of Treatment

Healthcare professionals are expected to review a patient's health at regular intervals to ensure they are demonstrating an improvement to their health due to the treatment being given.

If no improvement to a patient's health has been recorded then clinical judgement on the continuation of treatment must be made by the treating healthcare professional.

2.4 Acceptance Criteria

The service outlined in this policy is for patients ordinarily resident in Wales, or otherwise the commissioning responsibility of the NHS in Wales. This excludes patients who whilst resident in Wales, are registered with a GP Practice in England, but includes patients resident in England who are registered with a GP Practice in Wales.

2.5 Patient Pathway (Annex i)

The child or young adult under the age of 25 would already be known to the specialist centre or a new referral can be made by the GP, Consultant or Allied Health Professional (AHP).

The diagram in Annex i sets out the referral pathway.

2.6 Designated Centres

The Artificial Limb & Appliance Services operate from three separate centres:

Cardiff and Vale University Health Board¹

Artificial Limb and Appliance Centre
Rookwood Hospital
Fairwater Road
Llandaff
Cardiff
CF5 2YN

Swansea Bay University Health Board²

Artificial Limb and Appliance Centre
Morrison Hospital
Swansea
SA6 6LG

¹ <http://www.alas.wales.nhs.uk/cardiff-alac>

² <http://www.alas.wales.nhs.uk/swansea-alac>

Betsi Cadwaladr University Health Board³

Artificial Limb and Appliance Centre
Gate 7, Wrexham Maelor Hospital
Croesnewydd Road
Wrexham
LL13 7NT

2.7 Exceptions

If the patient does not meet the criteria for treatment as outlined in this policy, an Individual Patient Funding Request (IPFR) can be submitted for consideration in line with the All Wales Policy: Making Decisions on Individual Patient Funding Requests. The request will then be considered by the All Wales IPFR Panel.

If the patient wishes to be referred to a provider outside of the agreed pathway, an IPFR should be submitted.

Further information on making IPFR requests can be found at: [Individual Patient Funding Requests](#)

2.8 Clinical Outcome and Quality Measures

The Provider must work to written quality standards and provide monitoring information to the lead commissioner. Providers are expected to submit service activity (including number of new prostheses, upper or lower limbs), waiting times, clinical statistics and primary outcome measures on a monthly basis.

The centre must enable the patient's, carers and advocate's informed participation and to be able to demonstrate this. A patient experience feedback tool should be developed to reflect the views of parents and families. Patient Reported Outcome Measures (PROMS) and/or Patient Report Experience Measures (PREMS) should be reported to NWJCC quarterly through the contract monitoring process. Provision should be made for patients with communication difficulties and for children, teenagers and young adults.

2.9 Quality Requirements

- the provider will have a recognised system to demonstrate service quality and standards.
- the service will have detailed clinical protocols setting out nationally (and locally where appropriate) recognised good practice for each treatment site.

³ <http://www.alas.wales.nhs.uk/wrexham-alac>

- the quality system and its treatment protocols will be subject to regular clinical and management audit.
- the provider is required to undertake regular patient surveys and develop and implement an action plan based on findings.

2.10 Responsibilities

Referrers should:

- inform the patient and/or their parent or guardian that this treatment is not routinely funded outside the criteria in this policy, and
- refer via the agreed pathway.

Clinicians considering treatment should:

- discuss all alternative treatments with the patient and/or their parent or guardian;
- advise the patient and/or their parent or guardian of any side effects and risks of the potential treatment
- inform the patient and/or their parent or guardian that treatment is not routinely funded outside of the criteria in the policy, and
- confirm that there is contractual agreement with NWJCC for the treatment.

In all other circumstances an IPFR must be submitted.

3. Evidence

NWJCC is committed to regularly reviewing and updating all of its commissioning policies based upon the best available evidence of both clinical and cost effectiveness.

3.1 References

- o All Wales Policy: [Making Decisions in Individual Patient Funding requests \(IPFR\)](#). Specialised Services Commissioning Policy: [CP49 War Veterans – Enhanced Prosthetic Provision](#), October 2020
- o Specialised Services Commissioning Policy: [Microprocessor Controlled Prosthetic Knees \(CP218\)](#) December 2021
- o Specialised Service Specification: [Prosthetic Provision \(CP89\)](#) March 2022
- o Commissioning Safe and Sustainable Specialised Paediatric Services, A framework of Critical Inter-Dependencies. Department of Health 2008. [\[ARCHIVED CONTENT\] Commissioning safe and sustainable specialised paediatric services: a framework of critical inter-dependencies: Department of Health - Publications](#)

Relevant NHS England policies

- o [NHS England Prosthetic Service Specification May 2025](#)

Other published documents

- o [Equality Act 2010](#)
- o Code of Practice for Disability Equipment, Wheelchair and Seating Services, A Quality Framework for Procurement and Provision of Services, Brain Donnelly;2015 [Copyright information | CECOPS](#)
- o [National Wheelchair Managers Forum, Operating Model for NHS Commissioned Wheelchair Services, Version 4, April 2018](#)

3.2 Date of Review

This document is scheduled for review every three years, unless information is received which indicates that the policy requires revision.

If an update is carried out the policy will remain extant until the revised policy is published.

4. Equality Impact and Assessment

The Equality Impact Assessment (EQIA) process has been developed to help promote fair and equal treatment in the delivery of health services. It aims to enable NHS Wales Joint Commissioning Committee to identify and eliminate detrimental treatment caused by the adverse impact of health service policies upon groups and individuals for reasons of race, gender re-assignment, disability, sex, sexual orientation, age, religion and belief, marriage and civil partnership, pregnancy and maternity and language (Welsh).

This policy has been subjected to an Equality Impact Assessment.

The Assessment demonstrates the policy is robust and there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

5. Putting Things Right:

5.1 Raising a Concern

Whilst every effort has been made to ensure that decisions made under this policy are robust and appropriate for the patient group, it is acknowledged that there may be occasions when the patient or their representative are not happy with decisions made or the treatment provided.

The patient or their representative should be guided by the clinician, or the member of NHS staff with whom the concern is raised, to the appropriate arrangements for management of their concern.

If a patient or their representative is unhappy with the care provided during the treatment or the clinical decision to withdraw treatment provided under this policy, the patient and/or their representative should be guided to the LHB for [NHS Putting Things Right](#). For services provided outside NHS Wales the patient or their representative should be guided to the [NHS Trust Concerns Procedure](#), with a copy of the concern being sent to NWJCC.

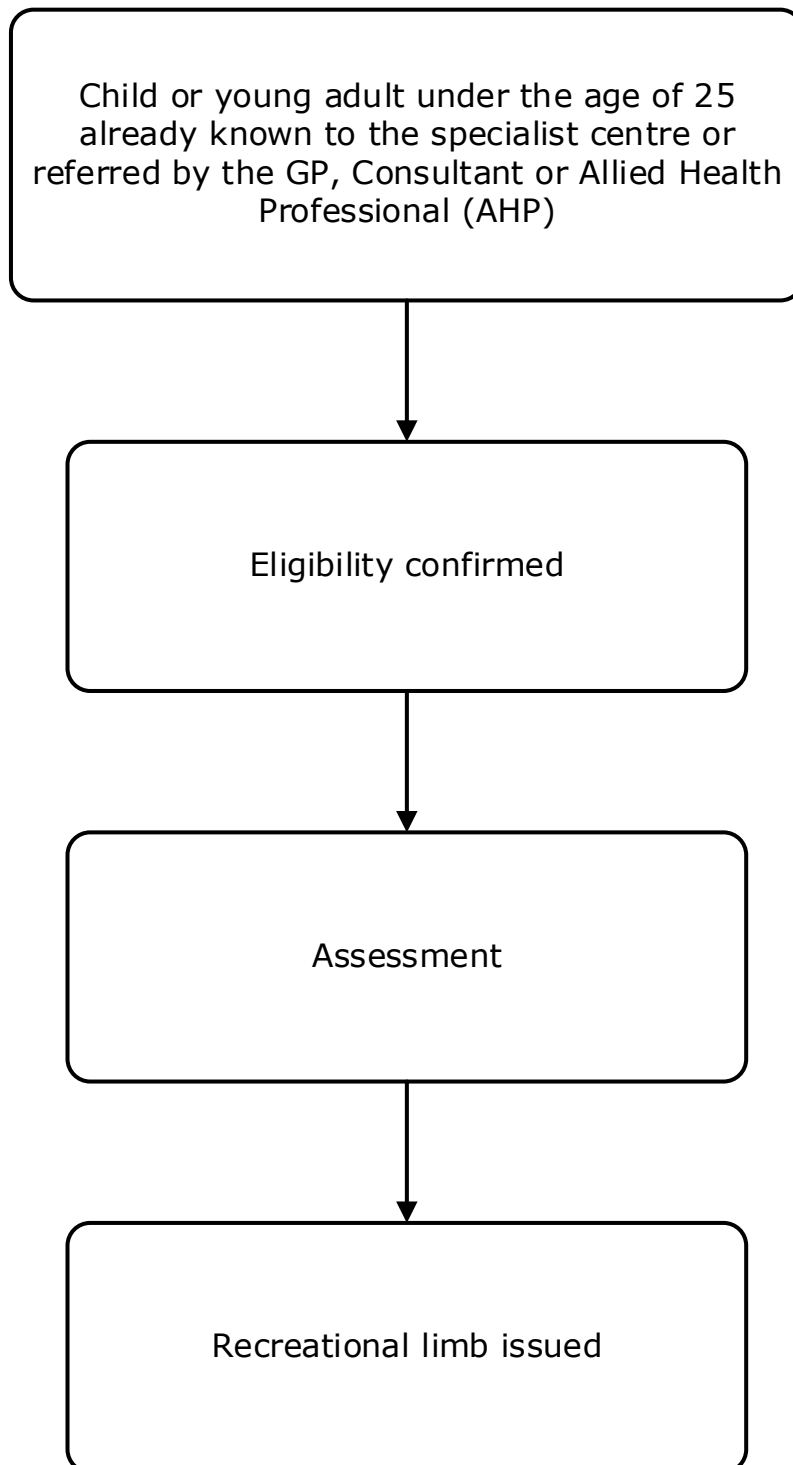
5.2 Individual Patient Funding Request (IPFR)

If the patient does not meet the criteria for treatment as outlined in this policy, an Individual Patient Funding Request (IPFR) can be submitted for consideration in line with the All Wales Policy: Making Decisions on Individual Patient Funding Requests. The request will then be considered by the All Wales IPFR Panel.

Further information on making IPFR requests can be found at: [Individual Patient Funding Requests](#)

Annex i Patient Pathway

Pathway for a child or young adult under the age of 25 years



Annex ii Codes

The list of ICD codes is indicative and is not exhaustive. Additional codes may be used for contract monitoring purposes, furthermore some codes may cover indications not included within this policy.

Code Category	Code	Description
ICD-10	Z89.4	Acquired absence of foot and ankle
ICD-10	Z89.5	Acquired absence of leg at or below knee
ICD-10	Z89.6	Acquired absence of leg above knee
ICD-10	Z89.7	Acquired absence of both lower limbs [any level, except toes alone]
ICD-10	Z89.8	Absence of upper and lower limbs [any level]
ICD-10	Z89.0	Acquired absence of finger(s) [including thumb], unilateral
ICD-10	Z89.1	Acquired absence of hand and wrist
ICD-10	Z89.2	Acquired absence of upper limb above wrist
ICD-10	Z89.3	Acquired absence of both upper limbs [any level]
ICD-10	Z89.9	Acquired absence of limb, unspecified

Annex iii Glossary

Established Patients with Limb Loss

People who have undergone a period of rehabilitation and re-ablement following congenital loss or amputation and achieved their maximum potential in terms of mobility, independence and participation. They will normally require input from part of the team in order to review and maintain their prosthetic provision but will not always require on-going medical monitoring or therapy

Individual Patient Funding Request (IPFR)

An IPFR is a request to NHS Wales Joint Commissioning Committee (NWJCC) to fund an intervention, device or treatment for patients that fall outside the range of services and treatments routinely provided across Wales.

NHS Wales Joint Commissioning Committee (NWJCC)

NWJCC is a joint committee of the seven local health boards in Wales. The purpose of NWJCC is to ensure that the population of Wales has fair and equitable access to the full range of Tertiary Services. NWJCC ensures that services within our portfolio are commissioned from providers that have the appropriate experience and expertise. They ensure that these providers are able to provide a robust, high quality and sustainable services, which are safe for patients and are cost effective for NHS Wales.

Contact Us

If you have a question related to this document you can contact us using one of the methods outlined below.

If you would like this document in an alternative format and/or language, please contact us for assistance.

Email:

NWJCC consultation mailbox – nwjccconsultation@wales.nhs.uk

Telephone:

General Enquiries – 01443 433112

Website:

[Contact us - NHS Wales Joint Commissioning Committee](#)

Writing:

If you wish to contact the NHS Wales Joint Commissioning Committee, you can write to us at one of our locations below, we welcome correspondence in Welsh or English:

South Wales Offices

Unit 1, Charnwood Court, Heol Billingsley, Nantgarw, CF15 7QZ

Unit G1 The Willowford, Main Avenue, Treforest Industrial Estate, Pontypridd, CF37 5YL

North Wales Offices

Unit 3, Media Point - Unit 3, Mold Business Park, Mold, CH7 1XY

Preswylfa, Hendy Road, Mold, CH7 1PZ