

CONNECT BAPRO



The British Association of
Prosthetics and Orthotics

ISSUE 1 2026



PROSTHETICS & ORTHOTICS AWARENESS CAMPAIGN

IN THIS ISSUE: Inspiring the next generation - Promoting careers in prosthetics and orthotics

CONNECTING THE MEMBERS OF THE BRITISH ASSOCIATION OF PROSTHETICS AND ORTHOTICS

ETHNOCARE OVERLAY

Designed for above and below-knee amputees, the Overlay uses air to provide an all day optimal fit inside the socket.

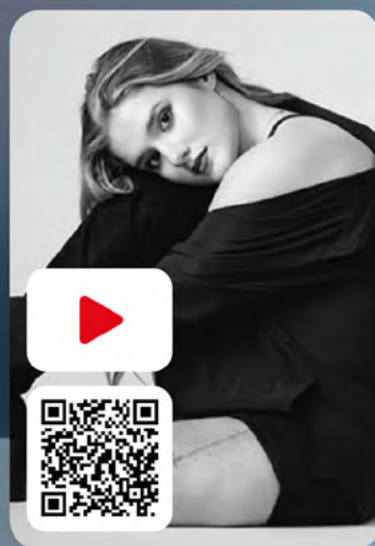
COVERED BY NHS



Testimonials

Tatum Boynton

Rich Potter



Contact us!

ethnocare.ca
clinics@ethnocare.ca
+1 418-934-5669

Medical Necessity Letter



A brand of AM Healthcare Group



The Editorial team can be contacted through the Secretariat at:
BAPO SECRETARIAT, Clyde Offices, 2nd Floor, 48 West George Street, Glasgow G2 1BP
Tel: 0141 561 7217.
Email: bapoconnect@bapo.com
BAPO website: www.bapo.com

EDITORIAL COMMITTEE

Pam Coulton – Chair
Ankit Singh - Vice Chair
Kate Pugh – Secretariat
Jourja Pattrik
Natalie Chinn
Chiazoka Exeuzo
Anushika Dayananda
Cara Muir
Sahar Siddiqui Wardle

EDITOR: BAPO SECRETARIAT
Email: bapoconnect@bapo.com

FEATURES: BAPO SECRETARIAT
Email: bapoconnect@bapo.com

ADVERTISING:
BAPO SECRETARIAT
Email: bapoconnect@bapo.com

INTERNET, CALENDAR OF EVENTS AND NOTICEBOARD:
Email: bapoconnect@bapo.com

NEWS: BAPO SECRETARIAT
Email: bapoconnect@bapo.com

INTERNATIONAL:
BAPO SECRETARIAT
Email: bapoconnect@bapo.com

TECHNICIANS:
BAPO SECRETARIAT
Email: bapoconnect@bapo.com

CLINICAL: JOURJA PATTRIK
Email: jourja.pattrik@bapo.com

DEADLINE FOR NEXT ISSUE
Friday 22nd May 2026
Please send your articles adhering where possible to the guidelines outlined on page 4 to bapoconnect@bapo.com

DISCLAIMER:
All the articles, adverts and accompanying loose leaf inserts are published in good faith and do not necessarily represent the view of BAPO or the Editorial Sub-Committee.

MAGAZINE DESIGNED BY:
BELEAV
Email: design@beleav.co.uk
www.beleav.co.uk

Contents

NEWS

Chair's report.....4
Editors notes.....7
Sad news.....8
Reflections on becoming the first Chair of BAPO.....9
Users at the heart of 3rd CDT Conference....10
FORTH Conference 2026.....12
A day in the life of video competition winners.....14
Launching a shared movement - One voice for prosthetics and orthotics.....15
STEPS Rehabilitation founders win Everywoman of the Year 202516
David Holmes visits STEPS Rehabilitation17
Prosthetics and orthotics in focus - Your core experience at OTWorld 2026.....18
Innovative tech solution launched by Algeos20
P&O Awards 2025.....22

EQUALITY, DIVERSITY, INCLUSION

The Equality Act 2010 - Understanding your responsibilities27

RESEARCH

Research Committee Update.....28

Translating evidence into everyday clinical practice29
Case study: Transforming orthotic services in Scotland through CAD/CAM innovation.....30
Interview with the researcher:
Eileen Morrow.....32
Neuroprogressive & Dementia Network.....35
From clinic to evidence: Why prosthetists should engage with ARRN.....36

CAREERS

Inspiring the next generation: Promoting careers in prosthetics and orthotics39
Supporting P&O through careers events40

EDUCATION

Education Committee Update.....43
Enhanced Practice in P&O: Preparing the profession for the next decade45
Supporting the next generation48

STUDENTS

Technician to apprentice50
Shaping the future: A day in the life of a prosthetics and orthotics lecturer52



Supporting P&O through careers events - Page 40

Article submission guidelines

2026 ARTICLE SUBMISSION DEADLINES:
Friday 22nd May 2026
Friday 18th September 2026
 Please send your articles to bapoconnect@bapo.com

- 500 words of text plus one photograph will fill approximately 1 page of the magazine.
- 800-1500 words of text plus 2-3 photographs or diagrams, illustrations etc. will take up approximately 2 pages of the magazine (ideal for clinical articles). Referencing to be Vancouver style.
- Articles should not be longer than 2 pages and should, whenever possible, contain some photographic content and/or diagrams and illustrations. All photos/images must be supplied with captions.
- Include name and title at the top of your article.
- CD - Word format is preferred. Please include hard copy.
- Photographs must be sent in JPEG format of at least 3 megapixels. Original sized images are preferred. Please title all photographs with article title and author's name. Please note that photos embedded within documents may not be suitable.
- A BAPO media consent form should accompany all articles that require an individual's consent to print. These are available from the Secretariat.
- If there are any problems submitting articles in the above formats, typed, hand-written or faxed articles can be accommodated but please bear in mind that this increases the workload of the editorial sub-committee and our printers who may charge BAPO extra for the privilege!

The Editorial Committee reserve the right to edit articles for both content and size.

CHAIR'S REPORT



It's been an exceptionally busy start to 2026 for BAPO, with major progress across governance, conferences, education, and workforce development, national advocacy, partnerships, and professional visibility.

GOVERNANCE AND ORGANISATIONAL DEVELOPMENT

BAPO has been working hard behind the scenes to strengthen our governance processes. With the introduction of onboarding guides for volunteers, dedicated standard operating processes across the organisation, a robust business continuity plan, and clear visibility of all staff and volunteers on BAPO's new HR and health and safety system.

BAPO CONFERENCES AND AWARDS

Our recent BAPO Conference in Glasgow was a tremendous success, with standing room only. The programme featured a wide range of excellent presentations, and the exhibitor area was packed throughout the day.

The conference was followed by a wonderful evening celebrating excellence and achievement at BAPO's Annual Awards Ceremony. Congratulations to all winners and well done to every shortlisted nominee.

Nominations for this year's awards are now open, with several new categories added. Nominations close 30 April 2026.

Our next conference will be held in Oxford on 24th April 2026, and the theme will be 'designing care around the patient'. All exhibitor space sold out within the first ten days, as always, we are grateful for the support of the P&O industry.

We have some wonderful keynote speakers lined up for this event. Delegate tickets have now sold out and were once again fully funded for BAPO members. It promises to be a day packed with great presentations, networking, meeting friends and colleagues, and welcoming our international partners who will also be in attendance.

BAPO'S LIFETIME ACHIEVEMENT AWARD

BAPO's Lifetime Achievement Award has been refreshed, and a clear nomination process has been mapped. There is now a dedicated nomination form and guide, which can be found on BAPO's website. Nominations will open and close at the same time each year. Nominations are currently open and will close on 30 April 2026.

ADVANCING HEALTHCARE AWARDS: EVIDENCING IMPACT & EXCELLENCE IN P&O

BAPO is once again sponsoring the P&O award for Evidencing Impact & Excellence at the Advancing Healthcare Awards. You are encouraged to nominate yourself or a colleague to ensure the excellent work that happens every day in our profession, is recognised and celebrated. Nominations are open and close 16 March 2026.

EDUCATION AND WORKFORCE PIPELINE

Many of you attended the consultation, alongside BAPO, on the proposed closure of the Derby University apprenticeship programmes. It was wonderful to see the profession come together to support this important pipeline for our workforce. I am delighted that Derby University has chosen to allow the programmes to continue. However, the future of these courses is dependent on the number of learners they attract. As I said at the consultation, there are significant systemic barriers to securing the workforce pipeline in P&O. Rest assured BAPO is doing everything it can

to highlight these barriers and work collaboratively to address them.

LETTER TO THE SECRETARY OF STATE FOR HEALTH

In December 2025 BAPO wrote to the Secretary of State for Health outlining BAPO's concerns regarding the proposed closure of the apprenticeship route, the fragility of the workforce pipeline, and the complexity and inadequacy of the commissioning model in P&O. I received a positive response and a meeting to discuss our concerns with the Minister for Health has been arranged.

NHS ENGLAND COMMISSION

BAPO has now commenced its new stream of work which will run until 31 August 2026. This programme will deliver the following outcomes:

- Develop and socialise a strategic plan for national placement allocation aligned with the ambitions of all four UK nations
 - Establish a long-term sustainable placement model to enhance workforce capacity
 - Implement a profession led strategic plan for placement allocation and identification to ensure equity and quality measures, and unify the ambitions of all four nations
 - Develop a proposal for sustainable apprenticeship delivery by a single HEI for the nation
 - Align with rural and coastal workforce development strategies to enhance educator capacity
 - Create a plan for sustained engagement and cohort development
 - Develop and socialise sustainable practice educator training and packages, including simulation delivery in virtual environments
 - Evolve learner networks and resources to enhance learner engagement and support learners through transition into the workforce, including the first-year post qualification, with the aim of reducing early career attrition
- This is a major piece of work for the profession and collaboration is key. If you see a call out to get involved, please do, your input is vital to producing outcomes that work for the profession. BAPO will continue to share updates as the work progresses.

WORK EXPERIENCE INITIATIVE

BAPO, alongside our industry and charity partners, launched a new work experience initiative with the aim of providing people considering their career choices with an opportunity to engage with the P&O profession. To date we have had over 100 expressions of interest, and the secretariat and career outreach team are in the process of arranging placements. If your service hasn't yet signed up to support this important initiative, please contact the secretariat at enquiries@bapo.com to find out more information and register your interest.

APPG AND STAKEHOLDER GROUP

The first P&O stakeholder group meeting took place on 17th November 2025 and now has 40 members across the industry.

The aim of this group is to come together to provide solution focused responses to the challenges the profession is facing and to feed into the P&O All Party Parliamentary Group which is currently being set up.

You can read more about the stakeholder group on BAPO's website.

NATIONAL AWARENESS CAMPAIGN

BAPO and the stakeholder group launched a national P&O awareness campaign on February 2nd which will run until August 31st, 2026. This campaign aims to raise awareness of P&O services, demonstrating value and outcomes, highlighting risks, provide a space for the patient's voice, and uniting the sector as One Voice. We need your support to make this campaign a success. Please get involved by sharing a short video or quote on why you value prosthetic and orthotic services. Display the campaign flyer in your services, use the campaign email banner, and share details of the campaign with your colleagues and patients. For more information, email enquiries@bapo.com.



CAREER OUTREACH: NATIONAL PRIMARY SCHOOL COMPETITION

The national P&O primary school competition launched in January and has received fantastic feedback. It was led by our career outreach team and supported by the Limbless Association and Limb Art.

The aim is to socialise careers in P&O at a young age by engaging children in P&O activities, while also helping to destigmatise limb loss and limb difference. Please share the details of this competition with your local primary school. The competition is open to all UK primary schools, aimed at children aged 7-11 years. More details can be found on BAPO's website.



BAPO PARTNERSHIP PROGRAMME

BAPO's Partnership Programme continues to grow.

Industry members include: Peacocks, Ossur, EthnoCare, Blatchford, B.O.S, OttoBock, Allard, Steeper, Thuasne, Promedics, Chaneco, TalarMade, Edser, Buchanan, APOS, Brace Orthopaedic, Beagle Orthopaedic, Reeds, Orthotix, Dacey, Medi, Ability Matters.

Charity partners include: BLESMA and the Limbless Association.

Association partners include: The Latvijas Protezēšanas un Ortozēšanas Asociācija (the professional body for prosthetics and orthotics in Latvia), The Swedish Prosthetics and Orthotics Association, The Swedish Prosthetics and Orthotics Technicians Association, The Norwegian Professional Body for Prosthetics and Orthotics and The International Society for Prosthetics and Orthotics (ISPO) – Saudi Arabia.

Journal partners include: The Canadian Prosthetics and Orthotics Journal.

INTERNATIONAL COLLABORATION

BAPO has joined forces with international organisations with a commitment to shared advocacy on shared challenges. These include:

- The Protez Hub in Ukraine
- California Orthotics and Prosthetics Association
- NZOPA New Zealand
- AOPA Australia
- SOIF Sweden
- SOTF Sweden
- Latvia, Poland, and Norway

Conversations with other international allies are ongoing.

THE LEG ULCER FORUM

In January I met with the Chair of the Leg Ulcer Forum for England and Wales. The forum has been closely involved in national and international standards and guidance and has produced peer reviewed publications focused on management and care of people with leg ulcers and associated lower limb conditions.

It is important that prosthetics and orthotics is visible in the vascular space and BAPO will continue to support this.

NEW INITIATIVES

BAPO Bitesize is set to launch in February. This is new online, on demand education resource has been designed to provide the P&O profession with high quality education they can access on demand. The first three courses to be added will focus on Clinical biomechanics, research skills, and gait analysis. With many more due to be added throughout the year. Read more about BAPO Bitesize in the following pages.

The Connected Care webinar series is underway. This webinar series aims to connect the P&O profession with the multi-disciplinary team and the third sector. More details can be found in this BAPOConnect edition from the education team.

VISITING OUR INDUSTRY PARTNERS

Over the last few months, I have been invited to Ossur's premises in Manchester, Beagle in Blackburn, and Chaneco in Northampton. It has been good to see the work that is happening across our industry, including a focus on sustainability, new technology, and more efficient and effective ways of working. Building relationships between the professional body and our industry partners is key to our progression and I am grateful for the invitation to discuss how we can move forward together.

STRATEGY UPDATE

BAPO's new strategy went out for consultation with our members, thank you to everyone who provided feedback. The new strategy has now been launched and will guide the activities of our professional body over the next five years, ensuring we are focused on the areas that matter the most.

WELCOMING OUR NEW LEARNERS

All first-year learners at all four universities have been sent a welcome pack from BAPO. Thank you to our industry partners for contributing to the welcome packs. We hope our new learners recognise that they are joining a warm and welcoming profession, who are passionate about patient care and the impact prosthetics and orthotics has on the lives of the millions of people who depend on it.

NEW REPORT ON FUNDING IN P&O

BAPO recently launched a report presenting a comprehensive analysis of funding data obtained under the Freedom of Information Act 2001 from Trusts and Health Boards across the United Kingdom regarding their prosthetics and orthotics (P&O) services. The findings reveal a fragmented and often opaque funding landscape that undermines accountability and has the potential to create systemic inequities.

The evidence presented here indicates a clear need to review and reform how prosthetic and orthotic services are funded, monitored, and governed within the NHS.



NEW GUIDES

BAPO has recently published 'A guide to writing abstracts and presenting at conferences'. Thank you to Dr Laura Barr for leading this piece of work. This guide is a great resource to support the P&O workforce to engage with research.

We are currently working on eight additional projects:

- A guide on holistic patient care for prosthetists and orthotists
- Easy read P&O literature for patients with learning difficulties, in collaboration with the Limbless Association
- An updated guide on implementing outcome measures in P&O practice
- Updated outcome measures guide
- The NHS 10-Year Health Plan
- The National Cancer Plan for England
- The Role of P&O in Public Health
- A guide on reasonable adjustments

BAPO MEMBERSHIP

Thank you to all our members who have once again provided crucial support to our professional body by renewing their membership, re-joining, or joining for the first time. BAPO is the only professional body that represents the prosthetic and orthotic workforce in the UK. A strong and credible professional body is vital for the progression of our profession. The work that is being carried out simply would not be possible without the support of our members.

THANK YOU

The amount of work that has been delivered by BAPO over the last 12 months is testament to the fantastic team of staff and volunteers at BAPO. They work tirelessly on your behalf every day and you can be truly proud of the progress your professional body is making due to their commitment and passion.

CONTACT

If you would like to get in touch, please email me at nicky.eddison@bapo.com.

Thank you for your ongoing support.

Dr Nicky Eddison
Chair, BAPO

Editors notes

Welcome to our first issue of 2026, we hope you enjoy reading what is happening within our profession. I have had the privilege of being involved in BAPO Mag and latterly BAPO Connect over many decades, and this is my second stint as Editorial Chair. We now have a strong team on Editorial Committee and with this and my other workloads in mind, it is time for me to step back and handover the Chairs role to our current Vice Chair, Ankit Singh. I will remain in the background to assist Ankit should he and the team need anything. I am looking forward to reading BAPO Connect as it hits the press from issue 2.

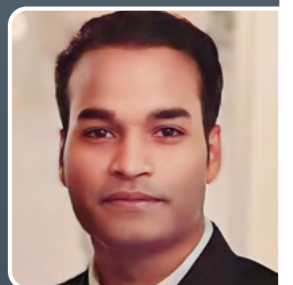
For anyone thinking of getting involved with BAPO, as always, Editorial Committee is an excellent way to get involved.

Pam Coulton

I am honoured to step up for the role of Chair of the Editorial Committee at BAPO, and I extend my sincere thanks to Pam for her exemplary leadership and continued support.

I am committed to building upon the strong foundation that has been established, while ensuring continuity in the quality and integrity of our work. With the guidance of the committee and the dedication of its members, I will strive to uphold our high standards and further strengthen our editorial processes. Collaboration will remain at the heart of our efforts, and I look forward to working closely with all members to sustain and enhance the excellent work we have achieved together.

Ankit Singh



BAPO Bitesize
P&O EDUCATION ON DEMAND

Foundations of Research in Prosthetics and Orthotics

Prof. Machiappan Chockalingham

- How to evaluate and assess available evidence (critical appraisal of current research evidence)
- Aims, objectives, and good research questions
- Introduction to qualitative and quantitative research
- Processes and procedures for conducting clinical research

In collaboration with

Segment	Complete module
Member: £4.99	Member: £25
Non-member: £9.99	Non-member: £55

AVAILABLE NOW!

the prosthetic
and orthotic
plastic
materials
specialists



Product range includes:

Premium Grade
Copolymer Polypropylene
Premium Grade
Homopolymer Polypropylene
Northplex®
Northvane®
SeaFlex®
Plastazote® foam
Evazote® foam
Northene
Northfoam®
SilverShield®
CarbonFX®



**NORTH SEA
PLASTICS**

www.northseaplastics.com

Sad news

By Nina Darke, Head of Orthotics, Somerset NHS Foundation Trust

Paul MacDonald passed away on 17 March 2026. It is with great sadness that I am writing this to honour not only my friend but a deeply valued colleague who touched the lives of so many.

Paul stood out not only for his clinical skill, but also for his compassion and warmth. He had an understanding that the profession of Orthotics is about restoring not just mobility but confidence and quality of life. Every patient Paul worked with was treated with dignity, understanding and a true desire to care and improve peoples' lives.

However, along with this I believe Paul brought something even more special: warmth, kindness and a sense of joy. Laughter followed wherever he went, and he had a true gift for lifting others. Work was always better and brighter knowing he was there.

Paul graduated from Salford University and began his career at Salford Royal soon after. He progressed to his role as Head of Orthotics in 2019. His colleagues will remember him as endlessly generous, supportive and positive, and I know he will be deeply missed by his team.

Paul will always be remembered with great affection, gratitude and a smile. We pass on our deepest condolences to his family and friends.



BAPO Bitesize
P&O EDUCATION ON DEMAND

The British Association of
Prosthetics and Orthotics

In collaboration with

United Kingdom

Clinical Biomechanics

Andrew Horwood, D.Pod.M, M.Pod.A, HonFinstPod.

A comprehensive overview of clinical biomechanics, including:

- Material properties in living animals
- Biomechanics of living tissues
- Mechanical and developmental concepts in biomechanics
- Gait biomechanics of walking
- Gait biomechanics of running
- Core concepts in pathomechanics

Segment	Complete Module
Member: £4.99	Member: £25
Non-member: £9.99	Non-member: £55

AVAILABLE NOW!

REFLECTIONS on becoming the first Chair of BAPO

By Willie Munro

I was fortunate to have known about orthotics as my father was an Orthotist and during my teenage years in the early 1970s. I was aware of the Garnet College meetings usually in September that resulted in OPTEC (Orthotic and Prosthetic Training Education Council). Under this format I studied from 1977 until 1981 at Salford College of Technology which subsequently became part of Salford University. At the same time The National Centre for Training and Education in Prosthetics and Orthotics came to fruition in 1972.

These centres including Paddington in London were the catalyst for change in how our professions were perceived within other Allied Health Professions. Up and until then the British Institute of Surgical Technologists conferred a Licentiate or Fellowship usually based on experience and advocacy by a member of the medical profession, and the apprenticeship to the licentiate ship was usually seven years. The three centres mentioned provided an academic as well as a practical training that was accountable and measured.

Graduates of these centres acquired a confidence in professional ability and were looking to be treated on a level playing field within the NHS. There was a change in polarity in thought between the Scottish and English systems that led to the formation of the Association of Prosthetists and Orthotists (APO) in Scotland and the British Institute of Surgical Technologists (BIST) remaining in England.

The APO approach to professional development and in particular the early conferences proved very attractive to many Prosthetists and Orthotists across the UK, and it became apparent through discussions that time was right for State Registration. To allow this to happen the Westminster Civil Service would not negotiate with two elements of professional bodies as they saw it and therefore it fell to the office bearers of both organisations to find a way to unite the profession.

I like many others found a passion and enthusiasm for our professions as our learning pathways were enhanced by peer support and that of other professions who saw the benefit of our growing experiences. The foremost way of demonstrating



this confidence was to ensure our professional body was robust and could fight above its weight and be regulated. This was a driving force for me, and I relished the challenge of leading a united profession forward and this was measured by the membership numbers and the early conference numbers that were supported not only by Prosthetists and Orthotists and the industry.

I am now retired however I have never lost the enthusiasm to promote our professions and it is important for future generations to be aware that our professions have come a long way in the last thirty years and it is imperative that BAPO maintains the momentum.

Users at the Heart of 3rd CDT Conference

By Lesley Davidson, Hannelore Williams-Reid, Laura Antezana-Merida, Julie Sarrazin and Sally Gates

The 3rd CDT (Centre for Doctoral Training) in P&O Conference took place at the Royal Armouries in Leeds over two very busy days, just before Christmas in November 2025. Attendees joined from across the UK and Europe, with the majority being early-career researchers. Interestingly, there were more attendees from outside the CDT than ever before, and it was great to see so much representation from a variety of regions and diverse backgrounds including prosthesis users, clinicians, designers, charity professionals and engineers.

The programme was designed to put users at the heart of the event, creating a platform to share knowledge, discuss innovations, and foster collaboration with early-career researchers. We prioritised user attendance and included participant experiences alongside scientific talks, in recognition of the limited opportunities to bring technical, charity, and user perspectives together. The two-day programme featured podium presentations, poster sessions, keynote speeches and interactive workshops delivered by early career researchers, prosthesis users, charities and manufacturers. The tone was friendly and relaxed, with talks, posters and keynotes generating lots of discussion during sessions and breaks.

KEYNOTES

We were honoured to welcome Lord Craig Mackinlay of Richborough, Journalist Alex Brooker and Dr Gabrielle Hanley-Mott as our keynote speakers. Lord Mackinlay travelled from London to Leeds for the day to share his lived experiences and ongoing work to improve prosthetic services across the UK. He highlighted the unique challenges facing bilateral or multiple



CDT conference committee

limb wearers, including the significant financial burdens facing people who lose limbs due to sepsis and the need for flexible funding models that consider each person's individual needs, context and experiences.

Alex Brooker, patron of BAPO, shared his experiences of prosthesis use, from childhood through to his career in TV and the key role his prosthetist had played in enabling him to achieve his goals. His talk was exactly what we needed at the end of a busy day of scientific talks – lots of humour and a brilliant video of him trapping a football under his foot at high speed with his prosthesis! A moment that had the whole audience cheering.

The final keynote from American Anthropologist Dr Hanley-Mott emphasised that even if user perspectives may be hard for us to understand as researchers, engineers or clinicians without lived experience of limb loss, we must move away from a paternalistic model of assumed expertise, and instead towards shared decision-making, where researchers actively listen to users and recognise their expertise as equal to technical or academic knowledge. One of her most impactful statements was about how we can respond to moments of misunderstanding, which might at first feel uncomfortable but offer opportunities for deeper engagement: “.. misunderstandings [...] are not errors to be corrected but windows into the deeper meanings of user experience. By attending to these fragments, researchers can more ethically and effectively centre users' perspectives and recognise the shared expertise between researcher and participant.”

HIGHLIGHTS OF THE EVENT: USER CONTRIBUTIONS

For many, the highlight of this year's event was the quality of user contributions – each person spoke candidly about service challenges, financial difficulties, and their admiration for clinicians. Jason Williams, for instance, expressed appreciation for his prosthetist of more than 10 years, emphasising how important her support had been throughout his journey. His prosthetist also shared that each day she asks herself whether she has done the best she can for her client, and if not, she strives to do better the next day - this keeps her motivated and resilient. Discussions afterwards reflected on the unprecedented challenges and pressures affecting clinicians in their daily work and how moments of appreciation like this are vital to share. In fact, across the two days, there was a huge amount of appreciation for the work P&O clinicians do. Chris and Denise Arthey spoke openly about their shared experience of limb loss and the aftermath. Although life hadn't gone to plan, they had learned to cope and advocate for themselves

and through their book, support others to adapt. They emphasised the importance of making positive choices every day. In one of the lighter moments of the conference, Finn, a young wheelchair user (one of our few orthotics and young adult lived-experience speakers), spoke about how wheelchairs often seem designed for “large old men”. She expressed frustration that designers overlook her needs as a young woman and that colour options rarely reflect personality, with some choices feeling outdated. Whilst her comment was put in a funny way, there was something important and serious. It was a powerful reminder that aligning with personalities and identity, is just as meaningful as function.

THE IMPACT OF LEARNING FROM USERS

The message across the two days was that without meaningful, high-quality user involvement, research and clinical practice risk reinforcing a model that undermines service user autonomy. This issue was highlighted by David Rose, Chair of Trustees for the Limbless Association, who highlighted the important peer support service delivered by the Limbless Association, emphasising that it is user-led, structured and evidence-based, to ensure it achieves meaningful outcomes for users. A panel discussion prompted dialogue about where design decisions originate and how regulatory requirements can mean the focus is disconnected from user experiences. An engineering attendee reflected on the importance of this: “*Interacting with the users reminded me why I chose this field in the first place. For those of us who do not work directly with users, it is easy to lose sight of who the research output is for and why it matters. It's not just about technical improvements.*”

At a manufacturing, education and design level, greater integration of user feedback into product development is needed, alongside clearer communication about design constraints and limitations.

NEW CONNECTIONS AND RELATIONSHIPS

One of the key objectives of the CDT has been impact. A major achievement of this conference was establishing a forum for early career researchers, charities and academics to connect through the transition of the CDT which ends in 2029, to ECPO (the Early Careers network in P&O), which was formally launched at the event.

We also strengthened links with the newly formed Amputee and Limb Difference Research Community (ALDRC) who delivered a fantastic workshop exploring our responsibilities as researchers. In this session, presenters Kiera Roche, Miranda Asher and Alix Chadwell explained that we have a duty to communicate research findings at all stages of a research project, in accessible and user-friendly formats such as plain-language summaries, infographics, and social media posts.

As requested by Kiera and Miranda, we should all be sharing our research in digestible formats - and ALDRC are available to facilitate this process. For further information on how to communicate your research or recruit research participants, visit: <https://www.limbpower.com/news/announcing-launch-uk-limb-difference-research-community>.



Keynote speaker Lord Craig Mackinlay

AWARDS FOR P&O CLINICIANS

We would also like to recognise some of the fantastic work submitted at the conference, and particularly those awarded to P&O clinicians, including:

- **Renad Albastri** (University of Strathclyde), who won the ISPO prize for best paper on ‘Limitations in the Evidence on the Use of AFOs Following Stroke: A Systematic Review’.
- **Lydia Odai** (Salford University) who won the best undergraduate student poster for her project looking at ‘Virtual to Reality: Reflections on an International Collaborative Learning Experience in Uganda’ and
- **Selina Ross** (University of Strathclyde), who won best student paper for her review on ‘Optimising Medially Wedged Foot Orthoses: Minimum Requirements to Influence Foot and Ankle Muscle Activity – A Literature Review’ – congratulations!

A HUGE THANK YOU

The conference was led by a team of five early career doctoral students - our first time organising an event of this scale. Most of us are based at different universities and busy with our PhDs, so planning was entirely online. Women remain underrepresented in the field and so it felt empowering to be part of the leadership team delivering this event.

We would like to extend a huge thank you to everyone who supported us to make this event possible, particularly BAPO, ISPO, the Limbless Association, Limb Power, BACPAR, STAND, and our manufacturer sponsors Ottobock, Blatchford, Steeper, all the speakers and attendees.

WHAT'S NEXT?

The CDT conference format is now changing, and the next event will be delivered by ECPO. If you would like to get involved, you can join using the link here: <https://linktr.ee/ECPO>.

We look forward to the next conference and invite BAPO members to be part of this exciting next chapter!

Contact: l.davidson3@edu.salford.ac.uk or hannelore.williams-reid@strath.ac.uk.

FORTH

Conference 2026

A day of collaboration, learning and shared expertise

The FORTH Conference 2026 took place on Saturday 7th February 2026 at the Hilton Newcastle Gateshead, bringing together clinicians, surgeons, allied health professionals and industry partners for a focused and highly engaging day centred on Charcot-Marie-Tooth disease (CMT) and complex foot and ankle management.

Hosted by Peacocks Medical, the conference created a welcoming and collaborative atmosphere from the outset. The day began with introductions from **Paul Charlton**, Senior Orthotist, and **Ashley Lewis**, Associate Director for Clinical Services, setting the tone for a programme that was both clinically rigorous and practically relevant.

BRIDGING RESEARCH AND REAL-WORLD PRACTICE

The morning session opened with **Dr Helen Devine**, Clinical Fellow and Honorary Consultant Neurologist, who presented the latest understanding of CMT. Her session clearly demonstrated how advances in neuromuscular research are shaping patient pathways and clinical decision-making.

This was followed by **Dr Gita Ramdharry**, Consultant Allied Health Professional in Neuromuscular Disease, who explored physiotherapy interventions in CMT, grounding her talk in evidence while highlighting realistic clinical application.

Dionne Moat then translated these principles into practical strategies, ensuring delegates left with insights they could apply immediately within their own services.

After coffee, the programme moved seamlessly into podiatric and orthotic management. **Emma Jenks**, Advanced Podiatrist, discussed podiatric interventions for complex presentations, while **Andrew Frame**, Area Lead Orthotist, provided detailed insight into orthotic management in neuromuscular conditions. The sessions reflected the strength of multidisciplinary working, with each profession contributing to a cohesive patient-centred approach.

The afternoon featured surgical perspectives from **Mr Sultan Qasim**, Consultant Orthopaedic Foot and Ankle Surgeon. His contributions offered valuable clarity on when surgical intervention is appropriate and how it integrates with conservative management. The day concluded with an interactive discussion and Q&A session, closing at 3.15pm.

EXHIBITION AND PROFESSIONAL ENGAGEMENT

Alongside the scientific programme, a vibrant exhibition space encouraged meaningful engagement between clinicians and industry. Exhibitors included **Peacocks Medical**, **Trulife**, **Buchanan Orthotics**, **Allard**, **Enovis**, **Algeos**, **Össur**,



Brace Orthopaedic, **TalarMade**, **Medi**, and **Reed Bespoke Footwear**. Delegates had the opportunity to explore new products, discuss clinical challenges, and consider emerging technologies that may enhance service delivery.

Importantly, **BAPO** was also present as an exhibitor. The stand was hosted by **Selina Ross** from the BAPO Research Committee and **Ankit Singh**, Vice Chair of the Editorial Committee. Their presence provided an excellent opportunity for members and non-members alike to engage in conversation about research initiatives, editorial contributions, professional development, and wider BAPO activities. The discussions reflected genuine interest in strengthening professional networks and advancing the profession collectively.

A DAY OF SHARED PURPOSE

What stood out throughout the day was the spirit of collaboration. Whether in formal presentations, exhibition discussions, or informal networking conversations, there was a shared commitment to improving outcomes for patients with neuromuscular and complex foot conditions.

FORTH Conference 2026 successfully combined evidence-based updates with practical clinical insights and industry innovation. It reinforced the importance of multidisciplinary working and highlighted how strong professional engagement including representation from organisations such as BAPO continues to shape the future of prosthetics and orthotics practice.

The event not only delivered valuable CPD but also strengthened connections across the P&O community, leaving delegates with renewed enthusiasm and practical ideas to take back to their services.



Available now!

NEW COURSES:
"MANAGING KNEE OA
WITH THUASNE BRACES"



Enrol Now!





Register for our Professional Resources Portal to gain access to a range of clinical support materials and CPD



Evidence Based Design



Exclusively For Medical Professionals



Register Here



By TalarMade

A day in the life of video competition winners



TERI JONES

I had fun taking part in this competition, as creating videos is something I genuinely enjoy. I can't remember the last time I won a competition, so I'm very grateful for the gift voucher. It was also a great opportunity to showcase what I do as part of my job.

Bex Wilkinson, BAPO Technician and Support Worker Committee Chair shared: "The winning video submission was informative and thoughtfully put together, offering a great insight into a typical day as a P&O technician. It clearly captured the collaborative nature of the role and the genuine enjoyment that comes from working as part of a skilled, supportive team."



ALICE DUDLEY – SENIOR ORTHOTIST

I am feeling very grateful to have won the day in the life of a prosthetist/orthotist video competition. Opportunities like this remind me how important it is to raise awareness of our profession, what we do, why it matters, and the impact it has on lives every single day. The more people understand the value of prosthetics and orthotics, the stronger our future workforce and patient care will be. Thank you to everyone that took part and I look forward to similar posts in the future.

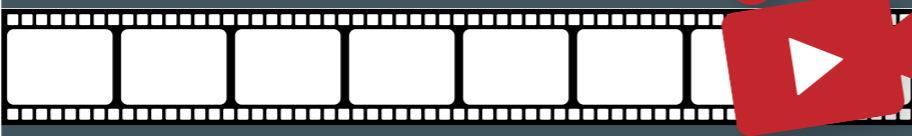
Judges chose Alice as the video explained more about the duty of an Orthotist, threw more light into their day's activities and moving enough to encourage an ordinary person to know more about the career path and get into it.



TEGAN JAFFREY

By creating a 'day in my life' video I wanted to share an authentic perspective on what a typical day can look like for a P&O student. It wasn't too long ago that I was seeking insights into the role of a Prosthetist/Orthotist when deciding which degree would align best with my interests, I thought this video may help to inform someone in a similar position. I am grateful to the experienced CPOs and the National Centre who have been invaluable to my professional learning and development, and to BAPO for awarding me winner

of Student/Apprentice 'day in the life' video competition.



Launching a shared movement One voice for prosthetics and orthotics

We are excited to announce that on February 2nd, alongside our industry and charity partners, we launched something significantly bigger than a simple awareness campaign. We launched a shared movement. Running until August 31st, this initiative brings together patients, professionals, charities, and industry partners as "One Voice" to deliver a unified message: **these services matter, and they deserve protection.**

The core of this movement is a fundamental shift in how we talk about our work. For too long, there has been a misconception that our profession provides simple products. But as we know, prosthetic and orthotic care is not a product you simply hand over. It is a skilled service built on complex assessment, design, fabrication, fitting, and long-term support.

A CLINICAL LENS, NOT A PROCUREMENT LENS

Crucially, this campaign argues that prosthetic and orthotic services must be viewed via a clinical lens, not a procurement lens. It is a skilled healthcare, delivered by

people, to change lives every day. When we speak to the public and policymakers between now and August, we will be highlighting that prosthetists and orthotists apply clinical and engineering expertise, while technicians bring essential precision and craftsmanship to deliver life-changing care to millions of people across the UK.

INVESTMENT AND PATHWAYS

The theme of our campaign is simple yet powerful: "Mobility depends on people". To uphold this, services must be properly funded and embedded within all relevant clinical pathways. We are asking our members and the wider community to support this important campaign.

There is a clear need for investment in prosthetic and orthotic care. This requires explicit funding for the workforce to grow, and critically, the training and education of our workforce must be protected. When these services are undervalued, patients lose function, comfort, and independence. But when they are properly supported, people stand taller, move better, and live fuller lives.

HOW YOU CAN GET INVOLVED

From the launch on February 2nd until the campaign concludes on August 31st, you will hear directly from the people behind the care and from those whose lives are shaped by it. But we need your active participation to amplify this message. Here is how you can help:

- **Share a Video:** Record and share a 30-second video with BAPO explaining why you personally value prosthetic and orthotic services.
- **Display the Campaign:** Print and display the campaign flyer in your service areas to increase visibility.
- **Engage Patients:** Make your patients aware of the campaign and provide them with the opportunity to share their own stories about why they value our services.
- **Contact Local Media:** Share details of the campaign with your local newspaper to spread awareness in your community.
- **Lobby Your MP:** Ensure your Member of Parliament (MP) is aware of the campaign and the specific concerns regarding the fragility of our profession. Ask for their support to advocate for the profession that millions of people rely on.

This is a call to action. By speaking with one voice, we can ensure that the skill and dedication of our workforce are recognised and that the future of patient care is secured. "That is why we value prosthetic and orthotic services."



Please join the conversation online and help us spread the word.

#WhyWeValuePO #OneVoicePO #ValuePO #ProstheticsAndOrthoticsPatientsAndProfessionals

Beagle
ORTHOPAEDIC

UK Sustainable Manufacturing

A Greener Future
for Orthopaedics



Lancashire Provenance
We manufacture in the heart of Lancashire, supporting a resilient UK supply chain and reducing product miles.



Eco-Conscious Production

- ✓ **Zero-Waste Precision**
CNC and laser-cutting technology eliminates material off-cuts.
- ✓ **Low-Energy Infrastructure**
Advanced machinery reduces operational carbon footprint.
- ✓ **Plastic-Free Shipping**
100% paper-based, FSC-certified outbound packaging.



Regulatory Excellence

- ✓ **ISO 13485** Certified
- ✓ **EU MDR** Compliant
- ✓ High-performance solutions for a **Greener NHS**.



Next-Gen Materials

We are leading the transition to low-impact materials. Our **TheraCore** innovation ensures sustainability without compromising clinical efficacy.

beagleorthopaedic.com
01254 268 788



STEPS Rehabilitation founders, Jules Shiel-Boulger and Toria Chan win

Everywoman of the Year 2025

STEPS Rehabilitation founders Jules Shiel-Boulger and Toria Chan have been announced as winners of the prestigious Tide Everywoman Entrepreneur Awards, receiving the title Everywoman of the Year 2025. The accolade celebrates outstanding female entrepreneurship, recognising women who have built successful, purpose-led organisations delivering meaningful social impact.

Established in Sheffield in 2017 by sisters Jules and Toria, STEPS Rehabilitation was founded with the ambition to transform access to specialist rehabilitation for people recovering from life changing injuries. Independently and family-owned, STEPS was built on values rather than commercial profit, ensuring decisions are guided by their client's needs.

In just ten years, STEPS has grown from an innovative concept into an internationally recognised centre of excellence, supporting more than 400 clients and ranking within the top 1% of employers in Sheffield. The purpose-built facility uniquely integrates medical expertise, therapy and advanced technology with specialist prosthetic rehabilitation, making it one of only two private providers in the UK able to deliver a complete pathway for individuals following amputation. Its state-of-the-art facility provides access to cutting-edge robotic, VR and digital neurotherapies through partnerships with international innovators including MindMaze, STROLL and Fourier Intelligence.

The judges praised STEPS for its unwavering commitment to clinical outcomes, financial resilience and investment in people, demonstrated by a 98% staff recommendation rate and a workforce now exceeding 180 employees, 77% of whom are women. The organisation has reinvested profits to expand services, refinance major loans and establish the STEPS Rehabilitation Foundation to further support individuals beyond clinical care.

"Judges described them as courageous innovators, with compassion at their core, utterly redefining what world class rehabilitation looks like."

Commenting on the win, Co-Founders Jules and Toria said: *"We have had so many people support us on our journey. Right from the start we had a really strong vision, and without people believing in us and our passion we wouldn't be here today. The main thing that got us through the early days was the people at STEPS having rehabilitation; seeing them on a daily basis kept us going – from eating a meal in the café with their family to sitting independently or walking for the first time following a life-changing injury. We continue to be inspired by what clients and families achieve every day, and just how incredible they are. We also want to say a special thank you to our amazing team, without whom we wouldn't be able to do what we're doing."*

David Holmes visits STEPS Rehabilitation

David Holmes, the actor and primary stunt double for Daniel Radcliffe who worked on all eight Harry Potter films, visited STEPS Rehabilitation on Friday 12th December 2025 to tour the facility and speak with staff and clients about his experience of sustaining a life-changing spinal cord injury.

David's career was tragically cut short in 2009 when, whilst rehearsing a flying scene for Deathly Hallows: Part 1, he broke his neck resulting in paralysis from his chest down. His life, resilience, and close friendship with Daniel Radcliffe is the subject of his memoir and a 2023 HBO documentary David Holmes: The Boy who lived.

He attended with his partner, Rosie, who also lives with paralysis and knows of STEPS Rehabilitation through her previous treatment with Darren Bracken, our Clinical Nurse Educator.

David was a talented gymnast before landing the role in August 2000 at the age of 17. He served as Radcliffe's



David Holmes arriving at STEPS

stunt double from day 1 of the Harry Potter franchise until his accident. Since then, he has spoken publicly about his experiences living with disability and as a charity ambassador for the Royal National Orthopaedic Hospital, advocating for improved support for people living with spinal cord injuries.

During his visit, Holmes addressed staff and clients at STEPS about his journey and spinal injury care in the UK.

Speaking about what he is proud of, Holmes said: *"I broke my neck, but I stayed the same person."*

He stressed the importance of connecting with the wider disabled community to help individuals come to terms with their injuries: *"What you must remember is that able bodied people will also be part of our club whether you like it or not. Age and time are cruel things, and you will end up navigating your body deteriorating. By leaning into the community and seeing human beings with disabilities as equal and not less than, we're sharing life together and picking each other up. And that's what a lot of people here [at STEPS] are doing."*

He explained how he was lucky to receive the very best expert care following his accident but acknowledged that this level of rehabilitation and support wasn't readily available to everyone via NHS provision alone. While he had access to an insurance settlement and support, others do not have the same opportunities.

"I'm only here because I'm able to pay for my care and have an amazing support network with my care team. And that's a big hole in society right now. There's a hundred thousand caregiver shortage right now. Maybe, just maybe, if we can get more STEPS out in the world and get busy live-in centres and new NHS spinal injury centres then things will improve, but none of that works without the recruitment of the people to sustain it."

Holmes left us with an inspirational message about the value of caregiving work: *"When you are out talking to the younger generation, just remind them that the job satisfaction is not the pay cheque every month. It's how do you go home every night and say what did I do today to make the world better. I hope you all leave this place today and say I made that person's life better."*

"I'm really encouraged to see this place, to see dedicated staff members, and how you guys are able to help people rebuild their lives again."

David's visit was an inspiring and insightful one for clients and staff at STEPS and we hope both he and Rosie will return in the future. A big thank you to them both for taking the time to visit, along with Darren Bracken for arranging the visit.



Prosthetics and orthotics in focus Your core experience at OTWorld 2026

Prosthesis and orthotics are at the heart of OTWorld – and they will once again take center stage in 2026 when international experts meet in Leipzig from May 19 to 22. Under the motto 'You make the difference,' OTWorld 2026 will show how modern orthopaedic treatment and care improves mobility, independence, and quality of life worldwide. For prosthetists and orthotists, the unique combination of a World Congress and International Trade Show offers a comprehensive overview of innovations, research, and practical solutions that can be directly applied in professional practice.

WORLD CONGRESS: FROM PRACTICE FOR PRACTICE

The interdisciplinary congress programme was developed by experts from the fields of prosthetics and orthotics, medicine, physical therapy, and science. It reflects the entire spectrum of modern orthopaedic treatment and care – practical, international, and future-oriented.

The main topics include:

- Current developments in prosthetics and orthotics
- Rehabilitation and integrative care
- Digital transformation in prosthetics and orthotics
- Research in the field of assistive technologies and global strategies in orthopaedic treatment and care

In practical workshops and case-based sessions, scientific findings are translated into everyday practice – from digital treatment processes and additive manufacturing to AI-supported analyses and interdisciplinary care models.

For the first time, the congress will offer AI-based live

translation into German and English, which will be accessible via a QR code on participants' smartphones, further strengthening the international exchange of knowledge. Participants are asked to bring their own smartphones and headphones to use this service.

The complete congress programme is available online.

INTERNATIONAL TRADE SHOW: EXPERIENCE INNOVATION UP CLOSE

With 574 exhibitors and more than 20,000 trade visitors from 96 countries at the last edition, OTWorld remains the world's leading meeting place for modern orthopaedic treatment and care. In 2026, the event will celebrate its 50th anniversary – half a century of innovation and global exchange.

Prosthetists and orthotists can expect:

- Hands-on insights and interdisciplinary exchange with professionals from around the globe
- Advanced component technologies and materials
- Microprocessor-controlled systems and intelligent solutions
- Digital workflows and AI-supported applications
- Integrated concepts that combine prosthetics, orthotics, and orthopaedic footwear technology

Beyond product innovations, OTWorld promotes direct dialogue with manufacturers, researchers, and colleagues from all over the world – creating valuable professional networks and new impetus for modern orthopaedic treatment and care.

SPECIAL AREAS AND HIGHLIGHTS

OTWorld.start-ups – Innovation in motion: In Hall 3, 24 international start-ups will present forward-looking solutions in the fields of digital manufacture, assistance systems, software, and new materials. Short pitches in the 'Digital Manufacture' innovation forum offer efficient insights into new technologies that are shaping the future of prosthetics and orthotics.

OTWorld.shoe-technology – Focus on the diabetic foot: In Hall 1, OTWorld.shoe-technology brings together expertise in orthopaedic footwear technology.

At the 'Foot & Shoe' meeting point, the 2026 focus topic 'diabetic foot' will be highlighted through guided tours that illustrate practical care pathways and interdisciplinary collaboration between medicine and prosthetics and orthotics – providing valuable insights for daily practice in clinics and workshops.

OTWorld.education + research – Shaping the future: The OTWorld.education + research exhibition area shows how education, research, and innovation work together to shape future care solutions.

The special exhibition 'Robotics + AI' shows how intelligent systems and AI-supported technologies influence workflows and patient care in prosthetics and orthotics.

At OTWorld.campus, international institutions present training and career paths, while student projects such as a myoelectric railway model and a self-driving wheelchair illustrate how creativity and technical know-how are translated into practical innovations.

ACCESS TO OTWORLD 2026

Ticket sales for OTWorld 2026 are now open. OTWorld COMPLETE tickets include access to both the World Congress and the International Trade Show. An early bird discount is available until March 31, 2026, offering savings of up to €80.

Reduced day tickets are available for pupils, students, and trainees:

- Reduced OTWorld COMPLETE ticket: €89
- Reduced OTWorld TRADE SHOW ticket: €21 (valid proof required)

For practice teams and visitor groups (at least four people), a Trade Show Group ticket is available for €29.

All Trade Show tickets include access to the entire workshop programme in the exhibition halls - including exhibitor workshops and congress workshops.

Detailed information on the congress programme and ticket options can be found at www.ot-world.com.

Event dates: 19–22 May 2026

Location: Leipzig, Germany

Congress programme: www.ot-world.com/en/programme

Ticketshop: <https://www.ot-world.com/tickets>

Contact: info@ot-world.com

JOIN THE WORLD'S LEADING PLATFORM FOR MEDICAL AIDS!

All workshops included in the Trade Show Ticket!



OTWORLD

International Trade Show and World Congress

19–22 May 2026

Leipzig, Germany

www.ot-world.com



Browse through the programme

The congress is bilingual: English and German.



Louise Fisher speaking at the Royal College of Podiatry Conference.

Innovative tech solution launched by Algeos

An innovative new solution aimed at transforming the business of orthotics for lower-limb care has been launched by leading lower limb healthcare company Algeos.

Advanced digital technology and material science is being used to create Algeos 3D – computer generated, personalised orthoses using high-performance, renewable materials and a patent-pending XFix system.

Digital models are created using a scan of the feet, ensuring a perfect match for an individual's anatomy and clinical needs and removing guesswork and variation. The orthoses are then ordered with a click of a button on an open-access platform which accepts scans from any device or method, with no hardware-linked or hidden costs.

And as they are produced in the UK they are ready within just seven working days – far faster than the industry average

of two to six weeks.

Max Sheridan, Managing Director of Algeos said: “As a leader in lower-limb care materials and innovation, we wanted to build on our legacy in a way that not only embraced the digital transformation of the sector, but empowered clinicians and improved patient outcomes.

“After extensive research and development, we are proud to launch Algeos 3D as a solution for private practice clinicians who are looking for a simple yet effective way to introduce digital orthotic therapy into their practice.”

The renewable material is PA11, a plant-based biomaterial that is durable, lightweight and environmentally responsible.

The X-Fix system is a first to the UK market and allows users to change top covers at home without glue or mess. They receive one pair of insoles and can order multiple covers so that the orthoses adapt between daily wear, sport, and

“As a leader in lower-limb care materials and innovation, we wanted to build on our legacy in a way that not only embraced the digital transformation of the sector, but empowered clinicians and improved patient outcomes. After extensive research and development, we are proud to launch Algeos 3D as a solution for private practice clinicians who are looking for a simple yet effective way to introduce digital orthotic therapy into their practice.”

different types of shoes, saving time and money.

The new product is targeted at private clinical practices and hospitals, for use by patients with sports and other injuries.

Louise Fisher, MSK Advanced Podiatrist and Clinical Education Consultant for Algeos, worked with Orthotics and Prosthetics Business Manager colleague Shaun Large to develop the vision for the product. They collaborated with product developers and advanced clinicians to design the system.

Louise said: “We wanted to break down the barriers that stop clinicians accessing custom-made foot orthoses, which are effective in the treatment and prevention of many foot problems, and we want more people to benefit so they lead healthier, active lives.”

After six months of testing the product with clinicians who had different levels of experience with custom-made orthoses, the final solution, Algeos 3D, was launched at the Royal College of Podiatry Conference in Glasgow.

Louise continued: “It was really exciting to see the final product and share it at the conference, after the months of collaborating, designing and developing.

“We think this is a great solution which answers lots of frustrations expressed by clinicians who have been using clunky systems and lots of paperwork – it is simple, seamless and quick to receive the custom-made orthoses – and those who used it in our pilot project loved it.”

ABOUT ALGEOS

Algeos began as a leather merchants to the shoe repair industry. It was set up by bootmaker John Algeo on Upper Parliament Street, Liverpool in 1881. Sons William and Arthur Algeo took over the business until the 1950s when it was sold to their sales manager Henry Swanson. He managed the business with his son Henry Junior and wife Betty until 1990 when it was sold to Algeos' current chairman, Alan Sheridan.

With a move into larger premises in Speke and investment in new machinery, Algeos evolved into a leading healthcare and medical distribution company. It is now one of the UK's most diverse manufacturers and distributors of medical materials, technology and consumables to the podiatry, physiotherapy, footwear and orthopaedic markets.

Visit Algeos at www.algeos.com/.



Algeos Managing Director Max Sheridan

INTERPOD

The Orthotic Library



A complete guide to the Interpod Orthotic Library

Including full Classic & Force ranges with product features, fitting options and sizing.



Request your **FREE** copy

Simply scan the code below and complete the online form or visit www.algeos.com.

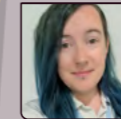


ALGEOS
Keeping People Moving

BAPO P&O Awards 2025



Our winners



LEARNER OF THE YEAR
CHRISSY SLEVIN

sponsored by Peacocks



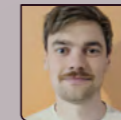
TECHNICIAN OF THE YEAR
CHARLOTTE GOLDSRING

sponsored by Algeos



PRACTICE EDUCATOR OF THE YEAR
ANDY STRUTHERS

sponsored by Steeper



RISING STAR OF THE YEAR
JAMIE MORTON

sponsored by Ossur



OUTSTANDING CUSTOMER SERVICE OF THE YEAR
LEANNE WILSON



OUTSTANDING LEADER OF THE YEAR

sponsored by Blatchford

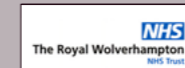
NICKY MUNRO



RESEARCHER OF THE YEAR
DR LAURA BARR



SUPPORT WORKER OF THE YEAR
ISABELLA PROCTOR



BEST P&O TEAM
THE ROYAL WOLVERHAMPTON TRUST

sponsor Thuasne



ORTHOTIST OF THE YEAR
NICCI ROGERS

sponsored by OETT



PROSTHETIST OF THE YEAR
ANDREW DALE

sponsored by NSP



BAPO HERO AWARD
DR NICKY EDDISON



RESEARCHER OF THE YEAR 2025
DR LAURA BARR

I was absolutely delighted to receive the Researcher of the Year award in November, especially knowing that I was shortlisted alongside two other outstanding researchers. It was a real honour to be selected from such a strong field and to have my work recognised by the wider P&O community.

I have always had a strong interest in research and evidence-based practice, and over the past few years I've really enjoyed integrating research into my clinical role. This has involved everything from evaluating and applying

evidence, to the day-to-day running of clinical studies. Embedding research into routine clinical practice has been both challenging and rewarding, and has reinforced the important role research plays in improving patient care.

This award means a great deal not just to me, but to my team within NHS Greater Glasgow and Clyde. Research is never a solo effort, and I've been fortunate to work with colleagues who have supported and championed this work throughout. Their involvement at every stage has been invaluable, and this recognition reflects a collective effort.

I would encourage anyone within the P&O community to consider getting more involved in research, it is an incredibly rewarding part of our roles and has real potential to drive meaningful change for patients.



**LEADER OF THE YEAR
NICKY MUNRO**

My name is Nicky Munro and I am Clinical Lead and Service Manager as well as Professional Lead for Orthotics in NHS Greater Glasgow and Clyde. (NHSGGC) I also hold other leadership positions which are not part of my 'day job' such as Quality Improvement Lead for AHPs in NHSGGC and I am current Chair of the Scottish Clinical Orthotic Leads group. (SCOL)

I was nominated for, and won the 'Outstanding Leader of the Year' BAPO award in 2025 which is something that meant a huge amount to me. Early in my career I never saw myself as a Leader and like many of my colleagues would be heard to say 'I never want to be a manager' or to give up my direct patient contact as that was why, after all I chose to become an Orthotist and what really gave me job satisfaction was the interactions with my patients and seeing the improvements I could help to make in peoples

lives.

However, having been in a formal management role now for over 9 years, with the first few years of that being a very steep learning curve for me, I've grown to realise that leadership done well can be just as challenging, rewarding and interesting as the patients I used to see and the multidisciplinary teams I worked within and I have a much wider area of influence and many different areas I can input into which makes the job really interesting and never boring.

Most importantly leadership is about the people you lead and I believe you get what you give. I have a fantastic team in NHSGGC but I work relentlessly for them and with them to raise our profile and gain as much resource and recognition for orthotics as I can.

Being nominated for and winning the Outstanding Leader Award was one of the high points of 2025 for me and is a lovely recognition that clearly all my hard work has paid off and I am getting something right. My challenge now is to continue to maintain and always keep improving.



**ORTHOTIST OF THE YEAR
NICCI ROGERS**

It truly means a great deal to me to be recognised by BAPO for my work as an orthotist. This recognition reflects not only my professional journey, but also the dedication, compassion, and commitment I strive to bring to every patient I work with. Being acknowledged by such a respected professional body reinforces the value of the work we do as orthotists and motivates me to continue developing my skills, contributing to the profession, and advocating for the positive impact orthotic care can have

on people's quality of life. I am genuinely grateful for this recognition and proud to be part of a profession that makes a meaningful difference every day.

This recognition also reinforces my commitment to advocating for greater awareness and understanding of Ehlers-Danlos syndrome (EDS). As an orthotist, supporting individuals with EDS is an important part of my work, and I am passionate about improving access to appropriate orthotic care, education, and support for those living with this condition. I am proud to use this recognition as a platform to continue advocating for better outcomes for the EDS community.

EDI

EQUALITY DIVERSITY INCLUSION



BAPO's commitment to EDI

BAPO is committed to eliminating discrimination and promoting equality, diversity, and inclusion. BAPO prioritises and promotes EDI by championing high quality clinical standards, clinical services and workforce environments that are appropriate and effective for everyone. This applies to everything we do as an organisation – this includes our role as a membership body, influencer of the healthcare system, and employer.



Committees that represent our membership

BAPO will actively encourage and welcome diversity in our committees and make sure that their makeup reflects and serves the diversity of our wider membership. BAPO will make sure that the services we provide for our members are inclusive and meet the needs of our diverse membership.



For more information scan the QR code

www.bapo.com enquiries@bapo.com 0141 561 7217



Promotion of EDI

BAPO will promote inclusivity by enabling, encouraging, and celebrating the contribution of diverse perspectives which represent the diverse demographic of society, to our profession and our work. BAPO will be inclusive in our approach to communication and engagement, celebrating the achievements and contribution of members from diverse backgrounds.



Join us!

BAPO is actively seeking member input to help us implement our EDI strategy. If you would like to be involved please contact us. All BAPO members are eligible to join our committees!



The Equality Act 2010

Understanding your responsibilities

By Miriam Williams, Senior Orthotist and BAPO's Disability and Accessibility Lead

A guide to compliance and best practice

The Equality Act 2010 is a key piece of legislation in the United Kingdom that aims to protect individuals from discrimination, harassment, and victimisation in various settings, including the workplace, education, and public services. Understanding your responsibilities under this Act is crucial for ensuring fair treatment and promoting equality.

YOUR RESPONSIBILITIES UNDER THE EQUALITY ACT 2010

- Preventing Discrimination:** It is your duty to ensure that individuals are not discriminated against on the basis of protected characteristics such as age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- Promoting Equality:** You must take active steps to promote equality and foster good relations between people who share a protected characteristic and those who do not.
- Reasonable Adjustments:** For disabled individuals, you are required to make reasonable adjustments to remove barriers and ensure equal access to services, employment, and education.
- Preventing Harassment and Victimisation:** You should ensure that no one is subjected to harassment or victimisation because of a protected characteristic, and robust procedures should be in place to address any incidents.
- Training and Awareness:** It is important to provide training and raise awareness among staff and stakeholders about equality and diversity issues to ensure compliance with the law.
- Monitoring and Reviewing Practices:** Regularly assess policies and practices to ensure they are inclusive and do not disadvantage any group.

WHAT DOES THIS MEAN FOR ME AS A CLINICIAN, MANAGER, OR TECHNICIAN?

At my Trust in the last few weeks, I have raised a couple

of issues in terms of accessibility for my patients, it is your responsibility to raise these issues in order to comply with the Law. These are some examples of accessibility issues which you may come across:

- 1 Bins in disabled toilets – are they actually accessible? Imagine being in a wheelchair, not being able to use your legs – can you open the bin? If yes it complies, if not it doesn't.
- 2 A minibus going between two sites, has three steps to get up into the minibus, and no ramp, no accessible way of getting in.
- 3 Disabled toilets – how often have you been to a toilet and they have had things stored in them – raise these issues for a wheelchair user
- 4 How would a disabled user get into your building? Are doors wide enough for an adult powered chair to get through them? Are their items of furniture ensuring there isn't a wide enough turning circle?

HOW DO I RAISE AN ISSUE?

Raise any reasonable adjustments through your manager in your Trust or organisation. If you don't get a response in line with your responsibilities in relation to the Equality Act, you should take it higher within your Trust or organisation. You can take it to higher management or to the Freedom to Speak up Team (or equivalent), or to the Equality, Disability and Inclusion team.

CONCLUSION

Complying with the Equality Act 2010 is not only a legal requirement but also a moral imperative. By understanding and fulfilling your responsibilities, you contribute to a fairer, more inclusive society and workplace. For more detailed guidance, consult official government resources or seek legal advice tailored to your specific context.

Our **NEW** product catalogue has officially landed!

This comprehensive catalogue showcases our wide range of orthotic solutions from footwear to shoulder braces.



Scan here to view it online now!



Or head to www.buchananorthotics.co.uk

Prefer print?

Get in touch to order your copy today:
sales@buchananorthotics.co.uk
 0141 440 1999

 **Buchanan Orthotics**

Research Committee UPDATE

The Research Committee has been delighted to continue sharing a wide range of research studies and opportunities through our weekly Research Bulletin, featured in the BAPO Newsletter. The Bulletin highlights current projects, funding calls, publications and ways to get involved in research across prosthetics and orthotics. If you have not yet subscribed to the Newsletter, we encourage you to do so - it is available to both members and non-members and is an excellent way to stay connected with developments in our field.

We are also pleased to announce our first journal partnership with the Canadian Prosthetics & Orthotics Journal. Through this collaboration, BAPO members now have access to weekly research summaries, available in the members' area of the BAPO website. This partnership strengthens our commitment to improving access to high-quality, clinically relevant research.

The Committee continues to grow, and we are delighted to welcome Selina Ross and Renad Albasri as new members, alongside welcoming back Eileen Morrow. They bring a wealth of expertise, fresh perspectives and enthusiasm, and we look forward to working together as we further develop and strengthen the Committee's activities. If you are interested in expanding your own research experience or contributing to the profession in a new way, we would be very pleased to hear from you. Please contact enquiries@bapo.com to find out more about joining the Committee.

In this issue of BAPOConnect, we are excited to introduce two new features that will appear in all three issues throughout 2026:

TRANSLATING RESEARCH INTO EVERYDAY CLINICAL PRACTICE

This feature explores how evidence can be meaningfully applied in day-to-day clinical work. Each instalment will present a short case study from a prosthetist or orthotist, demonstrating how research informs real-world decision-making and improves patient care. If you would like to share your experience of using evidence-based practice in a clinical setting, we would love to hear from you. You can contribute your story via this short online form: <https://forms.office.com/e/r3Ck8ThtdC>.

INTERVIEW WITH THE RESEARCHER

This new series takes readers behind the scenes of research in prosthetics and orthotics. By highlighting research role models within our profession, we aim to demystify research careers and showcase the diverse pathways available. Through an interview-style format, we explore how individuals became involved in research, what it means for their career, and the advice they would offer to others considering this route. We hope these conversations will inform and inspire.

We look forward to continuing to support, promote and celebrate research within prosthetics and orthotics, and to engaging with members across the profession in the year ahead.

Translating evidence into everyday clinical practice

By Selina Ross - Graduate Orthotist, BAPO Research Committee member

A patient presented recently with mild unilateral plantar fascia pain. In standing and walking, they demonstrated classic characteristics of a pronated foot: Medial Longitudinal Arch elongation, rearfoot eversion, and forefoot abduction. Both weight-bearing and non-weight-bearing range of motion were unrestricted, including the Silfverskiold test. What stood out, however, was strength. On the symptomatic side, there was weakness of the internal supinators, along with reduced hallux and lesser-toe flexor strength. They also presented with a callus – the size of a 10p – at the plantar aspect of the talonavicular joint (currently under Podiatry for regular debridement).

Two main mechanisms for the symptomatic plantar fascia were considered:

- 1 Increased external pronation moments resulting from a medially deviated subtalar joint axis, increasing the rate of pronation and arch-flattening moments – increasing tensile demand on passive and active structures.
- 2 Reduced active support within the Longitudinal Arch Load Sharing System¹ due to weakness found in musculature, shifting greater demand onto passive tissues. It could have been either – or both.

Evidence has consistently shown that foot posture does not necessarily correlate with pathology and is a poor predictor of pain.^{2,3} We also know that foot posture can influence net pronatory/supinatory moments, and therefore how tissue is loaded.^{1,4-6} The question was not whether this patient's anatomy could increase load, but whether the patient's tissues could tolerate it.

With regards to the patient's plantar fascia pain, providing an orthosis to reduce pronatory moments would have been perfectly reasonable. However, I decided to first try to address tissue capacity. Musculoskeletal literature and treatment pathways consistently support progressive loading and strengthening to improve tissue tolerance and reduce pain.^{7,8}

I recently read a Delphi study, led by Australian researchers, Osborne et al., which influenced my decision-making for this patient. The study brought together international experts to develop a progressive strengthening programme for patients experiencing plantar heel pain. The study focused on more than mechanical load reduction or stretching – with emphasis on building strength in foot and ankle muscles involved in the Longitudinal Arch Load Sharing System.⁹

The initial intervention, therefore, focused on intrinsic and extrinsic muscle-strengthening recommendations (short-foot exercises, heel raises,⁷ Tibialis Posterior and invertor

strengthening) and footwear advice.¹⁰ Impressions were taken for custom insoles with the aim of redistributing plantar pressure and a sunken area to offload the callus, coupled with appropriate mechanical features to reduce the rate at which the midfoot is loaded.

Eight weeks later, the patient returned for the supply of their insoles. They had taken on board the strengthening and footwear recommendations. The calloused area remained unchanged; however, the plantar fascia pain had resolved.

Ultimately, it is likely the insole design would not have changed if strengthening did not provide symptomatic relief. The same orthosis could still reduce tensile load on the overloaded plantar fascia and improve symptoms, but it may not have addressed the underlying driver – muscle capacity. Integrating biomechanical theory with other rehabilitation principles allowed for a staged, evidence-informed approach.

References:

- 1 Kirby KA. Longitudinal arch load-sharing system of the foot. *Revista Española de Podología*. 2017;28(1):e18–e26.
- 2 Jarvis HL, Nester CJ, Bowden PD, Jones RK. Challenging the foundations of the clinical model of foot function: further evidence that the root model assessments fail to appropriately classify foot function. *Journal of foot and ankle research*. 2017;10:1–11.
- 3 Neal BS, Griffiths IB, Dowling GJ, Murley GS, Munteanu SE, Franettovich Smith MM, et al. Foot posture as a risk factor for lower limb overuse injury: a systematic review and meta-analysis. *Journal of foot and ankle research*. 2014;7(1):55.
- 4 McPoil TG, Hunt GC. Evaluation and management of foot and ankle disorders: present problems and future directions. *Journal of Orthopaedic & Sports Physical Therapy*. 1995;21(6):381–8.
- 5 Fuller EA, Kirby K. Subtalar joint equilibrium and tissue stress approach to biomechanical therapy of the foot and lower extremity. *Lower extremity biomechanics: theory and practice*. 2013;1:205–64.
- 6 Nester CJ. Lessons from dynamic cadaver and invasive bone pin studies: do we know how the foot really moves during gait? *J Foot Ankle Res*. 2009;2:18.
- 7 Rathleff MS, Molgaard CM, Fredberg U, Kaalund S, Andersen K, Jensen T, et al. High-load strength training improves outcome in patients with plantar fasciitis: A randomized controlled trial with 12-month follow-up. *Scandinavian journal of medicine & science in sports*. 2015;25(3):e292–e300.
- 8 Khan KM, Scott A. Mechanotherapy: how physical therapists' prescription of exercise promotes tissue repair. *British journal of sports medicine*. 2009;43(4):247–52.
- 9 Osborne JW, Menz HB, Whittaker GA, Landorf KB. Development of a foot and ankle strengthening program for the treatment of plantar heel pain: a Delphi consensus study. *Journal of Foot and Ankle Research*. 2023;16(1):67.
- 10 Morrissey D, Cotchett M, J'Bari AS, Prior T, Griffiths IB, Rathleff MS, et al. Management of plantar heel pain: a best practice guide informed by a systematic review, expert clinical reasoning and patient values. *British journal of sports medicine*. 2021;55(19):1106–18.

CASE STUDY

Transforming orthotic services in Scotland through CAD/CAM innovation



A partnership between Chaneco Ltd and NHS Greater Glasgow & Clyde



NHS Greater Glasgow & Clyde's 'Orthotic Clinical Innovation and Research Group' has been recognised nationally for pioneering the sustained use of CAD/CAM technologies in orthotics, transforming clinical practice across Scotland and the wider UK.

For more than twenty years, Chaneco has partnered with NHSGGC to support the development, implementation, and optimisation of their digital orthotic workflows. Through technical expertise, onsite clinical support, and integration of advanced scanning technologies, Chaneco has played a key enabling role in helping the service become one of the UK's most digitally mature orthotic departments.

BACKGROUND

NHSGGC's Leadership in CAD/CAM Orthotics

As the first orthotic service in Scotland to adopt CAD/CAM as standard clinical practice, NHSGGC now produce:

- 99.9% of custom foot orthoses via fully digital workflows (>3000/year)
- Over 90% of custom AFOs through CAD/CAM
- Digital manufacture for spinal, cranial and upper-limb orthoses.

Their innovation has been driven by Advanced Practice Orthotists, Laura Barr and Susie Hughes and Orthotic Clinical Lead Nikki Munro, whose work spans clinical research, system development, national resource creation, and postgraduate

Through technical expertise, onsite clinical support, and integration of advanced scanning technologies, Chaneco has played a key enabling role in helping the service become one of the UK's most digitally mature orthotic departments.

training.

Over the last two years, the team have delivered ground-breaking research programmes, including a double-blind RCT and multiple national surveys, leading to publication in high-impact journals and the award of a prestigious NRS Career Research Fellowship, funded by the Chief Scientist Office.

COLLABORATION ACCELERATES SUCCESS

The achievements highlighted in NHSGGC's award nomination rely on effective integration of technology, scalable digital workflows, and confidence among clinicians using CAD/CAM systems day-to-day. Chaneco's long-term involvement has contributed to this success by providing:

- Early adoption support at each milestone of their digital transition
- Continuous onsite technical and clinical partnership
- Integration of Rodin4D and Paromed systems across NHS IT networks
- Training programmes that complement NHSGGC's own national education initiatives
- A sustainable, cost-effective technical model that supports in-house manufacture
- Responsive technical support for complex clinics.

Together, NHSGGC and Chaneco have demonstrated how long-term NHS-industry collaboration can accelerate innovation, strengthen digital maturity, and improve patient outcomes.

CHANECO'S ROLE AS A TECHNICAL AND CLINICAL PARTNER A 20-Year Partnership

Chaneco has provided continuous technical and clinical support to NHS Greater Glasgow & Clyde for more than two decades, helping the department embrace digital manufacture long before it became common practice in UK orthotics.

Enabling the Integration of CAD/CAM Systems

Chaneco played a key role in helping the service implement and integrate Paromed and Rodin4D scanning systems into their clinical environments.

Our support has included:

- Configuring scanning and CAD systems within NHS IT environments
- Supporting workflows across multiple clinical sites
- Providing immediate clinical troubleshooting and optimisation advice
- Helping teams transition from plaster and foam box casting to full digital capture.

This technical foundation has been crucial to NHSGGC achieving a fully digital orthotic manufacturing workflow.

Onsite Training and Skill Development

To maximise the efficiency and clinical value of scanning technologies, Chaneco provides:

- Onsite training sessions for Orthotists and students
- Specialist multi-disciplinary (MDT) training in complex clinics
- Practical guidance in scanning for AFOs, spinal shapes, and custom lower-limb orthoses
- Training designed around real patient scenarios for better clinical outcomes.

The Rodin4D portable whole-body scanner—capable of digitising any body part—has dramatically reduced scanning time and improved patient comfort. Our trainers routinely scan bilateral AFO shapes in under 10 minutes, using a contactless and patient-friendly approach.

Supporting Sustainability and NHS Environmental Goals

Chaneco's digital data capture processes directly support NHS Scotland's environmental commitments:

- Eliminating the need for plaster casts, foam boxes, and physical moulds
 - Reducing courier transport and associated carbon emissions
 - Storing all Electronic Data Capture on secure servers for repeatability
 - Deploying electric vehicles for technical clinic visits across Scotland.
- This aligns closely with NHSGGC's focus on efficient, sustainable healthcare delivery.

Manufacturing Quality and Value

Chaneco manufactures custom orthotic products at our state-of-the-art facilities in Northampton and Dronfield, offering:

- Consistent digital-to-manufacture workflows
- Competitive pricing for in-house NHS orthotic services
- A scalable route for expanding digital adoption in other Health Boards.

Chaneco currently supports multiple monthly technical clinics across Scotland, with a strong track record of service quality and clinical collaboration.

CONCLUSION

The work led by NHS Greater Glasgow & Clyde's "Orthotic Clinical Innovation and Research Group" is a defining example of clinical excellence, research leadership, and transformative use of CAD/CAM within the NHS.

Chaneco is proud to have supported this journey over the last twenty years—helping to embed digital workflows, optimise scanning technology, and provide the clinical and technical support required to make large-scale CAD/CAM adoption possible.

FURTHER INFO

Technical clinical support from Paul Bourke and his Chaneco Technical Team is available to all customers as part of our contract offering. This service can include the loan of a scanner.

For more information, please contact us at info@chaneco.co.uk or on 01604 709999.



Apos®:
Precision Orthosis
for MSK Pain



Bespoke real-time adjustments

Improve muscle control

Why Apos?

- ✓ Expand your expertise
- ✓ Enhance long-term outcomes
- ✓ Improve patient compliance



SCAN ME >



Join our **FREE**
training programme

Learn to treat knee,
hip & back pain with
Apos® technology



Interview with **The Researcher**

Eileen Morrow
NIHR Doctoral Clinical Academic Fellow



In this new feature for 2026, we speak with a researcher in prosthetics and orthotics to explore the questions you really want answered about research - from how to get started, to developing a career, and what opportunities lie beyond. In this issue, sit down with us for a conversation with **Eileen Morrow**, an HCPC-registered orthotist and NIHR Doctoral Clinical Academic Fellow. Learn more about her unique and inspiring journey as a clinical researcher, and gain insight into what a career combining clinical practice and research can look like.

WHAT FIRST INSPIRED YOU TO COMBINE CLINICAL PRACTICE WITH RESEARCH, AND HOW DID YOU MAKE THAT TRANSITION?

I first got interested in research during my undergraduate thesis. I liked that research could improve practice beyond my own clinic and give back to the profession and our patients. Once I was working, I found it frustrating how often I was making clinical decisions with limited evidence, either based on engineering principals or my colleagues' experience.

To address this frustration, I started with small steps like audits and service evaluation. But I was always interested in larger changes, which are hard to do in "spare time". The turning point for me was getting mentorship. Mr Tim Theologis (a paediatric orthopaedic consultant) encouraged me to apply for early research support funding and supported me through several unsuccessful applications. That belief and guidance made a huge difference.

WHY DO YOU BELIEVE CLINICIANS ARE ESSENTIAL TO HIGH QUALITY RESEARCH IN PROSTHETICS AND ORTHOTICS?

Good health research needs both research and clinical expertise. Researchers can't know the detail of every clinical area, and in P&O I believe the best clinical experts are prosthetists and orthotists. When our clinicians aren't consulted, studies can make unrealistic assumptions about how our services work, or compare interventions that don't

make clinical sense. That can lead to research that doesn't have clinical impact, which is a waste.

MANY CLINICIANS FEEL THEY DO NOT KNOW WHERE TO BEGIN. WHAT ARE SOME SIMPLE FIRST STEPS THEY CAN TAKE TO GET INVOLVED IN RESEARCH?

Joining a journal club, getting involved in audit or service evaluation and using outcome measures in your clinic routinely are all strong starting points. If your service is involved in large multi-centre trials (like the BASIS or BigTOE trials) getting involved in recruitment and data collection is a huge contribution and a great way to learn how research works.

If you want to develop your own research, keep a simple "question log": what clinical decisions do you make mainly based on habit or preference rather than evidence? Those uncertainties can become projects once you start looking for mentorship or funding.

I'd also encourage people to connect with professional networks like the BAPO Research Committee; many opportunities come from being in the right conversations.

WHAT ADVICE WOULD YOU GIVE TO CLINICIANS WHO WORRY THAT THEY ARE NOT EXPERIENCED ENOUGH TO CONTRIBUTE?

Your clinical knowledge is exactly what many studies are

missing. Research teams are experts in research, but they need prosthetists and orthotists to guide how interventions actually work in clinic. Research is a team effort, and clinicians are a vital part of that team.

WHAT CAN CLINICAL DEPARTMENTS DO TO ENCOURAGE A CULTURE OF INQUIRY AND INNOVATION?

Departments can make research feel central and achievable by celebrating small wins along the way.

Posters, audits, and service evaluation projects should be shared and celebrated. Creating regular spaces (like a journal club or 'clinical questions' meetings) help to keep research on the radar.

Just as important is practising how to implement evidence. Teams can pick one paper, audit result or piece of patient feedback and ask: "What should we do differently because of this?". Small changes should build a team that is reflective, flexible and always learning.

HOW DO YOU SEE THE ROLE OF CLINICIANS IN RESEARCH CHANGING OVER THE NEXT DECADE?

I hope we'll see more interested prosthetists and orthotists involved in research as clinical academics, grant applicants or chief investigators - not just supporting research delivery. I hope that increasingly, research is done with us, rather than around us.

More P&O involvement should change what the profession is known for, building credibility with funders and policymakers. Ultimately, a robust evidence base will give P&O a stronger voice in decisions that shape practice - how care is commissioned, what gets funded and which innovations become available to patients.

IF YOU COULD GIVE ONE TIP TO A CLINICIAN WHO ASPIRES TO GET INVOLVED IN RESEARCH, WHAT WOULD IT BE AND WHY?

Seek out a research mentor; they don't necessarily need to be a prosthetist or orthotist. They should help to highlight opportunities which are relevant to your interests and support you in being acknowledged appropriately. This is useful at any stage, whether you are just looking to give clinical guidance to a study, or to run your own research.

EDSER

A REVOLUTIONARY 3D
PRINTED SHELL MATERIAL
-
REDEFINING THE INDUSTRY

3D CPP+ PRINTED



FEATURES

Unprecedented **strength** and **flexibility**.

Large-format precision – print up to 90cm in one seamless build. Twice the size of any other printer.

Modify or adjust using a heat gun, making in-clinic adaptations quick and efficient.



CONTACT US

www.edserlabs.com
uk@edserlabs.com



@edser-labs



@edser_labs



@edserlabsofficial

Very happy with the ease of descending stairs. Even placing the foot in various positions on the step, Avior manages this smoothly with little effort required.



“I can feel how smooth the hydraulics are, whoever engineered this has done a very good job.”

Avior Confidence in Every Fitting



Avior is a microprocessor knee that is redefining mobility for primary and lower mobility amputees.



blatchfordmobility.com

Blatchford

Confident Conversations about Research – A training session



NHS Research Scotland Neuroprogressive & Dementia Network

On Tuesday 11th November 2025 I attended Alzheimer Scotland in Edinburgh for the above workshop. Attending were AHP's who are working with people with dementia and their families.

While the session had a particular focus on Scotland, at least one of the resources mentioned in the toolkit at the end of this article is open to all in the United Kingdom.

PURPOSE OF THE SESSION

It has been identified that many people with dementia are keen to take part in research, but they often don't know how to become involved. Clinicians can sometimes not feel confident to talk about research or know how to signpost people appropriately. The workshop was developed to raise awareness of the options regarding how people can get involved in research and encourage dialogue about the subject.

Benefits have been recognised for participants, following asking people with lived experience who have taken part in research, what the advantages are from their perspective.

- Being involved in research can bring a sense of curiosity, excitement and hope.
- Participants feel they are being kept in the loop and this can provide a sense of positivity for people with dementia, as they may feel they are working towards a cure.
- Many people with dementia have also expressed altruistic motives, such as "this might not help me, but it might help others".
- The more people that are involved in research, generally means the research can be carried out more quickly, leading to the results (whether they are positive or negative for the intervention) being available more rapidly.

The reason this workshop was developed was to address some of the identified barriers, listed below.

- Lack of health research literacy.
- Perceived commitment in terms of time, travel etc.
- Mistrust of drug companies
- Not knowing how they can get involved in research.
- Lack of confidence to join a research group or trial, especially when the other participants are unknown.

The session also considered questions of consent, especially when some people might struggle to understand the risks and benefits of taking part in the research. In these cases it's very

important to involve the person's family or whoever holds Power of Attorney, as they may be aware of the person's wishes in terms of getting involved in research.

Therefore, having conversations early in the person's treatment journey - at the most appropriate time for the individual, to raise awareness of the options regarding getting involved in research, can be really helpful.

For people who might be nervous or anxious of joining a research group or taking part in a trial, many of the organisations listed below offer buddies or direct support from others who have been through the process.

The session introduced a 'Confident Conversations Toolkit' postcard to help facilitate relevant communication and chats about research. The links on the postcard below identify a range of NHS and commercial groups who offer the opportunity to get involved in research, specifically for people with dementia and their families / carers or supporters. Some registers are better for those with a neuroprogressive diagnosis and others are better for those who don't have any diagnosis.

The 'Join dementia research' register is UK wide, while the other four focus on Scotland.

If you would like to learn more about how to have Confident Conversations about Research visit www.nhsresearchscotland.org.uk/research-areas/dementia-and-neurodegenerative-disease and if you would like to attend a future training session please email the organisers Jacqui and Emma directly at tay.ndntayside@nhs.scot.

I will also share any further information with members via the weekly newsletter.



From clinic to evidence:

Why prosthetists should engage with ARRAN

By Dr Chantel Ostler, Highly Specialist Physiotherapist, Prosthetic Rehabilitation

Prosthetists sit at the intersection of biomechanics, technology and human recovery. Every prescription, alignment decision and outcome measure shapes a person's mobility, participation and long-term health. Yet across amputation and prosthetic rehabilitation, the evidence base supporting these decisions remains limited.

A systematic review by Aoife Healey, from Ulster University, of randomised controlled trials (RCTs) in prosthetics and orthotics identified only four prosthetic RCTs over a 20-year period. As a result, many aspects of prosthetic practice rely on consensus methods used to develop guidelines from clinical interest groups such as BACPAR or BSRM, or even historical ways of working and personal preference, rather than high-level evidence. Despite this limited evidence base, relatively few clinicians feel equipped or supported to deliver research within NHS services. Many also report that published research does not always address the questions that matter most in daily clinical work.

The Amputation Rehabilitation Research Network (ARRN) was created to help change this, and prosthetists are key to that shift.

WHAT IS ARRAN?

ARRN brings together multidisciplinary clinicians, academics and researchers with a shared interest in amputation and prosthetic rehabilitation research. Its purpose is to develop a more cohesive, multidisciplinary approach to the development, delivery and dissemination of research, strengthening evidence-based practice across the field.

The network provides a forum for clinical input into new research, ensuring studies are meaningful and feasible. It also provides opportunities for multi-disciplinary collaboration across the network, bringing together clinicians and academics. The network meetings and resultant collaborations facilitate a focus on growing research knowledge and skills within the clinical workforce, with the aim of building a community where clinicians help shape the future direction of research

STRENGTHENING EVIDENCE-BASED PRACTICE

Evidence-based practice depends on both access to research and clinician engagement with it. ARRAN can support prosthetists to stay up to date with new publications, projects and developments, discuss how emerging evidence translates into real prosthetic care, and contribute frontline perspectives that help research reflect true clinical priorities

Regular meetings include updates on current projects underway within UK prosthetic services, publications and achievements from network members, educational topics, and shared learning, helping members remain connected to the evolving evidence landscape.

DEVELOPING THE RESEARCH PILLAR OF YOUR PRACTICE

Research does not have to sit outside clinical roles, as set out in the four pillars of clinical practice, and should be an integrated part of our day to day roles. ARRAN explicitly provides peer support and mentoring for clinicians who want to develop their research pillar by undertaking research/improvement projects, or exploring research-integrated career paths. This includes support for students and clinicians at all stages.

For Prosthetists, involvement might include designing and evaluating a service improvement initiative or contributing to data collection in multi-site research studies. There are opportunities for learning about new research and critically appraising literature. The network also highlights and supports members to exploring funding or fellowship opportunities, as well as present or publish clinical research and improvement projects.



Dr Chantel Ostler

As clinical academic pathways expand across allied health professions, prosthetists have an opportunity to strengthen their professional profile through research engagement.

The aim is to build confidence and capability, so research becomes a realistic part of practice rather than an abstract ideal.

BUILDING RESEARCH INTO YOUR CAREER

As clinical academic pathways expand across allied health professions, prosthetists have an opportunity to strengthen their professional profile through research engagement. The ARRAN offers a way to start thinking about what research in your career could look like through:

- Chances to get involved in research going on in the UK at the moment as a recruiting site or clinical collaborator on a project
 - Opportunities to join working groups (e.g. grant applications, publication writing, project development)
 - Exposure to funding and fellowship discussions
 - Connections with clinical and academic partners for future collaboration
- Whether early career or experienced, prosthetists can use the network to build a portfolio that reflects leadership in both practice and evidence.

SHAPING THE RESEARCH THAT HAPPENS NEXT

A core aim of ARRAN is to ensure research is driven by issues important to stakeholders, particularly clinicians and people undergoing amputation. Through ARRAN, Prosthetists can have the chance to highlight unanswered clinical questions, advise on feasibility within services to undertake research projects, collaborate across disciplines and sites and help ensure research leads to meaningful clinical impact.

A COLLECTIVE STEP FORWARD

The evidence base in prosthetic rehabilitation will grow when clinicians choose to engage, question and collaborate. ARRAN offers a practical, supportive structure to do just that, strengthening evidence-based practice, developing research skills, and ensuring the future of prosthetic care is shaped by those delivering it.

For Prosthetists looking for support to learn about evidence, use it in clinical practice and get involved in creating it for the future, ARRAN is a valuable place to start.

ORTHOTIX
SUPPORTING YOUR WELLBEING

TRUSTED BY
NHS ORTHOTISTS
NATIONWIDE

Boxia® Drop Foot Support

Available on NHS Supply Chain

INNOVATIVE
ORTHOPAEDIC SOLUTIONS
FROM HEAD TO TOE

Orthotix provides clinically approved, off-the-shelf orthotic solutions designed to enhance mobility, comfort and long-term patient outcomes.

Our product range includes supports & bracing, medical underwear, podiatry & insoles, specialist footwear, orthotic materials and technologies.

Proud To Support

Download
Our Latest
Catalogue

(029) 2037 0696
www.orthotix.co.uk
enquiries@orthotix.co.uk

A healthcare brand of: thePTHgroup

step

Now available from Steeper

Sstep Drop Foot Sock

- Sleek, low profile design
- Perfect for indoor use
- Soft, moisture-wicking material

steeper by eqval

Tel: +44 (0) 1113 207 0435
Email: orthotics@steepergroup.com
www.steepergroup.com

Order Now!



Inspiring the next generation

Promoting careers in prosthetics & orthotics

By Rebecca Green - Senior Orthotist

SPRING LOADED

medi

The only knee brace that offloads patellofemoral and multicompartmental OA with Spring Loaded technology

Spring Loaded OA brace. Available in the UK exclusively from medi®

- ✓ Unique solution addressing the unmet needs of PFOA patients
- ⚙️ Adjustable power dial designed to reduce patellofemoral joint load
- ↓ Significantly reduces pain in both flexion and extension*

*Budarick et al. (2020) Journal of Biomechanical Engineering. Novel Evaluation of a Multi-Compartment Unloader Knee Brace

Tel: 01432 373 500 www.mediuk.co.uk **medi. I feel better.**

Choose a career in Prosthetics and Orthotics

The British Association of Prosthetics and Orthotics

What is Prosthetics and Orthotics?
Prosthetics and Orthotics is a career that blends science, engineering, and healthcare to create life-changing devices for people of all ages.

- Prosthetists:** design, create, and fit prosthetic limbs for people who have limb difference or loss.
- Orthotists:** design and fit supportive devices such as braces, splints, and braces to improve movement, posture, or function.
- Technicians:** manufacture, adjust, and repair custom-made prosthetic and orthotic devices using specialist tools and materials.
- Support workers:** assist clinicians and technicians, helping with patient care, device preparation, and clinic organisation.

Why choose this career?

- Make a real difference in people's lives
- Use cutting-edge technology and modern materials to design life-changing devices
- Solve creative and hands-on challenges every day
- Work in settings such as hospitals, NHS clinics, private clinics, research, and teaching
- Join a growing, future-focused profession with lots of opportunities

Skills you'll need

- Enjoy science, maths, and engineering
- Enjoy using technology and design tools
- Problem-solving & creative thinking
- Compassion & good communication
- Motivation to improve people's lives

How to get there (UK Pathway flowchart)

STEP 1 School/College
• GCSE/Nat 5s
• A Levels/Highers or equivalent in Biology, Maths, Physics, or Engineering

STEP 2 University Apprenticeship degree or Support Worker/Technician Apprenticeship
• BSc or MSc in Prosthetics & Orthotics (for University route)
• Entry requirements set by the employer, may need specific experience in mechanical, technical, or healthcare-related field (for Technician/Support Worker Apprenticeship route)

STEP 3 Job Role
• HCPC registration to practice in the UK as prosthetist/orthotist (for University route)
• Support Worker or Technician

Career opportunities
NHS hospitals and community clinics
Private practice
Research and innovation labs
Teaching and mentoring
Leadership

Scan the QR for more information

Raising awareness of careers in prosthetics and orthotics (P&O) is vital for the future of our profession. School visits offer us an opportunity to show young people a career they may never have heard of but one that combines science, creativity, problem-solving, and real human impact.

Talking to students about P&O allows us to challenge assumptions about healthcare careers and highlight the wide range of pathways available, including university routes, apprenticeships, or technical roles. Sharing everyday clinical examples helps the students see how Prosthetists and Orthotists make a practical difference to people's lives. Involving current students in these visits adds even more value, giving pupils an honest and relatable insight into training and placements.

Importantly, colleagues don't need to do this alone. The British Association of Prosthetics and Orthotics (BAPO) actively supports P&O careers promotion and provides guidance and resources for members who want to engage with schools, colleges, and community events. This support helps ensure messaging is consistent, accurate, and aligned with national workforce priorities.

By giving a little time to careers outreach, we can collectively strengthen the pipeline into prosthetics and orthotics, improve understanding of what we do, and inspire the next generation of clinicians and technicians.

Let's spread the word, and show young people that P&O is not just a career, but a chance to make a real difference.



Supporting P&O through careers events

At NHS Greater Glasgow and Clyde, orthotics have supported a number of careers events over the years. Recently we were invited to attend events at City of Glasgow College and Clydebank College campuses with NHS Greater Glasgow and Clyde Workforce and Employability Team, and Developing the Young Workforce (DYW). These events are aimed at school children who have shown interest in Science Technology Engineering and Mathematics (STEM).

The events stemmed over several days, two of which we were able to attend to promote orthotics as a career path. We took a number of orthotic devices to showcase alongside information on how to access prosthetics and orthotics as a career path. This past year we have included a short MS form comprising of multiple choice questions relating to our profession with QR code function for students to get involved. This has been really popular in grabbing interest and attention with around 100 engaged students and of course many more who have not used the form. Often, students are interested in things they can get involved with like guessing how a knee brace fastens.

Mairi Gray, Orthotist, NHS GGC "Career Fairs are a way for us to showcase and raise awareness of our profession. It allows us to connect with students, past students and those returning to the workplace as a safe environment to ask questions and see if this is a profession they have interests in."

Kirsty Green, Senior Orthotist, NHS GGC "It was wonderful to see so many young people actively exploring future career opportunities around STEM subjects. We were delighted by the interest shown in orthotics and the curiosity about what our profession entails. As a small profession, it is essential that we continue to promote ourselves to ensure a strong and sustainable workforce for the future."

We also bumped into some colleagues at the University of Strathclyde at the National Centre for Prosthetics and Orthotics who attended to promote the BSc (Hons) Prosthetics and Orthotics to the student cohort. Any possibility to steal a wee sweetie! Their interactive upper limb prosthetic activities always attract attention.

Schools' events promoting careers are a great way of interacting with prospective prosthetists, orthotists, healthcare support workers, technicians and administrators. For students who have yet to make a decision about their future careers, schools' events that parents can also attend help support conversations to carry on at home. We had popped along to Williamwood High School and again bumped into our NCPO colleagues!

Gail Morrision NHS GGC Orthotic Clinical Team Lead "I am in the privileged position of loving the job I do and the career I've chosen. It's an honour to reach out to the next generation of Prosthetists and Orthotists to encourage young people with problem solving skills to become the future of our small profession."

Career events are well supported by NHS GGC Orthotics service manager Nikki Munro "Careers promotion is essential to ensure we have a future workforce of young people who enter our professions as it aligns with their skills and interests."

As a small profession it can be hard to gain interest in training in P&O as these professions are not well known. My own route into P&O was due to a careers officer at my School having heard of the course and promoting this to those who had an interest in health and sciences."

We have thoroughly enjoyed engaging with many of the secondary schools across Glasgow and the west, highlighting orthotics as a career path, raising careers awareness for prospective students and look forward to supporting events in the future. As a small profession, we must ensure that there is a strong pipeline into careers so we can continue to offer high quality, person centred care to our service users through people who have a passion for our roles.

Many thanks to BAPO who have supported us in our career events.

FOR MORE INFORMATION VISIT:

- NHSGGC Orthotic Service - www.nhsggc.scot/hospitals-services/services-a-to-z/orthotic-service-glasgow/
- NHSGGC Employability and Young People - www.nhsggc.scot/staff-recruitment/recruitment/employability-and-young-people/
- DYW Scotland - www.dyw.scot/



You Already Know Us. Now Get to Know Us.

You've seen us at events. You've partnered with us through distribution. You've worked with our clinics. You've experienced our innovations in practice.

What you may not have realised is that many of those brands are connected through a single structure – **AM Healthcare Group**.

A Unified Group. Specialist Brands.

AM Healthcare Group brings together a broad portfolio of specialist brands operating across multiple areas of prosthetic and orthotic care – including:

- European and national clinical services
- Private and government-funded care pathways
- Product distribution and manufacturing
- Digital design and 3D print innovation
- Workforce development and sector investment

These represent some of the core pillars of our Group – alongside additional specialist services and partnerships that continue to expand our reach. By aligning expertise under one structure, we strengthen collaboration, accelerate innovation and create long-term stability for the profession. This is about building infrastructure for the future of P&O – responsibly, strategically and together.

Follow Our Journey

AM Healthcare Group represents the evolution of brands many of you already know. As we continue to invest, grow and unify, we invite you to:

- Connect with us
- Partner with us
- Work with us
- Follow our progress

Because the future of P&O will be shaped by those building it.

One Group. Many Specialists. Shared Purpose.

Clinical Services
info@opcare.co.uk | clinic@proactiveprosthetics.co.uk

Product Distribution & Manufacturing
info@ortho-europe.com

3D Print & Innovation
sales@crispinorthotics.com

Recruitment & Apprenticeships
hr@am-healthcare.com

General Enquiries
info@am-healthcare.com



Visit our website



Daceys

Providing orthotic solutions since 1972



Orthotic House with full bespoke manufacturing capability: Custom Footwear, Repairs & Adaptions, 3D Printed Insoles, AFO / DAFO / KAFO & Fabric Garments.

Check out our new footwear catalogue



For All Trade Enquiries:
E: enquiries@dacey.co.uk
T: 029 2022 5454

A healthcare brand of: thePTHgroup



Education Committee Update Learning Bite by Bite

The BAPO Education Committee has begun the year with a clear focus: strengthening communication and collaboration across the prosthetics and orthotics (P&O) profession. By actively liaising with clinicians, educators, and industry professionals, the committee has worked to ensure that education remains accessible, relevant, and responsive to the evolving needs of practitioners. The result of this collective effort is the launch of BAPO Bitesize, which has recently gone live.

BAPO Bitesize has been designed with today's busy clinician in mind. Recognising that protected CPD time is often limited, the platform delivers approved, detailed, and high-value learning modules in smaller, manageable formats. Each module aims to support professional growth across the four pillars of practice, helping clinicians build skills and confidence without the pressure of committing to lengthy training sessions. The intention is simple: meaningful education that can fit into real clinical schedules.

Importantly, Bitesize is not only a resource for BAPO members but also a contribution to the wider global P&O community. The modules will be shared with international professional bodies, supporting colleagues worldwide and reinforcing BAPO's commitment to collaboration and shared professional development. The Education Committee will continue developing new content, ensuring that Bitesize grows alongside advancements in clinical practice and emerging professional needs.

The committee has also strengthened its team this year with the welcome addition of Gwen Roberts. A specialist Prosthetist with extensive experience in leadership and education, Gwen brings valuable insight and expertise that will further enhance the committee's work and future direction.

Alongside the Bitesize launch, planning for the 2026 Teatime Talks programme is nearing completion. With the diary almost full, the upcoming series already promises to be informative, engaging, and reflective of the diverse interests within the profession. These sessions continue to provide an accessible forum for shared learning and professional discussion.

Meanwhile, Tech and Trends sessions will continue to showcase innovation across P&O practice. The committee warmly encourages anyone interested in presenting research findings, new technologies, or emerging products to get in touch and explore opportunities to contribute.

Finally, the committee marks an important transition as it says goodbye to Chair Dave Buchanan. Over the past year, Dave's encouragement, motivation, and leadership have driven the team forward, resulting in a number of impactful educational initiatives and resources for members. His commitment has helped shape a strong foundation for future developments, and the committee extends its sincere thanks while wishing him every success in his next chapter.

As the year progresses, the Education Committee remains committed to supporting clinicians through accessible education, professional collaboration, and innovative learning opportunities – continuing to build knowledge, one bite at a time.

LEADING THE WAY IN ORTHOSES



BESPOKE
INSOLES

MODULAR
INSOLES

STOCK
INSOLES



Established by four experienced technicians with a passion for quality and innovation, Birmingham Orthotic Services helps people get back on their feet.

We recognise that clinical accuracy and patient compliance is the key to effective orthotic management. Using the very latest CAD-CAM technology, our in-house design facility, together with the extensive knowledge of our highly skilled technicians, enables us to offer a tailored orthotic service to practitioners and their clients individual needs.



AFOs
BESPOKE AFOs

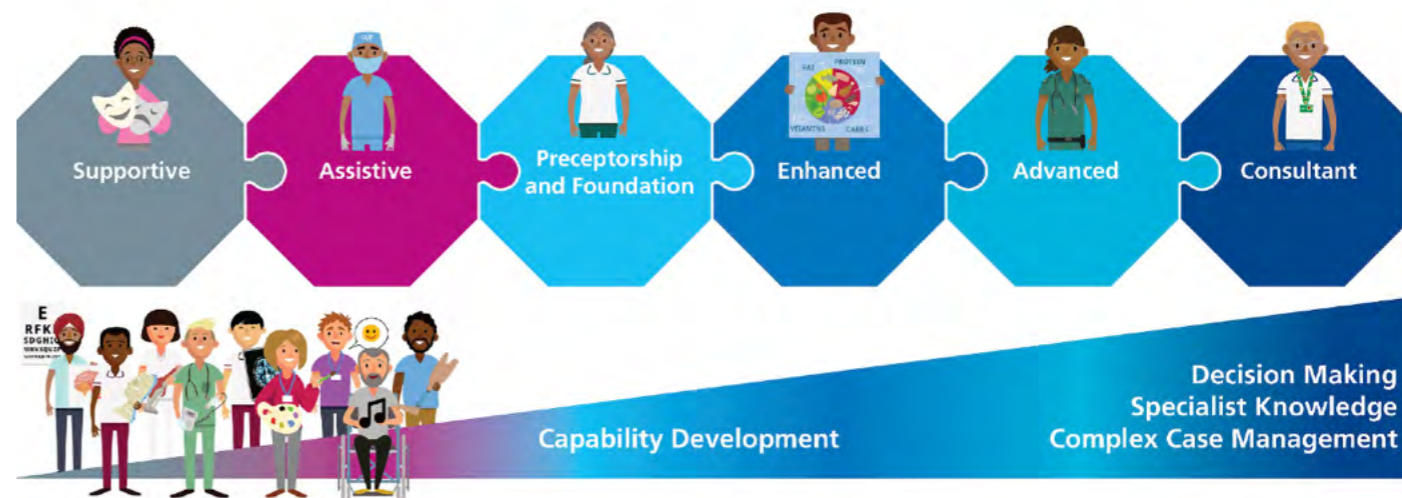
ADAPTIONS
ON FOOTWEAR



T: 0121 647 3565

E: ENQUIRIES@BIRMINGHAMORTHOTICS.CO.UK

W: WWW.BIRMINGHAMORTHOTICS.CO.UK



Enhanced Practice in P&O

Preparing the profession for the next decade

It is an exciting time for prosthetics and orthotics (P&O). NHS workforce transformation and the wider rehabilitation agenda increasingly recognise P&O as central to supporting mobility, function and long-term condition management (NHS, 2023). Alongside national developments led by BAPO and growing professional recognition (Eddison et al., 2024), the profession is entering a period of real opportunity.

That opportunity comes at a time of significant pressure. Rising caseloads, increasing clinical complexity, workforce shortages and fragmented pathways continue to stretch P&O services (Prosser & Achour, 2023). Addressing these challenges requires more than incremental change, it demands a workforce that is confident, flexible and equipped to lead care closer to patients.

Enhanced Practice (EP) responds directly to this need. Sitting between preceptorship and advanced practice (Figure 1), EP provides a structured, profession-specific progression route that strengthens clinical capability, supports retention and enables service redesign. It is not about acquiring isolated skills, but about developing capabilities across all pillars of practice, aligned with modern health and social care governance.

This year marks the graduation of the first cohort from the University of Salford's PG Cert in Enhanced Practice. This profession-specific programme develops knowledge, skills and capabilities across all four pillars of practice, embedding them within individual P&O pathways and roles. In a profession that has historically lacked accessible, standardised and funded development routes, the PG Cert offers a nationally recognised, quality-assured qualification that supports workforce transformation while protecting P&O's professional identity.

The 2025 NHS 10-Year Plan (UK Government, 2025) sets out three system-wide shifts required to meet future demand. Enhanced Practice equips the P&O workforce to respond to each, positioning EP not as an optional extra, but as a critical level of practice for the decade ahead.

SHIFT FROM HOSPITALS TO THE COMMUNITY

Community-aligned care reduces hospital admissions and improves patient access. The aim to deliver right care, right place, right time (UK Parliament, 2025) therefore requires models that are responsive, person-centred, and integrated across services.

Within P&O, shifting care into the community presents specific challenges. Specialist workshops, equipment, and technical expertise are often integral to service delivery, meaning there is no single or simple model for community provision (NHS England, 2015). A key tension is the risk of fragmenting an already small and highly specialist workforce; poorly planned decentralisation can reduce resilience and efficiency. As a result, community alignment in P&O requires creative, hybrid approaches rather than simple relocation of services.

Some elements of P&O care may be delivered in settings such as GP surgeries, schools, or patients' homes, while others will require specialist hubs or satellite clinics. Targeted outreach approaches, such as mobile repair and maintenance services, offer additional flexibility without dispersing core specialist capacity. Comparable models already exist within NHS services and demonstrate improved access and turnaround times when appropriately resourced and linked to central facilities. In other services the shift will not involve moving care physically but rather integrating P&O expertise into community-based pathways.

Clinicians' understanding of pathways, service constraints, and patient need is essential to designing models of care that are both clinically safe and operationally realistic. EP level skills equip P&O clinicians with the capability to lead this change, embedding specialist expertise within community-aligned pathways while maintaining quality. Enhanced-level clinical reasoning supports timely decision-making, reducing duplication, unnecessary referrals, and wasted clinical time. It also enables effective contribution within neighbourhood

multidisciplinary teams, supporting joined-up pathways and more efficient use of specialist capacity.

Collectively, EP supports sustainable, community-aligned P&O services that are clinically led, flexible, and responsive to population need.

SHIFT FROM ANALOGUE TO DIGITAL

Digital transformation is reshaping NHS care. Within P&O, Enhanced-level clinicians act as innovators, ensuring digital tools support rather than dictate decisions, and are well placed to balance innovation with safety, equity, and professional judgement. Using skills in data interpretation, appraisal, and leadership, they integrate technologies such as additive manufacturing, Patient Reported Outcome Measures, and smart devices, amplifying the patient voice and enabling more personalised, responsive care.

Embedding digital tools into routine practice delivers tangible system-level benefits. Digital approaches can support the other shifts, such as reducing unnecessary hospital attendances, and supporting earlier identification of emerging issues, to enable faster, evidence-informed clinical decisions. Improved access to outcomes and activity data strengthens service evaluation and supports proactive care planning, particularly for patients with complex or long-term needs. Digital models also improve accessibility for patients in rural or underserved areas, support efficient service delivery across multiple settings, and enable greater integration of P&O expertise within multidisciplinary teams.

There is also growing opportunity to leverage artificial intelligence (AI) and automation to improve clinical efficiency, for example through triage support, pattern recognition within outcomes data, or streamlining administrative and reporting tasks. However, the use of AI introduces risks, particularly where datasets are small, incomplete, or unrepresentative- an issue that is especially relevant within P&O. EP equips clinicians with the skills to question data quality, understand limitations, and apply emerging technologies safely and ethically.

Critically, robust digital outcomes and activity data strengthen the profession's contribution to commissioning decisions, service planning, and sustainable resource allocation. EP therefore plays a key role in ensuring digital transformation in P&O is clinically led, patient-centred, and aligned with wider NHS priorities.

SHIFT FROM SICKNESS TO PREVENTION

Increasing pressure across the NHS has accelerated the need for proactive rather than reactive care. Early identification of co-morbidities commonly encountered in P&O is critical to preventing deterioration and avoiding crisis-driven care (British Association of Prosthetists and Orthotists, 2025). For people using prosthetic or orthotic devices, delayed intervention can result in a range of adverse outcomes from skin breakdown to loss of function or avoidable hospital admission. This underscores the importance of anticipatory, clinically led assessment and timely action.

P&O clinicians are well placed to function as front-line specialists. EP aims to build confidence and capability in early

assessment, screening and intervention within long-term conditions, enabling timely identification of risk and prevention of avoidable harm. Enhanced practitioners also support coordinated, clinically led care through earlier referral, shared decision-making and continuity across rehabilitation pathways. By embedding Making Every Contact Count principle (Public Health England & Health Education England, 2016), such as skin surveillance, ulcer prevention and early recognition of frailty, EP establishes prevention as a core function of P&O services.

Improved access to preventative assessment and early intervention, particularly for underserved populations, supports a shift towards anticipatory, equitable care, reducing crisis-driven demand and strengthening rehabilitation pathways.

SUMMARY

Investing in the P&O workforce through Enhanced Practice delivers clear benefits for patients, services and the wider system. Enhanced practitioners support proactive, coordinated care, improve demand management, reduce duplication and enable more flexible workforce deployment, strengthening P&O's contribution to service planning and pathway design. In doing so, EP directly supports the NHS 10-Year Plan's three shifts by embedding anticipatory, clinically led decision-making closer to patients.

The profession-specific PG Cert in Enhanced Practice is therefore not simply an educational programme, but a strategic enabler, equipping prosthetists and orthotists to lead improvement as the NHS transitions to more integrated, preventative and sustainable workforce models.

REFERENCES

- British Association of Prosthetists and Orthotists. (2025). Service provision guidance for prosthetic & orthotic services. www.bapo.com/wp-content/uploads/2025/08/Service-Provision-Guidance-FINAL.pdf (Accessed 28 January 2026).
- Eddison, N., Healy, A., Leone, E., Jackson, C., Pluckrose, B., & Chockalingam, N. (2024). The UK prosthetic and orthotic workforce: Current status and implications for the future. Human Resources for Health, 22(1), 3. <https://doi.org/10.1186/s12960-023-00882-w>
- NHS England. (2015). Improving the quality of orthotics services in England. <https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/11/orthics-final-rep.pdf> (Accessed 28 January 2026).
- NHS England. (2023). NHS long term workforce plan. www.england.nhs.uk/publication/nhs-long-term-workforce-plan/ (Accessed 28 January 2026).
- Prosser, K., & Achour, N. (2023). Job satisfaction among NHS and private orthotists: A cross-sectional comparative study. British Journal of Healthcare Management, 29(1), 42-50. <https://doi.org/10.12968/bjhc.2021.0081>
- Public Health England, & Health Education England. (2018). Making Every Contact Count (MECC): Implementation guide. https://assets.publishing.service.gov.uk/media/5c338375e5274a65a5da03d6/MECC_Implementemation_guide_v2.pdf (Accessed 28 January 2026).
- UK Government. (2025). Fit for the future: 10 year health plan for England (CP 1350). Department of Health and Social Care. www.gov.uk/government/publications/10-year-health-plan-for-england-fit-for-the-future (Accessed 28 January 2026).
- UK Parliament. (2025, July 3). NHS 10-year plan: Debate in the House of Commons (Hansard Commons Debates). <https://hansard.parliament.uk/commons/2025-07-03/debates/DC09ACAA-D05F-4BE8-9517-16A2D53DA49E/NHS10-YearPlan> (Accessed 28 January 2026).



University of Salford
MANCHESTER



The British Association of Prosthetics and Orthotics

ENHANCED PRACTICE Myth Busting



Enhanced practice is a role

Enhanced practice is not a role, it's not about 'time served' it's demonstrating a level of practice across all four pillars.



Off the job training (OTJT) means you have to be away from your usual, day-to-day role – putting additional strain on your colleagues

Off the job training is when you apply new knowledge, skills and behaviours in practice that can be evidenced. The vast majority of this will be in your usual, patient-facing clinical role.



Enhanced practice is only relevant to clinicians in England

Enhanced practice is part of the BAPO and NHSE career frameworks. The Prosthetic and Orthotic profession specific PG Cert course available at University of Salford can be accessed either through the apprenticeship route (England) or direct route (anywhere).



The Enhanced Practice course at University of Salford is only for band 6/NHS/full-time staff

The Enhanced practice PG Cert is really accessible; it's not linked to agenda for change/banding, it's about developing your knowledge, skills and behaviour across the four pillars of practice. It's open to NHS and private providers and is open to part time applicants.

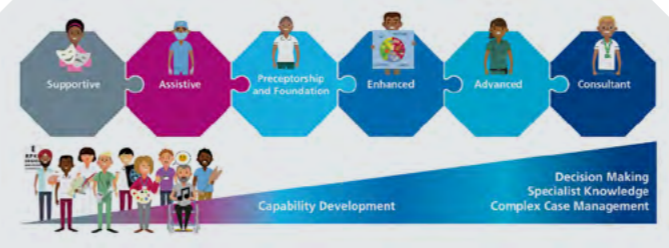
Enhanced Practice is profession and context-specific, therefore it looks different in each profession, and depends on your specific role.

Enhanced practice focuses on developing and applying an individuals capabilities (knowledge, skills, behaviours) in real-world settings, not just focusing on academic achievement.

Enhanced practice can be a stepping stone to higher levels of practice, such as Advanced Practice.



Contact us at
ECApprenticeship@salford.ac.uk
to learn more





Supporting the next generation

Reflections from an End Point Assessor for the Level 3 Prosthetic & Orthotic Technician Apprenticeship

By Rebecca Green, Senior Orthotist

As the profession evolves, so too does the pathway into it. One of the most rewarding roles I have taken on in recent years is working as an End Point Assessor (EPA) for the Level 3 Prosthetic and Orthotic Technician Apprenticeship, delivered in partnership with Derby University and SIAS. This position has given me a unique perspective on the skills, confidence and dedication emerging from our next generation of technicians.

TRAVELLING THE UK TO ASSESS A GROWING WORKFORCE

The EPA process takes me across the UK, from large specialist centres to small but highly skilled local departments. Each site reflects the diversity of our profession: different patient groups, different approaches, different pressures. But everywhere I travel, one thing remains consistent: the pride departments take in developing their apprentices.

To date, there have been 21 completed End Point Assessments where the apprentices have successfully completed their apprenticeship and End Point Assessment, with many more currently progressing through the gateway pathway. Seeing their journeys culminate in this final stage is genuinely inspiring, not only for them but also for the wider teams that have supported them.

WHAT THE EPA PROCESS INVOLVES

As an assessor, my role is to ensure each apprentice is evaluated fairly, consistently and in line with nationally recognised standards. The EPA for this qualification includes several key components:

- **A Practical Skills Observation:** Apprentices demonstrate core technical abilities relevant to their workplace, from material preparation and fabrication techniques to safe working practices and quality assurance. This is their opportunity to showcase the skill and precision they have developed over the course of their apprenticeship.
- **A Professional Discussion:** This structured conversation allows apprentices to reflect on their knowledge, responsibilities and professional behaviours. It often reveals their deeper understanding of patient-centred care, teamwork, safety legislation and the broader function of a prosthetic and orthotic service.
- **A Review of Work-Based Evidence:** Some apprentices bring a portfolio of evidence as part of their employer's training programme. While not formally assessed, it helps provide valuable context and demonstrates the breadth of their experience.

Throughout the assessment, my responsibility is to maintain a supportive, calm environment while upholding the integrity of the national standard. SIAS plays a pivotal role in coordinating and assuring the quality of the EPA process, ensuring that every apprentice, regardless of employer or region, is assessed consistently.

THE IMPACT ON SERVICES AND OUR PROFESSION

Prosthetic and orthotic services depend on highly skilled technicians, and this apprenticeship route has already strengthened the workforce across the UK. Apprentices bring modern skills, fresh enthusiasm and a commitment to high-quality patient centred care. Many departments have told me how quickly apprentices become integral members of their teams, often progressing into specialised fabrication roles.

Equally, the EPA process provides reassurance to employers and patients alike: every apprentice who passes has met a robust, nationally regulated standard of competence.

LOOKING AHEAD

With more apprentices moving toward gateway each year, the pipeline of skilled technicians entering our profession continues to grow. I feel privileged to play a small but meaningful part in their journey. Their success reflects not only their hard work, but also the dedication of mentors, educators and clinical teams who invest in them.

As we continue to embrace apprenticeships as a core training route, I'm confident that the future of prosthetic and orthotic technical practice is in very capable hands.

If you are interested in learning more about becoming an End Point Assessor, please contact me, we are in need of additional people to cover regions within the North and the South of England.

A message from SIAS

The progress within the Level 3 Prosthetic & Orthotic Technician apprenticeship showcases the ambition and innovation driving our sector forward. Each apprentice reaching End Point Assessment reflects the high standards, technical skill and future-focused mindset that modern services demand.

SIAS is proud to play a key role in ensuring every assessment is fair, consistent and grounded in nationally recognised expectations. What we're seeing across the UK is a confident, capable pipeline of technicians ready to contribute to the evolution of prosthetic and orthotic practice.

The achievements of these learners and the commitment of the teams supporting them, highlights the real impact of a progressive training route built around partnership, quality and purpose. It's a clear reminder of the value apprenticeships bring and why, together, we remain #AlwaysMovingForward.

Steve Smith, Managing Director, SIAS

Technician to apprentice



A REFLECTIVE CASE STUDY

By Lee Whitfield

I started at Peacocks Medical Group in 2013 and progressed to the role of a senior orthotics technician primarily within plastics, footwear and specialist seating roles. I had also expanded my skillset with some limited metal and leatherworking to help where needed and regularly covered team leader responsibilities. After almost 11 years and my varied previous roles, I felt limited in my options for further development and viewed the orthotics apprenticeship as a new challenge in which my previous experience would be beneficial. I had previously been involved with specialist seating clinics and enjoyed the variety and challenge provided by patient facing clinical roles so decided to apply.

EXPECTATIONS

I was aware that returning to higher education as a mature student would be challenging due to my previous experience of university and the substantial added baggage that comes with being 36 not 20 and relatively carefree. As a result, I was slightly apprehensive stepping into a new role, where although I knew my new colleagues, I had not worked directly alongside them, and I was keen to make a good impression. I was worried my responsibilities outside of work, like childcare, may have made me appear less reliable and affected their opinion. I was immediately made to feel part of the team and comfortable with everyone which eased my transition into my new role. Witnessing the flexibility of the clinical team and willingness to help each other allowed me to relax knowing I could be honest about my needs and would be supported both now and in the future.

CLINICAL EXPERIENCES

I did have some previous clinical experience when part of our posturecare department handling specialist seating so the switch to orthotics clinics was not a completely new experience,

but I did find the range of stock products available eye opening. Having been involved in the manufacture of bespoke items for a long time my knowledge of the stock ranges of orthotic items was minimal and still to be one of the more challenging aspects of the job when prescribing a device for a patient.

UNDERSTANDING OF CLINICAL ORTHOSIS JUSTIFICATION

As a former technician I often used to manufacture various devices where a device prescription would have multiple variations of straps, padding, wedging, lining and design elements but I would have no knowledge as to why that combination had been chosen for the patient. My experience over the last year through the apprenticeship and in clinic, has allowed me a greater understanding of device prescriptive justification, and why devices are prescribed with variations for patients with similar presentations. For example, understanding why some clinicians get better results for certain conditions and presentations using met bars over met domes allows me going forward to tailor my approach and provide alternative options should outcomes not be as anticipated.

MEASURING VARIABLES IN CLINICAL SETTINGS

I had found in my technician role that measures on bespoke device specifications sometimes didn't match up to a cast provided or some measures seemed out of place in comparison to others provided. I previously always found this difficult to comprehend how some measurements could be this varied. I have found myself in clinic double checking measures regularly where something has seemed off when I have noted the measure or I was aware a particular measurement needed to be particularly accurate. I have been surprised when measuring the same thing twice how often a variation of up to 10mm can be achieved with little change in the placement of the tape

measure on the patient or simply by the tape conforming over the patient at a slightly different angle can have such impact.

THE APPRENTICESHIP EXPERIENCE

The challenge and the change of environment from my previous roles has been an enjoyable but challenging experience as I adjusted back into life in a clinical setting after around 5 years. I began shadowing multiple clinicians and clinics to gain a baseline for how everyone operated and the variations in style between individuals. The biggest adjustment for both me and my colleagues has been the approach required with me as an apprentice and the more typical students they are used to having during placements. Placement students typically require direction and reaffirming of their knowledge base from their course where an apprentice requires clinical processes and reasoning to be shown and explained in more detail particularly in the first year. This is due to the education process being run alongside the clinical aspects of training rather than the clinical side following the background education. I personally believe as I am hands on learner the apprenticeship is potentially a better route for me.

PACE OF CLINIC/ABSORBING INFO

My clinical experience over the first year of my apprenticeship has been very positive and my colleagues have made me instantly feel part of the team I can't speak highly enough of their efforts to help. I have found the pace of clinic does provide some minor inconveniences with reaffirming or discussing some of the knowledge learned during the course modules as time is sometimes limited to discuss topics in detail or absorbing information discussed can sometimes be challenging. Some colleagues do sometimes provide simple tasks during the clinic to improve performance or provide topics to investigate during the week before next clinic to aid with retaining information.

FEELING CLUNKY

Naturally I gravitate toward following repetitive processes which, as a former technician, I developed a set of repeatable manufacturing stages for all the devices I worked on be that orthoses, footwear, or wheelchair seating. I believe this method of working in repeatable step by step stages minimised any errors and allowed me to produce devices with consistency and to a high manufacture quality. I have found in clinic I am gravitating toward a similar method for handling appointments where I follow patterns for patient interaction, including things like explaining wearing in procedures for devices. I have found myself feeling very clunky in places during interaction with patients as I try to find the most suitable formats for explaining or handling clinic processes to suit me. I am confident this will settle over time with repeated interactions and feel it will only benefit my consistency in clinic in the long term.

BRAIN MUSH

One of the few things I have found while in clinic juggling

things like knowledge implementation, patient interaction and former technician experience into the role there have been a couple of instances where my brain has turned into mush and one of my colleagues has stepped into to refocus me or help where necessary. This is due to processing several bits of information at the same time. Information provided by the patient, personally understanding the reasons for this happening, what is required to help and my former technician side working out the best way to manufacture it if required. This will reduce with time as I progress through the apprenticeship as some of these elements will become second nature.

RETURN TO LEARNING ENVIRONMENT AS MATURE STUDENT. WORK LIFE BALANCE.

As a parent the challenges that accompany returning to higher education have been the biggest hurdle to overcome. Although provided with a consistent study day outside of clinics to complete the course material the volume of material and additional reading to get through does mean I have to plan to find the additional time required for study. Although challenging I have found a work/study pattern that works for me allowing to keep weekends free for normal family and the less glamorous life related activities such as sorting the washing. The modules tend to run for approximately 10 weeks with a break in between but typically I do find this to be most difficult around week 8 of the cycle as repeated long work/study weeks begin to catch up on me.

OWN HEALTH

In July 2025 I had a generalised tonic-clonic seizure while asleep for the first time with me being unaware until coming round after finding myself sat on the edge of the bed with my wife and two paramedics in the room. Since I have received a suspected diagnosis of focal onset or temporal lobe epilepsy due to a history of slight funny turns which is suspected as possible focal onset seizures and undergoing tests to confirm. I have started medication to hopefully reduce the risk of further seizures, but it has been an adjustment process and naturally I am personally quite disappointed. Being unable to drive for 12 months following the seizure is quite frustrating, although I have full confidence in receiving ample support from my colleagues and I am confident it will not hamper my ability to complete the course and career going forward.

GOING FORWARD

Overall, the experience has been a good one and I have found the last year to be informative and challenging, providing me with the motivation to improve my abilities and skillset going forward. Although for the next twelve months I will feel worried and a burden on everyone, once my medication has had time to take effect and hopefully normality has resumed, I hope being open and honest about this bump in the road will turn out to be a positive, following completion of the course and I am hopefully in my potential new role.

Shaping the future



A day in the life of a prosthetics and orthotics lecturer

By Naveed Ahmed, Lecturer, Keele University

When people think about prosthetics and orthotics (P&O), they often picture the clinical environment – patients being fitted with P&O devices, clinicians fine-tuning alignments, and the joy of restored mobility. What many do not see is the academic side of the profession: the educators who prepare the next generation of prosthetists/orthotists.

I am Naveed Ahmed, a lecturer on the MSc in Prosthetics and Orthotics programme at Keele University. This two-year pre-registration programme, launched in January 2022, equips students with the knowledge and practical skills to excel in this rewarding profession. I joined Keele in September 2021, bringing over a decade of experience in P&O across Pakistan, the UAE, and Saudi Arabia. Since graduating in 2008, I have primarily worked in academia, blending teaching, research, and clinical engagement to advance the profession.

In this article, I'll take you through a typical day in my life as a lecturer at Keele University – a role that combines education, research, and advocacy for our profession.

TEACHING AND PREPARATION

My typical working day begins at 9am, often after an early start catching up on emails, responding to student queries, and reviewing assignments. Recently, I delivered a session on **transtibial prosthetic socket designs and alignment principles** – a core topic in lower-limb prosthetic rehabilitation. Preparation involves updating lecture slides, refining case studies, and ensuring practical components are ready.

By 9:30am, the lecture begins. I start with a theoretical overview before moving into case-based discussions. One of the most rewarding aspects of teaching at MSc level is the diversity of the student cohort. Some come from clinical backgrounds, others from engineering or health sciences. This diversity sparks rich discussions and challenges me to adapt my teaching style to different learning needs.

After the lecture, we move into the practical session. Here, students work in groups to assess expert patients, take measurements, and simulate prosthetic fitting. I move around the room, observing, guiding, and asking probing questions:

- "Why did you choose that socket design or suspension system?"
- "How would this alignment affect patient gait?"

These moments are where theory meets practice, and where students begin to think like clinicians.

STUDENT MENTORING, PLACEMENTS, RESEARCH, AND CPD

Mentorship plays a vital role in supporting student success and addressing challenges that may impact learning. Here at Keele University, like my fellow teaching staff, I extend my responsibilities beyond teaching by actively mentoring students throughout their academic journey, ensuring they feel supported both academically and personally.

Placements are critical for preparing P&O students for real-world practice. **As Placement Lead**, I coordinate clinical placements, ensuring they align with professional standards and programme objectives. This involves regular meetings with clinical partners to discuss logistics and maintain strong relationships with service providers.

Being a lecturer in prosthetics and orthotics is more than a job; it is a privilege. Every day, I have the opportunity to shape the future of our profession, inspire the next generation of clinicians, and contribute to improving patient care.

Research is a cornerstone of an academic role. My current interests focus on **3D printing in P&O** and its potential to transform clinical practice. I also engage in research within our **Movement Analysis Laboratory**, where I explore the biomechanical implications of various P&O concepts – work that directly informs both my teaching and scholarly activity. This research engagement includes supervising students as they undertake their dissertations, providing structured guidance in the formulation and exploration of their chosen topics.

Also equally important is continuing professional development (CPD). I regularly attend courses, workshops, and seminars to stay updated on clinical innovations and evidence-based practice. I also engage in training on effective teaching strategies in higher education to continually improve the student learning experience. Like most recently, I completed training on 'Designing Simulation Sessions' to enhance teaching and better support students during placements.

PROMOTING THE PROFESSION AND REFLECTION

My responsibilities extend beyond classroom instruction to encompass active advocacy for the P&O profession. I engage in national initiatives such as Allied Health Professions (AHP) Day, P&O National Day in collaboration with BAPO, and recruitment events like Open and Visit Days, interviewing prospective students and the P&O Summer School, which introduce prospective students to the profession and our academic programme. I also attend national conferences to present my

work, network, and advocate for innovation in clinical education.

No academic role is complete without its share of administrative tasks. From updating module handbooks to attending departmental meetings, these responsibilities ensure the programme runs smoothly and meets accreditation standards.

I also contribute to curriculum development discussions, ensuring our programme reflects current best practices and prepares graduates for the realities of clinical practice and uphold accreditation standards and pedagogical excellence.

As reflection helps us to continuously improve our work, I take time to reflect on the day to better prepare for upcoming sessions. I also encourage the students to adopt this reflective approach as part of their professional identity formation.

CLOSING THOUGHTS

Being a lecturer in prosthetics and orthotics is more than a job; it is a privilege. Every day, I have the opportunity to shape the future of our profession, inspire the next generation of clinicians, and contribute to improving patient care. For me the best part of my role is seeing **students graduate and join the workforce** – knowing they are ready to make a real difference in people's lives is the most rewarding feeling.

For those considering a career in academia, my advice is simple: embrace the diversity of the role, stay curious, and never lose sight of why we do what we do – to enhance mobility, independence, and quality of life for the people we serve.

allard
Support for better life!

Introducing
CROSS™ Hemi Shoulder
Designed for independent use,
optimal comfort, and enhanced
rehabilitation.

For patients with shoulder
subluxation or pain after stroke,
hemiplegia, or brachial plexus injury.



Learn more at allarduk.co.uk



somek
associates

Medico-legal consultancy

Join our expanding team of Expert Witnesses

We are the largest provider of HP expert witnesses in the UK, renowned and respected in the field

Orthotists and Prosthetists play a key role acting as expert witnesses in clinical negligence and personal litigation.

We require experienced Orthotists and Prosthetists to act as Expert Witnesses. If you are confident, have excellent communication skills, enjoy a challenge and are intrigued by the forensic nature of this work – this could be the position for you.

We offer you:

- ✓ Casework to fit in with other work; you work on a self-employed, flexible basis, alongside your "day job"
- ✓ Excellent remuneration
- ✓ Access to our Annual Training and Resource Package

Requirements:

- ✓ Practising clinically in a senior role (Prosthetists in a private setting; Orthotists in either a private setting or the NHS) with a minimum of 7-8 years' post qualification experience
- ✓ Previous medico-legal experience not essential
- ✓ Registered with the HCPC

Contact us:

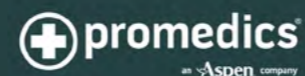
✉ applications@somek.com

☎ 01494 792 711

www.somek.com



VRTX & VISTA II CTLSO Improvements



The groundbreaking, off-the-shelf cervical to sacrum spine system now with additional improvements.

Improved Materials in the Anterior Yolk

Gives the patient and clinician greater security and confidence when fitting and re-adjusting.

Edge-Bound Liners

Increase longevity, improves aesthetics, and simplifies the changing and cleaning process.

New Internal Leash on the Plastic Lateral Panel

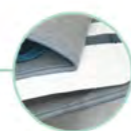
Improves stability of the components and ensures the panel does not migrate.

Improved Material in the Posterior Cassette

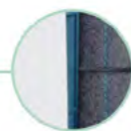
Increases strength and durability.



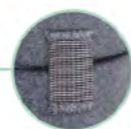
Aspen VRTX CTLSO



Sewn Belt Component to Plastic Lateral Panel
Reduces play and improves ease of operation.



Re-routed Pull Tab Cord
Removed small holes on either side of posterior covering and routed pulley cords under the D-Ring to improve operation and further strengthen the posterior cassette.



New Cord Management Strap
Reduces play in the cord, prevents tangling, and ensures the pull tab stays oriented correctly.



Aspen Vista II CTLSO

All improvements also apply to the Vista II CTLSO which integrates the same technology as the VRTX CTLSO.

T: +44 (0) 1475 746 400 | E: enquiries@promedics.co.uk | www.promedics.co.uk



ottobock.

Nexgear Tango ankle.

Dynamic. Modular. Powerful.

Unlock better clinical outcomes with a joint that combines advanced engineering with patient centred design - supporting improved gait, reduced energy expenditure, and a more natural walking experience.



Test Brace

Tango ankle – one joint, many possibilities

For those with partial or total paralysis of the leg, the **Nexgear Tango** can be used unilaterally or bilaterally, up to 160kg and is available in steel or titanium.

Modular by Design

Swap components in seconds. Adjust stiffness, alignment, and function without rebuilding the entire device. **Nexgear Tango** adapts as your patient's needs evolve - saving time, reducing remakes, and improving clinical efficiency.

Natural, Responsive Gait

Nexgear Tango's advanced energy return architecture supports smoother transitions and a more physiological gait pattern. Give your patients stability without sacrificing mobility.

Precision Fit, Predictable Performance

The **Tango Fit-Kit** includes all four function modules in each size, all the springs and the required tools. During the fitting process modules and springs can be tested on the user with the **test brace** to find the proper setting and alignment before ordering the final product.

For additional information or to organise a patient trial, reach out to the Ottobock Academy team at:
orthoticsuk@ottobock.com



#WeEmpowerPeople
www.ottobock.com



ÖSSUR
LIFE WITHOUT LIMITATIONS

Navii®

Expand Your World

Waterproof freedom

Navii's IP68-certified design thrives in any water - salt, chlorinated, or fresh. Whether diving into the ocean, relaxing at the pool, or walking through the rain, Navii is built to perform.

Style inspired by nature

Express yourself with the Earth Echos Collection. Choose from five nature-inspired covers - Onyx Black, Wave Blue, Mosi Green, Adobe Red, and Luna Grey. Magnetic snap-on covers let you switch effortlessly to match any mood, outfit, or occasion.

Seamless performance

Navii delivers advanced stability, smooth movement, and unmatched durability to keep up with your active lifestyle.

Navii - Empowering Every Step, Everywhere.

Visit www.ossur.com or scan the QR code to learn more.

