





Living with Limb Loss Support Model*

The Living with Limb Loss Support Model (LLSM) is developed directly from research (*Caring and Coping: The Family Perspective on Living with Limb Loss¹*) exploring how persons with limb loss (PWLL) and their families live with limb loss. Findings demonstrated, firstly, that the coping levels of the PWLL and their family carers could differ at any one time and that coping levels of those in the caring relationship ought to be assessed separately. Secondly, distinct stages across the life course were identified, to which differing support and care needs can be aligned. This Model is intended for support organisations to use as a tool to better understand, and support, PWLL and their families.

Coping and Limb Loss

Individuals can experience three levels of coping: low, middle and high. These are set out below, alongside examples of behaviours/attitudes of PWLL that service providers/or health professionals could observe that might indicate how well the PWLL and their caregivers are coping:

Coping Level	Characteristics	PWLL Examples	Family Carer/s of PWLL Examples
Low	PWLL: being passive e.g. constant reliance on another Carer: high emotional burden e.g. constant worry	 Reliance on another to maintain Activities of Daily Living (ADLs) Reluctance to mobilise Not managing own health conditions Reluctance to socialise/isolation Not admitting to needing help and support 	 Constant monitoring of PWLL's physical needs Constant worry about what could happen Reluctance to socialise Not admitting to needing help/support Not managing own health conditions
Middle	PWLL and Carer: active e.g. establishing safe routines	 Managing own ADLs Mobilising independently Managing own health conditions Liaising with health/support services Socialising 	 Intervening in ADLs only when needed Acceptance that accidents can happen Recognition when struggling to cope Managing own health conditions Enabling/encouraging PWLL to go out independently
High	PWLL and Carer: increased capacity of self-awareness, self-care and self-efficacy	 Managing own ADLs Actively seeking help and support Forward planning ahead re. current and future health and living needs 	 Actively seeking help and support Independently socialising Thinking ahead Being realistic re. future needs

Diagram 1 Assessing coping levels of PWLL and their family carer/s

It must be noted that coping is a changing process in which individuals in the care relationship can display differing levels of coping at any one time. Therefore, it is recommended that each person be assessed separately.

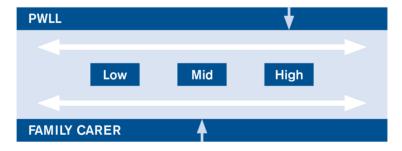


Diagram 2: Example of differing individual coping levels for the PWLL and family carer/s

Living with Limb Loss Life Course

In the living with limb loss life course there are distinct stages, each characteristic of needs, during which levels of coping can fluctuate. Support/information giving needs to be timely in relation to the limb loss life stage and in relation to the individual's level of coping. Running alongside this is the individual's socio-cultural position, and timely interventions need to recognise the lasting effect of individual legacies.

The relationship between individual legacies, stages in injury recovery and coping are shown overleaf in a summarised version of the LLSM:

¹Engward, Fleuty & Fossey. 2018. Caring and Coping: The Family Perspective on Living with Limb Loss. Blesma, available at www.blesma.org/familiesproject

^{* &#}x27;Caring and Coping: The Family Perspective on Living with Limb Loss', in partnership with Blesma and funded by the Forces in Mind Trust

Rec	overy Stage	PWLL* and Family/Carer Support Needs**	Organisational Support
Acut injury Shor withi	vent and billisation Ite stage of ry/illness Ite term, usually nin acute fessional lth services	Information: Diagnosis, prognosis and treatment/s Physical: Initial learning how to do/assist with ADLs*** Emotional: Honest about what to expect physically and emotionally. Worry about how to cope and manage future changes to lifestyle Learning: Family/Carer - Inclusion within rehabilitation therapies to learn how to assist in PWLL recovery	Organisational visibility Realistic and honest information giving about physical/emotional aspects of immediate effects of limb loss for the PWLL/family/carer Encouraging family members to engage in care and rehabilitation services, especially moving and handling, and managing ADLs Signposting re. support services/charities, support groups for PWLL and family/carer Ensuring initial contact and access to prosthetic services
retu and Reha stag withi reha heal	reparing to urn home I discharge habilitation ge usually hin professional/ abilitation Ith services. derate term	Preparing to return home: Physical: Focus on physical needs such as safe mobilisation of PWLL, care of the stump, understanding medications Emotional: PWLL – May feel able to cope and confident on skills to mobilise/self-care whilst in professional care Family/Carer – May experience low coping and uncertainty about return home and how they might cope Discharge: Both – Initial low coping and feelings of isolation on discharge/being alone in the home environment Learning: Practicing new ADL skills, being involved in rehabilitation therapies. Medication management. Managing multi morbidities (PWLL and Partner) Feedback: On how each is doing in learning new caring skills. Feedback on emotional coping	Preparing to return home: Checking home environment is safe and suitable to enable independent living of PWLL and family/carer Independent assessment of coping levels of PWLL and family/carer Signposting immediate care service support Checking management of co/morbidities and medication Being visible on immediate discharge Discharge: Re-enforcement of moving and handling techniques to PWLL and family/carer Independent assessment of coping levels of PWLL and family/carer Realistic and honest information giving about physical/emotional aspects of intermediate effects of limb loss for the PWLL/family/carer Checking with wider family information needs, and understandings of types of support available
First after return	eing home t few months PWLL Irns home derate term	Physical: Focus on physical needs, safe mobilisation, fear that harm might occur Emotional: PWLL - Anxiety and frustration re. difficulties self-caring in the home environment May lose confidence as unable to compare their progression with others with limb loss Family/Carer - High anxiety about whether they are good enough to support PWLL Possible frustration re. new role as carer Both - Feelings of isolation on discharge. Difficulty in adapting to providing care in the home Training: Additional support to manage care in the home e.g. safe moving and handling Feedback: On how both are coping in the home with physical care and emotional care	Checking with wider family information needs, and understandings of types of support available Independent assessment of coping levels of PWLL and family/carer Assisting in setting relevant and achievable goals for PWLL/family/carers Where relevant, enabling contact with others with limb loss at a similar limb loss stage Moving and handling support and learning for PWLL and family/carers Pain management information giving/support Signposting long-term care service support Checking co/morbidities (if any) are being managed in both PWLL and family/carer
After of ac in th	dapting peing with b loss er a period djustment ne home g term	Physical: Focus on safe and independent self-care. Established routines Emotional: PWLL - focus on 'what next' and future opportunities. Resuming pre-limb loss living activities. Where not possible, refocus on new activity Family/Carer - wish to resume aspects of living pre-limb loss, such as employment, hobbies Both - Opportunities to talk about limb loss and seeking support from others in similar situations Feedback: Continued on how they are coping in the home, and possible future support requirements	Independent assessment of coping levels of PWLL and family/carer Checking prosthetic service access/support Reassessment of home living support needs e.g. suitability of home, adaptations Checking co/morbidities (if any) are being managed in both PWLL and family/carers Assistance in setting achievable goals to reinstate life pre-limb loss, such as social activity, resuming hobbies/interests
forw	lanning vard g term	Physical: Maintaining independence Managing co/morbidities and changes in stump/prosthetic care Emotional: Both - Not admitting to changes in physical states to manage self-care/care for other Feelings of lower coping and anxiety about what might happen to each other Information: Opportunity to talk about concerns with others in similar situations Feedback: Honest separate appraisal of how well PWLL and family/main carers are coping	Independent assessment of coping levels of PWLL and family/carer Planning for the long term: pensions/finance etc. Information about alternative safe housing/living/financial support directed to PWLL, family unit/carer as relevant Where necessary, helping in family conversations re long term future care and support needs of the PWLL/family/carer

^{*}PWLL refers to Person with Limb Loss

C. Engward. H. (2018)

 $^{^{\}star\star} Family/carer\ refers\ to\ those\ central\ in\ the\ care\ of\ the\ PWLL.\ This\ may\ refer\ to\ a\ partner\ of\ the\ PWLL,\ or\ sibling/s,\ or\ friend/s,\ or\ child/ren$