



Professional roles in the care of lymphoedema

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The British Lymphology Society is a multi-disciplinary group of healthcare professionals and other interested parties directly involved in promoting the management of lymphoedema or interested in furthering the work of the Society.

This document is part of a series of British Lymphology Society (BLS) documents which replace and expand the previous BLS guidelines which were as follows:

- Guidelines for the use of Manual Lymphatic Drainage and Simple Lymphatic Drainage
- Chronic Oedema Population and Needs 2001
- Framework for Education 2001 & 2006
- A Strategy for Lymphoedema Care 2001

Current BLS Documents

The current BLS documents are provided to promote professional standards among therapists and those advising or caring for a person with, or at risk of the development of lymphoedema: All documentation has been written in relation to the adult patient with lymphoedema. Data and standards for the treatment of children with lymphoedema have been written by the Children's Lymphoedema Special Interest Group (CLSIG) and can be found on the British Lymphology Society website. www.thebls.com

This document is highlighted below in bold and replaces and adds to the previous document known as 'Framework for education 2001 & 2006'. The other BLS documents in the current series are as follows:

- An introduction to lymphoedema – overview of the main presentations; pathophysiology of lymphatic disorders; staging of lymphoedema and oedema at the end of life and quality of life findings for those with the condition.
- Evidence review – Management of lymphoedema and recommendations for future research.
- ***Professional roles in the care of lymphoedema.***
- Population needs assessment.
- Standards of practice for lymphoedema services.
- A Lymphoedema Commissioning brief (a version for commissioners and a version for clinical managers 2014).
- Guidance for the management of Obesity Related Lymphoedema (2013; updated January 2016).

1.0 Introduction

1.1 Purpose of this document

- To outline lymphoedema professional roles and responsibilities.
- To outline the level of educational attainment needed to perform each lymphoedema professional role.

This document aims to offer guidance on professional roles within Lymphology which may, subsequently, help to inform service design and development. Consideration needs to be given to the level of skill and knowledge required from health care professionals to reflect the complexity of the patients and ensure that decisions made are clinically safe and effective. It is the responsibility of individual practitioners and their managers to ensure that they have the knowledge, skills and support appropriate to meet the defined needs. Substantial changes have been made to the BLS' original document 'Population and needs assessment 2001' to reflect the shift from solely lymphoedema to include chronic oedemas and to encourage the delivery of treatment interventions at the point of care.

1.2 Lymphoedema overview

Lymphoedema arises when the lymphatic system inadequately fulfils its function of regulating fluid balance in tissue spaces. This results in oedema or swelling, which may occur anywhere in the body, but most commonly affects the limbs. It also causes changes in the skin and body tissues, which do not occur in other chronic oedemas. Lymphoedema may be classified as being **Primary** or **Secondary**.

Lymphoedema is not curable, but can be controlled. Key aims of management are to minimise swelling, reduce secondary complications from the swelling, enhance quality of life and promote self-management. The earlier the condition is diagnosed and treatment is initiated, it's management is likely to be less costly and treatment outcomes more successful. If untreated, the swelling is likely to worsen over time, cause considerable physical and psychological distress, and impact on activities of daily living and employability. Treatment is likely to be more difficult and costlier overall. It is important that diagnosis is made by a qualified health professional with appropriate training. Individuals with subclinical, established lymphoedema or chronic oedema have the right to comprehensive assessment of their unique needs. Patients should be given information and support, enabling them to become active participants in making informed decisions and setting and achieving realistic goals about treatment and lifestyle choices.

2.0 Skills for Health Framework and educational requirements

This section outlines the specialist skills framework for healthcare professionals who provide care for the range of lymphoedematous conditions. (Lymphoedema Framework 2007)

Roles for Lymphoedema Service practitioners (Lymphoedema Framework 2007)

Title & code	Skills for Health Careers Framework level (not Agenda for Change grades)	Key skills and knowledge components required (specific to Lymphoedema)	Required educational level
Lymphoedema Assistant (LA)	4	<ul style="list-style-type: none"> • Works at all times under the direction and guidance of a state registered practitioner, probably at CF level 6, who would be responsible for treatment decisions and planning care. • Undertakes basic assessment, e.g. measurement of limb volume and basic treatment, skin care and care of compression garments. • Administers simple Lymphatic Compression Bandaging (LCB) in conjunction with Lymphoedema practitioners. • May carry out other treatments as agreed with the Lymphoedema practitioner. 	<p>National Vocational Qualification (NVQ) level 3 or equivalent in Assessment of Prior Experience Learning (APEL).</p> <ul style="list-style-type: none"> • Possibly studying towards a foundation Degree or Higher National Diploma (HND). • Appropriate training in treatment modalities if used i.e. LCB, Manual Lymphatic Drainage (MLD), Kinesio-tape, Intermittent Pneumatic Compression (IPC). • Appropriate clinical training in self-management guidance given to patients. • Can competently measure for volume differences of an affected limb and assess relevance of patient reported symptoms, seeking guidance from a Lymphoedema practitioner as appropriate. • Appropriate training in the fitting of compression garments.

Title & code	Skills for Health Careers Framework level (not Agenda for Change grades)	Key skills and knowledge components required (specific to Lymphoedema)	Required educational level
Lymphoedema Practitioner (LP)	5	<ul style="list-style-type: none"> • Plans care for those with uncomplicated Lymphoedema and those with stable Lymphoedema in long-term management including skin care, exercise, simple lymphatic drainage (SLD) and compression garments. Also performs simple LCB under guidance of a practitioner at CF level 6 or 7. • Undertakes assessment, monitoring, patient support and information provision. • Makes referrals to other disciplines as necessary. • Acts as a resource for colleagues. 	<ul style="list-style-type: none"> • State registered practitioner • Diploma. • Degree level education and appropriate clinical training in assessment and management of uncomplicated Lymphoedema.
Lymphoedema Specialist Practitioner (developmental post) (LSP)	6	<ul style="list-style-type: none"> • Manages all types of Lymphoedema with a degree of autonomy and responsibility for own caseload under supervision of Lymphoedema Advanced Practitioner. • Supports and guides practitioners at CF level 4 and 5. • Developing towards a CF level 7 role. 	<ul style="list-style-type: none"> • State registered practitioner with degree level education and training as for CF level 5 plus a recognised/accredited Lymphoedema management certificate incorporating intensive therapy, manual lymphatic drainage (MLD), Lymphatic Compression Bandaging (LCB) or working towards as an immediate leaning goal.

Title & code	Skills for Health Careers Framework level (not Agenda for Change grades)	Key skills and knowledge components required (specific to Lymphoedema)	Required educational level
Lymphoedema Advanced Practitioner (LAP)	7	<ul style="list-style-type: none"> • Experienced clinical professional empowered to make high level clinical decisions and who has high standards of theoretical knowledge and clinical skills (including assessment and diagnosis of Lymphoedema and other conditions). • Manages and leads developments within own service while retaining a key clinical and educational role. • Supports and acts as a resource for Lymphoedema practitioners and Lymphoedema specialist practitioners (of levels 5 and 6) 	<ul style="list-style-type: none"> • State registered practitioner with a degree level (or equivalent) course in Lymphoedema management. • Holds or is working towards a Master’s degree. • Training in comprehensive clinical examination skills.
Lymphoedema Consultant Specialist (LCS)	8	<ul style="list-style-type: none"> • High level strategic role in developing and managing services perhaps for a health board/authority. • In addition to being a clinical expert, undertakes research perhaps working towards leading and coordinating research or supporting others in research activities. • Involved in education, teaching at a high level, perhaps with honorary university appointment to support research activity. • Clinical commitment would be condensed and focus on complex cases and offering support to other clinical team members. 	<ul style="list-style-type: none"> • State registered practitioner with appropriate clinical training as above. • Holds a Master’s degree, ideally working towards a Doctorate.

In addition, BLS supports the recognition of the role of ‘Specialist Practitioner in an adjacent field’, which describes healthcare professionals involved in the frequent care of/contact with the patient with lymphoedema/ chronic oedema, whose primary function is in an associated speciality. Education of this category of healthcare professional is essential to ensure awareness of lymphoedema risk factors, information provision and early referral. ‘Specialist Practitioner’s in an adjacent field’ will be at band 6 and above and include healthcare professionals in the following specialities:

- Cancer specific Clinical Nurse Specialist (CNS) and specialist Allied Healthcare Professionals (AHP’s).
- Tissue viability CNS or specialist practitioners.
- Long term conditions specialist i.e. rheumatoid arthritis, multiple sclerosis and other neurological conditions.
- Advanced cancer and specialist palliative care.

These professionals may work with those ‘at risk of developing lymphoedema’ (for example, during acute treatments such as radiotherapy or surgery), with sub clinical (referred to as latent lymphoedema), or established lymphoedema and may therefore be the first point of contact for the patient.

Practitioners at this level do not have the skills and knowledge to assess patients or offer care independently when swelling occurs in the head and neck, chest/breast or abdominal/ genital region. This is more appropriately provided by lymphoedema specialist practitioners.

However, these healthcare professionals do have a role, supporting those with lymphoedema, and, as such, need to be up to date with clinical management guidelines. Therefore, relevant skills and knowledge have been recommended in the skills framework.

Healthcare professionals who wish to carry out further care and support to patients who have more complex needs, or to undertake any other aspects of intensive treatment, need to undertake formal accredited lymphoedema specialist training prior to delivering this care.

Adjacent Lymphoedema Roles (Lymphoedema Framework 2007)

Title & code	Skills for Health Careers Framework level	Key skills and knowledge components required (specific to Lymphoedema)	Required educational level
<p>Specialist Practitioner in an adjacent field (SP)</p> <p>(new category created by the BLS as previously described)</p>	<p>Band 6 and above – qualified health care professional</p>	<p>There are main areas of clinical support these professionals may offer to those at risk, with sub clinical or established lymphoedema.</p> <ul style="list-style-type: none"> • Information giver. • Sign posting and referral to local specialist services. • Supporting those who developed subclinical swelling of a limb or limbs or where patient reported symptoms may indicate the onset of lymphoedema. • As part of a multi-disciplinary team providing supportive care to any patient with lymphoedema or chronic oedema where care is over seen by a lymphedema specialist, for example, community nurse. 	<ul style="list-style-type: none"> • State registered practitioner (nurse, doctor or AHP) working in an adjacent specialist field such as cancer or end of life care, tissue viability or long term conditions speciality relevant to lymphoedema or chronic oedema. • Educated to degree level in their specialist field. • Appropriate clinical training in assessment and management of uncomplicated Lymphoedema. • Has the knowledge to initially assess a patient with early swelling and can competently measure for volume differences in an affected limb and assess relevance of patient reported symptoms.

Has knowledge of preventative advice for those at risk of developing lymphoedema as laid out in International Lymphoedema Framework Best Practice Guidance (2006) and is able to distinguish between myths and factual advice.

- Has knowledge of risk/high risk factors for developing lymphoedema and patient reported symptoms which may indicate the commencement of lymphoedema.
- If individual has received appropriate training: if early uncomplicated lymphoedema is present in a limb (s) - has the knowledge and skills to fit compression garments, give advice on positioning, elevation and movement and advice on the care of the skin, including prevention and management of cellulitis.
- Healthcare professionals at this level will not routinely carry out manual lymphatic drainage, advice on self-lymphatic drainage; provide multi-layer lymphoedema bandaging or any other recognised treatment for lymphoedema.
- Will refer to a specialist lymphoedema practitioner if patient's symptoms and presentation deteriorates/deviates from these parameters.

If fits compression garments:

- Has attended training in assessment of lymphoedema and chronic oedema and can determine when a life threatening cause of swelling may be present, such as a new or recurrent malignancy, thrombosis or infection and responds to this appropriately.
- Has attended training in the selection and fitting of compression garments.

Definition of Terms

Cellulitis: an infection of the skin and subcutaneous tissues.

Compression garments: are required for life long containment of oedematous limbs:

- Flat knit: knitted as a flat (made to measure) piece and joined with a seam.
Material is firmer and thicker than a circular knit garment.
- Circular knit: knitted on a cylinder with no seam. Garments are shaped by varying stitch height and yarn tension.

Lymphatic Compression Bandaging (LCB): a specialist bandaging technique used to encourage lymph movement and reduce fibrosis.

Manual lymphatic drainage (MLD): a specific form of massage to stimulate the lymphatic system.

Abbreviations:

AHP: Allied Healthcare Professional.

BLS: British Lymphology Society.

CNS: Clinical Nurse Specialist.

IPC: Intermittent Pneumatic Compression.

LA: Lymphoedema Assistant.

LAP: Lymphoedema Advanced Practitioner.

LCB: Lymphatic Compression Bandaging.

LCS: Lymphoedema Consultant Specialist.

LP: Lymphoedema Practitioner.

LSP: Lymphoedema Specialist Practitioner.

MLD: Manual Lymphatic Drainage.

SLD: Simple Lymphatic Drainage (self-massage)

SP: Specialist Practitioner in an adjacent field.

References

International Lymphoedema Framework & Canadian Lymphoedema Framework. The management of lymphoedema in advanced cancer and oedema at the end of life. (2010)

Lymphoedema Framework. Best Practice for the Management of Lymphoedema. International consensus. London: MEP Ltd, 2006.

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