



18<sup>th</sup> December 2019

Dear Member

### **BOA/BASK/BHS communication about changes to knee revision surgery in England**

The BOA, BHS and BASK, wish to inform our members about developments in the way that complex joint replacement surgery will be provided in England. This is a pilot project that will initially affect revision knee replacements but will potentially apply to revision hip replacement next and then other subspecialties in future.

The BOA and specialist societies have a strong track record of working together and with others to promote high quality practice, patient safety and the best patient outcomes. As you will be aware, the Getting it Right First Time report of 2015<sup>1</sup> highlighted concerns about revision arthroplasty surgery being undertaken across a large number of units, some of which undertook very few each year and were limited in their expertise in this area. The report drew the following conclusions:

- “Consideration should be given to revision surgery being approached on a regional basis and delivered by networks of appropriately experienced surgeons at a smaller number of locations.”
- “DH and NHS England should encourage behaviour change” (e.g. through Tariff funding)

Over recent months, a framework has been developed for a hub and spoke network model of care that will be piloted first for knee revision cases, and which will receive additional funding through NHS England. An article explaining this process has been published in the December 2019 edition of the Journal of Trauma and Orthopaedics. The main features of the proposed model are:

- Low volume centres to cease undertaking knee revision cases, and have a pathway to refer patients to one or more other centres within their region. The threshold for defining a referral unit is still to be decided and may need to take account of local and regional arrangements. Eventually such centres will not receive any funding for knee revision work.
- Medium and high volume revision centres (spokes) will continue undertaking straightforward first time knee revision cases. Tariff will continue to be paid at the agreed level. All revision cases must be discussed at a properly constituted and documented MDT (multi-disciplinary team) meeting.

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<sup>1</sup> <https://gettingitrightfirsttime.co.uk/wp-content/uploads/2017/06/GIRFT-National-Report-Mar15-Web.pdf>



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- Complex revisions, second (and subsequent) revisions and those for infection will be referred to a regional specialist “hub” centre. The hubs will receive patients from other hospitals in the region and will have in place the expertise and facilities to deliver complex surgery as well as planned session time for complex revision regional MDTs. Additional funding will be provided to establish the necessary regional MDT network and an up-lift to tariff to account for the complexity of the work will be available.

The details of how the model will work are likely to vary from region to region. BASK are currently working with nominated lead clinicians to hold discussions about the best configuration for each region. In most regions these discussions are underway but in others they are at an earlier stage. If you are at a hospital that hasn't yet been engaged in this process, you are encouraged to get in touch using the contact details below to help ensure this takes place. The pilot is due to be initiated during 2020, but recognising that different regions may take different amounts of time to adopt this, depending on how much change is required to achieve the new model.

The model has been developed by BASK and is supported by the BOA. It is expected that a further expansion into hip revision will be a next step and could follow a similar model in due course, with leadership from BHS. Throughout this process, we recognise that full engagement with all relevant stakeholders and all of our respective memberships is important. We will continue to update and involve you as these projects move forward.

In relation to the funding model to support the new system, this has been prepared by the NHS England pricing team with input from BASK and BOA. (For those who would like to learn more about this, the Section 118 Tariff consultation is due to have additional details and is expected to be launched soon.)

We are all keen to ensure the success of this work, as it presents a great opportunity for the specialty to enhance and improve what we already do in promoting the very highest quality of care for all patients. If you have any comments you would like to make, please contact [policy@boa.ac.uk](mailto:policy@boa.ac.uk), from where your enquiry can be directed to the most suitable person or people across the BOA, BASK and BHS. (Please note, for GDPR purposes, email contact to this address may be forwarded – including any contact details contained on the email – to senior clinicians and staff within the BOA, BHS and BASK in order to handle your enquiry.)

Kind regards

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BOA President

Prof Andrew Price  
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Steve Jones  
BHS President