Interim Clinical Commissioning Policy: Hip resurfacing

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Interim Clinical Commissioning Policy

*Hip resurfacing*

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Policy Statement

NHS England will commission Hip resurfacing in accordance with the criteria outlined in this document.

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

This policy document outlines the arrangements for funding of this treatment for patients where NHS England directly commissions this service.

Equality Statement

NHS England has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as enshrined in the Health and Social Care Act 2012. NHS England is committed to ensuring equality of access and non-discrimination, irrespective of age, gender, disability (including learning disability), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. In carrying out its functions, NHS England will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998. This applies to all activities for which they are responsible, including policy development, review and implementation.

Plain Language Summary

Hip resurfacing is an alternative type of surgery to hip replacement. This involves removing the damaged surfaces of the bones inside the hip joint and replacing them with a metal surface.

1. Introduction

Hip resurfacing is regarded as a procedure of low clinical priority and therefore not routinely funded by the Commissioner.
2. Criteria for commissioning

NHS England will fund for those who otherwise qualify for primary total hip replacement, but are likely to outlive conventional primary hip replacements as restricted by NICE Guidance Hip disease - metal on metal hip resurfacing (TA44)

The clinician proposing this intervention will make the decision to treat based on the criteria set out above.

If the patient does not fully meet this criteria the clinician may submit an application for exceptional funding

(Individual funding request policy, application form and contact details on NHS Internet – http://www.england.nhs.uk/ourwork/d-com/policies/gp/)

An annual audit will be completed to confirm that patients have been treated in accordance with these criteria.

3. Evidence Base

Relevant NICE Guidance (TA44) as referred to above http://publications.nice.org.uk/guidance-on-the-use-of-metal-on-metal-hip-resurfacing-arthroplasty-ta44