Good Practice Statement: 1 Low volume conditions/procedures



Introduction/Background

- Paediatric Orthopaedics is a sub-specialty like no other in scope (ie the
 entire musculoskeletal system), presenting pathology and ensuing range
 of procedures undertaken. For this reason the identification of core
 registry and other datasets has proven elusive.
- There is a legitimate imperative to provide assurance regarding the consistent quality of clinical outcomes (highlighted by GIRFT 2022) in the face of low case volumes encountered by individual clinicians.
- There is an equally recognised need for skills to be maintained across paediatric orthopaedic surgeons across the whole United Kingdom that 'centralisation' would not deliver.

Defining low volume

- Absolute minimum numbers of cases are difficult to define. There is no clear basis for doing so.
- Case numbers in and of themselves are not necessarily an indicator of quality.

Current recommendations

- A personal log book to track activity levels of procedures lying within a clinicians core practice is encouraged.
- Where robust evidence exists to support minimum numbers of a given procedure per annum; and where a clinician's practice is of a lower frequency, there is an imperative to monitor and reflect on key safety and quality indicators.

Current recommendations (cont)

- Monitoring for complications of interventions is mandatory and must be supportively discussed in an MDT context.
- Networking opportunities are key.
 - At a service planning level, low volume procedures could be usefully discussed at ODN level (or similar).
 - At a clinical level, case planning discussions with colleagues is advisable.
- Joint operating is desirable when a case is both complex *and* infrequent. Employers should support this as an exemplar of delivering consistency and quality and assurance.
- When National registries are available, surgeons are strongly encouraged to contribute and employing Trusts must similarly support participation in such registries with provision of administrative support as necessary.
- The use of (patient recorded) outcome measures is encouraged.
- Courses to refresh and enhance skills may be applicable.
- Planned visits to colleagues in other (larger) centres may helpfully supplement experience and maintain skills.

Future developments

- BSCOS aims to provide small group networking opportunities.
- BSCOS supports the introduction of appropriate registries (for example paediatric soft tissue knee).

BSCOS Good Practice Statements (GPS) have been developed to assist members in their planning and provision of local services in response to GIRFT recommendations.

This GPS is **guidance** and not intended to be prescriptive – there may be legitimate reasons for variance in specific settings. Where this is the case we would encourage explicit consideration of those variances and the reasons thereof, for example through appraisal and MDT processes.