# British Orthopaedic Association Patient Liaison Group Annual Report 2012

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In 2012 the Patient Liaison Group met regularly, and offered support & feedback to the British Orthopaedic Association (BOA). It was delighted to have a close & productive relationship with Mr J Dias – the BOA President for the first part of 2012 & Mr M Porter in the latter half of the year...

## **Meetings**

The Patient Liaison Group has met 3 times between January and December 2012. Copies of the minutes for each meeting is held in the office.

As well as the 3 meetings, held in at Lincoln's Inn Fields, the Group has a healthy and vigorous email rapport, which includes a number of lay members who are not able to attend the meetings.

The group has been grateful for the support afforded us by Mr. Mike Kimmons, Zin Derfoufi, Rosanna Raison, and more recently Craig Dove and Julia Trusler at the BOA.

# Membership

Mr. Richard Montgomery finished his tenure as Chair at the end of 2011 and Mr. Nick Welch was elected as Lay-chair for the next three years.. At the meeting on March 2nd 2012 Mr. Don McBride was elected as the Group's vice-chair.

Mr McBride is joined by Mr Jon Mutimer & Mr Jeremy Ridge as our clinical members. Miss Jo Fox and Mrs Judith Fitch joined the lay ranks.

They joined Mr Welch, Mr Bob Smith and Mr Derek Twigg as the regular attendees at the meetings.

Mr. Steve Roger has had to step down from regularly attending meetings because of the pressure of work and Mr Terry Garret completed a second full period as an attending member. Both join the ranks of our corresponding members, along with Mrs Ruth Reavley, and Ms Isabell Lillie. It should be emphasized that the corresponding members bring a breadth of experience and contribute invaluable support to the Group.

#### **Publications**

The PLG now has thirteen papers posted on our web page.

Those written in 2012 refer to Orthotics, Wound Care, Access to Healthcare and Patient Pathways. All the papers are under constant review to ensure they are current and relevant to current practice. Seven of the exiting papers were modified in 2012 to fulfil this obligation.

The Chair had a paper published in BON 52 expressing his concerns about the breaches of the patient/doctor relationship created by certain practices introduced by Private Medical Insurance companies.

#### Web site

Through the good auspices of Dan Maby and our administrative support colleagues the Group's publications and profiles have been up-loaded to our web page on the BOA Website.

To improve communication between the public who access our site & the PLG, the Group set up a 'contact us' email address which is automatically forwarded to the lay chair for triage. It is anticipated that the responsibility for managing this email address will alternate between the lay chair & the lay vice-chair in turn. Correspondents will be advised that this is not a forum for clinical advice. It is hoped that this will not only curry opinion & issues from the public but also highlight potential new correspondence or attending members. There have been a few correspondents, but not a flood!

# **Council**

The Lay-chair has been invited to attend Council as an ex-officio, and along with the vice-chair they have managed to attend all the Council meetings in 2012. This has been an important step in further integrating the PLG into the body of the BOA.

During past years there has been some discussion between the BOA and representatives of Private Insurance Companies and the College of Podiatric Surgery. We are very pleased to have be invited to participate in both on-going dialogues, not only supporting our clinical colleagues, but also championing the end user – the patient.

## **Guideline development**

The PLG struggled to find sufficient lay members to assist in the development of various proposed guidelines for commissioners, but with the assistance of Mr Peter Foy from Joint Action co-opted two of their members onto the guideline sub-groups. It was not so much a reluctance to participate, but more a case of members being either 'hors de combat', or heavily engaged in other activities and feeling unable to commit to the extra work load.

This has highlighted the need for the PLG to swell its ranks – something discussed in our November meeting & an objective to be fully explored in 2013.

#### PPC:

In November the PLG was invited to identify a member to sit on the PPC. After due discussion Mr Twigg agreed to attend the first meeting of 2013, with the hope he will continue be our delegate.

#### **BOFAS/BHS:**

In getting involved with guidelines production and NICE hip replacement review the PLG has been happy to open some dialogue with BOFAS & BHS. The PLG would like to develop these channels and provide patient-orientated comments to all Societies under the aegis of the BOA.

#### Inter-reaction with other Bodies:

# **ARMA**

The PLG is keen to re-develop a relationship with ARMA – it is hoped that their director will attend one of the PLG meetings in 2013, in the meantime he has agreed to help us publicise our need for new members.

## **BOA Congress 2012**

The PLG was invited to attend the 2012 Congress & was pleased to represented by lay member Mrs Fitch. This proved to be a very positive event & the PLG thanks the BOA for the initiative. We are already in discussions about our involvement in 2013.

#### **RCS PLG**

Following a protracted delay the PLG has made positive contact with the RCS PLG – and one of their senior lay members will join us at our first meeting in 2013.

# **JOINT ACTION**

The PLG was pleased to re-establish a closer liaison with Joint Action as both Groups feel there can only be positive benefits from a joint approach to common issues. Joint Action ran an article about the PLG in one of its newsletters, and assisted the PLG to recruit people to assist in the guideline development. The PLG has offered support in the development of patient participation groups in areas like Bedford, Manchester & Cardiff – where there are sufficient Joint Action members to make it viable.

# NICE

In its role as NICE Stakeholder the PLG has commented on several guideline papers, including:

- 1) Head Injuries,
- 2) VTE disease (review for update of Venous thromboembolic diseases (CG92) &
- 3) Hips (NICE MTA: Total hip replacement and surface replacement for the treatment of pain resulting from end stage arthritis of the hip (review of TA2 and TA44) draft scope consultation (non-manu))

We have also offered to work with Fares Haddad at the BHS on "Total hip replacement and resurfacing arthroplasty for the treatment of pain or disability resulting from end stage arthritis of the hip (Review of technology appraisal guidance 2 and 44)- Consultee Professional".

Independently Nick Welch was invited to sit on a Topic Advisory Group for "Commissioning services for the management of hip fracture", which was published on November 26th.

## **MONITOR**

Mr Welch picked up the Monitor Review on Fair Playing Fields: the discussion paper was released in November with a deadline of December 6<sup>th</sup> for comments. After some discussion the PLG agreed with the BOA to submit a stand alone patient orientated response which the BOA included along side their own paper.

# **Summary:**

The Patient Liaison Group has continued to thrive, thanks to its dedicated lay & clinical members & the support of Mr. Kimmons, the Administrative Team & the BOA Council. We have produced new patient-orientated documents, and have updated the existing ones on the website. We have added quantitatively to the bank of data available to patients and we have continued to support our clinical colleagues on Council, particularly with the development of guidelines, the discussion with the College of Podiatry and the Private Insurance Companies.

In this way the PLG has continued to represent public and patient opinion to the BOA.

The PLG has an agreed agenda for the forthcoming years and looks forward building on the close and productive relationship with the BOA & it's Council.

To better facilitate this growing relationship and the extra commitments required the PLG is looking to expand

its lay population in 2013.

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The PLG would like to thank the BOA for its continued support & hospitality.

This Annual Report has been produced for and behalf of the BOA Patient Liaison Group by:

Nick Welch Lay Chair

January 2013