

NHS Dorset Clinical Commissioning Group

Surgical Management of Bunions

Criteria Based Access Protocol



NHS DORSET CLINICAL COMMISSIONING GROUP

SURGICAL MANAGEMENT OF BUNIONS CRITERIA BASED ACCESS PROTOCOL

1. INTRODUCTION AND SCOPE

- 1.1 A bunion is a bony swelling at the base of the big toe caused by the big toe joint moving out of alignment. The aim of surgery is to realign the joint and removal of the bony prominence. Where surgery is recommended, patients should be aware that there can be a risk of complications and while the majority of people obtain a good result, a small minority may still have problems with the foot.
- 1.2 Not all people with bunions are symptomatic and concerns about the cosmetic appearance of feet should be managed in primary care and do not need a referral to secondary care.
- 1.3 The surgical treatment of asymptomatic bunions is regarded as a procedure of low clinical priority. These procedures are therefore not routinely funded by NHS Dorset CCG.

2. DEFINITIONS

- 2.1 Any definitions related to this Criteria Based Access Protocol are included as a Glossary at Appendix B.

3. ACCESS CRITERIA

- 3.1 Treatment will be supported when:

- Conservative methods of management have failed. Conservative management techniques include:
 - Avoiding high heel shoes and wearing wide fitting leather shoes which stretch;
 - Exercises specifically designed to alleviate the effects of a bunion and keep it flexible;
 - Applying ice and elevating painful and swollen bunions;
 - Non-surgical treatments such as bunion pads, splints, insoles or shields.
- The patient suffers from either:
 - Severe deformity (overriding toes) that cause significant functional impairment; Or
 - Severe pain that causes significant functional impairment.

- 3.2 Significant functional impairment is defined by NHS Dorset CCG as:

- Symptoms prevent the patient fulfilling vital work or educational responsibilities;

- Symptoms prevent the patient carrying out vital domestic or carer activities;
- Symptoms prevent the patient carrying out vital recreational physical activities.

4. EXCLUSIONS

4.1 There are no exclusions.

5. CASES FOR INDIVIDUAL CONSIDERATION

5.1 Should a patient not meet the criteria detailed within this protocol, the Policy for Individual Patient Treatments (which is available on the NHS Dorset Clinical Commissioning Group website or upon request), recognises that there will be occasions when patients who are not considered for funding may have good clinical reasons for being treated as exceptions. In such cases the requesting clinician must provide further information to support the case for being considered as an exception.

5.2 The fact that treatment is likely to be effective for a patient is not, in itself a basis for exceptional circumstances. In order for funding to be agreed there must be some unusual or unique clinical factor in respect of the patient that suggests that they are:

- significantly different to the general population of patients with the particular condition; and
- they are likely to gain significantly more benefits from the intervention than might be expected for the average patient with the condition

5.3 In these circumstances, please refer to the Individual Patient Treatment Team at the address below:

First Floor West
Vespasian House
Barrack Road
Dorchester
DT1 1TG
Telephone no: 01305 368936
Email: individual.requests@dorsetccg.nhs.uk

6. LIFESTYLE ADVICE

6.1 Requests for surgical correction of bunions will only be considered where all conservative methods of management and appropriate lifestyle changes have been exhausted and the patient suffers pain and deformity that impairs functionality.

7. CONSULTATION

7.1 Prior to approval from Dorset CCG's Clinical Commissioning Committee this Protocol was reviewed by the MSK Task and Finish Group which includes commissioners, clinicians and other relevant stakeholders.

7.2 An Equality Impact Assessment for this Criteria Based Access Protocol is available on request.

8. RECOMMENDATION AND APPROVAL PROCESS

8.1 This access protocol has been approved on behalf of the Clinical Commissioning Committee in line with processes agreed by the CCGs Governing Body.

9. COMMUNICATION/DISSEMINATION

9.1 Following approval of Criteria Based Access Protocols at Clinical Commissioning Committee each Protocol will be uploaded to the CCG's Intranet, Internet and added to the next GP Bulletin.

10. IMPLEMENTATION

10.1 Following review of this Criteria Based Access Protocol it was agreed there were no new aspects to be included in this version and therefore no requirement for an implementation plan.

11. DOCUMENT REVIEW FREQUENCY AND VERSION CONTROL

11.1 This Criteria Based Access Protocol requires a review every three years, or in the event of any changes to national guidance or when new guidance is issued.

11.2 This protocol has been linked to the Dorset GP IT System and any future changes arising after this review will need to be made via this system.

GLOSSARY

N/A

FREQUENTLY ASKED QUESTIONS

N/A

A DOCUMENT DETAILS	
Procedural Document Number	92
Author (Name and Job Title)	Tracy Hill, Principal Programme Lead
Recommending group	MSK Task and Finish Group
Date of recommendation by CDG	June 2017
Date of approval by CCC	July 2017
Version	4.0
Review frequency	3 yearly
Review date	July 2020

B CONSULTATION PROCESS			
Version No	Review Date	Author and Job Title	Level of Consultation
4.0	June 2017	Tracy Hill, Principal Programme Lead	MSK Task and Finish Group

C VERSION CONTROL					
Date of recommendation	Version No	Review date	Nature of change	Approval date	Approval Committee
June 2017	4.0	June 2020	No changes required at review date.	July 2017	CCC

D ASSOCIATED DOCUMENTS
<ul style="list-style-type: none"> Policy for individual patient treatment, NHS Dorset Clinical Commissioning Group Making sense of Local Access Based Protocols, NHS Dorset Clinical Commissioning Group

E SUPPORTING DOCUMENTS/EVIDENCE BASED REFERENCES		
Evidence	Hyperlink (if available)	Date
Surgical correction of hallux valgus using minimal access techniques. Intervention guidance IPG332.	https://www.nice.org.uk/Guidance/IPG332	

F DISTRIBUTION LIST			
Internal CCG Intranet	CCG Internet Website	Communications Bulletin	External stakeholders
Yes	Yes	Yes	Yes