

NATIONAL  
ORTHOPAEDIC  
ALLIANCE

# ANNUAL REPORT

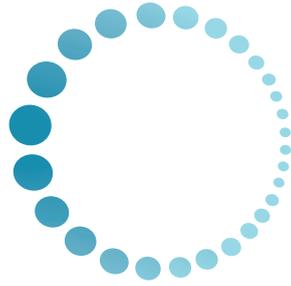
## 2020-2021

*Leading on collaboration  
in orthopaedics*

*Hosted 12 COVID-19 webinars for  
orthopaedic providers.*

*Launched Quality Improvement (inc  
Clinical Audit) Network.*

*Joined Arthritis and Musculoskeletal  
Alliance (ARMA) as associate member.*



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**\*Please note – this is a non-statutory annual report and accounts**

## Foreword

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**The National Orthopaedic Alliance (NOA) Board presents the NOA annual report and accounts.**

2020/21 was a difficult year for NOA member organisations. COVID-19 meant many changes to the provision of orthopaedic care and as a result, the way the NOA supports its members.

During the year, we worked to understand what the biggest challenges were as our members navigated a global pandemic and it was clear to us that the opportunity to learn from other providers dealing with the crisis was key. Supported by Mr Cormac Kelly we launched our COVID-19 webinar series, which based on feedback collected during our most recent member evaluation, has been a valuable resource to members by providing opportunities for peer support during trying times.

When orthopaedic patient, Val Harvey, shared her story with us in our session '*Elective Orthopaedic Recovery – Helping Patients Through Extended Waiting Times*', I was personally moved. Val was a much needed patient voice that encouraged members to continue to do all they could to restart orthopaedic surgery.

The year unsurprisingly had a toll on staff at our member organisations. As an alliance we are committed to supporting the wellbeing of our network of providers so during the year, we held the first in NOA's wellbeing webinar series. The session looked at some of the challenges and opportunities to improve staff wellbeing at NOA member Trusts and we are excited to progress this work into 2021/22.

The coming year will see us build on the successes of 2020/21 working with member organisations to ensure the topics covered and the projects undertaken are not only relevant and timely but have a positive impact on the delivery of orthopaedic care nationwide.

**Rachel Yates**  
**NOA Director**

## History

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The National Orthopaedic Alliance (NOA) was originally established as the Specialist Orthopaedic Alliance (SOA), a membership organisation of specialist orthopaedic providers offering benchmarking and buddying for members, and a more powerful voice for the specialty. In 2015, members of the SOA were successful in their bid to create the NOA vanguard through the NHS England New Care Models programme. This enabled the membership to grow and lay the foundation for the NOA as we know it today. Since 2018 when the vanguard programme ended, the NOA has existed as a standalone organisation funded by membership fees - as the SOA had done for ten years before it secured vanguard funding. The NOA is hosted by the Royal National Orthopaedic Hospital NHS Foundation Trust (RNOH) who manages the organisation's finances and the majority of its recruitment.

## About us

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The NOA is a membership organisation which brings together orthopaedic centres around the UK. The alliance provides opportunities to collaborate across its membership, and offers a forum for members to share experiences and address shared challenges with an aim of delivering consistent, high quality care for patients nationwide. It is led by the below founder member organisations:

- Oxford University Hospitals NHS Foundation Trust (Nuffield Orthopaedic Centre)
- Royal National Orthopaedic Hospital NHS Trust
- The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
- The Royal Orthopaedic Hospital NHS Foundation Trust
- Wrightington, Wigan and Leigh NHS Foundation Trust

These are joined by the following non-specialist Trusts:

- Barts Health NHS Trust
- Belfast Health and Social Care Trust
- East Suffolk and North Essex NHS Foundation Trust
- Guy's and St Thomas' NHS Foundation Trust
- Horder Centre (Horder Healthcare)
- North Bristol NHS Trust
- Royal Devon and Exeter NHS Foundation Trust
- Royal Free London NHS Foundation Trust
- South West London Elective Orthopaedic Centre
- Greater Manchester Orthopaedic Alliance:
- Bolton NHS Foundation Trust
- Manchester University NHS Foundation Trust
- Pennine Acute Hospitals NHS Trust
- Salford Royal NHS Foundation Trust
- Stockport NHS Foundation Trust
- Tameside and Glossop Integrated Care NHS Foundation Trust

## Aim & objectives

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### **NOA's aim:**

The NOA aims to lead collaboration in a nationwide network of orthopaedic providers

### **NOA's objectives:**

- Develop a benchmarking framework which demonstrates what good looks like in orthopaedic care and outline the journey to quality improvement
- Promote high quality outcomes for patients
- Support our membership by providing:
  - Benchmarking services
  - Early information on innovations within the sector and what's coming in terms of national policy that will impact on the delivery of elective orthopaedics
- Ensure our members' views and perspectives reach the most appropriate audience and that their voices are heard at a national level

## Achievements

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### During 2020/21 our key achievements included:

#### COVID-19 response

The pandemic drastically changed the delivery of planned orthopaedic surgery. The NOA was eager to support its member organisations and the wider orthopaedic provider community during these extraordinary times and sought to develop and deliver a range of services. As an alliance we supported the orthopaedics specialty during the pandemic through:

- Our COVID-19 webinar series which focused on a range of issues including recovery of elective orthopaedics and waiting lists management. We have collaborated with organisations including the British Orthopaedic Association, Getting It Right First Time, Versus Arthritis, ESCAPE Pain and more to ensure we address key issues. In total we held **12** webinars with **1,224** attendees during 2020/21. Recordings of our webinars continue to be viewed with the highest session viewed nearly **250** times
- COVID-19 resource pages on our website and members' area which in the peak of the pandemic were some of our most visited pages
- NOA team members have provided local support at their respective Trusts
- Curating quarterly meetings to help address issues facing staff across our membership. Topics included workforce & wellbeing with **70** attendees and waiting lists management with **65** attendees.

*“The NOA is an important national voice for orthopaedics. I have been very impressed by the way the organisation has responded during the COVID pandemic, proving that it is a flexible and adaptable forum for connection between orthopaedic centres. The sharing of knowledge during COVID has been an invaluable resource and provided much-needed opportunities for peer support during a very difficult time.”* **NOA member feedback in latest member evaluation**

#### Wellbeing

We addressed NOA members on the topic of wellbeing at the alliance's quarterly meeting in March 2020 and asked two key questions – ‘What is happening amongst fellow NOA members?’ and ‘How can we learn from each other?’

- Since then we have canvassed members for their experiences. NOA's July 2020 quarterly meeting focussed on workforce and wellbeing, a meeting which had an overall rating of **4.6 (out of 5)** from attendees
- The first in NOA's wellbeing webinar series for members in March 2021 was chaired by ROH Chief Executive and NOA Lead CEO, Jo Williams. The webinar looked at some of the challenges and opportunities to improve staff wellbeing during the pandemic.

- The NOA worked closely with members to develop workshops covering Self-Care for Tough Times, Spotting & Preventing Burnout and Recharging the Inner Battery. These workshops are due to take place in 2021/22 year. 70 members of staff from NOA members responded to a survey to select the topics the workshops would focus on.

*“I was really pleased to see how our organisation and other organisations were dealing with the problems staff have during stress, menopause and particularly Covid 19. I am planning on seeing the other topics discussed on this day through the recording which will be on our intranet next week. I'm sorry I had to miss them. As a staff member I was delighted to see how management is trying to look after staff.”* **Attendee at NOA quarterly meeting focussed on workforce and wellbeing**

### **Collaborative working**

Collaborative working within the orthopaedic community is key to the NOA delivering its objectives. We continued to work closely with organisations including the British Orthopaedic Association (BOA) and Getting It Right First Time (GIRFT) to spread good practice. We held webinars where we collaborated with GIRFT and the BOA - these were two of our highest viewed webinar recordings.

During 2020/21 NOA joined the Arthritis and Musculoskeletal Alliance (ARMA) as an associate member. As an associate member, the NOA is now part of the combined voice of the musculoskeletal community, working with ARMA to influence policy and drive up service quality. ARMA works across the MSK pathway, including prevention, primary, community and secondary services.

*“It's so great to have the NOA on board as an associate member. We look forward to working with the organisation and its membership as part of our new associate member scheme.”* **Sue Brown, CEO, Arthritis and Musculoskeletal Alliance**

## Activities

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### Activities throughout 2020/21 have included:

- **Orthopaedic Quality Improvement (including Clinical Audit) Network**

The NOA has a key role to play in driving forward quality improvements for orthopaedics across the country. The alliance has supported members to create a Quality Improvement (including Clinical Audit) Network. The new and growing network has been set up to improve practice and provide opportunities for the benchmarking of audits between orthopaedic trusts in national audit results. The aim is for the network to be a national, collective, expert voice on orthopaedic clinical audit. The OQICAN launch webinar in November 2020 had 34 attendees. Several planning meetings followed in 2020/21 laying the foundation for the network to grow.
- **Cost Improvement Programmes**

We continued our work around cost improvement programmes (CIPs) during the year. We surveyed members about the impact of COVID-19 on CIPs plans for 2020/21 and found that some had abandoned their plans altogether, others had scaled back on all clinically led savings plans and others were proceeding as normal. In December 2020 we hosted our third CIPs workshop which was attended by 24 staff from member organisations. Chaired by Amanda Gaston, Deputy Finance Director at the Royal Orthopaedic Hospital NHS Foundation Trust (ROH), the engaging virtual session gave colleagues across the country a chance to reflect on delivering CIPs during a pandemic and discuss how to move forward with planning for 2021/22.
- **Procurement**

The NOA procurement group shares information, pools expertise and maintains a discourse with central procurement bodies to ensure best value for its members. We maintained a dialogue with the Category Tower Director – Tower 4 during 2020/21 to ensure we help shape and influence the future category strategy. We have been instrumental in the setting up of a National Category Stakeholder Group for Orthopaedics.

*"Working with the NOA procurement group has been a great way for me to make the most of my role as Category Tower 4 Trusted Customer. The NOA provides me with feedback and information that I am able to use to improve the service orthopaedics receives from Category Tower 4, ensuring their offering meets the needs of NOA members and orthopaedic providers."* **Gary Welch, Oxford University Hospitals**

- **Clinical Coding**

The NOA's work on clinical coding continues, building on the CPD accredited workshops and guidelines already produced and supporting members when requested.

We secured an opportunity for members to influence the Getting It Right First Time (GIRFT) clinical coding project as well as contribute to the validation of orthopaedic guidelines for clinical coders. This work is in progress (starting with knee replacements and hip replacements) and we have invited Clinical Coding departments from our member organisations to contribute.

During the year **7** NOA members volunteered to take part in Project DaVe, run by the NHSEI pricing team to develop a set of coding quality measures and useful reports for Trusts to help them improve the quality of their coding.

- **NOA wellbeing**

The NOA is committed to supporting the wellbeing of its members. The first in NOA's wellbeing webinar series was chaired by ROH Chief Executive and NOA Lead CEO, Jo Williams. The webinar looked at some of the challenges and opportunities to improve staff wellbeing during the pandemic. The NOA also worked closely with members to develop plans for workshops covering Self-Care for Tough Times, Spotting & Preventing Burnout and Recharging the Inner Battery. These will be delivered in 2021/22.

- **NOA Communications and Engagement**

Promoting the work of the NOA in order to encourage peer to peer working and best practice sharing is paramount. During 2020/21 we worked to increase our newsletter distribution list. The list grew from **330** to **569** with the newsletter sign up page on our website being the second most visited page. Our website unique visitors grew from **20,624** unique visitors in 2019/20 to **35,394** unique visitors in 2020/21 and the members' area of our website gained **181** new registrations during the year. We launched our NOA Blog toward the end of 2020/21 and published two pieces. Our social media presence and engagement continued to improve with **258** new Twitter followers and our presence on LinkedIn growing.

- **Annual member evaluation**

Every year the NOA gives members a formal opportunity to anonymously rate and comment on the work of the alliance. In addition to this annual evaluation, the NOA collects feedback from its members in the form of post event feedback, surveys in our newsletters and other relevant questionnaires. We completed an evaluation during 2020/21 which covered 18 months (March 2019 to September 2020) as the COVID-19 pandemic led to changes in the provision of orthopaedics and the way the NOA supports members. The next evaluation will cover 12 months as usual (September 2020 to September 2021). The full evaluation report is available to NOA members in the members area of the website.

- **Webinar programme**

The NOA provides a flexible and adaptable forum for members to connect with other orthopaedic centres. The sharing of knowledge through a series of webinars and workshops provides much-needed opportunities for peer support and ignites conversations around the orthopaedic backlog, service improvement and elective orthopaedic recovery and more.

In April 2020 we appointed Mr Cormac Kelly, Consultant Orthopaedic Surgeon at NOA founder member organisation, The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust(RJAH), as Webinar Programme Lead. Mr Kelly works collaboratively with member organisations and the NOA Board to deliver the alliance's webinar programme which covers a range of areas and workstreams. The webinar series continues to provide topical virtual sessions to support NOA members and those across the wider orthopaedic network. In total we held **12** webinars with **1,224** attendees during 2020/21.

*"I'm honoured to accept this role which will enable the NOA to further engage with the orthopaedic community virtually through webinars. There are many more topics I think we need to address so that we are able to deliver better care for patients during these difficult times. I look forward to continuing to support the alliance with this work."* **Mr Cormac Kelly, NOA Webinar Programme Lead**

- **PROMS**

We continued our work with PROMS this year by supporting the facilitation for a webinar for the National PROMS Network. Co-ordinators for the PROMS Network joined us in March 2021 for a webinar titled, *Networking to Improve PROMS practice & collaboration* which gave an overview of the background of the network, details of their current activity including the registrar EMPROVE audit – National PROMS Network and SWORD, as well as the future of the network in working to improve outcomes data collection.

## Looking to the future

**In the coming year and beyond, we look forward to working on the below, and much more:**

### 2021/22 – strategic priorities

NOA's strategic priorities for 2021/22 and beyond are:

- Support members to address the impact of COVID-19 on orthopaedics and to navigate the recovery of services
- Engage with orthopaedic bodies to support the improvement of orthopaedic care
- Ensure any issues in the NHS Long Term Plan that impact on orthopaedics inform NOA planning. Areas of focus will include:
  - Workforce
  - AI solutions to improve theatre efficiency
  - Continuous improvement
- Grow our membership
- Promote sharing best practice by our members
- Continue to develop our webinar series
- Engage with Category Towers and influence procurement for orthopaedics

## Financial Update

### Income

NOA income from membership fees was £200k

### Expenditure

The total expenditure for the period to 31st March 2020 was £165k which included:

Staff costs	£103,000
Meetings and events	£8,000
Consultancy fees	£6,000
Other including: Lead Clinician Lead CEO Webinar Lead Finance Director Data Analyst Communications Lead	£48,000
<b>TOTAL</b>	<b>£165,000</b>

There has been no material expense during 2020/21. Any unspent membership fees are always rolled over into the next year to fund bigger projects.

**The NOA's expenditure plans for 2021/22 and beyond are:**

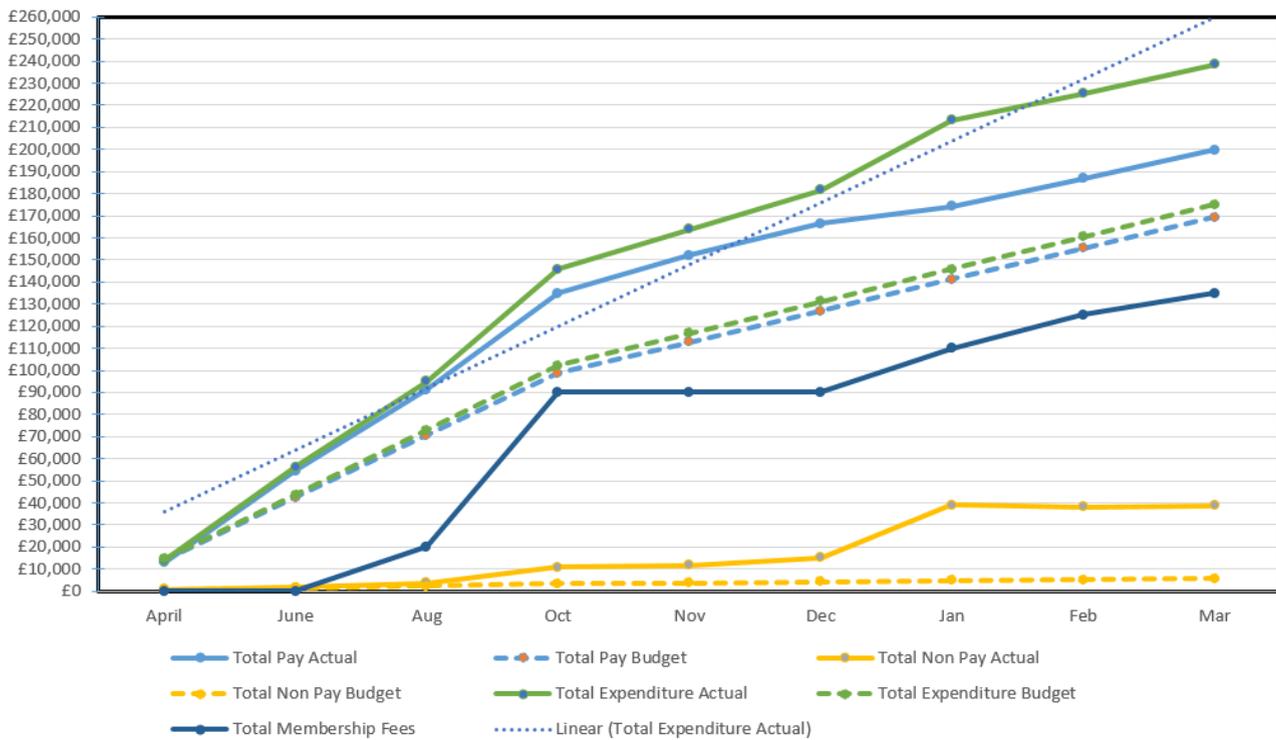
- To continue to engage with our members through both Face to Face and virtual webinars, workshops and meetings to ensure that we continue to support our members in the following areas:
  - CIPs
  - Clinical Coding
  - Procurement

- Tariff and Specialist Commissioning
- PROMS
- Creation of an Outcomes Steering Group and Orthopaedic Quality Improvement including Clinical Audit Network (OQICAN)
- Grow our membership
- Evaluate our performance for 2021/2022
- Respond to feedback from our members
- Share best practice
- Continue to deliver our webinar series and Wellbeing Workshops

### Income and Expenditure Report

NOA	Pay	Non-pay	Total	Membership Fees
<b>Budget Year 2020/21</b>	£169,320	£5,680	£175,000	£145,000
<b>Actual 2020/21</b>	£199,710	£38,814	£238,525	£135,000
<b>Vanguard 2020/21</b>	£189,769			
<b>Shortfall</b>	£103,525			
<b>Carry Forward</b>	£86,244			

NOA Budget and Actual YTD 2020/21



NOA Budget and Actual YTD	April	June	Aug	Oct	Nov	Dec	Jan	Feb	Mar
<b>Total Pay Actual</b>	£12,834	£54,513	£91,398	£134,883	£152,196	£166,526	£174,205	£186,958	£199,710
<b>Total Pay Budget</b>	£14,110	£42,330	£70,550	£98,770	£112,880	£126,990	£141,100	£155,210	£169,320
<b>Total Non Pay Actual</b>	£781	£1,839	£3,707	£10,958	£11,690	£15,052	£39,112	£38,288	£38,814
<b>Total Non Pay Budget</b>	£473	£1,420	£2,367	£3,313	£3,787	£4,260	£4,733	£5,207	£5,680
<b>Total Expenditure Actual</b>	£13,615	£56,352	£95,104	£145,841	£163,886	£181,578	£213,318	£225,245	£238,525
<b>Total Expenditure Budget</b>	£14,583	£43,750	£72,917	£102,083	£116,667	£131,250	£145,833	£160,417	£175,000
<b>Total Membership Fees</b>	£0	£0	£20,000	£90,000	£90,000	£90,000	£110,000	£125,000	£135,000

## Structure, governance and management

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### Address

#### Registered Office

Royal National Orthopaedic Hospital  
Brockley Hill  
Stanmore  
Middlesex, HA7 4LP

#### Email Address

[info.noa@nhs.net](mailto:info.noa@nhs.net)

#### Website

[www.nationalorthopaedicalliance.co.uk](http://www.nationalorthopaedicalliance.co.uk)

### Principal Officers and related parties

Members of the National Orthopaedic Alliance Board:

<b>Name</b>	<b>Office</b>
• Rachel Yates	NOA Director
• Ann Hoey	NOA Deputy Director
• Jo Williams	NOA Lead CEO
• Craig MacBeth	NOA Financial Lead
• Peter Kay	NOA Lead Clinician
• Rob Hurd	GIRFT and NOA Senior Responsible Officer
• Cormac Kelly	NOA Webinar Lead

### Accountability and reporting arrangements

- The NOA support team will record the proceedings and recommendations of all meetings of the NOA including recording the names of those present and in attendance.
- Minutes of the NOA meetings will be circulated promptly to all members of the NOA
- The NOA Decision Making Board will be made up of:
  - Jo Williams – NOA Lead CEO
  - Rachel Yates – NOA Director
  - Peter Kay – NOA Lead Clinician
  - Rob Hurd – GIRFT and NOA Senior Responsible Officer
  - Ann Hoey – NOA Deputy Director
- The NOA Director will draw to the attention of the Board issues that require disclosure to the full membership or requires executive action.
- The decision-making Board has decision making powers with regard to the ratification of policies and approval of procedural documents. It will also provide recommendations on risk management and governance for the NOA.

## Roles

**NOA support lead/team** – responsible for administrative, communications and executive services for the alliance

### Partnership Board attendee roles

Post	NOA role
NOA SRO	Provide strategic overview and political guidance and is closely involved with interface with parliamentarians (i.e. Ministers and other MPs and Peers) and chairs of other organisations.
NOA Lead CEO	Guide the day to day policy decisions dictating the NOA's activity and provide support, expertise and information from the member trusts as required by the agreed work plan and/or events.
Other relevant directors and managers	In addition to taking part in and supporting any NOA working groups and sub groups, they also provide relevant expertise where required.

## Membership

### Founder Members

- Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust
- Royal National Orthopaedic Hospital NHS Trust
- Royal Orthopaedic Hospital NHS Foundation Trust
- Wrightington, Wigan and Leigh NHS Foundation Trust
- Oxford University Hospitals NHS Foundation Trust (Nuffield Orthopaedic Centre)

### Fee Structure

The annual fee structure is as follows:

Single Trust	£10,000 per annum
Group/Collaboration of Trusts	£15,000 per annum

Fees will be invoiced 1<sup>st</sup> April

## **Sub-groups**

### **Clinical (led by Peter Kay)**

The Clinical sub-group will own, oversee and report on the following work streams:

- A programme and process for outcomes evaluation
- Develop proposals, and recommend sources of information, for the creation of briefing papers for a wide range of clinical and political audiences

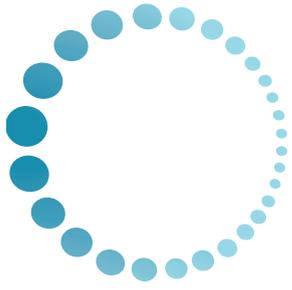
### **Finance (led by Craig MacBeth)**

The Finance sub-group will own, oversee and report on the following work streams:

- A series of benchmarking exercises, including reference costs and income
- Regular procurement, clinical coding and cost-saving programme audits, reports and workshops
- Tariff

### **Operations (led by Stephanie Wilson)**

The Operation Sub-group will own, oversee and report on the following work stream



# NATIONAL ORTHOPAEDIC ALLIANCE

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