

To whom it may concern,

Following robust clinical review, including a report prepared for the ICB by the former Director of Public Health in York and advice from the Ethics Committee, a new ICB Health Optimisation policy has been developed and replaces any existing Health Optimisation policies or elements in policies across the Places within HNY ICS relating to non-urgent surgical interventions, including policy relating to hip and knee replacement surgery.

The updated policy is attached but in summary:

- 1) If BMI is >40 consider referral for weight loss management **alongside** referral to a surgical service. To minimise risk, it will usually be preferable to reduce BMI to below 40 before surgery, unless the patient:
 - has red flag symptoms OR
 - has an urgent need for surgery (infection, tumour, is likely to go off legs etc) OR
 - has already engaged with weight loss management for at least 6 months but failed to achieve a BMI <40
- 2) If BMI is 35.1-40, consider referral for weight loss management **alongside** referral to a surgical service.
- 3) If BMI is 30-35 AND waist-height-ratio is 0.5 or higher, consider referral for weight loss management **alongside** referral to a surgical service.
- 4) If the patient is a smoker, consider referral to smoking cessation services **alongside** referral to a surgical service.
- 5) If a patient comes under the care of a surgical service without referral from primary care, referral for health optimisation measures should be considered by the responsible surgical service.

The decision whether to proceed with surgery and, if so, whether to delay until health optimisation measures have been attempted, should be on a shared basis with the patient, considering their individual risk of adverse outcomes from anaesthesia and surgery and their risks from delaying or not having the surgical intervention.

Implementation of this new policy will commence from 2nd September and further information will be disseminated in due course.

Please forward any queries you have to the Clinical Effectiveness Unit to hnyicb.clinicaleffectivenessunit@nhs.net