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| **NHS Halton Clinical Commissioning Group**  **NHS Liverpool Clinical Commissioning Group**  **NHS St Helens Clinical Commissioning Group**  **NHS South Sefton Clinical Commissioning Group**  **NHS Southport and Formby Clinical Commissioning Group**  **NHS Warrington Clinical Commissioning Group** |
| **Policy for Secondary Care administered steroid Peripheral Joint Injections** |
| Steroids are a man-made version of hormones that are made naturally in the body. When injected into the body they can reduce inflammation (swelling). This can help to stop pain and ease stiffness, so steroids are often used to treat joint pain and arthritis. |

**PROPOSED REVISED CRITERIA**

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| **Intervention** | **Secondary Care administered steroid Peripheral Joint Injections** |
| **Policy Statement** | **Restricted** |
| **Minimum eligibility criteria** | It is expected that the steroid injection is performed in locally commissioned services either by the patient’s own GP Practice, or another Practice able to perform the injection unless:   * The recommended number of landmark-sited injections have been undertaken in locally commissioned services have failed * A single ‘blind’ attempt has been made and failed in those with indiscernible landmarks   Practices that are unable to provide an ‘in-house’ MSK steroid injection are able to refer to other Practices for the MSK steroid injections.  Provision of joint injections for pain in Secondary care will only be commissioned in the following circumstances:   * Failed steroid injection in locally commissioned services or inappropriate to be performed in a locally commissioned service setting. * Injections due to the need for image guidance. (See below) * Only one injection will be commissioned as a diagnostic procedure if not undertaken already in locally commissioned services if surgery on a specific joint is likely to be indicated. Repeat injections will not be commissioned.   Injections that are provided in secondary care must only be done within an Outpatient Department clinic setting or under ultrasound control in a radiology department if clinically indicated (for example uncertain site of inflammation, previous landmark-sited injection has failed or landmarks indiscernible). These will only attract the relevant OPD tariff and day case is not commissioned. |
| **Rationale** | Steroid injections can help to stop pain and ease stiffness however CCGs expect that steroid injections are given in locally commissioned services. Injections given in secondary care must meet the eligibility criteria outlined above. |
| **Evidence for inclusion and threshold** | NHS Choices - Steroid injections  <https://www.nhs.uk/conditions/steroid-injections/>  Ultrasound-guided injections of joints of the extremities –  University of York Centre for Research and Dissemination 2012. |