

eBulletin

SPINE MATTERS

UKSSB Quarterly eBulletin

October 2016

Contents

eBulletin	1
SPINE MATTERS.....	1
Concept and Purpose of this Bulletin.....	2
Editorial.....	2
Office Matters.....	4
New Members of the UKSSB Executive Board.....	4
Updates.....	4
National Low back and Radicular Pain Pathway	4
Regional Spinal Networks – Ashley Cole.....	5
Spinal Services Clinical Reference Group (CRG)– Ashley Cole	5
GIRFT	5
Update on the roll out of the ‘Getting It Right First Time’ Programme - Mike Hutton, GIRFT Clinical Lead for Spinal Surgery	5
UKSSB working groups	6
Private PracticeAdvisory Group	6
Training and Education	6
Society / Registry Reports.....	6
British Association of Spine Surgeons (BASS)	6
British Scoliosis Society (BSS).....	7
Society for Back Pain Research (SPBR).....	7
Society of British Neurological Surgeons (SBNS)	8
British Orthopaedic Association (BOA)	8
BOA Instructional Course.....	9
British Spine Registry (BSR).....	9
British Association of Spinal Cord Injury Specialists (BASCIS).....	9
The Spine Society of Europe (SSE)	10
Other Clinical Items.....	10
Fellowships.....	10

BASS/BSS Presidents' Travelling Fellowship	10
UKSSB BOA Clinical Leadership Programme Fellowships	10
New Awards	11
New Reference Documents	11
Events and meetings.....	11
Courses.....	12
Notices	12
Vacancies	12
Dramatis Personae.....	13

Concept and Purpose of this Bulletin

This is an attempt to inform and thereby empower the spinal services community. It is designed to:
 Provide an immediate overview of the several workstreams which currently, or in the near future, will directly affect spinal services both within and without the NHS; and which organisations and individuals are contributing to these.

Share knowledge of the different societies' news and developments that may be of relevance without those societies themselves. (It is not intended to replace or duplicate the content of individual societies' newsletters).

Provide a précis of the continuing work of advisory bodies which impact on our subject (NICE, Acute Oncology Measures, etc)

Provide a notice board for:

Spinal and other relevant society events

Non-clinical posts of professional interest (RCS, JCST, BOA Board of Examiners, NICE, GMC, etc)

It is not intended that this eBulletin will be exhaustive, rather a rapid digest to inform and point to more detailed resources (as e-links, where available, or to relevant websites). The UKSSB website now has a [reference document section](#) to which additions will be made as they evolve.

Suggestions for improvements are very welcome. Please send these to ukssb@boa.ac.uk

Anticipated publication will be three times a year in January, May and September. These may vary slightly to include relevant breaking items.

Editorial

Alistair Stirling - UKSSB Chair

The year past and year to come.

Spine Matters It is now a year since the first edition of Spine Matters (SM) and time for reflection. Discussion suggests this has been welcomed in most quarters and largely fulfilled

its expressed purpose. Publication has been reduced to three times a year but in future notices will be updated monthly and circulated to Society memberships . SM has provided a vehicle for communication between the current component Spinal societies and a continuing home for all policy information, the Improving Spinal Care Project and much else as listed in the contents above.

UKSSB

Prior to a recent meeting of UKSSB the Board was surveyed (see survey results below) and it was concluded from this and the subsequent discussion that :

The constitution of UKSSB and Byelaws as initially conceived require revision which should be completed and ratified by December.

Membership of the Board should be expanded to include British Association of Spinal Cord injury Specialists (BASCIS) The future intended voting membership is listed in Dramatis Personae. The principle changes being that all component societies will have two votes (in order of historical precedence BOA 1918, SBNS 1926, SBPR 1971 , BSS 1976, BASCIS , BASS 1996.) This will also reflect the NHS England Spinal services clinical reference group (CRG . Chair Ashley Cole).The Board will also include (in a non-voting capacity) the chairs of Improving Spinal care project , Spinal Services Clinical Reference Group and Patient Liaison Group

Spinal Triage and Treat practitioners are central to the National Low Back and Radicular Pain pathway (Chair - Charles Greenough) and it was discussed that channels for communication with these fellow professionals are needed. Representation of this important evolving group at Board level would facilitate synergistic planning, and collaborative working as well as educational and service delivery meetings. This development is under active consideration.

Training and Education

With the exception of BOA and SBNS, which have delegated statutory authority, none of the Spinal Societies including UKSSB have any legal standing in training or specialist training, but do have a broad role in 'educating about spine matters'.

Website

It was agreed via the survey of UKSSB members, that a combined web presence facilitating rapid information access and dissemination was an efficient and cost-effective means of managing the Spinal community web presence. The aim would be to have a spine portal, with an overarching main page, with links built in to the existing pages of the constituent bodies. In this manner all parties maintain their identity and appropriate focus, whilst allowing an individual to source combined information from one site.

Topical comment

A year ago few would have thought that strike action by doctors was likely. An impression is that this has resulted more from appropriate junior doctor concerns about the underlying direction of government to dismantle the Health service than simply working hours or remuneration. The current NHS financial crisis (most Trusts in deficit) is familiar , less so the actuarially summated NHS pensions liability of £500bn (source FT) and projected summated NHS litigation costs of £56bn (source BMJ). Against a background of an ineffective opposition and a probable Conservative administration for the next six years the government look set to use the forthcoming consultant negotiations to attempt to generate

fundamental change. This has already resulted in many considering early retirement, or moving to self (within NHS on temporary contracts) or private employment. It is a view and has been for some time that this is the intended route whereby the medical profession is tarred with the responsibility of the failure of the NHS by ensuring that the public perceive this as the fault of the profession not government. It is anticipated negotiations may include attempting to move from national terms and conditions to local terms and conditions. It is also anticipated that this may include alteration to arrangements for pensions and possibly to Crown Indemnity. Meanwhile funding for health (as a fraction of GDP) remains significantly lower than in most European countries without the electorate being able to influence this.

Whilst some surgeons might stand to do well from these anticipated changes the costs to the country as a whole of moving to a semi-privatised model would be high and are likely to be irreversible. Productivity based remuneration would introduce perverse incentives for undertaking treatment and might increase the rate of intervention to European, but hopefully not American levels. Similarly our current international position (as defined by the US based Commonwealth Fund) as the lowest cost most effective provider of healthcare would be unlikely to be maintained.

Our individual and collective response to the coming contract negotiations needs to be very carefully considered if we are to meet our (hopefully common) objective of continuing improvement in the very effective care we deliver for our patients.

Office Matters

New Post

Policy Officer Lenka Nohodilova has moved on professionally and has been replaced by an Executive Officer, Jo Wilson. Jo can be reached via email at ukssb@boa.ac.uk or (Mon-Fri, 9-5) on 020 7405 65077/ 0207406 1768 and is based in the BOA offices in London.

New Members of the UKSSB Executive Board

Lisa Roberts will demit from the SBPR Presidency on the 4th November, and will be succeeded by President elect Nadine Foster.

Bob Crawford will demit from BSS Presidency on the 14th October and will be succeeded by James Wilson-Macdonald

Updates

National Low back and Radicular Pain Pathway

The Friday afternoon session at BritSpine in Nottingham focused on implementation of the Pathway. To add momentum to this BASS have very kindly agreed to include a session

focussing on this within the forthcoming meeting in Manchester. It is hoped this will then evolve into an annual multidisciplinary spinal service implementation meeting. It is already planned that at BritSpine in Leeds there will be a full day meeting preceding the main meeting.

Regional Spinal Networks – Ashley Cole

The Regional Spinal Networks are forming in many Regions. There is now a plan for 10-11 Regional Networks each consisting of 2-3 Sub-Regional Networks. The Sub-Regional Networks will be centred around a Spinal Hub which is defined as a Hospital delivering 24/7 emergency spinal care. These Networks will enable clinicians to lead the strategy and delivery of spinal services in England by having strong Operational Delivery Networks in each Region. However, the NHS England Transformation Manager and Project Manager finish at the end of March 2017 and we do not have long to establish these Networks. Without them I suspect that over time, NHSE and the CCGs will tell us what spinal services they want to commission. We have a time-limited opportunity to produce a model of care that works for us and delivers the services we want for our patients. For those who want further information please contact d.waddingham@nhs.net or for more information about any clinical issues ashley.cole4@nhs.net.

Spinal Services Clinical Reference Group (CRG)– Ashley Cole

The Spinal Services CRG is now formed with membership of: Chair, 4 regional Spinal Surgery members, 4 regional Spinal Injuries members, 4 members from affiliated societies (BASS, BSS, SBNS, MASCIP) and 3 patient members. The first meeting is planned for November where a work plan will be agreed.

GIRFT

Update on the roll out of the 'Getting It Right First Time' Programme - Mike Hutton, GIRFT Clinical Lead for Spinal Surgery

In a few weeks' time, I will be sending out Spinal GIRFT reports to orthopaedic and neurosurgical spinal teams across the country and following this up with visits to review the data at every provider. This is being done alongside Justin Nissen from Newcastle who is providing neurosurgical input into the process and will be participating in the visits with me. The aim of the project is to provide a comprehensive benchmarking review of as much activity and outcome data as we have been able to gather. We will also be reflecting on issues such as data quality, data compliance and transparency.

The first 'Getting it right first time' (GIRFT) report, published by Professor Tim Briggs in 2012 suggested that changes could be made to improve pathways of care, patient experience, and outcomes - with significant cost savings.

The project featured targeted self-assessment and peer review at local level of data relating to musculoskeletal services and their clinical outcomes, processes (including revisions), patient experience, patient pathways, network arrangements, financial impacts and waiting times.

The programme reports provide a consolidated view of all available data and metrics pertaining to each provider's clinical and financial performance. This remains the case with the spinal project.

Clinicians and managers will be able to use the data we will provide reflect on variation in

clinical practice, management approach and in prosthesis selection. They will also be able to benchmark themselves nationally and explore how clinical evidence is considered and informs their practice.

The orthopaedic GIRFT pilot told us that there are huge variations in practice and outcomes in terms of device and procedure selection, clinical costs, infection rates, readmission rates, and litigation rates and that there is considerable scope to tackle many of these variations and drive short, medium and longer- term improvements in quality of delivery (through adopting best practice), reducing supplier costs (for example of implants) and generating savings. First drafts of the reports indicate that the work will also demonstrate wide variation and significant opportunities to reflect on practice.

Many people may accuse the project of duplicating the work of the Spinal Taskforce or the Spinal Transformation Project that NHS England is leading, however, GIRFT is fundamentally an approach that is complementary to all the programmes that exist across the health service. It is also an ideal complement to the RightCare data packs that NHS England is providing to commissioners and we hope it will also be a valuable data source for the CQC, reassurance to patients and clinicians and of course the tax payer.

The issue of implementation of recommendations will no doubt be discussed, but GIRFT is now formally housed within NHS Improvement and Tim Briggs is both National Director of Clinical Quality and Efficiency and a member of a new National Clinical Governance Committee which includes the medical directors of all the major policy organisations within the Health Service and will be tasked with coordinating the impact and implementation of the outputs from system wide initiatives such as GIRFT. The main outcome from this will be a significantly increased ability to drive recommendations from the work – something I very much welcome.

I look forward to hearing your feedback on the reports as they are sent out towards the end of the year and to meeting many of you during our visits.

UKSSB working groups

Private Practice Advisory Group – [Update via the BASS Newsletter](#)

Training and Education

Spinal Surgery Training Interface Group (SSTIG)

A preliminary meeting setting up this group is scheduled for 22nd of November with representation from the respective SACs (T and O and NS) and Spinal societies .

It is hoped that this will result in the introduction of NHS Funded Training Fellowships in recognised centres.

Society / Registry Reports

British Association of Spine Surgeons (BASS)

www.spinesurgeons.ac.uk

President – Am Rai

The following is a brief summary of the recent updates in respect to BASS. More information will be available from the BASS newsletter available from the 1st October at

www.spinesurgeons.ac.uk

- The BASS Manchester meeting will take place from the 15th -17th March. Details will be posted on the website. All abstracts should be submitted by the 31st October by e-mail to ukssb@boa.ac.uk.
- The BASS Travelling Fellowship will be advertised within the next couple of weeks. The fellowship will last for two weeks travelling through Ireland then finishing in Stoke Mandeville / Oxford.
- The deadline to submit papers for 2017 supplement of the Spine Journal has been extended until the 15th October 2016. Please refer to the BASS October newsletter available on the BASS website for submission details.
- The BASS executive has decided not to join the Trauma & Orthopaedic Registry Unifying Structure (TORUS). This is primarily due to concerns that this would have alienated our neurosurgical colleagues.

British Scoliosis Society (BSS)

www.britscoliosissoc.org.uk

President – Bob Crawford

The next [BSS meeting on 14/10/2016](#) is almost upon us, attracting 65 papers, more than the last one-day meeting in Bristol two years ago. It is therefore proposed that all future meetings will be two day events and held in October - November. This will be simpler to remember and still separates us sufficiently from the BritSpine meeting the following year. Next year it will be on November 30 - December 2017 at the ICC in Birmingham.

An instructional day is being held on 13/10/2016 aimed primarily at pre-exam trainees of whom over 30 have registered. The morning session will consist of a series of concise didactic talks, while the afternoon will be largely case based discussions and some lectures from the guest speakers:

- Pierre Roussouly from Lyon, who will deliver the Greg Houghton Memorial Lecture,
- Tom Errico from New York,
- Ferran Pellise from Barcelona
- Mike Grevitt from the Queen's Medical Centre, Nottingham.

24 papers on topics from all areas of spinal deformity surgery have been selected for podium presentation, and the majority of other papers have been accepted for poster presentation.

There will be a morbidity and mortality session based on data submitted to the British Spine Registry. Also BSR data on the Magec rod will be presented in the context of post retrieval studies submitted for the scientific session.

Other matters for discussion at the AGM are:

- The ASD guidelines project. This has suffered delays due to the decision to increase the age range to include cases over 18 years, and the change in role of the director
- BSS Scoliosis pre-operative information sheet. It is planned to introduce this at the AGM
- Election of new officers

Society for Back Pain Research (SPBR)

<http://www.sbpr.info/>

President: Lisa Roberts

President Elect: Nadine Foster

[Annual meeting Preston November 3-4th November 2016](#)

Title: 'NEW DIRECTIONS'

Invited speakers:

- Dr Lisa Roberts, University of Southampton: 'New trends in communication: Improving the consultation experience'
- Dr Julia Wade, University of Bristol: 'Consent in Research'
- Dr Nick Hacking, Lancashire Teaching Hospitals, Preston: 'New Direction in Pain Management'
- Professor Justin Cobb, Imperial College London: 'Role of 3D printing in Orthopaedic Surgery'

The Society has recently awarded 4 travelling fellowships to members and details of their projects will be included in the next bulletin.

Society of British Neurological Surgeons (SBNS)

www.sbns.org.uk

President - Richard Kerr

Scheduled meetings:

March 2017 - Oxford

September 2017 - Liverpool

British Orthopaedic Association (BOA)

www.boa.ac.uk

Lee Breakwell

The BOA has been busy recently with matters making the news requiring a response. The ongoing contractual debates for doctors in training sparked a press release when the announcement of suspension of strikes was made. The BOA expressed relief at the news, but expressed regret at the persistent imposition of the contract by the Secretary of State. The BOA reiterated its support for those orthopaedic surgeons who are members of BOTA. A further response was seen following the newsworthy [Conflict of Interest](#) story. Whilst the BOA fully supports transparency in professional matters, concerns remain over the relevance and value of declarations of private practice income for doctors. Following the GIRFT programme, the BOA is keen that CCGs throughout England use the information contained on how to make cost savings whilst maintaining orthopaedic care for patients, without recourse to rationing on the basis of non-evidence based criteria. Much work continues on the planning of NHS Tariffs for 2017-18. The initial reductions were of almost 20% for many orthopaedic procedures. A prompt response from the BOA and expert working groups, negotiated this down to a probable decrease of 11%, still representing an existential threat to some departments.

I am delighted to say I have been successful in standing for election as a Trustee of the BOA and will be joining the BOA Council from January for 3 years. In conjunction with my post as Secretary of UKSSB, this maintains an excellent link for spine with the wider orthopaedic world.

The next BOA Instructional course for trainees takes place in Manchester in January 2017 with a continuing focus on Spine

A note for the diary is the BOA Congress which will take place in Liverpool next year from 19-22nd September

Ashley Cole, Chair of the Complex Spine CRG [wrote an article for the BOA on Regional Spinal Networks](#). The plan is for 15 to 20 networks to cover England. They will comprise Spinal hub hospitals with 24/7 emergency spinal provision, with partner hospitals who have spinal surgery provision but not out of hours. These will combine with non-partner hospitals who have emergency departments but no spinal cover, and any qualified provider sites that offer independent sector spinal services. The aim is to provide smooth provision of emergency care across the region, whilst ensuring quality and cost-effective elective services to the population. Use of the BSR to monitor outcomes for patients will be central, and new CQUINs are available this year to help fund the set-up of these RSNs for 2017/18.

BOA Instructional Course

7th-8th January 2017 – See below under courses

British Spine Registry (BSR)

www.spineregistry.co.uk (Data Input)

www.britishspineregistry.com (Information Website)

Mike Hutton

See above update

British Association of Spinal Cord Injury Specialists (BASCIS)

www.bascis.org.uk

Ali Jamous - President

Nigel Henderson –UKSSB BASCIS representative

1. The CRGs for spinal cord injury (SCI) and for complex spinal surgery are now merged to form the new Spinal Services CRG. The membership is noted in the report by Ashley Cole the Chair of the CRG. The details of the working relationships and the workplan will follow the first meeting in November.
2. The NHS England Specialised Commissioning Review of SCI services in England is almost complete. The workstreams have been: Access to Services, Specification of Services, Performance of Services, Quality of Services, Patient Experience and Rehabilitation into the Community, and Measurement and Research. Following a stakeholder meeting on 23rd September the final draft is now in preparation covering Service Model, Gap Analysis, and Option Appraisal and is supported by chapters from the workstreams.
3. The planned Peer Review of spinal cord injury centres (NHS England Quality Surveillance Team) has published draft Quality Indicators concerning compliance with specifications focusing on quality, patient pathway and experience. A preliminary review and visit to one centre has taken place and the remainder are due in November.
4. A Meeting of BASCIS took place hosted by the Midlands Centre for Spinal Injuries in

Oswestry on Thursday 23rd June. Among many agenda items particular concern was expressed about the difficulties in medical workforce recruitment as there are significant vacancies at every level. This meeting was followed the next day by the Annual Multidisciplinary Guttman Scientific Meeting which was a great success.

5. The spinal cord injury referral portal, which includes a useful and informative document resource, is available on www.spinalcordinjury.nhs.uk

The Spine Society of Europe (SSE)

<http://www.eurospine.org>

Lisa Roberts

[European Spine Societies Advisory Board \(EuSSAB\) – Berlin 2016 Presentation](#) (Google drive link)

BritSpine 2018

Multimedia from the 2016 event is being loaded [onto Youtube here](#) and more will follow soon.

Other Clinical Items

For those of you who are not BOA members, please do note the [BOA statement on a recent NHSE consultation on Managing Conflicts of Interests in the NHS](#)

Fellowships

BASS/BSS Presidents' Travelling Fellowship,

The British Association of Spinal Surgeons (BASS) and the British Scoliosis Society (BSS) offer senior residents, spinal fellows and consultants within five years of appointment a chance to have extensive exposure to complex spinal procedures at established spinal units over 2 weeks.

The Fellowship will take place between 27th Feb – 7th March 2017 around spinal centres in Dublin, Belfast and Galway, Ireland. The Fellowship is funded by the United Kingdom Spine Societies Board (UKSSB) which represents BASS, BSS and the Society of Back Pain Research (SBPR).

The deadline for current applications is 31st October 2016. Further details can be obtained from Mr Aprajay Golash, BASS Education and Training Chair at aprajay.golash@lthtr.nhs.uk

UKSSB SBPR Fellowships

The Society for Back Pain Research Travel Fellowships 2016 please see [Travelling Fellowships](#) SBPR.

UKSSB BOA Clinical Leadership Programme Fellowships

For 2016 -17 successful applicants for UKSSB funded BOA CLP fellowships were : Ala'a Al-Mousa, SBNS Matthew Newton Ede BSS and Vito Siva SBNS .

UKSSB sponsors applications for members of SBPR, BASS, or BSS with a minimum of one per

constituent society (subject to application) and depending on the quality of application consideration may be given to a second place. Membership of the BOA is a normal requirement for eligibility. SBNS members can also apply but require to join BOA as affiliate members at a low cost. For more information, please see [UKSSB/BOA Fellowships](#). The CLP offers further educational support with a specific focus on developing leadership within Trauma and Orthopaedics and related fields.

New Awards

Announcing the Medtronic Bone Biology Best Presentation Prize

Medtronic approached the UKSSB during BritSpine 2016 very generously offering to sponsor a prize to be given to the best presentations at the annual meetings of BSS, SBPR, BASS and BritSpine on subjects related to bone biology, bone healing or spinal fusion. The Board has gratefully accepted Medtronic's offer on behalf of the members of the Societies.

The prizes will be given not only for the best scientific content, but also the best quality presentation at one of the national meetings. Judges from the three societies will short-list two presentations from each meeting that will then go forward to a "Best of the Best" session at BritSpine 2018 in Leeds where all 12 papers will be presented and voted on by attendees at the conference.

Two prizes will be awarded, the first of £2,500 and the second of £1,500. If there are insufficient numbers of suitable presentations the prize money will be carried over to BritSpine 2020.

There is no application process for these prizes and the short listed candidates will be notified by the executive of the spinal societies immediately following the national meetings (including the first two days of BritSpine 2018). It will be a condition of being awarded a prize that the presentation is delivered on the final day of BritSpine 2018 in addition to the national meeting.

Nick Birch

Treasurer UKSSB

New Reference Documents

[Regional Spinal Networks Updated Template \(link\)](#)

Events and meetings

BSS meeting Thursday 13th to Friday 14th October 2016 Hardwick Hall Hotel, Sedgefield, County Durham TS21 2EH <http://www.southteeslri.co.uk/bss-annual-meeting>

BASS call for papers (by midnight 31st October and diary date 15th -17th March 2017 <http://www.spinesurgeons.ac.uk/bass-2017>

SBPR 2016 Annual Meeting Preston, 3rd – 4th November

BritSpine 2018 20th – 23rd March 2018

BOA Annual Congress 19th-22nd September 2017, ACC Liverpool

We are delighted to be returning to the ACC Liverpool to host the 2017 BOA Annual Congress. We are building an exciting programme based on 'Quality and Innovation'. Keep an eye on the [Congress website](#) for abstract submission details and programme updates.

Do check [Events Pages](#) and [the Medical Conference Website](#) for others.

Courses

BOA Instructional Course - 7th-8th January 2017

The focus of the BOA Instructional Course 2017 will be spine and trauma with an opportunity for trainees to gain CBDs in the following areas:

- Physiology of Trauma
- Complications of inflammatory spine conditions
- Immediate assessment, care and referral of spinal trauma

The faculty for the course has been confirmed with plenaries being delivered by Professor Amar Rangan, Professor Chris Moran, Professor Chris Colton, David Limb and Uttam Shiralkar. To view the provisional programme and to register please visit the [BOA website](#).

BOA Training Orthopaedic Trainers (TOTs) Course - 15th-16th December 2016

The TOTs course was established to improve the standard of teaching for those in trauma and orthopaedic (T&O) training and practice. The basic premise of the course is that if T&O trainers understand how people learn and how the T&O curriculum works, they can translate that understanding into action and improve their teaching.

There are currently spaces available on the TOTs course for the 15th-16th December 2016, for further information, including how to register please visit the [BOA website](#).

Training Orthopaedic Trainers (TOTs) Course - 22nd-23rd February 2017 (Newcastle)

In addition to the TOTs course being held at the BOA office in December, there will be a TOTs course held in Newcastle on the 22nd-23rd February 2017 in Newcastle. If you would like to attend please register through the [BOA website](#).

Notices

Please see UKSSB website, which links to [BASS](#) website, [BSS](#) website, [SBPR](#) website.

Vacancies

BOA Education & Revalidation Committee Vacancy

After three years in the post, Mike Reed will be standing down as Chair of the BOA's Education and Revalidation Committee in January 2017. As such we are inviting applications from BOA members to Chair the committee. Previous experience as a member of the committee, the Training Standard Committee, or the Specialty Advisory Committee is essential.

The full description of the committee and responsibilities of the Chair are available on the [BOA website](#) here, along with details on how to apply. Please note the deadline for applications is Monday 31st October 2016.

Research Committee Vacancy

The BOA's Research Committee is seeking a new member to help drive forward the BOA's Research Strategy and we invite applications for this position. Please email [here](#) with your CV by Friday 25th November, expressing your interest and any relevant experience and expertise that you would bring to the committee.

Dramatis Personae

[BASS Website](#)

[BSS Website](#)

[SBPR Website](#)

[SBNS Website](#)

[BOA Website](#)