

Welcome to the National Services Division Quarterly Update for August 2020.

Part 1

National Specialist Services Committee

The **National Specialist Services Committee (NSSC)** met on 18 June 2020 to update members on development applications and Covid mobilisation position for designated services. It was noted that due to Covid-19 recovery and planning that most applications will be delayed

1.1 New Designations

Complex MESH Removal Service

The previously approved NSSC and NHS Board Chief Executives' Group (BCE's) national designation for the National Mesh Surgery Service has now been approved by Scottish Government in July. The service will be provided NHS Greater Glasgow and Clyde and will offer complex vaginal mesh removal surgery for women who have mesh complications from mesh insertion (vaginally or abdominally) for urinary incontinence and prolapse. It is anticipated, in line NHS Board Mobilisation plans, that the service will have a phased introduction in 20/21.

Viral Genotyping Service

Joint proposal from PHS and NHS Lothian and NHS Greater Glasgow and Clyde. This application was updated to include a clinical sequencing service for COVID. This work was fast tracked through NSSC and SG approved a funding contribution. The operational planning for the service has commenced and the service will be reviewed in February 2021 to see if ongoing funding should be allocated

1.2 New developments

Ultra-Orphan Medicines

In 2018 the Scottish Government announced a new process for approving medicines for very rare conditions – the [ultra-orphan drugs pathway](#). In April 2020 the Scottish Board Chief Executives agreed to set up a new risk sharing scheme hosted by NSD to cover the cost of new drugs approved through this new mechanism, replacing the 2005 scheme.

Medicines covered by the old Ultra Orphan Drugs scheme

The majority of products covered by the old scheme are medicines for people with inherited metabolic diseases (IMD). These drugs have now been moved into a separate risk sharing arrangement - the IMD Drugs Risk Share. This list may expand over time as any IMD medicine that becomes available through the new pathway will be added to this scheme automatically. Mifamurtide, which was the only non-IMD drug on the old scheme has been moved to the new Ultra Orphan Drugs scheme.

New (2020) Ultra Orphan Drugs Risk Sharing Scheme

The scheme will fund all other medicines that are approved through the ultra-orphan pathway. As new drugs are approved the list will also expand over time. A small number of other SMC approved ultra-orphan drugs has been added to the scheme by the agreement of the BCEs. The list of funded products can be accessed [here](#).

NB - The national funding commenced 1 April 2020. Usage of patients of the new products prior to that date is the responsibility of the health board of residence.

Registration and reporting

We have written to directors of pharmacy to ask them to notify us of all relevant patients for the new UO scheme and to advise them of the recharge process.

It is vital that NSD knows of all eligible patients and their Q1 usage as soon as possible so that we can ensure that sufficient funds have been allocated. We have also been asked to report regularly to the Corporate Finance Network and the Directors of Finance.

Nusinersen for SMA Type One and Inotersen and Patisiran, for the treatment of stage one or stage two polyneuropathy in adult patients with hereditary transthyretin amyloidosis (hATTR), were approved for inclusion in the risk share.

1.3 Proposals under consideration

Stage Three

Left Atrial Appendage Occlusion (LAAO)

A Stage three application from NHS Lothian is anticipated to be received later in 2020/21. Date to be confirmed once COVID recovery plans are understood.

National Paediatric Gastrointestinal Motility Service

NPPPRG have supported the progression of this service to a Stage Three. This will be reviewed and reactivated later in the year.

Stage Two

Scottish National Hilar Cholangiocarcinoma Surgery Service

NSSC approved moving to stage two application, to explore a designated service by one provider for Scotland for Peri Hilar Cholangiocarcinoma (HC) surgery.

1.4 Horizon Scanning

Due to the pandemic a number of proposals have not progressed significantly, either as a result of diminished capacity within the NSD clinical team or diminished capacity within the applicants to progress either documentation or meet formally.

- **Scottish National Neuro MRI-guided Focused Ultrasound Centre in Dundee - for patients with essential tremor and Parkinson's Disease** - Following on from the previous application there is continuing dialogue with NHS England and NHS Tayside clinical colleagues with a view to taking this forward.

Previously notified – current work being explored across NHSS

- **Infectious Disease Network** - NSD continue to explore options for the various work streams and synergies with existing networks.

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- **Paediatric Radiotherapy** – NSD have recently met with NHS GGC and it is anticipated that application will be brought in Autumn 2020.
- **National Plasma Products Expert Advisory Group (NPPEAG)** – Agreement has been reached to incorporate NPPEAG and its programme of work into the Transfusion Services sub group of the Haematology & Transfusion Network.
- **Thyroid Cancer Network** – NSD have been in discussion with Cancer Policy Team in Scottish Government with regard to how the work of the previous short-life working group is continued.

1.5 National Service and Network Reviews

All NSD services and Networks are reviewed on a three to five yearly cycle.

Adult Renal Transplantation Service – minor review completed. The review concluded that the service continues to meet the national designation criteria and should continue to be commissioned by National Services Division.

The following services/networks received approval to retain national designation

- Surgical Congenital Anomalies Network for Scotland (SCANS)

1.6 Service Updates – Covid-19

As NSD continues to adapt to the Covid-19 pandemic, this summary outlines how we are supporting the safe recovery and delivery of nationally designated services. Our key principles throughout the restart and recovery of specialist services remain in ensuring safe, equitable, reliable and consistently high-quality care.

Assessment of and support to nationally commissioned specialist services

NSD has been in frequent contact with all nationally commissioned services throughout the evolution of the COVID-19 pandemic. As the scope of services we commission is very broad and some contain both 'acute/critical' and more 'elective' elements, some services have been more affected by COVID-19 than others. We have:

- Worked with the providers to assess what capacity is available to restart paused activity, including identifying ways to improve the resilience of fragile services and provide new forms of access. A RAG status has been compiled on the current position for each service in conjunction with service providers.
- Established a robust, modified governance arrangement for conducting performance reviews in support of services disrupted by Covid-19. The new process aims to assess and prioritise individual services for annual performance review (APR) meetings. Decisions will be informed not only by reported performance in 2019/2020 but also anticipated impact of on service capacity/ delivery in 2020/21.
- Continued to liaise with NHS-England Specialised Commissioning, and our other devolved administration national commissioning colleagues, to plan and support mutual aid and pan-UK specialist service planning where appropriate.
- In support of the recovery and restart of services we are:
 - maximising** access to routine specialist treatments whilst supporting the COVID-19 - response;
 - supporting** fragile specialist services which are strategically important to ensure that they remain viable;
 - ensuring** the quality of commissioned services are maintained to the highest possible standard, whilst recognising the likely impact on access performance;

keeping NHS Scotland abreast of the phase two delivery for specialist services delivered by NHS England providers where these affect Scottish patients.

Part 2

National screening programmes

Some NHS Scotland national screening programmes which were paused in March because of coronavirus (COVID-19) are now resuming safely, carefully and in a series of stages. This follows Ministerial approval of all programme recovery plans.

Cervical Screening - From Monday 29 June, anyone who was invited for cervical screening before the pause should contact their GP practice to make an appointment. This applies to anyone who was yet to make an appointment or who had made an appointment which was then cancelled. Appointment invitations and reminders will be posted from mid-July, with invitations sent to those who receive more frequent (non-routine) cervical screening appointments first. Routine screening will recommence once NHS Scotland has caught up with non-routine appointments affected by the pause.

Breast screening (mammograms) is planned to resume from 3 August.

The Major Review of the Scottish Breast Screening Programme is continuing and is planned to report in spring 2021.

Bowel screening (home test kits) - Bowel screening colonoscopies have resumed. Bowel screening kits will be issued when NHS Scotland have caught up with colonoscopy appointments affected by the pause.

AAA screening programme - resumed on Monday 6 July. Appointment invitations will first be sent to men with a medium AAA who are currently tested every 3 months. Yearly and routine screening will resume once NHS Scotland has caught up with those who are screened every 3 months.

Diabetic retinopathy screening (DRS) programme The also resumed on Monday 6 July and is inviting service users to be screened. Appointment invitations will first be sent to people currently considered a high priority. Routine screening will resume once NHS Scotland has caught up with appointments for these participants.

The internal project to move to revised interval screening (RIS) and to introduce Optical Coherence Tomography (OCT) is still moving ahead but, with a revised start date. The date to introduce RIS and OCT will be two months after the DRS programme is restarted.

Pregnancy and Newborn Screening programmes - have continued throughout COVID-19. Within the programme, implementation of the **Non-Invasive Pre-Natal Testing (NIPT)** (which introduces screening for Edward's and Patau's alongside Down's syndrome) is planned for late September.

Information relating to the screening programme changes is available on [NHS Inform](#) and the [National Services Division website](#).

Part 3

NHSS National Planning Board

The NHSS National Planning Board is meeting on 21 of August. The current areas of work for national planning are:

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3.1 Commissioned Horizon Scans

The major horizon scans completed on Cancer, Heart Disease and Stroke were presented to the National Planning Board in February 2020. Areas of future planning were identified. Those that have been able to start include:

- National Atrial Fibrillation Group – bringing together the clinical communities of heart disease and stroke to enhance processes in primary care and post stroke.
- Exploration with Scottish Ambulance Service to plan and test advances in decision making tools and digital solutions for early stroke diagnosis and routing of patients to the right centre of care.
- A full review of CTA provision has been completed and an options appraisal for rapid interpretation of results to support thrombectomy is underway, the results of which will be available by the end of August 2020.
- A Cardiac Imaging Planning Group has undertaken an initial gap analysis for timely access to CTCA and other diagnostics for heart disease – and this will progress with a paper going to the National Image Executive Group in August (with cross over's also to SCIN and SRTP).
- A Review Initiation Document (RID) for a possible review of Cardiac Surgery and Structural Interventions has been prepared for the August Board.

3.2 Reviews

Burns Care - As agreed with Board Chief Executives in January, National Planning have completed a refreshed review into Burns Care in Scotland. This review will report to the National Planning Board on 21st of August.

3.3 Service Planning

Thrombectomy - The Thrombectomy Advisory Group (TAG) continues to work on the project planning to build a service for Scotland with a provisional aim to introduce thrombectomy in the latter part of 2020. There will be three centres which will provide thrombectomy for Scotland in Edinburgh, Glasgow and Dundee.

Robotic Assisted Surgery (RAS) – a draft national strategic framework for RAS was presented to the National Planning Board in February, which endorsed the need for a systematic shift to Minimally Invasive Surgery for key types of surgery, with RAS playing a key role in this. A new national RAS Programme Oversight Group, supported by a RAS Clinical Reference Group is now forming. These groups will develop the framework further and lead the implementation of the expected future expansion of RAS across Scotland. A key element of this will be to work with SG Infrastructure and NSS Procurement to explore a modern capital and replacement model.

Interventional Radiology - A National Interventional Radiology Steering Group continues to work with the aim of ensuring a stable IR service for Scotland, and to support regional and inter-regional working for future regional IR service models. Work within this includes IR standards for Scotland; patient transfer protocol, credentialing sub-group, and multi-disciplinary team advanced roles.

For more information or if you would like to contact us on any of the items in this update, please contact us at NSS.nsd-enquiries@nhs.scot