

National Services Division's Role

National Services Division (NSD) is part of NHS National Services Scotland (NSS). NSD facilitates collaboration between NHS Boards and service users to plan and deliver equitable and quality assured programmes of care for the NHS in Scotland. This includes a 'once for Scotland' approach to specialist services, screening programmes, national networks and national planning. Our aim is to maximise the impact of our programmes of work to improve the health and wellbeing of the population of Scotland.

Specialist Services for Rare Conditions

National Services Division commissions specialist services on behalf of NHSS Boards and Scottish Government.

Financial Risk Share Arrangements

National Services Division manages a number of national financial risk share schemes on behalf of NHSS Boards. These allow NHSS to pool funding across the country, so that Boards can share the financial impact of any unpredictable expenditure, in respect of the treatment, for very rare conditions that may require a high cost intervention.

Population Screening

Working with NHSS Boards, we co-ordinate Scotland's eight national population screening programmes:

Bowel screening*	Breast screening*
Cervical screening	Diabetic retinopathy screening
Pregnancy screening*	Newborn blood spot screening*
Universal newborn hearing screening	Abdominal aortic aneurysm screening
*National Services Division also commissions some elements of each of the breast and bowel screening programmes, as well as the laboratories for the pregnancy and newborn bloodspot screening programmes.	

National Networks

National Networks bring together the bespoke expertise to design and improve care, operating on a national level. The type of networks that NSD support are:

Clinical networks – In the main, these support service improvements for patients with a rare condition e.g. inherited metabolic disorders.

Diagnostic networks – These networks focus on linking laboratory and clinical services with users, seeking to ensure access to the right test at the right time.

Strategic networks – Strategic networks are commissioned when nationally focused, large major change across whole pathways of care are required e.g. major trauma, maternity, neonatal, veteran, health in custody (police and prisons)

The same core elements apply equally to all networks, which are:

- Care pathway / service improvement and planning – mapping services across Scotland and designing the right models of care
- Education to build capacity and capability in specialist care – for both professionals and carers
- Collecting, analysing and reporting data to measure and improve quality of care
- Communicating and engaging with stakeholders – ensuring that there is clear understanding and involvement in shaping and redesign of services to meet patient and carer needs

National Planning

National Planning is an NHSScotland wide agenda, offering a new governance approach to decision making around the planning of key NHS clinical (and sometimes non-clinical) services. National Planning carries out:

Commissions – commissioning of portfolio groups to look at developing a longer-term view on what areas may need planning in the future e.g. what will NHSScotland need to plan now for the coming 5-10 years e.g. for heart disease, cancer, stroke, etc.

Reviews – a review of existing NHS services where regional and local plans highlight the potential for more effective service planning at a national level e.g. robotic assisted surgery, interventional radiology.

Service Planning – following on from reviews or exploration through horizon scanning, the National Planning Team may support in helping form specific service planning groups to plan for the future model or service provision.

Committees Supported by NSD

To support all of the above work, NSD manages and supports two committees/boards.

National Specialist Services Committee (NSSC) – applications for new specialist services, commissions and networks are considered via a staged application process.

NHSS National Planning Board – where areas of planning are needed at a national level for NHSS. Topics considered for national planning will be considered using national planning criteria – volume, variation, workforce, disruptive technology. National Planning will also consider where a topic sits on the matrix below – to route some topics to other levels for planning (regional or local) rather than for national planning.

Planning	National		3-4 sites e.g. Neurosurgery Major Trauma Cardiac Surgery Genomic Medicine	Quaternary Services Single/double site Shared services
	Regional	Elective Care Acute Hospitals	Tertiary Services Forensic MH	
	Local	Community care Primary Care Unscheduled Care Mental Health		
		Local	Regional	National
		Delivery		

To Note: NSD are members of the Scottish Screening Committee (SSC) but Scottish Government run this committee.

For more information about NSD please visit: [NSD](#)

Source of Requests for New Work Streams

NSD receives requests or directives to explore new areas of work from a variety of sources i.e:

- Arising from a SG decision e.g. to set up a new national strategic network – and comes directly to NSD to explore with SG the feasibility and remit of such an area of work.
- As a request from the Board Chief Executive's Group for NSD to take on a new role.
- Existing work programmes within NSD domain may also escalate areas of need to NSD senior management team to explore where to route them for solutions.
- Alternatively, due to breadth of NSD's clinical connections regional planning, local board planners or local clinicians sometimes approach NSD staff direct to talk through an idea.

The following sections describe how best to navigate how, where and to whom you should refer your proposal to (that you consider a national approach is required).

1. Who to Talk to First

What we have learnt over time is that the NHS is a hard system to navigate, even for staff who have worked in it for decades! Often clinicians speak with us about a topic they believe should be a nationally commissioned service. This may well be the case (once assessed) but there is a route to progressing ideas.

The table below summaries who you should talk to first to explore your idea:

Who to talk to – to explore more and to be routed to the right place					
Are You In	Scottish Government	A Health Board or IJB	A Regional Service	National Network or Service Commissioned by NSD already	Other Stakeholders
First Point of Call	Planning & Quality Team in Healthcare Quality & Improvement Directorate	Director of Planning within NHS Boards' strategic planning team or Chief Officer	Regional Director of Planning	Senior /Programme Manager for your Network or Commissioned Service	nss.nsd-enquiries@nhs.scot
If you cannot find the information you need, please contact: nss.nsd-enquiries@nhs.scot					

2. Referring a Topic to NSD

If, after initial discussion/exploration with your first point of contact you still wish to refer a topic to NSD for consideration, please fill in the 'Request for National Development Support' form (Appendix 1).

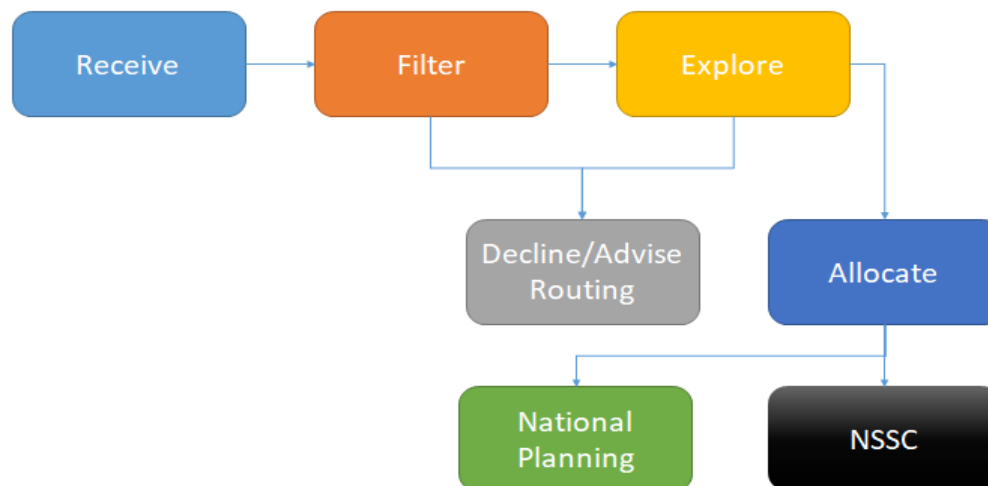
3. How NSD Triage








As described above, NSD has multiple roles and sub-teams. NSD also work very closely with key strategic and operational leadership groups.

The senior management team (SMT) at NSD will discuss and advise on referrals. The NSD SMT consists of:

- Director of NSD; Medical Director of NSD; Associate Directors x 7; national medical advisor; public health consultants x 2

The Triage Process is as follows:



	Receive: Proposal received from applicant seeking help with questions and problems (via online form/emailed form – see Appendix 1).
	Filter: The SMT assesses proposal against NSD remit within 3 weeks of receipt and advises the applicant of the outcome and provisional timelines for the next stage of exploration/routing etc).
	Explore: The SMT may require more information that may be sourced from the applicant or the NSD team. NSD will also cross reference within NSS to ascertain any interdependencies with other functions This will enable NSD to route/or advise more effectively.
	Decline/Re-Route Further to assessment NSD may decline or reroute some proposals e.g. to local or regional planning. In such cases, the applicant will be given feedback on the reason for the decision and next steps.
	Allocate: If the outcome of the assessment is that the topic meets NSD criteria it will be allocated to a team in NSD to be progressed in collaboration with the applicant either through the NSSC staged process or to National Planning Executive Group for consideration.
	NSSC: For Specialist Services and National Managed Clinical Networks – applications will be taken through a staged application process for NSSC
	NP: For areas of work that need NHSS National Planning (that sit between the specialist and regional planning space) the national planning team will work with the applicant to prepare a paper for consideration by NP Executive Group who will then make recommendation to the National Planning Board

Request for National Development Support

This form should be used as the basis to explore the possibility of national supported developments that are not (yet) covered by the application process for national designation of a specialist service; or national managed clinical network (NMCN); or via the work plan of the NHSS National Planning Board.

The information you provide will help National Services Division (NSD) Senior Management Team (SMT) to assess the best way forward for addressing the service gaps or issues highlighted. Possible immediate outcomes are:

- Signposting and advice about appropriate local or regional points of contact or other organisations and agencies better suited to address the topic, issue or service gap outlined.
- An offer from NSD to support a SLWG to develop a pathway for service access or recommendations for service improvement.
- An offer from NSD to support an application for a new specialist service or NMCN
- Consideration by NSD National Planning Team and liaison with applicant to give guidance on the planning route to be take (local, regional, and national).

This form is not to be used for existing nationally commissioned services or networks who wish to undertake service developments or address service needs. In this circumstance these should initially be discussed with their commissioning team who can advise on appropriate next steps.

1. Contact details and role <i>Name, role, location, telephone number and email address</i>
2. Brief description of proposal/need <i>Include brief description of the condition and the service issue that has prompted the request for support from NSD.</i>
3. Description of current provision and why is there issue/service gap that requires input from NSD <i>Please include information of main treatment centres in Scotland (or UK, if a significant number of patients receive treatment outside Scotland). Also provide further information about the service gaps and/or issues that you are proposing to address.</i>
4. Number of affected patients <i>In Scotland and UK</i>

5. Description of proposed actions

Include description of potential benefits and impact in relation to patient experience, outcomes and wider NHS in Scotland.

6. Other relevant information

Please outline any other relevant information not covered by the above questions.

7. Who have you spoken to about your referral to date (had agreement to submit) e.g.

Director of Planning; Medical Director; Chief Officer; Scottish Government; Regional Director

Please send completed form to nss.nsd-enquiries@nhs.scot

FOR NSD USE ONLY

Date email received	
Date SMT discussed	
Outcome/ Recommendations (Whats to be done, by who, by when....)	