

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

6. Other relevant information	
<i>Please outline any other relevant information not covered by the above questions.</i>	
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....)	