

Application for National Development Support Guidance

Applications provide the basis for exploring the possibility of national supported developments not currently provided in Scotland. The information you provide will be used by National Services Division (NSD) Strategic Management Group Clinical (SMGC) to assess the best way forward for addressing the service gap or issues highlighted.

This process is <u>not</u> to be used for existing nationally commissioned services or networks who wish to undertake service developments or address service needs. Please discuss this with the appropriate commissioning team within NSD who can advise on next steps.

This document provides guidance on how to complete the online application webform. Please ensure you have all the relevant information required for each question as follows - BEFORE you begin the online submission.

There is no 'save' option so you will need to complete the online form in one session.

- You will need your unique reference number to access your application
- Please ensure you complete and submit your application by 31 March (annually).
- Once submitted, you will receive confirmation of receipt by email.
- Should you require assistance please contact nss-nationalplanning@nhs.scot

NHS Host Board	Scottish Government							
Is this development aligned to a strategy/policy? If yes, please give details. For example: Programme for Government or specific policy initiative linked to care programmes.								
	y yy/policy?							

Application for National Development Support Guidance

NSD602-001.03 V5

For Health Board requests only									
			Executive Management Team of your sponsor(s) and put N/A who						
	YES		NO						
Please enter the	e name o	of your EMT sponsor b	pelow or if not applicable, N//	4					
Finance Director			Director of Planning						
CEO/COO			General Manager						
Medical Director			Regional Director Of Planning						
In order to proceed with your proposal, please attach a minute of agreement / evidence of support of application and details of approvers For example: extract from NHS Board meeting									
		on the "Yes" to confil d, you cannot procee	rm button the rest of the qued.	estions appear. If					
A 1! 4!41s	D . 46 . 11								

Alignment with Portfolios of Care Please choose which Portfolio of care you feel best fits your proposal								
Mental Health	Neurological	Trauma	Diagnostics					
Cancer	Rare Diseases	Paediatrics	Transplant					
Perinatal / Maternity	Transgender	Cardiovascular	Population Health					
Other	Unknown		·					

Is your proposal aligned to the ambitions of Realistic Medicine? YES NO

For example:

- · Listening to understand the patient's problems and preferences;
- Sharing decision making between healthcare professionals and their patients;
- Ensuring that patients have all the information they need to make an informed choice;
- Supporting healthcare professionals to be innovative, to pursue continuous quality improvement and to manage risk better;
- Reducing the harm and waste caused by both over-provision and under-provision of care;
- Identify and reduce unwarranted variation in clinical practices.
- · Reducing risk

Brief description of proposed service / programme or network

For example: The proposal seeks to establish a national service for XXXXXX. All steps in the patient pathway will continue to be provided locally where possible with the exception of planning and delivery of XXXXX. The National service will provide – (summarise benefits.)

NSD602-001.03 V6 Page **2** of **4**

Application for National Development Support Guidance														
What is th	e pro	pose	d Service	model? D	rop down r	nenu, plea	ase	choos	e:					
Specialist			Screening		Strategic		National Unknown							
Service					Network	k Network Officialist								
A/I: - (! - 4 !:	1 . 1*			,	5.11		•		,	,				
		very i	model? Ple				j tro							
National C	entre			Regiona	al Centres	5			Unkn	own	1			
		_	d lifecycle					_				twork		
Please cho	ose on	e of th	ne following	from the dr	op-down m	nenu: 1,2,	3,4	, 5, 6, 7,	8,9,10), un	known			
How man	y ser	vice ı	users / pat	ients will	benefit p	er annu	m _							
Please cho	ose: l	Jsers	or Patients a	nd then cor	nplete the i	number th	at v	vill ben	efit p	r anı	num			
Year 1			Year 2		Year 3			Year	4			Year 5		
What does this proposal require?														
Please com	plete re	equire	ments for the	e following o	over a 5-ye	ar period.								
Capital		Year	1	Year 2		Year 3			Year -	4		Year	5	
investment			_								_	+		
New Facilit	ies	Year	1	Year 2		Year 3			Year 4			Year 5		
Equipment	,	Year	1	Year 2		Year 3		Year 4		Year 5		5		
From exist	_					_								•
Please con period.	npiete	existii	ng staff num	bers require	ed over a s	o-year								
CLINICAL		Year	1	Year 2		Year 3	Year 4 Year 3			· 5				
				1,,									1	
MEDICAL	Year 1 Year 2 Year 3		Year 4		Year 5									
NURSING		Year	1	Year 2		Year 3		Year		ear 4		Year 5		
MANAGEN	IENT	Year	1	Year 2		Year 3	Year		Year 4		Year 5			
ADMIN		Year	1	Year 2		Year 3	3 Year		Year 4		Year 5			
NI 1 - 66														
New staff: Please cor period.	nplete	new s	staffing num	bers require	ed over a 5	5-year								
CLINICAL		Year	- 1	Year 2		Year 3			Yea	r 4		Year	5	
MEDICAL		Year	- 1	Year 2		Year 3			Yea	r 4		Year	5	

NSD602-001.03 V6 Page **3** of **4**

Application for National Development Support Guidance

- 1-1-1		Development	Capport Ca	iddiioo						
NURSING	Year 1	Year 2		Year 3	Yea	r 4	Year 5			
MANAGEMENT	Year 1	Year 2		Year 3	Yea	· 4	Year 5			
ADMIN	Year 1	Year 2		Year 3	Yea	r 4	Year 5			
Does this serv Eg: Medical Lab				ation by	an external	egulator?				
Eg. Wodrodi Lak	oratory doc		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If yes, p	lease describe	accreditation	n anticipate	ed.		
Yes		No								
Is this service	(develop	ment) cost nei	utral?							
				If no, w	hat is the cost	?				
Yes		No								
	Will this development include collaboration with external stakeholders (not NHS)? (Choose all that apply – enter "X" in the checkbox)									
		Fire					IJBS			
	Large	National Bodies	3	Police						
		Social Care				Thir	d Sector			
Academia										
What will the (For example: Co appropriately res	nance to de	velop a XXX spe	ecialist centre	in Scotla	and delivering s	ate of the a	rt therapy v	vithin an		
Outcome 1										
Outcome 2										
Outcome 3										
Outcome 4										
Outcome 5										
What is the Exit Plan criteria from NSD? For example: The service would continue for around two years after launch to ensure that community and inpatient services are working well together. At this point ongoing need could be reviewed.										
Criteria 1										
Criteria 2										
Criteria 3										
Criteria 4										
Criteria 5										

NSD602-001.03 V6 Page **4** of **4**