

Trust Board Meeting: Wednesday 13 November 2013

TB2013.127

Title	National Specialised Services Specifications: Compliance Process
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Status	For ratification of applications for derogation and approval of associated governance arrangements
History	<p>This paper was supported by the Trust Management Executive on 10th October 2013.</p> <p>Applications have been made to NHS England for derogations for seven specialised services provided by the Trust. These applications have been made by the Associate Director of Business Planning with the support of the Director of Clinical Services and Director of Planning and Information in order to meet tight deadlines.</p>

Board Lead(s)	Mr Andrew Stevens, Director of Planning and Information			
Key purpose	Strategy	Assurance	Policy	Performance

Executive Summary

<p>1. From 1 April 2013 specialised services became directly commissioned by NHS England. An increased list of services has been defined as specialised, with 143 now prescribed as such.</p>
<p>2. In order to promote consistency of quality and access NHS England asked Clinical Reference Groups, comprising clinicians and patient and carer representatives, to develop service specifications for the prescribed specialised services. The majority of these specifications became mandatory for the NHS from 1 October 2013.</p>
<p>3. The OUH has self assessed its compliance against the service specifications and is not fully compliant with seven of the standards for the services which it wishes to provide. In these circumstances NHS England has made provision for providers to apply for a “derogation”. An agreed derogation will support full implementation of the standards over a time limited period in accordance with an agreed action plan.</p>
<p>4. The OUH has applied for seven derogations:</p> <ol style="list-style-type: none"> i. Haematopoietic Stem Cell Transplantation for Children ii. Chemotherapy for Children, Teenagers and Young Adults iii. Cancer Services for Teenagers and Young Adults iv. Paediatric Gastroenterology, Hepatology and Nutrition v. Paediatric Neurodisability vi. Paediatric Neurorehabilitation vii. Complex Gynaecological Urinary Fistulae – the OUH no longer wishes to provide this service but the commissioner has asked the Trust to submit a derogation application to allow the future patient pathway to be agreed. <p>This paper describes the areas of non compliance with the standards, the service arrangements that are in place to ensure patient safety and acceptable quality of care during the derogation period, and the proposed action plans and target dates to achieve compliance.</p>
<p>5. NHS England (Wessex Local Area Team) has applied for derogations for a further five services where it wishes to clarify patient pathways between different providers. These services are:</p> <ol style="list-style-type: none"> i. Adult Specialised Vascular Services ii. Specialised Services for Haemoglobinopathy Care (All Ages) iii. Cancer: Specialised Kidney, Bladder and Prostate (Adult) iv. Specialised Human Immunodeficiency Virus Services (Adult) v. Specialised Human Immunodeficiency Virus Services (Children)
<p>6. Recommendation</p> <p>The Trust Board is asked to:</p> <ul style="list-style-type: none"> • ratify the derogation applications and • approve the proposed governance arrangements to achieve and maintain compliance with the standards for all the specialised services that the OUH provides.

National Specialised Services Specifications: Compliance Process Update

1. Purpose

1.1. The purpose of this paper is to:

- Describe the development of national specifications for specialised services and the process of 'derogation'.
- Summarise the OUH's self assessment of its compliance against these specifications.
- Highlight where the OUH has requested a temporary derogation, describing the service arrangements that are in place to ensure patient safety and acceptable quality of care during the derogation period and the action plan and target date to achieve compliance.
- Describe the proposed governance arrangements to achieve and maintain compliance with the standards for all the specialised services that the OUH provides.
- Recommend to the Trust Board that it ratifies the action plans and approves the proposed governance arrangements.

2. Background

- 2.1. From 1 April 2013 specialised services, which account for over £11 billion or 10 per cent of the NHS budget, became directly commissioned by NHS England.
- 2.2. For Oxfordshire an additional £74m of service transferred from the Oxfordshire Primary Care Trust to the NHS England contract.
- 2.3. Previously, a more limited range of specialised services was commissioned by regional specialised commissioner teams. There was a lack of consistency in terms of which services were commissioned in which regions, the role of Primary Care Trusts and the application of service definitions.

List of prescribed specialised services

- 2.4. To address this inconsistency the Department of Health asked a Clinical Advisory Group to recommend a list of 'prescribed' specialised services, tested against the four factors in the Health and Social Care Act 2012 as suitable for commissioning by NHS England, i.e.:
 - i. The number of individuals who require the provision of the service or facility;
 - ii. The cost of providing the service or facility;
 - iii. The number of people able to provide the service or facility; and
 - iv. The financial implications for Clinical Commissioning Groups (CCGs) if they were required to arrange for the provision of the service or facility.
- 2.5. A list of 143 prescribed specialised services has been agreed. These services are now commissioned on a national basis by NHS England, using single national service specifications to set out exactly what is required from service providers in terms of standards and quality of patient care. The commissioning of these services is clinically-led, through a system of Programmes of Care and

Clinical Reference Groups (CRGs). The contracting of services is led at a local level by 10 of NHS England's area teams. The Wessex team is responsible for the OUH's specialised services.

Clinical Reference Groups (CRGs)

- 2.6. There are 74 Clinical Reference Groups which are service-specific and provide clinical advice to NHS England on the commissioning of specialised services. Each CRG has up to 27 members, including representation from patients, carers and patient groups. One of the core responsibilities of the CRGs is to ensure that consistent standards of service delivery are applied across the country with equal access to services regardless of location.
- 2.7. A list of the CRGs is provided at Appendix A, and more information can be found in *Clinical Reference Groups for Specialised Services: A Guide for Clinicians* at <http://www.england.nhs.uk/wp-content/uploads/2013/01/crg-guide.pdf> Lists of CRG members, which include a number of OUH clinicians representing the Thames Valley, can be found via <http://www.england.nhs.uk/resources/spec-comm-resources/npc-crg/>
- 2.8. The CRGs are not decision-making bodies, but instead develop recommendations which are taken to NHS England's five Programmes of Care Boards (Internal Medicine, Cancer and Blood, Trauma, Women and Children, and Mental Health). These Boards provide functional groupings for the 74 CRGs and are responsible for the development of clinical strategy and for oversight of CRG work programmes.

Specialised services specifications

- 2.9. During their first year of operation, the CRGs were asked to draft service specifications to cover each of the agreed prescribed specialised services. These specifications are intended to describe and specify the level of specialised service to be provided which would allow for the nationally consistent delivery of those services.
- 2.10. The standards set out what is expected from service providers and define access to a service. They also set out a series of core and developmental standards. Core standards are those that any reasonable provider of a service should be able to demonstrate, whilst developmental standards improve services over a period of time, encouraging them to achieve excellence within a particular field.
- 2.11. CRGs produced a total of 128 draft service specifications which were subject to a consultation exercise, carried out during December and January 2013. A further seven service specifications were consulted on during January and February.
- 2.12. The OUH undertook an extensive internal process to review the draft specifications. An internal pro forma was designed and completed by the lead for each service to determine:
 - Whether the OUH provided the service
 - If the Trust intended to provide it in the future
 - Whether the service agreed with the proposed specification

- Any suggested amendments

- 2.13. The detailed responses in relation to the individual specifications were collated into a formal organisation response submitted via the webform provided. NHS England acknowledges that “the timescale for the consultation was limited and that there should have been a longer period of consultation on the draft documents”.¹
- 2.14. Feedback from the consultation² was considered by the CRGs and recommendations set out by the national leads for the Programmes of Care and approved by the Clinical Priorities Advisory Group in March 2013. Revised versions of the service specifications were published to be used in the 2013/14 contracting round. These can be viewed under the individual CRG pages at <http://www.england.nhs.uk/npc-crg/>

3. Implementation of Specialised Services Specifications

- 3.1. The specialised services specifications became mandatory for the NHS from 1 October 2013, (with the exception of a small number of specifications which have been reclassified as “development specifications” as shown in Appendix B).

Derogation Policy³

- 3.2. NHS England has recognised that on rare occasions providers commissioned to provide specialised services may be unable to achieve key national requirements in full. In these circumstances, providers may apply for a ‘derogation’ of service. Derogation means the temporary delay in meeting key service requirements in full, as described in the service specification. An agreed derogation will support full implementation over a time limited period according to provider capacity and capability.
- 3.3. A formal derogation in service is defined as:
“a time limited agreement reached between commissioners and providers that one or more key national standards or requirements, as defined by commissioners, will not be met during the contractual period”
- 3.4. Clinical service derogations will only be agreed where assurance has been provided that acceptable service arrangements are in place, ensuring patient safety and acceptable quality standards of care, and where there is a detailed action plan in place to achieve compliance with agreed timescales.

¹ NHS England, July 2013, Consultation on Specialised Services Specifications and Commissioning Policies 2013/14 – Summary and Response from NHS England, p12 <http://www.england.nhs.uk/wp-content/uploads/2013/07/consult-ssscp-13-14-sum.pdf>

² The detailed feedback can be viewed at <http://www.england.nhs.uk/wp-content/uploads/2013/07/consult-ssscp-13-14.pdf>

³ NHS Commissioning board, April 2013, (Interim) Policy for Derogation of Commissioned Specialised Services <http://www.england.nhs.uk/wp-content/uploads/2013/04/cp-14.pdf>

OUH Compliance with Specifications

- 3.5. During the summer of 2013, Trusts were asked by NHS England to provide a self assessment of their compliance against key requirements of each of the specifications, categorising it according to one of four levels:
- 1 – Fully compliant now
 - 2 – Will be fully compliant by 1 October 2013
 - 3 – Unlikely to be fully compliant by 1 October 2013 – temporary derogation application required with action plan in place to support compliance
 - 4 – Unlikely to be fully compliant – significant concerns about compliance in medium to long term or other significant concerns to be discussed
- 3.6. It is important to note that the self assessment requested by NHS England was focused on ‘key requirements’ from much longer specifications. Because of the timescale, the Trust’s self-assessment has concentrated on these key requirements, but has done so with reference to the full specifications.
- 3.7. The assessment of the OUH’s compliance was undertaken at local service level, coordinated by the OUH’s Associate Director of Business Planning. Current assessment of compliance against the specifications for the services that the OUH provides is set out at Appendix B.
- 3.8. During September 2013 the Trust was asked to provide action plans for the services which it had assessed as either level 3 or level 4, i.e. those which require a derogation.

Plans for Services where Derogations requested by OUH

- 3.9. The OUH has requested a derogation in relation to seven of the specialised services specifications, as set out in the table below:

B04/S/b	Blood & Marrow Transplantation	Haematopoietic Stem Cell Transplantation (Children)
B15/S/b	Chemotherapy	Children, Teenagers and Young Adults
B17/S/a	Cancer	Teenage and Young Adult
E03/S/c	Paediatric Medicine	Gastroenterology; Hepatology; Nutrition
E09/S/c	Paediatric Neurosciences	Neurodisability
E09/S/d	Paediatric Neurosciences	Neurorehabilitation
E10/S/e	Complex Gynaecological Services	Urinary fistulae

- 3.10. The Trust was asked by NHS England to submit a template to support each requested derogation. The applications were made in conjunction with the Wessex Area Team, following in particular a meeting on 16th September 2013. The key elements of the applications were:

- Confirmation that the derogation poses no risk to patient care or safety
- Confirmation of any financial implications

- Action plan and target date to address derogation, including stakeholder consultation where appropriate

The table below summarises the information provided in the templates that the OUH submitted.

B04/S/b Blood & Marrow Transplantation Haematopoietic Stem Cell Transplantation (Children)	
The issue in relation to compliance with this specification is that the OUH does not have JACIE accreditation ⁴ for its paediatric service. The OUH only undertakes part of the patient pathway. All allogenic transplants (from a donor) are undertaken in Bristol with a shared care pathway post transplantation. Therefore derogation is not required for this element of the care pathway. Autologous transplantation (harvesting from the patient, storage and re-infusion) is undertaken in Oxford by the National Blood Service stem cell laboratories/services who are JACIE accredited (Oxford licence to April 2015). Therefore derogation is not required for this element of the care pathway. The Oxford paediatric clinical unit is working towards JACIE accreditation for the autologous workload, although under the specification it is voluntary not mandatory.	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety
Financial implications	Funding may be transferred to Bristol as a hub, requiring OUH to invoice University Hospitals Bristol NHS FT as a subcontractor for the activity.
Action plan to address derogation	Discussions will be required to agree the patient pathway between OUH and University Hospitals Bristol NHS FT and to formalise this. The subcontracting arrangement will need to be agreed.
Target date for compliance	1 April 2014

B15/S/b Cancer: Chemotherapy (Children, Teenagers and Young Adults)	
The issue in relation to compliance with this specification is that, in common with other Trusts, the OUH is currently unable to use e-prescribing for chemotherapy systemic anti-cancer therapy. (The adult system cannot be used for paediatric patients.)	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety. The service and Pharmacy have arrangements in place to assure patient safety using a manual process.
Financial implications	There will be financial implications for the Trust to cover the cost of the IT system and implementation.
Action plan to address derogation (including	Discussions are taking place nationally with Varian to ascertain whether paediatric prescribing will be

⁴ The Joint Accreditation Committee- International Society for Cellular Therapy (Europe) & European Group for Blood and Marrow Transplantation is a non-profit body established in 1998 for the purposes of assessment and accreditation in the field of haematopoietic stem cell (HSC) transplantation. JACIE's primary aim is to promote high quality patient care and laboratory performance in haematopoietic stem cell collection, processing and transplantation centres through an internationally recognised system of accreditation.

involvement of stakeholders where appropriate)	deliverable linked to the current adult system. If this proves to be challenging the Trust will look to procure the Chemocare package or EPR package on Cerner Millennium. Target date: December 2014 Quarterly updates will be provided to the area team.
Target date for compliance	December 2014

B17/S/a Cancer: Teenagers and Young Adults	
Further work is required to meet this specification in all its aspects. In particular, reconfiguration and refurbishment of an existing site (rather than a new build) is needed to meet all the physical site facility specifications quickly. The precise location for the facility is dependent on other Trust/University developments. It is expected that these issues can be resolved by the end of the year. A business case, already part written, will then be progressed to meet the specification.	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety.
Financial implications	There will be capital and revenue implications which will be defined in the business case.
Action plan to address derogation (including involvement of stakeholders where appropriate)	The business case will be developed and shared with commissioners. Stakeholders will be involved in the development of appropriate facilities.
Target date for plan for compliance	31 March 2014

E03/S/c Paediatric Medicine: Gastroenterology; Hepatology; Nutrition	
The issue in relation to this specification is compliance with workforce standards (medical staffing – single handed consultant)	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety. A locum consultant is currently in post.
Financial implications	Financial implications will result only from any further changes in activity because the locum consultant is already in post.
Action plan to address derogation (including involvement of stakeholders where appropriate)	A business case is being developed to meet the specification, in particular the appointment of an additional substantive consultant with the following key milestones: <ul style="list-style-type: none"> • December 2013 – Approval from Trust Management Executive • January/February – Advisory Appointments Committee • February/March - advertisement • April/May 2014 – interview and appointment • August/September 2014 – induction and start in

	<p>post</p> <p>Discussions about the paediatric gastroenterology service have taken place with surrounding clinicians who have been supportive of a second consultant appointment.</p>
Target date for compliance	September 2014

E09/S/c]Paediatric Neurosciences: Neurodisability	
<p>The issue in relation to this specification is compliance with multidisciplinary network team requirements. Some of the issues identified on initial self assessment were addressed over the summer with funding from specialised commissioners. A review of the current consultant workload has been completed and an additional consultant appointment is needed to provide all elements of the service.</p> <p>Issues also remain in relation to access to (GA) MRI.</p>	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety.
Financial implications	Financial implications for the commissioner will result from increases in activity to meet specifications. This will be approximately £200k per annum.
Action plan to address derogation (including involvement of stakeholders where appropriate)	<p>A business case is being developed for the appointment of an additional substantive consultant with the following key milestones:</p> <ul style="list-style-type: none"> • December 2013 – Approval from Trust Management Executive • January/February 2014 – advertisement • March/April 2014 – Advisory Appointments Committee • June/July 2014 – induction and start in post. <p>A paper is being developed to provide additional MRI capacity (an additional list). The key milestones for this are:</p> <ul style="list-style-type: none"> • December 2013 – agree timing and staff for list • February/March 2014 – appoint staff • June 2014 – permanent list established <p>Joint work between Children's and Women's Division and Critical Care, Theatres, Diagnostics and Pharmacy, overseen by Clinical Governance Committee.</p>
Target date for compliance	August 2014

E09/S/d Paediatric Neurosciences: Neurorehabilitation	
<p>The development of the service is being progressed with specialised commissioners, including network arrangements with University Hospital Southampton NHS FT. Children's Rehabilitation will become the fourth leg of the Children's Service Network with Southampton.</p> <p>As with Neurodisability issues remain in relation to access to (GA) MRI.</p>	

Risk to patient care or safety	OUH believes there to be no risk to patient care or safety
Financial implications	The financial implications of additional staffing for the MDT and improvement in access to MRI are estimated to be some £200k.
Action plan to address derogation (including involvement of stakeholders where appropriate)	<p>An action plan for the development of the service is being developed in association with University Hospital Southampton NHS FT (UHSFT). The action plan for provision of additional MRI capacity is being overseen by the Clinical Governance Committee. The key milestones for this are:</p> <ul style="list-style-type: none"> • December 2013 – agree timing and staff for list • February/March 2014 – appoint staff • June 2014 – permanent list established <p>External stakeholders - specialised commissioners and UHSFT. Internally - Joint work between Children's and Women's Division and Critical Care, Theatres, Diagnostics and Pharmacy, overseen by Clinical Governance Committee to provide additional MRI capacity.</p>
Target date for compliance	October 2014

E10/S/e Complex Gynaecological Services: Urinary fistulae	
The OUH does not currently wish to be designated to provide this service as it wishes to cease provision. However, commissioners requested that a derogation application was submitted to ensure that the change in patient pathway was agreed (including confirmation of designation of preferred alternative provider).	
Risk to patient care or safety	OUH believes there to be no risk to patient care or safety.
Financial implications	The funding associated with approximately six patients will transfer from Oxford to Leicester.
Action plan to address derogation (including involvement of stakeholders where appropriate)	<p>A derogation is requested in order to allow the future pathway for these patients to be agreed. After this time the OUH does not wish to be designated to provide this service. It is likely that approximately six patients per year will be referred to Leicester.</p> <p>Discussions have not yet been held with University Hospitals of Leicester NHS Trust.</p>
Target date for compliance	April 2014

Derogations requested by the Wessex Local Area Team

3.11. There are five additional services for which the commissioner, rather than the OUH, has requested a derogation. These are services provided across a

network, where NHS England (Wessex Local Area Team) wishes to clarify patient pathways between different providers. These services are:

A04/S/a	Specialised Vascular Services (Adult)
B06/S/a	Specialised Human Immunodeficiency Virus Services (Adult)
B06/S/b	Specialised Human Immunodeficiency Virus Services (Children)
B08/S/a	Specialised Services for Haemoglobinopathy Care (All ages)
B14/S/a	Cancer: Specialised Kidney, Bladder and Prostate (Adult)

4. Next Steps

- 4.1. The process following the initial derogation applications is set out at Appendix C.
- 4.2. If the derogation applications are successful the derogation will be included in the Trust's contract with NHS England and the regular performance report submitted to the Wessex Area Team. The Wessex Area Team has notified the OUH that it will require quarterly updates on progress against the derogation action plans.

5. Proposed Governance Arrangements

- 5.1. It is proposed that the action plans are monitored internally by requiring updates as part of the internal Performance Review meetings for the relevant Divisions.
- 5.2. It will also be important to ensure that compliance with the other specifications is also kept under review.
- 5.3. It is proposed that any delay in implementation of the derogation action plans or any other issues of non compliance with the service specifications which arise are highlighted to the Trust Management Executive and Trust Board, as required.
- 5.4. The Lead Director for ensuring contract compliance and performance against the derogation action plans is the Director of Clinical Services.

6. Recommendation

- 6.1. The Trust Board is asked to:
 - ratify the derogation applications and
 - approve the proposed governance arrangements to achieve and maintain compliance with the standards for all the specialised services that the OUH provides.

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Director of Planning and Information

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October 2013

Abbreviations

CRG	Clinical Reference Group
EPR	Electronic Patient Record
GA	General Anaesthetic
MDT	Multi-Disciplinary Team
MRI	Magnetic resonance imaging

Appendix A – Clinical Reference Groups (CRGs)

Group A - Internal Medicine	
A01	Cystic Fibrosis
A02	Hepatobiliary and Pancreas
A03	Specialised Endocrinology
A04	Vascular Disease
A05	Severe and Complex Obesity
A06	Renal Dialysis
A07	Renal Transplant
A08	Specialised Colorectal Services
A09	Complex Invasive Cardiology
A10	Cardiac Surgery
A11	Pulmonary Hypertension
A12	Specialised Dermatology
A13	Specialised Rheumatology
A14	Specialised Respiratory
A15	Interventional Radiology
A16	Specialised Imaging
A17	Specialised Diabetes
A18	Heart & Lung Transplantation
Group B – Cancer and Blood	
B01	Radiotherapy
B02	PET-CT
B03	Specialised Cancer
B04	Blood & Marrow Transplantation
B05	Haemophilia and other bleeding disorders
B06	HIV
B07	Infectious Diseases
B08	Haemoglobinopathies
B09	Specialised Immunology and Allergy Services
B10	Thoracic Surgery
B11	Upper GI Surgery
B12	Sarcoma
B13	CNS Tumours
B14	Specialised Urology
B15	Chemotherapy

B16	Complex Head & Neck
B17	Teenage and Young People Cancer
Group C – Mental Health	
C01	Specialised Services for Eating Disorders
C02	High and Medium Secure Mental Health
C03	Low Secure Mental Health
C04	Specialised Mental Health Services for the Deaf
C05	Gender Identity Services
C06	Perinatal Mental Health
C07	Tier 4 Child & Adolescent Mental Health Services (CAMHS)
C08	Tier 4 Severe Personality Disorder Services (adults)
C09	Mental Health Specialised
C10	Forensic Pathway Group
C11	Child & Adolescent Mental Health Service (CAMHS) Secure
Group D - Trauma	
D01	Complex Disability Equipment
D02	Specialist rehabilitation for patients with highly complex needs
D03	Adult Neurosurgery
D04	Neurosciences
D05	Stereotactic Radiosurgery
D06	Burn Care
D07	Cleft Lip & Palate
D08	Specialised Pain
D09	Specialised Ear Surgery
D10	Specialised Orthopaedic Services
D11	Hyperbaric Oxygen Therapy
D12	Specialised Ophthalmology Services
D13	Spinal Cord Injury
D14	Complex Spinal Surgery
D15	Major Trauma
D16	Adult Critical Care
Group E – Women and Children	
E01	Medical Genetics
E02	Paediatric Surgery
E03	Paediatric Medicine

E04	Paediatric Cancer Services
E05	Congenital Heart Services
E06	Metabolic disorders
E07	Paediatric Intensive Care
E08	Neonatal Critical Care
E09	Paediatric Neurosciences
E10	Complex Gynaecological Services
E11	Specialised Maternity Services
E12	Fetal Medicine
E13	Multi-System Disorder
Specialised commissioning medicines optimisation CRG	

Appendix B – OUH Compliance

Services where the OUH is requesting a Derogation			
Cancer & Blood	Blood & Marrow Transplantation	B04/S/b	Haematopoietic Stem Cell Transplantation (Children)
Cancer & Blood	Chemotherapy	B15/S/b	Cancer: Chemotherapy (Children, Teenagers and Young Adults)
Cancer & Blood	Teenage and Young Adult	B17/S/a	Cancer: Teenager and Young Adults
Womens & Children	Paediatric Medicine	E03/S/c	Paediatric Medicine: Gastroenterology; Hepatology; Nutrition
Womens & Children	Paediatric Neurosciences	E09/S/c	Paediatric Neurosciences: Neurodisability
Womens & Children	Paediatric Neurosciences	E09/S/d	Paed Neurosciences: Neurorehabilitation
Womens & Children	Complex Gynaecological Services	E10/S/e	Complex Gynaecology: Urinary fistulae
Services where the Commissioner is requesting a Derogation			
Internal Medicine	Vascular Disease	A04/S/a	Specialised Vascular services (Adult)
Cancer & Blood	HIV	B06/S/a	Specialised Human Immunodeficiency Virus Services (Adult)
Cancer & Blood	HIV	B06/S/b	Specialised Human Immunodeficiency Virus Services (Children)
Cancer & Blood	Haemoglobinopathies	B08/S/a	Specialised Services for Haemoglobinopathy Care (All Ages)
Cancer & Blood	Specialised Urology	B14/S/a	Cancer: Specialised Kidney, Bladder and Prostate (Adult)
Services where the specification is being further developed			
Cancer & Blood	Specialised Immunology and Allergy Services	B09/S/a	Specialised Immunology (All Ages)
Internal Medicine	Specialised Respiratory	A14/S/a	Respiratory: Complex Home Ventilation (Adult)
Internal Medicine	Specialised Respiratory	A14/S/b	Respiratory: Severe Asthma (Adult)
Internal Medicine	Specialised Respiratory	A14/S/c	Respiratory: Interstitial Lung Disease (Adult)
Trauma & Head	Complex Disability Equipment	D01/S/a	Complex Disability Equipment: Specialised Wheelchair and Seating Services (All Ages)
Trauma & Head	Complex Disability Equipment	D01/S/b	Complex Disability Equipment: Alternative and Augmentative Communication/ Communication Aids (All Ages)
Trauma & Head	Complex Disability Equipment	D01/S/c	Complex Disability Equipment: Environmental Controls Aids (All Ages)
Trauma & Head	Complex Disability Equipment	D01/S/d	Complex Disability Equipment- Prosthetics (All Ages)
Trauma & Head	Brain Injury & Complex Rehabilitation	D02/S/a	Specialised Rehabilitation Services for highly complex needs (All Ages) NB Report can be requested from UKROC to show these indicators in detail
Trauma & Head	Specialised Orthopaedic Services	D10/S/a	Specialised Orthopaedics (Adult)
Trauma & Head	Specialised Ophthalmology Services	D12/S/a	Specialised Ophthalmology (Adults)
Trauma & Head	Specialised Ophthalmology Services	D12/S/b	Specialised Ophthalmology (Paediatric)
Services where the OUH is declaring compliance with the specification			
	CRG	ID	Specification
Cancer & Blood	Radiotherapy	B01/S/a	Radiotherapy (All ages)
Cancer & Blood	Radiotherapy	B01/S/b	Brachytherapy and Molecular Radiotherapy (All ages)
Cancer & Blood	PET-CT	B02/S/a	Positron Emission Tomography Computed Tomography (PET-CT) Scanning (All Ages)
Cancer & Blood	Blood & Marrow Transplantation	B04/S/a	Haematopoietic Stem Cell Transplantation (Adult)
Cancer & Blood	Haemophilia and other bleeding disorders	B05/S/a	Haemophilia (All ages)
Cancer & Blood	Infectious Diseases	B07/S/a	Specialised Services for Infectious Disease (Adult)
Cancer & Blood	Infectious Diseases	B07/S/e	Bone and Joint Infections (Adult)
Cancer & Blood	Specialised Immunology and Allergy Services	B09/S/b	Specialised Allergy Services (All Ages)
Cancer & Blood	Thoracic Surgery	B10/S/a	Cancer: Malignant Mesothelioma (Adult)
Cancer & Blood	Upper GI Surgery	B11/S/a	Cancer: Oesophageal and Gastric (Adult)
Cancer & Blood	Sarcoma	B12/S(HSS)/a	Primary malignant bone tumours service (Adult and Adolescents)
Cancer & Blood	Sarcoma	B12/S/a	Cancer: Soft Tissue Sarcoma (Adult)
Cancer & Blood	CNS Tumours	B13/S(HSS)/a	Complex neurofibromatosis type 1 service (All Ages)
Cancer & Blood	CNS Tumours	B13/S(HSS)/b	Neurofibromatosis type 2 service (All Ages)
Cancer & Blood	CNS Tumours	B13/S/a	Cancer: Brain and Central Nervous System (Adult)
Cancer & Blood	Specialised Urology	B14/S/c	Cancer: Testicular (Adult)
Cancer & Blood	Chemotherapy	B15/S/a	Cancer: Chemotherapy (Adult)
Cancer & Blood	Complex Head & Neck	B16/S/a	Cancer: Head & Neck (Adult)
Internal Medicine	Cystic Fibrosis	A01/S/a	Cystic Fibrosis: Adult
Internal Medicine	Cystic Fibrosis	A01/S/b	Cystic Fibrosis: Children
Internal Medicine	Hepatobiliary and Pancreas	A02/S/a	Hepatobiliary & Pancreas (Adult)
Internal Medicine	Hepatobiliary and Pancreas	A02/S/b	Cancer: Pancreatic (Adult)
Internal Medicine	Specialised Endocrinology	A03/S/a	Specialised Endocrinology Services (Adult)
Internal Medicine	Severe and Complex Obesity	A05/S/a	Severe and complex obesity (All ages)
Internal Medicine	Renal Dialysis	A06/S(HSS)/b	Ex-vivo partial nephrectomy service (Adult)
Internal Medicine	Renal Dialysis	A06/S/a	Renal Dialysis: Hospital & Satellite (Adult)
Internal Medicine	Renal Dialysis	A06/S/b	Renal Dialysis: Home (Adult)
Internal Medicine	Renal Dialysis	A06/S/c	Renal Dialysis: Peritoneal (Adult)

Internal Medicine	Renal Dialysis	A06/S/d	Acute Kidney Injury (Adult)
Internal Medicine	Renal Transplant	A07/S/a	Renal Transplantation (Adult)
Internal Medicine	Specialised Colorectal Services	A08/S(HSS)/d	Small bowel transplantation service (Adult)
Internal Medicine	Specialised Colorectal Services	A08/S/a	Intestinal Failure (Adult)
Internal Medicine	Specialised Colorectal Services	A08/S/c	Colorectal: Complex IBD
Internal Medicine	Specialised Colorectal Services	A08/S/d	Colorectal: Faecal Incontinence (Adult)
Internal Medicine	Specialised Colorectal Services	A08/S/e	Colorectal: Transanal Endoscopic Microsurgery (TEMs) (Adult)
Internal Medicine	Specialised Colorectal Services	A08/S/g	Cancer: Anal (Adult)
Internal Medicine	Complex Invasive Cardiology	A09/S/a	Cardiology: Implantable Cardioverter Defibrillator (ICD) and Cardiac Resynchronisation Therapy (CRT) (Adult)
Internal Medicine	Complex Invasive Cardiology	A09/S/b	Cardiology: Electrophysiology and Ablation Services (Adult)
Internal Medicine	Complex Invasive Cardiology	A09/S/c	Cardiology: Inherited Cardiac Conditions (All ages)
Internal Medicine	Complex Invasive Cardiology	A09/S/d	Cardiology: Primary Percutaneous Coronary Intervention (PPCI) (Adult)
Internal Medicine	Complex Invasive Cardiology	A09/S/e	Cardiology: Cardiac Magnetic Resonance Imaging (Adult)
Internal Medicine	Cardiac Surgery	A10/S/a	Cardiac Surgery (Adult)
Internal Medicine	Pulmonary Hypertension	A11/S/b	Pulmonary Hypertension: Shared Care (Adult)
Internal Medicine	Specialised Dermatology	A12/S/a	Specialised Dermatology Services (All ages)
Internal Medicine	Specialised Cancer	A12/S/b	Cancer: Skin (Adult)
Internal Medicine	Specialised Rheumatology	A13/S/a	Specialised Rheumatology Services (Adult)
Internal Medicine	Specialised diabetes (all ages)	A17/S(HSS)/c	Islet transplantation service (Adult)
Internal Medicine	Specialised diabetes (all ages)	A17/S(HSS)/d	Pancreas transplantation service (Adult)
Trauma & Head	Adult Neurosurgery	D03/S/a	Neurosurgery (Adult)
Trauma & Head	Neurosciences	D04/S(HSS)/a	Diagnostic service for rare neuromuscular disorders (All Ages)
Trauma & Head	Neurosciences	D04/S(HSS)/b	Neuromyelitis optica service (Adults and adolescents)
Trauma & Head	Neurosciences	D04/S/a	Neurosciences: Specialised Neurology (Adult)
Trauma & Head	Stereotactic Radiosurgery	D05/S/a	Stereotactic Radiosurgery and Stereotactic Radiotherapy (Intracranial) (All Ages)
Trauma & Head	Burn Care	D06/S/a	Specialised Burn Care (All Ages)
Trauma & Head	Cleft Lip & Palate	D07/S/a	Cleft Lip and / or Palate Services including Non-cleft Velopharyngeal Dysfunction (VPD) (All Ages)
Trauma & Head	Specialised Pain	D08/S/a	Specialised Services for Pain Management(Adult)
Trauma & Head	Specialised Ear Surgery	D09/S/a	Ear Surgery: Cochlear Implants (All Ages)
Trauma & Head	Specialised Ear Surgery	D09/S/b	Implantable aids for Microtia, Bone Anchored Hearing Aids and Middle Ear Implants (All Ages)
Trauma & Head	Complex Spinal Surgery	D14/S/a	Complex Spinal Surgery (All Ages)
Trauma & Head	Major Trauma	D15/S/a	Major Trauma (All Ages)
Womens & Children	Medical Genetics	E01/S/a	Medical Genetics (All Ages)
Womens & Children	Paediatric surgery	E02/S(HSS)/d	Craniofacial service (All Ages)
Womens & Children	Paediatric Surgery	E02/S/a	Paediatric Surgery: Surgery (and Surgical Pathology, Anaesthesia & Pain)
Womens & Children	Paediatric Surgery	E02/S/b	Paediatric Surgery: Chronic Pain
Womens & Children	Paediatric Surgery	E02/S/c	Paediatric surgery: Neonates
Womens & Children	Paediatric Medicine	E03/S/b	Paediatric Medicine: Rheumatology
Womens & Children	Paediatric Medicine	E03/S/d	Paediatric Medicine: Immunology & Infectious Diseases
Womens & Children	Paediatric Medicine	E03/S/e	Paediatric Medicine: Endocrinology & Diabetes
Womens & Children	Paediatric Medicine	E03/S/f	Paediatric Medicine: Haematology
Womens & Children	Paediatric Medicine	E03/S/g	Paediatric Medicine: Respiratory
Womens & Children	Paediatric Medicine	E03/S/j	Paediatric medicine: Allergy
Womens & Children	Paediatric Cancer Services	E04/S/a	Paediatric Oncology
Womens & Children	Congenital Heart Services	E05/S/a	Paediatric Cardiac: Cardiology and Surgery
Womens & Children	Metabolic disorders	E06/S/a	Metabolic Disorders (Adults)
Womens & Children	Metabolic disorders	E06/S/b	Metabolic Disorders (Children)
Womens & Children	Metabolic disorders	E06/S/c	Metabolic Disorders (Laboratory services)
Womens & Children	Paediatric Intensive Care	E07/S/a	Paediatric Intensive Care
Womens & Children	Paediatric Intensive Care	E07/S/b	Paediatric High Dependency Care
Womens & Children	Paediatric Intensive Care	E07/S/c	Paediatric Long Term Ventilation
Womens & Children	Paediatric Intensive Care	E07/S/d	Paediatric Intensive Care Retrieval (Transport)
Womens & Children	Neonatal Critical Care	E08/S/a	Neonatal Critical Care
Womens & Children	Neonatal Critical Care	E08/S/b	Neonatal Critical Care Retrieval (Transport)
Womens & Children	Paediatric Neurosciences	E09/S/a	Paediatric Neurosciences: Neurosurgery
Womens & Children	Paediatric Neurosciences	E09/S/b	Paediatric Neurosciences: Neurology
Womens & Children	Complex Gynaecological Services	E10/S/a	Complex Gynaecology: Severe endometriosis
Womens & Children	Complex Gynaecological Services	E10/S/b	Complex Gynaecology: Urogenital & anorectal conditions
Womens & Children	Complex Gynaecological Services	E10/S/c	Complex Gynaecology: Congenital gynaecological anomalies
Womens & Children	Complex Gynaecological Services	E10/S/d	Complex Gynaecology: Recurrent prolapse and urinary incontinence
Womens & Children	Complex Gynaecological Services	E10/S/f	Cancer: Gynaecological
Womens & Children	Fetal Medicine	E12/S/a	Fetal Medicine
Womens & Children	Fetal Medicine	E12/S/b	Perinatal Pathology
Womens & Children	Multi-system disorder	E13/S(HSS)/h	Rare mitochondrial disorders service (All Ages)

Appendix C

Process to Seek National Service Specification Derogation

