

A BRIEF INTRODUCTION TO SPECIALISED COMMISSIONING

The Specialised Healthcare Alliance is a coalition of 61 patient-related organisations supported by nine corporate members which campaigns on behalf of people with rare and complex conditions requiring specialised care.

Planning populations

Specialised services are currently defined in regulations as services with a planning population (catchment area) of one million or more. Planning populations are inversely related to patient numbers. A common condition will therefore have a small planning population ie a local service. The rarest conditions affecting only a few hundred people will be planned for the population of England as a whole ie a national service.

Carter report

The Carter Report of 2006 triggered the establishment of 10 regional Specialised Commissioning Groups reflecting the geography of the SHAs and intended to bring constituent PCTs together to commission the majority of specialised services for their populations on a collaborative basis. Services for very small patient populations incurring high costs and with scarce clinical expertise were potentially eligible for national commissioning under the National Commissioning Group.

Specialised services

The scope of specialised services with planning populations of more than a million (but which are not commissioned nationally) is encompassed by the Specialised Services National Definitions Set (SSNDS). A review of the SSNDS was completed in 2010 and it now comprises 34 active definitions, some of which are condition specific (eg cystic fibrosis and haemophilia), some relating to broader therapeutic areas (eg specialised cardiology and neurosciences) and some relating to particular populations (eg specialised children's and women's services). A full list of the definitions is attached as an Appendix.

Health Select Committee

The Health Select Committee looked at commissioning including the commissioning of specialised services immediately prior to the 2010 General Election. It concluded that specialised commissioning had improved as a result of the Carter reforms but that insufficient progress had been made, primarily due to the unwillingness of PCTs to pool sovereignty and resource as intended. The worry was that these services would be especially vulnerable as the NHS looked for savings.

Advisory Group on National Specialised Services

Prior to the Election, a consultation took place on replacing the National Commissioning Group with the Advisory Group on National Specialised Services (AGNSS) as the sole source of advice to Ministers on services, products and technologies that should be commissioned nationally. The proposed changes were accepted by the coalition on entering government,

including an ethical decision-making framework to inform decisions; a longstanding objective of the Alliance. There are presently about 65 services commissioned at national level by the National Specialised Commissioning Team with a budget of £500 million, top-sliced from PCTs.

White Paper

Although Andrew Lansley had indicated his intention to devolve responsibility for all commissioning, including specialised services, to GPs prior to the General Election, the Specialised Healthcare Alliance and others were successful in bringing about a change of mind. The White Paper therefore proposed that services covered by the SSNDS should be the responsibility of the NHS Commissioning Board. This was in turn presented by the coalition government as a response to the weaknesses identified in the earlier Health Select Committee report.

Health and Social Care Bill

The Bill presently before Parliament broadly reflects the intentions of the White Paper. Instead of referring to the SSNDS, it proposes a series of criteria around patient numbers, the number of providers, the availability of clinical expertise and treatment costs as a basis for the Secretary of State to decide which services should be commissioned by the NHSCB. Ministers have assured members of the Bill Committee that the SSNDS will nonetheless form the basis of the Secretary of State's mandate to the Board where specialised commissioning is concerned. A budget of roughly £10 billion is envisaged with some additional services moving under the auspices of the Board such as all HIV, IVF and possibly major trauma.

The main worry of the Alliance is that Monitor's pro-competition remit should not prevent the number of providers of specialised services being limited, where necessary, to ensure sufficient patient volumes to sustain clinical expertise and safety, a key lesson of the Bristol Inquiry. The Alliance is therefore proposing that Monitor should have a paramount duty towards safety.

Conclusion

Subject to the details of implementation, the Specialised Healthcare Alliance considers that the proposed changes to specialised commissioning have the potential significantly to improve the quality and availability of services and treatments across the country. As in other areas, intensive activity is in train to bring about the changes presaged in the Bill. The Alliance is taking a particularly close interest in the:

- specialised services which will be mandated to the Board;
- number of sub-national offices which will be involved in specialised commissioning;
- resources which will be available to the Board for specialised services, financially and otherwise;
- arrangements for patient and public engagement;
- transitional period and associated risk.

Appendix

Specialised Services National Definitions Set

- Definition No. 1: Specialised cancer services (adult)
- Definition No. 2: Specialised services for blood and marrow transplantation (all ages)
- Definition No. 3: Specialised services for haemophilia and other related bleeding disorders (all ages)
- Definition No. 4: Specialised services for women's health
- Definition No. 5: Assessment and provision of equipment for people with complex physical disability
- Definition No. 6: Specialised spinal services (all ages)
- Definition No. 7: Specialised rehabilitation services for brain injury and complex disability (adult)
- Definition No. 8: Specialised neurosciences services (adult)
- Definition No. 9: Specialised burn care services (all ages)
- Definition No. 10: Cystic fibrosis services (all ages)
- Definition No. 11: Specialised renal services (adult)
- Definition No. 12: Specialised intestinal failure and home parenteral nutrition services (adult)
- Definition No. 13: Specialised cardiology and cardiac surgery services (adult)
- Definition No. 15: Cleft lip and palate services (all ages)
- Definition No. 16: Specialised immunology services (all ages)
- Definition No. 17: Specialised allergy services (all ages)
- Definition No. 18: Specialised services for infectious diseases (all ages)
- Definition No. 19: Specialised services for liver, biliary and pancreatic medicine and surgery (adult)
- Definition No. 20: Medical genetic services (all ages)
- Definition No. 22: Specialised mental health services (all ages)
- Definition No. 23: Specialised services for children
- Definition No. 24: Specialised dermatology services (all ages)
- Definition No. 26: Specialised rheumatology services (all ages)
- Definition No. 27: Specialised endocrinology services (adult)
- Definition No. 29: Specialised respiratory services (adult)
- Definition No. 30: Specialised vascular services (adult)
- Definition No. 31: Specialised pain management services (adult)
- Definition No. 32: Specialised ear services (all ages)
- Definition No. 33: Specialised colorectal services (adult)
- Definition No. 34: Specialised orthopaedic services (adult)
- Definition No. 35: Specialised morbid obesity services (all ages)
- Definition No. 36: Specialised services for metabolic disorders (all ages)
- Definition No. 37: Specialised ophthalmology services (adult)
- Definition No. 38: Specialised haemoglobinopathy services (all ages)

For full details go to: <http://www.specialisedservices.nhs.uk/info/specialised-services-national-definitions>