

Treatment Function Maintenance Group (TFMG)

TREATMENT FUNCTION ELIGIBILITY CRITERIA

1. Introduction

Main Specialty List and Treatment Function codes are NHS Information Standards used to report activity throughout the NHS.

2. Background

The Main Specialty List and Treatment Function codes were introduced by DSCN 34/2002 in September 2003 as a replacement for Specialty and Specialty Function codes respectively.

Main Specialty

The Main Specialty is the specialty within which the Consultant is recognised or contracted to the organisation. Main Specialties are aligned to the European Specialist Medical Qualifications Order 1995 and European Primary and Specialist Dental Qualifications Regulations 1998.

Default/Pseudo-Main Specialty Codes to identify the work of non-consultant lead professionals such as midwives, nurses and other care professionals have also been included.

Treatment Function

This is the specialised service within which the patient is treated. It includes most of the main specialities and also approved sub-specialties, special interests and services provided by non doctors and dentists.

Treatment Function codes are used to record activity undertaken, irrespective of the type of Healthcare Professional who performs it, and is not restricted to consultants.

3. Primary Aim of the Group

To maintain the list of Treatment Functions, the NHS IC needs to obtain expert help from professionals working in relevant fields. The members of this group will work in healthcare capacities in Trusts, from the Department of Health PbR team, specialist units of The Health and Social Care Information Centre itself - HES, Mental Health and Community, and from the Coding and Classifications service of NHS Connecting for Health (NHS CFH).

The Treatment Function Maintenance Group was established in 01 December 2004 and performs the role of an Expert Reference Group with responsibility for considering and approving change requests, against the Treatment Function Eligibility Criteria.

4. Objectives of the Group

- To consider and approve new, or changes to existing, Treatment Functions. These may be the result of:
 - changes to the main specialty (resulting from changes to legislation)
 - policy initiatives e.g. Payment by Results (PbR)
 - requirements from NHS and other users
- To suggest suitable codes.

5. Eligibility Criteria

Any proposed changes to Treatment Functions will need to be agreed by the Treatment Function Maintenance Group using the following criteria:

Essential Criteria

- It must be a distinct area of clinical care for which all activity can be linked to a Main Specialty Code. Non-clinical areas are excluded.
- It should not be limited to an individual setting unless services are setting-specific.
- Before any proposed new TFC can be considered for addition to the national list, it must be demonstrated that there is at least one NHS Trust in which there is a specific function concerned with the *proposed new TFC*. Often this means there will be a recognisable 'Department of {*proposed new TF*}'.
 - It must be practical to collect.

Desirable Criteria

- A TF is not usually a specific disease
- A TF is not usually a specific type of treatment.
- A TF is an homogeneous area of clinical care that is definable in some way and which is meaningful to clinicians.
- Activity within the area of clinical care should achieve a reasonable volume in terms of admitted patient episodes and/or outpatient attendances per year and / or total cost to the NHS. Judgement of each candidate TFC will be on a case-by-case basis.

6. Types of requests for consideration

The proposals received for new Treatment Functions can be described using the following types:

- Children's version of existing specialities (paediatric endocrinology)
- Mainly non-clinical specialities proposing a significant clinical element (anaesthetics)
- Special interests within existing specialised (perinatal psychiatry)
- Multidisciplinary services to which more than one specialty contributes (spinal injuries)
- Condition specific (cystic fibrosis)
- Services delivered by an eponymous healthcare profession other than medicine (speech and language therapy)
- Various community services (community nursing)
- To support NSF changes.