

MULTI-VISCERAL AND COMPOSITE TISSUE ADVISORY GROUP MEETING

The 2019 adult and paediatric bowel service specifications are the relevant commissioning documents.

<https://www.england.nhs.uk/publication/small-bowel-transplantation-service-children-and-adults/>

There is a section on transition mirrored in both documents.

The specifications state that:

The transplant centre remains responsible for all patient follow up care and any changes in therapy.

- The original costing of the services included patient assessment, the transplant itself, care in the immediate post-transplant period and the management of any short-term complications. These aspects of care are therefore covered by the allocated transplant funding
- Long term outpatient follow-up of patients is also covered by the allocated transplant funding
- The agreement across all solid organ transplant services is that the transplant centres continue to have oversight of the care of the patient long term including the responsibility for the management of a patient's immunosuppression. As you will be aware the repatriation of funding from CCGs for immunosuppression is at different stages across England, so whether your trust is prescribing and recharging to NHS England or GPs continue to prescribe under established shared care arrangements, or a mix of both, depends on local agreements between the transplant hospital and the specialised commissioning hub.
- If a patient is readmitted post-transplant then that admission can be charged separately to other commissioning lines in contracts, which may be under specialised contracts or CCGs. Where the charging goes will depend on the reason for the admission
- A repeat transplant will be charged as a new transplant.