

SCHEDULE 2 – THE SERVICES

A. Service Specifications

| | |
|--|--|
| 1. Service name | Specialist Burn Care Services (Children) |
| 2. Service specification number | D06/S/a – 260527S |
| 3. Date published | 27/05/2026 |
| 4. Accountable Commissioner | NHS England Trauma PoC webpage |

| | |
|------------|---|
| 5. | Population and/or geography to be served |
| 5.1 | <p>Population Covered</p> <p>This service specification relates to children up to the age of 16 years. Children aged between 16-18 years may be treated in a paediatric burn service and will be considered on a case-by-case basis.</p> |
| 5.2 | <p>Minimum population size</p> <p>Not Used</p> |
| 6. | Service aims and outcomes |
| 6.1 | <p>Service aims</p> <p>The aim of the service is to deliver multi-disciplinary specialist care, to children and young people after burn injury, covering the whole patient pathway from referral to completion of care or transition to adult services. The above aim will be achieved by:</p> <ul style="list-style-type: none"> • Delivering treatment and care that conforms to national standards and published clinical guidelines • Being responsive to the psychological needs of paediatric service users and their families • Delivering care holistically, ensuring that all service users have access to a wide range of specialist multi-disciplinary services • Encouraging an environment in which the families of paediatric service users are able to make informed decisions about their treatment • Facilitating on-going care near to the service users own community where clinically appropriate |

- Where appropriate, supporting the return of the child to their pre-injury educational and social groups
- Delivering the appropriate elements of specialist burn care treatment as part of a recognised managed clinical network
- Ensuring equity of access to specialised burn care for paediatric service users
- Responding effectively to major incidents involving paediatric burn casualties
- Ensuring good quality and specialised burn care is delivered in both the inpatient and outpatient setting until the service user no longer requires specialised burn care.
- Working with relevant agencies to support prevention initiatives.

6.2 Outcomes

NHS Outcomes Framework Domains & Indicators

| | |
|----------|--|
| Domain 1 | Preventing people from dying prematurely |
| Domain 2 | Enhancing quality of life for people with long-term conditions |
| Domain 3 | Helping people to recover from episodes of ill-health or following injury |
| Domain 4 | Ensuring people have a positive experience of care |
| Domain 5 | Treating and caring for people in safe environment and protecting them from avoidable harm |

Service defined outcomes/outputs

The full definition of the quality outcomes and metrics together with their descriptions including the numerators, denominators and all relevant guidance will be accessible at

<https://www.england.nhs.uk/commissioning/spec-services/npc-crg/spec-dashboards/> following the next scheduled quarterly refresh of the dashboard metadata document. Within this website the full version of the Burns Quality outcomes and Metrics, including the long descriptions of metrics and the numerators / denominators used to calculate certain outcomes can be viewed.

Clinical Outcome Metrics - quantitative data

| | | | | | |
|-----|----------------------|--|------|-------|-----------|
| 110 | Centre Unit Facility | Number of paediatric admissions who died and were calculated to be unexpected deaths | IBID | 2,3,5 | Effective |
| 111 | Centre Unit Facility | Number of paediatric admissions who survived calculated as being unexpected | IBID | 2,3,5 | Effective |

| | |
|------------|--|
| 7. | Service description |
| 7.1 | Service model |
| | <p>The service is delivered through recognised specialised care providers, to ensure service users have equity of access and receive parity of service. Services providing specialised paediatric burn care must comply with the latest guidance and essential standards of care, for different aspects of the care pathway. These standards have been developed by burns and other healthcare professionals and describe how health care for children generally, and specialised burn care specifically, should be delivered.</p> <p>These standards cover:</p> <ul style="list-style-type: none"> • Patient centred care, covering the planning of burn care and the support that service users and families can expect to receive. This includes: <ul style="list-style-type: none"> ○ Information for service users, families and carers. ○ Discharge information and support resources. ○ Return to education. • The multi-disciplinary team (MDT), covering clinical leadership, access to surgeons, paediatric intensivists, anaesthetists, nurses, allied health professionals and other specialist clinical support professionals to provide the full range of physical and psychosocial care for burn service users. This includes: <ul style="list-style-type: none"> ○ Clinical leadership, staffing levels for nursing and medical staff. ○ Training and education. • Availability of specialist therapy staff, dietitians and psychology professionals. • Inter-reliant Services, indicating the wide range of clinical services required for each level of service, as described at Appendix 1. • Facilities, Resources and the Environment, describing the facilities, resources and the environment necessary to provide specialised burn care, including: <ul style="list-style-type: none"> ○ Acute care (emergency beds and theatres), follow-up facilities and rehabilitation. • Policies and Procedures, outlining the core policies and procedures necessary to provide effective burn care. This includes: <ul style="list-style-type: none"> ○ Operational policies ○ Major incident plans ○ Clinical guidelines for referring clinicians and burn care treatment. • Clinical Governance, referring to audit, research, data collection and analysis, necessary to formalise the distribution of current clinical guidelines and examples of best practice. |
| 7.2 | <p>Pathways</p> <p><u>Overall patient pathway</u></p> <p>Specialist paediatric burn care services include all paediatric burn care delivered by Burn Centres, Burn Units and Burn Facilities delivered as part of an Operational Delivery Network. This covers the whole pathway, including:</p> <ul style="list-style-type: none"> • Specialist assessment • Admission to a Centre, Unit or Facility |

- Rehabilitation (within the burns service).
- Outpatients and Outreach

Burn Facilities

Provide acute care for people with less complex burns in line with National Burn Care Referral Guidance 2012 (<https://www.britishburnassociation.org/national-burn-care-referral-guidance/>) Burn Facilities refer service users to Burn Units and Centres for the treatment of more complex injuries (in line with national and local threshold guidance). Burn Facilities are an integral part of the patient pathway in the provision of a rehabilitation service for some of the service users from their local area who have more complex injuries.

Burn Units

Burn Units provide care for service users with a burn of moderate size and/or moderate severity in line with National Burn Care Referral Guidance 2012 (1). These services treat service users across a wider geographical area than Burn Facilities and provide treatment for patients requiring critical care (such as care in a high dependency unit). They also provide facility-level care for their more local population.

Burn Centres

Burn Centres provide care for service users with the most severe injuries and for those requiring the highest level of critical care in line with National Burn Care Referral Guidance 2012 (1). They also provide unit and facility-level care for their more local population.

Outpatient and Outreach

Specialised outpatients burn care is provided post discharge and may be required on an ongoing basis or at a future point dependent on individual service user needs. The service model also includes delivery of specialised burn care remotely from the recognised acute burn care setting. This is delivered as part of an outreach service.

NHS England also commissions services for service users with toxic epidermal necrolysis, severe staphylococcal scalded skin syndrome, necrotising fasciitis and other skin loss conditions when they are treated in a specialist burn care service. There is a separate service specification for these conditions (<https://www.england.nhs.uk/wp-content/uploads/2018/06/service-specification-stevens-johnson-syndrome-toxic-epidermal-necrolysis.pdf>)

Discharge Planning, Continuing Care and Rehabilitation

Service users will remain at the specialised burn service in which they have received their care until it is appropriate for either initiation of discharge or transfer to another appropriate specialised burn service (or a non-specialised service such as a local hospital) closer to home or to a specialised rehabilitation service.

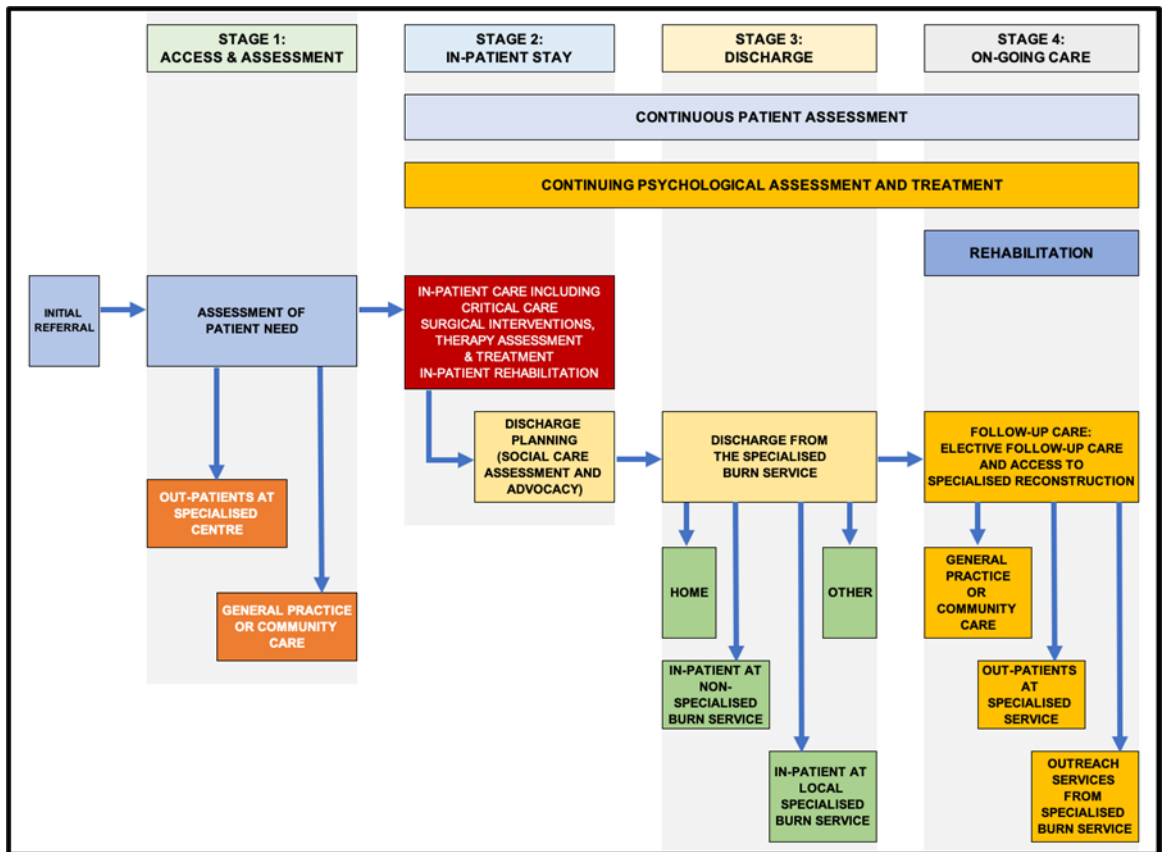
A Burns Rehabilitation Prescription should be produced for service users with a burn injury and requiring ongoing rehabilitation. A copy should be provided to:

- The organisation providing rehabilitation services
- The child, dependent on their age and understanding, and their parent or carer.

It should be noted that some aspects of the post-acute pathway might include continuing care provided at home or school (community care) and although this is not covered by specialised commissioning, it is an important element of the care pathway.

Specialised patient pathway

The Burn Care pathway can be illustrated as follows:



Shared care arrangements

Not applicable as the episode of care is undertaken within the one centre or unit.

| | |
|------------|---|
| 7.3 | Clinical Networks |
| | <p>There is a requirement for providers of this service to comply with the provisions of Schedule 2F (Clinical Networks) of the NHS Standard Contract 2022/23 The Particulars. This includes meeting the requirements of the relevant Specialised Services Clinical Network Specification.</p> <p>Paediatric specialised burn care services are delivered as part of a formal Burn Care Operational Delivery Network (ODN) arrangement to ensure individual service user care is delivered in accordance with agreed care pathways.</p> <p>All Providers will be required to participate in a networked model of care to enable services to be delivered as part of a co-ordinated, combined whole system approach.</p> |
| 7.4 | <p>Essential Staff Groups</p> <p>Specialised burn care services must be compliant with all of the essential standards of care, described in the following documents and reports, or the most recently revised version:</p> <ul style="list-style-type: none"> • British Burn Association Standards and Outcomes (2018), related to all phases and aspects of the delivery of care for children - https://www.britishburnassociation.org/standards/ ⁽²⁾ • Standards of Physiotherapy and Occupational Therapy Practice in the Management of Burn Injured Adults and Children 2017 - https://www.britishburnassociation.org/standards-of-physiotherapy-occupational-therapy-practice/ ⁽³⁾ • Facing the Future: Standards for acute general paediatric services - https://www.rcpch.ac.uk/resources/facing-future-standards-acute-general-paediatric-services ⁽⁴⁾ • Guidelines for the Provision of Anaesthesia Services (GPAS) and Guidelines for the Provision of Paediatric Anaesthesia Services 2020 - https://rcoa.ac.uk/gpas/chapter-10 ⁽⁵⁾ • Quality Standards for the Care of Critically Ill or Injured Children 2021 - https://pccsociety.uk/wp-content/uploads/2021/10/PCCS-Standards-2021.pdf ⁽⁶⁾ • Level 3 Paediatric Intensive Care Specification - https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/e07-sa-paed-inten-care.pdf ⁽⁷⁾ • The Paediatric Intensive Care Retrieval (Transport) Specification - https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/e07-spec-paedi-intens-care-retrvl-transp.pdf ⁽⁸⁾ • Paediatric High Dependency Care Specification - https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/eo7-sb-paed-hig-dep-care.pdf ⁽⁹⁾ |

| 7.5 | Essential equipment and/or facilities | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------|---|--------------------|---------------------------------------|--------|--|------|---|----------|--|------------|--|------------|--|------------|-----------------|------------|--------------------|------------|---------------------|------------|--|-----------------|---|----------|------------|
| | <p>Specialised burn care services must be compliant with all of the essential standards of care, described in the following documents and reports, or the most recently revised version:</p> <ul style="list-style-type: none"> British Burn Association Standards and Outcomes (2018), related to all phases and aspects of the delivery of care for children ⁽²⁾ | | | | | | | | | | | | | | | | | | | | | | | | |
| 7.6 | <p>Interdependent Service Components – Links with other NHS services</p> <p>Aligned to the British Burn Association (BBA) Standards and Outcomes (2018)⁽²⁾, paediatric burn care services must be compliant with a series of essential co-located and / or interdependent services.</p> <p><i>The following services are available at all times, on the same site as the Burn Care Service:</i></p> <table border="1" data-bbox="288 853 1463 2002"> <thead> <tr> <th data-bbox="288 853 624 936">Level of Burn Care</th> <th data-bbox="624 853 1463 936">Co-location and co-dependent Services</th> </tr> </thead> <tbody> <tr> <td data-bbox="288 936 624 1019">Centre</td> <td data-bbox="624 936 1463 1019">The Burn Care Service is co-located with a PICU and PHDU facilities.</td> </tr> <tr> <td data-bbox="288 1019 624 1279">Unit</td> <td data-bbox="624 1019 1463 1279">The burn service is co-located with PHDU facilities with support from Adult ICU for children requiring ventilatory support < 24hrs. Children requiring ventilatory support for > 24 hours are cared for in a PICU.</td> </tr> <tr> <td data-bbox="288 1279 624 1406">Facility</td> <td data-bbox="624 1279 1463 1406">The Burn Care Service does not require co-location with either PICU or PHDU.</td> </tr> <tr> <td data-bbox="288 1406 624 1534">All Levels</td> <td data-bbox="624 1406 1463 1534">The Burn Care Service admitting neonates has access to co-located NICU</td> </tr> <tr> <td data-bbox="288 1534 624 1617">All Levels</td> <td data-bbox="624 1534 1463 1617">The Burn Care Service is co-located with an MTU or an MTC.</td> </tr> <tr> <td data-bbox="288 1617 624 1664">All Levels</td> <td data-bbox="624 1617 1463 1664">Emergency Dept.</td> </tr> <tr> <td data-bbox="288 1664 624 1711">All Levels</td> <td data-bbox="624 1664 1463 1711">Paediatric Surgery</td> </tr> <tr> <td data-bbox="288 1711 624 1758">All Levels</td> <td data-bbox="624 1711 1463 1758">Paediatric Medicine</td> </tr> <tr> <td data-bbox="288 1758 624 1841">All Levels</td> <td data-bbox="624 1758 1463 1841">Paediatric Trauma and Orthopaedic Surgery.</td> </tr> <tr> <td data-bbox="288 1841 624 1968">Centres & Units</td> <td data-bbox="624 1841 1463 1968">Radiology with Advanced Scanning Facilities (e.g. Computed Tomography Scan (CT)).</td> </tr> <tr> <td data-bbox="288 1968 624 2002">Facility</td> <td data-bbox="624 1968 1463 2002">Radiology.</td> </tr> </tbody> </table> | Level of Burn Care | Co-location and co-dependent Services | Centre | The Burn Care Service is co-located with a PICU and PHDU facilities. | Unit | The burn service is co-located with PHDU facilities with support from Adult ICU for children requiring ventilatory support < 24hrs. Children requiring ventilatory support for > 24 hours are cared for in a PICU. | Facility | The Burn Care Service does not require co-location with either PICU or PHDU. | All Levels | The Burn Care Service admitting neonates has access to co-located NICU | All Levels | The Burn Care Service is co-located with an MTU or an MTC. | All Levels | Emergency Dept. | All Levels | Paediatric Surgery | All Levels | Paediatric Medicine | All Levels | Paediatric Trauma and Orthopaedic Surgery. | Centres & Units | Radiology with Advanced Scanning Facilities (e.g. Computed Tomography Scan (CT)). | Facility | Radiology. |
| Level of Burn Care | Co-location and co-dependent Services | | | | | | | | | | | | | | | | | | | | | | | | |
| Centre | The Burn Care Service is co-located with a PICU and PHDU facilities. | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit | The burn service is co-located with PHDU facilities with support from Adult ICU for children requiring ventilatory support < 24hrs. Children requiring ventilatory support for > 24 hours are cared for in a PICU. | | | | | | | | | | | | | | | | | | | | | | | | |
| Facility | The Burn Care Service does not require co-location with either PICU or PHDU. | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | The Burn Care Service admitting neonates has access to co-located NICU | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | The Burn Care Service is co-located with an MTU or an MTC. | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | Emergency Dept. | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | Paediatric Surgery | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | Paediatric Medicine | | | | | | | | | | | | | | | | | | | | | | | | |
| All Levels | Paediatric Trauma and Orthopaedic Surgery. | | | | | | | | | | | | | | | | | | | | | | | | |
| Centres & Units | Radiology with Advanced Scanning Facilities (e.g. Computed Tomography Scan (CT)). | | | | | | | | | | | | | | | | | | | | | | | | |
| Facility | Radiology. | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|---|--|
| All Levels | Integrated (Acute and Chronic) Paediatric Pain Service. |
| All Levels | Respiratory Physiotherapy Service. |
| Centres & Units | Renal services (including replacement therapy that can support children)). |
| All Levels | Infection Prevention and Control (IPC) Services. |
| All Levels | CAMHS Service (Acute and Community). |
| All Levels | Transfusion Service. |
| All Levels | Biochemistry. |
| All Levels | Haematology. |
| <p>The following services must be available to the burn care service (children)in a timely manner:</p> | |
| Level of Burn Care | Co-location and co-dependent services |
| All Levels | Paediatric Neurology. |
| All Levels | Paediatric Neurosurgery. |
| All Levels | Paediatric Cardiothoracic surgery. |
| All Levels | Paediatric Ophthalmology. |
| All Levels | Paediatric Maxillofacial surgery. |
| All Levels | Paediatric Dermatology. |
| All Levels | Paediatric Speech and language therapy. |
| All Levels | Paediatric ENT. |
| All Levels | Medical illustration/photography. |

7.7 Additional requirements

Collaborative arrangements and networking – Paediatric Centre-level care

Around 4,000 children receive inpatient hospital treatment for a burn injury. Of this total number a very small percentage of children have large or complex injuries, requiring burn centre-level care and treatment in intensive care. Over the last 3 years, the number of children requiring centre-level care has steadily reduced and the latest figures (2019-20) suggest that the number of children, with large burn injuries (over 30% total body surface area) are fewer than 10 each year. There is also a small cohort of children with smaller but complex burn injuries who require intensive care, numbering around 20-25 each year.

With such small numbers of these large or complex burns, it is vital that the skills and expertise of the clinical teams, caring for children with these types of burn injury, are maintained, and that measures are put in place to ensure equity of care nationally.

Skills are best maintained if the team regularly care for such service users, rather than the management of a large and complex burn being an occasional event. This can be achieved by maximising the number of large and complex burns any specific team manages, by active involvement in the 'hands-on' management of service users, be they adults or children.

Consultant surgeons, working at a recognised paediatric burn centre, must work in close affiliation with an adult burn service, within the local ODN, which manages adults with major burn injuries. There must be evidence of surgeons in the MDT, having dedicated time allocated in job plans for:

- A regular clinical commitment at an adult burn service, including exposure to ward rounds, operative management and rehabilitation.

Working collaboratively with other paediatric burn centres across England, for peer support through joint audit and MDT.

All other staff working within the burns MDT at a recognised paediatric burn centre, including paediatric intensivists, must also work collaboratively with colleagues caring for adults with major burns. Staff must be given the opportunities for:

- Hands-on experience, through shadowing on ward rounds, operative management and rehabilitation,
- Shared education and training.
- Peer support through joint audit and MDT.

These, and other measures will help support the maintenance of skills and expertise and are aimed at achieving consistency and equity across all paediatric burn centres. To support these collaborative initiatives, specialised burn centres will adopt the following models of working:

- National Paediatric Centre-Level Clinical Network
- National Paediatric MDT and audit

National paediatric networking, MDT and Audit

All specialised burn care services are members of networks of care (ODNs). In addition to these local networks, all paediatric burn centres will collaborate in a national network, to form a virtual, national MDT.

This Paediatric Centre-Level MDT will provide a governance structure that will work seamlessly with the existing ODNs, to ensure that the current pathways of care are maintained and there is a focus on service improvement.

The Paediatric Centre-level MDT will be virtual and thus will be very efficient in terms of resources. The structural set up and co-ordination will be supported by the ODNs, by inclusion within the ODN Work Programme. Preparation for meetings and attendance by clinical teams will require dedicated time, which will be addressed via the annual job planning process within individual Trusts. It is seen as a priority that protected time is granted to clinicians to allow their participation and to ensure there is an effective governance process for these cases within employing Trusts.

The purpose of the Paediatric Centre Level MDT is to support the clinical care of individual active paediatric cases and to offer a structured and consistent approach to audit, measuring outcomes and monitoring activity to ensure that specialised burn care for children with the most severe injuries, are treated equitably and safely. This will include national MDT meetings (virtual) to discuss on-going cases. These MDT meetings will take place at a minimum once a month, or more frequently as dictated by the clinical need of the case(s). The National Paediatric Centre-Level Clinical MDT will have the following characteristics:

- Membership representation from all specialised paediatric burn centres and reflecting the whole burns MDT.
- Clinical and management leadership, from within existing Burns ODNs.
- The national MDT will be overseen and hosted by one of the existing Burn ODNs and will be accountable to each of the burn ODNs, through the National Burns ODN Group (NBODNG).
- The Terms of Reference and Work Programme will be approved by the Major Trauma and Burns CRG.

The function of the National Paediatric Centre-level Clinical MDT will be to:

- Carry out MDT review of current complex cases.
- Undertake retrospective National M&M audit, to support research and good practice.

Support the ODNs to deliver improvements in care for service users and their families.

7.8 Commissioned providers

The list of commissioned providers for the services covered by this specification as at the date of publication of the specification are as follows:

Paediatric Burn Care Facilities

| Trust | Hospital |
|--|---|
| The Royal London Hospitals NHS Foundation Trust | Barts Health Care NHS Trust |
| Oxford University Hospitals NHS Foundation Trust | John Radcliffe Hospital, Oxford |
| Queen Victoria Hospital NHS Foundation Trust | Queen Victoria Hospital, East Grinstead, Sussex |
| South Tees Hospital NHS Foundation Trust | James Cook University Hospital, Middlesbrough |
| University Hospitals of Leicester NHS Trust | Leicester Royal Infirmary, Leicester |
| University Hospitals Plymouth NHS Trust | Derriford Hospital, Plymouth |

Paediatric Burn Care Units

| Trust | Hospital |
|---|---|
| Mid and South Essex Hospital Services NHS Trust | Broomfield (St Andrews) Hospital, Chelmsford, Essex |
| Buckinghamshire Healthcare NHS Trust | Stoke Mandeville Hospital, Aylesbury |
| Chelsea & Westminster Hospital NHS Foundation Trust | Chelsea & Westminster Hospital, London |
| The Mid Yorkshire Hospitals NHS Trust | Pinderfields Hospital, Wakefield |
| Nottingham University Hospitals NHS Trust | Nottingham Queens Medical Centre, Nottingham |
| Salisbury NHS Foundation Trust | Salisbury District Hospital, Salisbury |
| Sheffield Children's Hospital NHS Foundation Trust | Sheffield Children's Hospital, Sheffield |
| Swansea Bay University Health Board | Morrison Hospital, Swansea |

Paediatric Burn Care Centres

| Trust | Hospital |
|---|--|
| Alder Hey Children's NHS Foundation Trust | Alder Hey Hospital, Liverpool |
| Birmingham Women's and Children's NHS Foundation Trust | Birmingham Children's Hospital, Birmingham |
| Manchester University NHS Foundation Trust | Royal Manchester Children's Hospital, Manchester |
| The Newcastle upon Tyne Hospitals NHS Foundation Trust | Royal Victoria Infirmary, Newcastle-Upon-Tyne |
| University Hospitals Bristol NHS Foundation Trust | Bristol Royal Hospital for Children, Bristol |

7.9 Links to other key documents

Please refer to the [Prescribed Specialised Services Manual](#) for information on how the services covered by this specification are commissioned and contracted for.

Please refer to the Identification Rules tool for information on how the activity associated with the service is identified and paid for. NHS England Directly commissioned services service codes can be found [here](#)

Please refer to the relevant Clinical Reference Group [webpages](#) for NHS England Commissioning Policies which define access to a service for a particular group of service users.

The specific clinical policies that relate to the services covered by this service specification include:

| | |
|---|---|
| 1 | National Network for Burn Care, Burn Care Referral Guidelines 2012 https://www.britishburnassociation.org/national-burn-care-referral-guidance/ |
| 2 | British Burn Association National Standards for Provision and Outcomes in Adult and Paediatric Burn Care 1st Edition. 2018 https://www.britishburnassociation.org/standards/ |
| 3 | British Burn Association Standards of Physiotherapy and Occupational Therapy Practice in the Management of Burn Injured Adults and Children 2017 https://www.britishburnassociation.org/standards-of-physiotherapy-occupational-therapy-practice/ |
| 4 | Facing the Future: Standards for acute general paediatric services. Revised 2015. https://www.rcpch.ac.uk/resources/facing-future-standards-acute-general-paediatric-services |
| 5 | Guidelines for the Provision of Anaesthesia Services (GPAS) and Guidelines for the Provision of Paediatric Anaesthesia Services 2020 https://rcoa.ac.uk/gpas/chapter-10 |
| 6 | Paediatric Critical Care Society, Quality Standards for the Care of Critically Ill or Injured Children, October 2021 https://pccsociety.uk/wp-content/uploads/2021/10/PCCS-Standards-2021.pdf |
| 7 | Level 3 Paediatric Intensive Care Specification https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/e07-sa-paed-inten-care.pdf |
| 8 | Paediatric Intensive Care Retrieval (Transport) Specification https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/e07-spec-paed-intens-care-retrvl-transp.pdf |
| 9 | Paediatric High Dependency Care Specification |

<https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/01/eo7-sb-paed-hig-dep-care.pdf>

10 Ericsson, K. A. (2006) The influence of experience and deliberate practice on the development of superior expert performance, in: K. A. Ericsson, N. Charness, P. Feltovich & R. Hoffman (Eds) Cambridge handbook of expertise and expert performance (Cambridge, UK, Cambridge University Press), 685–706
<https://www.cambridge.org/core/books/abs/cambridge-handbook-of-expertise-and-expert-performance/influence-of-experience-and-deliberate-practice-on-the-development-of-superior-expert-performance/C56EDDE9E57B259825916E061B025A72>

11 Major Trauma Service Specification
<https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2014/04/d15-major-trauma-0414.pdf>

Additionally, services must comply with the formally recognised process to facilitate the transition of children and young people to the adult burn care service. This is based on NICE Guidance and follows local policies and procedures.

Applicable Obligatory National Standards

- National Institute for Health and Care Excellence (NICE) Technical Appraisal Guidance
- Mandatory accreditation requirements.

Change form for published Specifications and Products developed by Clinical Reference Group (CRGs)

Product name: Specialist Burn Care Services (Children)

Publication number: D06/S/a – 230501S

CRG Lead: Trauma PoC Lead

Description of changes required

| Describe what was stated in original document | Describe new text in the document | Section/Paragraph to which changes apply | Describe why document change required | Date change made | Changes made by |
|---|--|--|---|-------------------|-------------------------------|
| <p>Mid and South Essex Hospital Services NHS Trust Broomfield (St Andrews) Hospital, Chelmsford, Essex was previously listed under as Paediatric Burn Centre.</p> | <p>Mid and South Essex Hospital Services NHS Trust Broomfield (St Andrews) Hospital, Chelmsford, Essex is no longer listed as a provider for centre level provision from this section.</p> | <p>Section 7.8 Paediatric Burn Care Facilities table / Paediatric Burn Care Units table</p> | <p>To correct provider classification and reflect the appropriate level of commissioned paediatric burn provision. The provider gave contract notice to no longer provide centre level care from Dec25.</p> | <p>April 2026</p> | <p>Programme of Care Team</p> |
| <p>N/A</p> | <p>Mid and South Essex Hospital Services NHS Trust Broomfield (St Andrews) Hospital, Chelmsford, Essex is now listed as unit level care.</p> | <p>Section 7.8 Paediatric Burn Care Facilities table / Paediatric Burn Care Units table</p> | <p>Mid and South Essex Hospital Services NHS Trust Broomfield (St Andrews) Hospital, Chelmsford, Essex is now designated as a unit-level provider, as it is currently unable to</p> | <p>April 2026</p> | <p>Programme of Care Team</p> |

| | | | | | |
|--|---|--|---|------------|------------------------|
| | | | meet the requirements for centre-level provision. | | |
| N/A | The Royal London Hospitals NHS Foundation Trust (Barts Health care NHS Trust) added as a Burns care facility. | Section 7.8 Paediatric Burn Care Facilities table / Paediatric Burn Care Units table | The Royal London Hospitals NHS Foundation Trust (Barts Health care NHS Trust) was accredited as facility level care in Dec25, therefore added to the specification. | April 2026 | Programme of Care Team |
| Queen Victoria Hospital NHS Foundation Trust – Queen Victoria Hospital, East Grinstead, Sussex East Grinstead is listed as a unit. | Queen Victoria Hospital NHS Foundation Trust – Queen Victoria Hospital, East Grinstead, Sussex was changed to facility. | Section 7.8 Paediatric Burn Care Facilities table / Paediatric Burn Care Units table | It was incorrectly listed. | April 2026 | Programme of Care Team |
| N/A | Major Trauma service specification link was added. | Section 7.9 Links to other key documents. | Omission to published version. | April 2026 | Programme of Care Team |