# Medical Imaging: External Referrer Survey Date: 21/04/2023 – 10/05/2023 Auditor: Quality & Accreditation Coordinator & Cluster Support / Productivity Manager

### Title of Audit:

Medical Imaging External Referrer Survey

### Background:

The Medical Imaging department values feedback from those who have professional contact with the service, and this is used to inform strategic planning and improvement projects. To facilitate this, the service conducts an annual referrer satisfaction survey, gathering first-hand feedback from referrers within the RDUH.

Microsoft Forms links and QR codes were emailed to Devon GP Surgeries to cascade with all of the clinicians within the Primary Care Network that refer into Medical Imaging. Surveys are open for 2-3 weeks to enable recipients to respond, after which time the results are analysed, a report is produced and actions identified.

The content of the questionnaires are reviewed annually to ensure they accurately reflect the current service, and focus on emerging practice and technologies.

### Aim, objectives & standards:

To engage with service users to empower them to feel involved in service improvement.

To gather valuable feedback, positive and constructive to allow us to continue with good practice and explore areas for improvement.

Standards:

Satisfaction: 95%

## Methodology:

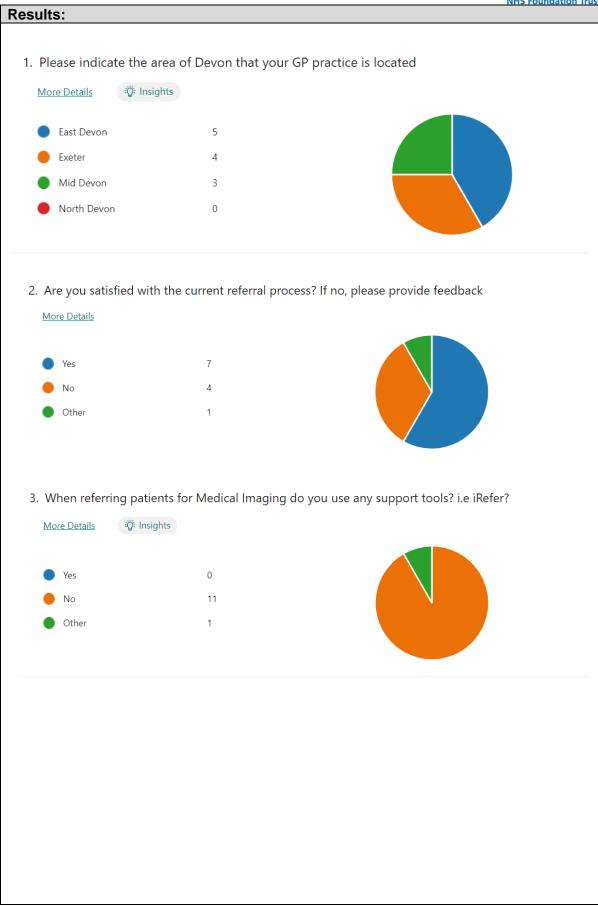
Both quantitative and qualitative data was captured using open and closed questions

Microsoft Forms was used to enable anonymous feedback and ease of use for respondents. A link and QR code to the survey was emailed out to GPs in Devon with expectation that it would be forwarded on to all clinicians that refer into Medical Imaging.

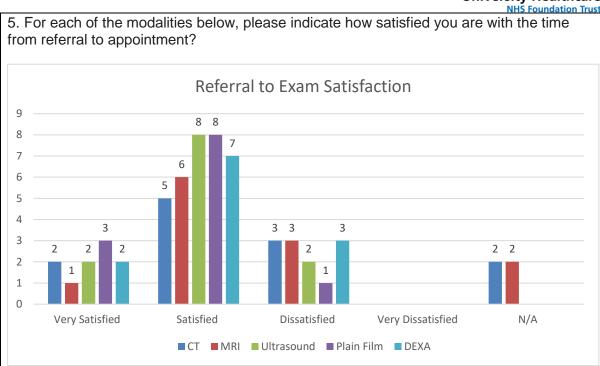
The surveys were run for 2-weeks during April / May 2023

Results were analysed for trends and thematic analysis of free text was conducted

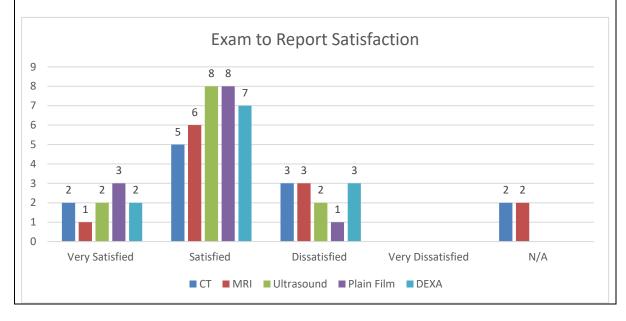




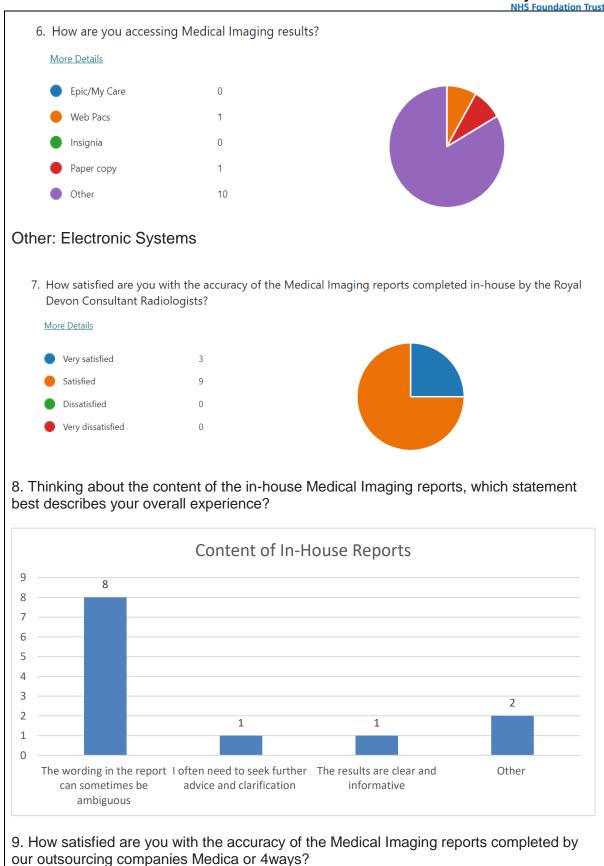




6. For each of the modalities below, please indicate how satisfied you are with the time from examination date to the report being available?

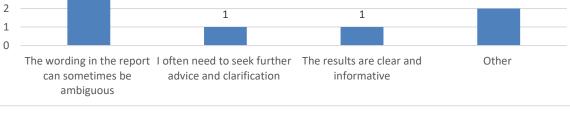




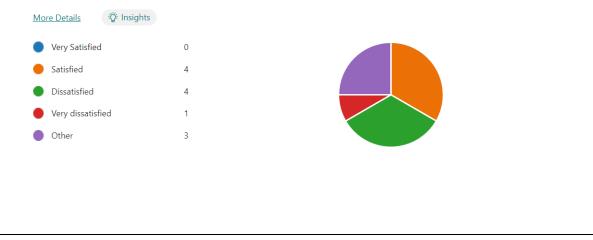








11. If you have a query about imaging results, how satisfied are you regarding ease of contacting the reporting Consultant/Radiographer? If no, please provide feedback



~			
( 'nn	CLUG	einn.	
Con	บเนง	51011.	

Question	Satisfaction rate %
Satisfaction with referral process	58%
Satisfaction with referral to exam turnaround time	72%
Satisfaction with exam to report turnaround time	79%
Satisfaction of in-house reports	100%
Satisfaction of outsourced reports	87%
Satisfaction of contacting reporting Consultant/Radiographer	50%

Free text comment responses were helpful and constructive, which we are able to act on and/or take into consideration for service improvements.

Response rate although not agreed does seem low for the amount of GP surgeries that the survey was issued for dissemination to referring clinicians. This could be contributed by the time of year, due to the additional Bank Holidays. Previous surveys were collated during February and this will be taken into consideration for the next annual audit. In addition, the length of survey period was 1 week less than previous years, along with a reminder email not being sent, we believe this will have also contributed to the lower response rate.

#### **Recommendations:**

Questions for survey are prepared in the early part of January 2024 so that the survey can go live for the whole month of February. A reminder email will be sent in the 3<sup>rd</sup> week of the survey along with a further reminder.

An action plan is to be produced off the back of the feedback comments requiring and action and will be monitored through the bi-monthly Quality Meeting until all actions are closed.

#### Who is the audit being reported to:

- Shared with Primary Care
- Added to Department Web Page
- Medical Imaging staff constructive and positive feedback comments via the monthly newsletter
- Selected sections and comments shared with outsourcing companies
- Shared with Clinical Director and Radiology Service Manager
- Audit Meeting and any actions noted through SGG
- Named individuals

#### Re-audit:

Annual, in line with original schedule of February 2024

# Answer to survey questions:

Are you satisfied with the current referral process? If no, please provide feedback below	Response
It would be better to use a system like we use for blood tests - all paperless	We as a Trust are exploring GP Order Comms which will allow for electronic referrals into our service.
Thinking about the content of the in-house Medical Imaging reports, which statement best describes your overall experience?	Response
The reporting is fine. Sometimes if the report says recommend further imaging - it doesn't always say that it has been requested or it needs requesting etc.	Discussions with the Radiologists about regarding making it clear whether onward appointments/ imaging has already been ordered, or need to be arranged by the GP/referrer?
If you have a query about imaging results, how satisfied are you regarding ease of contacting the reporting Consultant/Radiographer? If no, please provide feedback below	Response
Never quite know what the best way is so I call the x-ray secretaries	Contacting our Secretaries on 01392 402336 option 4 is an appropriate route for you to get a quick response from the most relevant Radiologist for your query. We also have a duty Registrar available on a daily basis who can be telephoned on 01392 406382.
Do you have any other comments or feedback regarding the Medical Imaging Department?	Response
Easier pathways from primary care for CT may be helpful but unsure if adds to burden of scans.	There are agreed pathways from Primary care to accelerate urgent referrals through to imaging. Open access might risk delays in patient care if they are not assigned early to the correct treatment team.
Reports sometimes include wording which is either ambiguous or not clear cut clinically which as patient have access to scans can provide a point of concern as we have to explain to patient meaning of words and can lead to a lot of patient anxiety	Thank you for your feedback regarding wording within reports, we will feed this back to our Reporting Radiographers/Sonographers and Radiologists. We appreciate that it is not always clear for patients, but our reports are written for the clinical referrer. Patients having access to all reports via the NHS app has been implemented Nationally and therefore, is unfortunately out of our control.
It would be easier to be able to request and access imaging results on the pathology ICE system as in other areas of the country	We as a Trust are exploring GP Order Comms which will allow for electronic referrals into our service.
I had a CT come back saying possible bone nets 'suggest follow up'. I requested bone scan	Discussions with the Radiologists about regarding making it clear whether onward appointments/

Royal Devon University Healthcare

	NHS Foundation Trust
but declined as lesions too small. It took 6 weeks of phoning, writing and emailing consultant for plan. Eventually the answer was they would do bone scan in 4m, only to find pt has appt for bone scan next week!	imaging has already been ordered, or need to be arranged by the GP/referrer
Do you have any other comments or feedback regarding the Medical Imaging Department?	Response
(1) The set up for GPs to make bespoke requests is really bad. The fact that junior doctors in RDUH can request a CT TAP without blinking but we have to plead with a Radiology Registrar for a CT for cases where we suspect an underlying problem is difficult to reconcile. There needs to be a properly staffed Consultant led Radiology Clinical advice line where such requests can be discussed and actioned if appropriate - if you think you have this in place it needs reviewing because in practice it does not exist; these calls are rare from each individual GP but when you do make one the blocks, turfs, bounces and then non-action is alarming	<ol> <li>We recognise that it is difficult to get a hold of our Radiologists at times. We would suggest in the first instance you contact our Radiology Secretaries on 01392 402336 option 4 they will be able to either put in you touch with a consultant who is available or ask someone to call you back</li> </ol>
(2) If the report states another scan is required then the Radiologist should arrange this scan. In the majority of cases a quick call to patient from Radiology Dept will be fine. It should be rare for GP to need to contact patient first but in such cases Radiologist should speak to GP. Currently it is just easier to dump a 'CXR ?significant changes repeat in 6 weeks' back to Primary Care. This then requires conversation with patient, a form written and sent etc whilst Radiologist should be able to do this with a touch of a button and a note to secretary to let patient know.	<ol> <li>Discussions with the Radiologists about regarding making it clear whether onward appointments/ imaging has already been ordered, or need to be arranged by the GP/referrer</li> </ol>
Would be helpful to access Webpacs ourselves rather than wait for report to be emailed, especially helpful for our MSK FCPs who want to see the imaging when consulting with patients.	The MSK FCPs who are employed by the RDUH working in Primary Care should be able to request Webpacs access via the Clinical Applications page on the HUB. Training is required before access if given.
There has been a sudden change in rejection of back x-ray referrals but the criteria for acceptance have been very unclear.	We started to work within the Royal College of Radiologists iRefer guidelines in June 2022 for plain film imaging of the spine. These guidelines may be accessible via the RCR website. If you have any queries regarding referral criteria please do contact the department.

	Royal Devon University Healthcare NHS Foundation Trust
	We started to work within the Royal College of Radiologists iRefer guidelines in June 2022 for plain film imaging of the spine. These guidelines may be accessible via the RCR website. If you have any queries regarding referral criteria please do contact the department.
There feels to me to be ever changing referral criteria that are difficult to find - e.g. for back X-ray's and DEXA scans. A clear place to access these such as on the joint formulary would help	There were major changes to national guidelines for DXA in 2022. Because of this, we have been working closely with the Devon referral support service to update the formulary. Unfortunately, we cannot comment on the progress of this as it is now in the hands of the DRSS. However, a referral guide was sent to all GP practices on 6/6/23 to provide guidance in the meantime. If you have any queries regarding referrals, please contact the Medical Imaging Department or the DXA service directly.
For an incredibly busy department I am very impressed but it could be improved. One major issue is the lack of agreement for first contact physiotherapists working in primary care who are not allowed to request imaging. This is an additional workload to primary care GPs which is not necessary (I understand the LMC is working with the department on this.	The FCPs who are employed by RDUH working in Primary Care will be able to place requests in line with their agreed protocol. During 2022 work was undertaken by representatives from Devon and Cornwall to write a regional PCN protocol for non-medical referrers. This was due to go live in February 2023, but due to further queries from the LMC this was put on hold and to date there has been no further progress or update on this becoming a live protocol.
Secondly the method of requesting is quite out dated. Using ICE for radiology (similarly to using it for serology requests would be very sensible it is much easier and prior to moving to Devon I had been using it this way for some years in Somerset so was surprised to still be completing traditional forms needing signatures on them.	We as a Trust are exploring GP Order Comms which will allow for electronic referrals into our service.
I tend to find advice really helpful when contacting the department but it can be hard to get through and similarly we are very time pressured ourselves in primary care.	Contacting our Secretaries on 01392 402336 option 4 is an appropriate route for you to get a quick response from the most relevant Radiologist for your query. We also have a duty Registrar available on a daily basis who can be telephoned on 01392 406382.
Some of the radiologists go on and request further imaging when an obvious abnormality needing further clarity arises (getting a CT chest when CXR abnormal for example). This is really very helpful and more of this would be very warmly received.	Discussions with the Radiologists about regarding making it clear whether onward appointments/ imaging has already been ordered, or need to be arranged by the GP/referrer



	NHS Foundation Trust
On the whole it is a very good department so my criticism is mainly hoped to be productive.	
The outsourced reports are c***	We are utilising outsourcing reporting companies to ensure our exam to report turnaround times are being met. At present we do not have enough in- house reporting capacity to meet demands of incoming referrals within the Trust KPIs.
Do you have any other comments or feedback regarding the Medical Imaging Department?	Response
I had a query for a radiographer at Axminster	Thank you for your feedback, this has been shared
Hospital. Hazel was so helpful. Looked into it straight away and called me back.	with the member of staff.