

Title	Medical Imaging Annual Referrer (external) Satisfaction Survey Report 2022
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History	<p>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 acute and primary care sectors.</p> <p>Separate Survey monkey questionnaires are distributed to GP surgeries across Devon via email with a link/QR code to complete the survey. Surveys are open for 4 weeks to enable recipients to respond, after which time the results are analysed, a report is produced and actions identified. A reminder email is sent when there is one week remaining of survey period.</p> <p>The content of the questionnaires are reviewed annually to ensure they accurately reflect the current service, and focus on emerging practice and technologies.</p>
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1. Method

- 1.1. Both quantitative and qualitative data was captured using open and closed questions
- 1.2. Survey monkey was used to enable anonymous feedback and ease of use for respondents. A link/QR code was emailed to the GP surgeries across Devon
- 1.3. The surveys were run for 4 weeks during February 2022.
- 1.4. Results were analysed for trends and thematic analysis of free text was conducted

2. Analysis

- 2.1. Response rates for external surveys remained low in line with last year
- 2.2. External responses were predominantly from East Devon and Exeter
- 2.3. 68% of respondents were happy with the referral process, any comments have been taken on board and actions formulated where required, (please see below)
- 2.4. Satisfaction with timescales from examination to report are relatively low. This is likely to reflect the backlog and delays due to Covid, and most comments were reflective of the ongoing pressures
- 2.5. 50% of respondents felt the working of the reports can sometimes be ambiguous

3 Additional comments

- 3.1 Respondents were asked to provide any additional comments on the service. Overall we received an additional 7 comments for which we completed a “you said” we did” response and will be made available on our Medical Imaging pages of the Trust website and emailed to the surgeries.
- 3.2 One respondent said “you are doing an excellent job in very challenging time thank you. Another could see there had been much improvement on the highlighting and handling of “unexpected but significant findings”.

4. Recommendation

- 4.1 We will continue work on reducing the examination to report times.
- 4.2 We will continue to provide additional capacity where possible to keep referral to examination times down.

5. Conclusion

- 5.1 Responses were generally positive, and recognised the additional burden resulting from Covid, a general increase in demand and associated delays. General comments were largely complimentary

Thanks to all the respondents for taking time out of their day to complete the survey and providing us with some helpful feedback, which have been shared with the team.

Below are our responses to your feedback/comments.

February 2022 Referrer Satisfaction Survey feedback

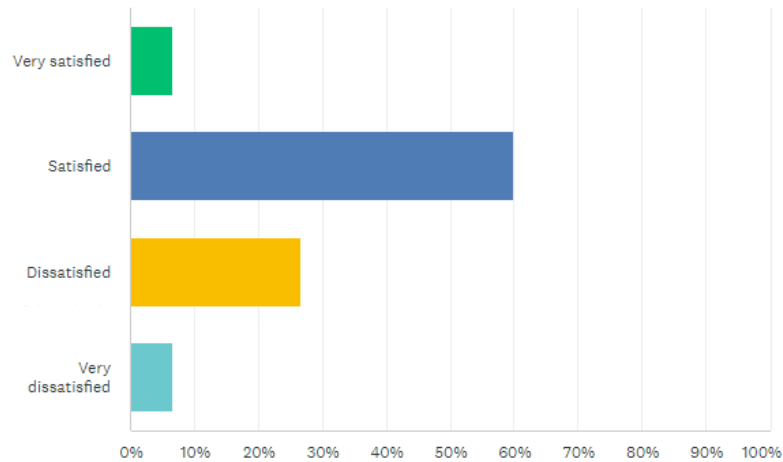
Answer to survey questions:

Are you satisfied with the referral process	Response
68% of you are satisfied with the referral process.	
Please don't keep changing forms	The forms have to be reviewed and changes are made when necessary.
Electronic referral needed + timely advice and guidance responses	<p>We are limited due to our RIS system which does not allow for external electronic referral.</p> <p>Urgent advice can be sought from the Duty Radiologist/Registrar via the main hospital switchboard.</p>
As GPs we are unable to request 2WW CT TAP in cases where we suspect cancer but primary is elusive. If we had an unknown primary clinic as everywhere else in Devon does this would not be a problem	There is now a non-site specific 2WW pathway and details of the referral protocol can be found on the Devon Formulary Page - Non site-specific 2 WW (devonformularyguidance.nhs.uk)
Somerset much better no signature needed information buried in software patients make their own referral	As we do not have an electronic referral system, a signed paper request is required under IR(ME)R 2017 regulations.
Confirm patient on list and timescale	We are working with Business Intelligence to produce monthly waiting times.
A referral form template was supplied to practices by the RD&E which gave options for 2WW scan, Urgent scan or routine scan. We sent a 2WW one and were told the department do not do 2WW scans. Very confusing.	We can accept some direct access 2ww referrals and therefore this tick box is required, if you are unsure that your examinations meets the requirement, please check the Devon Formulary website.

When requesting do you use the support tool iRefer? If no, why?	Response
88% of you said were not using this tool. Some respondents were not aware of what this tool was.	<p>iRefer is the essential radiological investigation guidelines tool, from The Royal College of Radiologists (RCR). iRefer helps referring GPs, radiographers, clinicians and other healthcare professionals to determine the most appropriate imaging investigation(s) or intervention for patients. It provides practical guidance based on the best available evidence.</p> <p>We would recommend all referrers use this tool when placing the request.</p>

How satisfied are you with the time from examination date to the report being available?

Answered: 15 Skipped: 0



Thinking about the content of the Medical Imaging reports, which statement best describes your overall experience
50% of you said they are clear and informative
50% said the wording in the report can sometimes be ambiguous
0% of you often seek further advice or clarification

Modality areas for satisfaction of referral to appointment	Overall satisfaction
CT	80%
MRI	60%
Ultrasound	40%
General X-ray	80%
Fluoroscopy	100%
Interventional	100%
DXA	20%
Nuclear Medicine	100%

If you have a query about imaging results how easy is it to contact the reporting Radiographer/Consultant
58% were satisfied with how easy it is to contact the reporting Radiographer/Consultant

General feedback comments:

You said/asked	We answered/did
When are routine X-rays and ultrasounds going to return to non covid regime?	<p>For routine general x-rays we have increased our capacity and now have the Devon Diagnostic Centre to support this service.</p> <p>We are reviewing the Ultrasound service and we also out-source to help with capacity.</p> <p>High demand for urgent imaging continues to make routine examinations turnaround times challenging.</p>
Would be good to have easy email contact with reporter if clarifications needed. Would be great to have default that if Radiologist recommends another imaging procedure that they book and inform patient. Would be fantastic if expected wait for imaging was communicated to patient and GP when Dept receive request. Would be enormously helpful if we had an easy access 2WW unknown primary route rather than having to speak to whichever Radiologist we can get to authorise. Please stop Radiology Registrars then blocking such authorised requests (has happened to me twice) Thanks ++	<p>Contacts are generic to ensure queries are picked up during periods of absence.</p> <p>The request for subsequent imaging is at the discretion of the referrer who has the best knowledge of the patients overall current condition.</p>
Look at Somerset's referral process so much better	Thank you for your comment.
1. Our patients are routinely told that the report will be available from their GP in a time frame which is rarely achieved. Our staff cannot access PACS so the report is only available when we receive the report. This creates anxiety for the patient, and a lot of work for our reception, secretarial and medical staff. 2. I know that radiographers do tell patients that the person ordering the test will contact the patient, however many patients do not listen to this. I wonder if it would be helpful for staff to actually tell the patient "Dr xxxx" will contact you with your result and to specifically say if your GP did not order your imaging please do not ring them for the result. Even if the result is available on PACS, it is the referring dr who should be interpreting the report for the patient, not a GP who does not necessarily know why the imaging was ordered nor examined the patient.	<p>All staff should be aware that we do not give a time frame for reports to be completed and patients should be told this is completed as soon as possible.</p> <p>We have issued a reminder to all staff through our monthly departmental newsletter.</p> <p>Throughout the department in the waiting areas and examination rooms we have communications of results posters.</p> <p>We aim to report examinations as soon as possible. We are working on increasing capacity for examination to report.</p> <p>Patient's will NOT be told the results of their examination at the time of their appointment.</p>
The goal would be to have very quick access to tests for all. 1 week Add email for queries at bottom Ensure patient told results go to requestor Bring back walk ins for same day	Thank you for your comment 😊 Please see above.

CXR. YOU ARE DOING AN EXCELLENT JOB IN VERY CHALLENGING TIME THANK YOU	Thank you for your lovely comment 😊
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<u>Positive feedback</u>
Much improved on the highlighting and handling of “unexpected but significant findings”. Thanks
Brilliant reports, just a bit slow currently. I understand why, there must be a huge backlog. Thank you for the opportunity to feed back.