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A message from David White, Clinical Lead for the CAMRIN

With the year flying past, the CAMRIN PMO are working hard to ensure that the network meets all the national planning submission dates, so we would like to thank all the Trusts across the patch for responding to requests within a short turnaround.

I wanted to take a moment to say well done to all the Trusts that form CAMRIN, as you are aware, you have regularly been exceeding the 100% activity baseline for 2019/20. This is amazing, especially considering that up until recently the second wave of COVID was still impacting on all services within the NHS.

In this bulletin we are looking back at the excellent collaboration achieved across Cheshire and Merseyside in 2013 with the deployment of a Consortium Wide Picture Archiving Communication System (PACS) and also highlight the opportunities for workforce development that have been developed by CAMRIN in conjunction with Health Education England (HEE).

Please take time to read through this issue of the bulletin, if you have any questions or suggestions for the network please contact **CAMRIN@liverpoolft.nhs.uk**.

Best Wishes,

David White, Clinical Lead, CAMRIN

Network update

The final versions of the guidance documentation for establishing imaging networks were published in late April 2021:

- Diagnostic imaging network implementation guide
- Diagnostic imaging network commercial structure and operational governance guide
- Diagnostic imaging network capital equipment planning guide

As part of CAMRINs development we need to confirm our current governance arrangements and submit a digital roadmap and a workforce strategy by the end of May 2021. The development of Community Diagnostic Hubs is continuing at pace, the Senior Responsible Officer for this exciting initiative is **Dr Liz Bishop**, Chief Executive of The Clatterbridge Cancer Centre NHS Foundation Trust. As radiology is a key component of this work there is significant representation from across all CAMRIN Trusts.

The network CT scanner has been installed at The Walton Centre, the team are pictured below. This scanner was bought as a result of the Adopt and Adapt funding we secured and will be set up to accept patients from all over Cheshire and Merseyside.



Pictured (from L-R); Dr Kumar Das – Consultant Neuroradiologist, Clinical Director, Maxine Helsby – Principal Radiographer CT, Yvonne Shanks- Radiology Directorate Manager and Samantha McNulty – Neuroradiographer.

Workforce Development Opportunities



As we shared with you in our **November bulletin** CAMRIN were successfully awarded funding from HEE to develop four workforce development projects. These projects are now in progress and you have the opportunity to apply for them. They are:

<u>Postgraduate CPD Module (30 Credits); DRAD556 Clinical Computerised tomography</u>

Novice to competent member of the clinical CT team in 15 weeks.

Postgraduate CPD Module (30 Credits); DRAD555 Clinical Magnetic Resonance Imaging

Novice to competent member of the MRI team in 15 weeks.

FREE Chest X-Ray reporting course for reporting radiographers; Non-accredited CPD update course for qualified reporting radiographers

Enhance your skills to issue a structured, accurate report.

MSc Diagnostic Radiography (Pre-registration); provides you with all the knowledge and practical experience you will need to become a qualified Diagnostic Radiographer

This is a vocational programme to develop graduates to become Diagnostic Radiographers. With a shortage of radiographers and increasing medical imaging work planned over the next ten years, a job at the end of the degree is virtually guaranteed.

Collaboration before our time

Ten of the 12 Trusts that form CAMRIN are currently re-procuring their Radiology Information System (RIS) before moving on later this year to re-procuring their Picture Archiving Communication System (PACS). We wanted to share a look back at the ground breaking collaboration that was achieved in 2013 by the PACS/RIS community in Cheshire and Merseyside, before the concept of Diagnostic Imaging Networks were even a twinkle in NHS England and NHS Improvement's eye.

Deployment of a Consortium Wide PACS to 11 Trusts: Resulting in One Imaging Patient Record across the Cheshire and Merseyside Region.

Summary:

In 2006 the National programme for IT procured a system for storage and display of X-ray images (PACS) across Cheshire and Merseyside region.

Inside each of the Trusts this produced a significant improvement in that X-rays and scans became available all around the Trust, replacing X-ray films, which could be lost or in the wrong place when patients attended for treatment.

The big downside was that no sharing of images was available, so if a patient had a scan in one hospital and attended another hospital for treatment, the scans would not be available, or there would be a delay when a CD was sent or scans were emailed.

This could lead to cancelled appointments or even worse, scans being repeated if things were urgent.

The problem was particularly bad in Merseyside as there are so many hospitals and specialist Trusts; with patients often going back and forth between as many as three or four Trusts. Comparing old and new scans was also a very difficult process on two or more systems.

All Trusts in the North West and West Midlands faced the end of the National RIS and PACS contract ending on the 30th June 2013. Cheshire and Merseyside as a region had a huge desire to work together as a consortium to procure and deploy a common system with the main objective being that images and scans would be shared seamlessly amongst all organisations. This would result in one Radiology patient record that could be accessed anywhere, by any health and care professional in any of the partner Trusts.

Aim:

- To implement a patient centred IT solution
- Desire to make patients experience as good as possible within complex healthcare environments
- Use technology so reports and images are all in the correct place irrespective of where the patient is or the time of day
- MDT (Multi-disciplinary Teams) have all the available information and at the same time, external Trust staff can access the information also
- Avoid delays.

Method:

As a Consortium of 11 Trusts it was essential that there was an independent body coordinating and directing us along the correct path of procurement and implementation.

Central Team: All 11 trusts procured a consultancy from North Mersey HIS over two years. This consisted of a team including a Programme Manager, a Project Manager and two admin co-ordinators.

Trusts involved

Aintree University Hospital NHS Foundation Trust (AUH)

Royal Liverpool University Hospital NHS Trust (RLH)

(as of 2020 AUH & RLH were merged to form Liverpool University

Hospitals NHS Foundation Trust)

Alder Hey Children's NHS Foundation Trust

Liverpool Heart and Chest NHS Foundation Trust

Liverpool Women's NHS Foundation Trust

Liverpool Community NHS Trust

St Helens and Knowsley Teaching Hospitals NHS Trust

Southport and Ormskirk NHS Trust

The Clatterbridge Cancer Centre NHS Foundation Trust

The Walton Centre NHS Foundation Trust

Warrington and Halton Hospitals NHS Foundation Trust.

Programme Board: Established to oversee the entire process. Consisted of:

- Chairperson
- Clinical Radiology Lead
- Finance
- Systems Manager
- Information Governance
- IT Directors
- Procurement

Workstreams: Ideally there was a person(s) from each Trust for each of the workstreams below:

- Operational/Clinical
- IT
- Information Governance
- Finance

Results and Benefits:

A virtual regional PACS across 11 Trusts within Cheshire and Merseyside during 2013 brought about many benefits in the healthcare community providing a single imaging history between all. Due to the nature of patient management and flow in the area this has resulted in one imaging record that can be accessed simultaneously in any Trust.

A patient attending any of the hospitals in the consortium for treatment can be sure that all of their scans and X-Rays are instantly available, no matter where they were initially taken.

The Consortium team were made up of IG, operational, clinical and IT leaders who lead this project and were key in ensuring its success, with the project being delivered on time and under budget with major cost savings for the Trusts. On average each Trust saved 40% with the new contract. There has also been overwhelming acceptance by the users of the system and now lost or mislaid scans are a thing of the past!

Two hospitals in the region were not members of the consortium (Countess of Chester

Hospital NHS Foundation Trust and Wirral University Teaching Hospital NHS Foundation Trust), but we have now incorporated the advantages into their systems and we can share scans with them too. More recently this has been extended to include Mid-Cheshire Hospitals NHS Foundation Trust.

Major benefits have also resulted clinically such as Orthopaedic/Vascular surgeons being able to access a patients images from Wirral (as an example), discuss with the Wirral clinician and make a decision as to whether the patient requires transferring to be managed or not.

Multi-disciplinary Team (MDT) meetings have been revolutionised with images now available immediately from any location and most importantly, only one copy of the image exists rather than multiple copies existing in many places with different reformats, key images and measurements.

From February 2015 the regional Radiology out of hours on-call service had a single site for multiple hospitals.

Our system was the first of its kind in the UK back in 2013 and even now in 2021 there are very few that are similar - with none covering more separate Trusts. In fact, throughout the years since we implemented it, there has been national interest in looking at ways of replicating our system's success in other areas.

Case Study:

- Patient imaged at Aintree (AUH)
- Case discussed at Urology MDT at Royal Liverpool (RLH)
- Patient requires treatment at Clatterbridge Cancer Centre (CCC)

Before	After
 Image taken and reported at Aintree (AUH) Referred to Urology MDT for discussion at Royal Liverpool (RLH) Urology MDT Co-ordinator requests images and reports to be transferred Images manually 'pushed' from AUH Images manually imported to RLH PACS Patient discussed at MDT Patient referred to CCC for radiotherapy treatment Images manually 'pushed' from AUH to CCC Images manually imported to CCC PACS Images taken at CCC Images manually 'pushed' from CCC to AUH for outpatient appointment Images manually imported to AUH PACS. 	 Image taken and reported at AUH Referred to Urology MDT for discussion at RLB Specialist opinion added to same report and scan Scan and report available to view at all sites.

Testimonial from Prof Peter Clark, Consultant Oncologist, CCC:

"Just a quick note to say what a difference the region wide PACS system makes to us in Oncology. When patients are crossing between the specialist small hospitals and the large hospitals, the PACS system makes management so much easier whether it is in our clinics, in MDT (Multi-disciplinary Team) meetings or when I ring a colleague in a different hospital and we can both view images and discuss management. A big thank you to you and your colleagues from me but above all my patients".

Opportunity

We are still seeking a Clinical Lead for the Radiology Clinical Reference Group. It will be an extremely worthwhile role, as the group will have an important role to play in the network. They will provide expert clinical and professional opinion and advice on a wide range of topics. For further information, please contact **CAMRIN@liverpoolft.nhs.uk**

CAMRIN programme updates



Cancer Pathways

The team have reported that there is ongoing collaboration across Cheshire and Merseyide (C&M) to standardise the imaging element of Cancer Pathways, with a current focus on Sarcoma, Urology and Gynae. We'll provide more updates on this in the next CAMRIN newsletter.

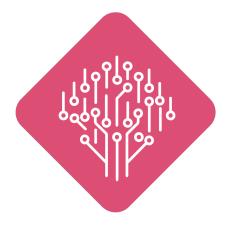
Clinical Transformation

The Options Appraisal scoring workshop took place on the 21st April, the workshop was excellently attended by all Trusts from across the region with both clinicians and operational managers having their say on the future of Interventional Radiology out of hours services. The findings will now be put into a report format and sent to the EOG (Executive Oversight Group).

Cheshire and Merseyside Radiology Reporting Collaborative
The Pilot has been given the authority to proceed by the
members of TMT (Transitional Management Team), Consultants
and Trusts will now be contacted to see if they would like to be
involved (if you are a reporting radiologist and are interested in



reporting for the Radiology Reporting Collaborative pilot please email **CAMRIN@liverpoolft. nhs.uk**). A memorandum of understanding is in development to ensure that consultants can report freely for other Trusts without an honorary contract.



Digital delivery

The move to PACS based reporting is now well underway for the Radiology departments across C&M. All Trusts have agreed the implementation plan for the go live of PACS reporting and each Trusts has been provided with specific training dates for their Radiology staff throughout the months of May and June, you can obtain these dates via your RIS/PACS Manager. The sessions are available virtually and also Philips will be on each Trusts site/s during the allocated time slots to be able to provide one to one hands on training. There will also be plenty of support for your Radiology department after the training has been completed to ensure everyone is comfortable in using the new reporting solution.

The Digital Delivery teams other Ologies project is moving ahead nicely and they have a Clinical Safety Officer who is working with them to identify any potential hazards so that they can ensure they understand exactly what clinical impact the solution will have. They are now at the stage of setting up workshops for each pilot area to establish what the workflow will look and feel like once the system is in place. The capturing of images will be via a web-based application which you can access on any mobile device. The app is very easy to use and will greatly improve the way we capture, store and retrieve images across the patch in the future for our patients safety.

Procurement

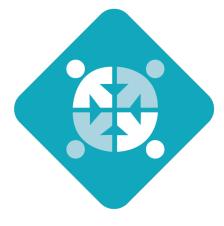
The RIS replacement procurement is continuing to progress. OBS supplier response evaluations were completed in March and all four suppliers' presentations have taken place. In addition, the recommendation report was presented at April's TMT and EOG meetings and draft contracts will be shared with participating Trusts.



Imaging capital replacement plans have been requested for all Trusts and the NHS supply chain multi aggregation plan for 2021/2022 has been shared with all procurement

departments. Imaging equipment maintenance has also been reviewed, NHSI asset data has been collected as a result of this and has been summarised by modality. Consultations are in process with all Trusts to agree a scope for the contract moving forward.

Spend data on contrast media has been collated and engagement with all providers and framework owners is in progress. SBS and Health Trust Europe category teams will be completing a bench marking exercise against the framework prices. All consumable spend data collected has also been shared with NHS Supply Chain for analysis and categorisation. Additionally, a draft workplan has been presented to and approved by Cheshire and Merseyside Procurement Network.



Workforce

CAMRIN are continuing to develop the imaging workforce strategy and workforce plans with their colleagues in the North West.

There is on-going work with legal experts and HR leads for enablement of cross-trust working in C&M. A task and finish group has been set up to review the education and training requirements for 'The Radiographer of the Future' with the engagement of NW Radiology Managers, Higher Education Institutions (HEIs), HEE and the College of Radiographers, linked to the latest Health and Care Professions Council (HCPC) standards – which are due for publication in June this year.

CAMRIN are fully engaged with Society and College of Radiographer (SCoR)/HEE/Allied Health Professionals (AHPs) and regional radiographer leads on work taking place nationally to define the career framework for imaging support workers, and to reduce the wide variation on associated roles and responsibilities within this group of staff.

