



# Scottish Radiology Transformation Programme (SRTTP) Conference

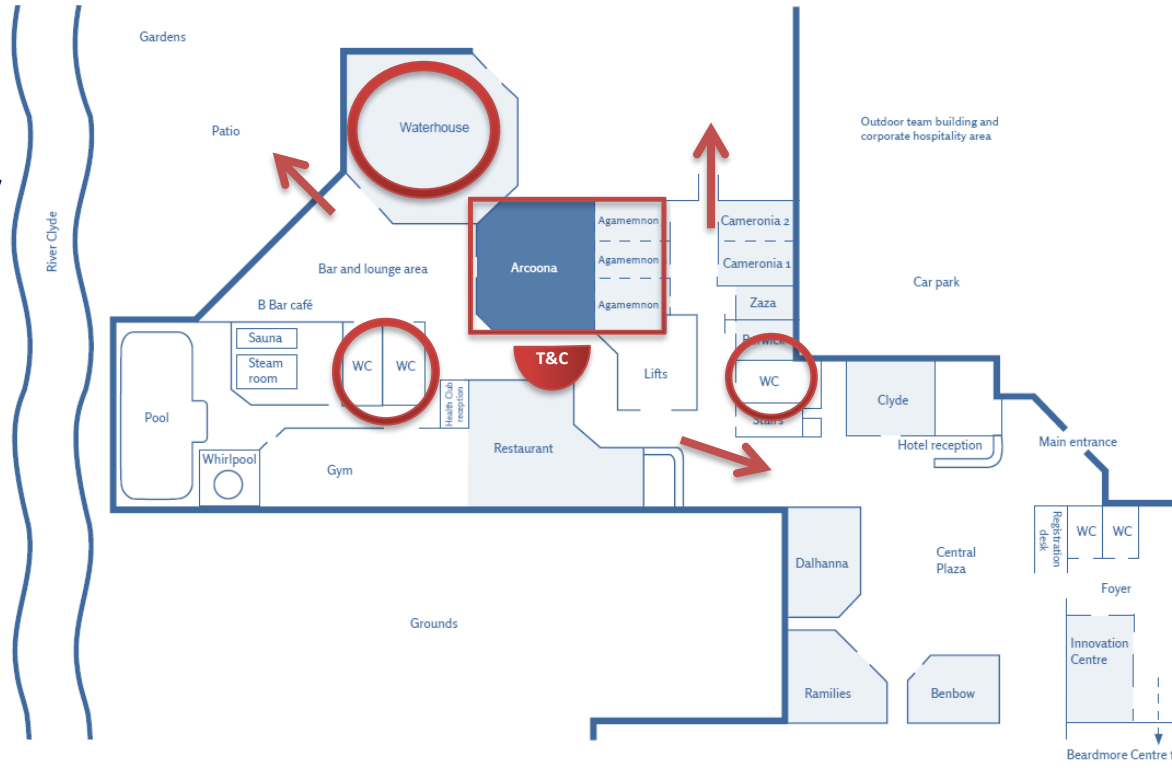
Thursday 14th March 2019



@NHSNSS #NSSSRTTP

Upload questions: [www.slido.com](http://www.slido.com) #NSSSRTTP

- Housekeeping
  - No fire tests today
  - Exits via each door
- Toilets circled
- Lunch behind bar





# **Scottish Radiology Transformation Programme (SRTP) Conference**

Thursday 14th March 2019

Jeff Ace, Chief Executive  
NHS Dumfries & Galloway  
Chair SRTP Board

# SRTTP Purpose of the Day

- Update the Radiology community on the SRTTP work so far
- Work on the future vision for Radiology in Scotland
- Discuss the next set of activities required for transformation in Radiology



# **Scottish Radiology Transformation Programme (S RTP) Conference**

Thursday 14th March 2019

Jim Cannon, Programme Director  
Hamish McRitchie, Medical Director  
S RTP, NHS NSS

# S RTP Overview of the Day

- Programme background and update
- Presenting your Vision for Radiology
- The new model for Radiology
  - Morning and afternoon workshops
- Q&A sessions
  - Slido.com #S RTP
  - or hand in written questions

#NSSRTP

## Agenda

Conference Agenda

Scottish Radiology Transformation Programme (S RTP)  
Clyde House  
1 South Clyde Crescent  
Glasgow  
EH12 9EB  
Email: [jss.s.r.t@nhs.uk](mailto:jss.s.r.t@nhs.uk)



Scottish Radiology Transformation Programme (S RTP) Conference  
Golden Jubilee Conference Hotel  
09.30-16.00 Thursday 14 March, 2019

09:30 - 10:00	Registrations/ Coffee	
10.00 - 10.10	Welcome	Jeff Ace CEO NHS Dumfries and Galloway
10.10 - 10.45	Update from the S RTP Team Q&A	Jim Cannon & Dr. Hamish McRitchie
10.45 - 11.00	Radiology Strategy Update and Aims for the Day	Jim Cannon & Dr. Hamish McRitchie
11.00 - 11.15	Coffee / comfort break	
11.15 - 12.30	Facilitated workshops	
12.30 - 13.30	Lunch	
13.30 - 14.50	Facilitated workshops	
14.50 - 15.00	Coffee / Comfort Break	
15.00 - 15.45	Q&A and next steps	
15:45	Closing Remarks	

# S RTP Programme Background

- The current model of Radiology services was recognised to be unsustainable
  - Workforce
  - Generalist and specialist services
  - Financial model

TRANSFORMATION



# S RTP A Brief History of the S RTP

- Shared Services Programme
- Why Radiology? Sustainability & resilience
- Engagement with Radiology community
- Development of Initial Agreement and a model for radiology
- Business case development and procurement



## Rationale

Current service is unsustainable

## The Vision

### A collegiate solution

Ability for radiology staff to work across Scotland

Maximising role utilisation, and flexibility to work across traditional Health Board boundaries

#### Agreed nationally accepted:

- Clinical governance
- QA

#### Integrated, compatible IT Systems supporting:

- data sets and definitions
- patient pathways and protocols - reduced variation and demand management
- workforce optimisation, e.g. radiography reporting, radiography assistant
- transfer of reporting
- de-coupling of image capture and reporting
- separation of scheduled and unscheduled activity for both image acquisition and reporting
- Cross boundary image requesting
- Image acquisition and sharing delivered by re-procurement of national PACS
- Cross boundary image reporting
- Reducing adverse / unwanted variation

## Objectives

Maintain local image acquisition

Local accessibility to expert radiology opinion

Equity of access

Local Sustainability of service

Increased resilience of Service

## National Model for Diagnostic Radiology

### Benefits

Cross boundary reporting  
 Improved waiting time performance  
 Co-ordinated approach to out of hours  
 Support for remote and rural boards in hours reporting  
 National approach to radiology reporting  
 More effective use of the workforce  
 Ability to identify demand, capacity and equipment  
 Reduced shortfall in reporting capacity  
 Achieving the recognised standard for radiology reporting  
 Improved quality of service planning by availability of comparable data  
 Flexibility to adapt to emerging clinical service change  
 Increased throughput and quality due to decoupling of scheduled/unscheduled reporting of images  
 Sustain image acquisition close to patient  
 Sustain expert radiology opinion for local clinicians  
 Provide specialised radiology opinion to local services  
 Cost avoidance  
 Cost savings  
 Virtual rationalisation with minimal impact to patients and staff

### Constraints/Dependencies/Risks

**Constraints/Dependencies**  
 Agreed data sets  
 Agreed data definitions  
 National RIS functionality (requesting and reporting)  
 Ability to report cross boundary  
 Production of nationally agreed:  
 - HR policy  
 - clinical governance model  
 - QA model  
 - Integrated, compatible IT systems  
 - patient pathways/protocols

**Risks**  
 Unsustainable radiology services  
 Mismatch between demand and capacity  
 Inability to meet waiting times  
 Increased costs of private sector for reporting  
 Recruitment, retention issues  
 Delayed diagnosis leading to poor patient outcomes

### Costs

Re-procurement of PACS  
 - circa £20m  
 - capital and revenue without SS changes

Additional PACS functionality to support RIS reporting only  
 - circa £2.5m

Datamart to enable service planning  
 - Circa £250,000

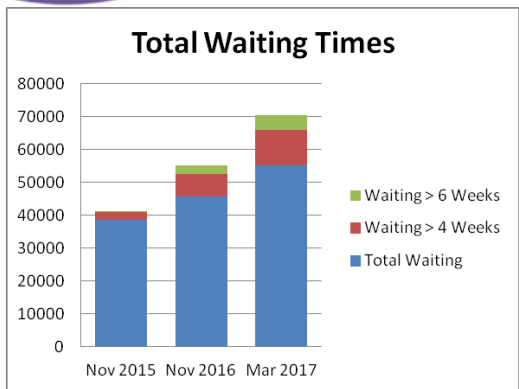
NSS Support Costs  
 - Programme Team  
 - SME

Design of QA, HR & clinical governance models (costs to be established)

## Desired Outcomes

Ensure continuing good outcomes for patients  
 Sustainable, equitable, access to robust, timely services

# S RTP A Brief History of the S RTP

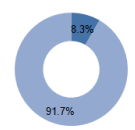


**Deteriorating patient access**  
**Nov 2015 to Mar 2017: A 1,288% increase**

## Uncontrolled unbudgeted costs

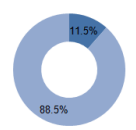
Locum and agency 2015/16 to 2016/17  
 half year data: 9% increase  
 Outsourcing and additional payments 13/14 to 14/15  
 increase by 50%: £1.75m increase.

Consultant Radiologist Vacancies<sup>1</sup> and Staff in Post as a Percentage of Establishment<sup>2</sup> as at 30th September 2015



■ Vacancies as a Percentage of Establishment  
 ■ Staff in Post as a Percentage of Establishment

Consultant Radiologist Vacancies<sup>1</sup> and Staff in Post as a Percentage of Establishment<sup>2</sup> as at 30th September 2016



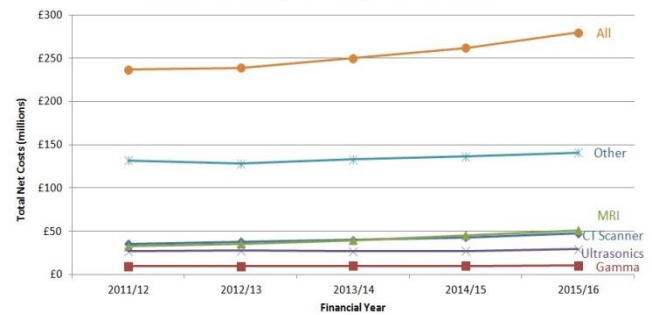
■ Vacancies as a Percentage of Establishment  
 ■ Staff in Post as a Percentage of Establishment

Source: ISD Scotland National Statistics Publication - 6th December 2016  
 1. A vacancy is defined as a post which has been cleared for advert after being through the redeployment process (internal or external advert) and remains a vacancy until an individual starts in the post.  
 2. Establishment is calculated by adding the number of staff in post to the number of vacant posts.

## Escalating workforce shortages

**Sep 15 to Sep 16: Increase from 8.3% to 11.5%**  
**Sep 16 to Mar 17: 13%: 33.4 WTE**

Total net costs, by radiology service, Scotland



## Increasing service demand

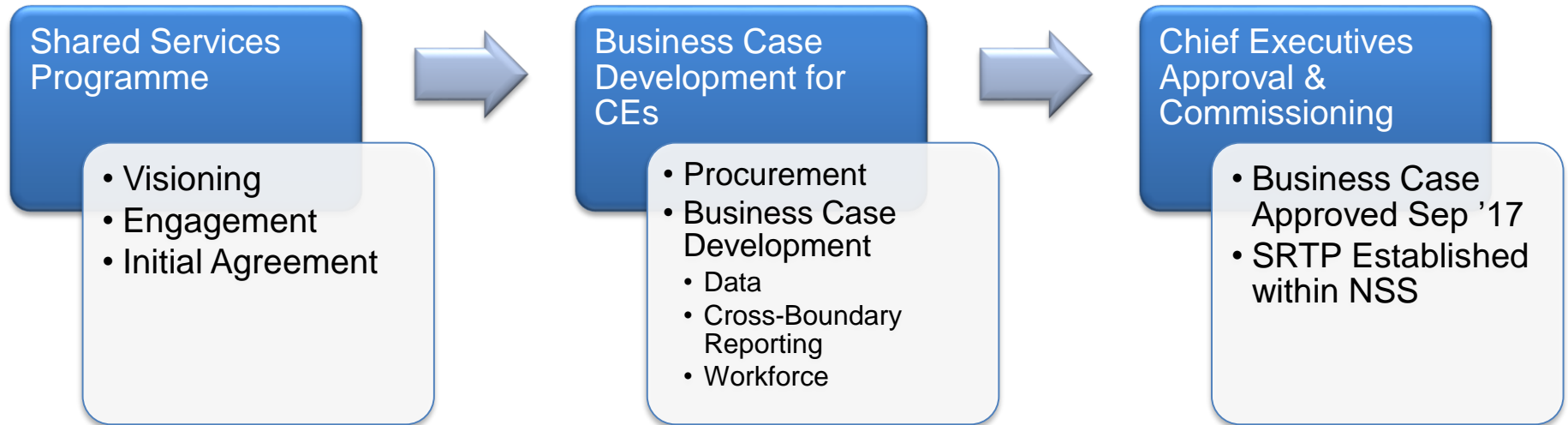
**Total net costs: An increase of £36m or 14.75% from 2012 – 2016**

# S RTP A Brief History of the S RTP

- Full business case
  - Data
  - Cross-boundary reporting
  - Workforce
- Business case approved September 2017
- Purpose to improve sustainability and resilience
- Additional benefit to avoid cost

# S RTP A Brief History of the S RTP

- Business case developed



# S RTP A Brief History of the S RTP

- Additional funding (beyond initial business case)
  - Additional radiologist trainees
  - Reporting radiographer funding
  - Additional workstations
  - Clinical Decision Support software pilot

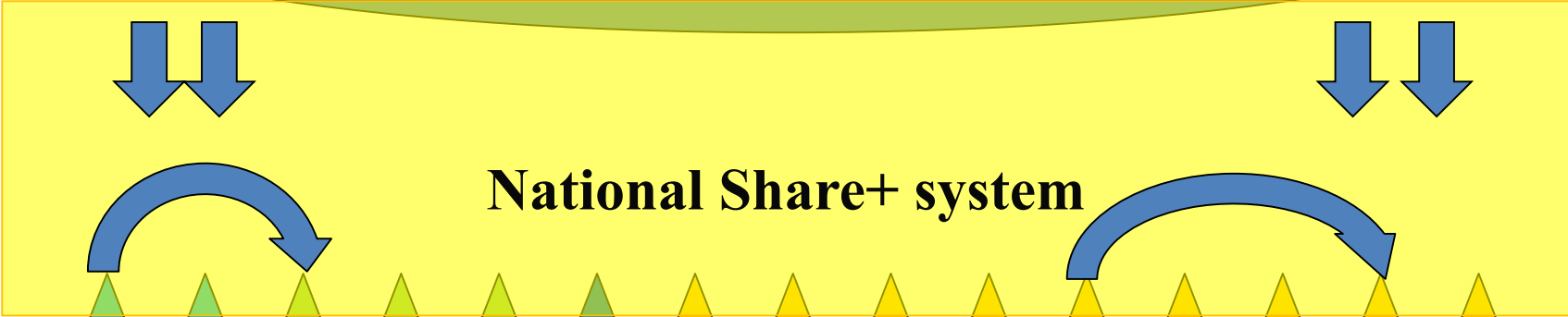
# S RTP Programme update: S RTP Workstreams

- National IT connectivity
- National data collection & analysis
- Workforce planning tool
- International recruitment
- Radiologist job planning
- Reporting Radiographer framework
- Safe Working Framework
- Advanced Practice
  - Reporting Radiographer - pilot
  - Sonography
  - Breast AP
- National “Bank” - pilot
- Clinical Decision Support - pilot
- Home workstation - pilot

# S RTP Programme update: National IT Connectivity

- Soliton's Share+ solution procured Q1 2018
  - Central servers
  - Share+ enables cross-border reporting
  - Interfaces with existing RISs
- CSH & HSS interfaces
  - Procured: Summer 2018
  - Developed: Autumn 2018
  - New interfaces for CSH 11 and TrakCare funded

National PACS - All Radiology images



Board Radiology Information Systems X 15  
Reports / Clinical Info / Demographics / App'ts



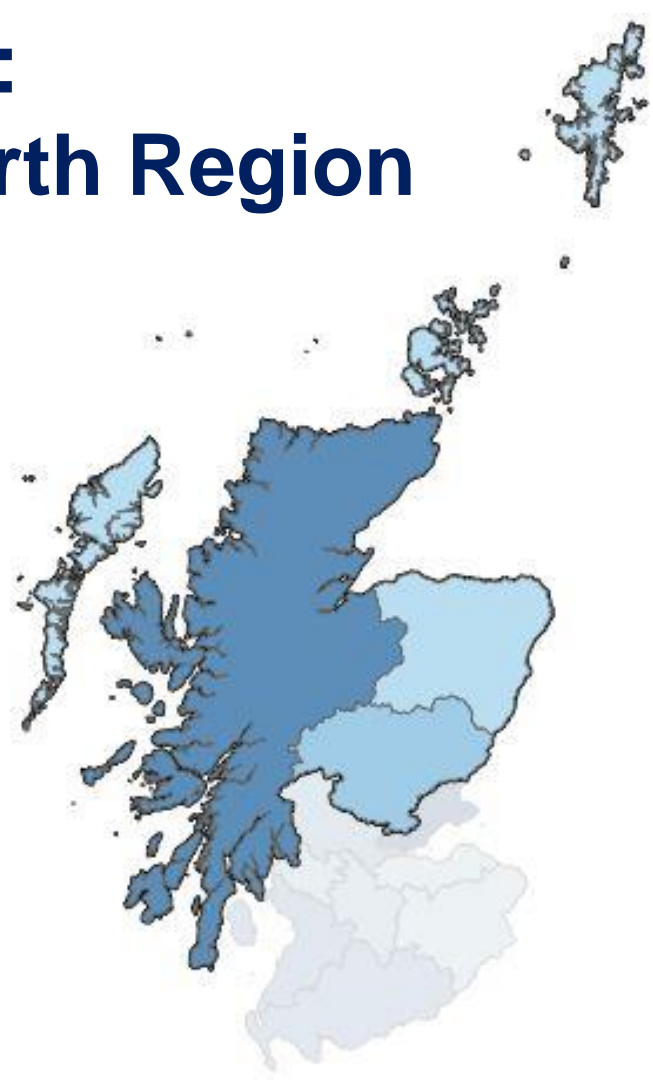


# Programme update: IT Connectivity: North Region

- Regional implementation model
  - Regional implementation team
  - Regional implementation groups
  - Workflow managers
    - roadshows, support & training
  - Implementation:

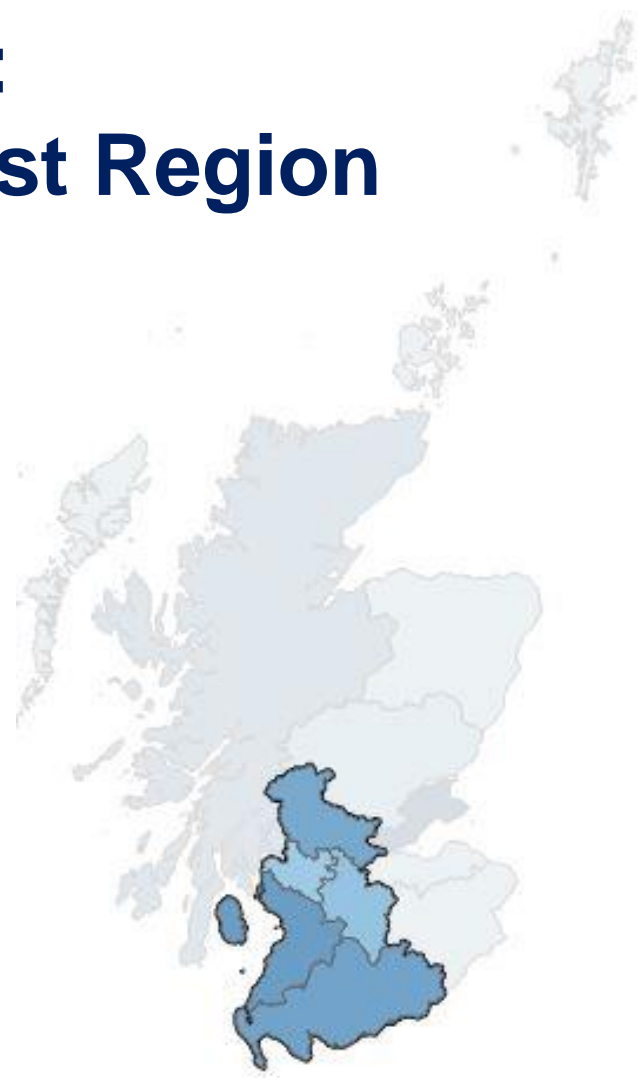
NHS Highland  
Oban  
Raigmore  
NHS Tayside  
NHS Grampian

NHS Shetland  
NHS Orkney  
NHS Western Isles \*\*



## Programme update: IT Connectivity: West Region

- West regional planning group established
- Kick off meetings held with each board
- New interface with Golden Jubilee
  - Includes Western Isles
- Implemented by May 2019



# S RTP Programme update: IT Connectivity: East Region

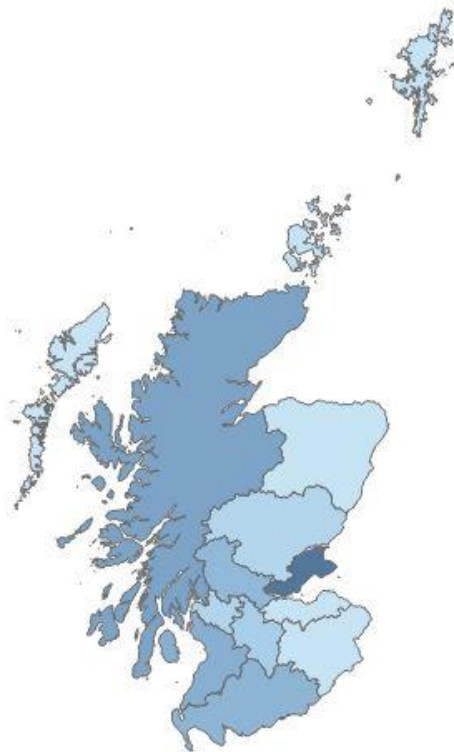
- Planning underway
- Interfaces to Trakcare in progress for NHS Lothian



# S RTP Programme update: NRIIP

- National Radiology Information & Intelligence Platform (NRIIP):
  - Data sets agreed
  - Dashboards developed
  - Test data from Boards
  - Dashboards released
  - Data mart in development
  - Data extraction mechanism
  - Further dashboards
  - Ongoing analytical support

# S RTP Programme update: NRIIP Dashboards



**National Radiology Information & Intelligence Platform (NRIIP)**  
Exam Examinations - Examinations Carried Out

boards provide analysis of examinations carried out by each board in Scotland and abroad

**Contents**

- Board Overview - Overview of national activity
- Look My Board Activity - Comparison of activity across boards by board
- Examining - Board performance compared to Department rates across Scotland for selected period

NRIIP Phase 1 - Level 1 - Examinations Carried Out

**National Radiology Information & Intelligence Platform (NRIIP)**  
Medical & Dental Workforce Information

**KEY POINTS SUMMARY TRENDS DATA AGE**

**NRIIP Workforce Information Dashboards**  
The dashboard provides a tailored version of the data to tailor show the Medical and Dental and Allied Health Professionals dashboards which are available on a quarterly basis by the Scottish Health Boards. The information presented covers a rolling 12 year period in line with the workforce by year publication. However not all the data is available in the original publications (see Data & Links).

**Available Information**  
The dashboard includes all NHS boards and covers, in addition to data aggregated by Gender, Age, Years, and Work Regions, aggregate rates on individuals in groups which have been included from the dashboard (e.g. health and workforce regional levels). Staff is split by board and will not be equal to the sum of the data presented for the individual boards.

Currently, included categories under the medical and dental dashboard are "Clinical Radiology" and "All Medical" (see below), whilst the Allied Health Professionals dashboard includes the performance "Physiotherapy", "Therapeutic Radiography", and "All APHC". Access to the full publications remaining data for all open listing professions is available under "Data & Links".

NRIIP Medical & Dental Workforce Information

**National Radiology Information & Intelligence Platform (NRIIP)**  
Allied Health Professionals Workforce Information

**KEY POINTS SUMMARY TRENDS DATA AGE**

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NRIIP Allied Health Professionals Workforce Information

**National Radiology Information & Intelligence Platform (NRIIP)**  
Costs Book - Staffing Services

**All Costs Staff Costs Map View**

**NRIIP Costs Book - Radiology Services Dashboard**  
The dashboard presents information from Scottish Health Boards (rates referred to as the "Costs Book") which is published quarterly by NHS, and the support of the Scottish Government Health Department (DHSC). The data flows to the only system of published rates for the health sector, and provides a detailed analysis of rates for numerous services, regional and other categories. The data is available in the map view and is presented in the costs publication website (see Data & Links).

**Available Information**  
The dashboard includes data published for all NHS boards and covers, in addition to data aggregated by Age, Full-time, Aggregate, and Regional, the total and national level, more detailed information is available in the map view and is presented in the costs publication website (see Data & Links).

**Important Notes**  
Care should be taken with the regional comparison rates with activity data from other sources due to different seasons. The user applies to staff salaries for local rates.

The category "Other" is broad, it includes all normal employment categories and other types of

NRIIP Costs Book Information



# Programme update: Supplementary Staffing Model

- New in-sourcing model for reporters to do additional sessions
- Capacity within existing NHS staff to undertake additional work for the NHS
  - Early career Radiology Consultants
  - Retired Radiology Consultants
  - “Other” Radiologists



# Programme update: Supplementary Staffing Model

- Requires an employment model
- Requires a payment model
- Options developed:
  - Employment models
  - Radiologist payment models



# Programme update: Supplementary Staffing Model

- Proposals:
  - Employment: Radiology Bank
  - Employment: Host Board
  - Payment: Bank Rate - Radiologists
  - Payment for RR pilot: Agenda for Change Radiographers
- In development with senior HR / Management groups

Proposals

WRG

BAR

HRDs

MSG

Next...



# S RTP Programme update: Governance & Quality Assurance

- Safe Working Framework developed in consultation with clinicians with wide engagement
  - Workflow Manual
  - CLO Legal Statement
  - Adverse Events Process
  - Information Governance
  - System Training
  - Service management and IT support
  - Resilience & Disaster Recovery
- PBBP and PIA developed to ensure appropriate information governance protocols met





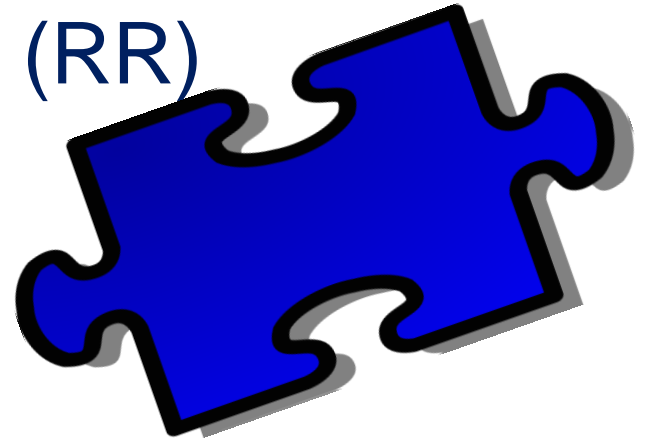
# Programme update: Scottish National Radiology Reporting Service (SNRRS)

- Reporters performing cross-boundary work
  - Workflow managers
  - Reporting Radiologists and Reporting Radiographers
1. RR pilot – plain film only
  2. Home workstation - pilot
  3. Support existing cross boundary arrangements
  4. National Bank



## Programme update: Advanced Practice (AP)

- Sonography
- Breast AP
- Reporting Radiographers (RR)



# SRTP Programme update: Advanced Practice

- Sonography / Breast AP
  - Potential Scope of Practice
  - Workforce numbers, their skills and their location geographically
  - Understand the current education provision
  - Current and potential future activity
- Gap analysis
- Options / recommendations for future



# Programme update: Reporting Radiographer (RR) Pilot

- RR pilot trials SNRRS and associated governance arrangements by
  - Testing the new IT Connectivity system (Share+)
  - Testing the business rules and workflows
  - Piloting the Safe Working Framework
  
- Go Live - 15<sup>th</sup> March 2019 – 9<sup>th</sup> August 2019



# Programme update: Reporting Radiographer Pilot

- The Pilot will be used as a Proof of Concept to:
  - Establish if a radiographer led plain film reporting service could better utilise the existing workforce
  - Test the use of consultant radiographer skills across boundaries
  - Quantify any increase in the radiography workforce that may be required to sustain the service in the future
- The Pilot will be evaluated on completion with follow on recommendations made

# Programme update: International Recruitment

Agreed with RCR to undertake international recruitment to vacant posts at a national level:

## PROCESS

- Identify vacant posts
- Job descriptions
- Advertising
- Workforce Reference Group established International Recruitment subgroup
- Appointment panel
- Telephone interviews
- Candidate checking and vetting
- Long-listing
- Short-listing
- Interview
- Appointment
- Consultant posts
- Non-Consultant posts
- On-boarded for subsequent appointment
- Learning lessons for on-going national recruitment

# S RTP Programme update: International Recruitment

- Lessons Learned

- National processes worked:

- Advertising
- Selection
- Appointment
- Matching candidates to jobs

- Recruitment from overseas outside of the EU difficult due to employment constraints

- Processes potentially usable on an ongoing basis from within the UK



# S RTP Programme update: Workforce Planning

- Workforce modelling tool developed
  - Collaborating with Scottish Government Workforce Planning colleagues
- Uses a demand-led model
- Enables scenario planning

CONSULTANT RADIOLOGIST (CR) REPORTING TIME AVAILABLE			
		RCR GUIDELINE	MODELLED AVAILABILITY
	TOTAL WORKING TIME	50%	40%
HOURS	1607	804	643
SESSIONS	402	201	161
% TIME ADDITIONAL CONSULTANTS SPEND REPORTING			80%

CATEGORY ITY/ HR)		MODALITY		MODELLING SECTION			
				MODELLED INC/DEC IN ATTENDANCES		MODELLED TOTAL DEMAND	
		%+-		HOURS (CR)	SESSIONS (CR)		
		1%	2751306	344285	86071		
hour)	Plain Film/ Mobiles/Theatre	0%	1832423	76351	19088		
hour)	CT simple (50% of CT total)	4%	225561	56390	14098		
hour)	CT complex (50% of CT total)	4%	225561	93984	23496		
hour)	MRI simple (50% of MRI total)	4%	109757	27439	6860		
hour)	MRI complex (50% of MRI total)	4%	109757	45732	11433		
hour)	Fluoroscopy	0%	64590	21530	5383		
hour)	Mammography	0%	63919	10653	2663		
hour)	Symptomatic Mammography	0%	7489	1248	312		
hour)	Nuclear Medicine	0%	50227	8371	2093		
hour)	DEXA	0%	32564	1357	339		
hour)	Dental	0%	29448	1227	307		
hour)	Foreign Films	0%	9	2	1		
TOTAL ATTENDANCES							

CURRENT SITUATION			
BASELINE DEMAND (BASED ON JOB TEMPLATE CATEGORIES)			
IE	REPORTS/ HR (CR)	HOURS (CR)	SESSIONS CR)
	8.1	335687	83922

# S RTP Programme update: Clinical Decision Support



“We will expand use of knowledge mobilisation and decision support tools and services to support frontline practice, self-management and shared decision-making.”

**Digital Health and Care Strategy**

“Realising knowledge for a realistic era”  
**Practising Realistic Medicine**



Decision support encourages:  
“Right test for the right patient”



# Programme update: Employment Frameworks

- Radiologist Consultant Job Design Best Practice
- National Reporting Radiographer framework



# Programme update: Home workstation pilot

- Evidence to support deployment of new workstations
  - Short small scale test
  - Governance
  - IT
  - Benefit vs. Cost ?



# The New Model for Radiology

# S RTP Future Look

- Objective: To develop the next business case for the future of Radiology beyond this programme
- Story so far:
  - SCIN Strategy Day November 2017
  - Visioning Workshop March 2018 Stirling
  - SRTP Conference June 2018
  - Local Board & Regional Engagement
  - Executive Group Meetings
  - “Art of the Possible” from the across the UK



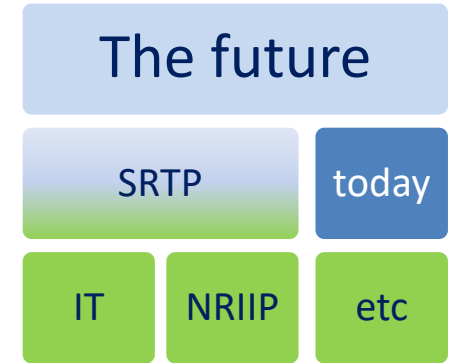
# **SRTTP** ● **The New Model for Radiology**

**“A world leading, user focussed service that continually improves the health and wellbeing of the people of Scotland”**



# S RTP The New Model for Radiology

- Transformation of Radiology was accepted as a 10 year, multi-phase process
  - SRTP has delivered building blocks
  - Future phases will be needed to realise the benefits
- Opportunity to review and revalidate those benefits and strategic aims





# Validating future concepts: Benefits

- Benefit themes needed to drive future change:
  - Improved waiting time performance
  - Improved resilience of Radiology in Scotland
  - Sustainable staffing model
  - Avoidance of unnecessary costs
  - Reduction in clinical risk

## Rationale

Current service is unsustainable

## The Vision

### A collegiate solution

Ability for radiology staff to work across Scotland

Maximising role utilisation, and flexibility to work across traditional Health Board boundaries

Agreed nationally accepted:

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Integrated, compatible IT Systems supporting:

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- Reducing adverse / unwanted variation

## Objectives

Maintain local image acquisition

Local accessibility to expert radiology opinion

Equity of access

Local Sustainability of service

Increased resilience of Service

✓ - S RTP complete  
⊙ - S RTP target  
✗ - future

## Benefits

- ✓ Cross boundary reporting
- ✗ Improved waiting time performance
- ⊙ Co-ordinated approach to out of hours
- ⊙ Support for remote and rural boards in hours reporting
- ✗ National approach to radiology reporting
- ⊙ More effective use of the workforce
- ✓ Ability to identify demand, capacity and equipment
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- ✓ Achieving the recognised standard for radiology reporting
- ✗ Improved quality of service planning by availability of comparable data
- ⊙ Flexibility to adapt to emerging clinical service change
- ✓ Increased throughput and quality due to de-coupling of scheduled/unscheduled reporting of images
- ✓ Sustain image acquisition close to patient
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## National Model for Diagnostic Radiology

### Constraints/Dependencies/Risks

#### Constraints/Dependencies

- Agreed data sets
- Agreed data definitions
- National RIS functionality (requesting and reporting)
- Ability to report cross boundary
- Production of nationally agreed:
  - HR policy
  - clinical governance model
  - QA model
  - Integrated, compatible IT systems
  - patient pathways/protocols

#### Risks

- Unsustainable radiology services
- Mismatch between demand and capacity
- Inability to meet waiting times
- Increased costs of private sector for reporting
- Recruitment, retention issues
- Delayed diagnosis leading to poor patient outcomes

### Costs

Re-procurement of PACS

- circa £20m
- capital and revenue without SS changes

Additional PACS functionality to support RIS reporting only

- circa £2.5m

Datamart to enable service planning

- Circa £250,000

NSS Support Costs

- Programme Team
- SME

Design of QA, HR & clinical governance models (costs to be established)

# S RTP Trajectory of benefit delivery

improved resilience of Radiology in Scotland



Sustainable staffing model



reduction in clinical risk



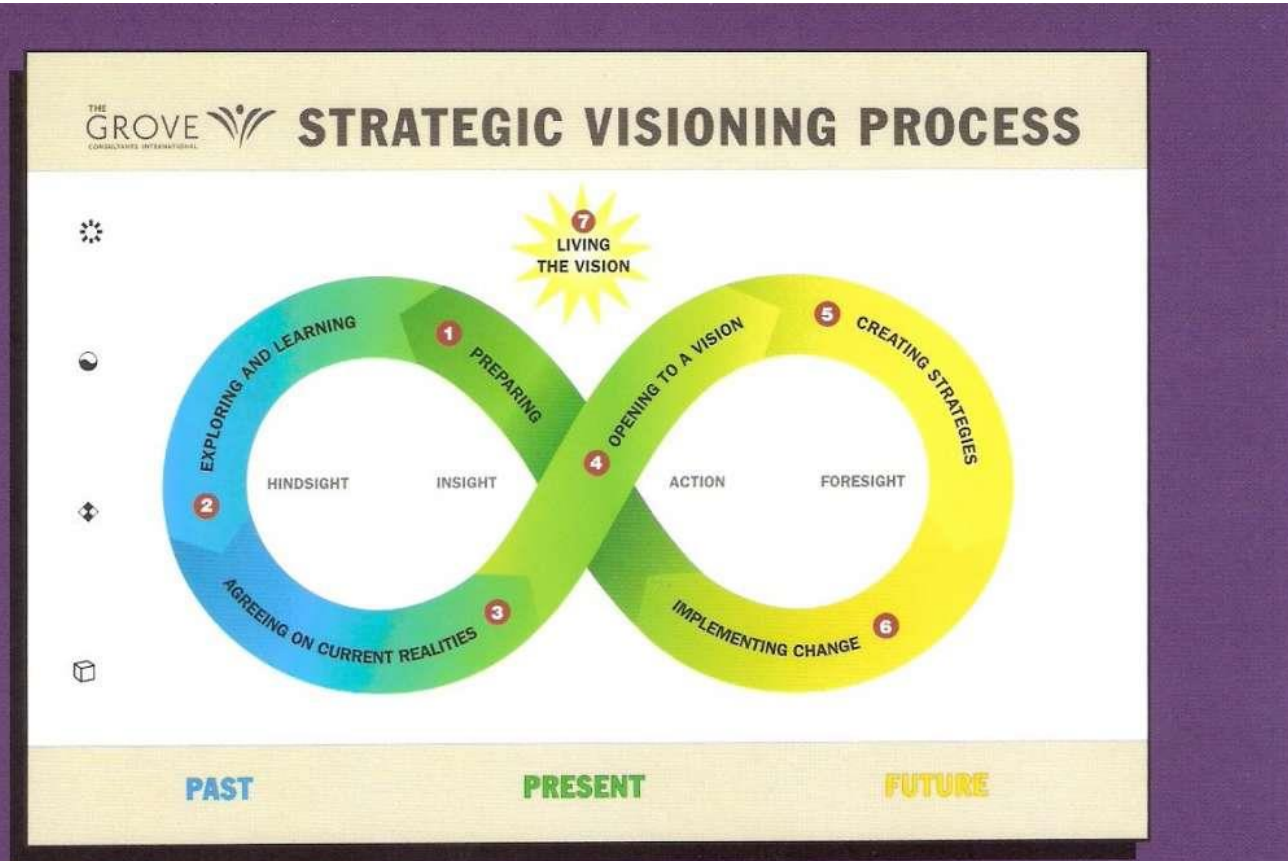
improved waiting time performance

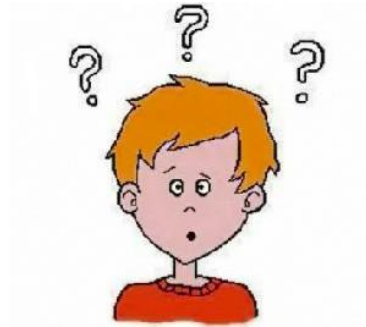
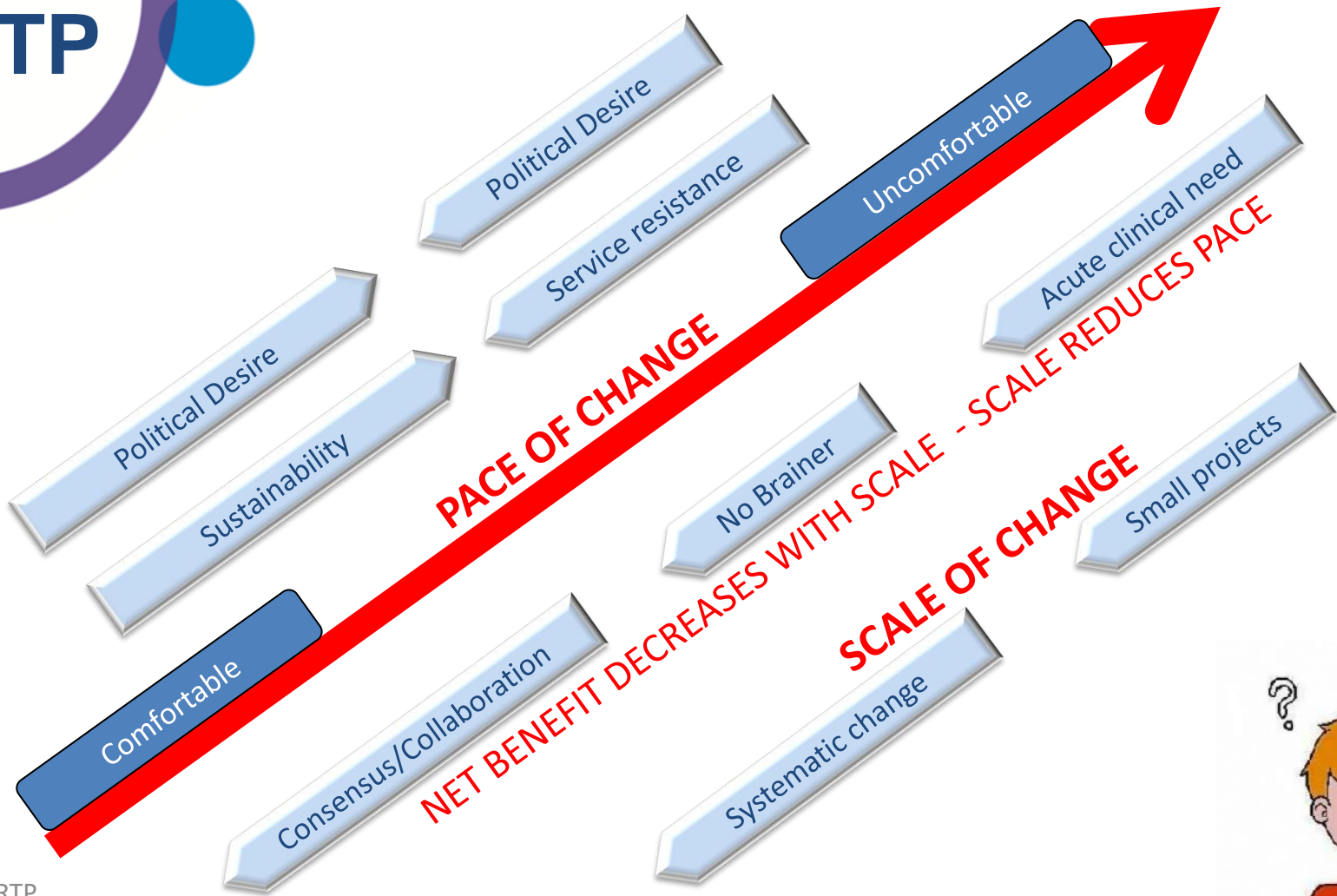


reduction in avoidable costs



# S RTP Developing a future strategy







# Comfort break & coffee

15 minutes



# Clinical Decision Support (CDS)

Presentation and Demonstration



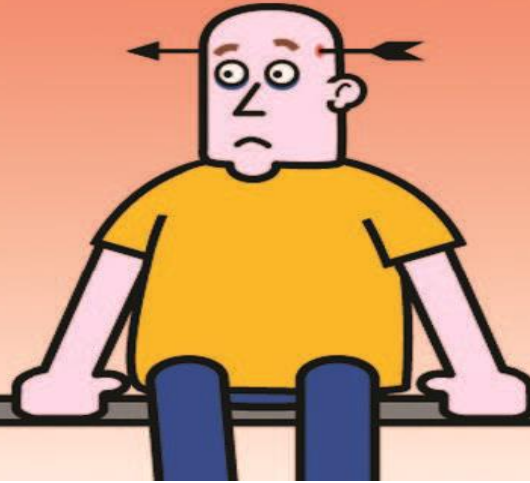
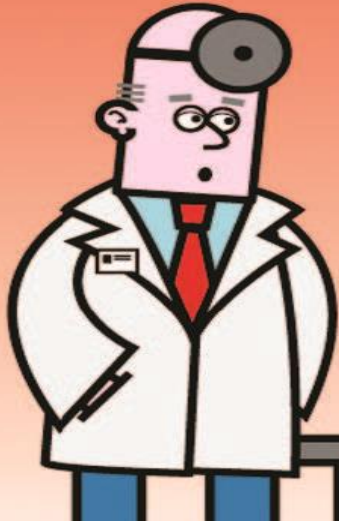


# **Clinical Decision Support (CDS) Project**

**Dr Raj Burgul, Consultant Radiologist & Chair of  
CDS Steering Group**

A large, dark blue, wavy graphic element that spans the width of the slide, starting from the bottom left and curving upwards towards the right side.

OFF HAND, I'D SAY YOU'RE SUFFERING FROM AN ARROW THROUGH YOUR HEAD, BUT JUST TO PLAY IT SAFE, I'M ORDERING A BUNCH OF TESTS.





## Aims of pilot

Assess the ability of the software to optimise demand and to increase the appropriateness of referral requests.

Establish the role such software could play in modifying individual referrer behaviour and analysing referral patterns on a macro level.

Investigate deployment of more complex interactive clinical guidance algorithms.



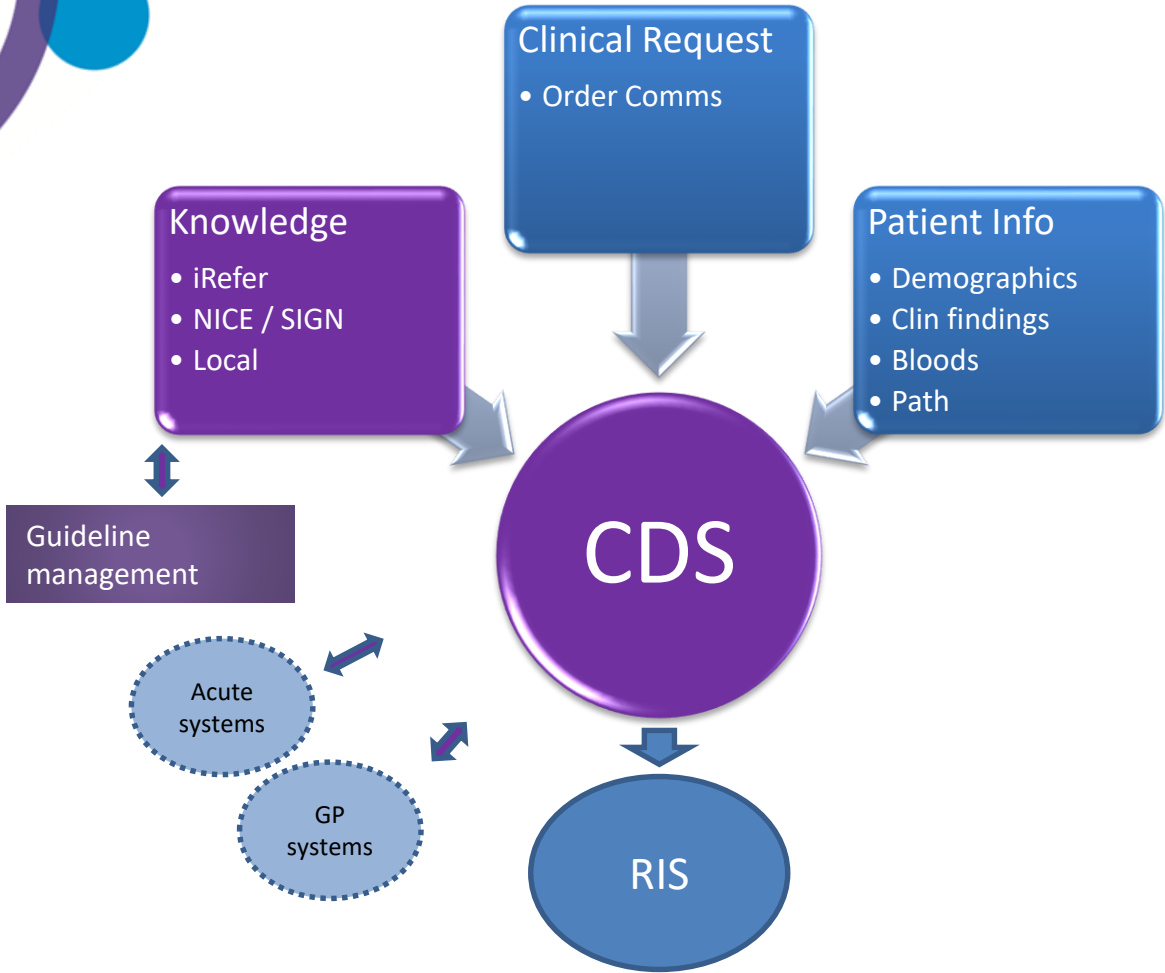
# CDS Project Update

- Collaboration with Scottish Government.
- Project Governance and CDS Steering Group established.
- Cambio agreed supplier – prototype developed.
- Business Specifications developed.
- Integration discussions with InterSystems and CliniSys.



## CDS Pilot Sites & Integration

- We are working with Cambio, 3<sup>rd</sup> party order comms suppliers and local sites (NHS Greater Glasgow & Clyde, Ayrshire & Arran, NHS Tayside) to understand where integration is technically possible and viable to run the pilot.



# Where are we going?

Proposing future projects for transforming Radiology

# S RTP

## Where are we going? Breakout Session 1

- Draft blueprint in your delegate packs
- Illustrates the “future state” for Radiology
- A number of proposed projects to deliver the future state identified



# SRTTP

## Where are we going? Breakout Session 1

- Draft set of projects on your tables
  - Identify benefits, challenges, timescales
  - Are we missing any projects?
  - Pick your preferred project(s)
- Facilitator at each table
  - Capturing comments, queries and suggestions on the poster
- Jim and Hamish to feedback to the room



# Where are we going?

## Breakout Session 1

Name of Project	Deliverables	Name of Project	Deliverables
Reporting Bank	Employment and payment model for national cross-boundary reporting outside of contracted sessions, as an alternative to outsourcing	Reporting Service	Organised reporting; e.g. reporting in date order / urgency at a national level
Out of Hours Reporting Service	On call work – reporting images captured out of hours needing reports before the morning at a national level	Radiology Information & Intelligence Service	Support, management and wraparound service for the data platform
National Recruitment & Matching	Using learning from international recruitment programme to recruit on an ongoing basis for NHSS from the UK as well as internationally. Matching consultants to vacancies as they arise.	Sharing Service	Management of workflow through the IT platform – currently only funded to 2020
National Clinical Decision Support Software	National solution for a Clinical Decision Support model, inc. software and referrer education.	National Reporting IT Platform	Soliton contract – what should happen at end of funding
National Vetting IT Platform	Important for specialty networks – vetting done somewhere other than image capture site	PACS Reprourement	Timed to link to Share+ contract dates. Could include national RIS.
Consultant Radiologist Job Design / Best Practice	Implement CR best practice across Scotland.	Advanced Practice	Collaborative approach to learning & development. Combined multi-disciplinary training approach.



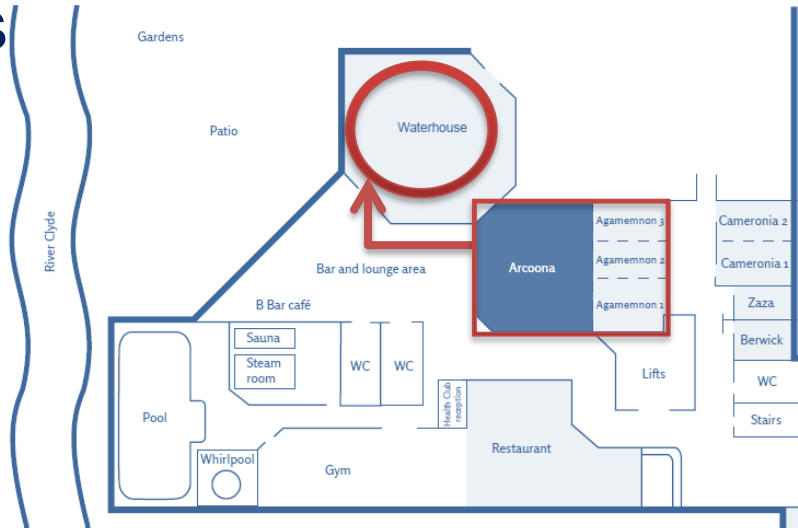
# Q & A

Slido.com #SRTP  
hand in written questions



# Lunch

60 minutes



# S RTP

## 4 nations – feedback Northern Ireland

- Establishing Imaging Board
  - Review
  - Strategic Framework for Imaging Services
  - Imaging Board
    - Strategic Planning
    - Workforce Planning / recruitment
    - Infrastructure
    - Separate from operational delivery

# S RTP

## 4 nations – feedback England

- National Imaging Optimisation Programme Delivery Board
  - Target Operating Model
  - Oversee implementation
  - Advice, input to reviews, modelling, KPI's, share best practise
  - Reports into NHS England / NHS Improvement

# S RTP

## 4 nations – feedback Wales

- Imaging Taskforce - Ministerial statement of intent
- National Imaging Network Strategy Board
  - “Delegated Authority within defined parameters”
- 8 Key areas
  - Public Involvement & Engagement
  - Equipment
  - Services
  - Research & Innovation
  - Workforce Development
  - Quality
  - Informatics & Information ( Inc. Performance)
  - Governance
- Initial focus – Establish “network” & Imaging Academy

## How will we get there?

Who / How

The Options available





# How will we get there?

## Breakout Session 2

- How could the prioritised sets of projects be delivered?
- Who could plan the projects?
- Who could implement the projects?
- Who could own the project outputs?
- Who could fund the projects?



# How will we get there? Breakout Session 2

- Prioritised projects from Breakout Session 1
- Facilitator at each table to capture comments, queries and suggestions
- Jim and Hamish to feedback to the room



# How will we get there? Breakout Session 2

- What mechanism will we use to achieve transformation?
- Suggestions on a postcard....
  - Who?
  - How?

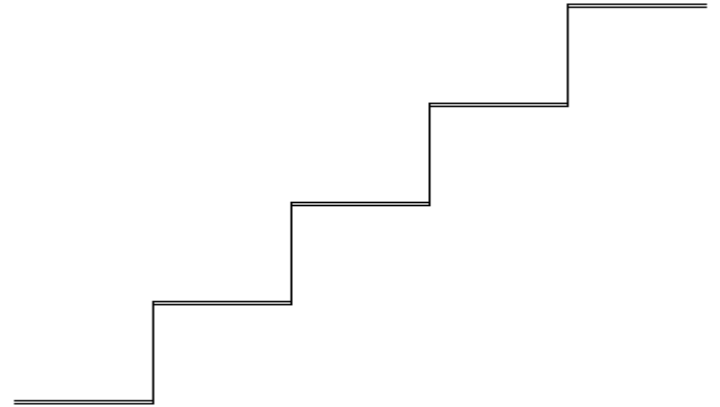


# Comfort break & coffee

10 minutes



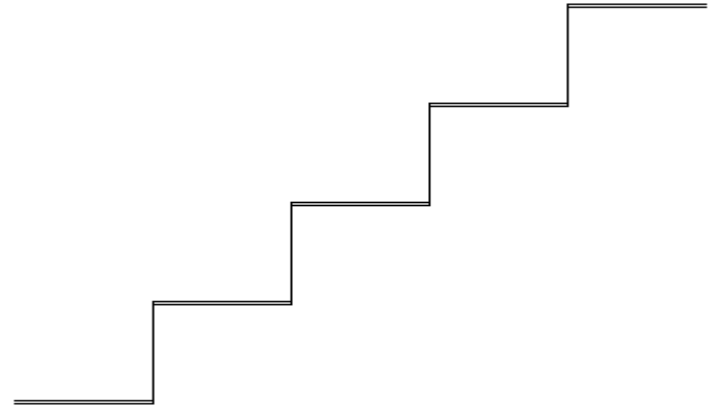
# Next steps



# S RTP

## Next Steps Reference group

- To support Business Case Development
- Reports to NCBOG
  - Aims
    - Scoping of projects
    - Validating benefits
    - Determining cost, effort, risks





# Next Steps Business Case Development





# Q & A

Slido.com #SRTP

All questions recorded and will be taken away





**Thank you**

**NSS.S.R.T.P@nhs.net**

**A feedback questionnaire will be sent to delegates**