

**HEALTH AND  
WELLBEING  
2026**

**DELIVERING TOGETHER**

## **CONSULTATION RESPONSE QUESTIONNAIRE**

# **Consultation on Criteria for Reconfiguring Health and Social Care Services**



Department of  
**Health**

An Roinn Sláinte

Mánnystrie O Poustie

[www.health-ni.gov.uk](http://www.health-ni.gov.uk)

## CONSULTATION RESPONSE QUESTIONNAIRE

### RESPONDING TO THE CONSULTATION

You can respond to the consultation document by e-mail, letter or fax using this questionnaire. The questions in the Questionnaire Response Form may help you in providing your views on the Criteria, but are not intended to limit your comments.

If this document is not in a format that suits your needs, please contact us and we can discuss alternative arrangements.

Before you submit your response, please read Annex A about the effect of the Freedom of Information Act 2000 on the confidentiality of responses to public consultation exercises.

Responses should be sent to:

E-mail: [Reconfig.criteria@health-ni.gov.uk](mailto:Reconfig.criteria@health-ni.gov.uk)

Written: Reconfiguration Criteria Consultation

Department of Health

Room C3.6

Castle Buildings

Stormont Estates

Belfast, BT4 3SQ

Tel: (028) 905 20020

Fax: (028) 905 22335

**The closing date for responses is 20 January 2017**



**Views are sought on Criterion 1:**

**Criterion 1**

- There is evidence that the outcomes for patients using these services are below acceptable levels either in the services as a whole or in particular hospitals, or where there are safety concerns.

**Question 1. Do you agree with Criterion 1 as an appropriate factor to assess the sustainability of health and social care services?**

Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal.**

Outcome issues in radiology are essentially related to the increasing clinical demand, resource / equipment provision and available manpower.

**If 'yes' please feel free to comment further below.**

**Views are sought on Criterion 2:**

**Criterion 2**

- There is a clear clinical pathway for the patient population. Co-created with patient groups.

**Question 2. Do you agree with Criterion 2 as an appropriate factor to assess the sustainability of health and social care services?**

Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal.**

**If 'yes' please feel free to comment further below.**

Clear imaging and therapeutic pathways are established. These are evidence-based and set against national and international standards for best practice.

Patient groups play an important role, especially in clinical oncology.

**Views are sought on Criterion 3:**

**Criterion 3**

- The service cannot meet professional standards or minimum volumes of activity needed to maintain expertise.

**Question 3. Do you agree with Criterion 3 as an appropriate factor to assess the sustainability of health and social care services?**

Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal.**

**If 'yes' please feel free to comment further below.**

The service does meet professional standards generally, but there is an asymmetry between the clinical demand for imaging services and the resource and workforce available.

A particular concern is the perceived diminution in expertise in specialist areas, as the existing workforce is directed at undifferentiated emergency and non-scheduled activities.

**Views are sought on Criterion 4:**

**Criterion 4**

- The permanent workforce required to safely and sustainably deliver the service is not available/cannot be recruited or retained, or can only be secured with high levels of expensive agency/locum staff.

**Question 4. Do you agree with Criterion 4 as an appropriate factor to assess the sustainability of health and social care services?**

Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal.**

**If 'yes' please feel free to comment further below.**

There are currently 44 unfilled consultant diagnostic radiology posts within the NI hospitals. There is also a UK wide deficit, with significant numbers of permanent radiology posts remaining vacant (41% consultant radiology posts vacant for over a year).

Projections for required workforce numbers have repeatedly been demonstrated to be incorrect. These projections were designed to meet historical activity levels, so are continuing to fall further short in real terms. Activity in CT imaging, for example, is rising by 12% per annum. <sup>1</sup>A substantial increase in trainee numbers is required to address the current and future projections.

---

<sup>1</sup> The Royal College of Radiologists (2016) *Clinical Radiology UK workforce 2015 census report*. London: The Royal College of Radiologists

The Belfast Trust has been identified as a particular issue, with newly qualified NI consultant radiologists opting for employment in other NI Trusts. This migration places further strain on the Belfast Trust workforce.

(See also criterion 7)



**Views are sought on Criterion 5:**

**Criterion 5**

- The training of Junior Doctors cannot be provided to acceptable levels.

**Question 5. Do you agree with Criterion 5 as an appropriate factor to assess the sustainability of health and social care services?**

Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal**

Training of radiology registrars is based on summative and formative metric pathways. Examinations (summative) and environmental hospital (formative) evaluations are nationally based, evidence-based and strictly regulated.

However, the small numbers of trainers (consultants) available are problematic and much of their working week is directed to providing a consultant led service. As described in other criteria, rising clinical demand results in their activities being directed to patient throughput. Teaching trainees reduces workflow by at least 25% and this has consequences for patient throughput.

**If 'yes' please feel free to comment further below.**

**Views are sought on Criterion 6:**

**Criterion 6**

- There is an effective alternative 'out of hospital' care model or an alternative 'shared care' delivery model.

**Question 6. Do you agree with Criterion 6 as an appropriate factor to assess the sustainability of health and social care services?**

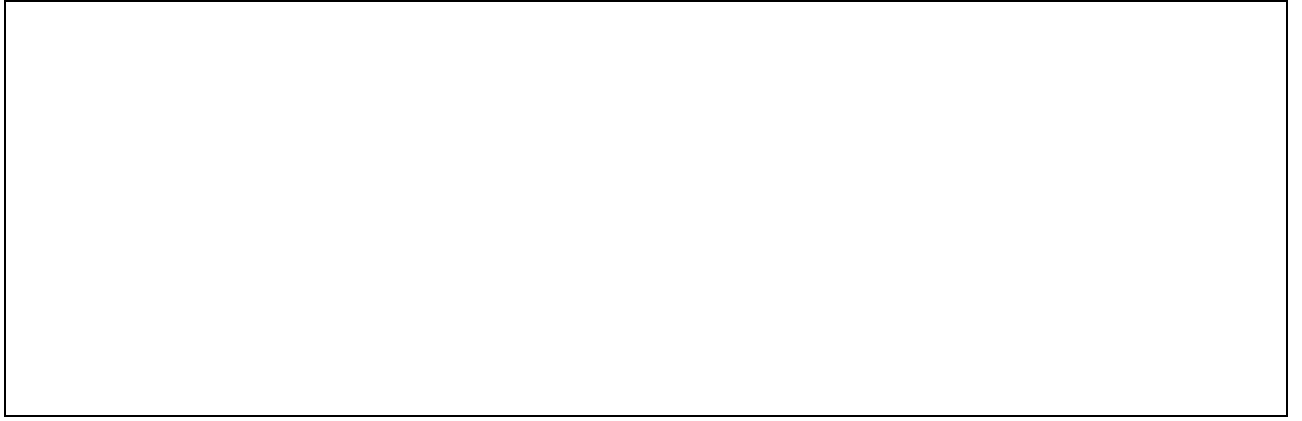
Yes  No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal**

Radiology and imaging services are historically located within dedicated institutions, typically hospitals. This allows the most efficient use of expensive imaging equipment, trained radiographers who work the equipment, and specialist radiologist doctors who interpret and report the imaging examinations and perform interventional radiological procedures on patients (such as treating bleeding and cancers under imaging guidance). The location of radiology and imaging services in hospitals also easily integrates imaging into the whole clinical patient pathway, which is essential for good patient care.

However, the creation of stand-alone imaging centres with focused, direct access for primary care physicians, would dramatically speed up simple diagnostic imaging, and reduce the numbers of patients who required access to more costly secondary and tertiary specialist institutions. This in turn would improve throughput in these institutions. This model will only work if there is total, seamless and bidirectional IT integration of all the equipment in these stand alone imaging centres (scanners, x-ray machines, radiological information systems, picture archiving and communications systems and the electronic patient record) with the IT reporting systems and digital image study archives found in the secondary centres (hospitals).

**If 'yes' please feel free to comment further below.**



**Views are sought on Criterion 7:**

**Criterion 7**

- The delivery of the service is costing significantly more than that of peers or of alternative 'out of hospital' alternatives due to a combination of the above factors.

**Question 7. Do you agree with Criterion 7 as an appropriate factor to assess the sustainability of health and social care services?**

Yes

No

**If 'no' please feel free to comment below, providing evidence to support any alternative proposal**

**If 'yes' please feel free to comment further below.**

Shortfall in resources and manpower in imaging has been addressed by:

1. The outsourcing of waiting list initiatives to private teleradiology companies
2. Employment of locum consultants

Both these initiatives are expensive and non-sustainable. Locum remuneration is set at a level significantly higher than that of substantive consultant posts. Outsourcing of studies, although functional, is also expensive for the tax payer, and because commercial efficiency and throughput is a consideration, some specialist examinations (e.g. trauma, complex oncology) are declined by such companies. This phenomenon has been called 'picking the low hanging fruit.'

The only safe and sustainable solution is a revised workforce plan for future demand with considerable expansion of trainee and consultant numbers.

**Please use the text box below for any additional comments you wish to provide regarding the proposed Criteria as appropriate factors to assess the sustainability of health and social care services.**

My responses to the criteria given are based on Imaging and Radiology Services. They are, to the best of my knowledge, true and factually correct.

**Dr Barry Kelly**  
January 2017

## EQUALITY OF OPPORTUNITY QUESTIONS

The Department aims to advance equality of opportunity for a range of groups in respect of the proposed criteria for assessing the reconfiguration of Health and Social Care services. Under Section 75 of the NI Act 1998; nine groups of people are identified and consideration of their different needs is important. These groups are:

1. Age (older and younger people);
2. Gender (including transgender and men and women generally);
3. Marital Status (including Civil Partnership);
4. Religion;
5. Ethnicity;
6. Political Opinion;
7. Dependant Status;
8. Disability; and
9. Sexual Orientation.

**Question 8. Based on belonging to any of the Section 75 groups, do you have any particular requirements with regard to the proposals?**

Yes  No

Comments:

**Question 9. Generally, do you think there are any particular requirements for any of the Section 75 groups? If so, what would you consider as a potential solution?**

Yes  No

Comments:

The Department will publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be disclosed on request. The Department can only refuse to disclose information in exceptional circumstances.

**Before** you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The Freedom of Information Act gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances. The Lord Chancellor's Code of Practice on the Freedom of Information Act provides that:

- The Department should only accept information from third parties in confidence if it is necessary to obtain that information in connection with the exercise of any of the Department's functions and it would not otherwise be provided;
- The Department should not agree to hold information received from third parties "in confidence" which is not confidential in nature;
- Acceptance by the Department of confidentiality provisions must be for good reasons, capable of being justified to the Information Commissioner.

For further information about confidentiality of responses please contact the Information Commissioner's Office (or see their website at: [www.ico.org.uk](http://www.ico.org.uk))