Quality Improvement:  
GI Radiology Services at Portsmouth Hospitals NHS Trust

Background
High demand for GI Radiology services within the trust but feedback from the GI Consultant Radiologists highlighted that there were quality issues within the department across all modalities. When looking at what the specific issues were through audit and feedback from referrers the following issues were highlighted:
• Cancellation Rates
• High imaging recall rates
• Inappropriate examination booking
• High post procedure complications

Results
There has been an overall improvement to the GI Ultrasound lists with requests being assigned to appropriate ultrasound list, and a reduction in inappropriate rescans:

<table>
<thead>
<tr>
<th>% of patients on GI Ultrasound lists who did not require GI US scan</th>
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<tbody>
<tr>
<td>% of scans recalled from 30% to 0%</td>
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<tr>
<td>% of procedure cancellations from up to 17% to 0%</td>
</tr>
<tr>
<td>% of patients requiring repeat attendance from 20% to 0%</td>
</tr>
<tr>
<td>% of patients requiring repeat procedure from 20% to 0%</td>
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Aim
Improve the GI Radiology service that was being provided within our department by reducing the number of GI patients requiring repeat attendance for non-clinical reasons in Portsmouth NHS Trust by January 2017.

Team Actions
To work towards our aim multiple areas for improvement were highlighted after analysing the existing processes.

US actions
- Vetting protocols updated
- Vetting process improved
- US Protocols to be updated
- Develop GI US specialist roles
- MDT feedback
- Regular staff meetings

MR Enterography actions
- Establish protocols
- Protocol optimisation on key platforms
- Staff training sessions
- Implement dedicated lists

Interventional Fluoroscopy actions
- Change requesting process so that patients have a named consultant responsible.
- Patients to have a suitable bed for post procedure care.
- Patient leaflet prior to procedure and aftercare leaflet.
- Create a suitable day case pathway with nursing staff.
- Staff meetings.

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Areas for improvement
- Improved patient care
- Improved image quality
- Improved efficiency of scanning
- Improved efficiency of reporting
- Improved reduction of clinical incidents

Actions
- Staff meetings to highlight and address issues.
- Work with referring departments to improve processes.
- Develop information leaflets for patients to increase compliance with aftercare procedures.

Glossary:
GI= Gastrointestinal
CT= Computed Tomography
MR= Magnetic Resonance
US= Ultrasoundography
PTC= Percutaneous Transhepatic Cholangiography
RIG= Radiologically Inserted Gastronomy
MDT= Multidisciplinary Team

Figure 1. Driver Diagram

Next Steps
Set up regular Quality Improvement meetings within the Radiology Department to carry on working towards our aim.