

SBAR

NHSL AND WEST OF SCOTLAND INTERVENTIONAL RADIOLOGY SERVICE REVIEW UPDATE

SITUATION

NHS Lanarkshire has funding for 5 wte Consultant Interventional Radiologists (IR) who provide a range of in hours and Out of Hours (OOH) services. However due to consultant retirements and a national shortage of IR consultants, NHS Lanarkshire has not had on Out of Hours (OOH) Interventional Radiology Services since March 2019. This remains on the risk register as very high. A draft regional discussion paper was received from the Director West of Scotland Regional Planning on 17th August 2020.

BACKGROUND

Interventional Radiology procedures are minimally invasive, targeted treatments performed under imaging guidance. These procedures are often at the forefront of the management of life threatening emergencies. A wide range of procedures are included extending from repair of ruptured arterial aneurysms to the treatment of cancer and its complications. IR procedures often replace open surgical procedures as they are less invasive, reducing morbidity and mortality allowing more rapid patient recovery and hospital discharge.

Interventional Radiologists are Clinical Radiologists who have undergone specialist training in the practical elements of IR. They work as part of a team with specialist nurses and radiographers who are familiar with the equipment and devices required for IR to ensure procedures are undertaken safely.

IR encompasses a wide range of procedures which range from frequent urgent procedures to rare complex interventions.

Interventional Radiology Service provision within the West of Scotland was been identified as a key area for review. There are significant ongoing challenges facing the Interventional Radiology (IR) Service as services are currently configured in providing comprehensive emergency and elective interventional radiology care across the region and indeed across Scotland. This predominantly relates to the challenges of delivering a 24 hour service serving each of the acute sites, against a background of difficulties in the recruitment and the retention of trained IR staff. It also recognises the importance of considering the clinical configurations of services to ensure the IR Service works most effectively with services it is critical in supporting.

A group was established within the West of Scotland to develop a plan to deliver a modern, fit for purpose model for IR Service across the West of Scotland which addresses the challenges faced by the service; sets out a way forward that will deliver a more stable and sustainable IR Service which will meet the needs of the population served and will create a more attractive service model from which to build the future

service; improving recruitment and retention to the service. This work builds on work undertaken nationally by SCIN in 2016 and in 2019.

ASSESSMENT

Each of the Boards across the region has varying levels of interventional radiology support in place. Most have some level of day time service provision however provision of and access to out of hours interventional radiology is an ongoing challenge for a number of the health boards in the West of Scotland. There is currently only one Board, NHS Greater Glasgow and Clyde, operating on call service in the West of Scotland. Until recently, there was a second on call service available in NHS Lanarkshire for restricted hours, but due to a combination of reasons this has ceased to exist.

There are several issues and risks with the current situation which need to be addressed:

- Inequitable access to interventional radiology services across the West of Scotland.
- Complete variability in practice out of hours ranging from phoning around to find an appropriate consultant to perform procedures, exploring surgical alternatives and often calling the OOH service in GGC.
- Failure to provide 24 hour access may result in delays in patient intervention/ treatment, suboptimal treatment and possible patient morbidity / mortality
- The above is less than ideal for the patients and frequently puts a lot of pressure on the OOH service in GGC. This service is not currently resourced for taking on any extra workload, nor are there safe and effective arrangements in place with specialties for inpatient management within the Queen Elizabeth Hospital of patients transferred for interventional procedures.
- Secondary issues as a result include:
 - Recruitment and retention issues in interventional radiology with unsustainable models in many of the Boards within the region
 - Potential to impact on the diagnostic services if also contributing to the diagnostic rotas in some of the hospitals
 - Growing morale issues both among the cohort of IRs providing the OOH services and the cohort unable to support the OOH service.

RECOMMENDATION

To create a robust Interventional Radiology Services for the patients in the West of Scotland all stakeholder Health Boards need to be involved:

- Greater Glasgow & Clyde NHS
- Lanarkshire NHS
- Forth Valley NHS
- Ayrshire & Arran NHS
- Dumfries and Galloway NHS

The Regional Director has produced a position paper, received on 17th August 2020, which outlines the current position and model options. The next steps to conclude this work are:

1. Share the paper for wider consideration using the comments and feedback to amend and revise the paper, informing the way forward.

2. To review activity and adjust, in particular to assess the impact of the planned vascular changes for NHS Lanarkshire, Ayrshire & Arran and Dumfries & Galloway.
3. To determine the inpatient requirement to support the model.
4. To discuss the implications with Scottish Ambulance Service.
5. To determine the financial model to assign share of funding requirements.
6. To finalise paper and way forward for presentation to Chief Executive Officers.

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