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Radiology service*

# Strategic Imaging Service Review Information Document





# Medical Imaging Partnership Methodology



The MIP Strategic Review aims to provide the host organisation with a “health” check on their current imaging services, but more importantly to provide recommendations that create transformational change to support service improvement and development.

The process is very much led by the brief provided by the host organisation which is articulated through agreed Terms of Reference before any review or consultation.

## Sample Terms of Reference

The review aims to be wide ranging and will be undertaken with the full knowledge and support of the radiological and radiographical team.

The programme will evaluate and comment on the following:

1. Benchmarking of imaging services, where available
2. Review of skill mix and working practices
3. Analysis of the department's capacity to respond to the current and future demands on the service
4. Identification of any shortfalls in relation to demands on the service and resources available to deliver them
5. Identification of aspects of the imaging service, where improvement could lead to delivery of best practice.
6. Evaluate the trust's planned developments and their impact on the Imaging service in terms of infrastructure, staffing, quality and safety.
7. Review the management and leadership structures within the department and how these may be improved to support the aspirations of the service
8. Identify the support provided to Imaging by the division and Trust, and make recommendations how this could better reflect the needs of all.
9. Recommendations for the short and medium term taking in to consideration the Trusts stated aspirations.



The Review team delivers the aims laid out in the Terms of Reference according to the following format:

**Initial Scoping Meeting**

A senior member of the MIP team meets with the host organisation to scope and agree the terms of reference

**Review of Trust Data and Documentation:**

The review team reviews appropriate data and documentation prior to a formal onsite visit to help develop “lines of enquiry” and ensure that appropriate key players are involved in the onsite review. This will include data from Radiology information system, waiting lists, budgets (staff and non-staff), staffing, equipment list and existing contracts. Any previous formal reviews of the department should be made available to inform the review team

**The MIP Review Team**

MIP agree with the host organisation a lead for the Review . The MIP team consists of experienced Radiologists, Radiographers and Radiology Service Managers drawn from its panel of associates . MIP will ensure that the team has the relevant skill to address the agreed Terms of Reference

**The Review Team Visit**

This normally takes place across a 2 day period and consists of orientation to the local imaging service and health economy, interviews with key stakeholders and group staff discussions. During the visit, the review team may wish to attend a number of departmental, clinical and trust meetings, following discussion with the management team to understand the departmental and trust’s view of the imaging services.

As a result of such visits, there may be a need for further data analysis and clarification of information. This is usually carried out by a combination of teleconferencing and emailskype/telephone/email etc.

**Proposed Timetable for the Review**

**Month 1** - Initial Trust and Departmental Meeting: to finalise scope and jointly brief departmental workforce of the reasons and remit for the External Review.

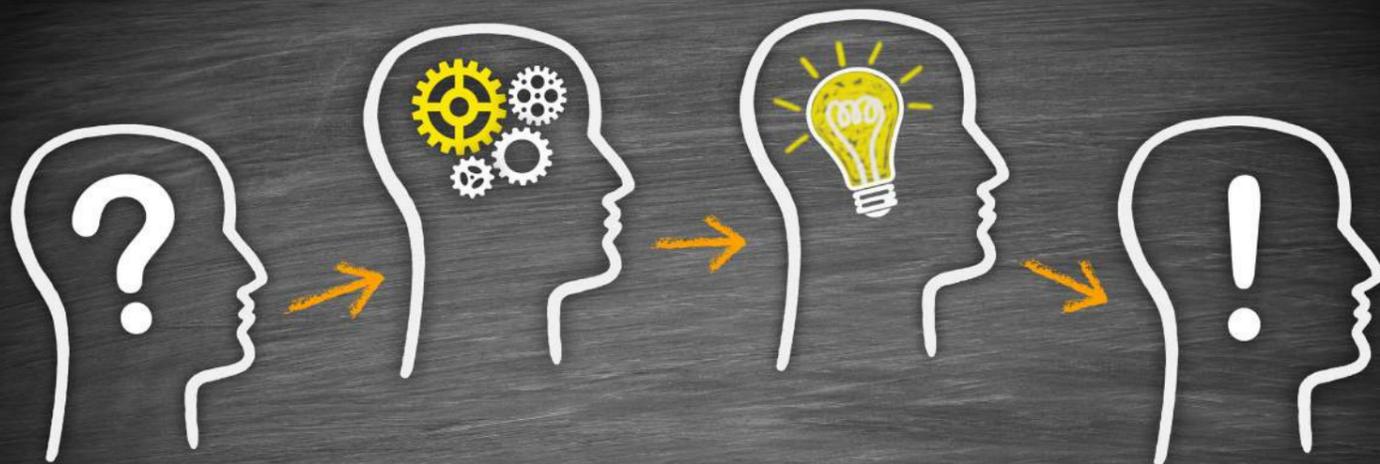
**Month 1-2** – Offsite Data and Documentation Collation, Analysis and Review

**Month 2-3** – Visit, Trust and Departmental meetings

**Month 3** – Presentation and Production of Report with Recommendations



# The Core Review Team



MIP is a privately owned radiology company that has been formed by experienced and forward thinking individuals to provide managed radiology services, professional services direct to radiologists and specialised strategic consulting relating to radiology service provision.

Our approach utilises many years' experience of delivering healthcare in the UK combined with

best practice from around the world. Our business spans across both the NHS and Private markets and embraces both in an environment that is clinically led and focussed on local needs.

The following are members of the core review team. However, MIP has a more extensive pool of individual who can be called upon to provide specific expertise as required.



## **Mr Simon Oates DCR, DMS, MBA**

Simon qualified as a radiographer in 1993 and worked across several management roles in the NHS, before moving into a commercial environment. Simon has extensive commercial experience in creating and running radiology businesses.

As New Business Director for Lodestone Patient Care from 2001 to 2009 Simon was responsible for the creation of several radiology clinics, based around partnerships with Radiologists, together with further MRI facilities (mobile and fixed). Simon led the transfer of the Lodestone new business portfolio to Alliance Medical in late 2008, once completed, Simon left and undertook a full time MBA graduating in 2010. Whilst finalising his MBA Simon created Medical Imaging Partnership. Simon has extensive board level experience both as a director and as a non-executive director and specifically in creating and realising new business opportunities. Simon has an in depth knowledge of radiology equipment and an extensive network throughout the radiology community.

Simon oversaw the team at MIP that successfully gained ISAS accreditation in 2015, enabling MIP to join a small but growing group of organisations who have demonstrated the highest quality service delivery.



## **Dr Peter Cavanagh MA, MB BChir, MRCP, FRCR**

Peter is a clinical radiologist with a major interest in patient safety and quality improvement both at Board level and the front line. He has a strong track record in clinical leadership extending over 20 years, with 10 years as a Medical Director of a successful acute trust, which he guided through the Foundation Trust process as Acting CEO. As such he has a strong understanding of the Board's responsibility in terms of balancing its responsibilities in quality, efficiency and finance. During this period he led the Taunton & Somerset Hospital's participation in the Safer Patients Initiative led by the IHI. Taunton was acknowledged as the leading hospital on this programme as evidenced by hospital mortality, infection rates, reduced harm in theatres, intensive care and ward care, maintaining a Hospital Standardised Mortality in the 70s, reducing MRSA and Clostridium difficile infection levels by 60%.

He went on to lead the Leadership faculty in the Patient Safety First campaign and as associate Medical Director to NHS South West was Medical Advisor to the South West Quality and Safety Improvement Programme, which delivered a collaborative safety improvement programme across the acute, community and mental Health Care trusts of NHS South West. As such he designed and led a Peer review assessment process across the region. More recently he is an invited Chair of a CQC Acute Hospital inspection process. He has taught extensively on leadership and Quality improvement and has used these skills as deputy Chair of the National Imaging Board and more recently Vice President of the Royal College of Radiologists.

He is a trained Coach and Mentor having coached individuals at Board level with a specific interest in team coaching.



**Dr Nicholas Spencer MBChB, MRCP(UK), FRCR**

Nick is an experienced NHS clinical leader, both at service level, and in a more strategic capacity as Trust Lead Cancer Clinician. As clinical director, he led a number of service innovations, and was clinical lead for design and commissioning of new radiology departments in a large multisite NHS Trust. With experience of Service Review through the Royal College of Radiologists, he also been responsible for development and delivery of robust clinical governance standards within independent sector radiology businesses. These roles have helped develop his understanding of many of the competing pressures faced in NHS radiology services, and of the tools which can support improvement.

Nick is a strong advocate of extended scope practice for radiographers, he has supported and mentored many colleagues' development into to a wide range of AHP advanced practice and consultant roles.

Nick is currently an elected member of the Radiology Faculty Board at the Royal College of Radiologists, and has recently completed writing a review on CT Equipment and Utilisation in the NHS, chairing the Working group on behalf of the Clinical Imaging Board.

**Dr Jonathan Richenberg MA MRCP FRCR Hon Sen Lect**

Jonathan is a clinical and academic radiologist who promotes high quality practice through his involvement in developing national and international expert guidelines. He has been involved with NICE guidance development and NICE Quality Standards Advisory Committee. Further contributions to national uptake of best practice include work for the Royal College of Radiologists [Making Best Use of the Department of Radiology 6th, 7th and 8th editions] and as part of the College's service review team.

As clinical lead for a large teaching hospital radiology department, during a phase of burgeoning demand, he has broadened service provision and responsiveness, introduced new interventional on call rotas and introduced 7 day working.

In his role as Honorary Senior Lecturer to the affiliated medical school, Jonathan appreciates the need for evidence based practice in promoting change and also recognises the benefit of merging clinical radiology with a strong culture of audit and research.



**Dr Ian Francis MA, BDS (Hons), MB BS, FRCS FRCR**

Ian is a clinical radiologist with a major interest in healthcare innovation and transformational change within both the NHS and independent sector at board level and within imaging departments.

He has been a Consultant Radiologist for 13 years at two acute trusts in the South-East of England holding the roles of clinical director and clinical lead for strategy during this period.

In 2009, Ian co-founded Medical Imaging Partnership in order to support radiology departments and radiologists against the challenging backdrop of the evolving NHS. The company has and continues to be involved new models of healthcare in a variety of social enterprise models and partnership frameworks. He has taught extensively on a wide range of educational issues and developments for the RCR. He has been an examiner at the RCR for 8 years and continues to hold the position of national educational development lead from 2008 to the present day.

**Mr Andy Hardy**

“Andy is an experienced radiographer and radiology manager, with significant clinical and managerial experience in the NHS and Private Sectors.

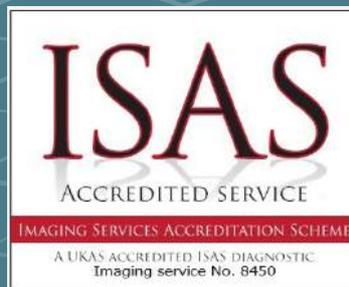
Qualifying in 1995, he joined Lodestone in 2002, training in MRI at Wakefield and York. Progressing to MRI Manager and Regional Manager, he managed 9 MRI centres partnered with Trusts and Radiology Services at Eccleshill NHS Treatment Centre, Bradford, developing the business and key collaborative relationships with the local PCT and Trust Radiologists.

Retaining clinical experience in MRI and CT, Andy supported an NHS Trust MRI service through a PFI programme, planning to integrate 3 separate service providers into a single Trust service within a new hospital site. In 2014, as Radiology Service Manager, he led a team in an acute Trust, planning 7 day services in line with the Keogh Report requirements.

With MIP, he undertakes clinical duties in MRI whilst being responsible for delivering clinician led imaging services alongside private and NHS partners. He has a long term interest in Clinical Governance and Audit and sits on MIP's Clinical Governance Board and was part of the team that successfully gained ISAS accreditation in 2015.”



**MEDICAL IMAGING**  
PARTNERSHIP



Get in touch with us

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