



Scottish Clinical Imaging Network
QUALITY STRATEGY (2023-2026)

Document control

A Quality Strategy is a document, which changes and develops as the project progresses. It is recommended that a system of document control be used to keep track of previous versions.

NSD suggests integrating the roles of approval, version control and a distribution list within the first page of the Quality Strategy to ensure confidentiality and consistency. Final sign off will go through the Steering Group.

Key personnel

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Version history

Version	Date of revision	Summary of changes	Changes marked
D0.1	November 2023	Initial draft	
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Distribution

Name	Organisations	Date
SCIN Steering Group	NSS NHS Health Boards	November 2023

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1. Introduction

National Managed Clinical and Diagnostic Networks (NMCNs and NMDNs) are recognised vehicles for improving the quality of the services they support.

The key responsibility of networks in delivering quality improvement is clearly articulated in the most recent published guidance, CEL 2012 (29), which states, “The role of MCNs in improving the quality and efficiency of services across complex whole systems has become even more important in the current financial climate. MCNs achieve their results through consensus and collaboration, by enabling clinicians, patients and service managers to work together across boundaries to deliver safe, effective and person-centred care.... MCNs are integral to achieving the three Quality Ambitions. They epitomise the ethos of co-operation and collaboration that distinguishes the whole of NHSScotland.”¹

Scottish Government’s core principles of managed networks identifies the requirement for:-

- Continuous quality improvement, articulated through an annual workplan to demonstrate intended improvements year on year, quantified from the perspective of the service user
- Expansion of the evidence base through continuous quality improvement and ongoing audit

Diagnostics, whether primary care, community or secondary care delivered, have an important role to play in supporting much of the quality strategy and its ambitions by contributing to early, accurate and cost effective diagnosis, monitoring and self-management.

This strategy outlines the approach the Scottish Clinical Imaging Network (SCIN) will take to improving quality in Clinical Imaging.

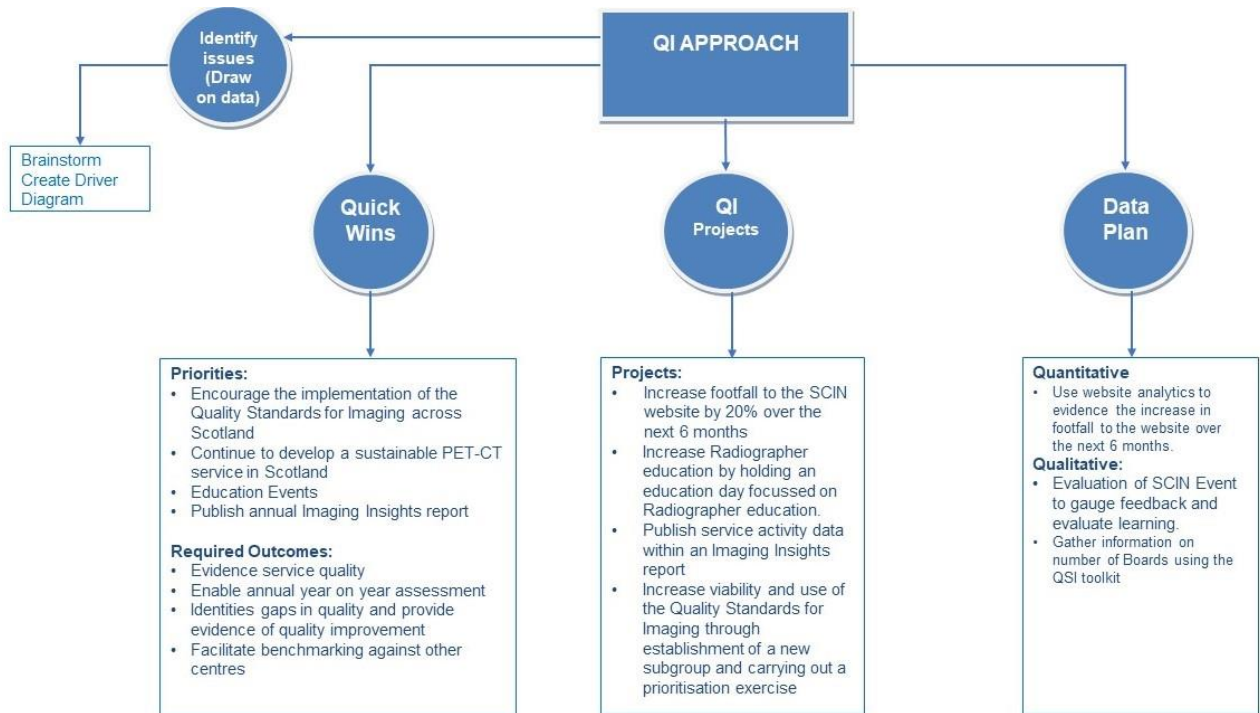
This strategy complements the strategic vision for the network, which can be found at

[Scottish Clinical Imaging Network – National Managed Diagnostic Network](#)

¹ http://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf

2. Network approach

Networks develop five year and annual workplans, based on policy drivers, horizon scanning and identified need for service improvement. From the development of workplans an understanding of the issues to be addressed is developed. How these issues are addressed is contained within this strategy. The network's identified approach to quality improvement can be illustrated as follows:-



3. Network Vision

SCIN aims to influence the provision of an innovative, equitable, patient centred, high quality, clinically effective imaging service in Scotland

Managed Diagnostic Networks are defined as coordinated groups of health professionals that support diagnostic services to continuously improve service delivery, in order to ensure equitable provision of high quality, clinically effective services.

The Scottish Government^{2/3} has identified that diagnostics are central to whole systems service redesign of the NHS in Scotland. Diagnostic Networks drive forward a number of key pieces of national strategic work, including:

- Realistic Medicine in relation to Imaging Services
- National Clinical Strategy
- National Cancer Strategy (Beating Cancer: Ambition and Action-Equality)

During 2017-18, in line with NHS Scotland's national commissioning policy, SCIN underwent its first external review. The purpose of this was to inform a decision on continuing central funding; based on the extent to which SCIN was meeting the needs of its stakeholders, including NHS Scotland's vision for diagnostic services.

This provided the Network with the opportunity to refresh and revitalise its workplan.

The following key areas could be targeted for quality improvement initiatives:

- Further development of the Scottish Imaging Self Assessment Tool. Auditing which Boards were currently using the tool and any lessons learned.
- Finalise dataset for PET-CT services, including development of QPIs and understanding service pressures
- Continued audit of uptake of recommendations in Scottish Imaging Pathway for Primary Care Direct Access to CT of Chest/Abdomen/Pelvis for Patients with Unidentified Malignancy:
- Improving stakeholder engagement across the whole system
- Using data to make quality improvements

² A National Clinical Strategy for Scotland 2016

³ Realistic Medicine Chief Medical Officer's Annual Report 2014-2015

4. Quick Wins

Quick Wins are improvements that have high value to the network but are manageable and inexpensive to implement. The Quick Wins should motivate the network and be communicated to stakeholders about the improvements that are producing results.

The point is to:

- Show results and success quickly and communicate this widely
- Motivate the network by doing something early
- Demonstrate to stakeholders that the network is going to make improvements
- Support the overall improvement targets – the five year workplan
- Choose Quick Wins that will be visible
- Look for Quick Wins that can be easily solved with current resources

5. QI Projects

To be agreed.

6. Data and Measurement Plan

A Data and Measurement plan has been developed to measure progress against the SCIN workplan.

The plan includes process measures (aiming to improve reliability), outcome measures (improving the patient experience) and balancing measures (how improvements in one area may have unintended consequences for another area). (Annexe 1).

Measures include

Quantitative data

- Collection and analysis of PET-CT monthly data returns from the 4 PET-CT sites
- Collection and analysis of PET-CT key Performance Indicators (KPI's)
- Publication of Imaging Insights report
- Implementation of Quality Standards for Imaging

Qualitative data

- Evaluation of SCIN events

The Data and Measurement Plan is available in **Appendix 1**.

Appendix 1: SCIN Data and Measurement Plan

Description	Example of Measure	Current baseline	Suggest target to aim for	Suggested date
1. Quality & Performance reporting	% of PET-CT requests scanned within 14 days	Scotland average = 48% at March 2023	80%	March 2025
2. Quality & Performance reporting	% of other PET-CT scans reported within 3 days	Scotland average = 60% at March 2023	80%	March 2025
7. Stakeholder engagement	Increase number and range of services/organisations engaged with SCIN	Stakeholder Graph for SCIN event	Increase the range of stakeholders represented at SCIN event and attendance by 10%	December 2023
9. Stakeholder engagement	Number of retweets	Average number of retweets per month =	Increase by 20%	March 2025
10. Interaction with website	Number of visits per month	Median visits per month =	Increase interaction with the SCIN website by 10%	March 2025
	Length of time on website	Median length of time per visit		
	Pages viewed per month per visitor	Median pages viewed per month =		
	Number of boards interacting	Increase to all territorial boards		
13. Quality & Performance reporting	% of NHS boards submitting PET-CT data	June 2023 = 100%	Aim for 100%	March 2024
14. Stakeholder engagement	Feedback generated from the SCIN Annual Event		Aim for 60% fulfilled expectations	November 2023
16. Productivity	% of all SCIN meetings agendas and papers within NNMS agreed timescales		Aim for 95%	March 2024
17. Productivity	% of SCIN minutes issued within NNMS agreed timescales		Aim for 95%	March 2024