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**Date:** 29<sup>th</sup> April 2024

**HSE Reference:** NCO-18-2024

### **GP Access to Community Diagnostics – Update on capacity available in 2024**

Dear Colleagues,

Many thanks for your continued support in delivering the GP Access to Community Diagnostics schemes, which give GPs direct access to radiology diagnostics (X-ray, CT, MRI, DXA, US) and diagnostic tests (NT-proBNP, Echocardiography and Spirometry).

Over recent days we have received a range of queries from GPs around the status of the GP Access to Diagnostic scheme for 2024 including commentary arising from recent media coverage. The purpose of this letter is to update you on progress, the activity for 2023 and our plans for 2024.

The GP community including the IMO and the ICGP have acknowledged the scheme has been transformative for General Practice, since its introduction in 2021. It enables GPs to manage more patients in general practice and deliver more care in the community setting, aligning with Sláintecare's objective of delivering the right care at the right time and in the right place.

In 2023, the diagnostic test activity did not come on-stream at the expected level. In response it was possible for the HSE to increase radiology activity, and reduce waiting times, over and above planned levels last year. Overall approximately 515,000 diagnostics were undertaken in 2023 (tests and scans). In 2024, the diagnostic test activity has come on-stream, and we are therefore rebalancing radiology activity to ensure that the appropriate level of diagnostic tests and radiology scans are available in line with the parameters of the scheme. The exceptional level of radiology scans in the scheme in 2023 has meant GPs experienced waiting times shorter than the scheme targets for much of last year. We expect an overall level of activity of around 530,000 diagnostics in 2024 (tests and scans).

In relation to the operation of the scheme in 2024, I wish to reassure you that there are no changes planned to the fundamentals of the scheme and to confirm that there is no limit on referrals per GP/practice and no voucher-type system in place for accessing the scans. The position remains, that in line with the terms of the scheme, patients you judge to be clinically urgent should receive their scan within one month from the referral date, and routine patients should receive their scan within a maximum of three months from the referral date and we will continue to engage as part of our regular engagement with providers around activity levels and waiting times.

We would greatly appreciate your responsible use of the services in line with the scheme scope. In this context the HSE has worked with the ICGP who have developed a Quick Reference Guide for GPs in practice that focuses on the use of specific imaging modalities for various clinical issues. It is available to ICGP members via the ICGP website and aims to assist GPs in rationalising imaging studies for the various clinical issues encountered regularly in daytime general practice. We ask that you utilise this guide to ensure that you are accessing the most appropriate exam for your patients.

You also have full access to iRefer guidelines <https://www.irefer.org.uk/>

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I would ask that you please prioritise urgent and routine referrals appropriately in line with the FAQ available at <https://www.hse.ie/eng/services/list/2/primarycare/community-healthcare-networks/gp-diagnostics/> and we will continue to engage as part of our regular engagement with providers around activity levels and waiting times.

If you have any questions or feedback in relation to this communication or service, please do not hesitate to contact [community.diagnostics@hse.ie](mailto:community.diagnostics@hse.ie).

Yours sincerely,



**Geraldine Crowley**  
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