



GP Access to  
Community  
Diagnostics  
Frequently Asked  
Questions

V0.2

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## Context

GPs have had increased direct access to radiology diagnostics via an outsourced service model since the commencement of the GP Access to Community Diagnostics initiative in January 2021. The outsourced service is provided by a number of private providers and provides GPs with direct access to radiology scans including CT, MRI, DEXA & X-Ray until 31<sup>st</sup> December 2022.

Building on the work already underway in the community to increase GP direct access to ultrasound & X-Ray, via separate initiatives, this further rollout of the service will increase GP direct access to CT, MRI, DEXA & additional X-Ray. Increased access to diagnostic services for the diagnosis and management of chronic disease in primary care, to include spirometry, echocardiogram and the NTproBNP (already in operation in a limited number of locations) blood test, is underway, with intentions to be fully operational throughout 2023.

This rollout addresses the difficulties that GPs face in accessing radiology diagnostics; difficulties which have been further compounded by COVID-19. By maintaining this increased GP direct access to scans, diagnostics capacity in the community is increased and hospital avoidance can be facilitated.

The scheme also supports the long-term objective to expand Primary Care services aligned to the 2017 Sláintecare Report, the 2019 GP Agreement and Winter 2022 plan. These reports highlight the crucial role to be played by GPs in the shift in the provision of care from acute to community settings. The GP Access to Community Diagnostics initiative forms an integral component of the Enhanced Community Care Programme which aims to enhance community health services and reduce pressure on hospital services.

## Document purpose

This FAQ document is intended to answer the main questions that GPs may have as to how to access radiology services for their patients.

# 1. Background FAQs

## 1. What scan types are included?

X-Ray, DEXA and a selection of MRI and CT scans are included as part of the scheme. The specific scan types for MRI and CT are outlined in tables 1-2 below. All types of X-Ray and DEXA scans can be requested.

This complements any existing arrangements already in place for ultrasound and X-Ray.

*Table 1. MRI scan types included*

MRI
MRI Brain
MRI Pituitary with / without Contrast
MRI IAMS
MRI Cervical Spine
MRI Thoracic Spine
MRI Lumbosacral Spine
MRI SIJs
MRI Knee
MRI Pelvis
MRI Shoulder

Table 2. CT scan types included

CT
CT Brain
CT Sinuses
CT KUB
CT Chest (non-contrast)
CT Chest HRCT
CT Renal with contrast
CT Abdomen / Pelvis Plain
CT Chest with contrast
CT Abdomen/ Pelvis with Contrast with ORAL and IV
CT Spine Lumbar
CT Cervical Spine
CT Dorsal Spine

## 2. Why are these specific radiology scan types included?

The specific list of MRI and CT scan types outlined were selected based on feedback from a number of GP stakeholders. It was agreed that the scan types included should be those that are appropriate for GPs to follow up on.

## 3. What is the referral process for scan types not included in this rollout?

The referral process for radiology scan types not listed in tables 1 and 2 above will not change. GPs will continue to refer patients via the standard process e.g., referral to the local hospital or private provider.

## 4. Where does governance lie when a patient has been referred for a scan?

The referring GP retains responsibility for the management of their patient. GPs refer appropriate patients for scans and arrange follow-up care and onward referral, if required. Once a referral has been made, it is the GP's responsibility to check with the patient that the scan has taken place. Note: GPs should check if patients have recently received a scan or are due to receive a different scan to prevent unnecessary exposure to radiation, etc.

The private providers are responsible for providing clinical governance for the completion of the scan, reading of the scan, and making appropriate contact with the GP.

## 5. What patients can be referred for scans?

The services are for:

- Any patient aged 16+ years of age (until 31<sup>st</sup> December 2022)
- Patients who can wait up to one month for an urgent scan and up to three months for a non-urgent/routine scan. In order to facilitate prioritisation of appointments, it is important for GPs to differentiate appropriately between urgent and non-urgent scans. The ratio of urgent to non-urgent scans may be subject to audit as part of reviews of this service. For further detail of which referral pathway to select based on patient wait times, please refer to figure 1 below

Figure 1. Overview of which referral pathway to select based on patient wait times.

**When does my patient require radiology diagnostics?**

Immediately	Up to 1 month	Up to 3 months
Refer patient via standard process	Refer to Outsourced Service Model (note 'urgent' on eReferral)	Refer to Outsourced Model (note 'routine' on eReferral)

Patients who are ineligible or who cannot wait up to 4 weeks for a scan should be referred via the standard process e.g., to the local hospital or private provider.

6. What is the process for referring patients under the age of 16 for scans?

Patients under the age of 16 are **not eligible** for these services and must be referred via the standard process e.g., referral to the local hospital or private provider.

7. What is the process for referring patients who do not have a medical card, GP visit card or Health Amendment Act (HAA) card for scans?

Patients without a medical card, GP visit card or Health Amendment Act (HAA) card are currently eligible for these services until 31<sup>st</sup> December 2022.

8. How long will direct access to these scans be in place for?

The existing arrangement of access for full population aged 16+ years of age will continue to run until 31<sup>st</sup> December 2022. At the end of the contract with the private providers, there will be an option to extend this contract or transition to a public service.

## 2. Making a Referral FAQs

### 9. Are there clinical guidelines available to support my decision making when referring a patient?

You will be able to access the iRefer guidelines via Healthlink. You will receive a notification when these guidelines are available. These guidelines were developed by the Royal College of Radiology, UK and they provide recommendations for everyday use of clinical imaging services.

### 10. How do I make a referral?

You can make a referral to all private providers (except Global Diagnostics (T/A Medica)) by submitting an e-referral using the General Referral Form on Healthlink. Healthlink can be accessed via the Healthlink web portal or via your accredited practice management software.

If you are referring to Global Diagnostics (T/A Medica), you can email referrals to [hse@globaldiagnostics.ie](mailto:hse@globaldiagnostics.ie) or use the secure 'fax to email' line at 01 5313425.

### 11. What information is required on the referral?

When filling out the General Referral Form via Healthlink, **all required fields must be completed.**

**Please note the new code: 'GP Access to Community Diagnostics' which is to be used for referrals.**

You must also include the following information specified in table 3 in the free text box on the General Referral Form:

*Table 3. Example of Referral Information Required:*

#	Information Required in General Referral Free Text Box	Example
1	Code: 'GP Access to Community Diagnostics'	GP Access to Community Diagnostics
2	CHO	CHO 1



3	Area (per 'GP Access to Diagnostics CHO Private Providers' document)	Cavan and Monaghan
4	Include medical card, GP visit card number (8 characters) or Health Amendment Act (HAA) card number where appropriate (7 characters)	A1B23456C
5	Provider and Location	Alliance Medical, Galway
6	Modality	CT
7	Part of body to be scanned	Sinuses
8	Urgent or Routine	Routine
9	Patient mobile number	086-123-4567
10	Relevant clinical information, including previous imaging and where this was done (must be included)	MRI Brain at St James' Hospital

It is particularly important **that all of the above information is specified correctly** on the referral, particularly the previous imaging history & other relevant clinical information.

## 12. Is there a limit to the number of patients that I can refer per week/month?

No, there is no limit on referrals per GP/practice and there is no voucher type system in place for accessing the scans; however, we would greatly appreciate your responsible use of the services.

It is the intention of this rollout to add capacity for radiology diagnostics. Some of your patient cohort may have private insurance that will enable them to access scans.

## 13. Which private provider do I refer to for each scan?

The private providers contracted to provide scans will vary throughout Ireland, depending on your location. Please refer to the 'GP Access to Diagnostics CHO Private Providers' document for information about the private providers selected for your CHO.

**Note:** within your CHO, there may be different private providers for different scan types.

## 14. Will I be able to refer patients to a location outside of my CHO for a scan?

If a patient requires their scan to be conducted in a location outside your CHO, please consult the 'GP Access to Diagnostics CHO Private Providers' document for other CHOs. These documents are available via the HSE webpage

[\(https://www.hse.ie/eng/services/list/2/primarycare/community-healthcare-networks/gp-diagnostics/\)](https://www.hse.ie/eng/services/list/2/primarycare/community-healthcare-networks/gp-diagnostics/) and your pack. You may then fill out the general referral form as usual, indicating

the preferred CHO location in the free text box and sending the referral to the appropriate private provider for that modality/CHO.

## 15. My patient is on a waiting list for radiology diagnostics. Can I refer them to this initiative instead?

Yes, you may refer them. It is essential that you **inform the relevant hospital** that you are redirecting the referral and that the patient no longer requires a scan, so that the patient can **be removed from the hospital waiting list**. This will alleviate pressure on the hospital waiting lists.

We are informing the hospitals of this rollout and will make them aware that some of the patients on their waiting lists may access scans via private providers in the community.

### 3. After the Referral FAQs

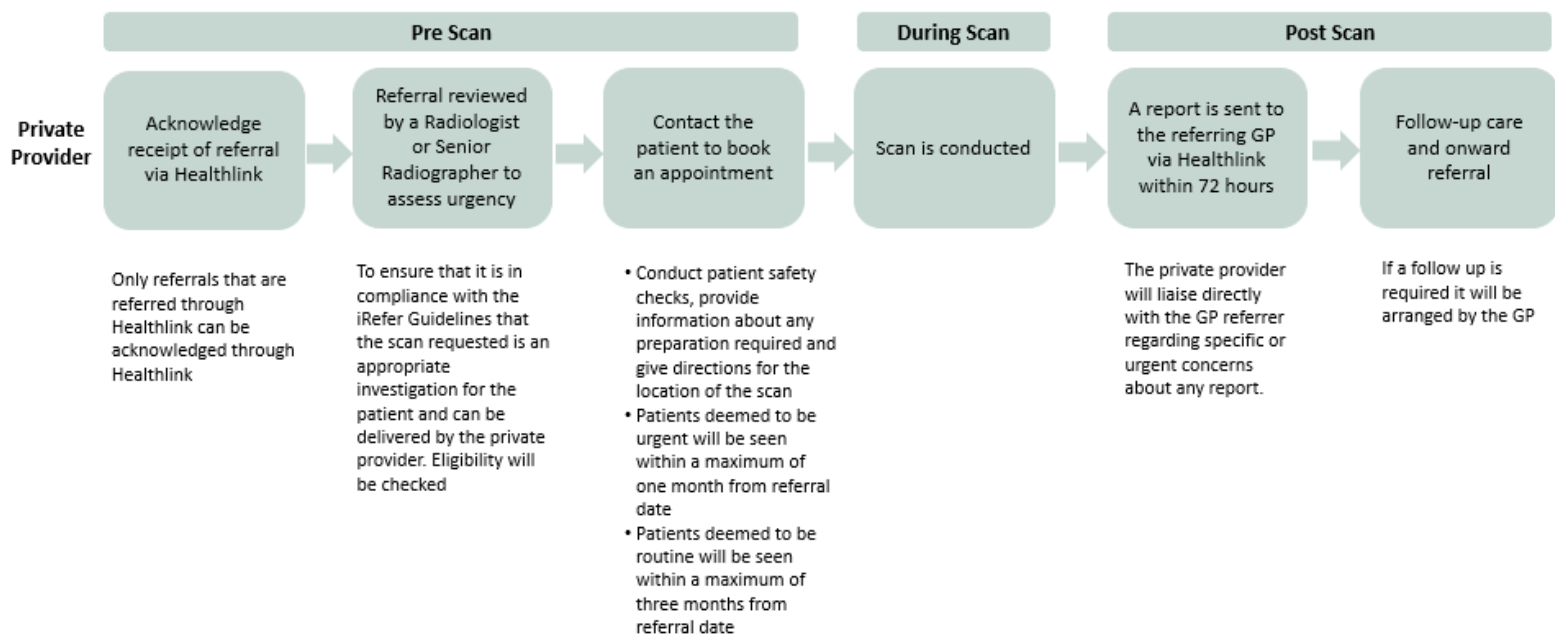
#### 16. Who will provide the scans?

The private providers (Affidea, Alliance Medical, Global Diagnostics (T/A Medica), Bon Secours Tralee and UPMC Whitfield) will provide the scans depending on your location. Their staff are CORU registered Radiographers and IMC registered Consultant Radiologists.

#### 17. What happens after the referral is sent?

Please refer to figure 2 below for details of what happens once you submit a referral.

Figure 2: High level process once the referral has been submitted.



**Note:** this is an indicative high-level process that may differ depending on the private provider.

#### 19. When is the cutoff point for referring the full population?

Any referral received by the private provider before close of business on the 31st of December 2022 will be covered.

## 20. Who will pay for the scan?

The private providers will bill the HSE directly on a monthly basis. They will only be reimbursed for providing the types of scans that they are contracted to do in each location as per the appropriate guidelines for the initiative.

## 21. What are the typical waiting times?

Patients whom you judge to be clinically urgent should be seen within a maximum of one month from referral date and routine patients should be seen within a maximum of three months from referral date. **Please note that responsible use of the service is encouraged when designating patients as urgent.**

On completion of the scan, a report is sent to the referring GP via Healthlink within 72 hours.

## 22. What if my patient does not attend their scan?

The HSE may be charged for scans where patients do not attend or cancel within 24 hours of their scheduled appointment. You should encourage patients to follow through with their appointments where possible.

If a patient does not attend their scheduled appointment, the private provider will inform you and that no further appointment will be scheduled. You will need to submit the referral again if the patient still needs the scan. **Please emphasise to your patient the importance of attending their scheduled appointment.**

## 23. How do I receive the report on the scan?

Alliance Medical, Affidea and Bon Secours Tralee will return the report to you via Healthlink. UPMC Whitfield will return the report via BEAM. Global Diagnostics (T/A Medica) will return the report via fax, post or healthmail.

#### 24. Can my patient get a copy of their images?

The private providers will make copies of the scans available to the patients via various methods including CD and patient portals.

#### 25. What happens if there is an urgent finding on the scan?

The private providers will liaise directly with you regarding specific or urgent concerns about any report.

#### 26. What do I do if the report recommends follow up for a patient?

You are responsible for arranging any follow up that a patient requires. You can arrange follow up/repeat scans with a relevant private provider. In some cases, you may need to refer the patient to a hospital service. If so, **please include that the patient had a scan with a named provider in your referral** so that the hospital knows to request a copy of the images.

#### 27. Will the scans be available to the hospital and accepted by the hospital?

The private providers can share copies of the images with hospitals using the BEAM™ Image Exchange solution. If the scan is completed by Global Diagnostics (T/A Medica), a CD with your patient's results can be prepared. You must include the name of the private provider that the patient had a scan with on your referral in order for the hospital to know who to request a copy of the images from.

#### 28. Who do I contact if I have a query about a particular scan/service provided or a concern about the service provided?

You can contact the relevant private providers via the 'Private Providers Contact Details' document included in your pack.

If you feel that your concerns are not being dealt with, please contact [community.diagnostics@hse.ie](mailto:community.diagnostics@hse.ie). Please note that we will endeavour to respond to your query as quickly as possible but due to currently high-volume of emails being received,

there may be some delay in issuing a response. Please review the appropriate FAQs and related documentation whilst awaiting a response

### 29. Where do I find online information about the service?

Please refer to the HSE webpage

[\(https://www.hse.ie/eng/services/list/2/primarycare/community-healthcare-networks/gp-diagnostics/\)](https://www.hse.ie/eng/services/list/2/primarycare/community-healthcare-networks/gp-diagnostics/) and your packs for further information about this initiative. Any updated documentation will be made available via these sites.

### 30. What other developments are underway?

Increased access to diagnostic services for the diagnosis and management of chronic disease in primary care, to include spirometry, echocardiogram and the NTproBNP blood test, will also be made available to GPs. This has already commenced with BNP testing, with further roll out of Echo and Spirometry testing intended.

There are also plans to improve how referrals are made for this service via Healthlink. The longer- term intention is for the HSE to build its own capacity to deliver diagnostics in the community.