# Cancer Board Paper

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| **Title of paper:** | GP Direct Access and iRefer update |
| **Purpose of the paper:** | To update the Board on progress made around the implementation of the NHSE guidance on GP Direct Access. |
| **Summary outline of main points / highlights / issues** | Described progress to date including the Trusts that have drawn the capital funding down to implement the iRefer product.  Outline of timescales attached to the project.  Summary of next steps including the development of task and finish groups for the clinical pathways. |
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1. **Background and Context**

This purpose of this paper is to provide the Board with an update regarding GP Direct Access Project and describe the next steps.

GP Direct Access (an NHSE directive) supports Primary Care in gaining access to imaging modalities. This guidance was first published in October 2023. General Practitioners in Greater Manchester can access plain film images (x-ray) and Ultrasound sonography (USS) universally. This project supports widening the portfolio of imaging requests to include Computerised Tomography (CT) chest, abdo and pelvis and Magnetic Resonance Images (MRI) Brain for GP’s via the use of a clinical decision support (CDS) tool iRefer. iRefer CDS is a digital solution which attaches itself to the radiology order comms that Trusts deploy to their GP’s. The CDS launches when GP’s go into the application to make a radiology order. iRefer is a national set of guidelines that have been developed by the Royal College of Radiologists.

NHS England made capital funds available to purchase the iRefer CDS that the Diagnostic Network have been successful in securing. The capital funding allows Trusts to procure the iRefer CDS product and run this as a 3-year pilot across Greater Manchester. This will allow the Trusts to embed the CDS with their primary care colleagues and monitor uptake. Nationally NHS England are seeing around 8% of imaging requests being unfulfilled from primary care which is where the savings can be calculated from.

All GM Trusts within the Diagnostic Network were asked to be part of the project with the exception of The Christie NHS Foundation Trust as they don’t accept imaging requests from primary care. Currently the following organisations have drawn the capital funding down and are procuring the CDS solution.

* Manchester University NHS Foundation Trust
* Northern Care Alliance NHS Foundation Trust
* Wrightington, Wigan and Leigh NHS Foundation Trust

Bolton were unable to proceed currently as they were concerned about the resource implication to undertake this project due to existing projects around their EPR taking priority. Stockport are not going forward with the project either. They had drawn the capital funding down but then have returned the funding to the national team. This is due to their concerns about value for money and their own internal order comms not yet live. An interim solution was offered by the supplier, a standalone CDS portal however Stockport felt this wouldn’t be a useful interim measure for GP’s. Tameside at the time of writing this paper yet to confirm their position to the Diagnostic Network. As the project is being supported by the Digital Diagnostic Capability programme at NHS England Trusts will be expected to return data quarterly on the benefits realisation associated with the implementation of the iRefer CDS.

Below shows the expected timescales of the CDS iRefer project. All teams must have the system live by the 01/04/2026. There are a number of dependencies such as MFT and NCA have to upgrade their ICE systems. This was part of existing digital programmes at both organisations. The project will be a phased implementation with the MFT expected to be going live with the CDS for their GP’s by October 2025.

A Primary Care Engagement strategy is also being drafted in conjunction with the supplier and the Communications manager at the Diagnostic Network.

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| **Month Commencing** | **Mar-25** | **Apr-25** | **May-25** | **Jun-25** | **Jul-25** | **Aug-25** | **Sep-25** | **Oct-25** | **Nov-25** | **Dec-25** | **Jan-26** | **Feb-26** | **Mar-26** |
| **MFT** | **KO meet** | **X Wave implementation** | | | | | | **Go live MRI** |  | **Go live South** |  |  |  |
| **NCA** | **KO meet** |  | | | | **X Wave implementation** | | | | | **Go live SAL** |  | **Go live BRO** |
| **WWL** | **KO meet** | **WWL initial phase** | | | | | | **X Wave implementation** | | | | **Go live** | |

Through the GP Direct Access Implementation Group pathways are also being considered for direct access to CT and MR scans. Task and finish groups are being established and if anyone would like to support these groups, please contact [nina.nugent@nca.nhs.uk](mailto:nina.nugent@nca.nhs.uk) - GM Programme Manager.

1. **Key Discussion Points**

Paper for information only

1. **Next Steps**

The project will continue to implement the iRefer CDS along with the direct access pathways.

1. **Recommendation, requests / support required of the Board**

That the Board note the contents of this paper.