

**DEPARTMENT OF RADIOLOGY  
MEETING**

**Wednesday 14<sup>th</sup> January 2015 at 12.30pm  
Radiology Seminar Room**

**Minutes**

Item	Notes and Actions
1	<p><b>Apologies for Absence</b> – Apologies received by XXX, XXX, XXX</p>
2	<p><b>Minutes from previous meeting</b></p> <p>Minutes of the previous meeting from the 12<sup>th</sup> November 2014 were accepted as a true reflection.</p>
3	<p><b>Chair’s update (XXX)</b></p> <p><b>Ambulatory Pathways for CT</b></p> <p>XXX informed the meeting that a separate code has been arranged for ambulatory CT patients from MTU.</p> <p><b>MDT’s</b></p> <p>XXX informed the group that the Acute Oncologist Department are doing a peer review – XXX has requested attendance at new MDT every other week for 1 hour . These meeting will be held on a Thursday afternoon. XXX informed the meeting that this would be 1½ hours for Radiologists which includes their preparation. XXX informed the meeting that this would need to be added to the budget list. XXX to supply XXX a cost for preparation and attending the new MDT <b>(1)</b></p> <p>A paragraph has been redacted here for the purposes of this Freedom of Information request, due to the fact that it contained personally identifiable information regarding two individuals and their personal circumstances.</p> <p>The group then discussed the arrival of XXX and XXX who due to start over the Summer. XXX flagged to the group a new IR Consultant who is seeking employment in South West and if we could take advantage of this skillset as part of succession planning. The group then expressed the need to secure initially secure substantive funding for XXX. XXX outside of the meeting<b>(2)</b></p> <p><b>Acute oncology contact numbers</b></p> <p>XXX informed the group that 2 numbers would be attached to the yellow sheets of urgent contact details for IP cord compression or incidental PE’s in OP. There are separate numbers for the SpR and nurse specialist (9-5). XXX to contact XXX.<b>(3)</b></p>

	<p><b>Stagecraft</b></p> <p>XXX informed the meeting regarding some new software called Stagecraft that is a bolt-onto CRIS and would be used for reporting cancer staging. A discussion took place regarding this and it was agreed that there should be a presentation to review this software. The annual cost for this software is £8k. XXX to arrange a presentation at one of the consultants meeting – XXX to be invited to attend. <b>(4)</b></p>
<p><b>Action(s)</b></p>	<p>1. XXX to supply XXX a cost for preparation and attending the new MDT.  2. XXX to discuss funding of consultant post with XXX outside of the meeting.  3. XXX to contact XXX to update the contact sheet  4. XXX to arrange a presentation at one of the consultants meeting – XXX to be invited to attend.</p>
<p><b>4</b></p>	<p><b>Reports from Specialist Leads</b></p> <p><b>CT &amp; MRI - XXXX</b></p> <p>No immediate issues. Demand remains high for CT. XXX informed the group that the 3<sup>rd</sup> MRI business cases was still on-going. The group wanted to ensure that the upgrades to the existing MR Scanners would still be required with or without MR3.</p> <p><b>Ultrasound - XXX</b></p> <p>XXX informed the group that the waiting lists were stable. XXX reported that XXX had been having problems with the Dragon software in the US room. An error code keeps coming up. XXX suggested that we escalate this issue to the Divisional Governance Group. <b>(1)</b></p> <p>XXX informed the group that the PACS system and the projector in the Radiology Seminar Room is not working properly. All the group agreed that this room needed a facelift i.e. new carpets etc. XXX informed the group that there was a possibility of money either coming from charity or lottery funding. XXX to action. <b>(2)</b></p> <p><b>Musculoskeletal - XXX</b></p> <p>XXX informed the group that fluoroscopy were doing a good job. Waiting times have come down, CT injections are low, MRI refs – low via CCG. Some ESP's referrals from North Devon Community Hospital have been received for access to MR, however these have been inappropriate to accept and passed onto DRSS to follow-up. <b>No action.</b></p> <p>XXX informed the meeting that XXX replacement is being looked into and a job description is being drawn up by XXX. The group questioned the banding of the new post. XXX advised a further discussion regarding operational need and existing funding would be continued outside of this meeting. <b>No action.</b></p> <p><b>Interventional Radiology - XXX</b></p> <p>No further date.</p>
<p><b>Action(s)</b></p>	<p>1. Dragon software to be escalated to the next Divisional Governance Group.</p>

	2. XXX to look into decorating the Radiology Seminar Room
5	<p><b>Updates:</b></p> <p><b>Departmental - XXX</b></p> <p>XXX informed the group that XXX was interviewing for a new Band 6 in the Nuclear Medicine Department to replace XXX who is leaving at the end of the month.</p> <p><b>Cluster Manager – XXX</b></p> <p><b>HR Business Partner</b></p> <p>XXX informed the group that recently on IaN there has been some information confirming that there is a helpdesk for HR issues. XXX informed the group that XXX has used this system already and has found that it works well. XXX informed the group that XXX is the Division’s new HR Business Partner and will be based within CWH.</p> <p><b>Complaints</b></p> <p>XXX informed the group that any complaints that you receive, there should be a duty of candour section that needs to be completed and recorded on the Datix system after you have spoken to the family of the patient. For further clarity the group were advised to contact XXX, Governance Manager or XXX. <b>(1)</b></p> <p><b>Radiation Protection - XXX</b></p> <p><b>External Review – Ionising Radiation (Medical Exposures) Regulations IR(ME) Report</b></p> <p>This review was carried out by Oxford University Hospitals NHS Trust. XXX informed the group of XXX findings with the review as follows:</p> <p>XXX informed the meeting that XXX thought that the review was very positive with the Radiology department achieving ISAS accreditation.</p> <p>XXX informed the group that XXX had read through the review and had picked up the following areas:</p> <ol style="list-style-type: none"> <li>1) Optimising group</li> <li>2) Local dose levels</li> <li>3) Dose Management System</li> </ol> <p>XXX confirmed XXX will sit on the optimising group.</p> <p>XXX discussed with the group a dose monitoring solution presentation arranged for Friday 16 January 2015, XXX, XXX, XXX, XXX and XXX will attend as diaries permit. XXX to confirm time and venue</p> <p><b>Environmental Agency Inspection</b></p> <p>XXX informed the group that an inspection was carried out on 11 December 2014 regarding control of the radiation materials on site. Action plan to be drawn up and the contamination certificate in XXX Lab to be checked if it is in date. <b>(3)</b></p>

	<p>XXX informed the group that XXX had been speaking to XXX and the discussion was about how much income had been raised for DEXA which was £200k a year, the budget is £50k and we have made £145,000 for the Trust. <b>XXX then left the meeting.</b></p>
	<p>1. For further clarity the group were advised to contact XXX, Governance Manager or XXX.  2. XXX to confirm time and venue  3. XXX to draw up an action plan re Environmental Agency inspection and to check the contamination certificate is in date.</p>
<b>6.</b>	<p><b>Accreditation Update</b></p> <p>No further update.</p>
<b>Action (s)</b>	
<b>7</b>	<p><b>Any other business</b></p> <p><b>Nuclear Medicine</b></p> <p>A letter is being prepared to ask XXX and XXX to cover responsibilities for the ARSAC licence in the short-term. Complex reporting is currently being covered by Plymouth. <b>No action</b></p>
<b>Action(s)</b>	
<b>9</b>	<p><b>Date of Next Meeting</b></p> <p><b>Wednesday 11 February 2015 from 12.30-2.00pm in the Radiology Seminar Room.</b></p>

**Attendees:**

<b>Name</b>	<b>Department</b>	<b>Present/ Apologies/ Deputy</b>
XXX	Consultant Radiologist	P
XXX	Lead Clinician – Radiologist	A
XXX	Cluster Manager, Diagnostics	P
XXX	Radiology Services Manager	P
XXX	Consultant Radiologist	A
XXX	Consultant Radiologist	P
XXX	Consultant Radiologist	P
XXX	Consultant Radiologist	A
XXX	Consultant Radiologist	P
XXX	Consultant Radiologist	A
XXX	Consultant Radiologist	A
XXX	Head of Medical Physics	P
XXX	Consultant Radiologist	A
XXX	Consultant Radiologist	A
XXX	Consultant Radiologist	P
XXX	Consultant Radiologist	P