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GLOSSARY OF TERMS

CQC Care Quality Commission
HIS Healthcare Improvement Scotland
HIW Healthcare Inspectorate Wales
GMC General medical Council
NMC Nursing and Midwifery Council
HCPC Health and Care Professions Council
MHRA Medicines and Healthcare Products Regulatory Agency
HPA Health Protection Agency
HSE Health and safety Executive
ISO International Standards Organisation
HCSIC health and Social Care Information Centre
RPA Radiation Protection Advisor
EPD Electronic Personal Dosimetry
IR(ME)R Ionising Radiation (Medical Exposure) Regulations
Alliance Medical Limited
QUALITY ACCOUNT 2018/19

STATEMENT BY THE UK MANAGING DIRECTOR

Alliance Medical is Europe’s leading independent provider of imaging services operating across the continent – in the UK, Germany, Ireland, Italy, The Netherlands, Norway and Spain. Established in 1989, we have enjoyed rapid growth based on a proven, scalable business model, exceptional service, and outstanding value for money and technical excellence.

AML is part of Life Healthcare, a leading South African healthcare provider. Life’s vision is to be a market leading, international, diversified, healthcare provider focused on delivering sustainable, high quality and cost effective healthcare. Over the past few years they have expanded into mental health, acute physical rehabilitation, renal dialysis and oncology. Combining with AML is a natural part of this diversification strategy.

Our services

2018 saw AML deliver against its strategy to provide a collaborative approach to imaging, placing patients, clinicians, NHS and independent providers at the heart of our service and delivering patient-centric services through supporting the delivery of over 600,000 scans through four main channels:

- **Diagnostic Imaging:**
  - providing MRI, DEXA, CT, X-ray and Ultrasound imaging.

- **Molecular Imaging:**
  - providing PET/CT imaging.

- **Radiopharmacy:**
  - producing radioactive tracers that are central to PET/CT imaging.

- **Research:**
  - providing imaging capacity for local and national research.

• AML operates a national network of MRI, CT and PET/CT static centres, the majority of which are fully integrated within local hospitals with the others operating as standalone clinics. In addition, we provide mobile medical imaging services to over 100 NHS and independent sector hospitals through our fleet of mobile scanners.

During 2016 Alliance Medical completed the roll out, in three phases, of the National PET-CT contract and now provides an integrated service with increased access to PET-CT scanning services to over 50% of the population of England.

Alliance Medical supports continued clinical discovery through participation in and sponsorship of a number of research initiatives throughout the UK. Our research partners include leading clinicians, NHS organisations and academic institutions which have chosen to partner with Alliance Medical. In addition we provide a distributed research network enabling expertise and resources to be shared, and access to multiple sites all using a single IT platform to Principle Investigators and access to clinical trials to NHS patients wherever they happen to use our scanning services. Alliance Medical funds three research fellows who contribute directly to the growing body of knowledge in the area of medical diagnostics including imaging for bone lesions in breast cancer, improved resolution of PET-CT in radiotherapy planning and advanced cardiac imaging.
**Our network**

Alliance Medical currently operates a national network of MRI, CT and PET-CT static centres, the majority of which are fully integrated within local hospitals with the others operating as standalone clinics. In addition, we provide mobile medical imaging services to over 100 NHS and independent sector hospitals through our fleet of mobile scanners.

The structure of our current delivery network is shown below.

<table>
<thead>
<tr>
<th>Static Sites</th>
<th>Number</th>
<th>Mobile Scanners</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS Hospital Sites</td>
<td>46</td>
<td>Mobile / Relocatable MRI Scanners</td>
<td>32</td>
</tr>
<tr>
<td>Nuffield Health Sites</td>
<td>8</td>
<td>Mobile CT Scanners</td>
<td>9</td>
</tr>
<tr>
<td>BMI Sites</td>
<td>1</td>
<td>Mobile PET/CT Scanners</td>
<td>8</td>
</tr>
<tr>
<td>Ramsey Healthcare Sites</td>
<td>1</td>
<td>Mobile PET/CT Support Vehicles</td>
<td>5</td>
</tr>
<tr>
<td>X-ray / DEXA Scanners</td>
<td></td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

AML also operates an integrated national network of four radioactive isotope production facilities and an integrated radiopharmacy distribution channel, supporting PET-CT scanning.

December 2018 saw Alliance Medical complete the acquisition of European Scanning Centre Ltd (“ESC”). ESC was established in 2003 and operates from three sites across the UK. ESC offers specialised open MRI scanning at all three sites in addition to upright CT scanning in London. ESC’s also introduces highly specialised imaging modalities into the Alliance Medical network, operating three of the seven open upright MRI scanners in the UK, providing a far more comfortable experience for claustrophobic, bariatric and autistic patients.

**Our People**

Alliance Medical currently employs c. 850 UK-based colleagues (radiographers, technicians and administrators) who play a critical role in the provision of imaging services. Central to our service are our values, which play a major part in the way we work.

<table>
<thead>
<tr>
<th>Openness</th>
<th>Excellence</th>
<th>Efficiency</th>
<th>Learning</th>
<th>Collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>We act with transparency and</td>
<td>We deliver the highest</td>
<td>We constantly seek to improve</td>
<td>To support and value our staff we</td>
<td>We work together and in</td>
</tr>
<tr>
<td>honesty in everything we</td>
<td>quality care whilst caring</td>
<td>our ways of working and to use</td>
<td>create an environment where we</td>
<td>partnership for all of our</td>
</tr>
<tr>
<td>do, where staff are</td>
<td>for our patients and</td>
<td>our resources in the</td>
<td>continue to learn providing</td>
<td>patients. We respect</td>
</tr>
<tr>
<td>encouraged to speak up</td>
<td>each other with</td>
<td>most intelligent way for the</td>
<td>opportunity for training and development</td>
<td>expertise and combine it to</td>
</tr>
<tr>
<td>to ensure a safe an</td>
<td>compassion, dignity</td>
<td>benefit of all.</td>
<td>to help staff to do their work</td>
<td>achieve more.</td>
</tr>
<tr>
<td>secure environment for our</td>
<td>and respect.</td>
<td></td>
<td>effectively.</td>
<td></td>
</tr>
<tr>
<td>patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| X-ray / DEXA Scanners        | 2                              |                               |                                          |                             |


Our Collaborative Approach

Alliance Medical operates a collaborative approach to diagnostic imaging working with clinicians, local NHS providers and independent providers to keep the patient at the heart of our service. Our collaborative approach to imaging services allows us to future proof our service, provide access to emerging clinical and technological developments and support research programmes, while supporting local pathways of care. 2018 saw AML build upon its existing national PET-CT imaging network by securing the opportunity to provide PET-CT imaging services through an additional two contracts and two partnerships agreements in respect of the national PET-CT Wave 2 tender process.

Our responsibilities

I am acutely aware of our responsibilities as a provider of clinical services and, as we continue to grow the services we provide, we have also invested in our teams, our infrastructure and our approach to quality to ensure we can continue to deliver on our key quality goals:

- To maintain and ensure patient safety;
- To assure the quality of the services Alliance medical provides; and
- To deliver patient centred, individualised care.

I am satisfied that the contents of this report are accurate and want to reiterate our commitment to continuous improvement across all of our services. Finally, I would like to express my thanks to all of our teams, our customers and our partners who work tirelessly to ensure a first rate standard of patient care across everything we do.

Callum Laurie
Interim UK Managing Director
STATEMENTS OF ASSURANCE

As a provider of NHS services, Alliance Medical is required to provide assurances that we are performing to essential standards, measuring our clinical processes and performance and are involved in quality improvement initiatives.

1.0 Review of services

During 2018-19 Alliance Medical provided a range of diagnostic imaging services to the NHS. All available data on the quality of care in all of these NHS services was reviewed. The income generated by these NHS services represented 100% of the total income generated from the provision of NHS services.

2.0 Quality of Care

Care quality information is collated through patient, referrer and staff surveys, clinical audits, service reviews and key performance indicators, as appropriate to each service.

2.1 Core Quality Account Indicators

Only indicator 25 is relevant to Alliance Medical: The number and where available, rate of patient safety incidents reported within the Trust during the reporting period, and the number and percentage of such patient safety incidents that results in severe harm or death.

AML categorise Patient safety incidents as follows, taking into consideration the NRLS codes
- Breach of MR safety policies leading to patient harm
- Contrast Reaction
- Escalated Events leading to patient harm
- Falls from a Height
- Incorrect Isotope Dose
- Level 1 report discrepancy, possible change to patients pathway
- Wrong Body Part Imaged, Increased radiation exposure
- Wrong Protocol, Increased radiation exposure
QUALITY ACCOUNT 2018/19

Alliance Medical considers that this data is as described for the following reasons:

Patient safety and quality of clinical care is at the heart of everything we do. Reducing avoidable harm remains a high priority for Alliance Medical. The number of near misses and minor incidents reported has increased, which is a good indicator that staff know how and what to report, and is reflective of the open and honest culture within Alliance Medical. The absence of patient safety incidents resulting in severe harm or death reflects the short time that patients are with Alliance Medical as only a small part of their total healthcare journey.

3.0 CQUIN payment framework

None of Alliance Medical’s income was conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

4.0 Clinical audits

There were no national clinical audits and no confidential enquiries relevant to the NHS services provided by Alliance Medical.

During 2018/19, audits of radiologist reports were undertaken in PET-CT, MRI and CT modalities using randomised case selection. The audit process follows the recommendations of the Royal College of Radiologists.

5.0 Clinical research

Alliance Medical supports clinical developments through participation in multiple research initiatives throughout the UK, providing diagnostic imaging or radioisotopes for trials. Our research network includes leading clinicians, NHS organisations and academic institutions which have chosen to partner with Alliance Medical, enabling expertise and resources to be shared to deliver supplementary services such as a distributed research network.

During 2018/19 Alliance Medical provided 1082 PET-CT and MRI research scans across 11 sites.

6.0 Care Quality Commission (CQC) registration

Alliance Medical is registered with the Care Quality Commission to provide Diagnostic and Screening procedures at fifty one specifically named sites plus our CT, MRI and PET-CT mobile services for which a central registration applies.

We are also registered with the CQC for the Treatment of Disease, disorder or injury at nine specifically named sites.

During 2018-19 the CQC inspected nineteen sites. This was the first time that Diagnostic Imaging services had been rated. They gave the following ratings:

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>Rate</th>
<th>Number</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016-17</td>
<td>74</td>
<td>&lt;0.00001%</td>
<td>1</td>
<td>&lt;0.00001%</td>
</tr>
<tr>
<td>2017-18</td>
<td>92</td>
<td>&lt;0.00001%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>2018-19</td>
<td>89</td>
<td>&lt;0.00001%</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Alliance Medical considers that this data is as described for the following reasons:

Patient safety and quality of clinical care is at the heart of everything we do. Reducing avoidable harm remains a high priority for Alliance Medical. The number of near misses and minor incidents reported has increased, which is a good indicator that staff know how and what to report, and is reflective of the open and honest culture within Alliance Medical. The absence of patient safety incidents resulting in severe harm or death reflects the short time that patients are with Alliance Medical as only a small part of their total healthcare journey.
At the time of inspection Southampton Alliance MRI did not have effective systems in place to ensure medicines and equipment were safe for patients use. Since the inspection Alliance Medical has taken action to ensure that:

- medicines required for emergencies are managed effectively
- all medicines are stored at the temperature recommended by the manufacturer
- all patient equipment is serviced regularly and is now included in a service schedule
- the paediatric high concentration mask and tubing has been replaced

### 7.0 Environmental Agency

EA permits are in place and up to date at sites where these are required.
8.0 Data and Information Governance
Alliance Medical submitted records to the Diagnostic Imaging dataset (DIDS) during 2018-19 which are included in the latest published data. The percentage of records in the published data:

a) Which included the patient’s valid NHS number was:
   • 99.4% for diagnostic imaging

b) Which included the patient’s valid General Medical Practice Code was:
   • 98.7% for diagnostic imaging

8.1 ISO 27001:2013
Alliance Medical continued to comply with ISO 27001:2013 during 2018/19 and certification remains in place until 2020.

8.2 NHS Digital Data Security and Protection Toolkit
Alliance Medical’s Information Governance Assessment Report score for 2017 was graded as satisfactory.

Mark Ferreira
Medical Director
QUALITY ACCOUNT METHODOLOGY

Alliance Medical is regulated by the Care Quality Commission and each year we commit to publish a Quality Account that assesses our performance against the five key questions that are central to their work:

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive?
- Are services well-led?

ARE SERVICES SAFE?

External Assurance
Alliance Medical operates within a highly regulated environment and, as such, works in partnership with multiple external bodies that provide both mandatory and voluntary assurance in respect of our clinical and non-clinical activities.

Care Quality Commission (CQC)
Alliance Medical is registered as an independent healthcare provider in accordance with the Health & Social Care Act 2010. Alliance Medical registered facilities are categorised as single speciality services.

Alliance Medical currently have 51 static sites registered for the regulated activity ‘diagnostic screening procedures,’ 9 of the sites are also registered for the regulated activity ‘treatment of disease, disorder and injury.’ Each site is supported by a CQC registered manager, in accordance with the CQC standards.

Monitor
All independent healthcare provider organisations are required to be licensed with Monitor (now NHS Improvement) if they are responsible for providing direct healthcare services to NHS institutions. Alliance Medical is appropriately licensed and has received no reviews or inspections during 2018/19.

ISO 27001:2013
Alliance Medical is committed to the safe and secure management of patient identifiable data. The ISO27001:2013 standard provides external assurance of our approach to Information Security Management. Compliance with ISO27001:2013 was maintained in 2018, and certification remains valid until October 2020. During that period, our systems, policies and procedures will be reviewed through bi-annual surveillance visits, led by an external registered auditor. During 2018 external surveillance visits took place in May and December.
NHS Digital Data Security and Protection Toolkit

Alliance Medical is required to carry out an annual self-assessment of our compliance against Department of Health information governance policy and standards via the new Data Security and Protection Toolkit, which in 2018/19 replaced the previous Information Governance Toolkit.

The 2018/19 assessment for the Data security and protection Toolkit was submitted and published in March 2019 and assessed as “Standards Met”.

Molecular Imaging

Alliance Medical delivers PET-CT, CT and X-ray imaging services and also manufactures radioactive isotopes and tracers. These services are delivered in accordance with the Ionising Radiation (Medical Exposure) Regulations 2017.

To satisfy the relevant regulatory requirements, Alliance Medical has ensured the following:

- All staff classified under the regulations hold an in-date medical certificate completed by an approved Health & Safety Executive appointed doctor;
- All molecular imaging staff who work with or have the potential to be exposed to ionising radiation wear dosimeters; 56 dosimetry results that exceeded the AML dose investigation levels have been investigated and corrective actions taken;
- All ionising radiation modalities have suitably trained and appointed Radiation Protection Supervisors, independent Radiation Protection Advisors and Medical Physics Experts.

In 2018-19 there were no incidents of high dose exposure requiring a report to the Health & Safety Executive.
Internal Assurance

The formal structure for internal assurance across Alliance Medical is our governance committee structure with the Integrated Governance and Risk Board (IGRB) providing the appropriate assurance to the Supervisory Board. The IGRB met in March 2018, September 2018 and April 2019 and the minutes of these board meetings are made available to staff via the company intranet.

The four main areas of risk for the company have been identified as Clinical Governance, Information Governance and Security, Radiation Protection and Health and Safety.

In line with this the Integrated Governance and Risk Board has four sub-committees addressing each of these areas. The Chair of each sub-committee is responsible to ensure the committee focuses on the key areas within its scope of responsibility and to implement strategies to monitor and minimise the risk and ensure excellence in service provision. The sub-committees meet quarterly and the minutes are made available to staff via the company intranet.

The role and responsibilities of the Integrated Governance and Risk Board and its sub-committees:

**Audit**

To ensure that Alliance Medical discharges its legal and moral obligations, we have a comprehensive audit programme in place.

This programme ensures that our departments and units follow key policy directions and meet legislative and regulatory requirements.

Audit results are reviewed by the key sub-committees and significant exceptions or variances are raised with the operational managers responsible for the service delivery and reported to the Integrated Risk and Governance Board.
**Licensing and Registration**
AML comply with all applicable licensing and regulatory requirements.

It is the responsibility of each sub-committee to monitor and implement strategies to ensure compliance with the legal, statutory and regulatory requirements within its scope of influence.

Risks are escalated to the operational and legal teams, entered onto the corporate risk register and reported to the Integrated Governance and Risk Board.

**Policies, Procedures and Guidelines**
Comprehensive policies and standard operating procedures are in place at both corporate and unit level. These are available to staff via the corporate intranet.

Each sub-committee is responsible for developing, reviewing, implementing and monitoring compliance with company policies related to its area of responsibility.

**Clinical and other Quality Indicators**
A comprehensive range of clinical and other quality indicators are collected and analysed at company level.

These indicators are tracked by the various sub-committees to identify trends and benchmark our facilities to ensure continuous quality improvement.

Poor performance is escalated to the relevant operational management and reported to the Integrated Governance and Risk Board.

**Incident Reporting**
All incidents are recorded, reviewed and investigated with trends identified and actioned at a national and regional level.

All serious incidents are reported within 24 hours and a Root Cause Analysis (RCA) investigation undertaken.

RCA investigation reports are reviewed at the relevant sub-committees who are responsible for making sure that appropriate remedial action and shared learning has taken place.

The pathway for ‘Escalated Events’ is now embedded into practice to track incidents which the organisation consider require a more in-depth level of investigation to support prevention. Detailed RCA investigations are undertaken for all of these events and each is discussed in detail with the Clinical Governance Committee. Duty of Candour and Just Culture are applied as applicable.

**Risk Register**
A Corporate Risk Register complements the other systems that are in place. The Risk Register identifies key risks at a national, regional and local level. The relevant sub-committees are responsible for the maintenance of the risk register relevant to their area of responsibility and for the management and risk minimising strategies. The Risk Register is treated as a live document and is updated throughout the year as required in addition to a formal review 6 monthly at the Integrated Governance and Risk Board.
**Infection Prevention & Control**

Alliance Medical is committed to providing a clean and safe scanning environment and supporting facilities. There is an established monthly and annual Infection Prevention and control audit programme, in accordance with national guidance, led by our Infection Prevention & Control Practitioner and overseen by our Medical Director who has delegated responsibility for Infection Prevention & Control.

All identified non-conformities to standard requirements are recorded and tracked through to resolution to provide assurance that all facilities maintain a clean and safe environment with competent staff reducing the risk of infection prevention issues.

Infection prevention and control activity is overseen by the Infection prevention and control committee which receives specialist advice from a Microbiologist and reports to the Clinical Governance Committee.

The IPC committee met 4 times in 2018/19. They oversaw the flu vaccination programme and led a project to update patient booking letters to include a statement to encourage patients to inform the scanning site if they have been unwell prior to attendance.

A new initiative was implemented in 2018-19 applying the 5 moments of hand hygiene specifically as applied to the imaging pathway. This included the production of a new poster to re-inforce to staff to understand exactly when on the imaging pathway they needed to undertake hand hygiene to support patient safety.

**Medicines Management**

Our Medicines Quality Committee is chaired by the Medical Director, supported by multidisciplinary membership including a pharmacist. As a sub-committee of the Clinical Governance Committee it provides the governance and assurance regarding medicine use and supports continual quality improvement.

During 2018-19 the medicines Quality Committee has supported the adoption and further development of PGD’s for the administration of IV Contrast which has enabled increased efficiency and effectiveness of the patient’s pathway.

**Safe Staffing**

Multi-disciplinary workforce planning

Alliance Medical operates an integrated, analytical approach to resource planning that is consistent with the Skills for Health Workforce Planning methodology and involves the following:

- Monthly trend analysis of patient volumes and turnaround times;
- Local Trust engagement regarding any required actions;
- Calculating resource requirements;
- Plan for expected recruitment gaps for clinical, non-clinical and patient management centre staff with support of preferred suppliers under the NHS approved Health Trust Europe procurement framework; and
- Analyse skill set requirements to ensure sufficient qualified staff are available.

This approach ensures that Alliance Medical employs the right volume of clinical and non-clinical staff with appropriate skill sets to meet patient needs.

Alliance Medical recognises it has a responsibility to support the growth of the UK radiology workforce and has provided the business with a 3 year strategic resourcing plan which reflects the organisations overall strategy.
2018/19 has seen the continued growth of initiatives in this regard:

- A wider range of development programmes delivered through The Christie School of Oncology such as Aspiring Leaders, Effective Time Management, Human Factors and Effective Communication; Alliance Medical have continued to grow the number of elective and graduate opportunities in the business with 14 graduate positions direct from electives opportunities alone.

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Electives undertaken</td>
<td>15</td>
<td>35</td>
<td>33</td>
</tr>
<tr>
<td>Number of Graduates on boarded</td>
<td>8</td>
<td>14</td>
<td>9</td>
</tr>
</tbody>
</table>

- Life Healthcare have introduced resourcing principles across the group to ensure consistency in the approach to decision making and appointment of all Senior Management roles

- Improved candidate pool through social media and NHS Jobs

- 2019 will see the rollout of a new applicant tracking system and careers website upgrade, ensuring candidates can access our roles and apply from their phone or tablet

**Safe Recruitment**

In line with legislation, Government guidance and NHS Employers’ standards, Alliance Medical ensures all recruits have the skills, qualifications, experience and appropriate physical and mental health to do the job they are recruited for and support our obligations to safeguard vulnerable adults and children. All employment offers are subject to satisfactory completion of checks. This applies equally to temporary staff and those engaged through third party providers.

Alliance Medical operates a pre-employment screening process for all roles which includes the following checks:

- Identity
- Right to work in the UK
- Professional registration and qualifications
- Employment history and references (previous 5 years)
- Disclosure and Barring Service including a reverification every 3 years for patient facing employees
- Occupational health assessments
- Directors undertake an equivalent process in line with the ‘Fit and Proper’ requirements.
**Mandatory Training.**

Mandatory Training is provided to all employees in order that risks to services, patients and the business are mitigated, taking into consideration the regulatory environment in which Alliance Medical operates.

Mandatory training is delivered both practically and through the use of e-learning modules which are assigned to staff based on their role and completed annually. Our completion rate target at any one time across the business was increased to 90% in 2018. This has presented challenges in some areas where action is being taken to ensure achievement of the target. Overall outcome in March 2019 was 92% compared to 88% in 2017-18.

<table>
<thead>
<tr>
<th>Division:</th>
<th>Corporate compliance</th>
<th>Health &amp; Safety Awareness</th>
<th>Fire Safety</th>
<th>Manual Handling: Objects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target Completion %</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>AML Radiopharmacy</td>
<td>92%</td>
<td>94%</td>
<td>94%</td>
<td>94%</td>
</tr>
<tr>
<td>Central Support Office</td>
<td>86%</td>
<td>92%</td>
<td>92%</td>
<td>90%</td>
</tr>
<tr>
<td>DI Mobiles – North</td>
<td>95%</td>
<td>98%</td>
<td>99%</td>
<td>98%</td>
</tr>
<tr>
<td>DI Mobiles – South</td>
<td>89%</td>
<td>92%</td>
<td>92%</td>
<td>94%</td>
</tr>
<tr>
<td>DI Statics – North</td>
<td>91%</td>
<td>93%</td>
<td>93%</td>
<td>94%</td>
</tr>
<tr>
<td>DI Statics – South</td>
<td>92%</td>
<td>98%</td>
<td>96%</td>
<td>97%</td>
</tr>
<tr>
<td>London</td>
<td>89%</td>
<td>94%</td>
<td>97%</td>
<td>95%</td>
</tr>
<tr>
<td>MI PET CT – Mobiles North</td>
<td>96%</td>
<td>97%</td>
<td>97%</td>
<td>97%</td>
</tr>
<tr>
<td>MI PET CT – Mobiles South</td>
<td>98%</td>
<td>100%</td>
<td>100%</td>
<td>94%</td>
</tr>
<tr>
<td>MI PET CT – Statics North</td>
<td>97%</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
</tr>
<tr>
<td>MI PET CT – Statics South</td>
<td>92%</td>
<td>92%</td>
<td>93%</td>
<td>91%</td>
</tr>
<tr>
<td>Total Completion %</td>
<td>92%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
</tr>
</tbody>
</table>

All patient facing staff are additionally required to attend practical life support training annually. During the year 2018/19 practical life support training was completed with of our clinical staff, relevant to their role:

<table>
<thead>
<tr>
<th>Course</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Life Support (BLS)</td>
<td>155</td>
</tr>
<tr>
<td>Immediate Life Support (ILS)</td>
<td>464</td>
</tr>
<tr>
<td>Paediatric Life Support (PLS)</td>
<td>60</td>
</tr>
</tbody>
</table>

**Health & Safety**

Alliance Medical Limited is committed to the Health and Safety of its workforce, the patients who use its services and all third parties involved in service provision. Internal audits of all facilities to assess general health and safety and facilities management are undertaken regularly. In 2018 we continued to improve our health and safety management system in light of legislative changes, external best practice, reported incidents and internal audit findings.

As part of our PET-CT services, we continue to be fully compliant with the Regulatory and licensing requirements of the Environment Agency. Annual inspections of Radiation Safety continue to be completed by our appointed Radiation Protection Advisors.

There were 4 RIDDOR reportable incidents in 2018 which were investigated and actions taken in response to learnings. There were no Health & Safety Executive enforcement notices issued to AML in 2018.
**Incidents and Investigations**

Alliance Medical supports a just culture for the reporting and management of incidents, supported by the DATIX risk management system. Incident reporting is introduced at the corporate induction day and staff are encouraged to report any event that they feel has/could have a potential impact on patients, staff and other areas of the business including ‘Near Misses’. Incident investigators have been trained within the Root Cause Analysis framework to ensure a consistent approach is maintained.

The Quality and Risk team review reported incidents on a monthly basis to ensure all incidents, near misses and accidents have been accurately reported with appropriate actions being taken. Human factors and Just Culture is incorporated into the incident investigation process.

Lessons Learned are shared via a monthly communication bulletin, Risky Business. Significant incident investigations are led by the Quality and Risk team, who provide regular updates to the Clinical Governance Committee, the UK board and others as appropriate.

Review of total incidents as a percentage of patients scanned, demonstrates improved reporting of incidents and near misses in 2018-19.
Serious Incidents

Two ‘Serious Incidents Requiring Investigation’ (SIRI) s, were reported to external bodies in accordance with NHS England’s Definition during 2018.

One related to an individual patient fall where duty of Candour applied. The incident was investigated in accordance with policy. Reports and actions planned were shared with the patient, the commissioners and the Care Quality Commission.

The second incident related to several incidents relating to unavailability of radioisotopes, delaying PET-CT imaging Alliance Medical’s sister company; Alliance Medical Radiopharmacy produce the radiotracers (radioactive isotope tracers); FDG (Fludeoxyglucose) and FEC (Fluoroethylcholine) for PET-CT scans from four production facilities around England. Major engineering / technical issues at two of these sites between the 16th November and the 7th December 2018 resulted in a significant shortfall in production and the need to cancel and reschedule a large number of PET-CT scan appointments.

This was raised as a Serious Incident in terms of the Serious Incident Framework as “an incident (or series of incidents) that prevents, or threatens to prevent, an organisation’s ability to continue to deliver an acceptable quality of healthcare services” and was the subject of a separate independent investigation as per the Serious Incident Framework. The investigation report has been finalised and submitted to NHS England in compliance with the Framework.

To date, Alliance Medical have not been informed of any patient suffering unavoidable harm as a result of this incident, which would be standard practice, but nevertheless believe it is important to actively review all affected patients. Alliance Medical have therefore asked all referring Trusts to inform us should there be concerns about individual patient harm and we will fully cooperate in any subsequent investigations as good practice requires.

Learning from Deaths

There were two (2) patient deaths during 2018-19 during the imaging pathway. Both were reviewed as part of Learning from Deaths.

The patients were under the care of Alliance Medical having been transferred from inpatient wards for a diagnostic imaging scan. Both patients were attended to by the host site emergency care team who took the decision not to administer treatment. One patient had an active DNACPR in place and the other was receiving palliative care.
ARE SERVICES EFFECTIVE?

Policies and Procedures

Alliance Medical annually reviews its policy and procedure infrastructure in support of a rolling programme of review and continuous improvement.

All procedural documents are stored and made available to all staff via Alliance medical’s SharePoint Document Library which is strictly managed to ensure version control. All documents have assigned authors and executive sponsors, with external subject matter expertise sourced externally where applicable.

Policy audits have been undertaken quarterly to ensure documents are updated in a timely manner.

Staff Experience

Alliance Medical recognises the need to continually develop services based on current best practice and innovation and has provided the business with a 3 year strategic development plan which reflects the organisations overall strategy. Staff are encouraged to research and suggest new approaches that will improve patient care and services. To support such learning they have been provided with access to ELfH, a platform which provides e-learning to educate and train the healthcare sector.

All Diagnostic Radiographers are registered with the Health and Care Professions Council (HCPC) and hold either the Diploma of the College of Radiographers (DCR) or a BSc Degree in Diagnostic Radiography.

For our PET-CT services The Alliance Medical technical staff members carrying out the service include qualified Nuclear Medicine Technologists and Radiographers, and will be:

a) In possession of one of the following qualifications:
   • Certificate or Diploma endorsed by the College of Radiographers
   • BSc / BSc (Hons) in Nuclear Medicine, Therapeutic or Diagnostic Radiography / Radiotherapy
   • Post Graduate Qualification in Nuclear Medicine
   • Overseas qualification approved by the Health Professions Council and the Society of Radiographers, and;

b) State-registered and appear on the register held by the Health Professions Council or the Voluntary Register of Clinical Technologists where eligible.

To further support the service, clinical staff are externally trained to the standard of Intermediate Life Support standard and have clinical supervision and peer support.

As the integration with Life Healthcare continues, the performance year has moved and all Senior Managers received a formal review whilst all other employees had two opportunities for a six monthly review with their manager, ensuring clinical staff continue to be assessed and training needs are addressed. Training and guidance for Managers conducting reviews will be provided in 2019.

In 2018 The Clinical Assistant apprenticeship programme was launched which incorporates the Level 3 Senior Healthcare Worker standards, the Level 3 Diploma in Healthcare support and Care Certificate. In 2019 a second group of clinical assistants have enrolled onto the programme.

As part of the career path for a clinical assistant, the company are working with the training provider to progress a Level 5 Assistant Practitioner apprenticeship, to be available in 2020
**Quality Assurance Reviews**

AML utilises a Quality Assurance Review (QAR) Framework as a key mechanism for audit and monitoring of services. The QAR is designed to ensure compliance with policy and procedure across all clinical services. All units, mobile and static, are reviewed annually as a minimum with additional visits being undertaken following an internal alert due to an isolated serious clinical incident, a series of non-serious clinical incidents or a complaint from a patient or customer; or a request from a clinical area for audit of their service.

A full report following the QAR visit is produced and sent to the operational manager (UM or RS), relevant Regional Managing Director and Quality and Risk Manager. Where changes are required as a result of review findings the responsible manager develops and implements actions as agreed to ensure improvement.

Monthly QAR review meetings involving the Q&R team are an ongoing function. The aim of these meetings is to:

- Review the completed QAR audits and discuss required actions and status.
- Consider the plan for QAR audits for the coming two months, considering dates of previous audits.
- Identify key themes and recurring issues from recent visits.
- Identify areas of learning and root cause that can be shared across Operations.
- Identify any issues identified through QAR to be escalated to the Clinical Advisory Committee for discussion.
- Consider any updates required to the QAR tool.
- Give direction on any new items to be included in the QAR process.

The QAR framework supports the requirements for ISAS and CQC Key Lines of Enquiry (KLOE) with shared learning being disseminated following the QAR review meetings.

**Clinical Audit Outcomes & Improvement Cycle**

Alliance Medical supports a radiological reporting audit in all imaging modalities including reports provided to Alliance Medical by third party reporting companies.

All audits are undertaken using randomised case selection. The audit process follows the recommendations of the Royal College of Radiologists and focus on three areas:

- Clinical opinion of the report: An assessment of the clinical component of the report to assess its accuracy and its appropriateness for the referrer;
- Report Language: An assessment of the language used in the report; and
- Image Quality: An assessment of the image quality.
Over 10,000 cases were audited in 2018 with no Grade 1 discrepancy errors and an initial discrepancy rate of 0.34% for Grade 2 descriptors. This remains consistent with the results of 2017. All these cases were further reviewed and appropriate additional information provided to the referring clinicians.

### REPORT ACCURACY AUDIT OUTCOMES FOR 12 MONTHS JANUARY 2018 - DECEMBER 2018

<table>
<thead>
<tr>
<th>Grade</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>0.0%</td>
<td>0.34%</td>
<td>8.70%</td>
<td>26.62%</td>
<td>64.34%</td>
</tr>
</tbody>
</table>

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### SCORING DESCRIPTORS FOR CLINICAL OPINION OF REPORT

<table>
<thead>
<tr>
<th>Description</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moderate disagreement</td>
<td>Report had to be amended. Moderate interpretive / reporting discrepancy. Potential for clinically significant consequences.</td>
</tr>
<tr>
<td>Minor disagreement</td>
<td>Report had to be amended for completeness. Minor interpretive / reporting discrepancy. Unlikely to have any significant clinical consequences.</td>
</tr>
<tr>
<td>Trivial disagreement</td>
<td>Slight modifications - there was no need to amend report significantly. ‘Sense’ discrepancy, word omitted. No potential clinical consequences.</td>
</tr>
<tr>
<td>Complete agreement with report</td>
<td>No discrepancy. No changes made.</td>
</tr>
</tbody>
</table>

### SCORING DESCRIPTORS FOR LANGUAGE OF REPORT

<table>
<thead>
<tr>
<th>Description</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Un-interpretable</td>
<td>The report is of such a poor quality that it is un-interpretable or there is a high probability of a clinical risk to a patient due to a severe ambiguity in the report.</td>
</tr>
<tr>
<td>Significant ambiguity</td>
<td>Significant errors that leave the reader unclear what the report is intending to communicate or the ambiguity is such that there is the potential for clinical risk to the patient.</td>
</tr>
<tr>
<td>Ambiguity in report - adequate</td>
<td>Ambiguity that makes the report less clear although adequate for purpose.</td>
</tr>
<tr>
<td>Minor language discrepancies</td>
<td>Minor errors with no impact on interpretative value of the report.</td>
</tr>
<tr>
<td>Perfect</td>
<td>No language errors.</td>
</tr>
</tbody>
</table>

### SCORING DESCRIPTORS FOR IMAGE QUALITY

<table>
<thead>
<tr>
<th>Description</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Un-interpretable</td>
<td>All sequences moved on, no diagnostic images available, wrong area imaged.</td>
</tr>
<tr>
<td>Severe Artefacts</td>
<td>Most sequences have artefacts, limited report possible.</td>
</tr>
<tr>
<td>Considerable Artefacts</td>
<td>One or more sequences have artefacts with considerable impact on the diagnostic value of the images.</td>
</tr>
<tr>
<td>Sub optimal</td>
<td>Minor artefact, no impact on diagnostic value.</td>
</tr>
<tr>
<td>Perfect</td>
<td>Images have no artefacts.</td>
</tr>
</tbody>
</table>
The image quality results demonstrate that 99% of our images fell into Grade 4 & 5 descriptors, being of good diagnostic value during 2018-. This demonstrated an improvement compared to 2017(98%) and reflects the company’s investment in transition from providing mobile services to building static units. The grading by location also supports the transition to static units where ever possible.

<table>
<thead>
<tr>
<th>Grade</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>0.0%</td>
<td>0.11%</td>
<td>0.75%</td>
<td>5.95%</td>
<td>93.19%</td>
</tr>
</tbody>
</table>

**Imaging Equipment**

Alliance Medical continually strives to refresh our imaging infrastructure in order to ensure we continue to deliver the highest possible standard of patient care. The company updates the infrastructure either through the acquisition, new build or through upgrading scanners.

During 2018-19 Alliance Medical has continued with the planned investment of c£80m to significantly improve the physical infrastructure for PET-CT imaging delivery in England. We have invested in a number of static sites to deliver services. These sites are providing an improved experience for patients scanned at site, with services opening extended hours compared to the mobile service.

In May 2018 we opened a new, state of the art Diagnostic Imaging Centre at Colchester Hospital. The Turner Diagnostic Centre provides PET-CT and MRI services for the Trust and also hosts a new state of the nuclear medicine department. The Turner Diagnostic Centre works as a true partnership between Alliance Medical and the NHS. It provides the Trust with flexible, scalable and future proofed facility for its diagnostic capacity needs.

Two new GE 660 128 slice Mobile CTs were also introduced to the mobile CT fleet in April and May 2018. These are additions to our existing fleet of mobile CT scanners. We have also added two Mobile Siemens Aera MRI scanners.

AML have also introduced five relocatable Siemens Aera units to the AML fleet. These relocatable are delivered to site by tracker unit, but are then lowered onto the ground to enable direct patient access without the use of steps or lifts. This is providing an improved experience for patients where our mobile scanners are located for a period of time. It has also provided flexible menu of options for commissioners to meet their middle term commissioning needs.

**Productivity**

With such significant investment required to establish diagnostic imaging services, it is essential that imaging equipment is maintained and operated to ensure the maximum level of productivity for the provision of an effective clinical service.

Alliance Medical seeks to make the most use of our assets to reduce the cost per patient, so that we can offer our customers value for money. In order to do this we must maximise the number of patients we are able to see, while not compromising on patient care.

Developing innovative solutions for scanning is a priority, including use of advanced protocols, new staffing models or equipment advancement in order to benefit the patients experience throughout the diagnostic pathway.

Alliance Medical are committed to investing in the latest technology to deliver the highest quality diagnostic images to ensure the patient receives the quickest diagnosis and highest level of care. Alliance Medical has developed strong operational partnerships with equipment manufacturers and market leading experts in the maintenance of the clinical equipment, which helps to deliver scanner uptime in excess of 98%.
ARE SERVICES CARING?

**Patient Experience**

Alliance Medical is committed to providing a high quality service to all of our patients. It is a fundamental requirement of the Care Quality Commission framework that all service users are offered the opportunity to provide feedback on the services they receive. In order to deliver consistent levels of patient centric care and continue to develop our services we aim to make sure that all patients are provided equal opportunity to provide feedback on their experience. In support of this, Patient Experience Surveys are available at all of Alliance Medical facilities and patients are also e-mailed with a link to complete the survey.

Alliance Medical receives completed Patient Experience Questionnaires from c10% of all patients and 9% of these patients are either satisfied or very satisfied with the service received.

![Patient satisfaction monthly comparison](image)

During 2018-19 94.7% of patients would recommend Alliance Medical to their family or friends.

![Recommend to friends and family - March 2019](image)
**Patient Complaints**

Concerns or complaints raised by patients are a valuable aid to maintaining and developing a consistently high standard of service. Complaints can, and often do, result in areas of learning which lead to service improvements. Complaint resolution is a high priority at both operational and governance levels of our business. All complaints are acknowledged within two (2) working days of receipt and we aim to provide a response to all complaints within twenty (20) working days. All concerns and complaints are addressed in accordance with policy and procedure. Escalation to Level 3 is supported by the PHSO and ISCAS.

There were no complaints escalated to Level 3 during 2018.

The main issues highlighted in complaints in 2018 related to issues with the failure of the Radioactive Tracer for PET-CT scans, due to a major refurbishment programme impacting on the ability to deliver to all units on demand. Staff and the organisation have worked hard to manage the patient expectations maintaining effective communication with all parties.
ARE SERVICES RESPONSIVE TO PEOPLE’S NEEDS?

Diagnostic Imaging Services
The volume of complex imaging in the UK continues to grow at circa 8% p.a. and this is forecast to continue. Alliance Medical continues to invest in new static facilities and has increased its mobile scanning fleet throughout the year, thus providing the health sector with considerable additional scanning capacity. Through being able to operate a flexible workforce, Alliance Medical regularly offers extended scanning days across our network of sites to support the NHS and independent customers, with the routine operation of a seven day service.

Radiopharmacy Services
The demand for our primary radioactive tracer, FDG, has continued to increase. 2018 saw a growth of 3.5% in supply over 2017. The demand for our other radioactive tracers (FEC, NaF, FBB, FDHT and F18) has collectively decreased by 2.5% in 2018. This is as a result of the Keele facility being shut down for 6 months to allow for the replacement of the dispensers and, therefore there being a reduction in the capacity for FEC and NaF. However, there has been a growth of 74% in the supply of FBB in the same time period. This represents a lower growth rate than in previous years, largely due to the supply issues that have been faced in 2018. The supply issues are primarily due to ongoing issues with equipment, primarily the FASTlab dispensers, which have been replaced at Keele and will be replaced at Preston and Sutton over the next 12 months and are part of a number of projects ongoing to improve supply reliability and increase capacity. The Dinnington project is progressing to install a larger cyclotron with the capability to produce both PETCT and SPECT products, which, along with the significant additional fluorine-18 production capacity, will give surety of supply to our patients and customers in sourcing radioactive tracers from Alliance Medical. This site will become operational in early 2020.

Alliance Medical Radiopharmacy Ltd facilities are subject to regular inspections by such regulatory bodies as the Medicines & Healthcare Products Regulatory Agency, Environment Agency and The Office of Nuclear Regulation to confirm their ongoing compliance with the appropriate regulations.

There were no MHRA regulatory inspections performed at any site in 2018. Three Major non-compliances were identified at Sutton, whilst no Major non-compliances were identified at Guildford. An action plan is in place to correct all non-compliances.
ARE SERVICES WELL-LED?

**Senior Executive Team**

Alliance Medical is committed to reviewing its senior executive team composition annually in line with the ‘Fit and Proper Persons’ requirements set out in legislation.

**Risk Registers**

Alliance Medical maintains a hierarchy of risk registers throughout its operations. The Corporate Risk Register was owned by the Finance Director during 2018/19 and was reviewed biannually at the Integrated Governance and Risk Board. Functional directors and governance sub-committee chairs own their respective risk registers and are responsible for ensuring they are routinely reviewed and updated as necessary.

**Employee Representation**

Alliance Medical recognises that the majority of our clinical colleagues are members of the Society of Radiographers.

The respective regional forums of elected representatives met quarterly. The forum to discuss operationally specific issues and ideas with the main forum meting twice yearly. This is central to our communications and consultation process, creating open channels of two-way communication to keep in touch with employees’ views. Regular agenda items at the meeting included: business performance, working methods, quality, training, equipment upgrades, welfare, health, safety and environment issues, sports and social activities, resource levels and employee benefits. Representatives are encouraged to speak with their colleagues and gather feedback on any issues or further information prior to meetings.

**Freedom to Speak up Guardians**

The concept of Freedom to Speak Up Guardians was introduced by the Francis review:

“there is a serious issue in the NHS with whistleblowing that requires urgent attention if staff are to play their full part in maintaining a safe and effective service for patients”.

The Review recommended that all NHS Trusts should appoint local Guardians.

Our Guardians are:
- Appointed by the Board;
- Genuinely independent; and
- Responsible for promoting a culture of safety and speaking up.

The Freedom to Speak Up Guardian acts as an independent and impartial source of advice to staff at any stage of raising a concern, with access to anyone in the organisation, including the chief executive, or if necessary, outside the organisation.

The benefits of having members of staff speaking up were identified as:
- Find and resolve issues earlier before they become a real problem;
- Increased employee engagement;
- Reduced costs through resolving issues earlier; and
- Reduced costs through higher attendance and lower staff turnover.
The key to achieving the benefits outlined above is giving staff the confidence to come forward and raise their ideas, issues and concerns.

In 2018, Alliance Medical introduced an independent Ethics Line to be used anonymously to report behaviour which contravenes our standards or legal requirements. The Ethics Line is a supplementary reporting mechanism through which colleagues may raise concerns if for any reason they are uncomfortable with using our normal channels. This system is available for use by all employees, clients, suppliers and contractors.

**Investors in People**

Alliance Medical is currently accredited with the Investors in People award which is the standard for people management. The standard defines what it takes to lead, support and manage people for sustained success.

An annual review was conducted in March of 2018 and 2019. Later in 2019 the process will commence to collect the qualitative data through interviews ready for reaccreditation in February 2020.

**Employee Engagement**

Following on from the launch of ‘Getting Better Everyday’ in 2017, the workstreams have made excellent progress, focusing on the following:

**Strategy** – The overall company strategy has been articulated and communicated through a series of roadshows, accompanied by a set of resources, explaining the Why, What How and Wow

**Structure** – A regional management structure with increased span of control and improved leadership. Improved first level support for the mobile clinical teams in DI & PET-CT with the introduction of Mobile managers.

**People** – Engagement with Universities to provide elective opportunities and graduate roles, a range of management & administrative apprenticeships

**Culture** – We now have a team of 70 Culture Champions split geographically into 6 teams who work together to deliver the vales, beliefs, attitudes and behaviours that represent Alliance Medical Ltd. The culture champions are conduit for sharing ideas and implementing new initiatives.

**Technology** – Implementation of platforms such as ‘Teams’ & ‘SharePoint’ which have vastly improved the way we can communicate as a business. We have utilised 3rd party specialist to help us deliver an improved technology service throughout the business.

Employee engagement is also measured through an annual employee survey (distributed to all UK colleagues) which is conducted by an independent organisation to ensure confidentiality. In response to the survey, action plans are developed and progress against the plans is measured on a regular basis. The next employee survey will take place in October 2019.

**Equality**

Alliance Medical is committed to ensuring that recruitment practices promote equality of opportunity in line with the 2010 Equality Act. Alliance Medical treats all applicants fairly and equally regardless of their sex, sexual orientation, marital status, race, colour, nationality, ethnic or national origin, religion, age, disability and union membership status. Alliance Medical ensures that no requirement or condition is imposed without justification, which could disadvantage an individual on any of the above grounds.

Each year Alliance Medical publishes a report in respect of the NHS Workforce Race Equality Standard. Actions taken to date include an updated Patient Satisfaction Survey, a new self-service HR system to improve reporting
capability and the development of a Staff Experience survey which will run annually. Future actions in support of this initiative include the development of a new candidate management system.

Alliance Medical publishes an annual Gender Pay Report and action plan.

Our Workforce Race Equality Standard and Gender Pay Reports are available to view on our UK corporate website: [https://www.alliancemedical.co.uk/who-we-are/governance](https://www.alliancemedical.co.uk/who-we-are/governance).

Recognition Framework

Alliance Medical also operates an external employee assistance programme in conjunction with generous sick pay and life assurance benefits to support colleagues during difficult personal issues or in the event of ill health. This includes the provision of a ‘Friends & Family’ diagnostic imaging benefit.

Operating for three years, the Recognition Framework provides guidance on how employees can be recognised for their contribution, on an ad hoc basis. There are occasions when individuals go above and beyond their normal duties or make an exceptional contribution to the success of Alliance Medical in line with the company values.

Managers are encouraged to develop a culture within their team or department which fosters effective communication and recognition of employees for their worthwhile contributions made. Often, a simple but sincere “Thank You” is what people value. It is also important to recognise that each person is different and that the contributions they make should be recognised and rewarded in a way that is meaningful to them as individuals.

Environment

Alliance Medical recognises that environmental issues impact widely on all businesses, particularly those which operate complex logistical transport operations such as our fleet of mobile imaging units. Our senior managers are committed to working closely with customers and suppliers to encourage positive environment practices.

Energy efficiency is a key factor in the choice of diagnostic imaging equipment and we will continue to seek to procure equipment with the lowest energy consumption that meets the clinical requirements of our customers.

Alliance Medical strives to operate in accordance with the Chartered Institute of Building Services Engineers recommended temperatures, recognising that clinical environments may require specific conditions appropriate to diagnostic imaging equipment.

Recycling initiatives operate throughout our national network for confidential waste, printer toner cartridges and redundant IT equipment (in accordance with Waste Electrical and Electronic Equipment Regulations 2013).

Individual desk waste bins have been removed at our Central Support Office in Warwick and replaced with central recycling bins which are integrated with the Local Authority recycling system.

Transport Logistics

Alliance Medical operates a fleet of over 50 mobile diagnostic imaging units in the UK, providing imaging services to over 80 locations nationwide. Multiple policies operate that are designed to minimise the environmental impact of our operations. Our pricing policy for mobile diagnostic imaging services offers a reduced price to customers who book for consecutive days. This encourages a reduction in environmental impact;

Local overnight accommodation is available for all mobile imaging staff who are required to work greater than two hours’ drive from their home. This policy mitigates health and safety risks whilst also reducing
environmental impact. The Scheduling system used to staff the mobile scanners is designed to ensure that the closest radiographer attends the mobile scanning service reducing travel time.

The central Logistics team aims to schedule mobile imaging services to minimise the number of mobile scanner moves per month. They also, where possible, coordinate customer demand to minimise average mobile scanner distance travelled per month. Telematics are used to ensure the fleet operates as efficiently as possible monitoring how well the vehicles are being driven; the latest Euro emissions standard (Euro VI) technology is used to reduce fuel emissions.

Alliance medical has worked closely with commissioners over the year to transition services into modular or static units to reduce the number of mobile services operated and to improve patient experience. We currently have 5 MRI relocatable units that stay static for a number of years replacing the traditional mobile service.
QUALITY IMPROVEMENT GOALS 2018

Alliance Medical’s quality improvement goals for 2018 included:

**Implementation of a new robust framework for Practising privileges**

The granting of practising privileges is a well-established process within independent healthcare whereby a medical practitioner is granted permission to work in an independent hospital or clinic, in independent private practice, or within the provision of community services. Alliance Medical utilises a Practising Privileges framework to partner with Clinical Consultant practitioners.

Alliance Medical continues its commitment to the provision of high quality, diagnostic and evidence-based patient care, which is safety focused across the modalities provided. Central to the success of achieving this objective, is the advice, support, competence and co-operation offered by the Clinical Consultants who practice at and with Alliance Medical. It was felt that a more robust framework was needed to assure the company of the suitability, qualifications and experience of Radiologists and Nuclear Medicine specialists reporting for the company.

In 2018 a new framework for the granting and maintenance of practising privileges was developed and implemented within Alliance Medical. This new framework seeks to:

- Ensure the provision of detailed CVs to identify practitioners specific scope of practice
- Gather relevant in-date documents relating to Indemnity Insurance, ICO Registration, revalidation and appraisal
- Set out detailed expectations of both the clinician and Alliance Medical
- Ensure compliance with GDPR and Data Protection regulations by all clinical staff
- Record equipment used by clinicians for Alliance Medical work

The framework includes:

- An overarching practising privileges policy
- Radiology Reporting Policy
- Operating procedure for application and approval of practising privileges
- Operating procedure for renewal and maintenance of practising privileges
- Appraisal and revalidation procedure for doctors with a prescribed connection to AML
- Procedure for responding to concerns, remediation and support for doctors holding practising privileges

All reporters working with Alliance Medical were asked to resubmit their data to ensure that all data was up to date. Specific Practising Privileges contracts have been issued relevant to the clinician’s scope of practice. Practitioners not providing updated information have been removed from practice with Alliance Medical.

The new framework reflects the new requirements under the General Data Protection Regulations (GDPR). It also enables AML to monitor reporters more closely to ensure they are undertaken work within Alliance Medical that fits within their usual scope of practice. It also seeks to ensure that Healthcare Professionals are treated fairly, in an environment that thrives on mutual trust and respect between all involved.
Implementation of HL7 clinical system integration

At many sites the AML RIS system is used in addition to a local trust RIS to ensure data capture fulfils the requirements of both AML and the trust. These requirements currently necessitate that the dual keying of data between RIS systems is a regular occurrence and this poses an associated clinical risk and operational inefficiency.

With the above risk and inefficiency in mind Alliance Medical embarked upon a project to design and develop a messaging interface enabling automated communication between the AML RIS and trust RIS systems. Initially the project has been focussed towards integration with the widely used ‘CRIS’ system although the intention is to development interfaces with additional RIS applications in due course. The CRIS software is provided to trusts by Wellbeing software and the creation on this RIS to RIS HL7 interface is understood to be the first of its kind in the UK.

A proof of concept exercise has been initiated to gather requirements, design the interface solution, perform quality assurance testing and to implement the solution at a single site. The intention of the proof of concept exercise is to assess the feasibility of such an interface in terms of design and ability to implement a further site roll out.

The current Proof of Concept has seen the implementation of a local CRIS / AML RIS interface at the Turner Diagnostic Centre, Colchester for PET CT and MRI patient pathways. This has enabled the gathering of business requirements and the creation of a specification for the interface solution. Quality assurance testing has now been completed and the interface has been migrated to a central CRIS broker hosted by Wellbeing Software to enable further locations to be interfaced.

To complete the Proof of Concept exercise a review of the implemented solution has been initiated and is in progress. The review exercise will identify and design software developments to enhance the interface and remove any constraints confirmed by the proof of concept. We will seek to validate the current and future solution through the use of user groups to optimise usability. We will also plan an approach to further sites implementations, whilst refining the site delivery plan.

Upon completion of the proof of concept exercise the intention is to expand deployment of the solution to further sites to enable the realisation of the associated benefits and reduced clinical risks.

Once deployed the implementation of the interface solution will contribute to enhanced patient care by:

• Removing the need to copy clinical reports between systems
• Freeing up resource time to focus on patient care
• Reducing manual errors incurred when dual keying
• Ensuring that accurate referral information is received at initial point of referral
Implementation of DoseWatch

Managing radiation dose is important to ensure patients are exposed to the least possible radiation dose possible, whilst delivering a diagnostic image. Radiation dose can be affected by Consultant approved imaging protocols and user technique during imaging. AML recognises that protocols and techniques can be enhanced using latest knowledge and experience. It is important to share the knowledge across all of or sites to reduce patient dose as far as possible.

To enable support audit of dose and to easily share knowledge and learning, Alliance Medical have commenced a project to implement DoseWatch across our units. Imaging modalities are licenced to connect to the software and data, including dose, imaging technique, positioning is collected centrally. This data can then be used to undertake audits and provide reports. It can also be used to compare local and national dose reference levels (DRLs). The reports can then be used to compare sites and individual practice and form the basis of discussions with radiologists and practitioners regarding maximisation of protocols to reduce patient dose.

The DoseWatch system could additionally be used to monitor individual patient’s total dose. This requires the ability to identify an individual patient across multiple sites.

Alliance Medical commenced a pilot of DoseWatch, with the aim to demonstrate:

1. Protocol and dose optimisation across the business
2. Auditing of doses being received by AML patients
3. Possibility to standardise practice across sites
4. Audit other aspects e.g. patient positioning

The pilot was successful in demonstrating the projects aims and confirmed that imaging modalities in both static and mobile sites could be validated and integrated to the software.

Some challenges were identified during the pilot including a reduced data set received from non-GE equipment.

Alliance Medical are now progressing from the pilot to a full project with the aim to integrate all CT and PET-CT scanners with the DoseWatch system. Project initiation documents have been developed and DoseWatch licences have now been purchased. A site prioritisation plan has now been developed and will include the licencing and integration of all new CT and PET-CT scanning equipment purchased in future. The project will prioritise the use of standardised structured report data that utilises the standard data available from all manufacturers’ equipment. This will provide comparable data across the organisation to support shared learning to deliver a continued reduction in radiation dose to patients.

Implementation of a Radio-Isotope auto-dispenser system across PET-CT

The first UNIDOSE automated radio-isotope dispensing unit, provided by Trasis (and locally known as a Trasis system) was installed at The Christie Hospital several years ago in Manchester and subsequently, the second system by AML at Wigan PET-CT Centre in September 2017 followed by the installation of the Systems in Plymouth, Southampton, Colchester and Maidstone during 2018.

UNIDOSE is an innovative system dedicated to the fast and automated preparation of single patient doses. The radiopharmaceutical doses are prepared automatically and delivered in a 23mm tungsten container, ready for injection. The injection is then performed directly from a shielded container, ensuring the highest protection for the technologist or radiographer, but also affords a strict control of the injection.

The total exposure including all operations from the reception of the multi-dose vials to the injection of the individual doses allow one single person to prepare and inject 2,000 patient doses without exceeding 10% of the maximum annual accepted & authorized exposure limits. Managing injections with the UNIDOSE system is
easy for AML radiographers and technologists, following training, and their exposure to radiation is controlled. The shielding of the hot cell, combined with the distance maintained and speed of preparation, means that staff receive negligible exposure. Several studies of preparation and injection using the UNIDOSE automated dispensing system have shown up to 95% reduction in exposure. The UNIDOSE has also been shown to dispense more accurate doses, leading to a reduction in dose delivered to the patient.

The pilot installations included a glass window and the ability to dispense the isotope manually via the Trasis. Audit identified that manual dispensing via the Trasis system increased the exposure of the radiographer and reduced accuracy. The use of a manual dispensing system, when using different isotopes has been found to be safer.

The new Trasis UNIDOSE Systems will not have the glass window that is available to be used when in manual mode, as AML have taken the decision to ensure all sites have a manual 'Pig' method (separate method) that should be used instead. Having the option of a separate method of dispensing allows for sites to utilise multiple, different isotopes more efficiently during the day with no delay to the patient pathway as the tubing will not need to be replaced several times, as with the UNIDOSE manual mode application.

This simple and safe process has been so successful and an asset to AML in terms of radiation protection to staff and dosage precision and control, that AML has commenced installation of the system into Newcastle and Leeds. These and any future installations will not include the glass window, preventing manual dispensing via the system. A manual system will be provided separately.

Four additional installations are planned for 2019/20, which will include, Hull, Preston, Sheffield and Norwich, with further systems being considered in the South.

**Trasis Unidose System**
QUALITY IMPROVEMENT GOALS FOR 2019

• Focus on the quality of patient records within the patient management system to reduce the number of duplicate records held in the system. Alliance Medical recognises the need for accurate clinical records. We will work more closely with commissioners and referring clinicians to ensure that accurate data is received relating to all patients imaged by Alliance Medical to increase the percentage of patients who have one combined record across the company for all of their imaging history.

• In Partnership with Qube Learning, develop a Level 5 Assistant Practitioner apprenticeship, in line with the scope of practice of Alliance Medical. This aims to provide suitable qualified and registered staff to support radiographers to deliver quality imaging to patients.

• To provided Customer Service Training programme for all patient facing employees to improve customer experience of our services. This reflects feedback from the patient surveys and will seek to improve staff communication with patients using our services.

• Develop and implement a clear values based recruitment standard. This will seek to recruit staff who embrace the Alliance Medical culture of Openness, Excellence, learning, collaboration and efficiency and will be supported by training and coaching for managers.