NHS Wrightington, Wigan and Leigh Teaching Hospitals

NHS Foundation Trust

Information Governance Department

Suite 9 Buckingham Row Brick Kiln Lane Wigan WN1 1XX

Email: foi@wwl.nhs.uk Web: www.wwl.nhs.uk

Ref: FOI/2023/8660

Date Received: 1st February 2023

Response Due: 1st March 2023

Date: 1st March 2023

Dear Sir/Madam

You asked:

Please pass the questions below on to your DXA Service delivery lead, manager or clinical lead. If this is not possible, we would appreciate your help to provide as much information as you can

Questions:

Infrastructure:

1) Do you outsource your DXA scans? If Yes- please state, the organisation providing this service and forward this FOI to your provider for completion (please continue to complete for any of the elements of the DXA pathway that are provided by your Trust/board)

We don't outsource DEXA scanning or reporting.

- 2) In January 2023 how many DXA scanning machines did you have at your trust/board for clinical use?
- a. n. Operational 1
- b. n. not in use
- c. n. accessible outside of Trust

3) What is the average weekly capacity for clinical scans? (N. of scans per week) -

73 = 327 total in January

4) What was your average DNA rate over the last 3 months? (n. DNA/total n. scans booked) -

15%

- 5) What age range do you include in your clinical scans? Please tick all that apply
- a. <20 years -√
- b. 20-40 years √
- c. 40-60 years √
- d. 60-75 years ✓
- e. 75-80 years ✓
- f. >80 years ✓

6) What is the duration of your routine DXA appointment:

- a. 15 minutes or less
- b. 16-25 minutes ✓
- c. 26-30 minutes
- d. >30 minutes
- 7) What was the average wait for clinical patients from referral to scan in January 2023?
- a. <2 weeks (move to Q9) N/A
- b. 2-6 weeks (move to Q9) Non planned average wait is 5 weeks
- c. 6-13 weeks All inc planned average wait 8 weeks
- **d. >13 weeks** N/A
- 8) What are your perceived barriers to delivering DXA scans within 6 weeks from referral? Please tick all that apply
- a. Scanner capacity (DXA equipment)- ✓
- b. Clinical capacity (operator)
- c. Other- please state
- 9) What was the average time from the scan to the report being available to the referrer in January 2023?
- a. <3 weeks (move to Q11)- \checkmark
- b. 4-6 week
- c. 6-13 weeks
- d. >13 weeks
- 10) What are your perceived barriers to referrers receiving DXA scan reports within 3 weeks from scan? Please tick all that apply
- a. Clerical-internal
- b. Clinical- internal ✓
- c. Factors external to this service (please state)
- d. Other (please state)
- 11) What hospital department is responsible for delivery of DXA scans:
- a. Radiology ✓
- b. Medical physics
- c. Nuclear medicine
- d. Rheumatology
- e. Other- please state
- 12) Which DXA examinations are included in routine protocols for the clinical service? Please tick all that apply
- a. Lumbar spine- ✓
- b. Proximal femur- ✓
- c. Long femur (AFF assessment)- \checkmark
- d. Total body- ✓
- e. Vertebral fracture assessment (VFA)- \checkmark

- f. Peripheral/forearm- ✓
- 13) What access facilities do you have available? Please tick all that apply
- a. Overhead hoist
- b. Portable hoist
- c. Wheelchair transfers
- d. Bed/trolly transfers
- e. Changing room
- f. assistance for transfers

g. Other- please state- All the above are available within the Out-patient department the scanner is located.

Workforce:

1)

- i) What professional groups perform DXA scan measurements at your centre? (DXA operators)
- a. Radiographer 🗸
- b. DXA technician
- c. Assistant practitioner
- d. Clinical scientist
- e. Nurse
- f. Medical Dr- please state specialism
- g. Other- please state
- h. Unknown]
- ii) Please indicate WTE for each group selected

2.0 WTE

- 2) What DXA-specific training (outside of professional training) have the DXA operators performing scans had?
- a. In house √
- b. Manufacturers applications training \checkmark
- c. Recognized/accredited national training programme (please state the name of the training programme/provider) \checkmark
- d. Other- please state
- e. unknown
- 3) What professional groups report your DXA scans at your center? ()
- a. Radiographer internal \checkmark
- b. Radiographer external
- c. DXA technician internal
- d. DXA technician external
- e. Assistant practitioner internal
- f. Assistant practitioner external
- g. Clinical scientist internal
- h. Clinical scientist external
- i. Nurse -internal
- j. Nurse external
- k. Medical Dr internal please state specialism(s) \checkmark
- I. Medical Dr external please state specialism(s)
- m. Other- please state
- n. Reporting is outsourced
- o. unknown

- 4) What training (outside of professional training) have those reporting DXA scans hadspecifically in DXA reporting?
- a. In house
- b. Manufacturers applications training
- c. Recognized/accredited national training programme (please state the name of the training programme/provider)
- d. Other- please state
- e. unknown √
- 5) What professional group provides clinical leadership for your service?
- a. Radiographer
- b. DXA technician
- c. Assistant practitioner
- d. Clinical scientist
- e. Nurse
- f. Medical Dr- please state specialism(s) ✓
- g. Other- please state
- h. unknown
- 6) Please indicate how many (WTE) clinical vacancies in your DXA service do you have in January 2023? (Free text)

Zero

Quality:

- 1) Is your service accredited as part of a national programme?
- a. ISAS
- b. IOS
- c. Other- please state
- d. None ✓
- e. Unknown
- 2) What clinical audits do you routinely undertake? Please tick all that apply
- a. DXA scan technique
- b. Reporting (double reporting)
- c. Reporting (clinical review)
- d. Scanner QA review
- e. Other- please state
- f. unknown ✓

3) What IR(ME)R audits do you routinely undertake? Please tick all that apply

- a. Patient pregnancy √
- b. DXA dose audit ✓
- c. Referrer entitlement ✓
- d. Scan justification \checkmark
- e. Other- please state
- f. unknown

4) What clinical protocols do you have in place? Please tick all that apply

- a. Scan site ✓
- b. Scan mode ✓
- c. Reference data selection \checkmark

- d. Patient positioning \checkmark
- e. Scan analysis ✓
- f. Interpretation- T&Z-scores ✓
- g. Reporting ✓
- h. Other- please state
- i. Unknown
- 5) Which of the following are routinely included in the DXA report issued to the PRIMARY CARE referrer? Please tick all that apply
- a. Admin. details
 - i. Date of assessment \checkmark
 - ii. Patient ID and demographics \checkmark
 - iii. Reason for referral √
 - iv. Reporter's ID \checkmark
- b. BMD results for each measurement site \checkmark
 - i. T score (after peak bone mass) \checkmark
 - ii. Z score √
 - iii. Rate of change for serial measurements Unknown
- c. Comment on reliability of measurements
 - i. BMD results \checkmark
 - ii. Documentation of excluded measurements eg vertebrae \checkmark
 - iii. Statistical significance of rate of change \checkmark
 - iv. Clinical significance of rate of change Unknown
- d. WHO diagnostic category (for adults after peak bone mass) \checkmark
- e. Results of additional investigations performed at DXA appointment
 - i. VFA Unknown
 - ii. X-ray or other imaging \checkmark
 - iii. Laboratory tests Unknown
- f. Summary of clinical risk factors for fracture ✓
- g. Summary of fracture history \checkmark
- h. Clinical interpretation to quantify absolute fracture risk
 - i. FRAX+BMD ✓
 - ii. FRAX + TBS- Unknown
 - iii. FRAX+BMD plus comment on additional adjustment Unknown
 - iv. Statement on level of risk based on clinical judgement (eg low/moderate/high) ✓
- i. Management advice
 - i. Reference to national guideline (NICE/NOGG/ROS) ✓
 - ii. Reference to local management guideline ✓
 - iii. Individualised advice \checkmark
- j. Recommendations on:
 - i. Need for onward referral eg falls assessment or additional investigation \checkmark
 - iii. Timing of future scan ✓
- 6) Which of the following are routinely included in the DXA report issued to the SECONDARY CARE referrer? Please tick all that apply

Reports for Primary and Secondary care are reported according to the same criteria.

- a. Admin. details
 - i. Date of assessment \checkmark
 - ii. Patient ID and demographics \checkmark
 - iii. Reason for referral √
 - iv. Reporter's ID \checkmark
- b. BMD results for each measurement site

- i. T score (after peak bone mass) \checkmark
- ii. Z score √
- iii. Rate of change for serial measurements
- c. Comment on reliability of measurements
 - i. BMD results \checkmark
 - ii. Documentation of excluded measurements eg vertebrae \checkmark
 - iii. Statistical significance of rate of change ✓
 - iv. Clinical significance of rate of change
- d. WHO diagnostic category (for adults after peak bone mass) ✓
- e. Results of additional investigations performed at DXA appointment
 - i. VFA
 - ii. X-ray or other imaging \checkmark
 - iii. Laboratory tests
- f. Summary of clinical risk factors for fracture ✓
- g. Summary of fracture history ✓
- h. Clinical interpretation to quantify absolute fracture risk
- i. FRAX+BMD √
 - ii. FRAX + TBS
 - iii.FRAX+BMD plus comment on additional adjustment

iv. Statement on level of risk based on clinical judgement (eg low/moderate/high) ✓

- i. Management advice
 - i. Reference to national guideline ✓
 - ii. Reference to local management guideline ✓
 - iii. Individualised advice √
- j. Recommendations on:
 - i. Need for onward referral eg falls assessment or additional investigation \checkmark
 - ii. Timing of future scan ✓
- k. The secondary care report is the same as the primary care report \checkmark

The Trust currently does not have a DEXA lead radiographer therefore the responses has been formulated on prior knowledge of the service and interrogation of scan reports.

If you are not entirely satisfied with this response, please do not hesitate to contact the Information Governance Department on email address provided. If we do not hear from you within 28 days, we will assume that we have been able to accommodate your request under the Freedom of Information Act 2000.

Yours sincerely,

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Hazel Hendriksen Divisional Director of Operations for Specialist Services

PLEASE NOTE:

If you are unhappy with the service you have received in relation to your request and wish to make a complaint or request a review of our decision, you should write to: Information Governance Department, Wrightington, Wigan and Leigh NHS Foundation Trust, Suite 9, Buckingham Row, Brick Kiln Lane, Wigan, WN1 1XX.

If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a decision at:

The Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire, SK9 5AF

Helpline number: 0303 123 1113