East London
NHS Foundation Trust
Information Governance
Robert Dolan House
9 Alie Street
London
E1 8DE

Email elft.foi@nhs.net
Website: https://www.elft.nhs.uk

12th June 2026

Our reference: FOI DA6659

We are responding to your request for information received 10th June 2026. This has been treated as a request under the Freedom of Information Act 2000.

We are now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact us on the contact details above if you have any further queries.

Yours sincerely,

FOI Team

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

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

Tel: 0303 123 1113
Web: www.ico.org.uk

Please note that the data supplied is not allowed to be re-used and/or published without the explicit consent of East London NHS Foundation Trust. Please contact the signatory to request permission if this is your intention

Request:

Question 1: **Part A: Outsourcing arrangements**
Please answer the following questions in relation to the six complete financial years ending 31 March 2026 (i.e. 2020/21 to 2025/26) unless otherwise stated.
A1. Identity of Outsourced Providers
Please provide a list identifying each external or outsourced radiology reporting provider engaged by the Trust during the relevant period, stating for each:
(a) the company name and registered address;
(b) the contract commencement and expiry or termination date; and
(c) the imaging modalities covered (for example, MRI, CT, plain film/X-ray, ultrasound, nuclear medicine, or other). Where a single provider covered multiple modalities under separate arrangements, please list each separately.
A2. Annual Expenditure on Outsourced Reporting
Please state the total actual expenditure incurred by the Trust on outsourced radiology reporting services for each of the six financial years specified above, expressed as an annual figure. Please confirm whether the figures provided are inclusive or exclusive of VAT.
A3. Volume Split: Outsourced versus In-House Reporting
Please provide, for each of the six financial years specified above, the total number of radiology reports generated and the proportion fulfilled by
(a) outsourced providers
(b) in-house NHS radiologists, expressed both as absolute numbers and as a percentage of total volume. Where data is held by modality type, please provide the breakdown accordingly.

PART B: GOVERNANCE AND QUALITY ASSURANCE
B1. Quality Assurance Policies
Please describe the quality assurance processes and standards applied by the Trust to radiology reports produced by outsourced providers, including any minimum reporting standards, turnaround time requirements, and escalation procedures. Please provide copies of any written policies, protocols or frameworks currently in force, or those in force at any time during the relevant period.
B2. Audit of Outsourced Reporting Accuracy
Please describe how the Trust audits or otherwise monitors the clinical accuracy and quality of reports produced by outsourced providers. Please provide copies of the findings, outcomes and recommendations of any such audits or quality reviews carried out during the relevant period, including any discrepancy rates identified.
B3. Registration and Professional Standards Requirements
Please confirm whether the Trust requires, as a contractual condition or as a matter of policy, that all radiologists engaged by outsourced providers hold:
(a) full registration with the General Medical Council (GMC) with a licence to practise; and/or
(b) Fellowship of the Royal College of Radiologists (FRCR) or equivalent qualification.
If different or lesser requirements are applied, please specify what standards are required and on what basis.
B4. Verification of Individual Radiologist Competency
Please describe the process by which the Trust verifies, at the time of contract award and on an ongoing basis, the qualifications, subspecialty expertise, revalidation status and clinical competency of the individual

radiologists engaged by outsourced providers to report on Trust patients' imaging. Please include details of any approved list, credential framework, or sign-off process used.

PART C: PATIENT SAFETY INCIDENTS AND REPORTING DISCREPANCIES

C1. Serious Incidents and Patient Safety Events

For each of the six financial years specified in Part A, please state the total number of Serious Incidents (SIs) or patient safety events recorded on the Trust's incident reporting system (including Datix or any successor system) in which a radiology report was identified as a causative, contributory or associated factor, as follows:

(a) incidents involving a report produced by an outsourced provider; and

(b) incidents involving a report produced by an in-house radiologist.

For each category, please provide the year of occurrence, the incident category or classification applied, and the recorded outcome or learning.

C2. Peer Review Discrepancy Findings

Please confirm the number of significant or clinically relevant discrepancy findings identified through peer review, retrospective review, or multi-disciplinary team processes in relation to outsourced radiology reports, assessed by financial year and by provider name.

A 'significant discrepancy' should be understood to mean a finding that resulted in, or had the potential to result in a change in patient management.

Please also provide the equivalent figures for in-house reporting for comparison, where held.

C3. Contract Suspensions or Terminations on Patient Safety Grounds

Has the Trust at any time suspended the use of, or terminated a contract with, any outsourced radiology provider due to concerns about patient safety, clinical quality or reporting standards? If so, please provide for each instance:

(a) the name of the provider concerned;

(b) the date of suspension or termination;

(c) the stated reason(s); and

(d) any action taken to notify or review the care of patients whose imaging was reported by that provider during the period of concern.

Part D: Complaints

D1. Formal Complaints Relating to Radiology Reporting

Please state the total number of formal complaints received by the Trust under the NHS Complaints Procedure (as set out in the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009) during each of the six financial years specified in Part A, which wholly or in part concerned radiology reporting, as to:

(a) complaints relating to reports produced by outsourced providers; and

(b) complaints relating to reports produced by in-house radiologists.

Please also confirm the number of those complaints that were upheld or partially upheld.

Part E: Clinical negligence claims and litigation

E1. Claims Involving Radiology Reporting

Please state the total number of clinical negligence claims notified to the Trust (whether under the Clinical Negligence Scheme for Trusts, NHS Resolution, or otherwise) during the six financial years specified in Part A, in which a radiology report was identified as a causative or contributory factor, as to:

(a) claims involving a report produced by an outsourced provider; and

(b) claims involving a report produced by an in-house radiologist.

Please note that we do not seek details of individual claims or any information from which a living individual could be identified.
E2. Value of Settled Claims
Please state the total quantum of damages and costs paid in respect of settled clinical negligence claims during the six financial years specified in Part A, where
(a) outsourced radiology reporting and
(b) in-house radiology reporting was identified as a causative or contributory factor.
Where the Trust does not hold this information, please indicate whether it is held by NHS Resolution and provide signposting accordingly.
E3. Referring Clinical Specialties in Outsourced Radiology Claims
In respect of clinical negligence claims involving outsourced radiology as a causative or contributory factor (as identified in question E1(a) above), please identify the clinical specialties that were the primary referring specialty, ranked in order of frequency. This information is sought in aggregate and anonymised form only.

Part F: Clinical integration and communication protocols
F1. Access to Prior Imaging and Clinical Information
Please describe the protocols and systems in place to ensure that outsourced radiologists, at the time of reporting, have access to:
(a) prior and comparator imaging held by the Trust or available via national image-sharing infrastructure;
(b) relevant clinical history and indication for the examination; and
(c) electronic patient records or relevant clinical documentation. Please provide copies of any written protocols or guidance currently in force.
F2. Communication of Urgent and Critical Findings
Please describe the Trust's policy and procedure for the communication of urgent or critical imaging findings from outsourced reporting providers to the responsible clinical team, including:
(a) the Trust's target timeframe for communication of a critical result;
(b) the actual recorded average or median timeframe for such communication during the relevant period, where data is held; and
(c) the escalation pathway if communication is not acknowledged within the target timeframe.
F3. Clinician Query and Clarification Process
Please describe the process available to a referring clinician who wishes to query, seek clarification on, or formally dispute the content of a report produced by an outsourced radiologist. Please specify any timeframe within which the outsourced provider is required to respond, and how such queries are documented.

Part G: Oversight, contractual standards and regulatory findings
G1. Key Performance Indicators and Service Level Agreements
Please provide copies of the Key Performance Indicators (KPIs) and Service Level Agreement (SLA) provisions contained within written contracts between the Trust and each outsourced radiology provider during the relevant period.
We acknowledge that certain commercially sensitive pricing provisions may be appropriately redacted; however, we request that KPIs, quality standards, discrepancy thresholds, turnaround times and patient safety provisions be disclosed in full. We invite the Trust to provide a schedule of any redactions made, with brief reasons.
G2. NHS Resolution and Regulatory Recommendations
Has NHS Resolution, the Care Quality Commission, NHS England, the Royal College of Radiologists, or any other regulatory or advisory body made any formal recommendations, findings, risk notices or improvement notices in relation to the Trust's use of outsourced

radiology reporting at any time during the relevant period? If so, please provide details including the date, the body concerned, the nature of any findings, and the Trust's response or actions taken.
G3. Named Clinical and Managerial Responsibility
Please provide the job titles (but not the personal names) of the individual(s) who hold named clinical and managerial responsibility within the Trust for:
(a) oversight of the quality and safety of outsourced radiology reporting; and
(b) contract management and performance monitoring of outsourced radiology providers.
G4. Policies Governing Reporting Standards
Please provide copies of any policies, frameworks or standard operating procedures in place to ensure that outsourced radiology reporting is carried out to the required clinical and professional standard, including any minimum competency requirements, escalation policies, and processes for addressing identified underperformance.
G5. Participation in MDT and Discrepancy Meetings
Are outsourced radiologists required or invited to participate in multi-disciplinary team (MDT) meetings, radiology discrepancy meetings, morbidity and mortality meetings, or internal clinical investigations involving their reports?
Please describe any such arrangements and the policy basis for them.
G6. Process for Addressing Identified Errors
Where a clinically significant discrepancy or error is identified in a report produced by an outsourced radiology provider, please describe:
(a) the process by which the Trust notifies the outsourced provider of the finding;
(b) the process for reviewing whether other patients reported by the same radiologist may be affected;
(c) any duty of candour obligations engaged and how they are discharged; and
(d) the mechanism for feeding findings back into the quality assurance framework.

Answer: The Trust has reviewed question 1 of your request for information under the Freedom of Information Act (FOI) 2000.

Section 1(1) of the Freedom of Information Act 2000 states:
Any person making a request for information to a public authority is entitled—
(a) to be informed in writing by the public authority whether it holds information of the description specified in the request, and
(b) if that is the case, to have that information communicated to them.

East London NHS Foundation Trust is primarily a Mental Health and Community Health Trust and as such does not provide radiology services. The Trust is therefore unable to provide a response.