

Clinical Diagnostic Strategy

Staffordshire and Stoke-on-Trent

2025-2030

Contents

Page

Introduction

[2](#)

What are Diagnostics

[2](#)

The Role of Diagnostics in the NHS

[2](#)

Staffordshire and Stoke-on-Trent Diagnostics Development

[2](#)

Staffordshire and Stoke-on-Trent NHS System Providers - Our role

[3](#)

About this Strategy

[3](#)

Strategy Aim

[3](#)

Our Objectives

[3](#)

Our Outcomes

[3](#)

Our Commitment and Leadership

[4](#)

West Midlands Clinical Diagnostics Strategy

[4](#)

Areas of Focus for Our Strategy

[4](#)

Our Areas of Focus

[5-7](#)

Our Approach

[8](#)

Diagnostic Reform

[8](#)

Community Diagnostic Centres

[8](#)

Symptom-Based Clinical Diagnostic Pathways

[8](#)

Our Key Enablers

[9](#)

Our Vision

[10](#)

Objectives to Support Our Vision

[10](#)

Delivery and Success

[10](#)

Strategic Adaptability

[10](#)

Measuring the Success of Our Strategy

[10](#)

Introduction

What are Diagnostics?

Diagnostics are tests or procedures used to identify a person's disease or condition. They are an essential component of a patient's healthcare pathway and more than 85% of people seeking care require diagnostics.

The Role of Diagnostics in the NHS

Diagnostics has a critical role in preventive health by improving early detection of illness and prompt diagnosis can save lives – for example, early diagnosis of cancer substantially improves survival rates.

Across England, work has begun to make it easier for patients to access diagnostics through the establishment of Community Diagnostic Centres (CDCs). This is in line with the NHS Long Term Plan and Professor Sir Mike Richards report *Diagnostics: Recovery and Renewal* which recommended significant reform and investment in diagnostic services. The creation of CDCs will increase and optimise diagnostics capacity and will improve efficiency which, in turn, will reduce waiting times, improve patient experience and facilitate earlier diagnosis of a range of conditions.

In 2025, NHSE released its 2025/26 priorities and operational planning guidance which included the publication of an elective reform plan making clear the steps needed to ensure the 18-week elective care standard is met by March 2029. This reinforced that the reform of diagnostics, through the provision of CDCs and the standards to which they operate, is integral to achieving this standard.

Staffordshire and Stoke-on-Trent Diagnostics Development

There is no doubt that investment in facilities, equipment and workforce, alongside the replacement of obsolete equipment, is necessary to support the reform of diagnostic services and if we are to achieve improved outcomes in conditions such as cancer, respiratory and heart disease.

The formation of CDCs across Staffordshire and Stoke-on-Trent (SSOT) signifies the investment strides being taken locally to developing and improving diagnostic services. Some of the key benefits of our CDCs will be that there will be greater availability of diagnostic tests and procedures in the community and quicker access to these meaning most patients will not need travel to a hospital.

However, since 2019 and as illustrated in Figure 1, total demand across SSOT diagnostics services has risen by 84%. For CT, MRI and NOUS, growth has been exponential from 43% (MRI) and 162% (NOUS) and there is no sign that the increases observed will slow. Consequently, more people are waiting longer for their diagnostics which leads to poor patient experience and poorer health outcomes.

This means that much of our resource, time and attention is given to responding to demand pressures which limits our ability to make improvements. As a minimum, therefore, this diagnostic strategy shall plan for growth to continue at current levels over the next five years and sets out the immediate, medium and long-term actions we will undertake to deliver the excellent diagnostic services our population needs now and deserves in the future. This strategy shall provide the basis from which a detailed delivery plan shall be developed at system level, and which allows us to measure our success.

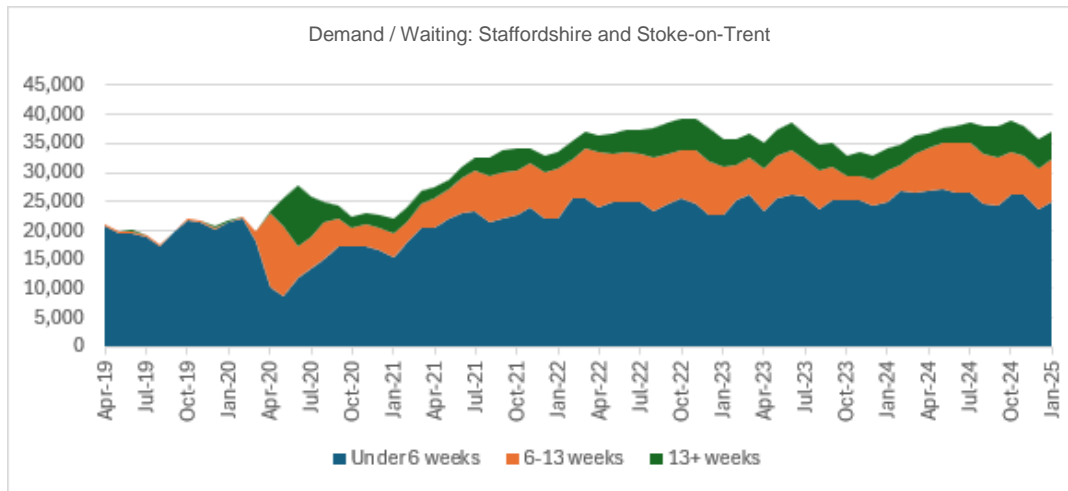


Figure 1: Staffordshire and Stoke-on-Trent Diagnostic Demand 2019-2025

Staffordshire and Stoke-on-Trent NHS System Providers – Our Role

By working together, we can leverage and coordinate investment and actions for the challenges we face as a system for the people of Staffordshire and Stoke-on-Trent. By using evidence to inform our actions, we will improve the health and wellbeing of our population and create modern and sustainable diagnostic services locally.

About this Strategy

Strategy Aim

This 5-year strategy has been prepared by the partners of the Staffordshire and Stoke-on-Trent NHS Integrated Care System (SSOTICS) specifically to serve the population of Staffordshire and Stoke-on-Trent. It is a shared strategy that requires partnership working and collaboration in order that patients get the best possible diagnostic care and support that they need, when they need it – it is, therefore, referred herein as ‘our’ strategy.

Our aim through our strategy is to highlight the key Areas of Focus and actions needed that will support the development and future-preparedness of our diagnostic services. By implementing these, we will ensure that the strategy aim is fulfilled and that our services are in a position to respond effectively to both current and future demand for diagnostics – this will support us in moving toward an optimised delivery model that realises the best outcomes for our population.

Our Objectives

The summary objectives of our Strategy are to:

- Enhance our capacity for diagnostic services to meet growing demand
- Manage SSOT system-wide demand through reviewing access and referrals
- Implement technological advancements and innovations
- Improve access to diagnostics, reducing inequalities in healthcare
- Foster integration across care pathways and multidisciplinary collaboration
- Ensure financial sustainability while maintaining high-quality services

Our Outcomes

The summary outcomes aligned to these objectives are to:

- Achieve better outcomes for our population from earlier diagnosis
- Reduce health inequalities and enhance patient experience from personalised care
- Join up care between Secondary Care, Primary Care and Community Services
- Optimise resources, streamline pathways and reduce inefficiencies
- Increase capacity from investment and reduce demand pressures on hospitals

Our Commitment and Leadership

The ambition and success of our strategy is underpinned by the commitment of the partners of the SSOTICS. By working together, with patients, we will achieve long-term sustainable transformation of our diagnostic services which will lead to a positive impact on both our population health and in reducing health inequalities. Our strategy shall be accountable for its delivery to the SSOT Diagnostic Steering Group.

West Midlands Clinical Diagnostics Strategy

Our strategy will work closely with, and alongside, both national and regional diagnostic developments to ensure it is relevant and up to date. Its preparation considers the principles and themes of the NHS West Midlands Clinical Diagnostics Strategy to ensure alignment of our Areas of Focus to these.

Areas of Focus for Our Strategy

For our strategy to achieve its objectives and outcomes, it must move beyond its written state to activation and to a change where it is understood, embraced and where everyone is engaged and aligned to its aim. To support this, we have identified the key tasks which '*We Will*' undertake and which are our target priorities - these are our *Areas of Focus* and where we will invest resource. Within each of the Areas of Focus, we describe the activators that, when enacted, shall define our strategy and bring it to life.

Our Areas of Focus

1. Demand Forecasting & Capacity Building

Demand

We Will:

“Assess Current and Future Demand”

We'll achieve this by:

- Conducting annual reviews of diagnostic demand based on population growth, age, demographic and evolving clinical needs, inclusive of urgent, inpatient & cancer demand
- Analysing usage patterns (pathology, radiology, endoscopy & molecular diagnostics) to predict future demand
- Leveraging population health management tools and predictive analytics for demand forecasting
- Removing unwarranted demand and duplication e.g. implementation of diagnostic pathways

Capacity

We Will:

“Expand Diagnostic Capacity”

We'll achieve this by:

- Investing in additional diagnostic infrastructure such as imaging equipment e.g., MRI, CT, PET scanners, labs and point-of-care testing facilities
- Collaborating with community healthcare services to offer diagnostic services closer to home - easing hospital pressures
- Recruiting, training, and retaining skilled workforce, including radiographers, laboratory scientists, and support staff

2. Technology, Innovation & Digital Transformation

Technology

We Will:

“Maximise on Cutting-Edge Technologies”

We'll achieve this by:

- Implementing AI-powered diagnostic tools especially in radiology and pathology to enhance accuracy and reduce turnaround times
- Exploring use of wearable technologies for remote monitoring and diagnostics, especially in chronic disease management
- Roll out Point of Care testing in CDCs – aim to reduce conveyances with treatment decision made at location
- Adopt molecular diagnostics and genomic testing for personalised medicine and earlier diagnosis of complex diseases

Innovation

We Will:

“Develop a Digital Infrastructure”

We'll achieve this by:

- Transitioning to fully integrated electronic health records (EHRs) that link diagnostic services across care hospital, primary care & community settings
- Implementing digital pathology, telemedicine, and teleradiology solutions for remote consultation and second opinions
- Using cloud-based data storage and sharing systems to ensure seamless access to diagnostic results for patients and clinicians across the NHS

Transformation

We Will:

“Explore the use of AI and Machine Learning”

We'll achieve this by:

- Researching, assessing and adopting approved emerging technologies and accelerate at scale
- Working with academic and commercial partners to deploy AI-driven algorithms for early detection of diseases, such as cancer screening
- Using machine learning for predictive analytics identifying patients at high risk of specific conditions before symptoms present
- Supporting and reminding patients of pre-diagnostics preparedness

3. Mobile Community

Community Based Diagnostics

We Will:

“Deliver within Neighbourhood Settings”

We'll achieve this by:

- Developing mobile diagnostic services to provide care in community and local neighbourhood settings to help reduce the need for hospital-based diagnostics
- Partnering with Integrated Care Systems to deliver diagnostic services in primary care settings, focusing on high-demand areas such as cancer and cardiovascular disease

4. Workforce

Workforce Development

We Will:

“Upskill our Workforce and Address Shortages”

We'll achieve this by:

- Implementing training programs in new diagnostic technologies including AI, genomics and molecular diagnostics
- Fostering MDT working
- Integrating care pathways by training staff in collaborative care models
- Developing apprenticeships and partnering with local Universities to increase the pipeline of professionals in radiology, pathology, and laboratory services
- Creating flexible working arrangements and roles to retain existing staff and attract a new, diverse workforce

5. Service Integration and Collaboration

Integration

We Will:

“Integrate Services Across Care Pathways”

We'll achieve this by:

- Developing pathways that integrate diagnostic services within primary, secondary and tertiary care, ensuring swift transitions between different levels of care
- Asking ourselves, what does diagnostics enable us to do differently and, if we did 'this' therefore we don't need to do 'this'
- Upskilling GPs to trigger the diagnostic pathway then triage for appropriate onward referral
- Collaborating regionally with other NHS partners to deliver shared diagnostic services, reducing duplication and inefficiencies

Collaboration

We Will:

“Develop MDT-Based Diagnostics”

We'll achieve this by:

- Facilitating collaborative diagnostics by establishing MDTs for complex conditions such as cancer, cardiovascular disease and infectious diseases
- Standardising and integrating diagnostic processes to ensure continuity of care across specialties

6. Sustainability

Sustainability & Environmental

We Will:

“Reduce our Carbon Footprint and Align NHS Net Zero”

We'll achieve this by:

- Using energy-efficient technologies in diagnostic equipment and infrastructure
- Promoting sustainable practices, such as reducing paper-based processes, adopting digital tools and minimising waste
- Prioritising investments in green technologies
- Working towards creating a low-carbon diagnostic infrastructure by 2030

7. Quality, Safety and Governance

Governance

We Will:

“Standardise Protocols and Data Governance”

We'll achieve this by:

- Ensure consistent application of diagnostic protocols and guidelines across SSOT ICS
- Conduct regular audits and peer reviews to maintain high standards of accuracy and reliability in diagnostics
- Ensure compliance with data protection regulations (GDPR) in handling patient data for diagnostics
- Maintain transparency in diagnostic processes and patient communication

Patient Care

We Will:

“Involve Patients to Ensure Patient Centered Care”

We'll achieve this by:

- Engage patients in the diagnostic process, ensuring they are informed and involved in decision-making
- Develop feedback mechanisms to continually improve diagnostic services based on patient and clinician input
- Explore adoption of patient-initiated pathways e.g. Oldham trial chest x-ray

8. Reducing Inequalities / Enhancing Access

Inequalities

We Will:

“Improve Whole Population Access”

We'll achieve this by:

- Develop targeted outreach and diagnostic services for underserved populations, including ethnic minorities and socioeconomically disadvantaged groups
- Implement flexible access models such as extended hours and weekend services to reduce waiting times and accommodate patient needs

Accessibility

We Will:

“Widen the Use of Digital Platforms”

We'll achieve this by:

- Provide patients with access to digital portals to view diagnostic results, schedule tests, and receive reminders
- Implement virtual diagnostic consultations where appropriate, reducing the need for in-person visits and improving convenience for patients

9. Estates

Facilities

We Will:

“Utilise and Modernise our Facilities”

We'll achieve this by:

- Utilise community diagnostic centres to deliver the objectives of the strategy
- Invest capital in upgrading diagnostic facilities to meet decontamination and accreditation standards whilst maximising patient flow
- Drive innovation and efficiency – moving from old hospital-based models and creating laboratory environments

Our Approach

We understand the critical role diagnostics has in our population's care. However, the effects of the Covid-19 pandemic have caused severe disruption to the delivery of our healthcare and there remains continuing impacts from the resulting backlogs of people waiting for their diagnostics. Additionally, the demand for these services is outpacing available capacity which has compounded delays and increased pressure on our workforce. We understand that these factors will have a negative impact on our population health as well as our overall healthcare system and so it is vital we prepare our diagnostic services to be adaptable and fit for today as well as ready and sustainable for the future.

Our Areas of Focus provide us the opportunity to do this and to commence dynamic transformation of our diagnostic services. Our approach to realising this shall be with urgency and through coordinated planning with all of our health system partners, including patients and clinical and service experts, and through delivery of the activators within our Areas of Focus. This shall support our aim that our population has access to modern and efficient diagnostic services, and which is timely and sufficient to inform the clinical management of their condition.

Diagnostic Reform

The Report of the Independent Review of Diagnostic Services for NHS England, *Diagnostics Recovery and Renewal*, sets out, emphatically, the case for the reform of diagnostic services and that new service models are needed. Evidence makes clear that there has been a deterioration in diagnostic performance and health outcomes and, as a result, longer waiting times for elective care.

Community Diagnostic Centres

Key to this reform and the future success of diagnostic services is the development of Community Diagnostic Centres which shall provide an increase in diagnostic capacity through new facilities, equipment and training and offer a range of diagnostic testing, including Imaging, Pathology, Physiological Science and Cardiology tests, in a single, community-based location. For the Staffordshire and Stoke-on-Trent population, our CDC locations are as follows:

- In the South/South-West of Staffordshire, our CDC is located at Cannock Chase Community Hospital - this CDC is managed by the Royal Wolverhampton NHS Trust under the commissioning responsibility of the NHS Black Country ICB.
- In the East of Staffordshire, our CDC is located at Sir Robert Peel Community Hospital – this CDC is managed by the University Hospitals of Derby and Burton under the commissioning responsibility of the NHS Derby and Derbyshire ICB.
- In the North of Staffordshire and Stoke-on-Trent, our CDC is located in Hanley – this CDC is managed by the University Hospitals of North Midlands and under the commissioning responsibility of the Staffordshire and Stoke-on-Trent ICB.

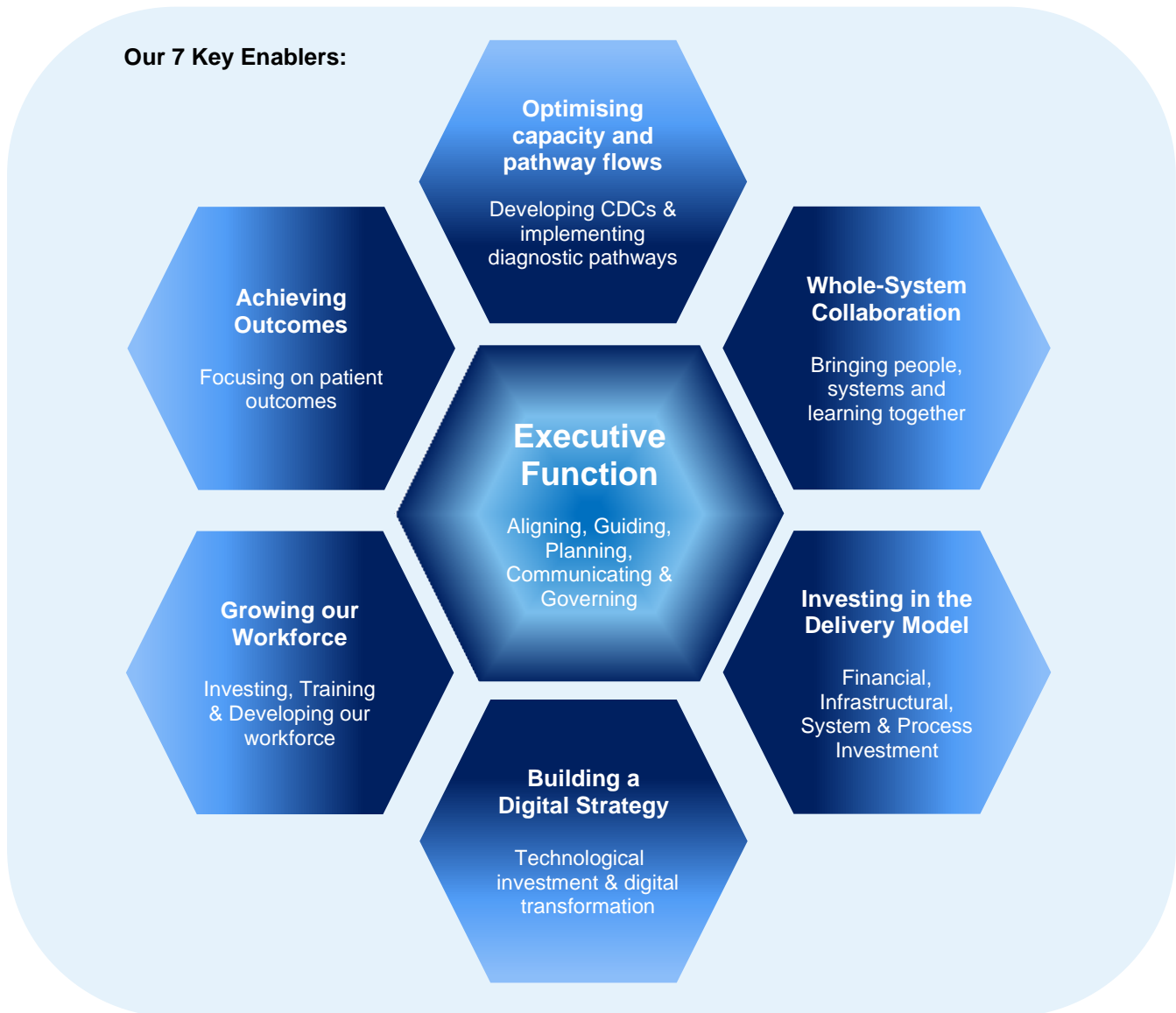
Symptom-Based Clinical Diagnostic Pathways

Successful diagnostic reform also requires that pathways to diagnosis are made clear between primary care and secondary care and that these encompass referral criteria, clinical decision making and communication of diagnostic findings. In line with this and as stated within our Areas of Focus, our strategy incorporates the development of diagnostic pathways which shall outline the sequence and timing of diagnostic interventions from a patient's presenting symptoms.

Together, our CDCs and pathway development shall improve population health outcomes by diagnosing health conditions earlier and more accurately and both are integral to the recovery of our diagnostic services and core to their transformation.

Our Key Enablers

Our strategy shall bring about a programme of change, transformation and improvement to our diagnostic services which shall overlap with national and regional diagnostic developments. The crucial factors that will empower us to achieve this are identified as our 7 key enablers. Led by the Executive Function (via our Diagnostic Steering Group), each enabler shall fulfill a function that brings our system-wide capabilities, resources and processes together to enable a coordinated approach to deliver against current and future diagnostic challenges. Jointly, these enablers shall support us in executing the strategy to achieve its aim and its long-term success.



Our Vision

Our vision for diagnostic services is a future where everyone living within Staffordshire and Stoke-on-Trent has access to faster, more accurate and personalised diagnostics driven by AI, automation and innovative technologies, and which leads to earlier detection and treatment of health conditions and a healthier population.

Objectives to Support Our Vision

To transform our diagnostic services and ensure their preparedness for longer term sustainability, our strategy commits to expanding diagnostic capacity, improving access to reduce health inequalities and leveraging technology – these shall support our vision. In addition, we shall:

- Identify unmet diagnostic demand for urgent conditions in alignment with the Elective Care Recovery Plan.
- Transform services and shift to patient-centred care, integrated systems and community-based approaches.
- Create and sustain safe services with symptom-based pathways and structured frameworks that align our workforce to our strategy.
- Use facts and data analysis in our decision-making ensuing decisions are objective and evidence based.
- Link screening and surveillance evidence to our ICS prevention agenda.
- Foster an environment conducive to research and development, that is provided adequate resource to be effective and successful and which cultivates a culture of collaboration and open communication.
- Align and connect this strategy to wider national, regional and local system strategies and plans ensuring relevance and focus to a common goal.

Delivery and Success

Strategic Adaptability

Through our Executive Function enabler, we shall remain engaged with our NHS partners, statutory advisory bodies, national programmes and stakeholder groups so as to ensure our strategy is flexible and agile and responds to changes during its lifetime. To assist in the successful enactment of our strategy and alignment of our delivery plan to regional developments, we shall connect to the West Midlands Diagnostics Transformation Board chaired by a Senior Responsible Officer and a National Clinical Lead for Diagnostics.

Measuring the Success of Our Strategy

In line with our Areas of Focus, our delivery plan shall define the scope of implementing our strategy and outline the goals, deliverables, responsibilities and resources included so as ensure clarity of delivery expectations. This plan shall serve as a framework for evaluating our progress and determining, through defined metrics, data analysis and regular reviews, if we are on track to achieve our aim. Our Diagnostic Steering Group shall monitor progress of our strategy ambitions.