

KH-OP-035 – Local Access Policy

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KH-OP-035 – Local Access Policy

1. Purpose

The purpose of this Local Access Policy is to set out how patients access Kleyn Healthcare's community ultrasound services. It describes the accepted referral routes, patient eligibility, referral management, appointment booking, cancellation and DNA processes, reporting arrangements, escalation routes and discharge from the service.

This policy is intended to support safe, consistent and timely access to community ultrasound appointments across all Kleyn Healthcare community ultrasound contracts.

2. Scope

This policy applies to all Kleyn Healthcare staff involved in the delivery, administration, management and clinical oversight of community ultrasound services.

This includes:

- Administrative staff receiving, checking and processing referrals.
- Sonographers undertaking ultrasound examinations and clinical vetting where required.
- Clinical Leads and senior clinicians providing advice, escalation and oversight.
- Operational managers responsible for capacity, access, performance and service delivery.
- Governance staff responsible for monitoring compliance, incidents, complaints and service quality.

This policy applies to all Kleyn Healthcare community ultrasound contracts, including NHS-funded pathways and private ultrasound referrals where accepted by the service.

3. Service Overview

Kleyn Healthcare provides community-based diagnostic ultrasound services from agreed clinical locations. The service is designed to provide timely access to routine diagnostic ultrasound examinations in a community setting.

The service is not an emergency imaging service. Patients with acute, urgent or emergency symptoms must be directed to the appropriate urgent care, emergency care or secondary care pathway.

Reports are made available to the referrer through the agreed reporting route. Where systems allow, reports are entered directly into the patient record and copied into the clinical journal.

4. Access Routes

KH-OP-035 – Local Access Policy

Referrals may be accepted through the following routes, where agreed within the relevant contract or service pathway:

- NHS e-Referral Service, where available.
- Secure NHS email or agreed electronic referral route.
- Direct referral from contracted NHS GP practices.
- Private referrals, where the service has agreed to accept private ultrasound requests.

Referral routes may vary by contract area and must follow the process agreed with the relevant ICB, PCN, GP practice, commissioner or private service arrangement.

5. Who Can Refer

For NHS-funded community ultrasound services, referrals are accepted from NHS GP practices within the relevant contracted ICB, PCN or practice group.

Referrals are not routinely accepted from outside the agreed contracted pathway unless a specific service arrangement is in place.

Private referrals may be accepted where they meet service criteria and where Kleyn Healthcare has agreed to provide the requested scan privately.

Self-referral is not accepted unless specifically agreed as part of a private or commissioned pathway.

6. Patient Eligibility

Eligibility depends on the contract area and agreed service specification.

The general eligibility criteria are:

- Patients must be registered with, or referred by, an eligible contracted GP practice or service.
- Patients must meet the clinical criteria for community ultrasound.
- Patients must be suitable to be seen safely in a community setting.
- Patients must be able to attend one of the agreed community clinic locations.
- Patients must be aged 16 years or over in Warrington pathways.
- Patients must be aged 18 years or over in Huddersfield/Kirklees pathways.

Where a patient falls outside the age range or contractual eligibility criteria, the referral should be returned to the referrer with an explanation.

7. Scan Types Included

KH-OP-035 – Local Access Policy

The community ultrasound service may accept referrals for the following routine diagnostic ultrasound examinations, subject to local contract specification, clinical appropriateness and sonographer competency:

- Abdomen.
- Pelvis.
- Renal/KUB.
- Testicular.
- Musculoskeletal ultrasound.
- Soft tissue/lumps.
- Neck/thyroid.
- Hernia.
- Gynaecological ultrasound, where included within the relevant service specification.

The range of scans available may vary by contract area, site, equipment, sonographer availability and local pathway agreement.

8. Exclusion Criteria

The community ultrasound service does not provide emergency, acute or complex hospital-based imaging. Referrals may be declined, returned or redirected where they fall outside the agreed service criteria.

Exclusions include, but are not limited to:

- Obstetric or pregnancy scans.
- Emergency or acute presentations.
- Suspected deep vein thrombosis, unless specifically commissioned and agreed.
- Suspected testicular torsion.
- Paediatric scans, unless specifically commissioned and agreed.
- Interventional procedures.
- Complex cases requiring hospital-based imaging or specialist secondary care input.
- Referrals outside the agreed scan types or clinical criteria.
- Patients who are clinically unstable or unsuitable for a community setting.
- Incomplete referrals where essential clinical information has not been provided.

Where an exclusion applies, the referral should be returned to the referrer with a clear reason and, where appropriate, advice to refer through an alternative pathway.

KH-OP-035 – Local Access Policy

9. Referral Information Requirements

Referrals should include sufficient information to allow the service to determine whether the scan is appropriate and safe to perform.

Referral information should include:

- Patient name.
- Date of birth.
- NHS number, where applicable.
- Patient contact details.
- Referring GP practice or clinician.
- Requested scan type.
- Relevant clinical history.
- Reason for referral.
- Relevant symptoms.
- Any mobility, communication, safeguarding or reasonable adjustment needs.
- Any infection prevention or clinical risks known to the referrer.
- Any relevant previous imaging or investigation information, where available.

Incomplete referrals may be returned to the referrer for additional information before an appointment is offered.

10. Referral Review and Vetting

Administrative staff will check referrals for completeness, correct patient details, correct referral route and basic service eligibility.

Where the referral is unclear, incomplete, outside the agreed pathway or may not be clinically suitable for community ultrasound, it should be escalated to a sonographer, Clinical Lead or other appropriate senior clinician for advice.

Clinical vetting may be undertaken where required to confirm:

- Whether the requested scan is appropriate.
- Whether the patient is suitable for community ultrasound.
- Whether the request falls within the commissioned pathway.
- Whether further information is required.
- Whether the patient should be redirected to another service.

KH-OP-035 – Local Access Policy

Inappropriate referrals will be returned to the referrer with the reason documented.

11. Appointment Booking

Once a referral has been accepted, the patient will be contacted to arrange an appointment.

The service will usually contact the patient by:

- Two telephone attempts.
- One text message.
- One letter where there has been no response.

Contact attempts should be documented in the relevant system.

Where the patient cannot be contacted after the agreed attempts, the referral may be returned to the referrer. The referrer should be informed that the patient has not responded to contact attempts.

Appointments will be offered based on clinic availability, patient choice where possible, sonographer availability, scan type and site suitability.

12. Waiting Times

Kleyn Healthcare aims to provide timely access to community ultrasound appointments in line with contractual requirements and service capacity.

Where a two-week scanning standard applies, the service will aim to offer appointments within this timeframe, subject to referral suitability, patient availability, capacity and local contract requirements.

Waiting times and capacity should be monitored as part of routine operational and performance reporting.

13. Patient Cancellations

Where a patient cancels an appointment, the service will normally offer one rebooking opportunity.

Further cancellations should be reviewed on a case-by-case basis, taking into account:

- The reason for cancellation.
- The clinical urgency of the referral.
- The number of previous cancellations.
- Patient vulnerability or reasonable adjustment needs.
- Contractual requirements.

KH-OP-035 – Local Access Policy

- Referrer advice, where appropriate.

Where a patient repeatedly cancels or does not engage with the service, the referral may be returned to the referrer.

14. Did Not Attend Process

Where a patient does not attend an appointment, they will normally be offered one further appointment.

The approach may vary depending on clinical urgency, patient vulnerability, safeguarding concerns, contractual requirements and any information provided by the referrer.

Where a patient does not attend a second appointment, or does not respond to further contact, the referral may be returned to the referrer.

All DNAs and actions taken must be documented.

15. Late Arrival

Where a patient arrives late, the sonographer or clinic team will decide whether the scan can still be completed safely within the remaining clinic time.

If the patient can be seen without compromising clinical quality, patient safety or the appointments of other patients, the scan may proceed.

If there is insufficient time to complete the examination safely or appropriately, the appointment may be rebooked.

16. Reasonable Adjustments and Accessibility

Kleyn Healthcare will make reasonable adjustments where possible to support patients to access the service safely and fairly.

Reasonable adjustments may include:

- Allowing additional time where available.
- Supporting patients with communication needs.
- Arranging accessible clinic locations where available.
- Supporting patients who require a carer, advocate or support person.
- Considering same-sex sonographer requests where possible.

Same-sex sonographer requests will be accommodated where possible but cannot be guaranteed.

Where room size and clinical safety allow, a support person may sit in during the appointment.

KH-OP-035 – Local Access Policy

17. Chaperones

A chaperone will be available where required or requested.

Patients should be informed of their right to request a chaperone for intimate examinations. The presence or offer of a chaperone should be documented in line with the organisation's Chaperone Policy and clinical record keeping requirements.

Where a chaperone is required but not available, the appointment may need to be delayed or rebooked unless the patient chooses to proceed and it is clinically appropriate and safe to do so.

18. Consent

Valid consent must be obtained before any ultrasound examination is undertaken.

The sonographer must explain the nature of the examination in a way the patient can understand, including what will happen, the area to be scanned and any requirement to adjust clothing or expose part of the body.

Patients have the right to decline or stop the examination at any time.

Where a patient lacks capacity or where there are concerns about consent, the matter must be managed in line with the organisation's Consent Policy, Mental Capacity Act Policy and Safeguarding Policy.

19. Reporting and Results

Reports are completed and sent to the referrer through the agreed reporting route.

Where system access allows, reports are entered directly into the patient record and copied into the journal. This means reports are generally available to the referrer immediately once completed.

Kleyn Healthcare operates a hot reporting process. Reporting turnaround times may vary depending on pathway, system availability, clinical complexity and operational factors.

Patients should be advised that results will be sent to the referring clinician and that they should contact their GP practice or referrer for follow-up advice unless told otherwise.

20. Urgent or Unexpected Findings

Where a sonographer identifies urgent, significant or unexpected findings, these must be escalated in line with the organisation's clinical escalation process.

The referring GP practice should be contacted where urgent clinical action or review may be required.

The escalation should be documented clearly, including:

- The nature of the concern.

KH-OP-035 – Local Access Policy

- Who was contacted.
- Date and time of contact.
- Advice given or action agreed.
- Any follow-up required.

Where the patient requires urgent or emergency assessment, the patient should be advised to access the appropriate urgent care or emergency pathway, and the referrer should be informed.

21. Discharge from the Service

Patients are normally discharged from the community ultrasound service when:

- The scan has been completed and the report has been sent to the referrer.
- The referral is found to be inappropriate or outside service criteria.
- The patient declines the appointment.
- The patient does not respond to contact attempts.
- The patient repeatedly cancels or does not attend.
- The patient requires an alternative pathway or hospital-based service.

Discharge or return of referral should be communicated to the referrer with the reason documented.

22. Patient Communication

Patients should be given clear information about:

- Appointment date, time and location.
- Any preparation required before the scan.
- What to bring to the appointment.
- What to do if they need to cancel or rebook.
- How results will be communicated.
- The role of the referrer in providing follow-up.

Communication should be clear, respectful and accessible.

23. Safeguarding

All staff must remain alert to safeguarding concerns involving adults, young people and vulnerable patients.

KH-OP-035 – Local Access Policy

Any safeguarding concern identified before, during or after an appointment must be escalated in line with the organisation's Safeguarding Policy.

Where there is an immediate risk of harm, staff must take appropriate urgent action and inform the relevant safeguarding lead or emergency service as required.

24. Infection Prevention and Control

Kleyn Healthcare staff must follow the organisation's infection prevention and control requirements for equipment, hand hygiene, cleaning between patients and safe clinical practice.

Where services are delivered from host GP practice sites, the room and building remain under the responsibility of the host site unless otherwise agreed. Kleyn Healthcare is responsible for ensuring its own equipment and staff practice meet infection prevention and control standards.

Ultrasound machine servicing is undertaken in line with the organisation's equipment maintenance arrangements.

25. Roles and Responsibilities

Administrative Staff

Administrative staff are responsible for:

- Receiving and processing referrals.
- Checking referrals for completeness.
- Contacting patients to arrange appointments.
- Recording contact attempts.
- Managing cancellations and DNAs in line with this policy.
- Returning referrals to referrers where appropriate.
- Escalating concerns to clinical or operational leads.

Sonographers

Sonographers are responsible for:

- Confirming patient identity.
- Obtaining consent.
- Undertaking the ultrasound examination safely and professionally.
- Documenting relevant clinical information.
- Completing the ultrasound report.
- Escalating urgent or unexpected findings.

KH-OP-035 – Local Access Policy

- Seeking advice where referrals appear inappropriate or clinically unsuitable.

Clinical Lead / Senior Clinician

The Clinical Lead or nominated senior clinician is responsible for:

- Providing clinical advice on referral suitability.
- Supporting escalation of urgent findings.
- Reviewing clinical issues or concerns.
- Supporting audit, quality assurance and service improvement.
- Advising on complex or borderline referrals.

Operational Management

Operational management is responsible for:

- Ensuring clinic capacity is monitored.
- Monitoring access times and performance.
- Ensuring administrative processes are followed.
- Managing operational risks and service pressures.
- Escalating issues to governance or Board level where required.

26. Monitoring and Audit

Compliance with this policy may be monitored through:

- Referral audits.
- Waiting time monitoring.
- DNA and cancellation monitoring.
- Reporting turnaround monitoring.
- Patient feedback.
- Complaints and incidents.
- Clinical escalation reviews.
- Governance and performance meetings.

Findings from monitoring and audit should be used to support service improvement.

27. Complaints and Concerns

KH-OP-035 – Local Access Policy

Patients, carers and referrers may raise concerns or complaints about access, appointments, communication, clinical care or any other aspect of the service.

Complaints must be managed in line with the organisation's Complaints Policy.

Where a concern relates to patient safety, safeguarding, clinical escalation or duty of candour, the relevant policy must also be followed.

28. Associated Policies and Documents

This policy should be read alongside the following organisational policies and procedures:

- Referral Management Procedure.
 - Consent Policy.
 - Chaperone Policy.
 - Safeguarding Policy.
 - Complaints Policy.
 - Incident Reporting Policy.
 - Duty of Candour Policy.
 - Infection Prevention and Control Policy.
 - Data Protection and Information Governance Policy.
 - Medical Records and Documentation Policy.
 - Equipment Maintenance Policy.
 - Patient Safety Incident Response Framework.
 - Reasonable Adjustments or Equality and Diversity Policy.
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29. Review

This policy will be reviewed annually, or sooner if there are changes to service specification, contractual requirements, legislation, clinical guidance, governance requirements or operational process.

Appendix 1: Summary of Access Rules

Area	Rule
Service	Community ultrasound

KH-OP-035 – Local Access Policy

Area	Rule
Applies to	All Kleyn Healthcare community ultrasound contracts
Referral routes	eRS, secure email, agreed GP referral pathway, private referrals where accepted
Referrers	NHS GP practices within contracted ICB/PCN/practice areas
Age criteria	16+ in Warrington; 18+ in Huddersfield/Kirklees
Contact attempts	Two calls, one text and one letter
DNA rule	One DNA normally followed by one rebooking opportunity; clinical urgency considered
Cancellation rule	One rebooking normally offered; repeated cancellations reviewed case by case
Late arrival	Seen if clinic capacity and safety allow; otherwise rebooked
Reports	Sent through agreed reporting route; generally available immediately where entered directly into patient record
Urgent findings	Escalated to referring GP practice
Chaperone	Available where required or requested
Same-sex sonographer	Considered where possible but not guaranteed