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Clinics being left behind in PACS implementation

While Canadian hospitals are moving ahead to implement Picture Archiving Communication Systems, radiology clinics are being left behind. This was the focus of a November meeting of British Columbia radiologists, regional health board administrators, information technology specialists and representatives from the Canadian Institute for Health Information and the CAR.

It is expected that half of Canada's hospitals will be connected to PACS within the next 6 – 12 months. Despite the fact that community-based imaging facilities perform an estimated 40-45% of diagnostic imaging exams, says meeting organizer Dr. Brad Halkier, there are no immediate plans to include them in the network.

"Money is being transferred to diagnostic imaging but none of the money is flowing into community imaging centres," Dr. Halkier says. "The cost of implementing digital imaging/PACS is really prohibitive and is not going to occur with current funding models."

Kurtis Bishop, Group Director of Investment Programs Management at Canada Health Infoway, is aware that small and medium sized clinics moving into digital imaging face prohibitive capital costs. He says the required investment cannot be financed from film savings and productivity gains except in very large clinics. It's the healthcare system as a whole, rather than imaging clinics in particular, that benefit from a digital imaging environment.

Funding is a challenge facing clinics wanting to make the switch because they do not tend to have access to the usual sources of capital funds, such as foundations and the federal Diagnostic/Medical Equipment Fund. This is an issue that Infoway is beginning to examine, Mr. Bishop says.

Canada Health Infoway and the Fraser Health Authority are participating in a digital imaging project that began in December 2003 and will have all 12 of its hospitals equipped with PACS and filmless by September 2005. They are also conducting a pilot project to determine the economic and technical feasibility of extending a health authority's PACS solution to hospitals and diagnostic imaging centres outside the authority.

The study will compare the incremental capital and operating costs associated with working independently versus expanding the health authority-based PACS to other health authorities and to private diagnostic imaging centres. "In other words, what are the cost implications if the various organizations do not form a collaborative solution," says Paul Brownrigg, CEO of Insite Consultancy Inc. that is working on the study. The study will also examine the issues that could constrain an expansion. Results are expected in February 2005.

Dr. Halkier knows first-hand just how expensive it is for community radiology clinics to go filmless. He and his partners are in the midst of doing just that as they prepare to move into bigger quarters next May. "Despite the economics, we felt it didn't make sense not to be part of digital imaging/PACS in terms of providing good service to patients," Dr. Halkier says. "It's not economically viable to do that, even though there's unanimous agreement that we should be doing this. We're kind of sticking our neck out as a group because we're doing something pretty unique for B.C."

Hospitals are having a difficult time dealing with the growing demand for diagnostic imaging tests. He believes that clinics will play an increasingly important role in providing imaging tests that

overworked hospitals can't handle. "We have a very large role to play in imaging and we need to be strongly supported because nobody else can do it," he says. "If something happened at community imaging facilities, the government would really be stuck because they can't deal with it in hospitals."

He is disappointed that no funding is available for clinics. "Everyone agrees that it should be done but nobody knows where to get the money to do it," he says. "It's frustrating because we don't know who to talk to." However, he is hopeful because participants at the November meeting agreed that community based imaging clinics should be part of the PACS network. A committee of radiologists from the community, health authorities and consultants will be formed to examine possible solutions.

"We really appreciate the support the CAR has given us," Dr. Halkier says. "The CAR has evolved into a very relevant organization Working together with other radiologists across Canada, we can pool our resources, search for creative solutions, and attempt to guide policy decisions that will be beneficial for our patients."

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