

Aide-Mémoire

Access to ultrasound in primary care

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To:	Hon Simeon Brown, Minister of Health		
From:	Jason Power, Acting National Director Planning, Funding and Outcomes		
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Contact for further discussion (if required)			
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Purpose

1. Following your participation in a Cancer Control workshop on 10 July you requested advice regarding access to ultrasound in primary care.

Summary

2. Ultrasound is an important diagnostic tool in detecting cancer and other conditions.
3. Patients may present with specific concerning symptoms/signs or a cluster of vague symptoms/signs. Following clinical examination by the medical practitioner, ultrasound is often requested alongside a number of simple lab tests.
4. Historically, there has been variable access to ultrasound across the country. Health NZ is currently working to implement the Community Referred Radiology (CRR) programme, which includes standardising access criteria to provide more consistent access to ultrasound.
5. Matching increased demand to capacity will take time due to workforce and capacity constraints in both hospital and specialist services and in private provision. CRR is working to align approaches to address capacity constraints with the hospital and specialist service diagnostic improvement programme.

Background

6. Ultrasound is an important diagnostic tool in detecting early and more advanced cancer in several parts of the body. Ultrasound is a particularly important tool in diagnosing specific cancers including uterine, ovarian, breast, thyroid and other head and neck cancers. It is also important in diagnosing cancers that have spread including to the pleural space (lining around lungs), peritoneum (lining of the abdomen) and liver.
7. Patients may present with specific concerning symptoms/signs or a cluster of vague symptoms/signs. Following clinical examination by the medical practitioner, ultrasound is often requested alongside a number of simple lab tests.

Access to ultrasound is being improved

8. Historically, there has been variable access to ultrasound. Health NZ is currently working to implement the Community Referred Radiology (CRR) programme. The CRR programme is the main initiative across Health NZ to enhance access to ultrasound in primary and community settings for patients that may have cancer.
9. As part of the CRR a set of consistent access criteria have been developed. The criteria are intended to make it easier for practitioners in primary care to refer patients for ultrasound where this is needed. The criteria include the most common symptoms and signs of relevant cancers.
10. The recently launched digital tele-consult services will have the ability to refer patients they have consults with through the CRR programme.
11. Specifically, the criteria developed under the CRR provides access to primary care

referrers to ultrasound (US) for the following:

- a) US Abdomen – Adult
 - b) US Carotid – Adult
 - c) US Deep Vein Thrombosis – Adult
 - d) US-guided Fine Needle Aspiration – Adult
 - e) US Musculoskeletal incl. Shoulder – Adult
 - f) US Pelvis – Adult (supports diagnosis of cancer)
 - g) US Renal – Adult
 - h) US Scrotum – Adult (supports diagnosis of testicular cancer)
 - i) US Soft Tissue Lump –Adult (supports diagnosis of soft tissue sarcomas)
 - j) US Neck/Thyroid - Adult (supports diagnosis of thyroid cancers).
12. The clinical criteria for each of the indications listed above were developed collaboratively with radiology, specialist and primary care clinical leaders. These are being incorporated into Health Pathways, which will be published on 1 September 2025.
13. The new US Pelvis criteria supports the delivery of the Abnormal Uterine Bleeding (AUB) and gynaecology planned care initiative. This initiative is designed to:
- a) Improve access to diagnostics and procedures and treatment in the primary care setting.
 - b) Reduce first specialist assessment requirements.
 - c) Shift procedures from hospitals to the community setting.
 - d) Free up capacity in Hospital and Specialist Services to see more complex patients.

Catering for the increased demand for ultrasound

14. It is expected that the roll out of the CRR programme will result in an increase of up to 7,500 extra ultrasounds nationally (1.7% increase), with increases of between 0.4% and 3.3% at a District level. Using the funding provided by CRR, regional teams are looking at opportunities to expand capacity to meet anticipated increased demand.
15. This capacity is expected to be a mix of increased capacity for Hospital and Specialist Services radiology departments and increased outsourced capacity. The exact mix will be dependent upon Hospital and Specialist Services service constraints and the availability of private provision. This is being actively worked through as part of the Diagnostic Improvement Programme (production planning will occur during September).
16. Some areas of the country (e.g., Wellington) report constrained US capacity in both the public and private sector which may limit the rate of CRR implementation. As production planning occurs in September, we will be able to identify specific constraints, and remedial actions, for each district.
17. However, aside from district-specific constraints, we know that demand for medical

diagnostic ultrasound has increased significantly, and the sonography workforce numbers have not kept up with this increase.

18. There are several challenges associated with growing the sonography workforce:
 - a) A shortage in training opportunities including difficulties in securing clinical placements due to limited capacity and the burden on supervising sonographers and only one education provider in New Zealand (University of Auckland).
 - b) An overreliance on attracting overseas trained sonographers.
 - c) An aging workforce.
 - d) A prominence of part time workers amongst the sonographer workforce.
19. As of March 2025, there were 206 contracted full-time employees (FTE) employed by Health NZ (a total headcount of 272 employees) and a vacancy rate of 12.1%¹.
20. According to the New Zealand Medical Radiation Technologists Board, there 722 practicing sonographers in New Zealand. Of these, 489 sonographers indicated they were practicing full time while 215 were practicing part time (18 did not specify)².
21. To address workforce constraints, Health NZ is:
 - a) Actively engaging with the University of Auckland as the sole tertiary provider to consider alternative pathways and approaches to sonography training.
 - b) Exploring opportunities with private providers to create a balanced public/private training scheme to increase trainee numbers. Adding training capacity in private settings will help in increasing overall sonographer capacity, without putting too much load on our public workforce.
 - c) Considering the potential to create a nationally standardised framework around sonographer reporting which will help address the radiologist shortage. This would also help to reduce reporting time turnaround and improve workflow efficiency, reduce waitlist times, improve access to diagnostic imaging, enhance job satisfaction and improve recruitment and retention.

Next steps

22. The nationally consistent clinical criteria developed under the CRR will be incorporated into Health Pathways from 1 September 2025, allowing primary care practitioners to more easily arrange ultrasound for patients.
23. Regional Health NZ teams will continue to look at opportunities to expand capacity to meet anticipated increased demand because of the criteria. Expressions Of Interest have gone out to all departments to join an Ultrasound Working Group (an offset of the current MIT Workforce Group) to look at initiatives to help address the increase in demand.

¹ Source: Health Workforce Information Programme (HWIP) Quarterly reporting. Headcounts are for all practitioners with APC (in regulated professions). Full-time equivalents are calculated on the basis that 1 FTE = 40 hours per week.

² Source: New Zealand Medical Radiation Technologists Board Te Poari Ringa Hangarau Iraruke, <https://www.mrtboard.org.nz/> Full Time Sonographers are defined as having an average FTE of 0.75 or more, Part Time Sonographers are defined as having an average FTE less than 0.75