
To: Radiology QI Lead, QI Tech Lead, **July** Ref Bulletin QCC- R-B007.15
Circulate to: All Radiology staff **2015**

From: Dr Anthony Ryan, Chair, QI Radiology Working Group

Edition: Radiology QI Programme - Bulletin 1

Subject: Radiology National QI Programme, Workshop16th June - summary.

Good afternoon,

We hope that you found the recent Radiology Workshop constructive and beneficial. The aim of this bulletin is to provide a follow up from the Radiology workshop and also provide a status update on a number of elements of the Radiology QI Programme.

Letters were issued to Hospital CEOs in March confirming the change in programme name to Radiology National Quality Improvement Programme.

- Sponsorship changed from NCCP to the HSE through the Quality Improvement Division
- The operation of the programmes remains the same with data collection & reporting in National Quality Assurance Intelligence System (NQAIS) Radiology.
- Reflects systems approach to Quality Improvement used by the Programme.

We are continuing with the embedding and rollout of the RQI programme at a national level.

Please circulate this bulletin to your colleagues, via notice boards, etc. Your suggestions and feedback are welcome to qi@radiology.ie

Sincerely,

Dr Anthony Ryan, Chair Radiology QI Programme Working Group

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Diary Dates

Aug 26th Wed – New Working Group Inaugural meeting
Sept 17th Thurs – PCS/Quality Committee Meeting
Sept 24th – 26th Faculty of Radiologists Annual Meeting

Rollout Update on the Radiology QI Programme – 2015

Roll-out Progress:

A National Public Procurement Process has been completed for the ICT systems to support the QI Programme in public hospitals. This contract was awarded to McKesson/peerVue in September 2013. The ICT solution is currently being rolled-out to ~50 public hospitals with 32 live to date. 20 private hospitals have also been invited to join the Programme. It is anticipated that all sites will be live in 2016. From that time the main action will be to embed the programme, ensuring and maintaining the high quality data collection by participants on a monthly basis and to set intelligent quality targets appropriate for the programme. The quality targets will be set by the Faculty and will be actioned once the data has matured. A well defined methodology to be agreed with the working group, Faculty and consultation with participants will be used.

For your action:

QI activities:

Continue to carry out the QI activities that are set out in the Radiology Guidelines to collect QI data. Please forward suggestions for topics for discussion, areas for top up training or areas of good practice that can be shared.

Next Targets

The Working Group will re-commence discussions on National Quality Assurance Intelligence System (NQAIS) Radiology to progress the development and deployment of NQAIS Radiology to participants of the RQI programmes in 2015 so that:

- Sites can upload data that has been collected in PeerVue for reporting to NQAIS.

Current Status

Public Hospitals with peerVue

What to do now:

- Feedback from participants to the QI Programme Manager is key to improving the roll-out for subsequent sites
- If not already complete, Radiology departments should develop procedures and processes for the department to support the QI activities in their hospital

If awaiting peerVue

- peerVue has been designed to support both the performance of key quality activities from the Guidelines and the recording of that work by the department
- All sites should continue implementing the National QI Guidelines, i.e. performing the Quality Activities contained therein, ahead of the roll-out of peerVue to their site.
- Those awaiting peerVue roll out can contact live sites for their advice and information on what to expect in order to make preparations.

Private Hospitals

- QI Programme engaging with private Radiology departments to create an ICT solution to interface with National Quality Assurance Intelligence System (NQAIS)
- Recent meeting with a number of private hospital groups held on 25th of June.
- Private sites should continue implementing the National QI Guidelines, i.e. performing the Quality Activities contained therein, ahead of the roll-out of peerVue to their site.

Improving Quality

QI Guidelines set out Quality Activities to be performed with Key Quality Indicators (KQIs) to measure the performance of these activities.

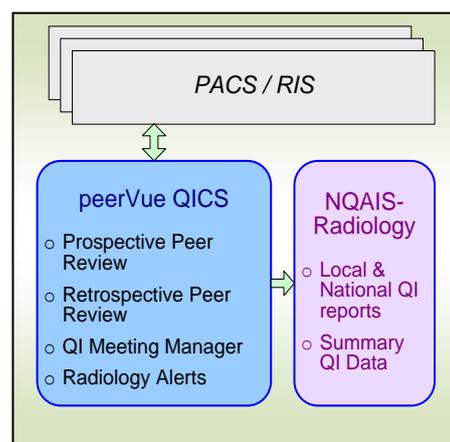
PeerVue facilitates Radiologists in the performing of Quality Activities and in the recording of this work

Together with summary data, peerVue QI Data is sent to the

National Quality Assurance Intelligence System – NQAIS.

In NQAIS, each **Lead Radiologist can monitor the performance**

of KQIs against National Aggregate data and intelligent targets when set, and thereby drive improvement in those areas in their departments.



RQI Workshop - Radiology Guidelines Rev 3 – Summary

Guidelines Rev 3 approved by the Board of the Faculty of Radiologists on 25/6/15. Main changes are as follows:

- **Peer Review:** Review outcomes; the most significant change is stopping the use of RadPeer scoring. Peer reviews will now be categorized into three groups:
 1. Concur.
 2. Minor Discrepancy - No further action.
 3. Consider for RQI Meeting.
- **Quality Improvement Meetings (Discrepancy):** Change of name from Discrepancy meetings to Radiology Quality Improvement (RQI) Meetings: Name changed from “Discrepancy” to “RQI” to emphasise the educational, quality improvement and error prevention goals of the meeting.
- **Open Disclosure:** A critical distinction must be made between clinical activity and Radiology Quality Improvement; the Faculty of Radiologists guidance document on Open Disclosure recommends that the submission of a case to a QI conference implies compliance with the Open Disclosure standard is taking place in parallel. The QI conference manager should acknowledge receipt of the submitted cases, using a standard phrase “the case is being accepted for consideration in the expectation that the referring radiologist is compliant with the open disclosure policy outlined in the Faculty of Radiologists Guidance document, 2015.

Please click [here](#) for link to the Radiology Guidelines Rev 3

Please click [here](#) for link to the Faculty of Radiologists guidance document on Open Disclosure in Radiology, June 2015

RQI Workshop - Participant Experience

Three participant sites presented on their their perspective of their experience with the QI programme to date - University Hospital Waterford, Tallaght Hospital & Connolly Hospital, Blanchardstown.

Participants provided an overview on their knowledge and learning from real life experiences with the QI Programme and PeerVue at their sites. And also an overview of any challenges, barriers, successes and what the QI Programme has done for them etc. Overall the consensus from the participants of their experience with the QI programme was favourable and all three participants advocated partaking in the QI programme.

Please click [here](#) for a link to a sample presentation provided by a participant site and [here](#) for a link to presentations by other speakers at the June 2015 RQI Workshop.

National Quality Assurance Intelligence system (NQAIS) Radiology - Status

The NQAIS-Radiology system is the national reporting tool for the Radiology QI programme. It will provide secure access to a suite of quality statistics, including all of the key quality indicators in the National Radiology QI Guidelines. The RQI statistics will be per hospital and will only be available to the Radiology QI Lead within the hospital and any delegates. The Steering Committee and Working Group will have access to national aggregate statistics. The NQAIS-Radiology system will also be used to record summary information on QI activities that are not captured in peerVue.

It is expected that the design and development of the NQAIS-Radiology system will be completed in Q3-2015. The NQAIS-Radiology system will initially be made available to a number of sites for review and testing. It will be deployed to all sites during Q4-2015. Screenshots of the NQAIS-Radiology system were presented at the Faculty workshop in June and, bearing in mind that the software was still in development, any comments are welcome.

Next Steps

- Implementation and Training in peerVue for ~18 public hospitals
- Ongoing engagement with Private hospitals on developing an ICT solution for their QI Data collection
- National Quality Assurance Intelligence System (NQAIS) - Radiology development and deployment
- Updating Working Group membership

For your information:

- **Quality Improvement** Lloyd Provost, Associates in Process Improvement lecture on “Data & quality improvement in complex health systems” is available on RCPI Player at https://www.rcpi.ie/media_site/ondemand_player.php?id=340 . His definition of QI is the organised creation of beneficial change; the attainment of unprecedented levels of performance. **RCPI Quality Improvement Programme blog is available here:** <http://qualityimprovementrcpi.blogspot.ie/>
- **Programme Resources** are available online on the Faculty of Radiology’s Quality Improvement page as set out below.

The screenshot shows the Faculty of Radiology website. The navigation menu includes: Home, Welcome, Fellows & Members, Practice (highlighted), Training, News, Professional Competence, Gallery, and Conferences. The 'Practice' dropdown menu is open, showing options: Faculty Policy and procedure documents, ESR Eurosafe Initiative, Quality Improvement (highlighted), Radiation Protection, and Validation. The main content area is titled 'Quality Improvement' and contains several paragraphs of text. On the right side, there is a 'Latest News' section with two items: 'Elections for Board of Faculty of Radiologists' and 'Applications invited for National Training Programme Coordinator, Postgraduate Radiology (NTPC)'. Below that is a 'Forum Trainee Newsletter' section. At the bottom right, there is a 'Twitter Feed' section showing two tweets from @radiologyireland and @myESR.

Quality Improvement opportunity:

- Consider areas that are working well for you within the programme and how to share this with the rest of the participants.