

Australian Quality Program Quickly Yields Applicable Results

A VOLUNTEER, academia-based Australian quality initiative is helping to drive that country's national standards for radiologic services.

Quality Use of Diagnostic Imaging (QUDI) is a research and development program providing an evidence base for diagnostic imaging in Australia and New Zealand. "We have commissioned a number of projects addressing quality issues from consumer, economic, referer and radiologist perspectives," said QUDI Manager Jane Grimm, director of Quality and Standards of Practice at the Royal Australian and New Zealand College of Radiologists (RANZCR) in Sydney.

Commencing in its current form in January 2005, QUDI is fully funded by the Australian federal government and managed by RANZCR. It currently operates on an annual budget of just under AU\$1 million. "QUDI is independent of sponsorship or other fundraising biases, so it remains collaborative," said Catherine Mandel, M.B.B.S., F.R.A.N.Z.C.R., the national QUDI liaison radiologist.

QUDI aims to promote efficient, effective, safe and affordable diagnostic medical imaging services that lead to optimal diagnosis and treatment, support consumer choice and empowerment, are delivered by accredited practitioners using evidence-based guidelines and are sustainable within the national health system budget. Dozens of projects, targeting every phase of radiologic services, have been initiated by QUDI personnel.

Simple Projects Have Produced Immediate Change

Some complex QUDI projects have helped inform RANZCR standards



Jane Grimm
QUDI Manager



**Stacy Goergen, M.B.B.S.,
F.R.A.N.Z.C.R., M.Clin.Epi.**
QUDI Advisory Group and Technical
Reference Group

development and policy on issues such as teleradiology, professional supervision requirements and role extension for non-medical diagnostic imaging professionals. Other projects have employed simple survey techniques to identify specific barriers and bring about immediate change.

For example, a 2006 audit involving pediatric radiologists at six hospitals resulted in a significant reduction in radiation doses within six months. QUDI representatives are now looking at establishing a national program to allow other practices to benchmark against these best practice institutions, said Stacy Goergen, M.B.B.S., F.R.A.N.Z.C.R., M.Clin.Epi., of the QUDI Advisory Group and Technical Reference Group. "We have now proven that clinically

significant, practice-level improvements can occur with a simple audit and feedback system," she said.

A project conducted at the 2007 RANZCR annual scientific meeting, called the "Great Aussie CD Challenge," tested the practicality of using

We have now proven that clinically significant practice level improvements can occur with a simple audit and feedback system.

**Stacy Goergen, M.B.B.S.,
F.R.A.N.Z.C.R., M.Clin.Epi.**

CDs for transferring and viewing medical images. Testing of submitted CDs revealed, among other problems, DICOM errors, issues with auto-loading viewers and difficulties dealing with multiple viewing software applications. "It demonstrated to radiologists that there are real practical difficulties with the routine use of CDs for image transfer and that very few CDs in the Australian market are compliant with available international profiles," said Nick Ferris, M.B.B.S.,

F.R.A.N.Z.C.R., M.Med., member of the QUDI Technical Reference Group. The challenge was the key initial project of the Australian branch of the Integrating the Healthcare Enterprise (IHE®) initiative, Dr. Ferris added.

Another early QUDI survey brought to light long delays in the recognition and assessment of new technologies for reimbursement by Medicare Australia. RANZCR has since proposed a new mechanism for prioritizing applications, as well as methods to improve the local evidence base required for assessments.

Such a body of work, said QUDI representatives, requires a wide degree of stakeholder engagement, ranging from governments, consumers and primary care and specialist clinicians to radiology service providers and national quality organizations such as the Australian Commission on Safety and Quality in Healthcare. QUDI has also worked closely with the National Institute of Clinical Studies (NICS) on a fellowship program to train practicing radiologists in the art and science of evidence implementation and knowledge transfer.

Next Phase Targets Inclusion of Other Healthcare Personnel

QUDI is unique due to the diversity of its work, its low cost and the broad-based support of its advisory and technical reference groups, said Dr. Goergen. QUDI personnel said they hope the success of the project so far will help them secure a substantial increase in federal funds when the first funding cycle ends June 30 this year.

Currently, most of the work radiologists perform for QUDI is pro bono, said Taryn Bessen, M.B.B.S., F.R.A.N.Z.C.R., of the QUDI Technical Reference Group. RANZCR encourages participation in the program by awarding CME points; however, the extent and increasing complexity of the work have led to significantly increased demands on radiologists' time. With a severe nationwide shortage of radiolo-

International Benchmarking Initiative Focuses on Turnaround Times

THE International Radiology Quality Network (IRQN) seeks facilities to participate in a worldwide benchmarking initiative on turnaround times (TATs) for radiology reports.

When IRQN began its Performance Metrics and Indicators Project in 2007, it selected TATs over a 1-month period as the metric to be benchmarked. Thirteen institutions from three continents participated in a trial last year. IRQN is now working to refine data collection and methodology, particularly with regard to the differences in how radiology information systems (RIS) report TAT data—some report it as a percentage turned around in 24, 48 or 72 hours, while others report the average time required to generate a report.

The project's next phase aims to

include 100 facilities worldwide. As TAT data are a small subset of the statistics routinely generated by a facility's RIS, additional effort for facilities is minimal, according to IRQN. In addition to offering insight into the performance of different facilities, the initiative will also allow participants to benchmark their performance against similar institutions.

Facilities interested in participating in the benchmarking initiative should send the name of their facility and the name and contact information of the principal liaison to Laura Coombs, Ph.D., at lcoombs@acr.org by July 31.

IRQN has also approved its "Top 10 Principles of International Clinical Teleradiology." The principles are available online at www.irqn.net.

gists in Australia exacerbating the pressure, funded involvement is necessary so that QUDI work can be prioritized equally with clinical work, said QUDI representatives.

"We have also recognized that it will be essential to have active participation in the program from medical imaging technologists, radiology nurses, medical radiation physicists and a generally broader range of content experts the program can call upon to assist with specific projects or issues," said Dr. Bessen.

Implementation of best practices at the practice level, using an evidence-based approach, will characterize the next phase of the QUDI program, said Dr. Mandel. QUDI representatives look forward to an online, searchable database of critically appraised radiology topics later this year, as well as online training programs in evidence-based medicine and critical appraisal of literature.

The next phase of QUDI also

should see the profile of radiologists in the general community raised, said representatives, so consumers can better understand what a radiologist does and the risks and benefits of diagnostic imaging.

"The QUDI program has been one of the most important activities ever undertaken by RANZCR," said RANZCR President Mark Khangure, M.B.B.S., F.R.A.N.Z.C.R. "The scope of QUDI is broad, with a clear intent to improve the management of patients through the appropriate use of diagnostic radiology. We hope the Australian government will continue to support this important program into the future." □

Learn More

■ For more information about the Quality Use of Diagnostic Imaging (QUDI) program of the Royal Australian and New Zealand College of Radiologists, go to www.ranzcr.edu.au/qualityprograms/qudi/index.cfm or inquire by e-mail at qudi@ranzcr.edu.au.

RSNA 2008 Quality Improvement Symposium

THE Quality Improvement Symposium will be held Tuesday during RSNA 2008. The daylong series includes four sessions addressing process improvement, customer satisfaction, patient safety and professional assessment. Registration for this and all RSNA 2008 courses begins June 30. For more information, go to RSNA2008.RSNA.org.



RSNA2008
Personal Learning in the
Global Community