

Dear Authorised Representative

Greetings to all accredited and applicant radiology services from the IANZ Radiology team via this first radiology newsletter for 2013. Since the last Radiology Newsletter in November 2011, the IANZ website has been updated at www.ianz.govt.nz. Any feedback on improvements to the site are most welcome.

Tip: Use the Resources tab and drop down to IANZ documents in order to select:

- IANZ Criteria
- Forms
- Fee Schedules

A new IANZ logo is being progressively introduced. Whilst the new logo is available on website publications, steps are underway to make it available to accredited clients, who will be emailed the new logo, along with guidelines regarding the implementation process.

IANZ has been conducting assessments against the 2011 New Zealand Code of Radiology Management Practice since 1 July 2011, and the Radiology team has identified some feedback that may be useful to services. Please check the relevant sections that apply to your service.

Hot Topics

The following is a list of decisions that have resulted from discussion at the annual 2012 Radiology Professional Advisory Committee (RADPAC) meeting:

Archiving of Images

Whilst most clients have operated within a digital environment for many years, some are new to the technology. One item that is sometimes overlooked is the need to digitally archive examinations utilising a PACS or similar system.

Examination Reports

Some services have a draft/interim examination report available to referrers either via PACS/RIS or patient notes. These need to be clearly identified as an interim or draft report, which is subsequently followed by a final verified report.

The MRTB scope of practice does not allow examination reporting by sonographers. Increasingly, sonographer comments are available to referrers, as an image of the examination via PACS, prior to formal radiologist reporting.

Insertion of a disclaimer to ensure referrers do not mistake the sonographer findings as a formal report is **strongly recommended**. Regular auditing of the turn-around time and consistency in content between the release of images (the sonographer findings) and the final

report is also **strongly recommended**. Final reports must also clearly identify the radiologist that has issued the report.

Immigration Chest Forms

For clients who are seeking a variation in the standardised process for completing immigration chest forms, approval must be sought and granted by Immigration New Zealand before implementation. Evidence of approval must be available for review.

Personnel Records

Records are generally maintained within an organisation by either a manager or the HR Department. All clinical personnel are issued with a CME/CPD certificate upon completion of an audit by the registration body or provider of a CME/CPD programme. During an IANZ assessment, records of CME/CPD need to be available for MRTs, Nuclear Medicine physicians, radiologists and sonographers.

PET-CT

At present, IANZ does not have a published criteria document to accredit PET-CT services. A draft IANZ Supplementary Criteria document has been developed and circulated to various industry representatives for input before finalisation. Once published, initial assessments of this modality can occur.

Preventive Maintenance Reports

The content of equipment PM reports varies across providers and it can be unclear as to what checks have been completed, such as phantom checks on ultrasound units and coil checks on MR scanners. Clients need to ensure detailed reports are provided.

Quality Control Checks

Whilst service engineers complete a number of equipment checks, clients are encouraged to perform independent quality control checks where possible. In some instances, such as MRI coil checks, MRT staff members are unable to complete these due to manufacturer specifications. Clients should have their staff work with the service engineer to complete this check.

Service Engineer Checks

During the year, service engineers complete a number of required updates and adjustments. Sometimes, the power and user settings are inadvertently reset to factory defaults. This is particularly evident with ultrasound units. Immediately following a service engineer PM or

corrective action visit, clients are encouraged to perform quality control checks of the unit to ensure the equipment is operating as expected (measurement parameters and power settings).

Teleradiology

Increasingly, radiology services are utilising an external off-site reporting facility that is either based in New Zealand or internationally. It is important that examination protocols are well documented and adhered to as the protocol is the primary record of what images are transmitted for reporting. If a non-standard protocol is utilised, this must be communicated to the reporting physician and documented accordingly.

Additionally, the same equipment, personnel, quality control and reporting components of the NZCRMP publication apply unless a disclaimer is inserted into the examination report. Please refer to our website for the supplementary 'Radiology Accreditation Off-site Reporting' publication

<http://www.ianz.govt.nz/services/accreditation-2/accreditation/radiology/>

Radiology Professional Advisory Committee (RADPAC)

The annual IANZ RADPAC meeting was held in July 2012 and once again was a useful forum for discussion of topics pertinent to the industry. Dr Malcolm Baigent resigned and Dr Devesh Dixit has accepted a position on the RADPAC. Please refer to our website for the current list of members <http://www.ianz.govt.nz/advisory-committees/radiology/>

Technical Experts

Within an assessment cycle, each client undergoes a peer assessment, where technical experts from within the industry are utilised to confidentially provide both clinical and technical input. It is an opportunity for an independent, fresh set of eyes to review your systems and to share knowledge within the industry. Technical experts are expected to be familiar with relevant regulations, have current expertise and have held a senior position for a number of years. Authorised Representatives can nominate a staff member to become a technical expert by emailing the radiology team at IANZ.

Technical experts include MRTs, Nuclear Medicine physicians, nurses, QHPs, radiologists and sonographers. Assessment costs (flights, accommodation, meals, mileage and parking) may be claimed and reimbursed to technical experts (costs are passed on to the client being assessed). CPD credits can be earned by participating in IANZ assessments.

Each year, IANZ reviews the frequency that technical experts are used from each organisation to ensure a fair process. However, some years have more peer-assessments than others. 2012 and 2013 each have a high peer-assessment rate and will be monitored closely.

Assessment Analysis

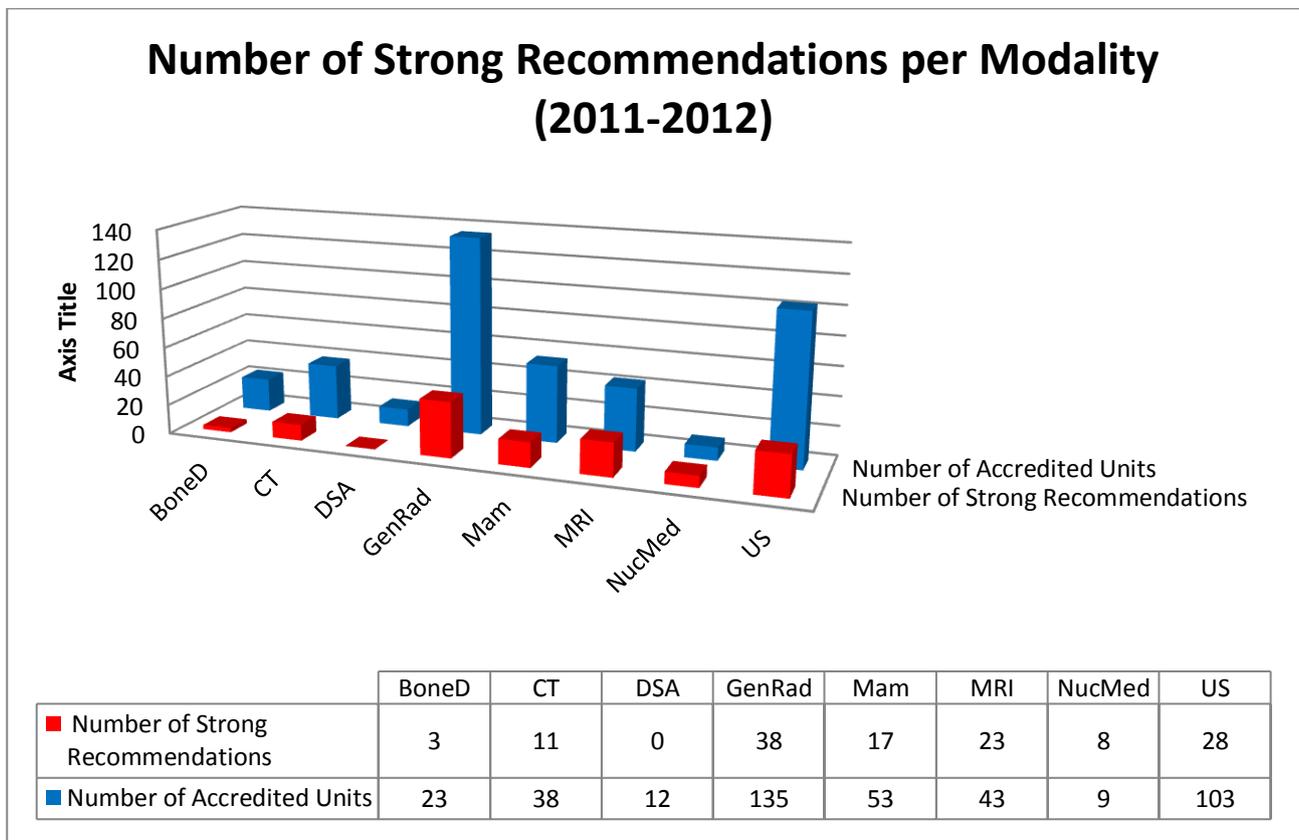
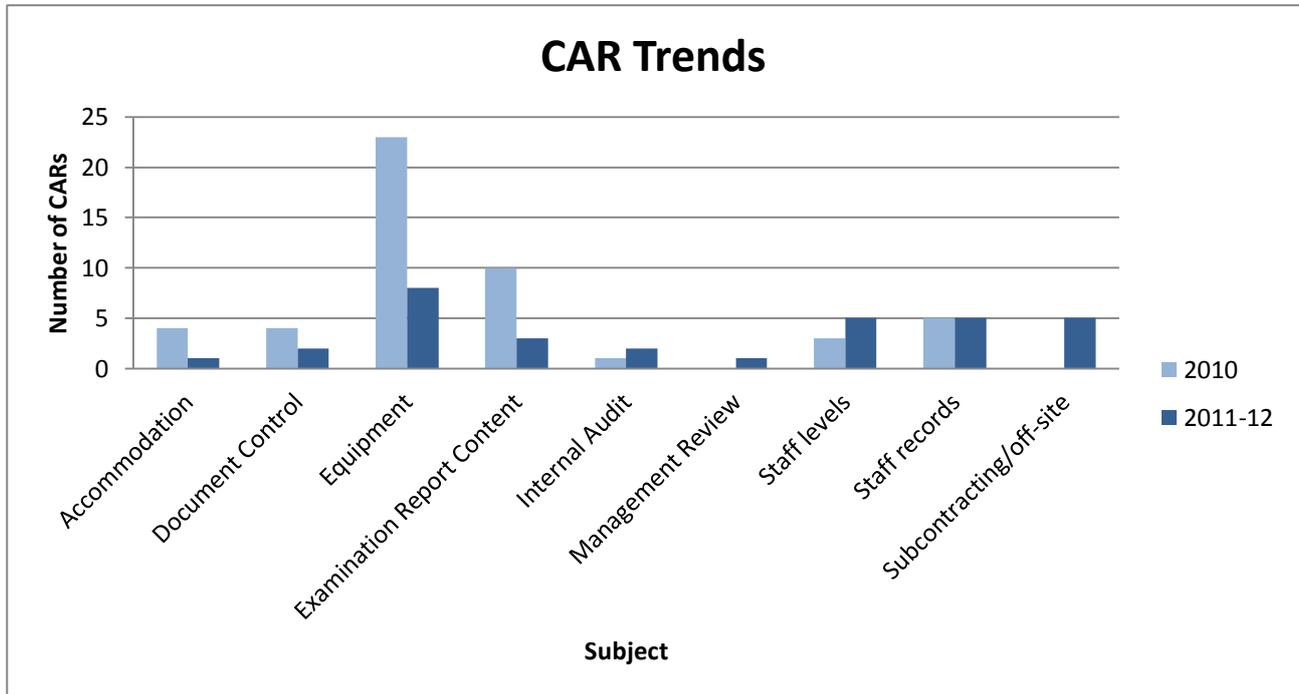
IANZ is monitoring a number of different things at the moment. It is intended that the next newsletter will provide detail regarding the outcome of continued analysis. If you have any questions regarding the content of this newsletter, please feel free to contact any of the team.

Ways to improve the assessment process

Whilst IANZ is internally reviewing various opportunities for improvement, a focused survey was sent out last month to all authorised representatives to gain external feedback.

Nature of Corrective Action Requests (CARs) and strong recommendations

Themes are being identified, with the “hot topics” section of each newsletter to detail some of the most common trends. Equipment issues continue to be a prominent theme of CARs and strong recommendations. Ultrasound examination reports, personnel records and resource levels continue to be the subject of strong recommendations.



The IANZ Radiology team would like to thank all our clients for their continued support and we look forward to seeing you soon.