

**Health Quality
Ontario**

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The Ontario
Diagnostic Imaging

PEER LEARNING COMMUNITY

September 2019

Diagnostic Imaging Peer Learning Toolkit

Guide 3.0: Learning and Education Process

How to Work Through the Toolkit Guides

Estimated Time to Complete Each Guide

The table below outlines the time required to work through each guide, along with the total time required to hold sessions with the radiologist working group.

Guide	Time to Complete*	Session Time
1.0 Readiness Assessment	1–3 months	--
2.0 Diagnostic Imaging Peer Review Workflow	1 month	1 session, ~1.5 hours
3.0 Learning and Education Process	1 month	1 session, ~2 hours
4.0 Discrepancy Management		
5.0 Governance and Accountability	3–4 months	--
6.0 Monitor and Sustain	1–2 months	--
7.0 Train Stakeholders	1 month	2 sessions, ~1.5 hours each

***Note:** There is some overlap between some of the guides to allow the last six guides to be completed in 4 months. For cross-organizational programs, please build in at least 3 additional months of pre-implementation work to enter into a data sharing agreement with partner organizations.

The following Gantt chart illustrates the estimated time required to complete each of the seven guides in the Diagnostic Imaging Peer Learning Toolkit and the overlap between some of the guides.

Pre-Implementation Activities				
Guide	Month -2	Month -1	Month 0	
1.0 Readiness Assessment				 Decision to implement Diagnostic Imaging Peer Learning Program
Implementation Activities				
Guide	Month 1	Month 2	Month 3	Month 4
2.0 Diagnostic Imaging Peer Review Workflow				
3.0 Learning and Education Process				
4.0 Discrepancy Management Process				
5.0 Governance and Accountability				
6.0 Monitor and Sustain Program				
7.0 Train Stakeholders				

Guides 2.0 to 5.0 Should Be Done in Parallel

After completing the Guide 1.0 Readiness Assessment, it is important to note that Guides 2.0, 3.0, 4.0, and 5.0 are highly interconnected. The guides were separated by theme for ease of use, but it is recommended that you work through some of these guides at the same time. It would be helpful to read through Guides 2.0 to 5.0 first so that you understand all of the connections before diving in.

Note: Guide 5.0 will also require key decisions from Guide 6.0, and Guides 6.0 and 7.0 also refer back to Guide 5.0. However, Guides 6.0 and 7.0 can be done independently of Guides 2.0 to 5.0. It is recommended that you formalize your Diagnostic Imaging Peer Learning Program Policy with your organization after completing guides 2.0 to 5.0 and then add the required information from Guide 6.0 later on.

Guide 3.0: Learning and Education Process

Note: Since it is recommended that Guides 2.0 to 5.0 are completed in parallel, it would be helpful to read through the guides first to understand how they are all related.

In particular, Guide 3.0: Learning and Education Process and Guide 4.0: Discrepancy Management Process should be completed together because you can achieve goals from both guides in the same 2-hour radiologist working group session. Please review both guides before planning this radiologist working group session.

Deliverable:

Guide 3.0: Learning and Education Process will help you design a process to support learning from peer review cases and facilitate educational rounds.

Outcome:

After working through this guide, you will have established a mechanism for learning, education, and improvement among radiologists through peer review.

Section	Supporting Tool(s)	Page Number
3.1 Designate Learning and Education Roles and Responsibilities ^{5.5P}	Table 2: Learning and Education Roles and Responsibilities	6
3.2 Define a Process for Radiologists to Collect and Discuss Learning Cases ^{5.5P}	3.2 Learning and Education Process Map and Standard of Work	8
	<i>For Cross-Organization Programs:</i> 3.2x Cross-Organization Learning and Education Process Map and Standard of Work	8
3.3 Prepare Quality Leads for Facilitation of Educational Rounds	3.3a Facilitation Tools and Learning Cases 3.3b Educational Rounds Minutes Template Learning and Education Video	9

^{5.5P} Indicates that a key decision from this section will need to be included in tool 5.5 *Diagnostic Imaging Peer Learning Policy Template*.



Stakeholders to Engage:

Radiologist Working Group: Facilitate a session with the radiologist working group to design the learning and education process.

Radiologist-in-Chief: Have your radiologist-in-chief designate learning and education roles to radiologists who will facilitate and encourage participation in educational rounds (see *section 3.3*).

Quality Leads: Engage quality leads, as identified in each section of this guide.

Steering Committee: Obtain final steering committee approval of the learning and education process designed by your radiologist working group.

For Cross-Organization Programs:

Privacy and/or Legal Representatives: If rounds will be conducted across organizations, engage your organizations' privacy and/or legal representatives to advise on the impact of collecting and retaining quality of care information that will be discussed and shared during educational rounds.



Estimated Time to Complete:

Time to Complete Guide 3.0:

- 1 month (in parallel with other guides; particularly Guide 4.0)

Featured Activity:

- Radiologist Working Group Meeting (1 x ~2-hour session):
Facilitate a session with the radiologist working group and the quality leads, as identified throughout each section of this guide. This can be done in the same 2-hour session that will be used to develop your discrepancy management process in Guide 4.0: Discrepancy Management.



Things to Consider:

Residents and Fellows

In academic facilities, consider including residents and fellows in the Diagnostic Imaging Peer Learning Program educational rounds. Inviting residents and fellows to educational rounds provides a valuable opportunity to learn about potential discrepancies and the techniques for minimizing them. A recent study found that residents and fellows welcomed the opportunity to be included in diagnostic imaging peer learning and believe that peer review and peer learning should be incorporated into the residency training curriculum.ⁱ

Learning and Knowledge Translation

As learning and education are the primary goals of the program, structured educational rounds derived from the peer review process should occur on a regular basis.ⁱⁱ Maximize opportunities for knowledge translation by disseminating learning points and future practice improvements among your radiologist team.

Mandatory Participation in Educational Rounds

Radiologists should be required to participate in regularly scheduled educational roundsⁱⁱ to share learnings and discuss potential practice improvements in a peer-to-peer forum.

Educational Credit

Continuing Medical Education (CME) credits may be extended to all participants in the peer learning programⁱⁱ and may act as an incentive for radiologists to participate. Table 1 summarizes CME credits relevant to a Diagnostic Imaging Peer Learning Program.

Table 1: Framework for Continuing Professional Development Activitiesⁱⁱⁱ

Section	Peer Learning Program Example	Credit Rating
Section 1: Group Learning	<u>Group Learning Activities:</u> Educational rounds	Accredited = 1 credit/hour Unaccredited = 0.5 credits/hour
Section 2: Self-Learning	<u>Systems Learning:</u> Participation in the peer learning program	15 credits/year
Section 3: Assessment	<u>Assessment:</u> Chart audit and feedback, multi-source feedback, annual performance review, practice assessments	3 credits/hour The time spent reviewing feedback/data received from peers counts in Section 3 for 3 credits/hour

Adapted from: The Royal College of Physicians and Surgeons' [Framework of Continuing Professional Development Activities](#)

3.1 Designate Learning and Education Roles and Responsibilities

This Section Will Help You: Designate and define key roles and responsibilities to program members to ensure accountability and the sustainability of your learning and education process.

Supporting Tool: Table 2: Learning and Education Roles and Responsibilities Descriptions

Table 2: Learning and Education Roles and Responsibilities

Role	Recommended Responsibilities
Radiologist-in-Chief	• Designate radiologists to fill learning and education roles and responsibilities • Provide leadership and actively participate in the peer learning program • Provide regular updates within the program's governance structure (see <i>Guide 5.0: Governance and Accountability, section 5.3</i>) • Monitor program participation/sustainability (see <i>Guide 6.0: Monitor and Sustain Program, sections 6.1 and 6.2</i>) <i>Estimated Time Commitment: 15 minutes per month</i>
Peer Learning Program Lead <i>(Note: This role is commonly held by the radiologist-in-chief but can be assigned to another radiologist.)</i>	• Act as lead and champion of the peer learning program, providing leadership and direction to the quality leads • Actively participate in the peer learning program • Radiologist-in-chief may delegate reporting and sustainability to this role • Participate in the radiologist working group <i>Estimated Time Commitment: 30 minutes per month</i>
Quality Leads	• Provide leadership and manage the learning and education process within the peer learning program - It is recommended that a quality lead be designated for each sub-group within your Diagnostic Imaging Peer Learning Program (see <i>Guide 2.0: Radiologist Peer Review Workflow, section 2.5</i> for description of sub-group). This ensures that quality leads can represent their actual clinical practice and can also help to manage workloads across the radiologist group • Actively participate in the peer learning program • Coordinate and execute regularly scheduled educational rounds, including: - Review completed peer review cases within sub-group and select cases with educational merit/learning opportunities (i.e., learning cases) - Anonymize (remove radiologist information) and de-identify (remove personal health information) learning cases in advance of educational rounds - Facilitate discussion of learning cases, and summarize and share learning outcomes among peer group - Perform administrative functions, including the recording of activities, learnings, and results from educational rounds (as required) • Participate in the radiologist working group during initial development of the program <i>Estimated Time Commitment: 1 hour per month</i>

For Cross-Organization Programs:

Each organization in a cross-organization program should have their own quality lead(s).

The peer learning program lead role is usually held by the radiologist-in-chief, but the role can also be assigned to another radiologist. Consider whether your cross-organization program will assign one peer learning program lead for the overall program or whether each organization will have its own.

How to Use the Tool(s)

Recommended User(s): Radiologist-in-chief, peer learning program lead, and quality leads

1. **Radiologist-in-Chief:** Review the roles and responsibilities and designate the peer learning program lead and quality lead(s).
2. **All Recommended Users:** Refer to the responsibilities listed for each role and modify as needed to meet the learning and education goals of your Diagnostic Imaging Peer Learning Program.
3. Document any applicable information in your Learning and Education Roles and Responsibilities Descriptions and include in your Diagnostic Imaging Peer Learning Program Policy (tool 5.5 *Diagnostic Imaging Peer Learning Program Policy Template*, section C.2: *Peer Learning Program Governance*).

3.2 Define a Process for Radiologists to Collect and Discuss Learning Cases

This Section Will Help You: Create a process for radiologists to identify and discuss peer review cases with opportunities for learning.

Note: When selecting learning cases for discussion, it is important to include both major discrepancies (Assessment Category 3) and positive subtle findings (Assessment Category 0) for review at education rounds (see Guide 2.0: Radiologist Peer Review Workflow, section 2.3 for descriptions of assessment categories). You may also choose to include other cases for discussion that arise through the regular radiologist workflow and are flagged as interesting or educational cases.

Supporting Tool: [3.2 Learning and Education Process Map and Standard of Work](#)

For Cross-Organization Programs:

Determine whether educational rounds will be conducted **collaboratively** (with other organizations in the Diagnostic Imaging Peer Learning Program) or **internally** (within each organization).

Note: It is recommended that organizations with fewer than four radiologists collaborate with other organizations

If it is determined that educational rounds will be conducted collaboratively, then use the cross-organization tool below:

Supporting Tool: [3.2x Cross-Organization Learning and Education Process Map and Standard of Work](#)

How to Use the Tool(s)

Recommended User(s): Radiologist working group

1. Review tool 3.2 *Learning and Education Process Map* or 3.2x *Cross-Organization Learning and Education Process Map* with the radiologist working group. Page 1 summarizes the steps that constitute a learning and education process from start to end. Answer the “Key Questions” found on pages 2 and 3 to customize the process for your program.
2. Document your decisions in tool 3.2/3.2x *Standard of Work* template found on pages 4 and 5. This document can be used for training and communication purposes.
3. Obtain approval of your learning and education process from the Diagnostic Imaging Peer Learning Program Steering Committee.
4. Once you have completed this section, include key decisions in your Diagnostic Imaging Peer Learning Program Policy (tool 5.5 *Diagnostic Imaging Peer Learning Program Policy Template*, section B: *Quality of Care Initiative Designation and Legislative Protections* AND section C.4: *Peer Learning Educational Rounds*).

3.3 Prepare Quality Leads for Facilitation of Educational Rounds

This Section Will Help You: Provide tools to guide quality leads in preparing learning cases and facilitating educational rounds.

Supporting Tools:

- [3.3a Facilitation Tools and Learning Cases](#)
- [3.3b Educational Rounds Minutes Template](#)
- [Learning and Education Video](#)

How to Use the Tool(s)

Recommended User(s): Quality leads

1. Review tool *3.3a Facilitation Tools and Learning Cases*. Use the sample agenda, logistics checklist, communication template, sample learning cases, and the *Learning and Education Video* to prepare for your educational rounds.
2. Use tool *3.3b Educational Rounds Minutes Template* to document and distribute key learnings that reflect the discussions from educational rounds.

Appendix 1: Frequently Asked Questions

Should the program lead and quality leads be included in the radiologist working group?

The program lead and quality leads will be crucial to the sustainability of the peer learning program and are advised to participate in the radiologist working group to contribute to program development.

How are the program lead and quality leads selected?

The radiologist-in-chief should designate the program lead and quality lead positions. Please see *section 3.1* of this guide for the specific responsibilities of each role.

Appendix 2: Learning and Education Process Checklist

Completing this guide and checking off the items below confirm that you have successfully created a learning and education process.

- ☐ Designate learning and education roles with responsibilities customized to meet organizational needs.
- ☐ Establish a learning and education process and supporting tool 3.2 *Standard of Work* for collection and discussion of learning cases.
- ☐ Finalize a facilitation approach for educational rounds to discuss peer review cases with learning opportunities.
- ☐ Obtain approval of your learning and education process from the Diagnostic Imaging Peer Learning Program Steering Committee.
- ☐ Include key decisions in your Diagnostic Imaging Peer Learning Program Policy (tool 5.5 *Diagnostic Imaging Peer Learning Program Policy Template*, sections B, C.2 and C.4).

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