Health Quality Ontario

The Ontario Diagnostic Imaging

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September 2019 Diagnostic Imaging Peer Learning Toolkit

Guide 7.0: Train Stakeholders



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 cossion - 2 hours	
4.0 Discrepancy Management		1 session, ~2 hours	
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 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 7.0: Train Stakeholders

Deliverable:

Guide 7.0: Train Stakeholders will help you design an approach to train and communicate to all stakeholders affected by peer learning.

Outcome:

After working through this guide, you will have delivered peer learning training to stakeholders (including the peer learning program lead, quality leads, and staff radiologists), so that they are prepared to engage in the program. In addition, you will have notified relevant stakeholders external to the diagnostic imaging department(s) of the participating organization(s) of your Diagnostic Imaging Peer Learning Program and launch date.

Section		Supporting Tool	Page Number
7.1	Train Quality Leads	7.1 Quality Lead Training Checklist	5
7.2	Define a Training Approach for Radiologists	7.2 Peer Learning Training Presentation and Logistics Checklist	6
7.3	Communicate the Diagnostic Imaging Peer Learning Program Launch Date	7.3 Communications Template for Peer Learning Program Launch	7

Stakeholders to Engage:

Project Sponsors: Engage the project sponsors to educate quality leads (and peer learning program lead, if applicable) on all peer learning program processes developed in Guides 2.0 to 6.0. Communicate Diagnostic Imaging Peer Learning Program launch date to relevant external stakeholders (e.g., facility CEO, chief medical officer, medical advisory committee, and legal/privacy representatives).

Radiologist-in-Chief: Engage the radiologist-in-chief to communicate Diagnostic Imaging Peer Learning Program launch date to imaging department.

Quality Leads (and Peer Learning Program Lead, if applicable): Engage quality leads to facilitate training session(s) for all staff radiologists on all peer learning processes.

Staff Radiologists: Engage staff radiologists to participate and engage in training sessions conducted by quality leads.

IT Support (if applicable): Engage the IT team to support software training for all radiologists, if an IT solution enables your Diagnostic Imaging Peer Learning Program.



Total Time to Complete Guide 7.0:

• 1 month

Featured Activity:

 <u>Stakeholder Training Sessions (2 x ~1.5 hour sessions)</u>: Facilitate training sessions with quality leads (and peer learning program lead, if applicable), and with all staff radiologists participating in your peer learning program.



Peer Learning Program Policy

Your program policy is a tool that can support your training needs by outlining all key components, goals, and program processes. The final policy should be accessible in all training sessions so radiologists and quality leads may refer to the policy while participating in peer review and learning. The program policy should be approved by each participating organization in advance of any training.

Mandatory Training

Peer learning training should be considered mandatory, with a recommended 100% attendance from staff radiologists and quality leads. If this target cannot be achieved, consider providing one or more additional training sessions to encourage increased radiologist participation.

Train-the-Trainer Model

If it is not possible to train every radiologist in a formal training session, consider a Train-the-Trainer model. In this model, the radiologists who receive formal training from the quality leads are able to train the radiologists that were unable to attend training prior to program launch date.

IT Solution (if applicable)

If your Diagnostic Imaging Peer Learning Program is enabled by an IT Solution, staff will require specific training on how to use the software in their workflow. This toolkit does not include guidance on IT implementation.

7.1 Train Quality Leads

This Section Will Help You: Define a training approach to educate quality leads (and peer learning program lead, if applicable) on all of the processes in your Diagnostic Imaging Peer Learning Program.

Supporting Tool(s): 7.1 Quality Lead Training Checklist

How to Use the Tool(s)

Recommended User(s): Project sponsors, quality leads (and peer learning program lead, if applicable)

- **1.** Tool *7.1 Quality Lead Training Checklist* lists the key components and processes in the Diagnostic Imaging Peer Learning Program. Quality leads should be familiar with this content.
- 2. Review the checklist with each quality lead.
- **3.** Check off each program component and process where quality leads have sufficient understanding in order to provide training to their peers.
 - If quality leads *have* a sufficient understanding of each program component and process from start to end, additional training from the project sponsors will not be required. The quality leads are considered ready to facilitate training.
 - If quality leads **do not have** a sufficient understanding of every program component and process listed in the checklist from start to end, project sponsors should provide additional training using tool 7.2 Peer Learning Training Presentation (introduced in section 7.2).

7.2 Define a Training Approach for Radiologists

This Section Will Help You: Define a training approach to prepare all staff radiologists to participate in the peer learning program.

Supporting Tool: 7.2 Peer Learning Training Presentation and Logistics Checklist

How to Use the Tool(s)

Recommended User(s): Quality leads (and peer learning program lead, if applicable)

For Cross-Organization Programs:

Determine whether training will be conducted individually or collaboratively.

- **Individually:** If you elect to conduct training *individually*, each participating organization will be required to train their own radiologists on all peer learning processes within the program.
- **Collaboratively:** If you elect to conduct training **collaboratively**, radiologists from all organizations will be trained together. Organizations that are geographically disparate can use screen sharing and/or teleconference options to allow all radiologists to participate in the same training session(s).
- 1. Review tool 7.2 Peer Learning Training Presentation and Logistics Checklist.
- 2. Customize the presentation based on your Diagnostic Imaging Peer Learning Program.
- **3.** Once customized, use tool *7.2 Peer Learning Training Presentation and Logistics Checklist* to facilitate training for all radiologists. Include formal training on how to receive and submit peer review cases while informing staff on the learning and education management and discrepancy management components of the program.

7.3 Communicate the Diagnostic Imaging Peer Learning Program Launch Date

This Section Will Help You: Communicate the launch of your Diagnostic Imaging Peer Learning Program to all relevant stakeholder groups.

Supporting Tool: 7.3 Communications Template for Peer Learning Program Launch

How to Use the Tool(s)

Recommended User(s): Radiologist-in-chief

- 1. Review tool 7.3 Communications Template for Peer Learning Program Launch and customize each section to incorporate information specific to your Diagnostic Imaging Peer Learning Program.
- **2.** Once complete, send the communication to **all staff in your department**, announcing the launch of the program. This should include physicians, technologists, supervisors, and clerical/administrative staff.
- **3.** Once complete, send the communication to all **stakeholders external to the diagnostic imaging department** announcing the launch of your program. This should include your organization's CEO, chief medical officer (if applicable), medical advisory committee (if applicable), and privacy and/or legal representatives.

Appendix 1: Frequently Asked Questions

Who should facilitate the training of the radiologists?

Project sponsors and all quality leads. You will need to determine whether quality leads require formal training in advance of radiologist training (see *section 7.1*).

Who should be included in radiologist training?

All radiologists that are expected to participate in your Diagnostic Imaging Peer Learning Program (e.g., staff, residents/fellows, and locums, if applicable). Include non-radiologist physicians who complete and/or report on any imaging modalities and have joined the program (e.g., obstetrics).

How does a Train-the-Trainer model work?

This model is typically used when it is not possible to have all radiologists attend training. Once formal training is completed for as many radiologists as possible, select individuals who are confident engaging in the program to train radiologists who were not able to attend a formal training session.

Appendix 2: Train Stakeholders Checklist

Completing this guide and checking off the items below confirms that you have successfully designed an approach to educate staff on each of the key processes of your peer learning program.

	Train quality lea	ads on all key	components	and principles	of your peer	learning program.
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Finalize facilitation approach to train radiologists on the peer learning program processes, including:

- Training radiologists to complete a peer review
- Informing radiologists of the learning and education process
- Providing radiologists with an overview of the discrepancy management process
- Communicate program launch date to all staff in imaging department(s) of participating organization(s).
- Communicate program launch date to relevant stakeholders external to the diagnostic imaging department.

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