

Radiographer written comment Implementation toolkit

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An electronic version of this document is available at

<http://qheps.health.qld.gov.au/ahwac/content/modcareresources5.htm>

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Contents

Contents	iii
1. Introduction	1
2. Implementation	2
2.1 Obtain support	2
2.2 Clinical governance	3
2.2.1 Endorsement of practice	3
2.2.2 Credentialing of individual radiographers	4
2.2.3 Training and education	4
2.3 Providing a written comment	5
3. Monitoring and review	5
3.1 Clinical audits	5
Appendix 1 Proposal	7
Appendix 2 Protocol	11
Appendix 3 Radiographer comment worksheet	12
Appendix 4 Clinical audit	1

1. Introduction

Queensland Health radiographers work as part of the multidisciplinary team in the provision of quality health services. As part of their role, radiographers regularly provide verbal descriptions on plain X-rays to referring clinicians however do not routinely document a comment. Currently there is no overarching or consistent approach to communicating a radiographer's findings on a plain X-ray to other members of the clinical team. This does not support radiographers working to full scope or the delivery of high quality diagnostic imaging services.

There has been debate in relation to radiographers providing a written comment on plain X-ray. In 2013 the Allied Health Professions' Office of Queensland (AHPOQ) engaged an external party to review expected competencies of radiographers in relation to providing a written comment on plain X-ray. It was determined that the underlying theoretical knowledge to provide a comment was provided within pre-entry training however in most cases the actual provision of a written comment was not assessed.

The Medical Radiation Practice Board of Australia has recently finalised accreditation standards and accompanying professional capabilities for radiographers. There is a requirement within these capabilities for entry level practitioners to be able to competently collaborate with other health practitioners, including the provision of relevant and timely written and verbal comments¹. In addition, the Australian Institute of Radiography (AIR) Code of Professional Conduct states that "Radiographers may provide descriptions of images as part of an accepted written protocol that is authorised by the employing authority"²

In 2010, the Radiographer Abnormality Description (RAD) Project, a model's of care project sponsored by AHPOQ, demonstrated that radiographers were able to provide an accurate written description of trauma-related plain X-ray appearances, in collaboration with the Emergency Department (ED) team, to inform timely diagnosis until a radiologist's report was available³.

The documentation by radiographers on findings on plain X-rays they have carried out should be an essential part of good practice to support the delivery of quality health services within a team environment. Radiographer written comment is not to replace the Radiologist's report but rather allows for the findings of the examination to be immediately documented by the clinician taking the film and communicated to the referring clinician. In the United Kingdom radiographer commenting is well established in many centres and makes a major contribution to medical imaging services⁴.

Radiographers providing written comment can improve patient flow, decrease patient waiting times and may contribute to improved patient experience, including quality and

¹ <http://www.medicalradiationpracticeboard.gov.au/Registration/Professional-Capabilities.aspx>

² Australian Institute of Radiography (2007) *Guidelines for professional conduct for Radiographers, Radiation therapists and Sonographers* Australian Institute of Radiography, Collingwood, Victoria

³ Devaney C, Gordon M (2010). Radiographer Abnormality Description (RAD) Project Completion Report. Queensland Health, Brisbane Australia

⁴ <http://www.sor.org/practice/reporting>

safety. For example, the availability of a radiographer written comment can assist staff within the emergency department better meet the needs of patients and contribute to the achievement of Hospital and Health Service Key Performance Indicators, including the National Emergency Access Target (NEAT) 4 hour target.

Providing a written comment on a plain X-ray is within the current scope of practice of radiographers although it has not been traditionally performed by radiographers within Queensland Health facilities. This toolkit is designed to assist the implementation of radiographers providing a written comment on plain X-rays within a Queensland Health setting. The aim is to ensure appropriate clinical governance arrangements are in place during the transition period until radiographers providing written comment on plain X-rays becomes embedded in normal practice.

2. Implementation

2.1 Obtain support

Support for the introduction of radiographer written comment should be obtained from the Director of Radiology and/or facility Senior Medical Officer and the Director of Medical Imaging. Consultation with key staff is important in the successful implementation of new practices and time should be taken to meet with staff to discuss the implementation process and gain their support. Examples of key stakeholders include, but are not limited to, radiography and radiology staff, medical officers from relevant services such as emergency medicine and Radiographic Information System (RIS) staff.

Key communication messages for the consultation may include:

- The documentation by radiographers of findings on plain X-rays they have carried out should be an essential part of good practice to support the delivery of quality health services within a team environment.
- Providing written comment on plain X-ray is within the current scope of practice of radiographers.
- Communication of findings of a radiographic examination is included in the programs of study delivered by the accredited Australian medical radiation courses. Therefore additional education and training is not required for a radiographer to provide a written comment.
- Endorsement of the practice of radiographers providing a written comment through Hospital and Health Service Credentialing Committees is an interim measure to ensure appropriate clinical governance arrangements are in place during the transition period until radiographers providing a written comment on plain X-rays becomes embedded in normal practice.
- Credentialing of individual radiographers is not required. Local radiographer managers will ensure individuals maintain competency through Performance Appraisal and Development (PAD) processes. Education packages to support training are available where up skilling of the workforce is required.

A written proposal (Appendix 1) may assist with obtaining support of key staff and will be important for endorsement of the practice by the Hospital and Health Service Credentialing Committee.

2.2 Clinical governance

Clinical governance is critical to ensuring patient safety. Endorsement by the Hospital and Health Service Credentialing Committee of the practice of radiographer's providing written comment of plain X-ray is recommended as an interim measure to support implementation of this new way of working within the multidisciplinary team. Further, the use of standardised practices to document findings and clinical audits and reviews will assist in ensuring the practice is safe and contributes to quality service provision. Please refer to the processes outlined in [Guidelines for Credentialing and Defining Scope of Clinical Practice for Allied Health Professionals](#) to assist in the credentialing process.

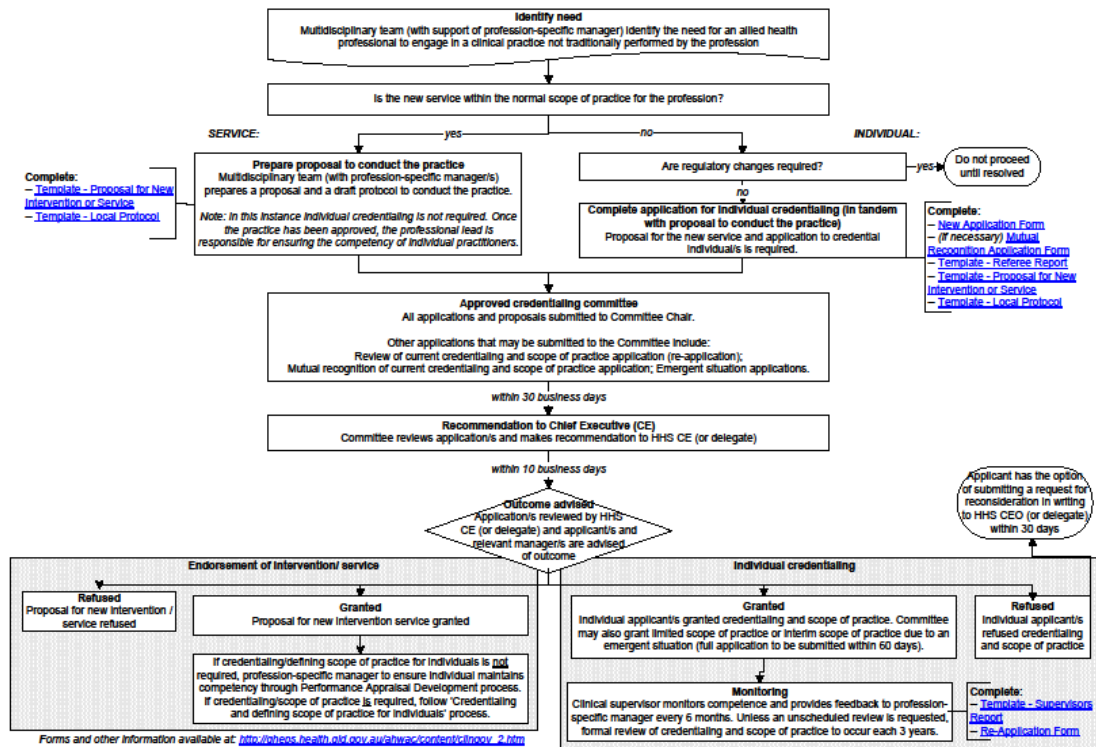
Individual credentialing of radiographers will not be required as the practice is within scope.

2.2.1 Endorsement of practice

As described above, a written proposal (Appendix 1) is required for radiographer commenting to be endorsed by the Hospital and Health Service Credentialing Committee. In addition, a *Protocol for a practice not traditionally performed by an allied health professional (the Protocol)* (Appendix 2) must also be completed and signed by the Director of Radiology (or facility Senior Medical Officer) and Director of Medical Imaging. The protocol provides the overarching agreement and details the processes for radiographers providing a written comment within that facility or Hospital and Health Service.

The proposal and protocol are submitted to the Hospital and Health Service Credentialing Committee for endorsement following the processes outlined in [Guidelines for Credentialing and Defining Scope of Clinical Practice for Allied Health Professionals](#) and outlined in the flow chart below.

CREREDENTIALING AND DEFINING SCOPE OF CLINICAL PRACTICE FOR ALLIED HEALTH PROFESSIONALS ENGAGED IN COMPLEX CLINICAL PRACTICES



2.2.2 Credentialing of individual radiographers

Radiographers providing written comment on plain X-rays will be registered with the Medical Radiation Practice Board Australia. Credentialing of individual radiographers is not required. Local radiographer managers will ensure individuals are competent through performance appraisal and development (PAD) processes.

2.2.3 Training and education

Communication of findings of a radiographic examination is within the scope of practice of a radiographer and is included in the programs of study delivered by the accredited Australian medical radiation courses. Therefore additional education and training is not required for a radiographer to provide written comment. However as there is some variation in the image interpretation curricula across universities and as the provision of written comment has not been traditionally undertaken by radiographers within Queensland Health, additional education and training may be beneficial to up-skill the workforce.

Facilities should undertake a training needs analysis of the radiography workforce in the department to determine current levels of accuracy in providing written comment and to identify individuals who require additional training. Radiographers should reach a 90%⁵ accuracy rate of detection from a bank of plain film x-rays prior to implementing the service. If 90% accuracy is not achieved, training should be undertaken.

⁵ Devaney C, Gordon M (2010). Radiographer Abnormality Description (RAD) Project Completion Report. Queensland Health, Brisbane Australia

A training package has been developed for Queensland Health by Monash University to support up skilling of the radiography workforce where required. The training package consists of a two day workshop, pre, post and retention testing and self audit of 100 cases. The licence agreement with Monash University allows delivery by Queensland Health staff for a licence fee. This training package has been designed to:

- Ensure familiarisation with the standardised radiographer worksheet and consistent use of appropriate terminology when constructing a written comment.
- Increase the radiographer's confidence in applying a systematic search strategy when undertaking image interpretation.
- Further develop clinical decision making skills in a range of trauma and common pathological processes of the appendicular and axial skeleton, emergency chest and emergency abdomen.

Contact the Allied Health Professions' Office of Queensland for details regarding access to the training package.

There may be other training packages available external Queensland Health which can be undertaken to assist in up skilling the radiographer workforce. It is recommended that accuracy testing is undertaken following completion of the training.

Ongoing individual competency and training needs are determined by the local radiography manager through the regular PAD processes.

2.3 Providing a written comment

Once the Hospital and Health Service Credentialing Committee have endorsed the practice, radiographers are able to commence providing a written comment. The use of standardised practices to document findings will support clear and consistent communication of examination findings. Documentation of findings can be undertaken using the Queensland Health standardised radiographer comment worksheet (Appendix 3) or via Picture Archive Communication System (PACS) or Radiology Information System (RIS) dependant on local facility practices. Comments into an electronic radiology system would be entered according to the local workplace instructions at each location as this is dependent on the systems available.

3. Monitoring and review

Regular reviews of radiographer written comment practice will ensure patient safety during the implementation phase.

3.1 Clinical audits

Radiographers providing written comment must ensure the accuracy and quality of their worksheets. Clinical audits should take place on an annual basis. Review of clinical audits will be arranged and assessed by the local radiographer manager in each Hospital and Health Service. An example template for clinical audits is at Appendix 4.

The audit will include a validated image test of 20 randomly selected images. Assessments will be based on correlation with the radiologist's report and include:

- true positive identification
- correctly identified and described abnormality
- location description
- correct description content overall

An accuracy level of 90% should be attained.

Local radiographer managers should address with individuals any issues in accuracy and quality identified by annual clinical audits through normal PAD processes which may include additional education and training. .

In addition to individual clinical audits, monitoring of the implementation of radiographer written comment should also occur and outcomes reported to the Hospital and Health Service Allied Health Credentialing Committee. This review may include:

- Number of radiographers providing written comment and frequency that a written comment is provided.
- Evaluation of safety and effectiveness of the practice e.g. adverse events/critical incidents
- Impact on patient flow and Hospital and Health Service key performance indicators e.g. decrease length of stay.

Appendix 1 Proposal

PROPOSAL TO INTRODUCE RADIOGRAPHERS PROVIDING WRITTEN COMMENT ON PLAIN X-RAYS

Subject: Radiographers to provide written comment on plain X-ray within the [*insert name of HHS*] Hospital and Health Service

Reference No. Secretariat use only

Meeting date: Secretariat use only

Submitted by: Insert name

New Item / Previously Raised: Insert date(s) previously raised

Recommendation(s):

That Allied Health Credentialing and Defining Scope of Clinical Practice Committee:

1. Endorse the proposal for the introduction of radiographers providing written comment on plain X-rays within the [*insert name of HHS*] Hospital and Health Service
2. Endorse the protocol (Attachment 1) for radiographers providing written comment on plain X-rays with a recommendation that individual clinicians partaking in the practice within the [*insert name of HHS*] Hospital and Health Service do not need to be credentialed as the practice is within scope.

Proposal endorsement			
Date	Name	Position	Signature
		Director of Medical Imaging	
		Director of Radiology	

Context

Queensland Health radiographers work as part of the multidisciplinary team in the provision of quality health services. As part of their role, radiographers regularly provide verbal descriptions on plain X-rays to referring clinicians however do not routinely document a comment. Currently there is no overarching or consistent approach to communicating a radiographer's findings on a plain X-ray to other members of the clinical team. This does not support radiographers working to full scope or the delivery of high quality diagnostic imaging services.

Issues

In 2013 the Allied Health Professions' Office of Queensland (AHPOQ) engaged an external party to review expected competencies of radiographers in relation to providing a written comment on plain X-ray. It was determined that the underlying theoretical knowledge to provide a comment was provided within pre-entry training however in most cases the actual provision of a written comment was not assessed.

The Medical Radiation Practice Board of Australia has recently finalised accreditation standards and accompanying professional capabilities for radiographers. There is a requirement within these capabilities for entry level practitioners to be able to competently collaborate with other health practitioners, including the provision of relevant and timely written and verbal comments⁶. In addition, the Australian Institute of Radiography (AIR) Code of Professional Conduct states that "Radiographers may provide descriptions of images as part of an accepted written protocol that is authorised by the employing authority"⁷

In 2010, the Radiographer Abnormality Description (RAD) Project, a model's of care project sponsored by AHPOQ, demonstrated that radiographers were able to provide an accurate written description of trauma-related plain X-ray appearances, in collaboration with the Emergency Department (ED) team, to inform timely diagnosis until a radiologist's report was available⁸.

The documentation by radiographers on findings on plain X-rays they have carried out should be an essential part of good practice to support the delivery of quality health services within a team environment. Radiographer written comment is not to replace the Radiologist's report but rather allows for examination findings to be immediately written by the clinician taking the film and communicated to the referring clinician. The use of standardised practices to document findings will support clear and consistent communication of examination findings.

In the United Kingdom radiographer commenting is well established in many centres and makes a major contribution to medical imaging services⁹. Radiographers providing written comment can improve patient flow, decrease patient waiting times and may contribute to improved patient experience, including quality and safety. For example, the availability of a radiographer written comment can assist staff within the emergency

⁶ <http://www.medicalradiationpracticeboard.gov.au/Search.aspx?q=professional%20capabilities>.

⁷ Australian Institute of Radiography (2007) *Guidelines for professional conduct for Radiographers, Radiation therapists and Sonographers* Australian Institute of Radiography, Collingwood, Victoria

⁸ Devaney C, Gordon M (2010). Radiographer Abnormality Description (RAD) Project Completion Report. Queensland Health, Brisbane Australia

⁹ <http://www.sor.org/practice/reporting>

department better meet the needs of patients and contribute to the achievement of Hospital and Health Service Key Performance Indicators, including the National Emergency Access Target (NEAT) 4 hour target.

Providing a written comment on plain X-ray is within the current scope of practice of radiographers although it has not been traditionally performed by radiographers within Queensland Health facilities. To ensure patient safety radiographers who provide written comment on plain X-ray will undertake an annual clinical audit process.

Legal Implications/Legislative Issues

There are no legislative restrictions. Provision of written comment by a radiographer is within scope of practice.

Consultation

Consultation on the implementation of a radiographer providing a written comment on plain X-rays has occurred at a statewide level with a number of groups including the Association of Medical Radiation Directors Queensland¹⁰ (AMRDQ) and the Queensland Health Imaging Program¹¹ (QHIP) steering committee. AMRDQ and QHIP are both supportive of the implementation of written comment by radiographers.

In addition, local consultation within *[insert name of HHS]* on the implementation of radiographer written comment on plain X-ray has included *[Insert local consultation that has occurred in your Hospital and Health Service eg staff from Radiographic Information Systems teams, medical officers, radiology and radiography workforces and any relevant committees]*

Financial Considerations

There are no financial implications.

Implementation

Providing written comment on plain X-ray is within the current scope of practice of radiographers although it has not been traditionally performed by radiographers within Queensland Health facilities.

As an interim measure, endorsement of the practice of radiographers providing written comment by the *[insert name of HHS]* Hospital and Health Service Credentialing Committee will ensure appropriate clinical governance arrangements are in place during the transition period until radiographers providing written comment on plain X-rays becomes embedded in normal practice.

Radiographers providing a written comment on plain X-rays will be registered with the Medical Radiation Practice Board Australia. Credentialing of individual radiographers is not required. Local radiographer managers will ensure individuals are competent through performance appraisal and development (PAD) processes.

Communication of findings of a radiographic examination is within the scope of practice of a radiographer and is included in the programs of study delivered by the accredited

¹⁰ AMRDQ membership includes the Directors of Medical Imaging in Queensland Health.

¹¹ QHIP membership includes both radiology and radiography Queensland Health representatives.

Australian medical radiation courses. Therefore additional education and training is not required for a radiographer to provide written comment. However as there is some variation in the image interpretation curricula across universities and as the provision of written comment has not been traditionally undertaken by radiographers within Queensland Health, additional education and training may be beneficial to up-skill the workforce.

A training needs analysis of the radiography workforce in the department will be undertaken to determine current levels of accuracy in providing written comment and to identify individuals who require additional training. Radiographers will reach 90% accuracy rate of detection from a bank of plain film x-rays prior to implementation of the service. If 90% accuracy is not achieved, training will be undertaken.

Ongoing individual competency and training needs will be determined by the local radiography manager through the regular PAD processes.

[Insert here additional local implementation processes that have been agreed eg reporting progress of implementation to identified local networks or workgroups]

Attachments

Attachment 1: Protocol for Implementation of a radiographer providing written comment on plain X-ray

Attachment 2: Example Clinical audit tool

Appendix 2 Protocol

ATTACHMENT 1: PROTOCOL FOR A PRACTICE NOT TRADITIONALLY PERFORMED BY AN ALLIED HEALTH PROFESSIONAL IN A FACILITY/SERVICE

PROTOCOL FOR: Radiographers providing written comment on plain X-ray

Purpose:	This protocol states the circumstances and conditions under which a radiographer provides written comment on plain X-rays.
Scope:	This protocol applies to all [insert name of HHS] radiographers.
Authorising Legislation:	No legislation required
Circumstances:	A radiographer may provide written comments on a plain X-ray using [insert here agreed facility/HHS practice for documentation of finding for example “A standardised radiographer worksheet (Attachment 3) will be scanned into RIS (or PACS equivalent).”]
Conditions:	<p>There are no restrictions to this practice.</p> <p>The radiographer must be registered with the Medical Radiation Practice Board of Australia.</p> <p>Credentialing of individual radiographers is not required. Individual competency and training needs will be determined by the local radiography manager through the regular performance appraisal and development (PAD) processes.</p> <p>The radiographer will record their findings using the process described above.</p>
Suspension or Cancellation:	A radiographer’s authority to act under this protocol may be suspended or cancelled at any time as directed by the Hospital and Health Service CE (or delegate).
Certification:	Certified at (place) this xx day of xxxx 20xx to take effect from (insert date).

Signed by HHS CE (or delegate): _____

Appendix 3 Radiographer comment worksheet

Place Patient ID Sticker here

Or

Accession No. Label for Exam

Or

Hand write

UR number:

Accession number:

The Radiographer comments below are an opinion only and do not replace a formal diagnostic report by a Radiologist

Radiographer's Observations

Anatomical region imaged: _____

No abnormality detected

Unsure

Abnormality detected

Fracture

Soft tissue sign

Joint disruption (e.g. dislocation, subluxation etc.)

Foreign body

Pneumothorax

Pneumoperitoneum

Radiographer comments: _____

Examination escalated to _____

Radiographer's Identifier _____

Date _____

Appendix 4 Clinical audit

ATTACHMENT 2: CLINICAL AUDIT TOOL FOR RADIOGRAPHER WRITTEN COMMENT

Name:				Facility:			
Case	UR Number	Worksheet form completed fully and accurately	True positive identification	Correctly identified and described abnormality	Comments	Supervisor name and signature	Date
1							
2							
3							
4							
5							
6							

7							
8							
9							
10							