

## Volume 8 - Issue 1, 2008 - Editorial

### The Recent Management in Radiology(MIR) Congress

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Dear readers,

The recent Management in Radiology (MIR) congress, held in Oxford, UK, threw up a number of interesting management challenges and solutions that are being experienced by leaders, managers and administrators of radiology departments worldwide. Each year, IMAGING Management has the honour to publish a selection of papers arising from presentations delivered at the event, with the aim of raising awareness of the most pressing management concerns affecting you, our readers.

Hosted and organised by Dr. Nicola Strickland on behalf of the European Society of Radiology (ESR), the annual MIR meeting attracted professionals from across 29 countries and led to a range of interesting conclusions.

One of the most provocative sessions was based on the growth of pay-for-performance in medical imaging and what the future impact may be on our profession. We already know that a key issue here is that the method of reimbursement for imaging varies considerably from country to country in Europe and internationally. Ranging from a block budget allocation from the hospital, through proportional payment from a diagnostic related group (DRG) case to direct payment for an individual examination, usually based on a tariff agreed nationally or by health insurance or funding boards, this area can be problematic.

However, unless the method of payment to the imaging department is case-based, it is always going to be difficult to match staff and equipment resources to the necessary workload. This may be achieved by the department re-charging the hospital for their agreed activity-based share of the hospitals' DRG payment or by a completely separate payment system outside the DRG process from the insurance company or funding board. The latter is more likely to happen in the clinic environment than for imaging performed on inpatients, and requires sophisticated billing and payment systems based on prior agreement, regarding the level of remuneration for each imaging examination.

The system of Relative Value Units (RVU) as devised and used in the US is a good example. Prof. Michael Pentecost takes us further along this road in his paper on payment by performance, which brings improvement of quality and efficiency into the payment equation. In this regard the quality of the images, speed of access, timeliness of report and the overall standard of the imaging environment can all be measured and included in the service level agreement. Payment may be made dependent on achieving pre-agreed standards and varied to produce the necessary incentives and penalties. This reinforces the message of quality, which is a necessary and important development.

If, however, pay-for-performance of an imaging examination relates to clinical results as suggested for certain clinical conditions, then the auditing implications for radiology departments in terms of organisation and cost would be enormous, not to mention difficulties in follow-up data collection, the lack of good gold standards and the relatively poor consistency in peer review of cases.

Another innovative session at MIR on "The Ten Commandments for Managing an Imaging Department" brought out a variety of issues from the speakers, all Chairs of major departments around the world. One of the common themes raised by many was the importance of teamwork and in particular recognising the value of all members of the imaging department. Good staff management and delegation that is appropriate, properly supervised and supported by training is essential for the success of a department. A well-organised and formative appraisal system is of value and department Chairs must be approachable by all their staff.

It is also essential that Chairs of departments have adequate human resource support and training. Which leads me to my final observation regarding adverse incident reporting: a "no-blame" culture is impossible in most cases, but the recognition and reporting of adverse incidents is fundamental to safe medical practice, and difficulties in problem-solving are often created by defensive attitudes within an organisation.

I would like to take this opportunity to wish you all a productive and successful New Year and remind you that your suggestions and feedback on medical imaging management topics remain sincerely welcome.

Prof. Iain McCall

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