Compliance with RCR reporting standards - are we signing off properly?
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Background
The radiology report is the main professional communication between practitioner and referrer and should be signed off as any other professional document. This clear identifier allows easy access for the referrer should any queries arise as well as providing the transparency currently expected within the NHS.

Standards
The RCR states that those who formally interpret imaging investigations must identify their name, professional status, grade, position and registration number within the body of their report1,2.

Indicators
Recording of name, grade and registration number on reports.

Target
100% compliance with RCR reporting standards.

Methodology
In April and August 2016, two hundred inpatient reports were reviewed across two sites including a variety of scanned regions and reporting subspecialties. These were equally subdivided into in hours and on call events.

First round results
- In hours:
  • 40% double reported
  • 25% met standards for both reporters
  • 91% for both when adhering to RIS
  • Scores for name, grade, GMC (below)
  • Trainees - 100%, 95% and 29%
  • Consultants - 63%, 63% and 29%
- On call:
  • 90% double reported
  • 0% met standards for both reporters
  • 53% for both when adhering to RIS
  • Scores for name, grade, GMC (below)
  • Trainees - 100%, 100% and 24%
  • Consultants - 80%, 54% and 20%

- * It should be noted that at our centre, when RIS users view reports, the username (which is linked to the user’s GMC number) is revealed upon hovering the cursor over the report header. As such it can be argued that we are already 100% compliant with GMC number documentation. However as the clinicians do not routinely have access to RIS and rely on the GMC number inclusion in the body of the report, we have provided both sets of data.

First action plan
Awareness was raised through email dissemination of the RCR reporting standards and first round results. Polling was carried out in the local audit meeting to encourage discussion.

Second round results
- In hours:
  • 70% double reported
  • 14% met standards for both reporters
  • 94% for both when adhering to RIS
  • Scores for name, grade, GMC (below)
  • Trainees - 97%, 94% and 42%
  • Consultants - 86%, 86% and 16%
- On call:
  • 100% double reported
  • 8% met standards for both reporters
  • 70% for both when adhering to RIS
  • Scores for name, grade, GMC (below)
  • Trainee s - 100%, 100% and 24%
  • Consultant - 98%, 68% and 62%

In hours

On call

Second action plan
Present findings at local audit meeting. Liaise with IT to incorporate indicators into report body automatically. Re-audit in 6 months.

Conclusion
Despite overall improvement in the reporting standards following increased local awareness, we are still shy of the 100% target, in particular amongst consultants. This is likely due to reluctance to change in established reporting practices. We intend to reach the target with the use of pre-set software integrated signatures.

References
2. www.rcr.ac.uk/posts/position-statement-recording-identity-healthcare-professionals-who-report-imaging%20(last accessed 31/05/2016)