



## Guidance for producing a QSI Accreditation Business Case

### 1 Introduction to this guidance

This guidance document is intended to help you develop a business case to enable your imaging service to participate in QSI (Quality Standard for Imaging) accreditation. QSI is a professionally developed and owned standard devised to support your organisation to demonstrate its competence to consistently deliver safe and cost effective customer focussed imaging services whilst managing risks.

This document has been prepared by the Royal College of Radiologists (RCR), The Society and College of Radiographers (SCoR) and the United Kingdom Accreditation Service (UKAS).

This guide should be read in conjunction with the RCR document: 'Writing a good business case' (BFCR (12)5 <https://www.rcr.ac.uk/writing-good-business-case>).

The person responsible for writing the business case should establish whether there is already an organisational template for business cases. If so, the recommendation is to use that format as it is likely to be better received than a different format. The following are suggested as the main components of your QSI accreditation business case:

- The strategic context
- Analysis of the situation
- Scope and objectives
- Outline project plan with indicative costs
- Risks and benefits

#### **As far as is practicable, your business case should:**

- Be concise and clearly addressed to the audience concerned i.e. the decision makers within your own organisation;
- Be evidence based by referencing/citing factual and up-to-date data from your own organisation and where appropriate from other similar organisation's;
- Demonstrate how QSI will support your organisation's business priorities including any budgetary constraints.

## 2 The strategic context

This section should identify the drivers/problems within the policy and healthcare landscape that are relevant to the imaging service's quality agenda and which therefore make participation in QSI accreditation vital. Essentially, it should articulate the problem that QSI can be used to solve by identifying the area or areas where there are issues to be addressed, such as unacceptable reporting performance, inability to recruit staff /high agency costs, unfavourable patient satisfaction/reputational issues and missed opportunities to innovate and improve efficiency.

For example:

*The national vision is for an innovative, technologically enabled and integrated health service that provides the highest quality care, is convenient and meets the needs of patients from a range of locations. The aim is to accelerate accurate diagnosis, offer appropriate treatment, intervention and recovery. The future of diagnostic services is one where the service user will be at the heart of service design, delivery and evaluation. As a direct response to Francis, healthcare policymakers and regulators recognise the value of a culture of adherence to quality standards and are using them within accreditation to assure patients and other stakeholders that high quality, safe and effective patient care is being consistently delivered. QSI will also meet the recommendations within the Carter Report to identify significant and unwarranted variation in costs and practice within the imaging service through the implementation of Leadership and Management principles.*

*The Care Quality Commission (CQC) has approved QSI as important information for use within CQC hospital inspection methodology. NHS England have written to the CQC to assert that they remain committed to, and strongly endorses participation of diagnostic services in accreditation schemes. Saying that "Participants in these schemes undertake a rigorous review of their services at a point in time, but also set up systems for ongoing quality management and service improvement. We will therefore be asking commissioners to consider these schemes as essential when assessing good quality diagnostic services in future". It is therefore likely that the CQC and Commissioners will be looking for evidence that diagnostic imaging services meet the QSI in future inspection process. Commissioners may also be looking to QSI for information that demonstrates that organisations are taking account of patient feedback and involvement in service design and improvement, and to move the focus from process targets to outcomes. QSI has a whole domain of standards devoted to the patient experience.*

## 3 Analysis of the situation

This section should describe the situation behind the problem(s) in more detail and how the situation came about.

**Exemplar text:**

*Diagnostic imaging is an essential part of almost every patient pathway, in every medical setting and at all levels of health care. Demand for imaging is rising and at a pace that is outstripping capacity. In 2013 -14 there was an increase of 4.6% in imaging referrals across England. This is reflected our own service where there has been similar year on year increases in demand for CT, MRI, ultrasound, PET-scanning and interventional radiology services. This is happening at a time when we finding it difficult to recruit both radiologists and radiographers. Consequently, a significant percentage of our*

*budget is spent on agency staff and outsourcing reports to private tele-radiology providers. The consequence is decreased staff motivation and impact on care pathway in particular capacity to manage cancer multidisciplinary teams, MDT, and peer review for cancer specialties.*

*The Royal College of Radiologists and The Society and College of Radiographers cite the main challenges currently facing imaging services as:*

- *Inability to meet national cancer and stroke targets for cross sectional reporting;*
- *Lack of funding to replace outdated equipment;*
- *Inability to recruit radiologists;*
- *Current staff not able to allocate sufficient time for essential mandatory training, continuing medical education, CME/continuous professional development, CPD, and to engage in research.*

#### **4 Scope and objectives**

This section should identify participation in QSI accreditation as your preferred solution to the problem. The solution i.e. QSI, should be described in sufficient detail for the readers/decision-makers in your organisation to understand.

***Exemplar text:***

***The proposal is for a project to adopt QSI as the primary quality assurance and governance framework for the imaging service.***

*QSI is the only UK-wide recognised accreditation scheme for diagnostic imaging services. The process of preparing for and on-going participation in accreditation will help the service to identify and be in control of, service gaps/weakness, and risks. The information gleaned from regular self-assessment and active monitoring of our processes can be used to devise appropriate strategies to ensure the service is safe, cost-effective and timely and that risks are well managed. It will also demonstrate to patients, commissioners/purchasers, regulators and others our organisation's clear commitment to delivery of a high quality patient-centered imaging services. The information within QSI will allow clear and demonstrable evidence for joint working with other imaging services to ensure the Sustainability and Transformation agenda can be implemented with maximum efficiency across the proposed local footprint.*

*The aim is to establish and promote a quality culture where both imaging services management and operations are working collaboratively to ensure that resources are well managed and delivering high quality pre-examination, examination, reporting and post-examination processes as well as ongoing evaluation and continual improvements.*

***The objectives of the project are to:***

1. *Promote the adoption of QSI as the primary quality governance framework to all personnel working within our imaging service;*
2. *Review and document our imaging processes to align to QSI requirements and ensure that they are routinely implemented, regularly monitored and maintained;*
3. *Allocate and where necessary, negotiate adequate resources (personnel and equipment) to ensure that the technical quality of our imaging service meet QSI requirements;*

4. *Invite UKAS to undertake independent and impartial regular assessments of our imaging service against the QSI and to grant accreditation.*
5. *Establish regular management reviews to support continual improvements and to maintain UKAS accreditation status.*

## 5 Outline project plan and indicative costs

This section should describe the QSI accreditation project to include all resources required for its implementation. This should be a brief outline of the steps towards gaining and maintaining accreditation and key actions that the service, in particular senior management will need to take to achieve QSI accreditation with indicative timings and costs.

### **Exemplar text:**

#### **QSI project activities**

<b>Project stage &amp; timelines</b>	<b>Key actions</b>	<b>Responsibilities</b>	<b>Indicative costs</b>
<p>1. <i>Preparation for accreditation stage (approximately 12 months)</i></p>	<ul style="list-style-type: none"> <li>• <i>Secure support from Board level within the organisation for QSI.</i></li> <li>• <i>Commit to providing strong leadership throughout the implementation of QSI.</i></li> <li>• <i>Gain access to QSI accreditation Traffic Light Ready (TLR) tool to undertake a detailed gap analysis</i></li> <li>• <i>Attend preparation for accreditation workshops and network with accredited organisations</i></li> <li>• <i>Develop the internal quality management system to ensure that all documentation to include policies, procedures and protocols, training &amp; competency records, risk assessment and risk registers, general forms etc. are up to date and accessible to all who work within the imaging service.</i></li> <li>• <i>Where appropriate</i></li> </ul>	<p><i>Service management supported by a project/quality manager/coordinator on a full or part time basis</i></p>	<p><i>The internal costs will be dependent on the size and complexity of the organisation and any gaps identified.</i></p>

	<p><i>appoint a Project Co-ordinator/Clinical Governance Lead/Quality Lead/Project Manager to take day to day responsibility for the management of the quality management system. (See Appendix 1)</i></p> <ul style="list-style-type: none"> <li><i>Develop a comprehensive internal audit programme, with full monitoring effectiveness of all processes.</i></li> <li><i>Disseminate and communicate QSI requirements to all personnel ensuring a good understanding of the services commitment to quality and accreditation requirements.</i></li> </ul>		
<p>2. <i>UKAS application stage (2-3-months)</i></p>	<ul style="list-style-type: none"> <li><i>Apply to UKAS for accreditation (this is likely to be approximately 12 months after the initial gap analysis).</i></li> <li><i>UKAS pre-assessment and contract review to determine readiness for formal assessments, assessment approach and fee structure</i></li> </ul>	<p><i>Service management supported by quality manage/co-ordinator</i></p>	<p><i>£1,500 one off application fee</i></p>
<p>3. <i>UKAS initial assessments and accreditation stage (4-9 months)</i></p>	<ul style="list-style-type: none"> <li><i>Participate in the initial assessment and accreditation process.</i></li> <li><i>Implement and maintain quality management system</i></li> <li><i>Grant of UKAS accreditation (this is</i></li> </ul>	<p><i>Service management supported by all service personnel</i></p>	<p><i>The cost will be dependent on the size and complexity of your organisation</i></p> <p><i>Please contact <a href="mailto:imagingcustomerservice@ukas.com">imagingcustomerservice@ukas.com</a> to discuss the activities and locations that you wish to have</i></p>

	<p><i>likely to happen approximately 8-12 months following submission of application to UKAS).</i></p> <ul style="list-style-type: none"> <li>• <i>Annual UKAS surveillance assessments</i></li> </ul>		<p><i>assessed and to get an estimate of annual fees for QSI</i></p>
<p>4. <i>On-going evaluation and internal management review</i></p>	<ul style="list-style-type: none"> <li>• <i>Maintain accreditation through on-going self-assessment, continuous monitoring and review of performance.</i></li> <li>• <i>Invest in resources as necessary to ensure sufficient and necessary competent staff, equipment and facilities.</i></li> </ul> <p><b>Costs not included.</b></p> <ul style="list-style-type: none"> <li>• <i>Implement internal audit programme</i></li> <li>• <i>Implement and monitor corrective and preventative actions.</i></li> <li>• <i>Update the quality management system as necessary.</i></li> <li>• <i>Annual senior management internal management review to monitor performance, plan developments and prioritise allocation of resources</i></li> </ul>	<p><i>Service management supported by all service personnel</i></p>	<p><i>These costs are dependent on each individual organisation. An estimate can be discussed with UKAS.</i></p>

## 6 Risks and benefits

This section should evaluate the costs/risks of not implementing QSI versus the anticipated benefits of implementation.

The key weaknesses and/or risks are likely to be known from your recent SWOT and/or PESTLE analysis and/or independent management review of your imaging service. In addition, your incidents log, risks register and complaints log may provide vital information.

Try to illustrate your case for QSI accreditation with data from similar organisations that have already participated in the accreditation process.

### **Exemplar text:**

*Feedback from QSI accredited organisations readily acknowledge that it is a challenging but highly worthwhile process for all concerned. In all accredited organisations clear managerial leadership and an injection of short team resources, specifically a quality manager / coordinator (can be full or part-time) to oversee development of the quality management system, were fundamental to be successful. However, all accredited organisations publicly acknowledge that the medium and long term benefits far outweigh any short term outlay and or inconveniences.*

## **6 Sources of information and support**

Information about QSI accreditation can be found on the various websites listed below and through networking opportunities with QSI accredited organisations.

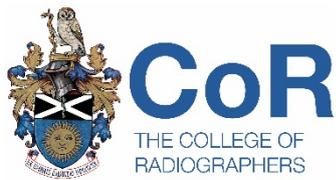
The Colleges employ a Quality Improvement Partner who is available to visit your organisation, meet with the team, provide information and discuss your particular queries. With a background in imaging and senior management, the QI Partner is able to empathise with the challenges faced within diagnostic imaging services and offer flexible solutions to meet each particular circumstance.

UKAS Assessment Managers and assessors are qualified Radiologists and Radiographers so they are very well qualified to provide constructive feedback to your service throughout the UKAS assessment and accreditation process.

Finally, you may wish to refer to UKAS' QSI accreditation Case Studies to see how other organisations may have benefited from the QSI accreditation journey to overcome issues and challenges similar to yours, within their own organisation.



[www.rcr.ac.uk/qsi](http://www.rcr.ac.uk/qsi)



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[www.ukas.com/www.isas-uk.org](http://www.ukas.com/www.isas-uk.org)