

# Team Based Review and Reflection

There is an idea that Continuing Professional Development is purely a solitary activity but, as with an earlier activity Sharing Good Practice, this activity is designed for a collective approach for the department that all the staff can work on together with a lead from the head of department.

The Institute of Medical Illustrators has been running its Quality Assurance Standards (QAS) Scheme<sup>1</sup> since 2002 and it has been successfully completed by a number of departments, currently 11 at QAS Level 1 and 2 at Level 2. What this scheme has developed is designed to match in with other quality assurance systems<sup>2</sup> and it provides a useful list of areas of activity in a medical illustration department that can be reviewed and reflected on as part of a team based activity. Indeed some of the standards directly address the CPD records of the team so involving the whole team will work more effectively as an activity. Even if some of the information required is more managerial it is really about how everyone pulls together to ensure implementation of policy through the team's practice.

The quality assurance handbook (<http://www.imi.org.uk/QAS/IMIQASHandbook01Sep09.pdf>) provides a guide to the Quality Assurance Standards and the process for inspection. However, what it also provides are a list of Standards for QAS Level 1 and Level 2, see Table 1 for categories.

As the IMI website states:

"The Quality Assurance Standards scheme provides a systematic framework to measure the implementation and effectiveness of quality initiatives in Medical Illustration units across the UK. It is intended that they will complement, but not duplicate, existing quality assurance programmes and provide an opportunity to share and disseminate good practice."<sup>1</sup>

Also it describes the attributes for the levels<sup>1</sup>:

QAS Level 1 provides a baseline for departments who undertake training and therefore ensure that degree students are provided with all that is required to meet their training needs. In future all universities placing students will require a guarantee that work placements are fit for purpose. QAS Level 1 provides that guarantee.

QAS Level 2 is designed to examine overall organisational excellence, testing not only that systems are in place, but also that knowledge and understanding of policies, procedure and protocols are apparent.

Table 1. Categories of standards for Quality Assurance Scheme Levels 1 and 2. (IMI 2009 p 6 & 21)

QAS Level 1	QAS Level 2
1 Management Structure	1 Service Management
2 Service Overview	2 Systems Management
3 Human Resources	3 Human Resources
4 Communication	4 Communication
5 Client Care	5 Client Care
6 Stock Control	6 Information Management
7 Systematic Operational Management	7 Financial Resources Management
8 Information Management	8 Inventory and Stock Control
9 Service Improvements	

<sup>1</sup>Institute of Medical Illustrators. Quality Assurance Standards Scheme [URI <http://www.imi.org.uk/QAS/QAS.asp> accessed September 16th 2009]

<sup>2</sup>Fleming, C.M. Armes, F.M. (2001) The suitability of ISO 9001 as a quality system for a medical illustration department. *Audiovisual Media in Medicine* 24, Suppl: S17–22.

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The aim of the next section of this CPD activity is not to repeat all of the handbook but to suggest how the standards may be used to look at your and your teams practice, even if you don't want to go as far as undertaking the audit.

### **Team based activity 1 – Look at how we communicate**

Section 4 of Level 1 looks at communication (IMI 2009) p8

Standard 19 Record of scheduled organisational and departmental briefing sessions

Standard 20 Staff identification in accordance with Patient's Charter (name badge, portraits displayed, etc.)

Standard 21 Copyright and Consent Policies

Standard 22 Telephone answering

Part of this is do we/don't we but other aspects look at fundamental questions of medical illustration practice:

Do organizational briefings get through to everybody?

How do we answer the telephone?

Does everyone know the right way to do this and handle messages and conversations?

Does everyone know about the copyright and consent policies?

### **Team based activity 2 – Does policy match practice?**

Aspects of consent may be picked up in a number of other standards so the team needs to look at whether everything is aligned so that it all works together.

Standards 9 & 10 to do with induction to the organisation

Standard 14 CPD records and reflective diaries

Standard 15 Reference to Professional Body and Code of Conduct

Standard 21 Copyright and Consent Policies

Standard 23 Patient Consenting Procedures

Standard 28 Evidence of operational process control and workflows identified (including process mapping, digital workflows, patient pathways, service document control)

Standard 34 Copy of organisational complaints procedure

How do we go from policy to practice?

In reviewing what you actually do, does this meet up to your policies, does it go beyond them or fall short of what is necessary?

Is everyone doing things the same way?

Is everyone's understanding of the purpose of consent the same?

How are difficulties dealt with in the department are they reported and followed-up?

Was what the newest member of staff told at induction the same as everyone else is doing?

The standards then provide useful hooks to ask questions about your departments practice. In addressing the standards you are starting to reflect on individual and collective practice. This kind of review cannot be done instantly but could be used over a number of months or through away day(s) with staff working on their personal response to a section then collectively meeting together regularly to reflect on what you are doing and how effective your quality practices are as a team.

This kind of team based practice fits into the widest part of the triangle of the Measurement for Quality Improvement Framework<sup>3,4</sup> with team benchmarking for improvement, acting as a good way of working on developing CPD in a department and preparing you for applying to be audited.

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<sup>3</sup>Department of Health. (2009) Quality Pyramid Overview of the quality indicators framework. [URI <http://www.ic.nhs.uk/webfiles/Work%20with%20us/consultations/CQI/QualityPyramid.pdf> accessed September 16th 2009.]

<sup>4</sup>The NHS Information Centre. (2009) Measuring for Quality Improvement. [URI <http://www.ic.nhs.uk/services/measuring-for-quality-improvement> accessed September 16th 2009]