

# Conflict Of Interest: Guidelines For District Health Boards

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## Measuring and managing radiologist workload: A method for quantifying radiologist activities and calculating the full-time equivalents required to operate a service

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### Abstract

**Introduction:** Accurate and transparent measurement and monitoring of radiologist workload is highly desirable for management of daily workflow in a radiology department, and for informing decisions on department staffing needs. It offers the potential for benchmarking between departments and assessing future national workforce and training requirements. We describe a technique for quantifying, with minimum subjectivity, all the work carried out by radiologists in a tertiary department.

**Methods:** Six broad categories of clinical activities contributing to radiologist workload were identified: reporting, procedures, trainee supervision, clinical conferences and teaching, informal case discussions, and administration related to referral forms. Time required for reporting was measured using data from the radiology information system. Other activities were measured by observation and timing by observers, and based on these results and extensive consultation, the time requirements and frequency of each activity was agreed on. An activity list was created to record this information and to calculate the total clinical hours required to meet the demand for radiologist services.

**Results:** Diagnostic reporting accounted for approximately 35% of radiologist clinical time; procedures, 23%; trainee supervision, 15%; conferences and tutorials, 14%; informal case discussions, 10%; and referral-related administration, 3%. The derived data have been proven reliable for workload planning over the past 3 years.

**Conclusions:** A transparent and robust method of measuring radiologists' workload has been developed, with subjective assessments kept to a minimum. The technique has value for daily workload and longer term planning. It could be adapted for widespread use.

**Key words:** planning; productivity; radiology; time; workload.

### Introduction

It is the mark of an educated mind to rest satisfied with the degree of precision which the subject admits and not to seek exactness where only approximation is possible.

Aristotle, 384–322 BC

In 2007, delays in accessing and reporting diagnostic imaging were having a significant negative impact on the flow of inpatients and outpatients through our tertiary

hospital services. Depending on clinical urgency, outpatients were waiting over a year to access ultrasound, CT or MRI. Once imaging was completed, there were then significant delays in reporting, with up to 1500 unreported cases waiting. Emergency and inpatients were typically waiting over 12 h for a report (compared with a target report turnaround time of 4 h), and outpatients over 24 h. A project looking at radiology capacity (jointly undertaken by our radiology service and our institution's Business Development Unit (BDU)) identified limited

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This publication is specifically aimed at district health board members, and discusses members' interests and conflicts and how to manage. Conflict of Interest Guidelines for District Health Boards. Wellington: Ministry of Health. Published in June by the Ministry of Health. PO Box . Every District Health Board (DHB) is a Crown Agent for the purposes of the Crown Obligations described elsewhere in this guidance (e.g. conflicts of interest. Conflict Of Interest Guidelines For District Health Boards Pdf conflict of interest guidelines - metropolitan council - this document is not intended to be and. District Health Board are not influenced by the personal interests of its employees . The District . Conflict of Interest Guidelines for DHBs . Ministry of Health. Management of conflicts of interest in the three Auckland District Health Boards. General findings for the three Auckland District Health Boards The policies contain detailed examples and guidance about particular scenarios that can arise. Managing conflicts of interest: Guidance for public entities. of boards of statutory entities (as that term is defined in the Act), except for district health boards. the public sector called Managing conflicts of interest: Guidance for Particular conflict of interest rules that apply to district health boards. The Role and Authority of the Board of a District Health Board. "Conflicts of Interest Guidelines for District Health Boards". These guidelines are aimed. Capital & Coast District Health Board Conflict of Interest. Statements. District Health Board Elections - Guidelines For Conflicts Of. Interest Statements. The next West Coast District Health Board (DHB) election will be held in . Person who has failed to declare a material conflict of interest before accepting nomination as of Interest Guidelines for District Health Boards (external link). The purpose of this policy is to set out Waikato District Health Board's (DHB) legal standards for research and meet internal requirements. The primary focus of .. give rise to a conflict of interest between their Waikato DHB activities and. Bay of Plenty District Health Board Agenda. Item No. Item. Page. Conflict of Interest Guidelines for District Health Boards. Integrated. The workbook provides information about roles and responsibilities of District Health Boards and their . Conflict of Interest Guidelines for District Health Boards. Introduction. All statutory Crown entities, including District Health Boards (DHBs) are expected to have a . Schedule 3: Conflict of Interest Guidelines for DHBs.

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