ACR's Minimum Requirements for Peer Learning Physician Quality Assurance Pathway for Accreditation

1. Written practice policy: A written Peer Learning practice policy is required. The policy should include the items listed below.

1. **Culture:** The Peer Learning practice policy should be devised with an emphasis on supporting a culture of learning and minimizing blame.

2. **Goal:** The goal of Peer Learning is improvement of services. That goal relies on the establishment of trust, and the free exchange of feedback in a constructive and professional manner.

3. Definition of Peer Learning opportunities:

   a. Peer Learning cases address actual or potential performance issues, including both discrepancies and "great calls."

   b. Cases should be identified during routine work, case conferences, event reports, or by other sources, rather than through a review of randomly selected cases.

4. Description of program structure and organization:

   a. **Roles:** Define the roles of physician and non-physician leaders(s)

   b. **Responsibilities:** Provide a description of responsibilities, and the amount of time or the percentage of full-time equivalent (FTE) hours to be dedicated to managing the Peer Learning program.

   c. **Workflow:** Define the workflow for a Peer Learning opportunity submission. Also define the workflow for review of Peer Learning submissions communication with the interpreting radiologist as appropriate, and designation of the Peer Learning submission for group sharing.

5. Define targets:

   a. Define expectations for minimum participation by target radiologists in Peer Learning submissions and in learning activity participation.

   b. Set minimum standards for Peer Learning program activities (defined as in-person or online conferences or other virtual learning formats) that ensure enough opportunity for practice members to review and learn from the content.

6. **Quality Improvement:** The Peer Learning policy should outline a process for coordination with appropriate practice and administrative personnel to translate findings

from Peer Learning activities into dedicated quality improvement efforts.

7. **Reporting:** The Peer Learning policy should include a statement of commitment to sequestering Peer Learning activity content from individual practitioner's performance evaluation. While participation in the Peer Learning program may be included in the evaluation of professionalism, performance data must not be created out of Peer Learning data.

2. Annual documentation of program activities

Annual Peer Learning program accomplishments should be documented. The annual summary should include:

1. Total number of case submissions to the Peer Learning program.

2. Number and percent of radiologists meeting targets as defined in your practice policy.

3. Determination of whether Peer Learning activities met the minimum standard as defined in your practice policy.

4. Summary of related Quality Improvement efforts and accomplishments.