WFPI Executive Committee Meeting, 1st September 2016 (online)

Present: Gloria Soto/GS, (President), Wendy Lam/WL (Vice President), Dorothy Bulas/DB, (Secretary), Jaishree Naidoo/JN, (Vice Secretary), Rutger-Jan Nievelstein/RN (Treasurer), Richard Barth/RB (Vice Treasurer), Cicero Silva/CS (Outreach lead), Brian Coley/BC (Digital education lead), Ines Boechat/IB (Coopted Director), Amanda Dehaye/AD, (General Director), Kim Pede /KP (Admin Support)

Absent: Veronica Donghue/VD (Past President), Kimberly Applegate/KA (Coopted Director, IG Representative)

Blue comments = action

1/Mapping – overview of progress to date, next steps

GS: An overview of the progress for Phase 1 was provided. We are asking people from different regions or countries to define what a pediatric radiologist is according to their country or region. We received information from Africa, US, Canada, Latin America, and Asia. For Asia, the region is complex. WL has heard from India, Japan, China and Korea, work is ongoing on other countries. We have asked for feedback on the format as well. ESPR wishes to wait until their next board meeting in January 2017 to determine whether/how they will participate in this project. Meanwhile, we are contacting WFPI's 4 national/supernatural European societies to assist us — this would no doubt have been expected anyway. They include the German-speaking, the French speaking, the British and the Spanish Pediatric Radiology Societies.

IB: offered support in contacting people in the European region for data. RB suggested Hans Ringertz might also be able to help.

GS: re-iterated that ESPR was fully expected to join in this project, which is a pure exercise of data collection – no political aspects to it at all.

IB: asked how we get information from Russia. GS said we are putting out word that we need contacts in this region. But we will have some gaps to fill that require extra effort/intense networking.

Action:

September: receive finalized data for Phase 1 - working group will define the survey questions, the format and platform used to conduct the survey.

October: send survey to contact people

November: review and compile the information

2/ Digital Education -recap of main points going forward, next steps, questions

BC: Following last EXCOM's overview, BC re-iterated that we are seeking to assess WFPI's digital education successes and the value it provides to its members and other people we are trying to reach. Five years out, we need to look at what we have, how it is been disseminated, what has been useful, and what has not.

In more detail, AD has looked at how materials have been accessed, where they have been accessed on what platform, who is accessing it and how long have people been staying with the materials. In addition, how are people reached, how do they communicate with one another, how do they know when new content has been added?

We are preparing a survey to reach out to those people who have strong involvement in the delivery of international education in different low/middle income regions around the world (around 20 people). With their help, we aim to establish gaps in the offerings, review what we have, see what's available elsewhere and then fill in the holes via curating the materials and updating our own offer via a newly defined curriculum.

Two very distinct complimentary surveys will be going out. One survey will be on global mapping with the purpose of identifying the number of pediatric radiologists and how they are trained. The second will be looking

at pediatric radiology services that are **not** provided by pediatric radiologists. We can only get to the teachers of these healthcare providers, so the teachers will be asked to answer on these latter's behalf.

The survey will be sent out as soon as we have feedback from the other members of the digital education team. We will not be looking to delay 3 weeks, even though Image Gently is not currently available to work on its questions in the survey – we will manage with the IG input we already have.

Action:

Send the survey out ASAP

3/ Outreach update

TELERREADING

CS: we used to receive over 100 tele-radiology cases a month. Following the onsite WFPI –supported team visit, the onsite team now handles most cases, only referring the most problematic ones. We received 1 case in July, 5 in August from Laos. Laos is the only site currently sending us cases. Very few are using the tool. Angkor cases may still be going directly to VD? Our network of volunteers is in a low activity patch. So, a question: should we start soliciting outreach work if we have engaged stakeholders?

AD: yes, since uptake of offers is rare and often slow. We should communicate with the site in Tanzania, e.g. BUT this hospital does not have internet onsite – the team needs to travel 30km to Dar Es Salaam on poor roads to upload images at the (low speed connection) hospital, etc etc. There are significant barriers to taking us up on our offer of help – there so often are....

CS: should we advertise our services? AD: we already have – for our TB Corner/hotline in South Africa. But emphasize we are volunteer. They don't have Internet on site. They are unable to login to the internet from their location, they have low speed internet in the hospital, poor roads, they need to get their images into Dar Es Salaam - there are barriers to get the images to us. DB asked if we could have a one-page explanation what can be offered and what could be needed. AD shared that this already exists – on the outreach dropdown menu, "Who and How", on the website.

POCUS

CS: the British Paediatric Radiology Society outreach team is about to start its POCUS training courses. We should invite Savvas to give a report on POCUS activities directly to EXCOM. GS approved.

- CS and Ricardo Faingold have been invited to Brazil to teach ultrasound. But would this be considered a WFPI outreach engagement? AD showed EXCOM the website page where the process for "WFPI affiliation" is outlined (Outreach, Who and How).

TB CORNER

AD: TB Corner is a successful education page on the website, but the articles have not been published. The group leader Bernie Laya has submitted a Childhood TB mini symposium proposal to the journal of Pediatric Radiology, which has been accepted (under the European Managing Editor's management). Timeline: hopefully compiled by December 31, 2016 for release in time for World TB day in March 2017 (though this may be too tight).

WHO CRES PROJECT

GS: the WHO radiology group centered on epidemiological surveys on the effectiveness of pneumonia (PCV) vaccines, which includes two WFPI representatives – Nasreen Mahomed and Henrique Lederman – met in June 2016. It is revising standards for reading pneumonia patients' X-rays. There may be interest in developing these standards or clinical use as well – to be discussed with Maria Del Rosario Perez/WHO in September.

4/ SPR half day program

GS: Sent an outline to the SPR office regarding the half-day program that WFPI would like to present at the SPR Meeting in March of next year. We are now we are trying to define the program in more detail and identify the different speakers.

We will start the presentation with an update on our mapping project, providing an introduction to the needs and gaps in digital and onsite outreach. BC will define the digital education portion of the session, which should include an existing digital education provider and receiver (eg from the RSNA-supported RISE project, provided by a USA team and guided by receivers including Gladys Mwango from Kenya, who is on our Council.). The latter will throw light on the challenges of having the receivers' point of view factored in. There will be a small section on WFPI's own status report and revised digial education offer/plans. CS will moderate the onsite outreach part, with the same aim — mixing providers and receivers from other organizations/projects to glean lessons learned, tips and tricks. Likewise for the third, POCUS session to be moderated by Savvas. A final session will cover ethical issues in international outreach work. It will be a small audience, but out aim is to learn from each other, with the end goal of writing a paper with all of the panelists on the pitfalls and avenues to success in providing useful digital and onsite pediatric imaging outreach.

5/ Newsletter

AD: We are looking into a new format for the newsletter and will provide an update at the next ExCom Meeting.

6/ Any other business

It was determined that WL would take over the WFPI presidency in SPR/Vancouver, along with WFPI's 2017 Annual Members' Meeting, as this will likely be the meeting with the most WFPI people present (given the half day session).

AD: re-iterated that the Council rotations to do not have to take place at the same time as the WFPI Annual Members' Meeting, otherwise this latter is permanently scheduled for SPR or ESPR in May/June. It should be rotated elsewhere sometimes – BUT it will be more online that onsite as a consequence....

Next EXCOM meeting: Thursday 6th, October

[EXCOM meetings take place on the first Thursday of every month]