



Society of Radiographers
Annual Report 2010/11

Professional and progressive



The Objects

The objects for which The Society is established are:

- To promote and develop for the public benefit the science and practice of radiography and radiotherapeutic technology and allied subjects;
- To promote, study and research work in radiography and radiotherapeutic technology and allied subjects and to publish the results of all such study and research;
- To further public education therein;
- To protect the honour and interests of persons engaged in the practice of radiography and radiotherapeutic technology and allied subjects including the regulation of relations between such persons and employers and employers' associations.
- To further all such objects which a trade union may lawfully pursue in accordance with statute.



Annual report 2010/11

for the year ending 30 September 2010

The Society of Radiographers is the trade union and professional body for those practicing in medical imaging and radiation therapy.

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The Society's Council



Front row from left: Dawn Brunning, Sue Johnson, Sandie Mathers, Jackie Hughes, and Gill Dolbear.

Middle row from left: Margot McBride, Pam Black, and Sandra Conn.

Back row from left: Ian Henderson, Kenny McMurray, Samantha Fyfe, Karen Smith, and Steve Harris.



Andy Thomas



Zena Mitton

SOCIETY COUNCIL MEMBERS AND OFFICERS

For the period of this Annual Report and until 12 January 2011

ELECTED OFFICERS

President:	Mrs G Dolbear MSc PgCL&T(HE) DCR(R)DMU (to 30.06.10) Mrs S Mathers MSc DCR(R) (from 01.07.10)
President Elect:	Mrs S Mathers MSc DCR(R) (to 30.06.10) Mrs S Johnson MA BSc(Hons) DCR(R) PgC (from 01.07.10)
Vice President:	Mrs S Johnson MA BSc(Hons) DCR(R) PgC (to 30.06.10) Mrs J Hughes DCR(R) (from 01.07.10)
Immediate Past President:	Mrs G Dolbear MSc PgCL&T(HE) DCR(R)DMU (from 01.07.10)

SENIOR OFFICERS

Chief Executive Officer:	Mr R Evans HDCR
Head of Professional Policy:	Professor A Paterson MSc TDCR DMU FCR
Head of Industrial Relations:	Mr W Town MA DCR(T) DLS
Head of Finance:	Mr N Williams FCA
Editor 'Synergy News':	Ms E Abbott and Ms C Swaffer (from 01.08.10)
Editor 'Synergy Imaging and Therapy Practice':	Mrs R Deeson
Editor 'Radiography':	Dr R C Price MSc FCR

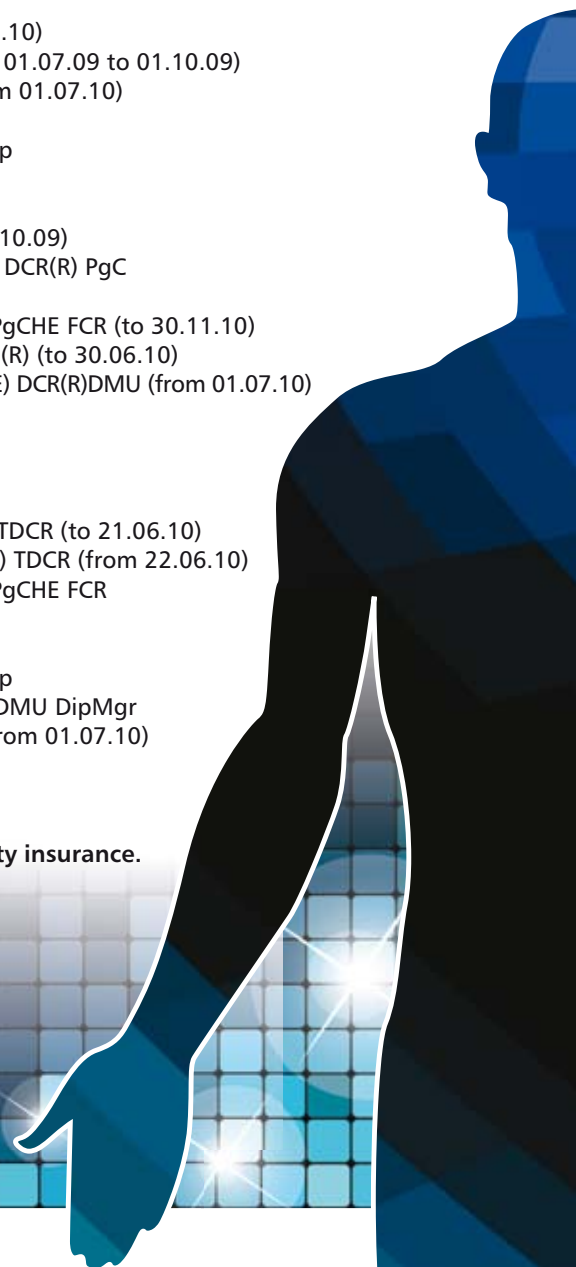
REGIONAL REPRESENTATIVES

Scotland	Mr K McMurray DCR(R) Mrs S Mathers MSc DCR(R) (to 30.06.09) Dr M McBride DCR(R) Ms S Fyfe DCR(R) (from 01.07.10)
Yorkshire & North Trent:	Mr M Graveling BSc(T) (from 01.07.09 to 01.10.09) Mrs K Smith MSc DCR(T) (from 01.07.10)
Northern:	Mr S Harris BSc(Hons)(T)
North West:	Mrs P Black DCR(R) NVQ PgDip
Northern Ireland:	Mrs S Conn TDCR
Wales:	Mrs J Hughes DCR(R) Mr A Thomas TDCR (from 21.10.09)
Midlands:	Mrs S Johnson MA BSc(Hons) DCR(R) PgC
Eastern:	Mrs Z Mitton DCR(R) DRI FCR
London:	Mr I Henderson MSc DCR(R) PgCHE FCR (to 30.11.10)
South East:	Mr R N C Bickerton BSc(Hons)(R) (to 30.06.10) Mrs G Dolbear MSc PgCL&T(HE) DCR(R)DMU (from 01.07.10)
South West:	Mrs D Brunning BSc(Hons)

THE COLLEGE OF RADIOGRAPHERS BOARD OF TRUSTEES (CBOT)

Trustees:	Mrs N Sinclair MA BSc(Hons) TDCR (to 21.06.10) Mrs P Williams MSc BSc(Hons) TDCR (from 22.06.10)
Chairperson:	Mr I Henderson MSc DCR(R) PgCHE FCR
Ms P Chapman	Mrs J Hughes DCR(R)
Mr A Kay	Mrs Z Mitton DCR(R) DRI FCR
Mr I Eversden M.Phil	Mrs P Black DCR(R) NVQ PgDip
Mr J Foster FCA	Mrs E Chapman MSc DCR(R) DMU DipMgr
Mrs P Williams MSc BSc(Hons) TDCR	Mrs S Mathers MSc DCR(R) (from 01.07.10)
Dr K McHugh FRCR	
Mrs G Dolbear MSc PgCL&T(HE) DCR(R)DMU (to 30.06.10)	
Mr D Adrian-Harris TD JP MPhil BA (psych) TDCR HDCR (from 07.12.2010)	

The Council members and College Trustees are covered by professional indemnity insurance.





A busy and challenging year

Sandie Mathers

President 2010/11



I am delighted to write the foreword to the annual report of the Society and College of Radiographers (SCoR) of the United Kingdom (UK). This covers the activities of the organisation between 2010 and 2011. It has been a very busy and challenging year.

At the time of my inauguration last July, the SCoR was celebrating the 90th Anniversary of its founding, and honouring members who had made significant contributions to our profession in the fields of education, professional practice and professional development. Nothing focuses the mind more than reflection on the past, as in doing so brings into sharp focus how far the profession has progressed in a relatively short period of time.

It is essential, however, that we also look forward and in doing so it is evident that we, as a profession, have not reached our full potential. Much work has been carried out with examples of advanced practice of both imaging and therapy radiographers indicating their valued contribution to improved patient services. There is still much to be done to enable all our members to take on these new roles.

The SCoR have spent, and will continue to spend time and effort, working with our fellow imaging professions to ensure we all work together to improve the service we provide for patients. This was admirably described by Dorothy Keane when she presented The College of Radiographers William Stripp Memorial lecture at UKRC 2010. She described a multi-professional model that recognises each other's talents and strengths and places the needs of the patient at the heart of the service.

My year as President will end during 2011: The Year of Radiotherapy. This excellent initiative, which seeks to increase the awareness of public and policy makers to the value of radiotherapy in the treatment of cancer, was launched at the very successful Radiotherapy weekend at the end of January. The Society of Radiographers has again

collaborated with other professional bodies to jointly develop and promote this venture.

Since the general election of 2010, the staff of SCoR have spent many hours ensuring that the views and opinions of radiographers, both in education and professional practice, is heard in the responses to the unceasing number of consultations issued by the coalition government. In particular, these consultations relate to the changes in health care as proposed in the White Paper. In addition, the CoR Patient and Public Liaison Group contributed and have added another dimension to our response, this time through the eyes and ears of our patients and the general public.

Although this White Paper only applies to England, members in the other three countries of the UK cannot be complacent. Who knows what may be around the corner? What ever it is, the Society will continue to work for us all.

In addition to my presidential duties this year, I have also dealt with an international portfolio. While participating in the council of the International Society of Radiographers and Radiological Technologists (ISRRT), followed by their world congress in Brisbane, Australia, and the Radiological Society of North America (RSNA) in Chicago, it is apparent that radiographers around the world look to the United Kingdom as the leaders of the profession. Many are looking at our advanced practice as a way to improve the quality of patient care in their own countries.

It has been an honour to represent the Society over the past 12 months, and I want to take this opportunity to thank all of you who have made me feel so welcome wherever I have attended events. I have enjoyed meeting so many members across the UK who are working in all areas of the profession. In addition, I have met groups of very enthusiastic students whose expectations of their chosen career are high. I feel confident that the future will be safe in their hands.

I would like to express my gratitude to all the UK Council members and the current presidential team for their support over the past year. I would also like to take this opportunity to thank the chief executive officer, the directors and all the staff of the Society and College of Radiographers for their efforts to promote and support this profession. The content of this report is a suitable tribute to their continued hard work.

I commend this report to all members of the College and Society of Radiographers.



A professional and progressive year

Richard Evans
Chief executive officer



It is a pleasure and a privilege to present this report on the activities of the Society of Radiographers in the year to 30 September 2010.

This was a busy and successful year that saw activity in both professional and industrial aspects of the Society being recognised and resulting in growing membership. Combined with continued efficient working at all levels, and the return of some stability in the investment markets, this resulted in the improved financial results that you will see within this document. This strong business basis is important as we face the period of change in the NHS in England, as we anticipate impacts in the devolved nations, and as we seek to develop policy and advice to keep radiography at the centre of progressive health care.

We know that our success as an organisation is due to the hard work of front-line members. Strong membership growth is achieved by representatives and other active individuals. Development of evidence to support professional development takes place in busy departments and in universities. Members give generously of their time to support the Society through regional committees, national councils, working groups and by writing for our journal and publications. Countless others promote radiography simply by delivering excellent services day in and day out.

The respect and influence we have earned as a profession and the strength we exercise in defence of our members' interests, are attributable to those very same members. Our second survey of the satisfaction of members with the work of the Society was completed in the early Spring of 2010. Improvements in performance since the initial review were noted and showed good progress. We nevertheless have plenty of points on which to improve still further and work is continuing through this year. The next survey will take place in 2012.

In acknowledging members at the heart of the SoR, most particularly I must pay tribute to the 15 who make up UK Council. Not only do they take on the responsibilities as directors of the company, but also they provide the strategic direction and leadership that is fundamental to our success as a profession and as an organisation.

Council and our members call upon the 40 staff of the SoR, which I am privileged to lead. As always, I am grateful to each of them for their tremendous hard work and support. Audrey Paterson, Warren Town and Neil Williams deserve particular thanks. We are extraordinarily fortunate to have such an outstanding team of senior managers. In the year covered by this report we were sad to say goodbye to Kate Garas and, as I recorded last year, we tragically lost Hazel Gilmour from our team. It has been good to welcome Alex Lipton as professional officer for managers and cross-sectional imaging, and Janet Fletcher as national officer for Northern Ireland.

The diversification of the organisation of healthcare continued in the four countries of the UK. This report gives details of SoR activities in the devolved administrations where political control tends to remain rather more explicitly centralised than is the case in England. Models of

National Health Service (NHS) commissioning and the role of independent sector providers are also examples of the difference in emphasis that inevitably provide challenges in the way we advise and support as a UK-wide organisation.

The general election came in the middle of the year, with all parties promising to protect health spending in England. The economic squeeze on the NHS was, however, already prescribed in terms of increased service provision with no increase in real terms funding, a 'challenge' equivalent to a cut of £20billion over four years. The coalition government's subsequent proposals forewarn of sweeping changes affecting every aspect of health care delivery. These understandably provoke deep concerns that the risks of such change, particularly at a time of financial shortage, threaten to undermine NHS provision.

The effects, inevitably, have crossed borders and will continue to do so. The result has been a lot of uncertainty for our members and the services that they deliver. The Society is responding by working closely with members to protect terms and conditions and ensure fairness at the local level. We are also working to help managers and leaders make the case for strengthening and developing their imaging and radiotherapy services so that they can weather the storms of change and take advantage of opportunities.

It should be no surprise that continuing to build progress on professional development remained at the heart of our policy advice. As international interest began to change into positive moves to follow the UK lead, particularly towards image interpretation, we were challenged from closer to home to provide evidence that radiographers' advanced practice is demonstrably safe and effective. The document *Medical Image Interpretation by Radiographers: Definitive Guidance* was



widely welcomed across the diagnostic imaging community. It provides an excellent example of how the case for safe, efficient services can be made with first class professional practice and team working at the centre.

The SoR has continued to collaborate effectively with partner organisations in health care and industry. The Imaging Services Accreditation Scheme (ISAS), based on the standards developed with the Royal College of Radiologists (RCR), saw expressions of interest from a large number of services in both independent and NHS settings, with a good number setting out to achieve accreditation.

Another successful United Kingdom Radiology Congress demonstrated partnership, once again, with the RCR, along with the British Institute of Radiology (BIR) and the Institute of Physics and Engineering in Medicine (IPEM). There was much work in radiotherapy guidance and standards involving the Society with RCR and IPEM. We also work closely with other professions through the Allied Health Professions Federation (AHPF), in addition to close collaboration with, and advice to, government health departments in all four UK countries.

The College of Radiographers Industry Partnership Scheme (CoRIPS) continued to grow in support of research projects amongst members. (See report on the opposite page).

Internationally, the European Federation of Radiographer Societies (EFRS) began to demonstrate a real influence with the EU government, whilst the International Society of Radiographers and Radiologic Technologists (ISRRT) commenced a new phase of its work following a survey of all member countries. The ISRRT Council meeting and world congress was held in Australia.

The context of unprecedented financial constraint and ever growing expectations of the health service results in some excellent examples of innovative professional practice, but also desperately poor decision making in too many parts of the NHS and the education sector. Departments everywhere and across all sectors are facing tremendous challenges at the present time.

The Society of Radiographers will rise to the challenges from a position of strength, the evidence for which you can read in this report. This strength is not an end in itself. Nor is it about achieving influence solely for recognition or profile. We need to be strong and to bring our influence to bear for the same reason that takes each of us to work every day...to improve, develop and protect excellent services for patients and the public.



Radiography research grows as more companies back partnership



The College of Radiographers Industry Partnership Scheme (CoRIPS) provides companies with the opportunity to collaborate with the Society and College and provide financial support for research and educational projects.

Bids by radiographers to carry out research may be up to £5000 for small projects and up to £10,000 for one larger project, although bids for funding exceeding these amounts will be considered. The scheme is part of the Society and College's commitment to increasing the amount of research being carried out by the profession.

Every year we report that the number of industry partners who are committed to the partnership has grown and this year is no different despite tough economic times. There are currently 18 companies actively involved:

Diamond partner

Alliance Medical
Vertual

Premier partner

Guerbet
OSL/TomoTherapy

Partners

Agfa Healthcare
Carestream
Covidien
Elekta
Fujifilm
GE Healthcare
Healthcare Software Systems
Integrated Radiological Services Ltd
Matchtech
Mirion Technologies
Nucletron
Siemens Medical
Toshiba Medical Systems
Varian Medical Systems

As part of an ongoing initiative to encourage radiographers to undertake research, Rachel Harris, the Society's officer with responsibility for the subject, has produced detailed guides and support for Society members about how to put together research proposals, where to go for funding (in addition to the College's CoRIPS scheme), a research starter pack, and research priorities.



Radiography in Northern Ireland, Scotland and Wales: Challenges and opportunities

Sadness and celebration in Northern Ireland



radiographers in Northern Ireland suffered the loss of two friends during the year: Hazel Gilmore, the Society's national officer for Northern Ireland, and Patricia Blackburn, the lead health professions officer for the province.

Hazel sadly died in February 2010. She had joined the Society in 2007, the first person to fill the new post, created because of the growing impact of devolution and because Northern Ireland was moving towards being in charge of its own government. Hazel found herself in at the deep end from the very start. Agenda for Change was proving particularly troublesome with many staff - including Hazel in her concurrent role as a sonographer - being assigned to lower than their correct pay bands and then being stuck for months that stretched into years to get matters resolved.

Janet Fletcher is Hazel's replacement and was appointed to the post of national officer in October 2010.

Patricia Blackburn died on 29 July. She had been a member of the Health Professions Council since 2001 and was described by colleagues as an incredibly enthusiastic worker, always poised to do the best she could for her patients. Throughout her career, Patricia achieved several key milestones. She became a commissioner for the allied health professions within the Public Health Agency in Northern Ireland in 2004; was on secondment to the Department of Health, Social Services and Public Safety as the lead allied health professions officer for Northern Ireland; and had worked as the orthoptic services manager for the Down Lisburn Trust.

Speaking at the time of Patricia's death, Audrey Paterson, the director of professional policy at the Society said: "As one of the allied health professions (AHPs) that Patricia represented so well in Northern Ireland, we will miss her very much indeed. Patricia put all AHPs on the political map in Northern Ireland and worked tirelessly to promote the role and value of radiographers as well as the other AHPs to healthcare services and to patients."

A major highlight of the year for radiographers in Northern Ireland was a double win at the prestigious Radiographer and Team of the Year Awards. The Paediatric Special Interest Radiographers from the South Eastern Health and Social Care Trust scooped the UK Team prize, whilst Valerie McCollum was the UK Radiographer of the Year.

Joanne Clayton, a senior radiographer at Ulster Hospital, nominated the paediatric team. She said: "They have worked hard to put the best interest of the child at the forefront of imaging practice and have addressed many of the recommendations from professional bodies for the improvement of imaging services for children and young people."

"A thoroughly professional radiographer who is highly committed to delivering the best service to the patient..." Those were the words written about Valerie McCollum, who works

at the Belfast City Hospital and is responsible for a team of 14 radiographers who provide a service across two departments.

As well as participating in recruitment, appraisals, procurement, maintenance and induction programmes, she works hard to ensure that staff training needs are met. Most of her staff have acquired a postgraduate certificate in computerised tomography (CT) and regularly take part in carrying out audits. During her 30-year career, Valerie has acquired extensive training in a wide range of CT machines and in 1994 she was the first radiographer in Northern Ireland to obtain a postgraduate certificate in CT.

Research by Queen's University revealed the quality of treatment for cancer patients in Northern Ireland had improved, despite the number of cases increasing. The work examined cancer care and outcomes for patients diagnosed with either prostate, breast or colorectal cancer between 1996 and 2006, across Northern Ireland. These forms together account for over 3000 cancers each year.

The reports highlight the need for continued work to prevent these diseases, but point to improvements such as more centralised treatment, closer working between clinicians, early diagnosis and better treatment options – all of which have had a significant impact on positive patient outcomes. The Northern Ireland Cancer Network continued to establish itself and held a stakeholder's event for all the allied health professions.

A Northern Ireland Regional Obstetric Ultrasound Forum was established during the year involving sonographers, midwives and obstetricians. Terms of reference and objectives of the group were sent to interested parties.

A busy year for the Scots

The professional officer for Scotland, Maria Murray, began a two year secondment to National Health Service Education Scotland (NES). She has been replaced by Evelyn Neilson, who took up a short term secondment at the end of October 2009.

A specialist advisory board examining career progression for the radiography workforce in Scotland finally got off the ground and the Society is doing some 'myth busting' about what radiographers can and cannot do. The board feels this will be helpful to addressing the resistance to role development and advanced and consultant level practice.

The managed diagnostic imaging network was formally launched and has a challenging work plan. The Society is represented on the steering group.

A user test in Edinburgh was carried out for the E-Learning for Healthcare Image Interpretation Project. This involved recruiting nine volunteers – seven radiographers, a junior doctor and nurse practitioner. The group of mixed computer ability tested three of the 50 adult skeleton image interpretation modules to check the system and for user evaluation. The experiment was a success because all the modules were launched a few months later to

great acclaim at the United Kingdom Radiology Congress. Other modules for the adult chest have since been added.

The Society has continued to play an active part in the Scottish Radiotherapy Advisory Group (SRAG). This included a workshop to shape services, which included representatives from across the multi-disciplinary teams in the five Scottish cancer centres who attended to consider the challenges and opportunities ahead and to agree a plan as to how to proceed. Presentations were given on the English and Dutch experience and the lessons that have been learned.

The organisation attended the 8th annual Scotland Against Cancer Conference of Cancer Research UK. The main theme of the conference was putting policy into practice. The Scottish cabinet secretary for health and wellbeing addressed the conference, touching on the legislation regulating the use of sun beds and praising the success of the ongoing cancer screening programmes.

A study day for assistant practitioners in Scotland was a great success with 40 assistants, trainees and mentors in attendance. The event was a collaboration between the Society and NHS Education for Scotland (NES).

Close working with politicians in Wales

Meetings are held regularly with the Welsh health minister every six to nine months and cover a wide range of issues such as radiography education; seven-day working; continuing NHS reform; career progression; the Society's document, 'Radiotherapy moving forward: Delivering new radiography staffing models in response to the Cancer Reform Strategy',

which was discussed in detail; and analysis of the breast screening appointment lengths survey.

The Imaging Services Accreditation Scheme (ISAS) was also on the agenda and the minister made it clear that local health boards are expected to support radiographers wishing to become ISAS assessors.

It was agreed that the Society's officer for Wales will work closely with the imaging modernisation team to deliver the workforce plan and improve communication links between the project and those engaged in the diagnostic imaging service.

The Society takes a very active part in the National Imaging Programme Board. Activities include attending a workforce workshop; giving a presentation on career progression and the future challenges for radiography in the principality; contributing towards a report considering the development of ultrasound training; and attending a multi-disciplinary leadership training event.

Wales took the lead for the organisation in the response to the consultation on the International Basic Safety Standards for Protection against Ionizing Radiation and for the Safety of Radiation Sources.

The Society's response to the consultation on 'Rural health planning – improving service delivery across Wales' was submitted.

Below: The Paediatric Special Interest Radiographers from South Eastern Health and Social Care Trust, Northern Ireland; Shirley Parke, Alyson Lattimer, Lindsey Fleming and Ruth Livingston with some examples of their hard work, and six-year-old Joel Lattimer.





Making progress with the profession's trade union and industrial relations issues

Warren Town

Director of Industrial Relations



The past year heralded a new era with a change of government and all that entails. The budget deficit dominated the election and has shaped the landscape for public services today and into the future.

National pay has been suspended in favour of local discussions to limit

costs and reshape terms and conditions. This is the future for industrial relations as the government implements draconian spending plans in the name and spirit of bringing the country back into the black.

Increasingly, we have seen employers develop cost improvement plans that do no more than cut services, limit role development, and cut incomes.

As long as this continues, and it will for some time yet, the Society will be faced with difficult decisions about how best to make use of services and prioritise activity. The Society's regional and national officers are actively encouraging members to be involved in local staff sides to defend their income and to dispute attempts by employers to reduce grades and make changes to terms and conditions.

Affiliated to the Trades Union Congress, we actively work with other public sector unions and 2011 will see the reinvigoration of mass protests and marches to support all who work for and in the public service.

We are dealing with managerial level re-organisations in the National Health Service with redundancies, reviews of out of hours services, and question marks over recruitment and retention allowances. Plus, we know that pay in the NHS will be frozen for two years. In this time of austerity there will be increased pressure to provide better and more services for the same amount of expenditure – this will inevitably mean that health service staff will be asked to work harder and longer, within increasing budgetary restraints.

The SCoR recognises the need for the NHS to work as efficiently as possible to make best use of public money and to deliver the best possible service, however we are clear that this cannot happen at the expense of our members' health, safety and well-being. Radiographers are often driven by their commitment to public service and their patients' welfare, but this can be at the expense of their own health and it can be taken advantage of by employers desperate to make savings whilst delivering targets.

It is clear that a finite number of staff can see only a finite number of patients and at some point the employer has to decide which parts of the service they are prepared to sacrifice. They cannot expect to provide the same, or increased levels of service, with less staff. This is particularly the case in areas of high patient throughput such as obstetric ultrasound and breast screening, which already cause many staff to damage their health due to the repetitive nature of the work, the high expectations of patients, and the increasing demand of the screening programmes.

A huge challenge for everyone in the NHS is the government's plans to introduce commissioning of healthcare by general practitioners. Potentially, this could have a huge impact on how diagnostic imaging services are delivered and who by. The Society is informing members, workplace representatives and managers with strategies as to how best prepare for the changes. For example, we are urging members to take up places on local GP commissioning boards to ensure that they are represented at every level of the new system.

The chief health professions' officer, Karen Middleton issued a 'call to arms', saying, "I cannot emphasise enough how important it is for radiographers to ensure appropriate representation at all levels of commissioning now – national, regional and local. Otherwise, there is the risk that the contribution made by services could be lost, simply through a lack of appreciation or understanding."

Pensions under threat

One of the most fundamental changes to terms and conditions proposed in the health service is the reform of public service pensions. Lord Hutton of Furness's interim report effectively 'put the knife in' and, ever since, the government has been twisting it.

It is an issue that unites all the unions who have members in the public sector to the extent that there is serious talk of balloting members on taking industrial action. The former Labour cabinet minister proposed that public sector workers would have to pay more towards their pensions and that retirement benefits would no longer be based on final salary.

Defending members' rights

In 2010 we continued to support Society members injured at work and achieved major settlements, many of which were

decided out of court.

Going forward into 2011 we hope that our success will continue but employers are turning to expensive insurance lawyers to defend claims. This means that whilst we shall continue to win, cases will take longer to resolve and the cost to the public purse will increase.

The number of Fitness to Practice hearings held by the Health Professions Council (HPC), the registration body for radiographers and other health professionals, increased last year. Cases have become more complicated and employers are more likely to report a practitioner. In the past, referral would have perhaps been more of an afterthought than a requirement.

On-call makes progress

A major industrial relation's issue for some years has been the arrangements for on-call. Historically, a huge sticking point between staff and employers, 13 principles were developed by the NHS Staff Council in 2010. The Society surveyed members and used the findings to feedback to the Staff Council, as did the other unions who took part in the on-call review group.

The principles have been written into a revised version of section 2 of the Terms and Conditions of Service Handbook, along with implementation guidance. They provide a framework for employer negotiations with local partnerships, to ensure that revised arrangements are in place when the current agreement ends in the Spring of 2011.

Work placement is a bullying minefield for students

A survey carried out by the Society revealed that one-third of students on work placement claimed that they have been bullied. Almost eight out of 10 said that they suffered from self-doubt and loss of confidence, inability to relax or switch off from study, sleeplessness, depression, and loss of appetite.

The SCoR has long held the policy that bullying and harassment is not acceptable in the workplace or elsewhere. In particular, we will not tolerate behaviour to students that compromise their ability to learn or their enthusiasm for this profession.

Our response to the survey was to issue information to students on how they can protect themselves and where they can get help. We are also alerting members and others as to the folly of treating students badly. There will be additional training for Society workplace representatives so that they can spot the problems on placement and encourage members to be more reflective in their behaviour and conscious of their attitudes to students.

Two high profile issues made TUC 2010 a great success

Motions sponsored by the Society at the Trades Union Congress conference in Manchester generated national media coverage and wide-ranging debates.

The first followed the announcement by the coalition government that they would not honour the Labour government promise to eliminate



ABOVE: Jonathan Harrowven, the 2010 Rep of the Year, receives his award from (left) Elizabeth Smith of the sponsors, Howard Kennedy, and Gill Dolbear, president of the Society



ABOVE: Members put a motion to a vote at the Society's annual delegates' conference



ABOVE: The Society's delegation was amongst the more than 700 trade unionists who attended the TUC conference in Manchester

charging patients for using the car parks at NHS trusts in England. Thanks to the Society, the conference voted to make the Department of Health think again. "During my 24 years in the NHS there have been few subjects that have united staff rooms and patient forums alike more than the cost of car parking and the fact that there is never enough provided," said Tracey Taylor, the Society's delegate who proposed the successful motion.

This was followed by a unanimous vote to ask the government to ban access to sunbeds with the exception of clinical use, ie people who suffer from skin conditions, such as eczema. The move came just months after a new law was introduced to stop under-18 year olds using solariums. Research by the International Agency for Research on Cancer suggests that sunbed use increases the risk of young people developing malignant melanoma by 75 per cent. It is now the most common cancer among 15-34 year olds in the UK and kills more than 2000 people a year.

Whilst the Society appreciates that a ban may be politically unacceptable, we want more education and guidance to be available to ensure that sunbed users can make informed decisions and are aware of the risks.

Recognising the Rep of the Year

Congratulations went to Jonathan Harrowven, who triumphed as the Society's UK Rep of the Year for 2010. Jonathan, who is a therapeutic radiographer and the industrial relations representative at the Norfolk and Norwich Hospital, impressed the panel of judges with his "infectious enthusiasm" and ability to command "regard, respect and gratitude from the whole team."

Jonathan has achieved 100 per cent membership of the SCOR in his department, and has been influential in defending the rights and interests of members as the department adopts the changes required by the national Cancer Plan.

Eight other Society reps picked up awards. The most poignant was the posthumous honour given to David Goodfellow of the Society's north west region. David's seven years as rep

for the SCoR at the Royal Lancaster Infirmary gained him a great deal of affection and respect from Society members in the department. Regional officer Marie Lloyd commented: "I cannot speak highly enough of the hard work and determination Dave showed in all his time as a rep. He ensured that all SCoR members in his trust were treated fairly."

Leading the way in Leeds

The Lord Mayor of Leeds, Councillor Judith Elliott, opened the proceedings at the Society's Annual Delegates Conference. Commending the radiography workforce by declaring it the "gateway to successful clinical outcomes", Cllr Elliott thanked radiographers for their input in "protecting the quality and deliverance of NHS services."

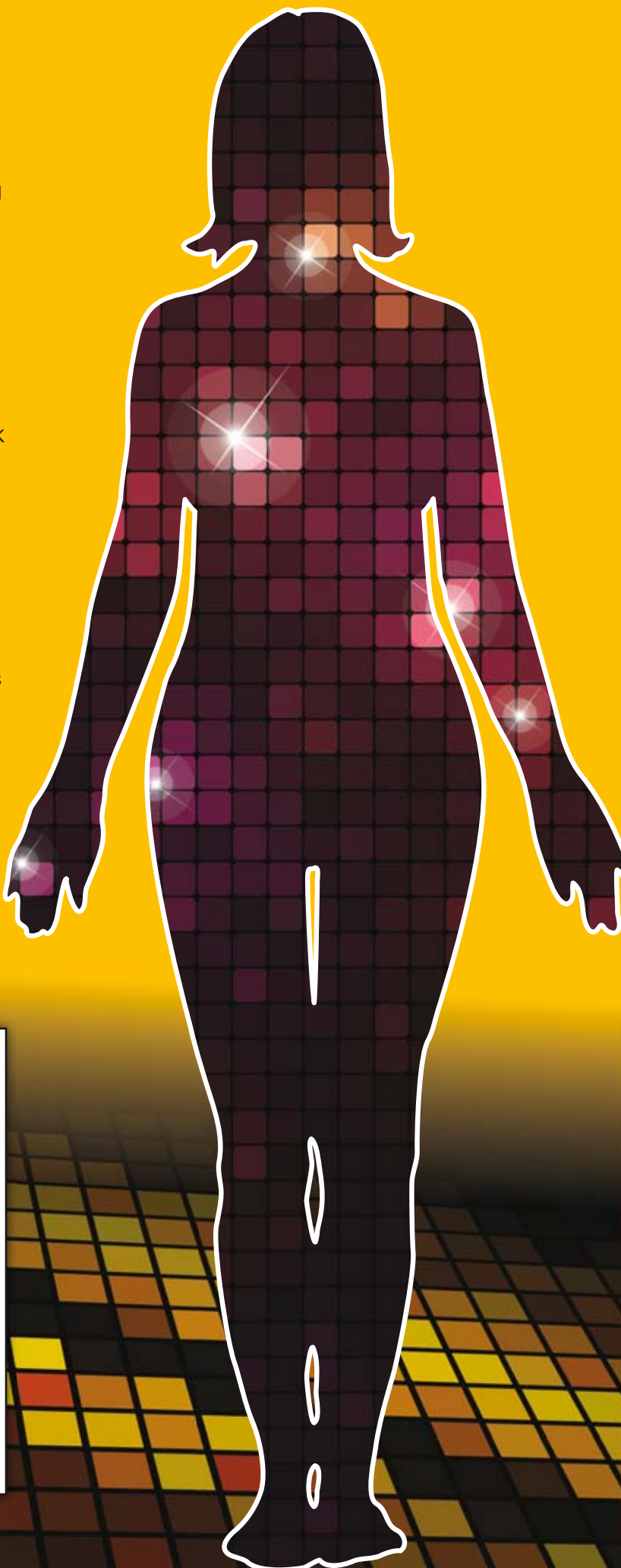
More than 170 workplace representatives from across the UK gathered to debate 41 motions – and the conference attracted 48 new delegates, some of who bravely took to the stand to speak on motions, despite first-time nerves. Of the 41 motions proposed – which concerned a wide range of radiography related issues including uniforms, protected study time and pensions as well as public policy issues like the use of sunbeds, prescription costs and hospital parking fees – 38 were carried.

The art of good communication

SoR News, the Society's electronic newsletter for the 1000-plus accredited representatives, scooped a prestigious award at the Trade Union Communications Awards.

It was highly commended in the 'Best use of electronic communication' category.

Commenting on the e-zine, the judges said: "This is an increasingly common way to do organisational newsletters but this is the most effective that the judges saw. It has a simple, attractive and clear presentation – with easily available links to other stories in the same issue – and uses images to give it colour. This newsletter appears to be cost-effective and doubtless would engage well with its target audience."





The drive for professional and educational progress never stops

Audrey Paterson

Director of Professional Policy

W

ith the election of a new government in the Spring of 2010 and the announcement from the secretary of state for health, Andrew Lansley, to introduce the purchasing of healthcare services by general

practitioners, the pace of change in the National Health Service continues and reform fervour abounds.

It is against this backdrop that the professional and education team at the Society and College continue to work to raise standards in the profession and to ensure that members get the support they need and deserve.

Recognition for radiotherapy

There has been a perception amongst therapeutic radiographers that radiotherapy is sometimes second best in the eyes of the public and some clinicians when compared with other treatments for cancer. This view was underlined when the results of a poll showed that a significant number of people saw radiotherapy as being old fashioned and were not aware of the enormous benefits that modern radiotherapy can bring to patients.

The Society has joined forces with a number of other organisations, including the National Cancer Action Team in England, The Royal College of Radiologists, the Institute of Physics and Engineering in Medicine and Cancer Research UK to combat this perception. 2011 has been declared the Year of Radiotherapy and a number of events are planned including the launch of a year of action at the Society's annual radiotherapy conference in January 2011.

The plan is to work with journalists to dispel radiotherapy myths, address common misconceptions and fears and ensure the benefits of modern radiotherapy are more widely recognised. In addition, there will be many other awareness initiatives taking place throughout the year.

During 2010, another key event was the Society's response to the refreshment of the government's Cancer Reform Strategy, following a wide consultation with members. We also put forward views on the elements of the Health White Paper that cover commissioning and outcomes, and will be responding to consultations on workforce development and the creation of Public Health England.

In other radiotherapy news, the Society and College has

actively participated in the work of the National Radiotherapy Implementation Group and taken part in a numerous national working groups, as well as planning and presenting workshops on workforce issues. This is illustrated in the lead we took on the development and circulation of a UK-wide survey on implementation of career progression framework within cancer centres due to be published in the Spring of 2011.

Effective communication and networking with radiotherapy services, members, managers and clinical experts continued with the Radiotherapy Advisory Group, and the Society was pleased to continue to be involved in the Radiotherapy Services Managers meetings. Liaison with the European Society for Therapeutic Radiology and Oncology in relation to the organisation of the conference due to take place in London in 2011 is another important activity, as is membership of the recently formed Health Protection Agency's Patient Safety in Radiotherapy group.

Work with other organisations has included providing advice and feedback on the joint radiotherapy planning guidance document, and the development of the pilot dosimetrists education programme arising from the Modernising Scientific Careers programme.

This work all go towards influencing national policy to ensure therapeutic radiography professional interests are recognised and incorporated into future policy.

Nurturing the future of the profession

To ensure that the Society represents as many student radiographers as possible, presentations to first, continuing and final year students were updated to ensure they remain relevant and leave participants in no doubt as to the importance of Society membership.

Following the results of a survey of students that revealed that up to a third believed that they had been bullied whilst on clinical placement, a number of initiatives were put in place to combat the problem and raise awareness of the concerns the responding students had raised. An anti-bullying campaign, which includes advice on bullying and grievance procedures, was started.

A practice placement forum was developed to enhance the experience of clinical placements, and an admissions tutor forum was created to support potential radiography students and to assist in minimising the number of students who do not complete their studies. There has been a welcome drop in the numbers of students leaving courses prematurely, but there is no room for

complacency.

New versions of *Guidance on the provision of clinical work experience for potential radiography students* and *Roles and responsibilities in clinical education* were published.

An increasingly popular 'wall' on Facebook is now available for all radiography students and it has also seen an increasing number of visitors from qualified radiographers. A Twitter account has also been established which has attracted followers including the National Union of Students, NHS Direct and government health officials.

Just to underline the Society's global reach, we accredited the Dubai Women's College medical imaging programme and developed a partnership with Work the World to offer international elective clinical placements.

Ultrasound workforce gains yet further recognition

There were several key issues that the organisation dealt with on behalf of the sonography community during the year and many were reflected in the ultrasound strategy documents that the Society and College published during the course of the year. These included:

- Analysis of the ultrasound workforce survey
- Ultrasound training, employment and registration
- A statement on ultrasound referrals and professional indemnity insurance arrangements
- The recording of images during diagnostic or screening obstetric ultrasound examinations

In addition, a discussion document was prepared for the redevelopment of the public voluntary register of sonographers, maintained by the College. There was considerable liaison with the Care Quality Commission regarding registration for independent practitioners to support those that fell into the scope of CQC registration during 2010. Under development is an advice document on ultrasound probe cleaning, which is being written jointly with the British Medical Ultrasound Society.

A new competency-based ultrasound training programme, that is compulsory for doctors undergoing specialty training in obstetrics and gynaecology, was implemented nationally. Much of the training is being delivered by sonographers and ongoing liaison and discussion between the Society and the Royal College of Obstetricians and Gynaecologists is monitoring this closely. Of particular concern to both bodies is the impact on workload and the quality of training. The aim of the programme is to improve maternal and women's healthcare, especially outside of normal hours when sonographer cover may not be available.

The Society provided consultancy to an on-line learning resource to support the implementation of the standards for the 18+0-20+6 weeks fetal anomaly screening programme. It provides practitioners with information, activities, and guidance to best practice.

Work was undertaken with the Ultrasound Advisory Group to evaluate a *Buyer's guide to obstetric ultrasound scanners* for the King's Centre for the Assessment of Radiographic Equipment.

In October 2009 at very short notice, the College took over the administration of the Consortium for the Accreditation of Sonographic Education (CASE) from the British Medical Ultrasound Society.



Profession takes research to heart

Requests from radiographers looking for funding to finance research projects have been growing rapidly. Successful applications have included a diverse range of subjects such as *The evaluation of patient compliance in the use of vaginal dilators post pelvic radiotherapy*, *Utilising personal digital assistants (PDAs) to support and enhance the clinical learning environment for the benefit of student therapeutic radiographers and practice educators*, and *Current practice in cervical spine radiographs regarding the use of swimmers or trauma obliques*.

The organisation's *Research Strategy* document was updated and research priorities for the profession were revised. In addition, the application for funding process was strengthened further and limits introduced on the number of awards individuals could apply for.

Thanks to the College of Radiographers Industry Partnership Scheme (CoRIPS), funding has been available from industry and the professional body. Despite the recession, the number of industry partners has grown steadily and so has their financial commitment to ensuring that radiographers – as long as they meet the strict criteria – receive support for their research projects.

To encourage more applications from novice researchers, the SCoR Research Group held a *Making Research Happen* workshop. The aim of the practical workshop was to enhance confidence and encourage 'early stage' researchers, and increase the quality and quantity of clinical based applications.

This was followed a few months later by a study day entitled *Initiatives in Research: Who, when and why*, and research workshops for the Society's 11 regional/national committees/councils were organized and well received.

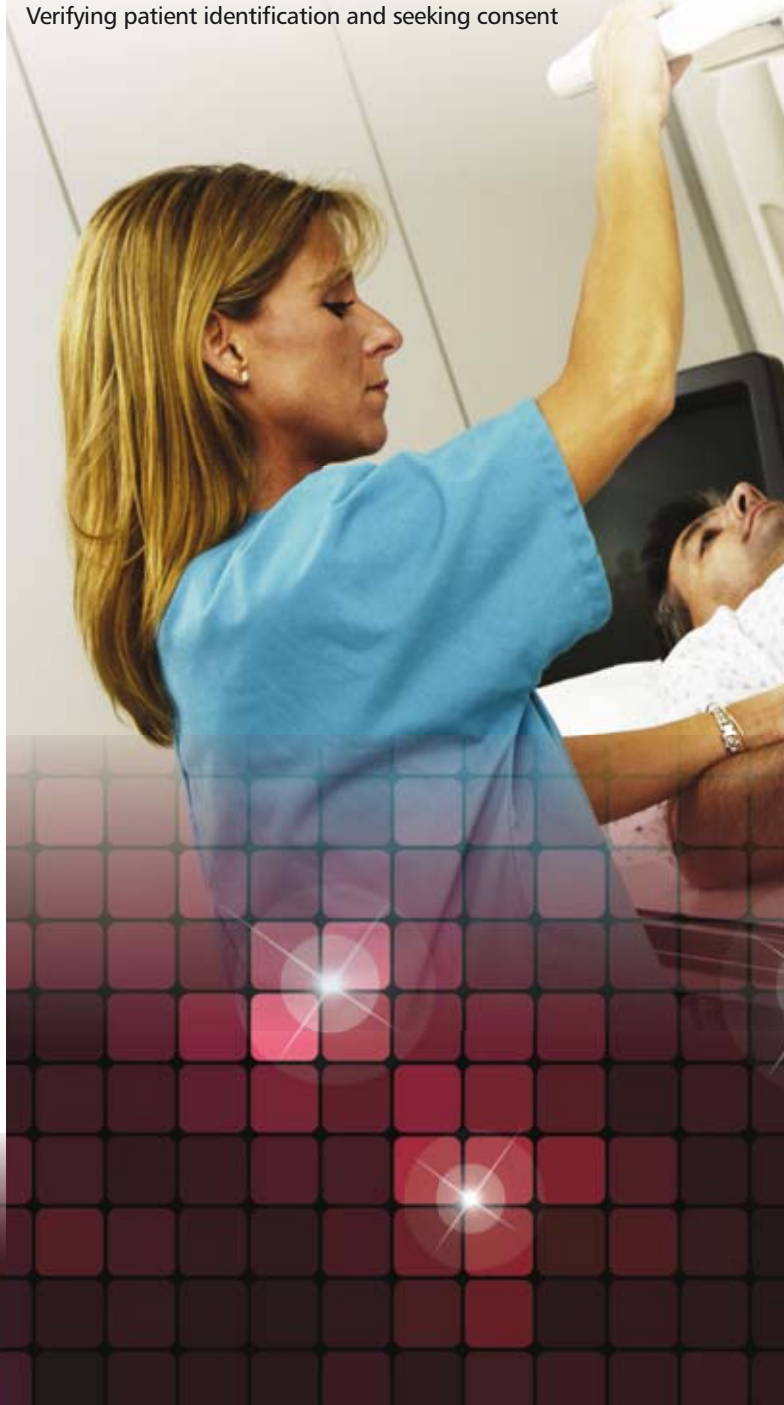
Publications, guidance and advice

A very substantial part of the professional and education team's work is the writing and publishing of practice development, guidance and policy documents. During the course of a year, the entire spectrum of the profession may be covered. This year has been no different. Titles include:

- Medical Image Interpretation by Radiographers: Definitive Guidance
- Education and Professional Development Strategy: New Directions.
- The ACORRN/SCoR Research Radiographer Starter Pack For Therapeutic and Diagnostic Radiographers
- An evaluation of the impact of implementation of consultant practitioners in clinical imaging
- Analysis of students and recent graduates survey 2010
- Analysis of ultrasound workforce survey 2009
- Assistant Practitioners and the supply, administration and prescribing of medicines
- Care Quality Commission (CQC) Regulation FAQs
- Consent and Adults with impaired capacity
- Dealing with bullying and harassment - A guide for student radiographers
- Developing and Growing the Sonographer workforce:

Education and Training needs

- Employee Development, Review and Progression (including the NHS Knowledge and Skills Framework): Practical Guidance for Managers and Practitioners
- Learning and Development Framework for Hybrid Nuclear Medicine/Computed Tomography Practice (SPECT-CT/PET-CT)
- The recording of images during diagnostic or screening obstetric ultrasound examinations
- Research and the Radiography profession: A strategy for research 2010 – 2015
- The Scope of Practice of Assistant Practitioners in Clinical Imaging; additional information
- Self referral to Allied Health Professionals: A position statement in relation to diagnostic and therapeutic radiographers
- Statement on Ultrasound referrals and professional indemnity insurance arrangements
- Student radiographers and trainee assistant practitioners: Verifying patient identification and seeking consent



- Ultrasound Training, Employment and Registration
- VERT Final Project Report

All are available to members (and some to non-members) through the Society's on-line document library.

As well as the organisation's own substantial publishing programme, the SCoR is invited to contribute to a substantial number of external documents and studies, as well as providing professional advice and feedback, and being requested to attend and participate in numerous conferences and events.

A small cross-section of work includes: feeding in to the revised Department of Health (England) Cancer Peer Review Measures; providing material for the Centre for Evidence-based Purchasing Image Guided Radiotherapy evaluation report; meetings with Cancer Research UK about the charity's radiotherapy report; taking part in Modernising Allied Health Profession Careers in England and Scotland; and being involved in the Modernising Scientific Careers initiative.

CPD audit underlines importance of ongoing learning

Early in 2010, the Health Professions Council selected 660 radiographers nationally to have their continuing professional development records audited for the first time. To support radiographers undergoing this audit, a new report facility was added to CPD Now, the SCoR's continuing professional development tool, which allowed users to produce the

submission required for the audit easily and effectively. The HPC assessors were reported to be pleased with radiography's performance during the audit and commented that radiographers are complying well with the standards.

The launch of the pilot phase of the accreditation of advanced and consultant practitioner's scheme took place at the College's annual radiotherapy conference in January. The process will be managed within CPD Now. Around 40 practitioners had signed up for the pilot by the end of January 2010, with diagnostic and therapeutic practice represented.

A digital system for CPD Now accreditation of courses and other programmes was imminent at the end of the year. Organisations applying for CPD endorsement will have their own e-portfolio to submit and track applications.

For the third year, the Education on the Stand initiative was held at the UK Radiology Congress and was used by many of the radiographers who attended the exhibition, which is a key part of the event. The best of the seminars and study events held by the exhibitors are CPD Now accredited.

Radiographers have a voracious appetite for learning

Part of the Society's commitment to ensuring that members have access to a full range of CPD opportunities is the extensive schedule of seminars, meetings and conferences held by the organisation's conference and events team.

Online booking of Society events through the website is now fully active and members are using this method more and more.

Amongst the seminars and conferences organised by the conferences and events team were *Developing Excellence in Clinical Leadership*, which ran twice during the year; the annual radiotherapy conference, immediately preceded this year by a seminar aimed at clinical leaders in radiotherapy, *Service Leaders of the Future*; and two research related workshops entitled *Making Research Happen* and *Initiatives in Research*.

There was also a joint conference/study day with the Gastro Intestinal Radiography Special Interest Group, a workshop on reducing the risks and impacts of work-related musculoskeletal disorders in mammography, and two ultrasound events. The first of these was a celebration study day to mark the merger of the United Kingdom Association of Sonographers with the College of Radiographers entitled *Back to the Future* which, as the title suggests, ranged far and wide across the spectrum of ultrasound practice, but with an emphasis on looking forward. The second workshop was *Ethical and Practical Dilemmas in Ultrasound Practice*.

Moving towards independent prescribing, supply and administration

Work continued to support supplementary prescribers, ensure safe clinical practice and work with the Department of Health towards independent prescribing for radiographers.



Consultant Practitioners

The number of consultant radiographers continues to grow steadily, as does the number of trainee consultant posts. The consultant network is an important support structure for this group who really are trail-blazing for the profession as a whole.

During the year, six articles on consultant radiographer practice were published in *Synergy: Imaging and Therapy Practice*, and, for the second year running, there was a consultant radiographer session at the UK Radiology Congress (UKRC) 2010 with Zebby Rees and Celia Lewis presenting.

Fellowship of the College of Radiographers

Work on a Fellowship of the College of Radiographers by Examination of a Portfolio was progressed during the year by the consultant radiographers group. This is important, time-consuming work and needs much consideration by the profession as a whole for it to proceed satisfactorily. In the meantime, priority is being given to introducing the accreditation process for advanced and consultant practitioners.

E-learning developments

The development of digital learning opportunities for radiographers continues apace. Member engagement with CORE-learning – the College's on-line programme of continuing learning modules delivered in partnership with Philips Healthcare – shows encouraging growth. Since it became available in 2009, more than 2000 members have registered for the programme, with in excess of a thousand modules purchased. Of these, over 500 modules had been completed and certificates awarded by the close of 2010.

The Department of Health's e-Learning for Health (eLFH) Image Interpretation programme was launched at the UK Radiology Congress. Society members working in the NHS can access 50 high quality units to support practice and service developments, notably to assist departments to move from 'red dot' signaling systems to initial written reports. The potential benefit to patients is significant – preliminary studies show that training in this aspect of practice can reduce the number of missed fractures in a typical 'out of hours' A&E service from seven per cent to less than one per cent of cases imaged. A module to support image interpretation of the adult chest is due for release at the beginning of 2011 and a paediatric skeleton module will follow in the late Spring.

A second eLFH project, *Advanced Radiotherapy*, is underway jointly with the Royal College of Radiologists and the Institute

of Physics and Engineering in Medicine. This will provide training tools to support advanced techniques in radiotherapy, with Image Guided Brachytherapy of the Cervix and Intensity Modulated Radiotherapy due for delivery early in 2011.

In the 2007 member survey, 95 per cent of respondents indicated that they would welcome the provision of e-learning materials by the College. It's heartening to see that it has been possible to address this within budgetary and resource constraints.

Imaging Services Accreditation Scheme

Nine early implementers, including NHS trusts and private healthcare providers, were chosen to be the first to try and achieve the standard required by the Imaging Service Accreditation Scheme (ISAS), a joint venture between the SCoR and the Royal College of Radiologists.

The scheme is the outcome of a three-year project to create a process to support radiology services in the UK to deliver higher quality patient-focused services. The ISAS standard includes outcomes that encourage organisations to improve on a continual basis against performance targets. In assessing conformity with the standard, the assessment team checks that the service is striving for outcome measures and sets itself goal that are in line with current best practice.


Shortly after the period covered by this annual report, the Cobalt Unit Appeal Fund celebrated becoming the first imaging service to achieve accreditation and was followed by several others soon after. On receiving the certificate of accreditation, Peter Sharpe, the Cobalt chief executive, said: "This is a very proud moment for all of us at Cobalt. Staff worked hard to achieve the ISAS accreditation. The process has been rigorous and challenging; it has helped us develop and improve services and also put in place a system for continual review and development."

New website on the horizon

The amount of information – both for members and the public – at sor.org continues to grow as part of the Society's strategy to use digital media as much as possible. A strategy and specification for a new website, using the latest technology, was drawn-up and the Society began a rigorous tender process to find the best provider. It is anticipated that the new web site will be a reality by the time of the next annual report.

Society magazines and journals continue to be vital sources of information

The editorial board of *Synergy: Imaging and Therapy Practice*



reported that the submission of articles for publication remained healthy and a sub-board was established to support the reviewing of articles and succession planning for the board. Anecdotal evidence suggests that member satisfaction with the magazine is high and that many see it as a valuable CPD resource.

Just after the period covered by this annual report came to an end, a new editor for *Synergy ITP* was appointed. Ian Henderson, a former president and UK Council member of the SCoR, took up the post. The Society would like to put on record its sincere thanks to Rachel Deeson, the first editor of *Synergy ITP*. Her ideas and enthusiasm were instrumental in making it both popular with and useful to members.

Synergy News, like *Synergy ITP*, is sent at the beginning of each month to members. It reports on the day-to-day issues that radiographers face both as employees and as healthcare professionals. It is also well regarded and is a vital source of news on healthcare policies and changes that affect all members wherever they practice in the UK.

The College's peer-review journal, *Radiography*, continues to develop and grow under the editorship of Dr Richard Price. Papers are submitted from across the globe. It is distributed to all members of the Society but also attracts off- and online subscribers worldwide. The reach of the journal is demonstrated in the number of downloads per year of full text articles – in 2009 this was in excess of 170,000 and a similar level looks likely for 2010. Such a download rate for a journal that is published quarterly is considered to be excellent.

The sixth edition of *Imaging & Oncology*, the annual 'looking forward' title, was published to coincide with the UK Radiology Congress in 2010. This was the first issue under the editorship of Hazel Edwards. The quality of articles submitted by top educators and clinicians about where medical imaging and radiation therapy is going, was excellent.

Keeping on top of the profession's IT needs

The Information Management and Technology Group delivered a joint session with the Royal College of Radiologists at the UK Radiology Congress. The group also wrote an informatics manual in conjunction with the College of Occupational Therapists.

SOCIETY OF RADIOGRAPHERS BENEVOLENT FUND

TRUSTEES' REPORT FOR THE YEAR ENDED 30 SEPTEMBER 2010

Charity Registration Number 326398

The trustees present their report and the audited accounts for the year ended 30 September 2010.

AIMS AND OBJECTIVES

The Benevolent Fund was established in 1983 as a registered charity with its own trust deed and constitution. The objects of the charity are "the assistance and relief of persons in the United Kingdom being members (including student members) and former members of the Society and their dependants who are in necessitous financial circumstances and in particular such of them as are old, sick or incapacitated."

PUBLIC BENEFIT

The Trustees have paid due regard to the guidance on public benefit published by the Commission in exercising their powers and planning the activities of the charity. The Trustees are satisfied that the trust has charitable purposes as set out in the Charity Act covering the prevention and relief of poverty for the public benefit.

TRUSTEES AT 30 SEPTEMBER 2010

Phillip Edwards (Chair)
Sue Barlow
Lorraine Nuttall
Gytha McBirney
Ann Pollard
Zena Mossman
Margaret Summerlin
Indira Bhansali

The responsibility for the overall management and organisation of the charity rests with the Board of Trustees. The Board comprising of seven trustees are drawn from, or are appointed by, Society Council. (Note: Numbers exclude the Chair of the Board). Policies and procedures for the induction and training of trustees have been prepared and currently this is conducted according to need.

ACTIVITY IN THE YEAR

The Trustees met twice during the year to discuss requests for assistance and the awarding of grants and to develop the strategy for heightening awareness and interest in the fund. The available Trustees continued to attend and to give promotional talks at the Annual Delegates Conference and various meetings through the countries.

Income for the year to September 2010 was £14,309, £3,231 more than 2009. Income increased through a £1,000 legacy and due to the increase in bank interest gained from the Standard Life fixed bond/current account.

A £5,000 donation was made from the Society, which is

consistent with the previous year, and income from the many generous collections at Society meetings around the UK has shown an increase. Affiliation income from the Society credit card continues to decline.

Expenditure amounted to £8,324, compared to £8,899 in 2009, mainly incurred through awarding grants to beneficiaries. Three grants were awarded this year totalling £6,736, which was £1,187 more than the previous year, and included assistance where beneficiaries or a close relative were suffering ill health or severe upset, as well as financial difficulties.

The fund bank balance at 30 September 2010 was £101,102, an increase of £4,463 over the balance of the year before.

RESERVES RISK AND INVESTMENT POLICIES

The charity's reserves amounted to £100,143 at 30 September 2010. The Trustees' philosophy is to broadly maintain this level of reserves and to make grants of assistance broadly to the level of the income received in the preceding financial year. However, during the year, donations from individuals (including a legacy) were larger than usual, combined with the increase in bank interest income and there were less applicants to the fund in 2010 than in previous years. The total value of awards made from the fund in the year to September 2010 was therefore not at a level consistent with the policy outlined above.

GOING CONCERN

We have set out above a review of financial performance and the charity's reserves position. We have adequate financial resources and are well placed to manage the business risks. Our planning process, including financial projections, has taken into consideration the current economic climate and its potential impact on the various sources of income and planned expenditure. We have a reasonable expectation that we have adequate resources to continue in operational existence for the foreseeable future. We believe that there are no material uncertainties that call into doubt the charity's ability to continue. The accounts have therefore been prepared on the basis that the charity is a going concern.

AUDITORS

Crowe Clark Whitehill have expressed their willingness to continue as auditors for the next financial year.

Mr Phillip Edwards
Chair of the trustees
18 March 2011



BENEVOLENT FUND

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 30 SEPTEMBER 2010

	2010		2009	
	£	£	£	£
INCOMING RESOURCES				
Donations	9,160		8,302	
Gift Aid reclaimed	595		559	
Legacies	1,000		-	
Income from credit cards	1,969		2,162	
Bank interest	<u>1,585</u>		<u>55</u>	
		14,309		11,078
RESOURCES EXPENDED				
Grants and donations	6,736		5,549	
Envelopes and advertising	-		515	
Bank charges	24		-	
Sundry expenses	<u>1,564</u>		<u>1,749</u>	
		(8,324)		(7,813)
Net movement in funds		5,985		3,265
Gain/(loss) on Investment		<u>-</u>		<u>(1,086)</u>
Net movement in funds after investment gain/(loss)		5,985		2,179
RETAINED SURPLUS AT BEGINNING OF YEAR		94,158		91,979
RETAINED SURPLUS AT END OF YEAR		<u>100,143</u>		<u>94,158</u>

BALANCE SHEET AT 30 SEPTEMBER 2010

	2010	2009
	£	
CASH AND DEPOSITS		
Cash at bank	<u>101,102</u>	<u>96,639</u>
DEBTORS		
Bank interest accrued	360	-
CREDITORS: amounts due within one year		
Amounts due to Society of Radiographers	<u>(1,319)</u>	<u>(2,481)</u>
TOTAL ASSETS	100,143	94,158
UNRESTRICTED FUNDS	<u>100,143</u>	<u>94,158</u>

Approved and authorised for issue by the Trustees on 18 March 2011 and signed on their behalf

Mr Phillip Edwards
Chair of the trustees

COMMITTEES AND WORKING PARTIES OF COUNCIL

THE TABLE BELOW INDICATES EACH ELECTED MEMBER'S SOCIETY COMMITMENTS IN THE YEAR COMMENCING JULY 2010:

College Board of Trustees executive members and officers	Meets four times a year
Mr I Henderson, Mrs Z Mitton; Mrs J Hughes, Mrs P Black, Mrs E Chapman, President, CEO, DPP, DF	
Investigating Committee (reports to Council)	Meets ad-hoc
Representatives will be decided as and when required	
Radiography Editorial Board (reports to Council)	Meets half yearly
Mr I Henderson (to November 2010), Dr M McBride (from November 2010), Mrs S Mathers, CEO, DPP, DF.	
Delegates Conference Committee (reports to Council)	Meets four times a year
President-Elect, Vice President	
Trades Union Education Committee (reports to Council)	Meets half yearly
Mr K McMurray and Mr S Harris	
Health & Safety Forum (reports to Council)	Meets quarterly
Mrs J Hughes and Mr K McMurray	
RCR Patient Liaison Groups	Meets half yearly
Radiology – Mrs P Black Oncology – Mrs H Colyer	
BIR Council Observer	Meets half yearly
The President	
RCR Faculty Board Observers	Meets quarterly
The President/member of presidential team	
Irish Institute of Radiography Liaison Committee	Ad hoc
The President; DPP; CEO	
The Investment Committee	Meets twice yearly
Mr I Henderson, Mr D MacManus, Mr J Foster, Mr A Kay, Mr I Eversden, President, CEO, DF	
Working Parties, Networks; SIGs, ad-hoc committees	
Membership as required	

MEETINGS OF COUNCIL

Month

8 October 2009
12 November 2009
13 January 2010
3 March 2010
27 April 2010
6 June 2010
7 July 2010
1 September 2010

Apologies

Mr M Graveling
Mr M Graveling
Mrs D Brunning, Mrs A Evans, Mrs J Hughes, Mr A Thomas, Ms S Fyfe
Mr K McMurray, Mrs D Brunning, Mr A Thomas, Ms S Fyfe
Mr R Bickerton, Mr A Thomas
Ms S Fyfe
Mrs Z Mitton, Mr A Thomas
Mrs S Mathers, Ms S Fyfe, Mr S Harris, Mrs P Black

SOCIETY AND COLLEGE OF RADIOGRAPHERS

FINANCIAL REPORT FOR THE YEAR TO SEPTEMBER 2010

Total income for 2010 was £5,552,487, £164,241 (3.0%) higher than last year. Membership subscription income increased by £410,489 (10.1%) - as much by increased member numbers as by higher fees. Other income was sharply down by £246,248 to £1,075,868 due to lower recruitment advertising, lower revenue from ROC and seminars, and much lower interest income.

Total expenditure increased marginally by £3,491 (0.1%) to £4,947,076 for 2010. £134,012 (6.6%) stemmed from higher salary costs, although the rise was only (1%) before the actuarial current service cost charge of £111,000. Operational and overhead costs were £130,521 lower at £2,776,283.

The Society and College had a combined 2010 operating surplus of £605,411 (2009 £444,661), before investment gains of £224,600 and a pension scheme deficit (under FRS 17) of £343,000. The bottom line surplus was £487,011 for 2010, compared to a loss of £44,723 in 2009.

SUMMARY OF THE FINANCIAL RESULTS FOR THE YEAR TO SEPTEMBER 2010

INCOME AND EXPENDITURE

£	Year to 30 September 2010			2009	
	SOCIETY	COLLEGE	CONTRA	Combined	Combined
Membership subscriptions	4,476,619	-	-	4,476,619	4,066,130
Other income					
HEI course accreditation	-	69,000	-	69,000	66,500
Grant income	-	50,214	-	50,214	23,928
Magazine income	332,909	6,350	-	339,259	471,951
Radiology and Oncology Congresses	-	192,002	-	192,002	248,175
Seminars & courses	-	181,292	-	181,292	220,932
Regions and branches	24,111	-	-	24,111	25,407
Investment income	39,937	43,288	-	83,225	114,779
Other income	12,528	124,237	-	136,765	150,444
Contribution & notional rent from Society	-	1,370,000	(1,370,000)	-	-
Total of other income	409,485	2,036,383	(1,370,000)	1,075,868	1,322,116
Total Income	4,886,104	2,036,383	(1,370,000)	5,552,487	5,388,246
Salary Costs	1,271,186	899,607	-	2,170,793	2,036,781
Operational and Overhead Expenditure					
Contribution & notional rent to College	1,300,000	-	(1,300,000)	-	-
Donation to Benevolent Fund	5,000	-	-	5,000	5,000
Restricted funds	-	40,930	-	40,930	5,098
PR & communications	30,718	-	-	30,718	28,659
Magazine & journal costs	453,546	118,011	-	571,557	613,791
Regional offices, Councils and reps costs	284,169	-	-	284,169	265,929
Members' insurance and legal costs	430,367	-	-	430,367	339,300
Website & CPD costs	54,723	27,280	-	82,003	75,656
Radiology and Oncology Congresses	-	150,721	-	150,721	248,175
Meetings, seminars, library and literature	-	402,670	-	402,670	497,208
ADC, TUC membership etc.	170,665	-	-	170,665	178,767
Audit and professional fees	28,750	13,197	-	41,947	42,828
Occupancy	96,633	30,995	(70,000)	57,628	47,656
Depreciation, investment fees, pension finance charge	59,136	42,406	-	101,542	143,455
HR, database & computer costs etc.	129,647	29,657	-	159,304	143,722
Telephone, travel, copying, postage etc.	197,832	49,230	-	247,062	271,560
Total operational and overhead expenditure	3,241,186	905,097	(1,370,000)	2,776,283	2,906,804
Total expenditure	4,512,372	1,804,704	(1,370,000)	4,947,076	4,943,585
Surplus for the year before investment gains	373,732	231,679	-	605,411	444,661
Investment gains less losses	112,300	112,300	-	224,600	13,616
Pension Scheme deficit	(212,000)	(131,000)	-	(343,000)	(503,000)
Surplus/(deficit) after net investment gains	274,032	212,979	-	487,011	(44,723)

COMMENTARY ON INCOME AND EXPENDITURE

Total income for the whole organisation in 2010 amounted to £5,552,487, up £164,241 (3.0%) on 2009.

Income from membership subscriptions amounted to £4,476,619 in 2010, a rise of £410,489 (10.1%) over last year. The increase arose from a net 4.3% increase in members' numbers and 5.8% increase in subscription.

Members' subscriptions represented 80.6% of total income in 2010, or to put it another way, 19.4% of the income necessary to run the organisation was found from other sources.

This "other income" amounted to £1,075,868, a decrease of £246,248 (18.6%) from 2009 for the following reasons:

Major changes in other income for 2010 compared to the previous year were:

- a) Synergy News recruitment advertising reduced sharply by £132,692 (28.1%) – a sign of the times.
- b) Grant income mainly represents money received to develop e-learning in the current and future periods.
- c) Radiology and Oncology Congresses ran just UKRC (no UKRO this year) and income was £56,173 lower.
- d) Seminars and courses ran fewer events this year and income fell by £39,640.
- e) Income from bank deposits and investments fell by £31,554 (27.5%) to £83,225, due again to reduced interest rates, although re-deployment of funds into the investment portfolio should help in future periods.
- f) Other income of £136,765 was down £13,679 (9%) and included a variety of items including income for research projects and funding for staff contracted to health service education in Scotland.

Expenditure for 2010 across the organisation amounted to £4,947,076, a minimal increase of £3,491 (0.1%) compared to 2009.

Salary costs in 2010 were £2,170,793, an increase of £134,012 (6.6%) over 2009. The increase was mainly due to the accounting adjustment of £111,000 for current service pension costs.

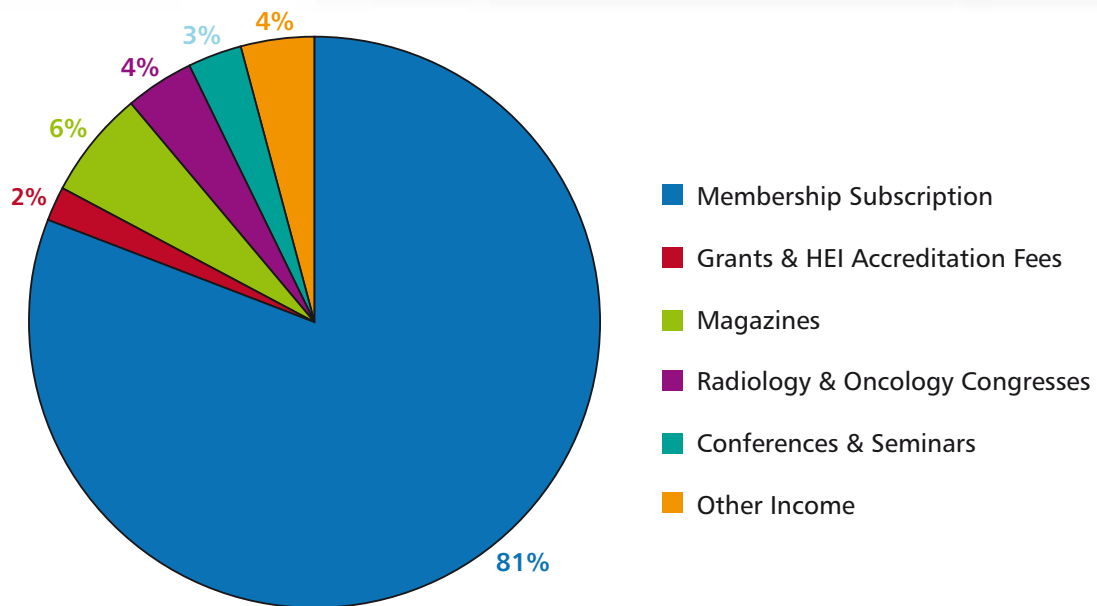
Operational and overhead expenditure amounted to £2,776,283, £130,521 (4.5%) less than 2009:

- a) Radiology and Oncology Congresses achieved further cost savings on running UKRC and some provisions for losses were released, plus UKRO was not run this year. Overall the impact on costs was a saving of £97,454 compared to 2009.
- b) Courses, seminars, literature and liaison costs fell by £94,538 to £402,670 mainly through costs associated with last year's DH Vert project and fewer seminars held this year.
- c) Magazine and journal costs, down £42,234, were again well contained for both Synergy publications and Radiography.
- d) Regional offices, Reps and Council costs at £284,169 increased by £18,240 (6.9%) compared to last year.
- e) Members' professional indemnity costs and legal representation costs increased by £91,067 to £430,367.
- f) ADC costs and TUC fees reduced by £8,102 (4.5%) to £170,665.
- g) Overhead costs reduced mainly due to a partial release of provision for a change to VAT regulation and a lower charge for depreciation this year. Telephone, stationery, postage and travel costs were all lower but partly offset by publicity and computer expenses.

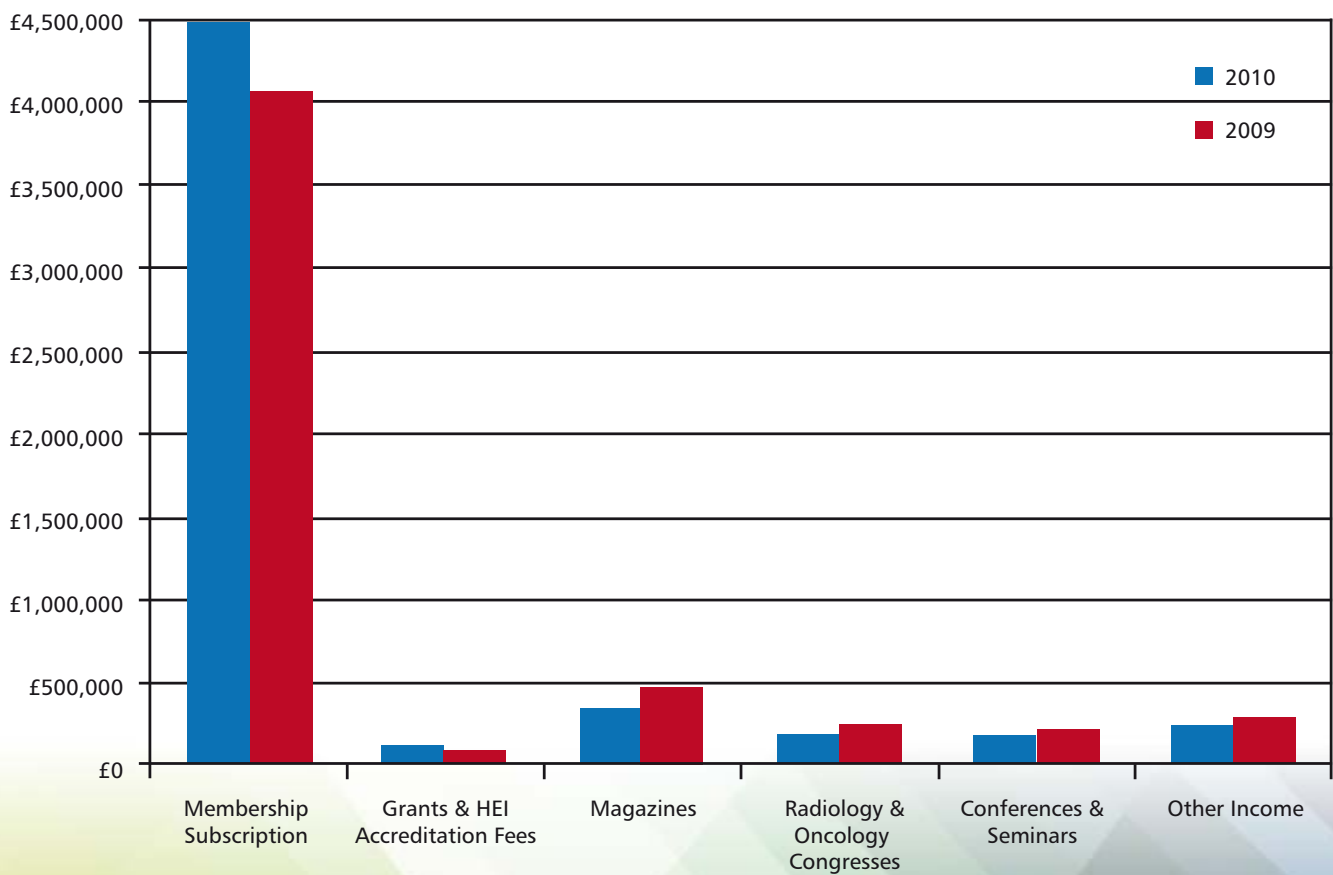
Surplus for the year before net investment gains increased by £160,750 from 2009 to £605,411 in 2010.

Surplus for the year after net investment gains and pension scheme deficit showed a surplus of £487,011 compared to a deficit of £44,723 last year. A recovery in stock market values improved investment values by £224,600 but the pension scheme deficit of £343,000 under the accounting basis FRS 17 more than offset the impact.

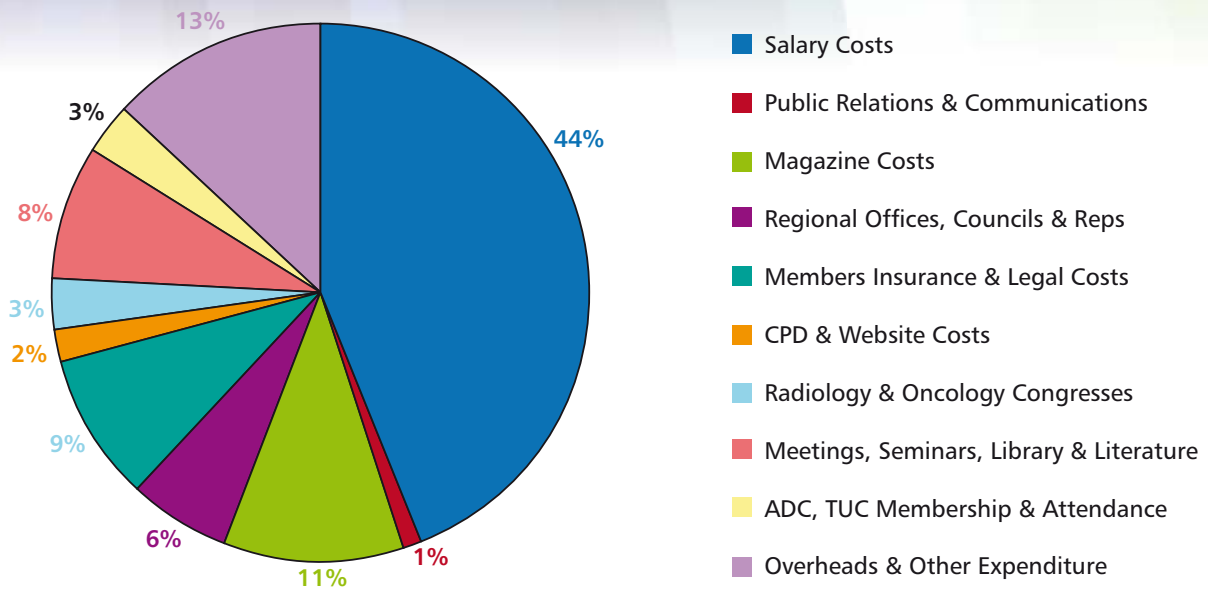
INCOME 2010



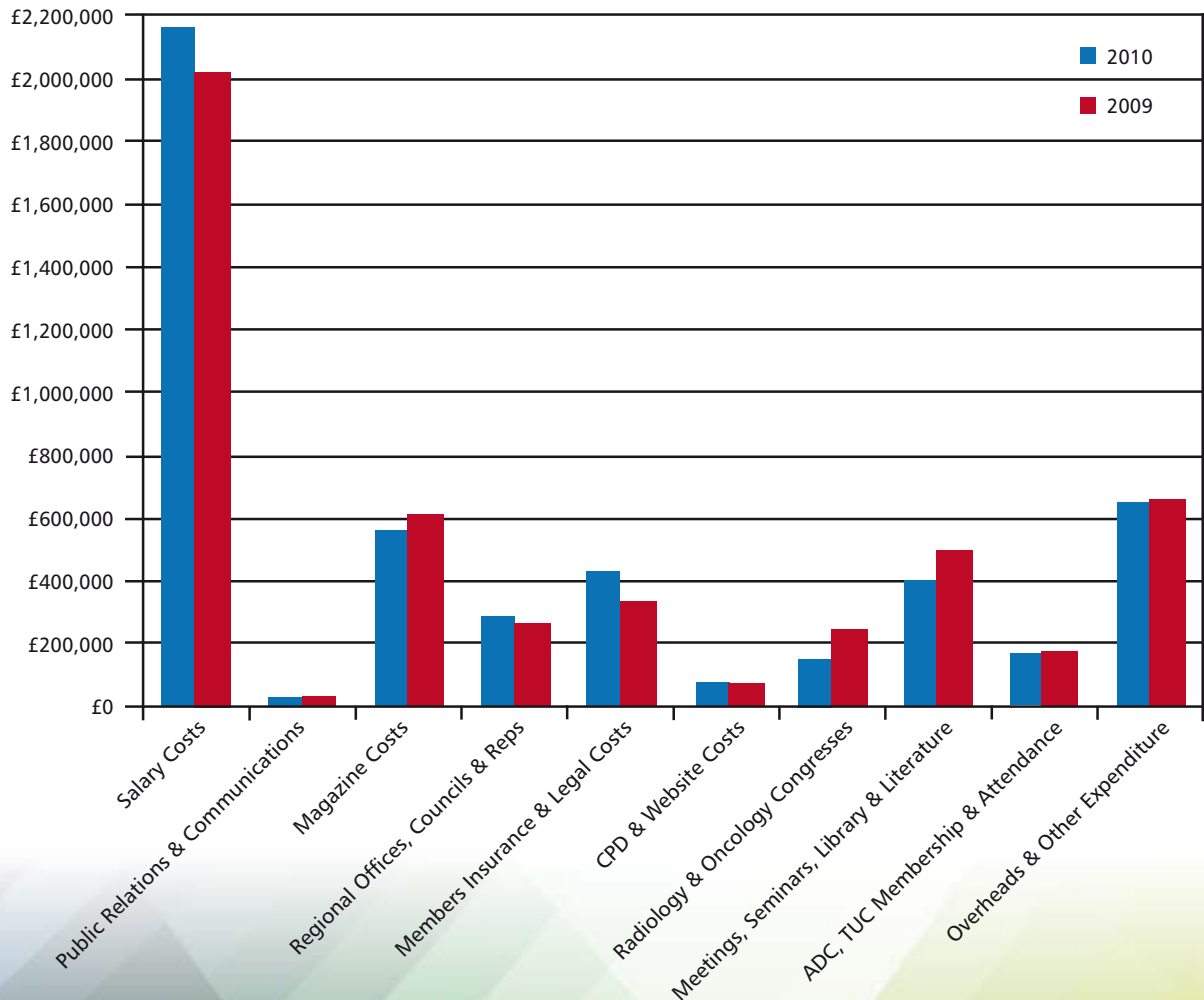
INCOME – 2010 COMPARED TO 2009



EXPENDITURE 2010



EXPENDITURE – 2010 COMPARED TO 2009



COMMENTARY ON THE BALANCE SHEET

Total assets at the 2010 year end amounted to £4,980,419, an increase of £487,011 from the value at September 2009 for the reasons set out in the previous section. Tangible fixed assets, which include the head office property, were down £36,340, mainly due to depreciation set aside each year for replacements, which again exceeded expenditure on new assets.

The Society and College fixed asset investments amounted to £3,439,676, reflecting improving values, income re-invested, and the transfer of £2,000,000 from cash deposits to the portfolio.

Current assets, less liabilities at £1,123,603, were £1,368,619 lower than at September 2009. The Money-market Deposits of £2,000,000 were transferred to the investment portfolio during the year to earn an income and provide protection from the effects of inflation. Bank balances increased by £772,454, largely reflecting the surplus earned in 2010. The pension scheme, as with nearly all other schemes, continues to show a deficit due mainly to increased life expectancy and currently depressed investment returns. The scheme deficit on the FRS 17 accounting basis was £735,000 at September 2010.

BALANCE SHEETS AT 30 SEPTEMBER 2010

figures in £	SOR	COR	CONTRA	2010 Combined	2009 Combined
Tangible fixed assets					
Long leasehold property	-	1,038,506	-	1,038,506	1,064,797
Office fixtures, furniture & equipment	501	62,617	-	63,118	77,943
Computers	6,825	43,691	-	50,516	45,740
Total	7,326	1,144,814	-	1,152,140	1,188,480
Fixed Asset investment	1,719,838	1,719,838	-	3,439,676	1,172,706
Investment in subsidiary	2	0	(2)	0	0
Current assets less liabilities				0	
Debtors	217,140	184,937	-	402,077	456,341
Money market deposits	-	-	-	-	2,000,000
Bank balances	887,243	500,957	-	1,388,200	615,746
Creditors	(341,995)	(324,679)	-	(666,674)	(579,865)
Total	762,388	361,215	-	1,123,603	2,492,222
Pension Scheme liability	(468,000)	(267,000)	-	(735,000)	(360,000)
Total assets at September 2010	2,021,554	2,958,867	(2)	4,980,419	4,493,408
Share capital	-	2	(2)	-	-
Reserves					
General fund	2,489,554	-	-	2,489,554	1,976,522
Restricted funds	-	42,729	-	42,729	33,445
Unrestricted funds	-	3,183,136	-	3,183,136	2,843,441
Less Pension Scheme liability	(468,000)	(267,000)	-	(735,000)	(360,000)
Total capital & reserves at September 2010	2,021,554	2,958,867	(2)	4,980,419	4,493,408

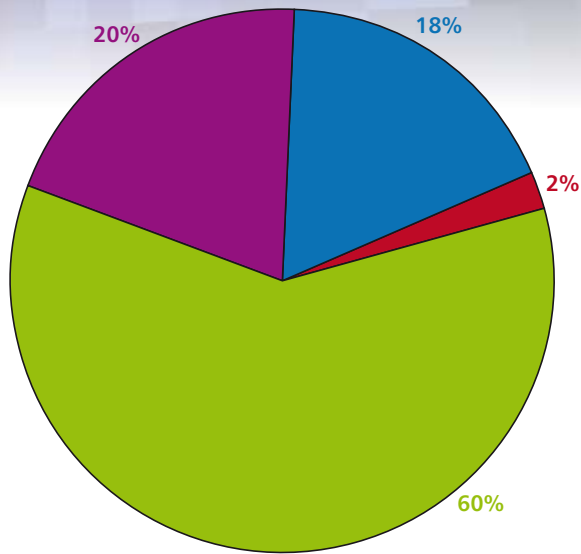
Signed on behalf of The Society Council and The College Board of Trustees 1 and 2 March 2011

REPORTING ON SUMMARISED ACCOUNTS

The above figures on pages 27 to 31 have been extracted from the full Society Council and College Board of Trustees reports and financial statements, which have both been audited by Crowe Clark Whitehill LLP, who gave unqualified audit reports in March 2011. The auditors have confirmed to the Council and Trustees that the summarised financial statements are consistent with the full financial statements for the year ended on 30 September 2010. The Council's and Trustees' reports and financial statements were approved by Council and the Trustees and signed on their behalf on 2 March 2011 and 1 March 2011, respectively. The College report will be submitted to the Charity Commission in July.

Crowe Clark Whitehill LLP also gave an unqualified audit report on the financial statements of the Benevolent Fund for the year to 30 September 2010.

These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the above entities. The full reports, audit reports and financial statements may be obtained from The Secretary, Society and College of Radiographers, 207 Providence Square, London SE1 2EW.



ASSETS 2010

- Fixed Asset Investments
- Current Assets (Cash, Debtors Less Creditors)
- Long Leasehold Property
- Other Fixed Assets

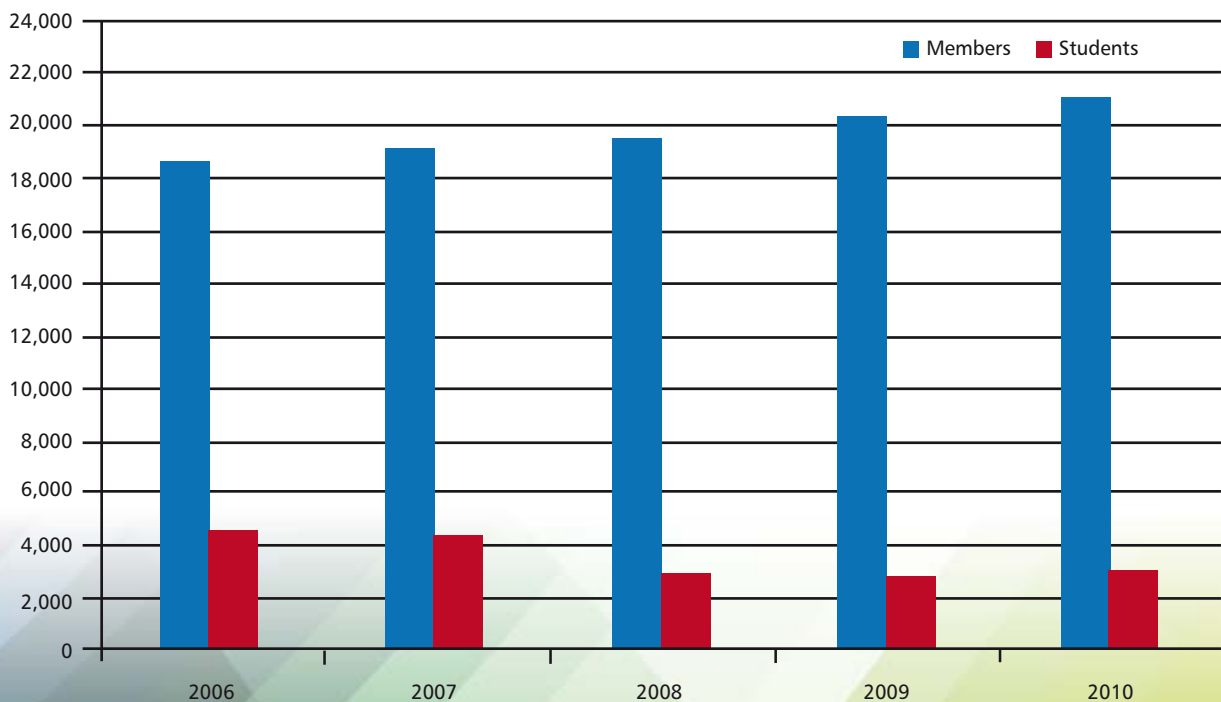
REVIEW OF MEMBERSHIP

Newly qualified radiographers continue to see the value of joining the Society. Membership numbers over the last six years show a pleasing increase and are as follows:

2006: 18,635 2007: 19,249 2008: 19,628 2009: 20,388 2010: **21,093**

The number of student members of the Society continues to be at a satisfactory level:

2006: 4,566 2007: 4,447 2008: 3,020 2009: 2,845 2010: **3,018**









A digital version of this document can be found at www.sor.org/public/statutory.htm

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