SERVICE NAME: Radiography (Diagnostics)

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Divisional Approval Date	Specialty/subspecialty area/Department	Education/training event required, list in priority
	Radiology	In house mandatory training
	itadiology	sessions
		Train the trainer
		- cannulation Appraisal training
		Bronze Quality Improvement
		, , ,
		Silver Quality Improvement
		UKIO
		Professional Advocacy (A-EQUIP)
		Imaging Network Projects
		Staff visits to Centres of Excellence
		for service improvement
		Support Programme for
		International Staff
		Preceptorship
		RPS Update
		RPS Training
		Safeguarding
		Supporting Students in Practice

X-ray	Patient-centred Care in Radiography
	PgCert Paediatric Imaging
	PgCert in Forensic Radiography
	PgCert/PgDip in Radiographic Reporting (Appendicular and Axial/Chest and Abdomen)
	Chest Image Interpretation Study Day

	NAI Study Day
	Red Dot Reporting
СТ	CT Colon Course
	CT Cardiac Course
	CT Fundamental Skills Study Day
	Ultrasound Assisted Vascular Access
	IMA Training/Update

	PgCert CT
	Cryogenic Gases Safety
	Compressed Gases Safety
MRI	MRI In Practice
	BAMRR Courses: Introduction to MRI/Further MRI
	PgCert MRI
	Intraorbital Foreign Body Reporting for Radiographers
	Cardiac MRI Course
Cath/IR	PgCert Interventional Radiology
	BSIR Annual Scientific Meeting (Conference)
Ultrasound	Post Graduate Diploma in Ultrasound

	Head and Neck Ultrasound
	BMUS Conference
	Infant hip update course
	(Graf course)
	Negotiated Specialist Ultrasound
	Practice (MSK)
	Fetal Cardiac ultrasound course
	retar Cardiac ditrasound course
	Time Tide as
	Tiny Tickers
Managament	iManage
Management	
	Level 5 Diploma in Leadership and
	Management

MSc Advanced Clinical Practice Level 7 Apprenticeship
Risk Assessment/Management Training
IOSH Level 6 Diploma in Occupational Safety & Health Leadership & Management

Event Supplier - if known	Number of days released from work	Name of staff if known
Department	1 per month	All staff
Internal course	2	ТВС
Internal course	1	TBC
Internal course	1	TBC
Internal course	1	TBC
UKIO, Liverpool	3	TBC
Various institutions	~8	TBC
Internal	TBC	TBC
Various Trusts	1	TBC
Internal course	5	New international staff; training provided by Practice Educators
Internal course	6	New starters
Internal course	1	Current RPS
University Hospitals of XXX	1	ТВС
	1-2	TBC
XXX	TBC	TBC

University of XXX (On demand)	2	TBC	
University of XXX (On demand)	TBC	TBC	
XXX University	TBC	TBC	
XXX University	TBC	TBC	
XXX		1 TBC	

XXX	3 TBC	
XXX	1 TBC	
XXXcourses.com	1 TBC	
NCTCTAP:National Programme: In conjunction with selected Universities	TBC TBC	
XXX	2 TBC	
XXX	2 TBC	
XXX	1 TBC	
Internal Course	0.5 TBC	

XXX University	ТВС	ТВС	
PGS Training		1 TBC	
PGS Training		1 TBC	
MRI Education	4+	TBC	
XXX		1 TBC	
XXX University	ТВС	TBC	
XXX		1 TBC	
XXX University		2 TBC	
XXX University	TBC	TBC	
BSIR		3 TBC	
XXX University XXX	ТВС	TBC	

XXX	TBC	TBC	
		.50	
		3	
University Hospital of XXX		2 TBC	
XXX	TBC	TBC	
	TBC	TDC	
XXX		1 TDC	
^^^		1 TBC	
XXX		1 TBC	
Internal Course	TBC	TBC	
XXX	TBC	TBC	
	150	100	

XXX	ТВС	TBC	
Internal course		1 TBC	
XXX	ТВС	TBC	

D&S DIVISION

Member of
staff's Pay Group
e.g. AHP, HCS,
A&C
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L TRAINING ANALYSIS 2024-2025

Impact/rationale

Mandatory for all staff. If not supported, compliance will reduce.

Key skill for cross sectional

rads and RCAs

Required for all Band 7s and experienced Band 6 Radiographers

For all band 6s and above, as highlighted in their validation portfolio. To encourage staff to think more abut improving quality, for the safety of patients and to improve operationally.

To encourage more robust quality improvement projects which can be impactful and potentially published, improving service for patients.

Good conference for networking and awareness of latest developments in the field. Opportunity to see what other Trusts are doing and how we can improve; networking also with equipment providers etc.

Staff trained to be professional advocates which helps promote staff wellbeing & retention as per the national initiative

Involvement in imaging network projects will help to improve the radiology services in the South West. Also shows at our Trust we are willing to contribute to the region's progress in this field

Visiting other Trusts allows networking and improvement of our departments protocols by observing best practice in centres of excellence. The learning from this can be disseminated to colleagues.

Internationally educated staff need support in adapting to the UK way of working, including UK legislations, HCPC requirements, CPD, Communication and Scenario based learning

Enables transition for new starters joining the NHS by equipping them with the correct skills for success. SoR are currently doing a scoping exercise for this, evidencing this is a key requirement for new professionals.

Internal updates from the medical physics team ensure all legislation and governance in this role is being adhered to

Equips Radiographers with underpinning theoretical knowledge and understanding necessary to operate as Radiation Protection Supervisors as part of national requirements and recommendations. If unsupported,

As healthcare professionals we have a legal responsibility to safeguard our service users. This training will enable cascade of how best to perform this from those best equipped to share this knowledge.

Provides Radiographers with the skills and knowledge to support student radiographers and TAPs throughout their clinical placements. Allows Radiographers to gain a deeper understanding of leanning styles and teaching methods, and how these can be adapted to improve learning for students.

Provides education on how to deliver the best patient care. Gives audit tools staff can use in practice to
promote patient centred care in dept.
Upskilling of radiographers needed for the paediatric service; new knowledge learned can be disseminated to
staff to improve the service and techniques used when imaging children
Country of the control and cooming and account and a many and control and cont
Lading a sure of a conflict of the conflict of
Losing some of our Skeletal survey radiographers due to retirement. This training will ensure we can still
provide the NAI service and also that we are adhering to best ptactice; this is important due to the legal
Allow for the provision of a radiographer-led hot reporting service to enable qicker reporting of images and
improve the speed of the patient pathway. There is a shortage of radiologists and so this is a more cost
effective and timely option and will aid recruitment and retention of staff. We have also seen recently several
reporting rads step down/retire/leave
Provides Radiographers with knowledge of how to confidently recognise abnormalities in the chest, which can
be highlighted more rapidly for a more efficient and effective patient management, as part of the lung cancer
pathway. Allows cascade training to all other Radiography staff. If unsupported, there could be a delay when
aiming for turnaround targets under cancer pathway time frames.
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Provides Radiographers and AP's more indepth knowledge on DEXA imaging. Staff have had in house training but external training allows for up to date knowledge on current practices and also keeps in touch with moving trends of imaging and opens scope of the service.
Increased confidence, and updating of knowledge in NAI imaging for paediatric radiographers, with increased provision of a highly robust service for suspected NAI cases within the trust.
Essential to give junior Radiographers confidence in highlighting abnormalties to A&E staff.
Provides radiographers with a knowledge base and practical skills to proficiently and confidently perform CT colonography. This in turn will maintain/increase capacity to meet service demands and delivery, in line with trust objectives, and to succession plan for current staff skilled in this area that are retiring in the near future. Allows cascade training for other CT Radiographers. If unsupported this service will not be able to be provided Provides radiographers with a knowledge base and practical skills to competently and confidently perform cardiac CT, in preparation for the immediate access of CT cardiac scans via the Emergency Department. Allows cascade training to all other CT Radiographers. If unsupported this service will not be able to be provided if Radiographers are not trained. Radiographer led cardiac service being looked at also
Covers core principles including absorption, image formation, equipment technolofy, protocol & parameter selection, image quality, patient prep etc. Expanding CT service requires highly skiled radiographers and this will lead to service improvement. If there is a lack of knowledge of developments in this field, service progression could be limites
This courses allows individuals the skillsetfor peripheral cannula and central venous catheter insertion on unique high fidelity models, directly supervised by experts in the field. Given our increased numbers of CT referrals, we are seeing a number of scans having to be completed plain due to not being able to gain peripheral access. Due to radiologists increased remote working and demands, they are not available to cannulate in these cases, therefore setting our radiographers up with that skillset would help meet the changing demands of the service. Allows service to run with well informed, knowledgeable individuals, with fore-front ideas about how to take the service forward and teach others the best techniques for high quality imaging of the heart. Allows our reputation to be upheld on excellent teaching. and training and allows for
All CT radiographers undertaking out of hours duties should have their IMA training for contrast safety. Staff need updates on this each year to remain competent and reduce the burden on medical staff to need to attend department for contrast cover.

Expanding CT service requires highly skilled Radiographers with detailed knowledge of up-to-date CT to help cascade high quality training to all Radiographers, and to allow service development and improvement. If not supported, quality of teaching could drop and service progression could be hampered if there is a lack of knowledge of developments in best practice and new innovations.

This is a health and safety requirement for radiographers participating in providing the cryogenic ablation service

This is a health and safety requirement for radiographers participating in providing the CT colon service

Allows a deeper understanding of the fundamentals of MRI physics in order to improve both patient care and diagnostic efficiency. Allows cascade training for other MRI Radiographers. If unsupported, this could lead to a drop in the quality of teaching and service progression.

As above, but slightly less depth in content

Expanding MRI service requires highly skilled Radiographers with detailed knowledge of MRI to help cascade high quality training to Radiographers, and to allow service development and improvement. If not supported, quality of teaching could drop and service progression could be hampered if there is a lack of knowledge of developments in best practice and new innovations.

Ensures radiographers have the underpinning knowledge to image correctly. Ensures MRI safety is maintained at all times and is not compromised.

Allows a deeper understanding of the fundamentals of MRI Cardiac scanning and physics in order to improve both patient care and diagnostic efficiency. Allows cascade training for other MRI Radiographers. If unsupported, this could lead to a poorly established service and drop in the quality of teaching and service Provide radiographers with the knowledge to develop and enhance their understanding of theoretical practice, current professional guidance and legislation. Equip them with the confidence to provide an effective and efficient service, working alongside othe rhealth professionals. Help cascade high quality training to Radiographers, and to allow service development and improvement. If not supported, quality of teaching could drop and service progression could be hampered if there is a lack of knowledge of developments in best practice and new innovations. Also make the post more attractive to job seekers in a competitive environment

Conference for netowrking and sharing best interventional radiology practices. An opportunity to talk with equipment providers and see technical advances in the field.

Currently there is a high vancancy level in Ultrasound. We need to train more sonographers to maintain/increase capacity in ultrasound in order to meet demand. If unsupported, some services will not be able to be maintained and progression of the service will be limited.

Provides sonographers with knowledge of how to confidently identify normal structures and abnormal findings, which can be highlighted more rapidly for a more efficient and effective patient management, e.g referral for FNA. Equips sonographers with confidence in providing a preliminary clinical evaluation of sonographic imaging, supporting the referrers in the diagnosis and treatment of the patient. This reduces the referral- to diagnosis time in head and neck cancer on the 2ww pathway. Allows cascade training to other senior sonography staff.

Expanding the Ultrasound service requires highly skilled sonographers with detailed knowledge of Ultrasound to help cascade high quality training to the sonographers, to allow service development and improvement. If not supported, quality of teaching could drop and service progression could be hampered if there is a lack of knowledge of developments in best practice and new innovations.

Provides sonographers with knowledge of how to confidently differenctiate between normal and abnormal ultrasound imagining of the infannt hip to identify those requiring treatment for development dysplasia. This can be highlighted more rapidly for a more efficient and effective patient management. Equips sonographers with confidence in providing a clinical evaluation of sonographic infant hip imaging, supporting the referrers in the diagnosis and treatment of the patient. This reduces the likelihood of dysplasia being missed and allows timely treatment. Specialist scanning role essential for service.

Provides sonographers with knowledge of how to confidently identify normal structures and abnormal findings, which can be highlighted more rapidly for a more efficient and effective patient management, e.g referral to sarcoma team. Equips sonographers with confidence in providing a preliminary clinical evaluation of sonographic imaging, supporting the referrers in the diagnosis and treatment of the patient. This reduces Provides sonographers with knowledge of how to confidently differenctiate between normal and abnormal ultrasound imagining of the fetal heart in hands- on practical training sessions. Enables the sonographer to identify heart abnormalities more frequently to meet FASP statandards.Referrals can then be made to fetal medicine as required to enable prenancy/ birth management plans to be put in place. Equips sonographers with confidence in providing a clinical evaluation of sonographic fetal heart imaging, allowing timely management and treatment planning.Specialist scanning role essential for service.

Gives sonographers hands on training to improve prenatal detection of congenital heart defects. Practice of the different views and teaching of relevant theory knowledge.

Increase demand on Radiology service requires high quality leadership from Senior Radiographers across the clinical day-to-day operation of the department. If unsupported, this could lead to a lack of high quality leadership across Senior Radiographers.

Increased demand on our services requires high quality leadership from Senior Radiographers across both operational and strategic strands of management.

Increased demand on our services and a decrease in radiologist numbers requires radiographers to take on more advanced roles within the department. This in turn will reduce waiting times for patients, and provide a more cost effective radiographer led service.

It is important for those completing risk assessments for the department to have undertaken risk management training, to ensure these are completed correctly as per H&S

Allows management team to develop skills needed to lead on development of health, safety & wellbeing within the department. Course focuses on application of best practice in occupational safety and health to improve business performance.

Rate £	Number required	Continuation of course funded previous year	RE Number	Cost on Order
Staffing costs	Variable			
Staffing costs	2			
Staffing costs	6-8			
Staffing costs	6-8			
Staffing costs	4			
£200 ticket Accomodation/tr avel costs	2			
Funded by ICB/Trust	2			
Staffing costs	Variable			
Staffing costs Travel expenses	Variable			
Staffing costs	Variable			
Staffing costs	8			
Staffing costs	10-15			
£150 fees	8			
Staffing costs	2-4			
Staffing costs	6			

E3030 fees			
£2250 fees 0-1 (Alternate to forensic) £2250 fees 0-1 (Alternate to paeds) £2850 PgCert 2-4 £5700 PgDip	Staffing costs	2	
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Staffing Costs Variable	

£2,850 2	
£55 2-4	
£55 2-4	
£800 4	
£165 Intro to 4-6	
MRI	
£175 Further MRI	
£2,850 2	
£150 2	
£1,125 2	
£3,855 1	
Fees TBC 2	
Accommodation	
and travel fees	
£5700 BCU 2	
£4800 UWE	

Fees not yet released	1
Fees not yet	2-3
released	
£485	1-2
£800 per module	1-2
£150	3-6
Staffing Costs	Up to 10
	per class
Staffing Costs	3-6
Staffing Costs	3-0
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Staffing Costs (Apprenticeship	2
levy)	
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Staffing Costs (Apprenticeship levy)	1
Staffing costs	3-6
TBC	1-2

Order Number	CPD contribution	Comment
Order Namber	Contribution	Comment

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