

Statement on Ultrasound referrals and professional indemnity insurance arrangements

Responsible person: Nigel Thomson **Published:** Monday, April 26, 2010

Summary

The purpose of this guidance is to consider current ultrasound referral practice against existing Professional Indemnity Insurance (PII) arrangements for members of the Society of Radiographers (SOR) who are practising sonographers. This guidance also applies to those individuals who are members of the Society for Vascular Technology of Great Britain and Ireland (SVT) and who obtain PII through the SOR. In particular, this guidance identifies the practice requirements of the SOR in order for individuals to remain within the terms of the professional indemnity provided. This document is additional to existing guidance on the Society's professional indemnity membership benefit as published in the SCoR document 'Summary of Professional Liability Insurance Policy' which members are strongly advised to read

Introduction

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This guidance also applies to those individuals who are members of the Society for Vascular Technology of Great Britain and Ireland (SVT) and who obtain Professional Indemnity Insurance through the Society of Radiographers. In particular, this guidance identifies the practice requirements of the Society of Radiographers in order for individuals to remain within the terms of the professional indemnity provided.

This document is additional to existing guidance on the Society's professional indemnity membership benefit as published in the SCoR document 'Summary of Professional Liability Insurance Policy' which members are strongly advised to read.

It is important to note that the cover provided is for a member's work as an individual professional and will not cover the company, Trust or Health Board for whom they are working. The SOR is neither insurance broker nor insurance company. The final decision to accept a claim will rest with the underwriter, albeit based on our advice and as long as the conditions for cover are met.

The Professional Indemnity Insurance member benefit is provided if a particular practice is recognised as being within the Scope of Practice of a sonographer. This is articulated in the SOR publication 'The Scope of Practice in Medical Ultrasound'.

The scheme applies to eligible individuals irrespective of whether they are in full or part time

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employment.

Context

The Society and College of Radiographers has a duty to review its professional guidance documents regularly so that they reflect both the needs of its members and the prevailing healthcare environment. This statement follows on from previous guidance published in November 2006 which itself took account of the continuing and significant changes in health service delivery, the ever widening number and range of service providers (including those in the independent sector) and the widespread use of 3D and 4D ultrasound for social (souvenir) scanning purposes in obstetrics.

It was evident in 2006 that, as a result of the widespread availability of ultrasound, sonographers were finding that both service users and referrers were requesting a much broader spectrum of ultrasound examinations. This meant that the SOR was frequently asked to clarify the professional indemnity cover of individual members regarding ultrasound referrals and scans performed for 'reassurance', therapeutic purposes, research or as part of a private patient's assessment.

These trends have continued and this statement reflects changes such as the continued growth of souvenir scanning when there is no diagnostic purpose, the formal adoption by the Society of Radiographers of the European Committee of Medical Ultrasound Safety / British Medical Ultrasound Society statement on souvenir scanning and changes following Lord Darzi's report (High Quality Care for All: NHS Next Stage Review)² which included provision for self-referral by patients to Allied Health Professionals.

Referrals for Ultrasound Examinations

i) Referrals from medically and non-medically qualified professionals.

It is the policy of the Society and College of Radiographers that it is perfectly in order for sonographers to accept requests from both medically and non-medically qualified referrers provided that the sonographer is appropriately trained and competent to perform the examination. Where appropriate, the provisions of the Society and College of Radiographers publication 'Clinical Imaging Requests from non-Medically Qualified Staff' should be followed. The request must be evidence based and justified by the sonographer who should be working within a clinical governance and quality assurance framework.

ii) Self referrals

The Council of the Society and College of Radiographers (SCoR) have previously agreed that it is proper for sonographers to accept self referrals for diagnostic and therapeutic purposes and as part of the health status assessment of a private client or patient. The ultrasound examination must be evidence-based and the request justified by the sonographer. The SCoR expects that such referrals will meet the following criteria:

- The scan occurs within an appropriate clinical governance and quality assurance framework and within a medical or clinical setting.
- Where sonographers are undertaking such scans within their personal scope of practice, the scan must be performed to the same standard as that required for standard obstetric and non-obstetric scans as performed in NHS facilities.
- It is recognised explicitly that there is potential for clinically significant information to be discovered during the scan and as such both the sonographer and the patient accept this

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- responsibility. Both also accept that it is the sonographer's duty to record the findings and take subsequent action as deemed appropriate.
- Prior to the scan, the examining sonographer informs the client/patient that clinical information/data will be recorded in permanent form in relevant care records, supplemented by appropriate images and discussed with appropriate professionals (eg their GP).
- The examining sonographer identifies the purpose of the scan and that the client/patient has been informed as set out above and enters this in the patient's care record.

iii) Research

It is acceptable, with regards to PII, for a sonographer to accept requests and self-referrals for research purposes provided that they are part of a Research and Ethics Committee approved research programme. Recommended procedures with regards to informed consent must be followed and all exposures kept as low as reasonably achievable. Reference should be made to the British Medical Ultrasound Society (BMUS) safety statements available at www.bmus.org.

iv) Education

The provision of the PII benefit applies to eligible individuals engaged in scanning volunteers as part of a formal training programme, subject to them being competent to undertake scanning and the volunteers being fully informed and having consented to the scan for training purposes⁵.

Guidelines for the management of safety when using volunteers and patients for practical training in ultrasound scanning and a suitable consent form can be found at $\underline{www.bmus.org}^6$.

v) Souvenir scans in obstetrics, including 3D/4D scans and scans solely to derive the fetal sex.

The Society of Radiographers defines a souvenir scan in obstetrics as an ultrasound scan with no medical or clinical justification, usually performed commercially, to provide a recording in 2D, 3D or 4D, and/or to sex the fetus when there is no clinical indication for this: the primary purpose of a souvenir scan is therefore to provide keepsake images or memorabilia. Expert advice given to the Council of the Society of Radiographers is that such scans fall outside the SoR's current general Professional Indemnity Insurance provision. This statement applies whether the souvenir scan is performed as a self-referral or following a referral from a healthcare professional.

Please note that this statement does not include scans where souvenir images or recordings are provided to the patient as part of a clinically justified diagnostic or screening scan. The production of souvenir images or recordings for the parents to keep is acceptable if they are produced during such a scan provided that this does not require the ultrasound exposure to be greater in time or magnitude (as indicated by the displayed Mechanical and Thermal Indices) than that necessary to produce the required diagnostic information. This follows the European Committee of Medical Ultrasound Safety statement on souvenir scanning which was endorsed by BMUS Council in October 2007 and by the Council of the Society of Radiographers in July 2009. The full statement can be found at www.bmus.org⁷.

vi) Scans for reassurance purposes

Where there is a clinical indication for scans for re-assurance purposes (eg history of recurrent miscarriage), the PII scheme covers sonographers undertaking such scans. The patient may be referred by a doctor, midwife or other appropriate healthcare professional, or may self-refer. If sonographers accept self-referrals, they must ensure that the criteria in section (ii) of this document are adhered to, as well as other relevant guidance on self-referrals that the Society of Radiographers may issue from time to time. The statements in section i) and v) above and section vi) below also apply.

vii) Ultrasound examinations for health screening or vascular assessment purposes ('life-style' scans outside of national screening programmes)

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The British Medical Ultrasound Society has issued advice on 'The Use of Medical Ultrasound for Health Screening of Vascular Disease'⁸ and on 'The Use of Medical Ultrasound for Health Screening'⁹ which can be viewed on their website at www.bmus.org

These 'life-style' scans often take place outside any recognised care framework on a self-referral basis and with no evidence or clinical justification to support the need for such scans. They take place more frequently in the independent healthcare sector but may also take place in the NHS. If performing such scans, sonographers must ensure that their employer has proper professional indemnity arrangements in place as the SoR PII scheme does not apply to this work.

Independent Practitioners

Sonographers who are independent practitioners and members of the SoR benefit from the SoR's PII scheme provided that the scans they carry out are in accordance with the referral principles described in sections (i) and (ii) above and that they comply with all relevant guidance on self-referrals issued by the Society of Radiographers from time to time Sonographers are advised to check the document library on the SoR website on a regular basis 10.

Independent practitioners are advised to visit the website of the Care Quality Commission at http://www.cqc.org.uk/. Registration of all independent healthcare providers will be a statutory requirement from October 2010.

Use of Disclaimers

The use of disclaimers is common. These are documents which individuals are asked to sign to accept that the scan to be undertaken has no medical or clinical purpose or value and no guarantees can be given as to whether the scan is normal or shows an abnormality.

As with all disclaimers, the mere inclusion of a disclaimer, even if properly drafted and placed, does not provide legal protection. The most a disclaimer can accomplish in this respect is to reduce the responsibility of the practitioner. The Society of Radiographers does not advocate the use of disclaimers. Rather, it emphasises that sonographers must at all times use their judgements to assess the risk/benefit of all requests, whether from referral or self-referral source and ensure that their use of ultrasound is prudent.

Queries

Please contact the SCoR if you have any queries regarding the above or if you are uncertain of the PII implications of a particular scanning practice.

References

Web sites last accessed 9th April 2010

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