MINUTES OF THE CONSULTANT RADIOGRAPHERS ADVISORY GROUP (CRAG) HELD ON TUESDAY 12th SEPTEMBER 2017, AT THE OFFICES OF THE SOCIETY OF RADIOGRAPHERS, 207 PROVIDENCE SQUARE, LONDON, SE1 2EW

PRESENT: Rita Borgen {RB}
Alexandra Drought {AD}
Sue Garnett {SG}
Robert Milner {RM}
Jonathan McConnell {JMC}
Dawn McDonald {DMD}
Heather Nisbet {HN}
Zebby Rees {ZR}
Neill Roberts {NR}
Steve Savage {SS}
Kathryn Taylor {KT}
Yatman Tsang {YS}
Sue Williams {SW} {Chair}

IN ATTANDANCE: Valerie Asemah {VA} {Minutes}
Louise Coleman LC} {Presentation}
Rachel Harris {RH} {Officer}
Michele Landau {ML}
Tracy O’Regan {TOR} {Officer}

1. WELCOME AND INTRODUCTION

1.1 The Chair welcomed everyone to this first meeting of the Consultant Radiographers Advisory Group (CRAG) and round table introductions were made.

1.2 RH then went on to explain the criteria behind the selection of this group. The majority of consultants coming on to this group had to be accredited or working towards accreditation. Another factor which had to be taken into consideration was representation from the 4 countries. The usual rules apply for this group although the Terms of Reference (ToRs) will be altered slightly. But group must be firmly established before new members are requested.

1.3 The Chair and Vice Chair positions will be for a period of 2 years as stated in the ToRs.
2. PURPOSE AND COMMITMENT OF THE GROUP

2.1 RH outlined the reason for having this specific advisory group. When the Consultant group first started it was as a support network for Consultants; and they were only a few then. As the number increased there needed to be a change, the meeting had evolved into a CPD type event.

2.1.2 This group will be setting a workplan, with pertinent issues that the wider group of Consultants will be able to work to. It is important that the wider group contribute to what the CRAG is working on. Moving forward CRAG will be able to provide better guidance for Consultant Practitioners; for example, with governmental updates.

2.1.3 It is of the utmost importance that Consultants apply for their accreditation using the 4 core domains of consultant practice established by the department of health. This group will be expected to provide peer review for those going through the accreditation process. Having a brand new advisory group is a positive step and the Society is quite open to ideas coming from this group.

3. WIDER GROUP ACCESS

3.1 There was concern that the ‘wider group of Consultants’ might feel isolated and a discussion followed on how this can be avoided, for example:

- Sharing work among the wider group: Co-opt other Consultants onto small subgroups
- Using Glasscubes as the way forward to communicate with each other
- Encourage research, using higher education areas and provide support and assistance
- Members of the group were advised to remember that they are representation for the wider group and areas that encompasses
- Everyone was encouraged to sign up to Glasscubes and use it
- Co-op members from different professions
- Link with CAPH
- Encourage wider group to find out who their AHP and nurse Consultant are within their areas
- Have continuous dialogue, use and engage with nurse Consultants, AHP consultants etc.

4. DISSEMINATING INFORMATION TO WIDER GROUPs

4.1 Various ways of getting information out to the wider group were discussed.

- It was noted that NHS Scotland is aiming to produce an AHP document that may be disseminated to the group
- Wider group of consultant radiographers to have joint meetings, for example annually at UKRCO, another way of getting information out
- Invite chairs of other consultant groups to attend meetings
- Talk about the direction in which everyone is going including wider AHP groups
- Use Glasscubes – this is a safe portal which is one of the reasons for using it
- Share the minutes of meetings with the wider group and seek responses
4.1.2 This group has to be aware that discussions made round this table will not always be agreeable to the wider group, so be prepared to explain and defend decisions.

4.1.3 RH reiterated that transparency is most important and wanted to point out that the group may be top-heavy with breast imaging members, but it was because the majority of applications was from that discipline.

5. OVERVIEW OF GLASSCUBES

5.1 ES was unable to attend today’s meeting so TOR gave an overview of current glasscube usage and purpose. Glasscubes is the way forward for this group and so far ninety-two members have activated their accounts and entered the discussion area.

5.1.2 With regard to the ‘firewalls’ some members are experiencing in their trusts it was suggested that they speak to their IT departments; usually allowances are made for sites requested by staff.

5.1.3 It was pointed out that this group and the SCoR Research group are testers for Glasscubes; to determine if this is the right platform for SCoR. The ultimate aim is to move onto one platform. Currently there are two, synapse is the other platform being used.

5.1.4 There was a discussion with regards to what we are trying to do with Glasscubes and how to get members proactively involved. Topics for discussion could be sought through Glasscubes, It is possible for member to set their own notification settings; and the more we use this platform the better we can work together.

5.1.5 TOR pointed out that the group should be signed up to both Synapse and Glasscubes for the moment. VA will send you agendas, minutes and various items through Synapse. Also such things as NICE papers to share within a small group. Glasscubes is for the wider forum. So both are needed but for different purposes currently.

5.1.6 TOR was tasked with writing a small article for Synergy News to help promote Glasscubes to the wider Consultants. This can also be uploaded to the Website. There were also suggestions for future issues of Synergy News with articles such as the Trainee Consultant Role and a News page.

ACTION: TOR & GROUP

6. POSSIBLE CONSULTANT RADIOGRAPHERS EVENT

6.1 It was noted that some people from the wider group are unhappy as they can no longer attend society meetings. As a first step to foster continued engagement RH informed the group that Fodi Kyriakos (FK) very generously offered to pay for an event (for the whole consultant group) to get together at UKRCo. There was discussion around this and it was agreed that RH will go back to FK and yes the offer is very much appreciated and will let him know when this event will be taken up.
6.1.2 The Chair felt that this event could be in 18 months’ time and ask LC if she could participate and give a talk on accreditation. This is a good opportunity for the wider group to think of applying for their accreditation. There can also be presentations, discussion of the workplan with the wider group, joint get together etc. So the group will discuss this further and come back to RH with a decision. A possible time for the event is the Sunday afternoon prior to UKRCO.

ACTION: ALL

6.1.2 It was further agreed that RH will speak with the CEO Richard Evans {RE} and request an hour’s space at the exhibition where the wider group can meet. She also agreed to request a POD at some point during UKRCO.

ACTION: RH

7. WORK PLAN (to include documents, impact, etc.)

7.1 The group discussed their workplan for the next year and identified a few possible ideas:

- Group members to become CoR Assessors hopefully by the end of this month
- Use Glasscubes to carry out a survey on what we want to ask HEIs – initially to scope how radiographers are meeting the HCPC Standards of Proficiency
- Develop an appraisal tool linked to role impact – NR is currently having some experience

7.1.2 The group discussed where the impact work fit into CPD and accreditation.

7.1.3 SW agreed to write an article for Synergy News and asked the group to send her a short bio of themselves.

7.1.4 SW and TOR will collate notes taken during the discussion to cross-match with CRAG TORs. A draft work plan, with dates for actions and the names of consultants leading each area (volunteered during the discussion) will be forwarded to Rachel. The work plan will then be considered by UK Council.

ACTION: SW & TOR

8. CRAG’s ROLE IN ASSESSING CONSULTANT RADIOGRAPHERS ACCREDITATION

8.1 LC was invited to the meeting today to give a presentation on being a CoR Assessor. It was noted that currently there are around 80 assessors but more are definitely needed and it would be beneficial if members of this group could apply to become high quality CoR Assessors. Several members showed interest. Following discussion, it was agreed that LC will forward today’s presentation and assessor application form to VA to circulate via Synapse.

ACTION: VA

8.1.2 LC also mentioned that the CoR runs online live tutorials on a variety of CPD and accreditation topics and as such ideal for those starting their CPD journey or for those of you seeking an update. LC will forward information to VA to upload via Synapse.

ACTION: VA
9. POTENTIAL PROJECTS

9.1 The topics below were discussed alongside the work plan.

- Impact Work – already starting and ongoing
- Trainee Posts and succession planning
- Doctoral Training avenues
- Accreditation Requirements
- Appraisal Standardisation and tools
- Scope of Practice

10. ANY OTHER BUSINESS

10.1 To note that JMC volunteered to be Vice Chair of the group and this was agreed by all.

11. DATE OF NEXT MEETING

11.1 The dates of future meetings were agreed as:

- Wednesday 28th March 2018
- Wednesday 19th September 2018