

**The Society and College of Radiographers
Process Manual for Practice Guideline Development
Appendices
Approved by UK Council September 2014
Amended April 2015**

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Appendix A

Society and College of Radiographers: Structure and Lines of Accountability

Introduction

The Society of Radiographers (SoR) Ltd, is a private company limited by guarantee, with a Council elected by the Members of the Society of Radiographers (SoR) forming its Board of Directors. The Society of Radiographers is also a Trade Union affiliated to the Trades Union Congress (TUC) and registered with the Certification Officer.

The College of Radiographers (CoR) is a private company limited by shares, and also a charity registered with and regulated by the Charity Commission. In addition, it is registered with the Office of the Scottish Charity regulator. The College is governed by a Board of Trustees (Trustees), half appointed by the Council of the SoR and half appointed by the Board of Trustees, collectively representing the public interest.

The two organisations have common objects related to public, professional, education and research matters, with the SoR having further objects enabling it to function as a trade union and represent the interests of members. Memoranda and Articles of Association for both the Society and the College of Radiographers can be found at <https://www.sor.org/about-us/statutory-documents/moa-aoa-and-handbook>

The common objects enable the SoR and the CoR to function cohesively as a single entity in matters related to the public interest, and professional practice, education and research related to the profession of radiography and the wider radiography workforce. The development of practice guidelines for accreditation by the National Institute for Health and Care Excellence is overseen by the Society and College of Radiographers (SCoR) conjointly.

Organisational Structure

The broad organisational structure can be seen diagrammatically in **Annexe 1** to this appendix. The specific structure governing the development of practice guidelines sits within, and is drawn from, the broad organisational structure shown, together with the lines of accountability.

Annexe 2 to this appendix demonstrates the specific structure of practice guideline development groups, and how this relates to the broad organisational structure.

Annexe 1 to Appendix A

The Structure of the Society and College of Radiographers (SCoR)		
Membership (Lay) Structure:		Staffing Structure:
Society of Radiographers UK Council (Policy making; Strategic direction; Governance, including financial governance)		CEO / Directors Executive Administration
College of Radiographers Board of Trustees (Policy; Strategy; Governance)		
Public Patient Liaison Group (PPLG) (provides public and patient input to the work of the Society and College of Radiographers)		
Annual Delegate Conference (Policy advice)	National Councils & Regional Committees (11) (Devolved countries and regional affairs advice)	Staff Teams: Industrial/ Health and Safety Profession/Education/Research (Professional Officers PO) Information Conferences and Events Membership Finance IT and Facilities
	Members; Representative networks; Professional advisory groups; Special interest networks and groups Short-life working groups, including practice development guideline groups	

Annexe 2 to Appendix A

Practice Guidelines Development Groups and Lines of Accountability			
Membership (Lay) Structure		Staffing Structure	
Society of Radiographers UK Council	Decision to develop a practice guideline; Approval of completed practice guidelines	Director of Professional Policy (DPP)	Allocates budget; Establishes timeframe for the development work; Delegates day to day oversight of development of the agreed practice guideline to the policy, guidance and advice professional officer; Appoints guideline lead.
College of Radiographers Trustees	Approval of completed guidelines; Advice on need for guidelines in specific areas of professional practice	Policy, Guidance and Advice Officer	Assists with scoping the agreed practice guideline, in conjunction with the appointed guideline lead; Provides support for the appointed guideline lead; Checks, approves and assures compliance with all aspects of the process in accordance with the process manual; Works with the DPP to ensure that the practice guideline is approved by the Council and Trustees; Following approval, ensures that the guideline and associated resources are published and promoted widely; Schedules review of the guideline.
Public Patient Liaison Group	Provision of independent, external commentary and criticism of guidelines during the development process, and prior to approval	Appointed Guideline Lead (This may be the relevant Professional Officer, but if not, the PO will be a member of the guideline development group)	Engages volunteer experts / stakeholders from within and outside the profession, willing to contribute to the guideline development;

			<p>Carries out or oversees the literature search, review and analysis</p> <p>Drafts the practice guideline recommendations;</p> <p>Undertakes the detailed writing up of the practice guideline and associated resources, including revisions required from consultation and approval stages of its development;</p> <p>Keeps detailed records of consultation responses, and tracks the evaluation of these in relation to the further development of the guideline</p>
Annual Delegate Conference	Advises on the need for, and requests, specific practice guidelines	Professional Administrator	<p>Under the direction of the professional officer, provides the administration associated with developing the practice guideline;</p> <p>Maintains a comprehensive log of the development process, activities and outcomes.</p>
National Councils and Regional Committees	Identifies needs in relation to the development of practice guidelines		
Members; Representative networks; Professional advisory groups; Special interest networks and groups	Undertakes the development of specific practice guideline within allocated resources and agreed timeframe		
Practice Development Guideline Groups			

Appendix B

College of Radiographers' Patient and Public Liaison Group.

Constitution and Terms of Reference

The Patient and Public Liaison group is established by the College Board of Trustees and by UK Council of The Society of Radiographers.

The role of the group is

- to raise concerns regarding the nature and perception of radiographic practice to the Board of Trustees and to the Council
- to influence Society and College work on radiographic practice so that it best incorporates and responds to patients' and public views
- to offer input to and support for all publications of the Society and College
- to offer lay opinions on work carried out by the Society and College.

The group will report to the College Board of Trustees and through them to UK Society Council.

The group will be supported by a Society of Radiographers' officer and administrative staff.

Membership of group

The group will comprise a maximum of 9 lay members, acting as individuals rather than as representatives of specific organisations. Additionally, members of Council and the College Board may attend the group meetings. The President and President Elect shall be ex-officio members of the group.

Membership of the group will be open to individuals responding to national advertisements and recruitment will be open and transparent and comply with Society's policies on diversity. Recruitment and selection will be the responsibility of the College Board and UK Council and will be informed by nominations from the Chair, and Vice-Chair of the existing group.

Membership of the group will be for a period of 2 years, renewable for a further 2 years. Thereafter, a period of at least 2 years should pass before a further period of office is sought.

Office Holders

The group shall elect a chair and vice chair from its membership and the Chair will attend the Board of Trustees meeting and offer a report to the Board on the group's activities. The Chair will also collaborate with the Board and Council on the appointment of new group members.

Terms of Office

The office-holders will serve for an agreed period and this initially may be different for each role to ensure continuity. Substantive periods would not normally exceed 2 years.

The group is expected to meet up to twice a year although business may be conducted electronically. 4 (four) members present will constitute a quorum. Expenses of group members for attendance at meetings will be paid by the College Board of Trustees, in accordance with Society policy. Non-attendance at 3 meetings without the agreement of the chair may result in the member being excluded from the group.

Duties of Chairperson

- To chair all meetings of the group. In the absence of the Chairperson, the vice Chair will assume the Chair
- To attend the College Board of Trustees meetings
- To report activities and concerns of the group to the College Board of Trustees
- To ensure that the terms of reference and activities of the group are in accordance with College and Society policy
- To participate in the selection of members of the group
- To liaise with other organisations' patient liaison groups as necessary

Duties of Vice-Chair

- To support the work of the Chairperson
- To chair meetings in the absence of the Chairperson
- To participate in the selection of new group members

RE/GS/June 2007

Appendix C

Application to develop a Practice Guideline

Introduction

Developments in clinical practice, changes in skills mix, emerging roles and/or changes to practice occasioned by government policy, new evidence or technologies could all prompt the need for the development of a new practice guideline. The Society and College of Radiographers (SCoR) has developed a Process Manual to support the development of accredited practice guidelines.

If you believe that the radiography workforce needs one, you should first of all read the SCoR Process Manual, available on the SCoR website and then seek an informal discussion with the Director of Professional Policy (DPP). Following agreement to proceed, please make a formal application to the DPP to undertake the development of an accredited practice guideline using the headings below. The application should not exceed 400 words. You may expect a written response within 1 month.

1. Provisional title

- the overall objective of the guideline

2. Who is the practice guideline for?

- identify which sections of the radiography workforce

3. Why is the practice guideline needed at this time?

- state the rationale and justify the development

- include consideration of any implications of not proceeding

4. Which population group will the practice guideline be about?

- describe the particular patient group defined by condition or social category

5. What is the setting for the practice guideline?

- imaging and/or radiotherapy department

- acute or community setting

6. Who could be members of the core development group?

- give the names of 3-5 key individuals, including a lay person and someone with experience of undertaking a systematic review of literature.

7. Are there any funding implications?

8. How will the practice guideline to be disseminated and embedded in practice?

Reference:						
Source	Purpose	Design	Sample	Intervention/outcomes	Findings	Limitations
Quality and relevance rating:						
Recommendations:						
Aspects of the guidance document this reference can inform:						

Appendix D Data Extraction Template

Appendix E

GRADE System for appraising the quality of literature and strength of recommendations

The SCoR recommends the adoption the GRADE - Grading of Recommendations, Assessment, Development and Evaluation - system for determining the quality of evidence and, consequently, the strength of any recommendations. This system enables guidelines to be developed that are not dependent on the availability of randomised controlled trials and takes into account other factors influencing the quality and limitations of studies. This is particularly useful for radiographic research, which spans the whole range of methodologies from RCTs to interpretive phenomenological studies. It also enables expert opinion and practitioner experience to be included and evaluated.

A 6 part introductory series of papers about how to use the GRADE framework can be accessed at: <http://www.gradeworkinggroup.org/publications/index.htm#BMJ2008>

The first part of the introductory series, GRADE: an emerging consensus on rating quality of evidence and strength of recommendations (Guyatt G et al 2008), describes the GRADE framework and its utility.

It can be accessed at:

http://www.gradeworkinggroup.org/publications/GRADE-1_BMJ2008.pdf

For simplicity and transparency the GRADE system classifies the quality of evidence as one of four levels; high, moderate, low, very low; with randomised controlled trials (RCTs) being the highest level and expert opinion the lowest. However, if studies have limitations in their design or implementation then the guideline development core group may decide to downgrade the value of the evidence. Alternatively, a study may be upgraded if it has particular relevance or effect. In some case, the limitations of the evidence base may preclude the use of GRADE.

More recently, the GRADE working group (2011) has published a 20 part guide on how to apply the GRADE framework; Grade Guidelines - best practices using the Grade framework, which provide further, more detailed information and explanation about using the GRADE framework.

The first of these articles, GRADE Guidelines: 1. Introduction – Grade evidence profiles and summary of findings tables contains a section about limitations of using GRADE, which will assist guideline producers to decide whether the GRADE framework can be used for their topic. (2011, p391)

These can be accessed at:

http://www.gradeworkinggroup.org/publications/JCE_series.htm

Appendix F

Practice Guideline Document Template

Title

Contents page

Glossary of terms

Summary

- Summary of work undertaken and key recommendations

Introduction

- How was the topic identified?
- Why is it important?
- How does it fit with existing radiographic practice (ADC, SCoR policies)?
- Policy context

Scope and Purpose

- Target audience for whom guideline is being written
- Population covered, including socio-cultural categories
- Setting(s)

Guideline objective and questions addressed

- This should be a succinct statement of the overall objective of the practice guideline and the question(s) to be addressed within it. It should be written in such a way that the literature search strategy can be developed unambiguously

Guideline development process

- Core group – how established, membership to include a service user
- Stakeholder involvement, including service users – membership categories and how recruited
- Peer review to include expert patient organisation if appropriate/possible
- Funding arrangements if any
- Conflict of interest – statement to say how this was managed, particularly how any disclosures were dealt with
- SCoR approval process

Guideline methodology

- Literature search strategy and outcomes, including criteria for inclusion/exclusion and dates
- Strengths and limitations of evidence, including a commentary on overall quality
- Description of how recommendations were developed, the individuals and entities involved and the process for refining and achieving consensus
- Limitations of the guideline including consideration of possible bias

Background to condition

Guideline Recommendations

- These should be themed as appropriate
- Statements should include the references that are used to support them. If appropriate, statements may be graded according to the strength of the evidence
- Statements about options for clinical management or intervention should consider health benefits, side effects and an assessment of risk

Implementation Strategies

- Details of implementation, impact measures, audit tools, learning resources
- Discussion of potential organisational or financial barriers to implementation
- Dissemination

Recommendations for future research

Identify gaps in evidence and prioritise research opportunities

Dates of publication, process and timing of review and updating

References and Bibliography

Appendices

Names and affiliations of guideline core and stakeholder groups

Data extraction / evidence based review tables

Appendix G

Managing Conflicts of Interest

Introduction

The Council of the Society of Radiographers (Council) and the Trustees of the College of Radiographers (Trustees) operate within clearly defined governance frameworks, which include explicit policy and procedures on conflicts of interest.

The Society of Radiographers Ltd is a private company limited by guarantee and the Council is its Board of Directors, operating in accordance with the Companies Act 1985 and subsequent amendments, and guided by the policies, standards and guidance of Companies House. The Society of Radiographers is also a Trade Union affiliated to the Trades Union Congress (TUC) and registered with the Certification Officer.

The College of Radiographers is a private company limited by shares, and also a charity registered with and regulated by the Charity Commission. In addition, it is registered with the Office of the Scottish Charity regulator. The College is governed by the Board of Trustees (Trustees), operating in accordance with both company and charity legislation.

Memoranda and Articles of Association for both the Society and the College of Radiographers can be found at <https://www.sor.org/about-us/statutory-documents/moa-aoa-and-handbook>

Conflict of Interest Policy and Procedures (General)

The Council and Trustees have an agreed conflict of interest policy which is included as **annexe 1** to this appendix, and which provides the framework for addressing potential and actual conflicts of interest at all strategic and operational levels of the organisation.

The organisation relies heavily on voluntary work by members of the Society of Radiographers and others with an interest in furthering the development of the radiography profession and the wider radiography workforce. These individuals are required to adhere to the terms of reference for representing the organisation; see **annexe 2** to this appendix.

Conflicts of Interest and Developing Practice Guidelines for Accreditation by the National Institute for Health and Care Excellence

Within the framework of the general policy and procedures, the Director of Professional Policy (DPP), the senior member of the executive team responsible for all professional, educational and research activity, oversees the effective adherence to the conflicts of interest policy and the appropriate implementation of the associated procedures.

On establishing a guideline development core group the DPP is responsible for ensuring that all members of the group and those contracted to undertake specific activity related to the guideline development work are provided with the organisation's policy and procedure for managing conflicts of interest, and the terms of reference for representing the organisation. This responsibility is devolved jointly to the lead Professional Officer, a paid employee of the organisation, managing the guideline development group, and the Professional Affairs Administrator. All guideline development core group members and those contracted to undertake work in association with the guideline development, must sign and return a copy of the terms of reference to the Professional Affairs Administrator who is responsible for maintaining these on file until the work has been completed.

Annex 1 to Appendix G

The Society and College of Radiographers Policy and procedure for managing conflicts of interest

Introduction and Background

Conflicts of interest may be identified either as 'situational conflicts' or 'transactional conflicts'. A situational conflict occurs where an individual has roles and responsibilities which may give rise to a conflict of loyalty on a permanent basis, for example where an individual is both a trustee of the College of Radiographers and a member of the Council of the Society of Radiographers, or is both a Society executive and a member of the Society's pension scheme. A transactional conflict arises where an individual trustee, Council member or senior employee has an interest, from time to time, in a particular transaction which the Society or College is entering into.

Under new International Accounting Standards, auditors will be obliged to review the possibility of conflicts of interest and its consequences.

Whilst it is recognised that there are inevitable situational conflicts in the governance of the Society and of the College, given the requirement that six members of the Society's Council are also trustees of the College, and a number of the executives, including the Chief Executive, hold senior positions reporting to both the Society and the College, it is considered that as both organisations have almost identical objectives and work together to achieve those objectives then provided the members of the Society Council, trustees of the College and senior executives who are in a position of conflict can identify the conflicts and have procedures in place to manage them, the conflicts should not cause a difficulty in practice.

Trustees, Company Directors and Senior Employees Business

It is acknowledged that the benefits of having a mix of trustees, company directors and senior employees with wider roles and responsibilities must always be balanced against the risk of conflicts of interest and the consequent problems for the management and administration of the companies.

Possible areas that could give rise to conflicts of interest include

A conflict could arise if trustees, company directors, senior employees (or their relatives/other related parties) were paid to carry out work for the organisation.

There could be a conflict if trustees, company directors, senior employees (or their relatives/other related parties) are involved in competing entities, such as owning or editing journals in areas similar to those published by SCoR.

A conflict could also arise if trustees, company directors, senior employees (or their relatives/other related parties) owned shares in companies or entities with which SCoR contracts or that could be held to be in competition with SCoR's interests.

Negotiations between the Pension Fund Trustees and SCoR as sponsoring employer and the management of confidential information for example: setting investment strategy, assumptions for actuarial valuations; contribution rates; setting a recovery plan for correction of a deficit. Pension scheme trustees may be members of Society Council or the College Board, or may be employed directors of SCoR and so also members of the Pension Scheme.

There could be conflict of interest between the roles of the Society and the College although both have common objectives, bar one - the operation of a trades union. The Trade Union and Professional and Education Directors have specific roles in one company or the other, whereas the Chief Executive Officer and Finance Director roles cover both companies in administrative functions. However one interest supports the other in nearly every sphere.

Best Practice

The principal challenges in relation to conflicts of duty arising in two key areas.

A conflicted trustee, company director, senior employee will need to consider whether the conflict should lead them to:

- a) not take part in the relevant discussions
- b) leave the room
- c) abstain from voting
- d) in the extreme resign

The trustees, company directors, senior employees recognise and respect the confidentiality of all information received. A formal confidentiality agreement will be considered if or when circumstances so dictate.

Types of interests

Interests can be specific or non-specific and financial or non-financial. Financial interests can be personal or non-personal as described in NICE Policy on Conflicts of Interest see

<https://www.nice.org.uk/Media/Default/About/Who-we-are/Policies-and-procedures/Code-of-practice-for-declaring-and-managing-conflicts-of-interest.pdf>

Policy and procedure

The Chairs of committees are in a special position in relation to the work of their committee and so may not have any specific financial or non-financial personal, non-personal or family interests

According to best practice trustees, company directors, senior employees must:

- Identify and acknowledge any potential conflict of interest they may have;
- Be open with each other on any conflicts of interest they may have;
- Adopt practical solutions;
- Plan ahead and agree on how they will manage conflicts of interest if they arise.

With these objectives in mind the trustees, company directors, senior employees agree to adopt the following procedure:

1. Any trustee, company director, senior employee speaking in another capacity will state this clearly at meetings and this will be recorded in the minutes.
2. Any trustee, company director, senior employee who feel that they, another trustee, company director, senior employee, adviser or in-house attendee has a conflict of interest on a particular topic should advise the chairman prior to or at a meeting. The Chair will take action as described in table below. Any decision or action taken will be recorded in the minutes.
3. Any trustee, company director, senior employee may identify information which they think should not be shared with any the Society of Radiographers and/or College of Radiographers representatives. Any decision or action taken will be recorded in the minutes.
4. In extreme cases a trustee, company director, senior employee may wish to ask another person to speak to a potentially conflicted item.

The actions required at committee meetings are set out in the table below.

TYPE OF INTEREST	ACTION
Personal financial specific	Declare and leave the meeting In exceptional circumstances the chair may rule that they can attend to answer specific

	questions
Personal financial non-specific	Declare and participate unless, exceptionally, the chair rules otherwise
Personal non-financial specific	Declare, action is then at discretion of chair
Personal non-financial non-specific	Declare and participate, unless exceptionally, the chair rules otherwise
Non-personal financial specific	Declare and participate, unless exceptionally, the chair rules otherwise
Non-personal financial non-specific	Declare and participate, unless exceptionally, the chair rules otherwise

**The Society and College of Radiographers
Register of Interests**

Please take time to read the agenda and papers carefully. If you feel that you may have a conflict of interest with regard to any item(s) for discussion, please contact the Chair prior to the meeting. The Chair will then adopt the agreed procedure in the best interests of all members of Council and of the Society and College.

MEETING:

DATE:

Trustee/Company Director/Senior Employee Name	Interest

Annexe 2 to Appendix G

REPRESENTING THE SOCIETY AND COLLEGE OF RADIOGRAPHERS (SCoR)

TERMS OF REFERENCE

Our reputation and standing as the professional body and trade union for those engaged in diagnostic imaging and radiotherapy are important assets to the organisation, our members and the profession. In seeking to protect this position and effectively manage the achievement of our objectives, we require that, in our relationships with external bodies and individuals, our policies, standards and values should be maintained.

You have volunteered to represent SCoR by participating in committees, consultations, meetings, conferences and/or other events. We are grateful to you for undertaking these tasks, and for your special skills and expertise. In carrying out the role of ambassador, representing SCoR, we ask you to note the following points:-

- Your behaviour must at all times be beyond reproach, conforming to legal obligations and social norms for courtesy and consideration for others.
- Statements and comments you make must be in line with SCoR policy, as approved by Council.
- You should ensure that you are adequately briefed by an appropriate SCoR officer or group.
- You should provide feedback to the appropriate SCoR contact or group.
- You must comply with SCoR policy when arranging travel and obtain prior permission before committing to other expenditure.
- You must declare potential conflicts of interest prior to undertaking a task.
- Information you acquire may be confidential and/or sensitive; you must seek permission from the originator of the information prior to further disclosure.
- You must comply with the requirements of the SCoR data protection policy statement and operating procedures when handling personal data.
- When emailing a group of people, you must use the Bcc option to protect recipients' email addresses, unless you have prior permission to share the email addresses.

On agreeing to take up a role on behalf of the Society/College the individual will be asked to give an undertaking to comply with the above points.

Signed: Date:

Full name (printed):

Appendix H

External Review Proforma

Introduction

Thank you for agreeing to be a reviewer for the above practice guideline. The external review process is not anonymous and your comments will be sent to the development group for their consideration prior to final publication. Your name as an external peer reviewer will also be included in the final document.

You are required to disclose any conflict of interest that could potentially influence or affect your contribution as an external reviewer. A declaration form is attached.

Please appraise critically the content and presentation, taking into account the following:

Is the purpose of the guideline explained clearly?

Is the language user-friendly?

Is the terminology inclusive and sensitive to gender/race/culture?

Is the development process transparent and robust?

Is there evidence of bias?

Do the recommendations arise explicitly from the evidence?

What is your overall opinion of the guideline?

Please do not comment on spelling or grammar; this will be addressed during the proof reading stage.

Guideline Title:

Date for receipt of comments:

Name:	
Organisation:	
Role:	
e mail:	
Telephone:	
Document section	Comments
Signature:	
Date:	

Please submit your completed proforma and conflict of interest declaration to: