MINUTES OF THE ULTRASOUND ADVISORY GROUP (UAG) HELD ON TUESDAY 25TH NOVEMBER 2014, AT THE OFFICES OF THE SOCIETY OF RADIOGRAPHERS, 207 PROVIDENCE SQUARE, LONDON SE1 2EW

PRESENT:

Liz Chapman {LC} {Chair}
David Cole {DC}
Elaine Gardiner {EG}
Gill Harrison {GH}
Sally Hill {SH}
Crispian Oates {CO}
Suzanne Poulton {SP}
Michael Purdon
Steve Savage {SS}
Ben Stenberg {BS}
Jacquie Torrington {JT}
Wendy Williams {WW}

IN ATTENDANCE:

Valerie Asemah {VA} {Minutes}
Charlotte Beardmore {CB}
Nigel Thomson {NT}

1. WELCOME AND INTRODUCTION

1.1 The Chair welcomed everyone to the meeting and round table introductions were made, but especially for the benefit of new members – Sally Hill, Steve Savage, Ben Stenberg and Jacquie Torrington.

2. APOLOGIES FOR ABSENCE

2.1 Apologies for absence were received from Gerry Johnson and Margaret Taylor.

3. MINUTES OF THE MEETING HELD ON 15TH MAY 2014

3. With the correction of one typographical error the minutes of the meeting held on Thursday 15th May 2014, were approved as a true and accurate record.
4. MATTERS ARISING OTHERWISE NOT ON THE AGENDA

4.1 Workforce Development *(minute 6.1)*

NT updated the group.


It has been recommended that diagnostic radiography and ultrasound stay on the Tier 2 list of the Migrations Advisory Committee. The SCoR provide evidence on sonographer workforce numbers to the Centre for Workforce Intelligence and MAC.

Health Education England has commenced a series of meetings looking at the sonographer workforce demand and supply situation. Richard Evans attended the last meeting in early November as both NT and CB were away.

5. UKAS GUIDELINES UPDATE

5.1 NT updated the group.

For the benefit of new members NT informed the group that in January 2009 SCoR and UKAS merged and just before the merger took place the UKAS guidelines were published, they are now due for an update. WW has agreed to work and lead on updating these guidelines. NT and WW will meet outwith this meeting to have further discussion. SS offered his assistance with the area of MSK. Rachel Harris will be supporting Nigel and Wendy in this work.

*ACTION:* NT & WW

5.2 It was noted that the RCR and SCoR Standards for a Quality Ultrasound Service which were due to be published have now been delayed until December. Final publication schedules are the responsibility of the RCR.

6. DIRECT ENTRY PROGRAMMES FOR SONOGRAPHY, CASE

6.1 DC has attended a series of meeting within the West Midlands with regard to direct entry for sonographers. Birmingham City University is hoping to start a BSc next September or the following year. It will be a 3 year programme. Following on from a meeting last week a preceptorship year was also mentioned. Discussion followed and it was noted that the two main problem areas are a lack of statutory registration and no agreement as to what a band 5/6 sonographer can do. NT informed the group that in 2009 a paper was published by SCoR with direct entry being a possibility so long as certain criteria were being met. This was adopted as policy by SCOR Council. A subsequent briefing paper was published in 2013. Links are [http://www.sor.org/learning/document-library/direct-entry-undergraduate-ultrasound-programmes-competency-practise-briefing-society-and-college](http://www.sor.org/learning/document-library/direct-entry-undergraduate-ultrasound-programmes-competency-practise-briefing-society-and-college) and [http://www.sor.org/learning/document-library/developing-and-growing-sonographer-workforce-education-and-training-needs](http://www.sor.org/learning/document-library/developing-and-growing-sonographer-workforce-education-and-training-needs).
There was considerable discussion with some UAG members supporting and others putting the argument for keeping with M-level. Steve Savage later outlined a possible plan for overcoming this that NT will discuss with CB. The SCoR will accredit through CASE but the current CASE memorandum of agreement only allows it to accredit at M level. The SCoR is a member organisation of CASE, however, so this can be discussed. There will be a session on this issue at BMUS in December. Health Education England is also holding a series of meetings and could be influential. (See notes above). There is a current shortfall according to the SCoR survey of 18% and this is not supportable. If undergraduate degrees in sonography are to be realised the service will need to be clear that there are roles for the newly qualified sonographers. The lack of registration is an issue but in the view of the SCoR need not in itself prevent progress with primary degrees.

7. **TRANSDUCER CLEANING AND DECONTAMINATION**

7.1 NT updated the group.

It was noted that SP attended a workshop run by Toshiba on behalf of the SCoR in June where the clearing of probes and infection control procedures were the focus of the day. There was information on infection control techniques and also on procedures such as transvaginal probe cleaning. The day confirmed that there are no national guidelines and cleaning varies by department. Manufacturer’s guidance should be followed but they are not always helpful. SP reported that it was a very informative day. NT informed the group that Margaret Taylor (UAG member) has joined a group in Scotland looking at transducer cleaning and infection control. NT had recently produced advice on transducer cleaning for the SCoR although it does not and cannot tell you how to do this. Available at [https://www.sor.org/news/scor-provides-information-ultrasound-probe-cleaning-decontamination-disinfection-and-sterilisation](https://www.sor.org/news/scor-provides-information-ultrasound-probe-cleaning-decontamination-disinfection-and-sterilisation)

8. **FASP ULTRASOUND AND LAB MEETINGS**

8.1 NT updated.

The SCoR have been invited to attend FASP lab group meetings which have had ultrasound added to their remit. NT is the SCoR representative on the group with Trish Chudleigh also attending on behalf of the SCoR. The next meeting is on 3rd December in London. NT cannot attend as AAA screening meeting on same date but Trish Chudleigh will be.

9. **FASP SCREENING MEETING**

9.1 NT updated the group.

FASP have organised a meeting to review changes to the first and second trimester screening scans that fall within their remit. Scans - It was believed that all screening support sonographers would be invited. The meeting is to be held at the Kia Oval on 27th November.
10. ADVICE ON HIGH BMI PATIENTS, SOCIAL MEDIA COMMENTS

10.1 JT updated the group around the issue of high BMI patients and the difficulty of telling them the reason they cannot always get a clear scan. NT mentioned an article from the July 2014 edition of Synergy News which was written by Emma Abbott and titled “Are You Calling Me Fat”? The group was encouraged to read this.

Discussion followed and ideas were suggested. These included discussing with local midwives, recording BMI on report and agreeing a form of words with FASP. NT drew the group’s attention to an updated document on WRMSD which includes advice on high BMI patients. [https://www.sor.org/learning/document-library/work-related-musculo-skeletal-disorders-sonographers](https://www.sor.org/learning/document-library/work-related-musculo-skeletal-disorders-sonographers)

JT will send NT a compilation of comments posted on ‘Mumsnet’. NT will raise with the FASP ultrasound and lab group.

ACTION: JT & NT

11. PVRS AND SONOGRAPHER REGISTRATION UPDATE

11.1 NT updated the group on the sonographer registration situation. The subject of voluntary registration has been raised by a House of Commons Select Committee. The HCPC have provided evidence and have stated that voluntary registration, even if the register is accredited by the PSA, can never be a replacement for statutory registration. All sonographers are, however, encouraged to apply to join the SCoR’s voluntary register which will support the continuing bid for statutory registration. Overseas and non-standard applicants have to go through a rigorous process before they are accepted onto the register. There are currently 126 voluntary registrants who have no statutory regulatory home. It was noted that at least 4 review panel assessors are needed to serve on the review panel. One of our long serving review panel members has retired from the role and we need to replace prior to the renewal next March. JT and GH volunteered.

NT reiterated that a voluntary register is needed if we are going to be successful in progression of the case for statutory registration for sonographers, so all sonographers are invited to apply.

12. RECENT CONSULTATIONS (since last meeting)

12.1 NT gave an update on recent consultations:

- FASP T13/T18 consultation – closed 16th June 2014
- RCR/SCoR Quality Standards document – awaiting publication (December 2014)
- RCOG ultrasound in the embryonic period – closed 16th May 2014
- HCPC consultation – Standards of proficiency for biomedical scientists and clinical scientists – closed 20th June 2014

12.2 New SCoR documents relating to ultrasound (since last meeting)

13. **ANY OTHER BUSINESS**

13.1 CB asked the group to start thinking about the workforce census for next year, which will go out to all ultrasound leaders and managers. It is important that we get responses from every region and that the survey is robust. BMUS may be able to help.

*ACTION: GROUP & NT*

13.2 SP asked if there was any update on the RCOG on-line learning tool for those involved with the scheme. NT explained that the RCOG would contact in due course for comment. JT had participated in a video to present the role of the sonographer which was missing in the pilot and was raised with them. The RCOG scheme continues to be a challenge for many departments. If local problems please discuss with the Deanery Ultrasound Co-ordinator (DUC) and let NT know.

14. **DATE OF 2015-2016 MEETINGS**

14. Dates of future meetings were agreed as:

- Thursday 4th June 2015
- Thursday 3rd December 2015
- Thursday 16th June 2016
- Tuesday 15th November 2016

All being held at SCoR HQ and starting at the usual time of 1.00pm (with refreshments available from 12.30pm). Dates have been set well in advance to allow for internal planning and manageable workload for the various advisory groups and their administrative teams.