

Chief Executive Officer
Richard Evans OBE



CoR
THE COLLEGE OF
RADIOGRAPHERS

**MINUTES OF THE ULTRASOUND ADVISORY GROUP (UAG) HELD ON THURSDAY 2ND
NOVEMBER 2017, AT THE OFFICES OF THE SOCIETY OF RADIOGRAPHERS, 207
PROVIDENCE SQUARE, LONDON SE1 2EW**

PRESENT:

Alexandra Drought {AD}
Richard Evans {RE} {Guest}
Karen Hammett {KH}
Gill Harrison {GH} {Chair}
Sally Hill {SH}
Catriona Hynes {CH}
Sandra Morrissey {SM}
Crispian Oates {CO}
Helen Ong {HO}
Michael Purdon {MP}
Morag Stout {MS}
Jacquie Torrington {JT}
Lorraine Walsh {LW}

IN ATTENDANCE:

Valerie Asemah {VA} {Minutes}
Clare Leeson {CL} {P&E Admin}
Nigel Thomson {NT}

1. WELCOME AND INTRODUCTION

1.1 The Chair welcomed everyone to the meeting and round table introductions were made, especially for the benefit of guest Richard Evans and new members, Karen Hammett, Catriona Hynes, Morag Stout and Lorraine Walsh.

1.2 PII Questions with Richard Evans, with discussion:

At the last meeting in June 2017 NT updated the group informing them that changes to the SCoR professional indemnity insurance (PII) were happening later this year. RE was invited to the meeting today to give an update on those changes. RE gave background information to the changes in indemnity insurance and confirmed that SCoR can now only provide cover for those members who have employer's insurance (vicarious liability) in place. The details of the PII scheme applicable since October 1st 2017 are available at <https://www.sor.org/being-member/professional-indemnity-insurance>

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RE answered questions from the group. Many of these questions related to the position of independent sonographers and the difficulties many of them have faced due to the changes. The SCoR has set up a link with InSync/Corvelia who can provide individual quotations for independent members when they are not covered by an employer's vicarious liability. Members could also seek quotations elsewhere, they did not have to go through InSync/Corvelia.

- 1.2.1 There was a question raised as to whether Expert Witnesses who took on such work prior to 1st October are covered for those legal cases. RE assured them that yes, they were. The new wording requiring an 'expert witness' to be on the SCoR list and to be referred to a solicitor by the SCoR was also discussed. The group thanked RE for his time and explanation.

2. APOLOGIES FOR ABSENCE

- 2.1 Apologies for absence were received from Steve Savage and Sue Webb.

3. MINUTES OF MEETING HELD ON 8th JUNE 2017

- 3.1 The minutes of the meeting held on 8th June 2017, were approved as a true and accurate record.

4. MATTERS ARISING NOT OTHERWISE ON THE AGENDA

- 4.1 Congenital diaphragmatic hernia pathway (CDH) (minute 7.1)

It was noted that this is still ongoing and the pathway is being finalised, due to be published next year. JT and NT have contributed. Being drafted by the British Association of Perinatal Medicine.

- 4.2 TAMBA initiative (minute 8.1)

Both NT and AD attend TAMBA meetings. These are linked to the Quality Standards associated with the NICE multiple pregnancy guidelines. There is concern that these guidelines are not being followed due to the sonographer shortage. As yet no further meeting date has been set.

Post meeting note: the next TAMBA meeting will be on 11th January 2018.

- 4.3 Diagnostic Imaging Advisory Group (DIAG)

It was noted that Sue Webb currently sits on DIAG and reports back to this group. A member from the UAG has also been requested but no volunteers as yet. Please contact NT if you would like to attend meetings of this important all modality advisory group.

ACTION: ALL

- 4.4 Virtual Conference pilot on November 29th

See agenda item 10.1.

4.5 Expert Witnesses

At the last meeting NT gave an update to the group on expert witnesses informing them that as the profession moves further into advanced and specialist areas the number of expert witness requests increase.

ACTION: ALL

5. CAREER STRUCTURE AND ULTRASOUND UPDATE

5.1 NT updated the group on the various ultrasound education developments.

5.1.1 Health Education England. There was a full meeting of the HEE Integrated Imaging Workforce Development Group that the SCoR attends at the end of July. This considers both radiography and sonography education. The SCoR has provided full feedback on the proposed Skills for Health career framework which has not yet been published pending the outcomes of a HEE led 'task and finish' sub-group to make final proposals by the end of the year. There are three workstreams this sub-group are following. These are career framework proposals, registration and clinical placements. Stakeholders were invited to work with each workstream. All will then be presented at a large stakeholder/interested parties meeting on November 28th at the Kia Oval. The SCoR is attending as are many members in their own right. Any final decision to proceed with the HEE recommendations will be a Council decision. See also agenda item 6.

5.1.2 Commissioned report. HEE commissioned a report by an educational consultant to report on whether sonography could be embedded in existing radiography programmes. The report has not yet been published.

5.1.3 HEE Maternity group - '200' initiative. HEE have been tasked by the Secretary of State for Health to train 200 sonographers to undertake third trimester growth scans. It was originally the intention that the trainees would be sourced from groups other than midwives, radiographers or sonographers. So far 36 have been recruited but largely from the three groups just described. There will be two further rounds of recruitment. The SCoR has concerns about the '200' initiative which have been raised with HEE. All trainees should complete a CASE accredited focused course.

5.1.4 Apprenticeships. These are completely separate to the above although they are linked. They come under Department of Education rules. Apprenticeships are employer led and follow standard and detailed apprenticeship procedures. <https://www.gov.uk/topic/further-education-skills/apprenticeships>

There must be a published 'Standard'. This is being developed by a group of South Yorks employers linked to Sheffield Hallam. This group are known as the 'Trailblazer' group. It is a very different pathway and apprentices are employees. The 'Standard' has had a first consultation but will require a full public consultation in due course. An 'End Point Assessment' also needs to be designed, the rules for these are complex. There are regular meetings in Sheffield which NT attends. The educational level is level 6 (undergraduate). All developments will be subject to Council approval as far as the SCoR as a stakeholder is concerned.

6. HEE MEETING ON 28th NOVEMBER 2017

- 6.1 NT updated the group on this important meeting that will be held in London on November 28th. This meeting is a culmination of over four years work on the part of HEE and a wide range of stakeholder organisations and individual sonographers. A proposed career structure for sonographers based on work undertaken by Skills for Health earlier this year will be presented. Invitation is from HEE, if you would like to go please contact NT and he will see if he can so arrange. (See also 5.1.1).

7. SCoR/BMUS GUIDELINES

- 7.1 NT informed the group that in 2015, SCoR and BMUS produced a new set of guidelines to replace the former UKAS Guidelines which is updated every year, the current (2017) draft is out for comment. It is hoped these will be published at the start of the BMUS conference in December. Apart from an enhanced and updated section on transducer disinfection there are no major changes this year. There are links included to transducer disinfection guidelines for Scotland, Ireland and Australia. English guidelines are expected towards the end of the year or in early 2018. It is understood these are being prepared by the Healthcare Infection Society.

8. FASP THREE VESSEL AND TRACHEA VIEW

- 8.1 HO updated the group on practice in Northern Ireland and informed them that since the beginning of the year there was a major drive in Northern Ireland to increase the detection of heart abnormalities during fetal anomaly scans. The three vessel and trachea view has recently been implemented to increase detection rate. There was a discussion around the experience of other units in the UK in introducing the three vessel and trachea view which is now part of the FASP anomaly scan protocol. FASP itself is England only.

9. FASP RED FLAGS

- 9.1 NT gave an update and informed the group that JT and NT attended meetings of the FASP ultrasound and lab group which are held every six months. FASP will be changing the red flag threshold from 0.4 mm deviation from the FMF reference curve to 0.3mm. This is effective from October 2017 and follows wide consultation. An article by Nadia Permilloo, Head of Quality Assurance Development (Clinical) at Public Health England Screening, which explains the aims of DQASS and how the FASP red flags work was published in November's Synergy News. The DQASS flag system is designed to help the Screening Support Sonographer to identify where to focus training efforts and is audit. NT and JT had raised concerns with FASP over inappropriate use with respect to disciplinary action and plots that are 'too good'. FASP have assured that the impact of the changes will be closely monitored.

10. FUTURE STUDY DAYS

- 10.1 NT informed the group that the 'Recent Advances in Obstetric Ultrasound' study day held in March with a programme arranged by AD was very successful and it has been agreed to hold a repeat on November 29th 2017. This is also to be an important pilot for remote internet access to the study day. A specialist firm has been engaged and plans are now well advanced. It will be held at the Royal Society of Medicine in London.

There are no ultrasound related study days planned for 2018 and the conferences programme for the SCoR is already very full. Any suggestions for a study day (and to help plan the programme) are welcome. One proposal offered at the meeting suggested a study day for independent sonographers, including indemnity insurance advice.

ACTION: ALL

11. RECENT CONSULTATIONS

11.1 Recent consultations (since last meeting) and circulated to the group:

National Bereavement Care Pathway. Latest blog at <https://www.sands.org.uk/about-sands/media-centre/blog/2017/10/national-bereavement-care-pathway-nbcp-now-live>
Congenital Diaphragmatic Hernia pathway. Closed for comment. Publication awaited
NICE multiple pregnancy scope - Closed
HEE consultations on career framework. Meeting on 28th November
Apprenticeship consultation - Closed. Further full public consultation to come
NHS Improvement - Maternity Services Staffing. About to publish. Has been on-going since April 2016
Sonography Space Requirements (HSE) - Closed
SCoR/BMUS Guidelines - Still open for comment

12. ANY OTHER BUSINESS

- 12.1 NT informed the group of the North West London Ultrasound Training Centre which has been set up as a training initiative by the Central Middlesex Hospital in conjunction with HEE NW London. NT attended the opening ceremony on 1st November 2017.
- 12.2 GH informed the group that the Consortium for Accreditation of Sonographic Education (CASE) are seeking more accreditors and if anyone is interested they should please let her know.

ACTION: ALL

13. DATES OF FUTURE MEETINGS

13.1 Dates of future meeting have been agreed as:

- Wednesday 6th June 2018
- Thursday 1st November 2018

All being held at SCoR HQ and starting at the usual time of 1.00pm (with lunch available from 12.30pm).