## Society of Radiographers Annual Report 2015



Leading change

## 02 The Objectives

## The objects for which The Society is established are:

- To promote and develop for the public benefit the science and practice of radiography and radiotherapeutic technology and allied subjects;
- To promote study and research work in radiography and radiotherapeutic technology and allied subjects and to publish the results of all such study and research;
- To further public education therein;
- To protect the honour and interests of persons engaged in the practice of radiography and radiotherapeutic technology and allied subjects including the regulation of relations between such persons and employers and employers' associations;
- To further all such objects which a trade union may lawfully pursue in accordance with statute.





## Annual Report 2014/15 for the year ending September 2014

The Society is the professional body and trades union for those practising in medical imaging and radiation therapy.

#### **Registered office**

207 Providence Square Mill Street London SET 2EW

#### Company secretary

Richard Evans 207 Providence Square Mill Street London SE1 2EW

#### Auditors

Crowe Clark Whitehill LLP Chartered Accountants St Bride's House 10 Salisbury Square London EC4Y 8EH

#### Bankers

Unity Trust Bank plc Nine Brindleyplace Birmingham B1 2HB

#### Solicitors

Veale Wasbrough Vizards Orchard Court Orchard Lane Bristol BST 5WS

#### Investment manager

Rathbone Investment Management Limited Port of Liverpool Building Pier Head Liverpool L3 INW

The Society of Radiographers is a company limited by guarantee. Registered Number 169483.

The College of Radiographers is a limited company and a registered charity. Registered Number 1287383 Charity Number 272505

This document may be downloaded from www.sor.org

## Contents

The Council of the Society of Radiographers	5
The Society UK Council	6
Feeling proud and privileged Karen Smith, President 2014/15	7
<b>Difficult decisions</b> Pam Black, Chair of Council and Immediate Past President	8
The College of Radiographers Board of Trustees	9
The importance of active members Richard Evans, Chief Executive Officer	10
CoRIPS - A successful year of industry funded research	13
<b>Trade union and industrial relations review</b> Warren Town, Director of Industrial Strategy	14
<b>Professional, educational and research review</b> Charlotte Beardmore, Director of Professional Policy	20
Society of Radiographers' Benevolent Fund	26
Society and College of Radiographers Financial Report for the year to September 2014	29



## The Council of the Society of Radiographers



LEFT TO RIGHT: Lynne Omar, Annual Delegates Conference Observer; Sheila Hassan, London Region and President-elect; Tara Flight, Midlands; Gill Hodges, Northern Ireland; Mark Schofield, Student Observer; Jenny Jones, South West; John Burton, Scotland; Pam Black, Chair of Council and North West; Karen Smith, President; Norma Wilson, Scotland; Steve Herring, South East and Vice-President; Sue Webb, Eastern; Gareth Thomas, Wales; and Helen Adamson, Yorkshire & North Trent.



Amanda Evans Wales



Ben Stenberg Northern



Chris Kalns Student Observer

06The Society UK Council

The UK Council of the Society of Radiographers is made-up of member representatives from the English regions and the UK countries. Council determines the Society's policy and strategic direction.

The Society is a company limited by guarantee and, as such, the members of Council are company directors registered at Companies House. They have responsibilities as representatives of the membership and also as directors of the company. Council members are not paid for their duties but they can claim travelling and other expenses.

### THE MEMBERS OF COUNCIL (DIRECTORS OF THE SOCIETY) For the period of this Annual Report and until 31 December 2014

Elected Officers		
President	To 02.07.14	Mrs P Black DCR(R) NVQ PgDip
	From 02.07.14	Mrs K Smith MSc DCR(T)
President Elect	To 02.07.14	Mrs K Smith MSc DCR(T)
	From 02.07.14	Mrs S Hassan DCR(T)
Vice President	To 02.07.14	Mrs S Hassan DCR(T)
	From 02.07.14	Mr S Herring BSc (Hons) PgD
Immediate Past President	To 02.07.14	Mrs J Hughes DCR(R)
	From 02.07.14	Mrs P Black DCR(R) NVQ PgDip
Regional Representatives		
Scotland	To 02.07.14	Mrs A Milne DCR(R) BSc(R)
		Mrs N Wilson MSc BSc TDCR(R) HDCR(R)
		DCR(R) Cert Ed
		Mr   Burton DCR(T)
	From 12.11.14	Miss C Donaldson BSc (Hons)
Yorkshire & North Trent	To 02.07.14	Mrs K Smith MSc DCR(T)
	From 16.09.14	Mrs H Adamson BSc (Hons) (R)
Northern		Mr B Stenberg MSc PgD BSc (Hons) (R)
North West	To 02.07.14	Mr Neil Howard DCR(R) BSc (Hons) MA PgC
	From 02.07.14	Mrs P Black DCR(R) NVQ PgDip
Northern Ireland	To 07.11.13	Mrs T Gilleece MSc DCR(T) PgD(RNI) PgCHEP
	From 02.07.14	Mrs G Hodges DCR (T)
Wales	To 02.07.14	Mrs   Hughes DCR(R)
		Mr G Thomas BSc (Hons) PgDip FHEA
	From 16.09.14	Mrs A Evans DCR(R)
Midlands	To 30.12.13	Mrs S Johnson FCR MA BSc (Hons) DCR(R) PgC
	From 02.07.14	Mrs T Flight DCR(R)
Eastern		Mrs S Webb BSc (Hons)
London		Mrs S Hassan DCR(T)
South East		Mr S Herring BSc (Hons) PgD
South West	To 12.01.14	Mrs D Riches DCR(R) BSc (Hons)
	From 02.07.14	Mrs J Jones DCR(R)
SENIOR OFFICERS OF THE SOCIETY (	OF RADIOGRAPHERS	
Chief Executive Officer		Mr R Evans HDCR
Head of Professional Policy	To 30.04.14	Professor A Paterson OBE FCR MSc TDCR DMU
Acting Head of Professional Policy	From 01.05.14 To 30.09.14	Mrs C Beardmore FCR MBA (Open) DMS BSc (Hons) DCR(R) & (T)
Head of Professional Policy	From 01.10.14	Mrs C Beardmore FCR MBA (Open) DMS BSc (Hons) DCR(R) & (T)
Head of Industrial Strategy		Mr W Town MA DCR(T) DLS
Head of Finance and Operations		Mr D Goulds MBA FCMA FCIS
Editor 'Synergy News'		Mrs E Abbot
Editor 'Imaging and Therapy Practice'		Ms M Armstrong
Editor 'Radiography'	To 30.03.14	Professor R C Price PhD MSc FCR
	From 01.14.14	Dr Julie Nightingale PhD MSc DCR(R)
The Council members are indemnified by a dir	rectors and officers insurance.	
ELECTION OF PRESIDENTIAL OFFICE	RS	

ELECTION OF PRESIDENTIAL OFFICERS In July 2014 Karen Smith was duly elected President; Sheila Hassan President-Elect and Steve Herring Vice-President for the coming year. Pamela Black took on the role of Chair of Council and Immediate Past President.

2013

BALLOTS FOR COUNCIL OFF	ICERS
Two Council members reached the e	end of their term of office on 2 July 2014:
Alison Milne	Scotland
Karen Smith	Yorkshire & North Trent
Four Council members resigned the	ir positions, as follows:
Terri Gilleece	Northern Ireland, resigned 7 November
Sue Johnson	Midlands, resigned 30 December 2013
Debbie Riches	South West, resigned 12 January 2014
Jackie Hughes	Wales, resigned 2 July 2014
An election was held for the Council	seat in Scotland and Claire Donaldson was duly elect

ted. Karen Smith, Gill Hodges, Tara Flight, Jenny Jones and Amanda Evans were elected unopposed in Yorkshire & North Trent, Northern Ireland, the Midlands, the South West and Wales, respectively. Helen Adamson was elected to represent Yorkshire & North Trent during Karen Smith's Presidential year.

#### **COUNCIL MEETINGS**

Council met eight times during the period of this Annual Report. Society Council was led by the Immediate Past President, Pamela Black until 2 July 2014 when the current President, Karen Smith was inaugurated.



## Feeling proud and privileged

#### Karen Smith, President 2015/16

s I look back over the past year and all that has been achieved by UK Council and SCoR staff on behalf of the membership, I've concluded that this has been an exceptional year across the country for both our organisation and our profession.

It is such a privilege to be able to acknowledge the hard work of everyone concerned during the challenging dispute on NHS pay...

Our reps and members, on picket lines and in departments...

Our TUIR team, in their negotiations with ministers and their fabulous support and guidance to the membership...

Our members, of whom I felt very proud, not least because of the way our profile went stratospheric on social media as we took the decision to strike alone back in October. It was truly awesome.

Looking at what has been achieved, our members are to be commended for taking a stand in such a courageous way and achieving a successful outcome, not only for themselves but for their patients and services across the NHS.

Over the past year, the SCoR has contributed to various workstreams, including through the continuing and valuable work of the Radiotherapy Board and the new Clinical Imaging Board. We have worked to set standards and made recommendations on the way in which practice and regulation can be strengthened. We have also engaged with national agendas and debates on topics such as the Pelvic Cancers Project.

The announcement from NHS England in January of a new cancer task force that will

develop a five year action plan for cancer services is very exciting for our profession and we have assured ministers that we want to be involved with this work as we build a better service for patients of the future.

In this General Election year, the NHS – and in particular cancer treatment and ill-health prevention – is high on the political agenda and it was fabulous at the end of January to present the SCoR's Manifesto for Tomorrow's NHS to distinguished guests at the House of Commons.

I am delighted that this excellent piece of work was produced in consultation with patient groups because, of course, our organisation values the huge and powerful contribution of the patient voice in everything we do. For me, one of the Manifesto's main strengths is the list of the SCoR's 'six principles' which give great insight into what drives us and our members in delivering excellent services for patients. We are a trade union and a professional body and we have worked collaboratively this year to interact with policy groups to influence health policy in a positive way to improve outcomes for patients.

I have been incredibly fortunate to attend eight annual Radiographer, Team and Student of the Year celebrations during my time on UK Council and I am delighted to see that the high standards of clinical practice rises year on year. This is good news for raising our profile not only amongst the professions but also with the public.

During the course of this year, the SCoR's Council and College Board of Trustees have conducted a review of our strategic plans, objectives and priorities and have presented a new strategic framework to the membership. A few emerging themes are: influencing the design of future service delivery; ensuring that the patient voice is embedded into practice routinely; reinforcing our credibility through promoting evidence-based research; and encouraging the development of radiographic practice worldwide.

As our profession rises to the many challenges that rapidly-changing service delivery brings, the SCoR has continued throughout the year to refine and strengthen the processes underpinning the effective operation of our organisation. In doing so, we can better support members as they look towards delivering the care demanded of them by services and patients of the future.

Also during this last year I have met with international colleagues at conferences and events and have been pleased to note the respect and warmth expressed towards our organisation. It is gratifying that we are recognised as experts in our field. However, it is important that we keep abreast of changing global trends and recognise that we must continue to work ever harder to ensure that we maintain a strong voice for the UK.

Finally, our ultimate success depends very much on the hard work, time and expertise that are given freely by our huge network of volunteers who act as IR reps, Health and safety reps, Learning reps, UK Council members, College Board trustees, and on patient groups and many special interest groups. Our membership also owes a great deal to the SCoR's dedicated staff who work so hard towards helping this organisation achieve its aims. On their behalf, I thank each and every one.



## Difficult decisions

#### Pam Black, Chair of UK Council and Immediate Past President

nother year over and I find myself in the privileged position of Chair of UK Council. I am delighted to be able to report on our activities over the past year.

The issues covered by UK Council are varied and too numerous to mention in detail and I therefore intend to focus on two key matters that are important to us all: our decision to undertake and carry out industrial action and the development of the strategy for the SCoR for 2014-17.

However, first I will say...

#### Goodbye and thank you to ...

Two past presidents who we 'lost' this year. Sue Johnson left council only to reappear as a professional officer here at the SoR. Whilst we were sad to see her go, the benefit of her experience as President and as a council member can only be positive for the SCoR.

Jackie Hughes, outgoing Chair of UK Council, had the temerity to stand down, leaving me as the longest serving council member! Jackie continues to be involved with the organisation and we are delighted she is able to do so. On a personal note, I miss them and thank them both for all their support.

We also said goodbye to Terri Gilleece (Northern Ireland), Alison Milne (Scotland), and Neil Howard (my alternate for the North West). On behalf of UK Council I would like to thank them for their time and contributions.

#### Hello and welcome to ...

Tara Flight (Midlands), Jenny Jones (South

West), Gill Hodges (Northern Ireland), Amanda Evans (Wales) and Clare Donaldson (Scotland), who are eager to carry on where their predecessors left off and continue with the good work. They will join the other council members who are your representatives, your voice and who can enable you to influence our organisation.

And let's not forget Helen Adamson, who is Karen Smith's alternate during her presidential year, and Lynne Omar, who will be Sheila Hassan's alternate during her time in office. The other more established members of Council continue to dedicate themselves, represent you and make decisions on your behalf for the benefit of members and our profession as a whole.

#### Making decisions

Perhaps a rather too obvious introduction to my next subject, the decision to take industrial action. UK Council had already made the difficult choice to ballot our members on industrial action because the government ignored the Pay Review Body recommendations.

In October of 2014, following the result of the ballot of you, the members, which asked if you were prepared to take strike action and action short of a strike, UK Council met to discuss the results of the ballot and to take advice from the Director of Industrial Relations and the Industrial Relations Manager.

On the face of it, it seems quite an easy decision to make. But remember, UK Council represents the four countries and different things were happening in each of the nations. But the result of the ballot was unequivocal and UK Council unanimously voted to take industrial action.

And so, for the first time in more than 30 years, radiographers went on strike for better pay...and won! There are some members who are dissatisfied with the final offer because we weren't quite able to squeeze the incremental pay progression for all (for now), but unfortunately, like in all aspects of our lives, compromises have to be made and the fight goes on!

#### Strategic planning

Dealing with issues like pay and pensions is just one aspect for UK Council. Looking ahead and planning for the future is another and to enable the organisation to do this, every three years council, the directors and the College Board of Trustees get together to plan the strategy for the following three years.

I have been fortunate enough to have been involved with previous incarnations of strategy and have to say that this year clearly shows how we have matured as an organisation. Together we have taken into account the changing needs of you, the members, our patients and the ever changing face of our healthcare services.

Work on our strategy is progressing well, focussing on our vision, values and our mission. It will take the profession forward to meet the known challenges and to be prepared for the unknown, essential as we face the forthcoming general election.

I expect you will wait for publication with bated breath!

## The College of Radiographers Board of Trustees

The College of Radiographers, a registered charity, is a wholly owned subsidiary of the Society of Radiographers. It carries out activities for the Society by agreement. The business of the College is overseen by a Board of Trustees, the governing body of the College. The Trustees comprise an equal number of members drawn from Council and external trustees representing fields including legal, financial and medical.

The Board meets four times a year: March, May, September and December.

#### THE COLLEGE BOARD OF TRUSTEES

Mrs P Williams MSc BSc (Hons) TDCR Mrs P Black DCR(R) NVQ PgDip (from 02.07.14) Dr Rosemary Toye MA(Oxon) AKC FRCR Mr I Henderson MSc DCR(R) PgCHE FCR Mrs K Smith MSc DCR(T) (President from 02.07.14) Mrs S Mathers FCR MSc DCR(R) Mr S Herring BSc (Hons) PgD (from 02.07.14) Mrs J Loose HDSR FCCA Mrs J Hughes DCR(R) (to 02.07.14) Ms P Chapman (to 11.12.14) Mr D Adrian-Harris TD JP MPhil BA (psych) TDCR HDCR Mrs S Hassan DCR(T) (from 02.07.14) Mrs E Chapman MSc DCR(R) DMU DipMgr Mrs S Johnson FCR MA BSc (Hons) DCR(R) PgC (to 30.12.13) Mr C McCaffrey Ms A Vinall MSc BSc (Hons)

The College Trustees are indemnified by a directors' and officers' insurance.

The responsibility for the overall management and organisation of the charity rests with the Board of Trustees who met four times during the financial year: 12 December 2013, 20 March, 24 June and 26 September 2014.

The Board, who are also the directors of the company, comprise six external trustees (selected by interview following advertisement for their experience in various fields and disciplines) and six trustees drawn from or appointed by Society Council. (Note: Numbers exclude The Society President and the Chair of the College Board.) Policies and procedures for the induction and training of trustees have been prepared and currently this is conducted according to need. None of the Trustees are remunerated.



#### Society of Radiographers Annual Report 2015

## The importance of active members

#### Richard Evans, Chief Executive Officer

hank you for your interest in the Society of Radiographers. I hope that you will take a few minutes to read about the work of the organisation and its progress over the past year.

The accounts for the 12 months up to 30 September 2014 show another year of successful management of the business. This financial security is due in no small part to growth in the membership of the Society, which in turn reflects commitment and hard work by members and, in particular, our accredited representatives throughout the UK.

All unions know the importance of active members that ensure that the value of the organisation is felt at the front line. The SoR knows that we couldn't have the impact and influence that we enjoy as a professional body without those members that volunteer in departments and on regional committees, national councils, advisory groups and on our boards.

That cohesion and sense of united purpose has been particularly in evidence recently as members have been driven to take industrial action against the UK government's unfair treatment of NHS staff over pay. It was also very much in evidence as members committed to the organisational response to the Robert Francis report, to the campaign to stamp out bullying from imaging and radiotherapy services and in the social media response to #hellomynameis.

### Healthcare under extreme pressure

The context for these examples of commitment and professionalism amongst SoR members has once again been one of extreme pressure on health care provision in all four countries of the UK.

Demand for imaging and for radiotherapy services increases ahead of the general growth in demand for health provision and yet managers everywhere are expected continually to make savings. It is a depressing, demoralising and ultimately unsustainable situation and yet Society of Radiographers members demonstrate time and again a passion for patient care and the value of public service that puts politicians to shame.

It is a particular privilege for me to be able to visit members in workplaces all around the UK and to see for myself the excellent innovations and extraordinary commitment that adds up to the practice of radiography here in the UK being recognised as world-leading. This is seen and experienced in clinical practice of course but also notably in radiography education, in the rapidly growing community of research active radiographers, amongst members in management positions and those that have pursued their careers as experts in industry.

Politically, the year was dominated by the Referendum on independence for Scotland. Naturally, there were SoR members with strongly-held opinions on both sides of the argument. However, it was excellent to witness the way in which the debate was conducted and the engagement with the political process that was seen. It will be important to harness a similar sense of purpose and possibility as we approach the 2015 general election.

#### Wide range of partnerships

On the international scene, the World Radiography Congress was held relatively locally in Helsinki, Finland. Organised by the Finnish equivalent of SoR on behalf of the International Society of Radiographers and Radiologic Technologists (ISRRT), the congress was a great success. A good number of presentations and other contributions by UK radiographers provided a showcase for professional developments and leading research.

Generous contributions from industry supporters in the College of Radiographers Industry Partnership Scheme (CoRIPS) and continued growth in numbers of partners during the year ensured that members







could develop their research interests and activities at grass roots level. Meanwhile, outstanding collaboration with Prostate Cancer UK saw support for doctoral level projects continue.

Other partnerships continue to flourish. With the Royal College of Radiologists and the Institute of Physics and Engineering in Medicine, we have established both the Radiotherapy Board and the Clinical Imaging Board. These boards provide multidisciplinary expertise and influence in steering our clinical specialities for the future.

The Imaging Services Accreditation Scheme (ISAS), another key collaboration with the RCR made slow but steady progress in the year in a context of renewed focus on quality in health care delivery. In England, clarification of the value and relevance of professionally led and patient centred accreditation came from the Care Quality Commission's head of hospital inspection. Central health administrations in Wales and Northern Ireland also made moves to promote ISAS for all imaging departments.

Work with and through the Allied Health Professions Federation continued to provide opportunities for the SoR to have greater influence, particularly in access to government ministers and the health departments in England. Society officers and the national Councils in Scotland, Wales and Northern Ireland maintain more functional communications with devolved administrations than are possible in England. Nevertheless, close working with other professionals is a powerful asset in maintaining our professional influence throughout the UK.

UK Council does a tremendous job in leading the Society as company directors and as representatives elected by all members. Professional bodies in general are taking on more work that previously would have been completed by government or statutory bodies. The value to society of the contributions of volunteers such as our own Council members goes largely un-noticed and certainly undervalued. It is important that professional leadership is recognised as a public service and that time away from work is agreed as such.

It was a year of considerable change at senior level in the staff of the Society. Anne Shaw, Elizabeth Stow and Audrey Paterson all reached retirement, taking a vast amount of experience and knowledge with them but leaving the profession stronger and the organisation fitter to face the future.

We also sadly said goodbye to Claire Dumbleton as Knowledge Manager. It was good to see Charlotte Beardmore take on the role of Director of Professional Policy and Rachel Harris step up to become Professional and Educational Manager. We welcomed Sue Johnson to the team of Professional Officers, Deborah Shepherd as National Officer for Scotland and Anne Barkworth as our new Knowledge Manager.

I am, as always, enormously grateful to all of the staff of the SoR. Their commitment to the profession and to our members is a constant inspiration and their extraordinary hard work complements the collective strength of the membership to ensure we continue to punch well above our weight. THE COLLEGE OF RADIOGRAPHERS INDUSTRY PARTNERSHIP SCHEME SUPPORTING RADIOGRAPHY RESEARCH

# 13

# A successful year of industry funded research

ne of the objects for which the Society and College of Radiographers is established is "To promote study and research work in radiography and radiotherapeutic technology and allied subjects and to publish the results of all such study and research."

The College of Radiographers Industry Partnership Scheme (CoRIPS) provides industry with the opportunity to provide financial support for radiography research and educational projects.

It also provides companies with access to the knowledge, experience and expertise within the SCoR and throughout the membership of 26,000 radiographers and students, as well as collaborations with UK governments, regulatory bodies, health care employers, managers and educators, other professional groups, and international partners.

In addition, business has the opportunity to improve user involvement in product development and testing and companies can work collaboratively with the professional body to rapidly introduce new technology.

The following companies are currently actively involved with CoRIPS:

Diamond partners InHealth Elekta

Premier partners Guerbet

Varian Medical Systems Vertual

Partners Agfa Healthcare Alliance Medical Bayer HealthCare Carestream

#### Cobalt

**Duncan Hynd Associates** Fuiifilm **GE Healthcare** Healthcare Software Systems Integrated Radiological Services Ltd Jennie Reeves Radiographers Agency **Mallinckrodt Pharmaceuticals** Matchtech Medica Group Med Imaging **Mirion Technologies OSL/TomoTherapy Philips Healthcare Rig Healthcare Recruit** Siemens Medical **Toshiba Medical Systems** Vital Images

To date, CoRIPS has made almost £200,000 of grants for research projects related to the science and practice of radiography. The aim is to support at least one grant for someone who has little or no previous experience of undertaking research and development projects.

Julia Kennedy, a lecturer in diagnostic radiography at Cardiff University, received a CoRIPS grant 'to formulate and implement

#### Hafsa Momoniat



a reporting system for identification of the percentage and types of congenital heart defects undiagnosed by current antenatal ultrasound screening'.

"We are looking to implement a reporting system in order to reduce the risk and save babies, so that they do not have problems through their lives, or even die," she said. "I also believe there is a real need to develop the sonographer role in fetal cardiac imaging."

Undergraduate projects are also funded. Hafsa Momoniat's study - An investigation into the accuracy of conventional orbital x-ray images in detecting intra-occular ferromagnetic foreign bodies prior to MRI scanning - produced interesting results and has exposed the need for more research in this area.

Andrew England, Hafsa's supervisor at Salford University said, "Funding from industry partners is so important to increase our body of evidence and raise the standards in the profession. There is so much change in terms of service delivery and equipment that research is crucial.

"We must encourage our undergraduates to undertake research and the CoRIPS awards are essential."

Julia Kennedy





## Trade union and industrial relations review

#### Warren Town, Director of Industrial Strategy

## No raise! No rays!

was sadly correct when I predicted a year ago that 2014 would be dominated by a campaign for radiographers to convince the UK government that it was unacceptable to dismiss the independent pay review body's recommendation that staff should receive a I per cent pay increase.

For the first time in more than 30 years, the Society and 14 other unions sent a strong united message that our members deserve better than to see their pay continue to lose its purchasing power compared to prices. A 15% decline over five years is simply unfair.

The message was clear that politicians must start treating our members with more respect and stop exploiting radiographers' commitment to patients and the community as a whole.

The key date for radiographers was 20 October when, at long last, the media realised the NHS is made up of more than just doctors and nurses. Thousands and thousands of our members stood up not just for a fair pay increase but also for radiography and the profession in general.

Members united from all parts of our membership under the 'No Raise No Rays' banner and even encouraged non-members to join – we increased membership by more than 400 in the weeks afterwards.

It was this determination and, above all, the professionalism of members who managed to combine to make a strong stand whilst still putting patients first, that finally concentrated the minds of politicians and, particularly, that of the Secretary of State for Health, Jeremy Hunt.

It was this pressure - and a general election on the horizon - which made Mr Hunt stop counting financial figures and start thinking about counting votes.

And it was this same determination that ensured that the Society was at the centre of the discussions that took place with the Secretary of State. This ensured we were instrumental in ensuring that the concerns of our members were ultimately listened to at the highest level in government.

Members in England, Scotland and Wales all received pay offers that the majority of members agreed we should accept. At the time of writing, the Stormont government in Northern Ireland has failed to respond and industrial action to persuade them to the negotiating table continues.

We will finally claim success when members in Northern Ireland are also given a fair offer, but members should take pride in winning what was the one of the most important disputes in our history and winning, not just for themselves, but for their patients and for the NHS.

#### The beginning of the end?

Is the recent announcement that there will be a merged £6bn spending budget in the

Manchester area for health and social care to be seen as groundbreaking, or the steady decline of the NHS as we know it today?

For many years it has been the aspiration of all parties to streamline health and social care under the banner headlines that it makes sense and is more cost effective. After all, if there is that integration of services, which currently operate independently, why not simply combine the budgets and "hey presto!" we have the solution.

So now we have a future where health and social care will be one for all and all for one. It will not be yet another reorganisation of health or social care, we are told. Well that will be a neat trick and one wonders how you make change without doing anything!

The potential for this to become another failed opportunity cannot be understated. If the budgets do not keep up with demand and the cost of integration spirals, who will pick up the slack? Do we rob the NHS in England of more money, or do we take this out of homeowner's pockets? Who decides the priorities and who decides the levels of expenditure?

This policy, no matter how worthy, is the beginning of fragmentation of the NHS. It sets the ground work for Regional Pay, for Regional Employment and Regional health.

In that sense it is the end of a national NHS.



## We sent our message loud and clear



THOUSANDS of radiographers manned picket lines across the UK in October taking strike action over pay.

General support for the industrial action was enormous, with other healthcare professionals and unions sharing words of solidarity. In some areas, other NHS workers joined radiographers to strengthen the message. Patients and the general public also showed they understood, honking horns and speaking out in sympathy.

Radiographers on the picket line spoke to those passing by, and back at SCoR HQ, the industrial relations team was kept busy responding to media enquiries. Local and national newspapers and broadcasters published more than 200 articles about



the action. Social media feeds were kept buzzing, with hundreds of pics and words of support being shared.

The twitter hashtag #NoRaiseNoRays – coined by members Jay Elliott and Martin Brewer – was quickly adopted and turned into powerful banners, placards and, in some cases, works of art. Several photographs taken by radiographers made their way on to the BBC's website.

Industrial Relations Manager Paul Moloney commented: "The four-hour strike proved to be an incredible success. We definitely made our point. Members of the public and patients I spoke to were all very supportive and clearly understood our reasons for taking strike action. It was a great day on every level, but we always knew it was unlikely that Jeremy Hunt or those in the devolved administrations would be convinced of our case overnight." Further days of action involving all health unions took place in England and Northern Ireland.

The governments in Scotland and Wales struck an agreement with public sector staff but it took further industrial action in November (and a pending general election) in England before the Secretary of State for Health, Jeremy Hunt, could be persuaded to talk with the unions.

At the time of writing, despite one of the biggest strikes in Northern Ireland's history, the government in Stormont has sadly failed to negotiate.



## TUC supports Society's call for resources review



In the front line: Left to right Vice-President Steve Herring, Immediate Past President Pam Black, and Chief Executive Officer Richard Evans represent the Society at TUC.

**THE** SoR's call for more investment in imaging and oncology services was backed unanimously by trades unions at TUC Congress 2014.

Proposing the motion, Vice President Steve Herring explained: "There is concern that in imaging and oncology commissioning there are insufficient resources, both in terms of equipment and radiographers, given the evidenced increase in activity across all imaging modalities and cancer treatments."

The motion called for a review of funding, equipment and manpower campaigning across the whole of imaging and radiotherapy, and used proton beam therapy as an example of how the UK lags behind other countries.

"It is disappointing that it seems to have taken so long for this government to invest and deliver high energy proton services for patients where there is already proven benefit for specific groups of patients, including children." Steve

#### told delegates.

Steve's presentation coincided with proton therapy hitting the headlines over the case of five-year-old medulloblastoma patient Aysha King. On the same day, Aysha was flown to the Motol Hospital in Prague for assessment. Inundated with press requests, Paul Moloney, the SoR's Industrial Relations Manager, took part in 11 interviews with local radio stations and appeared on BBC News at One and other national news programmes. Steve Herring appeared on the Richard Bacon show on BBC Five Live.

Commenting on his first time at TUC, Steve said: "We went to represent the SCoR at a time when the NHS is under huge pressure to deliver and the government needs to be reminded that it is accountable to the people it represents. We were also there to stand up for the NHS itself and its employees and the people using its services."



### SCoR calls on politicians to "wake up" to radiography workforce

WE launched a new campaign to raise the profile of health professionals and increase awareness of the important role they play in delivering health services. The #healthcarepro campaign aims to make politicians, the media and the public aware that the healthcare workforce is more than doctors and nurses.

The campaign was launched with an article and advert in the September issue of Politics First, a bi-monthly magazine for MPs and civil servants which provides coverage and analysis of political issues.

In the article, SCoR CEO Richard Evans explained why it is so important to recognise health professionals and their contribution to healthcare. He wrote: "It is not just the feelings of radiographers and other professions that are hurt by lazy terminology. Not acknowledging the contribution that health professionals and others make affects patient services too."

Richard concluded by calling on policy makers, commissioners and NHS trust boards to "wake up to the potential that is being under-utilised in the non-medical and nursing portions of the workforce."



## Society unveils new national banner



From left: Elizabeth Smith of Howard Kennedy Fsi; winner Rick Caughey; SoR President Pam Black; SoR Regional Officer Paul Bromley.

THE winner of the competition to design a new trade union banner for the Society was Rick Caughey, a third year student at Salford University.

His design was chosen for its high visibility, strong identity with the SoR and its clear message that is both short and simple. And it has certainly been put to good use ever since, being carried on marches and demonstrations throughout the year.

## Six principles to support whistleblowers

FOLLOWING the Speaking Out Summit in May, the SoR launched six principles that the NHS and other healthcare providers should adopt to support those who need to speak out.

We were represented at the summit by Sarah Woolley, IR Rep at Mid Staffs, and TUIR Manager Paul Moloney, who said: "It is essential in the post-Francis environment that those who need to raise concerns are treated as an asset by their employer, not a liability and valued as such, rather than dismissed and removed. "We believe our six principles, if adopted, will not only support professionals who need to raise concerns, but also create an environment where those concerns are acted on professionally to improve patient care."

The principles that NHS and other healthcare providers need to adopt are

- Commit to always improve patient care.
- Employ leaders who trust the clinical judgment of staff allowing them space to exercise their judgment.
- Employ healthcare professionals

committed to the continuing development of patient care based on rigorous analysis of techniques and procedures.

- Regard speaking out on clinical and professional matters as a key mechanism facilitating this development.
- Investigate errors of judgment as part of the continuing development process and not solely and immediately to apportion blame.
- Show clear commitment to the continuing professional development of all healthcare professionals.



## Learning rep scoops top SoR award

Robert Skears receiving Rep of the Year Award from the Society's President, Pam Black.



ROBERT SKEARS, a learning representative from the radiology department at Northampton General Hospital, is the Society's 2014 UK Representative of the Year.

He was praised by colleagues for his commitment to providing continuing professional development opportunities for radiographers – he organises study sessions in the department, persuading other healthcare professionals to give lunchtime CPD lectures, and also provides members with practical help and support in evidencing their CPD.

Recovering from the surprise, Robert said: "It still hasn't sunk in. Usually industrial relations reps receive the award. It's strange to get it as a learning rep, as you don't feel you are doing the same groundbreaking work. However, learning reps do a lot of work in the background to keep everyone educated, and patient care is very much at the forefront of that, so it is good that this work is recognised."

## Britain Needs A Pay Rise march: SoR members march in the capital

**DOZENS** of SoR members gathered in London on 18 October to support the TUC's 'Britain Needs A Pay Rise' march and rally.

Members joined tens of thousands of other trade unionists and workers to demand better pay for the people of Britain.

SoR's President Karen Smith explained: "We're here to show that we are not happy to accept the disgraceful way that this government is treating radiographers and health workers over pay."







## Working together to tackle bullying

WHEN a survey showed that 43.5% of SoR members had experienced bullying or harassment in their workplace over the past two years, we held a one-day event in April to explore and address the issue.

The emphasis for the day was on 'partnership working' and, as such, reps were asked to invite their managers to enable them to take the information back to their departments and implement it together.

Delegates were full of praise at the end of the day. Lorraine Marsh, an SoR rep at the Queen Mary Hospital in Margate, said: "It has been really useful and has raised issues I hadn't thought about in my own workplace. Hopefully, we will now be able to deal with them effectively should they ever arise."

Her manager, Lee Gavin added: "Today has opened my eyes to issues I was not aware of. I think it was a really good idea to invite the managers, as I have heard about problems which are very relevant to all work places and I am hoping we can both go back and apply what we have learnt."

As a follow-up, the SoR emailed radiography managers and the heads of educational institutions across the UK to ask them to pledge action against workplace bullying. We asked service managers to work with reps to raise awareness of bullying and eradicate it from all imaging and radiotherapy departments, and called on educational institutions to sign up to provide support to students in clinical placements.

## Members lead the way at ADC



From left Society President Pam Black, Ricky Tomlinson, campaign researcher Eileen Turnbull, President-elect Karen Smith and Richard Evans.

PAY was the order of the day at the Annual Delegates Conference as two emergency motions were proposed and passed.

The first called for the Pay Review Body (PRB) recommendation for 1% uplift for all staff to be implemented in full and to oppose the multi-year deal that the government wants to impose. Condemning the government's rejection of the PRB's recommendation, president-elect Karen Smith reminded delegates that the government had stated that 'we are all in this together'.

"The presidential team and the UK Council are appalled at the disrespectful and unfair way that the coalition government is treating NHS staff in England," she said. "We are incandescent with rage that they boast about the economic recovery and that we are all feeling the benefits and then treat health workers so shoddily."

Speaking to the second, Gary Watts of London Region, said: "Jeremy Hunt (the Health Secretary) states that a 1% increase for all staff would have been 'unaffordable' and if it had been enacted it would have meant that 6000 nurses' jobs would have had to go. To threaten this after the Mid Staffs report really demonstrates just how out of touch with reality he really is."

As ever, it was a stimulating and thought-provoking couple of days, with some colourful and controversial debates, including whether personal appearance affects professionalism and whether parentsto-be should expect to know the gender of the foetus. This was a hot topic of the year – in January, the SoR responded to a report by The Independent that ultrasound is being misused in the gender selection of foetuses, and CEO Richard Evans has also participated in radio programmes which have discussed the issue.

This year's guest speaker was actor Ricky Tomlinson who made an impassioned speech about his part in the Shrewsbury 24 Campaign and his continuing fight for justice following the conviction 41 years ago of 24 trades unionists who took part in Britain's only national building strike.



## Professional, educational and research review Working in partnership

### Charlotte Beardmore, Director of Professional Policy

#### Services to education

The College, through the Approval and Accreditation Board (AAB), published a comprehensive report on **UK radiography** education. This addressed the full range of learning with a focus on pre-registration student education, key personnel for the future medical imaging and radiotherapy and oncology workforces.

The number of AAB assessors has increased to meet growing demand. Professional Officer Louise Coleman delivered an **assessors' training day** in February, which was attended by some 60 College of Radiographers' assessors from across the UK. Topics included the approval process, enhancing communication and Assistant Practitioner/ Advanced Practitioner/Consultant Practitioner accreditation schemes.

Planned (Learning) Pathways went live in **CPD Now,** the SCoR's continuing professional development tool. These are template plans which can be associated with articles, study days or topics relevant to radiography and the professional development of the radiographic workforce.

The first **Assistant Practitioners** applied for and were accredited through CPD Now and work continued to update and improve the tool's overall performance.

New **e-Learning for Health** modules were developed and launched at UKRC 2014. There are now well in excess of 280 units in the eLfH Image Interpretation Programme. 'Radiotherap-e', the advanced radiotherapy project, continues to develop and free access to both programmes is available for everyone in the NHS as well as students and tutors.

Review of the Colleges **e-learning resources** on the College website continues to ensure that relevant e-learning materials are available across the breadth of the profession.

#### Services to the profession

A broad range of documents setting standards

and providing guidance for radiography professionals were published during the year and are available through the website (www.sor. org) in the online library. Titles published include:

- Diagnostic Radiography UK Workforce Report 2014
- Work Related Musculo-Skeletal Disorders (Sonographers)
- Analysis of Student and Recently Qualified Radiographers Survey 2014
- Guidance on Long Term Consequences of Treatment for Gynaecological Cancer. Part I: Pelvic Radiotherapy
- Ultrasound Training, Employment and Registration
- Sonographer Workforce Survey Analysis
- Guidance for Radiographers Providing Forensic Radiography Services
- Senior Service Manager Survey Analysis
- Use of Anatomical Side Markers
- Resuscitation Training for the Radiography Workforce
- Census of the Radiotherapy Radiographic Workforce in the UK 2013
- The Supply and Administration of Medicines and Contrast Agents: Results of Survey into Current Practice in Imaging and Radiotherapy Departments
- Independent Practitioners: Standards and Guidance
- The joint response of the Society of Radiographers and the College of Radiographers to the Final Report of the Independent Inquiry into Care Provided by Mid Staffordshire NHS Foundation Trust
- Proton Beam Therapy Interim Guidance
- Independent Practitioners: Standards and Guidance
- The Recording of Images by Patients During Diagnostic Imaging (Including Screening) and Radiotherapy
- Direct Entry Undergraduate Ultrasound Programmes (with Competency to Practise): a Briefing from the Society and College of Radiographers

#### Conferences and events

On the following pages are reports from the the annual **Radiotherapy Conference**, **Imaging Services Manager** event, and the **Student Conference**, all of which were highly successful and built on previous years.

Another key event was the first Radiotherapy Board conference with sponsorship from NHS Supply Chain. All UK radiotherapy services, from each of the three professional groups, were involved. The day profiled the work of the Board and focused on the changing landscape of service delivery

#### **Developing profile**

The College continued to build on its established representation at, and participation in, the full calendar of domestic and international events, including the United Kingdom Radiological Congress (UKRC), the Radiological Society of North America (RSNA) Annual Meeting, the European Congress of Radiology (ECR), the European Society for Therapeutic Radiology and Oncology (ESTRO), the American Society for Radiation Oncology (ASTRO), the British Medical Ultrasound Society's (BMUS) Annual Scientific Meeting, the British Nuclear Medicine Society's (BNMS) Annual Scientific Meeting, and the British Association of Magnetic Resonance Radiographers (BAMMR) Annual Meeting.

A first Radiotherapy Think Tank, with support from the NCRI (National Cancer Research Institute) and jointly led with the College of Radiographers with the goal of increasing radiographer led research within radiotherapy centres was successfully supported with more than 20 radiotherapy centres being represented.

#### Research

The first Prostate Cancer UK/College of Radiographers **Clinical Research Fellowships** were awarded and the opportunity will be





#### repeated in 2015.

A popular **Research Google Group** and research network was set-up for participants to post questions and to encourage collaborative research ventures. It was launched to bring together radiographers from both diagnostic imaging and radiotherapy to provide the opportunity to share activities and practices that have enabled research to happen, to facilitate the opportunity for individuals to make connections and collaborate on new projects, as well as to enabling the development of new research ideas and to grow a community of practice in research.

A very successful **College of Radiographers Industry Partnership (CoRIPS)** annual seminar showcased three pieces of research work funded by the scheme. The CoRIPS research grants are a key way in which the organisation meets its remit 'To promote study and research work in radiography and radiotherapeutic technology and allied subjects and to publish the results of all such study and research.'

The College's **Research Group** has been busy working on the 2015-2020 Research Strategy and a new set of research priorities.

### Services to Government and governing bodies

A meeting with the Chief Coroner for England took place in January 2014 to promote the value of radiographers in **minimally invasive imaging for autopsy**. Further work on this and the wider field of forensic imaging is underway with the International Association of Forensic Radiographers.

I was invited to be part of the NHS England project team responsible for producing an **Ambitions for Radiotherapy in England** document. A comprehensive SCoR response was made to the call for evidence from NHS England, with input from members and key stakeholders.

Professional Officer Alex Lipton worked with the Health and Safety Executive (HSE) and the wider **magnetic resonance** community to provide practical guidance for employers as the transposition into UK law of the EU Physical Agents Directive takes place.

The organisation is a member of a national task group established by the National Clinical Lead for Diagnostics preparing a report on Developing Sustainable Supplies of **Medical** 

#### Radioisotopes for the UK.

The newly established Clinical Imaging Board is beginning to bed down, with two pieces of work underway: exploring the CT equipment base across the UK, and developing a joint vision for clinical imaging services of the future.

Health Education England has now established and held the first meeting of its AHP Advisory Group. The SCoR has a seat on the group.

I contributed to a capacity and demand review as part of the NHS England Radiotherapy Clinical Reference Group.

The SCoR's Presidet-elect Sheila Hassan took the chair as the secretariat of the Radiotherapy Board transferred to the SCoR. The work of the Board continues to grow, with the establishment of a number of multiprofessional working parties developing guidance for services including increasing access for patients through guidance to support 7/7 working.

Professional Officer Sarah James is representing the SCoR in the Public Health England project, **Making Every Contact Count**, as part of promoting AHPs roles in supporting national public health initiatives.

Alex Lipton attended the Diagnostic Radiography Workforce and Education Planning Workshop run by Health Education North Central and East London. This LETB is responsible for the provision of and education of the **diagnostic radiography workforce** across Greater London.

We continued to provide expert advice into both the DH National Proton Beam Therapy Service Development Programme Special Interest Group and the DH National Proton Service: Workforce Strategy & Development Group.

#### Services to the public

The College maintains two **public voluntary registers** with access via www.sor.org sonographers and Accredited Assistant Practitioners. Both continued to provide patients and carers with information regarding the levels of practice attained by these registrants.

The majority of policy documents published by the SCoR are held in the public domain, and are available at www.sor.org. This site also provides the means for enquiries from the public to be handled by appropriate SCoR officers. The principal categories of enquiry continue to be **careers advice** and what can patients expect when attending imaging or radiotherapy departments.

The College has a public and patient liaison group and during the year its members contributed to a wide range of work, including among others, a number of cancer related work streams, to work related to children's imaging and treatment, on **ISAS** (**Imaging Services Accreditation Scheme**), and to the College's education approval and accreditation remit.

#### Radiography in Scotland

The work of the SCoR in Scotland included:

- Maria Murray, the Professional Officer for Scotland supported NHS Education for Scotland (NES) in their Radiography Workforce report.
- Maria is also an active member of both the NES Radiography and AHP Advisory Boards, as well as having a seat on the AHP Federation Scotland giving direct access to the Department of Health at the Scottish Government including the Cabinet Secretary for Health.
- Contact has been made with Scotland's Patient Association to support them in their patient advocacy work.
- Work is continuing with Radiographer **Musculoskeletal** Plain Image Reporting in Scotland. The project came about from the AHP National Delivery Plan 2012-2015, with significant input from SCoR. The project is seeking to implement effective use of reporting radiographers in NHS Scotland Health Boards by 2015.
- The SCoR is part of the project oversight for the West of Scotland Radiotherapy Satellite Project, a new centre to open in central Scotland at Monklands Hospital, to be known as The Lanarkshire Beatson.
- The organisation has been contributing to the Digital Mammography Implementation Programme within the Scottish breast screening service. Six health boards are involved in changing from an analogue system to a digital system.

Information about other professional, research and education initiatives are on the following pages.





## Celebrating the Radiographer of the Year

"THERE'S never a day when I don't want to get out of bed and go to work," said Melanie Mazzei, Clinical Specialist Sonographer at New Cross Hospital, Wolverhampton, who scooped the title of UK Radiographer of Year for 2014.

"I love being a sonographer," she said. "To be rewarded for this means so much to me."

Joining Melanie at the awards ceremony at the House of Commons were the cardiac CT team from Norfolk and Norwich University Hospital who won the Team of the Year accolade.

Team member Karen Reid said: "This award recognises our commitment to raising

the profile of advanced practice and diagnostic radiography as a profession."

The two student awards went to Steven Lugsden from City University London (therapy) and Joaquim Graca from University Campus Suffolk (diagnostic).

During an inspirational speech to the 150 guests and awardees, the CEO of Cancer Research UK, Harpal Kumar, praised both therapeutic and diagnostic radiographers for their vital contribution to cancer care and radiology services. "We don't often have



L-R: Charlie McCaffrey, Managing Director of award sponsors Carestream, and Harpal Kumar, CEO, Cancer Research UK, present Melanie Mazzei with her awards – 2014 Midlands Radiographer of the Year and 2014 UK Radiographer of the Year.

the opportunity to celebrate the work that you do and the huge benefits you bring to patients," he said.

## Hellos and goodbyes

WE said a fond and emotional farewell to Audrey Paterson, who retired in April as Director of Professional Policy.

Friends, family and colleagues met on HMS Belfast on the Thames to pay tribute to Audrey's contributions to the profession, following a 40-year career which included being SCoR President in 1993, receiving the Gold Medal in 1995, writing more than 100 papers and presentations, and being awarded an OBE in 2011.

Audrey's successor is Charlotte Beardmore, previously the Professional and Educational Manager, and a Past President, who said: "I am really honoured to be offered this leading role. There are exciting opportunities ahead for the profession but we shouldn't underestimate the challenges faced by everyone working within healthcare."

Also retiring this year was Anne Shaw, who worked for us for 14 years. "She will be missed by all staff for her lively attitude to her work and her passion for the profession," said SoR professional



Anne Shaw

Audrey Paterson

officer Christina Freeman. "Her breadth and depth of knowledge about radiography was extraordinary."

Two new members of staff joining Charlotte on the team are: Sue Johnson, who has been appointed SoR Professional Officer for clinical imaging; and Anne Barkworth, who is the new Knowledge Manager following the departure of Claire Dumbleton.

Sue, a former President, describes herself as a "radiographer's radiographer – someone with rounded knowledge and a broad approach".

Anne, a Canadian who has lived in Europe for more than 20 years, has a wealth of experience in knowledge management: "I firmly believe in the expression 'a place for everything and everything in its place'. I've always known this applied to information and knowledge – what good is it if you can't find something?"

## I&TP Student Competition prizewinners

THE winners of the Imaging & Therapy Practice student competition were Joaquim Graça, Michaela Cooper-Woodhouse, Julia Repas, Tara Mellett and Sarah Mould. The first competition in 2013 was so successful that the journal's editorial board decided to hold it annually. SoR Professional Officer Christina Freeman said: "The students are to be commended for both innovation and relevance to practice."

Joaquin Graça









Julie Nightingale, Editor-In-Chief of Radiography.

## Publication celebrations

**CONGRATULATIONS** to *Radiography*, which in January entered its 20th year of publication in its present format. It was launched as an international peer reviewed journal under the editorship of H Brian Bentley (who sadly died in February).

There have been many changes and innovations since the first edition, most significantly the journal's expansion to a worldwide audience thanks to electronic publishing. In a period of just over five years, the number of articles downloaded increased from 97,000 to 140,000; evidence that the journal is a key route for dissemination of research outcomes.

Julie Nightingale, the Director of Radiography and Occupational Therapy at the School of Health Sciences, University of Salford became editor in March. She replaces Professor Richard Price of the University of Hertfordshire, who had edited the publication since 2008.



Student radiographers at London City university join in the fun.

## World Radiography Day has special theme

THIS year's World Radiography Day saw the largest ever response from radiographers in the UK and beyond, celebrating the day with a multitude of events, whilst commemorating the centenary of World War One by paying tribute to radiography's early pioneers – the people who cared for and treated servicemen by pushing social and scientific boundaries.

Thousands of members shared their passion, enthusiasm and knowledge with members of the public and other healthcare professionals.

"Many interesting conversations were had with both patients and staff members who wanted to know about what we did," commented Beverley Brigden from the Royal Marsden NHS Foundation Trust, Sutton.

## £180k Clinical Training Fellowship is awarded to...

ASHLEY d'Aquino, a Lecturer Practitioner in Radiotherapy at The Royal Marsden NHS Foundation Trust. The doctoral fellowship is funded jointly by the CoR and Prostate Cancer UK (PCUK) and will enable Ashley to develop a method to more accurately determine the amount of radiation received by the tissues surrounding the prostate during the course of radiotherapy.

"I am thrilled to have been awarded the fellowship," she said. "This is a unique opportunity for me to develop the skills required for quality research and will benefit men receiving radiotherapy for prostate cancer. The collaboration between PCUK and the College has resulted in investment in healthcare professionals, such as therapeutic radiographers, who are able to undertake patient-centred research and contribute to the quality of radiothorapy

radiotherapy treatment."

Ashley d'Aquino



### Progressing the prescribing agenda

THE Society embarked on a major project to gain independent prescribing rights for radiographers as part of the Allied Health Professions (AHP) Medicines project.

This is an initiative to extend prescribing, supply and administration of medicines with the aim of facilitating service redesign; increasing patient choice; improving access to medicines; and making the best use of allied health professionals' skills, whilst maintaining patient safety.

SCoR Professional Officer Christina Freeman said: "If this goes ahead it will make a significant difference to how radiographers work and the service they can give their patients."









### #hellomynameis sparks debate

THIS campaign has certainly attracted attention over the year! Started by Dr Kate Granger, debate and discussion began amongst radiographers following a tweet by member Andrea Reaching. This set in motion the SoR's selfie campaign, which aims to raise awareness about excellent patient communication, and has so far prompted around 200 selfies to be taken and published across our social media sites. As a result of all the activity, the SoR ran a patient communication survey about how members should be interacting with their patients. Almost 1000 members took part and the results showed that 53% 'always make a point of' introducing themselves and telling patients their name. However, 7% admitted to 'never' introducing themselves and 15% gave the answer 'not very often'.

## HCPC Chair praises members for professionalism and patient care

"OTHER professions have much to learn from radiography," said Anna van der Gaag, Chair of the Health and Care Professions Council, as she presented the CoR Welbeck Memorial Lecture at the United Kingdom Radiology Congress.

Anna particularly praised the SoR's use of the #hellomynameis campaign (see above): "Social media is going to change healthcare because quality of care and professionalism are part of the public narrative. The world is evolving and patients are increasingly sharing their stories and opinions online." Once again, UKRC was an outstanding success, with Professor Erika Denton, National Clinical Director for Diagnostics, NHS England, proclaiming it a "cause for great celebration".

Fiona Mellor, a clinical research doctoral fellow at Bournemouth University, presented the William Stripp Memorial Lecture. Under the heading *Back to the future: Quantative Fluoroscopy vs Functional Radiography*, she compared two techniques to measure intervertebral motion.



Anna van der Gaag speaking at the United Kingdom Radiology Congress.



### Focussing on managers

'THROUGH the looking glass: developing and realising your vision for radiology' was the central theme at the National Conference for Radiology Managers in June.

SoR President Pam Black opened by urging delegates to change their approach to service delivery. "Radiology is a specialty not a commodity,' she said, "And managers, along with their clinical directors, need to take a much more strategic approach to their thinking. We must leave behind some of the more operational issues to make sure we've got the right radiology services for the future, for our patients."

Delegates heard from a range of speakers, including:

Sam Jones, CEO of West Hertfordshire Hospital, who described her radical approach to leadership – 'operation onion'  which involves daily meetings to "peel back the layers" and bring about changes with impact for patients. "

- Dr Patricia Woodhead, associate medical director for patient safety, NHS South of England, Western Area Health Trust, who spoke on balancing quality and other demands."
- Alice Turner, principal radiographer at the University Hospital of North Staffordshire NHS Trust, who described how the Imaging Services Accreditation Scheme helped her department deliver a better service to patients.

Feedback from delegates was excellent: "An interesting, relevant programme," said one. "It's great to get together and talk, and listen to others' experiences," said another.



### www.radiographycareers.co.uk

WE launched our new radiography careers website in May. With fresh and distinctive branding and design, the site is an engaging and informative resource for those considering a career in the profession. The content raises awareness of both diagnostic and therapeutic radiography and includes videos of hospital and university settings, as well as an interactive 'fix me quick' quiz at three different levels.





Winners of the 2014 Work the World Award and the 2013 Imaging & Therapy Practice student competition, receive their certificates from President Pam Black. From left: David Roberts, Ashleigh Bishop, Pam Black, Paul Calder, Laura Whitaker and Holly Pickford.

## New format led to more students at conference

RADIOGRAPHY students from across the UK gathered in Leeds in April for the SoR's Annual Student Conference. It was the first year of a new format which meant that students from all years were able to attend and more than 70 students heard presentations on a wide range of topics, including radiography research, working abroad, patient care and career progression.

This last session was extremely

popular. Led by SoR professional officer Louise Coleman, it offered students the opportunity to hear more about where their radiography career could go. Students considered questions such as 'what can I do now to work towards my career goal?' and there was much discussion about where they saw themselves after graduation and the routes to their chosen specialisms and careers.

## SoR launches digital discussion community

WE are in the process of developing a series of digital communities for members, the first of which was launched in June – FirstTalk, a discussion community to promote knowledge and discussion among radiography leaders. It provides a

unique online space where managers can connect with peers, share information, discuss professional issues, ask and answer questions, set-up discussion groups for specific topics, and join a secure forum to share opinions and views.

### Positive messages from Radiotherapy Conference

THE UK has an international reputation for its safety initiatives in radiotherapy... Just one of the messages from our Annual Radiotherapy Conference held in Bristol in February, when

Helen Best from Public Health England gave an overview of the national radiotherapy incident reporting database, the biggest of its kind in the world.

Also under discussion at the well-attended event were: Intensity Modulated Radiation Therapy, as three times as many patients receive the treatment than 18 months ago; the impact of tattoos and piercings on the perception of professionalism; and a project to help healthcare professionals in developing countries.

Delivering the Martine Jackson Memorial Lecture, Jane Head gave a fascinating account of her 40 years in the NHS, ending with: "Live for what you love and never give in to indifference." Guest speaker Margaret Murphy received a standing ovation for her lecture on her son's death, a result of a medical error.



From left: Lauren Haghir, Rebekah Pearce, Melissa Hudson and Nicola Wilkinson, radiographers at the Christie NHS Foundation Trust at the Radiotherapy Conference.



## Society of Radiographers' Benevolent Fund

## The Trustees present their report and the independently examined accounts for the year ended 30 September 2014.

#### Aims and objectives

The Benevolent Fund was established in 1983 as a registered charity and is governed by a Trust. Deed dated 16 June 1983 and a Supplemental Deed of Trust dated 23 November 2006. The objects of the charity are 'the assistance and relief of persons in the United Kingdom being members (including student members) and former members of the Society and their dependants who are in necessitous financial circumstances and in particular such of them as are old, sick or incapacitated'.

#### **Public benefit**

The Trustees have paid due regard to the guidance on public benefit published by the Commission in exercising their powers and planning the activities of the charity.

The Trustees are satisfied that the Trust has charitable purposes as set out in the Charities Act 2011 covering the prevention and relief of poverty for the public benefit.

#### Trustees at 30 September 2014

Janis Loose (Chair) Ann Pollard Nannette Spain Rosemary Tubman

Phillip Edwards (Chair), Zena Mossman (both 27/5/14) and Indira Bhansali (21/7/14), stepped down from their Trustee positions on the Board during the year. The responsibility for the overall management and organisation of the charity rests with the Board of Trustees. The Board, comprising of Trustees that are drawn from or are appointed by Society Council (note: numbers exclude the Chair of the Board). Policies and procedures, together with a handbook for the induction and training and guidance of Trustees, have been prepared and currently this is conducted according to need.

#### Activity in the year

The Trustees met twice during the year to discuss the management of the Fund and strategy. Requests for assistance and the awarding of grants are regularly discussed via an online facility. Other activity between formal meetings of the Board also included the commencement of the recruitment and selection process for replacement Trustees for subsequent appointment by the UK Council of the Society.

Income for the year to September 2014 was £9,244, £2,087 less than 2013, mainly due to a fall in bank interest and donations. Income from donations decreased by £558. A £5,000 donation was made from the Society which is consistent with the previous year and income from the collections at Society meetings around the UK has shown a decrease.

Expenditure in the year amounted to a total of £3,072 compared to £2,300 in 2013. The increase was due to an increased value of grants awarded and higher Trustees' travel costs in relation to the recruitment of new Trustees.

One application proved eligible in the year under review, with two awards made to the applicant concerned for a combined total of  $\pounds 1,659$ . This represented an urgent response by the Trustees to the serious consequences of a sudden medical emergency. The support received was deeply appreciated by the applicant, their family and friends (see case study on p27).

The short term deposit balance at 30 September 2014 was £85,629 and the Fund's bank balance was £36,922. The aggregate of £122,551 represented an increase of £5,907 over the total of the balance of the year before. The Trustees would like to thank all those who have made donations in the year or otherwise supported the Fund and also UK Council for their continued support of the Fund.

#### INVESTMENT, RESERVES AND RISK POLICIES

#### Investment

The charity's reserves amounted to  $\pounds$ 122,347 at 30 September 2014. The Trustees regularly review reserves and investment policy. They have concluded that the current level of reserves held would not support investment in equities or investment funds without impacting on its ability to meet its charitable objectives. As a result the Trustees will continue to use interest bearing cash deposits.

This approach will be kept under regular review. The Trustees have formally adopted an investment and reserves policy. The Trustees wish to hold sufficient reserves to be able to ensure continuity in the operation of the charity in the event of a large variation of income and/or increase in applications for financial assistance. To address this inherent uncertainty the Trustees deem it prudent to aim to hold the equivalent of two years' income in a readily accessible deposit account and a minimum of three years' income equivalent on deposit on appropriate notice.

#### Reserves

The Trustees' current reserves policy is to seek to maintain, on balance, the opening level of reserves while making grants of assistance to the level of the income received in the preceding financial year.



## **Benevolent Fund** provides vital support

ver the years, the Society's Benevolent Fund has helped many members and retired members through a range of difficult situations, offering that bit of extra help when it is most needed.

To give an insight into just how vital the Fund is to the profession, the Fund has been given permission to tell one member's story that perfectly illustrates how it can help when problems become overwhelming.

John (not his real name) was a student member who had completed his studies and, just before he received his results, had accepted a job offer.

However, before he took up the post, John unfortunately had an accident that led to a serious injury necessitating critical care in hospital.

"I wasn't

sure

where

else to

turn."

Not only was he unable to start the job at the planned time, he was also not well enough to work for many months afterwards, nor was he entitled to any sick pay.

Inevitably, this led to severe financial difficulties, a situation exacerbated by the fact that John's wife was expecting a baby. The resulting pressures were immense and he couldn't see a way out. With nowhere else to turn, John applied to the Benevolent Fund for assistance.

Responding quickly, the Trustees stepped in and immediately settled a pressing utility bill. They then provided further assistance that enabled close family members to travel from overseas to help John and his young family for a while, giving them much-needed time to get back on their feet.



Awards granted in response to applications for assistance decreased from four in the previous year to two in the current year. The total value of the two awards at £1,659 was below the level of income received in the previous year by £9.672

The Trustees have reviewed applications and awards and recognised a change in the nature of applications reflecting the current economic and social position. Work has been undertaken on the application process and ways of assisting and supporting applicants. This will be monitored.

#### Risk

The Trustees have reviewed the major risks facing the Fund at each meeting.

#### **Going concern**

We have set out above a review of financial performance and the charity's reserves position. We have adequate financial resources and are well placed to manage the business risks. Our planning process, including financial projections, has taken into consideration the current economic climate and its potential impact on the various sources of income and planned expenditure. We have a reasonable expectation that we have adequate resources to continue in operational existence for the foreseeable future. We believe that there are no material uncertainties that call into doubt the charity's ability to continue. The accounts have therefore been prepared on the basis that the charity is a going concern.

lanis Loose Chair of the Trustees





### Society of Radiographer's Benevolent Fund Statement of Financial Activities

For the year ended 30 September 2014

	2014 £	£	2013 £	£
INCOMING RESOURCES	~	~	2	2
Donations	6,915		7,473	
Gift Aid reclaimed	244		239	
Income from credit cards	1,123		1,178	
Bank interest	962		2,441	
Dank interest		9,244	2,111	,33
RESOURCES EXPENDED		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11,551
Grants and donations	1,659		1,080	
Bank charges	29		1,000	
Sundry expenses			1,220	
Sundry expenses	<u>1,384</u>	(2.072)	1,220	(2, 200)
		<u>(3,072)</u>		<u>(2,300)</u>
Net movement in funds		6,172		9,031
Net movement in lunds		0,172		9,031
RETAINED SURPLUS AT BEGINNING OF YEAR		114 175		
RETAINED SURFLUS AT DEGININING OF TEAR		116,175		107,144
RETAINED SURPLUS AT END OF YEAR		122 247		116 175
RETAINED SURFLUS AT EIND OF TEAR		122,347		116,175

There are no other unrealised gains or losses which do not appear on the SOFA. All the above results are derived from continuing activities.

## **Balance Sheet**

As at 30 September 2014

As at 30 September 2014		
	2014	2013
	£	£
CASH AND DEPOSITS		
Short term deposit	85,629	-
Cash at bank	36,922	116,644
	122,551	116,644
DEBTORS		
Gift Aid accrued	184	239
Deposit interest accrued	332	-
CREDITORS		
Amounts due within one year	<u>(720)</u>	<u>(708)</u>
TOTAL ASSETS	122,347	<u>116,175</u>
UNRESTRICTED FUNDS	122,347	<u>116,175</u>

The above figures have been extracted from the full Benevolent Fund Trustees' report and financial statements, which have been independently examined by Crowe Clark Whitehill LLP. The Trustees' report and financial statements were approved by the Trustees and signed on their behalf by Mrs Janis Loose on 18 February 2015 and will be submitted to the Charity Commission in July. These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the above entity. The full Trustees' report, independent examiner's report and financial statements may be obtained from The Secretary, Society of Radiographers, 207 Providence Square, London SE1 2EW.



## Society and College of Radiographers Financial report for the year to September 2014

**TOTAL INCOME** Income for the year to September 2014 was £6,254,036, £154,654 (2.5%) higher than last year. Membership subscription income increased by £330,620 (6.5%) through increased member numbers combined with a below-inflation subscription fee uplift. Other income decreased by £175,966 (-17.7%) to £817,300, mainly due to a reduction in grant income following completion of the major part of the E-Learning For Healthcare project.

**TOTAL OPERATING EXPENDITURE** Expenditure increased by £161,278 (2.9%) to £5,652,070 for the year to September 2014. Within this overall rise, staff costs increased by £254,259 compared to the previous year but were offset by reductions in operational and overhead expenditure of £92,981 to £2,797,396. This reflected decreases in the costs of Approval, Accreditation and Standards work following the completion of key projects plus reductions in travel and subsistence costs.

**SURPLUS FOR THE YEAR** The Society and College showed a stable operating surplus in 2014 of  $\pounds$ 601,966 (2013  $\pounds$ 608,590) before investment gains of  $\pounds$ 186,010 and pension scheme actuarial losses under FRS17 of  $\pounds$ 258,000. As a result of these investment gains offset by pension scheme actuarial losses, the bottom line surplus in 2014 for the Society and College was  $\pounds$ 529,976 ( $\pounds$ 211,620 down on 2013).

	Year to 30 September 2014				2013
£	Society	College	Contra	Combined	Combined
INCOME	obciety	0011050	Contra	Combined	Combined
Membership Subscriptions	5,436,736	-	-	5,436,736	5,106,116
Course Accreditation and Approval	-	105,429	-	105,429	96,789
Grant Income	-	-	-	-	145,611
Magazine and Journal Income	208,451	6,450	-	214,901	241,681
Conferences, Seminars and Courses	-	136,244	-	136,244	152,254
Income from Regional Committees and National Councils	45,643	-	-	45,643	38,226
Investment Income	79,643	78,514	-	158,157	130,778
Other Income	29,409	127,517	-	156,926	187,927
Contribution and Rent from Society	-	1,750,000	(1,750,000)	-	-
TOTAL OF OTHER INCOME	363,146	2,204,154	(1,750,000)	817,300	993,266
TOTAL INCOME	5,799,882	2,204,154	(1,750,000)	6,254,036	6,099,382
EXPENDITURE Staff Costs	1,653,536	1,201,138	_	2,854,674	2,600,415
Operational & Overhead Expenditure	.,,	.,,		_,	_,,
Contribution to the College of Radiographers	1,680,000		(1,680,000)	_	_
Donation to Benevolent Fund	5,000		(1,000,000)	5,000	5,000
Magazine and Journal Costs	450,402	150,934		601,336	596,397
Members' Insurance and Legal Costs	434,023	150,751		434,023	431,347
Website, CPD and Other Member Services	67,954	48,053		116,007	117,246
Accredited Representatives Network	120,264	-	_	120,264	108,448
ADC, Regional Committees and National Councils	166,087	_	_	166,087	160,750
Radiographer of the Year and President's Inauguration	37,620	-	_	37,620	34,494
TUC Affiliation and Campaigns	132,262	-	-	132,262	128,800
Approval, Accreditation and Standards	-	102,896	-	102,896	246,132
Research, Awards and Networks	9,719	62,093	-	71,812	71,388
Conferences and Seminars	-	107,457	-	107,457	107,920
Organisational Profile and Events Attendance	50,793	147,015	-	197,808	190,020
Professional Fees Including Audit	64,073	41,266	-	105,339	88,470
Travel and Subsistence Costs	195,782	11,273	-	207,055	216,066
Overheads (Office and Administrative Costs)	353,593	108,837	(70,000)	392,430	387,899
TOTAL OPERATIONAL AND OVERHEAD EXPENDITURE	3,767,572	779,824	(1,750,000)	2,797,396	2,890,377
TOTAL EXPENDITURE	5,421,108	1,980,962	(1,750,000)	5,652,070	5,490,792
SURPLUS BEFORE INVESTMENT GAINS	378,774	223,192	-	601,966	608,590
Investment Gains	93,005	93,005	-	186,010	294,006
Pension Scheme Actuarial (Losses)	(155,000)	(103,000)	-	(258,000)	(161,000)
SURPLUS AFTER INVESTMENT & ACTUARIAL GAINS / (LOSSES	<b>5)</b> 316,779	213,197	-	529,976	741,596



## **Commentary On Income And Expenditure**

#### Total income for the whole organisation in 2014 amounted to £6,254,036, £154,654 (2.5%) up on 2013.

Income from membership subscriptions amounted to  $\pounds$ 5,436,736, a rise of  $\pounds$ 330,620 (6.5%) over the previous year. The increase was the result of a net 5.7% rise in the number of members combined with a below-inflation 1.2% increase in subscription fee rates.

Other income amounted to £817,300, a decrease of £175,966 (-17.7%) from 2013 for the following main reasons:

- a) Grant income fell by £145,611 net as a result of the completion of the E-Learning for Healthcare project (£136,600 received in the previous year) and reductions in other smaller categorises of grant (£9,011 received in the previous year).
- b) Magazine advertising revenue declined by £26,780.
- c) Income from Conferences, Seminars and Courses fell by £16,010 in the year.
- d) Other Income fell by £31,001 as a result of lower levels of hiring of HQ meeting rooms by external organisations and the completion of the project investigating student attrition rates.
- e) These reductions were off-set by increases in investment income in the year of £27,379 plus an overall increase in the amount raised by Country and Regional Councils of £7,417.

#### Expenditure for 2014 across the organisation amounted to £5,652,070, an increase of £161,278 (2.9%) from 2013.

Staff costs in 2014 were £2,854,674, an increase of £254,259 over 2013 and due to an inflation-linked pay award for 2013-14, additional temporary staffing to cover long-term sickness absence and increased governance and administration costs of the pension scheme in relation to the completion of the latest triennial valuation.

Operational and overhead expenditure amounted to £2,797,396, £92,981 (-3.2%) less than 2013.

This net decrease in costs was largely attributable to the following:

a) Approval, Accreditation and Standards costs reduced by £143,236 as a result of the completion of major elements of three projects:

- i) E-Learning for Health, featuring Obstetric Ultrasound
- ii) The NCAT-funded Image Guided Radiotherapy Project
- iii) An investigation into student attrition
- b) Travel and Subsistence costs, which fell by £9,011 (4.2%) from 2013.
- c) These decreases were offset by rises in a number of expense headings including:
  - i) Audit and Professional Fees, which increased by £16,869 (19.1%) over the previous year as a result of the need for additional legal and consultancy advice in response to unforeseen developments
  - ii) Additional spending of £11,816 (10.9%) on the Society's Accredited Representatives Network
  - iii) Organisational Profile raising, which saw an increase of £7,788 (4.1%) over the previous year
  - iv) Magazine publishing costs, which increased slightly by £4,939 (0.8%) over 2013
  - v) An inflation-linked increase of £4,531 (1.2%) in Overhead costs.

#### Surplus for the year before net investment gains decreased by £6,624 from 2013 to £601,966 in 2014.



### Income by Category - 2014



- Membership Subscriptions
- Course Accreditation and Approval
- Magazine and Journal Income
- Conferences, Seminars and Courses
- Investment Income
- Other Income



### Expenditure by Category - 2014



### Expenditure by Category - 2014 vs 2013



Society of Radiographers Annual Report 2015



### **Commentary on the Balance Sheet**

Total assets at the 2014 year end amounted to  $\pounds$ 8,012,396, an increase of  $\pounds$ 529,976 from the value at September 2013 for the reasons set out in the previous section. Tangible fixed assets, which include the head office property, increased by  $\pounds$ 38,948, mainly due to additional investment in the Society and College's IT hardware and software infrastructure.

The Society and College fixed asset investments amounted to £5,490,580, an increase of £307,160 in value in the year inclusive of income reinvestment.

Current assets less liabilities at £1,437,124 were £118,868 higher than at September 2013. The pension scheme liability as calculated under FRS17 improved by £65,000 from September 2013 to a liability of (£33,000) as at the end of September 2014.

Corresponding to the growth in Total Assets described above, the Society's and College's combined reserves increased by £529,976 in the year, the amount of the Surplus after Investment and Actuarial Gains/Losses, to a total of £8,012,396 as at 30 September 2014.

#### **Balance Sheet**

Figures in £	Society	College	Contra	Combined	Combined
Tangible Fixed Assets				2014	2013
Long Leasehold Property	-	933.341	-	933,341	959,633
Fixtures	-	44.023	-	44.023	36,168
Computer Equipment	79,751	60,577	-	140,328	82,943
Total	79,751	1,037,941	-	1,117,692	I,078,744
Fixed Asset Investments	2,745,302	2,745,278	-	5,490,580	5,183,420
Investment in Subsidiary	2	_,,	(2)	-	-
Current assets less liabilities					
Debtors	430,028	118,668	(232,421)	316,275	196,840
Bank balances	976,930	899,763	-	l,876,693	1,711,829
Creditors	(444,819)	(543,446)	232,421	(755,844)	(590,413)
Total	962,139	474,985	-	1,437,124	1,318,256
Pension scheme liability	(21,000)	(12,000)	-	(33,000)	(98,000)
Total assets at 30 September	3,766,194	4,246,204	(2)	8,012,396	7,482,420
		2	(2)		
Share Capital Reserves	-	2	(2)	-	-
General Fund	2 707 104			2 707 104	
Restricted Funds	3,787,194	-	-	3,787,194	3,514,415
Unrestricted Funds	-	34,796 4,223,406	-	34,796 4,223,406	40,422 4,025,583
Pension Scheme Funding Reserve	- (21,000)	(12,000)	-	, ,	(98,000)
Total Capital and Reserves at 30 September 2014	<b>3,766,194</b>	4,246,204	(2)	(33,000) <b>8,012,396</b>	7,482,420

## **Reporting on Summarised Accounts**

The figures on pages 29 to 33 have been extracted from the full Society Council and College Board of Trustee reports and financial statements, which have both been audited by Crowe Clark Whitehill LLP, who gave unqualified audit reports in February 2015. The Council's and Trustees' reports were approved by Council and the Trustees and signed on their behalf on 18 February 2015. The College report will be submitted to the Charity Commission in July.

These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the above entities. The full reports, audit reports and financial statements may be obtained from The Secretary, Society and College of Radiographers, 207 Providence Square, London SE I 2EW.





## **Review of Membership**

The Society's	membership c	ontinues to grov	N:			
2010: 21.093	2011: 21,541	2012: 22.363	2013: 22.532	2014: 23,806		
,	,	,,		,		
Student membership:						
2010-3018	2011.2 344	2012.2652	2013-2925	2014.2.891		













The Society & College of Radiographers

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