



Scottish Clinical Imaging network

Scottish Clinical Imaging Network (SCIN)

National Framework National Framework for Advanced Practice in Breast Imaging



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1.1 Key personnel

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1. Executive Summary

The Scottish Clinical Imaging Network (SCIN) seek to promote patient focused, consistent, and sustainable Breast Imaging services across Scotland. To facilitate these services staff must be enabled to work across traditional National Health Service (NHS) Board boundaries with maximum role utilisation throughout the service. There is currently, a wide variation in the practice of Breast Imaging Advanced Practitioners across Scotland and how they work across NHS Boards. This framework aims to support future development in a consistent Scotland wide approach.

This framework provides NHS Boards, Service Managers, Clinical/Professional Leads Workforce Planning, NMAHP Academy and Advanced Practitioners in Breast Imaging a reference document to enable streamlined patient focussed pathways, reducing unwarranted practice variation, supporting service development and improvement. The aim is to define a Framework for future Breast Imaging Services, underpinned by the Quality Standards for Imaging (Royal College of Radiologists and College of Radiographers).

Advanced Practitioners may be Health Care Professionals within any of the Professions detailed in the NHS Reform and Heath Care Professions Act 2002. This Act is the primary legislation for regulating health professionals. The Act led to the Council for the Regulation of Healthcare Professionals, which underwent a name change and is now known as the Professional Standards Authority (PSA) which oversees the work of professional regulators and accredits organisations holding voluntary registers for professionals not regulated by law.

A Once for Scotland approach for Breast Care services requires Breast Imaging Advanced Practitioners to achieve this consistent national position. Prior to the Covid Pandemic, Scottish Access Collaborative (SAC) and SCIN collaborated to develop a National Framework for Advanced Practice in Breast Care. Post pandemic, SCIN led on completing the Framework, consisting of a suite of documents, seeking to guide NHS Boards in the standardisation, employment, and deployment of Breast Imaging Advanced Practitioners.

Role specific Knowledge, Skills and Behaviours (KSBs) will be used to underpin the definitions of practitioner roles and will be grouped around the four pillars of practice:



(http://www.careerframework.nes.scot.nhs.uk/).

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The NES Post Registration Framework for Career Development should be used for the generic KSBs for each level of practice (http://www.careerframework.nes.scot.nhs.uk/).

National Role Specific Expert Clinical groups will extend the generic KSB's using Transforming Roles methodology, in conjunction with the College of Radiography (CoR) Education and Career Framework (ECF 4th Ed 2022).

The ECF provides knowledge, skills, and attributes, and guidance on the expected level of academic achievement across all levels of practice embedding the four pillars into every level of practice.

This National Framework for Advanced Practitioners in Breast Imaging outlines the following:

- Standard Role Specification including;
 - Appropriate Educational Pathways, Continuing Professional Development (CPD), professional development and training programmes for advanced practice to maintain professional knowledge and skills. This must be validated within a formal appraisal and personal development plan structure:
 - Advanced Practitioners must be registered with an appropriate governing body (National Health Service Reform and Heath Care Professions Act 2002) and have gained College of Radiographers (CoR) approved post-graduate qualifications (PgCert as minimum) in specific modules of Breast Imaging relevant to practice.
- Scope of Practice including standard activity outputs, e.g. average number of reports achieved during a Breast Image reporting session.
- The minimum scope of practice for Advanced Practitioners is derived from the list below with an aspiration of working towards completion of further skill sets:
 - Breast Image Interpretation
 - Breast Ultrasound
 - Breast Intervention
 - MR Breast interpretation
 - Clinical examination
- Agreed governance and practice supervision requirements:
- It is the responsibility of the individual Health Board for ensuring individual Advanced Practitioners are sufficiently educated, trained and assessed as competent to undertake the duties required to support the Breast Imaging Service.
- Generic/Standard Job Description

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2. National Framework for Breast Imaging Advanced Practice

1.4 Introduction

There is currently a wide variation in practice, implementation, and utilisation of the Advanced Practice role across NHS Boards in Scotland. This Framework aims to reduce unwarranted variation in practice, support streamlined, patient focussed service improvements and pathways. One of the key priorities of this initiative is to standardise and maximise the use of Advanced Practitioners in Breast Imaging, linking this to the Scottish Government Transforming Roles agenda.

Knowledge, Skills, and Behaviours (KSB's) grouped around the four pillars of practice will be used to underpin the definitions of practitioner roles, e.g. an Advanced Practitioner supports a case load whilst a Consultant Practitioner leads a case load. The four pillars of practice are:

- Clinical Practice
- Facilitating Learning
- Leadership
- Evidence, Research and Development

Advanced Practitioners may be Health Care Professionals within any of the Professions detailed in the primary legislation for regulating health professionals, the <u>NHS Reform and Health Care Professions Act 2002.</u>

This Act created the Council for the Regulation of Healthcare Professionals (CHRE) (detailed in Part 2 (specifically 25(3))(h)(ii) at <u>National Health Service</u> Reform and Health Care Professions Act 2002 (legislation.gov.uk)).

The CHRE was replaced by the <u>Professional Standards Authority</u> (PSA) (CHRE name change after part 222 of <u>the Health and Social Care Act 2012</u>.)

The PSA oversees the work of professional regulators and accredits organisations holding voluntary registers for professionals not regulated by law.

Health Improvement Scotland (HIS) will enable enactment of the <u>Health and Care</u> (<u>Staffing)(Scotland) Act 2019</u> which became Law in June 2022.

By using this Framework staff will also address the following <u>RCR/CoR Quality</u> <u>Standards for Imaging:</u>

Leadership and	XR-201; XR-202; XR-203; XR-205; XR-206; XR-208;
Management	XR-301; XR-304; XR-501; XR-502; XR-504; XR-506; XR-507;
Domain	XR-508;
	XR-511; XR-512; XR-513; XR-514; XR-516; XR-601; XR-602;
	XR-701; XR-703;
	XR-704; XR-707; EX-109; US-803

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Clinical Domain	XR-101; XR-203; XR-401; XR-501; XR-505; XR-508 ; XR- 510 ; XR-511; XR-512 ; XR-514; XR-516; XR-601; XR-602; XR-603; XR-604; XR-701; XR-703; XR-705; XR-706; MR-803; US-803
Facilities, Resources and Workforce Domain	XR-203; XR-204; XR-205; XR-208; XR-209; XR-301; XR-403; XR-507; XR-513; XR-514; XR-516; XR-601; US-802
Patient Experience Domain	XR-101; XR-102; XR-103; XR-104; XR-502 ; XR-504; XR-512
Safety Domain	XR-102; XR-303; XR-504; XR-516; US-801; US-802

1.5 Terms of Reference

The purpose of the joint project is to develop a "Once for Scotland" National Framework for Advanced Practitioners in Breast Imaging. This will encompass required educational pathways, standardised job descriptions, role specification including scope of practice, standard activity outputs, governance, and CPD.

The Radiology/Professional leadership will be involved in mentorship and assessment of the trainee Advanced Practitioner in Breast Imaging as part of the Breast Care team. The scope of practice for each Advanced Practitioner must be defined within the local governance process.

1.6 Aims

The aim of the project is to develop a National Framework for all Advanced Practitioners in Breast Imaging, to standardise and maximise utilisation of Advanced Practitioners in Breast Imaging across Scotland. The key objectives capture the detail within the National Framework.

1.7 Key Objectives

The key objectives of the Project Group are to:

- Define the status quo
- Develop a national framework for Advanced Practitioners which includes:
- Standard Job Description;
- Standard Role specification;
 - Breast Image Clinical Evaluation
 - Breast Ultrasound
 - Breast interventional procedure/s
- Identify further Advanced Practice opportunities
- Agreed educational pathways and continuing CPD;
- Scope of Practice including standard activity outputs

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- Agreed governance and practice supervision requirements.
- Publish the framework for distribution to NHS Boards for a "Once for Scotland" implementation programme.

1.8 Membership of Group

Membership of the Group can be found at **Appendix 1**.

1.9 The Status Quo

There is currently a wide variation in employment, deployment, and scope of practice of Advanced Practitioners in Breast Imaging across NHS Boards in Scotland.

1.10 Educational Pathways

<u>The Multi-professional framework for advanced clinical practice</u> (Health Education England 2017) defined Advanced Clinical Practice as:

Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence.

Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes.

The minimum educational standard for Advanced Practitioners in Breast Imaging is a Masters Level (SCQF 11) award in either Breast Image Interpretation, Breast Ultrasound or Breast Interventional Procedures with an aspiration to develop the other areas. This qualification must have been obtained through a College of Radiographers (CoR) approved course.

The <u>CoR ECF (4th Ed, 2022)</u> was aligned with the above HEE definition of Advanced Practice, also adopting the underpinning of the four pillars by a master's level award or equivalent and identifies explicitly the components of practitioner, enhanced, advanced, and consultant practice across the four nations. As Postgraduate training is a requirement for the mammography role, all trained mammographers qualify for the title Enhanced Practitioner as described by the Education and Career Framework. The ECF also provides detailed descriptions of the Knowledge, Skills and Attributes for every level of radiography practice. Advanced and Consultant Practitioners, who are members of SoR should be encouraged to apply for CoR accreditation via CPD Now using the ECF as guidance. Accreditation was established to ensure national transferability for all standards of practice. The levels of practice within the CoR ECF are in no way linked to job titles or descriptions within Agenda for Change.

There are a variety of educational opportunities across the UK. Several of these are listed in **Appendix 2.**

1.11 Job Description

An exemplar job description is available for Advanced, Senior Advanced, and Consultant Practitioners which can be used by NHS Scotland organisations (Appendix 3). Where utilised, this should be assessed by appropriate job matching, consistency, workforce, and organisational change panels within individual NHS Scotland organisations.

1.12 Job Planning

As an aid to achieve consistency regarding the varied roles within Breast imaging practitioners in NHS Scotland, job planning should be utilised (NHS Improvement; 2019).

Job plans are professional agreements of an employee's duties, responsibilities and accountabilities and have mutual benefits to the department, organisation, staff, and patients. Job plans should be created for each individual pro rata, be assessed annually, and adapted based on actual activity and service needs. This dialogue between Practitioners and managers promotes effective, efficient use of an individual's time, promoting working practices at the top of their license.

There is currently no Scottish Government policy on job planning for AHP and nursing staff although there are a number of very useful resources available that will help teams and individuals introduce job planning;

- 1. <u>NHS Improvement Job planning the clinical workforce allied health</u> professionals, a best practice guide.
- 2. <u>The Society and College of Radiographers Consultant Radiographer Guidance</u> for the support of new and established roles (2nd Ed 2022)

Job plans should capture the time that individuals have allocated to particular activities which can be divided between direct clinical care (DCC) and supporting professional activities (SPA) and should include the proportion of time spent on:

- Clinical activity
- Research
- Management and leadership roles
- CPD

All NMAHP staff should include the four pillars of practice and as such, not all work undertaken will involve direct clinical care. However, various non-clinical activities add value to service deliverables and should be included in job planning. (See **Appendix 4** for an exemplar job plan). For further information regarding the levels of practice please refer to:

 <u>College of Radiographers</u>. *The Education and Career Framework for the* <u>Radiography Workforce</u>. 4th Edition. London: The College of Radiographers; 2023)

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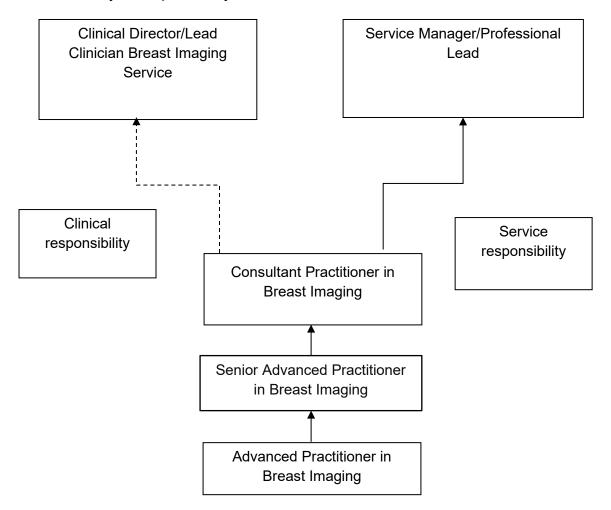
- (NHS Education for Scotland. Nursing, Midwifery and Allied Health Professions (NMAHP) Development Framework. Edinburgh: NHS Education for Scotland; 2023. [cited 2023 July 19] Available from: <u>nesd1748-nmahpdevelopment-framework_updated-12-04-23.pdf (scot.nhs.uk)</u>.
- NHS Education for Scotland. Four Pillars of Practice. [homepage on the Internet]. Glasgow: NHS Education for Scotland; 2023. [cited 2023 July 19] Available from: <u>www.nmahpdevelopmentframework.nes.scot.nhs.uk/post-regframework/four-pillars-of-practice/</u>

1.13 Role Specification

It is recommended the Consultant Practitioner for Breast Imaging will undertake One Stop Breast Clinics autonomously and will have adequate Scope of Practice to commence this role. The Advanced Breast Practitioner and Senior Advanced Breast Practitioner will undertake roles within One Stop clinics dependent on locally agreed protocols and Scope of Practice.

The scope of practice for each Breast Practitioner must be defined within the local governance process and IR(ME)R Employers Procedures including entitlement of appropriate IR(ME)R Duty Holder roles. Additional Scope will be as per local NHS Board agreement.

The hierarchy of responsibility is described below:



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3. Scope of Practice

Advanced Practitioners must be aware that in all circumstances they will be legally accountable for their professional actions and be familiar with the code of conduct defined by their Professional Regulatory body (<u>HCPC Standards of conduct</u>, <u>performance and ethics</u>; <u>Code of Conduct and Ethics SoR 2008</u>).

For all Advanced Practitioners, regardless of individuals' specialised scope of practice, the following points are policy across NHS Boards to ensure that safe practice is maintained in order to protect patients and practitioners.

3.1 Baseline Scope of Practice

- Consultant Radiographers and Radiologists will provide mentorship support and review when necessary. Depending on the clinical scenario, it may also be necessary for radiologists to make recommendations for further imaging where it is outside the scope of the Advanced Practitioner.
- All Advanced Practitioners must work under an agreed scheme of work.
- All Advanced Practitioners must maintain their professional knowledge and skills through continuous education, professional development and training programmes. This must be validated within a formal appraisal and personal development plan structure.
- All image reports and interventions reported by any Advanced Practitioner regardless of scope of practice should be verified and accessible on the Radiology Information System (RIS) within the shortest possible timescale. Recommendations for the production of an Ultrasound report is described in section 4.5 of the <u>SoR-and-BMUS-guidelines-2022-7th-Ed-docx</u>
- If any Advanced Practitioner is uncertain about the presence or significance of an abnormality and is unable to produce a meaningful clinical evaluation, a second opinion must be sought. For interventional procedures, this second opinion must be sought prior to undertaking the intervention.

The following additional operational requirements must be added to the baseline points above for individual Scopes of Practice outlined below:

3.2 Additional Scope of Practice for Breast Image Clinical Evaluation

- Advanced Practitioners for Breast Image Interpretation are recognised as part of the Breast Care team and are autonomously responsible for their own actions and work. They must be Entitled under IR(ME)R as Operators for clinical evaluation for mammogram interpretation.
- Advanced Practitioners must be a registered Health Care Professional and registered with an appropriate governing body as determined in the Health Act and have gained College of Radiographers (CoR) approved post-graduate

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qualifications at Masters level SCQF11 (minimum of a Pg Cert) or working towards Breast Image Clinical Evaluation.

- Advanced Practitioners will clinically evaluate mammograms as above within individual NHS Board Policies as per local requirement with appropriate training and support.
- While clinically evaluating the imaging, (with IR(ME)R Entitlement as Operator for Clinical Evaluation) the Advanced Practitioner may suggest follow up/additional imaging as per local agreement and be Entitled under IR(ME)R as a Referrer under an appropriate non-medical referrer protocol.

3.3 Additional Scope of Practice for Breast Ultrasound

- Advanced Practice Breast Sonographers are recognised as part of the Breast Care team and are autonomously responsible for their own actions and work. They must be Entitled under IR(ME)R as Referrers.
- Advanced Practice Breast Sonographers hold recognised qualifications in medical ultrasound and are able to competently perform ultrasound examinations falling within their personal scope of practice. <u>SoR-and-BMUS-</u> <u>guidelines-2022-7th-Ed-docx</u>
- There are a variety of professional backgrounds of ultrasound practitioners; however, it is desirable for the practitioner to have a background in mammography, or undertake additional mammography clinical evaluation qualifications. The practitioner must be registered with a relevant body (NHS Reform and Health Care Professions Act 2002) such as HCPC or NMR, and have undertaken a CASE accredited (<u>http://www.case-uk.org/</u>) post-graduate qualification (at least SCQF 11 PgCert) in Breast Ultrasound. Sonographers are also advised to join the voluntary registration of the Professional Standards Authority (PSA) accredited (voluntary) <u>Register of Clinical Technologists (RCT)</u>.
- Advanced Practice Breast Sonographers will undertake breast ultrasound as above within individual NHS Board Policies as per local requirement with appropriate training and support.
- While clinically evaluating the imaging, the Advanced Practice Breast Sonographer may refer for additional imaging under an appropriate nonmedical referrer protocol and when Entitled as a Referrer under IR(ME)R.

3.4 Additional Scope of Practice for Breast Interventional Techniques

Appropriate education in medicines management must have been undertaken by Advanced Practitioners in Breast Intervention. This may involve the Practitioner undertaking the Independent Prescribers course or may require education and relevant PGD's (<u>Medicines Management | SoR</u>) for local anaesthetic and a reaction reversal agent must be in place.

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Advanced Practitioners in Breast Intervention must undertake annual anaphylaxis and CPR training.

Advanced Practitioners in Breast Intervention must have undertaken training in biopsy labelling and where appropriate slide preparation.

- Advanced Practitioners in Breast Interventional Techniques are recognised as part of the Breast Care team and are autonomously responsible for their own actions and work. They must be Entitled appropriately as an IR(ME)R duty holder.
- Advanced Practitioners must be registered with a relevant professional body as detailed in the Health Act e.g. HCPC or NMC registered and have gained a CoR approved post-graduate – Masters level qualification (SCQF Level 11 or HEQF Level 7) (at least a PgCert) in Breast Interventional Techniques,
- Advanced Practitioners in Breast Interventional Techniques as above within individual NHS Board Policies as per local requirement with appropriate training and support.
- The Advanced Practitioner may require to refer for additional imaging under an appropriate Non-Medical Referral Protocol and be Entitled under IR(ME)R as a Referrer

3.5 Scopes of Practice – Supplementary

Additional scopes, such as MR Breast reporting, and Clinical Examination may be considered advantageous to services

Documentary evidence of additional scope should be identified under the headings below:

- 2.6 Risk management
- 2.7 Appropriate Leadership skills and support
- 2.8 Productivity
- 2.9 Governance
- 2.10 Responsibilities

3.6 Risk Management

A risk of misinterpretation of imaging exists during any reporting process, and a risk of sampling error exists during any interventional process. Those at risk from either error are the patients. These risks are minimised by knowledge gained through an approved post graduate course of study, appropriate supervision, adherence to protocol and regular self, team, and departmental audit (<u>RCR standards for radiology events and learning meetings</u>). Practitioners must comply with the professional duty of candour within their NHS organisation with reference to the RCR guidance (<u>professional-duty-of-candour-2022.pdf (rcr.ac.uk</u>). The Triple Assessment procedure is of paramount importance in Breast Imaging, Ultrasound and Biopsy findings facilitate correlation with clinical evaluation of the mammograms.

2.14 CPD

2.11 Support and supervision

2.13 Record of competency

2.12 Audit

It is recognised that Clinical Evaluation, Breast Ultrasound, and undertaking interventional procedures can cause psychological issues and distress from possible interpretation and sampling errors and the identification of pathologies. To counteract these scenarios, emotional and pastoral support should be available within NHS Boards via Occupational Health Services. Emotional support should also be available via the Breast Imaging Special Interest Group. Litigation advice and support is available via the Society of Radiographers, for staff who are members.

All Breast Imaging Advanced Practitioners are recommended to have eye checks every two years to ensure eye health.

3.6.1 Work related Musculo-skeletal disorders

It is recognised that due to the physical demands required to undertake clinical evaluation, all Breast imaging Practitioners may acquire MSK issues such as shoulder and neck pain. Regular ergonomic workplace assessments are recommended to ensure best posture for all tasks.

3.6.2 Additional MSK advice for Breast Sonographers

Advanced Practice Breast Sonographers use hand held transducers, linked to a keyboard to record measurements whilst acquiring diagnostic images. The Advanced Practice Breast Sonographer can be seated or standing alongside the patient, within reach of the machine's keyboard. Ergonomic problems can arise during the scanning procedure as gaining a diagnostic image may involve a series of twisting and stretching movements of the body, and twisting and rotating the wrist combined with downwards pressure. These pressure points increase the incidence of neck and shoulder injury, and increased incidence of repetitive strain injury without early preventative intervention.

A number of preventative actions are identified from research completed by the Health and Safety Executive (HSE) detailed in <u>Risk Management of Musculoskeletal</u> <u>Disorders in Sonography work</u>. Preventative actions identified (list is not exhaustive):

- Undertaking a risk management approach accounting for
 - Work organisation
 - Setting and scanning workload
 - Scanning room specification (size, layout, environment and equipment)
 - MSD exposure assessment (using a suitable checklist or tools e.g. <u>HSG60</u> and <u>Quick Exposure Check</u>)
 - Assessing individual factors
 - o Stress
 - Managing and developing systems to scan individuals with a high Body Mass Index (BMI)
 - Developing fundamentally new ways of working (voice activated system and left handed scanning)
 - Training to develop best practice scanning behaviour (coaching and management time)
 - o Human performance and clinical risks

The HSE publication provides additional details on:

• risk reduction and control measures (section 5.2)

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- work organisational aspects (section 5.3)
- training and education providers (section 5.4)
- manufacturers (section 5.5).

Further information is also available through the Society & College of Radiographers publication <u>Work Related Musculoskeletal Disorders Sonographers</u> (3rd Ed 2019).

3.7 Appropriate Leadership Skills and Support

Leadership should set the framework under which a team prospers. This leadership must include relevant training and continuing professional development (CPD) for all team members to ensure a safe and just culture. Leadership must include relevant training in styles such as Transformational Leadership or Collective and Compassionate Leadership, modules for these can be found on <u>Turas Learn</u> (Collective and compassionate leadership | Turas | Learn (nhs.scot)).

3.8 Productivity

The length of session and the requirements of a Breast Imaging Clinical Evaluation are determined by service need. It is accepted that individual reporting outputs may vary due to multiple factors impacting productivity. It is stressed that these figures are an average and should be used as a guideline only after taking into consideration external and internal factors affecting productivity, such as the complexity of the examinations and the experience of the practitioner. There are multiple reasons why productivity may be adversely affected which include interruptions, fielding queries (in person or by phone), and teaching. Similarly, the time of day, stress, fatigue and digital eye strain can also detrimentally effect the number of examinations reported. It is therefore rare that reporting is undertaken continuously for the entire session. The RCR also state that "No consideration of double reading time in mammography is taken into account" (The Royal College of Radiologists, 2022; Radiology reporting figures for service planning 2022). It is therefore stressed that these figures are an average which may be used to support business cases to increase workforce numbers and further education to support the four pillars of professional practice. Audit and research can be utilised to improve patient experiences, professional practice, and productivity.

3.8.1 Breast Imaging Clinical Evaluation Productivity

Clinical Activity per Reporting session	Suggested
Mammogram reporting (Symptomatic service)	24-30
Mammogram reporting (Screening service to achieve 5000	120-160
films per session per year)	

3.8.2 Breast Sonographers Productivity

Clinical Activity per session	Suggested
Ultrasound outpatients (Mixed case load)	
Rapid Access Clinic (Mixed case load)	
Rapid Access Clinic with pre-reported mammography (Mixed	
case load)	

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3.8.3 Breast Interventional Techniques Productivity

Clinical Activity per session	Suggested
Screening Assessment Clinic per practitioner	8-10
Outpatient US intervention list (complexity dependent)	6-10
Outpatient Stereo biopsy/procedure list (complexity dependent)	3-5

The interventional techniques covered in this framework include but may not be restricted to

- Ultrasound Guided Cyst Aspiration
- Ultrasound Guided Fine Needle Aspiration Cytology
- Ultrasound Guided Needle Core Biopsy
- Ultrasound Guided Localisation
- Ultrasound Guided Marker Clip Insertion
- Ultrasound Guided Abscess Management
- Ultrasound Guided Seroma Aspiration
- Stereotactic Needle Core Biopsy
- Stereotactic Localisation
- Stereotactic Marker Clip Insertion
- Tomosynthesis-Guided Biopsy
- Vacuum-assisted Biopsy (VAB)
- Vacuum-assisted Excision (VAE)

3.9 Governance

3.9.1 Professional Governance

The HCPC <u>Standards of Conduct, Performance and Ethics</u> states that the professional is accountable for their individual practice; for keeping their knowledge and skills up to date and relevant to their practice through CPD. Evidence of productivity (i.e. reporting numbers or interventional examination numbers) and practice (i.e. audit data and CPD) should be provided and discussed at annual appraisal. Reports must be actionable and failsafe alerts incorporated (HCPC, Professional Indemnity; HCPC Standards of conduct, performance and ethics 2023)

Breast Sonographers may or may not be registered with the HCPC dependent on their original professional qualification; however, it is advised that they apply for registration to the Professional Standards Authority (PSA) accredited (voluntary) Register of Clinical Technologists (<u>RCT</u>). Section 2.1 of the <u>Guidelines for</u> <u>Professional Ultrasound Practice</u>, a joint publication by SoR and BMUS, provides a Code of Practice for Sonographers.

3.9.2 Employer Governance

It is the responsibility of the employer under IR(ME)R to ensure that individual Advanced Practitioners in Breast Imaging, Breast Interventions, and Breast Sonographers are sufficiently educated, trained and assessed as competent to interpret Breast Imaging investigations. It is also the employers responsibility that all Advanced Practitioners agree to record the results of their interpretations and entitle the Advanced Practitioners as Operators for clinical evaluation, and if referring for National Framework National Framework for Advanced Practice in Breast Imaging

additional x-radiation imaging subsequent to ultrasound, must be a registered professional, be entitled under IR(ME)R as a non-medical Referrer and have a referral protocol relevant to their practice in place.

A mentorship and assessment process must be in place to ensure the competence of each Advanced Breast Practitioner. The scope of practice for each Advanced Practice Breast Practitioner must be defined within the local governance and training documentation.

3.9.3 Clinical Governance

The Radiology Leadership will be involved in mentorship and assessment as part of the team. The individual scope of practice for every Advanced Practitioner must be defined within the local governance process. To contribute to patient management, accuracy of Image Interpretation and Intervention is crucial in Breast Imaging. Audit, reporting of discrepancies and feedback on errors is essential within each NHS Boards Clinical Governance Frameworks: This Framework describes the training and audit required to demonstrate competency of practice to maintain a high quality of service to patients.

Anyone falling below agreed standards will be offered appropriate re-training and support. Local HR support will be sought for practitioners repeatedly falling below agreed standards

Clinical governance is defined in the consultation document <u>A First Class Service:</u> <u>Quality in the New NHS</u> (1998) and by <u>Scally and Donaldson in the British Medical</u> <u>Journal</u> (1998) as: A framework through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

As detailed in section 2.4 of the Guidelines for Professional Ultrasound Practice (SoR & BMUS 2022), the main components of a Clinical Governance framework are summarised as:

- Risk Management
- Clinical Audit
- Education, training and CPD
- Patient and carer experience and involvement
- Staffing and staff management

The Guidelines for Professional Ultrasound also describes what Clinical Governance involves for an Ultrasound practitioner as well as links to various information and published articles on the subject.

The Scottish Government published the <u>NHS Scotland – blueprint for good</u> governance: second edition (2022). Which described governance as *The system by* which organisations are directed and controlled.

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<u>The Health and Care (Staffing) (Scotland) Act 2019</u> aims to maintain safe staffing levels and must be taken into consideration when planning governance for staffing and staff management.

4. **Responsibilities**

4.1 Organisational

The Clinical/Professional Lead should ensure that principles identified in the Schemes of Work and Scope of Practice are adhered to at all times as per local governance.

There must be unique, specific protocols for Advanced Practice in Breast Imaging, Breast Intervention, and Breast Sonography as per service need and set within a written scheme of work. Section 2.3 in Guidelines for Professional Ultrasound Practice (SoR & BMUS 2022) provide guidance on Medico-legal Issues.

The Clinical/Professional Lead for Radiology (or nominated person - as this responsibility can be transferred to other appropriate staff) is responsible for ensuring that Schemes of Work and this framework are adhered to and applied according to appropriate protocols. This organisational responsibility ensures all Advanced Practitioners are suitably qualified, that performance is audited and recorded, safeguarding that the implementation of the Advanced Practice workforce does not compromise patient safety, and is consistent with professional relationships and accountability.

The NHS Board is required to accept vicarious liability for all Advanced Practitioners providing they are working within their documented scope of practice. There must also be a robust audit and discrepancy system in place where workload statistics are identified at annual appraisal. Audit and practice development should be discussed at appraisal and defined within the Personal Development Plan (PDP).

Employers must maintain clear, accurate records of all employees who are trained and deemed competent to carry out extended roles, including the nature and scope of practice of the roles, duties and tasks involved. Such records should be readily available to all relevant staff affected by the skills mix and role development initiative, and any other staff to whom the records relate and refer.

Prior to commencement of autonomous Advanced Practice, the organisation must entitle under IR(ME)R their Advanced Practitioners as Operators for Clinical Evaluation and if additional imaging is required, as per local agreement the Advanced Practitioner may be entitled as a Referrer under an appropriate nonmedical referrer protocol. This IR(ME)R entitlement must be granted for each NHS Board if cross board activity is being undertaken.

4.2 Individual

All Advanced Practitioners must work within their written Scope of Practice and the Scheme of Work agreed by the Clinical/Professional Lead. These Schemes should be reviewed if individuals are widening their Scope of Practice. Isolated practice without appropriate governance is not acceptable for all Advanced Practitioners. All Advanced Practitioners should hold high quality education qualifications approved by the College of Radiographers (minimum of PgCert at SCQF Level 11, HEQF

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Level 7, or CASE accredited). Other essential components of practice are continued participation in training, audit and CPD.

All Advanced Practitioners should support their practice with the four pillars, for CoR accreditation (ECF 4th Ed 2022), each pillar should be underpinned by Masters level educational qualifications:

- Clinical practice;
- Leadership and Management;
- Education and
- Research

Individual Advanced Practitioners are legally accountable for their actions and may be deemed negligent if they fail to demonstrate due care and diligence in performing their duties or act outside their agreed scope of practice. Isolated practice without appropriate governance is not acceptable for any Advanced Practitioners who undertake Clinical Evaluation. Acting within a clinical team does not absolve any individual of personal responsibility and accountability in law. It is recommended that all Advanced Practitioners have appropriate personal indemnity insurance (e.g. SoR or equivalent) for their scope of practice and operate within an agreed scheme of work.

Advance Practitioners must be able to practise safely and effectively within their scope of practice. Each individual has a responsibility to recognise the limitations of their own competency in any given area and will not work outside this level. If the clinical scenario is outside the individuals range of competence advice should be sought from a senior clinician as per their Professional body code of conduct.

5. Supervision of Practice

All Advanced Practitioners should be aware of any limitations and seek support from Consultant colleagues. Ideally, Advanced Practitioners would work within a Multidisciplinary team that can offer peer support when required. A preceptorship model of support should be in place following completion of the

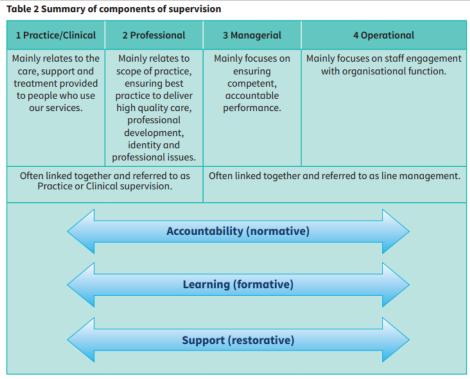
educational aspect of the training. This is to support the practitioner from Novice to Advanced Practitioner and onwards to expert status. Following training there must always be a mentor available for case discussion. <u>(Preceptorship | Health Education</u> England (hee.nhs.uk))

It is recommended that preceptorship should also be offered to Advanced Practitioners who are new to an organisation and those returning to practice from extended leave or secondments, although preceptorship requirements will be lower and should be agreed with the practitioner.

The HCPC will publish the finalised standards and accompanying guidance documents on Preceptorship in September 2023 which should be used not only for graduates and new employees, but also for those entering new and more advanced clinical roles.

<u>Scotland's Position Statement on Supervision for Allied Health Professions (2018)</u> states that all AHP practitioners, irrespective of their level of practice or experience,

should have access to, and be prepared to make constructive use of supervision. Formal supervision should occur 4-6 times per year and cover all four components of supervision:



This supervision model should reflect the stage of training and development and will range from demonstration by example and direct observation through to indirect supervision.

The AHP Practice Education Leads (PELS) can provide further information and signposting to learning resources supporting development.

6. Audit

HCPC Standards of Conduct, Performance and Ethics state that professionals must request feedback, utilising it to improve their practice. Locally agreed annual audits capturing individual practice must be carried out and presented to the employer during annual appraisal to evidence maintenance of proficiency of their scope of practice.

Governance arrangements for audit of Advanced Practice will be specified by each individual NHS Board. The audit must include analysis of activity and actions resulting from clinical evaluation, errors, and discrepancies identified. Teams should work together to refine and implement good governance arrangements, matched against national standards where available.

A comprehensive guide to Audit Practice follows:

• In keeping with professional body recommendations Advanced Practitioners must undertake regular audit and review, relevant CPD, and work within

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locally explicit clinical governance arrangements to ensure their practice remains at the required standard.

- If any previously qualified Advanced Practitioner, or an Advanced Practitioner who has been inactive in terms of clinical evaluation, image interpretation or evaluation, Ultrasound, or Intervention joins the team, then a portfolio of evidence of practice should be produced prior to restarting autonomous practice. Assessment is in the form of reviewing practice. A Preceptorship programme should be provided to support and benefit any individual returning to work.
- Ongoing departmental audit and self-audit will then take place as agreed local arrangements.

A variety of documented audit methods, described in literature, are currently used in practice. Audits are cyclical in nature, should highlight areas for improvement, describe the necessary resources required to implement them, and document the actions and learning outcomes. This is to ensure improvements are monitored and reviewed in a timely manner.

In the interest of safe patient management, actionable reports are required. The RCR strongly advise the audit of reporting outcomes, further information can be found here: <u>https://www.rcr.ac.uk/audit/actionable-reporting</u>.

6.1 Clinical Evaluation Audit Programme

The PERFORMS scheme provides a number of challenging screening cases for Advanced Practitioner Breast Clinical Evaluation participants to report their decisions, receiving immediate graphical feedback detailing how their reports compared with an expert panel. It is advised for the programme to be undertaken annually (<u>PERFORMS</u>).

6.2 Clinical Evaluation Self Audit

The Royal College of Radiologists (RCR) would recommend self-audit to help improve professional practice. This may be carried out using the RCR template. Details of the '<u>Standards for Learning from Discrepancies Meetings'</u> as promulgated by the RCR

are suggested as an appropriate way to ensure safe practice.

6.3 Ultrasound Audit Programme

Due to the complex nature of the Ultrasound speciality, robust and significant audit is challenging. Image assessment is operator dependent with instantaneous diagnosis. Many factors impact the final outcome of these examinations and undertaking an audit of Ultrasound studies within these parameters is taxing. The Royal College of Radiologists (RCR) and the Society and College of Radiographers (SCoR) publication <u>Standards for the provision of an ultrasound</u> <u>service – section 6</u> gives guidance on what should be included in a quality assurance programme of an Ultrasound service. Additional guidance in Section 3.4 of the <u>SoR-and-BMUS-guidelines-2022-7th-Ed-docx</u> provides further information on the recommendations on audit, learning events, and meetings.

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6.3.1 Ultrasound Self audit

In addition to the RCR guidance, the BMUS has developed a peer review audit tool that is available to all BMUS members and can be accessed here: <u>https://www.bmus.org/policies-statements-guidelines/professional-guidance/</u>.

6.4 Interventional Audit Programme

Needle Biopsies

The Royal College of Pathologists (RCP) <u>Guidelines for non-operative diagnostic</u> <u>procedures and reporting in breast cancer screening</u> (August 2021) indicate that at least 90% of cancers should be diagnosed pre-operatively. The document recommends key performance indicators.

Localisation

The British Association of Surgical Oncology (BASO) guidelines state that in >95% the tip of the localisation device should be within 10mm of the lesion in any plane(Best practice guidelines for surgeons in breast cancer screening 2018 – state 'magnetic seeds must be accurately placed').

Interventional Procedures

The effectiveness of all interventional breast procedures is evidenced as part of the 'Triple Assessment' process. Results are therefore taken in context with clinical examination, ultrasound and mammography. The pathology results are assessed in association with other imaging modalities.

The effectiveness of accurate localisation is evidenced against the accurate removal of the abnormality at the immediate surgical procedure.

6.4.1 Interventional Self Audit

Needle Biopsies and Localisation

Each practitioner will audit biopsy results annually and compare these against national standards in conjunction with the final outcome of the patient's management. This will provide evidence of competency in the performance of biopsy procedures required for individual professional development.

Stereo-tactic Interventional Procedures

Correlation of the accuracy as above will be established as part of the weekly Multi-Disciplinary Team reviews.

6.5 Learning from Discrepancy

Discrepancies occur when a difference of opinion is identified retrospectively from the original report; however, it should be noted that not all discrepancies are errors. Discrepancies should be addressed in accordance with the NHS Board's discrepancy reporting procedure which should include a regular Discrepancy or Educational Case meeting, types of disagreements, grading of disagreements and Duty of Candour.

Section 3.4 of the <u>SoR-and-BMUS-guidelines-2022-7th-Ed-docx</u> provides further information on learning from discrepancies.

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A local process for managing discrepancies must be in place, the recommended principles are:

- A discrepancy notification will be made;
- An addendum will be added to the report;
- Discrepancies should be raised and discussed in Radiology Events and Learning meetings in line with Royal College of Radiologist Guidelines (<u>Standards for radiology events and learning meetings 2020</u>)
- The Advanced Practitioners must be part of the MDT meetings on a regular basis and not just when a discrepancy arises
- Duty of candour arrangements must be agreed

7. Record of Competency

A log of appropriately trained staff will be kept by the Clinical/Professional Lead and reviewed as necessary. If an Advanced Practitioner joins the team from outside the employing NHS Board a portfolio of evidence is required before IR(ME)R Operator and Referrer Entitlement is given.

It is the responsibility of the Advanced Practitioner to comply with the agreed audit procedures, maintain competence in the relevant Scope of Practice and comply with radiology policy and IR(ME)R.

Annual appraisal for Breast Imaging Advanced Practitioners should be modelled on the medical model. A clinician relevant to Breast Imaging should appraise in addition to line management appraisal. Guidance for appraisal is as follows:

Performance statistics Audit Evidence of CPD Refection on CPD Reflection on adverse events Personal Development plan

8. Continuing Professional Development

The HCPC Standards of Conduct, Performance and Ethics states that the professional is responsible for keeping their knowledge and skills up to date and relevant to their practice through continuing professional development. All Advanced Practitioners must be engaged with Continuing Professional Development (CPD). The recommendations of the Framework are:

a. Advanced Practitioners will attend relevant MDT meetings

b. Advanced Practitioners will audit their own practice

c. Advanced Practitioners will ensure they maintain knowledge with regular updates in current trends and practice by personal study, attending study days, courses and teaching as appropriate

d. Advanced Practitioners should ideally attend special interest group meetings

e. Support to achieve agreed PDP

f. Advanced Practitioners will within their role, demonstrate leadership, undertake research and the training of other staff

Continuing Professional Development is defined by the College of Radiographers as: An ongoing professional activity in which the practitioner identifies, undertakes and evaluates learning appropriate to the maintenance and development of the highest standards of practice within an evolving scope of practice.

In addition the <u>Principles for Continuing Professional Development and lifelong</u> <u>learning in health and social care</u> (January 2019), sets out five high level principles for the health and social care workforce across the UK and is designed for individuals, employers and the wider system. It should be used alongside professional and regulatory standards.

Appendix 1 – Membership of Group

Name		Role	NHS Board	
Alex	Coltart	Consultant Radiographer	Ayrshire & Arran	
Alice	Dewar	Consultant Radiographer	Grampian	
Nicola	Gill	Consultant Radiographer	Forth Valley	
Winnie	Miller	Programme Manager	NSS	
Jacqueline	Kelly	Consultant Radiologist	GGC	
Anne	Lang	Consultant Radiographer (Deputy Chair)	Lanarkshire	
Lindsey	Leen	Advance Practitioner	Greater Glasgow & Clyde	
Val	Blair	AHP Programme Director	NES	
Elizabeth	Marriott	Consultant Radiographer	Fife	
Karen	Gray	SCIN & Consultant Radiologist	Lanarkshire	
Juliette	Murray	SAC Lead	Forth Valley	
Julie	Rankin	Professional Officer SCoR (Chair)	SCoR	
Patsy	Whelehan	Consultant Radiographer	Tayside	
Simon	Holmes	National Training Co-Ordinator		
Lindsey	Mitchell	SAC Lead	SAC	
Robina	Collins	Programme Support Officer	NSS	
Camilla	Young	Senior Programme Manager	NSS	

Appendix 2 – Available Education Programmes

Module	Academic Credits	Place of Study	Mode of Study	Duration	Available Places	Contact
Pg. Certification Mammography	60 Credits	Scottish Academy of Breast Imaging	Online plus clinical training week in Glasgow or Edinburgh	9 months	12 per cohort - March / August / November intake	Maureen McAuley <u>maureen.mcauley@g</u> gc.scot.nhs.uk
Pg. Diploma Mammography	 180 credits which must consist of: 60 credits from PgCert Mammography Advanced Practice Credits 	Advanced Practice options at Scottish Academy of Breast Imaging (See below) Education and Leadership options at QMU	Online / F2F depending on module	1-7 years part time	No specific limit: intake depending on module	Maureen McAuley (for SABI options) <u>maureen.mcauley@g</u> <u>gc.scot.nhs.uk</u> Simon Holmes (for QMU options) <u>Simon.Holmes@ggc.s</u> <u>cot.nhs.uk</u>
MSc Mammography	 180 credits which must consist of: 60 credits from PgCert Mammography Advanced Practice Credits Research Methods 60 Credits from Dissertation 	Research Methods and Dissertation at QMU	Online	1-7 years part time	No specific limit: intake depending on module	Simon Holmes <u>Simon.Holmes@ggc.s</u> <u>cot.nhs.uk</u>
Mammographic Image Interpretation	40 Credits	Scottish Academy of Breast Imaging	F2F	1 year	No specific limit: March intake	Maureen McAuley <u>maureen.mcauley@g</u> <u>gc.scot.nhs.uk</u>

Module	Academic Credits	Place of Study	Mode of Study	Duration	Available Places	Contact
Pg. Certificate Breast Ultrasound	 60 Credits for full PgCert or standalone 20 credit modules including: Physics and Instrumentation of Ultrasound Breast Ultrasound Ultrasound Ultrasound Guided Interventional Procedures 	Scottish Academy of Breast Imaging	Online / F2F depending on module	1-4 years part time	Up to 10 per cohort: September intake	Maureen McAuley <u>maureen.mcauley@g</u> <u>gc.scot.nhs.uk</u>
X-Ray Guided Interventional Procedures	20 Credits	Scottish Academy of Breast Imaging	F2F	6 months	No specific limit: October intake	Maureen McAuley <u>maureen.mcauley@g</u> gc.scot.nhs.uk
Clinical Breast Examination and Communication	20 Credits	Scottish Academy of Breast Imaging	F2F	6 months	No specific limit: November intake	Maureen McAuley <u>maureen.mcauley@g</u> gc.scot.nhs.uk
Certificate in Higher Education for Assistant Practitioners	120 credits	Scottish Academy of Breast Imaging	Online plus clinical training week in Glasgow or Edinburgh	11 months	8 – 10 per cohort: January intake	Maureen McAuley <u>maureen.mcauley@g</u> gc.scot.nhs.uk

Module	Academic Credits	Place of Study	Mode of Study	Duration	Available Places	Contact
Extended Practice for Assistant Practitioners in Mammography	20 credits	Scottish Academy of Breast Imaging	Online plus clinical training week in Glasgow or Edinburgh	6 months	8 – 10 per cohort: May Intake	Maureen McAuley <u>maureen.mcauley@g</u> gc.scot.nhs.uk
Breast image reporting modules available are: Principles of advanced practice Core Skills for Radiological reporting Radiological image Interpretation		Salford				
PGM in image interpretation,		Kingston				
Advanced Procedures		Salford				
PGM in interventional breast techniques		Kingston				
Defined Area US Breast						

Module	Academic Credits	Place of Study	Mode of Study	Duration	Available Places	Contact
Principles of Ultrasound imaging	30 credits	GCU				
Extending Advanced Practice		Salford				
PGM in defined area of Ultrasound Practice		Kingston				

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Appendix 3 – Job Descriptions

Job Description for Advanced Practitioner in Breast Imaging

1. JOB IDENTIFICATION

Job Title:	Advanced Practitioner in Breast Imaging
Clinically Responsible to:	[Local Board to Determine]
Department(s):	Imaging Departments
No of Postholder(s):	[Local Board to Determine]
Agenda for Change Band	Band
Last Update:	[Local Board to Determine]

2. JOB PURPOSE

- As a highly specialist member of the Breast Imaging team providing an autonomous service providing high levels of skills and knowledge within **one** of the following diagnostic procedures;
- Mammogram Interpretation and Reporting; Performing breast interventional procedures; and intervention.
 - Interpreting and issuing diagnostic reports on mammograms.
 - Undertaking breast ultrasound
 - Performing breast Interventional procedure
- To provide high quality direct care as part of the diagnostic imaging service for the management of patients referred to the breast imaging team from clinicians.
- Supervise and train staff to ensure continuity of service delivery.
- Participate in establishing an environment of support for breast imaging trainees and for other professions with whom the post holder would have close contacts.
- To work in partnership with the multi-disciplinary team across traditional boundaries in all key functions.
- To support the service in meeting operational and strategic targets and improving the quality of patients care within the Breast Imaging service.
- Willingness to further develop skills in breast imaging i.e. Mammo reporting/Breast ultrasound and Breast Interventional procedures as required.

3. DIMENSIONS

General

- Provide a high quality, efficient and effective Mammogram Reporting Service.
- Clinical governance strategy ensures a high standard of care for patients undergoing Breast Imaging investigations, and promotes multidisciplinary team working.
- Assist in promoting service reputation for change and innovation and introduction of new technology and procedures.
- A Clinical/Professional Lead will agree an annual personal development plan (PDP) and EKSF.

Clinical Areas

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Mammography is provided at the following sites. Mammogram Reporting provides an expert opinion on this imaging to the Breast Imaging team.

The post holder may have advanced clinical responsibilities in other department areas dependent on service need (delete as appropriate).

Breast Imaging is provided at the following sites using a variety of imaging modalities.

Imaging Sites

• [each HB to add list of sites here and whether screening or symptomatic]

Imaging Modalities

[each HB to add to or delete list from below]

- General radiography (plain imaging)
- CT Scanning
- MR scanning
- Fluoroscopy
- Angiography
- Interventional Radiology
- Cardiac Catheterisation
- Mammography
- Dental
- Dexa
- Ultrasound
- Other
- The investigations undertaken in the Diagnostic Imaging service, including provision of images and reports, are essential to allow optimal diagnostic and patient care processes to occur.
- All radiographic practice is undertaken in accordance with National Legislation: IR(ME)R 2017 (Ionising Radiation (Medical Exposures) Regulations 2017) and IRR 1999 (Ionising Radiation Regulations) and is subject to inspection by the IR(ME)R (HIS) and HSE Inspectors.

Clinical Activity

- To support a comprehensive Breast Imaging service to patients and clinicians.
- To provide a mammogram report following mammography.
- Undertake and report breast ultrasound (add/delete as appropriate)
- Undertake and report breast interventional procedures (add/delete as appropriate)
- Other (add/delete as appropriate)

Clinical Provision

[Health Boards to add days/times as required]

Staff Responsibility

Within a highly specialised Breast Imaging the post holder has associated management responsibility for:

- Assist in training, induction, competency, and supervision of Trainee Advanced Practitioners and other relevant staff groups rotating through their specialised areas.
- Supervise the workload of relevant staff and direct porters as required.
- Supervise and educate student Radiographers on clinical placement and students from other disciplines i.e. Medical, Nursing, and AHPs.
- Health and Safety.
- IRMER and IRR.
- Liaising with other staff groups, including Medical, Nursing, Clerical and Portering.

4. ORGANISATIONAL POSITION

[Local Board to provide]

5. ROLE OF THE DEPARTMENT

- Participate in provision of a high quality, efficient and effective Breast Imaging service to the local population.
- Participate in provision of a high quality, efficient and effective screening Breast Imaging service to the local population
- Diagnostic imaging equipment is used to carry out mammograms / Breast Ultrasound / Breast Interventional procedure (Delete as appropriate) on patients and mammogram/Ultrasound/Intervention (delete as appropriate) reports are provided to the Breast Imaging team. The report assists the team in determining a diagnosis of the patient's condition in order to decide on an effective course of treatment and care.
- The postholder will enhance the service provided to the public, by providing expertise in this specialist area.

6. KEY RESULT AREAS

It is the postholder's responsibility to minimise radiation dose and risks to patients, staff, relatives, general public and self. Post holders using their expertise can authorise additional imaging/radiation dose if the need out ways the risk.

Clinical

- Demonstrate ability to act as a recognised expert within mammographic imaging, providing specialist advice to clinicians as appropriate.
- To provide an autonomous reporting service for mammograms/undertake breast ultrasound/perform breast interventional procedure (delete as appropriate) from within the Breast Imaging team structure.
- Provide expert advice to clinicians on the nature of diagnostic images/reports.
- To recognise and ensure urgent findings are communicated to the appropriate clinician, and patients are directed accordingly.

- Liaise with other staff specialities and draw on experience where clarification is required to ensure the most appropriate further assessment in line with established care pathway, determining the need for additional projections based on image appearance.
- Within area of expertise train, monitor and evaluate professional standards and provide professional advice contributing to service delivery.
- Care for the needs and welfare of every patient.
- To communicate in writing (via RIS or other management platform) the final clinical reports on mammographic reporting/breast ultrasound/breast interventional procedures (delete as appropriate).
- Maintain accurate patient records by input of accurate information to reflect the service provided and meet professional standards.
- Participate in the development of the mammogram reporting/breast ultrasound/breast interventional procedures.
- Comply with protocol and procedure and associated clinical governance, risk assessment and audit in own specialist field.
- Deliver presentations / training sessions to colleagues and clinicians to enhance knowledge of mammogram reporting/breast ultrasound/breast interventional procedures.
- Responsible for delivering findings of audits of practice to groups of staff, working parties etc.
- On a daily basis multi task between using pieces of highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the services provided.
- Make decisions in complex and unpredictable circumstances, e.g. rearrange workload in event of equipment failure, which would have an impact on other service users.
- Ensure appropriate infection control measures are implemented to maintain a clean and safe working environment for both patients and staff.
- Regularly attend the MDT
- To use specialist knowledge to review and comment on continuing appropriateness of imaging protocols.
- Supervise Trainee Advanced Practitioners and other relevant staff.
- Ensure that the level of mammogram reporting/breast ultrasound/breast interventional procedures (delete as appropriate) provision meets imaging department standards.
- To provide expert clinical advice in relation to mammogram reporting/breast ultrasound/breast interventional procedures (delete as appropriate) and to support the multidisciplinary team.
- Support the establishment of standards and guidelines for best practice in mammogram reporting/breast ultrasound/breast interventional procedures.

Legal and Ethical responsibilities

- The practitioner will require to practice within the legal and ethical framework as established by the Health Professions Council.
- Will be able to evaluate legal, ethical and professional issues and contribute to discussions that will inform ethical decision making by the breast care team.
- The practitioner will be required to adhere to IRMER regulations.

Managerial

- To support the national policy agenda in breast imaging as appropriate.
- Be actively involved in new patient care strategies and care pathways and be involved in promoting the Mammogram reporting service.
- Participate in the development of the Breast Imaging service in collaboration with other members of the team.
- Produce and deliver presentations on mammogram reporting/breast ultrasound/breast interventional procedures service (delete as appropriate) and other topics to multi-disciplinary groups.
- Be actively involved in ensuring Breast Imaging clinicians are committed to departmental audit and Quality Assurance to maintain effective Clinical Governance.
- Plan and participate in delivery of education, training, multi-disciplinary and research activities.
- Maintain knowledge of technological and technical advances in order to promote a culture of continuous improvement.
- Supervise other relevant staff and trainees, and be responsible for the safe use of imaging equipment by other staff and provide clinical training.
- Ensure familiarity of an effective patient appointment or scheduling system.
- Contribute to the development, implementation and maintenance of departmental policies, procedures, standards and protocols, and 'Local Radiation rules' all of which have an impact on other service users.
- Be involved where feasible in monitoring and ordering of supplies / consumables and to assist in the delivery of a quality service within budgetary constraints.
- To ensure that images are presented for reporting purposes in a timely and accurate manner.
- To attend multidisciplinary and management meetings as required.
- To report equipment malfunctions and to help maintain a comprehensive and accurate record of faults, ensuring that all appropriate staff are kept up to date as to the working status of equipment.
- Comply and implement Hospital policies and procedures with respect to patient care, i.e.:
 - Health and Safety
 - Infection Control
 - Control of Substances
 - Hazardous to Health (COSHH)
 - IR(ME)R 2017 and IRR17
 - Risk Management
 - Radiation Protection Procedures
 - Quality Assurance Programme
 - Clinical Governance
 - Research and Development
 - Education and Training

Human Resources

To be Involved in:

- Recruitment and retention (through interview process).
- To motivate and inspire the Breast Imaging team through extended professional role.
- To assist in developing staff utilising mentorship, appraisal and personal development plans (PDP).

Information Resources and Skills

- In-put patient data and supervise other members of staff using:
 - Radiology Information System (RIS or other management platform) used to input and access patient information relating to radiological examinations in order to review previous procedures and clinical history, record current investigation details, view and dictate reports.
 - Digital Radiography Systems (DRS) Images are viewed on remote operator panels prior to being accepted onto the archiving system.
 - Picture archive and communication system (PACS) used on a daily basis to retrieve previous examinations and store current images. Used to copy images onto film for use in theatre or for transfer to other hospitals.
- Regularly use computer software programmes such as Microsoft Word and Excel to create documents and tables. e.g. for Quality assurance and audit purposes.
- Use of voice recognition technology, have a comprehensive knowledge of the Radiology Information, Reporting Systems and PACS; utilise systems to input and retrieve patient details, reports and statistics; retrieve and analyse data for the purpose of audit.
- If available, use proprietary brand document control systems to record radiation polices, procedures and other documents.
- Involved in own specialised area for the daily management/ housekeeping and troubleshooting of imaging modality IT systems creating seamless acquisition, storage, retrieval and display of digital patient images.
- Access the internet, e-mail and intranet with relevance to personal and professional development and departmental business e.g. ordering of supplies etc.

Research and Development

- Regularly undertake Clinical Effectiveness and Quality Assurance.
- Use audit to continually improve practice and development of mammogram reporting service.
- Assist with organising service provision, e.g. monitor and evaluate service demand including staffing levels and assessing workload.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Actively participate in the technical and patient focused aspects of the department's audit programme.

Educational

- Actively involved in training and education, to influence and support educational developments of the multidisciplinary team in relation to the mammogram reporting service.
- Communicate specialist condition related information presents specialist and highly complex information to large groups such as MDT meetings.
- Maintain an extensive and contemporary knowledge of current practice by participating in ongoing personal education and development including mandatory training and actively pursuing continuous professional development keeping an up to date personal record, (PDP).
- The post holder will supervise and support the work of Trainee Advanced Practitioners and other staff.
- Support the education and clinical training of both undergraduate and postgraduate students, both within the Health Board and local Higher Education Institutions as required. Supporting new programmes of education and training to facilitate changes in practice, developing a lifelong learning culture within the Imaging department.
- Maintain knowledge of technological advances in methods of diagnostic imaging in order to promote a culture of continuous improvement within the service.
- Contribute to development and maintenance of a robust training and educational frameworks that are responsive to individual and service needs as appropriate.
- Maintain an in depth knowledge of specialist equipment used.
- As a reviewer carry out annual PDP interviews with Trainee Advanced Practitioners and other staff.

7. SYSTEMS, EQUIPMENT AND MACHINERY

A variety of specialised investigative and breast imaging equipment is utilised which comprise of multifunctional controls. The equipment is operator dependent and requires specific skills to achieve images of diagnostic quality. Below is a list of the equipment. Post holders use the majority of the equipment relevant to their department. Equipment ranges from £xxxxx to £xxxx. (Boards to modify as appropriate)

- Reporting Workstations.
- Picture Archiving and Communication System (PACS)
- Radiology Information Systems (RIS) or other management platform
- Voice recognition platform
- Trakcare or other PAS
- Digital Radiography Systems (DR mammography units)
- Ultrasound units
- Personal Computers
- Label printers associated with Radiology Information System (RIS)
- Manual Handling Aids: Mechanical patient hoists, PAT slides, GLIDE sheets
- Immobilisation devices e.g. foam pads
- Protective equipment, incl. Lead rubber aprons
- Suction, Oxygen, emergency drugs tray

The post holder may have advanced clinical responsibilities in other department areas dependent on service need and may use the following equipment (*delete as appropriate*):

- General purpose x-ray equipment (includes x-ray tubes, tables, operator consoles)
- Digital Radiography Systems (CR/ DR)
- Dedicated resus x-ray equipment
- Digital fluoroscopy units
- Dedicated digital Angiography Unit
- Multi slice CT scanner
- MRI
- High Pressure Injector Pump
- Mobile x-ray units (mainly for use in wards)
- Mobile image intensifiers (mainly for use in theatre)
- Manual Handling Aids: Mechanical patient hoists, PAT slides, GLIDE sheets
- Immobilisation devices e.g. foam pads
- Protective equipment, incl. Lead rubber aprons
- Suction, Oxygen, emergency drugs tray

8. ASSIGNMENT AND REVIEW OF WORK

- Operate autonomously at clinical expert level, providing broad guidance and principals to manage the responsibilities of the post within the team structure.
- There will be on-going support and supervision following the NES guidelines for the postholder within their department.
- Make autonomous decisions on a daily basis, including provision of advice to junior staff in clinical decision making for a multi-disciplinary team including medical staff, regarding patient care on a daily basis.
- Undertake appraisal and PDP programme.

9. DECISIONS AND JUDGEMENTS

- Independently undertake/interpret mammogram reporting/breast ultrasound/breast interventional procedures as per agreed scope of practice and scheme of work.
- Issue autonomous reports on mammogram /breast ultrasound/breast interventional procedures (delete as appropriate) and when necessary discuss findings with referring clinician. This involves incorporating the clinical history, findings and knowledge of normal anatomy, pathology and disease processes to perform the task effectively and accurately. This enables prompt and appropriate action as regards further investigations and /or management.
- Take decisions that the area visualised is the correct area for investigation.
- Decide if sufficient specimens have been taken.

- Clinically evaluate images produced by self and team members to assess quality and determine need for further imaging prior to patient departure from department.
- Within own specialised area monitor and evaluate professional standards and provide Professional advice. Where a clinician disagrees, have the depth of specialised knowledge required to debate.
- Apply analytical judgement to problem solving and improving service delivery.
- Act as Mentor to staff not performing to accepted standards of work and teach/train them to achieve appropriate standards of competency.
- Exercise personal responsibility and make decisions based on knowledge and experience in complex and unpredictable circumstances when undertaking clinical duties.
- Identify and respond to significant service difficulties in a proactive manner taking into account individual, service and organisational risk factors.
- To support decisions on managing the service while giving support to referrers and colleagues in the event of equipment breakdown.
- Ensure that appropriate skill mix is maintained at all times to achieve the desired quality of patient care.
- Frequently reassess workload to provide optimum utilisation of resources.
- Assess mental, physical and emotional condition of patient prior to and during examination, and to adapt techniques accordingly, in order to provide the best possible image.

10. MOST CHALLENGING / DIFFICULT PARTS OF THE JOB

- Maintaining the required caseload which will be audited maintaining a minimum reporting accuracy level of 95%.
- Deciding on level of suspicion using knowledge and experience to determine whether normal or abnormal and organise further appropriate investigation.
- Frequent need for long periods of intense concentration to report on examinations within a limited timescale.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Maintaining a balance between reporting and other clinical duties.
- To be able to multitask between using highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the service provided.
- Cope with the mental and physical demands of working in emotional areas supporting patients though investigations.
- Exposure to cases where the patient's prognosis is poor.
- Combining training in new techniques or newly procured equipment with normal patient workload, keeping up to date with CPD and ever changing technology.
- Working under pressure to ensure waiting times are kept to a minimum.

11. COMMUNICATIONS & RELATIONSHIPS

Medical Staff / Other Health Care Professionals

- Issue autonomous reports from within the team structure and when necessary discuss findings.
- Provide advice on the nature of an image/report.
- Relate highly sensitive patient information to and discuss this with referring clinicians and colleagues.
- Discuss images with Senior Practitioners as required.
- Deliver CPD sessions to colleagues and clinicians.
- Liaise with medical and nursing, clerical and portering staff to ensure service delivery and efficient and timeous patient transfer and investigation preparation.
- Supervise, and support less experienced clinicians.
- Pass on patient information when transferring patient care to colleagues.
- Attend team meetings.

Patients

- Communication skills are adapted to meet the needs of patients who may be anxious, aggressive or intoxicated, and with a variety of mental and physical abilities. The barriers to understanding must be overcome using clear, comprehensive, sympathetic and persuasive skills.
- Where patients have a barrier to understanding or are unable to communicate e.g. English is not their first language or they are confused, ensure that patients have the benefit of informed choice.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead

Relatives / Carers

- Provide information using tact and diplomacy in the context of the standards of professional and personal conduct and within the regulations governing the GDPR.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead.
- Provide reassurance and receive information about patient's capabilities.

Other Relevant Departments, for example, liaise with equipment engineers and estates on priority and deployment of resources, e.g. service arrangements/interventional cases.

- Estates, Supplies, Human Resources, Fire Officer, Infection Control
- Non NHS Staff
- Communicate and liaise with Equipment Manufacturers:
- Engineers
- Equipment Sales Representatives
- Company support staff

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12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical Skills:

- Enhanced keyboard skills for data entry to relevant systems, as well as to produce clinical and statistical reports.
- Using a high level of skill and accuracy when positioning patients for investigations.
- Have the expertise to handle and operate highly specialised and expensive equipment.

Physical Demands:

- Long periods of time spent in front of a workstation requiring high levels of concentration whilst undertaking breast imaging procedures.
- Long periods of standing when performing biopsies, where appropriate.
- Regularly undertake examinations in awkward positions e.g. leaning/stretching and pushing to obtain images of diagnostic quality.
- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Ergonomic issues should be addressed immediately to line management or OH. It is also recommended that film readers should look after their eye health having regular 2 yearly eye check-ups.
- •

Mental Demands

- Balancing constantly changing priorities whilst maintaining a high quality service.
- High level of concentration is required when analysing complex clinical images, producing reports or providing highly specialised advice.
- Be able to manage an unpredictable workload effectively and interact successfully with fellow healthcare professionals.
- Intense concentration when analysing complex clinical images/reports.
- Dealing with interruptions to concentration which results in a change of practice e.g. urgent phone calls from patients, consultants seeking advice etc.

Emotional Demands

- Working under pressure to ensure that waiting times are kept to a minimum
- Working with patients who have cancer and identifying these cancers

Daily Working Conditions

- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Frequent exposure to unpleasant odours, uncontained body fluids and infections.
- Exposure to infections such as MRSA, HepC.

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• Occasional Risk of physical abuse from patients/ carers who may be intoxicated, confused, or be IV drug abusers.

13. KNOWLEDGE, TRAINING AND/OR EXPERIENCE REQUIRED TO DO THE JOB

Essential specification:

- D.C.R. or BSc (Hons) in Diagnostic Radiography or alternative relevant first degree
- Registered with a relevant professional body
- Postgraduate qualification in breast imaging reporting
- Post graduate CASE accredited qualification in breast ultrasound (add/delete where appropriate)
- Post graduate qualification in Breast Interventional procedures (add/delete where appropriate)
- Working towards Masters degree

Experience:

- Evidence of CPD in specialist area
- Experience of leading service developments

Knowledge and awareness

- Awareness of national agenda in Breast Imaging
- Computer literate and able to use data bases and spreadsheets
- Extensive knowledge of breast imaging and service involvement

Skills and abilities:

- Evidence of working across professional and organisational boundaries internally and externally
- Evidence of working on own initiative and take responsibility and make decisions.
- Excellent verbal and written communication and presentation skills
- Evidence of managing complex clinical situations
- Evidence of a high level of analytical problem solving skills

Desirable specification

- Masters degree
- Project management experience
- Research experience
- Experience of writing for publication

14. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by each postholder to whom the job description applies.	
Job Holder's Signature:	Date:
Head of Department Signature:	Date:

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Job Description for Senior Advanced Practitioner in Breast Imaging

1. JOB IDENTIFICATION	
Job Title:	Senior Advanced Practitioner Breast Imaging
Clinically Responsible to:	[Local Board to Determine]
Department(s):	Imaging Departments
No of Postholder(s):	[Local Board to Determine]
Agenda for Change Band	Band
Last Update:	[Local Board to Determine]

2. JOB PURPOSE

- To provide a high level of expertise in the specialist clinical field of breast cancer diagnosis including **all** of the following: Mammogram Interpretation and Reporting; Performing breast interventional procedures; and intervention.
- To use highly advanced clinical skills to provide expert advice, clinical opinion and diagnosis for patient centre care.
- To support post graduate education and training in developing the breast imaging service to enhance patient care.
- Participate in establishing an environment of support for breast imaging trainees and for other professions with whom the post holder would have close contacts.
- Participate in the Multi-disciplinary Team across traditional boundaries in all key functions.
- To participate in provision of strategic vision to deliver on operational and strategic targets, and improve the quality of patient care within Breast Imaging.
- Participate in research, audit and to assess service quality and impact of studies.

3. DIMENSIONS

General

- Provide a high quality, efficient and effective Breast Imaging Service.
- Clinical governance strategy ensures a high standard of care for patients undergoing Breast Imaging investigations, and promotes multidisciplinary team working.
- Assist in promoting Service reputation for change and innovation and introduction of new technology and procedures.
- Clinical/Professional Leads will agree an annual personal development plan (PDP) and EKSF.

Clinical Areas

The post holder may have advanced clinical responsibilities in other department areas dependent on service need [*delete as appropriate*].

Breast Imaging is provided at the following sites using a variety of imaging modalities.

Imaging Sites

• [each HB to add list of sites here and whether screening or symptomatic]

Imaging Modalities

[each HB to add to or delete list from below]

- General radiography (plain imaging)
- CT Scanning
- MR scanning
- Fluoroscopy
- Angiography
- Interventional Radiology
- Cardiac Catheterisation
- Mammography
- Dental
- Dexa
- Ultrasound
- Other
- The investigations undertaken by the Diagnostic Imaging service, including provision of images and reports, are essential to allow optimal diagnostic and patient care processes to occur.
- All radiographic practice is undertaken in accordance with National Legislation: IR(ME)R 2017 (Ionising Radiation (Medical Exposures) Regulations 2017) and IRR 2017 (Ionising Radiation Regulations) and is subject to inspection by the IR(ME)R (HIS) and HSE Inspectors.

Clinical Activity

- Assist in providing a comprehensive Breast Imaging service to patients and clinicians
- To provide a mammogram report following mammogram examinations
- Undertake breast ultrasound and report as required
- Undertake and report Breast interventional procedures as required
- Other (*delete/add as appropriate*)

Clinical Provision

[Boards to indicate days/times etc as appropriate]

Staff Responsibility

Within the highly specialised area of Breast Imaging the post holder has associated management responsibility for:

- Assisting in training, induction, competency, and supervision of Advanced Practitioners/Trainee Advanced Practitioners and other relevant staff rotating through their specialised areas.
- Supervising the workload of relevant staff and direct porters as required.
- Supervise and educate students on clinical placement and students from other disciplines i.e. Medical, Nursing, and AHPs.

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- Health and Safety.
- IRMER and IRR.
- Liaising with other staff groups, including Medical, Nursing, Clerical and Portering.

4. ORGANISATIONAL POSITION

[Local Board to provide]

5. ROLE OF THE DEPARTMENT

- Participate in provision of a high quality, efficient and effective Breast Imaging service to the local population.
- Provide a high quality, efficient and effective Breast Imaging service to the local population
- Diagnostic imaging equipment is used to carry out breast imaging investigations on patients and reports are provided to the Breast Care team. The reports provide a diagnosis of the patient's condition in order to decide on an effective course of treatment and care.
- The postholder will enhance the service provided to the public, by providing expertise in this specialist area.

6. KEY RESULT AREAS

It is the postholder's responsibility to minimise radiation dose and risks to patients, staff, relatives, general public and self. Post holders using their expertise can authorise additional imaging/radiation dose if the need out ways the risk.

Clinical

- Demonstrate ability to act as a recognised expert within diagnostic imaging, providing specialist advice to clinicians as appropriate.
- To independently undertake and provide an autonomous reporting service for mammograms, breast ultrasound, and breast interventional procedures by analysing, interpreting and issuing an independent report from within the reporting team structure and when necessary discussing the findings with the relevant clinician.
- Provide expert advice to clinicians on the nature of diagnostic images/reports.
- To recognise and ensure urgent findings are communicated to the appropriate clinician, and patients are directed accordingly.
- Liaise with other staff specialities and draw on experience where clarification is required to ensure the most appropriate treatment or further assessment in line with established care pathway, determining the need for additional projections based on image appearance.
- Within area of expertise train, monitor and evaluate professional standards and provide professional advice contributing to effective service delivery.

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- Care for the needs and welfare of every patient.
- To communicate in writing (via RIS or other management platform) the final clinical reports on mammographic reporting, breast ultrasound, and intervention.
- Maintain accurate patient records by input of accurate information to reflect the service provided and meet professional standards.
- Participate in the development of the Breast Imaging service.
- Comply with Scope of Practice and schemes of work and associated clinical governance, risk assessment and audit in own specialist field.
- Deliver presentations / training sessions on Breast imaging to enhance knowledge of colleagues and clinicians.
- Responsible for delivering findings of audits of practice to groups of staff, working parties etc.
- On a daily basis multi task between using pieces of highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the services provided.
- Make decisions in complex and unpredictable circumstances, e.g. rearrange workload in event of equipment failure, which would have an impact on other service users.
- Ensure appropriate infection control measures are implemented to maintain a clean and safe working environment for both patients and staff and sterile environment for interventional procedures.
- Actively contribute to MDT
- Assist in ensuring that the level of staffing in the Breast Imaging Service provision meets imaging department standards.
- Plan own workload and prioritise the investigations for patients.

Legal and Ethical responsibilities

- The practitioner will require to practice within the legal and ethical framework as established by the Health Professions Council.
- Will be able to evaluate legal, ethical and professional issues and contribute to discussions that will inform ethical decision making by the breast care team.
- The practitioner will be required to adhere to IRMER regulations.

Managerial

- Be actively involved in national policy agenda in Breast Imaging.
- Assist with new patient care strategies and care pathways and promote the Breast Imaging service.
- Assist with developing the Breast Imaging service and ensure teamwork with other members of the team.
- Produce and deliver presentations on Breast Imaging service and other topics to multi disciplinary groups.
- Be actively involved in ensuring Advanced Practitioners, Trainee Advanced Practitioners, Mammographers and other staff are committed to departmental audit and Quality Assurance to maintain effective Clinical Governance.
- Assist with planning and delivery of education, training, multi-disciplinary and research activities.

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- Maintain knowledge of technological and technical advances in order to promote a culture of continuous improvement.
- Supervise Advanced Practitioners, Trainee Advanced Practitioners, radiographic staff, student radiographers and relevant staff, and be responsible for the safe use of imaging equipment and provide clinical training.
- Ensure familiarity of an effective patient appointment or scheduling system.
- Contribute to the development, implementation and maintenance of departmental policies, procedures, standards and protocols, and 'Local Radiation rules' all of which have an impact on other service users.
- Assist with monitoring supplies / consumables to ensure the delivery of a quality service within budgetary constraints.
- Assist in ensuring a timely and accurate service.
- To attend multidisciplinary and management meetings as required.
- Identify and report equipment malfunctions to maintain a comprehensive and accurate record of faults, ensuring that all appropriate staff are kept up to date as to the working status of equipment.
- Comply and implement Hospital policies and procedures with respect to patient care, i.e.:
 - Health and Safety
 - Infection Control
 - Control of Substances
 - Hazardous to Health (COSHH)
 - IR(ME)R 2017 and IRR17
 - Risk Management
 - Radiation Protection Procedures
 - Quality Assurance Programme
 - Clinical Governance
 - Research and Development
 - Education and Training

Human Resources

To be Involved in:

- Recruitment and retention (through interview process).
- To motivate and inspire the Breast Imaging team through extended professional role.
- To assist in developing staff utilising mentorship, appraisal and personal development plans (PDP).

Information Resources and Skills

- In-put patient data and supervise other members of staff using:
 - Radiology Information System (RIS) or other management platform used to input and access patient information relating to Breast Imaging examinations in order to review previous procedures and clinical history, record current examination details, view and dictate reports.
 - Digital Radiography Systems (DRS) Images are viewed on remote operator panels prior to being accepted onto the archiving system. This allows for assessment of image quality prior to archive.

- Picture archive and communication system (PACS) used on a daily basis to retrieve previous examinations and store current images. Used to copy images onto film for use in theatre or for transfer to other hospitals.
- Regularly use computer software programmes such as Microsoft Word and Excel to create documents and tables. e.g. for Quality assurance and audit purposes.
- Use of voice recognition technology, have a comprehensive knowledge of the Radiology Information, Reporting Systems and PACS; utilise systems to input and retrieve patient details, reports and statistics; retrieve and analyse data for the purpose of audit.
- If available, use proprietary brand document control systems to record policies, procedures and other documents.
- Daily management/ housekeeping and troubleshooting of Breast imaging area IT systems creating seamless acquisition, storage, retrieval and display of digital patient images.
- Access the internet, e-mail and facility intranet with relevance to personal and professional development and departmental business e.g. ordering of supplies etc.

Research and Development

- Regularly undertake Clinical Effectiveness and Quality Assurance.
- Use audit to continually improve practice and development of Breast Imaging service.
- Assist with planning and organising of service provision, e.g. monitor and evaluate service demand including staffing levels and assessing workload.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Assist and actively participate in developing the technical and patient focused aspects of the department's audit programme.
- Assist with provision of guidance, supervision and support for staff undertaking research, audit or teaching activities.

Educational

- Actively involved in training and education, to influence and support educational developments of the multidisciplinary team in relation to the Breast Imaging Service.
- Communicate specialist condition related information presents specialist and highly complex information to large groups such as MDT meetings.
- Maintain an extensive and contemporary knowledge of current practice by participating in ongoing personal education and development including mandatory training and actively pursuing continuous professional development keeping an up to date personal record, (PDP).
- The post holder will supervise and support the work of Advanced Practitioners, Trainee Advanced Practitioners, and other relevant staff.
- Support the education and clinical training of both undergraduate and postgraduate students, both within NSS/Health Board and local Higher Education Institutions as required. Supporting new programmes of education and training to facilitate changes in practice, developing a lifelong learning culture within the Breast Imaging department.

- Maintain knowledge of technological advances in methods of Breast Imaging in order to promote a culture of continuous improvement within the department.
- Assist with developing and maintaining robust training and educational frameworks that are responsive to individual and service needs as appropriate.
- Maintain an in depth knowledge of specialist equipment used.
- As a reviewer carry out annual PDP interviews with Advanced Practitioners, Trainee Advanced Practitioners and other relevant staff.

7. SYSTEMS, EQUIPMENT AND MACHINERY

A variety of specialised investigative and Breast Imaging equipment is utilised which comprise of multifunctional controls. The equipment is operator dependent and requires specific skills to achieve images of diagnostic quality. Below is a list of the Breast Imaging equipment. Post holders use the majority of the equipment relevant to their department. Breast Imaging equipment ranges from £xxx to £xxx. (Boards to modify as appropriate)

- Reporting Workstations.
- Picture Archiving and Communication System (PACS)
- Radiology Information Systems (RIS) or other management platform
- Voice recognition platform
- Trakcare or other PAS
- Digital Radiography Systems (DR mammography units)
- Ultrasound units
- Personal Computers
- Label printers associated with Radiology Information System (RIS)
- Manual Handling Aids: Mechanical patient hoists, PAT slides, GLIDE sheets
- Immobilisation devices e.g. foam pads
- Protective equipment, incl. Lead rubber aprons
- Suction, Oxygen, emergency drugs tray

The post holder may have advanced clinical responsibilities in other department areas dependent on service need and may use the following equipment (*delete as appropriate*):

- General purpose x-ray equipment (includes x-ray tubes, tables, operator consoles)
- Digital Radiography Systems (CR/ DR)
- Dedicated resus x-ray equipment
- Digital fluoroscopy units
- Dedicated digital Angiography Unit
- Multi slice CT scanner
- MRI
- High Pressure Injector Pump
- Mobile x-ray units (mainly for use in wards)
- Mobile image intensifiers (mainly for use in theatre)
- Manual Handling Aids: Mechanical patient hoists, PAT slides, GLIDE sheets

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- Immobilisation devices e.g. foam pads
- Protective equipment, incl. Lead rubber aprons
- Suction, Oxygen, emergency drugs tray

8. ASSIGNMENT AND REVIEW OF WORK

- Operate autonomously at clinical expert level, providing broad guidance and principals to manage the responsibilities of the post within the team structure.
- Support and supervision will be available in accordance with NES guidelines for the postholder within their department.
- Make autonomous decisions on a daily basis, providing expert advice to junior staff in clinical decision making for a multi-disciplinary team including medical staff, regarding patient care on a daily basis.
- Undertake appraisal and PDP programmes.

9. DECISIONS AND JUDGEMENTS

- Independently undertake, analyse, interpret, report mammographic images/breast ultrasound/interventional procedures as agreed by Scope of Practice and Scheme of work.
- Issue autonomous reports and discuss findings with relevant clinicians. This involves incorporating the clinical history, findings, triple assessment and knowledge of normal anatomy, pathology and disease processes to perform the task effectively and accurately. This enables prompt and appropriate action as regards further examinations and /or management.
- Take decisions that the area visualised is the correct area for investigation.
- Decide if sufficient specimens have been taken.
- Decide if further interventions are required.
- Advise and implement protocols and procedures for the optimum demonstration of pathology.
- Clinically evaluate images produced by team members to assess quality and determine need for further imaging prior to patient departure from department.
- Monitor and evaluate professional standards and provide expert clinical and professional advice. Where a clinician disagrees, have the depth of specialised knowledge required to debate and agree a plan.
- Apply analytical judgement to problem solving and improving service delivery.
- Act as Mentor to Trainee Advanced practitioners and other staff not performing to accepted standards of work and teach/train them to achieve appropriate standards and competency.
- Exercise personal responsibility and make decisions based on knowledge and experience in complex and unpredictable circumstances when undertaking clinical duties.
- Assess mental, physical and emotional condition of patient prior to and during examination, and to adapt techniques accordingly, in order to provide the best possible image.
- Identify and respond to significant service difficulties in a proactive manner taking into account individual, service and organisational risk factors.

- Support decisions on managing the service while giving support to referrers and colleagues in the event of equipment breakdown.
- Ensure that appropriate skill mix is maintained at all times to achieve the desired quality of patient care.
- Frequently reassess workload to provide optimum utilisation of staff resources.
- Assess mental, physical and emotional condition of patient prior to and during examination, and to adapt techniques accordingly, in order to provide the best possible image.

10. MOST CHALLENGING / DIFFICULT PARTS OF THE JOB

- Maintaining a minimum reporting accuracy level of 95%.
- Deciding on level of suspicion using knowledge and experience to determine whether normal or abnormal and organise further appropriate investigation.
- Frequent need for long periods of intense concentration to report on examinations within a limited timescale.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Maintaining a balance between reporting and other clinical duties.
- To be able to multitask between using highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the service provided.
- Cope with the mental and physical demands of working in emotional areas supporting patients though investigations.
- Exposure to cases where the patient's prognosis is poor.
- Combining training in new techniques or newly procured equipment with normal patient workload, keeping up to date with CPD and ever changing technology.
- Speaking to patients, particularly when breaking bad news.
- To meet key national waiting times and manage the significant workload, balancing contact and varied demands.
- Ensure that staff are involved in and contribute to department objectives to deliver improvements in service.
- Train, supervise and assess other staff with varying degrees of experience and levels of competence, performing Breast Imaging examinations whilst maintaining patient care and throughput.

12. COMMUNICATIONS & RELATIONSHIPS

Medical Staff / Other Health Care Professionals

- Issue autonomous reports on investigations within the confines of technology.
- Provide expert clinical advice in relation to breast imaging and support the MDT.
- Relate highly sensitive patient information to and discuss this with clinicians and colleagues.

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- Discuss Breast imaging examinations with Clinicians as required.
- Deliver CPD sessions to colleagues and clinicians.
- Liaise with medical and nursing, clerical and portering staff to ensure service delivery and efficient and timeous patient transfer and examination preparation.
- Attend team meetings.
- Actively contribute to MDT.
- Influence the national policy agenda by audit and local research.
- Produce written papers for peer reviewed publication.
- Communicate with external sources and advisors to maintain up to date knowledge.

Patients

- Communication skills are adapted to meet the needs of patients who may be anxious, aggressive or intoxicated, and with a variety of mental and physical abilities. The barriers to understanding must be overcome using clear, comprehensive, sympathetic and persuasive skills.
- Where patients have a barrier to understanding or are unable to communicate e.g. English is not their first language or they are confused, ensure that patients have the benefit of informed choice.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead
- Highly developed skills are required to communicate often complex, sensitive results to patients, providing them with advice on the management and treatment of their condition in line with the established care pathway.

Relatives / Carers

- Provide information using tact and diplomacy in the context of the standards of professional and personal conduct and within the regulations governing GDPR.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead.
- Provide reassurance and receive information about patient's capabilities.

Other Relevant Departments, for example, liaise with equipment engineers and estates on priority and deployment of resources, e.g. service arrangements/interventional cases.

- Estates, Supplies ,Human Resources ,Fire Officer, Infection Control
- Non NHS Staff
- Communicate and liaise with Equipment Manufacturers:
- Engineers
- Equipment Sales Representatives
- Company support staff

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12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical Skills:

- Enhanced keyboard skills for data entry to relevant systems, as well as to produce clinical and statistical reports.
- Using a high level of skill and accuracy when positioning patients for investigations.
- Have the expertise to handle and operate highly specialised and expensive equipment.

Physical Demands:

- Long periods of time spent in front of a workstation requiring high levels of concentration whilst undertaking Breast Imaging procedures.
- Long periods of standing when performing biopsies.
- Regularly undertake examinations in awkward positions e.g. leaning/stretching and pushing to obtain images of diagnostic quality.
- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Ergonomic issues should be addressed immediately to line management or OH. It is also recommended that film readers should look after their eye health having regular 2 yearly eye check-ups.

Mental Demands

- Balancing constantly changing priorities whilst maintaining a high quality service.
- High level of concentration is required when analysing complex clinical images, producing reports or providing highly specialised advice.
- Be able to manage an unpredictable workload effectively and interact successfully with fellow healthcare professionals.
- Intense concentration when analysing complex clinical images/reports.
- Dealing with interruptions to concentration which results in a change of practice e.g. urgent phone calls from patients, consultants seeking advice etc.

Emotional Demands

- Working under pressure to ensure that waiting times are kept to a minimum.
- Working with patients who have cancer and identifying these cancers.
- Giving clinical results to patients that will often have serious consequences to their Health and wellbeing imparting unwelcome and distressing information to patients.

Daily Working Conditions

- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Frequent exposure to unpleasant odours, uncontained body fluids and infections.

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- Exposure to infections such as MRSA, HepC.
- Occasional Risk of physical abuse from patients/ carers who may be intoxicated, confused, or be IV drug abusers.

13. KNOWLEDGE, TRAINING AND/OR EXPERIENCE REQUIRED TO DO THE JOB

Essential qualifications:

- D.C.R. or BSc (Hons) in Diagnostic Radiography or alternative relevant first degree
- Registered with a relevant professional body.
- Postgraduate qualification in Breast Imaging reporting
- Post graduate CASE accredited qualification in breast ultrasound
- Post graduate qualification in Breast Interventional procedures
- Working towards Masters degree

Experience:

- Evidence of CPD in specialist area
- Experience of leading service developments
- Experience of working at Advanced Practice level

Knowledge and awareness

- Awareness of national agenda in Breast Imaging
- Computer literate and able to use data bases and spreadsheets
- Extensive knowledge of breast imaging and service involvement

Skills and abilities:

- Evidence of working across professional and organisational boundaries internally and externally
- Evidence of working on own initiative and take responsibility and make decisions.
- Excellent verbal and written communication and presentation skills
- Evidence of ability to manage complex clinical situation
- Evidence of a high level of analytical problem solving skills
- Interpersonal skills to negotiate influence and inspire
- Current and wide range of highly developed specialist technical and Healthcare knowledge

Desirable qualifications

- Masters degree
- Project management experience
- Research experience
- Experience of writing for publication
- Teaching qualification

14. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by	Date:
each postholder to whom the job description applies.	
Job Holder's Signature:	Date:
Head of Department Signature:	

National Framework National Framework for Advanced Practice in Breast Imaging

Job Description for Consultant Practitioner in Breast Imaging

1. JOB IDENTIFICATION	
Job Title:	Consultant Practitioner in Breast Imaging
Clinically Responsible to:	[Local Board to Determine]
Department(s):	Imaging Departments
No of Postholder(s):	[Local Board to Determine]
Agenda for Change Band	Band
Last Update:	[Local Board to Determine]

2. JOB PURPOSE

- To provide a high level of expertise in the specialist clinical field of breast cancer diagnosis including Mammogram Interpretation and Reporting; Performing breast Interventional procedures.
- To use highly advanced clinical skills to provide expert advice, clinical opinion and diagnosis for patient centred care.
- To support post graduate education and training in developing the breast imaging service to enhance patient care.
- To establish an environment of support for breast imaging trainees and for other professions with whom the post holder would have close contacts.
- To lead, in partnership with the Multi-disciplinary Team, across traditional boundaries in all key functions.
- To provide strategic vision to deliver on operational and strategic targets, and improve the quality of patient care within Breast Imaging.
- To lead on research, audit and to assess service quality and impact of studies.

3. DIMENSIONS

General

- Provide a high quality, efficient and effective Breast Imaging Service.
- Clinical governance strategy ensures a high standard of care for patients undergoing Breast Imaging investigations, and promotes multidisciplinary team working.
- Promote Service reputation for change and innovation and introduction of new technology and procedures.
- Clinical/Professional Leads will agree an annual personal development plan (PDP) and EKSF.

Clinical Areas

The post holder may have advanced clinical responsibilities in other department areas dependent on service need [*delete as appropriate*].

Breast Imaging is provided at the following sites using a variety of imaging modalities.

Imaging Sites

• [each HB to add list of sites here and whether screening or symptomatic]

- The investigations undertaken in the Diagnostic Imaging service, including provision of images and reports are essential to allow optimal diagnostic and patient care processes to occur.
- All radiographic practice is undertaken in accordance with National Legislation: IR(ME)R 2017 (Ionising Radiation (Medical Exposures) Regulations 2017) and IRR 2017 (Ionising Radiation Regulations) and is subject to inspection by the IR(ME)R (HIS) and HSE Inspectors.

Clinical Activity

- Provide a comprehensive Breast Imaging service to patients and clinicians.
- To provide a mammogram report following mammogram examinations.
- Undertake breast ultrasound and report as required.
- Undertake Breast interventional procedures as required.
- Other (delete/add as appropriate).

Clinical Provision

[Boards to indicate days times etc as appropriate]

Staff Responsibility

Within the highly specialised area of Breast Imaging the post holder has associated management responsibility for:

- Training, induction, competency, and supervision of Senior Advanced Practitioners, Advanced Practitioners and Trainee Advanced Practitioners rotating through their specialised areas
- Training, induction, competency, and supervision of staff rotating through their specialised areas.
- Supervise the workload of relevant staff and direct porters as required.
- Supervise and educate student Radiographers on clinical placement and students from other disciplines i.e. Medical, Nursing, and AHPs.
- Health and Safety.
- IRMER and IRR.
- Liaising with other staff groups, including Medical, Nursing, Clerical and Portering.

4. ORGANISATIONAL POSITION

[Local Board to provide]

5. ROLE OF THE DEPARTMENT

- Provide a high quality, efficient and effective Breast Imaging service to the local population.
- Provide a high quality, efficient and effective Breast Imaging service to the local population

- Diagnostic imaging equipment is used to carry out breast imaging investigations on patients and reports are provided to referring clinicians and to the Breast Care team. The reports provide a diagnosis of the patient's condition in order to decide on an effective course of treatment and care.
- The postholder will enhance the service provided to the public, by providing expertise in this specialist area.

6. KEY RESULT AREAS

It is the postholder's responsibility to minimise radiation dose and risks to patients, staff, relatives, general public and self. Post holders using their expertise can authorise additional imaging/radiation dose if the need out ways the risk.

Clinical

- Demonstrate ability to act as a recognised expert within diagnostic imaging, providing specialist advice to clinicians as appropriate.
- To independently undertake and provide an autonomous reporting service for mammograms, breast ultrasound, and breast interventional procedures by analysing, interpreting and issuing an independent report from within the reporting team structure and when necessary discussing the findings with the relevant clinician.
- Provide expert advice to clinicians on the nature of diagnostic images/reports.
- To recognise and ensure urgent findings are communicated to the appropriate clinician, and patients are directed accordingly.
- Liaise with other staff specialities and draw on experience where clarification is required to ensure the most appropriate treatment or further assessment in line with established care pathway, determining the need for additional investigations based on image appearance.
- Within area of expertise train, monitor and evaluate professional standards and provide professional advice contributing to effective service delivery.
- Care for the needs and welfare of every patient.
- To communicate in writing (via RIS or other management platform) the final clinical reports on mammographic reporting, breast ultrasound, and breast intervention.
- Maintain accurate patient records by input of accurate information to reflect the service provided and meet professional standards.
- Lead in the development of the Breast Imaging service.
- Comply with Scope of Practice and schemes of work and associated clinical governance, risk assessment and audit in own specialist field.
- Deliver presentations / training sessions to enhance knowledge of and provide clinical update for Breast imaging to colleagues and clinicians.
- Responsible for delivering findings of audits of practice to groups of staff, working parties etc.
- On a daily basis multi task between using pieces of highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the services provided.
- Make decisions in complex and unpredictable circumstances, e.g. rearrange workload in event of equipment failure, which would have an impact on other service users.

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- Ensure appropriate infection control measures are implemented to maintain a clean and safe working environment for both patients and staff and sterile environment for interventional procedures.
- Actively contribute to MDT.
- Ensure that the level of staffing in the Breast Imaging Service provision meets service standards.
- Plan own workload and prioritise the investigations for patients.
- Carry out a wide range of Breast Imaging Investigations using a variety of specialised equipment.
- Ensure effective communication and delivery of care, prioritising work depending on severity of patient condition.
- Establish standards and guidelines for best practice in Breast Imaging.
- Supervise Advanced Practitioners, Trainee Advanced practitioners and other staff within the service.

Legal and Ethical responsibilities

- The practitioner will require to practice within the legal and ethical framework as established by the Health Professions Council.
- Will be able to evaluate legal, ethical and professional issues and contribute to discussions that will inform ethical decision making by the breast care team.
- The Practitioner will be required to adhere to IRMER regulations.

Managerial

- Influence the national policy agenda in Breast Imaging.
- Direct new patient care strategies and care pathways and promote the Breast Imaging service.
- Development the Breast Imaging service and ensure teamwork with other members of the team.
- Produce and deliver presentations on Breast Imaging service and other topics to multi disciplinary groups.
- Ensure Senior Advanced Practitioners, Advanced Practitioners, Trainee Advanced Practitioners and mammographers are committed to departmental audit and Quality Assurance to maintain effective Clinical Governance.
- Plan delivery of education, training, multi-disciplinary and research activities.
- Maintain knowledge of technological and technical advances in order to promote a culture of continuous improvement.
- Supervise Senior Advanced Practitioners, Advanced Practitioners, Trainee Advanced Practitioners and other staff relevant staff, be responsible for the safe use of imaging equipment and provide clinical training.
- Over see an effective patient appointment or scheduling system.
- Contribute to the development, implementation and maintenance of departmental policies, procedures, standards and protocols, and 'Local Radiation rules' all of which have an impact on other service users.
- Monitor supplies / consumables to ensure the delivery of a quality service within budgetary constraints.
- Ensure a timely and accurate service.
- To attend multidisciplinary and management meetings as required.

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- Identify equipment malfunctions to maintain a comprehensive and accurate record of faults, ensuring that all appropriate staff are kept up to date as to the working status of equipment.
- Comply and implement Hospital policies and procedures with respect to patient care, i.e.:
 - Health and Safety
 - Infection Control
 - Control of Substances
 - Hazardous to Health (COSHH)
 - IR(ME)R 2017 and IRR17
 - Risk Management
 - Radiation Protection Procedures
 - Quality Assurance Programme
 - Clinical Governance
 - Research and Development
 - Education and Training

Human Resources

To be Involved in:

- Recruitment and retention (through interview process).
- To motivate and inspire the Breast Imaging team through extended professional role.
- To develop staff utilising mentorship, appraisal and personal development plans (PDP).

Information Resources and Skills

- In-put patient data and supervise other members of staff using:
 - Radiology Information System (RIS) or other management platform used to input and access patient information relating to Breast Imaging investigations in order to review previous procedures and clinical history, record current examination details, view and dictate reports.
 - Digital Radiography Systems (DRS) Images are viewed on remote operator panels prior to being accepted onto the archiving system. This allows for assessment of image quality prior to archive.
 - Picture archive and communication system (PACS) used on a daily basis to retrieve previous examinations and store current images. Used to copy images onto film for use in theatre or for transfer to other hospitals.
- Regularly use computer software programmes such as Microsoft Word and Excel to create documents and tables. e.g. for Quality assurance and audit purposes.
- Use of voice recognition technology, have a comprehensive knowledge of the Radiology Information, Reporting Systems and PACS; utilise systems to input and retrieve patient details, reports and statistics; retrieve and analyse data for the purpose of audit.
- If available, use proprietary brand document control systems to record polices, procedures and other documents.

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- Daily management/ housekeeping and troubleshooting of Breast imaging area IT systems creating seamless acquisition, storage, retrieval and display of digital patient images.
- Access the internet, e-mail and facility intranet with relevance to personal and professional development and departmental business e.g. ordering of supplies etc.

Research and Development

- Regularly undertake Clinical Effectiveness and Quality Assurance.
- Use audit to continually improve practice and development of Breast Imaging service.
- Lead planning and organising of service provision, e.g. monitor and evaluate service demand including staffing levels and assessing workload.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Lead the technical and patient focused aspects of the department's audit programme.
- Provide guidance, supervision and support for staff undertaking research, audit or teaching activities.

Educational

- Actively involved in training and education, to influence and support educational developments of the multidisciplinary team in relation to the Breast Imaging Service.
- Communicate specialist condition related information presents specialist and highly complex information to large groups such as MDT meetings.
- Maintain an extensive and contemporary knowledge of current practice by participating in ongoing personal education and development including mandatory training and actively pursuing continuous professional development keeping an up to date personal record, (PDP).
- The post holder, as the Team Lead, will supervise and support the work of Senior Advanced Practitioners, Advanced Practitioners, Trainee Advanced Practitioners and other staff within the service. Postholders may mentor Advanced practitioners promoting professional development within the department.
- Support the education and clinical training of both undergraduate and postgraduate students, both within NSS/Health Board and local Higher Education Institutions as required. Supporting new programmes of education and training to facilitate changes in practice, developing a lifelong learning culture within the Breast Imaging department.
- Maintain knowledge of technological advances in methods of Breast Imaging in order to promote a culture of continuous improvement within the department.
- Develop and maintain robust training and educational frameworks that are responsive to individual and service needs as appropriate.
- Maintain an in depth knowledge of specialist equipment used.
- As a reviewer carry out annual PDP interviews with Senior Advanced Practitioners, Advanced Practitioners, Trainee Advanced Practitioners and other staff within the service.

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7. SYSTEMS, EQUIPMENT AND MACHINERY

A variety of specialised investigative and Breast Imaging equipment is utilised which comprise of multifunctional controls. The equipment is operator dependent and requires specific skills to achieve images of diagnostic quality. Below is a list of the Breast Imaging equipment. Post holders use the majority of the equipment relevant to their department. Breast Imaging equipment ranges from £xxx to £xxx. [Boards to modify as appropriate]

- Reporting Workstations.
- Picture Archiving and Communication System (PACS).
- Radiology Information Systems (RIS) or other management platform
- Voice recognition platform
- Trakcare or other PAS
- Digital Radiography Systems (DR mammography units)
- Ultrasound units
- Personal Computers
- Label printers associated with Radiology Information System (RIS)
- Manual Handling Aids: Mechanical patient hoists, PAT slides, GLIDE sheets
- Immobilisation devices e.g. foam pads
- Protective equipment, incl. Lead rubber aprons
- Suction, Oxygen, emergency drugs tray

8. ASSIGNMENT AND REVIEW OF WORK

- Operate autonomously at clinical expert level, providing broad guidance and principals to manage the responsibilities of the post within the team structure.
- Support and supervision will be available in accordance with NES guidelines for the postholder within their department.
- Make autonomous decisions on a daily basis, providing expert advice to junior staff in clinical decision making for a multi-disciplinary team including medical staff, regarding patient care on a daily basis.
- Undertake appraisal and PDP programme.

9. DECISIONS AND JUDGEMENTS

- Independently undertake, analyse, interpret and report images/breast ultrasound/interventional procedures as agreed by Scope of Practice and Scheme of work.
- Issue autonomous reports and discuss findings with relevant clinicians. This
 involves incorporating the clinical history, findings, triple assessment and
 knowledge of normal anatomy, pathology and disease processes to perform
 the task effectively and accurately. This enables prompt and appropriate
 action as regards further investigations and /or management.
- Take decisions that the area visualised is the correct area for investigation.
- Decide if sufficient specimens have been taken.

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- Decide if further interventions are required.
- Advise and implement protocols and procedures for the optimum demonstration of pathology.
- Clinically evaluate images produced by team members to assess quality and determine need for further imaging prior to patient departure from department.
- Monitor and evaluate professional standards and provide expert clinical and professional advice. Where a clinician disagrees, have the depth of specialised knowledge required to debate and agree a plan.
- Apply analytical judgement to problem solving and improving service delivery.
- Act as Mentor to Senior Advanced Practitioners, Advanced practitioners, Trainee Advanced Practitioners and other staff not performing to accepted standards of work and teach/train them to achieve appropriate standards and competency.
- Exercise personal responsibility and make decisions based on knowledge and experience in complex and unpredictable circumstances when undertaking clinical duties.
- Assess mental, physical and emotional condition of patients prior to and during investigation, and to adapt techniques accordingly, in order to provide the best possible image.
- Identify and respond to significant service difficulties in a proactive manner taking into account individual, service and organisational risk factors.
- Make decisions on managing the service while giving support to referrers and colleagues in the event of equipment breakdown.
- Ensure that appropriate skill mix is maintained at all times to achieve the desired quality of patient care.
- Frequently reassess workload to provide optimum utilisation of staff resources.
- Assess mental, physical and emotional condition of patient prior to and during examination, and to adapt techniques accordingly, in order to provide the best possible image.

10. MOST CHALLENGING / DIFFICULT PARTS OF THE JOB

- Maintaining a minimum reporting accuracy level of 95%.
- Deciding on level of suspicion using knowledge and experience to determine whether normal or abnormal and organise further appropriate investigation.
- Frequent need for long periods of intense concentration to report on examinations within a limited timescale.
- Maintain clinical expertise whilst continuing with research and development to influence national policy.
- Maintaining a balance between reporting and other clinical duties.
- To be able to multitask between using highly specialised equipment and dealing with frequent interruptions for advice/information on any aspect of the service provided.
- Cope with the mental and physical demands of working in emotional areas supporting patients though investigations.
- Exposure to cases where the patient's prognosis is poor.

- Combining training in new techniques or newly procured equipment with normal patient workload, keeping up to date with CPD and ever changing technology.
- Speaking to patients, particularly when breaking bad news.
- To meet key national waiting times and manage the significant workload, balancing contact and varied demands.
- Ensure that staff are involved in and contribute to department objectives to deliver improvements in service.
- Train, supervise and assess other staff with varying degrees of experience and levels of competence, performing Breast Imaging investigations whilst maintaining patient care and throughput.
- •

13. COMMUNICATIONS & RELATIONSHIPS

Medical Staff / Other Health Care Professionals

- Issue autonomous reports on investigations within the confines of technology.
- Provide expert clinical advice in relation to breast imaging
- Relate highly sensitive patient information to and discuss with clinicians and colleagues.
- Discuss Breast imaging investigations with Clinicians as required
- Deliver CPD sessions to colleagues and clinicians.
- Liaise with medical and nursing, clerical and portering staff to ensure service delivery and efficient and timeous patient transfer and investigation preparation.
- Attend/lead team meetings.
- Actively contribute to and/or lead MDT
- Influence the national policy agenda by audit and local research
- Produce written papers for peer reviewed publication
- Communicate with external sources and advisors to maintain up to date knowledge.

Patients

- Communication skills are adapted to meet the needs of patients who may be anxious, aggressive or intoxicated, and with a variety of mental and physical abilities. The barriers to understanding must be overcome using clear, comprehensive, sympathetic and persuasive skills.
- Where patients have a barrier to understanding or are unable to communicate e.g. English is not their first language or they are confused, ensure that patients have the benefit of informed choice.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead.
- Highly developed skills are required to communicate often complex, sensitive results to patients, providing them with advice on the management and treatment of their condition in line with the established care pathway

Relatives / Carers

- Provide information using tact and diplomacy in the context of the standards of professional and personal conduct and within the regulations governing GDPR.
- Highly developed skills are required for providing and receiving complex and sensitive information and showing empathy to patients and relatives, e.g. when explaining procedure to patient and relative and the associated side effects and gaining consent for the procedure to go ahead.
- Provide reassurance and receive information about patient's capabilities.

Other Relevant Departments, for example, liaise with equipment engineers and estates on priority and deployment of resources, e.g. service arrangements/interventional cases.

- Estates, Supplies, Human Resources, Fire Officer, Infection Control
- Non NHS Staff
- Communicate and liaise with Equipment Manufacturers:
- Engineers
- Equipment Sales Representatives
- Company support staff

12. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical Skills:

- Enhanced keyboard skills for data entry to relevant systems, as well as to produce clinical and statistical reports.
- Using a high level of skill and accuracy when positioning patients for investigations.
- Have the expertise to handle and operate highly specialised and expensive equipment.

Physical Demands:

- Long periods of time spent in front of a workstation requiring high levels of concentration whilst undertaking Breast Imaging procedures.
- Long periods of standing when performing biopsies.
- Regularly undertake investigations in awkward positions e.g. leaning/stretching and pushing to obtain images of diagnostic quality.
- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Ergonomic issues should be addressed immediately to line management or OH. It is also recommended that film readers should look after their eye health having regular 2 yearly eye check-ups.

Mental Demands

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- Balancing constantly changing priorities whilst maintaining a high quality service.
- High level of concentration is required when analysing complex clinical images, producing reports or providing highly specialised advice.
- Be able to manage an unpredictable workload effectively and interact successfully with fellow healthcare professionals.
- Intense concentration when analysing complex clinical images/reports.
- Dealing with interruptions to concentration which results in a change of practice e.g. urgent phone calls from patients, consultants seeking advice etc.

Emotional Demands

- Working under pressure to ensure that waiting times are kept to a minimum.
- Working with patients who have cancer and identifying these cancers.
- Giving clinical results to patients that will often have serious consequences to their Health and well being- imparting unwelcome and distressing information to patients.

Daily Working Conditions

- Work within a darkened environment that is optimum for viewing and assessing diagnostic images on VDU, can work constantly in artificial lighting with little or no natural daylight.
- Frequent exposure to unpleasant odours, uncontained body fluids and infections.
- Exposure to infections such as MRSA, HepC.
- Occasional Risk of physical abuse from patients / carers who may be intoxicated, confused, or be IV drug abusers.

13. KNOWLEDGE, TRAINING AND/OR EXPERIENCE REQUIRED TO DO THE JOB

Essential qualifications:

- D.C.R. or BSc (Hons) in Diagnostic Radiography or alternative relevant first degree
- Registered with a relevant professional body
- Masters degree aiming towards doctoral level
- Postgraduate qualification in Breast Imaging reporting
- Post graduate CASE accredited qualification in Breast ultrasound
- Post graduate imaging in Breast Interventional procedures
- Working towards Masters degree/PhD

Experience:

- Evidence of CPD in specialist area
- Experience of leading service developments
- Experience of working at Advanced Practice level

Knowledge and awareness

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- Awareness of national agenda in Breast Imaging
- Computer literate and able to use data bases and spreadsheets
- Extensive knowledge of breast imaging and service involvement **Skills and abilities:**
- Evidence of working across professional and organisational boundaries internally and externally
- Evidence of working on own initiative and take responsibility and make decisions.
- Excellent verbal and written communication and presentation skills
- Evidence of managing complex clinical situations
- Evidence of a high level of analytical problem solving skills
- Interpersonal skills to negotiate influence and inspire
- Current and wide range of highly developed specialist technical and Healthcare knowledge.

Desirable qualifications

- Doctoral degree
- Project management experience
- Research experience
- Experience of writing for publication
- Teaching qualification

14. JOB DESCRIPTION AGREEMENT	
A separate job description will need to be signed off by each postholder to whom the job description applies.	
Job Holder's Signature:	Date:
Head of Department Signature:	Date:

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Appendix 4 – Job Planning

Example Consultant Job Plan

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM	MDT PREP OR BOOKED LIST	CLINIC	ADMIN/ CLINIC SUPPORT (TEACHING)	CLINIC	LEADERSHIP TASKS
РМ	MDT	CLINIC	CLINIC	2 BOOKED CASES/REPORTING	SPA

Job Planning - Consultant Radiographer should undertake all four pillars of practice. These are:

- Clinical Practice
- Leadership
- Facilitating Learning
- Evidence, Research and Development

The percentage of each aspect of the four pillars may vary locally, but Consultant radiographers should maintain a clinical role for ≥50% of their contracted hours.

TURAS have Advanced Practice Toolkit to support advanced practitioners. <u>NMAHP-Development-Framework.pdf (scot.nhs.uk)</u>

Health and Care Professions Council. *Professional Indemnity* [homepage on the internet]. London: Health and Care Professions Council; 2023 [updated 2018 June 14; cited 2023 July 19]. Available from: www.hcpc-uk.org/registration/your-registration/legal-guidelines/professional-indemnity/.

Health and Care Professions Council. *Standards of conduct, performance and ethics*. London: Health and Care Professions Council; 2023.

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Appendix 5 – Knowledge, Skills, and Attributes

Knowledge, Skills, and Attributes for each level. Information underpinned and evidenced by the NHS Scotland Career Framework, and the Society and College of Radiographers Education and Career Framework

N.B. it should be noted that there is no direct link between the levels of the Career Framework for Health, or the Education and Career Framework and Agenda of Change pay bands

	Level 7 Advanced Practitioner (Radiographer Practitioner or Breast Specialist)	Level 8 Senior Advanced Practitioner in Breast Imaging	Level 8 Consultant Practitioner (Consultant Radiographer or Consultant Breast Specialist)
<u>Career</u> <u>Framework</u> (scot.nhs.uk)	Experienced clinical practitioners with a high level of skill and theoretical knowledge. Will make high level clinical decisions and manage their own workload.	Experienced clinical practitioners working at a high level of expertise and/or have responsibility for supporting services.	Experienced clinical practitioners working at a very high level of expertise and/or have responsibility for planning services.
Qualifications expected at this level.	 HCPC Registered Radiographer or Allied health professional, working towards a full masters qualification, and having carried out at least one of these clinical pathway options at masters level: 1. Postgraduate qualification in mammography film interpretation. 2. Postgraduate qualification in image guided Interventional Breast Procedures. 3. Postgraduate qualification in Breast Medical Ultrasound. 	 HCPC Registered Radiographer or Allied health professional having carried out all of these clinical pathway options at master's level, working towards a master's qualification: 1. Postgraduate qualification in mammography film interpretation. 2. Postgraduate qualification in image guided Interventional Breast Procedures. 3. Postgraduate qualification in Breast Medical Ultrasound 	 HCPC Registered Radiographer or Allied health professional, to have a masters level degree and to be working towards a doctorate, having carried out all of these clinical pathway options at masters level: 1. Postgraduate qualification in mammography film interpretation. 2. Postgraduate qualification in image guided Interventional Breast Procedures. 3. Postgraduate qualification in Breast Medical Ultrasound
<u>Career</u> <u>Framework</u> (scot.nhs.uk)	Post Graduate Certificate/Diploma; Masters Degree Scottish Credit and Qualifications Framework (SCQF) level 11	Masters Degree; Scottish Vocational Qualification (SVQ) 5 SCQF level 11/12	Masters Degree; Doctorate; SVQ 5 SCQF level 11/12

Expected	Full Masters;	Full Masters;	Master's degree with expectation of
qualifications Education and Career	Completion of NHS Leadership Academy	Completion of NHS Leadership Academy	completing a doctoral qualification SCQF level 11/12
<u>Framework for</u> <u>the</u> <u>Radiography</u> <u>Workforce </u> <u>SoR</u>	SCQF level 11	SCQF level 11	
<u>Career</u> <u>Framework</u> (scot.nhs.uk)	Critical awareness of knowledge issues in specialist area and at the interface between different fields. Innovative, with responsibility for	Highly specialised knowledge, some at the forefront of knowledge, used as the basis for original thinking and/or research.	Highly specialised knowledge, some at the forefront of knowledge, used as the basis for original thinking and/or research.
Attributes	developing and changing practice and/or services in a complex and unpredictable environment.	Has considerable responsibility, researching and analysing complex processes. Responsibility for supporting service improvement/development. Considerable management responsibilities and accountability for service delivery/supporting education or commissioning.	Leads with considerable responsibility, researching and analysing complex processes. Responsibility for service improvement/development. Considerable management responsibilities and accountability for service delivery/leading education or commissioning.
Education and Career Framework for the Radiography Workforce SoR Attributes	Practice autonomously High levels of professionalism Works collaboratively Works under pressure Self-motivated Responsive leadership Lead in challenging situations involving patients, carers, and	Practice autonomously High levels of professionalism Works collaboratively Works under pressure Self-motivated Responsive leadership Lead in challenging situations involving patients, carers, and	Practises autonomously Demonstrates strategic role of the Consultant Practitioner. Role model for professionalism and critical thinking. Evidence of operating at high standards across all four pillars. Communicates highly
	MDT's	MDT's	complex/uncertain issues to a wide

	Cumpert le ernere	Cumpert les mere	repare of stalkaholders Extension
	Support learners Lead on research projects	Support learners Lead on research projects	range of stakeholders. Extensive leadership, and influencing
	Lead off research projects	Role model for professionalism and	qualities, with authority to negotiate
		critical thinking.	improved professional and clinical
		Evidence of operating at high	outcomes.
		standards across all four pillars.	Ability to focus on the immediate
			and long-term requirements of
			service provision, considering
			broad factors impacting on service
			delivery.
			Actively support, contribute, and
			promote professional, and
			government bodies, and Higher
			Education Institutions (HEIs).
			Support cultures of physical and
			psychological safety.
			Lead a research culture.
	General KSA's	General KSA's	General KSA's
Knowledge	$\sqrt{\text{Knowledge of the rapid access}}$	In addition to all Level 7 General	In addition to all Level 7 General
Skills and	model of breast assessment in	KSA's	KSA's
Attributes	secondary care including; the		
(KSA)	referral pathways, vetting	✓ Under indirect supervision	✓ Independently manage a Rapid
	processes; triple assessment, MDT	manage a Rapid Access Clinic	Access Clinic case load from
	and results communications.	case load from referral to MDT.	referral to MDT.
General KSA's	\checkmark Knowledge of the Scottish Breast	\checkmark If working in breast screening,	\checkmark If working in breast screening,
	Screening Programmes and/or	under indirect supervision manage	independently manage a Breast
	symptomatic services, including;	a Breast Screening assessment	Screening assessment clinic from
	the invitation system, screening or	clinic from recall to screening MDT.	recall to screening MDT.
	symptomatic pathway, reading	\sqrt{Act} as a point of contact for	\sqrt{Act} as an expert resource and
	protocols, assessment techniques,	breast problems informing the MDT	point of contact for breast problems
		as required.	informing the MDT as required.

commun √ Skills in and com patients, including imparting and offer √ Comm ways that relations and shar appropria effectivel expedite care √ Demor reasonin of a clinic establish opinion v √ Demor judgeme other pra primary of ensure s person c √ Critical	a communicating difficult plex information to relatives and carers breaking bad news, prognostic information ing onward referral. unicate with colleagues in t build and sustain hips, seeking, gathering ing information ately, efficiently and y to and integrate individuals' strate advanced clinical g skills to ensure all facets cal diagnosis can be ed and seek a medical where appropriate. strate timely professional nt and action to involve ctitioners both within the care team and wider to afe, effective, timely and entred care.	Develop effective working relationships with all members of primary care, specialist teams and third sector parties so effectively influencing cultural understanding, beliefs and expectations as new models of care evolve.	Develop effective working relationships with all members of primary care, specialist teams and third sector parties so effectively influencing cultural understanding, beliefs and expectations as new models of care evolve.
ensure s person c	afe, effective, timely and entred care.		
obtained account	in the history, taking of the potential for breast s to be features of		
	or 'non breast' conditions,		

	indicative of serious pathology,		
	compounded by psychological and		
	mental health factors, and affected		
	by lifestyle factors.		
	\sqrt{M} Manage risk and uncertainty and		
	emotional exposure, including that		
	experienced by patient, families,		
	carers and clinicians.		
	$\sqrt{\text{Request relevant investigations}}$		
	and interpret test results within a		
	defined scope of practice to		
	support a clinical diagnosis and act		
	appropriately, demonstrating an		
	understanding of the indications and limitations of different tests to		
	inform decision-making.		
	✓ Where service requirement exists, provision of advice,		
	prescription or administration of		
	medication within scope of practice.		
	medication within scope of practice.		
Pillars of	Clinical Practice	Clinical Practice	Clinical Practice
Practice			
Knowledge	$\sqrt{1}$ Providing knowledge of the	To achieve all Level 7 KSBs in all	To achieve all Level 7 KSBs in all
Skills and	indications of mammography	three clinical areas;	three clinical areas;
Attributes	including extra mammographic	Mammographic Film Interpretation,	Mammographic Film Interpretation,
	views: interpreting and critical	Interventional Breast Procedures	Image guided Interventional Breast
	analysing the mammographic	and Breast Medical Ultrasound.	Procedures and
Mammography	findings; producing a diagnostic		Breast Medical Ultrasound.
Film	report and suggesting further		
Interpretation	imaging within a locally agreed		
	non-medical referral protocol.		

	✓ Breast tomosynthesis reporting (if		
	present within the department);		
	Interpreting and critically analysing		
	tomosynthesis findings and		
	producing a diagnostic report,		
	suggesting further imaging within a		
	locally agreed non-medical referral		
	protocol when appropriate.		
	✓ Adhering to IRMER regulation		
	procedures within the patient's		
	pathway.		
	$\sqrt{\text{Participate, if possible, in annual}}$		
	PERFORMs in auditing		
	Mammographic Performance or an		
	alternative auditing process.		
	alternative additing process.		
Knowledge	$\sqrt{1}$ To safely perform image guided	To achieve all Level 7 KSBs in all	To achieve all Level 7 KSBs in all
Skills and	procedures/diagnostic biopsy, large	three clinical areas;	three clinical areas;
Attributes	volume diagnostic biopsy and large	Mammographic Film Interpretation,	Mammographic Film Interpretation,
Allibules	volume excision biopsy.	Interventional Breast Procedures	Image guided Interventional Breast
Image guided	$\sqrt{\text{Must have knowledge of the}}$	and Breast Medical Ultrasound.	Procedures and
interventional	indications for and	and breast medical Onlasound.	Breast Medical Ultrasound.
procedures	contraindications to biopsy,		
procedures	• •		
	obtaining informed verbal consent; taking a relevant medical, drug and		
	allergy history; instillation of local		
	anaesthetic; performing biopsy		
	safely and effectively; producing a		
	report on the procedure; correlating		
	histopathology results with imaging		
	findings; auditing your performance		

	and benchmarking against agreed standards.		
Knowledge Skills and Attributes Breast Medical Ultrasound	Diagnostic breast ultrasound including: knowledge of the indications for targeted and whole breast and axillary ultrasound; performing a targeted breast ultrasound examination of a symptomatic patient with a palpable lump; performing a targeted breast ultrasound examination of an asymptomatic patient with a mammographic or cross-sectional imaging abnormality; interpreting and critically analysing ultrasound findings; producing a diagnostic report and suggesting further imaging within a locally agreed non-medical referral protocol when appropriate.	To achieve all Level 7 KSBs in all three clinical areas; Mammographic Film Interpretation, Interventional Breast Procedures and Breast Medical Ultrasound.	To achieve all Level 7 KSBs in all three clinical areas; Mammographic Film Interpretation, Image guided Interventional Breast Procedures and Breast Medical Ultrasound.
	breast and axillary fine needle aspiration and diagnostic breast and axillary core biopsy. √ Must have knowledge of the indications for and contraindications to fine needle aspiration/core biopsy, obtaining informed verbal consent;		

Scottish Clinical Imaging Network (SCIN)

National Framework National Framework for Advanced Practice in Breast Imaging

performing fine needle aspiration/core biopsy safely and effectively; producing a report on the procedure; correlating cytopathology results with imaging findings; auditing your FNA/biopsy performance and benchmarking against agreed standards.

 $\sqrt{\text{US}}$ guided deployment of tissue marker including: knowledge of the indications for insertion of a tissue marker; the ability to explain the procedure and relevant risks to the patient and obtain verbal informed consent; taking a relevant medical, drug and allergy history; instillation of local anaesthetic; safe and accurate technique for placement of tissue marker and the ability to critically appraise the position of the tissue marker on the check mammograms; produce a radiology report for US guided deployment of a tissue marker. guided localisation including knowledge and understanding of the indications for localisation; critically evaluating the best localisation technique in conjunction with clinical colleagues; obtaining informed verbal consent;

	taking a relevant medical, drug and allergy history; instillation of local anaesthetic; safe and accurate placement of localisation devices; the ability to critically appraise the position of the localisation device on the check mammograms √ Clinical examination of the breasts and axillae including critical evaluation, grading of the findings and reporting findings to the referrer and/or primary care professionals as part of triple assessment.		
	Clinical Practice	Clinical Practice	Clinical Practice
<u>Career</u> <u>Framework</u> (scot.nhs.uk)	Apply advanced skills, knowledge and behaviours relevant to specific area of practice	Apply expert knowledge and skills appropriate to own area of practice and the wider service	Apply expert knowledge and skills appropriate to own area of practice and the wider service
Clinical Practice Safe, Effective and	Manage complexity, diagnose and direct care/interventions evaluating effectiveness	Champion values based care and professionalism	Champion values based care and professionalism
Person-		Sound knowledge of legislation,	Expert knowledge of legislation,
Centred Care	Develop the implementation of polices, protocols/procedures to reflect national policy and legislation	professional regulation and codes of practice to develop, contribute to and establish protocols and procedures at operational and strategic levels	professional regulation and codes of practice to develop, lead and establish protocols and procedures at operational and strategic levels
	Lead on implementation of clinical governance in own and others area of practice	Lead on safe, effective and person- centred practice	Innovate, develop and lead on safe, effective and person-centred practice

	Document and report clearly to ensure accuracy, continuity of care and enhance understanding by others.	Demonstrate knowledge of the principles of health improvement programme planning, implementation and evaluation	Demonstrate knowledge of the principles of health improvement programme planning, implementation and evaluation
	Interpret and respond to patient/carer feedback suggestions and complaints in a timely and sensitive manner		
	Use interpersonal skills to develop and promote a culture that promotes patient-centred, safe and effective care		
	Create opportunities for patients/carers to feedback on experiences of care		
	Encourage others to listen to and respond to feedback from patients and carers		
Clinical Practice Professional Judgement and Decision Making	Work positively with difference and diversity Understand monitoring of health and wellbeing needs and outcomes	Understand and apply new and emerging guidance and legislation that govern legal and ethical aspects of service provision	Understand and apply new and emerging guidance and legislation that govern legal and ethical aspects of service provision

	Quickly analyse complex situations, identify important aspects and take appropriate action Use critical thinking to analyse	Promote expert level critical thinking to analyse evidence, enabling high level judgement and decision making	Promote expert level critical thinking to analyse evidence, enabling high level judgement and decision making
	evidence and situations enabling high level judgement and decision making	Use the principles of clinical governance, clinical supervision and clinical audit to lead, manage and develop the legal and ethical aspects of service development and delivery	Use the principles of clinical governance, clinical supervision and clinical audit to lead, manage and develop the legal and ethical aspects of service development and delivery
		Exercise expert levels of clinical, operational and strategic decision making	Exercise expert levels of clinical, operational and strategic decision making
	Clinical Practice	Clinical Practice	Clinical Practice
Education and	Education and expertise to support	Education and expertise to support	Expert level clinical practice,
Career	Education and expertise to support increased problem solving and	Education and expertise to support increased problem solving and	Expert level clinical practice, applying knowledge for
<u>Career</u> Framework for	Education and expertise to support increased problem solving and clinical decision making and	Education and expertise to support increased problem solving and clinical decision making and	Expert level clinical practice, applying knowledge for implementation and evaluation of
<u>Career</u> Framework for the	Education and expertise to support increased problem solving and	Education and expertise to support increased problem solving and	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level
<u>Career</u> Framework for the Radiography	Education and expertise to support increased problem solving and clinical decision making and developing practice.	Education and expertise to support increased problem solving and clinical decision making and developing practice.	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level service leadership and
<u>Career</u> Framework for the Radiography Workforce	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level
<u>Career</u> Framework for the Radiography	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level service leadership and development.
<u>Career</u> Framework for the Radiography Workforce SoR	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level service leadership and
Career Framework for the Radiography Workforce SoR Clinical	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high degree of autonomy. Promotes critical thinking by	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high degree of autonomy. Promotes critical thinking by	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level service leadership and development. Promotes critical thinking by analysing, evaluating and synthesising information which may
Career Framework for the Radiography Workforce SoR Clinical	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high degree of autonomy.	Education and expertise to support increased problem solving and clinical decision making and developing practice. Advanced clinical skills, providing support and advice with a high degree of autonomy.	Expert level clinical practice, applying knowledge for implementation and evaluation of protocols and strategic level service leadership and development. Promotes critical thinking by analysing, evaluating and

	Communicate complex and uncertain findings to all stakeholders. Lead practice/service development, using evidence to inform developments.	Communicate complex and uncertain findings to all stakeholders. Lead practice/service development, using evidence to inform developments. Champion equality and diversity principles and role model values based practice and professionalism.	Uses a wide range of strategies to communication complex matters, influence and develop guidance and legislation to lead service developments. Champion equality and diversity principles and role model values based practice and professionalism. Strategically lead and innovate effective person centred care.
	Facilitation of Learning	Facilitation of Learning	Facilitation of Learning
Knowledge Skills and Attributes Facilitation of Learning	 ✓ Participate in peer to peer learning with the goal to identify and minimise potential sources of error in diagnostic imaging. ✓ Engage in reflective practice and clinical supervision as an integral part of their professional development and to inform service development and quality improvement with reference to local needs. ✓ Act as an experienced work based learning educator/assessor. ✓ Role model, encourage and support teaching, supervision and mentorship skills in others. 	To achieve all of the level 7 KSBs including: √ Act as an experienced mentor/clinical coach/supervisor. √ Act on intelligence from educational audits to strengthen the workplace as a positive learning environment. √ Role model skills in assessment of competence.	To achieve all of the above level 7 KSBs including: ✓ Act as an experienced mentor/clinical coach/supervisor. ✓ Act on intelligence from educational audits to strengthen the workplace as a positive learning environment. ✓ Role model skills in assessment of competence. ✓ Work with the HEIs to enhance education opportunities.

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Radiography Workforce SoR Education	Critically assess educational provision through learner feedback and promote positive learning cultures for students, staff and service users. Supervise/mentor/coach to support others. Where applicable, support curriculum design, development and delivery for HEI providers.	Support others to develop reflective practice. Support positive impact and creation of opportunities for others to develop learning, teaching and assessment skills across the organisation. Supervise/mentor/coach to support others. Where applicable, support curriculum design, development and delivery for HEI providers.	Support others to develop reflective practice. Evidence positive impact and creation of opportunities for others to develop learning, teaching and assessment skills across the organisation. Act as a facilitator/mentor/support to develop others roles across the organisation. Engage with HEI's contributing to curriculum development and delivery.
	Leadership	Leadership	Leadership
Knowledge Skills and Attributes	 ✓ Excellent organisational skills ✓ Creativity and innovation in exploring and implementing possible solutions ✓ Management and leadership 	To achieve all of the above leadership level 7 KSBs including: √ Present complex information effectively in written and oral reports	To achieve all of the above leadership level 7 KSBs including: √ Present complex information effectively in written and oral reports
Leadership	skills that contribute to successful change √ Lead and influence others effectively √ Respond appropriately to queries and complaints √ Negotiate assertively and present positive self-image	 ✓ Use advanced written and oral communication skills. ✓ Engage with colleagues using a person-centred critical approach by: - a. Listening to, and appreciating the complexity of, a range of views and adopting effective questioning techniques. b. Displaying a sensitive manner and using appropriate language within a range of situations 	 ✓ Use advanced written and oral communication skills. ✓ Engage with colleagues using a person-centred critical approach by: - a. Listening to, and appreciating the complexity of, a range of views and adopting effective questioning techniques b. Displaying a sensitive manner and using appropriate language within a range of situations

		 ✓ Support implementation of local and national strategies and policies. ✓ Engage and contribute to local error governance procedures in diagnostic imaging. 	 ✓ Support implementation of local and national strategies and policies ✓ Engage and contribute to local error governance and complaint handling procedures in diagnostic imaging.
	Leadership	Leadership	Leadership
<u>Career</u>	Apply team building and group	Influence the wider strategic	Influence the wider strategic
Framework	working models	direction for workforce planning	direction for workforce planning
<u>(scot.nhs.uk)</u>	Build evidenced business cases for	and development Act as a coach and mentor to a	and development Act as a coach and mentor to a
Teamwork and	team workforce development. Use conflict management and	wide range of staff	wide range of staff
development	resolution strategies.	while range of stan	wide range of stan
dovolopinom	Apply understanding of NHS KSF		
	to enhance team performance.		
Professional	Excellent organisational skills	Stakeholder involvement	Strategic management
and	Creativity and innovation in	Impact assessment	Advanced project planning and
organisational	exploring and implementing	Development of an outcomes	management
leadership	solutions	focused business case	Financial management
	Management and leadership	Critical thinking, analysis and	Stakeholder involvement
	contributing to successful change	synthesis	Impact assessment Development of an outcomes
	Support implementation of local	Report effectively for complex	focused business case
	and national strategies/policies	situations and contexts	Critical thinking, analysis and
	Demonstrate partnership working	Use highly specialised theoretical	synthesis
	Effectively manage a budget	and practice knowledge to solve	,
	Lead and influence others	problems and make decisions	Report effectively for complex
	effectively		situations and contexts

	Respond appropriately to queries and complaints Negotiate assertively Present positive self-image Use advanced communication skills Present complex information effectively Engage with colleagues using a person-centred critical approach by: - Listening and appreciating the complexity of a range of views and adopt effective questioning techniques Displaying a sensitive manner, using appropriate language within a range of situations	Assess situations and identify cause of complex/unpredictable problems in unfamiliar environments. Implement local, national and professional strategy and policy Use critical reading skills to analyse and synthesise information Interpret health information, statistics and research data Model advanced communication and interpersonal skills Deliver presentations and write reports clearly and articulately	Use highly specialised theoretical and practice knowledge to solve problems and make decisions Assess situations and identify cause of complex/unpredictable problems in unfamiliar environments. Lead and implement local, national and professional strategy and policy Use critical reading skills to analyse and synthesise information Interpret health information, statistics and research data Use influencing and political lobbying skills Model advanced communication and interpersonal skills Deliver presentations and write reports clearly and articulately
	Leadership	Leadership	Leadership
Education and Career Framework for the Radiography Workforce SoR Leadership and management	Leadership skills are essential for effective, efficient and timely person centred patient care. Lead services and teams, including operational management, and beyond to influence/implement policy and practice.	Develop and apply expert knowledge, skills, and attributes in specialist practice and wider service. Lead services and teams, including operational management, and beyond to influence/implement policy and practice.	Lead on promotion, development and application of expert knowledge, skills, and attributes in specialist practice and wider service. Leadership skills are essential to effective, efficient and timely person centred patient care. Lead services to provide operational management.

	Lead interprofessional teams across pathways. Proactive, creative leadership, supporting others to develop these qualities.	Leadership skills are essential to effective, efficient and timely person centred patient care. Transformative and compassionate leadership, to influence policy and improve interprofessional care pathways. support workforce in alignment with national priorities.	Transformative and compassionate leadership, to influence policy and improve interprofessional care pathways. Collaborate across stakeholder groups and organisations to lead services. Develop workforce in alignment with national priorities.
	Research and Development	Research and Development	Research and Development
Knowledge	✓ Further enhance knowledge of	Further enhance knowledge of	✓ Further enhance knowledge of
Skills and	research approaches including	research approaches including	research approaches including
Attributes	advanced evaluation methods.	advanced evaluation methods	advanced evaluation methods
	✓ Demonstrate understanding of	✓ Demonstrate understanding of	✓ Demonstrate understanding of
	research proposal application	research proposal application	research proposal application
Evidence,	development, ethical approval	development, ethical approval	development, ethical approval
Research and	process and funding sources.	process and funding sources	process and funding sources
Development	√ Use understanding of research	Vork collaboratively across	√ Use understanding of research
	and information governance to	agencies and boundaries to	and information governance to
	support others in the research	improve breast awareness, breast	support others in the research
	process.	related health outcomes and	process
	✓ Use audit to inform service	reduce health inequalities	√ Write for publication and
	development	\checkmark Continually evaluate and assess	contribute to peer review
		quality issues within Breast	✓ Work collaboratively across
		Imaging i.e. clinical governance	agencies and boundaries to
		and audit.	improve breast awareness, breast
			related health outcomes and
			reduce health inequalities

			 ✓ Continually evaluate and assess quality issues within Breast Imaging i.e. clinical governance and audit.
	Research and Development	Research and Development	Research and Development
<u>Career</u>	Enhance knowledge of research	Critically review literature and	Critically review literature and
<u>Framework</u>	approaches including advanced	present high level information	present high level information
<u>(scot.nhs.uk)</u>	evaluation methods.	clearly/concisely.	clearly/concisely.
		Understand and support use of	Understand and support use of
	Demonstrate understanding of	advanced research methods.	advanced research methods.
Evidence into	research proposal application	Understand the responsibilities of a	Understand the responsibilities of a
practice	development, ethical approval	principal Investigator e.g.	principal Investigator e.g.
	process and funding sources.	functions/processes of ethical and research committees.	functions/processes of ethical and research committees.
	Use understanding of research and	Write critically including analysis,	Write critically including analysis,
	information governance to support	synthesis and interpretation of the	synthesis and interpretation of the
	others in the research process.	evidence base to underpin practice.	evidence base to underpin practice.
	outers in the research process.	Establish appropriate polices and	Establish appropriate polices and
	Write for publication and contribute	ensure support for clinical research	ensure support for clinical research
	to peer review	activity and adherence to research	activity and adherence to research
	•	governance.	governance.
		Lead/Participate in cross	Lead/Participate in cross
		professional and/or cross	professional and/or cross
		organisational research	organisational research
		programmes.	programmes.
	Research and Development	Research and Development	Research and Development
Education and	Routinely engage with and use	Sound knowledge, some at the	Specialised knowledge, some at
<u>Career</u>	research, ensuring own and team	forefront of practice, used as the	the forefront of practice, used as
Framework for	practice aligns with the current	basis for research.	the basis for research.
<u>the</u>	evidence base.		

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<u>Radiography</u>	Support and develop clinical audit	Critical understanding of differing	Critical understanding of differing
Workforce	and service evaluation skills for	research approaches, methods of	research approaches, methods of
<u>SoR</u>	optimum service delivery.	analysis, enabling development	analysis, enabling development
	Where possible, take part in clinical	through a supportive culture of	through a supportive culture of
Research and	trials or in leading data collection in	sharing good practice.	sharing good practice.
development	area of speciality.	Generate innovative solutions to	Generate innovative solutions to
-	Where possible, develop own	complex problems by applying	complex problems by applying
	research or work with teams to	knowledge and skills to make	knowledge and skills to make
	deliver an evidence base e.g.	decisions and support others in	decisions and support others in
	collaborating with academics,	decision making.	decision making.
	industry and methodological	Support others to develop	Support others to develop
	experts to develop, deliver and	research.	research.
	disseminate own research.	Encourage critical appraisal and	Encourage critical appraisal and
	A full MSc provides the skills to	synthesis of evidence to inform	synthesis of evidence to inform
	underpin research activity, be that	practice evolution.	practice evolution.
	empirical or qualitative research.	Responsibility for embedding best	Strategic responsibility for
		research governance including	embedding best research
		good clinical practice research	governance including good clinical
		principles.	practice research principles.
		L	Promote research culture at
			organisational levels that cross
			boundaries.
			boundarioo.