



SCIN Annual Education Event



**Evaluation Report
2024**

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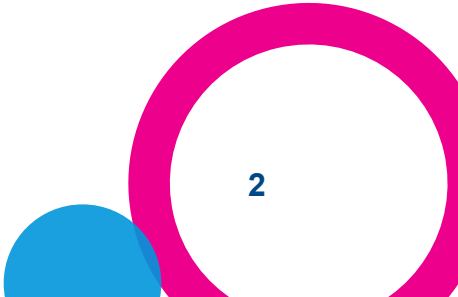
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Event Overview

The Scottish Clinical Imaging Network (SCIN) Annual Education Event took place in person on 10 October 2024 at the Queen Elizabeth Teaching and Learning Centre, 1345 Govan Road in Glasgow. The full-day conference was co-chaired by Dr Karen Gray, Clinical Lead for SCIN and Claire Griffiths, SCIN Imaging Manager. The programme included presentations from ten speakers representing NHSScotland, The Society and College of Radiographers, The Royal College of Radiologists, National Centre for Sustainable Delivery, NHS Wales and the Scottish Government.

Event in Numbers

The event received:

- 96 registrations, including:
 - 82 delegates
 - 10 speakers
 - 2 co-chairs
 - 2 event organisers
- 73 attendees, resulting in a 76% turnout
- 23 apologies and no shows
- 44 responses in the evaluation survey

Evaluation Responses

The event evaluation survey received 44 responses which is comparable to 45 responses received in the previous year.

Quantitative Data

Chart 1: Breakdown of respondents by health board or organisation

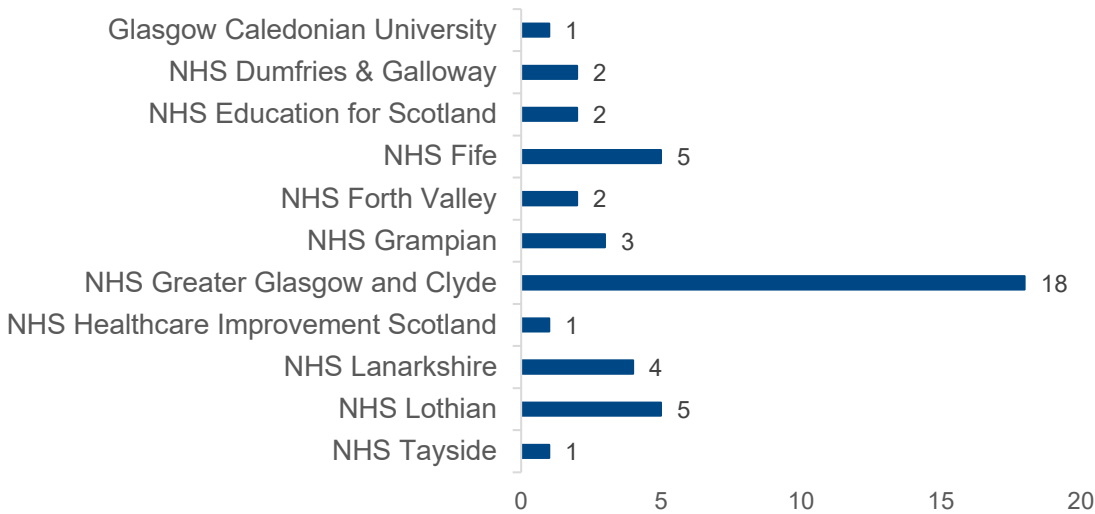


Chart 2: Breakdown of respondents by job category

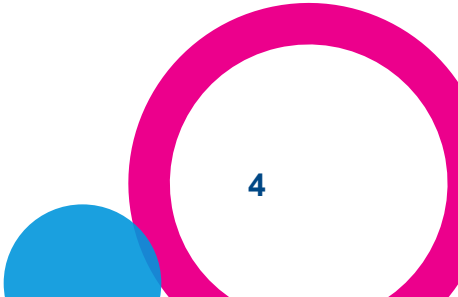
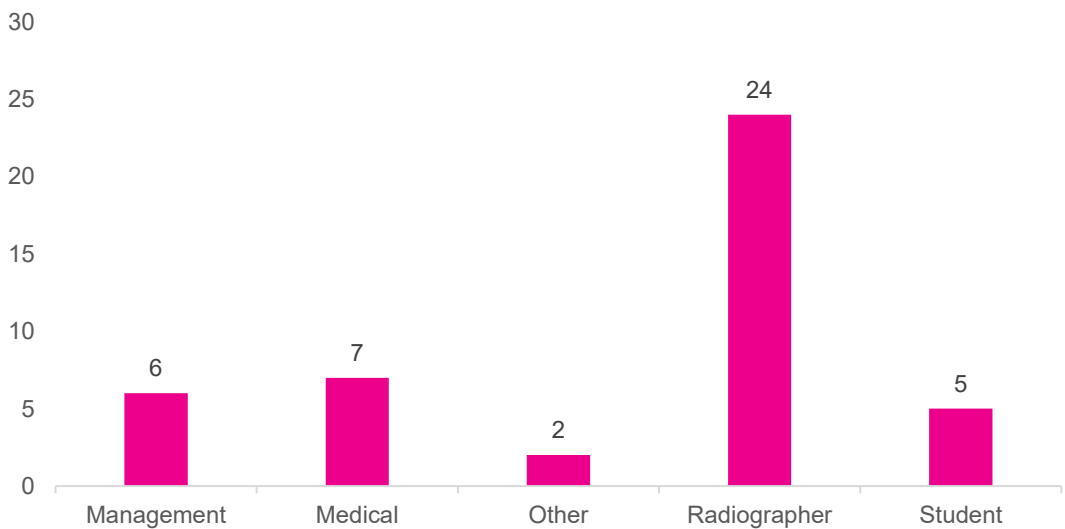


Chart 3: ‘Would you recommend the event to a colleague in a similar role?’

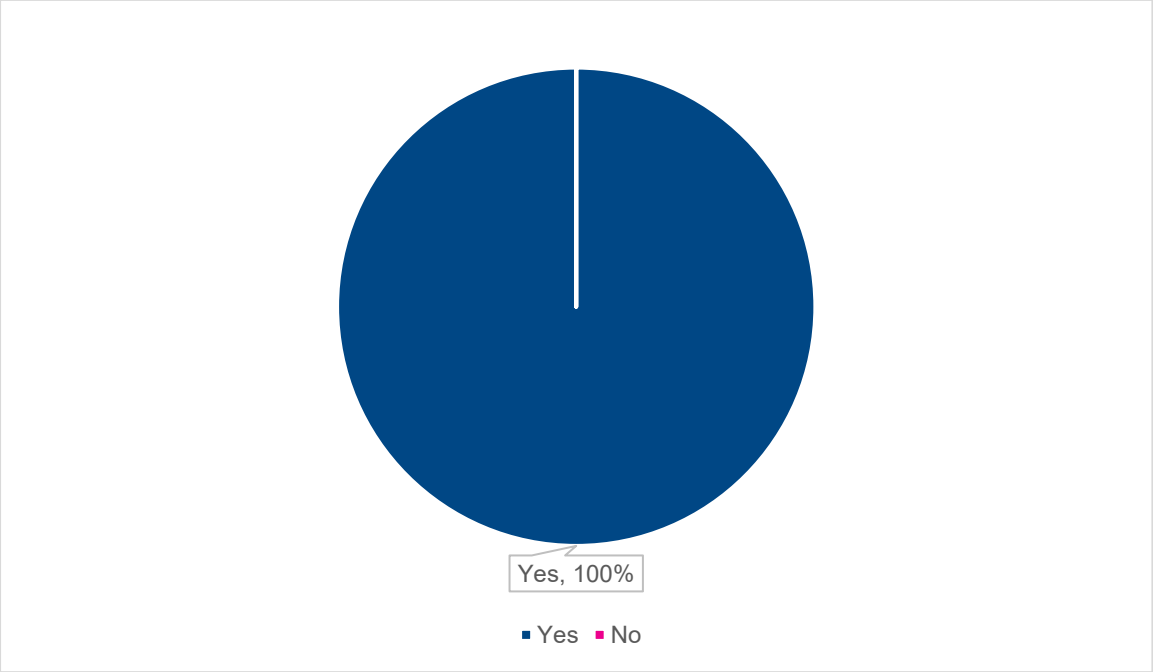


Chart 4: ‘Did the event fulfil your expectations?’

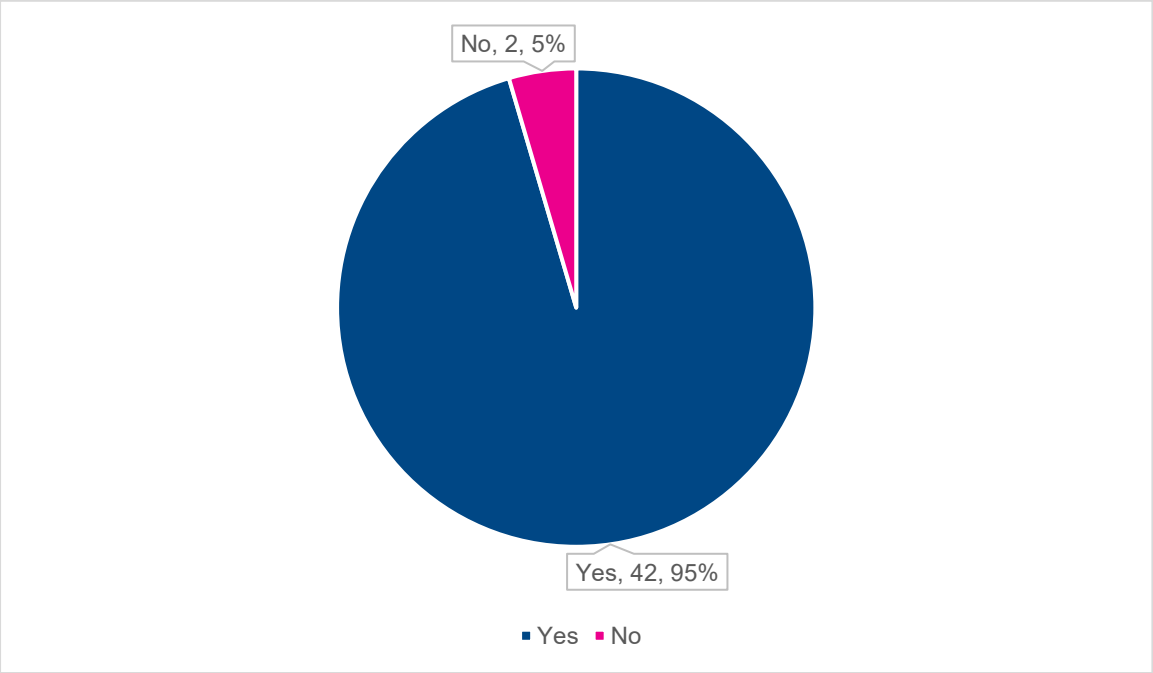


Chart 5: ‘How would you rate the following aspects of the event’

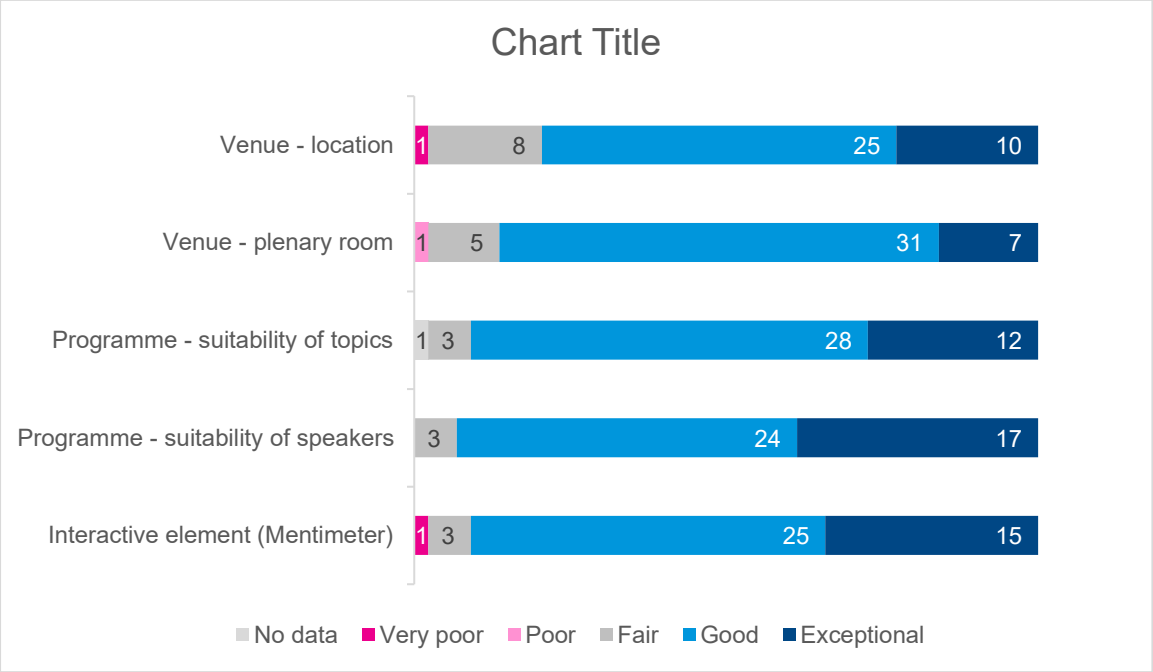
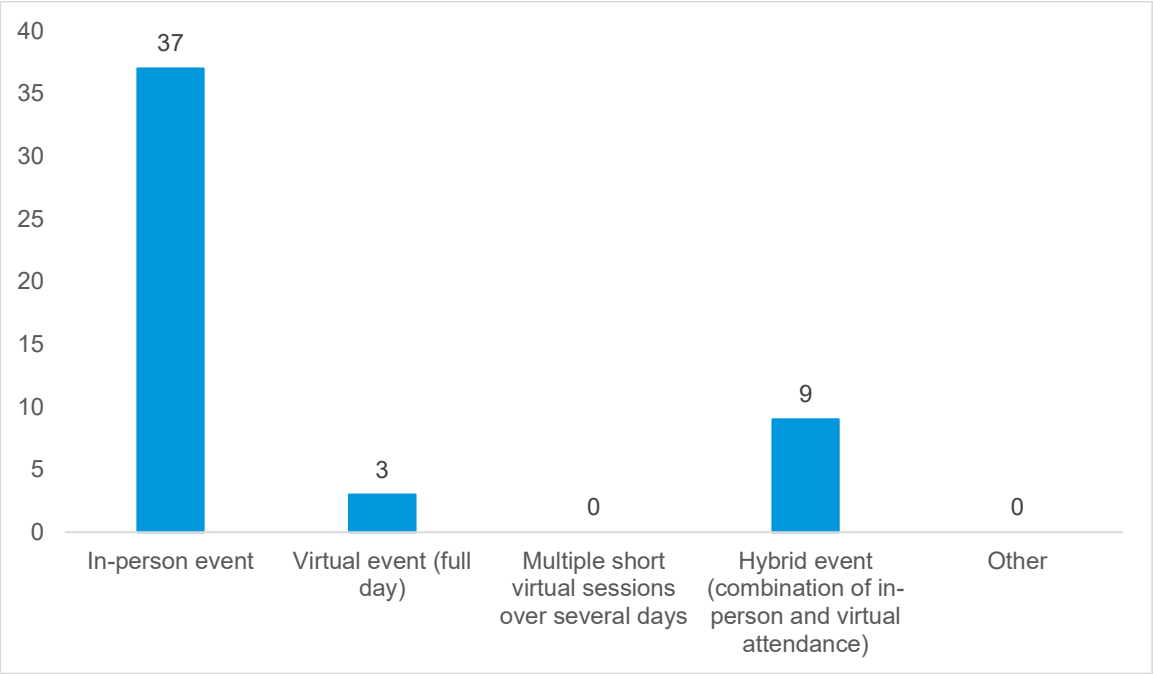


Chart 6: ‘What would be your ideal format of the event in the future?’

(multiple answers available)



Qualitative Data

Recurring themes were identified when analysing qualitative data from the survey.

Key Messages

When asked, **‘What key messages will you take away from the event?’** the following recurring themes were identified:

- Importance of collaboration
- Evolution of the service through innovation
- Emphasis on realistic medicine (32%), artificial intelligence (31%), advanced practice (15%), and quality standards in imaging
- Funding concerns

The following 34 responses were received:

1. Realistic medicine what a team approach it is
2. Impact of the reporting radiographer (CT) on reporting times
3. Very interesting, varied topics covered. I'll do further reading on Realistic Medicine and also on updated professional guidelines
4. That there are groups working on how to better improve and streamline services. That there are innovations and role development opportunities within imaging that could improve services and develop staff however there are barriers to these that could hopefully be overcome.
5. The hard work and research that goes into the imaging of all modalities they are always trying for improvement
6. I still have a lot to learn! (Eight weeks in post)
7. The principles of realistic medicine and making sure that everyone is communicating with each other

- 8.** Probably the reassurance that all departments are struggling with the same issues of staffing and the demands on CT as a service
- 9.** AI interesting but has its limitations at present
- 10.** Interesting presentations and learning throughout. relevant and informative
- 11.** Info about QSI; Realistic medicine; AI
- 12.** Realistic medicine is something to think about more often; Uses of AI
- 13.** Realistic medicine
- 14.** Progress is slow despite an ongoing radiology crisis. Making relevant changes to the way we and clinicians work in the context of realistic medicine and QIS is almost impossible without help from Scottish Government
- 15.** AI is the future and also that while we aspire to change the pathways of medicine and diagnostics for the future the change is going to be a long and slow process
- 16.** Work around advanced practice in IR and realistic medicine
- 17.** That NHSG is in line with services elsewhere
- 18.** That our service is evolving all the time and we must adapt with the changes. We must also look at the ways in which medics request as unnecessary requesting is a recurrent theme
- 19.** There is no funding available for anything, realistic medicine is the way forward
- 20.** The need for nurse practitioners and the benefits that they would/could have within the interventional role.
- 21.** There is a lot to work on!
- 22.** That funding is a major barrier for a lot of development across all our boards. we must take all opportunities that arise for training and progression.

- 23.** Leveraging technology, such as AI, can improve workflow efficiency in radiology departments, reducing wait times and resource utilisation. Gaining insights into the evolving role of advanced practitioners can enhance the effectiveness of interventional procedures and stroke services.
- 24.** AI is possible solution; realistic medicine is a must; shorter patient pathways to get the right decision - we must influence medical staff to achieve this as there is a lot of apathy
- 25.** Collaboration required
- 26.** Advanced practice
- 27.** The extensive range of opportunities for advanced practice for radiographers within Interventional Radiology specifically, and the importance of quality improvement to streamline patient pathways and provide a more efficient service contributing effectively to the provision of realistic medicine. Additionally, the positive impact that AI could have on streamlining reporting x-ray examinations, thus relieving the burden on radiologists.
- 28.** QSI and how we can make it work. How disheartened everyone is, with current financial climate and workload pressures (i.e. - rapid access cancer detection displacing other workload, reporting times etc)
- 29.** That teamwork is imperative for advancing practice
- 30.** The AI talk and understanding realistic medicine
- 31.** Value the staff and ensure the patient experience is positive. Access to services is equitable for all.
- 32.** Information about AI was very interesting and very helpful
- 33.** Some ideas around advanced practice
- 34.** The positivity towards advanced practice and how there are things going on in the background and foreground to try to improve the way we work

Anticipated Gains

When asked, **‘What did you hope to gain from the event?’** the following recurring themes were identified:

- Knowledge (25%) or insight (19%)
- Inspiration
- Networking opportunities

The following 43 responses were received:

1. Insight into projects happening outside my organisation
2. To hear updates on current events within imaging
3. Information/education regarding innovation within imaging, role development and service improvement
4. More info about the background of radiography
5. Further awareness regarding best practice and developments
6. Insight
7. To further develop knowledge and skills which I can use as a student and throughout my career as a radiographer
8. Information on realistic medicine, AI, network
9. Information on quality assurance, AI, advanced practice and realistic medicine
10. Interesting topics with lots of information for CPD
11. What is new in the field, some new learning materials, points to pass onto staff, points to consider
12. Updates in the field
13. Understanding on the position of SCIN and the SSND in terms of future radiology strategy

- 14.** An insight into future developments, especially in areas out with my current practice
- 15.** Information and CPD
- 16.** Further understanding of diagnostic services and to hear what was happening within other areas
- 17.** Awareness of new developments, any upcoming training and advances in our areas. knowledge in interesting topics that I may not have had previously
- 18.** More insight into research in Radiography
- 19.** Gaining insight on new technologies and career development in radiography
- 20.** Very informative meeting; good to hear that some of the frustrations that we have on the ground is actually being discussed. I do absolutely believe we have to take patients with us. Currently we have around 400 exams that patients DNA every week!! Can we have a national champagne (sic) to detail the waste to patients
- 21.** Knowledge covering different aspects of the relevant healthcare to further my knowledge and obtain a certificate of CPD
- 22.** To gain knowledge for clinical practice and the advancements in radiology over the past year
- 23.** New information
- 24.** A further insight into technical developments and educational opportunities available within radiology
- 25.** Some insight into how advanced practice is working in other places/health boards
- 26.** Knowledge on how other areas are developing their advance practice programme

- 27.** Information on and understanding of the direction of Health Care from a collective standpoint
- 28.** To improve my knowledge of new processes within the NHS
- 29.** To see what other imaging teams are doing and updating some of my knowledge and skills
- 30.** Insight into others' opinions on topics spoken on
- 31.** More knowledge about things I am less aware of, such as the realistic imaging
- 32.** More knowledge about future of radiography
- 33.** Current perspectives and managerial situation of the imaging service across Scotland
- 34.** A positive outlook on imaging and ways we can improve the service
- 35.** Updates on what is being done on local and national services and to draw inspiration
- 36.** Examples of good practice and an area of particular interest was the extension of AP roles. Opportunity to meet colleagues from other boards.
- 37.** To network, and on reading the program, the realistic medicine and the rapid cancer service presentation were both something I was interested in hearing more about
- 38.** Networking, realistic medicine
- 39.** Opportunity to network - understand what others are doing re RM, see any new innovations
- 40.** Particularly interested in Realistic Medicine presentation and hoping for advice on how to promote this. Hoping for some time and opportunity to meet colleagues from across NHS Scotland
- 41.** Update of what is happening with SCIN and the wider radiology network, as well as networking with other staff members

- 42.** Networking and also an understanding of where imaging is at currently
- 43.** Particularly interested in RCDS

Expected Changes in Personal Future Practice

When asked, **‘Can you provide any examples of changes / alterations you will make in practice based on what you have learned today?’** the following recurring themes were identified:

- Knowledge sharing
- Further exploration of realistic medicine, advanced practice, artificial intelligence, quality improvement and standards

The following 30 responses were received:

- 1.** I will impart the information about AI
- 2.** Further honing (sic) on my knowledge and development especially in AI
- 3.** I will pass on the info about NM prostates etc and also the AI talk
- 4.** I plan to use some of the knowledge to grow the service and hopefully be acknowledged as an advanced practitioner by the health board
- 5.** Explore possibilities for extension of scope of practice/additional posts - reporting radiographers
- 6.** I have passed on information to those unable to attend who are keen to progress into advanced practice
- 7.** Knowledge shared with team
- 8.** Sharing information given at the event to encourage more staff to attend future events
- 9.** Sharing knowledge and reflecting

- 10.** Sharing knowledge
- 11.** Sharing knowledge
- 12.** Feeding back to colleagues and reflect on current services offered
- 13.** Going forward I intend to share my learning from this event and cascade it to the wider department with a focus on QI and realistic medicine
- 14.** Plan to look into the QSI more and explore if there are interested staff that could take this forward in the department
- 15.** Look into QSI
- 16.** Will share any information from the day with colleagues in our department, will be mindful of other areas in our department that we may be able to save money. We will also review our patient information leaflets and posters in department
- 17.** Taking a moment to think, is this x-ray necessary, will it benefit the patient outcomes, are there other modalities that can be used
- 18.** Continue to fly the realistic medicine flag! Need to crystallise the radiology 10-year digital strategy better with regards in particular to RIS and order comms
- 19.** Always use value-based person-centred care
- 20.** Happy to support any initiatives or trials to support reducing waste and unnecessary exams
- 21.** I will think more about completing an x-ray or CT scan more, with regards to best practice and the outcome for the patient
- 22.** Continue to push realistic medicine as a agenda item for radiology - some really good work already being progressed here-explore advanced IR practice for radiography and CT head reporting again
- 23.** Promote advances in Radiographer reporting. Continue to strive for Realistic Medicine

- 24.** Sharing knowledge and topics covered within the event. I'm also keen to look further into how we can implement Realistic Medicine within our department
- 25.** Certainly look further in Realistic Medicine and QI
- 26.** Uncomfortable seating, maybe a different location
- 27.** When vetting requests I think I will take more time to question the referrer when I do not believe the test requested is going to alter the outcome/pathway for the patient
- 28.** Be involved in steering groups local and national to help reduce pressure points within services and drive staff/service developments
- 29.** Not at this time, its food for thought
- 30.** I will continue the ongoing work that I am involved with to make our imaging departments more patient focussed

Suggestions on Future Topics

When asked, **‘What topics would you like the network to present at future events that would address any learning needs?’**, the following 16 suggestions were received:

- 1.** Updates on AI
- 2.** Advance practice, Realistic medicine and AI
- 3.** Advanced roles for radiographer
- 4.** Anything innovative-new ways of influencing national referring guidelines-national planning regarding reporting solutions
- 5.** Audit / Quality section for juniors/ FY / Students; Input from our counterparts in the rest of the UK; RCR input
- 6.** Career development abroad for radiographers

- 7.** Emerging imaging technologies; Implementation of new SOR guidelines regarding inclusive pregnancy status; Practical ideas to improve patient awareness of risk-benefits of examinations and involvement in their care to enhance outcomes
- 8.** Hot topics such as inclusive pregnancy, HCPC updates, IRMER updates etc
- 9.** Innovative services or procedures that have made a difference to patients; Scottish Government speaker on healthcare
- 10.** More advanced practice information - what people are doing and where. This allows people to network more. As far as I am aware I'm the only radiographer in Scotland doing what I do
- 11.** More on chest reporting
- 12.** More realistic medicine topics covered
- 13.** MRI, Ultrasound or Mammography talks
- 14.** Reporting standards
- 15.** Staff have asked for input from quality manager regarding process for non-med referrers getting authorisation for examinations, how they update this if job roles change, etc so that they are able to deal with issues around inappropriate requests in department
- 16.** We need more focus on the nursing staff. Without the nurses in the department we would be unable to run a major amount of services. Understandably the key themes are surrounding imaging however, the specialist care, experiences and guidance the nursing teams provide all health professionals is paramount to our patient care and staff morale. It would be nice to get the recognition the nursing teams deserve.

Further Comments and Improvement Suggestions

When asked, **‘Do you have any further comments or suggestions on what was good about the event or how the event could have been improved?’**, the following recurring themes were identified:

- Unsuitability of the room including layout, temperature, lack of amplification and venue location
- Limited networking opportunities due to lack of catered lunch

The following 21 responses were received:

1. The lecture theatre setting wasn't ideal for making informal connections, also at lunch time, we lost the opportunity to network as everyone scattered off and didn't return to the central location
2. The lecture theatre was uncomfortable to sit in all day - perhaps a different location in the building to be a bit comfier for an all-day event
3. The content and speakers were all brilliant -- excellent variety of professional background, geographical location and information. Unfortunately, the lecture hall was very cold, which was uncomfortable to sit in for the full day.
4. No, it was a great event and I am glad I had the opportunity to participate
5. Excellent event - would be good to have more in attendance. Speakers were excellent - thank you, I really enjoyed it. Biscuit with the tea!
6. Excellent event, very engaging and informative and well organised!
7. I think everyone did a great job and it was a great day. It remained very professional and was organised efficiently. WELL DONE!
8. There was a good range of topics and speakers. It was lovely being able to see them talk in person, but it was also good to be able to see someone from further afield present virtually.
9. Little chance to chat to colleagues as everyone dispersed at lunchtime

- 10.** Provide lunch (even if this adds a cost to attend) as it encourages inter-team communication
- 11.** I know no money but the dispersal of colleagues at lunch took away from the event
- 12.** Variety of speakers with very interesting topics. Provision of lunch in the venue would have been helpful-would have been happy to pay for this
- 13.** It would have been improved if there had been a lunch provided since the course was a full day
- 14.** An event such as this should provide catering
- 15.** My reason for dissatisfaction was that I have hearing difficulties, not deaf, but sufficient to require some help. The venue had no roving microphones so audience interactive sessions were difficult i.e. could not hear questions and speakers often answered the questions from the floor without repetition so it was impossible to follow. Speakers also moved away from the microphones at the desk so there was no amplification of their voices
- 16.** I think engagement remains an issue. There were not that many radiologists or trainees at this meeting. It's imperative we get the younger generations on board. The visibility at board level needs to be better. We need to engage more registrars with audit and quality work and get them to present at these national meetings
- 17.** The venue was extremely cold even with a coat on it was uncomfortable
- 18.** The conversations that happened are important maybe more time to debate these issues. Only one minor comment, it was very cold
- 19.** Very cold room
- 20.** A minor comment in the venue would be that I found it very cold all day
- 21.** Location was dreadful, available parking very restricted. Very difficult to get to by public transport. No pens or paper for notes (even limited sponsorship would provide this for no extra cost!!!!)