



A Charter for Protected Study Time in Scotland

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Published: Wednesday, October 1, 2008
Edition: First

Summary

This Protected Study Time (PST) Charter has been written specifically for all grades of radiographic professionals working in Scotland and is in response to the need to re-invigorate the campaign for PST in light of the legislative requirements from the regulatory body (Health Professions Council) as stated in article 19,4 of the Health Professions Order 2001.

Introduction and Background

This Protected Study Time (PST) Charter has been written specifically for all grades of radiographic professionals working in Scotland and is in response to the need to re-invigorate the campaign for PST in light of the legislative requirements from the regulatory body (Health Professions Council) as stated in article 19,4 of the Health Professions Order 2001.

The Charter follows guidance from the Society and College of Radiographers (2002(a); 2002(b); 2003; 2005, 2008(a), 2008(b); 2008(c)), the Health Professions Council (2006), the Scottish Executive Health Department (1999; 2002(a); 2002(b); ; 2005(a); 2005(b)), NHS Education for Scotland (2005); 2006(a); 2006(b)) and includes reference to the published joint statement (2007) from the professional bodies representing healthcare professionals.

Scottish Government drivers:

Delivering for Health (Scottish Executive Health Department, 2005(a)) proposes the development of sustainable clinical teams that can meet the demands of a changing NHS with different priorities and expectations whilst acknowledging the need to support these developments through expanding role development for the Allied Health Professions (AHPs). This national policy document highlights the need for a workforce with the right skills and competencies, and acknowledges that education and training are at the heart of this development.

The NHS Education for Scotland (NES) Work Plan 2005-2008: Educational Solutions for Workforce Development (NES 2005) further highlights that the key to successful service delivery depends on the people who work within the service, and states that it is essential that staff throughout NHS Scotland are equipped to perform their duties to the best of their ability. These policy drivers apply to radiography services in Scotland.

Regulatory Body drivers:

The requirements of the Health Profession Council (HPC) to regulate radiographers via evidence of continual professional development (CPD), together with the impact of the NHS Knowledge and Skills

A Charter for Protected Study Time in Scotland

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Framework (KSF), emphasise the need for annual personal reviews (PDR). This process should identify and support clearly defined educational and learning needs.

The Health Professions Council (HPC) defines CPD as:

'...a range of learning activities through which professionals maintain and develop throughout their career to ensure that they retain their capacity to practice safely, effectively and legally within their evolving scope of practice.'

Each time a Radiographer renews his/her HPC registration, by signing his/her HPC renewal form, he/she is confirming that he/she has met the HPC standards for CPD. If an HPC registered Radiographer provides false or misleading information in his/her CPD profile, the HPC would deal with this matter under the HPC "Fitness to Practise Procedures". This could potentially lead to the radiographer being removed from the Register so that he/she can no longer practise. If a Radiographer is removed from the Register he/she cannot apply to be registered again for five years.

For further details see the HPC website:

<http://www.hpc-uk.org>

Professional Body drivers:

At national (UK) level the Society and College of Radiographers (SCoR) is a co-signatory to the joint position statement document 'A Joint Statement on Continuing Professional Development for Health and Social Care Practitioners' (RCN,2007). This document, developed by the Royal Colleges of Nursing and Midwifery and a number of AHP professional Bodies (including SCoR) articulates a demand for a minimum of six days per annum protected study time (PST) to enable practitioners to fulfil their professional and regulatory responsibilities. It is recognised that this is the employer's contribution and that the practitioner will be expected to augment this with personal time as required. The College of Radiographers (SoR,2008(c) defines CPD 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"

The Society of Radiographers' document 'Continuing Professional Development: Professional and Regulatory Requirements' (SoR, 2008(c)) sets out the obligations of practitioners and employers with regard to CPD and provides clear guidance for managers on what constitutes protected study time (PST), together with recommendations for its implementation. Much of the guidance in this Charter is derived from this policy document.

Professionals recognise the need for professional updating but CPD's emphasis on systematic development and the comprehensive identification of learning opportunities now provides a framework within which both formal and informal learning activities can be set. Learning and development becomes planned, rather than accidental.

In summary, radiographers and radiography managers have clear professional and regulatory obligations to undertake and facilitate CPD which will support fitness/competence to practice, and meet the demands of a modern clinical imaging / oncology department. It is felt necessary to re-invigorate the importance of PST in Scotland and to this end a Society and College of Radiographers (SCoR) PST working group was set up involving representatives of the various Scottish stakeholders. SCoR is grateful to the members of this working group who helped in the creation of this "Charter" (see Appendix I).

Purpose of this Charter

This PST Scottish Charter has been put together to better inform service managers, SoR union learning representatives and indeed all radiographic professionals within clinical imaging and oncology healthcare teams regarding the implementation of PST.

The Charter provides guidance to radiographic employers in ensuring that a consistent and transparent approach to PST is taken in Scotland to ensure, at the very least, PST parity with other professional groups.

The need for employers to ensure equality is also a strong argument, particularly in light of legislation that prohibits discrimination on the grounds of sex, race, disability or working part time.

For clarification purposes, this Charter is written with the use of sub-headings in a frequently asked question format:

What is the benefit to the Employer of introducing PST?

- Ensure radiographic practitioners have the opportunity to be compliant with HPC CPD requirements
- Ensure a consistent and transparent approach to PST
- Help to ensure radiographic practitioners maintain clinically effective and efficient services
- Positive step towards recruitment and retention of radiographic practitioners
- Service development opportunities
- Motivated Radiographer practitioners

How much PST should be allocated to each practitioner?

- A guaranteed minimum of 6 days per year pro-rata (i.e. 0.5 days a month per WTE)

This PST allocation complies with the recommendations made by the Society of Radiographers (2003), the Scottish Executive Health Department (2002(a)) and the joint professional body statement (2007) to ensure that all staff are given the necessary time to fulfil their CPD requirements. It falls short of the long term objective of the SCoR as outlined in 'A Strategy for Continuing Professional Development' (SoR, 2003) but represents a pragmatic and workable approach in the short term.

How should PST be allocated within clinical imaging and oncology departments?

PST allocation needs to be agreed and managed locally.

The following approaches are examples of how PST may be locally managed:

- **Rostered** - This might help larger departments but requires organisation and careful day-to-day management. Swapping could be acceptable at the discretion of the radiography manager. In extreme service demands, staff may be asked to re-schedule their PST.
- **Directed** - If it became apparent at short notice that time was available for staff then PST could be given on an ad-hoc basis. This, however, can present difficulties and inequalities, if the frequency of this situation varies between clinical areas.
- **Application** - In this system, any requests for PST are managed in a similar way to those for annual leave. This approach is recommended by the Society of Radiographers.

A combination of rostered study time, directed study time and an individuals' application for PST may be appropriate depending on a departments' size and logistics - also see "Further Guidance" further on.

- Any additional study leave required of an individual should be at the discretion of the radiography manager in line with departmental policies.
- Postgraduate and role development courses may be included in an individual's allocated PST (i.e. the 6 days per year) but there should be some flexibility if the individual is required to undertake the course for service need. As most of these courses tend to be over a long space of time, it must be recognised that the individual undertaking such courses must also be

A Charter for Protected Study Time in Scotland

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- willing to commit their own additional time to such study.
- Mandatory training programmes under the Health and Safety at Work Act 1974 (HMSO,1974) etc are a requirement of the employer and should not be included in PST. Examples of such mandatory training include:
 - Moving & Handling
 - CPR
 - RPS courses
 - Fire lectures
 - Violence and aggression

Training for accredited SoR representatives is provided for by existing employment legislation and should not be included in PST.

The PST allocation should take the form of a written agreement between the Society of Radiographers and the employer (see model agreement in Appendix II). It is expected that SoR union learning/industrial relations representatives will negotiate and sign the agreement on behalf of the SoR.

How could PST be utilised? (see Appendix III for further examples)

- Work based learning - case studies, audit, journal club
- Professional activity - mentoring, lecturing
- Formal education - taught courses, attending conferences
- Self directed learning - reading journals, portfolio creation, privately undertaken research
- Work shadowing - visits to other departments to view procedures
- By undertaking the "NHS Flying Start Development Programme" for new AHP graduates

What are the responsibilities of the individual practitioner towards PST?

- The practitioner may be required to provide feedback on the outcome of their learning. This may, on occasion, take the form of an informal discussion/presentation or short report, but the normal evaluation mechanism should be during a Personal Development Review (PDR).
- The practitioner will be responsible for the documentation of all CPD activity within their individual reflective portfolio/CPD Folder/Personal Development Plan (PDP). SCoR members will find it very helpful to use the SCoR on-line tool "CPD Now" in fulfilling this responsibility - see www.sor.org
- The practitioner may, at times, be required to provide evidence on how their time was utilised to their manager. The Society recommends that a current certificate of CPD accreditation from the College of Radiographers (provided through the on-line CPD system 'CPD Now') should evidence this.
- The practitioner should demonstrate evidence of recording CPD activity.
- The practitioner should use PST to undertake CPD relevant to their individual radiographic role and maintenance of their HPC registration. It must be recognised that study which addresses service need and follows the individual's PDP will naturally attract more concrete employer support. Any additional support required should be negotiated with their manager.
- Practitioners who undertake formal education, such as that leading to a post-graduate professional qualification, will be offered PST dependant upon the amount of study leave already allocated in that same year. In such circumstances, a compromise should be reached between the manager and the individual.

What are the responsibilities of the Employer towards PST?

- The employer will ensure that the minimum required PST is allocated to each practitioner (as detailed earlier).
- The employer should ensure that relevant learning resources are provided for practitioners. This should include internet and e-mail access and full use of any relevant educational facilities (may include local library or home if this facilitates learning).
- The employer must encourage all staff to develop a PDP, linked to an individual's Knowledge

and Skills Framework (KSF) profile, which fully supports the learning and development needs of the individual and is documented at the PDR.

Further guidance:

- In-house CPD programmes organized during normal working hours may contribute towards an individual's PST allocation – although practitioners who can demonstrate that the programme offered is of little or no relevance to their practice must be permitted to undertake alternative studies in lieu of these sessions. All courses or study days that an individual attends during normal working hours would contribute towards an individual's PST allocation.
- This Charter recognises that, due to the 24/7 nature of radiography service delivery, many radiographers undertake formal CPD at weekend study days / courses. This is to be commended, and service managers should support staff that are willing to give up their valuable weekend time. Therefore, it is recommended that, where practicable, staff may use their PST allocation to compensate for CPD undertaken in their own time (i.e. a weekend).
- It is acknowledged that this may be difficult to implement and must be negotiated and agreed locally. The same principle applies to part time staff who undertake formal CPD on non contracted days (i.e. the use of PST may be flexible.)
- No PST may be carried forward to the following financial year.
- No PST may be accrued during maternity leave. If an HPC registrant has been selected for CPD audit by the HPC and the registrant has had an extended absence from practice (i.e. due to maternity leave) then the registrant can write to HPC to request that their audit is deferred. When the registrant begins to practice once again (i.e. at the end of their leave) they can re-commence their CPD activities and keep a record of these activities in preparation for when they are audited at the next CPD audit round which would happen automatically for that registrant after any deferral.
- No PST may be accrued during long term sick leave ('Long term absence' is a period of sickness which lasts longer than two calendar weeks (ACAS, 2008).
- PST may be distributed throughout the year – agreement should be achieved locally.
- Once PST is agreed and allocated, it is the responsibility of the individual practitioner to utilise their PST effectively.

This Charter should be used to reach consensus and “sign up” by all relevant parties (see Appendix II for sample agreement)

References

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A Charter for Protected Study Time in Scotland

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Appendix I

Members of the SCoR protected study time (PST) working group (alphabetical order):

Margaret Blaikie	Radiography Manager
Amanda Carlyle	Radiographer
Murray Crichton	Chair of Diagnostic Managers Group
Stephen Evans	Radiography Manager
Georgina Howie	Senior Radiographer
Laura Murray	Radiographer / SCoR Union Learning Representative
Penny McPherson	Radiography Manager
Tracy Renton	Senior Radiographer
Vicki Sommerville	Radiographer / SCoR Union Learning Representative
Margaret Spalding	CPD representative, SCoR Scottish Council (from Oct 2007)

Sharon Stewart

Education Representative, SCoR Scottish Council

Maria Murray

SCoR Professional Officer (Scotland)

With input from:

Sean Kelly (SCoR CPD Officer)

Marie Bullough (SoR Regional Officer)

Appendix II

Protected Study Time Model Agreement

1. Parties to the Agreement

1.1 This agreement is made on **insert date** between the Society of Radiographers and **insert name of employer**. This agreement applies to all qualified radiographers and assistant practitioners.

2. Objectives of the Agreement

2.1 To ensure that all qualified radiographers and assistant practitioners are entitled to protected study time sufficient to ensure that they can fulfill their responsibility to continuous professional development (CPD) as expected by their professional body and the Health Professions Council.

2.2 The aim is that all relevant staff should be entitled to a minimum of 0.5 days per month (pro-rata) protected study time.

2.3 Part time/bank and locum staff will be entitled to pro-rata study time.

2.4 Agency or other non-NHS staff working in the department will not be covered by this agreement.

3. Equal Opportunities

3.1 The **insert name of** employer is committed to equal opportunities and will seek to ensure equality of access to study time regardless of race, sex, sexuality, disability, age, hours of work. Records will be kept of access to study time in respect of race, age, sexuality (if available), disability, age, hours of work. **Insert name/position of manager** will be responsible for such monitoring and this information will be available to SoR representatives. Access to study time will form part of the review.

4. Definition of Study Time

4.1 Formal courses leading to a post-graduate qualification or other courses undertaken at the behest of the employer in order to support service delivery may be included in an individual's allocated PST (i.e. the 6 days per year) but there should be some flexibility built in (i.e. it is recognised that staff who undertake such courses may choose to use some of their protected study time for additional research, reading or revision).

4.2 Training which is mandatory under **insert name of employer's** policies e.g. fire training, resuscitation training will not be included in PST.

A Charter for Protected Study Time in Scotland

Published on Society of Radiographers (<https://www.sor.org>)

4.3 The nature of the learning undertaken during protected study time could be a matter of choice determined by the practitioner but it should be recognised that, for HPC registration purposes, the PST to undertake CPD must correlate with the individual's radiographic role. It is recognised that a course of study will attract greater employer support if it is in line with service development plans.

4.4 The practitioner may carry out their PST in whatever environment they consider most conducive to effective use of this time. This may include study at home or in a library. Although the employer does not have the automatic right to see a CPD portfolio the employer may, however, ask the practitioner to provide regular proof of how that time is spent e.g. individual discussion with manager, presentation to other staff

On behalf of Employer

Name:

Signature:

Date:

On behalf of Practitioner (SoR):

Name:

Signature:

Date:

This Agreement should be reviewed every 3 years

Appendix III

Work Based Learning	Professional Activity	Formal/Educational	Self directed learning	Other
Learning by doing	Involvement in a professional body	Courses	Reading journals/articles	Public Service
Case studies	Member of specialist interest group	Further education	Review of books/articles	Voluntary Work
Reflective practice	Lecturing/teaching	Undertaking research	Updating knowledge via www/TV/press	Courses
Clinical audit	Mentoring	Attendance at conferences	Progress Files	
Coaching from others	Examiner	Submission of articles/paper		

Discussion with colleagues	Tutor	Seminars
Peer review	Branch meetings	Distance Learning
Gaining and learning from experience	Organising journal clubs or other specialist groups	Courses accredited by professional body
Involvement in wider work of employer e.g. representative on a committee	Maintaining and/or developing specialist skills e.g. musical ability	Planning or running a course
Shadowing	Expert witness	
Secondments	Member of other professional bodies/groups	
Job rotation	Presentation at conferences	
Journal club	Organiser of accredited courses	
In-service training	Research supervision	
Supervision of staff/students	National assessor	
Visits to other departments and reporting back	Appointment to a promoted post	
Role expansion		
Critical Incident Analysis		
Completion of self assessment		

questionnaires

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