

ANNUAL REPORT

THE SOCIETY OF
RADIOGRAPHERS



campaigning together
growing together
serving together



2004-2005

The objects for which the Society is established

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



ANNUAL REPORT

for the year ended 30th September 2004

Registered office

207 Providence Square
Mill Street
London SE1 2EW

Company Secretary

Richard Evans
207 Providence Square
Mill Street
London SE1 2EW

Auditors

Horwath Clark Whitehill
St Bride's House
10 Salisbury Square
London EC4Y 8EH

Bankers

Unity Trust Bank plc
Nine Brindleyplace
4 Oozells Square
Birmingham B1 2HB

Solicitors

Osborne Clarke Solicitors
2 Temple Back East
Temple Quay
Bristol BS1 6EG

The Society is the professional body for those practising in
clinical imaging and radiation therapy

campaigning together growing together serving together



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serving together



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A message from the President

“Every day you may make progress. Every step may be fruitful. Yet there will stretch out before you an ever-lengthening, ever ascending, ever-improving path. You know you will never get to the end of the journey. But this, so far from discouraging, only adds to the joy and glory of the climb.” Winston Churchill

Radiographers both diagnostic and therapeutic have over the last few years seen a number of changes in technology, practice, clinical roles and responsibilities. As a profession we have always embraced change in a positive and forward thinking way and will continue to do so.

As a body we are continuing working across all fields within the Health Service. At this moment we are working together with the Royal College of Radiologists updating the Skills Mix Document. This will be a document that will be able to be used by all sections of the profession on its publication when content is agreed by both parties.

Discussions have taken place with the Institute of Physics and Engineering in Medicine looking at areas common to both. The Society has regular meetings with other Allied Health Professionals, the Health Professions Council, Universities and Government. Progress has been made due to the partnership and co-operation of all the individuals and organisations involved.

A previous President stated that ‘There are things we cannot change’ and that statement is as true today as it was then. Primary Care Trusts, Foundation Hospitals and Independent Sector Treatment Centres are all with us; we as a body have to ensure that Members of the organisation will not be left behind in any negotiations with any Health Care Provider whether it be within the NHS or with an Independent Provider. Performance targets and growing political pressure to deliver faster services make it essential for us to keep abreast of all changes imposed on us by Government. The damage done to partnership between public and independent sectors through the imposition of private MRI must not happen again. Through dialogue with the Department of Health hopefully our comments have been taken on board. There should not be a situation whereby there is spare capacity within the NHS while private provision of services is imposed.

Agenda for Change (AfC) is an area that must be mentioned. Our membership rejected AfC by a large majority. Council then had to take the decision whether to resign our seat on the Staff Council and in doing so take the membership away from any negotiating rights they would have within the new structure. A survey was undertaken to see what form of action the membership would be willing to undertake. By looking at the results of the survey and taking advice from IR

reps, Regional Committees and National Councils it was agreed that we would register our no vote within the Staff Council but remain in the process, accepting that the collective view would prevail. This decision was not taken lightly and a special council meeting was arranged to discuss all issues relevant to AFC before taking the decision. The results of this means that we have a good bargaining position within the staff side regarding issues such as on call and pensions but also keep our options open regarding any action in the future.

I do believe an acknowledgement should go to all members who attended the Trafalgar Square Rally. It was due to this that the Health Minister, John Hutton, asked to visit Headquarters – this being only the second time a Government Minister has visited a Council meeting. Some of the areas of concern discussed were picked up in the Minister's subsequent letter and are being addressed at this moment in time. These include issues such as child care and conditions for student radiographers.

As we are all aware, the HPC is introducing mandatory continuing professional development (CPD). To help our members with their CPD a new toolkit will, by the time this report is published, be with all radiographers to aid them with their professional development.

Congratulations to our new Consultant Radiographers upon their appointment. They are promoting the profession in a positive and forward thinking way. However I am disappointed that we still have so few, this being an area we need to address over the coming months.

Managers' involvement within the organisation continues to be addressed. This is an area in which the organisation will become more proactive in the immediate future. It is important for all levels of membership to be speaking with one voice on all issues relating to the profession. Regional Committees/National Councils have a role to play as there is more strength in us all speaking together.

Finally I am proud to serve as your President this year. Thanks need to be given to all the Council Members, staff and especially my Regional Committee for all their help and support.



Ann Pollard
President of The Society of Radiographers



SOCIETY COUNCIL MEMBERS AND OFFICERS

For the period of this Annual Report and until 5 January 2005

Elect ed officers

President:

Mr W Rea MSc FCR TDCR (to 30.6.04)

Ms A Pollard DCR(R) PgC (from 1.7.04)

President Elect:

Ms A Pollard DCR(R) PgC (to 30.6.04)

Mrs H Harries-Jones DCR(R) PgC (from 1.7.04)

Vice President:

Mrs H Harries-Jones DCR(R) PgC (to 30.6.04)

Mr A Pitt DCR(R) (from 1.7.04)

Senior officers

Chief Executive Officer:

Ms A Cattell BA(Hons) FCR MBA HDCR(T) (to 31.3.04)

Mr R Evans HDCR (from 5.4.04)

Director of Professional Policy:

Professor A Paterson FCR MSc TDCR DMU

Director of Industrial Relations:

Mr W Town MA DCR(T) DLS

Director of Finance:

Mr N Williams FCA

Editor *Synergy*

Ms R Kelly

Editor *Radiography*

Professor P Hogg MSc DCR(R) DRI

Regional representatives

Scotland:

Mrs M Weir DCR(R) PgDMU (to 30.6.04)

Miss M McPake BA(Hons) TDCR MMed Sci (to 30.6.04)

Miss L J Forysth DCR(T) MSc PgCeA (5.6.04)

Mr K McMurray DCR(R) (from 1.10.04)

Miss L Forret DCR(R) (from 1.10.04)

Yorkshire & North Trent:

Mr S Boynes MSc TDCR

Northern:

Miss K Lanceley DCR(R) (to 30.6.04)

North West:

Mr A Pitt DCR(R)

Northern Ireland:

Mrs A Tate DCR(R) DMU (to 30.6.04)

Mr W Rea MSc FCR TDCR (from 1.7.04)

Wales:

Miss J Reid FCR DCR(R) (to 30.6.04)

Mr K Tucker DCR(R)

Mrs J Hughes DCR(R) (from 1.7.04)

Midlands:

Mrs A Pollard DCR(R) PgC

Eastern:

Mrs S Wilson DCR DMU (to 30.6.04)

Mrs Z Mitton DCR(R) (from 1.7.04)

London:

Mr I Henderson FCR DCR(R) MSc Pg CHE

South East:

Mrs K Firkins DCR(T) (to 30.6.04)

Mrs V Bolton BSc(Hons) DCR(R) (from 1.7.04)

South West:

Mrs H Harries-Jones DCR(R) PgC

The College of Radiographers Board of Trustees (CBoT)

Chairman: Mrs N Sinclair MA BSc(Hons) TDCR

Mr R Johnson (to 22.9.04)

Mr A Kay

Dr R Bury FRCS FRCR

Mr I Eversden M.Phil MIPEM

Mr J Foster FCA

Professor P Williams BSc(Hons) TDCR

Ms P Chapman (from 23.9.04)

Mrs M Wier DCR(R) PgDMU (to 30.6.04)

Mr W Rea MSc FCR TDCR

Mr K Tucker DCR(R)

Mrs A Pollard DCR(R)

Mr A Pitt DCR(R) (from 1.7.04)

Mrs H Harries Jones DCR(R) PgC (from 1.7.04)

Mr I Henderson FCR DCR(R) MSc Pg CHE (from 1.7.04)

Mrs V Bolton BSc(Hons) DCR(R) (from 1.7.04)

Mrs A Tate DCR(R) DMU (to 30.6.04)

No members of The Society Council or The College Board of Trustees receive remuneration for their work.

Names printed in red have retired in year from the post indicated

Council Members



Back row (left to right): Andy Pitt, Stephen Boynes, Billy Rea, Linda Forret, Kenny McMurray

Front row (seated): Ann Pollard (President), Zena Mitton, Vicky Bolton

In absentia: Hazel Harries-Jones, Kevin Tucker, Ian Henderson, Jackie Hughes

A report from the Chief Executive Officer

Within this report you will find the detail behind the very diverse business that is the professional body and trade union for the whole of the radiographic workforce. But behind the diversity, there are the unifying objectives concerned with the promotion of radiography, the protection of interests of members and the centrality of service to the public upon which the organisation is founded.

It is a pleasure and a very great privilege for me to write this, my first Annual Report as Chief Executive. The opportunity to look back over the year and to take stock of all that The Society and College of Radiographers has achieved emphasises more than ever what an enormously busy and important time this has been in the life of our organisation. As always, there have been changes and some emerging new challenges. There has also been steady progress and growth along established paths. Some significant and long anticipated milestones have been reached and passed.

When I took over from Ann Cattell in April I very quickly became aware that the major issue of Agenda for Change, which understandably was providing the focus for so much attention both inside and outside the profession, was just one aspect of the work that the organisation was engaged in. It has been a very busy year as you will read in these pages.

The Trades Union and Professional activities and functions have been growing closer and becoming more inter-dependent for some years. This process is continuing and is resulting in an even stronger organisation. Consequently, as Audrey Paterson and her team travelled around the regions launching the Career Framework during the early part of 2004, it was natural for the concerns and questions over Agenda for Change to be discussed. Similarly, Warren Town's Industrial Relations staff are increasingly familiar with the professional and educational issues facing our members as we look ahead to mandatory CPD and development opportunities in the Knowledge and Skills Framework.

I am pleased to report that the financial management of the organisation is in good shape. The balance sheets and summaries within this report provide the detail and are well worth a few minutes study. The Finance team, led by Neil Williams, are another integrated component of the staff with a vital contribution to make in the day to day functioning of the Society and in the promotion of Radiography as a profession.

I am grateful for the unstinting hard work and support of Audrey, Warren and Neil and of each and every member of staff.

This year, we have said goodbye to Angela Thurbin, Charlotte Teagle, Sarah Hayes and Ann Jarvis who have each moved on from the organisation. We thank them for the contributions that they made to the Society. Following her retirement from the Chief Executive position, Ann Cattell has continued to work part time on some important work in establishing a network for radiography managers. As this nears completion, we remain grateful and appreciative of the enormous amount of work and commitment she put in as CEO.

We have been delighted to welcome Ian Marrey as regional officer for the North West and Northern Ireland, Creek Weir, Assistant Executive Secretary and David Wait, in the industrial relations team.

The officers and staff of the Society support UK Council and exercise the policy decisions that are made by this elected executive. It has been good to see most of the vacancies on Council filled this year and encouraging that there are members who are keen to work for the profession by committing to stand for election. The President and I are exploring ways to provide training and development for Council members so that serving brings tangible professional development opportunities.

The Regional Committees and devolved National Councils also reveal a great deal of commitment at a local level in support of the profession. A successful conference was held in March 2004 at which the role of the regional structure was examined and discussed. This event will become an annual opportunity to develop and strengthen the growth of the Society and our work across the UK. The communication links between the Regional Committees / National Councils and UK Council and with the organisation at Head Office have strengthened during the year. We are keen to continue to work on these to ensure that the governance of the Society is influenced by real, active engagement of members at 'grass roots' level. The ADC once again provided a great opportunity for just this sort of involvement.

Beyond the regional structure, we are grateful for our growing network of accredited representatives covering industrial relations, health and safety, learning and Agenda for Change issues at a local level. It is the commitment of these members that brings the work of the Society into each imaging and radiotherapy department across the UK. They also provide vital communication for the views of members back to Head Office and to UK Council. The accredited representative network, supported by our full time regional officers, takes much of the credit for a sustained growth in membership numbers through the year.

I hope you will read the detailed accounts of the activities of the Society and College of Radiographers that are set out in the following pages. They depict an exciting time of challenge, change, development and progress. Radiography is stronger and more influential. Radiographers are more valued in the world of health care. We should be proud of the progress we have made together in campaigning, professional growth and in service. As so often in the past, radiographers' commitment to excellence in service to patients is providing the core values to ensure that we grow stronger as a profession and can face challenge with confidence.



A handwritten signature in black ink, appearing to read 'Richard Evans'.

Richard Evans



Campaigning together

2003 / 2004 was dominated by the discussions and work on testing and implementing Agenda for Change (AfC) on selected NHS sites culminating in the second ballot of the membership.



During 2004 the Society met with representatives and managers on Early Implementer (EI) sites where radiographers were most affected. This work was a continuation of activity which began in 2003. It was clear in 2003 and then in 2004 that the timetable for implementation on EI sites would not be met. A combination of a lack of capacity, poor incentives and concerns over cost hindered development. Nevertheless at least one major site did implement AfC. The results from this site and what we could gather from the work done elsewhere, was reported to a Special Conference of the SoR in September 2004 and in advance of the ballot.

By the end of October it was clear that the membership of the SoR were not willing to support the implementation of AfC because they believed that too little information was available to show that the profession would benefit and angry that the government refused to compensate members for working a longer working week. This position was made clear when the ballot result showed 82% against AfC.

There were numerous discussions at national level during the latter part of 2004 with Government Ministers and in the Joint Union Staff Side.

By December 2004 it was clear that the SoR would be the only NHS professional union to reject AfC.

Industrial Action was therefore considered as an option and a survey of the membership showed that whilst there was support for this course of action it was far from unanimous. The Minister for Health made it clear that if the SoR sought to implement Industrial Action he would not offer AfC proposals to the SoR therefore it would not be possible to establish there was a trade dispute. The latter would be necessary to legitimise any action. The UK Council had, therefore, only two options.

- ◆ Stand outside of all negotiating and bargaining forums including the PRB or
- ◆ Acknowledge that AfC would be implemented and that the SoR would reserve the right to oppose change at local or national level if AfC did not benefit the profession or the service.

It was agreed that the SoR would implement the latter option.

This decision was not universally popular with the membership. However, Regional and national discussions within the SoR indicated that standing aside from implementation and outside of the national machinery was not a preferred option and that despite any protests or action by the SoR all other unions would implement change.



I am currently a Senior 1 Radiographer, working within the general X-ray Dept at Poole Hospital. I specialise in A&E Appendicular Skeleton Reporting, which I enjoy very much. I have been an I.R representative for seven years which keeps me very busy. I also have a keen interest in forensic radiography, and assist in leading a team within our department.

Claire Hill

During 2005 the SoR will continue to monitor all aspects of AfC especially the impact on member earnings and career development. This will be conducted in concert with the DoH and the NHS Employers Organisation. To take this forward a monitoring group has been established. The group will be composed of Officers, members of UK Council and nominees from the regions and countries.

Two other groups have also been established with similar composition.

The Negotiating Group, which will deal with outstanding issues which have yet to be agreed at national level. High on the list is how AfC will deal with 'on call' and 'stand by'.

The career development group will consider and advise members on KSF and linkage between the AfC grades. Implementation at local level will require the assistance of accredited reps. To assist them the reps training budget has been doubled and we intend to work with other unions in the Alliance for Health Professions to create a support network which will also share knowledge and intelligence.

From the outset of discussions in 1999 it was clear that any system to change the terms and conditions for 1 million staff would not be easy or universally popular. This has proved to be the case. However, we will continue to support SoR members and representatives and will constantly review the progress of AfC during 2005.

Professional Indemnity

In 2003–2004 the Society managed 17 new claims against members where it is alleged there has been professional negligence. The total legal costs of defending and supporting members at Coroners Court or in defence of claims has been the highest for some years. In total £10,000 was spent all of which was recovered from the insurers. The steady stream of claims and the increase in the cost of defending these claims illustrates trend which is all too predicible. The Society is currently working with our insurance underwriters to monitor the claims and to consider ways in which future work will be managed.

Personal Injury

We continue to see a steady stream of claims against employers from members who have been injured at work in 2003–2004. 22 claims were received and four settled. £240,853.00 was paid to members. This is a fraction of the overall sum because it does not include legal costs.

The SoR will, in 2005, refine the way in which we manage personal injury claims in order to provide more information to claimants and to establish clearer reporting ties between the SoR and our legal agents.

‘I’m a newly qualified radiographer. During my final year at Cranfield University, I chose to work at Poole Hospital because some of my friends already worked here where they enjoy the varied experience and opportunities.’

Richard Justin



Alliance of Health Professionals

The Society has continued to work with other Health Care professionals in the Alliance at national and local level. In 2005 the SoR will hold the Secretariat for this group and will encourage and promote more joint working. This may be especially useful with the changes which will take place with the move to introduce Agenda for Change and the introduction of Independent Sector Treatment Centres (ISTCs).

Trade Union Education Committee (TUEd)

The TUEd remains pivotal in the development of skills and knowledge for our 1154 representatives. In 2003–2004 we held eight 3 day induction courses.

To meet the demands which will be generated by the introduction of AfC and to develop more tools which our representatives may use the TUEd budget has been doubled for 2005–2006.

Annual Delegates Conference (ADC)

The 2004 ADC, held in Torquay, was yet again a major success and continues to be a key event in the SoR calendar. The Delegates Conference Committee have discussed a number of changes to the structure and management of the ADC which will be incorporated into the 2005 conference. The involvement of Regional Committees and National Councils in the lead up to and participation in the ADC have been pivotal to the success of this event.

Health and Safety

This area of work has continued to develop. We now have a clear work programme and support for the representative network which requires further development. A more interactive area within the SoR website for H&S Representatives is currently under construction. This is designed to provide more support and interaction. In 2005 the SoR will dedicate specific resources to the development of this important aspect of our work to maintain a continuity and consistency of approach to the development of SoR H&S policy.

TUC Activity

The Society continued to maintain a presence at TUC national conferences throughout the UK. Our presence ensures that the TUC policy on a wide range of domestic and national issues are informed by SoR policy.





Growing Together

Within the Professional & Education Department, a wide range of work has taken place during the year, aimed overall at supporting the education and development of the profession. Advice and guidance has been given to external bodies, including government health departments in all four countries of the UK, universities and clinical departments.

There has been increasing contact with National Councils and Regional Committees which has been valuable, and many individual members have sought advice from the department, as have a wide variety of bodies and individuals with interests in, or work that impinges, upon the field of radiography. A feature of the work of the department now is the growing contacts with colleagues in other countries, much of this due to the development and dissemination of the Curriculum Framework that was published last year.

Professional Documents

During the year, several professional documents were approved by Council and published. These are shown below and are grouped according to topic. A number of these will be referred to later in this report.

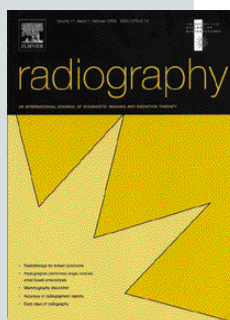
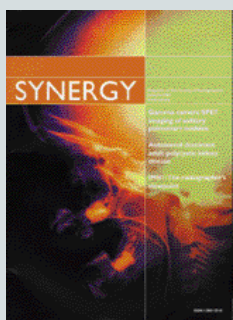
<i>Education and Professional Development: Moving Ahead</i>	(Nov 03)
<i>The Approval and Accreditation of Education Programmes and Professional Practice in Radiography: Policy and Principles</i>	(May 04)
<i>The Approval and Accreditation of Education Programmes and Professional Practice in Radiography: Guidance on Implementation of Policy and Principles</i>	(Oct 04)
<i>Clinical Education and Training: Capacity and Quality – Executive Summary</i>	(May 04)
<i>Clinical Education and Training: Capacity and Quality – Full Project report (web site only)</i>	(Jul 04)
<i>International Recruitment of Radiographers to Work in the UK</i>	(Nov 03)
<i>Guidance on the Provision of Work Experience for School Students</i>	(Jun 04)
<i>Recruiting and Retaining the Radiography Workforce</i>	(Jun 04)
<i>Statements for Professional Conduct</i>	(Mar 04)

Publications

Early in the year, *Radiography* welcomed a new Editor-in-Chief, Professor Peter Hogg from the University of Salford, and a new strategy which has underpinned further development and improvement of the journal. Of note are the following:

A review section has been added to the journal under the guidance of three review editors. These are Dr Patrick Brennan, University College Dublin with responsibility for reviews related to education and research; Dr Pauline Reeves, Arrowe Park Hospital, Liverpool for clinical imaging and diagnostics, and Mrs Elizabeth Miles, Royal Marsden Hospital, London, for radiotherapy and oncology.

There is now good cross working between the editors of *Radiography* and *Synergy* to ensure that material submitted for publication appears in the most appropriate of the profession's two journals.





Conferences and Events

A programme of conferences and seminars continued to be offered by the Society or College of Radiographers. In addition, the Society was represented at a number of events of importance to the profession. During the 2003/2004 year, the following conferences and seminars were offered and were generally well received:

- ◆ Annual Radiotherapy Weekend, November 2003, Harrogate
- ◆ IT (IMPACT) 1 day Seminar, February, London
- ◆ Disability 1 day Seminar, March, London
- ◆ Bone Densitometry Conference (7th), March, Newcastle
- ◆ Paediatric Conference (Joint with Association of Paediatric Radiographers), April, Newcastle
- ◆ Clinical Governance 1 day Seminar, April, Manchester
- ◆ PACS 1 day Seminar, May, London
- ◆ Forensic Radiography Conference (5th), September, Newcastle
- ◆ PACS 1 day Seminar, September, Birmingham

The major events attended by the Professional and Education team were:

- ◆ American Society of Radiological Technologists Radiation Therapy Meeting
- ◆ Radiological Society of North America Annual Meeting
- ◆ British Medical Ultrasound Society Conference
- ◆ European Congress of Radiology
- ◆ British Nuclear Medicine Society Spring and Autumn Meetings
- ◆ United Kingdom Radiological Congress
- ◆ Symposium Mammographicum
- ◆ European Association of Nuclear Medicine Annual Meeting

All of the above provided opportunities to discuss with radiographers their education and professional development needs. They also helped to ensure that the professional and educational team remain abreast of practice and technological developments, a vital requirement for the work of the team.

Changes have been made to the way in which the Editorial Board works with the aim of improving the support it provides for the Editor-in-Chief. Board members now undertake specific roles and tasks in relation to developing and promoting the journal, for example, there is a small task force dedicated to obtaining indexing with Medline and to improving the journal's impact (ISI) rating.

Additional referees have been appointed and the processing of submitted papers has been speeded up with the introduction of new technology. This has led to significant reduction in the time lag from submission to publication and much benefit for publication schedules, for authors and for readers.

Synergy has also undergone further development during the year under the guidance of a newly formed editorial board. This has provided the editor, Rachel Kelly, with direct access to advice and support from a range of professional experts that mirror the make-up of the profession. Additionally, the board has been active in encouraging submissions for publication to *Synergy*. This has proved very successful with new authors emerging and a new 'student section' in which students can publish some of their best practice related course or dissertation work.

During the year, *Synergy News* experimented with a twice-monthly publication. While this was excellent from the point of view of publishing more news in a timely manner, it was not viable financially and *Synergy News* returned to monthly publication very quickly. The return to monthly publication has led to considerable pressure on the pages of *Synergy News* but also an opportunity to use the Society's website to a much greater degree.

Website (www.sor.org)

Throughout much of the year, work took place to re-develop the website. Behind the scenes, this was radical in that the basic structure of the site underwent fundamental change. At the user end, however, the process appeared to be more evolution than revolution. This was a deliberate decision as the original site had only been functioning for a little over a year and it was felt important to keep a feel of the old, very successful site as the new one took effect. The new structure will

facilitate further development and change to the website as this becomes necessary and will enable website management to become a routine 'in-house' function if the Society so determines.

Career Progression and Continuing Professional Development

At the very beginning of the year, the document *Education and Professional Development: Moving Ahead* was published. This together with the Curriculum Framework published in the preceding year formed the basis of a road show on career progression. The road show visited twelve venues linked to the National Councils and Regional Committees throughout the United Kingdom and ran up to three times in each venue. A cross section of radiographers attended, from managers and educators to clinical practitioners from the spectrum of disciplines and specialisms. The road shows were hosted by the particular National Council or Regional Committee, with Council/Committee members, UK Council Members, and regional and professional officers in attendance, and gave opportunity for radiographers country wide to up-date themselves on professional policy, guidance and expectations regarding career progression and professional development. At the end of the series of events, the presentation was modified and placed on the website so that those unable to attend could also access the material covered during the road shows. Overall, the road shows were well received and generated many questions at the time and subsequently. Feedback from them continues to inform the work of the professional and education team.

During the road shows, the opportunity was taken to introduce the concepts underpinning the profession's new continuing professional development (cpd) tool. Considerable work took place during the year to draft the specification for this and to place the contract, aided by an external expert adviser from the University of Lincoln, Dr Adrian Wheal. It is pleasing to record that the contract was placed at the end of June 2004 with Axia Citizen Connect, a company that has done similar work for other bodies, including the Royal College of Nursing. It is anticipated that by the next report the Society's new, web-based, cpd tool will be in use by a sizeable number of the profession.

Radiotherapy

Radiotherapy continues to suffer from a chronic and severe shortage of radiographers, exacerbated by the increasing pressure of cancer treatment targets. Work on recruitment and retention outlined elsewhere in this report is aimed at dealing with the problem but it is proving to be somewhat intractable. This has been a significant confounding factor in relation to making progress with implementing the profession's career progression framework. Council's Radiotherapy Advisory Group (RAG) has struggled with this, this year. A particular obstacle has been the lack of available staff and time to facilitate the education and development necessary to introduce assistant practitioners, or to support advanced practice initiatives.



‘I've been a radiographer for 30 years. It gives me enormous personal satisfaction to be able to work for the professional body. I spend lots of time talking to members and the general public; it's great to be able to pass on my love of radiography and to shape the profession for the future.’

Christina Freeman



“ During my 15 years at the Society, I have been fortunate to meet and assist many interesting people. I am especially proud when the Society's quick and efficient service is appreciated by members and non-members alike. ”

Valerie Asemah

Towards the end of the year, the Department of Health (England) set up its 'radiotherapy stock-take' process. The professional and education team, as well as RAG is heavily involved in this, or with work arising from it. It is hoped that this will provide the impetus necessary to move both assistant and advanced practice in radiotherapy forward.

There is a national radiotherapy managers' group which meets several times during the year. Members of the team were pleased to be asked to contribute to these meetings.

Magnetic Resonance Imaging

Towards the end of the year, magnetic resonance imaging (MRI) became a strong focus of activity when the Department of Health (England) announced plans to increase the number of scans undertaken through private sector provision. While initiatives to reduce waiting times for patients are to be welcomed, it is important to ensure that there is a sufficient, properly trained workforce available to support such initiatives. As this report is being written, work with the Department of Health is progressing to secure an appropriately trained assistant workforce in MRI, and to develop additional advanced practitioners in MRI.

Nuclear Medicine

During the year, Council formally established its Nuclear Medicine Advisory Group. This developed from an informal group that had been advising the professional and educational team on a variety of nuclear medicine matters, notably Positron Emission Tomography (PET and PET-CT). The group meets twice per year.

Ultrasound and Sonographer Registration

At the beginning of the year, work commenced with the United Kingdom Association of Sonographers to develop an application to the Health Professions Council for protection of the title 'Sonographer'. This was continuing at the conclusion of the 2003/2004 year, with an additional partner, the British Society of Echocardiography.

Consultant Practitioners in Radiography

It is pleasing to report that there were nine consultant radiographers in post at the end of the 2003/2004 year, and more posts out to advertisement or in development. The professional and educational team has provided welcome advice for departments seeking to establish such posts, and for individuals applying for them. This work has been helped considerably by the first cohort of consultant radiographers who are giving freely of their time and expertise to others. The consultant roles are diverse and have been showcased in *Synergy News* and on the website as they have been established. During the year, the first meeting of a Consultant Radiographer Network took place.



Senior Managers Seminars

The professional and educational team is conscious of the vital importance of radiology and radiotherapy and oncology service managers in relation to leading and developing members of the profession. Much work has gone on to improve interaction with managers, and to establish robust and quick communication links with the lead service manager in each department in the UK, using the National Councils and Regional Committees, and other ad hoc groups of managers.

Educators and the Council of Radiography Education Directors (CRED)

Liaison meetings with CRED have continued on a twice yearly basis and have proved beneficial. Support was given to CRED's SMART conference (Senior Managers and Radiography Teachers), with a member of the team in attendance.

Courtesy of the American Society of Radiological Technologists (ASRT) and the College of Radiographers, new and relatively new educators had the opportunity to apply for a scholarship place on the ASRT's Leadership Academy for Educators. This was popular with a sizeable number of entrants. The award was given to Ms Maryann Hardy of the University of Bradford and she attended the academy in Albuquerque in July 2004. This award is now an annual feature.

Skills Mix

Skills mix/service modernisation work continues unabated in England, with Wales and Scotland also now heavily engaged in such work. Professional Officers are centrally involved in this work, and liaise closely with industrial relations colleagues as necessary.

Two important pieces of work relevant to skills mix were started during the year. Firstly, work is taking place with the Royal College of Radiologists on a new and joint skills mix document for clinical radiology services. Early indications are that this will produce a document that fits with the profession's career progression

nise the importance of partnership and team working to clinical radiology services. Secondly, a new position statement writing by radiographers is in preparation, to replace the one published by the College of Radiographers in 1997.

Council also supported a pan-London pilot project for Cardiology Practitioners, aimed at meeting the workforce shortages in cardiology catheter laboratories.

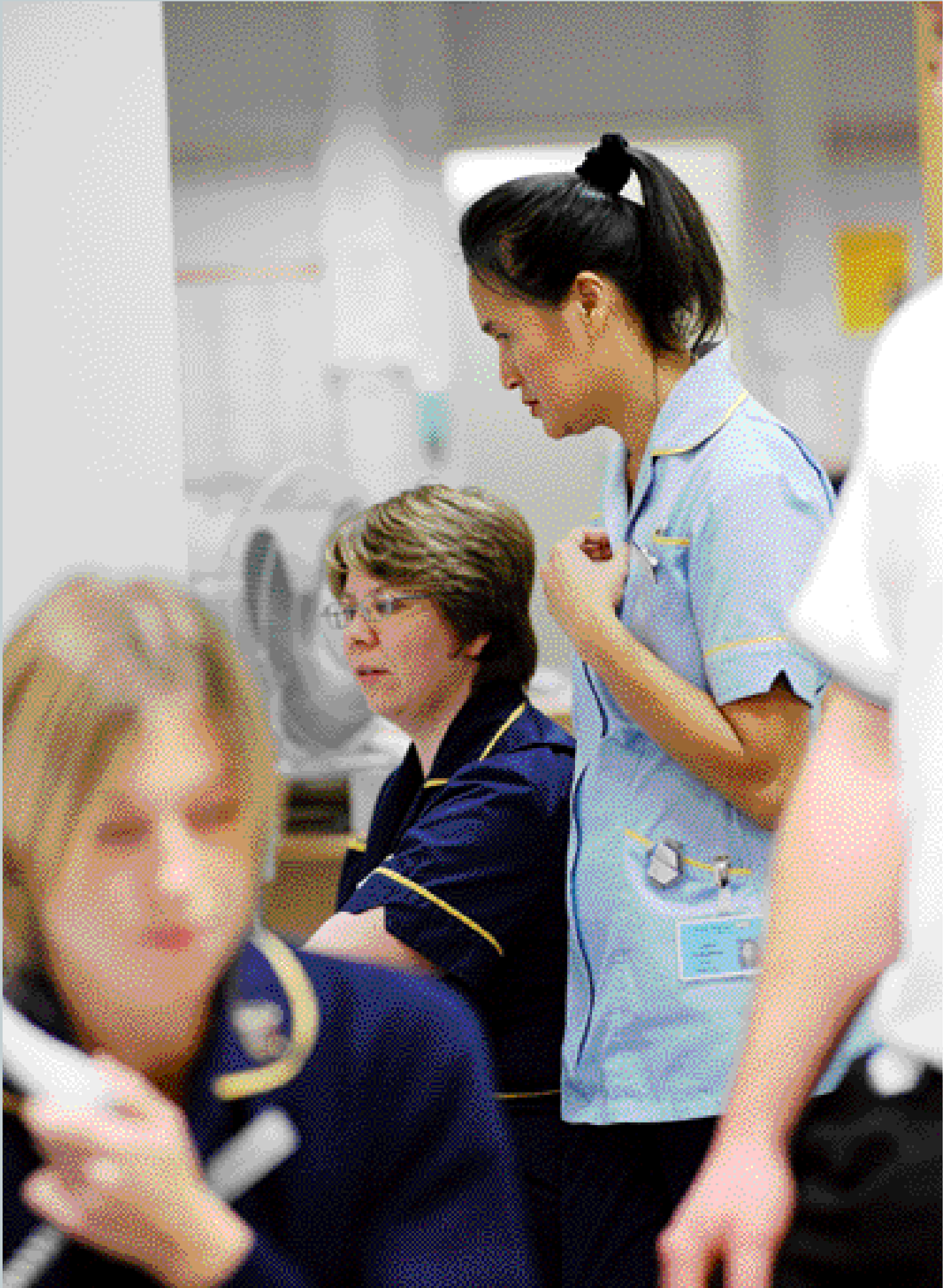
Prescribing

Work has taken place on supplementary prescribing as a result of the Department of Health's intention to extend supplementary prescribing rights to radiographers. It is expected that the first prescribing courses for radiographers will take place during the coming year.

Agenda for Change

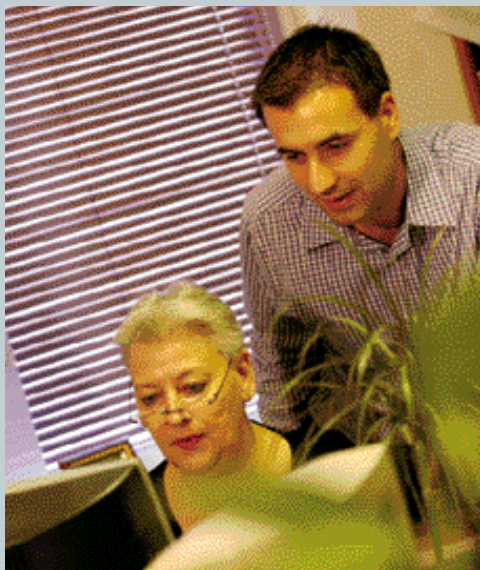
The professional and educational team has continued to support work on the new pay and reward structure for the national health service ('Agenda for Change'). In particular, the team has assumed lead responsibility for the Knowledge and Skills Framework (KSF) element, and its link to the profession's career progression framework.





Serving Together

The 2003/2004 year saw the Joint Validation arrangements for pre-registration education programmes come to an end. These had operated for eleven years, first, with the Radiographers Board at the Council for Professions Supplementary to Medicine and, secondly, with the Health Professions Council.



The remit of the new Health Professions Council (HPC) meant that, although regrettable, the end of joint working was inevitable as the legislation that established the HPC made it essential for the regulatory body to be seen to be working independently. Accordingly, the Profession's own policy for approval and accreditation of education programmes and professional practice was agreed by Council in September 2003 such that the profession could continue to fulfil its approval and accreditation duties once the joint procedures had come to an end. The Approval and Accreditation Board (AAB) was established with a two year work stream to establish robust procedures, overseen by the College Board of Trustees.

It is pleasing to record that a smooth transition between the Joint Validation Committee and the AAB took place on 9th July 2004.

The AAB has undertaken a considerable amount of preparatory work over the year and has produced two important documents. The first set out Council's policy, *The Approval and Accreditation of Education Programmes and Professional Practice in Radiography: Policy and Principles*. The second was guidance on how policy is to be implemented *The Approval and Accreditation of Education Programmes and Professional Practice in Radiography: Guidance on Implementation of Policy and Principles*

As well, the AAB has published intermediate guidance setting out the procedures for approving education and training programmes for assistant practitioners, and a number of these were approved at the Board's meeting in September 2004. Other work has also been streamlined under the AAB, notably approval of post-registration education programmes, accreditation of short competence based awards, and endorsement of short courses and CPD activities.

Recruitment, Retention and Return

During the year, the work on recruitment, retention and return funded by the Department of Health (England) came to an end. Several major pieces of work had been accomplished. These were the completion of a series of advice and guidance documents, as follows:

- ◆ *International recruitment of radiographers to work in the UK*
- ◆ *Guidance on the Provision of Work Experience for School Students*
- ◆ *Recruiting and Retaining the Radiography Workforce*

Additionally, a 'return to practice' pack has been produced and distributed widely, a 'returner's network' has been established, and the NHS guidance had been reviewed and enhanced.

Finally, a major research study into the quality and capacity of clinical education has been concluded and published, again with wide distribution of the work. This work was part funded by the Department of Health (England)



Working as part of the Membership team, I enjoy talking to our members and dealing with their needs and requirements in an effective, efficient and professional manner, as they should expect from the Society, each and every time they contact us.

Joel Wilkins

and part by the Board of Trustees of the College of Radiographers. It was carried out by the University of Central England in Birmingham in collaboration with Anglia Polytechnic University and the University Hospital, Birmingham.

National Radiography Project (England)

In December 2003, the Department of Health set up a further funded project to address recruitment and retention in the radiography. This is a two year project, led by the South West London Strategic Health Authority with a target to increase the radiography workforce in England by 1000 by December 2005. The professional and education team is working closely with this project.

International Society of Radiographers and Radiological Technologists and International Relationships

During the period of this report, the professional and education team supported the organisation's involvement in activities of the International Society of Radiographers and Radiologic Technologists (ISRRT). This included participation in a workshop to a revised international education and training standards document, and attendance at the annual meeting of the European Committee of Radiographers and Radiological Technologists.

In October 2003, two members of the professional and education team (the Director and the CPD Officer) visited the headquarters of the American Society of Radiologic Technologists to exchange ideas and share practices. A tangible outcome was the award by the American Society of a scholarship place on its Leadership Academy for Educators. In May 2004, the President and one of the Vice Presidents from the American Society paid a return visit to the UK and spent a day at headquarters during a tour of key radiotherapy centres in the UK.

Attendance at RSNA in December 2003, provided valuable opportunity to strengthen relationships with our colleague American and Canadian societies, and to hold talks with the American Registry on recognition of the UK qualification.



Radiographer of the Year
Margaret Walthier with SoR President Billy
Rea and Health Secretary John Reid at the
House of Commons Reception.



Consultations

A number of important consultations took place during the year, with contributions prepared by the professional and education team. These included the separate consultations in England and Wales, and Scotland on regulating the assistant level workforce; the HPC's consultation on its Education and Training Standards, and a consultation on extending PET services in England.

World Radiography Day and Radiographer of the Year

Promotional material was sent to all radiotherapy and diagnostic imaging departments together with a very wide circulation of information to mark World Radiography day on November 8th 2003. Many departments produced displays and put on activities to promote the profession.

The first competition to find and recognise the Radiographer of the Year was held. Each region and devolved country were asked to seek local nominations and put forward their winner to the UK wide competition. The result was a celebration of excellence in the profession with the winners in each part of the UK being appreciated and recognised by their own colleagues. The overall winner, Margaret Walthier from the North West region received her award from the Secretary of State for Health, John Reid at a reception in the House of Commons. This was in February 2004. In future, this award will coincide more closely with World Radiography Day .

Effective Alliances

Joint working has taken place with colleagues in other Allied Health Professional Bodies where appropriate. As a result of this, a Joint Statement on Foundation Degrees was approved by several organisations and should be helpful to those in education centres or involved in developing the assistant workforce.

During the year, the Allied Health Professions Federation approved the establishment of a Lead Educators Group. This should further facilitate working together, and provide expert advice on education matters to the Federation.

As a key stakeholder in the body that organises UKRC, we were pleased that the transfer of this event to Manchester was successful and that much positive response was received from delegates and from commercial exhibitors.

Relations with the Royal College of Radiologists have continued to be positive and constructive. A joint working group on Skills Mix in Imaging has been particularly encouraging and we look forward to this continuing and reporting in 2005.

We meet regularly with members of the English Department of Health and the Health Leads in the devolved countries. The growing political urgency that is being placed upon Health Service improvement and enhanced service for patients is resulting in unprecedented attention upon radiography as a vital component of health care. Increased training commissions, improved focus on career development and revised workforce planning procedures are all resulting in opportunities for the Society to be involved in promoting the profession and becoming more involved with central decision-making. We are determined to develop our influential position and to become active in leading the debate on health issues related to radiography, to continue to provide consultative expertise and to contribute to health policy in the UK.



BENEVOLENT FUND



Charity Registration Number: 326398

THE SOCIETY OF RADIOGRAPHERS BENEVOLENT FUND REPORT FOR THE YEAR TO SEPTEMBER 2004

The trustees present their report and the audited accounts for the year ended 30 September 2004. This is a summary of the full report which is available on request to The Administrator of the Benevolent Fund.

Aims and objectives

The Benevolent fund was established in 1983 as a registered charity with its own trust deed and constitution. The objects of the charity are “the assistance and relief of persons in the United Kingdom being members (including student members) and former members of The Society and their dependants who are in necessitous financial circumstances and in particular such of them as are old sick or incapacitated.”

Trustees

Margaret McClellan (Chair)
Christine Soutter
Sue Barlow
Valerie Edwards
Lorraine Nuttall
Denise Hardy
Gytha McBirney (Appointed March 2004)

Activity in the year

The Trustees met twice during the year to discuss requests for assistance and the awarding of grants and to develop the strategy for heightening awareness and interest in the fund. The available Trustees continued to attend and to give promotional talks at the Annual Delegates Conference and various meetings through the Countries.

Income for the year to September 2004 was £14,704, £1,232 less than the record income of 2003. In addition to many generous collections at Society meetings around the UK, there has been a doubling of donations under the gift aid arrangements, a £5,000 donation from the Society and a major boost to affiliation income following the re-launch of the Society credit card. Bank interest benefited through higher interest rates and balances held.

Expenditure amounted to £7,673, compared to £9,043 in 2003, mainly incurred through awarding grants to seven beneficiaries.

The fund bank balance at the 30 September 2004 was £42,155, an increase of £4,220 (11%) over the balance of the year before.

Reserves risk and investment policies

The charity's reserves amounted to £41,831 at 30 September 2004. The trustees wish to at least maintain this level of reserves and to make grants of assistance up to the level of the income received in the preceding financial year.

The funds are held in an interest bearing account and the rates of interest are reviewed periodically by the trustees.

Auditors

The Auditors Horwath Clark Whitehill LLP were appointed during the year, and a resolution to re-appoint them will be put before the Annual Trustees Meeting.



BENEVOLENT FUND



ACCOUNTS FOR THE YEAR TO SEPTEMBER 2004

	2004		2003	
	£	£	£	£
INCOMING RESOURCES				
Donations	8,114		12,778	
Income from credit cards	5,574		2,381	
Bank interest	1,016		777	
		<u>14,704</u>		15,936
RESOURCES EXPENDED				
Grants and donations	7,299		5,699	
Leaflets and posters	-		3,135	
Sundry expenses	374		209	
		<u>(7,673)</u>		(9,043)
Net movement in funds		7,031		6,893
RETAINED SURPLUSES				
-- BEGINNING OF YEAR		<u>34,800</u>		27,907
-- AT END OF YEAR		<u>41,831</u>		34,800
BALANCE SHEETS AT 30 SEPTEMBER				
		2004		2003
		£		£
Cash at bank		<u>42,155</u>		37,935
		42,155		37,935
CREDITORS : amounts due within one year				
Amounts due to Society of Radiographers		<u>(324)</u>		(3,135)
		<u>41,831</u>		34,800
Unrestricted funds		<u>41,831</u>		34,800

ADMINISTRATOR

Signed

Richard Evans
 Chief Executive Officer
 The Society and College of Radiographers

“ The most rewarding aspect of being a radiology manager is being able to create and deliver improvements to deliver a modern service. I aim to achieve this by ensuring the workforce are supported with opportunities for training and role development and that they all have options to balance their leisure and work activities.”

Jackie Nicklin



Committees and Working Parties of Council

The table below indicates each elected members' Society commitments for the year commencing July 2004.

College Board of Trustees Executive members and officers

Meets 4 times p.a.

Mr W Rea; Mrs A Pollard; Mr K Tucker; Mrs H Harries-Jones (from 1.7.04); Mr A Pitt (from 1.7.04); Mr I Henderson (from 1.7.04); Mrs V Bolton (from 1.7.04) CEO; DPP, DF

Investigating Committee (reports to Council) Meets ad-hoc
Representatives will be decided as and when required

Radiography Editorial Board (reports to Council)

Meets quarterly

Mr S Boynes; Mr I Henderson, CEO; DPP; DF

Delegates Conference Committee (reports to Council)

Meets 4 times p.a.

Mrs A Pollard; Mr A Pitt; Mrs H Harries-Jones; Mrs V Bolton

Trades Union Education Committee (reports to Council)

Meets half yearly

Mrs H Harries-Jones; Mrs J Venton

Health & Safety Forum (reports to Council)

Meets quarterly

Mrs J Hughes; Mrs V Bolton

Royal College of Radiologists

Meets half yearly

Representatives will be determined as and when required

RCR Patient Liaison Groups

Meets half yearly

Radiology Mrs M Waltier
Oncology Miss L Forsyth

BIR Council Observer

Meets quarterly

The President

RCR Faculty Board Observer

Meets quarterly

The President

Irish Institute of Radiography Liaison Committee

Meets half yearly

The President; DPP; CEO

Working Parties, Networks, SIGs, ad-hoc committees,
Membership as required

Meetings of Council

Month	Apologies
2nd Oct 2003	Mrs K Firkins, Miss K S Lanceley, Miss M McPake, Mrs M Weir, Mr S Boynes
5th Nov 2003	Mrs L Forsyth, Mrs M Weir
7th Jan 2004	Mrs A Tate, Miss K Lanceley, Miss M McPake, Mrs M Weir
4th Feb 2004	Mrs A Tate, Mrs M Weir, Miss K Lanceley, Mr K Tucker
3rd Mar 2004	Mrs L Forsyth, Miss K Lanceley, Miss J Reid, Mrs H Harries-Jones
7th Apr 2004	Miss K Lanceley, Mrs L Forsyth
5th May 2004	Mr W Rea, Mr A Pitt, Mrs L Forsyth, Miss K Lanceley, Mrs M Weir
5th June 2004	Miss K Lanceley, Mrs L Forsyth
7th July 2004	No apologies
2nd Sept 2004	No apologies

www.sor.org



Analysis of officials' salaries and benefits

Under the provisions of the Trade Union Reform and Employment Rights Act 1993 (TUERA) the following additional information is disclosed:

Office held	Gross salary	Employer's NI contribution	Pension contribution	Benefits	Value	Total
	£	£	£	£	£	£
President	-	-	-	-	-	-
Vice-president	-	-	-	-	-	-
President-elect	-	-	-	-	-	-
Members of Council	-	-	-	-	-	-
Chief Executive Officer (Appointed April 2004)	15,889	1,882	-	-	-	17,771

In the current year £12,000 was paid to the President's employer for the services of Ann Pollard as President.

Irregularity statement

As required by sub-section (6) (a) of the Act

"A member who is concerned that some irregularity may be occurring, or has occurred, in the conduct of the financial affairs of the union may take steps with a view to investigating further, obtaining clarification and, if necessary, securing regularisation of the conduct.

"The member may raise any such concern with such one or more of the following as it seems appropriate to raise it with: the officials of the union, the trustees of the property of the union, the auditor or auditors of the union, the Certification Officer (who is an independent officer appointed by the Secretary of State) and the police.

"Where a member believes that the financial affairs of the union have been and are being conducted in breach of the law or in breach of the rules of the union and contemplates bringing civil proceedings against the union or responsible officials or trustees, he should consider obtaining independent legal advice."

Review

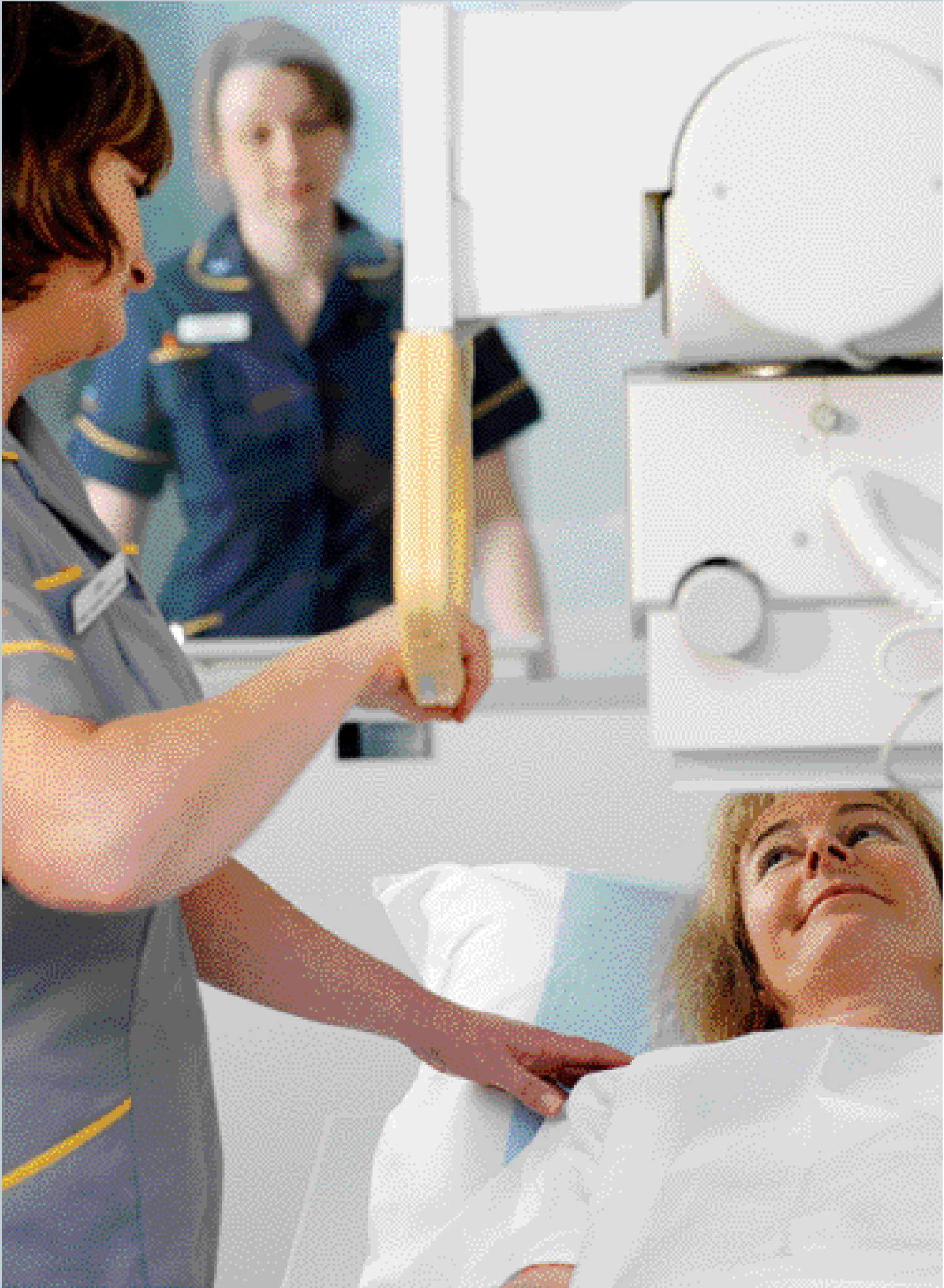
Increasing numbers of newly qualified radiographers see the value of joining The Society and the free trial membership period aims to help this situation continue. Membership numbers of The Society of Radiographers over the last five years show a pleasing increase and are as follows:

2000: 14,948 2001: 15,516 2002: 16,028 2003: 16,673 2004: 17,383

Numbers of students registered with the College of Radiographers continues to rise:

2000: 2,197 2001: 2,404 2002: 2,589 2003: 2,981 2004: 3,521

This supplementary information does not form part of the audited financial statements.



Financial Report

Services to Members, the Profession and the Public

Value for money

As an organisation we are very much aware that we need to provide our members with the best service we can from the means available. Great care is taken to select the most efficient providers, which fit with the organisation's needs and cultures, whether the service is to benefit members directly or to contain overhead costs.

More radiographers join each year and this increasing scale of our operation also helps us to provide services efficiently.

Prudence for the future

We budget as carefully as possible but there is always concern for the unexpected and this is particularly relevant at present. The world never stands still and there have been several fundamental changes put forward which could greatly alter the organisation, the profession and indeed the Health Service itself.

THE SOCIETY AND COLLEGE OF RADIOGRAPHERS

Summary of the Financial Results for the Year to September 2004

INCOME AND EXPENDITURE £	Year to 30 September 2004				2003
	SOCIETY	COLLEGE	CONTRA	Combined	Combined
Membership subscriptions	2,796,664			2,796,664	2,717,772
Other income:					
Student registration grants		283,275		283,275	244,145
Magazine income	676,913			676,913	691,087
Radiology and Oncology Congresses		312,787		312,787	387,431
Seminars and courses		146,357		146,357	148,908
Regions and Branches	37,798			37,798	31,079
Investment income	29,508	26,605		56,113	35,364
Other income	12,444	13,605		26,049	18,724
Donation and notional rent from Society		870,000	(870,000)	0	0
Total of other income	756,663	1,652,629	(870,000)	1,539,292	1,556,738
Total income	3,553,327	1,652,629	(870,000)	4,335,956	4,274,510
Salary costs	741,885	629,989		1,371,874	1,490,827
Operational and overhead expenditure:					
Donation and notional rent to College	870,000		(870,000)	0	0
Donation to Benevolent Fund	5,000			5,000	10,000
Donation – overseas placements		1,700		1,700	1,000
Agenda for change	70,191			70,191	56,821
Magazine costs	525,008	91,876		616,884	627,468
Regional offices, Councils and reps costs	245,521			245,521	251,574
Members insurance and legal costs	229,195			229,195	238,450
CPD and website costs	29,706	41,929		71,635	18,885
Radiology and Oncology Congresses		229,006		229,006	322,160
Courses, seminars, library literature and liaison		222,391		222,391	206,661
ADC, TUC membership etc.	131,701			131,701	165,734
Audit and professional fees	21,272	9,738		31,010	36,655
Occupancy	10,148	23,887		34,035	31,462
Depreciation, asset sales etc	46,131	52,576		98,707	102,254
HR, database and computer costs etc.	71,286	13,855		85,141	151,069
Telephone, travel, copying, postage etc	241,348	57,298		298,646	329,023
Total operational and overhead expenditure	2,496,507	744,256	(870,000)	2,370,763	2,549,216
Total expenditure	3,238,392	1,374,245	(870,000)	3,742,637	4,040,043
Surplus for the year	314,935	278,384	0	593,319	234,467

Financial Report for Year to September 2004

Society membership continued to grow through the year. Total income was £4,335,956 up by £61,446 (1.4%) from 2003 mainly through the increase in membership. Expenditure however, reduced by £284,845 (7.1%) to £3,742,637 for 2004. The main reasons were lower pension costs, savings on overheads and our lower share of the results of UKRC. The organisation activity continues however at a very high level, both on the many agenda for change and professional fronts. The Society and College had a combined surplus of £593,319 compared to £234,467 for 2003.

Commentary on Income and Expenditure

Income for 2004 over the whole organisation amounted to £4,335,956, an increase of £61,446 compared to last year's total of £4,274,510.

Income from membership subscriptions amounted to £2,796,664 in 2004, a rise of £78,892 (2.9%) over 2003. The increase arose from Radiographers joining The Society as there was no rise in subscription rates for 2004. Member's subscriptions represented 64.5% of total income in 2004, or to put it another way, 35.5% of the income necessary to run the organisation was found from other sources. This "other income" amounted to £1,539,292, a small reduction from 2003 for the following reasons:-

Major changes in other income for 2004 compared to the previous year were:

- a) Student grants increased by £39,130 (16%) from 2003, which in turn had increased over 2002 by 18%.
- b) Radiology and Oncology Congresses (ROC) companies contributed £74,644 (19%) less than 2003 – the share of results due to SCOR reduces each year until parity between the partners (RCR, BIR and IPEM) is achieved in 2005, and also the bi-annual UK Oncology Congress was not run this year.

The 2004 UK Radiological Congress was held in Manchester and was again highly successful.

- c) Synergy advertising declined slightly in 2004 but this was partly offset by increased website income.
- d) Income from the new investments, higher interest rates and levels of funds invested increased investment income by £20,749 to £56,113.

Expenditure for 2004 across the organisation amounted to £3,742,637, a reduction of £297,406 (7%) compared to 2003.

Salary costs in 2004 accounted for £1,371,874, a reduction of £118,953 from 2003 when an additional payment of £150,000 was made to the Society's pension scheme.

Operational and overhead expenditure amounted to £2,370,763, £178,453 less than for last year.

The main cost changes from last year were:

- a) The increasing demands of "Agenda for Change" throughout the countries including additional News Sheets to each member as well as extensive meetings to inform, briefings and generally maintaining a very high profile to represent Radiographers interests politically and with the media has cost £70,191, £13,370 (24%) up on last year.
- b) Magazine and journal costs fell by £10,584 (1.7%).
- c) The Society donated £5,000 to the Benevolent Fund, £5,000 less than 2003 since the fund is gaining more of its own income.

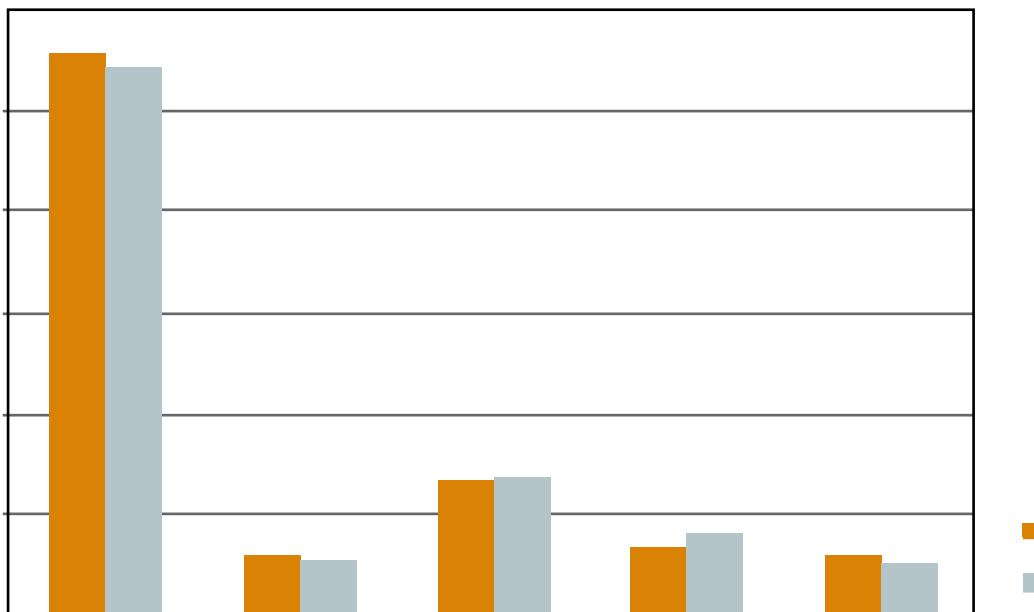
“ I have been in post now for nearly three years and am finding it just as exciting and challenging as when I first started. I am the professional lead and manager of the therapy radiographers at Poole Hospital. The most enjoyable part of my role is working to improve our services both technically and with the Modernisation team to examine and improve our processes.”

Sue Whitney
Head of Therapy Radiography

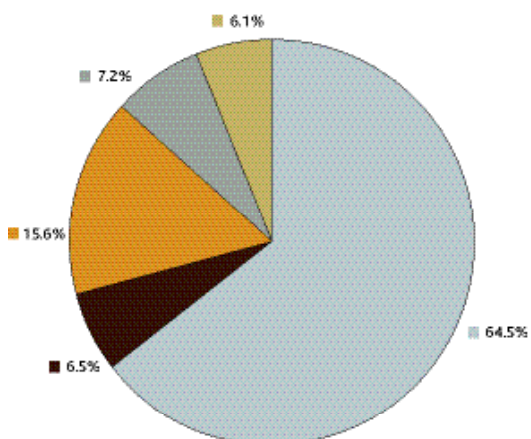


- d) Regional and Council costs decreased by £6,053 (2.4%) compared to last year.
- e) Member’s professional indemnity and legal costs fell by £9,255 due to lower legal costs.
- f) CPD and website costs increased by £52,750 to £71,635 following the signing of the new CPD learning system pioneered by AXIA and the Royal College of Nursing, which is being developed for the Society and College. 2004 also included the development costs of the new SOR website.
- g) ROC costs reduced by £93,154 from last year to £322,160 due to our lower share of the UKRC total and there being no UKRO in 2004.
- h) ADC and TUC fees costs fell by £34,033 to £131,734 mainly due to not repeating the 2003 SoR video costs at TUC.
- i) Courses, seminars, literature and liaison costs (attending national and international events) have increased £15,730 due mainly to more research items and the continued effort placed into College publications.
- j) HR database and computer costs reduced by £65,928 (43.6%) through bringing some items “in-house”.
- k) Telephone, travel, copying and postage costs reduced by £30,377 over 2003 which was a high point. Travel costs and unit copying costs were lower this year.

Income – 2004 compared to 2003

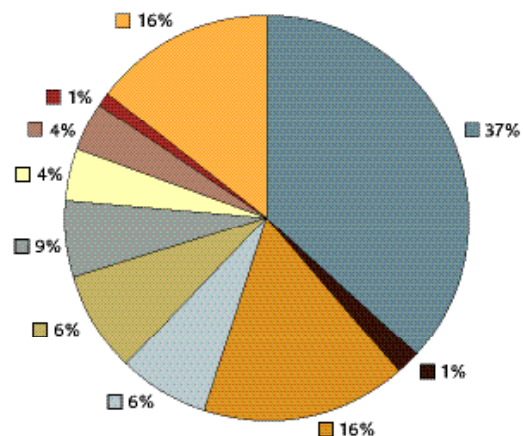


Income 2004



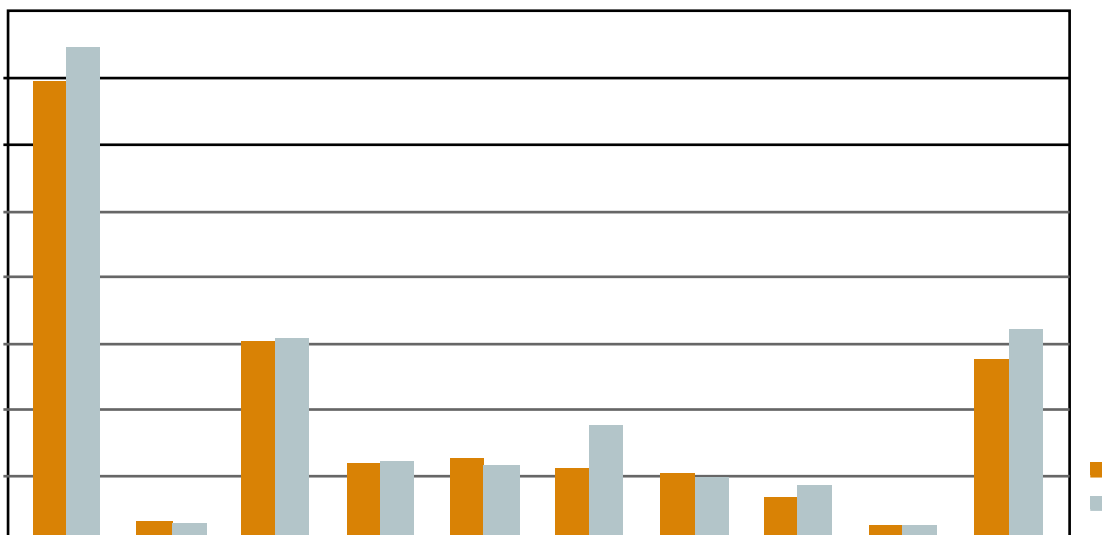
- Membership Subscriptions
- Student Registration Grants
- Magazines
- Radiology and Oncology Congresses
- Seminars, Regions, Other Income

Expenditure 2004



- Salary Costs
- Agenda for Change
- Magazine Costs
- Regional Offices, Councils and Reps
- Members Insurance and Legal Costs
- Radiology and Oncology Congresses
- Courses, Seminars, Library, Literature and Liaison
- ADC, TUC Membership etc
- Occupancy
- Overheads and Other Expenditure

Expenditure – 2004 compared to 2003



Commentary on the Balance Sheet

Total assets at the year-end were £3,456,118, £617,708 higher than £2,838,410 at September 2003. Tangible fixed assets, which include the new head office property, were down £68,080. Depreciation which has to be set aside each year exceeded expenditure on new assets. The Society and College Fixed Asset investment values rose by 10.2% to £551,056.

Current assets, less liabilities, were up by £634,732 at £1,468,727 which mainly reflects increased bank and money-market deposits arising from the surplus for the year.

BALANCE SHEETS AT 30 SEPTEMBER 2004					2003
figures in £	SOCIETY	COLLEGE	CONTRA	Combined	Combined
Tangible fixed assets					
Long leasehold property		1,196,254		1,196,254	1,222,546
Office fixtures, furniture & equipment	2,610	204,401		207,011	242,325
Computers	389	32,679		33,068	38,147
Motors				-	1,395
Total	2,999	1,433,334		1,436,333	1,504,413
Fixed asset investments	275,528	275,528		551,056	500,000
Investment in subsidiary	2			2	2
Current assets less liabilities					
Debtors	299,093	125,811	(48,826)	376,078	329,895
Money-market deposits	500,000	500,000		1,000,000	600,000
Bank balances etc	360,575	168,468		529,043	360,296
Creditors	(336,336)	(148,884)	48,826	(436,394)	(456,196)
Total	823,332	645,395	0	1,468,727	833,995
Total assets at September 2004	1,101,861	2,354,257	0	3,456,118	2,838,410
Share capital		2		2	2
Reserves					
Contingency fund	2,739			2,739	2,739
Industrial injuries fund	40,000			40,000	40,000
General fund	1,059,122			1,059,122	731,991
Restricted fund for overseas placements		15,559		15,559	16,925
Unrestricted funds		2,338,696		2,338,696	2,046,753
Total capital & reserves at September 2004	1,101,861	2,354,257	0	3,456,118	2,838,410

Reporting on Summarised Accounts

The above figures on pages 30 to 34 have been extracted from the full Society Council and College Board of Trustees reports and financial statements, which have been audited by Horwath Clark Whitehill and Horwath Clark Whitehill LLP respectively, who gave unqualified audit reports on 5 January 2005 and 10 March 2005. The auditors have confirmed to the Council and Trustees that the summarised financial statements are consistent with the full financial statements for the year ended on 30 September 2004. The Council's and Trustees' reports and financial statements were approved by Council and the Trustees and signed on their behalf on 5 January 2005 and 10 March 2005. The accounts of the College and Benevolent Fund will be submitted to the Charity Commission in July.

Horwath Clark Whitehill LLP also gave an unqualified audit report on the financial statements of the Benevolent Fund for the year to 30 September 2004 and which were approved by Trustees on 10 March 2005.

These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the charity. The full trustees report, audit report and financial statements may be obtained from The Secretary, Society and College of Radiographers, 207 Providence Square, London SE1 2EW.

5 January 2005

The Society of Radiographers Limited

2005 Annual General Meeting

Venue: The Rochdale Room, Jury's Inn Hotel,
56 Great Bridgewater Street, Manchester, M1 5LE

Date: Sunday 5 June 2005, commencing at 5.00pm.

Notice is hereby given that the Annual General Meeting of The Society of Radiographers Limited will be held on Sunday 5 June 2005, commencing at 5.00pm, for the following purposes:

1. To receive, consider and adopt the report of Council and the accounts for the year ended 30th September 2004 and the auditors report thereon.
2. To re-appoint the auditors Horwath Clark Whitehall and authorise the Council to determine their fee.

By order of the Council: Richard Evans, Chief Executive

Date: 5th January 2005

Registered Office: Society of Radiographers, 207 Providence Square,
Mill Street, London SE1 2EW

Notes for AGM

1. A member entitled to attend and vote at the above meeting may appoint a proxy to attend and on a poll to vote instead of himself/herself. Any proxy must be a member of The Society. A proxy form is attached.
2. The instrument appointing a proxy and any authority under which it is executed or a notarially certified or office copy of such authority must be deposited at the registered office of The Society not less than seven days before the time for holding the meeting or adjourned meeting at which the person named in the instrument proposes to vote.
3. Admittance to the AGM may only be granted to those who can show evidence of current membership.

The Society of Radiographers Limited

Proxy Form
Annual General Meeting 2005

If you cannot attend the Annual General Meeting (AGM) you are entitled to appoint someone else, a 'proxy', to attend and vote in the event of a poll being called.

A proxy must vote as you instruct and cannot vote for you on a show of hands.

You can choose a proxy other than the President by crossing out 'President' where printed below and writing your proxy's name and SoR membership number in the space provided. Please indicate for each resolution, how you wish your proxy to vote. If you do not tell your proxy how to vote, your proxy can abstain or vote as he/she thinks fit on the resolutions or any other business conducted at the meeting (including amendments to resolutions).

I, _____ Membership No: _____
appoint the President (*tick as appropriate*)

appoint _____ Membership No: _____
as my proxy to attend and on a poll to vote on my behalf at the Annual General Meeting of The Society of Radiographers to be held at 5.00 pm on Sunday 5th June 2005 and at any adjournment of that meeting.

Please sign here: _____ Date: _____

STRATEGIC AIMS

Good progress is being made in developing the work of the organisation under the strategic headings:

- ◆ Lead Professional Practice and Standards
- ◆ Improve Service to Members
- ◆ Maintain / Improve Financial Viability
- ◆ Increase SCoR Influence. Raise Awareness of Radiography
- ◆ Effective Organisation and Good Employer.

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THE SOCIETY OF
RADIOGRAPHERS



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Designed by Siân Cardy

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February 2005