

# Annual Report 2006-07

THE SOCIETY OF  
RADIOGRAPHERS



membership organisation vision

## **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 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 all such objects which a trade union may lawfully pursue in accordance with statute.
- ◆ To further public education therein.

# ANNUAL REPORT 2006-2007

for the year ended 30th September 2006

## **Registered office**

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## **Company Secretary**

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## **Auditors**

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The Society is the Trade Union and Professional body for those practising in clinical imaging and radiation therapy.

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membership organisation

# A MESSAGE FROM THE PRESIDENT



It is a pleasure and a great privilege for me to introduce this Annual Report as President of the Society of Radiographers. I hope you will take some time to read about the many activities of our Society.

At this time of change and uncertainty, there is a need for professionalism in how we interact with patients, in our personal development and as a group of healthcare workers. Professionalism is essential for radiography now and for the future.

During my presidential year I have been privileged to have the opportunity to attend the European Congress of Radiology in Vienna and The Radiological Society of North America in Chicago. I was delighted to meet with other radiographers from across the world. The common subject of interest to them was the implementation of our 4-tier structure and particularly the advancement of our roles as radiographers. Internationally the UK is seen as a leader in the development of Radiography. Our level of professionalism has become the envy of many other countries. The credit for this is due to the excellent professional documents and guidelines produced by the Society of Radiographers, the hard work by the staff and the dedication and commitment of you, our members. With the increase in Consultant and Advanced Practitioners across the UK, radiographers are being recognised as true professionals and representatives of an evolving and progressing profession.

The Society of Radiographers continues to grow in strength and influence. We can point to many successes, as can be seen in this report. I do, however, fully acknowledge the many pressures and difficulties experienced by radiographers from all parts of the UK at present. Continuing inconsistencies in the results of Agenda for Change, the lack of funding in the NHS and consequent threats to services and jobs are compounded by rising demand for our services and policy initiatives that seem intent on causing division between professions and even threaten the professions themselves.

This is why your Council is making professionalism a strategic priority through the introduction of the three year strategic plan. This incorporates ways to improve our service to members; the function of our organisation and our vision for the future.

This vision must encompass the changing nature of healthcare delivery in the UK and the wider political influences across the four countries of the UK, within Europe and internationally. It must address the diversification of the clinical imaging and radiotherapy and oncology workforce whilst considering the future advancements in technology and their inevitable impact.

The Society of Radiographers needs to be a flexible, dynamic organisation that anticipates and readies the profession for change, whilst enabling opportunities for our members and capitalising upon any benefits.

I believe that this report shows that the Society of Radiographers is successfully facing the challenges of today and is planning for the changes of tomorrow and the future of our profession.

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

Andrew Pitt  
President of the Society of Radiographers

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# SOCIETY COUNCIL MEMBERS AND OFFICERS

For the period of this Annual Report and until 17 January 2007

## ELECTED OFFICERS

President:	<b>Mrs H Harries-Jones DCR(R) PgC (to 30.06.06)</b> Mr A Pitt DCR(R) (from 01.07.06)
President Elect:	<b>Mr A Pitt DCR(R) (to 30.06.06)</b> Mrs Z Mitton DCR(R) DRI (from 01.07.06)
Vice President:	<b>Mrs Z Mitton DCR(R) DRI (to 30.06.06)</b> Mr M Graveling BSc(T) (from 01.07.06)

## SENIOR OFFICERS

Chief Executive Officer:	Mr R Evans HDCR
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 <i>Synergy</i>	Ms R Kelly
Editor <i>Radiography</i>	Professor P Hogg MSc DCR(R) DRI

## REGIONAL REPRESENTATIVES

Scotland	Miss L Forret DCR(R) Mr K McMurray DCR(R) Mrs S Mathers MSc DCR(R)
Yorkshire & North Trent:	Mr M Graveling BSc(T)
Northern:	Mrs P Kitto DCR(R)
North West:	<b>Mr A Pitt DCR(R) (to 30.06.06)</b> Mr S Crimmins DCR(R) (from 01.07.06) Mrs S Conn TDCR (from 06.12.06)
Northern Ireland:	Mr K Tucker DCR(R)
Wales:	Mrs J Hughes DCR(R)
Midlands:	Mrs A Pollard FCR DCR(R)
Eastern:	Mrs Z Mitton DCR(R) DRI
London:	Mr I Henderson FCR DCR(R) MSc PgCHE
South East:	Mrs G Dolbear MSc PgCL&T(HE) DCR(R)DMU
South West:	<b>Mrs H Harries-Jones DCR(R) (to 27.08.06)</b> Mrs P Kimpton DCR(R) (from 09.10.06)

## The College of Radiographers Board of Trustees (CBoT)

### Trustees:

Chairman:	Mrs N Sinclair MA BSc(Hons) TDCR
Ms P Chapman	Mr A Pitt DCR(R)
Mr A Kay	Mrs A Pollard FCR DCR(R)
Mr I Eversden M.Phil	Mr I Henderson FCR DCR(R) MSc PgCHE
Mr J Foster FCA	Mr M Graveling BSc (T)
Mrs P Williams MSc BSc(Hons) TDCR	Mrs S Mathers MSc DCR(R) (from 05.07.06)
Dr K McHugh FRCR (from 28.09.06)	Mr S Crimmins DCR(R) (from 05.07.06)
<b>Dr R Bury FRCS FRCR (to 09.03.06)</b>	Mrs J Hughes DCR(R) (from 06.09.06)
	<b>Miss L Forret DCR(R) (to 05.07.06)</b>
	<b>Mr K Tucker DCR(R) (to 05.07.06)</b>
	<b>Mrs H Harries-Jones DCR(R) PgC (to 27.08.06)</b>

The Council members and College Trustees are covered by professional indemnity insurance

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

# COUNCIL MEMBERS



Council members, left to right:

Shaun Crimmins; Sandie Mathers; Jackie Hughes;  
Kenny McMurray; Pam Black; Linda Forret;  
Peter Nimmo; Zena Mitton; Andy Pitt;  
Michael Graveling; Ian Henderson;  
Hazel Harries-Jones; Ann Pollard; Kevin Tucker

[www.sor.org](http://www.sor.org)

# A REPORT FROM THE CHIEF EXECUTIVE OFFICER



One of the main responsibilities of the governors of any organisation is to make plans to ensure that their company succeeds in its purposes, continues to grow and remains effective. For the Society of Radiographers, this governance is the responsibility of the democratically elected members of the UK Council.

In October 2005, UK Council met to consider its strategy for the Society over the coming three years. The resulting plan concentrated the work of the organisation in three different directions. The Membership section of the plan concentrates on the development of services to grow the Society and support our members with all of their diverse needs. The

Organisation segment concerns the way Council and the officers of the Society work together most effectively and efficiently. Lastly, the Vision section is about building our position of influence as we look ahead and prepare to take the profession and the organisation forward into the ever more rapidly changing world of the future. Detailed work to make progress in each of the three directions has begun and the early parts of this work are described in this report.

The plan was publicised to all members in a leaflet entitled "Where do we go from here?". I hope you will agree that the new strategy makes a good start at answering this question for our profession, our Society and for each and every member. It is clear that a strong, well organised and correctly governed organisation provides a solid basis upon which to build for whatever the future has in store. This is why the annual report this year takes the theme "A strong Society today... A Profession fit for the future".

The report covers the activities of the Society in the year up to 30 September 2006. The financial section shows that the organisation continues to prosper despite growing pressure on our income

sources. This is obviously good news. However, there can be no complacency about this. The new strategy provides for a renewed focus on the value of membership. It is vital that we continue to grow through encouraging new members and working to retain existing members in order to sustain the vital work of the Society into the future.

Other highlights in the report include the continuing battle to achieve fair treatment of radiography staff at work. You will see how we are continuing to identify and highlight health and safety risks to members; how the network of accredited representatives and the regional and devolved national structures are becoming stronger in bringing the work of the Society close to every member and how we are growing in influence amongst health policy makers throughout the four countries of the UK. In England, the Society is represented on the National Radiotherapy Advisory Group, the National Diagnostic Imaging Board and National Imaging Workforce Board. We meet regularly with the Department of Health and with government ministers and send representatives to many working groups and policy forums. In Scotland and Wales our officers have even more influence than in England dealing right up to ministerial level on a regular basis. As the situation in Northern Ireland develops towards a return to devolved government, we aim to build our position of influence in a similar way.

Once again the year has seen a great number of new professional policy and guidance documents developed and published. The value of "CPD

## "A strong Society today... A



Now” is becoming more widely recognised among members and appreciated as a model for other organisations to follow. We have responded on behalf of our members to consultations and have continued to increase our work with partner bodies both in the UK and internationally.

One aspect of partnership that I have been personally involved in is the development of relationships with colleagues in industry. I was fortunate to be invited to observe a very successful alliance that operates between our sister organisation in the US and the various companies involved in equipment, pharmaceutical and support technologies for diagnostic imaging and radiation therapy. I was impressed by the commitment from both industry and profession in a collaboration that brings significant benefits on all sides. By this time next year I hope to be able to report the establishment of a similar partnership here in the UK.

During the year the officers and staff of the Society have continued to operate within the policies and direction set by Council and in pursuit of the objects of the Society. Individual work projects established under the previous strategy have been completed and many new pieces of work have been started in line with the new direction. As always when putting together the Annual Report, I am deeply conscious of the outstanding support that I have from all of the people that work for the Society and College. In particular I should like to mention Audrey Paterson, Warren Town and Neil Williams who provide excellent leadership to their staff and also work incredibly hard as a team on behalf of the Society.

During the year we were sad to say goodbye to Sue Shelley, Seromanie Bernard and David Wait. Gill Mayo was also away from the organisation on secondment to the Department of Health. We were pleased to welcome Rachel Harris (Professional Officer, research), Rita Philips (Professional Officer, Ultrasound), Kim Sunley (Health and Safety Officer) and Richard Pembridge (Regional Officer, South West).

This report provides you with a chance to understand something of the diversity and impact of the work of the Society of Radiographers. I hope you will find time to read it and to let us know your views on how Council and the staff are doing on behalf of members and on behalf of the profession. Making your views known has never been easier, whether through your local accredited representative, your regional committee or national council, your UK Council member, full-time regional officer or by contacting us at head office.

I also hope that you will consider becoming more actively involved in the work of the Society. It is all too easy to think that the SoR consists of the officers and Council, plus our network of excellent local representatives. If we really care about strengthening our Society and about securing the future for our profession, then we need to see a much wider involvement of members everywhere. We all are the Society of Radiographers and we all have a part to play in “A strong Society today... A Profession fit for the future”.



Richard Evans

# Profession fit for the future”



Members **are** the Society of Radiographers.

Building services to members is a vital part of our work.



### Pay and Conditions

During 2006 the financial effects of the introduction of Agenda for Change (AfC) were realised. Despite assurances from successive Ministers of State that AfC was and would continue to be fully funded, the Department of Health (England) admitted to having underestimated the cost of AfC. In England the task of implementation at a local level was both under resourced and poorly managed. Appeals and evaluations remain outstanding for all staff groups and not least for a substantial number of our members. It has been particularly damaging to hear repeated claims from the government and NHS Employers that the scheme has been successful and that work on implementation is now complete.

Action at local level to address inconsistency and poor practice resulted in some successes. However without central impetus, willingness to remain focused on AfC and to reproduce results consistently across the whole of the country has diminished. NHS Trusts in England looked to the next set of challenges from government such as working with the independent sector, the drive towards plural provision of services, re-structuring of primary and community care and an instruction that all NHS Trusts in England must be in the black by April 2007. These pressures have overtaken efforts to ensure a fair national pay and conditions system.

In the Autumn of 2006 TUC affiliates and non-affiliated health unions joined forces to establish a campaign group – NHS Together. All health unions including the SoR, have called for a halt to new initiatives, continuing privatisation and redundancy. On 1 November NHS Together lobbied Parliament which resulted in some success. We now know that many backbench MPs are concerned about the current state of NHS staff morale and the sustainability of an NHS which appears to have lost direction and leadership.

Throughout 2007 the SoR will continue to support the NHS Together campaign and encourage members to participate in local activity to oppose further reductions in services and staffing levels.

### Pay Review Body

In its 2005/06 Report the Pay Review Body (PRB) ignored attempts by the government and the Department of Health to limit pay uplift by awarding an above inflation increase. The SoR presented evidence on behalf of members and also jointly with other unions. As we move into 2007 the SoR is engaged with the PRB in the next round of discussions. Once again, the Treasury is attempting to limit increases.

# membership



## Wales

The Welsh Partnership Forum (WPF) is made up of Trade Unions, NHS Employers and the Welsh Assembly Government. The Health Minister regularly attends and contributes to debates.

The work of the Forum and its subgroups has continued throughout the year. The National Officer for Wales represents SoR on the WPF and various subgroups to take forward the work of the Forum.

During the year the Society met with the Health Minister, raising awareness of the important roles of both Diagnostic and Therapy radiographers and because of these well established links the Health Minister gave a key note speech at the 2006 Annual Delegates Conference.

The work of the Imaging Modernisation Forum and Board continues with input from the Chair of Welsh Council and the SoR. One major piece of work that was produced in 2006 was a report on workforce development. Work will continue on the recommendations of this important piece of work during 2007.

Work has continued in implementing AfC. This is overseen in Wales by the Agenda for Change Implementation Group. The group is partnership based and gives advice and support to NHS Wales to ensure that AfC is implemented in a fair, transparent and consistent way.

The group issued "All Wales" guidance in several areas including "Ensuring Career and Pay Progression". We reached agreement that Radiographers will be one of the groups of staff that will be covered by Annexe T. The SoR is represented on the implementation group and several AfC subgroups.

The Society continues to work closely with the KSF lead for Wales.



## Scotland

There is continuing and increased awareness within the Scottish Executive Health Department of the vital contribution which diagnostic and therapy radiographers make towards meeting the strategic objectives of NHS Scotland.

Throughout 2006 there were a number of meetings, collaborative initiatives and events involving SoR and the SEHD which aimed to empower and support the extension of professional roles and the provision of effective and improved diagnostic and radiotherapy services.

In March 2006 the Scottish Health Minister, Andy Kerr, launched the Radiography Role Development Report which recommended the introduction of the 4-tier model throughout NHS Scotland. This recommendation was underpinned by the development of an educational framework for assistant practitioners, commissioning of postgraduate courses and support for the appointment of at least four consultant radiographers.

In September Scottish Council combined the AGM with a collaborative event organised and supported by the Council, NHS Quality Improvement Scotland and NHS Education Scotland and the Scottish Executive Health Department. The event highlighted opportunities for radiographers engaging in clinical effectiveness, role development, career progression and radiography and radiotherapy service planning. The Diagnostic Collaborative Programme was launched in April of 2006 to ensure delivery of the waiting time targets for a range of diagnostic procedures. This has resulted in a number of radiographers in every NHS Board being actively involved initiating and planning changes and improvements to the delivery of the service they provide.

SoR continues to be represented at national level in all forums relating to workforce planning, staff



governance and terms and conditions of employment. In November, agreement was reached on the implementation of Annex T consistently across NHS Scotland.

Scottish Council and the Scottish Reps Forum each met regularly during 2006 and in June held a networking day to provide a forum for joint briefings, exchange of information and development of the work plan for Scottish Council for 2007.

### Northern Ireland

As the political process in Northern Ireland progressed towards re-establishment of the Assembly, the SoR has been establishing close links with the reformed health governance structures.

After a period of vacancy, the membership elected a new member to the UK Council, ensuring representation of the particular interests of members in the Province. As the year ends, we plan to employ a new officer based in Northern Ireland.

### England: National Consultation Bodies

Unlike Wales and Scotland, England has struggled to retain a viable and respected Social Partnership Forum (SPF). In the latter part of 2006 it was formally accepted by all sides that the Social Partnership Forum in England had to change or be disbanded. The Department of Health, the TUC and the individual health unions worked hard to resurrect the SPF in a form that would be seen as a viable and worthwhile body.

The SoR retains positions of influence in the re-configured SPF and also on the newly formed Social Partnership Working Group.

A separate overarching body, The Stakeholder Forum (SF), has also been established to discuss emergency health policy under the direction of the Secretary of State for Health. The SF will meet quarterly. The SoR represents the breadth of health sector professional TUC affiliated unions on the SF.

The SoR is also influential in the field of wider public services policy through membership of the Public Services Forum and Liaison Group (England).

The Society is an active affiliate of the TUC and participates on a number of its working groups.

### Independent Sector Treatment Centres

The policy in England to use the private sector to support the NHS moved into a second phase in 2006. The working group, where the SoR has representation, revised the HR resource framework to take account of experience gained from the Wave One programme and to define the employment parameters for the independent sector. This included reinforcement of the principle of 'additionality' which restricts the ability of independent providers to employ NHS staff. This has been a controversial policy at all levels, not least within the SoR membership. However, the principle has been used to support arguments for a more robust and supportive training programme for seconded or directly employed staff who work for an independent provider.



## TUC Congress 2006

Throughout 2006 the SoR participated in TUC activity across the UK. This was particularly successful in England at Brighton in September. A student member seconded a key debate on Health Service Reform. This was the first time that a student had attended a congress as a delegate. Her participation in the debate raised the profile of the SoR and illustrated that key public services must have the enthusiasm and support of 'new blood' to the service.

## Health and Safety

Additional time and resources are being channelled into health and safety.

The SoR National Health and Safety Forum has played an active role in developing policy and giving direction. The forum has been kept informed of health and safety developments through presentations from guest speakers such as those from the Health and Safety Executive (HSE) and NHS Security Management Service on topics as varied as musculoskeletal disorders and violence and aggression.

A major area of work for 05/06 was on the prevention of musculoskeletal disorders in sonography which resulted in a well attended and successful conference on the topic organised by the SoR in May. To raise further awareness of the issue and encourage good practice, publications, namely industry standards on the prevention of work-related musculoskeletal disorders in sonography and general guidance on prevention, are planned for launch in December 2006.

The SoR continues to encourage members to take on the role of safety representatives and a series of profiles were published in *Synergy News* highlighting the

challenges and rewards of being a SoR safety representative. The 'Health and Safety News' pages in *Synergy News* and on the SoR website have been redesigned.

The SoR has secured a seat on the occupational health and safety sub-committee of the NHS Staff Council and on the NHS Counter Fraud and Security Management Service's Strategy Interest Group which gives us an opportunity to raise concerns and influence policy decision makers and NHS Employers. The Society is also represented on the TUC health and safety group.

In relation to work related stress, training and awareness sessions have been delivered to regional safety representatives on the stress standards. The SoR successfully worked with TUC to ensure that the HSE invite SoR safety representative to a series of regional seminars on the prevention of work related stress in the NHS.

The launch of the SoR's publication on work-related stress is planned for ADC 2007.

# organisation



## Personal Injury

Whilst the main thrust of activity has been on the prevention of work-related injuries and ill health, work has continued on raising awareness of the three year time limit for making personal injury claims. There is continuing work to inform members of their rights and the expectations of support as a benefit of membership.

We continue to receive a steady number of claims to process. Many of these concern repetitive strain injury or associated conditions and the level of activity we have seen has been used to illustrate to the Department of Health and the Pay Review Body that workplace injury is not to be ignored.

## Equal Opportunity Reps Network

The Equal Opportunity Reps Network met on three occasions in 2006. Meetings have been well attended but not all regions were represented. The group received informal training on equality issues and in Edinburgh were addressed by Nick Putnam from the Scottish Refugee Council.

## Equalities Networks

### Minority Ethnic Network of SoR (MENSoR)

MENSoR successfully held their first study day at the HQ in London. Although the number of delegates was not as large as hoped, the quality of the speakers and the professional manner in its delivery will no doubt ensure that future events will attract larger numbers.

The network held a number of meetings in 2006 in locations around the UK. The intention was to encourage more members to attend. Membership of MENSoR currently stands at around 130 but the meetings fail to attract more than 10% of the members.

The Network has a small and committed group and hopes to build on this solid foundation. The aim for 2007 is to encourage attendance at the meetings and in the short term it has been agreed to hold meetings in London and Birmingham only.

In 2006 delegates were sent to the TUC Black Workers Conference. MENSoR will again send delegates to the event in 2007. They have also nominated one member for the TUC Black Workers Committee.

### disAbility

The disAbility Network has held a number of meetings but does not seem to be able to attract members of the network to attend. Membership stands at around 30. The network is exploring collaboration with disability groups in sister unions.

The group has sent representation to Disability Rights Commission seminars and responded to the Accessible Venues Consultation issued by the Welsh Assembly.

A new smaller formatted membership form has been introduced that includes the aims of the network.

### SoR Together in Equality and Diversity (SORTed)

Membership of SORTed currently stands at around 30 members. SORTed is the least active of the networks and again we hope that collaboration with other union networks such as the Chartered Society of Physiotherapists Lesbian, Gay, Bisexual and Transgender Network will encourage participation at meetings in the future. The Society in 2006 nominated a member of SORTed for the TUC Women's Committee.



### Trade Union Education (TUEd)

Training of Representatives is an important aspect of SoR activity. In 2006, we sought to improve access to training and encouraged participation. Nine residential training courses for new reps were provided in the year to October 2006.

The TUEd committee considered various methods of maximising attendance on these courses and implemented a system where reps are automatically booked for training during their first six months after election. Initial results have been positive with a low drop out rate.

We believe this approach assists reps in securing time-off to attend the course. Reps are able to demonstrate that the Society is committed to training new reps to ensure they can carry out their duties efficiently and competently.

The committee are now looking to plan for an increase in rep training to meet demand.

During 2007, all Society induction courses will become endorsed by 'CPD Now' as well as the current TUC accreditation.

In late 2005 a collaboration between TUEd and MENSOR developed an innovative approach to the area of diversity. Through joint working with a Newcastle based training company, 'Juice', an awareness session was developed which aimed to highlight the broad number of diversity issues that both reps and employers can face.

### Health Professions Council (Representation)

The SoR has seen a year on year increase in referrals to HPC which involve our members. The level of work required to represent members at investigative and full hearings is considerable. As a consequence of the increase and the expectation that there is unlikely to be any decline in referrals we now have two officers assigned to this work. We will continue to monitor the level of activity throughout 2007.

### NHS Ill Health Retirement Benefit and NHS Injury Benefit Review

NHS Employers and NHS Trade Unions began a joint review (England and Wales Only) in 2006. The review will examine how staff sickness and injury benefit is managed in the NHS. It will include preventing sickness further, improving occupational health services and supporting staff to 'step down' to do a different job or work part-time to retain employment.

There will be a three month consultation period for all NHS staff, likely to be in the summer of 2007.

Following which recommendations will be made to Ministers.

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## NHS Pensions Review

August 2006 saw the conclusion of three years work in reviewing the NHS Pension Scheme. This culminated in an agreement between NHS employers and NHS trade unions. This agreement was set out in full in 'Moving to the Future: the NHS Pension Scheme Review: Joint Proposals from NHS Employers and the NHS Trade Unions'.

This document and other supporting documentation was immediately made available on the SoR website and an article appeared in *Synergy News* in September announcing the agreement and notifying members of a three month consultation period. This ended on 20 November in England and Wales. (The consultation period in Scotland and Northern Ireland closed January 2007.)

The NHS Pension Review Steering Group (on which the SoR is represented) continued to meet throughout and after the consultation period.

## Annual Delegates Conference

135 Delegates attended ADC in Cardiff.

Speakers included the Minister for Health for Wales and the Assembly Member for Cardiff Central, Jenny Randerson, who welcomed delegates at the start of Conference. Elizabeth Smith, SoR's legal expert who leads many of the compensation cases for stress and limb injuries on behalf of SoR's members gave a keynote address before Conference debated several motions on the issue of health and safety and stress at work. The range of issues raised by motions debated at Conference showed the importance of ADC in being the focus each year for members' concerns.

Conference grows in strength each year, as evidenced by the size of delegations and the quality of debate.

The Delegates Conference Committee made a number of practical changes which were well received by delegates and it is always keen to receive further suggestions for improvement. DCC will continue to look at ways of encouraging greater participation by members via the regions/countries structures and wider use of the SoR website is planned.



## Professional Indemnity Insurance

As well as an increase in referrals before the HPC we have also seen further increases in cases referred to the SoR under the Professional Indemnity Scheme. There were six new cases during 2006. The indemnity insurance will pick up the bulk of the cost of management claims. However, this area of the insurance market is very limited and some of the main players no longer provide cover or have extreme restrictions on the level of support they are prepared to provide.

We anticipate that the moderate levels of increase in the cost of premiums will come to an end soon and we will need to review the level of cover for specific high risk groups.



The Society **sets** the standard in professional development for members and for the entire profession.



## Introduction

The Professional and Educational department has continued to develop the range of services it provides, assisted by some expansion in the team of professional officers, re-structuring of the conferences and events section, and a review of administrative arrangements and support within the department. This report provides an overview of the major work undertaken during the past year.

## Education and student services

The Approval and Accreditation Board (AAB) continued with collaborative work with education providers to ensure that the education available to the radiography workforce is appropriate to both current and future needs. As a result, 21 education programmes were considered and approved by the AAB, from education provision for the assistant workforce through to postgraduate programmes.

New education providers emerged during the year who have sought advice and guidance from the Society and College of Radiographers. These include Dundee University and Stow College.

Additionally, a number of short courses were approved, notably in intravenous administration and in dental radiography. These dental programmes are being developed with regulation of the professions complementary to dentistry. The Society and College involvement with colleague professions in dentistry will help maintain high standards of practice in this field.

An emerging feature of work through the year was the introduction in England of the Benchmark Price and Contract for NHS funded education. As a result, the simple mechanism of an annual student pre-registration fee covering both services for students and for Higher Education Institutions (HEIs) will have to be replaced by September 2007. While this will result in increased complexity and administrative arrangements, it is an opportunity to separate services to students from services to HEIs, and to clarify the nature of those services and the costs incurred.

Student services were a particular focus during the year, with significant improvements in terms of consistent support and engagement with students. This is proving to be a useful precursor to the work mentioned above. Of note were the development of a student section of website and the 'student voice' section in *Synergy News*.



The future of education accreditation consortia of which the College of Radiographers is a member has been reviewed, especially the need for and the remit of the Consortium for the Accreditation of Nuclear Medicine Education (CANME) and the Consortium for the Accreditation of Clinical Magnetic Resonance Education (CACMRE). Proposals for change are currently under consideration by all parent bodies of these two consortia.

The Society and College represented the Allied Health Professions Federation (AHPF) on the Department of Health's Stakeholder Group for its review of the NHS Bursary Scheme. This considered changes necessary to comply with ageism legislation and maternity leave arrangements. Proposals have been made but the outcome of these was not known at the time of writing this report.

## Accreditation

Progress was made towards the goal of accrediting the radiography workforce, particularly at the assistant practitioner level. The first group of Accredited Assistant Practitioners have undergone the accreditation process and were placed on the voluntary register which will become public in the coming year.

Some progress was also made towards accrediting advanced level practitioners and this will come to fruition during the coming year, following a major consultation process with the profession.

A scheme for the accreditation of practice educators was launched in September 2006 as the Society and College year drew to a close, with much early interest evident.

## Continuing Professional Development (CPD)

As part of its work of reviewing education provision, the AAB endorsed over 50 short, continuing professional development activities during the year. It is interesting to note that the range of CPD providers is growing, with applications for endorsements arising from the National Councils and Regional Committees of the Society of Radiographers, commercial companies, and universities.

CPD Now, the Society and College's electronic, web-based continuing professional development tool, is proving popular with over 3000 users of the system only one year post-launch, and the first College of Radiographers' Certificates of CPD Accreditation issued. The tool has been developed and refined to further ensure that it is easy to use, and major work is underway so that the tool will enable members to evidence their Health Professions Council's requirements and their Knowledge and Skills Framework demands.

Further work to promote the use of CPD Now was undertaken in conjunction with the National Councils and Regional Committees of the Society of Radiographers. Additionally, further CPD guidance has been published in *Synergy* and on the website, and the first specially commissioned CPD articles containing guidance on learning, reflection and suggested further learning activities, have appeared.

## Health Policy Development

The Society and College undertakes much work with the four Health Departments in the UK (England, Scotland, Wales and Northern Ireland) and the past



year has seen this escalate considerably as the political emphasis in all four countries has been, and remains, on developing first class cancer services, and reducing the time people wait between initially visiting their general practitioners and the commencement of treatment. Radiographers and the wider radiography workforce are fundamental to achieving these goals so it is no surprise that these policy streams have kept the team very busy. Notable examples of involvement are as members of the Department of Health (England) National Radiotherapy Advisory Group and the National Diagnostic Imaging Board (England); work with the Scottish Executive on achieving sustainable clinical imaging and oncology services; Board membership of the National Leadership Innovations Agency in Healthcare (NLIAH) in Wales, and involvement in the Welsh Imaging Modernisation Project; and with the annual Workforce Radiography Plan within the Department of Health, Social Services and Personal Safety – DHSSPS – in Northern Ireland.

Advice provided to governmental bodies and agencies has covered a spectrum that included the development of cancer services to reduce waits for treatment and ensure equity in service provision; achieving waiting times targets and ensuring that waits for diagnostic imaging procedures are minimised; service and workforce re-design to assist in meeting health targets; workforce development and the necessary education and training required to support new roles being undertaken by radiographers and assistant practitioners, and workforce planning to secure sufficient numbers of staff with the necessary education and skills mix to meet future demands.

Health policy advice has been extended to other national bodies on diverse topics, including national screening programmes, notably, fetal anomaly screening and aortic aneurysm screening; various service developments including the introduction of a clinical PET-CT service in England; supplementary prescribing of medicines by radiographers, and creating an inter-professional workforce.

The Society and College also works closely with Skills for Health (the UK's Sector Skills Council for Health) to ensure that occupational standards relevant to the radiography workforce are appropriate. The focus of activity for the past year has been on advanced breast care standards and standards for magnetic resonance imaging, as well as strategic level work on the development of competences for the allied health professions as a whole.

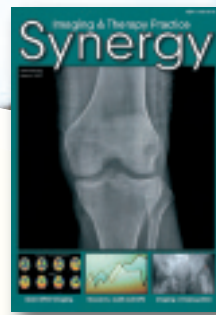
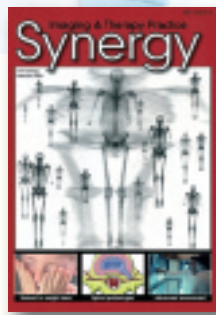
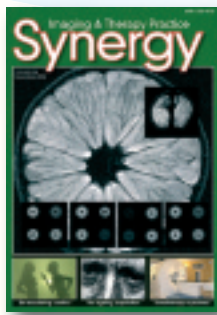
There has been close liaison with the Health Professions Council, and with the Health Protection Agency to mutual benefit in relation to education and practice standards, and guidance developed for the profession.

Work has also been undertaken in partnership with other healthcare professionals to prepare joint guidance and reports. Amongst this work has been the development of a joint statement and guidance on skills mix with the Royal College of Radiologists, and work with the British Cardiac Society to prepare a report on skills shortages in cardiac catheter laboratories. Collaborative work with other Allied Health Professional Bodies on issues in common has also taken place, including work on education, clinical effectiveness, research, and information management and technology.

## Public Consultations

During the year, the Society and College responded to a sizeable number of consultations, notably from the Health Professions Council, and the National Institute for Health and Clinical Excellence. Examples of other consultations responded to are:

- ◆ Cancer Research Network Measures for Manual of Cancer Services (Scotland)
- ◆ Do Once and Share Consultation for Bowel Cancer
- ◆ Bowel Screening Standards for Scotland
- ◆ Allied Health Professions and Cancer Data Standards
- ◆ Proposed NHS Scotland Careers Framework



- ◆ Department of Health guidance on the reporting of radiation incidents where doses given were “much more than intended”
- ◆ The updated IR(ME) Regulations 2006
- ◆ The Royal College of Speech and Language Therapists proposed policy for videofluoroscopic evaluation of swallowing in adults.
- ◆ Stroke Strategy Guidelines.

The team also participated in the review of regulation of non-medical health care staff, and the regulation of the healthcare support workforce in Scotland. The outcome of these pieces of work is still awaited.

## Professional Guidance

Preparation of professional guidance was a significant part of the work of the team. Key documents published during the year were:

- ◆ Radiographic Staffing: Short Term Guidance; 2005 Benchmark for Standard Core Functions within Radiotherapy (November 2005)
- ◆ Information Management and Technology: Implications for the Radiography Workforce (January 2006)
- ◆ Positioning Therapeutic Radiographers within Cancer Services: Delivering Patient-Centred Care (February 2006)
- ◆ Clinical Education and Training: Guidance and Strategies for Effective Relationships Between Education Providers, Placement Providers and Learners (March 2006)
- ◆ The Approval and Accreditation of Educational Programmes and Professional Practice Educators Accreditation Scheme (June 2006).

During the year, too, the College’s Statements of Professional Conduct were re-printed and made available widely: to all new students, to those joining the Society of Radiographers, and whenever an enquiry merits sending one. Permission was given for the Statements to be used as a basis for a Code of Conduct for the European Committee of Radiographers and Radiologic Technologists.

Attention has also been given to developing and clarifying the Scope of Practice for Assistant

Practitioners working in the clinical imaging field. This became necessary as it was apparent that employers were expecting this group of staff to undertake duties without proper supervision and so increasing risk to patients and the public. The draft Scope of Practice was made available and consulted upon widely, and the definitive document will be published in the coming year.

Other major work on professional guidance included the review of the Curriculum Framework which was published in 2003; the publication of a second edition of *Medical Image Interpretation and Clinical Reporting by Non-Radiologists: the Role of the Radiographer* in October 2006, and further guidance to clarify professional indemnity arrangements for self-referral scans, and ‘social’ 3D/4D scans.

A considerable amount of guidance on professional matters was also provided through the Society of Radiographers’ website ([www.sor.org](http://www.sor.org)), including updating advice on changes to medicines’ legislation in 2005, and on the use of images as evidence in legal proceedings for departments that no longer produce hard copy images. Additionally, the department responded to a large number of email and telephone requests for guidance and support.

## Publications and Website

The Society and College provides the international, quarterly peer reviewed journal *Radiography* published by Elsevier, and *Imaging and Oncology*, a publication released annually at UKRC to provide frank commentary on the radiographic world. A new contract with Elsevier is now in place (until 2011) and the editorial board is continuing its work to improve quality with the long term aim of obtaining indexation on Medline. The team also play major roles in the other regular publications of the Society and College. These are *TopTalk* – the monthly e-zine freely available to those who wish to subscribe and distributed widely to heads of clinical services and radiography leads in HEIs; *Synergy*, and *Synergy News* (also distributed monthly to all members of the Society).

*Synergy* underwent considerable development work during the year and was re-launched at the end of September 2006, as *Synergy: Imaging and Therapy*



*Practice*, with emphasis on promoting best practice and supporting continuing professional development.

The website has also undergone further development, guided by the work of the Website Editorial Board and under the management of its editor. There is now a fresh feel to the website, with better structure and navigation evident. Much work has gone into a number of sections that were lacking in content, notably there has been significant up-dating of the research pages, the consultant practice section, and the information management and technology pages.

## Radiotherapy

There is no doubt that a considerable amount of work has been done to promote the role and value of therapeutic radiographers, and some of this is outlined in the section on health policy. This has been facilitated to some extent by an increase in officer time, with the radiotherapy professional officer now employed for three days per week.

An important part of the work is establishing strong, effective relationships with other bodies involved in cancer care. Such relationships now exist with Professor Mike Richards the National Cancer Director for England, the Cancer Action Team and the Department of Health (England) Cancer Policy Team. Similar relationships are being built in Wales and Scotland where future radiotherapy plans have already been published (the plan for England was imminent when this report was written).

Strong links have been maintained with Radiotherapy Service Managers and Radiotherapy Education Leads throughout the UK. These and the work of the Radiotherapy Advisory Group (to the Council of the Society of Radiographers) have been important in ensuring that advice given is authoritative and evidenced based.

An important piece of work during the year was the workforce census carried out by the National Cancer Analysis Team and supported by the Society and College of Radiographers, the Royal College of Radiologists and the Institute for Physics and Engineering in Medicine.

The Society and College worked with the National Cancer Analysis Team to review and refine the workforce census information collected for the radiography workforce and the census was completed in May 2006 with 100% compliance from radiotherapy centres. As a result, there is now a full picture of the entire radiography workforce available – therapeutic radiographers, assistants and supporting staff – and this is being utilised by all four countries of the UK to assist with future workforce planning.

The Society and College works closely the Faculty of Clinical Oncology of the Royal College of Radiologists and, as a result, four working parties were established during the year and will report in 2007. The working parties are:

- ◆ Treatment verification
- ◆ Radiotherapy planning
- ◆ IR(ME)R Guidance
- ◆ Radiotherapy treatment incidents, and near misses.

The work of these groups is ongoing and all will produce reports in 2007.

There has also been collaborative working with the Institute of Physics and Engineering in Medicine, exploring the education and continuing professional development of dosimetrists working in Clinical Radiotherapy Physics. This working group reported towards the end of the year, with further work now to be undertaken.



## Ultrasound

A notable event during the year was the appointment of a dedicated ultrasound professional officer. This has enhanced the services the Society and College is able to provide to members and to the wider community.

Important workstreams in relation to ultrasound have been the development of the radiographer principal profile (AfC Band 8a), applicable to all radiographers working at this level including those working in ultrasound; and work with the health and safety officer on guidance on the prevention of work-related musculoskeletal disorders in sonography.

A joint working party between with the United Kingdom Association of Sonographers (UKAS) was set up to develop a joint public voluntary register of sonographers. This will be important if it is ever accepted that sonographers should be regulated statutorily and piloting of the register will take place early next year.

Towards the end of the year, Council approved the establishment of an Ultrasound Advisory Group which will operate similarly to other advisory groups. This is scheduled to meet for the first time in January 2007.

## Nuclear Medicine

The Nuclear Medicine Advisory Group (NMAG) have been active this year considering issues of concern to, and relating to the development of, radiographers and clinical technologists within the nuclear medicine workforce, especially requirements for the development of PET-CT services and the associated education and training requirements.

## Magnetic Resonance (MR) Imaging

There were three major areas of activity in relation to magnetic resonance imaging. The first of these was involvement with the extension to the national radiography project to develop advanced practice, particularly reporting, for radiographers working in this field. This entailed considerable work to ensure that the occupational standards produced were appropriate and acceptable to the whole community.

There was also engagement with the continuing review on the European Union Physical Agents Directive with regard to its effect on magnetic resonance imaging practice; and the development of a document on MR safety, jointly with the British Association of Magnetic Resonance Radiographers. This will be published during 2007.

## Networks and Special Interest Groups

A number of networks and special interest groups met during the year, notably the returners network and the consultant network. As a result, guidance for returners was updated in the light of changes to requirements by the Health Professions Councils, and guidance for those wanting to pursue the consultant practitioners career pathway will be forthcoming.

## Research

Last year, the Society and College of Radiographers published *Research and the Radiography Profession – A Strategy and Five-Year Plan*. The aim of the strategy is to promote the responsibilities of the profession to be research aware in the context of their practice, and to include research skills in their professional development.





Implementation of the strategy is the role of the research group and, during the year, it made good progress, as follows:

- ◆ The College of Radiographer's Research Fund was established for small projects related to any aspect of the science and practice of radiography and four awards, totalling £17,760 were made during the year.
- ◆ A survey to establish the number of researchers in higher education, and the nature of research being carried out was conducted. This will report in the coming year.
- ◆ Recruitment of research representatives from the Society of Radiographers' National Councils and Regional Committees is underway with some success. The intention is to use these representatives to establish a strong communication pathway between the profession and the research group, to assist in demystifying research, and to support at a more local level the implementation of the Research Strategy.

The Society and College continues to support the multi-disciplinary library hosted and maintained by the British Institute of Radiology, and which provides specialist library services to the profession. This has undergone a sizeable re-development recently, supported by a £5,000 donation from the College.

## Radiation Protection

The increased staffing resource in the department has facilitated new work on radiation protection, and this will grow further in the coming year. Notable work this year has included the design and delivery of radiotherapy oriented IR(ME)R training to a department following a radiation incident; the production of a joint guidance document (with the Royal College of Nursing, a number of Allied Health Professional Bodies and the Royal College of Radiologists on accepting referrals from non-medical professionals; work within the Society for Radiation Protection (the Society of Radiographers is a member of this organisation) and the development of a new guidance document on radiation protection which will be published during 2007.

## Conferences

Although the Society and College were unable to provide as many seminars as we wished due to restructuring, the following events were organised:

- ◆ Consultant radiographers network update, London (November 2005)
- ◆ President's Conference, London (February 2006)
- ◆ Radiography Leadership for Managers, London (April 2006)
- ◆ Reducing the risks and impact of work related musculoskeletal disorders in sonography, Birmingham (May 2006)
- ◆ New Ways to Communicate, London (June 2006)
- ◆ CR/DR: Getting it in and getting it right, Bristol (June 2006)

## Events

The Society and College were represented at a number of events, both in the United Kingdom and overseas, to promote and publicise the work of the profession. These included meetings and events concerning Clinical Imaging, Radiotherapy, Mammography, Magnetic Resonance Imaging, Ultrasound, Nuclear Medicine and Physics and Engineering in Medicine. Contacts were developed further with both radiological and radiographic bodies representing the USA, Canada, Australia, the Republic of Ireland and Europe as a whole.

## Summary

Inevitably, while this report identifies many of the major elements to the department's work over the past year, it cannot deal comprehensively with every aspect. As is evident, a great deal has been accomplished with a number of projects coming to fruition in the coming year. Undoubtedly, as these are completed other matters will have emerged to take their place and so the cycle continues.

It is hoped that radiographers and the radiography workforce, as well those interested in the profession will find something of direct relevance to them in this report.

# membership

Charity Registration Number: 326398

## THE SOCIETY OF RADIOGRAPHERS BENEVOLENT FUND REPORT FOR THE YEAR TO SEPTEMBER 2006

The trustees present their report and the audited accounts for the year ended 30 September 2006. 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**

Sue Barlow (Chair from 23 February 2006)  
Margaret McClellan (Chair to 22 February)  
Christine Soutter (to 31 March 2006)  
Valerie Edwards (to 30 April 2006)  
Lorraine Nuttall  
Denise Hardy  
Gytha McBirney  
Ann Pollard (from 1 May 2006)  
Zena Mossman (from 1 May 2006)  
Margaret Summerlin (from 1 May 2006)

### **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 2006 was £36,927, £9,564 more than 2005. In addition to many generous collections at Society meetings around the UK, plus a £5,000 donation from the Society, the fund benefited hugely from a very generous legacy this year. Affiliation income from the Society credit card continued to be satisfactory. Bank interest benefited through increases in the amounts of balances held and interest rates earned.

Expenditure amounted to £16,128, compared to £3,632 in 2005, mainly incurred through awarding grants to beneficiaries. Seven grants were awarded this year totalling £12,172 and included travel costs to undergo cancer treatment, installation of a stair lift and help towards installation of a downstairs bedroom and wet room.

The fund bank balances at 30 September 2006 was £89,244, an increase of £24,117 (37%) over the balance of the year before.

### **Reserves risk and investment policies**

The charity’s reserves amounted to £86,361 at 30 September 2006. The trustees wish to at least maintain this level of reserves and to make grants of assistance broadly to the level of the income received in the preceding financial year.

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

### **Auditors**

The Auditors Horwath Clark Whitehill LLP were appointed for the year, and a resolution to reappoint them will be put before the Annual Trustees Meeting. By order of the Committee

Richard Evans      Secretary to the Benevolent Fund  
February 2007

## ACCOUNTS FOR THE YEAR TO SEPTEMBER 2006

### STATEMENT OF FINANCIAL ACTIVITIES

	2006	2005
	£	£
<b>INCOMING RESOURCES</b>		
Donations	8,021	19,439
Legacy	22,456	-
Income from credit cards	3,530	5,869
Bank interest	2,920	2,055
	<u>36,927</u>	27,363
<b>RESOURCES EXPENDED</b>		
Grants and donations	12,172	2,240
Leaflets and posters	1,197	50
Sundry expenses	2,759	1,342
	<u>(16,128)</u>	(3,632)
<b>Net movement in funds</b>	<u>20,799</u>	23,731
<b>RETAINED SURPLUS</b>		
Beginning of year	65,562	41,831
End of year	<u>86,361</u>	<u>65,562</u>

### BALANCE SHEET AS AT 30 SEPTEMBER 2006

	2006	2005
	£	£
<b>CASH AND DEPOSITS</b>		
Insight Liquidity fund	78,043	50,851
Cash at bank	11,201	14,276
	<u>89,244</u>	65,127
<b>DEBTORS:</b> amount due for gift aid tax claim	-	1,720
<b>CREDITORS:</b> amounts due within one year		
Amounts due to Society of Radiographers	(2,883)	(1,285)
<b>TOTAL ASSETS</b>	<u>86,361</u>	65,562
<b>UNRESTRICTED FUNDS</b>	<u>86,361</u>	65,562

Secretary to  
The Benevolent Fund

Signed



**Richard Evans**  
Chief Executive Officer

The Society and College of Radiographers, 23 February 2007

# organisation

## COMMITTEES AND WORKING PARTIES OF COUNCIL

The table below indicates each elected members' Society commitments for the year commencing July 2005.

### College Board of Trustees Executive members and officers

**Meets 4 times p.a.**

Mrs A Pollard; Mr A Pitt; Mr I Henderson; Mr M Graveling;  
Mrs S Mathers (from 05.07.06); Mr S Crimmins (from 05.07.06);  
Mrs J Hughes (from 05.09.06); 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 I Henderson; Mrs S Mathers; CEO; DPP; DF

### Delegates Conference Committee (reports to Council)

**Meets 4 times p.a.**

Mrs A Pollard; Mr S Crimmins; Mrs Z Mitton; Mr M Graveling

### Trades Union Education Committee (reports to Council)

**Meets half yearly**

Mrs H Harries-Jones; Mrs J Venton; Mr K McMurray;  
Mrs A Maddison

### Health & Safety Forum (reports to Council) Meets quarterly

Mrs J Hughes; Mrs P Kitto

### Royal College of Radiologists Liaison Group Meets half yearly

Representatives will be determined as and when required

### RCR Patient Liaison Groups

**Meets half yearly**

Radiology: Mrs M Waltier; Oncology: Ms H Colyer

### BIR Council Observer

**Meets half yearly**

The President

### RCR Faculty Board Observer

**Meets quarterly**

The President

### Irish Institute of Radiography Liaison Committee

**Meets half yearly**

The President; DPP; CEO

### The Investment Committee

**Meets twice yearly**

Mr A Pitt; Mrs A Pollard; Mr I Henderson; Mr D MacManus;  
Mr J Foster; CEO; DF

### The Remuneration Committee

The President, Mr A Kay, Mr J Foster, Mrs P Williams

### Working Parties, Networks; SIGs, ad-hoc committees

Membership as required

## MEETINGS OF COUNCIL

Month	Apologies
5 Oct 2005	Miss L Forret, Mrs P Kitto
8 Nov 2005	Mrs G Dolbear
4 Jan 2006	Mrs H Harries-Jones, Mrs J Hughes, Mrs J Venton, Mrs P Kitto, Miss L Forret
8 Feb 2006	Mrs G Dolbear, Miss L Forret, Mrs P Kitto
1 Mar 2006	Mrs P Kitto
5 Apr 2006	Mr I Henderson, Mr K Tucker
14 May 2006	Mrs A Pollard, Mrs P Kitto, Mr K Tucker
5 July 2006	Mr K McMurray, Mrs J Hughes, Mrs P Kitto
6 Sept 2006	Mrs P Kitto, Mrs G Dolbear

## MEETINGS OF THE COLLEGE BOARD

Month	Apologies
15 Dec 2005	Dr R Bury
9 Mar 2006	Mr A Kay, Dr R Bury, Mr I Henderson, Mrs A Pollard, Mr A Pitt
22 June 2006	Mrs P Williams, Mr J Foster, Miss L Forret, Mrs H Harries-Jones
28 Sept 2006	Mr M Graveling, Mrs J Hughes

[www.sor.org](http://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	34,559	4,106	4,613	-	-	43,278

In the current year £10,000 was payable to the President's employer for the services of Andrew Pitt 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 have 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 that 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 or are being conducted in breach of the law or in breach of 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 six years show a pleasing increase and are as follows:

2001: 15,516      2002: 16,028      2003: 16,673      2004: 17,383      2005: 18,147      **2006: 18,635**

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

2001: 2,404      2002: 2,589      2003: 2,981      2004: 3,521      2005: 4,068      **2006: 4,566**

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



services to members,

We have a responsibility to members to manage our business activities and finances.

### **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.

[www.sor.org](http://www.sor.org)

the profession and the public

# THE SOCIETY AND COLLEGE OF RADIOGRAPHERS

Summary of the Financial Results for the Year to September 2006

INCOME AND EXPENDITURE £	Year to 30 September 2006			Combined	2005
	SOCIETY	COLLEGE	CONTRA		Combined
					Restated
<b>Membership subscriptions</b>	<b>3,236,405</b>			<b>3,236,405</b>	<b>3,059,640</b>
<b>Other income</b>					
Student registration grants		342,450		342,450	304,938
Magazine income	518,245	5,555		523,800	699,457
Radiology and Oncology Conferences		281,807		281,807	328,904
Seminars and courses		95,532		95,532	140,260
Regions and Branches	30,885			30,885	36,277
Investment income	59,137	53,840		112,977	88,343
Other income	8,632	13,790		22,422	11,700
Donation and notional rent from Society		970,000	(970,000)	0	0
<b>Total of other income</b>	<b>616,899</b>	<b>1,762,974</b>	<b>(970,000)</b>	<b>1,409,873</b>	<b>1,609,879</b>
<b>Total income</b>	<b>3,853,304</b>	<b>1,762,974</b>	<b>(970,000)</b>	<b>4,646,278</b>	<b>4,669,519</b>
<b>Salary costs</b>	<b>971,389</b>	<b>812,833</b>		<b>1,784,222</b>	<b>1,495,323</b>
<b>Operational and overhead expenditure</b>					
Donation and notional rent to College	900,000		(900,000)	0	0
Donation to Benevolent Fund	5,000			5,000	10,000
Donation – overseas placements		750		750	500
Agenda for Change	41,637			41,637	89,751
Magazine and journal costs	592,947	119,146		712,093	792,406
Regional offices, Councils and Reps costs	255,285			255,285	267,006
Members insurance and legal costs	226,372			226,372	204,881
Website costs and CPD costs	32,885	42,123		75,008	88,628
Radiology and Oncology Conferences		206,022		206,022	266,279
Meetings, seminars, library and literature		251,920		251,920	272,303
ADC, TUC membership etc.	148,769			148,769	160,497
Audit and prof fees	12,921	10,876		23,797	32,535
Occupancy	94,317	26,677	(70,000)	50,994	48,236
Depreciation, FRS 17 fin adj, asset sales	51,833	57,379		109,212	101,244
HR, database and computer costs etc.	111,228	22,797		134,025	148,067
Telephone, travel, copying, postage etc	235,520	45,174		280,694	274,970
<b>Total operational and overhead expenditure</b>	<b>2,708,714</b>	<b>782,864</b>	<b>(970,000)</b>	<b>2,521,578</b>	<b>2,757,303</b>
<b>Total expenditure</b>	<b>3,680,103</b>	<b>1,595,697</b>	<b>(970,000)</b>	<b>4,305,800</b>	<b>4,252,626</b>
Surplus for the year before investment gains	173,201	167,277	0	340,478	416,893
Investment gains less losses	47,203	47,203		94,406	98,836
Pension Scheme FRS 17 deficit	(121,000)	(94,000)		(215,000)	(221,000)
Surplus after investment gains and pension deficit	99,404	120,480	0	219,884	294,729



## FINANCIAL REPORT FOR YEAR TO SEPTEMBER 2006

Society membership continued to grow steadily through the year. Total income at £4,646,278 showed a small decline of £23,241 (0.5%) from 2005. Although membership subscription income increased by £176,765 (5.8%), the impact was again offset by lower revenue from magazine advertising, which was £175,657 (25%) lower.

Total expenditure increased by £53,174 (1.3%) to £4,305,800 for 2006. Salary costs, which included changes to the pension scheme arrangements, rose by £288,899 (19.3%), but the impact was largely offset by the fall in Operational and overhead costs of £235,725 (8.5%). The new pension accounting rules (FRS 17) are reflected in this year's results and the actuary's pension scheme deficit calculation has reduced the surplus by £215,000. 2005 figures have been adjusted to this basis and show a £221,000 deficit for 2005. The SCOR investments again helped the bottom line, gaining £94,406 (15%) this year compared to gains of £98,836 in 2005.

The Society and College had a combined surplus of £219,884 compared to £294,729 for 2005.

### Commentary on Income and expenditure

**Total income for the whole organisation in 2006 amounted to £4,646,278, £23,241 (0.5%) less than 2005.**

**Income from membership subscriptions** amounted to £3,236,405 in 2006, a rise of £176,765 (5.8%) over 2005. The increase arose from a net 2.7% increase in members joining the Society and from a 3.0% increase in subscription rates for 2006. Member's subscriptions represented 69.6% of total income in 2006, or to put it another way, 30.4% of the income necessary to run the organisation was found from other sources.

This "other income" amounted to £1,409,873, a significant reduction of £200,006 (12.4%) from 2005 for the following reasons:

Major changes in other income for 2006 compared to the previous year were:

- a) *Synergy* advertising declined further in 2006, by £175,657 (25.1%) compared to last year which itself had declined by £163,456 (19%) from 2004. This mainly stemmed from lower recruitment advertising income, which reflects general staffing pressures in the NHS and the introduction of e-recruitment initiatives.
- b) Income from bank deposits and investments rose by 28% to £112,977 due to higher levels of funds invested and higher returns from investments.
- c) Student grants increased by £37,512 (12%) from 2005 to £342,450.
- d) Radiology and Oncology Congresses (ROC) companies contributed £281,807 (14%) less than 2005 since the bi-annual UK Oncology Congress which was not run in 2006.

**Expenditure for 2006 across the organisation amounted to £4,305,800, an increase of £53,174 (1.3%) compared to 2005.**

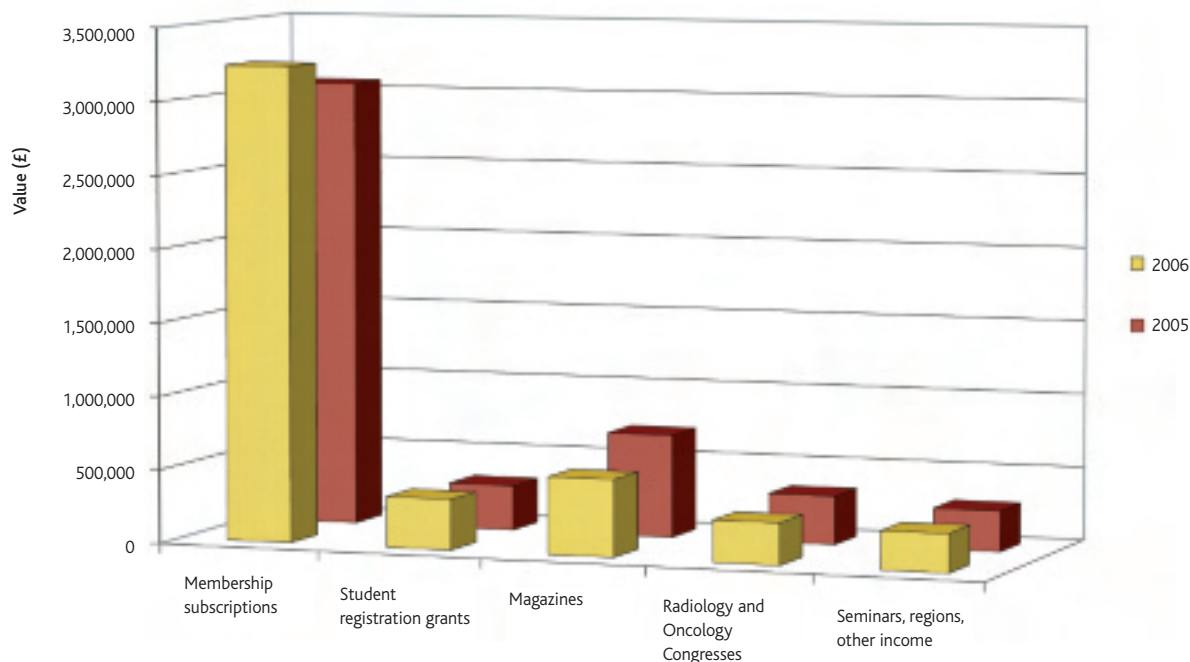
**Salary costs** in 2006 were £1,784,222, an increase of £288,899 (19%) over 2005. Pension contribution costs rose by 4% following the last actuarial review of the scheme. The costs attached to running the pension scheme and were particularly heavy this year after taking professional advice on how best to run in the future. Salaries have increased by more than the cost of living to include new staff contracts following negotiations for a longer working week.

# vision

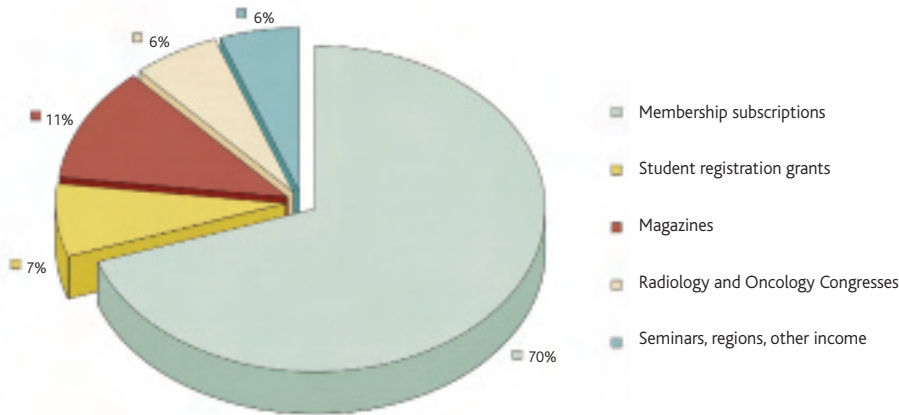
**Operational and overhead expenditure** amounted to £2,521,578, £235,725 less than 2005:

- a) Costs of communications to members regarding Agenda for Change including has fallen by £48,114 from last year when nearly £90,000 was spent.
- b) Magazine and journal costs fell by £80,313 (10%) due to less commission payable on the reduced advertising income and lower printing costs. The *Radiography* journal costs increased by 1.5% from 2005.
- c) The Society Council approved a donation of £5,000 to the Benevolent Fund, £5,000 less than 2005.
- d) Regional and Council costs showed a small reduction of £11,721 (4.4%) from last year.
- e) Member's professional indemnity and legal costs rose by £21,491 mainly due to legal costs of injury claims.
- f) CPD and website costs reduced by £13,620 to £75,008 with the "CPD Now" programme having been established, partly offset by higher website costs for continuing support and development.
- g) ROC costs fell by £60,257 to £206,022 due mainly to not running the UKRO bi-annual conference in 2006.
- h) ADC and TUC fees costs declined by £11,728 to £148,769 mainly through lower ADC expenditure partly offset by increased TUC membership fees.
- i) Courses, seminars, literature and liaison costs reduced by £20,383 due mainly to fewer seminars while a review of in-house conferences has taken place. The organisation continues to be well represented at national and international events and production of professional guidance literature.
- j) HR database and computer costs fell by £14,042 to £134,025 mainly through lower computer support costs.

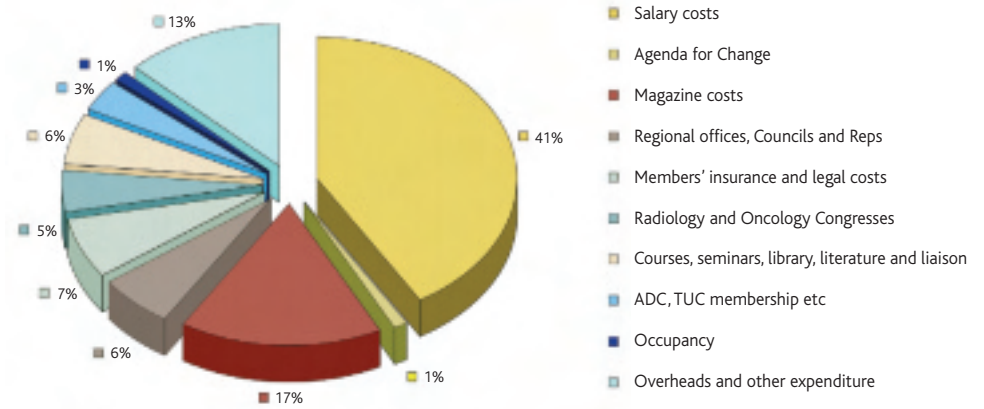
## Income – 2006 compared to 2005



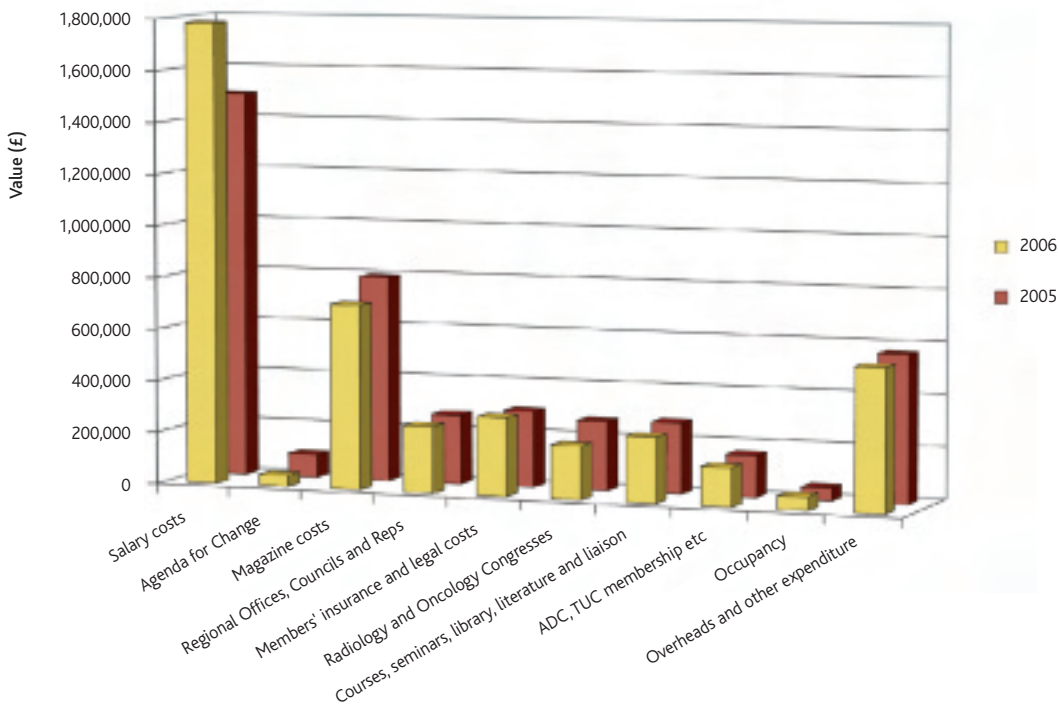
### Income 2006



### Expenditure 2006



### Expenditure – 2006 compared to 2005



## Commentary on the Balance Sheet

Total assets at the 2006 year-end amounted to £3,985,731, £219,884 higher than the value at September 2005. Tangible fixed assets, which include the head office property, were down £46,216 mainly due to depreciation set aside each year for replacements, which again exceeded expenditure on new assets. The Society and College Fixed Asset investment values rose, including an additional £200,000 investment, by some 41% to £1,088,136.

Current assets, less liabilities, were up by £170,804 at £2,020,753 which reflects the increased level of money-market deposits, up by £150,000 from last year's level. For the first time the net liability of the pension scheme has been included as part of the balance sheet. This shows that, under FRS 17 rules, scheme assets were some £444,000 less than scheme liabilities.

BALANCE SHEETS AT 30 SEPTEMBER 2006					2005
figures in £	SOCIETY	COLLEGE	CONTRA	Combined	Combined
<b>Tangible fixed assets</b>					
Long leasehold property		1,143,672		1,143,672	1,169,963
Office fixtures, furniture & equipment	1,907	157,853		159,760	170,623
Computers	387	17,021		17,408	26,470
Total	2,294	1,318,546		1,320,840	1,367,056
<b>Fixed asset investments</b>					
Investment in subsidiary	2	544,068		2	2
<b>Current assets less liabilities</b>					
Debtors	323,854	135,633	(27,715)	431,772	404,898
Money-market deposits	850,000	800,000		1,650,000	1,500,000
Bank balances etc	301,394	126,784		428,178	446,898
Creditors	(323,994)	(192,918)	27,715	(489,197)	(501,847)
Total	1,151,254	869,499		2,020,753	1,849,949
Less Pension Scheme Liability	(251,000)	(193,000)		(444,000)	(222,000)
<b>Total assets at September 2006</b>	<b>1,446,618</b>	<b>2,539,113</b>		<b>3,985,731</b>	<b>3,765,847</b>
<b>Share capital &amp; reserves</b>					
Share capital		2			2
<b>Reserves</b>					
Contingency fund	2,739			2,739	2,739
Industrial injuries fund	40,000			40,000	40,000
General fund	1,654,879			1,654,879	1,430,475
Restricted fund for overseas placements		15,106		15,106	15,472
Unrestricted funds		2,717,005		2,717,005	2,499,159
Less Pension Scheme Liability	(251,000)	(193,000)		(444,000)	(222,000)
<b>Total capital &amp; reserves at September 2006</b>	<b>1,446,618</b>	<b>2,539,113</b>		<b>3,985,731</b>	<b>3,765,847</b>

## 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 both been audited by Horwath Clark Whitehill LLP, who gave unqualified audit reports on 17 January 2007. 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 2006. The Council's and Trustees' reports and financial statements were approved by Council and the Trustees and signed on their behalf on 17 January 2007. They will be submitted to the Charity Commission in July.

Horwath Clark Whitehill LLP also who gave an unqualified audit report on the financial statements of the Benevolent Fund for the year to 30 September 2006.

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.

## THE SOCIETY OF RADIOGRAPHERS LIMITED

### 2007 ANNUAL GENERAL MEETING

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

Date: Sunday 10 June 2007, commencing at 5.00pm.

Notice is hereby given that the Annual General Meeting of the Society of Radiographers will be held on Sunday 10 June 2007, commencing at 5.00pm, for the following purposes:

1. To receive consider and adopt the audited accounts for the year ended 30 September 2006 together with the reports of the Council and the Auditors.
2. To re-appoint the auditors Horwath Clark Whitehill LLP and to authorise the Council to determine their fee.

To consider and, if thought fit, pass the following resolutions, which will be proposed as special resolutions of the Society: That:

1. All references in the Articles as at the passing of this resolution to Articles 9.4, 9.5, 9.6, 9.7, 9.8 and 9.9 shall be deleted and references to Articles 9.9, 9.10, 9.11, 9.12, 9.13 and 9.14 respectively be substituted in their place.
2. Article 9.3 of the Articles of the Society shall be deleted and the following be approved and adopted in substitution for and to the exclusion of the existing Article 9.3:

"9.3 Each elected member of the UK Council will start his or her term of office on 1 July following their election and will hold office for the term specified in Article 9.4 unless he or she vacates office before the expiry of that term in accordance with Article 9.14.

9.4 Subject to the provisions of Article 9.5 each elected member of the UK Council shall hold office for a period of 3 years provided that the UK Council may resolve to decrease the period during which the elected member holds office to a period of 1 or 2 years.

9.5 The UK Council may only resolve to decrease the duration of an elected member's term of office in accordance with Article 9.4 if the following conditions are met:

(a) the UK Council considers that to do so will improve the continuity and effectiveness of the UK Council for the benefit of the Society;

(b) a resolution is passed, in the case of a decrease of the term of office to 1 year, before the first anniversary, or, in the case of a

decrease of the term of office to 2 years, before the second anniversary of the date on which the elected member took office; and

(c) the elected member whose term of office is resolved by the UK Council to be decreased consents to the resolution.

9.6 The power conferred upon the UK Council by Article 9.4 will apply to any elected member of the UK Council irrespective of whether he or she has been elected before or after the date of adoption of these Articles 9.3 to 9.8 (inclusive).

9.7 A member of the UK Council who vacates office (or is to vacate office at the expiry of his or her term of office, including any term that has been decreased in accordance with Article 9.4) is eligible for re-election to the UK Council.

9.8 The UK Council may from time to time publish in the Handbook details of all resolutions passed in accordance with Article 9.4 (and any resolution it proposes to pass in accordance with Article 9.4) in order to improve the continuity and effectiveness of the UK Council for the benefit of the Society."

[The full text of Article 9 (which governs the election of members of the UK Council) incorporating these proposed amendments will be printed in an edition of *Synergy* published before the Annual General Meeting.]

By order of the Council; Richard Evans, Chief Executive. Date: 17 January 2007

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 2007

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 The Rochdale Room, Jury's Inn Hotel, 56 Great Bridgewater Street, Manchester, M1 5LE on Sunday 10 June 2007, commencing at 5.00pm and at any adjournment of that meeting.

And with regard to:

Special Resolution 1: for  against  (*tick as appropriate*)

Special Resolution 2: for  against  (*tick as appropriate*)

Please sign here: \_\_\_\_\_ Date: \_\_\_\_\_

[www.sor.org](http://www.sor.org)



#### **Acknowledgements**

Photographs are reproduced by the kind permission of University College London Hospital and Northwick Park Hospital.

The Society is indebted to the staff of their respective departments for their co-operation.

Published by The Society of Radiographers,  
207 Providence Square, Mill Street, London SE1 2EW

Designed by Siân Cardy

Photography by Patrick Barth, Mike Ellis

March 2007