

SOCIETY AND COLLEGE OF RADIOGRAPHERS (SCoR)

A survey of social and commercial aspects linked to the two NHS fetal anomaly screening scans: an on-line survey.

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1. Executive summary

- 1.1 In England, Wales and Scotland two ultrasound scans are offered as part of a national screening programme (links below). One scan is undertaken between 11w 2d and 14w 1d and forms part of the combined test for fetal chromosomal abnormality. The other is at 18w to 20w 6d and is to detect fetal structural abnormality. In Northern Ireland there is no formal screening programme although women are offered a second trimester anomaly scan as part of their antenatal care.
- 1.2 This survey was designed to obtain information on the social and commercial aspects that have, over a long period of time, come to be associated with these two scans. These are aspects that are not clinically related but are important for the mother and her family. They include having her partner or other adults and children accompany her, the possibility of being given an opinion of the fetal sex and obtaining images and photographs to take home. These aspects do not form part of national screening programme requirements which are solely concerned with clinical evaluation by ultrasound. The survey related only to these two screening scans and not later growth scans or to non-NHS provision.
- 1.3 On June 19, 2015, an on-line survey link was sent to all sonographers on the Society and College of Radiographers' database (n = 2174). The survey utilised 'SurveyMonkey' ¹ software. The closing date was July 19th 2015. The survey was supported by announcements on www.sor.org and via the SCoR's Twitter account. The deadline was extended from July 10th to July 13th 2015 to allow a final weekend to be included.
- 1.4 There were 112 responses received.
- 1.5 Although sent to all sonographers on the SCoR database, the survey was intended to be completed by ultrasound department managers on behalf of all their sonographers and 88 (77 %) of returns were from managers. For context it is estimated that there are approximately 180 departments in the United Kingdom offering NHS fetal anomaly screening scans. This is considered a good response for an on-line survey. The data collected from departmental managers in Northern Ireland, Gibraltar and the Channel Islands was included (n = 5).

- 1.6 A number of individual sonographers also submitted (n = 24). The comments received from individual sonographers were still analysed as it was felt that they added to the overall information received. It is therefore possible that there were multiple responses from one department. However, the numerical data and graphs accompanying each question relate only to the managers' responses.
- 1.7 The results are in the large part self-explanatory. Where possible, the comments were analysed to identify any common themes. Where appropriate, a SCoR summary and explanation is included at the start of each question.
- 1.8 The following summary points can be drawn from the survey results:
- There is a very varied practice across the UK with regards to the social and commercial aspects of the two NHS obstetric screening scans. This includes arrangements for accompanying adults and children.
 - There are tensions between the clinical reasons for which the scans are offered and the parents' expectations.
 - Young children and toddlers in the scan room are a particular cause of concern both in terms of distraction and safety issues with the machines and room design.
 - The majority of departments (76%, n = 67) stated that they have no support available if a mother attends alone and is accompanied by young children.
 - The social and commercial aspects can lead to distractions for the sonographer at a time when the concentration levels required are very high.
 - The presence of others apart from the partner in the ultrasound room can be a particular problem if a fetal anomaly is identified.
 - Sonographers are very aware of the importance placed on the social aspects of the scan and try to support these and the parents where they can.
 - There is evidence of commercialisation of these scans although this is very variable.
 - The social and commercial aspects associated with the scans can be a source of complaints.
 - Over 97% of responding departments offer an opinion of the fetal sex although this is not part of national screening programme requirements. This is usually offered at the 18w to 20w 6d anomaly scan.
 - All the managers responding stated that they offer the facility to purchase photographs.
 - Charges for images are very variable and can be for a single photograph or for multiple images.
 - Arrangements for handling money are not fully auditable in some departments. The security of the sonographers who have to handle money is also not always considered.
 - Only a minority of departments are able to retain some or all of the money raised for sonographer education and training or for departmental improvement. In most cases the income goes to general Trust or Health Board funds.
 - The majority of departments (98.8%, n= 84) do not allow video recording or real time filming by digital devices or mobile phones.
 - No extra time is allowed for the social and commercial activities in 44 out of the 45 departments that responded to this question (Q30).
- 1.9 The Society and College of Radiographers would like to thank its Ultrasound Advisory Group for piloting the on-line survey and to all managers and sonographers who completed it.
- 1.10 The results of this survey will be used to inform SCoR policy, guidance and advice.

2. Current SCoR advice relating to this subject

- 2.1 Sale of images, determination of fetal sex and commercial considerations related to NHS obstetric ultrasound examinations. Second edition, April 2015.

<http://www.sor.org/learning/document-library/sale-images-determination-fetal-sex-and-commercial-aspects-related-nhs-obstetric-ultrasound-6>

- 2.2 The recording of images by patients during diagnostic imaging (including screening) and radiotherapy. January 2014.

<http://www.sor.org/learning/document-library/recording-images-patients-during-diagnostic-imaging-including-screening-and-radiotherapy>

3. External links

- 3.1 Fetal Anomaly Screening Programmes:

England : <https://www.gov.uk/topic/population-screening-programmes/fetal-anomaly>

Scotland: <http://www.nsd.scot.nhs.uk/services/screening/pregnewbscreening/index.html>

Wales: <http://www.antenatalscreening.wales.nhs.uk/public/home>

- 3.2 Advice given by the Department of Health to parents with regards to ultrasound in pregnancy: sonographers are advised to visit this site to see what advice is given to mothers via the NHS Choices website. There is information on accompanying adults, sexing of foetuses and the sale of images.

<http://www.nhs.uk/conditions/pregnancy-and-baby/pages/ultrasound-anomaly-baby-scans-pregnant.aspx#close>

4. References

- 1) SurveyMonkey: <https://www.surveymonkey.com>

5. Survey results

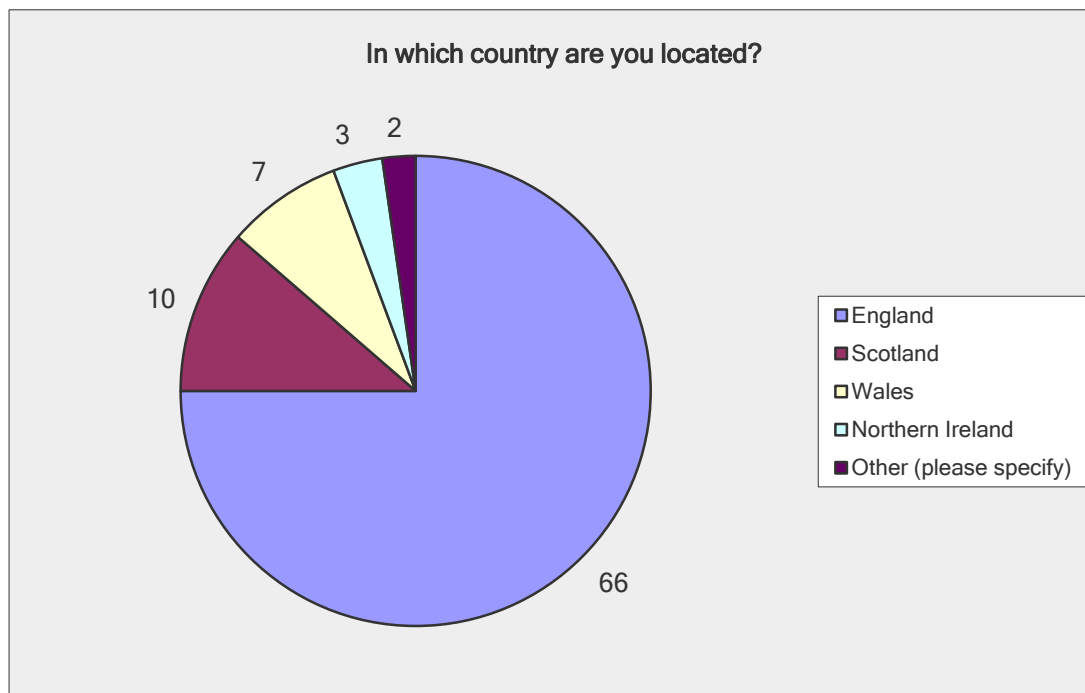
Q1: This survey is designed to be completed by ultrasound department managers who are responsible for the delivery of the two NHS obstetric screening scans. Is this your role?

Response: 88 responded Yes
24 responded No

Q2: In which country are you located?

In which country are you located?		
Answer options	Response Percent	Response Count
England	75.0%	66

Scotland	11.4%	10
Wales	8.0%	7
Northern Ireland	3.4%	3
Other (please specify)	2.3%	2
answered question		88



The two "Other" responses were from Jersey and Gibraltar

Q3: Regarding accompanying adults, please select the statement which is closest to your current arrangements:

SCoR comment

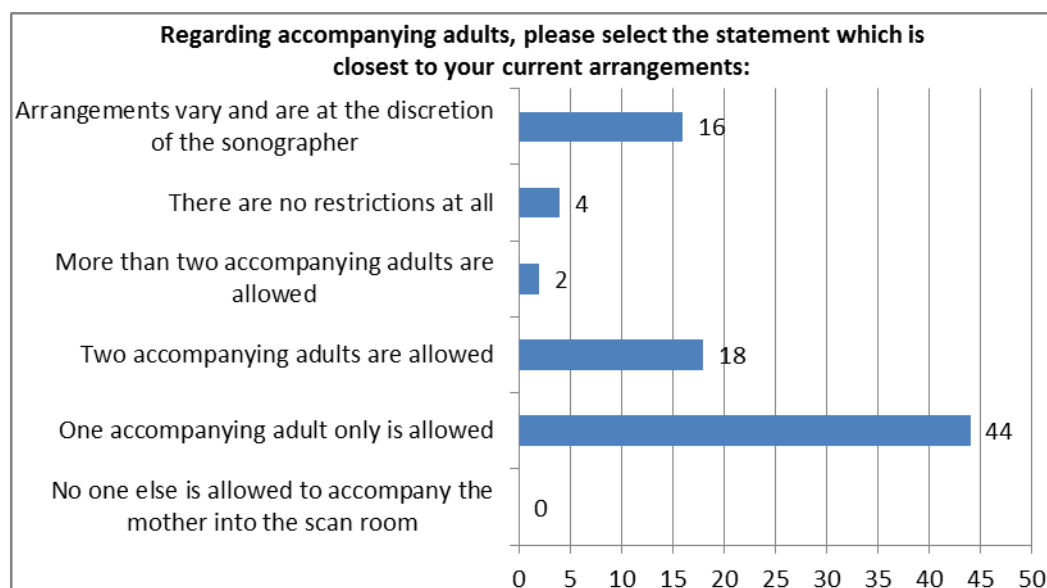
These questions were designed to find out what arrangements were in place for accompanying adults and children. Although the scans are carried out with informed consent for clinical reasons as part of a national screening programme, sonographers are also very aware of how much most parents look forward to and anticipate these scans from a social aspect. Being able to be accompanied by partners, their own children and perhaps close relatives is very important to most who attend. Sonographers try their best to accommodate parents' wishes at a time when the focus is naturally on the family and to support them. This can, however, lead to difficulties when there are others apart from the woman and her partner within the room, both in the terms of distractions at a time when very high concentration levels on the part of the sonographer are required and if a fetal anomaly is identified. It was thought that practice with regards to accompanying adults and children would be very variable throughout the UK and this has been shown to be the case by the survey responses.

Some respondents completed the "other" category, which included a combination of one of the answer options plus additional information. When this occurred, the additional comment was included in the result for Q6, and the answer option included in the totals for this question.

Regarding accompanying adults, please select the statement which is closest to your

current arrangements:		
Answer options	Response Percent	Response Count
No one else is allowed to accompany the mother into the scan room	0.0%	0
One accompanying adult only is allowed	51.8%	44
Two accompanying adults are allowed	21.2%	18
More than two accompanying adults are allowed	2.4%	2
There are no restrictions at all	4.7%	4
Arrangements vary and are at the discretion of the sonographer	20.0%	17
answered question		85
skipped question		3

An analysis of the comments reveals the following themes:

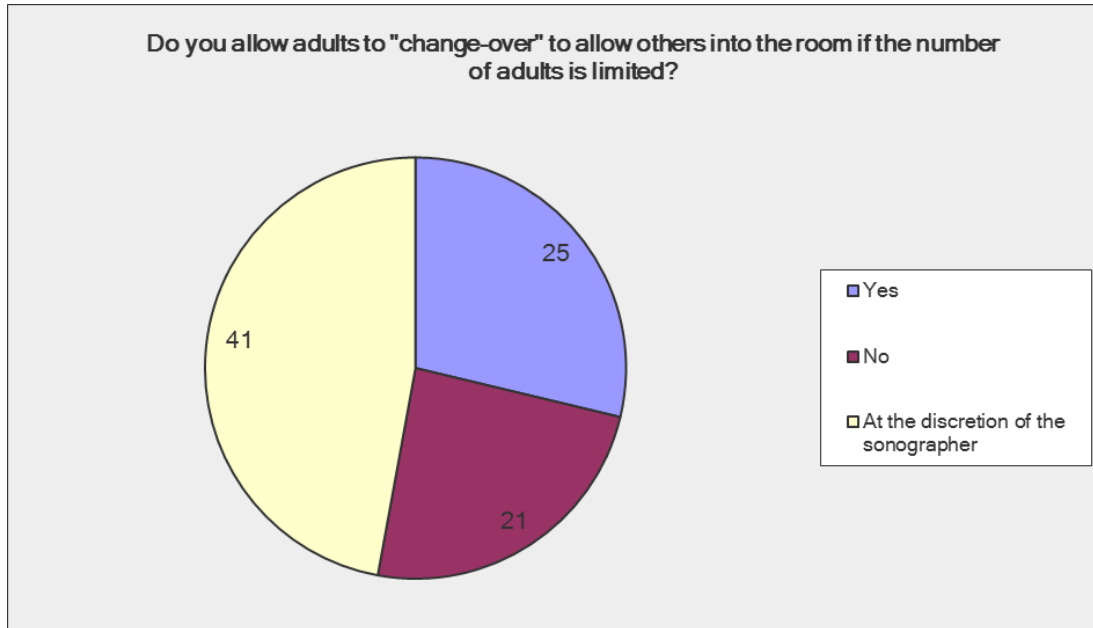


Q4: Do you advise of these arrangements for accompaniment in the appointment letter?

Do you advise of these arrangements for accompaniment in the appointment letter?		
Answer options	Response Percent	Response Count
Yes	70.1%	61
No	29.9%	26
answered question		87
skipped question		1

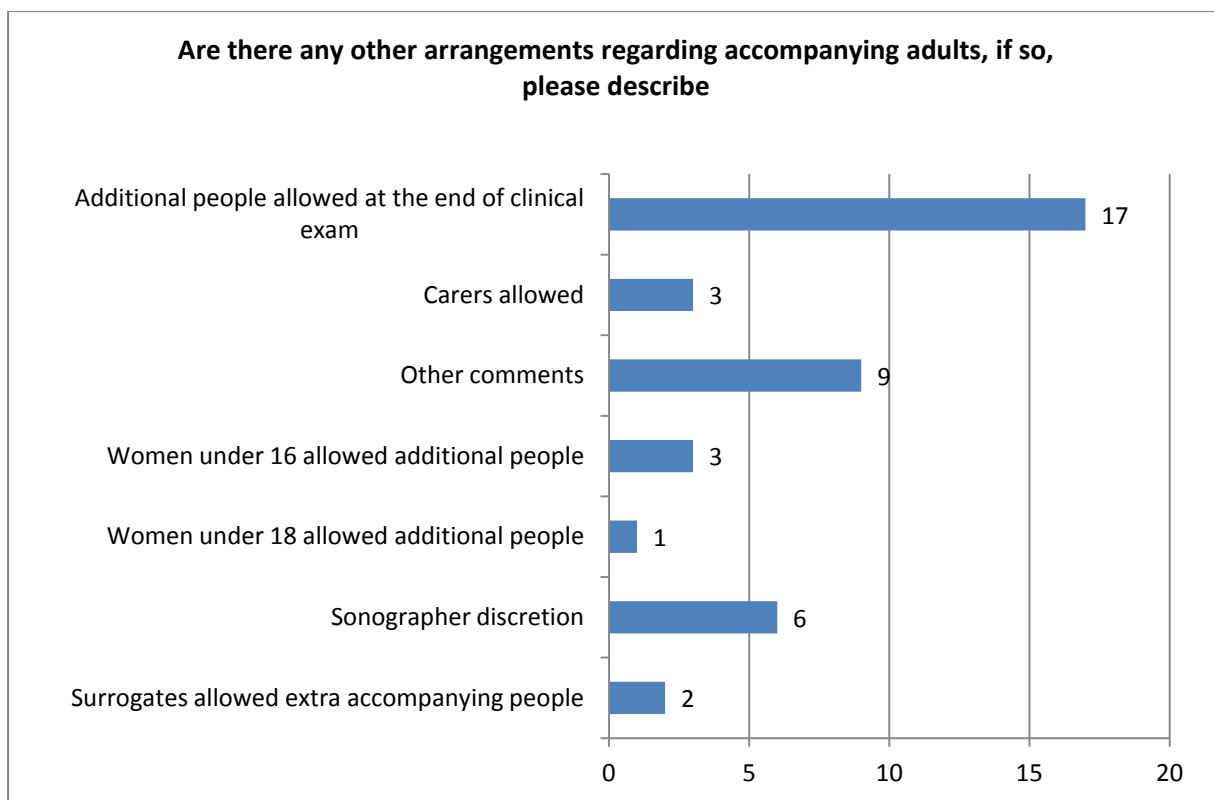
Q5: Do you allow adults to “change-over” to allow others into the room if the number of adults is limited?

Do you allow adults to "change-over" to allow others into the room if the number of adults is limited?		
Answer options	Response Percent	Response Count
Yes	28.7%	25
No	24.1%	21
At the discretion of the sonographer	47.1%	41
answered question		87
skipped question		1



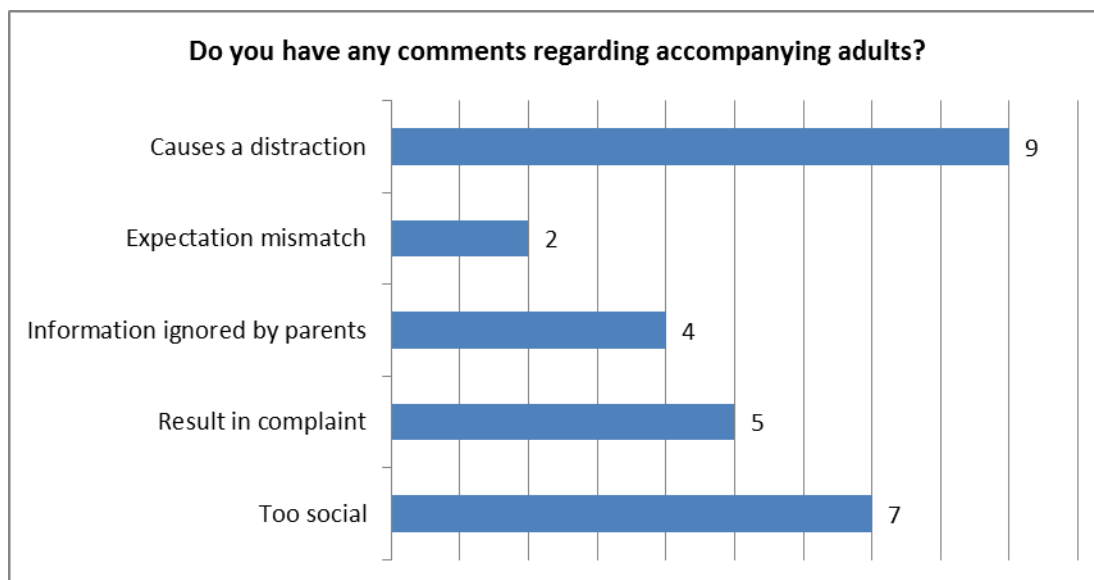
Q6: Are there any other arrangements regarding accompanying adults, if so, please describe:

Original responses: The following chart breaks down the comments by theme, as some comments mentioned three or four separate issues.



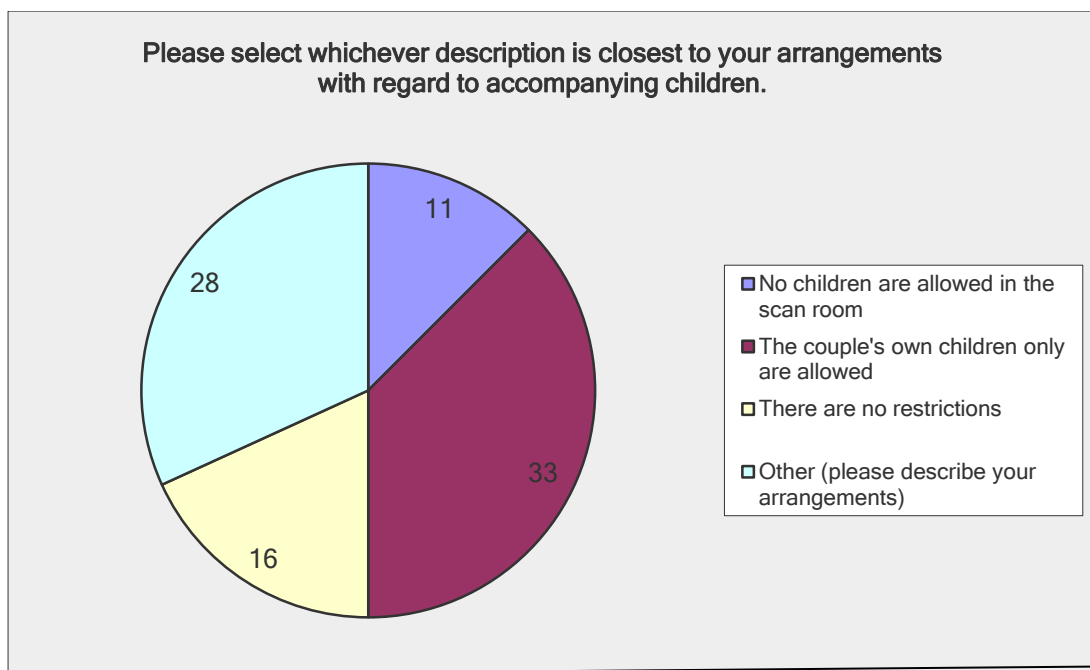
Q7: Do you have any comments regarding accompanying adults?

An analysis of the comments reveals the following themes:



Q8: Please select whichever description is closest to your arrangements with regard to accompanying children.

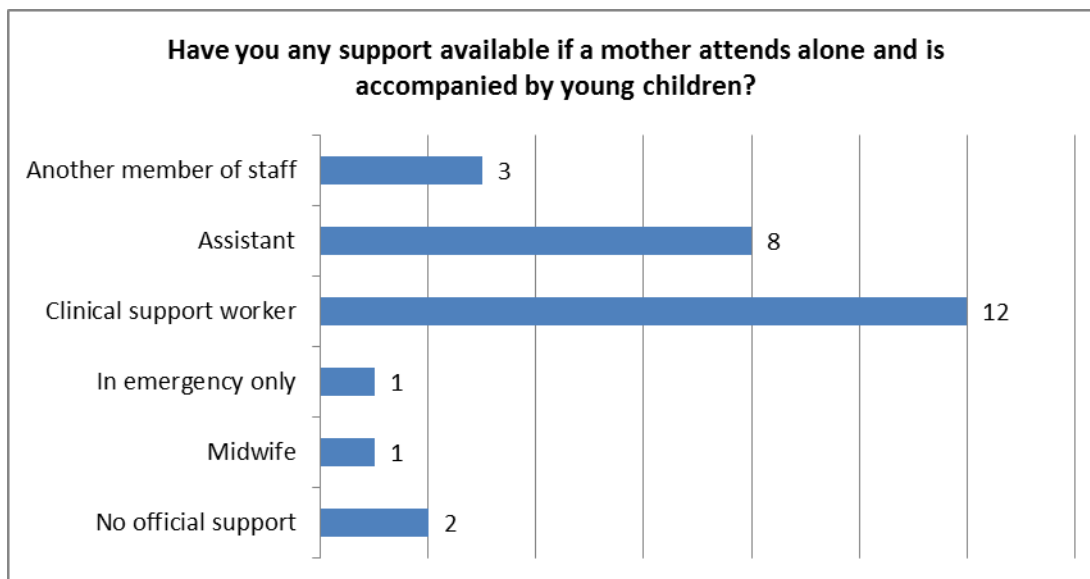
Please select whichever description is closest to your arrangements with regard to accompanying children.		
Answer options	Response Percent	Response Count
No children are allowed in the scan room	12.5%	11
The couple's own children only are allowed	37.5%	33
There are no restrictions	18.2%	16
Other (please describe your arrangements)	31.8%	28
answered question		88
skipped question		0



Q9: Have you any support available if a mother attends alone and is accompanied by young children?

Have you any support available if a mother attends alone and is accompanied by young children?		
Answer options	Response Percent	Response Count
No	76.1%	67
Yes (please specify)	23.9%	21
answered question		88
skipped question		0

An analysis of the comments reveals the following themes.

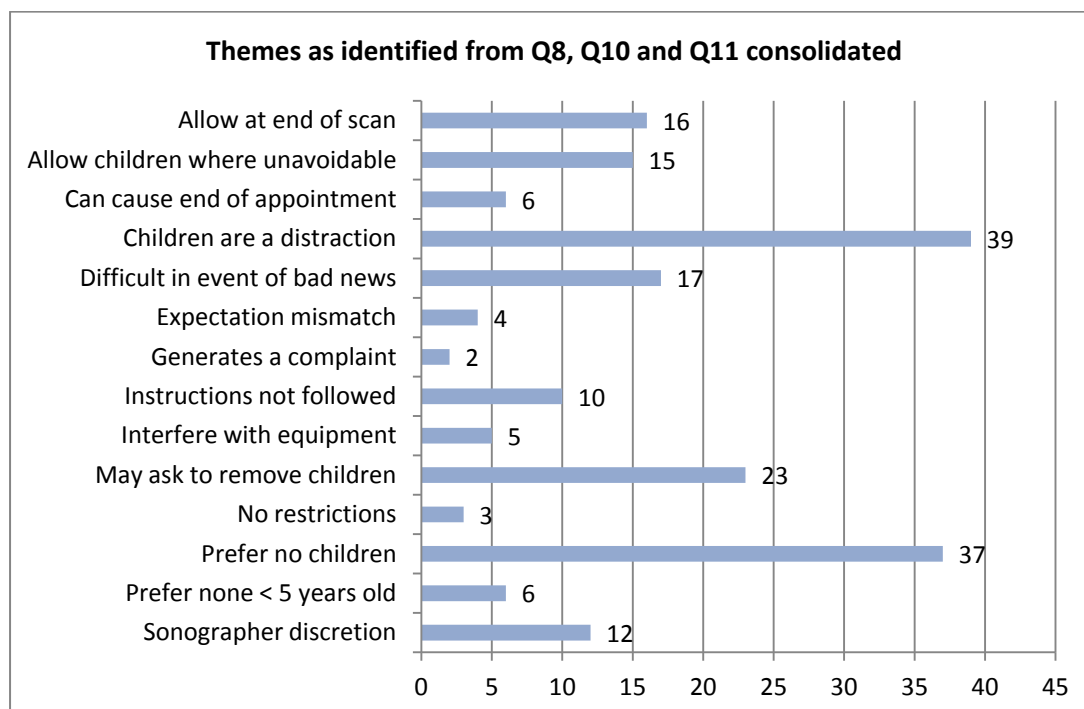


Q10: Are there any other arrangements regarding accompanying children (eg age restriction, number of children) and, if so, please describe.

An analysis of the comments can be found under Q11.

Q11: Do you have any comments regarding accompanying children?

The comments received as part of questions 8 and 10 were very similar to the comments for question 11. Therefore, the comments from all three questions have been analysed here to identify any trends in themes. Care was taken to avoid duplication from the same respondent when the same or similar comment was made for all three questions. An analysis of the comments reveals the following themes:



Q12: Does your unit offer an opinion of the fetal sex?

SCoR comment

There is no requirement within the national fetal anomaly screening programmes to provide an opinion of the fetal sex, nor to recall the woman if the fetal sex is not identified owing to poor visualisation or difficult fetal position. It was believed that most units do offer an opinion as this is a very common request by the parents.

The terms 'sex' and 'gender' are used interchangeably in the comments section by respondent.

Does your unit offer an opinion of the fetal sex?		
Answer options	Response Percent	Response Count
Yes	98.8%	84
No	1.2%	1
answered question		85
skipped question		3

Q13: Is any charge made for this?

SCoR comment

The SCoR has been asked previously to advise its members when there were local proposals to charge for sexing at the 18w to 20w 6d scan and has previously published advice at <https://www.sor.org/learning/document-library/sale-images-determination-fetal-sex-and-commercial-aspects-related-nhs-obstetric-ultrasound-6>

Is any charge made for this?		
Answer options	Response Percent	Response Count
No	98.8%	85
Yes (please provide details)	1.2%	1
answered question		86
skipped question		2

The single comment was **“voluntary donation”**.

Q14: Is there a minimum gestational age at which you will offer an opinion?

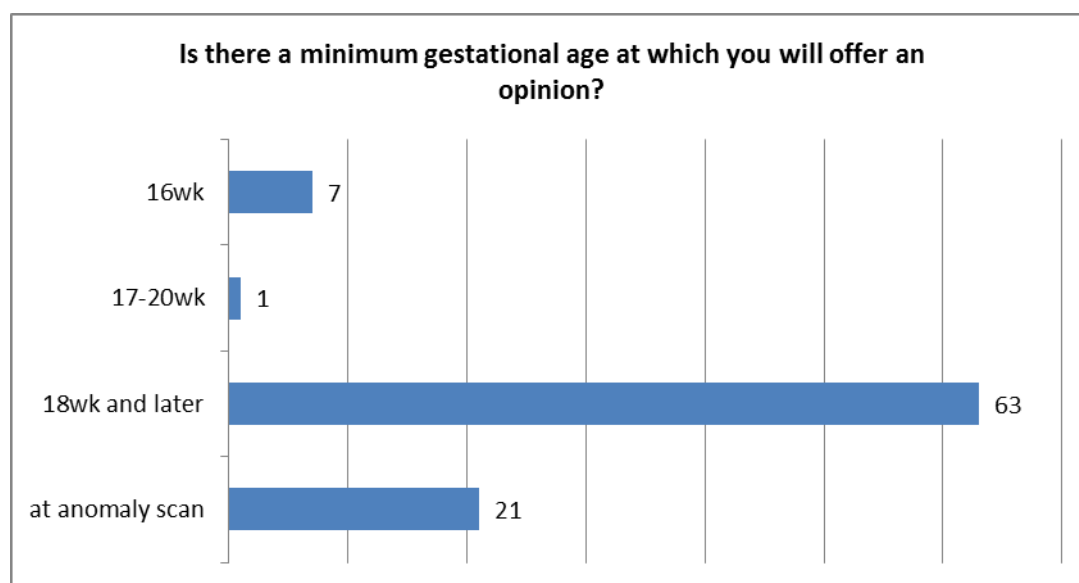
SCoR comment

This question was designed to obtain information on whether departments had any restrictions in place as to the earliest gestational age they would offer an opinion of the fetal sex. It is possible to accurately establish the fetal sex with ultrasound from around 12w.¹ It is a common request from parents during the anomaly screening scan between 18w and 20w 6d. There is a small associated error rate and the parents should be advised of this.

1) Efrat Z, Akinfenwa O, Nicholaides K. First trimester determination of fetal gender by ultrasound. *Ultrasound Obstet Gynaecol.*1999; 13: 305-307

Is there a minimum gestational age at which you will offer an opinion?		
Answer options	Response Percent	Response Count
No	11.6%	10
Yes (please specify minimum gestational age)	88.4%	76
answered question		86
skipped question		2

An analysis of the comments reveals the following themes:



Other comments:

“We advise the sonographers not to sex before the anomaly scan as this sometimes leads to women attending as an emergency to get their baby sexed earlier.”

Q15: Have you any evidence of, or information regarding, requests for termination due to the fetal sex for reasons not related to fetal abnormality?

SCoR comment

This question was included following wide national reporting alleging that selective sex terminations were occurring. The issue has also been raised at the 2014 SCoR Annual Delegates Conference.

All terminations of pregnancy must by law be in accordance with the provisions of the 1967 Abortion Act and its later amendments

<http://www.legislation.gov.uk/ukpga/1967/87/contents> This Act does not apply in Northern Ireland.

Sonographers provide an opinion of the fetal sex at the request of the woman. They do not have a further role with any subsequent request for termination.

Since this survey was undertaken, the following Department of Health research has been published as a response to the Serious Crime Act, 2015.

<http://www.thegoodhealthsuite.co.uk/GP/professional/547-data-suggests-abortion-due-to-sex-of-baby-not-statistically-significant-in-uk>

The full report can be obtained via the links included in the above article.

94.1% of respondents answered 'No' (n = 85). Comments are presented as received.

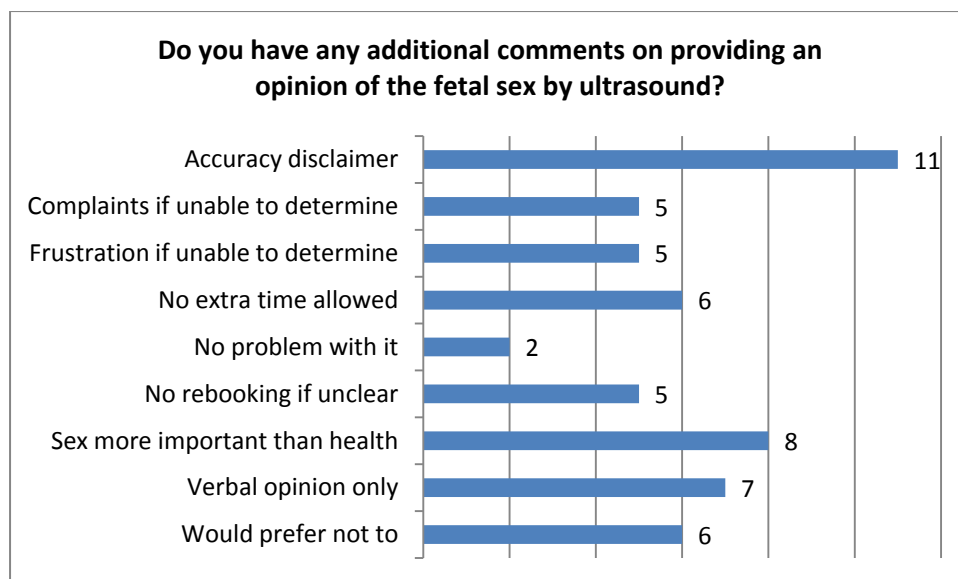
Have you any evidence of, or information regarding, requests for termination due to the fetal sex for reasons not related to fetal abnormality?		
Answer options	Response Percent	Response Count
No	94.1%	80
Yes (please describe)	5.9%	5
	answered question	85
	skipped question	3

The comments received were:

- *“Anecdotal - rarely but have been asked to advise on where a termination service is available.”*
- *“Couples come to have a sexing scan at 15-16 weeks and are desperate to know, and can become upset when the views are not clear.”*
- *“One woman, having been told the sex was a girl, said she did not want a girl and would terminate, she asked if I was 100% sure it was a girl.”*
- *“This was a problem at our unit more than 10 years ago, however religious and cultural concern for sex is no longer a problem.”*
- *“We have had a couple of incidents where immediately after the anomaly scan, the parents have gone to their midwife and asked for a termination.”*
- *“You hear rumours but no evidence.”*

Q16: Do you have any additional comments on providing an opinion of the fetal sex by ultrasound?

An analysis of the comments reveals the following themes.



Q17: Do you provide pictures?

SCoR comment

Departments have been meeting requests by parents for images of the baby for many, many years and initially Polaroid images were provided. These were later replaced by thermal images and digital images are now also available. A small fee has traditionally been associated with these images. This series of questions was designed to provide information on the ways in which these images are now provided and the fees charged. Information was also obtained on the various ways in which the payments are managed. All departments who responded provide pictures but the charges and payment arrangements are subject to considerable variation as indicated by the responses. SCoR advice at <https://www.sor.org/learning/document-library/sale-images-determination-fetal-sex-and-commercial-aspects-related-nhs-obstetric-ultrasound-6>. This document includes advice that there should be a clear audit trail for accounting purposes and that the security of the sonographer, if handling money, must be considered.

The response was 100%: all respondents provide pictures.

Q18: What type of pictures do you provide?

What type of pictures do you provide?		
Answer options	Response Percent	Response Count
Thermal images	97.6%	83
Digital Images (please provide details)	2.4%	2
answered question		85
skipped question		3

Q19: Do you charge for pictures?

Do you charge for pictures?

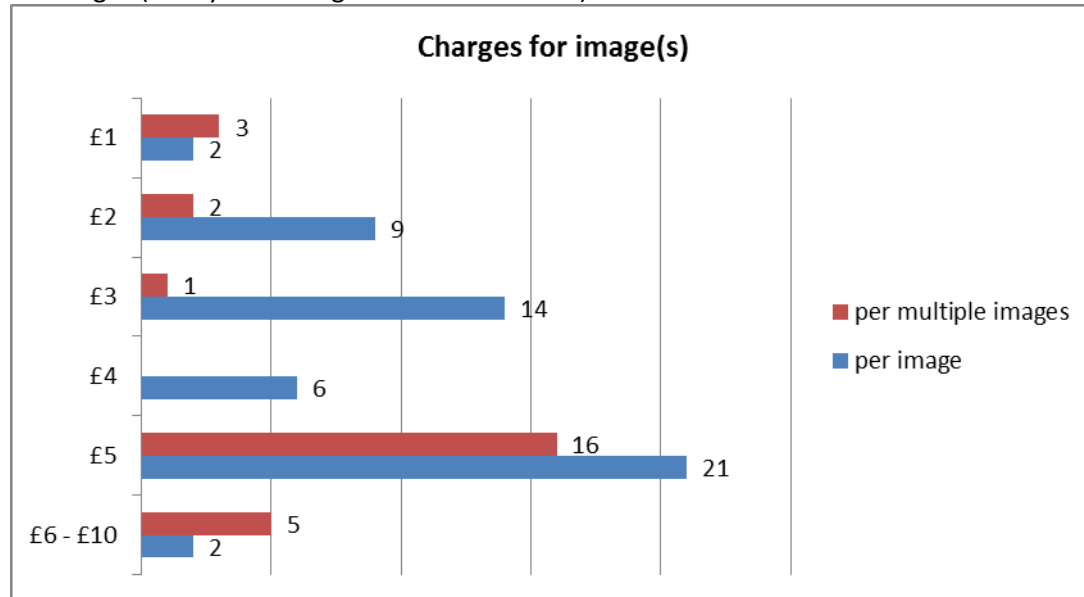
Answer options	Response Percent	Response Count
Yes	85.5%	71
No	14.5%	12
<i>answered question</i>		83
<i>skipped question</i>		5

Q20: If you charge for pictures, how is this done?

If you do charge for pictures, how is this done?		
Answer options	Response Percent	Response Count
No charge	7.2%	6
Advertised charge	69.9%	58
Suggested donation	22.9%	19
<i>answered question</i>		83
<i>skipped question</i>		5

Q21: Please provide details of charges or suggested donation per image or series of images.

There were 13 responses which indicated that the charges were a donation only, and that sonographers would, upon request, make a suggestion as to the size of the donation. The summary of charges (a very wide range and combinations) is as follows:

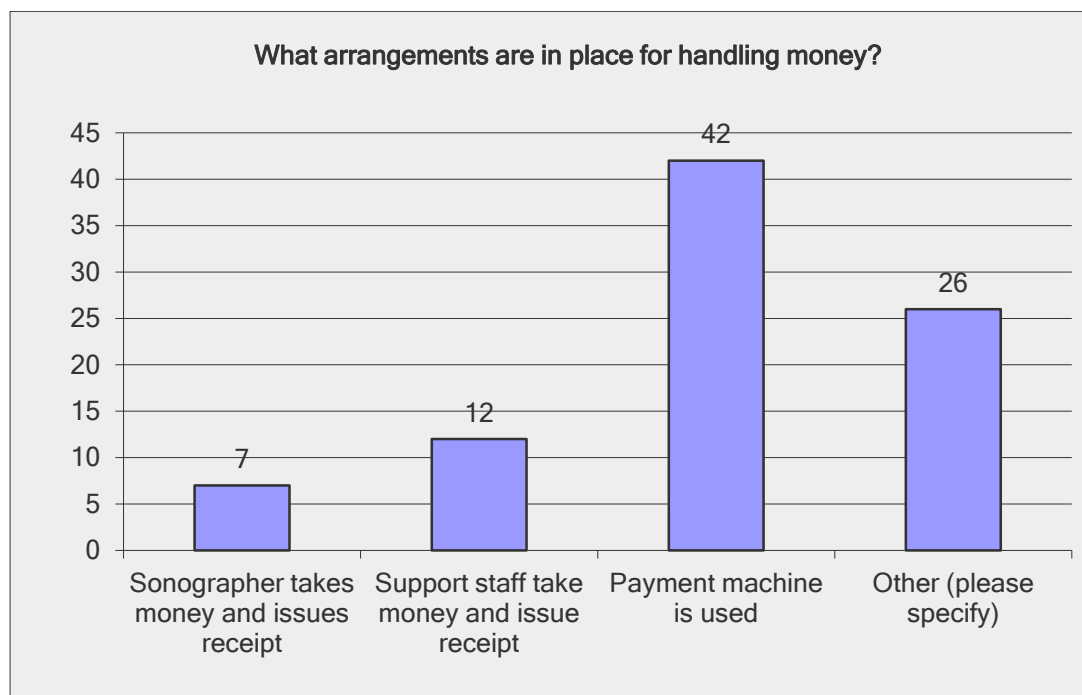


Q22: What arrangements are in place for handling money?

SCoR comment

There is clear advice on this available within <http://www.sor.org/learning/document-library/sale-images-determination-fetal-sex-and-commercial-aspects-related-nhs-obstetric-ultrasound-6>

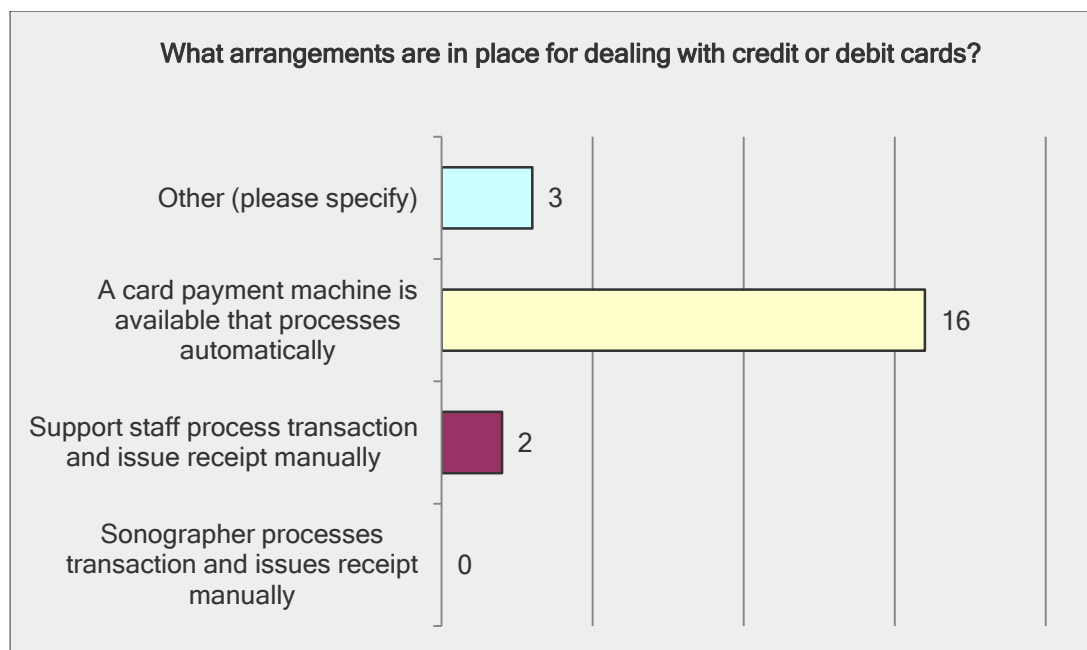
The SCoR is particularly concerned that arrangements in some departments are not auditable and that the security of the sonographer, if having to handle money, has not always been fully considered.



Q23: Are credit or debit cards accepted?

Are credit or debit cards accepted?		
Answer options	Response Percent	Response Count
Yes	25.9%	21
No	74.1%	60
<i>answered question</i>		81
<i>skipped question</i>		7

Q24: What arrangements are in place for dealing with credit or debit cards?



Other comments included:

- ***“Hospital main cashier has all the facilities.”***
- ***“Parents are directed to the hospital’s general office where they take the card payment. “They are issued with a receipt and this is shown to the sonographer who then gives them the pictures.”***
- ***“Patients have to visit the hospital cash office to pay by card and a receipt is issued.”***

Q25: Do you allow video recordings or real time filming taken by digital devices / mobile phones?

SCoR comment

This question relates to whether departments allow parents to record the examination as it occurs, perhaps using a mobile phone or other hand held recording devices. Concerns have been expressed by sonographers in the past on this practice and the SCoR has published advice at <https://www.sor.org/learning/document-library/recording-images-patients-during-diagnostic-imaging-including-screening-and-radiotherapy> Images and recordings of conversations with the sonographer have been copied to social media sites without the sonographer’s consent and it is then very difficult to have these removed.

Do you allow video recordings or real time filming taken by digital devices/mobile phones?		
Answer options	Response Percent	Response Count
No	98.8%	83
Yes (please provide details including any charges)	1.2%	1
<i>answered question</i>		84
<i>skipped question</i>		4

The single comment reads:

- ***“DVDs are sold at the time of the nuchal translucency/crown rump length assessment for £7”***

Q26: Does your unit offer 3D/4D “souvenir” scans at the time of the anomaly scan?

SCoR comment

The SCoR has been contacted previously by departments researching whether to add 3D/4D scans for ‘souvenir’ purposes to the anomaly scan. This question (Q26) was designed to see whether any departments offered this at the time the 18w to 20w 6d anomaly scan was undertaken. Any addition would be for income generation purposes. 3D/4D scans are widely available as a separate appointment in the independent sector and are known to be popular with parents. Four departments indicated that they do offer these at the time of the anomaly scan but no further details or comments are available. Question 27 asked about fees charged for this. Two departments responded stating they did not charge but no further comments were made. This made analysis difficult.

SCoR advice can be found at the following link: <https://www.sor.org/learning/document-library/recording-images-patients-during-diagnostic-imaging-including-screening-and-radiotherapy>
This includes a link to the BMUS safety guidelines.

Does your unit offer 3D/4D "souvenir" scans at the time of the anomaly scan?		
Answer options	Response Percent	Response Count
Yes	3.6%	3
No	96.4%	81
<i>answered question</i>		84
<i>skipped question</i>		4

Q27: Is there any charge made for this?

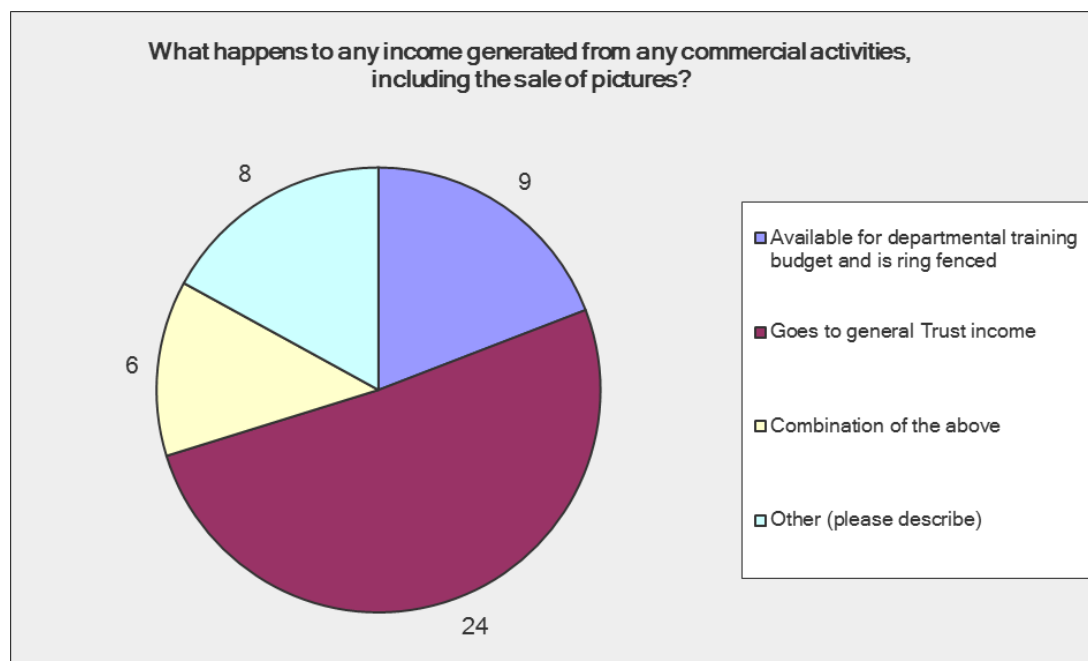
Most respondents skipped this question; however the two responses received were negative.

Is there any charge made for this?		
Answer options	Response Percent	Response Count
No	100.0%	2
Yes (please specify)	0.0%	0
<i>answered question</i>		2
<i>skipped question</i>		86

Q28: What happens to any income generated from any commercial activities, including the sale of pictures?

What happens to any income generated from any commercial activities, including the sale of pictures?		
Answer options	Response Percent	Response Count
Available for departmental training budget and is ring fenced	19.1%	9
Goes to general Trust income	51.1%	24
Combination of the above	12.8%	6

Other (please describe)	17.0%	8
<i>answered question</i>		47
<i>skipped question</i>		41



Q29: Do you have to meet any income targets from commercial activities linked to the two NHS obstetric screening scans?

Do you have to meet any income targets from commercial activities linked to the two NHS obstetric screening scans?		
Answer options	Response Percent	Response Count
No	74.5%	35
Yes (please describe)	25.5%	12
<i>answered question</i>		47
<i>skipped question</i>		41

Respondents answering “yes” to this question indicated that, in some departments, a definite budget is set for income. Others felt under some degree of management pressure to ensure income is achieved.

Q30: Is there any additional time allowed for any commercial activities?

SCoR comment

The two NHS obstetric screening scans are performed for clinical reasons with the woman’s informed consent. The recommended times are twenty minutes minimum for the first of these (in England) via NHS England service specification 16 and for the 18w to 20w 6d scan (in England) via NHS service specification 17 which states 30 minutes for a singleton pregnancy and 45 minutes for a multiple. The commercial activities into which this survey enquired will take up some of that time unless separate time provision for these activities is made.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/386254/No16_NH_S_Downs_Syndrome_Screening_Trisomy_21.pdf (see page 10)

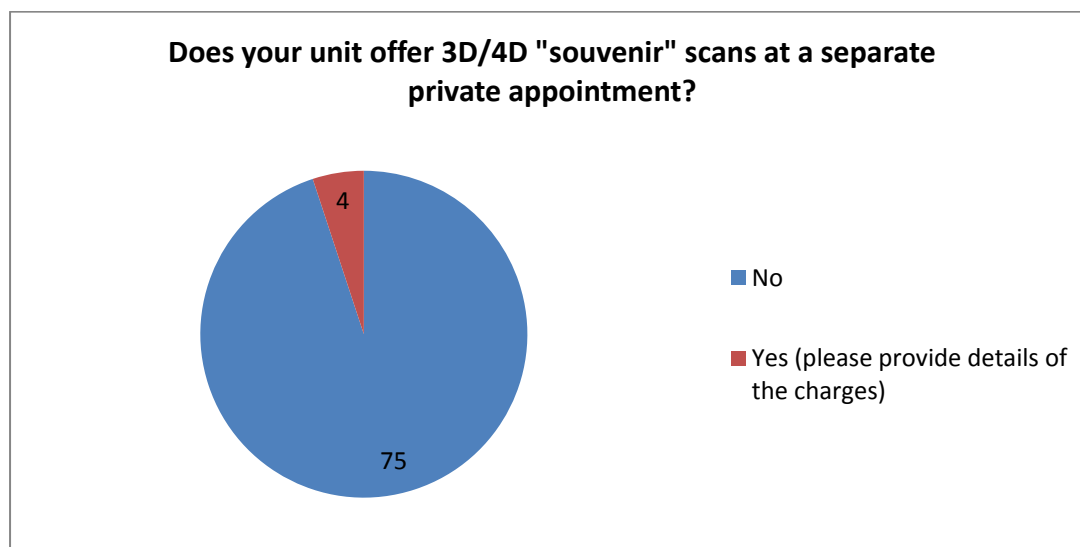
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/386256/No17_NH_S_Fetal_Anomaly_Screening.pdf (see page 11)

Is any additional time allowed for any commercial activities?		
Answer options	Response Percent	Response Count
No	97.7%	44
Yes (please describe)	2.3%	1
<i>answered question</i>		45
<i>skipped question</i>		43

Q31: Does your unit offer 3D/4D “souvenir” scans at a separate private appointment?

SCoR comment

This is linked to Q26-Q27 but refers to the situation where an appointment for a 3D/4D ‘souvenir’ scan is made separately, is provided by the NHS department concerned and is for income generation purposes.



Departments which reported that charges are made said they varied between £65 and £150.

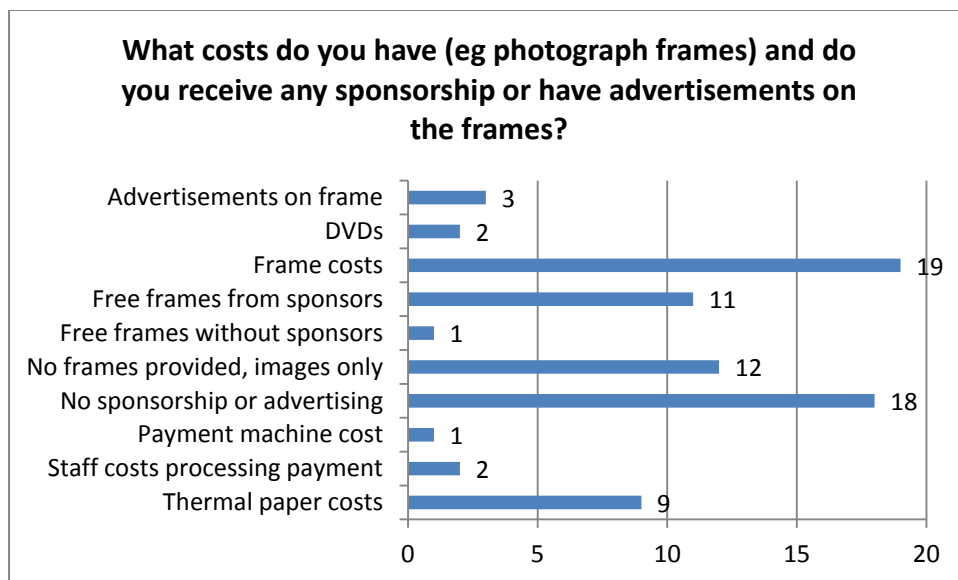
Q32: What costs do you have (egfor photograph frames) and do you receive any sponsorship or have advertisements on the frames?

SCoR comment

The SCoR has had enquiries from departments where sponsorship had been arranged (eg for photograph frames) but there were subsequent contractual problems. These have included what was considered inappropriate advertising on the photograph frames. Some contracts have been difficult

to end with long notice periods and punitive early release terms. Terms need to be carefully reviewed at the time of acceptance and sonography managers do not always have full control over this with decisions being taken at a higher level.

An analysis of the comments reveals the following themes:



Q33: Are there any other social or commercial activities related to the two scans, apart from those discussed above?

There were no additional social or commercial activities recorded.

Q34: Do you have any general or additional comments related to the survey topic?

An analysis of the comments reveals the following themes:

