

# Consortium for the Accreditation of Sonographic Education

# NEWS

## April 2010

This newsletter aims to provide up to date information regarding CASE activities & requirements regarding validation, annual programme monitoring & other relevant issues.

## Key Updates from CASE

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CASE Update

Workshop/Open Fora Dates

Regulation of Ultrasound Practice

New CASE representatives

Ultrasound Physics Explained advert

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Fees reminder

### Update from March 2010 CASE meeting

The CASE representatives met in March at the Society and College of Radiographers (SCoR) offices in London to discuss the primary business of accrediting ultrasound programmes and courses.

A warm welcome was extended to Sue Halson-Brown, the new BMUS representative and Programme Leader at the University of Portsmouth. She replaces Rosie Conlon who resigned at the end of 2009. Sue was also asked to join the list of accreditors. This is a role that all representatives to CASE are asked to undertake.

As reported in the November Newsletter, the administration of CASE now rests with the SCoR. A meeting had taken place with Audrey Paterson in January to review the CASE standard operational procedures (SOPs) and how they might be further streamlined to match those of SCoR. Audrey was invited to report on how the process had been rolled out and its success to date. She explained that there is a proposal to re-organise CASE procedures where necessary in line with those of SCoR to enable CASE, its representatives and accreditors more time to conduct the important business of accrediting ultrasound programmes and courses. This will not result in the loss of CASE independence and how it operates as a consortium.

The representatives were asked to comment on the proposals to amend the SOPs before they were finally prepared. Programme and course leaders will see no significant difference to the administration of the consortium, if anything it should be more efficient. One of the efficiencies agreed by the representatives is to go paperless as far as is practicably possible. This is a relatively easy step to take for meetings and workshops but this change still needs some more thought when it comes to programme documentation for accreditation events. Please continue to work with the guidelines printed in the CASE Handbook for programme accreditations.

Several programmes were accredited or re-accredited in this last period and we welcome new programmes onto the accreditation list. Full details can be accessed on the CASE website. A focused course was accredited (see separate article) and the meeting received applications to accredit a further two more. Recently, CASE has received several queries about whether it can retrospectively accredit a programme or course after the students have commenced their study period.

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## **Update from March 2010 CASE meeting - continued**

This request is not normally approved unless there is valid reason, which is given in writing at the time of the request. A reason might be an unexpected re-structuring of university procedures during the run-up to an accreditation, delaying some parts of the documentation and therefore the accreditation meeting. Unfortunately, a late decision to request accreditation made by programme or course teams that results in a reduction of the accreditor review time is not always seen as a valid reason for retrospective approval. The take-home message is, please advise CASE of your intention to (re-)accredit a programme as soon as possible and continue to communicate with your assigned accreditors as much as is necessary to achieve a successful outcome for your students, team and institution.

Thank you to all programme leaders for the prompt return of the annual programme monitoring proformas. These are in the process of being evaluated by the sub-committee. Reports will be available as soon as possible after the next meeting in June. CASE representatives are aware that this procedure has been slow at times to meet universities' regulations on annual programme review. As it is a paper exercise, there has been very little that could be done to speed up the review process. However for the future, we are looking into electronic data collection that will provide us with a quicker evaluation system. I hope to be able to report on any changes in my next bulletin in July.

Each year in June, the CASE Handbook is reviewed. Minor changes to its guidelines are made during the summer period. This process has now commenced and if you have any points to make about the publication, now will be the time to send them to Michele to be included for discussion at the next meeting.

Currently, two training sessions for accreditors take place during a calendar year. This will continue for this year as we have workshops planned for Bristol (May) and Sheffield (October). It has been agreed to reduce this to one session from 2011. This is due mainly to a stretching out of the timing from a 5 to a 6-year review at most institutions but also so that training is more meaningful if it takes place as close as possible to engaging with a 'live' accreditation event. The guidelines associated with accreditor training have not changed and these can be found in the Handbook. Generally speaking, an accreditor cannot actively take part in an event until h/she has participated in at least one training workshop and acted as a shadow accreditor. If places are available for these training days, programme leaders are also invited to attend. Just a reminder, there is no registration fee for these workshops but CASE cannot reimburse any expenses incurred.

An open forum takes place annually which is open to all who are interested in ultrasound education and training. Topics for discussion normally reflect the work that is undertaken by CASE. Unfortunately, due to lack of registrants, the March meeting at the University of Derby had to be cancelled. CASE would like to thank Heather and Stephen for the work that they did to organise the day. A lot of behind-the-scenes action goes on prior to these workshops and it is a pity when these are lost, as generally the subject for the day is very pertinent to student learning, mentor training and accreditor activity. Please let Michele know of any improvements we can make to this part of CASE work.

Once again, thank you for your support and perhaps I shall meet some of you at one of the accreditors' workshops.

The next meeting of CASE will take place on Thursday 24<sup>th</sup> June 2010.

*Rosemary Lee*  
*CASE Chair*

## Focused Ultrasound Courses

The introduction of a new CASE accreditation scheme for shorter focused ultrasound courses took place last autumn. To date, there have been 3 applications for this accreditation pathway and the first event took place in March at Glasgow Caledonian University. The University's School of Health had been successful in a bid to develop and deliver skills-based ultrasound training for antenatal and triple A screening for practitioners across Scotland in preparation for the introduction of the programmes in 2010/11. The course has been developed and delivered collaboratively with NHS Services for Scotland and NHS Education for Scotland. A team of 3 accreditors visited the University to ensure that the course could meet the robust standards of training that is required by CASE and evidenced in the NHS Scotland screening standards. The accreditors were delighted to announce at the CASE meeting that the Caledonian team had met the majority of the requirements for an accredited focused course and after making some minor changes to the documentation, the course would be accredited according to CASE standards. For more details for accreditation of focused courses, please contact Michele Landau at the Office.

## New CASE Representative Introduction

### Sue Halson-Brown



As Senior Lecturer in Radiography and Ultrasound Programme Leader at the University of Portsmouth, Sue Halson-Brown has been involved in the development and delivery of the MSc Medical Imaging (Ultrasound route) and the BSc (Hons) Radiography Programme with a special interest in ultrasound in trauma. She maintains direct links with clinical practice and clinical currency through Honorary Contracts with two local NHS Trusts.

Amongst many professional interests she is a reviewer for a professional journal, external examiner, Inter-Professional Learning (IPL) Facilitator and member of School, Faculty and University committees.

Recently elected to BMUS Council Sue Halson-Brown is one of two BMUS representatives to CASE Council and is a member of the BMUS Scientific and Education Committee.

# Report on the NHS Fetal Anomaly Screening Programme

In January 2010 the UK National Screening Committee published the long awaited NHS Fetal Anomaly Screening Programme (FASP). The programme gives clear guidance on how the anomaly screening service should be configured; the advice and information women should receive about the anomaly scan and its potential shortcomings, as well as explicit information for sonographers regarding the “base menu” of ultrasound images that should be taken as part of the screening programme.

The programme sets out 11 conditions the screening programme is designed to detect and the twelve standards that will form the basis of the ultrasound screening programme in England, against which the programme can be audited and monitored to assess the effectiveness of the service. All hospital trusts will have to provide an annual audit against these standards for all 11 conditions, including their screen positive rates and detection rates.

The key messages from the programme include:

All women should be offered a minimum of two ultrasound scans during pregnancy. At the first antenatal appointment women should be offered an early ultrasound scan for gestational age assessment. This scan should ideally take place between weeks 11-13+6 weeks (13+6 weeks = 13 weeks and 6 days).

Ultrasound screening for fetal anomalies should be routinely offered, normally between 18+0 weeks and 20+6 weeks (20+6 weeks = 20 weeks and 6 days). This appointment should be 30 minutes for a singleton pregnancy and double for a multiple pregnancy.

At the first contact with a healthcare professional, women should be given information about the purpose and implications of the anomaly scan to enable them to make an informed choice as to whether or not to have the scan. The purpose of the scan is to identify fetal anomalies and allow:

- reproductive choice (termination of pregnancy)
- parents to prepare (for any treatment/disability/palliative care/termination of pregnancy)
- managed birth in a specialist centre
- intrauterine therapy

Women should be informed of the limitations of routine ultrasound screening and that detection rates vary by the type of fetal anomaly, the woman's body mass index and the position of the unborn baby at the time of the scan.

If an anomaly is detected during the anomaly scan pregnant women should be informed of the findings to enable them to make an informed choice as to whether they wish to continue with the pregnancy or have a termination of pregnancy.

Fetal echocardiography involving the four-chamber view of the fetal heart and outflow tracts is recommended as part of the routine anomaly scan.

Routine screening for cardiac anomalies using nuchal translucency is not recommended.

When routine ultrasound screening is performed to detect neural tube defects, alpha-fetoprotein testing is not required.

For more information then see <http://www.screening.nhs.uk/>

*Lynda Mulhair*

## Launch of Fetal Anomaly Screening Standards

Sonographers and student sonographers will need to be sure they are fully familiar with the national standards (England) for the 18+0 to 20+6 weeks fetal anomaly ultrasound screen. The primary aim of the standards is to ensure access to a uniform fetal anomaly screening programme, conforming to an agreed level of quality.

Launched by the NHS Fetal Anomaly Screening Programme (NHS FASP) on 28 January 2010, the 68 auditable standards have been produced by a working group of experts on behalf of NHS FASP, in collaboration with the SCoR, the RCOG and the British Maternal & Fetal Medicine Society (BMFMS).

The 68 standards have been developed as a framework and context for health professionals delivering maternity care, and set out key requirements for sonographic practice and for professional partnership working both within and beyond the ultrasound department.

As well the standards, 11 conditions have been identified which NHS FASP expect all ultrasound departments in England to screen for and audit with effect from 1<sup>st</sup> April 2010. These are:

- Anencephaly
- Open spina bifida
- Cleft lip
- Diaphragmatic hernia
- Gastroschisis
- Exomphalos
- Serious cardiac abnormalities
- Bilateral renal agenesis
- Lethal skeletal dysplasia
- Edwards' syndrome (Trisomy 18)
- Patau's syndrome (Trisomy 13)

All NHS Trust ultrasound departments are expected to meet the 'minimum' standards within one year. Progression towards the 'developmental' standards will be reviewed 1 April 2013.

To support the implementation of the standards and guidance, new online learning materials have been produced for use by individuals or to support group study sessions. They can also be integrated into generic and specialist related healthcare courses, such as PG Certificates/Diplomas in obstetric ultrasound. CASE will expect to see the standards and guidance integrated into current and new CASE accredited programmes, as well as appropriate use of FASP's range on-line learning resources.

The national standards and guidance and the link to the training resources can be accessed via the Fetal Anomaly Screening Programme website at [www.fetalanomaly.screening.nhs.uk](http://www.fetalanomaly.screening.nhs.uk). Other useful learning resources are also available through the link, for example for combined screening and for fetal echocardiography.

*Audrey Paterson*

## Message from the CASE Co-ordinator

### **New Ultrasound training, employment and registration guidance**

Resulting from an increase in the number of requests received on a weekly basis the Society & College of Radiographers, in collaboration with CASE, has produced new guidance for queries relating to Ultrasound training, employment and registration. This can be accessed from both the Society website as well as the CASE website: <http://www.case-uk.org/> Please do take a look and feel free to forward the guidance on to interested parties/enquirers.

### **CASE Accreditor training workshops 2010**

As stated in the CASE Chair's introduction to this newsletter, two training workshop days for CASE accreditors, and those interested in becoming accreditors, have been arranged for this year. The first is scheduled to take place on May 17<sup>th</sup> (in Bristol) and the second on October 21<sup>st</sup> (in Sheffield). For further information on both events, and to register your attendance, please contact me using the email address on the front page of the newsletter. There is no registration fee imposed, however, expenses incurred in connection with the workshops cannot be refunded.

### **Receipt of accreditation documentation**

I would like to draw your attention to the CASE Accreditation Handbook, specifically Section 5.1, Table 1 which relates to the timetable of events.

Accreditation documentation should be received by the CASE Co-ordinator at least 2 months prior to the accreditation event to allow for sufficient time for scrutiny by the CASE accreditors. Unfortunately, recently we have not been receiving documentation in a timely manner; this places undue pressure on the CASE accreditors. So, please treat this as a request from me on their behalf to be more prompt in forwarding your documentation, whenever possible.

If you would like an e-copy of the current CASE Accreditation Handbook, please email me and I will send by return.

### **Press statement for CASE (for Medical Ultrasound Programme Leaders in UK)**

The NHS Fetal Anomaly Screening Programme (NHS FASP) has launched the online 'Nuchal Translucency (NT) Training Resource'. The full press release appears on the CASE website and has been emailed to programme and course leaders.

*Michele Landau - CASE Co-ordinator*

## Annual Programme Monitoring

The Annual Programme Monitoring Review (APMR) process for the academic year 2008-2009 is well underway. Thank you to all programme leaders for prompt return of their statistics. We have listened to your comments with regard to the timing of feedback from the sub-group but unfortunately due to circumstances way beyond the control of CASE and by the change of administration, the report will not be available until June.

The subgroup would like to compliment programme leaders on the thoroughness and care with which they have completed the returns. We are aware that the current form is not completely straight-forward and we hope to have a revised version for the next review. We are looking at implementing the College of Radiographers' on-line facilities, which should make the process easier and quicker for everyone.

We have begun our correspondence with programme teams about their statistics for 2008-2009. In most cases this is an acknowledgement letter assuring them that the programme information that has been provided is satisfactory. We shall be requesting further information and clarification from a small number of programme leaders and we hope this will take place shortly.

Thank you, again for your patience.

*Andrew Fairhead - Member of the AMPR Sub-Group*