

Investigating recruitment of international ultrasound practitioners and those without CASE-accredited qualifications



BMUS SoR survey 2023

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Background





- Chronic shortage of sonographers in UK
- Innovation needed to address shortage
- Recruitment of those without CASE accredited qualifications
- Survey developed to investigate managers' experiences so far
- May identify areas where BMUS et al. can help
- Live from Nov 10th to Dec 31st 2023
- 195 responses but 61 excluded (offered no useful information)
- 134 responses to work with

Demographics





- 69% ultrasound manager or lead sonographer
- Participants from all 4 home nations
- Also: Channel Isles, Ireland, British overseas territory, UK-based independent clinics
- Majority (56%) responsible for up to 10 rooms
- Approx third (32%) have 11 to 20 rooms

Staffing and vacancies



Majority departments short-staffed (83%)

- 18% had <5% vacancy</p>
- → 35% had vacancies running at 6 to 20%
- 22% had vacancies > 20%

- Many use locums all the time (39%)
- → A fifth (21%) never use locums
- Vast majority (90%) regularly train students

Who has tried to recruit international or staff with non-CASE accredited qualifications?

- Majority of respondents (70%) had tried to recruit
- → 30% hadn't

Top three reasons given for those who have never tried to recruit from these groups:

- Unsure about candidates' ability to report to UK standards (59%)
- Unsure about matching qualifications (30%)
- Not needed to (30%)



Two other themes for those who have never tried to recruit from these groups:

- FASP requirements are a deterrent
- Poor previous experiences
 - Worked with international radiographers who claimed to be sonographers but in their view weren't
 - Worked with international sonographers who had not been viewed as of a good standard



Have you successfully recruited an international or 'non-CASE' candidate?

- From those who have tried, 81% have appointed at least one person
 - → 41% were sonographers
 - 42% were radiographers
 - 11% medical doctors
 - Other a mix of above and/or clinical vascular scientists



What support did you have during the recruitment process?

- Assistance from Human Resources 47%
- ▶In-house international recruitment team 17%
- None 34%

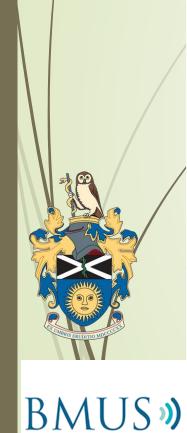
More support needed for managers

It was quite a lonely journey with limited understanding of the situation from recruitment team, HR, even managers, whose main concern seems to be getting scans done... I felt I had been left to it, knowing that if it didn't work the responsibility would fall on me. #194

My own Trust had an unrealistic expectation of what is achievable from an overseas recruitment scheme... ...this has left me as a lead feeling quite vulnerable. #96

Country where ultrasound qualification obtained:

Pakistan		Nigeria
Uganda	South Africa	USA
Zimbabwe	Italy	Ghana
China	Canada	Argentina
Syria	UK	Latvia
New Zealand	Egypt	Poland
Australia	Malaysia	India
Philippines	Trinidad	Bulgaria



Assessment of qualifications

- A whole range of methods
- Qualifications assessed by ENIC* in 27%
- 21% did not assess qualification at all





* UK (European) National Information Centre

Assessing qualifications:



Asked CASE

Asked the awarding body

Used ENIC

Interviewed so well that further checks not necessary

Used other services to check on our behalf

Asked local university

Didn't need to as already had someone in dept with same quals

Didn't need to check, as the candidate was a medical doctor

Many want a method for comparing qualifications:

Having a robust method of checking qualifications... ...collaboration with universities is definitely the way to go to devise a recruitment programme. #110 We need guidance from professional bodies on what to look for. #145 Bridging qualification and CASE mapping absolutely essential. #174







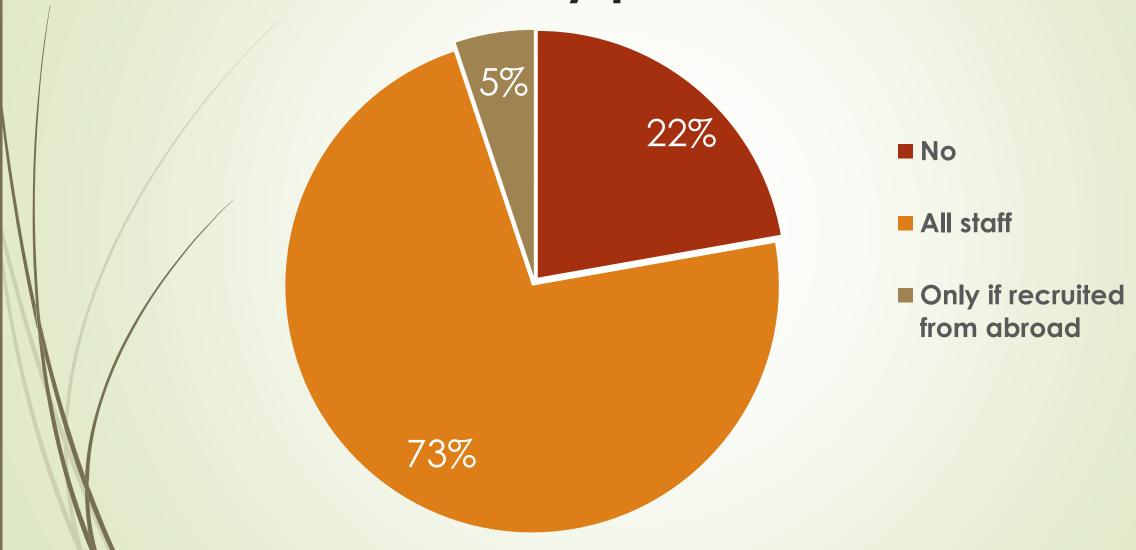
Communication skills:

- ■93% assessed at interview (virtual or f2f)
- Some candidates were provided with written tasks prior to interview
- ■4% did not assess

Technical abilities:

- ■51% assessed face to face with US machine
- Others relied on referees, videos, images, simulators
- 17% did not assess

Probationary period for new staff?



Unsuccessful attempts to recruit international/non-CASE practitioners

Most (79%) said they'd had at least one unsuccessful attempt

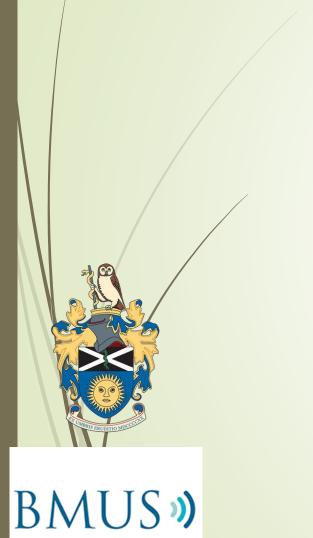
Common reasons:

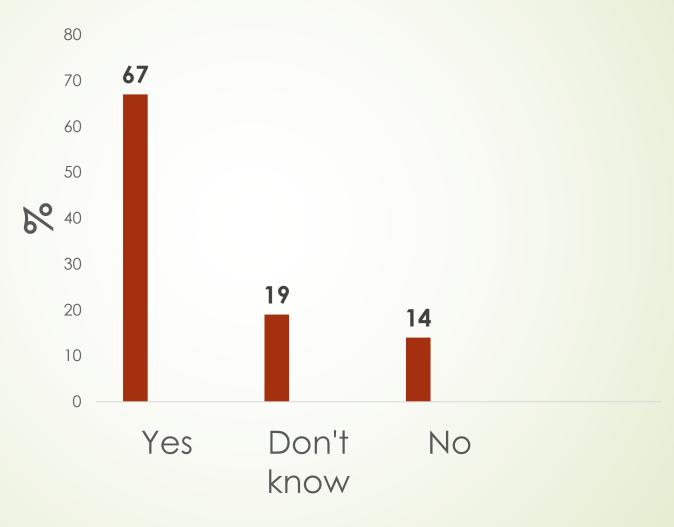
Clinical interpretation skills	(45%)
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Reporting	(41%)
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They gave up half way through an examination they were being observed on. #97

Would participants be more likely to try and recruit if bridging material was available for support?





Suggested 17 possible educational resources

(participants to select top 5, all 17 were very close in popularity)

UK healthcare delivery	and expectations (n = 44
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$$ightharpoonup$$
 Cultural transition (n = 40)

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 Adherence to protocols (n = 39)



Least desired? - planar anatomy and image acquisition



Assessment tools in the same 17 areas?

(and if so, tick 5 maximum)



Written communication skills (reporting) (n = 47)

Enhanced communication skills (n = 46)

■ Image acquisition (n = 43)

► FASP requirements (n = 42)

Verbal communication (n = 41)

Least desired? - CPD and lifelong learning



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'UK healthcare delivery and expectations'

- What content might be included?
 - Patient centred care?
 - Patient choice?
 - ■National care pathways?....
- How might module content be assessed?
 - ■Online exam
 - **■**MCQs
 - Face to face in-house assessment?.....





What went well with your recruitment?

The Nigerian Sonographers in our team are very sound all round... we look forward to welcoming more should any vacant arise. ...they were meant to undergo 3 months preceptorship. They were however exceptional from day one. #47



What went well with your recruitment?

■ Often, sonographers trained internationally, particularly those in Australia and NZ, are multi-skilled and highly skilled and a very valuable asset to our department. UK trained sonographers tend to be very modular in their scope of practice and I have found that international staff that are very broadly qualified have actually increased the skill-set of our CASE accredited staff... #167





More on what went well:

....they have made an impact to service capacity. It has the added benefit of introducing slightly different cultures and experiences to the team and has helped CASE accredited PG sonographers develop their own leadership and mentoring skills. It is good prep for the eventual qualification of the undergraduate sonographers we have taken on. #96



What could have gone better?

It showed me that international recruits, unless they have worked in UK practice previously, do not meet the required standards of UK sonographic practice. #53

Struggled to hold a probe. Trying to help someone who doesn't believe they need help is very challenging. Communication was poor and had many complaints... Also had a cultural issue with female bosses... They are a valued member of the team now. #42





Tensions and inequalities in the workforce

- Some recruits needed more support than expected
- Affects whole team
- Issues related to
 - 'blocking' training posts
 - unfair pay banding





Tensions and inequalities in the workforce

Strained relationships with UK staff when overseas staff appeared to be getting preference for formal university courses in order to improve their knowledge and skills.

Also this often meant that radiographers wanting to start ultrasound training were not able to do so due to limited training spaces and funding. In some instances this led to radiographers leaving the Trust to obtain training places elsewhere. #38





Tensions and inequalities in the workforce

We had to pay somebody band 7 for eight months whilst they caught up and it created a lot of bad feeling with the other band 7s. The department felt lumbered with a sonographer that could not be left on their own to scan. #97



Tension and inequalities, conversely:

The next challenge is enabling and ensuring that they have the professional mobility to develop onwards and upwards, as there is evidence suggesting that overseas recruits (and ethnic minorities) are less likely to progress into senior roles within the NHS... #96

But is it really just about good preceptorship?





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Preceptorship and Capability Development Framework for Sonographers

Produced by the British Medical Ultrasound Society

Commissioned by Health Education England

July 2022

Updated March 2023 with revised Career and Progression Framework (appendix A)

Preceptorship vs bridging support

- Preceptorship methods very variable
- Could be improved and standardized

- Many would welcome national bridging material
- Use as required on a case by case basis





There is no 'one size fits all'

- Falsified documents. CV did not match skillset. #51
- Clinical capabilities... ...did not match required ability despite extensive online interview. #96

- Very smart and hardworking team members. #75
- We have some excellent new sonographers who have adapted well to the UK standard. #156



Take home messages



- Some recruits need to have a better experience
- Many managers need to have a better experience
- Negative events impact on whole team
- Currently, a lack of 'process'
- A recruitment 'tool kit' for some managers
- 'Bridging material' for some candidates
- Possible modules: UK healthcare, report writing, communication
- All candidates need careful assessment for a UK sonographer role whether they've a CASE accredited qualification or not



Thanks for listening

And thank you if you were a survey participant!

More comprehensive analysis will be published by BMUS and SoR in due course