

Acoustic Times or... Scan you believe it!

A quality publication

Ultrasound governance: communicating standards during a pandemic

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Introducing new governance processes into a multi-site ultrasound department during a pandemic required a re-think of existing communication models. During the best of times, implementation of sonographer peer review can be seen as challenging. Governance processes should be viewed as an opportunity to learn, to shape practice, to develop and to improve patient safety, not as part of a capability or competence process, to this end, open and honest communication is vital to ensure new processes are not seen as threatening.

The pandemic added another layer of challenge to the roll out, both emotionally and physically. It was necessary, at times, to suspend cross-site working to reduce potential Covid contacts and, due to the restrictions, face to face department staff meetings were not possible, this created difficulties in keeping staff members fully informed and to explain the processes being introduced.

As a solution, a monthly newsletter *Acoustic Times*, produced by the lead governance sonographer, was introduced, acting as a vehicle to explain the processes and changes being made and giving the opportunity to provide the evidence base. Virtual peer review audit and learning meetings based on the Royal College of Radiologists' Standards for Radiology, Events and Learning Meetings' format were introduced, held remotely across sites, to identify and share any individual or group learning points. This poster presents a summary of how the newsletter supported the introduction of quality improvements.

Acoustic Times supported different aspects of the governance processes as they were introduced, each edition containing links to national and local guidance, providing supporting evidence and linked to CPD opportunities.

Supporting engagement and participation in audit

The concept of peer learning and support, which is directed by audit, was clearly described in the first edition of *Acoustic Times*. Governance processes may be seen, by some, as threatening, punitive or isolating and consequently, individuals may be reluctant to engage, possibly due to fear of "being found out", a lack of confidence or experience. Clear communication through *Acoustic Times* did offer reassurance with clear rationale and description of processes laid out in a step-by-step fashion. The opportunity for questions, discussion and feedback was always given. As a result, the sonographers have very successfully embraced and value the peer review processes.

"I didn't know what to expect at first, but the explanation in Acoustic Times helped me to understand the purpose of the audit. I was reassured that it is anonymous, non-judgemental and designed to learn from each other. I've learnt and shared lots of scanning tips and picked several good phrases for reporting from other sonographers."

Expressing the expected standard of practice

There are excellent resources and guidance from many ultrasound bodies including the RCR², SoR and BMUS³ which tacitly express the expected standard of practice. However, in the reality of a busy clinical department, it can be difficult to clearly define and express those standards. We have found that establishing best practice has been multi-factorial and has naturally developed through:

- clear and comprehensive evidence-based scanning guidance/protocols
- peer review audit and learning meetings
- regular individual audit feedback
- general feedback of themes that have emerged from peer audit
- the support and value of experienced sonographers engaging in the audit processes
- the opportunity to discuss discrepancies, issues arising from the audit and to explore practice in a safe, non-judgemental forum as a group
- consultant radiologist engagement and support.

"As sonographers we always just assume if we didn't hear anything we were doing alright. So, I find the feedback which I get each month from the peer review audit really valuable. I feel reassured actually knowing, and having evidence, that my scanning and reporting is of a high standard and if there were any issues, I would be made aware."

Reflective practice

The second edition focused on reflective practice, something which most healthcare practitioners are happy to do verbally but rarely write down or explore further to improve practice. Embedding reflective practice early in the process has led to a healthy questioning of processes and sharing of knowledge, leading to more consistent practice and improved service. It has also encouraged the sonographers to raise inconsistencies and to agree best practice, often engaging clinical colleagues in other specialties.

"We've had a couple of instances where sonographers have been taught different ways of doing things, I'm more inclined to question this now and discuss it with the governance lead who takes it to our meetings. We have a group discussion and the radiologist will often give a view, then, if necessary the guidance is updated and shared."

Actionable reporting

The introduction of robust governance processes has given the opportunity to move away from descriptive reporting to actionable reporting⁴. Increased engagement with consultant medical staff particularly radiologists and gynaecologists, has led to collaborative working and improved reporting, including advice on further imaging and referral. Scanning guidance documents are now aligned with some clinical protocols outside of the Radiology department and referenced within them. These conversations, questions and feedback were cascaded through *Acoustic Times*.

"I can see that my reporting style has really changed, I feel confident, supported by new clear protocols and guidance, particularly in gynae, that I know my recommendations are correct. I keep a copy of the protocols in the scan room with me so I can refer to them. Actionable reporting has to be good for patient care and for busy GPs."

CPD

Each edition has supported CPD through:

- themes developed through the peer review audit
- links to articles
- links to and discussion of the latest professional updates
- updates on HEE projects e.g. the sonographer career framework, preceptorship and the advanced practice framework
- reports from sonographers attendance at study days and conference
- guidance on using the HCPC audit tool

Focusing on...

Educational Editions

Where an area of particularly variable practice was identified by audit, for example DVT scanning, an educational edition was written, including:

- background clinical knowledge
- expected technique
- imaging and reporting.

Re-audit, showed in this example, that DVT scanning practice became much more consistent following the educational piece.

Areas which sonographers find challenging have also had dedicated editions focusing on areas of practice such as:

- using Colour, Pulsed Wave and Power Doppler correctly.
- Equipment QA. A special edition re-introducing a QA programme which referenced national guidance giving step-by-step instructions with pictures and documentation for recording QA results.

Guest editions

Once audit and governance processes were established, space became available within *Acoustic Times* for guest editorials. Sonographers have taken this on board and written guest editions about health and wellbeing, how to ensure trainees in the department have a good experience and reports from study days, conferences and meetings.

Supportive processes

Incorporating governance and quality improvements has allowed new processes to be developed to engender a supportive ethos in the departments. These processes and associated documentation have been discussed within the newsletter which acts as a repository for supporting information:

- new sonographer induction, including supernumerary period, sign off and review processes
- preceptorship for newly qualified staff and staff progressing to higher levels of practice
- mentorship
- in-house education programmes, including competencies and sign off
- service user feedback.

Unexpected benefits of *Acoustic Times*

While a newsletter cannot replace face to face interactions, it has supported planned changes to stay on track during difficult times. There have also been some unforeseen benefits acting as:

- a record of how governance processes have been introduced into the department, with links to relevant supporting documentation
- a reference document for current and new staff
- a reference document available for other departments setting up governance processes
- closer networking relationships with consultant medical staff, with feedback and educational support
- CPD shaped by audit and learning points arising from audit
- strengthening of Trust wide protocols by the alignment of clinical protocols with ultrasound guidance, e.g. Endometrial hypoplasia in postmenopausal patients
- sonographers being more likely to question/discuss practice with each other and to start discussions with clinical staff outside of the department.

Ringling the changes

The governance processes have not been designed to be overly prescriptive and are not designed to remove an individual's autonomous practice. To prevent the potential for erosion of sonographers' clinical decision making and to maintain engagement, the audit processes have evolved to review different aspects of practice, such as, consistency across different examinations, adherence to guidance/protocols, onward referral and further imaging.

It must be acknowledged that the successful introduction of governance processes, particularly during the pandemic, is testament to the commitment and dedication of the sonographers within the Trust. Although, there have been challenges in finding time to complete audits, access to IT and personal and professional biases, the sonographers have successfully embedded clinical governance into all aspects of their practice.

Acoustic Times has been invaluable in keeping staff informed and increasing the feeling of inclusion in the design of the processes. It will continue to develop shaped by feedback from the sonographers.

Next edition: Focusing on BMUS ASM 2022 coming soon!

References

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4. The Royal College of Radiologists. Standards for Interpretation and Reporting of Imaging Investigations, second edition. London: The Royal College of Radiologists, 2018. Ref No. BFCR(18)1 available at: https://www.rcr.ac.uk/sites/default/files/audit_template/bfcr181_standards_for_interpretation_reporting.pdf [Accessed 30.10.22]

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