



NHS abdominal aortic aneurysm screening programme

Screening technician reacceditation process

Valid from April 2016

Public Health England Joacs of NHS Screening Programmes

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through world-class science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services PHE is an operationally autonomous executive agency of the Department of Health

Public Health England Wellington House 133-155 Waterloo Road London SE1 8UG

Tel: 020 7654 8000 www.gov.uk/phe Twitter: @PHE_uk

Facebook: www.facebook.com/PublicHealthEngland



Screening identifies apparently healthy people who may be at increased risk of a disease or condition, enabling earlier treatment or cetter informed decisions. National population screening programmes are implemented in the NHS on the advice of the UK National Screening Committee (UK NSC), which makes independent, evidence-based recommendations to ministers in the 4 UK countries. The Screening Quality Assurance Service (SQAS) ensures programmes are safe and effective by checking that national standards are met. Public Leath England (PHE) leads the NHS Screening Programmes and hosts the UK LSC recretariat.

PHE Screening Floor 2 Cont. B Shoto House 80 Condon Road London SE1 6LH

ww.gov.uk/topic/population-screening-programmes

itter: @PHE_Screening Blog: phescreening.blog.gov.uk

Prepared by: Patrick Rankin

For queries relating to this document, please contact: PHE.screeninghelpdesk@nhs.net

© Crown copyright 2016

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit OGL or email psi@nationalarchives.gsi.gov.uk. Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Published March 2016

PHE publications gateway number: 2015746



Contents

Introduction

NAAASP screening technician reaccreditation process

Knowledge assessment

Scanning assessment

Return to screening following a long term absence

Flowchart for the reaccreditation process

Introduction

All screening staff performing scans under the auspices of the NHS Abdominal Aortic Aneurysm Screening Programme (NAAASP) should complete the approved training and gain the recognised accreditation/qualification before screening independently.

With the introduction of the new Diploma for Health Screeners (abdominal aortic aces vsm) ar updated reaccreditation framework is being introduced to ensure technicians retail an understanding of the basic principles of screening and ultrasound and also main ain an external clinical assessment of scanning.

This document including the flow chart on page 9 aims to help local providers are screening technicians understand the new process. It also provides guidance for what to do following a technicians' return to screening following a long-term absence.

Technicans are required to undertake reaccreditation every 2 years. However there is a 20-28 month window in which they can take the knowledge and scanning assessment to enable local programmes to plan accordingly.

NAAASP reaccreditation process from April 2016

The reaccreditation framework consists of two sections:

- knowledge assessment
- scanning assessment

Technicians should successfully pass both sections to continue to screen independently

Knowledge assessment

Technicans should complete the approiate elearning modleues required by NAA. S in order to:

- retain their knowledge of the key physical principles require undertaking the screening test
- ensure they maintain their skills in image optimisation to obtain the highest quality images

These are available on the Public Health England CPD Vebsite.

The modules must have been undertaken and passed within the 6 month period before applying to attend the scanning assessment.

Scanning assessment

The scanning assessment is provided on campus by the University of Salford. Technicians need to attend for a half-day session

NAAASP funds the course for screening technicians, including lunch and refreshments. However all expenses for travel, accommodation and evening meals need to be funded by local programmes.

Screening technicians are required to scan two men to NAAASP standards as outlined in the Clinical Scirators and scope of practice document. This will ensure that the technicians are assessed on a valiety of clinical situations to ensure competence.

- Technicians are expected to pass both scans.
 - If a technician fails one or more assessment they would require the following recovery action to ensure they meet the required standard;
 - all scans assessed for QA by their CST/QA lead
 - completion of the recovery portfolio
 - 10 hours of supervised recovery training
 - 20 documented scans supervised by CST

- successful completion of an internal assessment of competence by CST
- technician re-attendance at University of Salford for the scanning assessment and passing two out of two scans
- registration via the normal process online

How to undertake the reaccreditation process

Knowledge assessment

Technicians must register online for the e-learning which is available on the abdomiral aortic aneurysm screening programme pages of the CPD website. Once success ally completed, technicians have 6 months to pass the scanning assessment.

There are two units:

- Principles of abdominal aortic aneurysm screening and the ament
- Principles of ultrasound for abdominal aortic apertysm screening

Scanning assessment

Once the knowledge assessment has been con pleted, the programme co-ordinator should register the technician for the next appropriate scanning assessment. Technicians should not register them elves on the course, this ensures that the programme manager has confirmed the have undertaken and completed the elearning.

Technicians only need to attant for one half-day session. Programmes should choose either a morning or atterno in ession.

Places on the course are available on a first come first served basis. To ensure fairness of access and remark that only those who have completed the knowledge assessment register for courses, registration will only be available 6 months prior to the course date.

Dates are available on the CPD website.

There are no limits to the number of times technicians can undertake the knowledge and/or scanning assessments. If a screening technican is unable to successfully complete the knowledge or scanning assessment following numerous attempts providers should consider locally determined performance management measures.

Return to screening following long term absence

If an accredited screening technician returns to work following a period of more than 28 months since their most recent reaccreditation they should undertake the reaccreditation process before being able to screen independently.

If a technician returns to screening following a long term absence but is still within the 28 month period it is best practice to implement a local audit to ensure their competency prior to scanning independently. Providers could consider the following to ensure competency:

- 5 hours of update/refresher sessions with a CST, including;
 - o physics of ultrasound in relation to AAA screening
 - o machine controls
 - o optimisation of images
 - o accurate measurement of the aorta
 - o the principles and policies of NAAASP
- 15 supervised scans by a CST
 - o including 10 non-aneurysmal and 5 aneurysmal arrtas
- internal clinical assessment by a local CST

A record of any audit should be maintained loc .y

Flowchart for the reaccreditation process

