

Appendix 8a – Scottish Breast Screening Service w.t.e. estimated establishment by professional group across the SBSP

	NoS Centre	NEoS Centre	EoS Centre	SEoS Centre	WoS Centre	SWoS Centre	
Role	wte	wte	wte	wte	wte	wte	Totals
Clinical Director		0.1	0.1	0.51	0.6	0.1	1.41
Surgeon	0.4		0.1	0.22	0		0.72
Superintendent / Deputy Superintendent	0.9	1	1.5	1	3.6	1	9
Advanced practitioner	1	1.5	1	6.55	12.8	1.8	24.65
Mammographer (incl. any in training)	2.4	8.2	5.7	20.45	18.97	6.27	61.99
Assistant Practitioner	2.2	1.8	1.8	9.7	6.3	2.4	24.2
Radiographic Helper	0.9	0.5	0.8	2.44	3.1	1.29	9.03
Consultant Radiologist	1.2	1.94	1.5	2.7	5.7	1.9	14.94
Consultant Radiographer	0	0	0.9		0	1.6	2.5
Associate Spec/other clinical/Breast Clinician	0.5	0.23	0.3	0.1	2.33	1.05	4.51
Radiographic film readers	0.1	0	0	0	0	0	0.1
Breast Care Nurse / Nurse / Assistant	0.4	1.18	0.7	0.8	1.76	0.68	5.52
Health Promotion	0	0	0	0.31	2	0	2.31
Service Manager	1	1	0.7	1	1	1	5.7
Other Admin	3.22	4.96	7	9.93	29.03	4.6	58.74
Transport Officer	1	1.2	2	5.5	7	1.92	18.62
Pathologist	0.33	0.93	0.9	0.71	1.5		4.37
MLSO/other scientist	0.62	0	0.8	0	0.68		2.1
Cleaning staff	0	0.4	0	0	0	0	0.4
Totals	16.17	24.94	25.8	61.92	96.37	25.61	250.81

Notes

(a) Source: Survey of Breast Screening Centres 2020/21: w.t.e.'s (funded and actual wte's), per screening centre operational service budgets agreed locally (within host NHS Board).

(b) Totals shown are mainly based on declared funded wte, however some reconciliation against stated actual wte's has been made where funded budget levels have not been made clear.

(c) Table will include vacant posts

(d) Both screening centres that are integrated with symptomatic breast services, and those that are not formally integrated, have indicated that some staff work across both services...(cont'd)

Where possible this has been adjusted for, however some estimates remain...

East of Scotland Breast Screening Centre

The East of Scotland service has experienced the loss of a significant number of consultant breast radiologists and highly skilled and experienced radiographers. This has resulted in a lack of capacity particularly in image reading and assessment, a reliance on locums, and ongoing challenges in meeting reporting and assessment standards for the service.

Screening radiology

During 2018/19, two Consultant Breast Radiologists left the service (partly replaced by the recruitment of a new Consultant Radiologist, and an additional clinical specialist film-reader in the year). The Associate Specialist breast clinician retired from the service in the same year (a role subsequently covered in part by a Band 8 Breast Care Nurse in the team, who has now also retired and not been replaced). In 2019/20 one further consultant radiologist (Clinical Director) resigned from the service, and one retired (partly replaced via the recruitment of a locum radiologist). Since mid-2020, to date, the Clinical Director post for Breast Screening has been vacant.

The screening service is funded at 1.6 w.t.e. consultant radiologist posts (including 0.1 wte to cover Clinical Director post duties). However, all staff in the East of Scotland Centre cover both screening and symptomatic activity with funding and staffing establishments utilised across the integrated service. Overall, the radiology team currently has (at January 2021) two permanent consultants, supplemented by locum staff. One permanent consultant is on long term leave, and one retires in June 2021.

In order to avoid significant gaps in consultant radiologist staffing the service has been attempting to proactively recruit, however with little success, and remains reliant on locum staff.

To support the development of the strategic case for Artificial Intelligence in Breast Screening Mammography the review conducted a survey of image reading undertaken in 2018/19 and 2019/20. Data reports were drawn from the Scottish Breast Screening System (SBSS) showing user (reader), reads, and recall for the prevalent and incident round for all six breast screening centres in Scotland. The results for the East of Scotland Breast Screening Centre show that 59% of reads in 2018/19, and 64% of reads in 2019/20 were undertaken by 3 staff who have now retired, left the service, or are on long-term leave, and by 1 consultant who plans to retire in mid 2021. This emphasizes the ongoing reliance on locum staff, the need for a cross-border image reading facility supported by SBSS and the PACS system, and the potential benefit AI reading capacity could deliver.

Screening radiography

Over 2019/2020 three highly experienced radiographers, including an advanced practitioner stereotactic biopsier, have retired. Whilst new radiographers have been recruited, experience has shown that recruitment to vacancies in radiography is unlikely to attract qualified mammographers. The recruitment of staff requiring

mammography training decreases service screening capacity until completion of training. The service has maximised the number of Assistant Practitioners utilised in the current model of service (radiographer : Assistant Practitioner supervision ratio for screening).

The service has recently appointed one consultant radiographer (via internal promotion of an advanced practitioner. The Advanced Practitioner post is currently unable to be backfilled due to difficulties in providing adequate training). Screening mammographers also cover the symptomatic service.

As well as key workforce challenges in recruitment, the training pipeline involves lengthy lead-in times for mammography or advanced practice radiography. Due to the current Covid pandemic, the Scottish Mammography Education Centre (SMEC) has had to restrict numbers in training due to social distancing measures, further limiting the throughput of trained practitioners.

Administration

Following the introduction of SBSS and associated changes in working practices it is recognised that there has been a shift in the way work is being carried out within the administration team, including with the symptomatic service. Following changes to staffing due to retirement in the administration team across the service, review and redesign of administration support is being taken forward.

South East of Scotland Breast Screening Centre

Overall, the South East of Scotland service has reported relatively few workforce constraints over the last couple of years.

Screening radiology

The screening service has 2.7 wte funded consultant radiologist posts however organises sessional radiology input via the combined screening / symptomatic radiology team utilised across screening and breast symptomatic services. Looking forward, one consultant (in a team of 6 providing sessional input) is planning to retire in the next year.

Radiologist capacity is augmented by Advance Practice radiographers undertaking stereotactic biopsy and film reading.

Screening radiography

The service has expanded Advanced Practitioner capacity in recent years with a focus on succession planning and developing image reading and biopsy capacity. One Advanced Practitioner is currently undertaking further training (ultrasound) with a view to moving into a consultant role.

The Clinical Director for the service is also a consultant radiographer, and is planning to retire in the next two years.

Administration

The administration team is at full establishment

West of Scotland Breast Screening Centre

The West of Scotland service has worked to develop a higher profile in the Radiology Training Scheme in recent years through the development of specialist modules and engagement sessions. The service has been successful in recruiting established breast radiologists locally to breast screening sessions. The service has actively supported role development amongst other staff groups in particular within radiography.

Screening radiology

The screening service currently has 5.7 wte consultant radiologists ((10 plus sessional staff from neighbouring Health Boards 4 sessions staff), with 2 potentially retiring within 2 years. The service has reported difficulty recruiting to full establishment, with ongoing unfilled consultant radiology sessions, reflecting the national shortage of radiology trainees and in particular Breast Radiology trainees. The consultant radiologist Clinical Director for the service plans to retire in Autumn 2021.

Results from the survey of image reading undertaken by the review shows that in the West of Scotland Breast Screening Centre 45% of reads in 2018/19, and 34% of reads in 2019/20 were undertaken by staff who have now retired, left the service, or locums.

The service has successfully recruited to the role of breast clinician in various ways, and is further exploring the role extension of breast care nurses into the breast clinician role.

Screening radiography

The service reports a significantly younger age profile in the radiography workforce than historically, following significant turnover and replacement over the last decade. Advanced practitioner staffing has been developed to include biopsy and imaging reporting, and clinical training staff. The increased biopsy pool of staff has particularly assisted in maintaining clinic numbers and throughput.

There is currently no consultant radiographer in the team however there is interest in potentially establishing such a post, potentially with the symptomatic service.

The service is beginning to plan for possible extended day working as part of capacity planning, which may require additional mammography time to support.

Mammography Training and Education

The Scottish Mammography Education and Training Centre (SMEC) is the national training centre for Scotland. The centre is administered from the West of Scotland Breast Screening Centre, with links also to the South East of Scotland Breast Screening Centre. Staffing resource to deliver SMEC is included as part of the overall SBSP establishment with clinical trainers also working clinically in their screening centres. SMEC administrative resources including the SMEC Secretary and National Mammography Training Lead post are part of the West of Scotland administration team.

Three (of seven) trainers will reach retirement age in the next 5 years, and succession planning is required.

North of Scotland Breast Screening Centre

The North of Scotland service has been proactively succession planning over the last few years given the anticipated retirement of experienced staff, and staff wishing to reduce their working hours prior to retirement.

Screening radiology

The service is integrated with symptomatic breast services in the Highland Breast Unit. Radiology input to screening varies week to week as radiologist sessions cover both services. One (of 3 consultant radiologists) is due to retire in 2021/2022. Another is of retirement age but with no retirement date set. The Breast Clinician and Advanced Practitioner Radiographer also contribute capacity in image reading, biopsy and localisations.

The current Breast Clinician is also the Clinical Director for the service and is of retirement age, however with no fixed date to leave.

Screening radiography

Assistant Practitioners have been successfully recruited to replace radiographer staff. The centre has 1 Advanced Practitioner in clinical examination, and an additional radiographer in training to undertake biopsy (currently on maternity leave). The Superintendent Radiographer is also an Advanced Practitioner in biopsy & film reading.

Pathology

Pathology reporting to Breast Screening has reduced in recent years with reliance now on one substantive consultant (from previous 3) and a locum in place for three days per week (until Summer/Autumn 2021). Locum cover is provided by a pathologist recently retired from the NHS Highland team. Screening resource (funded) is reported as 0.33twe for pathology input. Vacant posts have been advertised but have received no applicants, in line with the the shortage of pathologists is being encountered nationally.

South West of Scotland Breast Screening Centre

The South West of Scotland service experienced significant workforce challenges for many years with staff shortages in all disciplines, most recently in radiography. Over the last couple of years due to successful recruitment to key posts, role redesign, and a focus on integrated working with acute and symptomatic services the position has improved.

Screening radiology

Staffing levels significantly improved from 2018 when 2 consultant breast radiologists were recruited, allowing the service to move away from the previous reliance on locum staffing. The service has also maximised skill-mix within advanced radiography practice and has invested in training two consultant radiographers to complement the team.

Screening radiography

The radiography team has been built-up successfully over the last couple of years. In late 2018 staffing levels were reported as significantly under capacity (63% of establishment in place) due to a combination of retirement and postholders moving on. The service was reliant on locum staffing during this period. In 2019 the service was operating with approximately 75% of establishment in place, with a particular problem recruiting to band 6 posts. This issue remains and the service, in response, has further redesigned the team composition and successfully recruited to more Assistant Practitioner posts (converting band 6 hours to support), and also recruited to joint radiography posts (jointly with acute imaging services). As above, the service has two consultant radiographers (1.6 wte) and both work across screening and symptomatic.

Breast clinicians

Previous shortages of staff in this group, with reliance on locum staff and key vacancies in the team, have been overcome. The service has recruited a sessional General Practitioner for 2 sessions per week and now has 3 sessional staff (GP, Associate Specialist, Specialty Doctor). Additionally, the CNS in post has developed her role in assessment and established links with the CNS team in symptomatic services.

North East of Scotland Breast Screening Centre

The North East of Scotland service has experienced key workforce constraints in recent years in pathology, radiology, radiography, and surgery. The breast screening centre is not formally integrated with breast symptomatic services, however a new build currently in construction will provide an integrated unit, and historically there has been some joint responsibility in service management for screening and symptomatic breast services. It is clear that the North East Breast Screening service, in common with all centres regardless of formal service integration, has worked across screening and symptomatic services to support staffing requirements.

Screening radiology

The past few years have seen a wave of retirements as a group of radiologists have reached retirement age together, affecting both the symptomatic and screening services. The delivery of screening services has been supported by the provision of a full-time breast locum radiologist in the symptomatic service in recent years, avoiding the 'pull' of sessions and time from screening. The screening service has also employed locum radiology input directly from staff recently retired. Maternity leave and more recently the impact of covid-19 restrictions on locum availability (shielding) have affected service capacity. The specialty training pathway has seen some interest in breast radiology however trainees in recent years have all taken up post elsewhere, or changed to another higher specialty training scheme.

The service has developed advance practice in radiography to help build resilience, and is at the point of appointing a Consultant Radiologist following completion of training and subject to post evaluation in NHS Grampian.

Screening radiography

The development of Advanced Practice roles, and trainee mammographer roles have been progressed jointly with the symptomatic Service. The team are working towards establishing Consultant Radiographer post, as above.

Vacancies at band 6, and the retrial of Principal and Deputy Superintendent Radiographers have, in part, been covered by agency radiographers funded jointly by Screening and Symptomatic Services.

Two 0.5 wte Assistant Practitioners (1.0 wte) of a compliment of 1.8 wte Assistant Practitioners are completing training in 2021/22.

Pathology

A long standing shortage of consultant pathologists in acute services, with long-term unfiled vacancies, has resulted in reliance on locum cover. Approximately 1 wte reporting resource in total for breast histo-pathology. The recruitment of new

consultant pathologists has been offset by the retirement of locum consultant staff, resulting in no net change in the level of resource.

Administration

The Administration service has been redesigned following the introduction of SBSS and changed working practices with a reduction of approximately 2.5 wte posts in the team.

Appendix 8c - Survey of mammography staffing levels – Scottish Breast Screening Centres at mid 2020: Based on NHS Breast Screening Programme Guidance for breast screening mammographers, Third edition, December 2017

Centre Name	Eligible three year population (Latest public health data 2020)	2016-2019 uptake (KC62)	Actual WTE staff numbers (whole time equivalent)	Current vacancies	Total	Formula suggested WTE staffing levels	Deficit - /Balanced or Additional +
North (Inverness)	44,207	78%	7	0	7	6.6	0.4
North East (Aberdeen)	82,612	79.20%	10.3	3.5	13.8	12.3	1.5
East (Dundee)	71,133	77%	7	2	9	10.6	-1.6
South East (Edinburgh) (Additional mobile and staffing added)	202,032	71%	20.3	4	24.3	26.2	-1.9
South West (Irvine)	81,838	74.30%	10	1.4	11.4	10.6	0.8
West (Glasgow)	298,692	68.30%	31.7	2	33.7	38.8	-5.1
	780,514				99.2		-5.9