



# SCST

**'Preparing for a new era in  
cardiac healthcare science'**

**Strategic Plan  
2017-2022**

## Presidents message



Imagine going into work in the morning and finding that there were no guidelines for best practice, no codes of conduct and that staff in your department could not access standardised training or exams to demonstrate competence. There would be wide variations in the standards of patient care, the diagnostic accuracy of tests would be reduced and unprofessional behaviour might go unchallenged. Thankfully this is a world confined to the imagination because of the work of professional bodies like SCST. The work of professional bodies is not always immediately apparent to members or to the public, but it is the backbone of excellent patient care.

SCST is a charitable organisation which exists to promote excellence in cardiac science for the public benefit. To do this we need to ensure that all those working in cardiac science are members committed to the highest standards of practice. A vibrant membership will strengthen the work of SCST and strengthen the voice of the profession in discussions with other healthcare scientists and policy makers.

The healthcare environment is changing; many practitioners are facing increasing workload pressures, staff shortages and budget cuts. At the same time, there are changes in the way care is being delivered with diagnostic services extending into primary care, performed by a wider range of healthcare professionals with disparate training and education. We are likely to see an increasing number of patients with more than one long-term condition who have complex care requirements.

Thankfully, we are a profession used to embracing change and I have no doubt that we can cope with these challenges.

Just as the profession must be flexible, so must the professional body. This strategic plan considers the views of members of Council, its subcommittees and members. We believe these aims will ensure that SCST continues to draw on the successes of its past while responding to the changing demands of the future.

*Catherine Ross*

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President, Society for Cardiological Science and Technology

January 2017

# Who we are and what we do

The Society for Cardiological Science and Technology (SCST) is the professional body for those working in cardiac healthcare science. SCST membership demonstrates that an individual is committed to the highest standards of practice and professional conduct.

SCST was established in 1948 with the aim of advancing the science and practice of technical cardiology for the public benefit. The decades that followed brought significant changes in medicine and technology including the advent of implantable devices, echocardiography and angioplasty. These advances have been embraced by the profession and have resulted in better patient care, more timely and accurate diagnosis and improved clinical outcomes.

More recently, the Modernising Scientific Careers programme has restructured our profession, standardising and improving education provision and providing new opportunities for career progression. There has also been a shift in healthcare provision with an increasing number of first-line diagnostic tests being provided in out-of-hospital environments by those from other professional backgrounds. Finally, the national move to 7-day working is forcing us to consider whether current models of provision could be improved.

These factors have changed the context within which SCST operates and produced new challenges in terms of advocacy, the provision of education and public protection.

*Decision makers across the UK must value the skills and experience of those working in cardiac healthcare science, recognising our unique contribution to the health of the population*

## Mission

Despite the changing professional landscape, the mission of SCST remains

***"To promote excellence within the field of cardiac science for the public benefit"***

We do this by setting high standards of conduct and practice for our members, through the provision of education and assessment, by raising the profile of the profession and by influencing policy at the highest levels.

## Vision

Our vision is that

***"By 2022, SCST membership will be valuable to every individual working in a cardiac healthcare science role (regardless of grade or specialism), meaningful to employers and reassuring to the public"***

If we realise this ambition, SCST will be recognised as the national reference point for all matters relating to professional conduct, education and training, workforce issues and standards of practice in cardiac healthcare science. In addition, the government, other professions and the public will understand and value the unique skills and experience of those in our profession.

This vision has informed a strategic plan which will be used to drive our programme of work for the next five years. The plan has been developed by SCST Council and shaped by members who were surveyed to ascertain their priorities. We believe this plan will ensure that the future of SCST is safe and that confidence in the profession is maintained.

# The current strategic position of SCST

## Strengths

- Dedicated committee members
- Organisational memory
- Strong relationships with other groups and registration bodies
- Input to national agenda and workforce planning
- Perceived as setting high standards of professional conduct
- Successful provision of ECG education and assessment

## Weaknesses

- Membership is not viewed as essential by all in the profession
- Limited external engagement
- Insufficient resource among current committee members to review, modify and develop practice standards which are in demand by the profession
- Financial sustainability weakened by loss of independent professional exams

## Opportunities

- Quality of cardiac diagnostic care performed by nurses and medics could be improved by expanding our education and assessment provision to these groups
- Increased patient and public involvement in our work would raise the profile of the profession and ensure our unique skills and experience are valued
- Further involvement in the development of apprenticeships would support the develop of all staff
- Better engagement with employers to support the understanding of new roles following Modernising Scientific Careers

## Threats

- Potential loss of engagement with student workforce because of changes to formal education provision
- Limited engagement with clinical scientists and those in highly specialist roles
- Competition for membership with other specialist interest groups such as BSE and BHRS
- Workforce pressures limit the time members have to maintain clinical competence and develop as they would wish

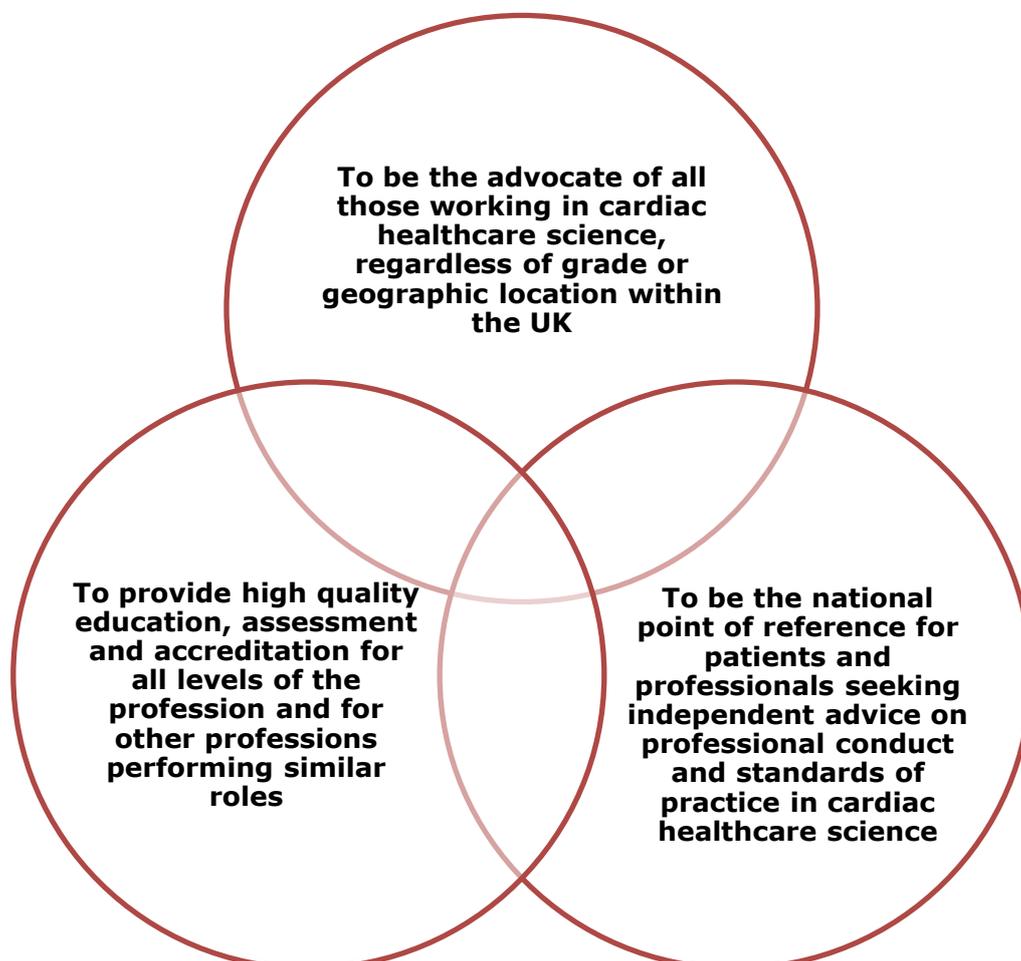
## How will this affect our future?

Given the current strategic position of SCST we believe that our future success will be dependent on:

1. Focusing our resources where we can have the biggest impact on patient care and for our members
2. Making better use of technology in our training and assessment
3. Improving communication, marketing and publicity with members, non-members and the public
4. Attracting the right people to help with our work and better succession planning within key roles

## Strategic aims and challenges

This plan has three broad strategic aims which address our vision and will guide SCST operation for the next five years. These are;



# Strategic aim 1: To be the advocate of all those working in cardiac healthcare science, regardless of grade or geographic location within the UK

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## Challenges

- Competition for membership as a result of increasing sub-specialism, particularly among clinical scientists
- Loss of engagement with the student workforce as a result of changes to the undergraduate training programme and independent exams
- Employers do not currently see SCST membership as essential for their employees
- Patients and the public may not be aware of the role of SCST in promoting high standards of professional conduct and practice, therefore they do not demand it in those involved in their care
- Perception among some in the profession in that SCST does not necessarily consider the workforce issues of those outside England

## What we will do

- Continue to inform the national agenda by being a strong voice for our members
- Publicise the work of SCST and the benefits of membership across all levels of the profession
- Increase engagement with assistant and associate staff
- Increase engagement with higher education institutions who deliver the undergraduate and postgraduate degrees, private sector staff and those working in primary care
- Work with clinical scientists and practitioners specialising in echo/devices to understand how SCST could support elements of their development not met by other specialist groups
- Investigate joint membership with British Society of Echocardiography (BSE) and British Heart Rhythm Society (BHRS)
- Build a relationship with employers
- Continue to promote the benefits of SCST membership to employers at the National Update Meeting
- Ensure that the voices of the four home nations are represented in SCST
- Ensure there is representation from the home nations on issues discussed by the workforce sub-committee



## How we will measure success

- Membership numbers, particularly among students, assistant/associate practitioners and clinical scientists
- Attendance figures at the national update meeting and conference
- Representation of the home nations at workforce committee meetings and discussions
- Successful recruitment of new committee members who represent the workforce and actively contribute to clearly articulated programmes of work

*The involvement of more individuals working in diverse contexts will strengthen the voice of SCST and lead to a more progressive and dynamic professional body*

## Strategic aim 2 - to be the national point of reference for patients and professionals seeking independent advice on professional conduct and standards of practice in cardiac healthcare science

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### Challenges

- Increased number of investigations performed by other professions, sometimes in an out-of-hospital environment, without formal training or assessment of competence
- Small number of cardiology departments actively engaged in seeking IQIPS accreditation
- Poor public awareness of the professional role and the unique skills of those working in healthcare science
- Poor public awareness of the role of SCST
- Inadequate resources within current committee membership to review, maintain and develop core standards of practice
- Our current website is not flexible and does not contain pages specifically designed for patients and the public

### What we will do

- Review, maintain and develop standards of practice in core areas of work not covered by other specialist groups. The initial focus will be on investigations that include ECG recording and interpretation
- Improve publicity of our standards and promote a national standard of training and assessment for anyone performing an investigation, regardless of their professional background
- Build on our relationships with other specialist groups such as BSE, BHRS and British Cardiovascular Society (BCS) and promote their standards of specialist practice
- Recruit new sub-committee members with specific expertise to inform our work on standards of practice
- Continue to inform work of the Academy of Healthcare Science (AHCS), the National School of Healthcare Science (NSHCS) and the Department of Health by being a strong voice for our members
- Raise the profile of the profession and ensure the unique selling points of our profession are understood and valued at the highest levels
- Develop a strategy for patient and public involvement in SCST work
- Improve our website and add pages specifically designed for patients and the public
- Promote departmental accreditation through IQIPS



## How we will measure success

- Successful recruitment of new committee members with appropriate expertise who actively contribute to standards of practice documents
- Publication of standards of practice documents for 12 lead, ambulatory and exercise ECG (practice and reporting)
- Reference to our standards in the journals of other professions
- Improved timely reporting and completion of programmes of work
- Increased communication from other professionals who want to access our training and assessment
- Broader recognition and better understanding of the role of cardiac healthcare science in the media
- Active patient and public involvement in SCST work

*The highest quality patient care is more likely to be achieved when members have easy access to up-to-date guidelines and standards of practice which support their decision making*

## Strategic aim 3 – To be the driving force behind high-quality education, assessment and accreditation for all levels of the profession and for other professions performing similar roles

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### Challenges

- Members are finding it increasingly difficult to attend courses and conferences off-site and their development is restricted as a result
- Other healthcare professionals such as nurses and medics may be unaware of our standards, training and assessments
- SCST currently has insufficient resources to provide ECG practical training and assessment for those from other professions performing this investigation
- Inadequate resources within current committee membership to review, maintain and develop education, assessment and accreditation work

### What we will do

- Continue to provide our suite of ECG courses and examinations to those in the profession and develop a regional franchising model for these
- Improved marketing and publicity of our standards, courses and examinations to nurses and medics and other healthcare disciplines, including those in training
- Continue to provide a national update meeting for members and contribute to the annual BCS conference
- Review, maintain and develop a suite of on-line training programmes to support the development of members
- Build on relationships with NSHCS and AHCS and RCCP regarding formal curriculum review, accreditation of university programmes, and final assessments. Ensure that cardiology continues to be represented in apprenticeships.
- Review, maintain and develop the preceptorship programme and its assessment
- Recruit new sub-committee members with specific expertise to contribute to our work on education, assessment and accreditation
- Engage with clinical scientists and highly specialised practitioners to determine what development needs are not being met by other specialist groups and to consider whether SCST might develop appropriate resources to support members in these roles
- Improved timely reporting and completion of programmes of work

## How we will measure success

- Increased numbers registering for our current suite of training courses and examinations
- Development of a regional franchising pack and marketing strategy
- Successful provision of new on-line training resources for all grades within the profession
- Increased numbers of other healthcare professionals accessing ECG practical and interpretation courses and examinations
- Increased numbers of those registered on, and who have completed, the SCST preceptorship programme



*We need to embrace technology and expand our provision of training to support all healthcare professionals performing cardiac diagnostic investigations in a variety of contexts*

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