

Accredited Registers

Condition Review: The Register of Clinical Technologists

Date: 21 March 2025

1. Outcome

- 1.1 At the Register of Clinical Technologists (RCT)'s full accreditation renewal, the Professional Standards Authority ('we') issued Nine Conditions on its accreditation, which were due to be completed by 31 January 2025 (see page 4 of the published outcome)¹.
- 1.2 This report sets out our assessment of the actions taken by the RCT to satisfy the Conditions.
- 1.3 We found that the RCT had met Conditions Two, Three, Four and Six. We found that they had not met Conditions One, Five, Seven, Eight and Nine.

2. Background

- 2.1 We assess registers against our *Standards for Accredited Registers* ('the Standards')². Where a Register has not met a Standard, we can issue Conditions. A Condition sets out the requirements and the timeframe that a Register must meet.

- 2.2 At the RCT's full renewal accreditation, completed in January 2024, we issued Nine Conditions. The Conditions had to be implemented by 31 January 2025.

Condition One: The RCT should ensure that applicants for registration have a route for appealing decisions that are made based on judgement, in addition to administrative and procedural grounds. The process for how the RCT handles appeals should be published.

Condition Two: The RCT should ensure that its register enables members of the public and employers to clearly identify current registrants. It should be clear when sanctions such as 'suspended' have been applied for a public protection reason. There should be a clear, and consistently applied, policy setting out how long information will be displayed on the Register.

Condition Three: The RCT should set out the circumstances in which someone who has been removed from the register, could re-apply and what criteria it would use in making this decision.

Condition Four: The RCT's requirements for registrants' professional conduct should be clearly set out in documents that make clear the RCT will hold registrants to account for these areas. They should cover the areas set out in our minimum requirements, addressing gaps such as on data protection and

¹<https://www.professionalstandards.org.uk/sites/default/files/attachments/Accreditation%20renewal%20Report%20-%20Standards%202-8%20Register%20of%20Clinical%20Technologists%20May%202024.pdf>

²https://www.professionalstandards.org.uk/sites/default/files/attachments/Standards%20for%20Accredited%20Registers_1.pdf

confidentiality. Registrants should also be required to make people aware of how to raise a complaint.

Condition Five: The RCT should document and publish how it decides which courses, and training providers it recognises for the purposes of its primary registration route. This should include how it checks the continuing quality of education and training provision once recognised.

Condition Six: The RCT should review and update information relevant to complainants and registrants. This should include clear information about how the consensual disposal of cases is handled, including what types of sanction are available through this route and whether these would be published. It should also be clear what support is available for witnesses involved in complaints hearings.

Condition Seven: The RCT should develop a business continuity plan.

Condition Eight: The RCT should develop a proactive approach to working with employers, service users and other stakeholders. This should include sharing information about risks arising from the practices of clinical technologists and sonographers, and concerns about registrants, with the systems regulators and employers.

Condition Nine: The RCT should review the content of its website to make sure that key information is up to date and accurate. Information about sonography should be integrated into the main webpages. This should include clearer information for the public about sonography, to support informed choice. Information about the benefits, and limitations of the roles registered should be included.

- 2.3 This report discusses the actions the RCT took to address the Conditions, as well as our decision about whether the Condition is met.
- 2.4 We reviewed the following evidence:
 - a) RCT's reported actions about what it had done to meet Conditions One to Nine.

3. Concerns leading to the Conditions

- 3.1 The RCT publishes their route for registration on their website and are further set out in their *Guidance Notes for Applicants and Information for Registrants*. This document confirms that the RCT will accept appeals against registration conditions, however we were unable to locate any published information about the grounds for appeals or the process the RCT follows when handling an appeal against a registration decision. As such, we issued **Condition One**.
- 3.2 While undertaking register checks, as part of our requirements for full renewal assessments, we identified that a large number of registrants were listed as lapsed, de-registered, inactive or on a career break, according to their register entries. The Accreditation Panel considered that keeping people listed on the register indefinitely, even with these explanations, could make it difficult to navigate. It was also not clear how this might align with the General Data Protection Regulations (GDPR). As such, the Accreditation Panel imposed **Condition Two**.

- 3.3 The RCT set out their process for restoring a registrant to the Register following suspension, lapsed registration or de-registration it is *Policy on Removal from and Restoration to the Register of Clinical Technologists*. The Accreditation Panel considered that preventing people from re-applying indefinitely may not be a fair approach, and so issued **Condition Three**.
- 3.4 The RCT publishes The Clinical Technologist: Scope of Practice which sets out the scope of practice for each of the roles on the register. For each of the roles, there is an introduction, an overview and a description of the specialised tasks practised by the roles. The Code of Professional Conduct makes clear that registrants must only undertake those responsibilities that are within their competence. These also link to the relevant published Standards of Proficiency. There appeared to be some gaps in the Code of Professional Conduct against our minimum requirements for Accredited Registers, such as on data protection and confidentiality. It was also not clear how the RCT ensured that registrants made service users aware of how to raise a complaint with the RCT, where relevant. As such **Condition Four** was issued.
- 3.5 The RCT did not have a documented approach for how it determined that the courses it recognised for registration provided adequate levels of education and training. This meant it was not clear how it would consider new courses, if developed in the future. It had also not set out how it checked the quality of the courses offered by its recognised training providers. The Accreditation Panel considered that this is important to provide assurance of the skills and competence of registrant, and therefore issued **Condition Five**.
- 3.6 In relation to management of complaints, we identified that concerns can be concluded by agreement about undertakings, known as 'consensual disposal', if the registrant admits the allegations and expresses regret. This avoids the need for a hearing. However, the RCT's procedure is not clear about how this will be done, what types of undertaking and sanction are available through this route, and whether they would be published. We also noted that the RCT does not currently have any guidance for witnesses who might be required to give evidence. Our minimum requirements include that processes are accessible and clear to all parties, with appropriate support offered when needed. This is in contravention of our minimum requirements. As such, **Condition Six** was issued.
- 3.7 We did not see evidence of the RCT's business continuity plan while completing our full renewal assessment, which is one of our minimum requirements for registration. As such, we issued **Condition Seven**.
- 3.8 There did not appear to be a systematic approach to sharing information relating to the risks arising from the practice of clinical technologists and sonographers or about the Fitness to Practise of registrants. Since registration with the RCT is a key mitigation for risks for unregulated roles such as sonographers, with the need for this highlighted by our 2019 report³, we think it is important for the RCT to work with the systems regulators and employers in the health sector so that swift action can be taken when concerns arise. This might be achieved by establishing protocols, and/or engagement with these

³ <https://www.professionalstandards.org.uk/sites/default/files/attachments/right-touch-assurance-for-sonographers-a-report-for-hee.pdf>

stakeholders to a greater extent. The RCT did also not actively engage with registrants or service users to get input to its work. The Accreditation Panel considered it is important for the RCT to engage with key stakeholders, for the purposes of seeking input to its work and for sharing information about regulatory risks and therefore issued **Condition Eight**.

- 3.9 We identified some areas of the RCT's website which appeared to be out of date. For example, at the time of our assessment there were two different versions of the RCT's Scope of Practice document published on the website – one accessed through the about clinical technologist's webpage, and the other through the sonographers webpage. Some links provided, such as to the Accredited Registers Information Sharing Protocol, were not to the most up to date versions of documents. Sonography services can be accessed directly by members of the public, such as in private baby scanning clinics. Given the risks associated with sonography, as identified in our 2019 report, it is important that the public have access to clear and accurate information. As such, the Accreditation Panel issued **Condition Nine**.
- 3.10 Further details can be found under Standards Two, Three, Four, Five, Six and Eight of the RCT's full renewal accreditation outcome.

4. Assessment of Conditions

- 4.1 The RCT provided its response to the Conditions on 8 November 2024 and 14 February 2025.

5. Condition One

- 5.1 The RCT advised us that applicants may appeal registration decisions by writing to the Registrar within 30-days of the disputed decision, outlining the reason for their appeal. They publish broad information on their website⁴ regarding the appeals process. We considered that there was a key information gap in the published information on the RCT's website noting that there is no further guidance for those wishing to submit an appeal. For example, we could not locate a policy which stipulated the process of a registration appeal. The RCT did provide us with further information indicating that a new Fitness to Practise Procedure had been approved and would be uploaded to their website shortly. Section 10 of this policy details Appeal Panel Hearings, including timeframes and Section 10.4 details the composition of the Appeal Panel. The RCT acknowledged that this information pertained to Fitness to Practise decisions, however, also reported to us that a full Appeals Policy, including registration appeals, is being prepared and is expected to be approved by the RCT Board in the Summer.
- 5.2 The Accreditation Panel considered the above, including the further response from the RCT and felt that further information must be submitted by the RCT on the registration appeal process. Given what the RCT reported to us about the

⁴ [Application guidelines](#)

anticipated approval of this Policy, the Accreditation Panel decided to re-issue the condition for a four-month period.

6. Condition Two

- 6.1 In review of Condition Two, we identified a webpage which the RCT has published⁵ which explains registration status and timeframe associated with each category. While we considered this condition to be met, in that it was possible to determine registrant category and further, when sanctions such as 'suspended' have been applied for public protection purposes, the Accreditation Panel considered that the information could be more accessible (for example by hyperlinking from the register), and therefore issued a recommendation to enhance the linking of the information between the register and helpful information about how the register records information and for how long.
- 6.2 The Accreditation Panel also considered further information from the RCT, including that it is no longer policy for the RCT to inform employers when a registrant lapses their registration. Lapsed refers to when a registrant does not pay their annual registration renewal fee, and the citation 'lapsed' remains on the registrant's register entry for 12-months. After the 12-month period, the registrant's status becomes 'deregistered.' To this, the RCT advised us that this policy has been in place since 2015 and was implemented for data protection reasons. The RCT told us that there is no requirement for a registrant to keep the register up to date as to who their employer is, and so to ensure that the RCT do not incorrectly contact an old employer, they removed this requirement.
- 6.3 Given the register is publicly searchable and registration status is kept up to date, a registrant's employer can utilise the register to ensure they hold correct registration; the RCT does not believe removing this requirement to inform employers of lapsed status represents any risk to the public.
- 6.4 Overall, the Accreditation Panel considered Condition Two to be met and issued a recommendation for the RCT to consider linking their 'registration status explained' to the register to make this more accessible for users.

7. Condition Three

- 7.1 In response to Condition Three, the RCT told us that registrants may apply to re-join the register if they have left in good standing, and that each application to re-join the register will be judged on its own merits⁶. Furthermore, the RCT's policy on Removal from and Restoration to the RCT outlines under what circumstances someone who has been removed from the register may re-apply. For those who have been removed due to Fitness to Practise reasons, and have been unsuccessful in appealing the sanction, removal is a permanent decision. The policy also highlights other circumstances when one may be restored to the register (e.g. suspension due to CPD failure and amendment of this would result in restoration to the register). The policy details the

⁵ [About the Register of Clinical Technologists](#)

⁶ [03-21-05-0173-24.00-RCT-Guidance-Notes-...ts-and-Information-for-Registrants.pdf](#)

circumstances in which someone who has been removed from the register, could re-apply and what criteria are used in making this decision.

7.2 The Accreditation Panel found that Condition Three was met.

8. Condition Four

8.1 Section 8 of the RCT's Code of Professional Conduct requires registrants to '*respect confidential information obtained in the course of professional practice.*' The Scope of Practice documents include a requirement for registrants to operate in accordance with Good Scientific Practice, of which Domain 1 point 1.1.3 specifies that registrants must "*respect patients' privacy and only use and disclose confidential information about their care in accordance with legal, ethical and data protection requirements.*"

8.2 The Accreditation Panel was concerned that not all Scopes of Practice made reference to Good Scientific Practice, and therefore that data protection requirements would not be applicable to all roles registered by the RCT. However, we sought further confirmation from the RCT who confirmed that all Scopes of Practice reference Good Scientific Practice and therefore require registrants to comply with data protection requirements.

8.3 The RCT also acknowledged this could be made clearer and advised us they will be updating their Code of Conduct in 2025 and intend on making data protection and confidentiality clearer.

8.4 The Accreditation Panel considered that on face value, the condition is met, as requirements for registrant's professional conduct are set out in the Scope of Practice and Good Scientific Practice documents, which reference data protection and confidentiality requirements. Nonetheless, the Accreditation Panel felt that the data protection and confidentiality considerations were not set out clearly enough and therefore decided to issue a recommendation directing the RCT to more clearly set out expectations on data protection and privacy.

9. Condition Five

9.1 The RCT advised us that the criteria against which a course could be assessed as a primary route to registration are available for physics and engineering scopes online⁷. For sonography, this assessment is undertaken by the Consortium for Accreditation of Sonographic Education, and the standards are detailed online⁸. The RCT also told us that these are extremely old documents which are due to be reviewed and re-assessed.

9.2 The RCT further told us they acknowledge the need for evidence of Quality Assurance of the training programmes accepted as primary route for registration, and the publication of this. However, they are assured of the quality of the schemes through their relationship with the Institute of Physics and Engineering in Medicine (IPEM), Association of Renal Technologists (ART) and the Academy of Healthcare Science (AHCS). With the addition of the ROS

⁷ [How to join the register](#)

⁸ [CASE - Standards](#)

Bone Densitometry Certification, it is intended that this requirement for updates be formalised.

- 9.3 While the Accreditation Panel acknowledged the information provided by the RCT, they felt that in the absence of any information to evidence their above claims, this condition was not met. Noting that this work may take some time to complete, however, also considering that this condition was previously issued, the Panel decided that the deadline for completion should be tied to the next annual assessment, however, that an update is required at six months.

10. Condition Six

- 10.1 The RCT directed us to their Fitness to Practice Procedure, Fitness to Practise Hearings and Fitness to Practice Findings webpage⁹. Section 5.5 of the Fitness to Practice Procedure details when consensual disposal may be utilised in a case.
- 10.2 In regard to consensual disposal, the Fitness to Practise Procedure indicates that consensual disposal is appropriate for all cases, and the decision of consensual disposal is subject to approval by the Health Panel or Conduct Panel. Any sanction dealt with via consensual disposal will be entered onto the registrants record for a period of 5-years.
- 10.3 Regarding support for witnesses, we only located general information indicating that witnesses will be supported through the complaints process. The RCT's website¹⁰ stipulates that *"a complainant will be involved in the Fitness to Practise Procedure at every stage...and the RCT will support a complainant throughout the process..."* The Accreditation Panel was not satisfied that this information provided specific enough consideration for how complainants are supported, nor that it considered the complainants views when relevant to consensual disposal of cases.
- 10.4 Overall, the Accreditation Panel concluded that on the face of it, the condition has been met, in that a consensual outcome could be reached using the provided information. However, it is apparent that further information regarding support for witnesses is required. As such, the Accreditation Panel issued a further condition that the RCT must provide witnesses and complainants information about how they are supported and included in the complaints process (including in consensual disposal cases), to be completed within 12-months.

11. Condition Seven

- 11.1 The RCT informed us that the IPEM business continuity plan includes the RCT and is due for a review as technology changes have occurred since the plan was produced. They indicated this would take place within the next 18-months.
- 11.2 We considered that implementation of this condition was due to our minimum requirement setting out the expectation that a Register will have business

⁹ [Fitness to Practice Procedure](#)

¹⁰ [How to complain](#)

continuity arrangements in place to ensure there are clear plans for ongoing management of the Accredited Register, avoiding potential impact on registrants and service users in the event of unexpected events.

- 11.3 In response to our notification of the Condition Review being escalated to an Accreditation Panel, the RCT told us that a RCT specific business continuity plan is being prepared and will be forwarded once completed. Although we acknowledged this information, at the time of assessment, we did not receive such documents and therefore were unable to evidence that this condition was met.
- 11.4 Given the RCT advised us that this document would be provided to us within a short timeframe of one week, the Accreditation Panel decided to re-issue the condition with a 1-month deadline. A shorter deadline was set as this recognised the risk to continued operation of the RCT from an immediate business continuity risk and that receipt of a business continuity plan was expected within a short time frame of the assessment taking place.

12. Condition Eight

- 12.1 The RCT told us that IPEM, who are one of the professional bodies partnering to run the RCT, agreed at the Board of Trustees meeting in January 2025, to run a campaign promoting the purpose and value of professional registration in protection of the public and promoting professionalism.
- 12.2 The RCT also told us they have developed an action plan for engagement with employers, service users and other stakeholders such as NHS Employers, and recruiting Heads of Departments, and anticipate this will be completed by the end of March 2025.
- 12.3 While the Accreditation Panel acknowledged this information, it remains unclear what actions the RCT take to ensure that information is shared as a risk mitigation strategy. In the absence of any evidence to substantiate these claims, this condition is not met.

13. Condition Nine

- 13.1 Similarly to Condition Eight, the RCT advised us of a number of actions they have taken in response to the condition, however, did not provide any documentation or information to evidence these claims.
- 13.2 We continued to identify concerns pertaining to the Scope of Practice documents, in that we identified two different publications of the same Scope of Practice document, which held different information from one another. Furthermore, we noted that information pertaining to Sonography was separated out from the rest of the website and was only available via a separate page of the website. We were also unable to locate any information about the benefits and limitations of roles registered.
- 13.3 The RCT told us they had launched a new website which was a significant task, and now that this has finalised, a programme of review and updating will be commencing.

- 13.4 While the Accreditation Panel also acknowledged this information, in the absence of any updates to the website or information to substantiate these claims, the condition was assessed as not met.

14. Conclusion

- 14.1 Overall, the RCT has completed work to meet some conditions, while others remain outstanding.
- 14.2 We have re-issued five conditions, and have also imposed a new condition under Standard Five.
- 14.3 The Accreditation Panel assessed Condition Two, Three, Four and Six as met.

Conditions

Standard	Condition	Due Date
Standard Two	Condition One: The RCT should ensure that applicants for registration have an effective route for appealing decisions. The process for how the RCT handles appeals should be published.	Four months from publication of this report.
Standard Four	Condition Two: The RCT should document and publish how it decides which courses, and training providers it recognises for the purposes of its primary registration route. This should include how it checks the continuing quality of education and training provision once recognised.	Next annual assessment, with an update provided at 6-months.
Standard Five	Condition Three: The RCT must provide witnesses and complainants information about how they are supported and included in the complaints process (including in consensual disposal cases).	Next annual assessment.

Standard Six	Condition Four: The RCT should develop a business continuity plan.	One month from publication of this report.
Standard Eight	Condition Five: The RCT should develop a proactive approach to working with employers, service users and other stakeholders. This should include sharing information about risks arising from the practices of clinical technologists and sonographers, and concerns about registrants, with the systems regulators and employers.	Three months from publication of this report.
	Condition Six: The RCT should review the content of its website to make sure that key information is up to date and accurate. Information about sonography should be integrated into the main webpages. This should include clearer information for the public about sonography, to support informed choice. Information about the benefits, and limitations of the roles registered should be included.	One month from publication of this report.

Recommendations:

Standard Two	The RCT may wish to consider linking their 'registration status explained' webpage to the register to make this more accessible for user.
Standard Three	The RCT may wish to more clearly set out expectations for registrants pertaining to data protection and confidentiality, noting these are currently embedded within Good Scientific Practice.