

July 2019

Workforce Pipeline

Ministry Meeting

Last month APEX National Secretary Dr Deborah Powell attended a meeting convened at the Ministry of Health to discuss the general sonographer workforce crisis.



The meeting was prompted by the withdrawal of DMU from NZ, and its focus was on how to ensure a sustainable NZ sonography workforce going forward.

We need to produce at least 90 ultrasound trainees per annum. The good news is this looks like it will be possible:

1. University of Auckland has the capacity to train 50-60 per annum (is currently training 30)
2. University of Otago has a course that goes live in the 2020 academic year for a minimum 30 placements, but requires security of training placements to be viable

Both courses are at the postgraduate level. An undergraduate programme is not a priority at this stage, as it would take three years to establish.

The Queensland University of Technology (QUT) will also be offering a Graduate Diploma in Medical Ultrasound.

While the above, if actioned, will help resolve the problems with the ultrasound pipeline, issues of ensuring trainee placement and the capacity to supervise trainees still needs to be addressed and worked through with your employers.

As we know, the DHBs and private sector have previously not prioritised trainee placements;

MECA Bargaining

We had our first day of bargaining for the Auckland Sonographer MECA on the 10th of July and will be returning to bargaining on the 1st of August.

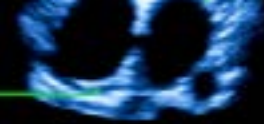
The South of Auckland Sonographer MECA will expire on the 30th of November. We will initiate bargaining on the 1st October.

this will need to change. We are also seeing a growing and critical shortage of cardiac, paediatric and vascular sonographers without any immediate means of addressing their pipeline issues.

Discussions are currently underway with the University of Auckland and the University of Otago in this regard. We will keep you posted on any developments.

What happens if the DHB declines my application for CPD/CME?

You have an annual entitlement of \$2800 for CPD and to attend a conference. This is your entitlement to use for your CPD needs and APEX does not believe it is the right of the employer to turn down a CPD application without good reason. A good reason would not be the cost, but could be if too many sonographers in the one DHB want to attend the same conference. If you are having any issues with your utilising your CPD entitlement and attending conferences, please let us know and we can offer advice.



Specialist Sonographers

Your MECA provisions

Both the Auckland and South of Auckland Collective Agreements have a salary step (6) that applies to specialist sonographers.

Both MECAs define a specialist as follows.

“Specialist Sonographer” means a sonographer who has qualifications and / or performs a special role (e.g. reporting on work that clinicians act on immediately), or is involved in non-invasive tests (e.g. Treadmill, ABPI, Liver transplant duplex, tertiary level scans) or teaching special skills to qualified sonographers.

If any of these three criteria apply to you and this can be demonstrated, then you are entitled to be on at least step 6 of the MECA. This also applies to newly qualified sonographers regardless of where they currently sit on the salary scale.

We are currently compiling information on sonographers who believe they meet this definition but are not currently recognised as specialists. The South of Auckland MECA also has the following provision that allows progression to step 7.

The employee shall progress to step 7 on the achievement of mutually agreed objectives

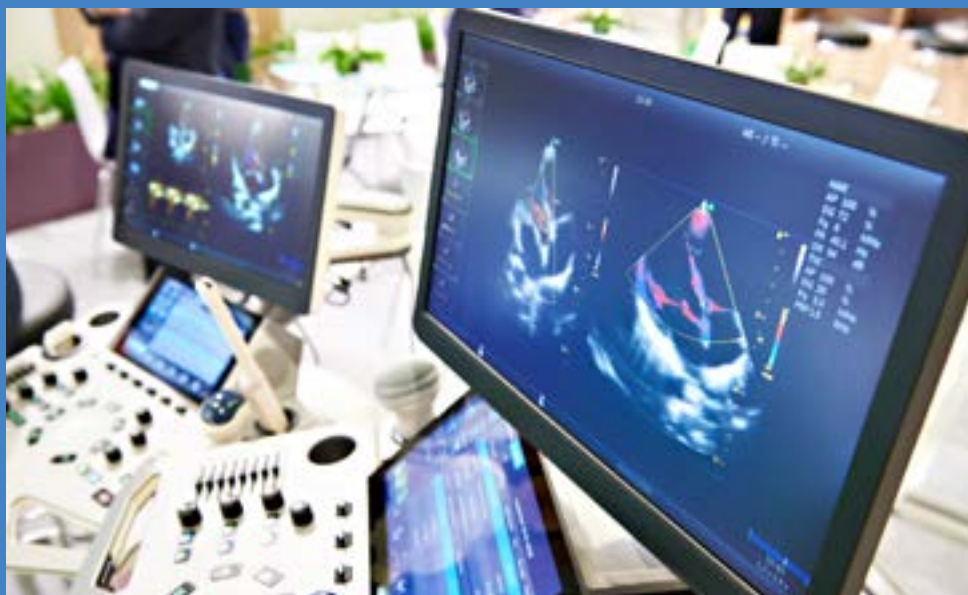
set prospectively at the performance review undertaken when the employee is on step 6. Progression shall not be denied where a performance review is not completed through no fault of the employee or where work objectives are not met due to

work reassignment directed by the employer.

If you are a specialist under the South of Auckland MECA and have been stuck on step 6, please get in touch with us and we will see what can be done to ensure your progression to step 7.

Sonographer reporting

A survey conducted by the New Zealand Branch of ASUM in July 2011 revealed that 48% of NZ sonographers prepared formal diagnostic reports and 20% of sonographers routinely prepared formal reports that were not going to be sighted by a radiologist prior to the report being available to the referring clinician.



At least 20% of Sonographers would have met the definition of a specialist in 2011. We would expect the figure in 2019 to be higher. Reporting has traditionally been the responsibility of Radiologists or Cardiologists (SMOs). If they want sonographers to take on this responsibility and the risks associated with assuming “the duty of care” then it is only fair that the employers pay for it. After all it is cheaper to have a sonographer report than a SMO. This has already been recognised in Northland Sonographers’ salary scales as all the sonographers report.

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