The Association of Breast Clinicians (ABC), represents doctors working in the UK as breast clinicians and was established over 25 years ago. During this time, multiple training pathways have been undertaken and the ABC has always strived for a recognised national curriculum and specialty. The collaboration with the Royal College of Radiologists (RCR), developing a curriculum and training and assessment programme deliverable nationally as part of a pilot project backed by Health Education England (HEE), provides an opportunity for the role of the breast clinician to be standardised, certified through a credential and valued by every breast unit in the UK.

The workforce crisis facing breast radiology has been well documented. Breast clinicians working as senior autonomous doctors in screening and symptomatic breast services across the UK can help to address this crisis by providing dedicated breast imaging and clinical skills, through a training pathway shorter than that of a clinical radiologist, and with a wider scope of practice than an advanced practitioner or consultant radiographer. As doctors, they are governed and appraised by the domains of practice set out by the GMC, which are echoed in the curriculum document. Breast clinicians have a proven track record in leading services, taking on educational supervision and appraisal roles and teaching.

With the closure of the Associate Specialist (AS) grade in 2008 came the advent of the specialty doctor contract. Whilst this serves some clinical scenarios well, the senior breast clinician pushes the remit of this contract. They work autonomously within the multi-disciplinary team, taking on managerial and senior roles more aligned with Consultancy or AS terms and conditions. The Academy of Medical Royal Colleges (AOMRC) released a statement in December 2018 which supports the need for a new grade of doctor working autonomously at a senior level where local arrangements do not allow for appointments to the closed AS contract. The NHS Long Term Plan, published January 2019, calls for a need to reform and re-open the AS grade and also recognises the need for credential development. These future initiatives would recognise career and clinical progression specific to the situation of breast clinicians, which the ABC believes would assist in recruitment to and retention after training via this new curriculum. The ABC and RCR await, and will engage appropriately in, further developments involving the AOMRC and British Medical Association.

On acquiring advanced skills in teaching, supervision or appraisal, or taking on clinical work such as MRI interpretation or other specialist techniques the breast clinician should undoubtedly be recognised as a senior autonomous practitioner working at AS or Consultant equivalence. In the future, it is hoped that the GMC will fully recognise the RCR / ABC credential project and that the pilot programme will be adopted as standard, leading to an increase in the number of breast clinicians. Until such a time, the ABC works with its members and other national bodies to ensure the best possible terms and conditions for breast clinicians nationally.

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