

The clinical radiology UK workforce census 2017

Census figures show that more consultant clinical radiologists are needed if patients are to continue receiving the care they need

1 in 10

consultant clinical radiologist posts are vacant, of which 7 in 10 vacant posts have been unfilled for over a year



1,000

2017

shortfall in consultant clinical radiologists



1,600

2022

predicted shortfall in consultant clinical radiologists

Only 3%

of radiology departments able to meet all their reporting requirements within staff contracted hours

More patients benefiting from complex imaging over the past five years =

30% increase

in diagnostic reporting workload

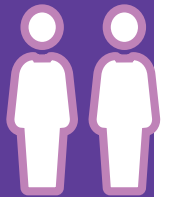


Over the next 5 years:

For every

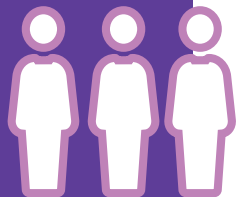
2

breast radiologists that join



3

breast radiologists predicted to leave



Estimated expenditure on outsourcing and overtime has doubled to

£116 million

since 2014



<1% increase

in consultant clinical radiologists in Scotland, Wales and Northern Ireland over the past five years





Critical shortage of radiologists in the UK – the increase in demand on services continues to outstrip the workforce supply

The critical shortage of clinical and interventional radiologists in the face of ever increasing clinical demand has been highlighted to the Government and policy makers. Failure to address radiology workforce shortages over many years despite the 10–12% annual increase in complex imaging has resulted in an inability to provide a comprehensive 24/7 service for patients.

Rising demand

The demand for radiology services has increased rapidly over recent years, particularly for more complex imaging which takes longer to interpret and report. This has resulted in an estimated increase of 30% in the overall diagnostic reporting workload in the last five years.

Increasing gap between supply and demand

The gap between the workforce 'supply' and 'demand' for radiology services is forecast to increase from an estimated shortfall of 1,000 consultants in 2017 to an estimated shortfall of 1,600 consultants in five years' time, highlighting the urgent need to address workforce shortages.

Inability to meet reporting requirements

Increased demand means that almost all radiology departments are struggling with workload. In the 2017 census, only 3% of radiology departments stated they were able to meet all their reporting requirements within staff contracted hours.

Increased outsourcing and insourcing

To manage workload, radiology departments have significantly increased the use of outsourcing to teleradiology companies and insourcing (paid reporting by departments' radiologists, additional to core contracted hours). This expenditure was estimated to have reached £116 million in the financial year 2016/17, double the estimated expenditure three years prior. £116 million is equivalent to the combined salaries of approximately 1,300 full-time consultant clinical radiologists.¹

Unreported images

Despite the increase in outsourcing and insourcing to meet demand, 44% of radiology departments disclosed that some images were auto-reported or unreported. This is concerning due to the potential for diagnoses to be missed or delayed.

Increased number of vacant posts

Radiology departments are struggling to fill vacant posts. The vacancy rate rose from 8.5% in 2016 to 10.3% in 2017.^a In 2017, 386 consultant clinical radiologist posts remained vacant, seven in ten (69%) of which had been unfilled for over a year. Only 19% of vacant posts are covered by locums, while the other 81% remain vacant, leaving radiology departments struggling to cover the workload.

Increased international recruitment

In an attempt to fill vacant consultant clinical radiologist posts, radiology departments are increasingly turning to international recruitment with almost half trying to recruit from outside of the UK in 2017. Success was limited however, with half of those who did try, failing to recruit.

Variation across the UK

Some geographical areas are particularly hard-hit by workforce shortages. For example, Scotland, Wales and Northern Ireland saw no significant increase in consultant clinical radiologist numbers between 2012 and 2017.

Specialist interests

Similarly, some clinical radiology specialty interests are particularly hard-hit by workforce shortages. For example, the shortfall in consultant breast radiologists across the UK is predicted to increase; over the next five years, for every three that leave the profession only two are predicted to join.

Risk to patient safety

There is a risk that increased pressure on services will compromise patient safety. Between 2012 and 2017 the time allocated to supporting professional activities (SPAs) was steadily eroded, with over 400 less than full-time (LTFT) consultants having fewer than the minimum recommended 1.5 SPAs, compromising their ability to keep their knowledge up-to-date and revalidate.^{2,3} Inadequate SPA time may also reduce consultant time available for audit and quality improvement activities, which are important drivers of service improvements.

References

1. NHS Employers. *Pay and conditions circular (M&D) 1/2017*. London: NHS Employers, 2017.
2. Academy of Medical Royal Colleges. *Advice on supporting professional activities in consultant job planning*. London: Academy of Medical Royal Colleges, 2010.
3. The Royal College of Radiologists. *A guide to job planning in clinical radiology*. London: The Royal College of Radiologists, 2013.

a. The percentage of staff in post against planned workforce levels.