SESSION B2

B2.1 Embedding Peer Mentoring for AHPs into the curriculum for healthcare education and training

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Background: The Reducing Pre-registration Attrition and Improving Retention (RePAIR) report (2018) discussed attrition within preregistration clinical education and the first 2 years post qualification[1]. It makes recommendations to improve attrition rates in undergraduate healthcare education. Recommendation 5 states all Higher Education Institutions (HEIs) should review their approaches to a buddy scheme for healthcare students. The Allied Health Professions (AHP) Peer Mentoring Scheme has run successfully within our healthcare programmes particularly in Speech and Language Therapy (SLT) and Diagnostic Radiography.

Purpose: This project explores how AHP Peer Mentoring embedded into the curriculum enhances peer support amongst AHP students.

Summary of Content: The work was originally running for many years in the SLT programme providing peer support and a culture of belonging across students, designed to supplement the role of personal tutor. As the model evolved it naturally aligned with the RePAIR project which further validated the approach. Peer Mentoring Scheme has been designed to support year 1 students and enhance student experience, additionally, facilitating year 3 student development of mentorship skills required for graduate practice and HCPC registration[2]. Structured Peer Mentoring has been embedded into the curriculum through assessments, creating mandatory requirement for all students to participate. Our work was selected and shared as an example of best practice within the Health Education England AHP Student Buddy Scheme Evidence-based Practice Guide 2022[3], promoting it to wider HEI's. Further developments meet recommendation 6 of the RePAIR project with the extension of the scheme to enhance Year 2 experience.

References

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2. HCPC (2023) The standards of proficiency for radiographers. Available at: https://www.hcpc-uk.org/standards/standards-of-proficiency/radiographers/ (Accessed: 12 Feb 2024).
3. Health Education England (2022) Allied Health Professional Student Buddy Scheme Evidence-Based Guide. Available at: https://www.hee.nhs.uk/sites/default/files/documents/AHP%20student%20buddy%20scheme.pdf (Accessed: 12 Feb 2024).

B2.2 Preliminary clinical evaluation - where are we? A scoping review

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Background The College of Radiographers' vision was, by 2010,[2] diagnostic radiographers in the UK would be writing preliminary clinical evaluations (PCE), or 'comments', on images. Their 2013 policy[4] supporting the use of PCE has not been updated in a decade and it might be suggested PCE practices in the UK have not really moved on since, though elsewhere it appears to have gained traction. The aim of this scoping review was to establish the current global status of the use of PCE with regards to purpose, scope and approach.

Method The Arksey and O'Malley scoping review framework[1] and PRISMA-ScR5 guidelines were used to develop a protocol[3] to identify studies between January 2013 to January 2024 using six databases. Collated literature was screened and analysed using content analysis to identify themes.

Results 58 relevant studies were identified for inclusion though PCE definition and terminology was often ambiguous and heterogeneous. Studies focused predominantly on evaluating accuracy, education, perceptions, and new initiatives. Themes identified a developing role in the use of PCE internationally, perhaps more than in the UK, and in a range of modalities and clinical settings. Barriers and drivers to the use of PCE were identified in addition to quality mechanisms and educational interventions used to support PCE implementation.

Conclusion Considering PCE has been an aspiration for standard practice in the UK for more than a decade, it remains relatively infrequently researched. There is growing scope internationally, particularly in Australia, but less so where it was first purposed in the UK.

B2.3 Scoping exercise to assess the contribution that Imaging Support Workers (ISWs) and Assistant Practitioners (APs) make to imaging services in the North West (NW) of England

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Introduction ISWs/APs, often referred to as 'radiography support workforce', work alongside radiographers providing high-quality care across many diagnostic imaging modalities. To reduce waiting times for diagnosis and treatment, the Radiography Skills Mix review[1] suggested expanding the radiographic workforce, including ISW/APs. The Richard's Report[2] identified a significant increase in numbers would be required pan NW by 2025 to meet demand. There is a well-established ISW/AP workforce in the NW, but a need to develop more to undertake some delegated roles and to increase the scope of practice of the existing workforce. Additionally, there is a requirement to upskill this workforce by seeking alternate ways of working and training staff [3].

Method NHSE (formerly HEE NW) funded research project scoping the contribution that ISWs/APs make to NW diagnostic services. 24 Trusts in the NW were recruited with data collected 01/04/2022 > 31/03/2023. A mixed-methods questionnaire study was administered.

Results/discussion

In relation to ISWs/APs, this paper will discuss:

- Number/banding/wte/vacancies/job titles
- Trends for image acquisition
- Range of modalities/extension scope of practice
- Workforce expansion
- Education/training/qualifications/apprenticeships
- Exploring management responsibilities
- Innovations in deployment
- Barriers to growth/development
- Progression to radiographer/other career progression
- Links between development of support workforce/impact on radiographer roles

Recommendations to:

- Develop appropriate education/training to facilitate upskilling/CPD/progression using a skills escalator approach, aligned to SCOR recommendations3
- Develop consistency in job titles/job plans/descriptions
- Embed a NW Community of Practice for ISWs/APs
- Underpin a safe and effective support workforce by enhancing the governance arrangements

References

1 Department of Health (2003). Radiography Skills Mix - A report on the four-tier service delivery model, London
2 Richard's M. (2020) Diagnostics: Recovery and Renewal – Report of the Independent Review of Diagnostic Services for NHS England
3 Society and College of Radiographers (2022). Developing career pathways for diagnostic imaging support worker roles guidance on roles and responsibilities, London

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B2.4 Research culture, barriers and facilitators within the radiography workforce in the UK – results of a national survey

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Background Radiography has been identified as an area with a need to build research capacity and capability. To create strategies to grow and develop the number of research active radiographers it's important to understand the research culture of the workplace. We also aimed to identify barriers and enablers of research activity.

Method A survey was created using a validated research and development culture index [1]. Questions regarding barriers and enablers to research activity were created from a previous questionnaire with content validity confirmed by ten expert radiographers. The survey was distributed, using purposive and then snowball sampling, to radiographers and nuclear medicine technologists via email and social media. Statistical analysis was carried out in R and free text answers analysed for themes with DECIPHER.

Results Of 970 responses under half indicated undertaking some kind of research activity within their role (41%). There was much variation in the levels of research training reported. Almost all respondents (91%) agreed that other work roles

take priority over research and there's a lack of protected time. Management support for research appears lacking (79% agreement) and research mentorship was favoured for enabling research (90% agreement). Representative free text answers include: "lack of staff resulting in all focus on current clinical needs" and "little appreciation and/or knowledge about the role of research".

Conclusion More mentorship, allyship and opportunities for radiographers and nuclear medicine technologists to become active researchers is needed. Further investigation to compare how other professions responded to a similar survey will be carried out.

References

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B2.5 Risks and benefits to radiographers working beyond standard hours in healthcare provision: The 247 Diagnostic Radiographers At Work Study (247DRAWS) - Initial findings of stage 1

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Background Referral increases are causing pressure in UK medical imaging services (GIRFT 2020). Radiology service delivery models routinely include extended working patterns, 7 day service and 24 hour access (Beardmore et al 2016). Increased shift work and faster rotations have been seen to have detrimental effects on medical professionals and lead to safety issues for patients (Elliott & Williamson 2019). This potentially has an impact on retention (Nightingale et al 2023). No previous research has been undertaken on the benefits and risks to diagnostic radiographers working shifts (Elliott & Williamson 2019).

Method A mixed methods sequential study was devised, leading with an online survey - distributed via the College of Radiographers and social media to all UK diagnostic radiographers. Information was gathered on roster patterns, the effects of additional service pressure and utilisation of the Working Time Regulations (1998). Utrecht Work Engagement Scale (UWES9), Oldenberg Burnout Inventory (OLBI) and Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) were completed by participants to give defined measurements of workforce effect.

Results 1.96% of UK Diagnostic Radiographer population (HCPC 2023) participated in the survey (N=925). The survey closed on 20/1/24. Early analysis is in progress within a part time PhD study. Initial findings, descriptive statistics and early correlation calculations will be shared as part of the presentation.

Conclusion This is the first study into UK Shiftworking culture amongst Diagnostic Radiographers. The findings will begin revealing the individual benefits, risks, good practice and recommendations for development to optimise workforce wellbeing, performance and safety.

References

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Elliott J, Williamson K, 2020; The impact of shift work on errors in Radiology. Radiography, 2020 Aug, 26(3), 248-53.
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Nightingale J, Burton J, Appleyard R et al, 2021; Retention of radiographers: A qualitative exploration of factors influencing decisions to leave or remain within the NHS. Radiography, 2021 Aug, 27(3), 795-802.
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