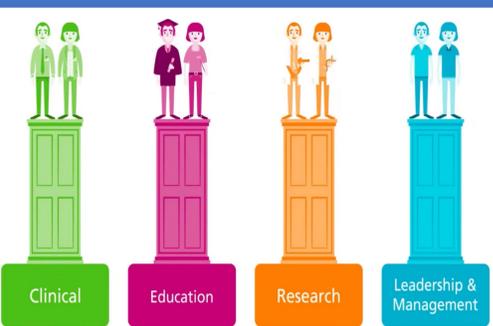


Snapshot of European advanced Therapeutic Radiographers/ Radiation Therapists: a mix-method study

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BACKGROUND



One in four patients who need radiotherapy (RT) do not receive it, and this is projected to increase by 2025 as the workforce capacity decreases. Flexibility in models of care such as Therapeutic Radiographers/Radiation Therapists (TR/RTTs) working in new and evolved roles across all advanced practice (AP) pillars optimises cancer patient experience and treatment pathways however, limited information exists on the range of advanced practitioners (APs) in RT.

AIM
This study aimed to research AP among TR/RTTs across Europe and identify educational gaps.

METHODS

<p>Quantitative data</p> <ul style="list-style-type: none"> • Self-designed survey: <ul style="list-style-type: none"> • Pre-test & pilot • Online survey (Microsoft Forms) • Convenience sampling • Dec21-March22 • Descriptive statistics: Excel & SPSS 	<p>Qualitative data</p> <ul style="list-style-type: none"> • Pilot interviews • Online interviews (Microsoft TEAMS) • Purposive sampling • June-Sep22 • Independent transcription • Member checking • 4 coders • Thematic analysis: NVivo 	<p>Survey engagement</p> <ul style="list-style-type: none"> • 31% Advanced TR/RTTs • 57% TR/RTTs working AP roles (non-official) • 9% Not sure • 3% Other: trainees, nurses, etc 	<p>Interviews engagement</p> <ul style="list-style-type: none"> • 14 Advanced TR/RTTs • 7 Educators/ students • 6 Managers • 4 Professional bodies • 2 Regulatory bodies

RESULTS

66% Informal AP

- No recognition/compensation
- No appraisals/ impact assessment

52% Educational & training gaps

- No MSc in AP/RT-specific
- No leadership contents

Research allocated time

- No protected time/ funding
- Limited research culture/ staff skills

Education needs

- Image guided/Adaptive RT
- Multimodal imaging & technologies
- Advanced treatment planning

Training needs

- Leadership skills
- Management skills
- Clinical site-specific expertise

Thematic framework	
AP drivers & outcomes	AP challenges vs enablers
<ul style="list-style-type: none"> • Clinical • Professional • Organizational 	<ul style="list-style-type: none"> • Governance & role development • Workforce & organization • Practice across 4 pillars • Education & training
Current vs future AP	Becoming & being advanced practitioner
<ul style="list-style-type: none"> • Clinical practice • Education • Research • Leadership & management 	<ul style="list-style-type: none"> • Development of competence & capability • Professional maturity • Challenging professional boundaries • Pioneering innovation

Job title

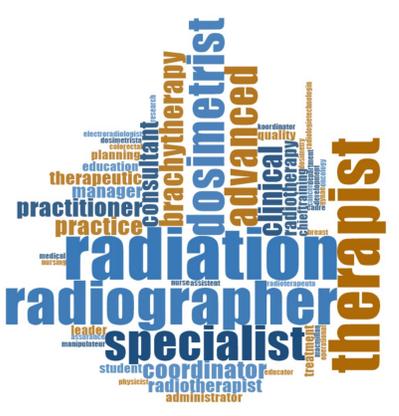
- Variability & inconsistency
- Multiple role titles

Job description

- Outdated without annual reviews

Job plan

- Inexistent allocation of working time by AP pillar



I worked many years like dosimetrist, but I wasn't recognized, and I wasn't evaluated. PB#4 IT

Our roles as RTTs will probably change... from bench to bedside...from research to practice. That's where an advanced practitioner can help out. S#1 BE

We didn't decide if the therapists are going to be an extension of the machine or an extension of the doctor. And I think that when you want to be an advanced RTT, you need to be an extension of both. P#13 CH

My role is broader than just an area of RT. It covers responsibility for patients through the entire RT pathway, but I think the key thing is that it covers the four pillars of AP. P#4 UK

KEY TAKE AWAYS

Neither the profession nor education of TR/RTTs are harmonised across Europe, which is highly reflected in advanced-level practice. Advanced TR/RTTs should work across all pillars (including research), and these should be embedded in master's programmes (currently not the case for leadership pillar). This study highlights a policy gap in education and professional requirements to practice at an advanced level in RT at the European level. Patients, staff, and employers benefit from AP. Governments should invest in its implementation and sustainability.

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