



The impact of tradition and national requirements on radiotherapy education

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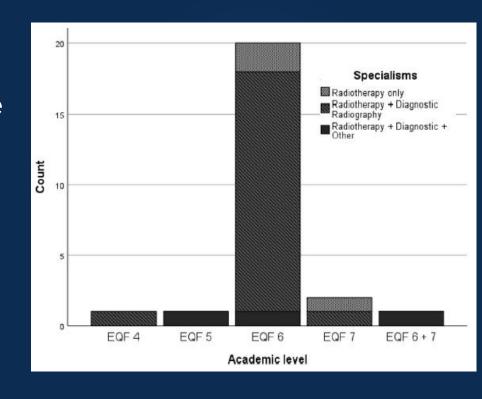
- ▶ SAFE EUROPE project
- University of Malta



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Rationale

- ► Therapeutic radiography: **Not regulated** at the European level
- European education guidelines (non-binding)
- ▶ **Different education programmes** across Europe
- ▶ Literature shows impact of
 - ▶ National tradition on other professions
 - European education regulations (e.g. Bologna)
 - ▶ Little literature on its impact on RT education at European level



Aim

Explore factors that affect **differences in radiotherapy (RT)**competency across EU

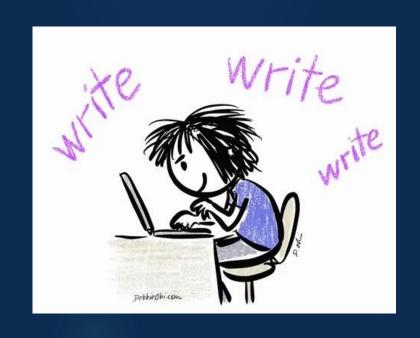




Methodology

- Cross case study
- Interviews with stakeholders
 - ► Finland, Poland, Portugal and UK
 - Clinical managers, educators, professional association representatives, local and migrant TRs and students
 - ► Individual + group interviews
- Recruitment: SAFE EUROPE partners + social medial
- ▶ Transcribed + Thematic Analysis
 - ▶ Nvivo v.12





Findings

- ▶ 30 participants
- Factors affecting education programmes
 - National standards
 - National needs and traditions
 - Professional identity
 - Perception of TR as a technical occupation
 - Economic factors

National standards

Lack or inadequate regulation

"we don't have a law regulation, still. That's why the level of education is not equal" (PL1).

"there is no regulatory body that tells me that I need to prove my competencies" (PT5)

Poorer + unharmonized education

'the HCPC will stipulate a number of standards of proficiency for a therapeutic radiographer, and we all have to maintain that' (UK4)

National needs and traditions

"I don't know if [more research] can be included in studies. As I said, there's not much research done by [TRs]" (FL4)

Traditional tasks influence curricula

"I am from the time when the planning CT was done by a colleague from radiology" (PT3)

"ratio of doctors to non-doctors" (UK1)

Task-shift between professions

Education must precede practice

Professional identity

Perception of the profession boundaries influence curricula content

RT separate profession/bodyof-knowledge "[students] tell me 'I don't like RT because I want to pursue radiology'. [...] but then I say 'No! you need to learn all three [...] Because [...] when you graduate, [...] you get all three warrants." (PT8).

"The roles are very different, and so the education [...] needs to [...] be very tailored towards the radiotherapy component" (UK1)

TRs as technical occupation

"We need to move from being seen as a technician profession within countries to being a profession in our own right. [...] here in the UK, we're always attached to the pieces of equipment but we know we're much more than that." (UK1)

Self- and others' perception

"the last decision goes to the doctor" (PL2)

"some of the radiotherapists are content to do what they are told to do instead of questioning" (FL4)

Dominance >
Lack of
autonomy

Economic factors

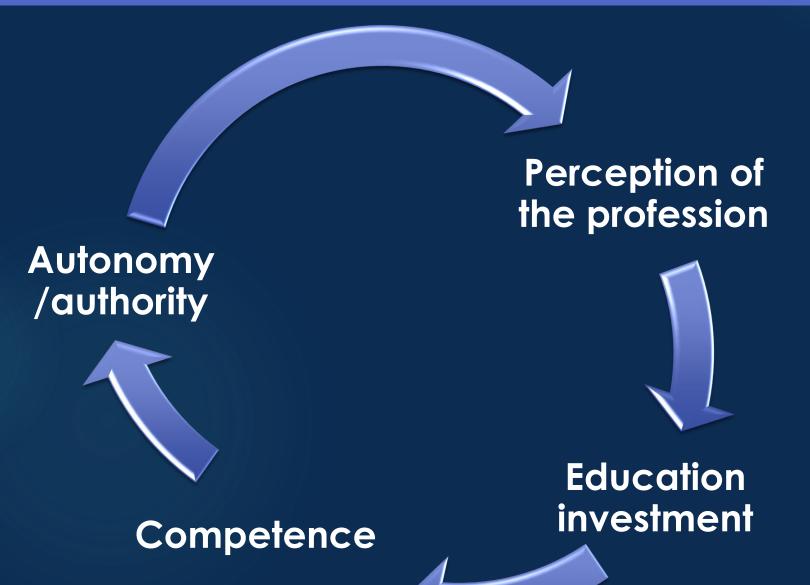
Funding issues

Limit teaching ability and programme structures

"the funding model in this country, it acts as a barrier" (UK1)

"The school always had difficulties in acquiring equipment" (PT8)

Occupation perception/investment education cycle



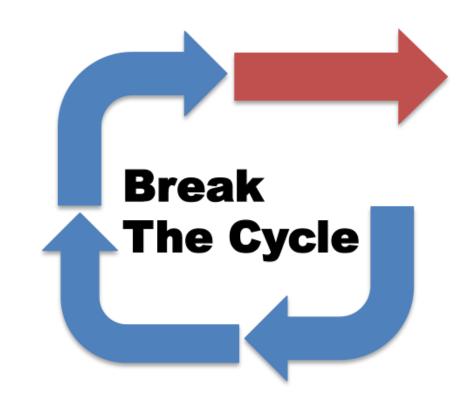
Improvement in education can revert the cycle

Conclusion

National regulations have the greatest effect on education design (it's the law!)

National tradition, needs, perception of profession, professional identity also influence course design

Changes in education can promote the profession!



Thank you!

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