



















"Advanced practice roles of Therapeutic Radiographers/Radiation Therapists across Europe"

Management

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Methodology

Systematic literature review

- Thematic analysis of the literature to identify advanced activities performed by TR/RTTs working in advanced level practice or in AP roles.
- The list was validated by a panel of experts from different European countries and areas of Radiotherapy (RT).

Survey

- o Section I: Sociodemographic
- o Section II: Professional profile
 - Subsection IIA: Advanced Practitioner
 - Subsection IIB: TR/RTT working in AP roles/tasks
- Section III: Education and training needs
- Distributed to advanced practitioners or TR/RTTs working in AP roles/tasks across Europe.
- Descriptive statistics of quantitative data and thematic analysis of open questions.

Discussion & Recommendations

Neither the profession nor education of TR/RTTs is harmonised across Europe at the entry level to the profession, and this has been highly reflected in advanced level practice.

The most common areas of AP amongst TR/RTTs are activities associated with direct patient care.

The scope, job titles, education programmes, training support and regulation varied substantially across Europe.

The research demonstrated a policy gap with education and professional requirements at European level to practice at advanced level.

Recommendations to close the gap between education and current AP at the national and European level:

- Governance structures and regulation: AP framework, education (Master level) and practice requirements, support for all AP pillars.
- Evaluation and impact assessment: standardisation of this level of practice and its evaluation with impact assessment of AP roles in terms of clinical, organisational, and professional outcomes.
- Education and training: mandatory continuing professional development, RT-specific accredited AP Master programmes with updated curricula/ clear pathways for TR/RTTs with more support from universities and employers.

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Background

A greater level of autonomy, responsibility, and accountability and access to higher level education and training in the practice of Therapeutic Radiographers/Radiation Therapists (TR/RTTs) has led to Advanced Practice (AP) roles.

The profession and education of TR/RTTs is regulated at the national level. Therefore, lack of European regulation leads to differences in the roles and advanced practice level of TR/RTTs' practice between member-states

The WP8 aimed to assess AP roles amongst TR/RTTs' practice and identify educational gaps for this level across Europe.

This WP feeds this information to WP10, where webinars on the least developed Radiotherapy-specific competencies and capabilities will be made available to the profession and the public.

Results

Thematic analysis of the literature

- Identification of advanced activities performed by TR/RTTs in AP roles and synthesis by 7 dimensions and 27 subdimensions of practice. Identification of AP roles by clinical area of practice (e.g., palliative care, brachytherapy), disease site-specific (e.g., breast cancer, head & neck cancer), and scope of practice (e.g., image review, practice development).
- List of advanced activities validated by a panel of experts from different European countries and used for the survey design.

European survey

- 189 respondents from 21 European countries.
- Additional advanced activities were reported by the practitioners
- Most common professional profile reported is TR/RTT working in AP roles/tasks without acknowledgement of advanced practitioner:
 - Informal AP in several countries without practice regulation/ and education accreditation.
- The most common activities were advanced Image-Guided Radiation Therapy/ Adaptive Radiation Therapy (IGRT/ART), patient information, patient assessment and management.
- 53% undertaken postgraduate education/training courses to support AP roles.
- Job titles varied and were inconsistent both within and across countries.
- The working time by AP pillar shows a large focus on clinical practice neglecting research, education, leadership and management.
- 42% reported minimum requirement of additional education to undertake AP. Most cited: "Master's degree" or "master module specific for AP role".
- 25% reported minimum requirement of number of working years to perform AP. Most cited: "five years of practice".
- Top three education needs:
 - o IGRT/ART
 - o Multimodal imaging & technologies
 - o Advanced treatment planning
- Top three training needs:
 - o Leadership skills
 - o Management skills
 - o Clinical site-specific expertise