



Being an Advanced Practitioner in Radiotherapy: European key stakeholders' insights



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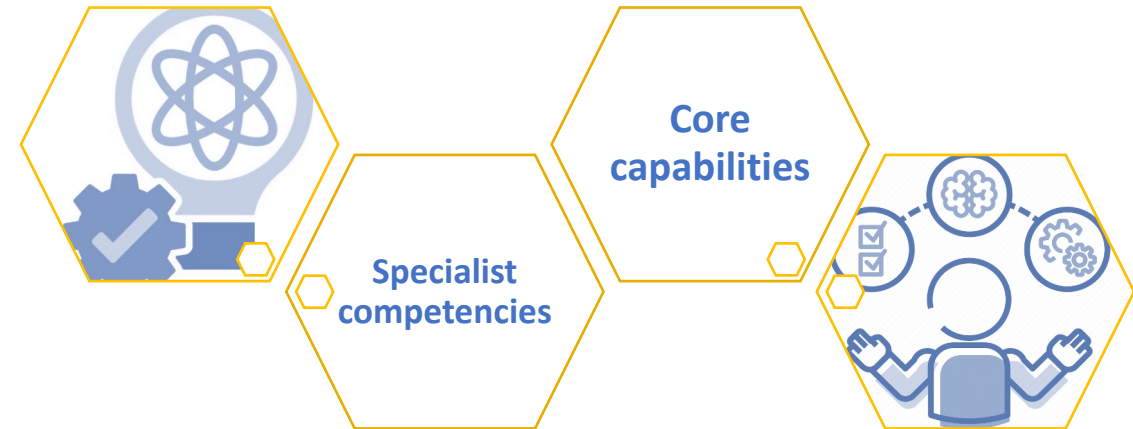
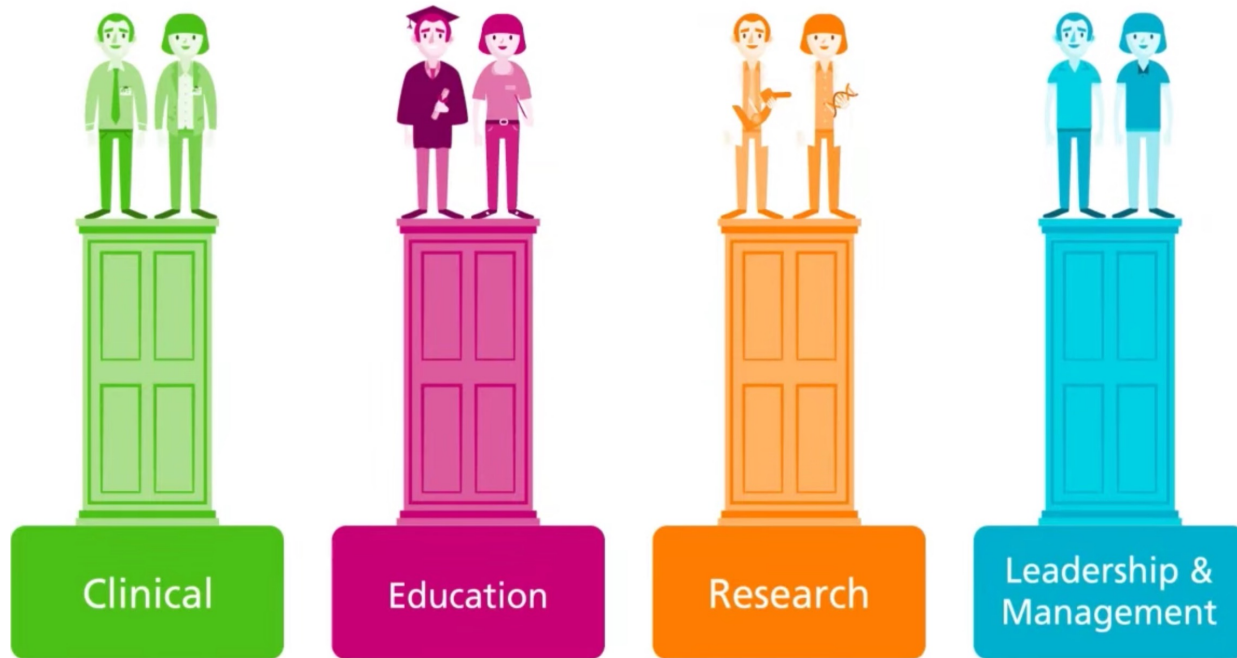


Polskie Towarzystwo Elektroradiologii



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Advanced Practice - AP





AP in Radiotherapy



e.g.: breast

Site-specific



e.g.: palliative

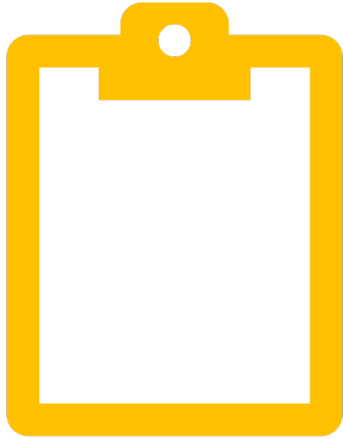
Clinical area



e.g: patient review

Scope of practice

Rationale



Previous **European survey** about AP roles
amongst RTTs' practice:

- 66% informal AP
- 52% education gaps
- Neglected AP pillar: research



(Median:5% working time)



Aim



To investigate the **perceptions** of key European stakeholders about the current **Advanced Practitioners' profile** in Radiotherapy.

Methods

✓ Qualitative study

- COREQ checklist
- Ethical approval



✓ Recruitment & sampling

- RT key stakeholder groups
- Purposive sampling
 - Email invitation
 - Previous European survey
 - Conferences & social media



Methods



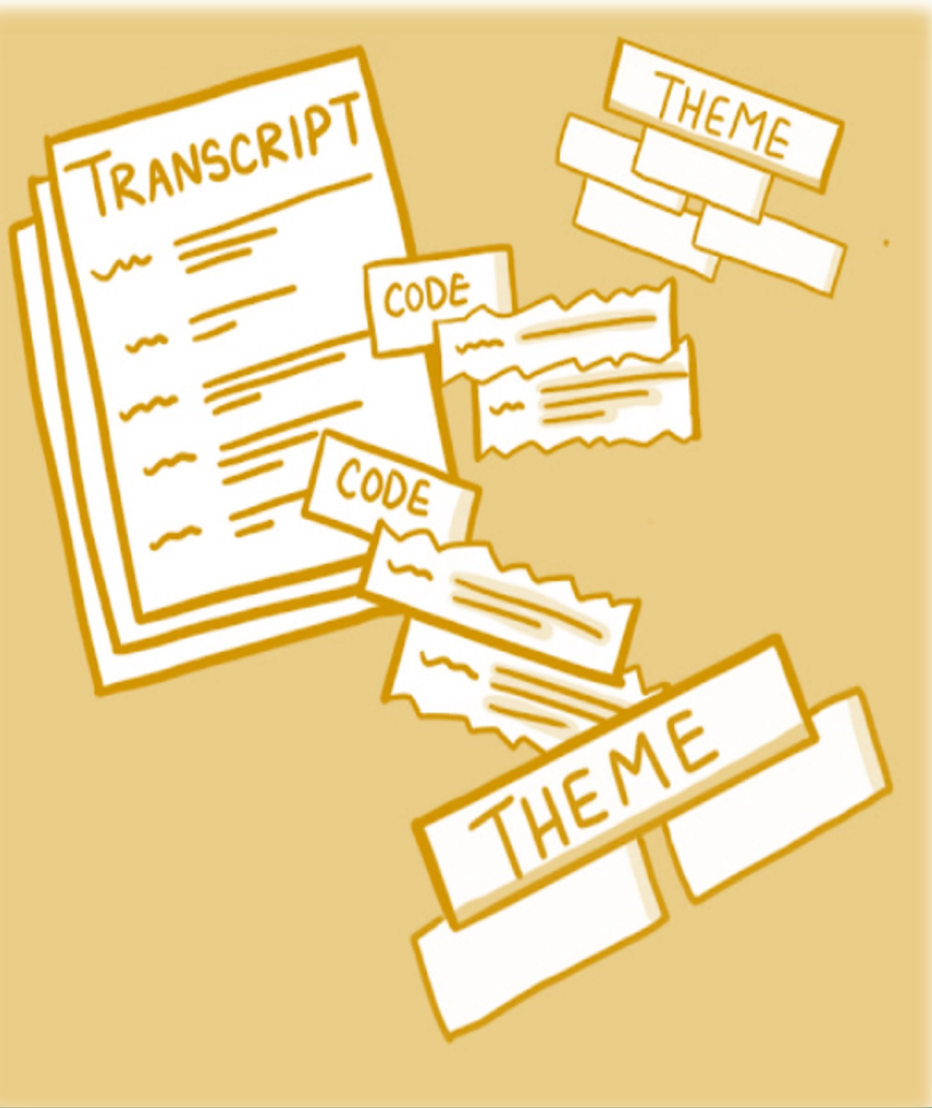
Data collection

Semi-structured interviews:

- ✓ Self-designed interview guide
 - 2 pilot interviews
- ✓ Online (Microsoft TEAMS)
 - One-to-one & English
 - Audio & video recording
 - One interviewer
 - June to September 2022
- ✓ Interviews transcription
 - Independent & reviewed by interviewer
 - Member checking (positivist method)



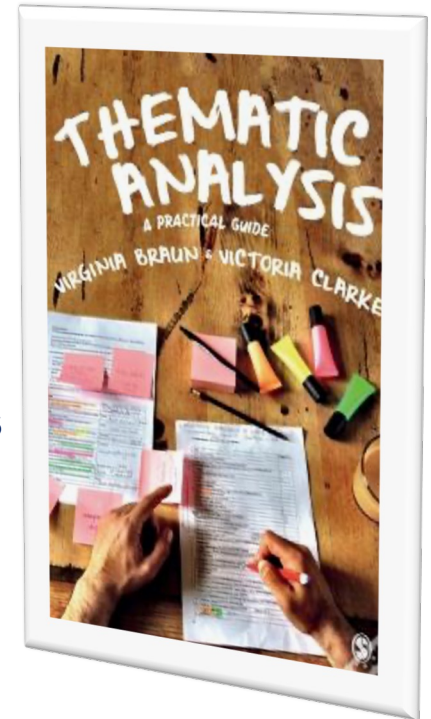
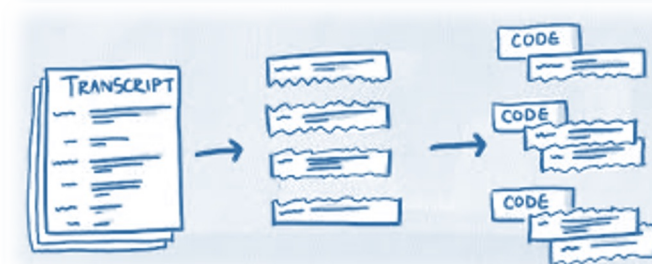
Methods



Data analysis

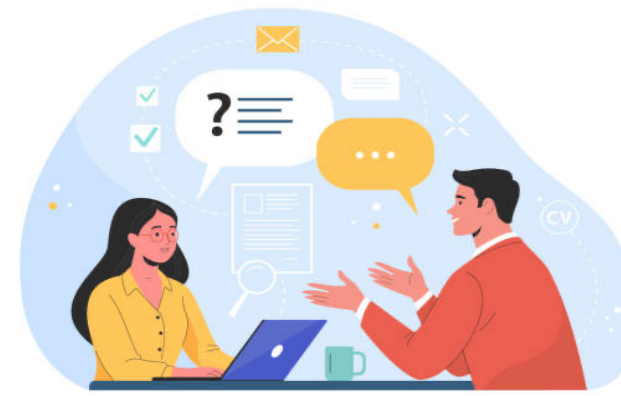
✓ Thematic analysis

- “Braun & Clarke” steps
- Inductive & deductive coding
- NVivo software
- Interviewer coded all transcriptions
- Partial cross-coding by other 3 researchers



Participant characteristics

n=33



Stakeholders	Gender	Years of practice	Education*	Countries#
AP RTTs	10 4	4-30 RTT/ 2-16 AP	10 MSc RT (1) 8 MBA/MSc (2) 4 MSc Radiation 7 PhD RT (3) 3 MSc Health (1) 3 other MSc 4 other PgD/C	ENG/NL BE/PT/CH FI/NI/IT/DK NO/MT/LV PL/IE/DE/EE
Managers	3 3	5-19 management		
Educators	1 3	13-35 education		
Students	2 1	4-18 RTT		
Professional body	2 2	4-40 RTT		
Regulators	1 1	4-5 regulation		

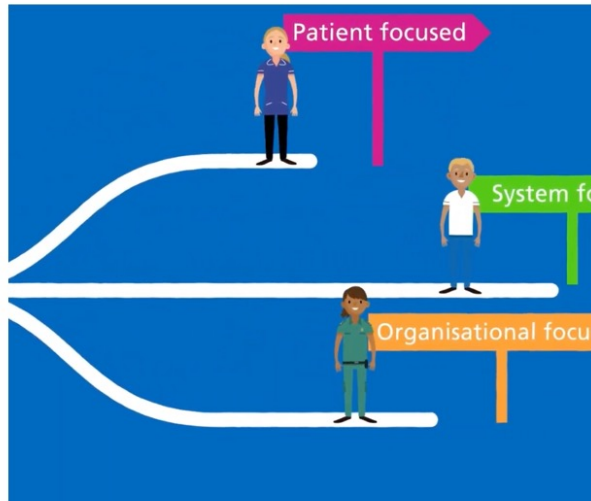
#16

* Some participants have undertaken more than one Master
 # Few participants work or study in different countries
 () Degrees in progress

Themes & subthemes: I & II



AP drivers & outcomes



- Clinical
- Professional
- Organizational

AP challenges & enablers



- Governance & role development
- Workforce & organization
- Practice across 4 pillars
- Education & training

Themes & subthemes: III & IV



Current vs future AP



- Clinical practice
- Education
- Leadership & management
- Research

Becoming & being advanced practitioner



- Development of competence & capability
- Professional maturity
- Challenging professional boundaries
- Pioneering innovation

AP requirements



Masters'
degree

73%

Professional
experience



58%

Current vs future AP roles



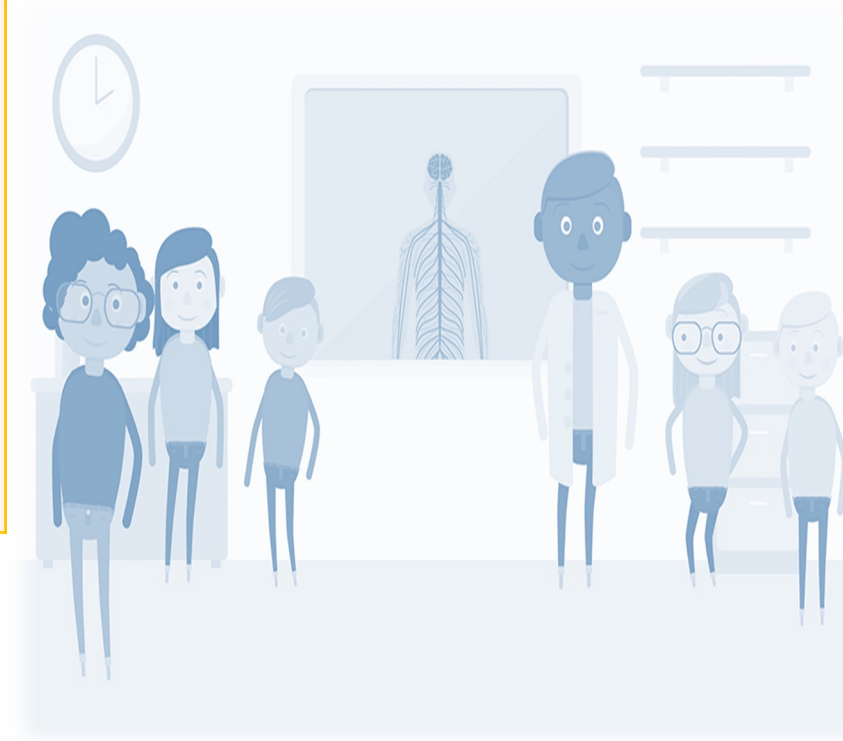
AP pillar	Current roles	Future roles
Clinical practice	Site-specific roles* Pre-planning/pre-treatment lead Advanced dosimetrist Brachytherapy lead Technique-specific roles# Clinic reviewer Wound care lead Paediatrics lead Palliative care lead	Site-specific*/consultant roles Advanced clinical practitioner in RT + Chemo Holistic care lead Technique-specific roles# Community lead Precision oncology lead
* site-specific roles: breast cancer, palliative care; # technique-specific roles: IGRT, ART, SRS, SABR, proton therapy.		



Current vs future AP roles



AP pillar	Current roles	Future roles
Education	Supervisor/ clinical demonstrator	Clinical-academic role
	(Post)graduation lecturer	
	Education manager RTT	
	Trainer in IGRT	
	Patient educator	
	CPD programmes lead	



Current vs future AP roles



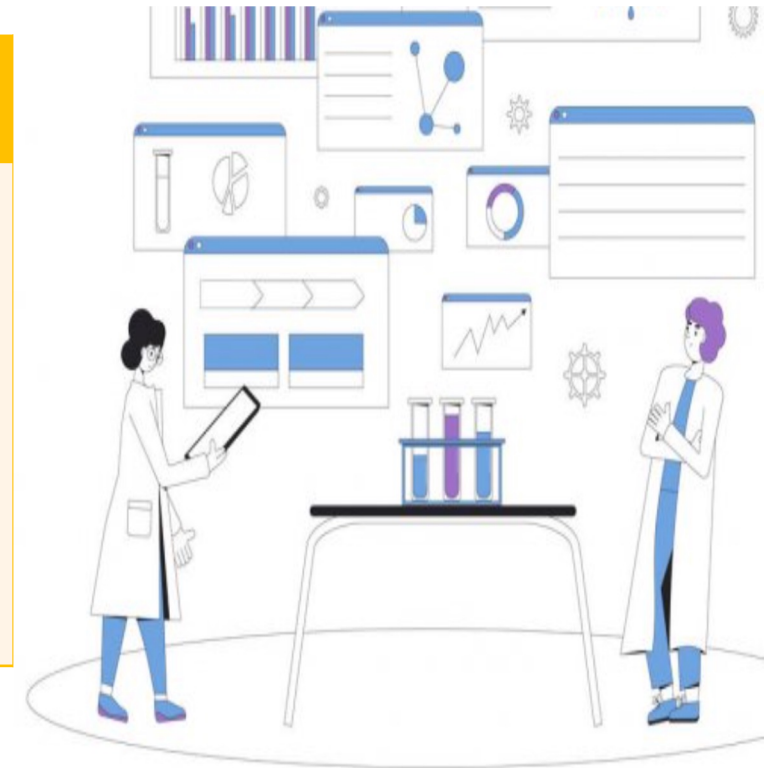
AP pillar	Current roles	Future roles
Leadership & management	Care manager Local risk manager Quality manager Project manager Chair of working group Recruitment lead RTT sub-chief manager	Radiation protection officer



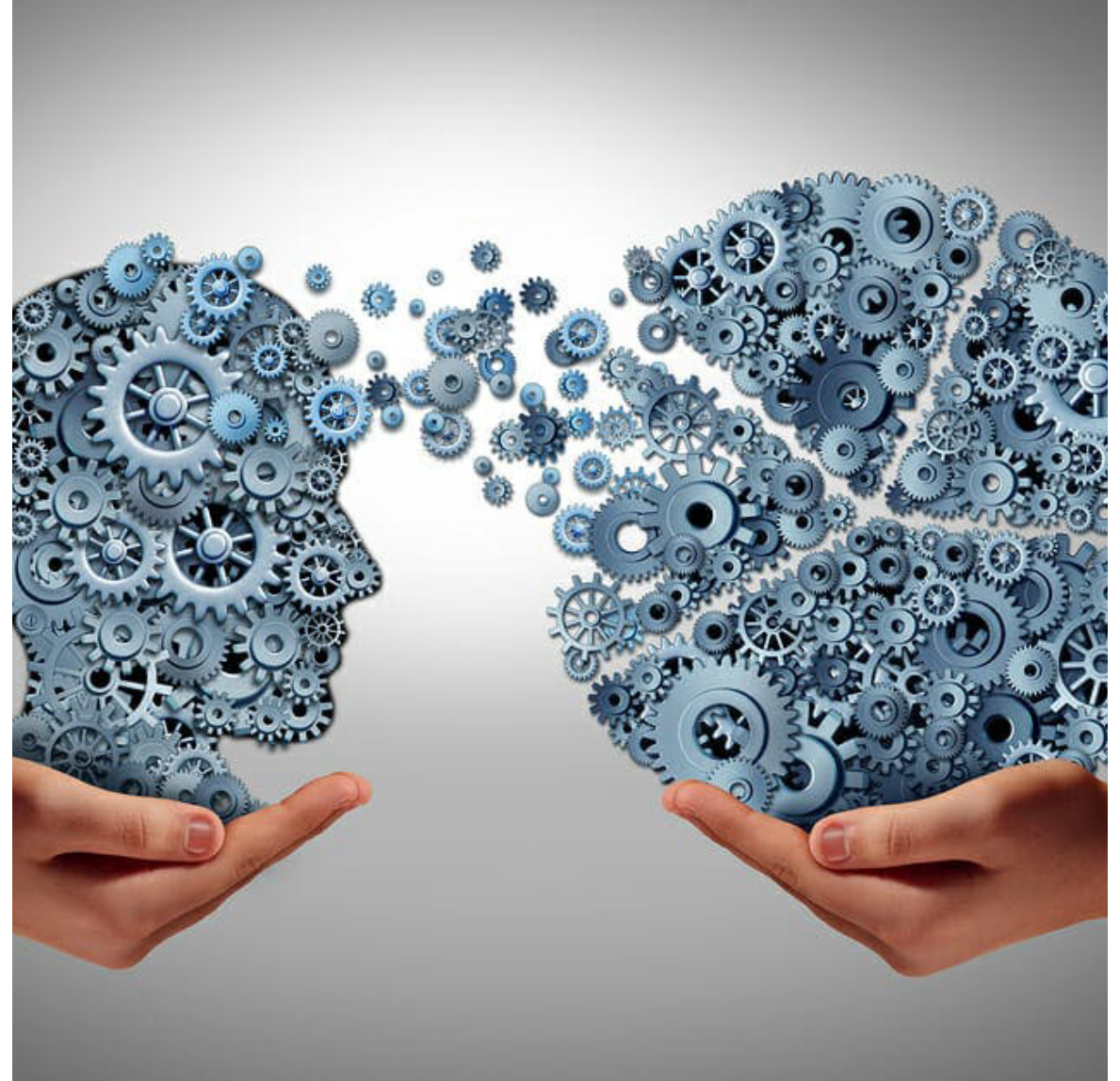
Current vs future AP roles



AP pillar	Current roles	Future roles
Research	Research officer Clinical trials investigator Service development lead Research and development lead	Artificial intelligence expert



***Becoming...
Advanced
Practitioner!***



Development of competence & capability



Clinical Practice	<ul style="list-style-type: none">•Clinical examination & reasoning: prescribing, referral•Case-based discussion•Evidence-based judgements•Self-awareness practice•Patient-centred care: holistic assessment
Education	<ul style="list-style-type: none">•Patient education: empathy, active listening•Teaching & supervision: evaluation•Coaching & mentoring: patience, confidence•Interprofessional training•Self-direct learning: lifelong and reflective learning
Leadership & Management	<ul style="list-style-type: none">•Interprofessional collaboration: organisation, chairing meetings, group discussion•Management: time, team, conflict resolution, stress, project, finance planning•Leadership: motivation, persuasion, strategic planning, influence change
Research	<ul style="list-style-type: none">•Research & service development: innovation, peer review, auditing, analytical skills, statistics, ethical reasoning•Dissemination: academic writing, presentation skills•Interdisciplinary collaboration: networking
Soft skills: interpersonal, expert communication, assertiveness, teamwork, emotional intelligence, resilience	
Hard skills: role-specific skills (with adaptability), technical proficiency (with problem-solving, quality improvement)	

Advanced skills & capabilities

Soft & hard skills

Professional maturity



Expert practice

**Confident
Independent
Autonomous**

**Problem solver
Role model
Decision maker**

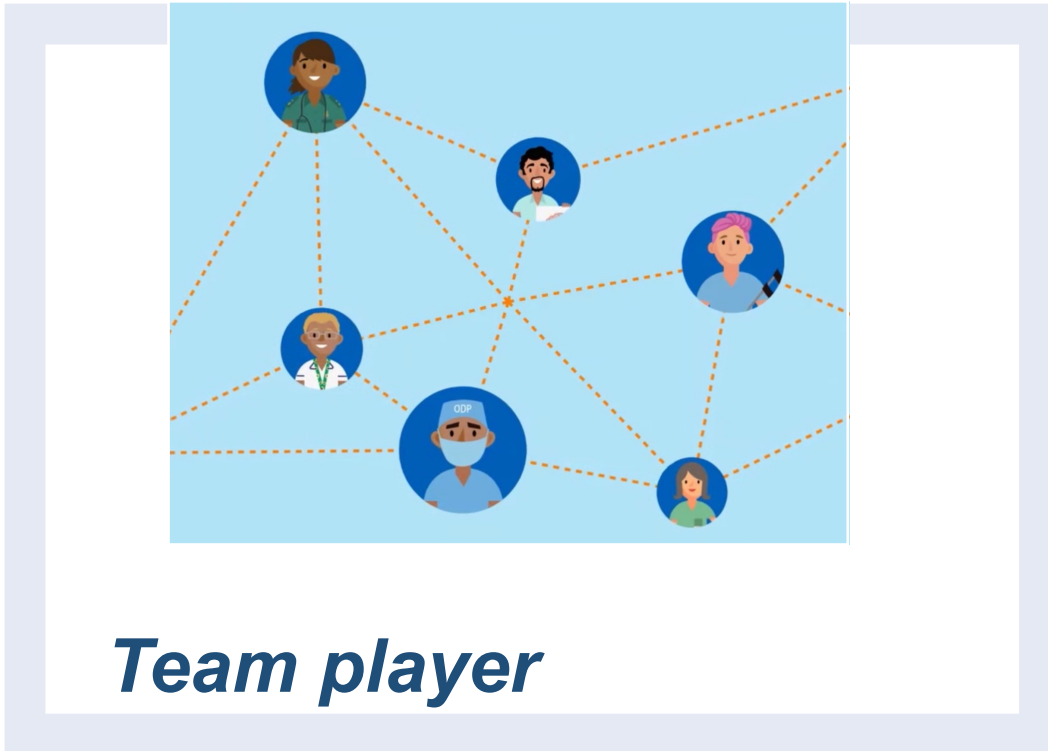


So, my students get sick of me saying that: "You are not to be the Jack of all trades, and the master of none. You have to be the master of what you do". (E#2 ENG)

***Being...
Advanced
Practitioner!***



Challenging professional boundaries



**Conflict
resolution**

**Trusted &
respected
professional**

**Recognition &
identity**

***How far does
somebody move from
doing what is
originally seen as part
of that profession
before they're no
longer in that
profession anymore?***

R#2 ENG

Pioneering innovation



Innovative leader

Critical thinker
"Think outside the box"

Influencing & transforming

Networking & collaboration



You need to have a different way of thinking about things; more problem-solving, critical, analytical way of looking at your practice. P#2 NIR

Take-home messages



- ☐ AP RTT is still an emerging professional profile – implemented at different levels across Europe and in constant evolution
- ☐ Becoming/being AP:
 - ☐ specialist skills in each pillar + soft&hard skills that apply across all pillars
 - ☐ Maturity
 - ☐ Link between the MPT elements
 - ☐ Reference and transformative
- ☐ Regulation is critical to protect patients & professionals across Europe
- ☐ Recognition of the positive impact of APs is essential to accelerate its implementation



☐ All interviewees!!!



☐ EFRS support: Jonathan McNulty, Charlotte Beardmore, Eric Sundqvist, Altino Cunha, Ann Marie Martin.



☐ ART support: Filipe Moura



Celeste Oliveira- PT
Bárbara Barbosa- PT
Guilherme Couto- MT
Isabel Bravo- PT
Ciara Hughes- UK
Sonya McFadden- UK
Ricardo Khine- UK
Helen McNair- UK



