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Description: MI Advanced Practice/Role Expansion

Title: Consultant Practice in the UK: What can we learn in Australasia about changing role boundaries?

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Purpose:
This paper reports on a College of Radiographers Industry Partnership Scheme (CORIPS) funded project, based in the UK, exploring the role of the consultant radiographer.

Methods and Materials:
An in-depth longitudinal case study over two years was used to explore a number of aspects of consultant practice. Data was collected from a number of sources: open and in depth interviews, reflective diaries, coaching sessions and an objective leadership measurement tool.

Results:
(i) Key obstacles and challenges were shown to include: a lack of clarity in role structures, individual resistance to development, a lack of confidence in the higher level role (not related to clinical practice), a lack of support (especially when newly appointed) and a lack of feedback on performance over time. Some of the barriers and challenges reduced over time raising interesting issues around role transition and suggestions were made as to how to improve the transition of future practitioners to new roles.

(ii) Professional development needs highlighted the necessity to be proactive in development planning and a particular need for more leadership development was identified. Clinical expertise was not felt to be the key area where development was required, but across the other areas of practice: research, strategic development and managing difficult contexts were particularly highlighted as areas that required further development.

(iii) Recruitment was often associated with a particular individual in a clinical role. Key drivers were found to be around career choice, personal challenge and making a difference. It was perceived that changes to role boundaries had to be driven clinically, with support from academic institutions and the professional body. A passionate interest in the area of practice, higher levels of responsibility and autonomy and a perceived variety in the day to day role (along with continual development of the role) kept consultants satisfied over time, while the thought of: a lack of being valued, a lack of a positive environment, a lack of variety in practice, making a significant mistake and lack of trust or autonomy, were given as reasons as to why consultants might leave their post.

Conclusions:
The paper outlines some of the key issues around the three areas highlighted and offers some suggestions as to how this information could be used to influence, attract and retain radiographers at a higher level in Australia and New Zealand.