



Scottish Clinical Imaging network

Scottish Radiology Transformation Programme (SRTP)

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

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Contents

Introduction	3
History	3
Uses	3
Updates	3
PART ONE: Example of a typical Risk Assessment.....	4
PART TWO: Method of implementing changes to Assistant Practitioner (Radiology) Scope of Practice Flowchart.....	5
PART THREE: Supporting Document: Scope of Practice – Assistant Practitioners Radiology	6
Examinations within the scope of the Assistant Practitioner:	6
Practices outside the scope of Assistant Practitioners.....	7
Roles and Responsibilities.....	7
Record Keeping	7
PART FOUR: [NHS Health Board] Assistant Practitioner in Radiology: Individual Scope Of Practice	8
PART FIVE: Generic Job Description Template for Radiography Assistant Practitioners in Scotland.....	10
References.....	17

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

Introduction

History

SCIN, NES and SRTP have collaborated in the development of this pack. Input has come from Radiology Managers and an IR(ME)R Lead, Society of Radiographers Professional Officer for Scotland and Society of Radiographers Professional Officer for Clinical Imaging (London). They have had approval by Imaging Executive Board Clinical Reference Group, (confirmed 20th October 2022).

Uses

It is thought this information will provide a safe and thorough pathway to record the Scope of Practice for the Assistant Practitioner (AP). The following information has been made to assist Radiology Managers when employing a new Assistant Practitioner and when developing the Scope of Practice of an existing AP. This will also be useful for providing a clear understanding of what is and what is not within the Scope of Practice of each individual AP.

When used, it is expected that each Health Board will adapt and attach local Headers and Footers to documents.

Updates

It would be advised this pack will be reviewed by SCIN every two years. As this document will evolve over time any thoughts, comments on suggestions would be helpful.

Please feedback information to: nss.scin@nhs.scot.

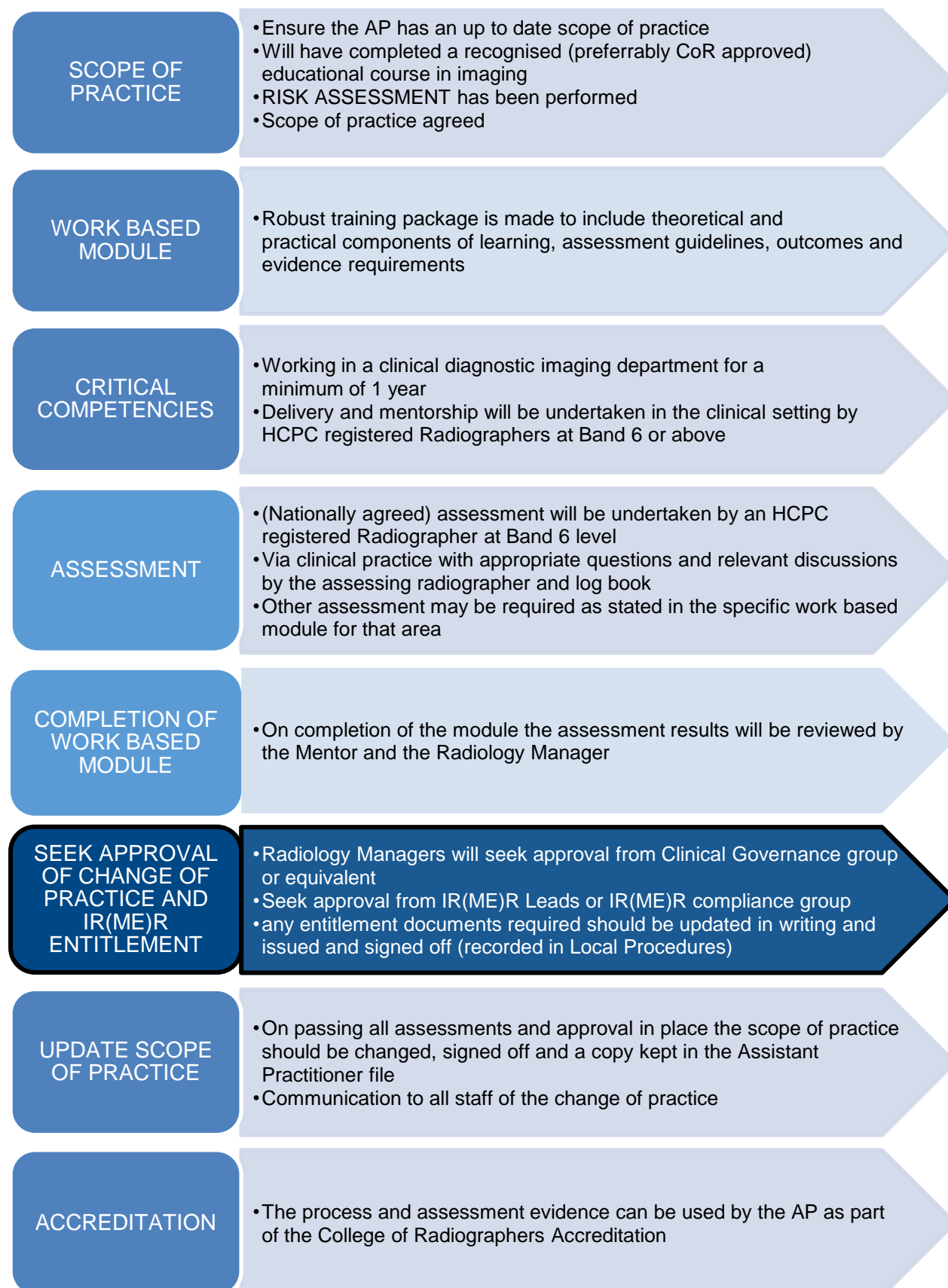
PART ONE: Example of a typical Risk Assessment

Risk Assessment for Assistant Practitioner extending scope of practice on completion of:

Unit Title: Plain film image appraisal, (leading to the patient being discharged from Radiology, where images are being seen by a clinician prior to the patient being discharged from the clinical area)

Concern/Risk	Who could be affected	Risk controls in place	Risk assessed as	Further actions to control risk
Assistant Practitioner is not registered with HCPC	Staff and patients	Training programme and Experiential learning. Scope of Practice. Supervision by a radiographer. Competency sign off.	Low	1. Accredited with College of Radiographers. 2. Extended Scope of Practice updated and approved. 3. CPD to evidence learning.
Radiation risk from excessive repeat images	Patients	Training Programme and experiential learning >1year. Supervision by a radiographer. Competence Assessment completed	Low	1. Accredited with College of Radiographers. 2. Extended Scope of Practice updated and approved. 3. Regular Audit. 4. Evidenced by CPD.
Investigation risk from incorrect examination	Patients	Assistant Practitioner is > 1 year in post and has undergone experiential learning during this time	Low	As above 1-3, in addition referrer is available for discussion prior to examination and reviews images immediately
Uncertainty around complex views	Patients	Indirect supervision by radiographer. >1 year experiential learning.	Low	As above 1-3, in addition referrer is available for discussion prior to examination and reviews images immediately

PART TWO: Method of implementing changes to Assistant Practitioner (Radiology) Scope of Practice Flowchart



PART THREE: Supporting Document: Scope of Practice – Assistant Practitioners Radiology

An Assistant Practitioner performs protocol-limited clinical tasks under the direction and supervision of a registered practitioner. (SoR - <https://www.sor.org> Scope of Practice of Assistant Practitioners 2012)

Assistant Practitioners differ from general support workers in that they have completed a recognised Certificate or Diploma in Radiographic Studies or equivalent, they will continue to perform limited clinical imaging under supervision or a registered practitioner.

Examinations within the scope of the Assistant Practitioner:

Lower Limb

Foot
Ankle
Weight Bearing Foot and Ankle
Tibia and Fibula
Knee
Skyline Knee
Horizontal Beam Knee
Weight Bearing Knee
Long Leg Imaging of Hip/Knee/Ankle

Upper Limb

Hand and Fingers
Wrist and Scaphoid
Forearm
Elbow
Shoulder

Axial Skeleton

PA and Lateral Chest
Cervical Spine (non-trauma only)
Pelvis
Weight Bearing Pelvis
Lateral Oblique Hip
Horizontal Beam Hip
Abdomen

All Patients examined by the Assistant Practitioner shall be:

- Ambulant
- Co-operative
- NOT require adaptation of technique
- Under the direct supervision of a Registered Radiographer entitled as an Operator under IR(ME)R2017

An Assistant Practitioner on realising an examination will require adaptation of technique will inform a supervising Radiographer who will take over.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

Practices outside the scope of Assistant Practitioners

Mobile x-ray units when remote from the department

Mobile Radiography is likely to require adaptive technique, and a temporary controlled area – IR(ME)R 2017 states this must be the responsibility of an Operator, therefore out with the scope of practice of the Assistant Practitioner.

An Assistant Practitioner may however assist a Radiographer in mobile Chest Imaging.

Fluoroscopy

The patient condition needs to be continually assessed and radiation exposure to determine if prolonged exposure can be justified. Justification is the responsibility of a Practitioner IR(ME)R 2017.

Roles and Responsibilities

- All Request forms must be justified by a registered practitioner prior to the examination commencing.
- Assistant Practitioners will work under the direct clinical supervision of a qualified Radiographer – *Direct clinical supervision = Radiographer working in the immediate area.*
- Supervising Radiographers will be responsible for Authorisation of the request form and decisions regarding repeat/additional views.
- Assistant Practitioners are responsible for the tasks they undertake and should alert the supervising Radiographer if a situation arises that they are unfamiliar with or which they consider is outside of their competency to practice.
- Assistant Practitioners will not supervise Students.
- Assistant Practitioners will undertake CPD activities and keep accurate records, this will be assessed twice a year at employee appraisal meetings.
- Assistant Practitioners will participate and assist in departmental audits as required.

Record Keeping

- The Assistant Practitioner will enter details on generic CRIS or RIS system in the following order:
 - Authorised by – This is the HCPC Registered Radiographer who has authorised the examination or has vetted the DXA request.
 - Operator 1 – This is the name of the Assistant Practitioner/Radiographer who carried out the practical aspects of the examination.*
 - Operator 2 – This is the HCPC Registered Radiographer who checked the images produced if required.*

**suggestion*

PART FOUR: [NHS Health Board] Assistant Practitioner in Radiology: Individual Scope Of Practice

Assistant Practitioner:	
Contact Number:	
Email:	
Base Hospital & Department:	

What date did you complete your imaging qualification?	
What qualification did you receive?	
Direct Line Manager	<i>Name,</i> Deputy Radiology Service Manager, <i>Telephone number,</i> xx.xx@xxx.scot.nhs.uk
Clinical Director	<i>Dr Name,</i> <i>Telephone number</i> xx.xx@xxx.scot.nhs.uk

SPECIALTY/ MODALITY	Core Area	Name and Date of Qualification achieved	Approved by: (signature)
Standard Radiographic Imaging of cooperative patients. (In keeping with Gillick competence)	Appendicular skeleton Axial skeleton excluding trauma skull and trauma cervical spine Chest and thorax Abdomen and pelvis		

Additional scope of practice gained:

SPECIALTY/ MODALITY	BODY PART & CLINICAL HISTORY	Date of completion of training and assessment	Approved by: (signature)
Orbits	Prior to MRI scanning to exclude the presence of metal foreign bodies		
Paediatric 'Gillick competent'	*Specific parameters		

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

SPECIALTY/ MODALITY	BODY PART & CLINICAL HISTORY	Date of completion of training and assessment	Approved by: (signature)
Quality Assurance checks			
AP erect chest x-ray			
Dental Radiography OPT (adults only)			
Plain Film Image Appraisal - leading to discharge of the patient from x-ray department*	*Only where images are being seen by a clinician prior to patient being discharged from clinical area. * Strict parameters defined *Technical appraisal only		
AAA scanning			
DEXA scanning			
Exclusions (please specify)	Major trauma		

Assistant Practitioner, Name: _____

Signed: _____ Date: _____

Scope of Practice Approved by the Clinical Lead or Responsible Officer and Medical Director of employing Board on the basis that the individual is deemed competent to undertake this scope of practice in the employing Board.

Clinical Lead, Name: _____ **Title:** Clinical Lead for Radiology, (name of site)

Signed: _____ Date: _____

Medical Director, Name _____

Signed: _____ Date: _____

IR(ME)R 2017 Lead: Name _____

Signed: _____ Date: _____

At each Change in Practice:

Copy to be kept by Assistant Practitioner

Copy to be kept in Assistant Practitioner personal file

Clinical Governance Approval of Change in Practice confirmed

IR(ME)R 2017 Entitlement Document updated as required – Also copy to Assistant Practitioner

PART FIVE: Generic Job Description Template for Radiography Assistant Practitioners in Scotland

1. JOB DETAILS

Job Title: Assistant Practitioner in Diagnostic Radiography

Pay band: Agenda for Change Band 4

Responsible to: *Specialist/Senior Radiographer (change as appropriate to local standard of practice)*

Department(s): Radiology

Directorate: Diagnostic Services

Health Board:

Job Reference:

2. JOB PURPOSE

Under the guidance of the *Specialist/Senior Radiographer (change as appropriate to local standard of practice)*, provide a prescribed, protocol-limited imaging service to non-complex, ambulant adult patients within the locally agreed scope of practice of an Assistant Practitioner.

To carry out agreed and competency based imaging procedures to a consistently high standard, professionally and efficiently following departmental procedures within the agreed scope of practice to deliver a quality service.

To have knowledge of own scope of practice and to work within the scope of practice of an Assistant Practitioner, under the indirect and direct supervision of a HCPC registered Radiographer. The post holder must understand the roles and responsibilities of an Assistant Practitioner for effective service delivery.

Enhance Radiology Services within a limited & agreed Scope of Practice

Operate in a stationary/rotational Assistant Practitioner role as required to meet demand of local service needs. *(delete Stationary/Rotational role as appropriate)*

3. DIMENSIONS

Clinical Areas: (to be inserted as appropriate to role) eg. A&E, Orthopaedic Department.

Clinical Activity: (to be inserted as appropriate to role) eg. 100,000 examinations per annum.

Clinical Provision: (to be inserted as appropriate to role) eg. 7.5 hours a day, 365 days a year. Rotational/ shift work/overtime may be required.

Staff Responsibility: Radiographers will direct the workload of the post holder depending on the needs of the patients, department, and service.

The Assistant Practitioner will be expected to:

- Work as per the individuals' scope of practice to meet local departmental and service requirements, where the assistant practitioner has undergone robust, appropriate training to advance their individual scope to any additional areas of practice.
- Work under indirect supervision in areas where they have gained competency, reporting to Specialist Radiographer or Consultant Radiologist if required.
- Work under direct supervision in more specialist areas.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

- Undertake further training in agreed areas of imaging as the service requires.
- Demonstrate own skills to students and other staff as required.
- Work within standard operating protocols, defined policies, procedures and standards of the doctorate and division to ensure maintenance of safe working practices for patients and colleagues.

4. ORGANISATIONAL POSITION

(See below an example of an organisational position- amend as appropriate for local health board)

Radiology Service Manager
Principle Radiographer
Team Lead Radiographer
Specialist Radiographer
Radiographer
Assistant Practitioner
Radiology Department Assistant

5. KEY DUTIES/RESPONSIBILITIES

- To be able to conduct, under the supervision of a *Specialist/Senior Radiographer (change as appropriate to local standard of practice)*, a specified range of uncomplicated general radiographic examinations upon a pre-determined range of patient type.
- Ensure that images acquired are accurate and diagnostic in accordance with best practice and in a manner that meets professional, departmental and legal standards/requirements, taking into account patient limitations.
- Work within standard operating protocols, defined policies, procedures and standards of the doctorate and division to ensure maintenance of safe working practices for patients and colleagues.
- Work within the Ionising Radiation (Medical Exposure) Regulations (IRMER) 2017 guidelines, functioning as an 'operator' within these.
- An understanding of the principles of informed consent for radiographic examinations.
- Maintain a high level of expertise in the safe operation of radiography equipment used by the post holder and report faults to senior staff.
- Assist colleagues in moving and handling of patients to ensure a safe environment, whilst ensuring patient safety and well-being whilst in the department.
- Liaise with fellow healthcare workers and referrer clinicians to provide a high quality imaging service to patients.
- Work as part of a team to ensure effective communication with patients, relatives, carers and other members of the multidisciplinary team, ensuring any observed changes in the patient's condition are effectively communicated.
- Maintain accurate patient records by the input of accurate information on the *RIS/Trak/CRIS etc system (Delete as appropriate for local health board)* to reflect the service including personal information and patient dose details.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

- To identify and advise *Specialist/Senior Radiographer (change as appropriate to local standard of practice)* of room or departmental needs.
- Ability to comment on departmental policies and propose changes to working practices/procedures that will improve quality and patient care.
- Undertake any task deemed appropriate by Radiology Service Manager involving mandatory training, clinical governance, clinical effectiveness, quality issues and health and safety.
- Undertake quality assurance tests in compliance with statutory and manufacturer guidelines.
- To ensure that images are diagnostic and acquired in accordance with best practice.
- Contribute to the review and implementation of departmental and professional policies and procedures, for example Health and Safety including risk assessment and COSHH, Radiation Protection Procedures, Ionising Radiation Regulations (IRR) and IRMER 2017.
- Encourage compliance with professional body guidance such as the CoR Education and Career Framework (2022).
- Maintain knowledge of technological and technical advances in methods of diagnostic imaging in order to promote a culture of continuous improvement within the department.
- To support NHS (*insert name of Health Board here*) 's values of (*insert values of aforementioned Health Board here*) through the application of appropriate behaviours and attitudes.
- Participate in mandatory training and seek personal development under the guidance of the Team Leader.
- Required to undertake regular continuous professional development (CPD) and clinical audit of own work. Organise data for and participate in departmental audit and quality improvement initiatives.
- Align own practice with principles of evidence-based practice, and inform evidence-base where possible.

6. EQUIPMENT AND SYSTEMS

Equipment:

The post holder will be expected to carry out clinical work using a variety of imaging equipment within their own area of responsibility and other areas as required.

Radiographic equipment ranges in price from £30,000 to £1 million.

The equipment is operator dependent and requires specific skills to achieve images of a diagnostic quality.

The following are examples of equipment which will be used when undertaking the role:

- General radiography equipment- ceiling suspended tubes, fall and rise tables, operator console etc.
- Radiography accessories- cassette, detector, stationary grid etc.
- Patient hoist, Zimmer frame, Sam Hall turner and other manual handling aids.
- Patient trolleys, beds, wheelchairs, pat slides, glide sheets, oxygen etc.
- Radiography workstations and consoles- used to process, manipulate, archive and retrieve images.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

New equipment may be introduced as the organisation and technology develops, however appropriate training will be provided.

Systems:

The post holder will be expected to:

- Use the *RIS/Trak/CRIS system (change as appropriate to local standard of practice)* and Picture Archiving and Communication System (PACS) in an accurate manner whilst adhering to the Data Protection Act and departmental procedures.
- Risk assessment and incident reporting systems
- Update patient records and carry out post processing of images and patient data.
- Access the internet and trust Intranet for relevant information for personal and professional development within statutory guidelines.

New systems may be introduced as the organisation and technology develops, however appropriate training will be provided.

7. ASSIGNMENT AND REVIEW OF WORK

Demands for diagnostic imaging are generated by the specific service needs of each clinical area and the Assistant Practitioner must plan and prioritise their own workload.

Specialist/Senior Radiographer (change as appropriate to local standard of practice) will be available to consult and provide direct supervision and training. Senior staff will delegate other non-clinical tasks.

Senior staff will undertake appraisal in order to agree an annual performance development plan.

Delegation of work:

Senior staff will delegate both clinical and non-clinical work to the Assistant Practitioner as per local service needs and individual's own scope of practice. The Assistant Practitioner must be deemed competent to undertake delegated task and feel confident in their ability to complete the delegated task to meet the required standard. In addition to this, the Assistant Practitioner must feel comfortable to refuse the delegated task if they feel it is inappropriate for their level and would lead them to be operating outwith their scope of practice.

Tasks should only be delegated to an Assistant Practitioner that are believed to be within that person's skill-set. The Radiographer/Radiologist delegating the task should also be competent in said task to ensure appropriate support can be provided to the Assistant Practitioner if required.

8. DECISIONS AND JUDGEMENT

To know own limitations and ask for advice/guidance when required.

Consult with *Specialist/Senior Radiographer (change as appropriate to local standard of practice)* prior to patient exposure if there are any concerns that imaging may be out with the agreed scope of practice.

Prioritise own patient workload as allocated by *Specialist/Senior Radiographer (change as appropriate to local standard of practice)*.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

Delegated responsibility of monitoring consumables and advising radiographic staff when supplies need replenishing.

To be able to assess events, problems or patient conditions in detail to determine the best course of action. If a patient becomes unwell in the care of an Assistant Practitioner, the Assistant Practitioner must make the call whether immediate medical assistance is required.

9. COMMUNICATIONS AND WORKING RELATIONSHIPS

Patients:

- Provide information by explanation of often complex procedures and listening to patient's requirements in return.
- Communicate with patients in a sympathetic manner explaining the procedure to encourage cooperation in the examination in order to acquire images of diagnostic quality using the lowest radiation dose possible.
- Ensure the well-being of patients in our care.
- Provide assistance and reassurance to patients awaiting examinations.

Relatives/Carers:

- Provide reassurance and receive information. Ability to answer queries or seek Specialist Radiographer assistance if required.
- Ask for assistance with, and instruct methods of immobilisation, maintaining radiation protection.

Departmental Staff:

- To liaise and communicate effectively with all colleagues in a professional manner, thus promoting good relations and a positive working environment. The post holder will liaise with staff from all departments trust-wide.
- Consult senior radiography staff (Specialist Radiographers and Consultant Radiologists) for advice.
- Work closely within the multidisciplinary team, relaying important patient information when necessary.
- Liaise with all departments, wards, fellow radiology colleagues and portering staff regarding patient movement, patient transfers, examination times and examination preparation.
- Seek help and advice with patients who are immobile or in pain.
- Assist nurses who are working in the radiology department if required.
- Assist Consultant Radiologists during imaging procedures.

10. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical Effort:

- Handle and move radiography equipment, stretching, pulling and pushing ceiling suspended equipment; bending, twisting and carrying light weights several times every shift.
- Move wheelchairs, patient beds, and trolleys. Transferring patients from bed to couch using appropriate manual handling techniques and equipment while

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

minimising discomfort/distress experienced by the patient, frequently every shift.

- Wear protective lead clothing weighing 3-5kg when required during radiological procedures.
- Assist patients to stand and transfer, ensuring patient safety and own safety employing appropriate manual handling techniques.

Mental Effort:

- The post holder is required to concentrate for long periods of time on every examination throughout the shift.
- The nature of the work and workload is unpredictable as each case is individual and varies per shift from routine outpatient to critically ill inpatient.
- Need to read and understand clinical information, decide on appropriate examination, check patient data, position patient and evaluate exposure factors, process and evaluate image for diagnostic quality and seek *Specialist/Senior Radiographer (change as appropriate to local standard of practice)* advice when necessary.
- There are frequent interruptions, particularly at busy periods with the post holder is expected to cover several areas.

Emotional Effort:

- The post holder will routinely be required to assist with the imaging of sick and distressed patients as well as communicating effectively with relatives and carers in potentially challenging scenarios. Other patient groups that may cause distress are terminally ill patients, severely injured patients and those who have suffered child/domestic/other abuse. These scenarios may be encountered several times per week.

Working Conditions:

- The post holder will be exposed to body odours, body fluids and foul linen several times a week with several occurrences on each relevant shift.

11. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

Higher National Certificate in Assistant Practitioner Diagnostic Imaging or equivalent, plus:

- Evidence of significant clinical training in Diagnostic Imaging including completion and sign-off of training portfolio demonstrating experience and competency to undertake the radiographic procedures required of the Assistant Practitioner role.
- Effective communication skills
- Ability to follow instructions and a willingness to learn
- Willing to work within a multidisciplinary team
- An enthusiastic and caring nature
- Ability to advocate for own patients when required
- Good interpersonal skills
- Capability to utilise problem-solving skills and demonstrate accountability in own practice.

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

- Ability to carry out delegated responsibilities within a dynamic clinical environment
- Recognising ones own limitations while consistently appraising own practice
- Have awareness of equality and diversity needs to deliver person-centred care to all service users
- Team worker
- Previous experience working in a healthcare (preferably radiology) environment
- Basic keyboard skills
- Mandatory training such as manual handling and basic life support
- Infection prevention and control principles
- Leadership styles and behaviours
- Understanding of risk versus benefit principle in relation to the biological effects of ionising radiation

12. JOB DESCRIPTION AGREEMENT

The post holder commits to having read the job description for their role and agrees to work in accordance with said job description and agreed scope of practice.

Post Holder's signature: _____

Date: _____

Radiology Manager's signature: _____

Date: _____

Scottish Clinical Imaging Network

Radiology Assistant Practitioner Scope of Practice Pack for use by Radiology Managers in Scotland

References

[Developing-career-pathways-for-diagnostic-imaging-support-worker-roles \(sor.org\)](#)

[Education and Career Framework for the Radiography Workforce | SoR](#)

<https://www.legislation.gov.uk/ukxi/2017/1322/contents/made>

[College of Radiographers Education and Career Framework for the Radiography Workforce \(4th edition\)](#)