

CASE STUDY: AHPs working differently.
Radiology Team
Countess of Chester Hospital

Summary: Developed Assistant and Advanced Practitioner roles in the Radiography Team.

Key Themes:

- ▶ Development of new roles at Bands 1-4
- ▶ Development of new advanced roles

Which AHPs are involved?

- ▶ Radiographers

What setting does the service operate in? Acute settings.

Does the service work with Older People? Not specifically.

How did you identify the changes that needed to take place? Increased activity and demand for reporting radiological examinations with a shortage of radiologists.

When did you start making the change & how long did it take? This has been ongoing for the last seven years and continues to grow as the scope of practice grows.

How was the change funded? From existing budget.

What communication strategies were used to engage people in the change? Staff meetings/newsletters etc.

Were changes needed to the existing skill mix?
Yes

What have been the benefits? Increased capacity for reporting radiology examinations in plain imaging and nuclear medicine, and increased capacity for radiologists to do IR procedures.

What has been the response to change?
Excellent responses from all staff as people have seen that standards and quality for all roles have been extremely high.

New Bands 1-4 roles

What role is it? Assistant Practitioner in Radiography.

Was extra training provided to support the role?
Those in the role undertook a foundation degree.

What impact has the new role had on the service? Allowed the progression of radiographers into other advanced roles for reporting images with a cost effective backfill at band 4.

What are the responsibilities of the new role?

Completing plain x-rays and theatre imaging and nursing assistant in interventional radiology.

What is the benefit to other members of the team? Enable career progression for qualified radiographers and band 3 support workers.

Have there been any negative outcomes to team members or the individual from implementing this role? When first introduced the assistant practitioner role was originally met with negativity but now staff have seen the advantages of these roles, they welcome them.

Have there been resultant changes to skill mix or establishment? The establishment has remained the same but there has been a change in the skill mix.

New Advanced roles

What role is it? Advanced Practice reporting radiographers and radiographer led PICC line service.

Was extra training provided to support the role? Post graduate modalities and mentorship within the department.

What impact has the new role had on the service? Increased capacity for reporting radiology examinations and increased capacity for PICC lines.

What are the responsibilities of the new role? Reporting plain film x-ray, chest x-ray and reporting nuclear medicine examinations and PICC line service for the trust.

What is the benefit to other members of the team? Radiologists can concentrate on reporting the more complex cross-sectional images and the complex IR procedures

Have there been any negative outcomes to team members or the individual from implementing this role? No.

What difficulties did you face? Finding time for training and ongoing support has to be a priority otherwise they will not progress

What have you learnt from this process? With the right training and support for the individuals the skill mix can result in quality and standards for our patients remaining high.

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