HEART OF ENGLAND NHS FOUNDATION TRUST – RADIOLOGY
PROTOCOL FOR ASSISTANT PRACTICE

Background
The role of the Assistant Practitioner has been developed as a result of modernization and a developing workforce. Its introduction will address issues associated with recruitment and retention of radiographers and Radiologists, developing a workforce with a wide skill mix, and having a direct effect on the patient pathway.

The Assistant Practitioner will carry out a range of examinations, in accordance with this protocol, which will in turn support the advanced practice of Radiographers/Practitioners and allow Radiologist to undertake more complex examinations. It also provides potential career progression for radiology assistants following NVQ3 or equivalent, supporting the 9 tiers of the modernization model.

The aim is to provide a high quality service to the patient, which is both flexible and patient centred. The increase in skills mix, of which assistant practice plays a part, will enable this to take place.

In order for an Assistant Practitioner to Practice in the Heart of England NHS Foundation Trust Radiology Directorate, they must meet and abide by the following requirements.

Education
1. Assistant Practitioners must have successfully completed an accredited Assistant Practitioner course and have demonstrated clinical competencies to level 5.

Scope of Practice
2. They may only work within areas of practice in which they have achieved a certificate of competence. These areas may include plain film appendicular, plain film axial, plain film chest and abdomen, theatre and mobiles and fluoroscopy(non – interventional) If the full Foundation Degree is held, following training in this Trust, this will include the following:-
   - Plain film appendicular imaging – Level 4 and 5
   - Plain film axial imaging – Level 4 and 5
   - Fluoroscopy – Level 4 and 5
   - Theatre and Mobiles – Level 5
   - Plain film chest and abdominal imaging – Level 4 and 5 (Including IVU)
3. In cases where only modular certificates of practice are held, the Assistant Practitioner may only work within the restrictions of their agreed demonstrated competencies and qualification. Documented evidence successfully completing an accredited course must be available.
4. Delegation of a task by a Doctor, nurse or other healthcare professional does not provide an Assistant Practitioner with legal protection for undertaking skills for which competence has not been achieved.

5. The Assistant Practitioner should not perform Radiographic examinations on patients under the age of 18 years, in line with the Society of Radiographers guidelines, The child and the Law: The roles and responsibilities of the Radiographer.

Legislation
6. In all areas of practice the Assistant Practitioner will be defined as an Operator by the Ionising Radiation Regulations (Medical Exposure) 2000.

7. The Assistant Practitioner must adhere to Ionising Radiation (Medical Exposure) Regulations 2000 and Ionising Radiation Regulations 1999, local rules and Directorate / Trust policies and procedures at all times.

Induction
8. A full departmental induction will be carried out, which will include a 6 week period of preceptorship, during which time all radiographs produced by the Assistant Practitioner will be checked by a qualified Radiographer, and closer supervision will be provided. At the end of this preceptorship period a meeting will take place between the Assistant Practitioner and their line manager to discuss feedback from Radiographers and competencies. Any remedial action will be organised at this point.

Supervision
9. They will work at all times under the indirect supervision of State Registered (HPC) Radiographers.

10. The Assistant Practitioner should seek advice from a qualified Radiographer in all situations which deviate from routine protocol. For example when they need assistance with technique or in the application of imaging protocols or legislation.

11. Assistant Practitioners will be continually monitored by supervision of senior staff, routine departmental audit processes and the departmental image reporting process.

Professional / Technical
12. The Assistant Practitioner should ensure that standards of image quality are maintained at all times, and must refer to the supervising Radiographer if unsure.

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<td>Appendix 3 assistant practitioner scope of practice Jan 2011.docx</td>
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13. As HPC registration is not available currently to Assistant Practitioners, the Assistant Practitioner should register with the Society of Radiographers. Practice will not be allowed unless this can be proven to the Superintendent Radiographer.

14. A copy of evidence of this Registration should be stored in the individual’s personal file.

15. When HPC Registration is possible for Assistant Practitioners, the individual should ensure that they register and that this registration is demonstrated to the Superintendent Radiographer and a copy stored in the personal file.

16. The Assistant Practitioner is directly accountable to the supervising Radiographers, and in turn to their line manager

17. Assistant Practitioners should ensure that they continually develop and maintain a professional portfolio as evidence of CPD.

18. Their development will be based around the Knowledge and Skills Framework for the post, see Appendix A. Guidance will be provided through an annual professional development review.

19. Feedback will be given formally, where appropriate, ad hoc and through the professional review processes

Areas of clinical practice, subject to competencies will include the following:-

**Plain Film Radiography.**

- The Assistant Practitioner will work in all general Radiography areas, across the Directorate, as required, under the indirect supervision of a State Registered (HPC) Radiographer.

- In the first year following qualification, a high level of support may be needed when imaging trauma patients in Accident and Emergency or non ambulant in-patients. Assistant Practitioners will be provided with a mentor and can discuss support required with their line manager at induction review and appraisal.

- The assistant practitioner must ensure that they continually work in accordance with their competencies, and liaise with the senior radiographer, to ensure that they receive appropriate support.

- Assistant Practitioners will authorise the request cards of examinations they perform and carry out appropriate techniques as identified in the Radiology Standard Operating Procedures.

- It is the responsibility of the individual Assistant Practitioner to check their radiographs for accuracy and ensure that the images produced are of a high standard enabling the clinical question to be answered.
Appendix 3

-If Radiographic appearances deviate from normal appearances, or if additional projections and assistance is required, the Assistant Practitioner must seek assistance from qualified Radiographer.
-The Assistant Practitioner must ensure that radiation dose is as low as reasonably practicable, and that technique used is as per Radiology Standard Operating Procedures.
-The assistant practitioner is ultimately responsible for adherence to all Trust policies and procedures.

**Fluoroscopy**
-The Assistant Practitioner will work in fluoroscopy rooms, not interventional, and assist the Radiologist in performing the full range of fluoroscopic examinations.
-They have a key role to play in the smooth running and organization of the session and patient care.
-The Assistant Practitioner must adhere to all policies and procedures including radiation protection of all staff and patients.
-They must ensure that all LMP checks are performed and results acted upon accordingly in line with Departmental policies and procedures.
-The Assistant Practitioner must fully explain the procedure and ensure that all relevant preparation has been followed.
-They should seek advice from a Radiographer if they are unsure of any aspect of their work in this area.

**Mobile Radiography**
-The Assistant Practitioner will undertake the full range of mobile Radiography on the wards and in the Accident and Emergency department.
-In this instance they will work under the indirect supervision of the supervising Radiographer.
-The Assistant Practitioner will authorise requests and maintain radiation safety of both patients and staff in accordance with departmental Standard Operating Procedures.
-Trust and Departmental policies and procedures must be adhered to at all times.
-Radiographs produced must be of optimum quality and answer the clinical question.

**Theatre Radiography**
-The Assistant Practitioner should ensure that Trust and Departmental policies and procedures are adhered to at all times, and maintain the safety of staff and patients.
-They will undertake the full range of theatre examinations in both General and Orthopedic theatre under the indirect supervision of the senior departmental Radiographer.
-The Assistant Practitioner must challenge poor use of Ionising radiation and breach of protocols and bring this to the attention of a qualified Radiographer.
-In the first year following qualification, more support in this area may be required.
- The Assistant Practitioner must ensure that they continually work in accordance with their competencies and liaise with the Senior Radiographer to ensure that they receive appropriate support.

**Intravenous Urography**
- The Assistant Practitioner will undertake complete IVU examinations, including tomograms, performing radiographs at the direction of the supervising radiologist and in accordance with the Departmental Standard Operating Procedures.
- The Assistant Practitioner must understand the patient preparation and ensure that this has been followed.
- They must also explain the procedure fully to the patient.
- They will work under the indirect supervision of the senior radiographer.
- The Assistant Practitioner must ensure that Ionising Radiation (Medical Exposure) Regulations 2000 and Ionising Radiation Regulations 1999, policies and procedures are adhered to. They should seek advice from a qualified radiographer if they are unsure of any aspect of their work in this area.
- The Assistant Practitioner should be aware of potential allergic reactions.
- They should ensure that those assisting them are also aware of these possible reactions.
- The Assistant Practitioner must be aware of the emergency procedures and ensure that emergency drugs are available in within their expiry date.