

Professionalism in Therapeutic Radiography – the Therapeutic radiographers' perspective

jillianhayes@gmail.com



Introduction

- Empirically informed theoretical analysis of professionalism and its application to Therapeutic Radiographers (TRs) in the UK policy environment.



What?

- Detailed Theoretical analysis: Definitions of professionalism & policy environment
- Empirically assessment TRs application of professionalism to themselves
- Investigate contextual influences



Why?

- Professionalism at the forefront of policy environment in recent years
- NHS Next Stage review 2008
- Specific DH led reforms 1999, 2000, 2004, 2007,2008 - Increased & expanded roles for TRs
- Strategies underwriting the importance of high professional standards & CPD



Why?

- Emerging professionals (Sim & Radloff 2008, Nixon2001)
- Aim of establishing a professional profile of TRs (Adams & Smith 2003, Whiting 2009)
- Academic recognition – lack of common understanding of what is meant by "Professionalism"(Williams & Wilkins 1999, Swick 2000)



How?

- Extensive Literature review – national and international research
- Qualitative Research schedule
- Semi-structured interviews with registered practicing TRs in 5 different NHS radiotherapy departments





How?

- Ethical approval
- R&D permissions – site co-ordinators
- Opportunistic selection
- 12 Interviewees – data saturation
- Written informed consent
- 45 minute taped semi-structured interview – in person/telephone
- Transcription

 Inductive Analysis – patterns, themes, codes



Findings





Ideals of Professionalism & Professional Characteristics

- Difficult to define
- Respondent D “...you usually generalise...”
- Respondent H “...everybody has a different view of what a professional is...”
- All respondents ascribed to “...a manner adopted...” (Richardson 1999)
- Respondent J “...it’s a mannerism...the way you look...”

 Knowledgeable, degree, confident, competent, responsible, conscientious, pride



Ideals/Characteristics

- Community Service element of professionalism (Miller 1993)
- Transcendent value/devotion to good work (Freidson 2001)
- Respondent A “...being a therapeutic radiographers defines you essentially...you have people everyday..who are so grateful for what you do and what you do is so important to them...”





Ideals/Characteristics

- Expert Professionalism (Brint 1994)
- Respondent G “I have a specific knowledge...not anyone off the street can have (this) without doing the particular degree”.
- Social Trustee Professionalism (Brint 94)
- Respondent E “...I’d like to think that when someone is in my presence... That I’m able to make them more comfortable by my knowledge and attributes...”





Professional Practice

- Three respondents held roles of “advanced practice”
- Lower confidence levels expressed
- Respondent H “...generally as a treating radiographer (I have confidence)...it’s taken a while to get used to my new role and that confidence is building as I do more...I think with specialist roles it’s quite difficult as when you don’t really have guidance from other people...you’re basically building it up as you go along and you don’t always have someone there to help you...”



Professional Practice



- Highest levels of confidence were associated with on-treatment, imaging-led situations
- Respondent A "...when we are doing moves or justifying another exposure...it is the radiographer who justifies that and re-refers for it..."
- Respondent J "...we are radiographer-led now..."



Professional Practice



- Strong moral fibre / Evidence of commitment, devotion
- Respondent H "...the way you put aside prejudices.... And stick to protocols in order to treat them accurately... Reporting errors should they occur..."
- Respondent J "...it doesn't stop...not just from nine to five..."



Professional Practice



- Respondent E "...treating everybody the same way... You can't assume that someone has certain values or ideals..."
- Member ship of Professional body/existing in an Institution (Abbott 1988, Freidson 2001)
- Respondent J "...we are certified by a professional body and again we have to maintain competencies, maintain our knowledge and what have you to keep up with the profession..."



Professional Practice



- Professional knowledge "*is fed, energized and driven by individuals in their work, but its momentum can only be maintained through making it explicit*" (Higgs et al 2004).
- Each respondent described either personal or departmental research
- None produced any published research
- Etzioni 1969: Fully fledged professional status



Professional Practice



- Ideal Type Professional "...a knowledge that is too esoteric and complex to be understood spontaneously or to be trained quickly by the average person..." (Freidson 2001)
- "Judgements of quality for which they cannot state adequate criteria & display skills for which they cannot describe rules & procedures..." (Schon 1992)



Professional Practice



- General consensus "...most things are protocol-led...everything is there in black and white... but there are always patients who don't fit protocols..." Respondent C
- Professional judgement most related to treatment situations
- Respondent H "...when something happens & you least expect it...that's when you have to make on the spot decisions and act in a certain way..."



Professional Practice

- All respondents: High levels of accountability
- Respondent C "...on signing a form to say you've been involved in that planning or treatment... you're answerable to your actions..."
- Varying levels of autonomy reported
- Respondent K "...if professionalism is linked with autonomy...there are areas of practice that are not very autonomous...things can get a little routine and although you might always be acting professionally, you might not always be developing as a professional..."



Professional Development & Reform

- Distinct awareness of policy environment particularly on probing
- Agenda for change
- NRAG
- Towards Safer Radiotherapy (TSR)
- Respondent G "...the document TSR has had a huge influence on the working practice of this department...and obviously NRAG as well...I think they've given us huge things to work towards..."



Professional Development & Reform

- Consensus: Policy reform important for professional development
- However noted that many radiographers work in un-enriched roles
- Respondent C "...the opportunities are out there if you want them...if you're happy doing your day job you can get away with doing just that but if you want advanced practice roles...the options are there..."



Professional Development & Reform

- Some resistance to advanced roles
- Respondent B "... You can't have everybody out there wanting to role develop because then there's nobody to do the bread and butter..."
- Respondent D "...lack of remuneration...with significantly increased responsibility..."



Professional Development & Reform

- Discrepancies in opinion regarding the practice of CPD
- Noted variations between departments
- Respondent D "...CPD in general is great...however how it is achieved for everyone is unclear..."
- Respondent G "...what I'm finding here is CPD lip-service..."



Professional Development & Reform

- Respondent A "...I wish we had dedicated time for it because I think everybody is just so busy just doing their job that the chance to sit down and write a reflective piece about your day is slim to none..."



Professional Perspective

- Outward Professional Profile: Evidenced Complexities
- Respondent E "...I think people we work with directly have an appreciation of what we do...other health professionals aren't so knowledgeable..."
- Respondent F "...people know more about it nowadays...but they still tend to call us nurses..."



Professional Perspective

- Inter-Professional relations: varied between departments
- Respondent D "...it depends how the department is led..." whilst
- Respondent A "...it varies between departments...radiographers interact differently between departments...";
- Respondent F "...other health professionals should see us as equals...but that is not always the case..."



Professional Perspective

- Intra-Professional disquiet
- Respondent H "...I still think we are restricted by our hierarchy that we've always had...only set grades can do set things...which is kind of changing but is still always ultimately there..."
- Role Models



Conclusion

- Complexities around Professionalism
- Therapeutic Radiographers' are not immune to such debate
- Professional legitimacies
- Promote active debate and cooperative development



Challenges/Limitations Future Research

- IRAS Process
- Purely Qualitative Research study
- Sample size and representation
- Broad Topic
- Focus groups
- Practical policy perspective



Thank You!

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