Assistant Practitioners' (APs) Perceptions of their Role and Integration into the Radiography Workforce across England

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Abstract

In 2000, the NHS Plan set out the government's plans for investment and reform across the NHS. New ways of working led to the introduction of the Assistant Practitioner (AP) into the Career Framework at a level midway between the Healthcare Assistant and the Professional Practitioner. New ways of working in radiography resulted in a four-tier structure where the AP worked under the supervision of the Radiographer, however little published information exists on the integration of the AP role in radiography.

The aim of the study was to investigate the role of Assistant Practitioners (APs) in radiography from an AP perspective and to explore how their roles have been integrated into the radiography workforce across England. The study was conducted over three phases utilising a mixed methods design. Phase I was a scoping exercise in which n=112 radiography sites employing APs were identified through telephone contact to map the location of APs across England. A survey in Phase II distributed n=357 questionnaires with a response rate of n=167 (47%) to investigate the role of APs in radiography. Phase III utilised n=38 semi-structured qualitative interviews to extend the findings of phase II and explore perceptions and experiences relating to fitness for purpose, integration into the workforce and role development.

This study was the first of its kind to identify the integration of APs in radiography across England. Key findings depict the nature and variety of roles and responsibilities undertaken by APs in radiography and their geographical locations. Training and education of APs varied considerably across departments and included a range of educational qualifications. Supervision practices were varied and showed that some APs were performing roles considered to be outside their scope of practice under indirect supervision. Continuous changes in practice have left participants feeling uncertain about their future role as APs. A number of facilitating and constraining external and internal factors were identified.

The use of role theories informed the development of a role development model to support the AP role integration. The role development model proposes an integration of the person, individual, social and organisational identities of the AP. New findings have also identified a number of key areas that need to be considered when introducing new roles such as: recruitment strategies, educational standardisation, clinical support and supervision.