Position statement: Utilisation of skills across the professions of diagnostic and therapeutic radiography

June 2021
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There are two distinct radiography professions – diagnostic radiography and therapeutic radiography – using two distinct UK-regulated, protected titles from the Health and Care Professions Council (HCPC).

The Society of Radiographers (SoR) supports radiographers in identifying opportunities that benefit the service and service users through role development. Diversifying and expanding radiographers’ practice within clinical imaging and radiotherapy is actively encouraged. It is essential that development is underpinned by appropriate education and training to support the safe delivery of professional practice. If a College of Radiographers approved postgraduate qualification is available, the SoR expects a radiographer to achieve that recognised qualification.

Any extension to the scope of practice is built on the core foundations of the radiography pre-registration education and training programme, as either a diagnostic radiographer or a therapeutic radiographer.

For example, the SoR considers the use of MRI and CT equipment by therapeutic radiographers for radiotherapy treatment planning and monitoring to be a core and legitimate part of a therapeutic radiographer’s role. The practice of the therapeutic radiographer is underpinned by appropriate education and training to support practice relating to radiotherapy treatment planning and monitoring, which is managed under a clearly defined governance protocol. An extension to the scope of practice could be to perform a diagnostic scan in relation to the oncology pathway for the benefit of the patient.

The SoR recognises that the capabilities required in a diagnostic setting, where images are being obtained for diagnostic purposes, need the underpinning skill set of a diagnostic radiographer. This is a different skill set to the one underpinning the practice of a therapeutic radiographer. The diagnostic radiographer has knowledge and understanding of a wider range of pathologies beyond cancer than that of a therapeutic radiographer. The diagnostic radiographer has broader knowledge of the different patient pathways and resultant image appearances for a wide range of conditions. The HCPC standards of proficiency for radiographers demonstrate the differences and set out the foundations of practice for the two professions.

There are emerging areas of practice where diagnostic and therapeutic radiographers can work together for the benefit of patients by recognising and utilising the skills of the two professions. One example of this is the application of MRI within radiotherapy treatment planning. The skills of the therapeutic radiographer can support patient positioning, patient preparation and the imaging requirements for treatment planning, while the diagnostic radiographer’s underpinning skills support optimisation of the imaging series.

The Society of Radiographers encourages collaboration across these areas of practice, and advocates establishing an agreed local governance framework to ensure the clinical and professional responsibilities of practice are clear. Accountability lies with the employer to ensure that appropriate governance processes and vicarious liability are in place.

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