1. **INTRODUCTION**

1.1 Improving outcomes for cancer is a priority for the NHS and a significant component of the government’s modernisation agenda for healthcare. Rising incidence and wider recognition of the role of radiotherapy, technological developments and increased consumer expectations have combined to create an urgency to change patterns of practice.

1.2 Therapeutic radiographers and the wider radiotherapy workforce working within this technologically sophisticated care environment must be supported and developed to be able to maximise their individual and collective potential in delivering the best care for people with cancer.

1.3 Since its inception in 1995, the Radiotherapy Advisory group (RAG) has made a significant contribution to the development of the profession and in raising its profile nationally. It is an effective voice for the community of therapeutic radiographers and the wider radiotherapy workforce.

2. **PURPOSE**

2.1 The role of RAG is therefore to provide The Society and College of Radiographers with advice regarding strategic direction for the profession and appropriate support to deliver service improvements within the interprofessional environment of cancer care.

3. **REMIT**

3.1 To provide advice and information relating to the continuing education and professional development needs of therapeutic radiographers and the wider radiotherapy workforce and to the pressures and developments of the service.

3.2 To promote explicit career development pathways, in line with organisation policy, for therapeutic radiographers and the wider radiotherapy workforce across all aspects of the profession both inside and outside of radiotherapy centres.

3.3 To facilitate research and guideline development for publication by The Society and College of Radiographers.

3.4 To represent the organisation in relevant interprofessional forums.

3.5 To respond and comment upon documents as requested by the organisation and its officers.
3.6 To debate policy and evaluate its impact on the profession making representation as necessary.

3.7 To promote and support the policy decisions of the organisation.

3.8 To undertake projects/pieces of work on behalf of the organisation and profession as agreed.

3.9 To communicate effectively and to share information among the members of the profession at all times.

3.10 To provide regular updates and briefings to SCoR on the work of RAG.

4. **ACTION PLAN**

4.1 The group is expected to formulate an action plan with an indicative budget annually, agreeing its priorities and recognising the need to respond flexibly to external pressures.

4.2 The group is responsible for ensuring that the action plan is evaluated regularly.

5. **MEETING FREQUENCY**

5.1 The group will meet up to two times per year.

5.2 To be quorate meetings must have at least 5 members present.

5.3 Additional meetings may be necessary for specific elements of work and can be facilitated as face to face meetings or as a telephone conference meeting.

5.4 Small project groups may be constituted to progress work; membership to be determined by the group.

6. **MEMBERSHIP**

6.1 Membership of the group will not exceed 15 and will be subject to annual review.

6.2 All members must be members of the SCoR.

6.3 Members will be expected to demonstrate a commitment to the work of the group through attendance at meetings and participation in relevant working groups.

6.4 Membership will be drawn from all areas of practice to include clinical practitioners, managers, educationalists and researchers. Additionally, where possible the four UK countries should be represented.
6.5 There is an ex officio seat for the UK RTSM Chair (Vice chair can attend in their absence).

6.6 A representative will be sought from the PPLG.

6.7 Advice may be sought from experts where appropriate.

6.8 All members will serve a fixed term of 4 years. Current members are eligible to apply for a second term.

7. OFFICERS

7.1 UK Council reserves the right to appoint the Chair. Where Council chooses not to appoint the Chair the group shall select its own Chair by ballot at the first meeting of the group after the 1st July each year.

7.2 The group will elect an appropriate Vice-chair by ballot every year at the first meeting of the year after 1st July, as above.

7.3 An Officer or Officers, as appropriate, of The Society and College of Radiographers will attend meetings in an advisory capacity.

7.4 The College will provide administrative support.

8. DECISION MAKING

8.1 The group is expected to make decisions by consensus.

8.2 In the event of a vote being necessary the decision will be reached by a simple majority of members present, in person or by telephone.

9. ACCOUNTABILITY

9.1 The group will be accountable for all its actions to the UK Council of The Society of Radiographers and the Board of Trustees of The College of Radiographers, through the Director of Professional Policy.

9.2 Individual members of the group must sign up to the principles outlined within the document entitled Representing The Society and College of Radiographers: Terms of Reference (2013) and adhere to the SCoR Data Protection Act principles.

10. EXPENSES

10.1 Travelling expenses and subsistence costs for attending meetings will be paid in accordance with the Expenses Policy of The Society of Radiographers.

10.2 Any additional expenses in relation to the work of the group should be agreed in advance with the Director of Professional Policy.