

# Developing career pathways for diagnostic imaging support worker roles: guidance on roles and responsibilities



Supporting success for diagnostic imaging support workers

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## Foreword

“The radiography profession has always championed the development of support workers in the NHS. Support workers are crucial members of the diagnostic radiography team; however, we know that approaches to their deployment, management and development can vary. To deliver the increase in diagnostic activity we need, it is essential that the capacity and capability of support workers is maximised in a safe and consistent way. I am delighted that this guidance has been produced by Health Education England (HEE), the Society of Radiographers and a profession-led expert group. It will allow services to review the roles and responsibilities of their support workers and consider how their contribution might be enhanced. It will provide support staff with information about how their careers can be developed as well as supporting improvements for service users.”



**Suzanne Rastrick, Chief Allied Health Professions Officer**

“The Society of Radiographers is delighted to partner with HEE to develop this guidance. For far too long, the diagnostic imaging support workforce have been invisible in strategic plans but are essential for services to function. The support worker is often the first and last face a patient or client sees when visiting a diagnostic imaging facility. The impact our support workers have on patient experience cannot be valued highly enough. The time has come to support this workforce in delivering high-quality care based on sound education principles and a well-defined knowledge base focused on diagnostic imaging. This guidance gives imaging services and support workers a framework within which to drive up quality, remove unwarranted variation around roles and responsibilities and prepare those who want to progress for their next steps on the career ladder. This is an important document in supporting the transformation of imaging services to meet growing demand and achieve ambitious targets of improving patient outcomes through timely diagnosis.”



**Claire Donaldson, President of the Society of Radiographers**

## Part 1: Background and context

Health Education England (HEE) has published this guidance in collaboration with the Society of Radiographers to maximise the contribution of the diagnostic imaging support workforce to deliver safe and effective care.

This guidance sets out the roles and responsibilities that diagnostic imaging support workers, including assistant practitioners, can perform at four career levels. It provides additional, profession-specific competencies that complement the [\*\*AHP Support Worker Competency, Education and Career Development Framework\*\*](#).

Workforce planning and task allocation need to be considered across the whole diagnostic radiography workforce – from the entry-level clinical support worker to the advanced clinical practitioner. This guidance aims to help services maximise the contribution of their diagnostic imaging support workforce, and create clear career progression routes for support staff.

At all levels, staff should be appropriately educated, trained and supervised, with appropriate delegation processes in place.

### How the guidance was developed

The guidance was developed by an expert reference group that included radiographers, service managers, support workers, representatives from Higher and Further Education, and arm's length bodies including Public Health England. It is based on the results of two national surveys and dedicated meetings of the group, along with input from the project's subject experts. Details of the expert group's work can be found on the HEE website: <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers/diagnostic-radiography-support-workers>



## How to use this guidance

### This guidance -

- Provides detailed descriptions of the roles and responsibilities of diagnostic radiography clinical support workers.
- defines the difference between entry-level roles (those requiring Level 2 education – equivalent to GCSE) and senior clinical support worker roles (those requiring Level 3 education – equivalent to A level)
- supports consistent deployment of roles and task allocation
- can be used to identify tasks that may not currently be performed by support staff, but can be done so - following training
- helps to ensure job descriptions are up to date

The expert group agreed that there is scope for development of these roles. For example, the senior clinical support worker role could make a greater contribution within services.

Current support worker tasks can be mapped against this guidance. Mapping can be undertaken by several services working together, as well as by individual services.

This guidance should be used in conjunction with published [national job profiles](#) as any substantial changes proposed to existing roles and job profiles would require consultation and agreement with staff and, where relevant, with trade unions, in line with local policies and procedures.

Since 2015, all formal education qualifications in England and Wales have been placed within an overarching Framework called the [Regulated Qualifications Framework \(RQF\)](#). The RQF distinguishes between different levels of understanding and expertise, with each level being progressively more challenging than the last. These levels of qualifications are different from NHS job evaluation and banding levels, and additional guidance on this can be found in [AHP support workforce – understanding education, qualifications and development](#).



## Part 2: Overview of imaging support worker roles

There are four roles covered by this guidance. Full details on recommended levels of education for all allied health professions (AHP) support workers, including apprenticeships, are provided in the [AHP Support Worker Competency, Education and Career Development Framework](#).

**Table 1:** The four imaging support worker roles

Role	Entry-level education requirements	Summary of role
<b>Clinical support worker</b>	Level 2, such as GCSEs	Enables effective patient care and undertakes important clerical, administrative and housekeeping tasks to support the delivery of diagnostic imaging services
<b>Senior clinical support worker</b>	Level 3, such as A levels or Technical levels	Provides the above plus clinical support and patient care before, during and after diagnostic imaging examinations
<b>Mammography associate</b>	Dedicated Level 4 mammography associate programme, equivalent to Certificate of Higher Education	Cares for individuals in the breast screening programme or with symptoms of breast cancer, undertakes routine 2 view mammography using dedicated x-ray equipment and supports quality assurance processes within the breast imaging team
<b>Assistant practitioner</b>	Level 5, equivalent to a foundation degree or Diploma of Higher Education	Supports clinical service delivery, cares for individuals and performs non-complex protocol-driven clinical diagnostic imaging examinations under the supervision of a registered radiographer



## Recruitment and progression

Entry to the diagnostic radiography support workforce is likely to be into jobs graded at either NHS Agenda for Change (AfC) Band 2 or Band 3, with opportunities for staff to progress through the support worker roles set out below. Further details on recommended recruitment and progression pathways are provided in the [AHP Support Worker Competency, Education and Career Development Framework](#).

**Table 2:** Experience/progression in roles

<b>Clinical support worker</b>	As well as the educational requirements outlined in Table 1, clinical support worker recruits should also have Level 2 functional skills, either on employment or shortly afterwards (for example, through completing the healthcare support worker apprenticeship standard). Although at this level it is not expected that staff will have previous experience of healthcare; it would be desirable that candidates could demonstrate working with the public, including in volunteering roles. Once employed, clinical support workers will complete the Care Certificate This job role typically matches to AfC Band 2.
<b>Senior clinical support worker</b>	It is desirable that candidates at this level demonstrate experience in health and/or social care settings, such as employment, work experience or volunteering. Once employed, senior clinical support workers will complete the Care Certificate and would be expected to study an occupational relevant Level 3 qualification This job role typically matches to AfC Band 3.
<b>Mammography associate</b>	A dedicated education Level 4 mammography associate apprenticeship standard is available for a defined and limited scope of practice in mammography. It is desirable that candidates at this level demonstrate experience in health and/or social care settings, such as employment, work experience or volunteering This job role typically matches to AfC Band 4.
<b>Assistant practitioner<sup>1</sup></b>	The Assistant Practitioner <sup>2</sup> , typically employed on Band 4, supports clinical service delivery performing non-complex protocol-driven clinical diagnostic imaging examinations under the supervision of a registered radiographer.

## Progression into pre-registration

A significant number of support staff employed in diagnostic imaging services, particularly assistant practitioners, would like to progress into pre-registration radiography degrees.

Imaging support workers employed at AfC Bands 2, 3 and 4 who want to progress, including into registered degree-level positions, should know the progression routes available to them and have these built into their development plan and career conversations.

Higher education providers should consider how their programme recruitment processes enable experienced support workers to access relevant education. Clear guidance on what experience, skills and knowledge are needed to apply for the next steps should be available, including the opportunity to study while remaining employed through the apprenticeship degree.

<sup>1</sup> Some assistant practitioners are employed as trainees at Band 3

<sup>2</sup> Where senior clinical support workers are trained for a limited role in elements of QA/QC for radiation equipment, they must meet the requirements of IR(ME) R2017, IRR 2017 and be suitably entitled in IR(ME)R employers' procedures

## Part 3: Imaging support worker roles and responsibilities

The following sections set out for each of the four roles the activities that support staff can be expected to undertake, as well as the relevant knowledge, skills and competence requirements. Actual job design will vary by service, depending on local population and service need.





## Clinical support worker

### Role summary

The clinical support worker role is the starting point of the diagnostic radiography workforce career structure. While the bulk of the role's duties are likely to be clerical, administrative and housekeeping, clinical support workers also support patient flow, working in clinical settings across diagnostic imaging examinations and modalities. They take responsibility for completing their tasks and procedures, exercise autonomy and judgement subject to overall direction or guidance, and may collaborate with others, working closely with the diagnostic imaging team.

### Knowledge, skills, competencies and qualifications

Clinical support workers have knowledge and understanding of the relevant facts, procedures and ideas in their occupational field to address straightforward problems and complete well-defined tasks. They interpret pertinent information and ideas, using cognitive and practical skills, to perform their role, also identifying how effective their actions have been.

Clinical support workers will be educated to education Level 2 (for example, through GCSEs or the healthcare support worker apprenticeship standard and diploma) at appointment or shortly afterwards. They will also achieve the Care Certificate and have (or will acquire soon after employment) Level 2 functional skills (English and Mathematics). Staff at this level wishing to progress should have access to relevant higher-level learning.



## Typical role responsibilities and duties

The role responsibilities and duties performed by clinical support workers after training are shown in Table 3 below.

**Table 3:** Clinical support worker: role responsibilities and duties

Area	Role responsibilities and duties
<b>Maintain a clean and safe environment</b> in an imaging department	<ul style="list-style-type: none"> <li>• Decontaminating and cleaning dedicated imaging equipment, accessories and environment</li> <li>• Ensuring their own safety in restricted and controlled areas (radiation safety, magnetic field safety) and being aware of the safety of others</li> <li>• Managing blood and body fluid spills</li> <li>• Maintaining sharps bins/disposal according to protocol</li> </ul>
<b>Manage stock and consumables</b> in an imaging department	<ul style="list-style-type: none"> <li>• Checking deliveries, completing paperwork and store correctly using service-defined stock rotation methods</li> <li>• Following systems to manage linen, stock and non-stock items</li> <li>• Maintaining stock and equipment within imaging rooms</li> <li>• Managing stock expiry dates in imaging rooms and storage areas, including contrast agent</li> <li>• Escalating stock issues and shortages</li> </ul>
<b>Manage data</b> relevant to the clinical imaging environment	<ul style="list-style-type: none"> <li>• Recognising different referral, appointing and reporting systems for patient pathways, for example emergency department patients, GP referrals, outpatients, and in-patients</li> <li>• Inputting, accessing or amending patient and other data (such as audit data) on radiology management systems, portering systems, picture archive and communication systems (PACS)</li> <li>• Checking availability of reports/images (previously printing and sending reports)</li> </ul>
<b>Documentation</b>	<ul style="list-style-type: none"> <li>• Managing patient documentation, such as correspondence, patient notes, pre-examination paperwork, patient images</li> </ul>
<b>Communicate</b> appropriately with patients, other support staff, radiographers, sonographers, nuclear medicine technologists, radiologists and the wider imaging team	<ul style="list-style-type: none"> <li>• Understanding and recognising roles and responsibilities within the clinical imaging team</li> <li>• Liaising with ambulance services and porters; supporting patient transfers</li> <li>• Taking messages, answering or referring queries</li> <li>• Meeting and greeting patients and relatives</li> <li>• Initial confirmation of patient identity</li> <li>• Identifying requirements for translator/hearing or other support service</li> </ul>

Area	Role responsibilities and duties
<p><b>Provide care</b> for patients in the clinical imaging environment</p>	<ul style="list-style-type: none"> <li>• Assisting patients with dressing and undressing appropriate for each examination</li> <li>• Acting as chaperone</li> <li>• Providing comfort to patients</li> <li>• Assisting with patient flow, moving patients from waiting areas to examination suites</li> <li>• Responding to a poorly patient and providing assistance for those in distress or needing support, for example basic life support, supporting toileting, providing vomit bowls, maintaining patient privacy and dignity</li> <li>• Providing refreshments or aftercare for patients, as required</li> </ul>
<p><b>Support specific examinations</b> within diagnostic imaging</p>	<ul style="list-style-type: none"> <li>• Preparing equipment for identified examinations (cleaning, moving and checking items, for example patient observation equipment, vacuum suction devices, oxygen cylinders/supplies)</li> <li>• Preparing non-prescription contrast agents for oral/rectal examinations, such as barium sulphate solutions or MRI rectal agents</li> <li>• Preparing equipment for a basic trolley setting</li> <li>• Assisting practitioners in setting up the aseptic or clean area</li> <li>• Clearing trolleys/equipment post aseptic/clean procedure</li> <li>• Checking emergency equipment availability and function</li> <li>• Providing support for manual handling</li> </ul>



## Senior clinical support worker

### Role summary

Senior clinical support workers carry out a range of administrative, clerical, housekeeping and clinical tasks, which often vary through the day to support 24/7 service need. In this role, staff may greet patients and perform initial ID checks, register patient attendance on the radiology management system and prepare them for the examination, as well as providing a more clinical function during and after examinations.

Compared to the clinical support worker role, senior clinical support workers undertake more demanding organisational tasks, such as the supervision of junior staff or the planning of rotas. At this level, the role is more patient facing, with tasks including supporting complex trolley settings for interventional procedures or accessing pathology results, for example. Senior clinical support workers may provide scrub support for less complex interventions or cannulate and remove cannula for patients in CT and MRI. They take responsibility for initiating and completing tasks and procedures including, where relevant, supervising or guiding others, and they exercise responsibility, autonomy and judgement within defined parameters.

### Knowledge, skills, competencies and qualifications

Senior clinical support workers require factual, procedural and theoretical knowledge and understanding of their occupational area to complete tasks and address problems that, while well defined, may be complex and non-routine. They interpret and evaluate relevant information and ideas, being aware of the nature of their area of work and of different perspectives or approaches. They identify, select and use appropriate cognitive and practical skills, methods and procedures to inform actions and complete tasks, while also reviewing how effective their methods and actions have been.

As well as completing the Care Certificate and acquiring Level 2 functional skills, senior clinical support workers should also complete a profession-relevant education Level 3 qualification. Staff at this level should have the specific learning that supports their role in diagnostic radiography, such as radiation safety and magnetic field safety, knowledge of diagnostic imaging examinations, patient care: preparation and aftercare, equipment for sterile procedures, including trolley setting, and QA/QC checks for imaging equipment and accessories. Those in this role should be appropriately supervised.

## Typical role responsibilities and duties

The role responsibilities and duties performed by senior clinical support workers after training are shown in Table 4 below.

**Table 4:** Senior clinical support worker: role responsibilities and duties

Area	Role responsibilities and duties
<b>Maintain and support a clean and safe environment</b> in an imaging department	<ul style="list-style-type: none"> <li>• Decontaminating and cleaning dedicated imaging equipment, accessories and environment, moving equipment appropriately to manage hygiene requirements</li> <li>• Managing own safety in restricted and controlled areas (radiation safety, magnetic field safety), supporting patients and other staff with safety measures</li> <li>• Managing blood and body fluid spills</li> <li>• Maintaining sharps bins/disposal according to protocol</li> <li>• Checking electrical equipment, such as accessory equipment switches; ensuring battery-operated equipment is working, and PAT test dates are maintained</li> <li>• Undertaking defined QA/QC checks on equipment, working to a set procedure/protocol (such as on ultrasound equipment or image display monitors). Identify nonconformities, and record and report results appropriately<sup>3</sup></li> <li>• Cleaning and moving ultrasound and mobile x-ray machines from place to place, to facilitate service efficiency and effectiveness</li> <li>• Cleaning, moving and changing MRI coils during MRI sessions</li> <li>• Undertaking routine testing of ultrasound equipment, fixed and mobile fluoroscopy systems to protocol</li> </ul>
<b>Manage data</b> relevant to the clinical imaging environment and patient episode	<ul style="list-style-type: none"> <li>• Supporting patients and staff with referral, appointing and reporting systems for various patient pathways, for example emergency department patients, screening clients, GP referrals and in- patients</li> <li>• Inputting, accessing or amending patient and other data on radiology management systems, portering systems, PACS and hospital information systems</li> <li>• Completing examination data on radiology management systems as per protocol, and checking images on PACS</li> <li>• Accessing pathology systems to check patient results pre-procedure. Making results available for clinician review, flagging if results are unavailable to reduce/prevent delays. (“it is the final responsibility of the operator undertaking the examination to check the content of the results provided”)</li> <li>• Ensuring that the patient episode and correct data are on the modality list and that the correct examination is selected for image capture. (It is the final responsibility of the operator undertaking the examination to check all data is correct)</li> </ul>

<sup>3</sup> Where senior clinical support workers are trained for a limited role in elements of QA/QC for radiation equipment, they must meet the requirements of IR(ME)R 2017, IRR 2017 and be suitably entitled in IR(ME)R employers’ procedures

Area	Role responsibilities and duties
<p><b>Communicate</b> appropriately with patients, the multi-disciplinary team and wider networks</p>	<ul style="list-style-type: none"> <li>• Understanding and recognising roles and responsibilities within the clinical imaging team, providing support for communication flow and information transfer</li> <li>• Liaising with patients, porters, wards, referrers, ambulance service and others to support patient flow</li> <li>• Taking messages, answering or referring queries</li> <li>• Performing the initial LMP/patient ID checks, highlighting queries or anomalies that require resolution ahead of examination. (It is the final responsibility of the operator undertaking the examination to check this information is correct)</li> </ul>
<p>Provide <b>care for patients</b> in the clinical imaging department</p>	<ul style="list-style-type: none"> <li>• Assisting patients with dressing, undressing, toileting or other needs appropriate for each examination</li> <li>• Acting as chaperone</li> <li>• Providing pre- and post-examination information to patients and referrers</li> <li>• Providing comfort to patients</li> <li>• Assisting patients on and off the imaging table, and supporting operators with positioning of patient to protocol</li> <li>• Providing support for manual handling and patient positioning during examinations</li> </ul>
<p>Assist with <b>patient flow</b></p>	<ul style="list-style-type: none"> <li>• Preparing and supporting work lists</li> <li>• Identifying and communicating potential delays</li> <li>• Preparing appropriate paperwork and documentation</li> <li>• Preparing and using appropriate patient-handling equipment, such as hoists</li> <li>• Preparing appropriate PPE</li> <li>• Recognising patients with additional needs and communicating appropriately with the relevant operators</li> <li>• Recognising the poorly patient and providing assistance for those in distress or needing support, for example prioritising patients, taking and recording patient observations, monitoring patients for reactions post contrast agent injection, and initiating emergency care</li> <li>• Providing refreshments or aftercare for patients having extensive preparation regimes or invasive interventions</li> </ul>
<p>Support specific <b>examinations</b></p>	<ul style="list-style-type: none"> <li>• Preparing and ensuring availability of equipment for identified examinations (cleaning, moving and checking items such as patient observation equipment, vacuum suction devices, oxygen cylinders/ supplies, carbon dioxide insufflators)</li> <li>• Preparing equipment for a complex trolley setting</li> <li>• Assisting practitioners in setting up the aseptic or clean area for complex procedures, such as those requiring intervention</li> <li>• Clearing trolleys/equipment post aseptic/clean procedure</li> <li>• Checking emergency equipment availability and function</li> </ul>

Area	Role responsibilities and duties
Support the <b>management of medicines</b>	<ul style="list-style-type: none"> <li>• Acting as a second checker for the registered professional</li> <li>• Preparing equipment for administration of intravenous medicines by registered professionals where legal mechanisms allow</li> <li>• Administering oral medicines after supply by a registered professional where legal mechanisms allow<sup>4</sup></li> <li>• Cannulating patients and flushing with a pre-filled saline syringe classified as a medical device where local processes allow</li> <li>• Removing cannulas in line with protocols</li> <li>• Observing patients after contrast agent injections/interventional procedures, and providing appropriate care before discharging the patient home</li> <li>• Observing patients and taking patient observations</li> </ul>
Education and training of others	<ul style="list-style-type: none"> <li>• Demonstrating tasks within their scope of practice to students or trainees</li> <li>• Supporting new starters in same or similar role, providing feedback and guidance</li> <li>• Leading training of other staff members where appropriate, for example in infection control, manual handling</li> </ul>



<sup>4</sup> See: <https://www.sps.nhs.uk/articles/advice-on-the-preparation-and-or-administration-of-contrast-agents-supplied-under-a-patient-group-direction/>

## Mammography associate

Breast-screening services were the first area to embed a 4-tier model of service delivery in diagnostic radiography. The workforce evolved rapidly to embrace assistant practice and exploit opportunities for advanced and consultant radiographic practice to meet the needs of patients and the service.

The service currently has major workforce shortages and needs rapid growth to ensure the screening programme is delivered.

### Role summary

The English breast-screening service is reviewing the role of the assistant practitioner and exploring where this can be further enhanced to promote recruitment and retention of experienced staff, and better support service delivery<sup>5</sup>.



<sup>5</sup> This project supports development of mammography support workers into registered roles as part of the national radiographic career development model. Consideration of roles outside this framework will need further work



## Knowledge, skills, competencies and qualifications

Mammography associate practitioners require practical, theoretical and/or technical knowledge and understanding of the occupational area to address problems that are well defined, but complex and non-routine. At this level, they analyse, interpret and evaluate relevant information and ideas, and are aware of the nature and approximate scope of the area of work or study. They have informed awareness of different perspectives or approaches within the area of study or work. They identify, adapt and use appropriate cognitive and practical skills to complete work activities and inform actions, while also reviewing the effectiveness and appropriateness of methods, actions and results. The role involves the application of knowledge and understanding, skills and methods in a broad range of complex or technical work activities, performed across a variety of contexts.

The role requires completion of the Level 4 qualification provided by the mammography associate apprenticeship or equivalent – this apprenticeship is a 12-month (minimum) Level 4 training programme. Following completion, mammography associates will be qualified to work within the breast imaging workforce, undertaking routine two-view mammography in a hospital, mobile breast-screening unit or medical centre under the supervision of a registered radiographer<sup>6</sup>.

Mammography associates focus on providing screening services for the English national breast-screening programme. There is a single clearly defined examination protocol, and robust quality assurance programme. Mammography associates deliver the service to the same standard as a registered radiographer. The ratio of mammography associates and assistant practitioners to registered radiographers is greater in a screening service than in a general imaging department where there is a wider variation in the work.

Mammography associates work alongside mammography assistant practitioners who have a wider scope of practice. Both levels work under the supervision of registered radiographers, which can include a model of remote supervision in line with national guideline<sup>7</sup>.



<sup>6</sup> <https://nationalbreastimagingacademy.org/radiography/mammography-associate-apprenticeship/>

<sup>7</sup> <https://www.gov.uk/government/publications/breast-screening-remote-radiographic-supervision/breast-screening-implementing-the-practice-of-assistant-practitioners-working-on-mobile-facilities-with-remote-radiographic-supervision>

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## Assistant practitioner

### Role summary

The main role of an assistant practitioner is to perform defined protocol-driven imaging examinations, carrying out tasks that might currently be undertaken by a registered practitioner. They work under the supervision of a registered radiographer although the supervision model will vary depending on the assistant practitioner's area of work, experience and competence. They may also support patients during minimally invasive procedures, including aseptic scrub support.

Assistant practitioners are primarily patient-facing, undertaking the roles and responsibilities of senior clinical support workers (such as cannulation and positioning of patients, moving and changing MRI coils during MRI sessions, checking pathology results, and chaperoning). They also take responsibility for planning and developing courses of action including, where relevant, responsibility for the work of others and the allocation of resources. They exercise responsibility, autonomy and judgement within broad parameters, and are accountable for analysis and diagnosis, design, planning, execution and evaluation within their role.

They perform imaging on a range of non-complex patients where there are minimal barriers to communication, recognising the need for, and accessing, more experienced assistance when required. Paediatrics is considered a specialist area and assistant practitioners should have specific training for paediatric imaging where it is to be within their scope of practice.

An assistant practitioner with demonstrable education and training at the right level can develop their scope of practice in line with service need.

### Knowledge, skills, competencies and qualifications

An assistant practitioner role requires practical, theoretical and technical knowledge and understanding of a subject or field of work to find ways forward in broadly defined, complex contexts. The role analyses, interprets and evaluates relevant information, concepts and ideas. Assistant practitioners are aware of the nature and scope of the area of study or work, which will be clearly defined and documented in a local policy document along with any regulatory entitlements. Staff at this level understand different perspectives, approaches or schools of thought and the reasoning behind them, and determine, adapt and use appropriate methods, cognitive and practical skills to complete work activities, inform actions and address problems. They use relevant research or development in their work, and also evaluate actions, methods and results.

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Assistant practitioners require a Level 5 qualification such as a foundation degree (apart from mammography, where a Level 4 apprenticeship for a mammography associate is also available). The content of the Level 5 qualification should provide equivalent underpinning knowledge as that of a radiographer performing the same examinations, such as:

- techniques and protocols for image acquisition
- the physics of image formation and image capture
- biology and radiobiology
- radiation protection and dose management where relevant to scope of practice
- legislation and standards
- anatomy, physiology and pathology
- patient pathways
- patient care
- imaging equipment
- radiology-specific information systems
- image management and storage
- safety procedures including QA/QC and incident reporting
- team working
- communication
- leadership<sup>8</sup>

The fundamental differences between an assistant practitioner and a registered radiographer are:

- breadth of practice – a diagnostic radiographer has a broad scope across diagnostic radiography, whereas an assistant practitioner has a narrow scope of practice in a limited area
- complexity – a diagnostic radiographer works with all patients, can modify technique and adapt standard protocol while an assistant practitioner works with a defined patient cohort, to standard techniques and standard protocols
- responsibility level – a diagnostic radiographer is responsible for their own practice as an autonomous practitioner and takes responsibility to support decision-making for patients who fall outside the assistant practitioner standard operating procedures, such as onward referral for unexpected or serious findings, preliminary image evaluation that is relayed to other healthcare professionals, and decisions to repeat imaging or authorising additional techniques

<sup>8</sup> We wish to encourage internal career changers – staff moving from one NHS occupation to another, including other assistant practitioners interested in a career in diagnostic radiography. Where this happens, it may be the case that the assistant practitioner has already acquired some of the knowledge and skills required, for example if they have worked in theatre. They will though still need to acquire the full range of radiographic competencies and knowledge to operate safely and effectively but account should be taken of prior learning.

**Table 5:** The differences between assistant practitioners and diagnostic radiographers

Practice area	Assistant practitioner	Diagnostic radiographer
Scope of practice	Narrow and limited to standard protocols	Broad across range of diagnostic radiography techniques/ specialised in area of practice, with depth of knowledge
Patient type	Co-operative patients	All patients
Decision-making	Follows protocols and standard operating procedures – escalates to diagnostic radiographer where outside scope or protocol	Makes decisions and guides assistant practitioner where decisions fall outside their scope of practice, such as urgent or unexpected findings
Supervision	Works under supervision of diagnostic radiographer	Supervises assistant practitioner and works in own supervisory framework as autonomous practitioner



## Typical role responsibilities and duties

The role responsibilities and duties performed by a fully trained assistant practitioner are shown in Table 6 below

**Table 6:** Assistant practitioner: role responsibilities and duties

Area	Role responsibilities and duties
<p>Maintain a <b>clean and safe environment</b></p>	<ul style="list-style-type: none"> <li>• Managing own safety and that of patients and other staff in restricted and controlled areas (radiation safety and magnetic field safety) and department environment</li> <li>• Working to scope of practice for which trained, seeking support for examinations or procedures beyond own competence or confidence</li> <li>• Ensuring hygiene procedures are followed, including managing blood and body fluid spills</li> <li>• Performing defined routine QA/QC checks on equipment, working to a set procedure/protocol                             <ul style="list-style-type: none"> <li>– report and record results as per local policy</li> <li>– respond appropriately to out-of-tolerance QA/QC results, for example take equipment out of service until further investigation has taken place</li> </ul> </li> <li>• Undertaking more complex QA tasks and provide oversight of QA programmes, providing anomaly reporting and audit to the supervising QA radiographer. (For imaging QA involving radiation, the assistant must be designated an operator under the regulations).</li> <li>• Cleaning and moving ultrasound and mobile x-ray machines from place to place to facilitate service efficiency and effectiveness</li> <li>• Cleaning, moving and changing MRI coils during MRI sessions</li> </ul>
<p><b>Manage data</b> relevant to the clinical imaging environment</p>	<ul style="list-style-type: none"> <li>• Following referral, appointing, justification, authorisation and reporting processes for relevant patient pathways, such as emergency department patients, GP referrals, in-patients and out-patients</li> <li>• Inputting, accessing or amending patient and other data on radiology management systems, portering systems, PACS, hospital information systems</li> <li>• Completing examination data on radiology management systems as per protocol and checking images on PACS</li> <li>• Accessing pathology systems to check patient results pre-procedure. Making results available for the clinician to review. Flagging if results are unavailable to reduce/prevent delays. (It is the final responsibility of the operator undertaking the examination to check the information is correctly in place).</li> <li>• Ensuring that the patient episode and correct data are on the modality list and that the correct examination is selected for image capture</li> </ul>

Area	Role responsibilities and duties
<p><b>Communicate</b> appropriately with patients, the multi-disciplinary team and wider networks</p>	<ul style="list-style-type: none"> <li>• Understanding and recognising roles and responsibilities within the clinical imaging team, ensuring accurate communication flow and information transfer</li> <li>• Liaising with patients and carers, porters, wards, ambulance service and referrers to support patient flow and ensuring correct examination information is available</li> <li>• Answering or referring queries</li> <li>• Performing the required LMP/patient ID/patient safety checks, and resolving issues. It is the final responsibility of the operator undertaking the examination to check this information is correctly in place</li> </ul>
<p><b>Perform specific examinations</b> within diagnostic imaging</p>	<ul style="list-style-type: none"> <li>• Planning and prioritising own workload within scope of practice and the department's operational policy</li> <li>• Providing support for manual handling and patient positioning during examinations</li> <li>• Performing required physiological measurements, reporting and recording results appropriately</li> <li>• Performing protocol-driven diagnostic imaging examinations within own scope of practice on co-operative patients using:                         <ul style="list-style-type: none"> <li>– static and mobile fluoroscopic equipment</li> <li>– x-ray equipment</li> <li>– ultrasound machines</li> <li>– MRI scanner</li> <li>– CT scanner</li> <li>– DEXA machine</li> <li>– nuclear medicine equipment</li> </ul> </li> <li>• Assessing images for technical quality and diagnostic suitability, taking action as per scope of practice and legal entitlement, for example performing repeats, seeking registered radiographer support and advice where images fall short of diagnostic quality</li> <li>• Referring patient to another registered practitioner for image interpretation:                         <ul style="list-style-type: none"> <li>– where patient is leaving the department to their home                                 <ul style="list-style-type: none"> <li>– refer to supervising radiographer</li> </ul> </li> <li>– where patient is immediately attending an outpatient clinic, other department or remains an in-patient                                 <ul style="list-style-type: none"> <li>– refer for review by a registered practitioner/medical practitioner</li> <li>– the reviewing practitioner/registered radiographer takes responsibility for identifying urgent or unexpected findings and taking appropriate action</li> </ul> </li> </ul> </li> <li>• Completing examination on radiology management systems and ensure images are available as expected on PACS</li> <li>• Supporting protocol-driven fluoroscopic examinations:                         <ul style="list-style-type: none"> <li>– image-guided routine pain clinics during normal working hours</li> <li>– image-guided manipulation of extremities in theatre</li> <li>– routine lists when working with an advanced practice radiographer (or other trained equipment operator)</li> </ul> </li> <li>• Leading training of other members of staff in areas of expertise.</li> </ul>

Area	Role responsibilities and duties
Supporting medicines use	<ul style="list-style-type: none"> <li>• Acting as a second checker for the registered professional</li> <li>• Preparing equipment for administration of intravenous medicines by registered professionals where legal mechanisms allow</li> <li>• Administering oral medicines after supply by a registered professional where legal mechanisms allow<sup>9</sup></li> <li>• Cannulating patients and flushing with a pre-filled saline syringe classified as a medical device where local processes allow</li> <li>• Removing cannulas in line with protocols</li> <li>• Observing patients before, during and after contrast agent injections/ interventional procedures and provide appropriate care</li> <li>• Observing patients and taking patient observations</li> </ul>
Education and training of others	<ul style="list-style-type: none"> <li>• Supervising and training students within their scope of practice</li> <li>• Assessing students/trainees, giving feedback for improvement</li> <li>• Performing health promotion activities</li> </ul>



<sup>9</sup> <https://www.sps.nhs.uk/articles/advice-on-the-preparation-and-or-administration-of-contrast-agents-supplied-under-a-patient-group-direction/>

## Further information

For general information about education levels and qualifications see: <https://www.gov.uk/what-different-qualification-levels-mean/list-of-qualification-levels>. For specific information about apprenticeships see: <https://www.instituteforapprenticeships.org/media/1538/occupational-levels-guidance.pdf>

For general information about apprenticeships and Technical levels, see: <https://www.instituteforapprenticeships.org/occupational-maps/> and for details of the specific healthcare standards see: <https://haso.skillsforhealth.org.uk>

For details of National Occupational Standards relevant to diagnostic radiography see: <https://www.ukstandards.org.uk/NOS>

HEE's national allied health professions (AHP) support workforce programme has been established to provide national leadership and support on recognising, developing and expanding the non-registered AHP workforce. The site contains a range of resources as well as the AHP support worker Competency, Education and Career Development Framework: <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers>

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