Summary: Research radiographers have been highly adaptable throughout the pandemic, being deployed to clinical work, working on COVID research studies, safely re-opening radiotherapy trials and carrying out local research and development projects to benefit patients and continue to embed a culture of research within the department.

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P112 A survey exploring the views of radiographers and radiologists on non-medical consultancy in radiology

Emma Fellows; Anthony Manning-Stanley

University of Liverpool

Background: Consultant radiographers are expert radiographers performing roles traditionally designated to radiologists. Most research into consultant radiographers is limited to only the views of consultant radiographers. This study explored the views of diagnostic radiographers and radiologists in the UK on consultant radiographer practice in radiology.

Method: Following University ethical approval, an invitation e-mail with a link to a questionnaire and participant information sheet was disseminated via e-mail and Twitter to diagnostic radiographers and radiologists across the UK. Questions concerned opinions on consultant radiographer's impact on workload, patient care and report quality as well as opinions on consultant radiographer pay. The survey was open for 8 weeks in total, with a reminder in week 7.

Results: Across the 84 respondents (70 diagnostic radiographers and 14 radiologists), 57% of radiographers believed consultant radiographers and radiologist cross-sectional reports were equal in quality, compared to 7% of radiologists. Most radiographers believed consultant radiographers had sufficient training to provide a quality report, and should receive Band 8a pay. Some radiologists believed that medical training is needed to answer the clinical question; most believed consultant radiographers should be paid at Band 7.

Conclusion: Whilst both diagnostic radiographers and radiologists agree training more consultant radiologists will help meet reporting requirements, radiologists were of the opinion consultant radiographers do not provide the same quality in reporting as radiologists. A slight discrepancy was seen in the opinions relating to the remuneration consultant radiographers should receive. The small number of radiologist responses is a limitation to the study.

EDUCATION AND WORKFORCE POSTER PRESENTATIONS

P114 Cone Beam CT awareness and training needs for radiographers

Carly Comia; Daria Cupurdija; Veronique Sauret-Jackson

Cavendish Imaging Ltd; [2]

Background: The Cone-Beam CT (CBCT) imaging has boomed over the last 20 years in the dental world and made tremendous progress in maxillofacial, ENT and orthopaedic applications. It focuses on small volumes and is a technique of choice to visualise detailed 3D bony anatomy quickly and effectively. Beyond its diagnostic capabilities, CBCT is also a key element to the "digital surgical workflow", together with 3D printing, because of its ease of access and low radiation dose. Yet, it is not generally taught in radiography degrees and recruitment of radiographers with the relevant skills is difficult.

Method: Analysing past radiography staff training records, a review of the gaps in knowledge before and after a) CBCT equipment-specific training, and b) application-specific training, was performed.

Results: The gap-analysis showed the lack of anatomical knowledge as the largest factor creating difficulties with CBCT for the radiographers. Dexterity in 3D image manipulation was crucial to self-appraise the scan quality. When the end-use (diagnostics vs computer-aided surgery) of the CBCT scan by the referrer was clearly understood, radiographers were better equipped to perform the correct scans.

Conclusion: As a projected growth area in the NHS and the private sector, CBCT as a learning topic in academia and workforce will raise awareness of the technology. The key-skills for CBCT currently lacking at degree-level include detailed 3D anatomy identification, image manipulation dexterity and a wide understanding of the different roles of the scan in the patient's journey. Radiographers will benefit from developing these further in continuing professional education.

P115 Exploring peer assisted learning from the peer tutor's perspective

Sarah Naylor[1]; Denise Foulkes[2]

Sheffield Hallam University

Introduction: Changing working practices, student numbers, workforce demands, and deficits, have created a need to consider new ways of radiography student training. One suggestion could be to implement Peer Assisted Learning (PAL) during clinical placements. PAL utilises social constructivist theories, where peer tutors teach lower or same level tutees, reinforcing and practicing material formally taught. The aim of this study was to trial an intervention of PAL, co-designed between the university and students and evaluated to identify opportunities and challenges.

Methods: Using participatory action research 8 final year student volunteers trialled a 3-week intervention, where they delivered PAL to first years, tutoring on first year radiographic clinical practice. Focus groups were held pre and post intervention to gather qualitative data.

Results: Focus group discussions were transcribed and collectively thematically analysed. Two students and the primary researcher took part in the analysis.

Conclusion: Students identified benefits and challenges to PAL. Issues around preparing for and being a peer tutor are also discussed. Further study involving experiences of first year students and clinical colleagues is required. Implications for Practice Peer-tutoring has potential benefits to students to facilitate the development of skills related to image analysis and critique as well as radiographic anatomy and patient positioning.

P117 Advanced practice and radiographers

Martin Nelson[1]; Paul O'Riordan[1]; Ryan Carr[2]; Bev Snaith[3]

[1]HEE Midlands Faculty of Advancing practice; [2]HEE South East Faculty of Advancing practice; [3]University of Bradford

A short presentation giving an overview of Advanced Practice, what some of the misconceptions are, problems with implementing this on a practical level based on my experience of engaging with HEIs, stake holders, department leads and other sections of the advanced practice community, but also referencing the literature. Summarized by indicating how radiographers need to think about advanced practice, the funding and professional development opportunity in order to bring about meaningful change to improve the patient pathway.

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P118 Interprofessional working during the covid-19 pandemic - the reflections of an advanced practice radiographer

Sarah Booth[1]; Sarah Naylor[2]; Will Verrier[3]

[1]University of Salford; [2]University of Derby; [3]East Suffolk and North Essex NHS Foundation Trust

Background: Interprofessional collaboration in healthcare is fundamental to the delivery of a safe, efficient, and patient -- centred health service. The impact of the Covid-19 pandemic on the health service workforce, has influenced the nature of interprofessional practice as we know it, with many staff being redeployed into clinical areas outside of their normal scope of practice. The experiences of staff who were redeployed into frontline clinical roles during the pandemic, are well-documented (Forrester et al 2020; Lim et al, 2020; Veerapen and McKeown, 2021). However, there are limited documented accounts of the experiences of Diagnostic Radiographers working outside of their normal scope of practice.

Method: An overarching phenomenological methodology was used in data collection and analysis. An interview was conducted via Microsoft Teams with the advanced practitioner by two researchers. The interview was transcribed verbatim and thematically analysed.

Results: The emerging themes included: interprofessional working, patient care, and moving forward.

Conclusion: Diagnostic Radiographers are no stranger to the Intensive Treatment Unit (ITU) environment, frequently undertaking imaging for critically ill patients (Tavere et al, 2020). This study critically reflects on the experience of one Advanced Practice Radiographer who volunteered to work as part of the multi-disciplinary team in the ITU at the height of the pandemic. The study found the experience of non-hierarchical interprofessional practice and delivery of patient care and how this experience has impacted their current practice as an Advanced Practice Radiographer. This experience can inform the education and continuing professional development (CPD) of all Diagnostic Radiographers.

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SERVICE DELIVERY AND INNVOATION POSTER PRESENTATIONS

P120 Implementation of a workflow management tool in a radiology setting: Implications for turn around times

Amy Davis; Sam Dumonteil; Tim Baker; Louise Goodwright; Sue McKiernan; Jaymin Patel

Hexarad

Introduction: The UK is facing unprecedented levels of diagnostic demand. Supply/demand mismatch of radiology examinations to reporting capacity is getting worse. Workforce planning and matching supply/demand are becoming ever more complex owing to subspecialist reporting, flexible job-plans, working across sites and myriad other complexities. This mismatch leads to two undesirable outcomes: first, the examination report is delayed or second, the examination is sent to a reporter who may not be a specialist in that area. Workflow management tools in the radiology setting are still in their infancy. No existing tools in the market (to the knowledge of the authors) are able to provide a full compliment of functions to enable rota management, an allocations engine and supply/demand forecasting. We aim to compare turnaround time (TAT) before and after implementation of our workflow management tool.

Method: All examinations reported in the months of May, July, September and December before implementation (2019) and the same months in the year after implementation (2021) were retrospectively included. Statistical