

CODE OF PRACTICE – RADIOGRAPHY

PRODUCED BY THE COUNCIL FOR THE PROFESSIONS COMPLEMENTARY TO MEDICINE

April 2006

PART 1: RADIOGRAPHERS (DIAGNOSTIC)

The Diagnostic Radiographers' Code of Practice provides advice and guidelines to members of the profession practicing the Profession. This Code of Practice is designed to compliment the Code of Professional and Ethical Conduct for Medical Imaging Technology Radiographers, produced by the BPSM (revised Feb.2002).

Radiographer (Diagnostic)

The radiographer (diagnostic) who in terms of Council Directive 97/43/EURATOM may be defined as a practitioner and/or prescriber, performs the radiographic examination that creates the images needed for diagnosis in accordance with the above Council Directive. Radiography integrates scientific knowledge and technical skills with effective patient interaction to provide quality patient care and useful diagnostic information care. Thus radiographers (diagnostic) shall:

- Demonstrate an understanding of human anatomy, physiology, pathology and medical terminology.
- Maintain a high degree of accuracy in radiographic positioning and exposure technique.
- Maintain knowledge about radiation protection and safety and implements the ALARP principle.
- Prepare for and assist the radiologist in the completion of complex radiographic examinations.
- Prepare and may administer contrast media and medications in accordance with established protocols and guidelines.
- Liaise between patients, radiologists and other members of the support team.
- Remain sensitive to the physical and emotional needs of the patient through good communication, patient assessment, patient monitoring and patient care skills.
- Use professional and ethical judgment when performing their duties.
- Embrace continuing education for optimal patient care, public education and enhanced knowledge and technical competence.

Education and Certification

Radiographers (diagnostic) complete an accredited educational program in radiography that may be carried out at the Institute of Health Care (University of Malta) or any other recognised institution by the CPCM.

Upon completion of a course of study in radiography individuals are registered and certified by the CPCM.

Code of Practice

The Code of Practice defines the practice and establishes general criteria to determine compliance.

The Code of Practice is a statement enunciated and promulgated by the profession for judging the quality of practice, service and education. It includes desired and achievable levels of performance against which actual performance can be measured.

The code focuses on the dynamic nature of the health care delivery system. It is adaptable not only to the area of practice but also the locality of practice and institutional needs.

i) Radiography Clinical Performance:

The Radiographer (diagnostic)

a) Assessment

Collects pertinent data about the patient and about the procedure.

b) Analysis/Determination

Analyses the information obtained during the assessment phase and develops an imaging plan for completing the procedure.

c) Patient Education

Provides information about the procedure to the patient, or his/her legal guardian, health care providers and others.

d) Implementation

Implements the imaging plan.

e) Evaluation

Determines whether the goals of the action plan have been achieved.

f) Implementation

Implements the revised action plan.

g) Outcomes Measurement

Reviews and evaluates the outcome of the procedure.

h) Documentation

Documents information about patient care, the procedure and the final outcome.

ii) Quality Performance:

The Radiographer (diagnostic)

a) Assessment

Collects pertinent information regarding equipment, procedures and the work environment within established guidelines.

b) Analysis/Determination

Analyses information collected during the assessment phase and determines whether changes need to be made to equipment, procedures or the work environment.

c) Education

Informs patients, the public and other health care providers about procedures, equipment and facilities.

d) Performance

May perform quality assurance activities or acquires information on equipment and materials.

e) Evaluation

Evaluates quality assurance results and may establish an appropriate action plan.

f) Implementation

May implement the quality assurance action plan.

g) Outcomes Measurement

Assesses the outcome of the quality assurance action plan in accordance with established guidelines.

h) Documentation

Documents quality assurance activities and results.

iii) Professional Performance:

The Radiographer (diagnostic)

a) Quality

Strives to provide optimal care to all patients.

b) Self-Assessment

Evaluates personal performance, knowledge and skills.

c) Education

Acquires and maintains current knowledge in clinical practice.

In order to maintain certification, radiographers shall strive to complete appropriate continuing education as directed by national and European legislation and/or regulations.

d) Collaboration and Collegiality

Promotes a positive, collaborative practice atmosphere with other members of the health care team.

e) Ethics

Adheres to the profession's accepted Code of Ethics.

f) Exploration and Investigation

Participates in the acquisition, dissemination and advancement of the professional knowledge base.

Conclusion

While a minimum standard of acceptable performance is appropriate and should be followed by all radiographers (diagnostic) in a specific area, it is unrealistic and highly inappropriate to assume that professional practice is the same in all Hospitals. To conduct an appropriate review of the code of practice, one must look to the professional standard as well as national and European legislation.

It is highly recommended that every Radiographer (Diagnostic) carries out Continuing Professional Development.

PART II: RADIOGRAPHERS (THERAPY)

The Radiographer (Therapy) Code of Practice provides advice and guidelines to members of the profession practising the profession. This code of practice is designed to compliment the code of professional and ethical conduct for radiographers (therapy) produced by the BPSM (revised February 2002).

The WHO recognises that at least 50% of all cancer patients require radiation therapy at some stage of their disease. Radiation therapy has a critical role in the spectrum of care, particularly in the management of many types of early stage cancer, with an additional role in the optimal care of locally advanced malignancy, and metastatic disease.

For some kind of cancer radiation is the predominant form of treatment. For other types it is used in conjunction with surgery and chemotherapy.

Radiographer (Therapy)

The Radiographer (therapy) is that professional with direct responsibility for the administration of radiation therapy to cancer patients. This encompasses the technical delivery of the radiation dose, tumour localisation and dosimetry, the clinical care and the psychosocial care of the patient on a daily basis throughout the treatment preparation, during treatment and immediate post treatment phases. The Radiographer (therapy) is particularly concerned with the principles of radiation

protection for the patient, and third parties while carrying out these duties. Thus, professional competence requires the Radiographer (therapy) to:

- Apply knowledge of human anatomy, physiology, pathology and medical terminology.
- Must maintain a high degree of accuracy in radiation oncology techniques and treatment planning procedures.
- Apply knowledge of radiation physics, and tumour dose calculations.
- Calibrate, calculate and keep an accurate record of radiation outputs of treatment machines. Ensuring that radiation outputs are within permissible limits prior to starting treatments. To take appropriate action in line with departmental policy if limits are exceeded.
- Keep an accurate record of radiation doses delivered to patients.
- Be able to interpret and apply all relevant rules, regulations and recommendations regarding radiation protection and dose optimisation, for example those coming from international bodies such as the I.C.R.P., I.A.E.A., and the Radiation Division of the E.U.
- Maintain knowledge about radiation protection and safety and implements the ALARP principle.
- Accept responsibilities as “Radiation Protection Supervisors”, when designated to act in this role by appropriate authorities.
- Take appropriate action and skill to minimise radiation to patients and staff in case of emergencies.
- Prepare for and assist the oncologist in radiation treatments.
- Prepare and may administer contrast media in accordance with established guidelines during radiotherapy treatment planning procedures and tumour localisation.
- Be part of a team that develops, maintains and monitors the quality standards within the Radiotherapy Department.
- Be part of and liaise between patients and other members of the support team. Radiographers (therapy) are the primary liaison between patients and other members of the radiation oncology team.
- Deliver patient care and service unrestricted by concerns of personal attributes on the nature of the disease or illness and non-discriminating with respect to race, sex, age, religion, disability or national origin, social or economic status.
- Promote and protect the dignity, privacy, autonomy and safety of patients.

- Perform Mould Room work in the preparation of fixation devices and customised shielding blocks for use during radiation treatments.
- Assess situations, exercise care, discretion and judgement, assume responsibility for professional decisions, and act in the best interest of the patient.
- Should at all times act in such a manner as to justify public trust and confidence, to uphold and enhance the good standing and reputation of the profession, and to serve the public interest and the interests of patients.
- Remain sensitive to the physical and emotional needs of the patient through good communication, patient assessment, patient monitoring and patient care skills.
- Use professional and ethical judgement when performing their duties.
- Adhere to the tenets and domains of the scope of practice for radiation therapists.
- Actively engage in lifelong learning to maintain, improve and enhance professional competence and knowledge.

Education

Neither the Institute of Health Care nor the Faculty of Medicine at the University of Malta provide courses in radiotherapy.

Trainee Radiographers (therapy) have to precede abroad (U.K.) to complete a degree course leading to B.Sc (Hons) Radiotherapy.

Registration/Certification

On obtaining their BSc in Radiotherapy, Radiographer (therapy) are registered/certified by the CPCM.

Code of Practice

The Code of Practice is a statement enunciated and promulgated by the profession for judging the quality of practice, service and education. It includes desired and achievable levels of performance against which actual performance can be measured.

The Code of Practice defines the practice and establishes general criteria to determine compliance. It focuses on the dynamic nature of the health care delivery system. It is adaptable not only to the area of practice but also the locality of practice and institutional needs.

i) Clinical Performance

The Radiographer (therapy)

a) Assessment

Collects permanent data about the patient and about the treatment plan.

b) Analysis/Determination

Analysis the information obtained during the planning phase and applies the radiation treatment plan in completing the treatment procedure.

c) Patient Education

Provides information relevant to the patient with regards to treatment planning procedures and the actual course of treatment by radiation.

d) Implementation

Implements the radiation treatment plan and also any revised alterations to that plan.

e) Evaluation

Reviews and evaluates the outcome of treatment by radiation, with respect to patient's condition and side-effects.

f) Documentation

Documents information about patient care, clinical investigations, radiation treatment procedure, radiation doses deliver and the final outcome.

g) Accountability

Is accountable for his/her work.

h) Confidentiality (Patient)

Treats any information obtained from patients or their records with confidentiality. Prior consent from patient is needed in some circumstances before divulging certain information.

i) Confidentiality (Clinical)

Is not to divulge to the patient results obtained from radiation procedures unless as part of an agreed scheme of work in line with departmental policies.

j) Objections

Informs the Council for the Professions Complementary to Medicine about any conscientious objection to the exercise of his/her professional practice.

ii) Quality Performance

The Radiographer (therapy)

a) Assessment

Collects pertinent information regarding equipment, procedures and the work environment within established guidelines.

b) Analysis/Determination

Analysis information collected during the assessment phase and determines whether changes need to be made to equipment, or the work environment.

c) Education

Informs patients, the public and other health care providers about radiotherapy procedures, equipment and facilities.

d) Performance

May perform quality assurance, activities or acquires information on equipment and materials.

e) Evaluation

Evaluates quality assurance results and may establish an appropriate action plan.

f)Implementation

May implement the quality assurance action plan.

g) Outcome Measurements

Assess the outcome of the quality assurance action plan in accordance with establish guidelines.

h) Documentation

Documents quality assurance, activities and results.

iii)Professional Performance

The Radiographer (therapy)

a) Quality

Strives to provide optimal care to all patients.

b) Self-Assessment

Evaluates personal performance, knowledge and skills.

c) Education

Acquires and maintains current knowledge and clinical practice.

d) Collaboration and Collegiality

Promotes a positive, collaborative practice atmosphere with other members of the health care team. Takes appropriate action if the workload and pressures on professional colleagues and subordinates are such as may endanger safe standards of practice.

e) Ethics

Adheres to the Profession's accepted Code of Ethics. Ensures that unethical conduct and illegal profession activities are reported to the CPCM.

f) Exploration/Investigations

Participates in the acquisition, dissemination, and advancement of the professional knowledge base.

g) Organisation

Assumes the responsibility for proper and efficient organisation of his/her work, use of resources, and application of departmental policies for the area in radiotherapy under his/her responsibility. The level of responsibility depends upon the appointment level within the organisation structure.

h) Cross-Infection

Has duty to take appropriate precautions to protect patient and staff from cross-infection with total safe guards to all concerned.

i) Advertising

Avoids advertising or signing advertisement by making use of his/her professional qualifications to encourage the sale of commercial products.

Conclusion

While a minimum standard of acceptable performance is appropriate and should be followed by all Radiographer (therapy) in a specific area, it is unrealistic and highly inappropriate to assume that professional practice is the same in all hospitals. To conduct an appropriate review of the code of practice, one must look to the professional standard, as well as national and European legislation.

If at any time, guidelines, codes or policies are considered to impede the safe and effective performances of Radiographer (Therapy) duties, proposes for change are to be initiated through the CPCM.

A request for change in nomenclature, from Radiographer (Therapy) to Radiation Therapist has been submitted for consideration by the BPSM.

It is highly recommended that every Radiographer (Therapy) carries out Continuing Professional Development.