

CORRESPONDENCE

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Letter in response to 'The role of research for advanced practitioners'

Re: Sim J. Omission of research in the conceptual model of advanced practice. *J Med Radiat Sci*, doi:10.1002/jmrs.128

We have read with interest the correspondence between the authors of the article 'Conceptualisation of the characteristics of advanced practitioners in the medical radiation professions'¹ and Associate Professor Jenny Sim regarding the role of research in advanced practice (AP) radiography roles.

We enjoyed the paper, and would like to commend the authors for their contribution to this important topic in our field. It is encouraging to observe discourse on the types of roles we would like to see, and the characteristics or competencies associated with them. It is to be expected that our national models will vary somewhat, given the differences in our professional jurisdictions, regulatory frameworks, associations and how the AP initiatives have evolved in each country. In Canada, our AP roles have developed in radiation therapy initially as a provincially funded, data-driven (and evidence-based) project in Ontario for over 10 years before a national framework was established.² The concept is now expanded beyond Ontario and the national certification process is currently undergoing a pilot testing phase (<http://www.camrt.ca/wp-content/uploads/2015/02/Advanced-Practice-in-Medical-Radiation-Technology-A-Canadian-Framework.pdf>).

Our first step in Ontario involved a small group of practitioners working within a limited number of mainly large and urban centres. We positioned research as a core focus from the beginning, with the assumption that our advanced clinical experts would be the best positioned to build our professional-specific knowledge base. The AP radiation therapist, as a politically astute clinical leader and expert clinician has the focus, skills and flexibility to see the evidence gaps and work towards filling them. Based on the collection of strong evidence showing the positive impact this new health care professional is having on the radiation therapy system,^{2,3} Ontario's initiative has expanded to 25 advanced practice radiation therapists in nine of its 14 cancer centres. In 2014/15 alone, they

combined for the production of 14 published manuscripts and 16 published abstracts for conference presentations and are engaged in a total of 52 research projects – a level of research-related academic production that far exceeds the professional average in Canada. These activities integrate them deeply into the inter-professional teams within which they work and make them a vital contributor to the creation of new knowledge in radiation therapy; an activity that is considered to be foundational to the definition of a 'profession'.^{4,5}

While we also admire the Canadian-based physician CanMeds framework – we would respectfully point out that radiographers (including those in an AP position) have a very different role, background and opportunities than the typical specialist physician. Traditionally our education did not include the same type of academic preparation assumed by the CanMeds framework,⁶ such that when they say 'scholar', it is automatically assumed that the physician will produce, consume and analyse research as well as use the scientific method to solve problems or questions. If we want to be equal contributors on the team, we need to overtly require this activity as this is not historically part of our professional identity. In addition, we have the opportunity to develop something unique to our profession and perhaps to move away from medically based criteria and models.

Thank you for the opportunity to engage in a discussion about the importance of research in AP roles. As stated, we feel omitting research as a core activity diminishes the value of the role, its contribution to high-quality patient care and the status of the profession.

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*Amanda Bolderston DCR(T) (UK), RTT, MSc, FCAMRT
Radiation Therapy, British Columbia Cancer Agency, Fraser
Valley Centre, Surrey, British Columbia, Canada
Email: amanda.bolderston@bccancer.bc.ca
Tel: +1 604 707 5900 (ext 674432)*

*Nicole Harnett MR(T), BSc, Med
Department of Radiation Oncology, University of Toronto,
Toronto, Ontario, Canada
Cancer Care Ontario, Toronto, Ontario, Canada*

*Donna Lewis MRT(T), BA
Odette Cancer Centre, Sunnybrook Health Sciences Centre,
Toronto, Ontario, Canada*

*Marcia Smoke MRT(T), RTT, ACT, MSc
Juravinski Cancer Centre, Hamilton, Ontario, Canada*