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Walking the cliff-edge: Managing the initial shift from student radiographer to professional radiographer

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Background: The movement from being a healthcare student to a healthcare professional in the UK has never been more pronounced than it is today. The marketisation of the higher education (HE) and health sectors requires that students now make an almost instantaneous shift upon qualification from a consumer identity to that of service provider, with a range of sharp corollary impacts upon their sense of accountability at least (Sloane and Miller, 2017). In these terms, how the earliest days of post-qualification employment are managed can have profound and long-lasting consequences. In this paper, emergent of a broader qualitative study funded by the College of Radiographers Industrial Partnership Scheme, findings around the issue in diagnostic radiography are investigated.

Methods: With institutional ethical approval, N=20 ($f=13$, $m=7$) junior diagnostic radiographers working across the UK were recruited for extended, semi-structured telephone interviews. Verbatim transcripts were analysed using Straussian Grounded Theory (Waring et al., 2018).

Results: Two pertinent matters were addressed by all participants: (1) Induction, and; (2) Preceptorship. Perhaps predictably, positive experiences of either/both were reported to have

smoothed the pathway into practice, while actively negative experiences were reported to have stymied it. However, an overall *absence* of either was received more variably. While some participants felt undermined, others claimed that it had boosted their resilience and made them more ready for the challenges ahead.

Conclusion: As Yale (2019) also notes of personal tutoring in HE, it appears that if you can't do induction/preceptorship in radiography well, then don't do it at all.

References

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