

Clatterbridge Centre for Oncology **NHS**  
NHS Foundation Trust

# The Factors that Influence Job Satisfaction in Bands 5 and 6 Therapy Radiographers

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SHARPENS YOUR THINKING

THE COLLEGE OF RADIOGRAPHERS  
INDUSTRY PARTNERSHIP SCHEME

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## Rationale

- **Drive to increase capacity and quality** (Cancer Reform Strategy 2007)
- **30% increase in radiographer numbers** (NRAG 2007)
- **Staff shortages in RadioTherapy** (Kresl *et al* 2004)
- **Vacancy figures for RT higher than other Allied Health Professions** (Probst and Griffiths 2007)
- **3% attrition PA** (Griffiths, Craig and Abrahams 2006) **high attrition seen in HEI's**
- **Junior professions offer the greatest retention challenge** (Newham and Maylor 2002)

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## Job Satisfaction

- **Multifaceted**
- **Index of positive and negative work experiences** (Makanjee *et al* 2006)
- **Global concept**
- **Job satisfaction is closely linked to intrinsic motivation** (Boreham *et al* 2006)
- **Low job satisfaction correlates to withdrawal behaviors** (Saari & Judge 2004)
- **Negatively effects performance.**

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## Objectives

- Explore and understand the professional experiences of band 5 and 6 therapy radiographers.
- Identify Factors influencing perceptions of job satisfaction
- Develop strategies to increase job satisfaction for this group of practitioners
- Inform a Phase II study

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## Methodology

- Ethical approval
- Case study design
- Two large centres
- Purposive sampling
- Focus groups were recorded and transcribed per Verbatim
- Thematic analysis
- Comparison between and within cases
- N=34
- Age range = 21-42 years
- Years qualified range = <1 to 19 years

## Results



### 5 Emergent Themes

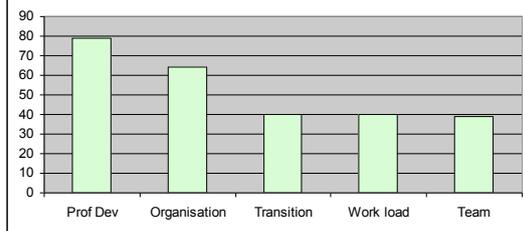
- Professional Development
- Organisation
- Transition
- Work Load
- Team

## Coding frequency & Rank



	Band 7 Pilot	Centre 1 B5	Centre 2 B5	Centre 1 B6	Centre 2 B6	Total	B5 Total	B6 Total
Pro Devp	18	21	13	15	12	79	34	27
Organisation	14	12	9	9	20	64	21	29
Work Load	4	9	7	7	13	40	16	20
Transition	11	9	7	11	2	40	16	13
Team	7	11	5	13	3	39	16	16

Coding Frequency



## Professional Development



- CPD
  - "if it was left up to (management) to support you then you probably wouldn't fulfil HPC requirements."
  - "I've now done a year with no CPD".
- Training
  - "getting signed off"
- Rotations
  - "you don't get much say in your rotations".
  - "don't get rota'd around...deskilled in other things".
- Development Review
  - "I never had one until it was brought in with AFC".
  - "my PDR's tend to take ten or fifteen mins and it's just like yep, yep, yep".

## Organisation



- Hierarchy
  - "(Band 7s) come and take over...they know best and they'll make the decisions".
  - "(the band 8's) in their own little safe cocoon of the office"
- "feel really guilty if you're doing something that you think...you haven't got a higher enough standing in the department".
- Control
  - "you're the one on the front line...getting all the flack...and you're the one who hasn't got the control to do your job right".

## Work Load



- "too many targets...unrealistic targets so then you're setting yourself up for a fall".
- "no alternative but to just go along with it and just get (patients) done as quick as you can".
- "things double booked left, right and centre"
- "We shouldn't have 49, but if we are...just be realistic and not mess people about".

## Transition



- *"the university sold the course that you can do this, that and the other...realised my life would involve treating 40 prostate cases a day".*
- *"felt like a student again"*
- *"survive" or simply "get through the first year".*
- *"happy to still be a radiographer and not making any bad mistakes".*
- *"I had an unofficial mentor..."*

## Team



- *"I didn't get the support of the team...it was really, really hard for me".*
- *"I felt really well looked after...and I was part of a really good team".*
- *"if I was to go to any other trust I don't think I'd have had the support..."*
- *"I had so much support. I was even given a mentor".*

## A patient's perspective...



- *"(patients) always say how nice we are and that it's nice coming to treatment...all the pressures going on...isn't being reflected on the (patients)"*

**...this comes at a cost  
...Is it sustainable?**

## Conclusion



Professional Development

Organisation

Workload

Transition

Team

## Recommendations



- Improving the way we develop radiographers (pdr, mentorship, competency based work, rotations)
- Improved systems (booking, rotations, service development)
- Phase II study?

## Acknowledgments



- Society and College of Radiographers
- CoRIPS
- Angie Eddy & Dr. Heidi Probst, Sheffield Hallam University
- Angela Baker, Clatterbridge Centre for Oncology
- Participants, managers and Organisations

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Thanks for your attention.  
Any Questions?

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