



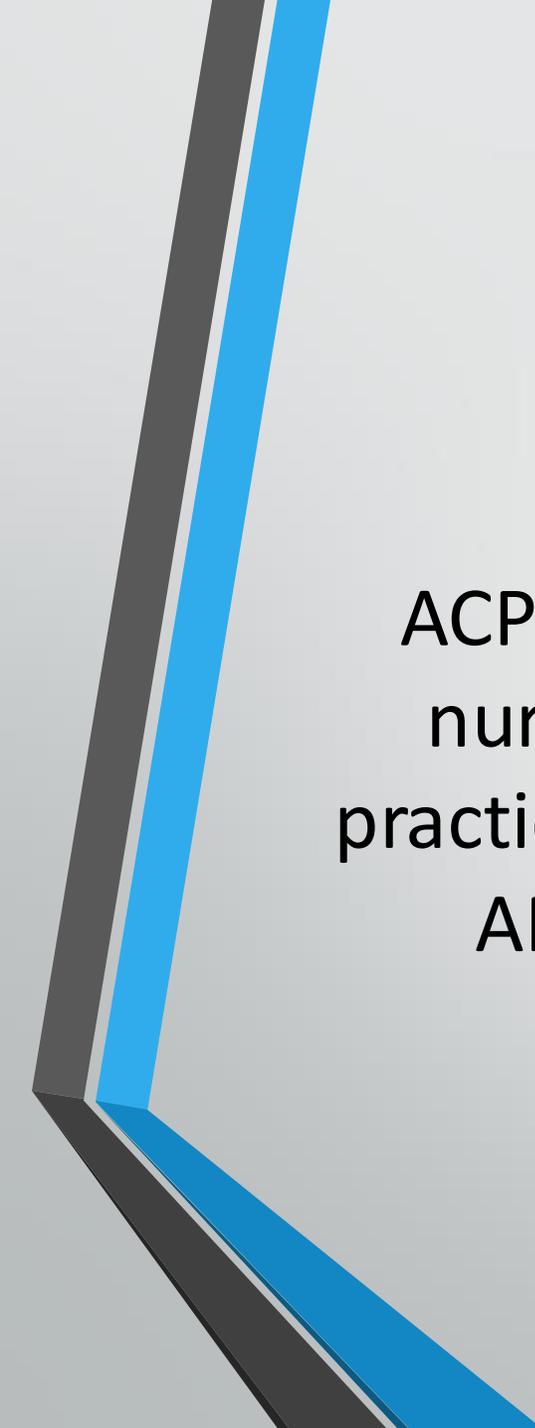
**Advanced
Practice
Radiation
Therapists:
Progress, Not
Overreach**

Karen Crowther

Advance clinical practice (ACP)

Advance clinical practice (ACP) is delivered by experienced registered healthcare practitioners. It is a level of practice characterised by a high level of autonomy and complex decision-making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, management and leadership, education and research, with demonstration of core and area specific clinical competence

<https://hee.nhs.uk/our-work/advanced-clinical-practice>



ACP models are well-established across U.S. healthcare, nurse practitioners, physician assistants and advanced practice providers all work at expanded levels of autonomy. APRTs follow this same evidence-based framework, adapted for radiation oncology

What is an APRT?

An APRT (Advance Practice Radiation Therapist) is a RTT who, through training and education, possesses the knowledge, elevated skills and judgment to provide a higher level of care within the radiation oncology department, impacting quality care and physician practice.

APRTs do not replace radiation oncologists

APRTs reduce low-value physician tasks

APRTs improve safety and continuity



Clinical Practice

to ensure high quality care that is safe, effective, and person-centered.

Education (Facilitating learning)

to engage in reflective practice, self-development and effective learning of others.

Leadership

the ability to work effectively in a team, lead others and potentially undertake management responsibilities in certain circumstances.

Research (Evidence, research & development)

using evidence, research and development to inform practice, educate and improve services.

Four Pillars of Practice

Systematic Review of APRT Roles Internationally



Most of the evidence-based practice for APRT originated in United Kingdom (35%) • Canada (31%) • Australia (18%)

Drivers for Advance Practice

Increasing Complexity

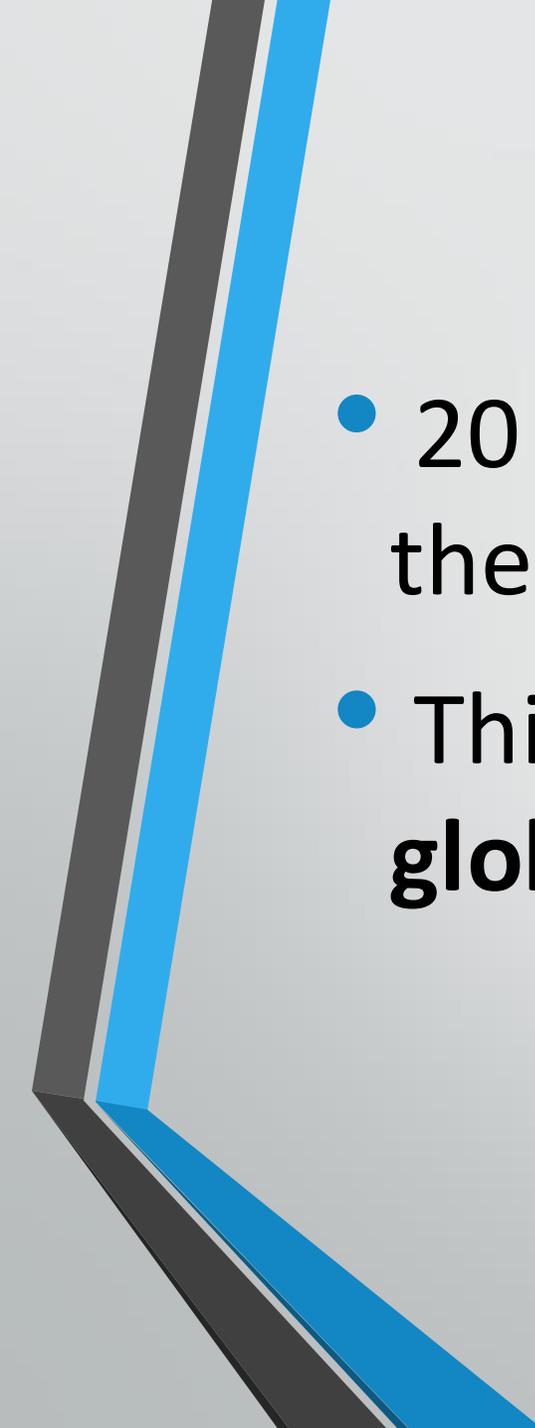
- Rising acuity and multi-morbidities
- Rapid advances in treatment
- Need for specialist-level decision-making

Workforce Pressures

- Ongoing staffing shortages across healthcare
- Escalating service demand
- Demand for improved continuity and timely access to care

Need for Modernised Roles

- Traditional role boundaries no longer meet service needs
- Push towards more flexible, multidisciplinary models
- ACP roles support innovation and sustainable service transformation

- 
- 20 years of evidence exists: the U.S. remains the last major RT system without APRTs
 - This is not experimental, this is **established global best practice**



Experience



Founding Partner

Bridge Oncology · Self-employed

Jan 2013 - Present · 2 yrs 1 mo

United States · On-site

At Bridge Oncology, we acknowledge the complex challenges confronting the healthcare industry, particularly within the radiation oncology service sector. The intersection of escalating operational expenditures a

Very Impressive!!



NAMAPA

Member Board Of Directors

National Association of Medication Access & Patient Advocacy (NAMAPA) · Part-time

Jan 2021 - Present · 5 yrs 1 mo

Jordan Johnson is a leading expert on innovative data utilization and operational disruption/ optimization application in the healthcare space. He has created various software programs, provided value-based



Founder of The Healthcare Hub

The Healthcare Hub * · Part-time

Jan 2021 - Present · 5 yrs 1 mo

This is content data repository of the changes in healthcare:

www.thehealthcarehub.info



Owner and Founder

LegacybyImpact

Feb 2018 - Present · 8 yrs

Pelahatchie, MS

www.legacybyimpact

Seeks to invest in others. Through all of my observations and those of my peers and colleagues, I have

My Journey to Advance Clinical Practice

Began my career in the Northern Ireland Cancer Centre (NICC)

BSc (Hons)
Radiography
(Therapeutic)

Moved back to the NICC as the
Research and Development Lead

Completed
MSc

Started a Ph.D.

Institute of Leadership and
Management, City and Guilds,
Leadership and Management (Level 5)

Joined the Northern Ireland Cancer
Trials Network

Started MSc in
advancing practice in
oncology and
radiotherapy

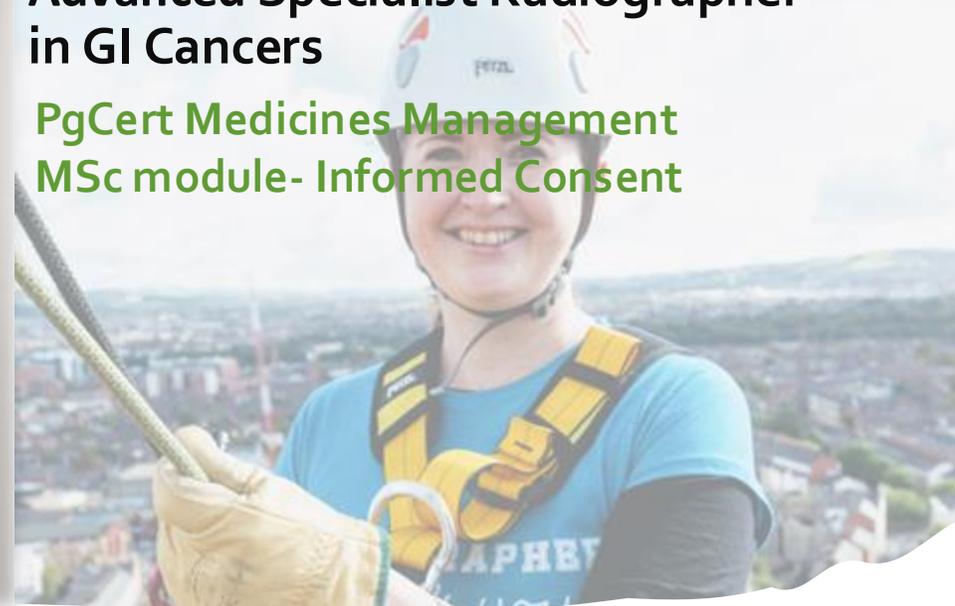
MSc modules included Radiotherapy Review and
IGRT

Advanced Specialist Radiographer
in GI Cancers

PgCert Medicines Management
MSc module- Informed Consent

Registered
Radiographer

HSC Health and
Social Care



Advanced Practice Role in GI Cancers

Role

- Radiotherapy alone or concomitant treatments
- Point of contact for all GI patients referred for radiotherapy
- From referral to post-treatment (approx 6 weeks)
- Obtained informed consent for radiotherapy treatments
- On-treatment review (medicine prescribing)
- Radiological requests

Education

- MSc
 - Radiotherapy Consent
 - Radiotherapy Review
 - IGRT
- PgCert Medicines Management

Patient Benefits



Faster access to care



Continuity: Maintain seamless interactions between patients and staff



Better management of treatment related side-effects

Team Benefits



Assists oncologists manage their workload



Enhances multidisciplinary teams (MDTs)



Opportunities for career advancement

System Benefits



Efficiency



Standardisation



Throughput improvement

Safety & Governance

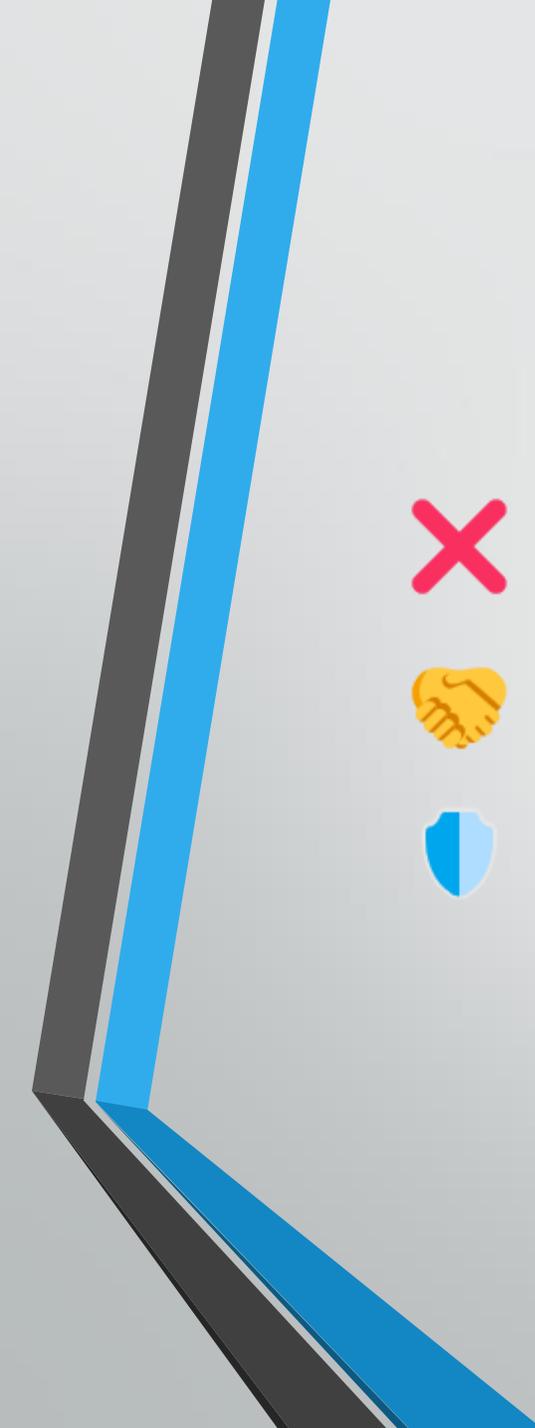
 Competency frameworks

 Clear escalation

 Protocol-driven



Rebuttal Highlights



✘ Not boundary blurring

🤝 Complementary role

🛡️ Enhances safety

Conclusion



APRTs = progress



Better outcomes



Future-proofed workforce

**The evidence is in,
the need is urgent,
and the path's clear—
it's time for the U.S.
to stop asking
if APRTs can
work and start
showing the
world how
well they
work here.**

