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Introduction

The NHS Plan (Department of Health, 2000) announced that, by the year 2004, 6,500 more therapists and other health professionals would be employed in the NHS. However, there is currently a shortage of entrants to professional training courses in radiography. In a survey of UK therapy radiography schools, Johnson (2000) highlighted a total shortfall of 22 therapy radiography students for the 1999 intake, rising to 46 for the 2000 intake. In order to respond to the increased demand for radiographers it is crucial to identify the key factors that encourage or dissuade potential recruits to enter a radiography career and whether to pursue that career with the NHS. To address these issues a team from the Business School at Loughborough University has been commissioned by the Department of Health to carry out research into the ways in which the NHS is perceived as an employer by potential staff. The two-year project, which commenced in September 2000, focuses specifically on the radiography, physiotherapy and nursing professions. The investigation has been divided into two main stages. The first qualitative stage has now been completed and the findings provide the basis for this paper. The second, quantitative stage is currently being conducted and completion is expected by Autumn 2002. Further details of the structure of the research project are provided in, Who Would be a Radiographer in the NHS? *Synergy News*, August, 2001.

Methodology

The first stage of the study was intended to explore and understand different people's perceptions relating to the central theme of the research i.e. the attractiveness of the NHS as an employer to potential radiography, physiotherapy and nursing staff. A qualitative approach was adopted for this stage of the study so as to allow a clear focus, but also to provide the opportunity for the capture of wider issues that may help the research team form a fuller understanding of the phenomena under investigation. Although the study utilised a clear theoretical framework based on Ajzen's (1991) theory of planned behaviour, the lack of existing empirical research concerning the

attractiveness of the NHS as an employer meant the first stage of the research was primarily exploratory, rather than confirmatory, in nature.

The most appropriate method for the exploratory research was individual and group interviews. Group interviews comprising approximately eight interviewees were adopted whenever practical for sample groups 1 to 4 (see table 1) although some individual and small group sessions were required for practical reasons. Group interviews were chosen as the primary method for these groups because they were quicker and cheaper to conduct than individual interviews with the same number of respondents. By contrast, individual or small group interviews were the main approach for sample groups 5 and 6 as it was considered impractical to attempt to arrange larger group sessions for these individuals. In total 88 participants were interviewed across the six different sample groups although as table 1 shows, it proved difficult to access radiographers working in agency and independent sectors.

<<<<< INSERT TABLE 1 ABOUT HERE >>>>>

All the interviews followed a common semi-structured topic guide. Adopting a semi-structured approach allows the interviewer to ask certain major questions the same way each time, but remain free to alter their sequence and probe for more information. The interviewer is therefore able to exert some flexibility over the interview style, tailoring it to the level of comprehension and the ability of the respondents to articulate. It also facilitates flexibility for the interviewer to respond to the issues raised by participants.

The analysis of the transcripts involved the three concurrent activities of data reduction, data display and conclusion drawing/verification (Miles and Huberman, 1994). Data reduction was utilised to analyse each interview transcript using a structured coding framework. Data display was facilitated through the use of the qualitative software package QSR N'Vivo.

Findings

The findings are divided into three main sub-sections. The first sub-section is concerned with the perceptions of the different sample groups toward radiography as

a profession. The second sub-section considers the best and worst aspects of working as a radiographer for the NHS and finally the third sub-section reviews how participants thought the NHS could be made more attractive as an employer.

Images of Radiography

When discussing the images that the terms 'Radiography' and 'Radiographer' engendered a number of themes were identified from participants' comments. Many participants identified descriptive characteristics of the role such as *'button pushers'*, *'taking X-rays'* and considered a career in radiography as *'not sexy'* in comparison to other career options. The school pupils, largely due to their limited knowledge of the profession, tended to draw on personal experience to describe the activities of a radiographer, for example *'taking X-rays for sporting injuries'*. It was acknowledged by many of the groups that radiography played an important role particularly in diagnosis, but many participants took the view that the general public did not recognise this contribution. The students added that this lack of recognition was further compounded through low pay levels and the potential hazards of working with radiation making the profession appear less attractive as a career choice.

Best and Worst Aspects of Working for the NHS as a Radiographer

For those participants who were not qualified there was a strong consensus that the interaction with patients and resulting job satisfaction would be one of the most attractive aspects of working as a radiographer. They also added that job security, job availability and variety in their work were appealing aspects of choosing to work for the NHS. A good career structure and on-going training opportunities were also cited by all of the non-qualified groups as further positive aspects of working for the NHS. However, independent sector radiographers emphasised that by working outside the NHS they had experienced higher levels of teamwork, appreciation and recognition. Similarly, the agency workers identified higher levels of pay and having greater flexibility over the hours they chose to work as significant factors outweighing some of the benefits of working for the NHS.

When considering the least attractive aspects of working for the NHS as a radiographer, a strong theme that emerged was concerns about low pay levels and continued staff shortages that led to stressful working conditions. These conditions

were thought to counter the positive aspects of working with patients because of the lack of time to deliver quality care and resulting low morale. The radiography students also noted that a general lack of resources in the NHS meant that they were expected to have to make do with old equipment and have to cover for a lack of qualified staff. Radiographers working in the independent sector echoed these views about the NHS. Other areas of concern that were raised by the qualified staff and radiography assistants were their perceptions of a bureaucratic management system that supported the functioning of the health service, and a lack of positive feedback from line managers.

Making the NHS and Radiography More Attractive

Predictably all participants in all six sample groups said that increasing pay levels would help to make the NHS more attractive, coupled with an increase in the number of staff. It was generally thought that an increase in staff numbers would reduce the stress and pressure on staff, resulting in more time to see patients and higher levels of job satisfaction and morale. Improvements in resourcing, equipment and the flexibility of working hours were also considered necessary in order to improve the attractiveness of a radiography career in the NHS.

In order to improve the accessibility of the profession to unqualified staff the radiography assistants and mature students thought that on the job training, increased bursaries for training courses and more time being made available for staff wishing to study would help with the recruitment process. The radiography students also thought that improvements could be made in the promotion of the profession, both to school pupils and to interested staff already working for the NHS, through advertisements and open days. In addition, the students thought that greater promotion would also help in improving the public's recognition of the role of a radiographer in the healthcare environment, which may have a long term positive effect on recruitment.

Discussion and Conclusions

The findings suggest that radiography as a career choice is only moderately attractive to potential recruits and that this attraction is predominately based on the interaction with patients. The findings suggest that the radiography profession is struggling to recruit new staff for a number of reasons. Fundamentally, comments from the school

pupils and the students strongly suggest that the general public simply have very limited knowledge of the work of radiographers and do not consider the profession as an option when choosing a career path. For those individuals who are aware of the profession, images of boring repetitive tasks and potentially dangerous working conditions make the role unattractive. Consequently, it is vital that a concerted effort is made to raise the profile of radiographers at both a local and national level through, for example, open days and advertisements.

Also of concern are the views of the independent and agency sector radiographers, that suggest that returning to work for the NHS is an option they are unlikely to consider. As all the other sample groups interviewed would have to undertake several years of training before they could help address the current shortages, qualified staff working outside the NHS represent one of the fastest possible solutions to understaffing. However, greater levels of recognition, pay and more flexible working hours appear significant barriers to these staff choosing to return to the NHS. Consequently, in order to attract these staff, significant improvements will be required in the management and organisation of the NHS, particularly at a local level.

It is clear from these initial findings that the solution to the current shortfall of radiographers in the NHS is not a simple one. An organised co-ordinated approach is necessary in order to address the variety of concerns held by different potential recruits and returners to the profession and the NHS. This approach will require inputs at both a national and local level in order to maximise the appeal and the likelihood of increasing the number of radiographers working for the health service in the long term. The preliminary findings presented in this paper suggest that should such measures be introduced, then the chances of the government meeting its recruitment targets are likely to be significantly greater.

Whilst this stage of the research has provided a strong indication of some of the issues surrounding radiography and the NHS in career decisions, it should be emphasised that further research is required to confirm which of these issues are the most important in influencing the attractiveness of the NHS as an employer to potential radiography staff. Consequently, a further stage of the project has already been initiated, through a questionnaire survey, in order to collect the views of a greater

number of respondents across each of the six different sample groups. The questionnaire will be targeted at the same sample groups and will be sent to individuals across the United Kingdom that contacted the NHS Careers helpline and agreed to be contacted again. In addition, where insufficient numbers of potential respondents can be identified for certain groups, such as independent sector or agency staff, professional organisations will be contacted for assistance. A total target response rate of 1100 returned questionnaires has been set for this stage of the research. The questionnaire survey will be conducted during summer 2002 and it is envisaged that the findings will be available later in the year.

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Table 1: Summary of Individual and Group Interviews Conducted for Stage 1

Group	Actual Number of Participants
A) Those neither professionally qualified nor in the NHS	
1. School Children*	30
2. Mature Students on Radiography Access Courses	18
B) Those not yet qualified but working in the NHS	
3. Students in Professional Training	18
4. NHS Assistants (e.g. Radiography Assistants)	17
C) Those qualified but not working in the NHS	
5. Agency Staff	2
6. Staff Working in the Independent Sector	3
Total:	88

*School children were asked to discuss both Radiography and Physiotherapy