

# Scope of Practice 2025

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## 1. Introduction

This document sets out at a high level the scope of practice of radiography within the fields of clinical imaging and oncology, delivered by the professional workforce.

It provides a summary of the typical scope of practice of the professional workforce across all levels of professional practice, including at practitioner, enhanced, advanced and consultant levels of practice. It also describes the factors that influence scope of practice, including regulation and registration and access to medicines and prescribing mechanisms.

The use of the phrase ‘professional workforce’ in this document refers to members of the Society of Radiographers (SoR) in the following professional groups:

- diagnostic radiographers
- therapeutic radiographers
- dosimetrists
- nuclear medicine technologists
- sonographers
- other associated autonomous professions.

This document does not apply to the support workforce, including clinical support workers, senior clinical support workers, mammography associates and assistant practitioners. Separate resources are available for this workforce (CoR 2023; HEE 2022).

This document does not apply to students or trainees.

## 2. Regulation and registration

The professional workforce is either required to register with a regulatory body set up by statute, or is registered by an organisation holding accreditation from the Professional Standards Authority (PSA).

The following summarises the current arrangements:

- Diagnostic and therapeutic radiographers are regulated by statute by the Health and Care Professions Council (HCPC). The titles ‘radiographer’, ‘diagnostic radiographer’ and ‘therapeutic radiographer’ are protected in law and only someone registered with the HCPC can use them lawfully.

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- Sonographers are not regulated by statute, but most practising sonographers will be radiographers, nurses or midwives by background and regulated by the HCPC or the Nursing and Midwifery Council (NMC). Those from other backgrounds are registered by the Register of Clinical Technologists (RCT).
  - Nuclear medicine technologists and dosimetrists are registered by the RCT.

The standards and requirements of regulators and registration bodies influence scope of practice by putting in place a framework for safe and ethical practice.

Regulation and registration mean that all the members of the professional workforce are accountable for their practice and conduct.

### 3. Scope of practice – profession and individual

It is helpful to think about scope of practice as having two overlapping elements:

- the scope of practice of the profession
- the scope of practice of the individual professional.

The **scope of practice of the profession** is the knowledge, skills and activities that are typically considered to fall within the practice of a particular profession. The scope of practice of the profession is underpinned by the evidence base and shaped through professional consensus and authoritative professional standards and guidance – for example, published by the Society and College of Radiographers (SCoR) and by regulatory and registration bodies. The scope of practice of the profession may change over time as it continues to develop and innovate to meet the needs of health and care services and patients.

The **scope of practice of the individual professional** is the activities that an individual professional has appropriate education, training and experience to carry out safely, effectively and lawfully. The scope of practice of the professional will develop over time and will be unique to the individual, influenced by their career, education, experience and development.

The individual professional might safely and legitimately develop their scope of practice into other areas of their profession, such as roles in education or research, or into areas that utilise and build on their professional background but are outside what other members of their profession would typically consider to be the ‘primary’ or ‘core’ scope of practice of the profession (see Section 5).

All members of the professional workforce, whatever their specific role, are required to practise within their scope of practice. This means:

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- Making sure that they have the knowledge, skills and experience required to practise safely and effectively in their role. This includes by successfully completing any required post-registration education and training.
  - Working within the legal, professional, ethical and governance frameworks relevant to their practice and role. This includes, for example, following standards and guidance published by professional, regulatory and registration bodies and working within the policies and procedures of service providers and employers.
  - Maintaining and developing their scope of practice by:
    - » seeking support where required
    - » participating in supervision and quality assurance and audit activities
    - » undertaking continuing professional development (CPD).
  - Prioritising patient-centred care and patient safety at all times.

## 4. Scope of practice of radiography

The primary scope of practice of radiography is identified with reference to the following core documents:

- The College of Radiographers (CoR) Education and Career Framework for the Radiography Workforce (CoR 2022) provides guidance for the education and career development of the professional workforce. It articulates the levels and roles that fall within the primary scope of practice of radiography.
- The standards of proficiency for radiographers (HCPC 2023) set out the threshold knowledge, understanding and skills required for entry to the HCPC Register as a diagnostic radiographer or a therapeutic radiographer.

### Diagnostic and therapeutic radiography

**Diagnostic radiographers** work mainly within the imaging departments of hospitals, each of which encompasses a wide range of different imaging modalities, for example ultrasound, magnetic resonance imaging (MRI), computed tomography (CT), radionuclide imaging (RNI) and conventional x-ray imaging (either static or dynamic imaging). All these imaging modalities may involve the administration of contrast agents and associated medicines in order to enhance structures and show function or as a treatment (interventional radiography). Diagnostic radiographers are experts in the use of imaging contrast media and other medicines used to augment diagnostic imaging techniques.

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## Diagnostic and therapeutic radiography

**Therapeutic radiographers** work mainly in the field of oncology and their interventions can deliver treatments and cures for cancers. Therapeutic radiographers play a vital role in the delivery of radiotherapy services and are extensively involved at all stages of the patient's cancer journey. They are the only healthcare professionals qualified to plan and deliver radiotherapy.

The scope of practice of the professional workforce embeds the four pillars of practice outlined below at the practitioner, enhanced, advanced and consultant levels of practice:

- clinical practice
- leadership and management
- education
- research and development.

The professional workforce practises mainly in primary and secondary care in the National Health Service (NHS) and the independent sector. However, members of the professional workforce also work in a wide range of other sectors, including, but not limited to, the following:

- armed forces
- charities
- government bodies
- higher education
- industry
- non-governmental organisations (NGOs)
- prisons
- research bodies
- veterinary practices.

## Medicines and prescribing

The ability of certain regulated professions to sell, supply, administer and prescribe medicines, including controlled drugs, is set out in legislation. This includes the Human Medicines Regulations 2012 and the Misuse of Drugs Act 1971.

Appendix 1 provides an overview of the medicines and prescribing mechanisms available to the professional workforce.

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Medicines and prescribing legislation is updated periodically, and all members of the professional workforce should ensure that they understand and work within the legislation that applies to their practice.

Diagnostic radiographers are able to train to become supplementary prescribers. Therapeutic radiographers are able to train to become supplementary and independent prescribers. The regulator, professional body, employer and individual prescriber play important roles in helping to shape the scope of prescribing practice and ensure safe practice and high-quality patient care (NHSE 2024).

The Society of Radiographers has published guidance to support the decision-making of radiographer prescribers (SoR 2023). This sets out the typical scope of practice of prescribing in radiography. Radiographer prescribers, like any other prescriber, should only prescribe medicines for conditions that fall within their scope of practice – those for which they have the knowledge, understanding and skills to do so safely and effectively.

#### Scope of radiographer prescribing

##### **The scope of independent prescribing practice by radiographers is:**

Radiographer independent prescribers may prescribe most licensed medicines, within national and local guidelines, for any condition within the practitioner's area of expertise and competence, and within the overarching framework of the radiography scope of practice including treatment of cancer and the overarching framework of imaging and diagnosis. They may also mix medicines prior to administration and direct others to mix. Therapeutic radiographer independent prescribers can prescribe from a limited list of controlled drugs.

##### **The scope of supplementary prescribing practice by radiographers is:**

Radiographer supplementary prescribers can prescribe in partnership with a doctor (or dentist) within their scope of practice. They can prescribe most medicines, including most controlled drugs and unlicensed medicines, for any medical condition within their sphere of competence, provided that they do so under the terms of a patient-specific CMP [clinical management plan] agreed with a doctor or dentist. The CMP will be written with the patient's agreement following diagnosis of the patient's condition.

[...]

For enhanced, advanced or consultant roles that sit outside the primary scope of registered practice in an imaging or oncology environment where radiographers are required to retain their primary registration by the employer, the scope of prescribing practice should reflect the postgraduate level education, knowledge and skills to meet the requirements of the role. The radiographer must be confident that they continue to meet the HCPC *Standards of proficiency for radiographers* and be able to evidence this through their CPD.

**Source: Society of Radiographers (2023). *Practice Guidance for Radiographer Independent and/or Supplementary Prescribers.***



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## 5. Enhanced, advanced and consultant practice

Enhanced, advanced and consultant practice are levels of multiprofessional practice in health and care. They follow and build upon the practitioner level that describes the entry into practice.

Enhanced, advanced and consultant level practice are steps on a potential career development journey as a practitioner undertakes education and training and gains further experience that progressively develops their scope of practice. At each level of professional practice, practitioners are able to take on increasing levels of responsibility for patient care, services and systems and manage increasing levels of complexity, uncertainty and risk. See below for more information about each level of practice.

### Enhanced, advanced and consultant practice in radiography

#### Enhanced practice

Enhanced-level practice makes a significant and essential contribution to patient care and clinical services. Enhanced Practitioners contribute to all four pillars of practice, but particular emphasis is placed on their senior expertise at a specific pillar, commonly but not exclusively in radiography, the clinical pillar of practice. Enhanced Practitioners in clinical imaging and radiotherapy therefore develop proficiency and skills that employ a higher level of knowledge, skills and attributes than those obtained for initial registration with the Health and Care Professions Council (HCPC) or its equivalent. They have developed beyond the practitioner level based on their clinical competence and/or expanded knowledge base in a specialist area.

#### Advanced practice

Advanced practitioners will have developed advanced clinical competence in their specialist area or across a broad range of practice. They will display a high degree of autonomy and complex decision-making skills that are underpinned by a wider foundation of knowledge, skills and expertise from their previous roles to enable safe, effective and person-centred care. Possessing a full master's degree relevant to advanced clinical practice, they will meet the four pillars of advanced clinical practice (clinical practice, education, leadership and management and research and development), using critical thinking and problem-solving to research and analyse complex situations throughout their practice. Drawing on their education and training and clinical experience, and employing the available evidence base, they will have extensive clinical responsibilities and input into the education of interprofessional colleagues and service development. Advanced practitioners will demonstrate leadership capabilities, managing whole episodes of clinical care in their area of practice.

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## Enhanced, advanced and consultant practice in radiography

### Consultant practice

[...] Consultant Practitioners demonstrate expert clinical capabilities that are built on previously developed experience and learning. They display independent decision-making in complex situations to enable service development by generating an evidence base. They are at the forefront of their field and lead development of original thinking for fundamental change to achieve service evolution. The Consultant Practitioner strategically synergises the pathway, service, organisation and system by working with service users, partners and the practice community via local, regional, national and international perspectives to improve service delivery. Consultant Practitioners build and lead teams to facilitate strategic directional change. Possessing master's degrees or the equivalent and holding or working towards a doctoral level qualification, they have the ability to research and analyse complex situations. They will have significant clinical responsibilities and will usually also hold education responsibilities in both clinical and academic environments. They will demonstrate extensive leadership abilities.

**Source: College of Radiographers (2022). *Education and Career Framework for the Radiography Workforce* (4th edition).**

There are published frameworks in each of the four countries of the UK that provide definitions of practice at these levels and set out the capabilities that are required. See references for more information.

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## Advanced practitioner and consultant practitioner roles

There are increasing opportunities for radiographers and sonographers to gain education, training and experience to undertake advanced and consultant level roles. Requirements linked to statutory regulation and the ability to prescribe may limit opportunities to develop at these levels for other members of the professional workforce.

Many roles at these levels will be within the primary scope of practice of radiography, developing the member to deliver services in the fields of clinical imaging and oncology as part of the wider multidisciplinary team. Roles will be diverse and designed to meet service needs, but examples include advanced practitioner roles with responsibility for clinical image reporting within a specific diagnostic pathway and consultant practitioner roles with responsibility for the service and strategic leadership of a specific radiography care pathway.

Some roles may be so-called 'non-traditional' advanced practitioner and consultant practitioner roles, where the member undertakes roles within health and care, but outside of clinical imaging and oncology, which cross traditional professional boundaries. Such roles are often open to practitioners from a range of regulated professional backgrounds who have undertaken required education and training.

While outside the primary scope of practice of radiography, these roles safely and legitimately draw on and build upon the education, knowledge, skills and experience of the member – for example, their skills in assessment, communication, planning and treatment. Emerging roles include, for example, members being supported by their employers to undertake education and training equipping them to assess, treat and manage the care of patients outside of clinical imaging and oncology, in areas such as emergency medicine, frailty, general medicine and palliative care. The availability and content of such roles may develop further over time as health and care services seek to meet increased patient demand and address workforce challenges.

**The SoR is supportive of the development of advanced and consultant practice roles, including those that allow members to safely develop into new areas of practice. They build on the unique contribution of the professional workforce to health and care services, providing further opportunities for members to deliver and lead services for the benefit of patients, as well as providing further opportunities for fulfilling professional careers.**

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Members of the professional workforce practising in roles at these levels of practice (like any other practitioner) must ensure that they are able to practise safely and effectively in their given scope of practice (see Section 2).

## 6. Professional indemnity

All members of the professional workforce need to ensure that they have professional indemnity arrangements in place for their particular scope of practice.

### Registration requirement

Members registered with the HCPC or the NMC are legally required as a condition of registration to have in place a professional indemnity arrangement that provides appropriate cover when they practise.

‘Appropriate cover’ means that the indemnity arrangement is relevant to an individual’s scope of practice. The cover in place should be relevant to the risk involved in their practice, so that it is sufficient if a claim is successfully made against them. Both HCPC and NMC registrants are required to declare that they have, or will have, a professional indemnity arrangement in place when they apply for or renew their registration. Both regulators publish guidance for their registrants about the professional indemnity requirement (HCPC 2014; NMC undated).

The majority of members registered with the HCPC or the NMC will meet this requirement because they are employed by the NHS and/or by another employer, where the employer indemnifies its employees for work carried out on its behalf. The SoR’s professional indemnity insurance scheme (see below) provides additional protection for members.

If a member registered with the HCPC or the NMC undertakes self-employed or independent practice, or a combination of employed and self-employed or independent practice, they will need to ensure that they have appropriate indemnity for the whole of their practice. This may include taking out separate insurance.

Dosimetrists, nuclear medicine technologists and sonographers registered with the RCT are required to confirm when they renew their registration that they have suitable and existing professional indemnity insurance in place if this is not provided by their employer (RCT 2024).

### SoR insurance

Full members of the SoR benefit from professional indemnity insurance (PII). The SoR PII scheme only applies where the member has a contract of employment in place and the employer has vicarious

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liability for the member as an employee (SoR 2024b).

To benefit from the PII scheme, members must be working within their scope of practice and in accordance with the SoR *Code of Professional Conduct* (SoR 2024a).

Members who undertake self-employed or independent practice will need to make sure that they have separate insurance in place.

## **7. Conclusion**

This document has provided information about the scope of practice of the professional workforce.

The scope of practice of the professional workforce has developed over time and will continue to develop to meet the needs of health and care services and patients in a way that is both safe and effective.

The SoR will continue to support the profession and its members to meet these needs.

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Society of Radiographers (2024b). Professional Indemnity Insurance. [Online] <https://www.sor.org/employment-advice-and-support/indemnity-insurance>

## **Enhanced, advanced and consultant level practice frameworks**

### **England**

Health Education England (2017). *Multi-professional framework for advanced clinical practice in England*. <https://www.hee.nhs.uk/sites/default/files/documents/multi-professionalframeworkforadvancedclinicalpracticeinengland.pdf>

### **Wales**

Health Education and Improvement Wales (2023). *Professional Framework for Enhanced, Advanced and Consultant Clinical Practice in Wales*. <https://heiw.nhs.wales/workforce/workforce-development/professional-framework-for-enhanced-advanced-and-consultant-clinical-practice/>

### **Scotland**

NHS Education for Scotland (2024). Nursing, Midwifery and Allied Health Professionals (NMAHP) Post-registration Development Framework. [Online] <https://www.nmahpdevelopmentframework.nes.scot.nhs.uk/>

### **Northern Ireland**

Department of Health (2019). *Advanced AHP Practice Framework*. <https://www.health-ni.gov.uk/publications/advanced-ahp-practice-framework>

## Appendix: Medicines and prescribing mechanisms by profession

Profession	Supply and administration		Prescribing		
	PSD	PGD	SP	IP	IP – CDs
Dosimetrist	✓				
Nuclear medicine technologist	✓				
Radiographer – diagnostic	✓	✓	✓		
Radiographer – therapeutic	✓	✓	✓	✓	✓ (List)
Sonographer (if not statutory regulated)	✓				

### Key

- PSD: Patient Specific Direction
- PGD: Patient Group Direction
- SP: Supplementary prescribing
- IP: Independent prescribing
- IP – CDs: Independent prescribing of controlled drugs. Radiographer prescribers are able to prescribe controlled drugs from a limited list set out in legislation.

The above is correct at the time of publication.



