



Late non-physiological impacts of Covid-19 on radiography education

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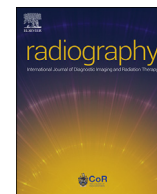
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Letter to the Editor

Late non-physiological impacts of Covid-19 on radiography education

Keywords:

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Dear Editor in Chief,

We congratulate contributors to 'Radiography' on providing international insights into staff and student radiographer attitudes and experiences for safe clinical working and learning during the first wave of the pandemic.¹⁻⁹ Through identifying concerns around student experiences, positive responses have been outlined by universities through the adoption of synchronous and asynchronous online education and additional simulation activities to replace lost clinical time.¹⁰ Literature has also recognised both staff and student anxieties experienced whilst adjusting to new ways of working during the first phase of the pandemic.¹⁻⁵

Research has shown there is noteworthy resilience and concern within student cohorts¹¹⁻¹³. The latest global spike of the pandemic further influences departmental operations, resulting in an extension to adjusted work approaches. This, in our collective understanding, is impacting on students' clinical exposure and their relationship with staff in supporting their clinical learning. Compared with the first spike in the pandemic, students may have experienced a significant impact on their clinical experience, making the application of the beneficially reported UK HCPC emergency register more difficult to use safely this year.¹² Consequently, we hypothesise that longer preceptorships may be necessary, as the almost qualified student recoups the lost or adjusted clinical experience.

There are other long term questions to consider that have not yet been published/investigated, to address demands on staff and students during pandemic recovery. Vaccination is the main weapon of dealing with the pandemic in a 'return to normal' outlook; however this is by no means complete with new variants or infection spikes potentially impacting upon wider healthcare demands. Waiting times are reported as increasing significantly, though focussed demand on acute events or cancer treatment are now being addressed as services initiate their recovery strategies.¹⁴ Consequently overall clinical learning may continue to be affected.

To deal with the continued effects of the pandemic on radiography education, several questions need to be answered:

- Is 'burnout' affecting teaching staff who are delivering virtual learning?
- Is clinical experience of students affected, and does it continue to influence student preparation?
- Has secondary school and college assessment impacted on school leaver performance at university, and could this influence course or profession retention?
- How far has the agenda for service development been hampered through loss of postgraduate education, notwithstanding the positive impact of on-line delivery?¹⁵⁻¹⁷
- Is clinical staff 'burnout' impacting students' clinical experience?¹⁸
- Will there be a future issue in recruitment to the profession?
- Could an increase in mature student enrolment impact the workforce several years in the future through increased clinical staff retirements when this was not expected?
- What might the positive and negative factors be in recruiting more mature students for service delivery and educationally?
- What has the profession learned for local, regional and even national service delivery strategies and resilience generation?

With our current and proposed pandemic learning, the radiography professional bodies must retain a watchful eye on developments for continued strategic planning to maintain profession and service resilience. Perhaps a special issue of 'Radiography' could address these ideas?

Yours sincerely,

Conflict of interest statement

None.

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