

CT Radiographer

Job Description and Person Specification

Role	Senior CT Radiographer
Engagement	Contractor / subcontractor engagement under a contract for services, subject to confirmation of employment and tax status.
Primary location	Predominantly North Wales / North West, working at RMS mobile or fixed imaging services and client NHS sites.
Clinical accountability	RMS Clinical Lead and the designated host-site clinical / radiation protection structure.
Working pattern	Flexible shift-based delivery. Days, evenings and weekends may be required depending on service need.

Role purpose

To deliver safe, high-quality, patient-centred CT as an autonomous HCPC-registered radiographer. Working within personal competence, RMS governance, host-site IR(ME)R procedures, local rules and individual entitlement. The role is intended for experienced contractors who can become safely productive quickly following local induction and authorisation.

What excellent performance looks like

- Strong routine and contrast-enhanced CT practice, with clear evidence of dose optimisation and disciplined IR(ME)R compliance.
- Confident management of acute, inpatient, emergency and high-throughput work without compromising patient identification, pregnancy checks, protocol accuracy or image quality.
- Excellent patient care and calm response to deterioration, contrast reactions, extravasation or unexpected clinical events.
- Reliable shift attendance, accurate records, effective host-team integration and clear escalation of risks or urgent findings.
- A learning mindset demonstrated through CPD, QA, audit, incident learning or service improvement.

Key responsibilities

- Perform CT examinations within documented competence and local IR(ME)R entitlement, including patient preparation, protocol application, scan planning, acquisition, reconstruction, image-quality review and safe discharge or handover.
- Apply patient identification, referral/examination matching, pregnancy enquiry, exposure checks and CT Pause & Check requirements consistently.

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RMS.Doc.73	CT Radiographer JD & PS	1.0	RMS Clinical Governance / Clinical Lead	August 2026

- Optimise radiation dose and image quality through appropriate scan range, phase selection, parameter choice, CTDIvol/DLP awareness, repeat avoidance and use of local/national diagnostic reference levels where applicable.
- Undertake IV cannulation and contrast-related care only where competence is current and the host medicines framework has authorised the individual for the required activity.
- Recognise and respond to contrast reactions, extravasation, syncope, deterioration and other clinical emergencies in accordance with local procedures.
- Manage routine and complex patient pathways appropriate to the contracted service, including inpatients, monitored patients, trauma or acute presentations where within scope.
- Complete accurate RIS/PACS records, maintain data integrity and escalate urgent findings, unintended exposures, incidents, equipment faults or dose concerns through approved pathways.
- Support CSWs and colleagues through appropriate delegation, supervision and professional communication without transferring tasks beyond their competence or written scope.
- Participate in equipment checks, QA, audit, incident learning and service improvement when required by the service.
- Workflow and worklist coordination in accordance with local contractual requirements and escalation processes.

Scope, governance and safety boundaries

- Current HCPC registration is mandatory for deployment as a CT Radiographer.
- Local IR(ME)R entitlement and site/scanner induction are mandatory. Previous entitlement at another organisation does not transfer automatically.
- The contractor must work within current knowledge, skills and evidence of competence. A CV or self-declaration does not itself authorise specialist examinations.
- Contrast or medicines activity requires a lawful local mechanism and individual authorisation. PGD functions, where applicable, remain the responsibility of the authorised practitioner and must not be delegated.
- Advanced or specialist activities such as cardiac CT, paediatric CT, acute stroke perfusion, CT-guided procedures or spectral CT may only be undertaken where competence and local scope are confirmed.
- The radiographer must stop and escalate where patient safety, radiation safety, staffing, supervision, equipment or environmental conditions are not acceptable.

Person specification

Essential criteria are intended as genuine role requirements. Desirable criteria help identify candidates with additional breadth, but should not be used as hidden essential criteria.

Criterion	Essential	Desirable	Evidence at selection
BSc/Diploma or recognised equivalent qualification in Diagnostic Radiography.	Yes		CV / certificate
Current HCPC registration as a diagnostic radiographer, with registration status compatible with the contracted role.	Yes		HCPC register / CV

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Criterion	Essential	Desirable	Evidence at selection
Recent, substantive post-registration practice in the relevant modality, with evidence of current independent clinical competence.	Yes		CV / screening / reference
Current practical knowledge of IR(ME)R, IRR17, local rules, individual entitlement and the responsibilities relevant to CT practice.	Yes		Screening / interview
Competent to independently perform a broad routine CT workload following local induction, including head, spine, chest, abdomen/pelvis, MSK, contrast-enhanced and angiographic examinations.	Yes		CV / screening / competency evidence
Competent in CT dose optimisation and image-quality management, including scan range, phases, repeat avoidance, CTDIvol/DLP awareness and escalation of dose concerns.	Yes		Screening / interview
Recent experience of contrast-enhanced CT, bolus tracking and safe response to contrast reactions and extravasation.	Yes		CV / screening
Able to manage acute, inpatient and monitored patients safely within the service scope, including appropriate escalation of deterioration or urgent findings.	Yes		Screening / interview
Works within scope, recognises limitations, escalates concerns and maintains accurate clinical records.	Yes		Screening / interview / reference
Current understanding of consent, capacity, safeguarding, infection prevention, moving and handling, information governance and patient-centred care.	Yes		Training / screening
Competent in IV cannulation and contrast-related patient care, or able to evidence recent competence suitable for local authorisation before deployment.	Yes		CV / competency evidence

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Criterion	Essential	Desirable	Evidence at selection
Basic life support and ability to respond appropriately to deterioration, contrast reactions and other clinical emergencies within role.	Yes		Training / screening
Able to work effectively with RMS and host NHS teams, including clear handover and professional challenge where safety is at risk.	Yes		Reference / interview
Able to travel reliably to assigned North Wales locations and meet agreed shift commitments.	Yes		Screening
Experience of mobile, independent or multi-site imaging services.		Yes	CV / interview
Experience across more than one major scanner manufacturer and ability to adapt safely after local induction.		Yes	CV
Evidence of CPD, audit, QA, incident learning, teaching or service improvement.		Yes	CV / portfolio
Welsh language skills.		Yes	Application
Advanced CT experience such as acute stroke CTA/perfusion, trauma/polytrauma, paediatric CT, complex angiography or 3D reconstruction.		Yes	CV / interview
Specialist CT experience such as cardiac CT, CT colonography, spectral/dual-energy CT or CT-guided procedures in a scanning role.		Yes	CV / interview

Personal qualities we value

- Clinically confident without being overconfident. The strongest candidates can explain both their CT strengths and their current limits.
- Systematic and safety-led, particularly around patient identification, IR(ME)R, pregnancy, contrast, dose and emergency care.
- Adaptable across scanners and sites while respecting local protocols and entitlement requirements.
- Collaborative with support workers, host staff and RMS governance, with dependable communication and handover.

Pre-deployment requirements

- Satisfactory identity and right-to-work in UK checks where required, plus contractor onboarding documentation.

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- Appropriate DBS check where the placement and duties are eligible and require it.
- Two satisfactory professional references, including a recent clinical manager or senior colleague where reasonably available.
- Evidence of mandatory training, local induction and any role-specific competence or authorisation required by RMS and the host service.
- Agreement to RMS policies, host-site procedures, incident reporting, confidentiality, information governance and clinical governance requirements.

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