INTRODUCTORY
In 2005 the Society & College of Radiographers (1) identified clinical placement capacity issues and suggested the use of specialised modality placements and the independent sector as ways to elevate the pressure. Although literature pertains to the use of specialist modality training (2) there is limited research that looks at the independent sector as a placement provider for trainee Allied Health Professionals (3) and none relating to trainee Radiographers.

METHODOLOGY
9 MRI clinical placements were secured within the independent sector and accessed by 3rd year students from one higher education institute. To explore the student's experiences a qualitative methodology was adopted and one-to-one audio recorded telephone interviews were used to determine student perceptions of the placement (4). Analysis was influenced by grounded theory. Themes from the interview data were coded accordingly (5). Ethical approval was sought and granted.

EMERGENT THEMES

OPPORTUNITY TO SCAN
• Learning Through Doing
• Increasing Understanding
• Positive Learning Experience

EXPLORING CAREER OPTIONS
• Specialism Options
• Career Aspirations
• Four Tier Structure in Radiography

ALTERNATIVE FIRST POST EMPLOYMENT
• Employment Choice
• Lack of Jobs in Local NHS Trusts
• NHS Loyalty

PARTICIPANTS QUOTES

“Just watching someone, you can’t pick up everything unless you are doing it yourself and get to know exactly what to do”
(Claire)

“I really enjoyed doing MRI on my previous placement so I was keen to spend some more time building my experience so as to enhance my CV”
(Harry)

“There isn’t very much opportunity within the NHS to do MRI as a first job. The independent sector provides more opportunity in this area”
(Jane)

Although the expectation would be that the NHS would be my future employer I feel it would be foolish to limit my options after investing 3 years of hard study especially as there is lack of current vacancies in the NHS in my locality”
(Matthew)

OPPORTUNITY TO SCAN
7 participants noted this as a benefit. Unlike CT, current undergraduate curricula commonly do not require students to undertake MRI scanning duties (2). 3 participants linked the advantage of hands on scanning to preferred learning style i.e. learning through doing (6). 1 participant noted that the placement would have been improved by doing more hands on training.

EXPLORING CAREER OPTIONS
6 participants accessed the placements to get more MRI experience. Of these 3 noted accessing the placements because the independent sector offered MRI training programmes for Graduates and they wanted to specialise on qualification. Historically there is a set Radiography career pathway of starting in general x-ray and then into specialisms. Yet there is increasing debate on how this model are viewed moving forwards to address future workforce design. One suggestion has been the introduction of a dual qualification i.e. graduates who qualify with x-ray and skills in specialism of their choice (7).

FIRST POST EMPLOYMENT
2 participants noted the lack of local jobs at Local NHS trusts and the prospect of being unemployed reflecting the impact of increasing numbers of Radiographer’s in training and the current economic climate (8). However trialling different employers is not just necessary in times of job shortages, but is also important with respect making educated employment decisions across a spectrum of available healthcare sector options (9).

CONCLUSION
While the findings demonstrated examples of how the placements enriched the student experience, including scanning, exploring different career avenues and alternative employer options, it is acknowledged that the first two findings are not unique features of an independent sector placement. Although the study is limited by the small sample size, participant perceptions of additional benefits are supported by current debates relating to Radiography undergraduate and postgraduate education.

REFERENCES