Original Review Article

Managerial Function of the Clinical Supervision of Radiography Students

Abstract
Clinical supervisors of radiography students have a responsibility to organise and manage clinical training resources. However, there is a lack of literature to support radiographers in this role. Most of the literature on the managerial function of a clinical supervisor is from the nursing and medical professions. This article borrows the nursing and medical professions literature and applies it to radiography. The managerial tasks of a clinical supervisor reviewed and discussed are the orientation process of students, clinical teaching and learning resources, requirements for appointment as a clinical supervisor, developing and maintaining competency as a clinical supervisor and quality assurance programmes in clinical supervision. This information will guide radiographers in the facilitation of practice-based learning for radiography students during their clinical practice.

Keywords: Clinical supervisor, Clinical supervision, Managerial, Radiographer, Radiography Student.

BACKGROUND
Radiographers who supervise radiography students during clinical practice have a managerial task of organising and managing training resources in conjunction with their departmental managers (College of Radiographers, 2012; Monash University, 2020). These tasks include the orientation of new radiography students to radiology departments, organising and managing imaging equipment and consumables, preparing duty rosters for radiography students, ensuring the availability of clinical teaching and learning aids, developing and maintaining their competencies and participating in clinical supervision quality assurance programmes. To perform these tasks efficiently and confidently, clinical supervisors should be adequately supported by key stakeholders: schools of radiography, professional body and regulator, hospital and radiology departmental managements, and colleagues (Baker & Latham, 2012; College of Radiographers, 2012).

In view of the above, some radiography education systems have integrated management as a subject in the curriculum. For example, the Zambian radiography education system has management in the curricula (LAMU, 2011; UNZA, 2017; TEVETA, 2018), but its focus is on management of the radiology departments, with less attention on organising and managing clinical teaching and learning resources. This leaves graduates with little or no knowledge and skills on how to manage clinical training resources in the clinical learning environment. This article, therefore, fills this gap by reviewing the managerial function of the clinical supervision of students. This information can act as a guide to radiographers and other healthcare professionals who facilitate practice-based learning for students. Figure 1 shows the five main managerial components in the clinical supervision of students.
Figure 1: Managerial function of the clinical supervision of students

Orientation Of Students To Clinical Placement

The first focus area of the managerial function relates to orientation of new radiography students to the radiology department. The College of Radiographers (2012) states that clinical departments have a responsibility to ensure that new radiography students have a formal induction on their first day of clinical placement. Walsh (2014) explains that the orientation reduces anxiety in students and increases motivational learning through early identification of clinical learning opportunities. The orientation programme should be standardised and in written format to ensure that all students get precisely the same information (Royal College of Nursing, 2017). In this regard, the process needs to cover three aspects: preparation prior to student arrival, actual induction, and progress performance.

Prior to Students’ Arrival for Clinical Placement

Prior to student(s) arrival, a clinical department needs to assign specific individuals with tasks which include student identification and supervision. Each student, in a cohort requires to be assigned to specific clinical supervisors (Walsh, 2014; Royal College of Nursing, 2017).

Induction to the Clinical Department

The clinical department should have its own induction schedule for students which clinical supervisors should complete within the first couple of days and tick off and date to show that tasks have been undertaken (Walsh, 2014). In radiography, this can be adopted from that used for induction of radiographers. To help students feel welcome and part of the work team it is important to do the following (College of Radiographers, 2006; Monash University, 2020):

- Introduce students to all clinical staff, and include their name, role and responsibilities.
- Show students the layout of the clinical department and explain the use of each imaging room.
- Provide an organisational structure chart for students’ reference.
- Provide information about the physical locations of relevant sections of the hospital.
- Inform students of specific organisation regulations such as health and safety.
- Assist students in completing orientation documents.

To standardise the orientation, each radiology department affiliated with the schools of radiography should have a clinical placement profile. Walsh (2014) describes a clinical placement profile as a departmental induction file which summarises the training details and gives key information to students about the clinical area and the learning experiences they will have and what they can expect.

During the orientation process, a departmental induction file should be given to each radiography student before beginning the clinical placement. The induction file should be available as a pack to which a student can refer during their training. According to Kinnell and Hughes (2010) and Walsh (2014), the clinical placement profile should contain the information provided above as well as a professionalism policy statement, a copy of the last
Educational audit, discipline and student complaint procedures and evaluation of clinical placement forms for both clinical supervisors and students.

**Student Clinical Performance Progress Interviews**

During the induction process, the named clinical supervisor should set dates and times for process interviews which should be agreed with the student (Walsh, 2014; Royal College of Nursing, 2017). Literature reports three stages of progress interviews: initial, intermediate and final interviews (Walsh, 2014; Royal College of Nursing, 2017). Table 1 shows the tasks of the named clinical supervisor for progress interviews.

**Table 1:** Progress interviews: initial, intermediate and final (Royal College of Nursing, 2017).

<table>
<thead>
<tr>
<th>Stage</th>
<th>Focus areas</th>
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<tbody>
<tr>
<td>Initial interview:</td>
<td>• Find out about the student’s stage of training</td>
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<tr>
<td></td>
<td>• Help the student to form achievable objectives</td>
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<tr>
<td></td>
<td>• Ask if the student has any assignment or assessments</td>
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<tr>
<td></td>
<td>• Encourage the student to self-assess during clinical practice</td>
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<tr>
<td></td>
<td>• Find out if a student has any specific anxieties</td>
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<td></td>
<td>• Ask the student if he or she needs any addition support</td>
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<td>Intermediate interview:</td>
<td>• Ask for reports of the student’s performance from other clinical staff</td>
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<td></td>
<td>• Clarify any concerns from the student</td>
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<tr>
<td></td>
<td>• Recognise progress made by the student</td>
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<tr>
<td></td>
<td>• Encourage the student to ask questions</td>
</tr>
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<td></td>
<td>• Contact the training institution if there are concerns</td>
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<td></td>
<td>• Record the discussion</td>
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<tr>
<td>Final interview:</td>
<td>• Ask the student to self-assess on clinical performance</td>
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<tr>
<td></td>
<td>• Contact the training institution or other relevant clinical staff</td>
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<td></td>
<td>as necessary</td>
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<td></td>
<td>• Prepare the placement performance report for the student</td>
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</table>

**Table 2:** Clinical teaching and learning resources for radiography student placements

<table>
<thead>
<tr>
<th>Classification</th>
<th>Resources</th>
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<tbody>
<tr>
<td>Imaging equipment</td>
<td>General X-ray units, mobile X-ray unit, fluoroscopy unit, ultrasound, CT, MRI, mammography, nuclear medicine and DEXA</td>
</tr>
<tr>
<td>Imaging consumables</td>
<td>X-ray films, contrast media, ultrasound gel</td>
</tr>
<tr>
<td>Supporting resources</td>
<td>Tutorial room, library with internet access, textbooks, journals and copies of Professional Code of Conduct for radiographers</td>
</tr>
<tr>
<td>Practical guide for clinical supervisors</td>
<td>Containing practical guidance on the three components of clinical supervision: managerial, educational, and supportive. It should also contain the responsibilities of clinical education stakeholders</td>
</tr>
<tr>
<td>Work schedules for radiography students</td>
<td>Duty roster for radiography students to enable them to encounter a range of clinical experiences during placement</td>
</tr>
<tr>
<td>Human resources</td>
<td>Radiographers to supervise radiography students and provide imaging services</td>
</tr>
</tbody>
</table>

**Imaging Equipment**

Radiology departments should have a range of diagnostic imaging modalities to support radiography students’ learning. The imaging equipment include general X-ray units, fluoroscopy unit, mobile X-ray unit(s), dental X-ray unit, C-arm for theatre radiography, ultrasonography (US), computed tomography (CT), magnetic resonance imaging (MRI), nuclear medicine (NM), dual-energy X-ray absorptiometry (DEXA) and mammography (Ogbru, 2008; LAMU, 2011; UNZA, 2017; Akpaniwo et al., 2018). However, the availability of different diagnostic imaging is a challenge in developing countries. For example, a study conducted by Kyei et al (2015) found the lack of a range of imaging equipment to be a challenge in the clinical training of radiography students in Ghana. A similar study conducted in Rwanda by Ondari et al., (2019),...
also found a lack of different diagnostic imaging modalities to be a barrier to the provision of quality clinical education to radiography students. In developing countries, some radiography students may not have exposure to all modalities due to limited resources. It is the authors' view that such students should be taught theory in these modalities since the focus of undergraduate training is on general radiography.

**Imaging Consumables**

Radiology departments should also have consumables such as X-ray films, contrast media, ultrasound gel and cleaning materials. Developing countries which are still using the traditional film-screen combination imaging system, X-ray films are the main raw material for radiology services and in the training of radiography students. Some studies from Africa have reported a lack of clinical teaching and learning resources such as cassettes, anatomical markers, masks, gloves and radiation protection devices to be a challenge in the clinical training of radiography students (Ogbu, 2008; Kyei et al., 2015; Ohagwu, 2016; Ondari et al., 2019). It is important that radiology departments affiliated with schools of radiography have adequate imaging consumables to support students.

**Supporting Resources**

Radiology departments should also have a wide range of other resources such as a tutorial room, library with internet access, textbooks, professional journals and copies of Professional Code of Conduct produced by professional bodies, such as the Radiological Society of Zambia (RSZ). Unfortunately, a study conducted in Nigeria by Ogbu (2008), found a shortage of study rooms, libraries, and IT facilities with which to support radiography students during their clinical practice. This finding from the Nigerian study was reported as an inhibiting factor to the facilitation of clinical education to radiography students. In developing countries, some radiography students may not have exposure to all modalities due to limited resources. It is the authors' view that such students should be taught theory in these modalities since the focus of undergraduate training is on general radiography.

**Practical Guide for Clinical Supervisors**

Clinical supervisors should be supported with a practical guide. The guide should contain practical guidance on the three components of clinical supervision: managerial, educational, and supportive (Health Workforce Australia, 2010; University of Ottawa, 2011). Firstly, the managerial function deals with the organisation and management of training resources. Secondly, the educational function involves clinical teaching and learning, teaching professionalism to students, giving feedback to students on their performance, and assessment of students’ competence and performance (Kinnell & Hughes, 2010; Walsh, 2014; Harden & Laidlaw, 2017). Thirdly, the supportive function involves supporting students with learning difficulties and disabilities (Murphy, 2011; Walsh, 2014; Royal College of Nursing, 2017). Therefore, the practical guide should contain the following information (Kirk, 2007; College of Radiographers, 2010; Monash University, 2013):

- How to develop conducive clinical environments associated with positive student learning experiences.
- General principles of planning a clinical teaching session and methods of conducting small group teaching in the clinical learning environment.
- Methods of teaching professionalism to students in the clinical learning environment.
- Principles and methods of giving constructive feedback to students on their clinical performance.
- Principles and methods of assessment in the clinical learning environment.
- Supporting students with learning difficulties and disabilities.
- How to maintain competence as a clinical supervisor.

The practical guide for clinical supervisors should also state the responsibilities of the schools of radiography, clinical departments, clinical supervisors, and radiography students.

The College of Radiographers (2006), list the following responsibilities of the schools of radiography in the clinical training of radiography students:

- To prepare students in their care for the clinical environment and the learning opportunities it presents, through adequately covering theory in class.
- To have an awareness of the requirements of the clinical environment and how this will affect the learning experiences of students.
- Encourage radiography lecturers to network with clinical colleagues.
- Collaborative research activities between radiology departments and schools of radiography to provide opportunities for closer relationships.

The College of Radiographers (2012) also lists the responsibilities of radiology departments affiliated with the schools of radiography as follows:

- To ensure that there is a policy on the management of students’ placements, including reflecting the clinical supervisors’ role in job descriptions.
- To ensure that all radiographers understand the importance and value of having radiography students within the clinical environment and that they are all required to assist in the students’ development.
- To determine the maximum number of radiography students that the radiology department can manage.
and support effectively, considering the potential for multiple education providers’ involvement with other educational programmes.

The responsibilities of clinical supervisors of radiography students are listed by the College of Radiographers (2012) as follows:

- To develop teaching and supervisory skills and act as a resource for radiography students seeking information and guidance.
- To be familiar with the radiography programme curriculum and understand the standards and achievements expected at each level of training.
- To offer a level of clinical supervision appropriate to the competence and experience of the individual radiography student.
- To provide the students with opportunities to comment on their training; provide support and enable the student to discuss any problem they identify.

According to the College of Radiographers (2012), the responsibilities of radiography students in clinical supervision are as follows:

- To take a proactive approach in contributing to their own clinical learning.
- To be conversant with the curriculum of their own programme of study, including methods of assessment and the role of clinical supervisors.
- To be compliant with: local rules, practice providers’ policies, statutory and professional regulations, and codes of conduct and behaviour.
- To be aware of their direct responsibilities for the safety of patients in their care and maintain confidentiality always.
- To maintain a high level of attendance and punctuality during clinical placement.
- To attend their placement in a uniform that complies with the clinical placement and with the specific school of radiography’ requirements.

The availability of this information in the practical guide ensures that every stakeholder knows the allocated responsibilities. This also assists the clinical supervisors and students to know which stakeholder to approach in case of any problem or concern.

**Work schedules for Radiography Students**

At the end of the undergraduate radiography programme, radiography students should have in-depth understanding, skills and competency in general radiography, fluoroscopy, mobile and theatre radiography (Ogbaru, 2008; UNZA, 2017; Sadiq et al., 2018; TEVETA, 2018). Radiography students also are required to have a basic understanding of different diagnostic imaging modalities such as US, CT, MRI, NM, mammography and DEXA (Ogbaru, 2008; LAMU, 2011; UNZA, 2017; TEVETA, 2018). For this reason, clinical supervisors have a responsibility for the preparation of the students’ clinical duty roster to enable them to encounter a range of experiences before completing their training programme.

There is limited research on duty rosters of radiography students during clinical practice. In a study conducted in the UK by Hyde (2014), radiography students did not like their clinical roster patterns, which moved them to a new imaging modality each week. In this study, radiography students preferred a longer duration of 2-3 weeks in each area to enable them to learn the use of the imaging equipment and get to know the clinical staff before being moved to another modality. The one-week time allocated to each area was reported as hindrance to their learning. However, the time allocated in each area is still subject to debate (Penman & Oliver, 2000). If the training resources are available and can effectively handle students, coupled with the availability of clinical supervisors, then the time required in such a situation would be quite different from a situation where the number of students outnumbers the clinical training resources (Kyee et al., 2015). The time allocation in each imaging modality should be to help the radiography students acquaint themselves with the setting, as well as to gain the necessary knowledge, attitudes and skills in line with the curriculum. Therefore, all stakeholders in radiography clinical education should collaborate to ensure that radiography students gain competence based on resources and not time.

In a study conducted in Ghana by Kyee et al., (2015), a vast majority (88.3%) of radiography students indicated that they were given a duty roster on their first day of clinical placement. This was described as a facilitating factor to their learning process as students knew the area they were being allocated to on time. Unfortunately, this study revealed that less than half (31%), of radiography students had not been allocated to the dental room. In addition, most (66.7%) and (83%) were not allocated to mammography imaging room and theatre radiography, respectively. A similar study conducted in Nigeria by Akpaniwo et al., (2018) identified a lack of allocation of the radiography students to different areas to be a challenge in the clinical training. This Nigerian study found that most (84%) and (88%) of the radiography students were not allocated to mobile/theatre radiography and dental imaging rooms, respectively. Designated radiographers for clinical supervision should ensure that radiography students are allocated to the available different areas of imaging depending on their level of training and clinical education curriculum.

**Human Resources**
Clinical departments should have enough personnel to supervise students (Walsh, 2014). In a radiography context, this means having enough radiographers to facilitate practice-based learning for radiography students in all areas of diagnostic imaging. Radiographers in charge of each imaging modality should have postgraduate education and training in their speciality (Du Plessis et al., 2012; Mubuuke & Pope, 2012). This ensures that radiography students are imparted with appropriate knowledge, attitudes and skills in different diagnostic imaging modalities. The facilitation of practice-based learning is demanding due to the dual roles, clinical supervisors play offering patient care and clinical supervision of students. Radiology departments affiliated with schools of radiography should have enough radiographers to provide radiology services and facilitate the learning process of radiography students.

Literature shows an increased workload for radiographers who supervise radiography students. In a study conducted in the UK by Fowler and Wilford (2016), radiography students reported that radiographers were too busy to provide timely and regular feedback on their clinical performance. A similar study performed in Zambia by Kayembe (2018) also identified a busy clinical learning environment as an inhibiting factor to the provision of feedback to radiography students on their clinical performance. Another study conducted in Rwanda by Ondari et al., (2019), found an increased workload for clinical supervisors due to a shortage of radiographers. In this Rwandan study, radiography students complained that radiographers could not offer the necessary clinical supervision due to workload and this inhibited their clinical training. It is vital that radiology departments affiliated with the schools of radiography have enough radiographers to provide radiology services and supervise students.

Requirements For Appointment As A Clinical Supervisor

The third focus area also relates to the human resource aspects. However, the emphasis is on the required competences of a supervisor radiographer to conduct the role. It must be noted that radiography students should be supervised by clinical supervisors with appropriate knowledge, attitudes, skills and competence to maintain the education standards (College of Radiographers, 2005; College of Radiographers, 2012). During the literature search, the authors found no radiography literature on the requirements needed to be appointed as a clinical supervisor of radiography students. However, this information is available in nursing. Walsh (2014) and the Royal College of Nursing (2017) list the eligibility criteria for clinical supervisors of nursing students in the UK nursing education system as follows:

- Must have been qualified for more than one year and demonstrate continuing professional development (CPD) learning activities.
- Hold a professional qualification equal to or higher than that of the students they are supervising in the clinical learning environment.
- Must have undertaken and passed a recognised clinical supervision course.
- Must be able to identify and support learning opportunities in their practice area and in interprofessional arenas.
- Must be able to make a judgement about a student’s level of clinical competence.

There are three further qualities which should be considered when appointing clinical supervisors of students: clinical competence, teaching skills and personal attributes (Cruss et al., 2008; Ingrassia, 2011; Harden & Laidlaw, 2017). The first quality; clinical competence, encompasses professional knowledge and clinical skills, clinical reasoning, and decision making. The second quality; clinical teaching skills, involves understanding and applying the educational principles relating to clinical supervision. The last quality, that of personal attributes, involves non-cognitive attributes such as inter-personal skills and positive work relationships. Most importantly, it is good practice to appoint clinical supervisors who have a passion for the facilitation of practice-based learning for students (Harden & Laidlaw, 2017). Eligibility criteria for clinical supervisors of radiography students should be stated in the practical guide and clinical education curriculum. The requirements for a clinical supervisor should also be audited as part of the clinical education quality assurance programme.

Developing and Maintaining Competency as a Clinical Supervisor

Also related to the aspect of competence, is the need for clinical supervisors to remain relevant by continuous self-improvement. Literature review found that clinical supervisors can develop and maintain competency by undertaking a clinical supervision training course and participating in continuing professional development (CPD) learning activities related to the facilitation of practice-based learning.

Preparatory Clinical Supervision Training

Radiographers should undertake a preparatory clinical supervision training course before taking up the role of clinical supervisor of radiography students. In Zambia, the Professional Code of Conduct for Radiographers states that: “You should have knowledge, understanding and skills in facilitating learning, teaching and assessment in the clinical environment” (Radiological Society of Zambia, 2018). The College of Radiographers of the UK (2012) adds that radiographers should be educationally prepared to fulfil the role in the facilitation of students’ learning.
This means being knowledgeable and competent in both radiography and in the facilitation of practice-based learning. Unfortunately, literature shows that most of the radiographers who supervise radiography students during their clinical practice are often ill-prepared and most of them learn on the job (Sutton, 2013; Cunningham et al., 2015; Lee, 2015; Du Plessis, 2019). Walsh (2014) and Harden and Laidlaw (2017) extensively articulate the purpose of clinical supervision training as follows:

- To gain an understanding of various strategies in creating a conducive clinical learning environment for students.
- To gain an understanding of various teaching and learning theories, models and approaches relating to the clinical supervision of students.
- To develop and practice a range of interventions and feedback skills relevant to the functions of a clinical supervisor.
- To enable the clinical supervisors to develop their own informed style and approach to the clinical supervision of students, integrating theory and practice.
- To develop awareness of ethical and professional practice issues to enhance the professional identity of a clinical supervisor and instil good standards.

In view of the above, the schools of radiography should assist radiographers who facilitate practice-based learning for students in developing their competency through the provision of training. The training should cover the three areas of clinical supervision: managerial, educational, and supportive (Health Workforce Australia, 2010; University of Ottawa, 2011), as well as educational theories related to the facilitation of practice-based learning. The training would enable clinical supervisors to acquire appropriate knowledge, skills and confidence in the facilitation of practice-based learning for students (Walsh, 2014; Neshuku & Justus, 2015; Russell et al., 2016). However, undertaking clinical supervision training is not the end of the road; it is necessary to keep up to date with new developments in the facilitation of learning for students to maintain competence.

**Continuing Professional Development (CPD) on Clinical Supervision**

Clinical teaching and learning, just like radiography, is constantly changing. Clinical supervisors should, therefore, keep up to date with radiography as well as new developments and approaches to the facilitation of practice-based learning. This should be achieved by undertaking CPD learning activities related to clinical supervision. There are several methods of keeping up to date with the clinical supervision of students reported in the literature, as follows (College of Radiographers, 2008; Walsh, 2014; Harden & Laidlaw, 2017):

**Refresher courses on clinical supervision**

This would help clinical supervisors improve their knowledge and skills on new developments in the clinical supervision of students and keep them updated on any changes to the radiography curriculum.

**Clinical and medical education textbooks**

Several textbooks are available, especially from the medical and nursing professions, that cover all areas of clinical supervision.

**Clinical supervision guidelines**

Professional bodies, such as the College of Radiographers in the UK, publish a series of guidelines to assist radiographers in the clinical supervision of radiography students. These guidelines inform the clinical supervisors of radiography students about the contemporary practice-based teaching and learning practices to follow, approved by the schools of radiography and professional bodies. This could be replicated for countries with no such clinical supervision guidelines in place to support clinical supervisors.

**Clinical and medical education journals**

Radiographers read journals relating to radiography, such as the South African Radiographer and Nigeria Journal of Radiography and Radiation Sciences, but these are less likely to provide adequate coverage of the facilitation of students’ learning in the clinical environment. Therefore, radiographers should also read journals relating to clinical and medical education, such as the Australian Journal of Clinical Education, African Journal of Health Professions Education, Health Professions Education Journal and the International Journal of Medical Education, in order to keep up to date with evidence-based practice in the clinical supervision of students.

**Conferences and meeting**

Attendance at local, national or international conferences or meetings relating to clinical education is another way of keeping up to date as a clinical supervisor. Professional bodies, such as the RSZ, should encourage the inclusion of topics on the clinical supervision of radiography students during their annual conferences.

**Membership of clinical education associations**

A further way to keep up to date is to be a member of an association committed to improving the clinical teaching and learning of health professions, such as the South African Association of Health Educationalists (SAAHE).

In view of the above, clinical supervisors have a responsibility to utilise one or more of these approaches to keep up to date with new developments in the
facilitation of practice-based learning (College of Radiographers, 2008, Radiological Society of Zambia, 2018). This will also ensure that radiographers who facilitate the learning processes of students comply with CPD mandatory requirements (Health Professions Council of Zambia, 2014).

Quality Assurance In The Clinical Supervision Of Students

Figure 2: Quality assurance programmes in clinical supervision

Educational Audits of the Clinical Learning Environment

An effective learning environment should have regular monitoring and evaluation of placements through conducting educational audits. Walsh (2014) describes an educational audit as a key quality measurement tool for the clinical learning environment. In the context of radiography, educational audits should be a collaborative responsibility of the schools of radiography and radiology departments. The aim of educational audits is to improve the quality of clinical training experiences (Price et al., 2000; Kinnell & Hughes, 2010; Society of Radiographers, 2012). According to the Royal College of Nursing (2017), clinical supervisors play a vital role in quality assurance by contributing to the educational audits of clinical placement. Clinical supervisors may be involved in the audit process through assistance in the completion of audit documentation and showing external auditors around the clinical department. The educational audits should focus on five specific areas (Price et al., 2000; College of Radiographers, 2005; Kinnell & Hughes, 2010; Walsh, 2014):

- **Learning opportunities** - Are there appropriate learning opportunities for students in the clinical department?
- **Student support** - Is there evidence of appropriate support for students in the clinical department?
- **Clinical supervision** - Do students have appropriately qualified clinical supervisors to facilitate the learning process of students?
- **Number of students** - Does the number of the students match the available clinical teaching and learning resources, including clinical supervisors?
- **Clinical department safety** - How effectively does the clinical department provide a safe clinical learning environment for students?

The educational audit can also aid in setting the numbers of radiography students any one radiology department can accept given the number of clinical supervisors and clinical teaching and learning resources available (College of Radiographers, 2012).

Evaluation of Clinical Supervisors’ Experiences in the Clinical Supervision of Students

Clinical supervisors should also undertake an evaluation of their clinical supervision experiences periodically (Price et al., 2000; Kinnell & Hughes, 2010). This again serves as a useful quality assurance tool, but Walsh (2014) reports that clinical supervisors’ evaluations of their experiences regarding facilitation of learning for students are rarely undertaken. However, such evaluations can examine the student feedback and the clinical supervisors’ own views to determine what adjustments may be needed for the learning environment, teaching and learning experiences, student support and resources (Price et al., 2000; Kinnell & Hughes, 2010; Royal College of Nursing, 2017). Walsh
(2014) adds that clinical supervisors’ evaluations can also be useful in highlighting certain aspects, such as the students’ preparedness for the clinical practice and identifying any knowledge gaps that need attention prior to students being sent for clinical placement. In radiography, the evaluation of radiographers’ experiences in the clinical supervision of radiography students is under-researched. There is a need to conduct research on this topic to understand opportunities and challenges faced by radiographers in the clinical supervision of radiography students.

Evaluation of Radiography Students’ Experiences to Clinical Supervision

The other quality assurance programme reported in the literature is evaluation by students of their experiences in clinical supervision. Walsh (2014) states that every good learning environment should gather feedback from its students to improve students’ experiences and enhance their clinical learning opportunities. At the end of the placement, students can be asked to reflect on their practice and comment on their experiences related to clinical supervision. According to Kinnell and Hughes (2010), feedback should be based on the four dimensions: clinical supervision process, training resources, comment on clinical supervisors, relationships with other staff, and overall quality of the clinical learning environment. A systematic review conducted by Bwanga and Lidster (2019) found several studies on the perceptions and experiences of radiography students in clinical supervision during their clinical placements. At least this area has been researched and provides good understanding.

CONCLUSION

This review found a lack of literature in radiography on the managerial function of the clinical supervision of radiography students. This article has provided this information by borrowing the literature from the nursing and medical professions. The application of this information by the schools of radiography, radiology department managers and radiographers involved in clinical supervision will improve the learning environment for radiography students. Due to limited literature on this topic, the authors recommend the undertaking of research on five areas: radiography students’ experiences of their clinical placement orientation, evaluation of radiographers experiences of clinical supervision, educational audit of radiology departments affiliated with the schools of radiography, development and evaluation of a clinical supervision training programme and experiences of clinical supervisors regarding CPD in the facilitation of practice-based learning for students.

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