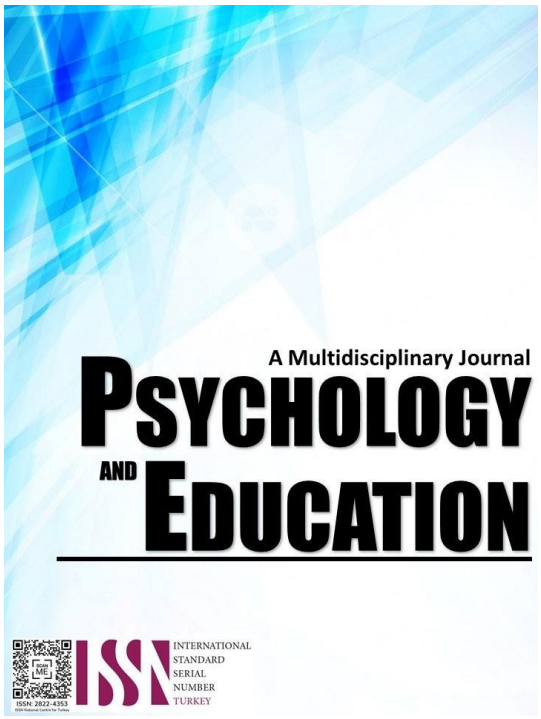
LIVED EXPERIENCES OF RADIOLOGIC TECHNOLOGISTS HEADS ON MANAGERIAL READINESS



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Research Article

Lived Experiences of Radiologic Technologists Heads on Managerial Readiness

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Abstract

Radiologic technologists often transition into managerial roles without formal preparation, underscoring the need to understand the factors influencing their readiness for leadership positions. This study aimed to explore the lived experiences of radiologic technologist heads to uncover the dimensions of managerial readiness within tertiary hospital settings. This phenomenological study was conducted across the Davao Region, Philippines, from June 2024 to April 2025, to understand the underlying dimensions of managerial readiness in tertiary hospitals. The study engaged 15 purposively selected participants—eight in in-depth interviews and seven in focus group discussions. Thematic analysis was used to interpret the qualitative data, resulting in the extraction of 16 essential themes. These included process optimization, resource management, unplanned leadership opportunities, shifting managerial roles, professional mentorship, team collaboration, strategic decision-making, policy adherence, leadership preparedness, communication dynamics, authority challenges, inclusivity, quality improvement, leadership styles, and accessible leadership development. The findings revealed that managerial readiness is shaped by a range of interrelated factors—personal growth, organizational context, relational dynamics, and leadership exposure. These insights contribute to the development of more targeted leadership programs and policy reforms aimed at supporting radiologic technologists in assuming managerial roles. Furthermore, the themes align with existing competency frameworks, such as the Great Eight Competency Theory, reinforcing their theoretical significance. It is recommended that healthcare institutions implement structured leadership development initiatives to enhance the managerial readiness of radiologic technologists based on the identified dimensions.

Keywords: *healthcare management, leadership transition, managerial readiness, phenomenological study, radiologic technologists*

Introduction

Radiologic technologists play an integral role in healthcare, often transitioning from technical responsibilities to leadership and managerial roles. This shift requires more than clinical proficiency—it demands readiness to take on complex responsibilities involving decision-making, resource management, team coordination, and strategic planning. The lived experiences of radiologic technologist heads reveal that managerial readiness is not always innate but is cultivated through exposure, mentorship, and institutional support (Fanelli, Pratici, & Zangrandi, 2020). Many technologists assume leadership positions without formal training, often relying on self-directed learning and experiential adaptation.

Managerial readiness has long been valued as essential for effective organizational performance. It not only characterizes leadership capabilities but also shapes how departments contribute to the broader strategic goals of healthcare institutions (Treglown et al., 2020). Radiology department heads are expected to coordinate with other functional units, manage resources, and influence hospital-wide strategies. However, the transition into such roles frequently brings internal conflict and uncertainty. Some leaders are selected based on tenure or clinical performance rather than demonstrated managerial ability, underscoring the disconnect between technical expertise and leadership preparation (Mojar & Depositario, 2020).

International studies have shown that many unit managers face challenges such as lack of managerial skills, insufficient resources, and high levels of stress, which impact their ability to lead effectively (Chitsulo et al., 2014). In Italy, healthcare professionals are increasingly expected to acquire managerial competencies in addition to clinical expertise (Fanelli et al., 2020). Similarly, in the Philippines, factors such as age, length of service, education level, and organizational support have been identified as influencing managerial readiness among radiologic technologists. Those engaged in career development and supported by their organizations tend to exhibit greater administrative competence (Wong, 2020; Sison & Rodelas, 2024).

In light of these contextual insights, this study explores the lived experiences of radiologic technologist heads in managing radiology departments within tertiary hospitals. The themes that emerged from this study illuminate the challenges, growth trajectories, and learning realizations that occur throughout the transition into managerial roles. These findings provide the basis for developing structured programs that prepare technologists for leadership, including tools to assess readiness and support career progression. By aligning institutional efforts with the actual experiences of radiologic technologists, healthcare organizations can more effectively foster capable, adaptable, and empowered department heads.

Research Questions

This study aimed to explore the lived experiences of radiologic technologist heads in relation to their managerial readiness, focusing on how they perceive, adapt to, and navigate the transition from technical roles to leadership responsibilities within radiology departments. This sought to answer the following questions:

1. How do radiologic technologist heads understand their managerial roles and responsibilities within the radiology department?
2. What challenges do radiologic technologists encounter as they transition from technical functions to managerial positions?
3. In what ways have their skills, experiences, and insights contributed to their ability to lead teams or manage projects effectively in the radiology department?

Literature Review

Managerial Readiness

Banta (2019) conducted a grounded theory study exploring leadership development within the healthcare sector, emphasizing the specific needs of radiologic technologists. The research identified core competencies such as communication, emotional intelligence, adaptability, and resilience—traits essential to functioning in complex healthcare environments. The study further emphasized the value of experiential learning and organizational support, noting that technologists developed leadership capabilities more effectively when supported by mentorship and provided with practical, real-world leadership opportunities. These findings underscore the foundational elements of managerial readiness as a process shaped by both individual growth and institutional guidance.

Characteristics of Managerial Readiness

The work of Kyamanywa and Redding (2021) underscored the behavioral dimensions of managerial readiness, particularly focusing on intention, implementation, and evaluation of leadership actions. Their study suggested that radiologic technologists' readiness is reflected in their proactive engagement with leadership opportunities—through professional development, seeking mentorship, and evaluating their effectiveness in managerial roles. McGowan et al. (2020) supported this view, revealing that technologists with higher educational qualifications and exposure to structured career pathways were more inclined toward leadership aspirations. Furthermore, the perception of organizational support, availability of advancement opportunities, and personal motivation significantly influenced their pursuit and performance of managerial responsibilities.

Challenges in Managerial Readiness

Despite growing interest in leadership roles, radiologic technologists face notable challenges in transitioning from technical to managerial functions. Smith, Jones, and Brown (2020) highlighted the gaps in skill development, particularly in areas such as budgeting, team leadership, and strategic decision-making. Their findings revealed a common struggle in reconciling clinical responsibilities with new leadership tasks. Likewise, Martins (2019) emphasized the complexity of these transitions, reporting that technologists often experience difficulty in balancing clinical expertise with administrative duties, managing interpersonal dynamics, and navigating organizational hierarchies. The perceived readiness to lead varied widely, with many expressing the need for continuous mentorship and structured learning to bridge these gaps.

Developmental Pathways and Organizational Support

Spanos et al. (2024) explored the pathways through which healthcare professionals, including radiologic technologists, acquire and refine managerial competencies. The study identified formal education, mentorship, on-the-job training, and participation in structured leadership programs as critical avenues for development. Technologists noted that transitioning into managerial roles required not only technical proficiency but also strategic thinking, financial management, and the ability to align departmental goals with broader institutional objectives. The study also emphasized the importance of supportive workplace environments that facilitate leadership growth through resource provision, feedback mechanisms, and peer learning opportunities.

Methodology

Research Design

This study employed a qualitative phenomenological design to explore and understand the lived experiences of Radiologic Technologist Heads regarding their managerial readiness. The phenomenological approach was chosen to capture the depth and richness of participants' personal perspectives, focusing on how they make sense of their transition from technical roles to managerial responsibilities within the healthcare context.

Participants

The study was conducted in tertiary hospitals across the Davao Region, Philippines—healthcare institutions characterized by complex clinical environments and established radiology departments. These settings were chosen for their relevance to the study's objectives, particularly the presence of Radiologic Technologist Heads managing departmental operations. A total of 15 participants were purposively selected based on their potential to provide rich, experience-based insights into managerial readiness. Inclusion criteria required that participants hold a current managerial role with at least six months of experience in that capacity. Of the 15 participants, eight engaged in individual in-depth interviews (IDI), while seven participated in focus group discussions (FGD). Purposive sampling ensured that the selection process prioritized participants with diverse yet relevant experiences, thereby enhancing the credibility and depth of the data collected.

Instrument

The primary data collection tool was a semi-structured interview guide designed to elicit detailed narratives about managerial experiences. To ensure the validity of the instrument, content validation was conducted. The interview guide was reviewed by three experts in healthcare leadership and qualitative research, who evaluated each item for clarity, relevance, and alignment with the study objectives. Feedback from these experts was used to revise and refine the instrument, ensuring that it would effectively capture the dimensions of managerial readiness among Radiologic Technologist Heads. This process enhanced the tool's credibility, relevance, and alignment with the study's phenomenological focus.

Procedure

The study followed a systematic process typical of phenomenological research. After securing necessary permissions, the researcher initiated contact with qualified participants and obtained their informed consent. Data collection was conducted in two phases: individual in-depth interviews and focus group discussions. All interviews were audio-recorded with consent and later transcribed verbatim. Thematic analysis was used to interpret the data, following the steps of coding, identifying significant statements, clustering into themes, and formulating textual and structural descriptions to capture the essence of the participants' lived experiences.

Data Analysis

To address the research questions outlined in the statement of the problem, thematic analysis following the six-phase framework by Braun and Clarke (2006) was employed. This approach enabled the identification and interpretation of patterns and themes within the qualitative data. The analysis involved: (1) familiarization with the data through repeated readings of transcripts, (2) generation of initial codes based on significant statements, (3) searching for themes by grouping related codes, (4) reviewing and refining themes to ensure coherence and consistency, (5) defining and naming themes to capture their essence, and (6) producing a final report linking themes to the research questions. This systematic approach ensured a rigorous and transparent analysis of the lived experiences described by participants, allowing the study to uncover the underlying dimensions of managerial readiness.

Ethical Considerations

This study adhered to established ethical guidelines for qualitative research. Approval was obtained from the appropriate ethics review board prior to data collection. Participation was voluntary, and informed consent was secured from all respondents. Confidentiality and anonymity were ensured by using pseudonyms and securely storing data. Participants were also informed of their right to withdraw from the study at any point without penalty. The researcher remained sensitive to participants' comfort and well-being throughout the data gathering process, ensuring a respectful and non-coercive environment.

Results and Discussion

This section presents the findings derived from the qualitative analysis, structured in alignment with the study's research questions. The themes and insights that emerged from the participants' narratives are systematically organized and discussed to address each question, providing a comprehensive understanding of their lived experiences related to managerial readiness.

Table 1. *Profile of the Participants*

In-depth Interview		
Code	*Years in the Industry*	*# of years as a Department Heads*
IDI-1	23	11
IDI-2	14	5
IDI-3	12	6
IDI-4	8	3
IDI-5	9	3
IDI-6	15	5
IDI-7	16	8
IDI-8	17	10
Focus Group Discussion		
Code	*Years in the Industry*	*# of years as a Department Heads*
FGD-1	7	3
FGD-2	10	5
FGD-3	5	2
FGD-4	20	7
FGD-5	24	8
FGD-6	19	7
FGD-7	18	5

Table 1. presents the demographic profile of the participants involved in the in-depth interviews and focus group discussions, emphasizing their years of professional experience and tenure in managerial roles within the field of radiologic technology. The in-depth interview participants (coded as IDI-1 to IDI-8) each hold extensive industry experience, ranging from 8 to 23 years, with leadership

roles spanning 3 to 11 years. Meanwhile, participants in the focus group discussions (coded as FGD-1 to FGD-7) reported professional experience between 5 and 24 years, and have served in managerial capacities for 2 to 8 years. For confidentiality and data management, each participant was assigned a unique identifier: "IDI" for in-depth interviewees and "FGD" for focus group discussants, followed by a numeric code representing the sequence of responses. The in-depth interviews were designed to elicit rich, detailed narratives concerning the participants' lived experiences and perceptions of managerial readiness. The focus group discussions were conducted to validate and triangulate the themes that emerged from the individual interviews, offering collective insights and reinforcing the credibility of the data. Overall, the participants' substantial clinical and managerial backgrounds affirm their suitability for providing nuanced perspectives on the dimensions of managerial readiness among radiologic technologist department heads. Their diverse experiences contribute to the depth and trustworthiness of the qualitative findings.

Table 2. *Lived Experiences of Radiologic Technologists on Managerial Readiness*

Probing Issues	*Codes*	*Essential Themes*
Participants' ideas about their readiness for managerial responsibilities	Process optimization, resource management and innovation management	Process Optimization and Resource Management
	Unplanned leadership opportunity	Organizational Influences and Decision-Making
	Leadership transition, shifting roles in management, responsibility and commitment, empowerment and positive impact	Leadership Transition
	Team collaboration and organizational dynamics	Building Collaborative and Inclusive Teams
	Mentorship and professional guidance	Mentoring
	Balancing risk and outcomes, managerial decision-making	Strategic Decision-Making
	Ensuring policy adherence	Optimized Policy Implementation
	Career continuous development, motivation and career growth	Leadership Preparedness

Process Optimization and Resource Management

This theme underscores the critical role of streamlining workflows and maximizing the use of available resources to improve operational efficiency within radiology and radiation therapy departments. Participants shared their proactive initiatives in establishing standardized workflows and patient care protocols, overseeing daily operations, and coordinating effectively with hospital executives to ensure uninterrupted radiologic services. Key concepts that emerged—such as fostering interdepartmental collaboration, implementing structured training protocols, and demonstrating strong troubleshooting and problem-solving capabilities—were consistently aligned with the broader dimensions of process optimization, resource management, and innovation management. These insights reflect the radiologic technologist heads' commitment to enhancing department functionality through strategic and adaptive management practices.

"We established workflows and policies to improve patient care and team coordination" (IDI-1)

"I manage daily operations and collaborate with executives to optimize the unit" (IDI-3)

"I introduced training protocols for Image-Guided Brachytherapy to enhance staff skills" (IDI-4)

"I ensure smooth operations and apply technical skills to troubleshoot issues" (IDI-8)

"Policies help us streamline workflows and deliver better patient care" (FGD-1)

"Clinical practice sharpened our problem-solving and troubleshooting abilities" (FGD-3)

"We stay updated with tech advancements to manage and operate therapy machines effectively" (FGD-6)

Radiologic technologists who are consistently engaged in real-time departmental operations and contribute to organizational improvement initiatives demonstrate a higher proficiency in managerial functions. Their direct clinical involvement fosters essential competencies in operational planning and critical decision-making, facilitating a smoother transition into leadership roles. This progression signifies a pivotal shift from task-oriented responsibilities to a broader, system-level perspective—an essential mindset for effective healthcare leadership. As highlighted by Fanelli et al. (2022), developing a systems-thinking approach is crucial for radiologic technologists assuming managerial positions, particularly in ensuring quality service delivery amid resource constraints. Moreover, this theme underscores the importance of cultivating a culture of continuous quality improvement, as strategic process management not only enhances departmental efficiency but also leads to better patient care outcomes.

Organizational Influences and Decision-Making

Radiologic technologists often assume leadership roles not through a deliberate career trajectory but as a result of organizational demand. This theme highlights the situational nature of leadership appointments, where promotions frequently arise from staffing shortages or the absence of other qualified candidates. The code *"unplanned leadership opportunity"* emerged from narratives describing unexpected transitions into managerial positions, often driven by institutional necessity rather than personal aspiration. Such instances reflect the

organizational influence on career progression and underscore the importance of preparedness and adaptability among technologists who may be thrust into leadership roles without prior formal training or intent.

"I accepted the leadership role because no one else was available at the time" (IDI-2)

"I was promoted mainly due to the shortage in workforce" (IDI-4)

"Sometimes we take on leadership roles simply because there's no one else to fill the position" (FGD-3)

"Our promotions often happen out of organizational need rather than planned career moves" (FGD-7)

These unexpected transitions highlight the fact that radiologic technologists often assume leadership roles without the benefit of structured preparation, which can impact their confidence and performance. However, facing institutional challenges can foster greater adaptability and a deeper understanding of systemic operations. As a result, it is essential for healthcare organizations to establish a proactive leadership development pipeline, rather than relying solely on reactive promotions. The implication is that structured succession planning is crucial for cultivating future leaders, ensuring continuity in leadership quality, and mitigating the risk of burnout due to unprepared transitions into managerial positions (Chitsulo et al., 2014).

Leadership Transition

The shift from clinical to managerial roles often involves profound personal and professional changes. This theme explores the experiences of radiologic technologists as they navigate the complexities of embracing leadership responsibilities despite limited prior experience. Key concepts include "dedication to assuming the role," "managing uncertainty," and "overcoming initial challenges with minimal resources." The corresponding codes reflect the themes of leadership transition, role evolution, responsibility, and commitment.

"I embraced the leadership role with dedication, even though I lacked experience" (IDI-1)

"Leading the team taught me to manage negativity and uncertainty effectively" (IDI-3)

"The role pushed me to show dedication and handle a heavy workload professionally" (IDI-4)

"I built a sense of authority and accountability through hands-on clinical practice" (IDI-8)

"Despite limited resources, we pushed through and built the department from scratch" (FGD-3)

"Policy changes were tough at first due to limited exposure, but we adapted over time" (FGD-6)

"We viewed leadership as a responsibility that demands consistency and perseverance" (FGD-7)

These findings underscore the importance of incorporating real-world challenges into leadership development programs, enabling individuals to build resilience and strengthen their decision-making abilities (Spanos et al., 2024). Furthermore, institutions should provide ongoing mentorship and clear role definitions to support leaders during transitions, thereby facilitating a smoother adjustment process.

Building collaborative and inclusive teams is crucial for effective leadership in healthcare. This theme highlights the importance of cultivating a positive work environment, prioritizing clear and consistent communication, and fostering team cohesion. These core principles align with the themes of team collaboration and organizational dynamics, emphasizing the need for leaders to actively nurture a culture of cooperation and shared responsibility within their teams.

"I drew strength from the support and trust of my colleagues" (IDI-2)

"Teamwork played a big role in building a positive work environment" (IDI-5)

"We built a cohesive team through open and consistent communication" (FGD-1)

The implication of this is that fostering inclusive team-building not only boosts staff morale but also leads to better patient care and increased operational efficiency. To sustain a positive and productive work environment, it is essential for leaders to be trained in effective communication strategies and conflict resolution (Holmes et al., 2020).

Mentorship is a crucial factor in preparing radiologic technologists for leadership roles. Participants shared their experiences of both receiving mentorship from seasoned leaders and providing guidance to others. Key concepts, such as offering shadowing opportunities, providing professional guidance, and demonstrating a commitment to helping others, were central to this theme. These experiences are encapsulated in the code "mentorship and professional guidance."

"I provided mentorship and guidance to my team, showing dedication to their growth" (IDI-4)

"I also sought mentorship from experienced leaders to improve my own skills" (IDI-8)

"I offered mentorship and shadowing opportunities to help others develop" (FGD-3)

Strategic decision-making is a critical theme, highlighting the importance of leaders making informed, timely, and patient-centered decisions. Participants emphasized key concepts such as "rapid situational assessment," "addressing patient concerns," and "utilizing critical thinking." These concepts are reflected in the codes of balancing risk and outcomes, and managerial decision-making, underscoring the need for leaders to navigate complex situations effectively while prioritizing both operational goals and patient well-being.

"I learned to mediate conflicts by adapting my interpersonal and negotiation skills" (IDI-2)

"Clinical practice helped me strengthen my problem-solving and decision-making abilities" (IDI-4)

"I always consider multiple perspectives to ensure balanced decision-making" (FGD-5)

"I quickly assess situations, identify root causes, and take appropriate action to resolve issues" (FGD-6)

The implication of strategic decision-making is that it enhances service delivery while ensuring the maintenance of high standards, even under pressure. To cultivate these essential skills, leadership training should incorporate scenario-based learning, allowing individuals to refine their decision-making abilities in real-world contexts (Fanelli et al., 2020).

Optimized policy implementation is critical for effective leadership, as it ensures adherence to institutional protocols and guidelines. This theme emphasizes key concepts such as reducing turnover through strong management practices, making informed decisions, and aligning actions with established policies. The emerging codes highlight the importance of ensuring policy adherence and maintaining consistency in decision-making.

"I focus on making impactful, well-considered decisions that align with institutional protocols" (IDI-3)

"By adhering to policies and guidelines, I've helped reduce employee turnover through effective management" (IDI-8)

"My decision-making is always aligned with the organization's established protocols and guidelines" (FGD-7)

Leaders who consistently align their decisions with institutional protocols contribute to the creation of structured and compliant environments. Such adherence to policy not only enhances service delivery but also improves patient safety and promotes a culture of accountability. For radiologic technologists stepping into managerial roles, a strong understanding of regulatory standards and administrative frameworks is essential for success. The implication is that policy literacy among leaders is crucial for ensuring organizational compliance and enhancing operational credibility, particularly in highly regulated sectors such as radiology (Papadopoulos et al., 2016). To strengthen this capability, healthcare institutions should offer comprehensive policy orientation and leadership-focused training programs.

Leadership Preparedness. This theme highlights the significance of being mentally, technically, and professionally equipped for leadership roles. Key ideas include perceiving leadership as an opportunity for career advancement, leveraging leadership experiences from various domains, and maintaining a proactive approach to skill development. These concepts are encapsulated in the codes of motivation, career progression, and continuous professional growth.

"I prepared for leadership transitions through study and research, staying proactive in my development" (IDI-2)

"Leadership roles are key to career growth, and I find personal fulfillment in applying skills from both church and professional experiences" (IDI-4)

"I emphasize leadership and management training to strengthen both technical and leadership skills, staying mentally prepared for management roles" (FGD-3)

Leadership readiness extends beyond technical expertise to include psychological and motivational factors. It is driven by an individual's commitment to personal growth and their active participation in both formal and informal leadership development opportunities. Fostering this mindset is essential for sustaining effective leadership in radiology departments. The implication is that leadership roles should be incorporated into career development plans, with formal training initiatives designed to nurture readiness (Wong, 2020).

Table 3. *Challenges of Radiologic Technologists on Managerial Readiness*

Probing Issues	*Codes*	*Essential Themes*
Participants' ideas on their challenges transitioning from technical duties to managerial responsibilities.	Increased scope of accountability, challenges in balancing time and responsibilities	Redefined Managerial Responsibilities
	Communication as a catalyst, team collaboration	Communication and Team Management
	Challenges in handling former peers, asserting authority	Overcoming Authority and Relationship Challenges
	Active listening and empathy, promoting fairness and inclusivity, establish mutual understanding and respect	Promoting Fairness and Inclusivity

Redefined Managerial Responsibilities. Participants experienced a significant transition from technical to managerial roles, leading to an expansion of their responsibilities and an increase in accountability. Key themes included the sense of being overwhelmed by new

duties, the need to navigate conflict resolution, and the adaptation to more complex tasks. These experiences highlight the broader scope of accountability and the challenges associated with shifting managerial responsibilities.

"The new responsibilities were overwhelming, especially transitioning from technical duties to more complex managerial tasks" (IDI-3)

"I experienced a significant shift in roles, with increased scope and the added responsibility of conflict resolution" (IDI-4)

"Time management was a struggle at first, but I managed my workload as I adapted to broader responsibilities" (FGD-1)

The implication is that organizations should implement leadership orientation programs to better manage expectations and facilitate a smoother transition into managerial roles (Fanelli et al., 2022).

Communication and Team Management. The theme of communication and team management highlights the importance of effective communication as a key leadership competency. Core concepts include utilizing communication to manage teams, address concerns, and cultivate positive team dynamics. The associated codes emphasize communication as a catalyst for fostering collaboration and enhancing team performance.

"I used my communication skills to address concerns during change management and manage the team effectively" (IDI-2)

"Mastering communication techniques has been key to leadership success, fostering positive team dynamics" (IDI-4)

"Overcoming communication barriers in multicultural settings has been essential for team cohesion" (FGD-3)

The implication is that effective leadership is closely linked to strong communication skills, particularly in diverse and multidisciplinary environments (Watts & Stenner, 2021).

Overcoming Authority and Relationship Challenges. Overcoming challenges related to authority and interpersonal relationships was identified as a key difficulty for leaders. Core themes include establishing authority, addressing resistance, and managing staff misconduct. These experiences were coded under asserting authority and navigating relationship challenges.

"Managing former peers and asserting authority was challenging, especially when handling errors and resistance from staff" (IDI-3)

"I used high emotional intelligence to manage resistant staff and address issues like misconduct, even leading to the termination of a staff member" (IDI-4)

"Managing former colleagues who struggle with new authority requires patience and understanding" (FGD-2)

Navigating authority and relationship challenges demands high emotional intelligence and a balanced approach to leadership. Leaders who manage these dynamics with respect and fairness build credibility and maintain team cohesion. Therefore, integrating emotional intelligence training into leadership development programs is essential. The implication is that emotional intelligence and professionalism are crucial for managing complex interpersonal dynamics effectively. As such, leadership training should prioritize the development of interpersonal skills (Shrivastava et al., 2022).

Promoting fairness and inclusivity is a key aspect of effective leadership. Participants highlighted the significance of active listening, making equitable decisions, and fostering mutual respect within their teams. These practices are encapsulated in the codes of empathy and promoting inclusivity.

"I believe in listening before making decisions, actively hearing both sides to ensure balanced outcomes" (IDI-3)

"Consistency and fairness over time helped me gain respect, and I manage conflicts with communication and respect" (IDI-4)

"Private conversations and emotional intelligence are key to addressing resistance and fostering professionalism in leadership" (FGD-7)

Leaders who champion inclusivity build trust and foster greater engagement within their teams. By promoting inclusivity, leadership can boost morale and encourage innovation. Active listening and a commitment to fairness ensure that leadership practices remain compassionate and ethically grounded. The implication is that empathetic leadership not only strengthens team trust but also positively shapes organizational culture (Mojar & Depositario, 2020).

Table 4. *Insights of Radiologic Technologists on Managerial Readiness*

Probing Issues	*Codes*	*Essential Themes*
Participants' ideas when a specific skill or competency helped them successfully lead a project or team in the radiology department and its outcome	Enhance operational efficiency, technical expertise and compliance	Quality Improvement and Organizational Growth
	Leadership transition and strategic planning, leadership and team empowerment	Leadership Styles to Dynamic Environments
	Leadership development programs, structured leadership training, continuous learning activities, accessible training	Accessible Leadership Development

Quality Improvement and Organizational Growth. Radiologic technologists play a pivotal role in driving institutional growth by leveraging both their technical expertise and leadership skills. Key themes include a strong commitment to continuous quality improvement and a focus on patient safety. These elements are reflected in codes such as technical proficiency and adherence to compliance standards.

"I showed commitment to quality improvement and adaptability during the accreditation process" (IDI-3)

"My focus on competency and technological advancement has contributed to organizational growth, especially in radiation therapy techniques" (IDI-4)

"Prioritizing radiation safety and understanding patient safety protocols are central to my approach in quality improvement" (FGD-1)

This highlights the ability of clinical expertise to drive leadership that not only fosters innovation but also ensures adherence to compliance standards. Quality improvement is a cornerstone of effective healthcare management and aligns with key accreditation standards such as those set by ISO and the Joint Commission The implication is that radiologic technologists must integrate both clinical and administrative skills to support sustained organizational improvement (American Registry of Radiologic Technologists, 2022).

Leadership Styles to Dynamic Environments. Leaders showcased adaptability in responding to evolving expectations within dynamic environments. Core themes include strategic planning, adjusting to fluctuating workloads, and shifting perspectives to meet new challenges. These concepts are captured under the codes of leadership transition and strategic planning.

"I shifted my focus from execution to decision-making and strategic planning, which was made easier with strong support" (IDI-2)

"Adapting to new workloads and high expectations, I built a strong sense of accountability, which led to the successful implementation of a new treatment protocol" (IDI-4)

"I developed people management skills to ensure project success, while fostering a culture of collaboration and trust" (IDI-8)

"Teamwork, trust, and effective communication helped enhance the patient experience and improve staff motivation and retention" (FGD-1)

"We've been able to enhance our reputation through positive client feedback, thanks to our dedication to quality and team empowerment" (FGD-3)

Leaders who are able to adjust their leadership style to suit different contexts are more effective in dynamic healthcare environments. Encouraging strategic thinking and flexibility is therefore crucial for radiologic technologists transitioning into leadership roles. Furthermore, leaders who empower their teams contribute to the creation of resilient and efficient departments. Empowerment not only enhances staff engagement but also leads to improved patient outcomes, making it a key focus for leadership development initiatives. The implication is that adaptability is a critical component of healthcare leadership, especially in response to the evolving needs of patients and healthcare institutions (De Brún et al., 2020).

Accessible leadership development emerged as a critical strategy for empowering staff and fostering trust within healthcare teams. Participants emphasized the importance of enhancing communication and effectively managing teams to create a supportive and productive environment. The core ideas revolved around leadership empowerment and team collaboration. Many participants also highlighted the necessity for structured leadership training, specifically in the form of leadership development programs and training in new technologies. These initiatives are essential for preparing future leaders and ensuring that teams remain adaptable and efficient in a rapidly evolving healthcare landscape.

"There's a need to establish formal leadership programs and offer accessible training for aspiring managers" (IDI-2)

"Future leaders should be given opportunities to take on roles early, supported by structured mentorship and training" (IDI-4)

"Targeted training should include the latest imaging technologies and their impact on workflow and patient care" (IDI-8)

"Affordable and accessible seminars, lectures, and certifications can really help prepare future healthcare leaders" (FGD-4)

"Seminars and specialized courses help enhance both knowledge and mental preparedness for leadership roles" (FGD-6)

"Leadership development must go hand-in-hand with technical updates and continuous education to keep up with industry demands" (FGD-7)

Accessible training plays a pivotal role in ensuring long-term leadership sustainability within radiology. Research consistently supports the notion that formal leadership education not only enhances readiness for leadership roles but also mitigates the risks of role failure. The findings suggest that empowering teams through structured leadership training leads to improved patient outcomes and reduced turnover rates, reinforcing the importance of leadership development programs. These initiatives are crucial for fostering both individual growth and organizational stability. The implication is clear: formal education and hands-on exposure are essential components in the development of effective healthcare leaders (Gilmartin & D'Aunno, 2021).

Conclusions

In conclusion, this study underscores the critical role of managerial readiness in the transition of radiologic technologists to leadership positions. The emerging themes—such as leadership transition, organizational influences, communication and team management, mentorship, and strategic decision-making—highlight the multifaceted nature of leadership in radiology departments. Radiologic technologists, though primarily trained in technical roles, demonstrate significant leadership potential when provided with structured support, mentorship, and leadership development programs. The study emphasizes the importance of continuous professional development, emotional intelligence, and adaptability in fostering effective leadership. Future researchers are encouraged to explore longitudinal studies that track the impact of leadership development programs on organizational outcomes, as well as the integration of emerging technologies and their influence on leadership readiness in healthcare settings. Additionally, further research could examine the role of emotional intelligence and interpersonal skills in fostering resilient leadership in dynamic healthcare environments.

References

American Psychological Association. (2020). Publication manual of the American Psychological Association (7th ed.). American Psychological Association.

American Registry of Radiologic Technologists. (2022). ARRT radiography didactic and clinical competency requirements. https://www.va.gov/files/2022-04/ARRT_Radiography_Didactic_Clinical_Competency_Requirements.pdf

Banta, C. (2019). A grounded theory study: How a virtual organizational leadership program impacts employee leadership development (Doctoral dissertation, Concordia University, St. Paul). https://digitalcommons.csp.edu/cup_commons_grad_edd/281

Braun, V., & Clarke, V. (2014). Thematic analysis. In A. C. Michalos (Ed.), Encyclopedia of quality of life and well-being research (pp. 6626–6628). Springer.

Chitsulo, C., Pindani, M., Maluwa, A., & Chilinda, I. (2014). Factors promoting and hindering performance of unit nurse managers at Kamuzu and Queen Elizabeth Central Hospitals in Malawi. Open Journal of Nursing, 4(13), 855–865. https://doi.org/10.4236/ojn.2014.413099

De Brun, A., Rogers, L., O'Shea, M., & McAuliffe, E. (2020). Understanding the impact of a collective leadership intervention on team working and safety culture in healthcare teams: A realist evaluation protocol. HRB Open Research, 2, 5. https://doi.org/10.12688/hrbopenres.12860.2

Fanelli, S., Lanza, G., Enna, C., & Zangrandi, A. (2020). Managerial competences in public organisations: The healthcare professionals' perspective. BMC Health Services Research, 20, Article 640. https://doi.org/10.1186/s12913-020-05179-5

Fanelli, S., Pratici, L., & Zangrandi, A. (2022). Managing healthcare services: Are professionals ready to play the role of manager? Public Policy and Administration. https://doi.org/10.1177/09514848211010264

Gilmartin, M. J., & D'Aunno, T. A. (2021). Leadership styles and patient outcomes: A systematic review. Health Care Management Review, 46(1), 34–42. https://journals.aom.org/doi/abs/10.5465/078559813

Holmes, D. (2020). Social theory for health and nursing practice: Socio-cultural perspectives. SAGE Publications.

Kyamanywa, P., & Redding, P. (2021). What are the key leadership competencies required by medical school deans in Uganda? A qualitative cross-sectional study. African Health Sciences, 21(4), 1950–1959. https://doi.org/10.1037/0021-9010.90.6.1185

Martins, A. M. R. C. (2019). Allied health medical imaging and radiotherapy technologists: Studies on leadership. https://www.academia.edu/download/100395987/334530253.pdf

Mojar, A. K. S., & Depositario, D. P. T. (2020). An exploratory study on the managerial competencies of first-line managers in a Philippine university. Journal of Economics, Management & Agricultural Development, 6(2), 15–26. https://www.ukdr.uplb.edu.ph/jemad/vol1/iss1/3/

Papadopoulos, I., Shea, S., Taylor, G., Pezzella, A., & Foley, L. (2016). Developing tools to promote culturally competent compassion, courage, and intercultural communication in healthcare. Journal of Compassionate Health Care, 3, Article 2. https://doi.org/10.1186/s40639-016-0019-6

Shrivastava, S., Martinez, J., Coletti, D. J., & Fornari, A. (2022). Interprofessional leadership development: Role of emotional intelligence and communication skills training. MedEdPORTAL, 18, 11247. https://doi.org/10.15766/mep_2374-8265.11247

Sison, M., & Rodelas, D. (2024). Management skills, emotional competence and leadership skills of chief radiologic technologists. Journal of Medical Imaging and Radiation Sciences, 55(2), 101601. https://doi.org/10.1016/j.jmir.2024.101601

Smith, J. Q., Jones, M. R., & Brown, C. D. (2020). Advancing managerial evolution and resource management in contemporary business landscapes. Journal of Management Studies, 58, 1–25. https://www.scirp.org/reference/referencespapers?referenceid=3581547

Spanos, S., Leask, E., & Patel, R. (2024). Healthcare leaders navigating complexity: A scoping review of key trends in future roles and competencies. BMC Medical Education, 24, 720. https://doi.org/10.1186/s12909-024-05689-4

Treglown, L., Cuppello, S., Darby, J., Bendriem, S., Mackintosh, S., Ballaigues, M., MacRae, I., & Furnham, A. (2020). What makes a leader? An investigation into the relationship between leader emergence and effectiveness. Psychology, 11(9), 1295–1310. https://www.scirp.org/reference/referencespapers?referenceid=2833474&utm_source

Watts, S., & Stenner, P. (2021). Doing Q methodological research: Theory, method and interpretation (2nd ed.). SAGE Publications. https://www.torrossa.com/gs/resourceProxy?an=4913515&publisher=FZ7200

Wong, J. (2020). Exploring the role of demographics, career development and organizational support to the managerial competence of SUC department heads in MIMAROPA Region Philippines. International Journal of Economics, Commerce and Management, 8(8). https://ssrn.com/abstract=4259737

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