

**Submission on behalf of the
Australian and New Zealand Society
of Nuclear Medicine
(ANZSNM)**

**Draft Supervised Practice Registration
Standard of the Medical Radiation Practice
Board of Australia (MRPBA)**



Introduction:

The ANZSNM is the national professional organization representing professionals from all disciplines involved in the field of Nuclear Medicine. It is the current professional body for Nuclear Medicine Technologists/Scientists in Australia, with approximately 80% of working practitioners being members, and these form the ANZSNMT.

For over 20 years, the ANZSNM has provided a supervised practice program for practitioners prior to being granted full accreditation as a Nuclear Medicine Technologist/Scientist. With the transition to a National Board, the ANZSNM and ANZSNMT recognize the need for greater transparency and the issues outlined in the draft standard. Although our preferred option is for things to remain "As is", we understand this may not be possible. With this in mind, the ANZSNM would be happy to work with the MRPBA to develop guidelines for supervised practice that meet the requirements of the National Board.

Question 1:

Are the criteria identified in the scope of the application of the supervised practice standard suitable?

The ANZSNM has concerns that no minimum period of supervision is defined and that there is no definition of the minimum competencies (or scope of practice) required in order to obtain full registration for each of the professions covered by this document.

There is also a need for clear guidelines to be provided for supervisors detailing pathways for dealing with issues encountered during the supervised practice period.

We also feel that the "Supervised Practice Registration Standard" MUST apply to all graduates including 4-year program and Graduate Entry Masters graduates, as they will still need a period of supervised practice.

Question 2:

Are there other practitioner types that should be included for the purpose of undertaking supervised practice?

We strongly feel that all Australian university graduates wishing to obtain registration as Nuclear Medicine Technologists MUST complete a period of supervised practice. This includes graduates for 4-year programs and Graduate Entry Masters Programs, as well as the traditional 3-year programs.

Question 3:

Are the requirements of the supervised registration standard suitable?

The requirements of the standard are suitable provided that 4-year program and Graduate Entry Masters graduates are included as we feel that they will still need a period of supervised practice.

Question 4:

Should there be a specified minimum amount of supervised practice, in addition to clinical training undertaken within a program of study, for practitioners to be eligible for general registration?

The ANZSNM believe that there should be a minimum amount of supervised practice required. It is our suggestion that the minimum period be defined as 6 months, and that a maximum period of 12 months be defined. We feel that the time required will be dependent on the types of studies exposed to during the trainee year, including Hot Laboratory experience and Therapeutic studies.

Question 5:

Are there other requirements that should be included in the supervised practice registration standard?

The ANZSNM believe that a minimum period of supervised practice is required within the standard and should be completed before being eligible for full registration. We believe that reference should be made to a defined scope of practice (or competency based standards) for each profession that has been developed in conjunction with the professional associations, current clinical practitioners and the universities.

Minimum requirements for a practice to obtain approval from the board for training of Nuclear Medicine Technologist trainees should be clearly defined.

Additionally, we feel that guidelines need to be available for principal supervising practitioners to outline procedures for dealing with difficult trainees, those who may not complete the program or are considered unsafe to practice.

Continuing Professional Development requirements for those undergoing supervised practice needs to be clarified. Do they need to complete additional activities, or does supervised practice constitute sufficient investment in professional development for that period?

Question 6:

What mechanisms should the National Board use to determine if practitioners have satisfactorily completed a program of supervised practice? For example demonstration of competence or amount of clinical experience.

Each profession will require a scope of practice document. This document can then be used as a guide to determine the minimum competencies or skills required for that of an entry-level practitioner in each of the professions. We believe that a comprehensive competency based assessment will work but that it must include minimum requirements. These might include such tasks as “Performed a bone scan independently (with minimum supervision) on 10 occasions” or “Observed/participated in I-131 Therapy on 4 occasions” etc. We do not believe that a time frame alone is sufficient if all aspects of the scope of practice or competency based assessments are not met.

Additionally, there must be a matching guideline for supervisors’ that clearly outlines the definition of competence for each skill set.

Question 7:

Should the standard specify elements of a program of supervised practice, such as content, time or any other requisite considered necessary?

The standard must define or specify elements of the program as previously outlined. We believe that this is required to ensure that all trainees obtain the same minimum level of competence and training during this very important period of supervised practice.

It will also ensure that all supervising practitioners are aware of the requirements needed for a practitioner to obtain full general registration, and the ability to create induction programs within their own practice that comply with the board requirements.

Question 8:

Are the definitions contained in the standard appropriate?

We feel that there is a need for a clear definition of competence to be established as part of the standard. Additionally, the 4-year program and Graduate Entry Masters programs need to be included.

The definition of an Approved Practice needs clarification. The use of DIAS or NATA accreditation as a method of approving practices does not ensure that they will provide the supervised practitioner with the minimum competencies required to obtain full general registration. Criteria such as the number and variety of studies performed, equipment and facilities, and number of staff should all be taken into consideration.

Question 9:
Is the exemption clause necessary and appropriate?

The exemption clause appears vague in its intent. The ANZSNM would like a clear explanation of what the National Board defines as requirements that may be in the public interest. We feel that there is currently too much room in the clause for interpretation. It is important that clinical practitioners can be assured that applicants obtaining full general registration through a Board granted exemption are safe for practice.

Question 10:
What is the likely impact of this proposal on individual registrants?

The National Board need to take into account those trainees that will be part way through a supervised practice/professional development program at the time that the standard comes into effect. There must be clear guidelines to ensure that these candidates understand the process required to obtain full general registration.

Question 11:
Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if this registration standard is approved?

There are none that we are aware of.

Question 12:
Is November 1 2013 a suitable date for implementation, should the registration be approved by Ministerial Council?

November 1 2013 is a suitable date, as it will accommodate those graduating from university in 2013.

Question 13:
Are there implementation issues that the National Board should be aware of?

There will need to be effective communication with the workplaces, the universities and the graduates. This will need to be clear, concise and readily available to ensure that there is a smooth transition of the program.