

January 8, 2012.  
Medical Radiation Practice Board of Australia  
Australian Health Practitioner Regulation Agency

To Whom It May Concern,

**Re: November 2011 Registration Standards**

I am writing in response to the Consultation Document (*Proposed Registration Standards. 1. Supervised Practice Standard*) released for public comment by the Medical Radiation Practice Board of Australia on November 21, 2011.

Western Australia does not have an accredited course for training of Nuclear Medicine Technologists (NMTs) and are reliant on attracting and retaining NMTs from interstate and overseas to staff departments.

There is a nation wide shortage of qualified NMTs and as a result the vast majority of recent appointments to the public sector in WA have been either NMTs in their Professional Development Year (PDY), or those NMTs who have recently completed their PDY in the hiring department. The consequence of this is that any change in the PDY programme has a magnified effect in WA.

For many years, departments have had to be accredited by the Australian and New Zealand Society of Nuclear Medicine (ANZSNM) to train PDY graduates and this has worked well and without serious incident.

Recently the Medical Radiation Technologists Registration Board in WA (MRTRBWA) has made changes to the supervisory requirements of PDY Medical Imaging Technologists (MITs), determining that all of the professions (Radiography, Radiation Therapists and NMTs) should adhere to the NPDP guidelines for supervision of PDY MITs, requiring them to be directly supervised at all times in the first 24 weeks of their PDY.

This is diametrically opposed to best practice clinical training and the ANZSNM's guidelines where: "The requirement for supervision does not imply that direct observation is essential at all times. The level of supervision will be left to the discretion of the workplace supervisor. As the graduate develops competency in the different facets of Nuclear Medicine the level of supervision can be adjusted accordingly."

Nuclear Medicine Departments are typically smaller than their Radiography counterparts, so any demand on FTE is accentuated. Where it may be possible for a Radiography practice with 40FTE dedicated to imaging to spare 1FTE to directly supervise a PDY graduate, a Nuclear Medicine practice with 3.2 FTE dedicated to imaging will find the same requirement will adversely affect services or greatly increase costs without benefit to patients.

One size does not fit all. Supervisory requirements for new graduates should be directly related to the risk to the patient from procedures which include the use of radioactive agents. These risks in Nuclear Medicine are relatively small compared to the other professions covered by the board.

Each profession has its own training and accreditation requirements. These are best left to the respective professional bodies that have spent many years in close consultation with their members and patient groups to achieve the best balance

between achieving the highest quality care and safety for our patients whilst meeting staffing demand and therefore access to services.

I strongly recommend the Medical Radiation Practice Board of Australia continue to allow the ANZSNM to advise their profession on the best way to train new graduates, a practice which has served the profession and patients well for many years.

Yours sincerely

Shayne White  
Chief NMT