



December 21, 2011.

Medical Radiation Practice Board of Australia Australian Health Practitioner Regulation Agency

medicalradiationconsultation@ahpra.gov.au

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.

I am a nuclear medicine physician practising in the public sector in Western Australia, and also have an administrative role in the delivery of medical imaging services throughout the public sector in this state.

1. Nuclear Medicine Technologist Shortage in WA:

Western Australia does not have an undergraduate training program for nuclear medicine technologists (NMTs) and is wholly reliant on 'importing' NMTs from other states in Australia, or from overseas. There are chronic workforce shortages of NMTs in this state as a result, which significantly affect service delivery and patient care.

The vast majority of NMTs recruited by the public sector in WA are recent graduates of university programs elsewhere in the country, or overseas-qualified NMTs, who perform a supervised year of practice (PDY) in WA public hospitals. I am informed that 15 of the last 16 NMTs recruited to the public sector in this state have been PDY graduates.

2. The Professional Development Year for NMTs in Western Australia

The ANZSNM is the professional body that represents NMTs in this country. A recently commissioned review undertaken by experts from the Education for Practice Institute at Charles Sturt University on behalf of the ANZSNM noted that Australia is unique among western countries in requiring a period of supervised practice for medical radiation science graduates. The same review, however, noted that more than 90% of Australian NMTs believed their period of supervised practice had been valuable and the authors of the review argued for retention of a 12-month (48-week) postgraduate period of supervised practice prior to achieving full accreditation for independent practice.

Executive Director - Imaging West

Colonial House
10 Murray Street, Perth WA 6000, AUSTRALIA
Box X2213 GPO Perth WA 6847, AUSTRALIA
Telephone +61 8 9224 3615 Fax +61 8 9224 1797
Email: imagingwest@health.wa.gov.au
http://www.health.wa.gov.au

The ANZSNM's PDY Guidelines for Mentors state:

"It is expected that a graduate practitioner in the first post-graduate year will require the guidance of more experienced technologists and should therefore not be placed in sole practitioner situations or work unsupervised. Overtime and on-call experience must be supervised."

"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."

In some hospital departments, the room layout makes it impossible for PDY technologists to be directly observed at all times by a registered technologist. Following an initial period of assessment to determine the graduate's general level of competency, the registered technologist in such departments will typically review each case with the PDY technologist, check the radiopharmaceutical dose and camera set-up, and then be in the next room and available at all times during the conduct of the procedure. There is no evidence that such an arrangement has detracted from the PDY graduate's experience or that patient safety has been jeopardised.

Furthermore, PDY technologists in WA have previously been permitted to undertake afterhours work after 6-months of supervised training, but have been able to call on advice and/or direct assistance at all times from a registered technologist. This practice of remote supervision following demonstration of PDY competence is now prohibited in WA and I have personal knowledge that the increased after-hours rostering required of registered technologists as a result has become a factor in technologist staff resignations from teaching hospital nuclear medicine departments.

In the above sense, the PDY for NMTs is very similar to the internship required of medical graduates prior to granting of full registration. There is no requirement that doctors be directly observed at all times during their intern year.

3. The Australian Institute of Radiography NPDP Guidelines:

The AIR is the professional body that represents radiographers and radiation therapists in this country. Such professionals are accredited by the AIR following completion of the 12-month National Professional Development Program (NPDP) in an approved centre. The NPDP Guide states that:

"NPDP graduates must receive direct supervision for the first 24 weeks (full-time equivalent) of the NPDP

• Direct supervision requires that one medical imaging or radiation therapy professional who possesses accreditation from the AIR is physically immediately present supervising the graduate's practice.

While the supervisor should be physically immediately present, as the NPDP Graduate's capability increases it is expected that this supervision may change from the supervisor directly observing the NPDP Graduate, to the supervisor actively monitoring the Graduate's performance and needs from an adjacent location."

I understand that the NPDP Guidelines may be subject to future review in areas where there have been unintended consequences for the employment of NPDP graduates, such as in rural Australia.

4. Policy of the Medical Radiation Technologists Registration Board of WA:

The MRTRBWA is the body responsible for registration of Medical Radiation Technologists in WA and currently reports to the WA Minister for Health. On July 1, 2012, I believe its powers will be transferred to the MRPBA.

The MRTRBWA policy regarding NPDP/PDY graduates is that, during the first 24 week period, the graduate practitioner must work under the "direct supervision" of a registered MRT. Although the wording is the same as in the NPDP Guidelines, I am informed that the requirement in WA is for a registered technologist to be in the same room as the supervised graduate at all times. This requirement appears to be at variance with the guidelines of both the ANZSNM and the AIR, in which close supervision of the supervised graduate is permitted from an adjacent room.

In the second 24-week period, the MRTRBWA policy for NPDP/PDY graduates is that the graduate practitioner may work independently, as long as both of the following conditions are met:

- They have been evaluated by their supervisor as being 'competent' in the procedure they are to perform and a 24 week progress report has been completed and sent to the Board.
- They have immediate "access to supervision" if needed. Access to supervision means that a registered MRT is physically present on site with the graduate practitioner. At no time is remote supervision permitted for graduate practitioners. Remote supervision is defined as supervision where the registered MRT is physically not on site with the graduate practitioner. Supervision over the telephone where the registered MRT is not physically on site is unacceptable and in breach of the MRTRBWA's supervision requirements.

This policy condition has disallowed the previous practice of remote supervision of on-call NMTs during the second half of their PDY.

5. Effect on Recruitment of NMTs to Western Australia

I am concerned that the MRTRBWA's policies will have a significant adverse effect on the recruitment of PDY technologists to this state. Such technologists may become effectively supernumerary for the first 6 months of their PDY and will impose a cost on employers that many will be unable, or choose not, to bear. This, in turn, will have potentially serious consequences for the delivery of nuclear medicine services to patients in this state in the future.

With respect to the MRPBA's consultation process, I believe the above issues fall under Clauses 1(ii) and 4.f of the MRPBA's Requirements in the Consultation Document (p6) and could also be addressed under Clause 1 of the Exemptions (also p6).

My own view is that the longstanding system of accreditation of NMTs by the ANZSNM has worked well in this country and that the supervision requirements of the ANZSNM and AIR are broadly similar.

I submit that the Supervised Practice Registration Standards, when adopted by the MRPBA, should require:

- a. Supervision of the PDY technologist by on-site registered technologists at all times during the first 24 weeks of supervised practice. In line with the ANZSNM PDY and AIR NPDP guidelines, this supervision may be from an adjacent room if the supervising technologist believes the PDY technologist is sufficiently competent.
- b. During the second 24-week period of supervised practice, supervision must continue at all times, but remote supervision of PDY technologists after-hours be permitted if the supervising technologist is satisfied as to their competence, with or without prior approval of the MRPBA.

Thank you for considering the above.

Yours faithfully,

William Macdonald, Executive Director, Imaging West

cc Dr ST Lee, President, ANZSNM, PO Box 7108, Upper Ferntree Gully VIC 3156 Mr D Collier, Chief Executive, AIR, PO Box 16234, Collins Street West VIC 3066 Ms K Firth, Registrar, MRTRBWA, PO Box 9958, Perth WA 6001 Mr K Snowball, Director General of Health, Government of Western Australia