Comments on the Proposed Mandatory Registration Standards, of the Medical Radiation Practice Board of Australia.

07 October 2011

Continuing Professional Development.

Sole Radiographers, have in addition to their workload, additional duties like accreditation and Medicare compliances, which are more easily managed in bigger centres where there is several staff. They are also required to provide advice, support and on going training to X-ray Operators in their districts, while maintaining an Imaging workload in their own department, therefore leaving them with minimal time for CPD purposes.

The health service district in Central West Queensland has one radiographer to provide services to 11 X-Ray Operator sites and 26 X-Ray Operators, which involves travelling one day most weeks of the year over large distances.

It is impossible to find time at work to do any effective CPD. Most is done in own time while still on call.

I believe that the role of a sole radiographer needs special consideration when setting any CPD requirements.

CPD hours I see could be a problem for Sole Radiographers, call ins and continually on call means these professionals spend a far greater time at work and still need to find time for CPD. It’s not like other professions where you can cancel patient bookings and make time available. At 20 hours per year this may be too much. I would suggest CPD points may be better for Sole Radiographers as time for them is a problem.

Duties that a Sole radiographer does in their hours could also be considered for CPD, like the hours spent in training and assistance to X-Ray Operators.

Criminal History Check.

I have some concern about alleged offences and pending charges being part of the criminal check. As I wouldn’t expect these to be part of a person’s criminal history as nothing would have been submitted to a court of law where it could be proven or disproven.

Recency of practice.

I disagree with the requirements for re entry into the work force, for those professionals who have been absent from the work force for a period of time. The best way for any professional to update there skills is for assistance back into the work force by hands on in a working environment.
I see prior CPD and a plan for professional development as a barrier to highly qualified and experienced professionals with a wealth of knowledge re entering the work force.

With mandatory CPD this should already be in place at the work site. Why the need for a plan?

My suggestion applicants previously registered that the period should be 6 years. No prior CPD, provisional registration and a course on re entry devised in conjunction with the district tutor (alternatively tutors and the Australian Institute of Radiography devise a flexible national standard). This would mean a consistent programme for return to work throughout the profession. It would not need to be longer than 12 months equivalent CPD hours (20 hrs), but be a constructive form for return to the work place (e.g. how to effectively use the equipment in the work place and refresher on imaging techniques and image interpretation). When completed full registration to apply.

Grand Parenting

There appears to me to be a difference in recent practice for registration purposes between recency of practice and grand parenting.

Under requirements section (b) for overseas qualifications, the board appears to have inadvertently missed recognising a New Zealand qualification. The National Diploma in Medical Diagnostic Imaging issued by the New Zealand Conjoint Board (Inc), does not appear to be listed in schedule one.

Thanking you for the opportunity to comment on the proposed registration standards.

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