

To: The Medical Radiation Practice Board of Australia

The following is a response by the Radiation Therapy Managers of the following Victorian health services to aspects of the proposed registration standards for Supervised Practice.

Peter MacCallum Cancer Centre
Alfred Health
Austin Health
ROV - GenesisCare

The need for appropriate and suitable supervised clinical practice experience before a practitioner is registered to practice is acknowledged and agreed. The skills and knowledge gained during periods of supervised practice we believe are an essential part of an entry level practitioner's education and training.

Based on our experience with radiation therapy students from both the three year undergraduate degree course and full time graduate entry courses offered by the RMIT University and Monash University respectively, we believe that appropriate supervised clinical practice can be undertaken in various ways that equally equip the entry level practitioner with the skills and knowledge required for registration to practice.

For undergraduate degree students 48 weeks of supervised practice following completion of the degree course is a tried and tested component of their education and training. Accordingly we would support continuation of that requirement for graduates of a three year undergraduate degree course.

In the case of graduate entry level courses such as the Monash University course, a viable alternative approach has been to provide the supervised clinical practice as part of the program in parallel with the coursework. Our experience supports the view that this approach provides and equips the entry level practitioner with the necessary skills and knowledge equal to those undertaking supervised practice after the completion of undergraduate training. We have observed no significant differences that relate to the mode of supervised practice undertaken in the competency of entry level practitioners.

It is acknowledged that graduate entry courses are very demanding of the student because of their compressed time frame and accelerated learning program. However we believe that there are benefits to clinical practice undertaken in parallel with course work studies. In so far as the student is able to apply and relate formal coursework learning to their day to day experiences of planning and treating real patients in the clinic in a supervised environment, then such clinical practice is at least as effective as clinical practice undertaken serially after the completion of formal coursework in an undergraduate program.

In both instances of supervised practice, ie undertaken serially or in parallel with formal studies, assessment of practitioner competency should be undertaken in much the same manner and for all intents and purposes this is the case currently. We do not believe this should change and regardless of the approach taken to supervised practice, entry level practitioners need to be equally competent.

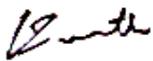
A simple remedy to enable the Supervised Practice Registration Standard to acknowledge and accommodate supervised practice undertaken in parallel with coursework would be to re-word Requirements clause 1.i. to read:

"supervised practice may only be undertaken on completion of a course approved by the Board or as an integral component of a course approved by the Board"

The Monash University post graduate program has been offered since July 2003 and our health services have been continually involved with students of this program. The views expressed here are based on our experience and knowledge of this program, its demonstrated effectiveness and the competency of its graduates. Flexible approaches to supervised practice address that aspect of feedback the Board is seeking dealing with "alternative structures of supervised practice".

For and on behalf of:

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(Leigh Smith)