Your National Scheme:

For safer healthcare

Medical Radiation Practice Board of Australia



At a glance: Medical radiation practice in 2016/17



3,895 registered medical radiation students, up **13%** from last year



15,683 medical radiation practitioners, up **2.5%** from 2015/16

That's **2.3%** of the total health practitioner registrant base



23 notifications lodged with AHPRA about medical radiation practitioners

0.3% of medical radiation practitioners had notifications lodged about them



Male: 32%

Female: 68%



88 medical radiation practitioners were being actively monitored for compliance with restrictions on their registration¹



29 notifications closed this year

17.2% resulted in accepting an undertaking or conditions being imposed on a medical radiation practitioner's registration

20.7% resulted in a medical radiation practitioner receiving a caution or reprimand by the Board

None resulted in suspension or cancellation of registration

58.6% resulted in no further action being taken

4 statutory offence complaints were made;

9 were closed

One new matter related to alleged advertising breaches; three related to title protection



Immediate action was taken **twice** against medical radiation practitioners²

6 mandatory notifications were lodged with AHPRA (four about standards, one about impairment, and one about alcohol or drugs)

² İmmediate action is an interim step the Board can take to suspend or cancel a medical radiation practitioner's registration while a complaint is being considered. Refer to the 2016/17 annual report by the Australian Health Practitioner Regulation Agency (AHPRA) for more data on immediate action.



¹ Data as at 30 June 2017. See page 17 for data about monitoring cases relating to compliance with restrictions on registration for medical radiation practitioners.

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Message from the Chair, Medical Radiation Practice Board of Australia

This report summarises data relating to the medical radiation profession in Australia, which have been drawn from the Australian Health Practitioner Regulation Agency (AHPRA) and the National Boards' 2016/17 annual report. It offers a unique insight into the regulatory landscape.

One of the important elements for a National Board is implementing an appropriate response when an issue is identified. In some circumstances, acting immediately is appropriate to ensure that the public is protected. In other circumstances, the Board needs to work to understand an issue and consider what is the minimal, yet most effective, response to take in order to initiate change.

In December 2015, the Board developed a plan of regulatory priorities to manage a number of issues by providing information to the profession in order to improve the knowledge and understanding of the public, practitioners, employers and a range of stakeholders.

In June 2017, the Board published information in its newsletter about the importance of handwashing. Another example is the information the Board published on radiation safety in paediatric imaging. Publishing this type of information acts as a reminder for practitioners while appropriately managing the regulatory risk.

By sharing information, the Board can give practitioners the knowledge they need to provide safe healthcare and meet their obligations under the National Law.



Mr Mark Marcenko

Chair of the Medical Radiation Practice Board of Australia

The Medical Radiation Practice Board of Australia

Members of the Board in 2016/17:

Mr Mark Marcenko (Chair)

Mr Richard Bialkowski (from 21 November 2016)

Ms Mary Edwards

Ms Marcia Fleet

Mr Christopher Hicks

Mr Neil Hicks (until 21 November 2016)

Ms Robyn Hopcroft

Mr Brendan McKernan

Ms Cara Miller

Professor Stephan Millett

Mr Travis Pearson

Ms Tracy Vitucci

Mr Roger Weckert

Committees

The following national committees support the Medical Radiation Practice Board of Australia:

- ► Immediate Action Committee
- ► National Examination Committee
- Overseas Qualifications Assessment Committee
- ► Registration and Notifications Committee
- ► Strategy and Policy Committee.

Executive and policy support



Mr Adam Reinhard

Executive Officer, medical radiation practice

Mr Reinhard supports the Medical Radiation Practice Board of Australia. He works in AHPRA's National Office in Melbourne.

Executive Officers provide a vital link between the National Boards and AHPRA.

About us

The Medical Radiation Practice Board of Australia (the Board) has worked in partnership with AHPRA to protect the public since the profession joined the National Registration and Accreditation Scheme (the National Scheme) in 2012. Together, we regulate the profession by ensuring that only those medical radiation practitioners who are suitably trained and qualified can practise in Australia.

Protecting the public by ensuring access to a safe, competent and qualified healthcare workforce is always our priority. Every decision we make is guided by the Health Practitioner Regulation National Law (the National Law), as in force in each state and territory, and by the regulatory principles (see right).

Visit the Board's website at www.medicalradiationpracticeboard.gov.au.

For more information about the National Scheme and AHPRA, visit www.ahpra.gov.au/About-AHPRA.

About this report

This annual report summary provides a profession-specific view of AHPRA and the Board's work to manage risk to the public in 2016/17. Information provided in this report is drawn from data published in the 2016/17 annual report published by AHPRA and the National Boards. All data are correct as at 30 June 2017.

Whenever possible, historical data are provided to show trends over time.

Please see page 11 for information about our data.

Profession-specific summaries for all 14 National Boards in the National Scheme are available to download from www.ahpra.gov.au/annual report/2017.

Annual report summaries that segment the registrant base by state and territory are also published online.

Our regulatory principles

Eight <u>regulatory principles</u> underpin our work, and guide our decision-making in the public interest. These principles foster a responsive, risk-based approach to regulation. In brief, they are to:

Protect the public

Take timely and necessary action

Administer the National Law

Ensure registrants are qualified

Work with stakeholders

Uphold professional standards

Identify and respond to risk

Use appropriate regulatory force

For more information, download AHPRA's 2016/17 annual report from www.ahpra.gov.au/annualreport/2017



The Medical Radiation Practice Board of Australia: Year in review

A number of major initiatives were actioned by the Board in 2016/17. Here are the highlights:

Spotlight on: Scope of practice

Scope of practice across three divisions of registration has been an ongoing focus for the Board. It has developed information to help medical radiation practitioners understand the minimum requirements for practice, as well as how they might expand their scope of practice through education and clinical training.

The Professional capabilities for medical radiation practice statement identifies that a significant part of medical radiation practice is common across all three divisions. Changing technology and the blending of practice areas demonstrates the need for an adaptable and flexible skillset for registered practitioners. These changes pose fundamental questions for the Board as a profession regulator. Equally, it challenges the traditional view of practice across the three divisions of registration.

More work on scope of practice will continue in 2017/18 - see Future Works for additional information.

To keep up to date with information about scope of practice, visit the Board website.

Taking a multi-profession approach to regulation

The Board has collaborated with other health professions' National Boards and AHPRA to create greater alignment when there is a common purpose or common objective identified between professions.

Following consultation with other National Boards, the Board agreed to undertake work to establish a method of dealing with high-risk notifications that ensured consistency and delivered responsive protection of the public.

The establishment of a Multi-Profession Immediate Action Committee (MPIAC) has enabled the Board to respond more effectively when complaints of a serious nature are raised about a practitioner. To support good decision-making, AHPRA has developed a specialist team that focuses on delivering consistent and timely advice that enables the Committee to exercise its functions effectively and efficiently.

Approved registration standards, codes and guidelines

Registration standards, codes and guidelines are developed by the Board after public consultation in accordance with the National Law and AHPRA's Procedures for the development of registration standards, codes and guidelines.

On 1 December 2016, the Board published *Guidelines:* Recency of practice, and on 1 July 2016, the Board published *Guidelines:* Professional Indemnity Insurance arrangements.

For more information about codes and guidelines for medical radiation practice, go to www.medicalradiationpracticeboard.gov.au/Codes-Guidelines/ Codes-and-Guidelines.

Stakeholder relations

Members of the Board attended a number of professional association conferences, maintaining a booth and engaging with practitioners.

Board members also attended a health regulation conference during the year, and met with a number of national and international regulators associated with medical radiation practice.

The Board developed material that supports Australia's celebration of World Radiographer Day, which is an internationally recognised day that aims to build greater awareness of the value medical radiation practitioners contribute to safe patient care.

Future works

The main focus of 2017/18 will be the review of the *Professional capabilities for medical radiation practice*. Since inception, the Board has monitored the operation of the professional capabilities and the outcomes it has produced.

The Board has been working closely with the New Zealand Medical Radiation Technologists Board to create greater alignment of regulatory arrangements. Part of the review of capabilities will consider the breadth of practice for medical radiation practitioners. It will also look at obstacles to expanding scope of practice, particularly across divisions of registration.

The Board has also commissioned work on a review of accreditation standards due for completion in 2017/18.

Communication and engagement

The Board takes a proactive approach to communicating with the profession and other stakeholders. In 2016/17, it published four newsletters, which included a number of practitioner profiles that looked at important issues in the profession, such as supervision, minimum capabilities and scope of practice.

A webinar for graduating students was held by the Board, which focused on requirements for professional practice and the registration process.

The Board also created infographics for <u>Continuing</u> <u>professional development</u> and <u>Recency of practice</u>.

Continuing Professional Development



Plan and record your activities

- Most CPD should be practice-related activities
- Some CPD can be general healthcare-related activities
- Reflect on and write down what you have learnt

Recency Of Practice



(minimum for each division registered)

Not practised for more than 3 years?

When returning to practice, the Board may ask you to:

- → sit an examination
- → undertake supervised practice
- → complete an approved course or program, and/or
- → meet any other requirements to ensure safe practice.

Going to take extended leave from practice?

To prepare for your return to practice in the future:

- monitor any changes to professional practice standards
- → participate in professional development activities, and/or
- yundertake formal training or study.

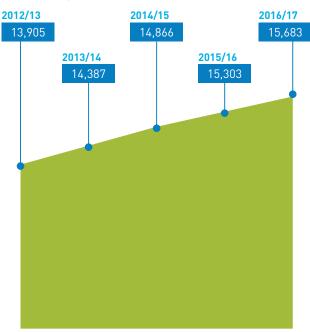
Recent practice supports good practice

Registering the medical radiation workforce in 2016/17

In brief: Registration of medical radiation practitioners

- ▶ 15,683 registered medical radiation practitioners in 2016/17; up from 15,303 in 2015/16.
- Medical radiation practitioners comprise 2.3% of the total registrant base.
- > 3,895 registered medical radiation students; up 13% from the previous year.
- ▶ 0.4% of the profession identified as being Aboriginal and/or Torres Strait Islander in a workforce survey conducted at the time of renewal of registration (60 medical radiation practitioners nationally).
- ▶ Women comprised 68% of the profession.

Figure 1: Registration numbers for medical radiation practitioners, year by year, since the profession joined the National Scheme



Under the National Law, as in force in each state and territory, there is a range of categories under which a practitioner can be registered as a medical radiation practitioner in Australia:

- ▶ General registration
- ► Limited registration
- ► Provisional registration
- ► Non-practising registration, and
- Student registration (students undertaking an approved program of study).

The Board has three divisions of practice, and registered practitioners must be qualified in at least one of the following divisions:

- ► Diagnostic radiography
- ► Radiation therapy, or
- ► Nuclear medicine technology.

Before a practitioner can practise and use a title protected under the National Law, applicants must provide evidence that they are eligible to hold registration, and registration must be granted.

Find out more about registration with the Medical Radiation Practice Board of Australia at www.medicalradiationpracticeboard.gov.au/ Registration.

Registration in 2016/17

As at 30 June 2017, there were 15,683 medical radiation practitioners registered under the National Scheme. This represents a 2.5% increase from 2015/16. Almost all jurisdictions saw an increase in registrant numbers, with New South Wales (NSW), Victoria and Queensland being the principal place of practice for over 78% of all registered medical radiation practitioners. See Table 2 for a breakdown of registrants by division.

Of the 678,938 registered health practitioners across the 14 professions, 2.3% were medical radiation practitioners.

Of the medical radiation registrant base, 98.5% held some form of practising registration. There was a small increase of 0.4% from the previous year in the number of medical radiation practitioners moving to non-practising registration.

Tables 1–5 show data relating to the registration of medical radiation practitioners in 2016/17.

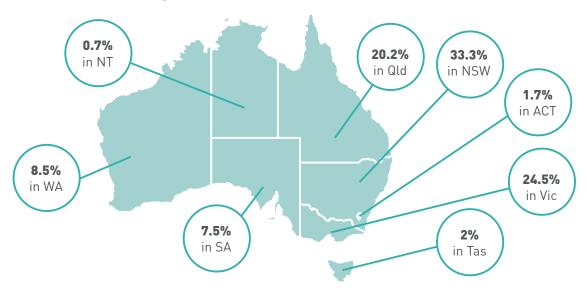
Applications for registration

AHPRA received 1,596 applications for registration as a medical radiation practitioner in 2016/17. In partnership with AHPRA, the Board considers every application for registration carefully and assesses it against the requirements for registration, including English-language proficiency and checking whether the applicant has a criminal history.

Only those medical radiation practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered. Where appropriate to protect the public, and in accordance with the <u>regulatory principles</u> of the National Scheme, the Board may decide to impose conditions on a practitioner's registration or to refuse an application.

Of the 1,590 applications finalised, 2.5% resulted in conditions being imposed on registration or the refusal of registration, in order to protect the public.

Figure 2: Percentage of medical radiation practitioners with a principal place of practice in each state and territory¹



Renewals

Once on the Register of practitioners (see box to right), medical radiation practitioners must apply to renew their registration(s) each year and make declarations on the relevant registration requirements. As with new applications for registration, the Board may impose conditions on registration or refuse renewal.

A total of 14,245 medical radiation practitioners renewed their registration in 2016/17, with the proportion of practitioners renewing online remaining consistent with the previous year at 98.4%.

Practitioner audits

AHPRA conducts regular audits of random samples of health practitioners across all professions on behalf of the National Boards. Audits provide assurance that practitioners are meeting the registration requirements for their profession. During an audit, a practitioner is required to provide evidence in support of the declarations they made in their previous year's registration renewal application.

In 2016/17, AHPRA audited 6,314 practitioners across all 14 regulated health professions. For all audits initiated and completed this year, 97.7% of medical radiation practitioners were found to be in compliance with the registration standards being audited.

See AHPRA's <u>2016/17 annual report</u> for more information about the audit process.

Figure 3: Audit outcomes for the medical radiation profession in 2016/17



- **97.7% Compliant**: fully compliant with the registration standards
- **0.6% Non-compliant**: non-compliant with one or more standard
- 1.7% No audit action required: practitioners who changed registration type to non-practising or surrendered their registration after being advised that they were subject to audit

The Register of practitioners

According to the National Law, AHPRA is required to maintain and publish a publicly accessible *Register of practitioners* (*Register*) so that information about the registration of any health practitioner is easy to find.

The online <u>Register</u> has accurate, up-to-date information about the registration status of all registered health practitioners in Australia. When decisions are made in relation to a practitioner's registration/renewal or disciplinary proceedings, the <u>Register</u> is updated to inform the public about the current status of individual health practitioners and any restrictions placed on their practice.

Tribunal decisions that result in the cancellation of a practitioner's registration due to health, performance or conduct issues result in the individual appearing on a <u>Register of cancelled practitioners</u>.

¹ Medical radiation practitioners with no principal place of practice (includes overseas registrants): 1.7% of total practitioners or 262 registrants.

Table 1: Registrant numbers as at 30 June 2017

Registrants	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ¹	Total
2016/17 total registered medical radiation practitioners	261	5,217	107	3,167	1,178	312	3,844	1,335	262	15,683
2015/16 total registered medical radiation practitioners	264	5,089	112	3,061	1,161	311	3,740	1,325	240	15,303
% change from 2015/16	-1.1%	2.5%	-4.5%	3.5%	1.5%	0.3%	2.8%	0.8%	9.2%	2.5%
All registered health practitioners in 2016/17	11,845	196,605	7,083	133,103	53,823	14,522	175,354	69,012	17,591	678,938

Table 2: Medical radiation practitioners, by division and state or territory

Division	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ¹	Total 2016/17	Total 2015/16
Diagnostic radiographer	179	3,991	93	2,480	949	235	2,897	1,091	202	12,117	11,840
Diagnostic radiographer and nuclear medicine technologist	0	2	0	10	1	1	1	1	1	17	14
Diagnostic radiographer and radiation therapist	0	0	0	1	0	0	1	0	0	2	2
Nuclear medicine technologist	23	441	2	162	78	16	338	67	18	1,145	1,095
Radiation therapist	59	783	12	514	150	60	607	176	41	2,402	2,352
Total 2016/17	261	5,217	107	3,167	1,178	312	3,844	1,335	262	15,683	
Total 2015/16	264	5,089	112	3,061	1,161	311	3,740	1,325	240		15,303

Table 3: Registered medical radiation practitioners by age

Medical radiation practitioners	U-25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+	Total
2016/17	1,135	3,037	2,880	2,157	1,658	1,397	1,088	1,078	839	336	61	16	1	15,683
2015/16	1,441	3,053	2,727	1,924	1,635	1,254	1,068	1,116	731	280	57	17	0	15,303

Table 4: Registered medical radiation practitioners by principal place of practice and gender

Medical radiation practitioners	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	No PPP ¹	Total 2016/17
Total 2016/17	261	5,217	107	3,167	1,178	312	3,844	1,335	262	15,683
Female	174	3,527	63	2,124	871	215	2,580	915	195	10,664
Male	87	1,690	44	1,043	307	97	1,264	420	67	5,019
Total 2015/16	264	5,089	112	3,061	1,161	311	3,740	1,325	240	15,303
Female	176	3,415	72	2,059	850	213	2,500	912	172	10,369
Male	88	1,674	40	1,002	311	98	1,240	413	68	4,934

¹ No principal place of practice (No PPP) will include practitioners with an overseas address.

Regulating the workforce: Complaints about medical radiation practitioners in 2016/17

In brief: Notifications about medical radiation practitioners

- ➤ 23 notifications (complaints or concerns) were lodged with AHPRA about medical radiation practitioners in 2016/17.
- ▶ 0.3% of the medical radiation practitioner registrant base were the subject of a notification (compared with 1.6% of all registered health practitioners).
- Immediate action was taken twice; one of these resulted in suspension of a medical radiation practitioner's registration while a notification was investigated.
- Six mandatory notifications were lodged with AHPRA about medical radiation practitioners.
- ▶ 29 notifications were closed during the year.
- ▶ 88 medical radiation practitioners were being monitored for compliance with restrictions on their registration as at 30 June 2017.
- ► Four statutory offence complaints were made about the profession most related to improper use of a protected title.

An important note about our data

AHPRA and the National Boards do not manage all complaints made about health practitioners in Australia and the data reflect this. In the pages that follow, we are reporting mainly on matters received and managed by AHPRA and the Medical Radiation Practice Board of Australia, unless otherwise stated.

The notification process is different in NSW and Queensland:

- ► In NSW, AHPRA does not manage notifications.

 They are managed by 14 professional councils (supported by the Health Professional Councils Authority, or HPCA) and the Health Care Complaints Commission (HCCC).
- ▶ In Queensland, the Office of the Health Ombudsman (OHO) receives all complaints about health practitioners and determines which of those complaints are referred to the Board/AHPRA to manage.

Wherever possible in the tables in this report, HPCA data are given in separate columns and the data have been checked by the HPCA (correct as at time of publication). Please refer to the HPCA's 2016/17 annual report on their website, as data may have been subsequently reconciled.

Queensland became a co-regulatory jurisdiction on 1 July 2014 with the commencement of the Health Ombudsman Act. The OHO receives all health complaints in Queensland, including those about registered medical radiation practitioners, and decides whether the complaint:

- ► is serious, in which case it must be retained by the OHO for investigation
- ► should be referred to AHPRA and the relevant National Board for management, or
- can be closed, or managed by way of conciliation or local resolution.

This means that we only have access to the data relating to matters referred to us by the OHO. We do not report on all complaints about registered health practitioners in Queensland.

What is a notification?

In the National Scheme, a complaint or concern about a registered health practitioner or student is called a notification. They are called notifications because AHPRA is notified of a concern or complaint about a practitioner, which AHPRA then manages in partnership with the relevant National Board. Most of the notifications received about individual medical radiation practitioners are managed through Part 8 of the National Law, which can lead to decisions that affect a practitioner's registration.

Some complaints are treated differently under the National Law, as they are considered 'statutory offences'. AHPRA and the Board can prosecute individuals who commit these offences. For information about statutory offences concerning medical radiation practitioners in 2016/17, see page 14.

Keeping the public safe is the primary focus when the Board makes decisions about notifications.

Anyone can notify AHPRA about a medical radiation practitioner's health, performance or conduct. While registered practitioners and employers have mandatory reporting obligations under the National Law, many of the complaints or concerns we receive are made voluntarily by employers and other practitioners (see Figure 6).

We can also receive notifications about students who are studying to become medical radiation practitioners. However, in 2016/17 AHPRA and the Board did not receive any notifications about students of medical radiation practice.

See <u>AHPRA's 2016/17 annual report</u> for data relating to notifications about students across all regulated health professions during the year.

For more information about the notifications process, visit the AHPRA website.

Notifications received in 2016/17

This year, AHPRA received the highest number of notifications (6,898) about health practitioners across all professions than in any single financial year since the National Scheme began: 0.3% (23) of those related to medical radiation practitioners. This is a decrease from 2015/16, when we received 36 notifications about medical radiation practitioners.

Almost 70% of all notifications relating to medical radiation practitioners received in 2016/17 were about registrants with a principal place of practice in Victoria [10] and Queensland (six).

Of the total registrant base, 0.3% of the medical radiation profession had notifications made about them during the year, consistent with the previous year.

Notifications closed in 2016/17

The Board assessed and completed 29 notifications about medical radiation practitioners in 2016/17, which is 7.4% more than in 2015/16. These closures accounted for 0.4% of all closed notifications nationally across all professions.

One-third of the notifications closed about medical radiation practitioners resulted in some form of regulatory action being taken by the Board against the practitioner.

As at 30 June 2017, there were 17 open notifications about medical radiation practitioners being managed by AHPRA and the Board.

Tables 5-11 show data about notifications in 2016/17.

Figure 4: Total notifications received by AHPRA about medical radiation practitioners, year by year, since the profession joined the National Scheme



Figure 5: How AHPRA and the Board manage notifications



Figure 6: Five most common sources of notifications lodged with AHPRA about medical radiation practitioners

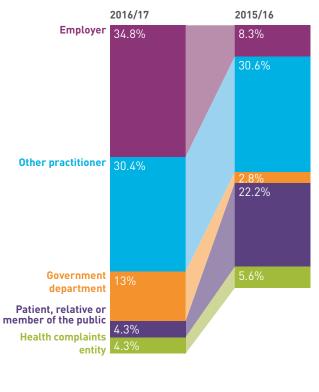
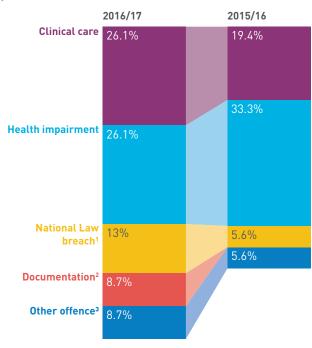


Figure 7: Five most common types of complaint lodged with AHPRA about medical radiation practitioners



Mandatory notifications

All health practitioners, their employers and education providers have mandatory reporting obligations under the National Law. This means that they must tell AHPRA if they have formed a reasonable belief that a registered medical radiation practitioner or student has behaved in a way that constitutes notifiable conduct.

Notifiable conduct by registered health practitioners is defined as:

- practising while intoxicated by alcohol or drugs
- sexual misconduct in the practice of the profession
- placing the public at risk of substantial harm because of an impairment (health issue), or
- placing the public at risk because of a significant departure from accepted professional standards.

AHPRA received 847 mandatory notifications in 2016/17. Of those, six mandatory notifications were about medical radiation practitioners. Two-thirds of those related to a significant departure from accepted professional standards.

For *Guidelines for mandatory notifications*, visit the <u>AHPRA</u> <u>website</u>.

For data about mandatory notifications lodged with AHPRA across all regulated health professions during the year, please refer to AHPRA and the National Boards' 2016/17 annual report.

Taking immediate action

Immediate action is a serious step that the Board can take when it believes it is necessary to limit a medical radiation practitioner's registration in some way to keep the public safe. It is an interim measure that a Board takes only in high-risk cases while it seeks further information.

In 2016/17, the Board took immediate action twice. One case resulted in suspension of a practitioner's registration; the other resulted in the Board accepting an undertaking that the medical radiation practitioner would not practise while the notification was being investigated, in order to protect the public.

See <u>AHPRA's annual report</u> for more information about immediate actions in 2016/17, and Table 8 in this report for immediate action cases about medical radiation practitioners by state and territory.

Tribunals, panels and appeals

Tribunals

The Board can refer a matter to a tribunal for hearing. Usually, this happens when the allegations involve the most serious of matters, such as when the Board believes a medical radiation practitioner has behaved in a way that constitutes professional misconduct.

Tribunals in each state and territory:

- Australian Capital Territory Civil and Administrative Tribunal
- ▶ New South Wales Civil and Administrative Tribunal
- ► Northern Territory Civil and Administrative Tribunal
- ▶ Queensland Civil and Administrative Tribunal
- ► South Australia Health Practitioners Tribunal
- ► Tasmania Health Practitioners Tribunal
- ► Victoria Civil and Administrative Tribunal
- ► Western Australia State Administrative Tribunal

In 2016/17, no medical radiation matters were decided by a tribunal.

Panels

The Board has the power to establish two types of panel depending on the type of notification:

- ► **Health panels**, for issues relating to a practitioner's health and performance, or
- ► Professional standard panels, for conduct and performance issues.

Under the National Law, panels must include members from the relevant health profession as well as community members. All health panels about medical radiation practitioners must include a medical radiation practitioner. Each National Board has a list of approved people who may be called upon to sit on a panel.

In 2016/17, no matters about medical radiation practitioners were decided by panel.

¹ Breach of a non-offence provision in the National Law, which could result in regulatory action but not be prosecuted through a local or Magistrate's court. For example, a breach of conditions placed on a practitioner's registration or breach of registration standards.

^{2 0%} in 2015/16.

³ An unlawful act allegedly committed by a health practitioner that isn't specifically covered by the National Law but may be subject to regulatory action under Part 8 of the National Law. For example, a breach of the Poisons Act.

Appeals

All regulatory decisions are evidence-based and guided by the regulatory principles of the National Scheme. The National Law provides a mechanism of appeal against a decision by a National Board in certain circumstances, including decisions to:

- ► refuse an application for registration or endorsement of registration, or to refuse renewal of registration or renewal of an endorsement of registration
- impose or change a condition placed on registration, or to refuse to change or remove a condition imposed on registration or an undertaking given by a registrant, or
- suspend registration or to reprimand a practitioner.

There is also a mechanism of appeal by judicial review if the appeal relates to a perceived flaw in the administrative decision-making process, as opposed to the merits of the individual decision itself.

One decision by the Board was the subject of an appeal in 2016/17.

The National Scheme's <u>regulatory principles</u> apply to all regulatory decision-making. The principles are designed to encourage a responsive, risk-based approach to regulation across all professions to ensure the public is safe. The low proportion of successful appeals that resulted in an amended/substituted decision demonstrates that the regulatory principles continue to have a positive impact on regulatory decision-making.

Please refer to <u>AHPRA's annual report</u> for data relating to appeals in 2016/17.

Compliance

On behalf of the Board, AHPRA monitors medical radiation practitioners and students who have restrictions (conditions or undertakings) placed on their registration, and those with suspended or cancelled registration. By identifying any non-compliance with restrictions and acting swiftly and appropriately, AHPRA supports the Board to manage risk to public safety.

As at 30 June 2017, there were 88 individual medical radiation practitioners being monitored¹.

Monitoring can be for one or more of the following reasons:

- ▶ suitability/eligibility to be registered to practise
- compliance with restrictions on their registration
 health, conduct, performance, and/or
- ▶ to make sure that any practitioner who was cancelled from the register did not practise.

The 88 active monitoring cases of medical radiation practitioners represent 1.7% of all monitoring cases managed by AHPRA across the 14 regulated health professions. The majority of these cases were being monitored for suitability/eligibility.

It should be noted that despite increasing volumes of notifications received by AHPRA, this has not translated into a peak in active monitoring cases for the Board. For more information on monitoring and compliance, visit the AHPRA website.

See Table 14 for active monitoring cases by stream.

Statutory offences

The National Law sets out four types of statutory offences:

- ► Unlawful use of protected titles
- ► Unlawful claims by individuals or organisations as to registration
- ▶ Performing a restricted act, and
- ► Unlawful advertising.

Breaches of the National Law that constitute a statutory offence can put individuals and the community at risk. These offences may be committed by registered health practitioners, unregistered individuals or corporate entities and are covered under Part 7 of the National Law. For more information, see the AHPRA website.

AHPRA received four new statutory offence complaints about medical radiation practitioners in 2016/17; there were eight in 2015/16. Of those received this year, three related to title protection and one was an alleged advertising breach. Statutory offence complaints about medical radiation practitioners accounted for just 0.2% of all statutory offence complaints received nationally across all professions.

This year, there was a 28.6% increase in the number of statutory offence complaints closed (nine; up from seven in 2015/16).

See Table 15 for data about statutory offences relating to medical radiation practitioners in 2016/17.

¹ A practitioner who has restrictions on their registration for more than one reason may be allocated more than one 'monitoring case'. However, for the medical radiation practice profession, each case corresponded to an individual.



Table 5: Notifications received about medical radiation practitioners in 2016/17, by state or territory

Medical radiation practitioners ¹	ACT	NSW ²	NT	QLD ³	SA	TAS	VIC	WA	No PPP ⁴	Subtotal	HPCA⁵	Total
Total 2016/17	2	0	0	6	1	0	10	4	0	23	29	52
Total 2015/16	0	0	1	11	6	0	13	4	1	36	12	48

Table 6: Notifications received, by division and state or territory (excluding HPCA)

Division	ACT	NSW ²	NT	QLD ³	SA	TAS	VIC	WA	No PPP ⁴	Total 2016/17	Total 2015/16
Diagnostic radiographer	1	0	0	4	1	0	10	3	0	19	26
Nuclear medicine technologist	0	0	0	0	0	0	0	0	0	0	2
Radiation therapist	1	0	0	2	0	0	0	1	0	4	6
Unknown practitioner ¹	0	0	0	0	0	0	0	0	0	0	2
Total 2016/17	2	0	0	6	1	0	10	4	0	23	
Total 2015/16	0	0	1	11	6	0	13	4	1		36

Table 7: Percentage of the profession with notifications received, by state or territory

Registrants	ACT	NSW (including HPCA complaints)	NT	QLD (including OHO complaints)	SA	TAS	VIC	WA	No PPP ⁴	Total ⁶
Medical radiation practitioners 2016/17	0.8%	0.4%	0.0%	0.3%	0.1%	0.0%	0.3%	0.3%	0.4%	0.3%
Medical radiation practitioners 2015/16	0.0%	0.2%	0.9%	0.4%	0.5%	0.0%	0.3%	0.3%	0.4%	0.3%
All registered practitioners 2016/17	1.9%	1.7%	2.2%	2.2%	1.3%	1.9%	1.1%	1.2%	0.5%	1.6%
All registered practitioners 2015/16	1.8%	2.2%	1.8%	1.5%	1.5%	1.7%	1.1%	1.1%	0.4%	1.5%

Table 8: Immediate action cases by division and state or territory (excluding HPCA)

Division	ACT	NSW ²	NT	QLD ³	SA	TAS	VIC	WA	No PPP ⁴	Total 2016/17	Total 2015/16
Diagnostic radiographer	0	0	0	0	1	0	0	0	0	1	5
Radiation therapist	0	0	0	0	0	0	0	1	0	1	1
Total 2016/17	0	0	0	0	1	0	0	1	0	2	
Total 2015/16	0	0	0	2	0	0	2	2	0		6

Table 9: Outcomes of immediate actions for medical radiation practitioners (excluding HPCA)

	2010	6/17	201	5/16
Outcome	Medical radiation practitioners	All practitioners	Medical radiation practitioners	All practitioners
Not take immediate action	0	76	1	66
Accept undertaking	1	69	0	67
Impose conditions	0	147	4	229
Accept surrender of registration	0	1	0	6
Suspend registration	1	103	1	74
Decision pending	0	23	0	22
Total	2	419	6	464

¹ Data relating to notifications (complaints or concerns) are based on the state or territory of the practitioner's principal place of practice (PPP).

² Matters managed by AHPRA about practitioners with a PPP in NSW, where the conduct occurred outside NSW.

Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland (OHO).

⁴ No principal place of practice (No PPP) will include practitioners with an overseas address.

⁵ Matters managed by the Health Professional Councils Authority (HPCA) in NSW.

⁶ Total includes matters managed by AHPRA, the OHO in Queensland and the HPCA in NSW.

Table 10: Notifications closed in 2016/17, by state or territory

Medical radiation practitioners	ACT	NSW ¹	NT	QLD ²	SA	TAS	VIC	WA	No PPP ³	Subtotal	HPCA ⁴	Total
Total 2016/17	1	0	1	8	3	0	12	3	1	29	20	49
Total 2015/16	0	0	0	10	0	0	11	5	1	27	11	38

Table 11: Notifications closed, by division and state or territory (excluding HPCA)

Division	ACT	NSW ¹	NT	QLD ²	SA	TAS	VIC	WA	No PPP ³	Total 2016/17	Total 2015/16
Diagnostic radiographer	1	0	1	6	3	0	12	3	1	27	18
Nuclear medicine technologist	0	0	0	0	0	0	0	0	0	0	4
Radiation therapist	0	0	0	2	0	0	0	0	0	2	4
Unknown practitioner⁵	0	0	0	0	0	0	0	0	0	0	1
Total 2016/17	1	0	1	8	3	0	12	3	1	29	
Total 2015/16	0	0	0	10	0	0	11	5	1		27

Table 12: Notifications closed, by division and stage at closure (excluding HPCA)

Division	Assessment ⁶	Health or performance assessment ⁷	Investigation	Panel hearing	Tribunal hearing	Total 2016/17	Total 2015/16	
Diagnostic radiographer	14	4	9	0	0	27	18	
Nuclear medicine technologist	0	0	0	0	0	0	4	
Radiation therapist	1	1	0	0	0	2	4	
Unknown practitioner ⁵	0	0	0	0	0	0	1	
Total 2016/17	15	5	9	0	0	29		
Total 2015/16	13	4	8	0	2		27	

Table 13: Notifications closed, by outcome at closure (excluding HPCA)

		Divisio				
Outcome at closure	Diagnostic radiographer	Nuclear medicine technologist	Radiation therapist	Unknown practitioner⁵	Total 2016/17	Total 2015/16
No further action ⁸	17	0	0	0	17	18
Health complaints entity to retain	1	0	0	0	1	0
Caution	4	0	2	0	6	4
Impose conditions	5	0	0	0	5	3
Reprimand	0	0	0	0	0	1
Suspend registration	0	0	0	0	0	1
Total 2016/17	27	0	2	0	29	
Total 2015/16	18	4	4	1		27

¹ Matters managed by AHPRA about practitioners with a principal place of practice (PPP) in NSW, where the conduct occurred outside NSW.

² Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland (OHO).

No principal place of practice (No PPP) will include practitioners with an overseas address.

⁴ Matters managed by the Health Professional Councils Authority (HPCA) in NSW.

Practitioners are not always identified in notifications closed at an early stage.

⁶ Closed after initial assessment of the matter.

⁷ Performance assessments are carried out by a Board-selected assessor whose scope of practice is similar to that of the practitioner being assessed (assessors are not Board members or AHPRA staff).

⁸ No further regulatory action is usually taken when, based on available information, the Board determines there is no risk to the public that meets the legal threshold for regulatory action. It may also be because a practitioner has taken steps to voluntarily address issues of concern.

Table 14: Active monitoring cases at 30 June 2017, by stream (excluding HPCA)

Stream ¹	Total 2016/17	Total 2015/16
Conduct	0	1
Health	4	6
Performance	3	1
Prohibited practitioner/student	1	2
Suitability/eligibility	80	99
Total ²	88	109

Table 15: Statutory offence complaints about medical radiation practitioners, received and closed in 2016/17, by type of offence and jurisdiction

Type of offence ³		ACT	NSW ⁴	NT	QLD⁵	SA	TAS	VIC	WA	No PPP ⁶	Total 2016/17	Total 2015/16
Title protections (s.113–120)	Received	1	0	0	1	0	0	0	0	1	3	8
	Closed	0	5	0	0	0	0	0	1	2	8	6
Practice protections (s.121-123)	Received	0	0	0	0	0	0	0	0	0	0	0
	Closed	0	0	0	0	0	0	0	0	0	0	0
Advertising breach (s.133)	Received	0	0	0	0	0	0	0	0	1	1	0
	Closed	0	0	0	0	0	0	0	0	1	1	1
Total 2016/17	Received	1	0	0	1	0	0	0	0	2	4	
	Closed	0	5	0	0	0	0	0	1	3	9	
Total 2015/16	Received	0	6	0	0	0	0	0	1	1		8
	Closed	0	3	1	0	0	0	1	0	2		7

¹ AHPRA reports on monitoring cases established rather than by individual registrants being monitored. This is because a registrant may have a set of restrictions (conditions or undertakings) in more than one stream. However, as at 30 June 2017, there were 88 cases about medical radiation practitioners, which related to 88 individual registrants.

These cases also may include cases that are to be transitioned from AHPRA to the Health Professional Councils Authority (HPCA) for conduct, health and performance streams. They do not include HPCA-managed monitoring cases.

³ This table captures offence complaints by principal place of practice (PPP) and includes all offences from sections 113–116 of the National Law, not only offences about advertising, title and practice protection.

⁴ Excludes matters managed by the HPCA in NSW.

⁵ Matters referred to AHPRA and the National Board by the Office of the Health Ombudsman in Queensland.

AHPRA also receives offence complaints about unregistered persons where there is no PPP recorded. Only registered practitioners have a designated

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Published

Australian Health Practitioner Regulation Agency

Melbourne, March 2018

For more information about AHPRA and the National Boards' work in 2016/17, please see the annual report, available from the <u>AHPRA website</u>.

Useful links

Register of practitioners: www.ahpra.gov.au/registration/registers-of-practitioners

Complaints portal: www.ahpra.gov.au/About-AHPRA/Complaints

Court and tribunal outcomes: www.ahpra.gov.au/Publications/Tribunal-Decisions

National restrictions library: www.ahpra.qov.au/Registration/Monitorinq-and-compliance/National-Restrictions-Library

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