

## Outcomes of consultation on revised *Professional capabilities for medical radiation practice*

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28 November 2019

### About the consultation process

The Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), requires a National Board to undertake wide-ranging public consultation about the content of proposed registration standards, codes and guidelines. A National Board may vary each consultation process to allow stakeholders to give their feedback.

The Australian Health Practitioner Regulation Agency (Ahpra) is responsible for establishing procedures for the development of accreditation standards, registration standards and codes and guidelines approved by National Boards, to ensure the National Registration and Accreditation Scheme (the National Scheme) operates in accordance with good regulatory practice. These procedures are published on the Ahpra website, see [www.ahpra.gov.au](http://www.ahpra.gov.au).

As part of reviewing and approving revised *Professional capabilities for medical radiation practice* (the Professional capabilities) the Medical Radiation Practice Board of Australia (the Board) carried out wide ranging consultation in line with the established consultation procedures.

The Board has:

- reviewed the 2013 version of the *Professional capabilities for medical radiation practice*
- completed preliminary consultation with stakeholders, including professional associations, other regulators and jurisdictions (3 September 2018 – 1 October 2018)
- reviewed feedback from preliminary consultation
- held a conference for the profession themed around the professional capabilities, including seeking feedback from attendees (27 November 2018)
- carried out a public consultation which was open to governments, the profession, other National Boards, accreditation entities, education providers, consumer groups and anyone with an interest in regulation of the medical radiation practice profession (18 February 2019 – 26 April 2019)
- reviewed the feedback from public consultation
- met with the National Board Community Reference Group (CRG) to seek their feedback on specific elements of the Professional capabilities from the consumer point of view (20 August 2019)
- as an additional step, following public consultation, the Board completed a short period of targeted consultation with stakeholders (2 Sept 2019 – 16 Sept 2019) to test the draft Professional capabilities before the Board approved the final version
- met directly with a small group of stakeholders to discuss particular elements of their feedback, including with the medical profession (16 September 2019)
- considered the feedback from targeted consultation
- finalised the *Professional capabilities for medical radiation practice* (21 October 2019), and
- published them on 8 November 2019, to take effect from 1 March 2020.

## Background

The *Professional capabilities for medical radiation practice* were first published in November 2013. They established national entry-level professional capabilities for the three divisions of medical radiation practice.

The Board began a review of the 2013 Professional capabilities in 2018. The purpose of the review was to reflect on the experience and operation of the 2013 version and to consider what changes may be necessary to ensure that they were relevant to safe and contemporary practice in the profession now and into the future.

The Board has been mindful of its primary obligation to ensure the safety of the public, balanced against supporting access to health services, facilitate the development of a flexible workforce, and enable innovation in the education of, and service delivery by, medical radiation practitioners.

## Consultation feedback

Following consideration of the feedback received during the public consultation the Board made a number of changes to the draft revised Professional capabilities. However, there were a number of areas in the draft version that attracted little or no feedback.

### Minor changes to the revised professional capabilities

The Board made only minor grammatical and plain language changes to the following:

- Domain 2: Professional and ethical practitioner.
- Domain 3: Communicator and collaborator.
- Domain 5: Radiation safety and risk manager.

The Board made small changes to:

- Domain 4: Evidence-informed practitioner – changing the domain name from ‘Life-long learner.’

### Substantive changes to revised Professional capabilities

#### Introduction section

The introduction section of the new Professional capabilities the Board made specific statements about ultrasound (US). The purpose for including a specific statement on US was to make clear that the title of ‘sonographer’ is not a protected title under the National Law. Further revisions to language were made to make clear that the Professional capabilities only applied to registered medical radiation practitioners.

The Board also considered it useful to give some context and purpose of the capabilities for Magnetic Resonance Imaging (MRI) in response to stakeholder feedback.

#### Capabilities relating to MRI and ultrasound US

In the 2013 version of the Professional capabilities, domain 5A (*Practice in diagnostic radiography*) included capabilities for MRI and US. In that document these enabling components were described as only requiring practitioners to show knowledge or understanding at a foundational level.

The level of capability for safe and independent practice means requires practitioners need to apply detailed knowledge and perform practice-related tasks in the practice setting. In other words, practitioners should be capable of ‘doing’ rather than simply ‘knowing.’

When revising the Professional capabilities, MRI and US are treated as specific areas of practice and the capabilities are designed to allow independent, safe and effective practice. The capabilities for MRI and US, with the exception of some minor grammatical adjustments, have remained essentially the same as those presented at public consultation.

However, in respect of MRI, feedback from a range of stakeholders identified a number of safety considerations that were considered essential for independent practitioners to be able to manage as part safe practice in MRI. To give clearer guidance the Board developed an additional explanatory note that describes the necessary elements of MRI safety.

### Capabilities about recognising and responding to deteriorating patients

The previous version of the Professional capabilities (2013) required medical radiation practitioners to identify and respond to a patient's/client's deteriorating condition. The Board agreed to retain the capability, though in a slightly modified form, when they consulted on the revised version of the Professional capabilities.

Following public consultation, while most of the feedback was supportive of the capability, the Board noted some suggestions that the capability was a burden on practitioners. Specifically, in terms of the knowledge they are expected to have and the actions they are expected to take in response to an acutely deteriorating patient.

The Board consulted the CRG, an advisory group that provides insights on consumer-related matters to National Boards and Ahpra,, about this issue. The CRG advised that the health consumer expects that when they enter a healthcare facility, they will always be taken care of. Consumers expect that medical radiation practitioners have knowledge of basic life support and knowledge of local escalation protocols to seek help for an acutely deteriorating patient.

The new Professional capabilities (2020) maintain the requirement for medical radiation practitioners to identify and respond to a patient's/client's deteriorating condition. The requirements of this capability must be interpreted in the context of the Australian Commission on Safety and Quality in Healthcare's *National consensus statement: essential elements for recognising and responding to clinical deterioration* (the National Consensus Statement) and the National Safety and Quality Health Service's (NSQHS) Standards – [Standard 8 Recognising and Responding to Acute Deterioration](#).

By keeping this capability in the revised version of the professional capabilities, the Board is ensuring that medical radiation practitioners continue to contribute as part of the system of safe healthcare, and effectively participate in the early identification, escalation or implementation of life supporting measures.

### Capabilities about communicating safely if urgent and unexpected findings are identified

The Board received a diverse range of feedback on this enabling component. The feedback from some organisations urged the Board to establish wide-ranging descriptions of image reporting. While feedback from others expressed concern about training arrangements and the possibility of role encroachment.

The feedback from community groups echoed an expectation from health consumers, that if urgent or unexpected findings are identified in medical images it is essential that these findings are passed to the clinician at the point of care promptly.

The Board agreed that it is necessary for the safety of the public that medical radiation practitioners were appropriately trained and competent. The Board also agreed that it was therefore necessary to include the relevant enabling components about identifying urgent and unexpected findings in the new Professional capabilities.

Education providers develop their course curricula that enables graduates to show meet the Professional capabilities. In doing so they provide high quality education that ensures graduates are appropriately trained and competent to identify urgent and unexpected findings.

Importantly, the Board is aware of the healthcare standards produced by the Australian Commission on Safety and Quality in Healthcare and agreed to make specific reference to the Healthcare National Safety and Quality Health Service Standards (NSQHS – [Standard 6 Communicating for Safety](#)).

The Board recognises that this is a minimum capability and as such needs to be described in terms of a minimum obligation. For those practitioner's looking to practice image interpretation or image

reporting in a more specialised or advanced way, with the right education or training, that is entirely possible, however it is not a minimum capability.

### **Developing a policy on communicating safely if urgent or unexpected findings are identified**

To help practitioners, employers and the community the Board has established a new policy that gives guidance on communicating for safety if urgent or unexpected findings are identified.

If a medical radiation practitioner identifies an urgent or unexpected finding in a medical image, they must communicate this promptly. Often this will be to the health practitioner who drafts formal reports, which includes radiologists or cardiologists etc. In other cases, the most appropriate person will be a health practitioner directly involved in the care of the patient.

The Board expects medical radiation practitioners to apply professional judgement in their practice. In some cases, the patient/client and their family/carers should also be informed if further medical advice is required prior to them leaving the hospital/clinic.

### **Capability for cultural safety**

The draft revised Professional capabilities highlight that cultural safety is a key capability for registered medical radiation practitioners.

A number of submissions correctly identified that culturally safe practice was appropriate for all healthcare consumers, regardless of nationality or cultural background. However, in Australia Aboriginal and Torres Strait Islander Peoples have a significantly poorer health outcomes than the national average. The Board, and other National Boards are committed to improving those results through the provision of a culturally safe workforce, which in turn supports increased engagement by Aboriginal and Torres Strait Islander Peoples in their own healthcare journey.

Further work is being done in collaboration with other National Boards and the National Scheme's Aboriginal and Torres Strait Islander Health Strategy Group to define the term cultural safety and to develop supporting materials for culturally safe practice.

### **Minimum capabilities and scope of practice**

The Board received a number of comments from practitioners and organisations about the role of the Professional capabilities and their connection to scope of practice.

A practitioner's scope of practice is individual to them and reflects their education, knowledge, skill and professional attributes.

A practitioner's capability will expand and improve as they gain professional experience. Professional capabilities reflect how a practitioner applies their professional judgement, decision-making skills, experiential knowledge, scientific knowledge, practical skills and ability in any given situation.

Depending on a practitioner's scope of practice, some of the capabilities will not be relevant. For example, for a diagnostic radiographer the capabilities for computed tomography (CT) will not be relevant when they only work in MRI. However, if they occasionally work in CT, the capabilities are then relevant.

### **If MRI or US form part of your practice**

The Board acknowledges that for some practitioners and education providers they felt the language used in the capabilities about MRI and ultrasound created some ambiguity, particularly using the word 'optional.'

The Board has removed this reference and instead, simply cast the descriptions of MRI and US as applying when these form part of a practitioner's practice.

There remains a general expectation that all practitioners and graduates with a qualification from a Board-approved program of study, will have a broad understanding of imaging and treatment pathways, including the modalities and equipment used in medical radiation practice.

## Publication and commencement

The Board [published](#) the approved *Professional capabilities for medical radiation practice (2020)* on 8 November 2019 to allow practitioners, employers, education providers, professional associations, industrial unions and the public to become familiar with the new minimum requirements for medical radiation practitioners.

The release on 8 November 2019 was timed to coincide with the celebration of World Radiography day. World Radiography day recognises the valuable contribution that medical radiation practitioners make to the provision of safe healthcare.

The professional capabilities will come into effect from 1 March 2020.