



Response template for providing feedback to public consultation – draft revised professional capabilities for medical radiation practice

This response template is an optional way to provide your response to the public consultation paper for the **Draft revised professional capabilities for medical radiation practice**. Please provide your responses to any of the questions in the corresponding text boxes; you do not need to answer every question if you have no comment.

Making a submission

Please complete this response template and send to medicalradiationconsultation@ahpra.gov.au, using the subject line '*Feedback on draft revised professional capabilities for medical radiation practice*'.

Submissions are due by midday on Friday 26 April 2019.

Stakeholder details

Please provide your details in the following table:

Name:	Elizabeth Bailey, Marcia Wood and Nicholas Daw
Organisation Name:	

Your responses to the preliminary consultation questions

1. Does any content need to be added to any of the documents?
<p>No additional content required.</p> <p>The new format with the additional descriptors for each domain is clear and concise. Having MRI and ultrasound as a separate capability for all MRP is appropriate</p>
2. Does any content need to be amended or removed from any of the documents?
<p>Content and new format is well-designed and covers all core competencies needed to work as an MRP and nuclear medicine technologist safely and to a high standard.</p> <p>No additional capabilities required</p>
3. Do the key capabilities sufficiently describe the threshold level of professional capability required to safely and competently practise as a medical radiation practitioner in a range of contexts and situations?
<p>The key capabilities do cover the threshold or minimum level required to work safely. Need to ensure that the academic institutions include cultural understanding, bio-ethics and knowledge of relevant medicines in the training programs. They will receive exposure to cultural diversity during their clinical placements but the skills base must be discussed at the course level</p>
4. Do the enabling components sufficiently describe the essential and measurable characteristics of threshold professional capability that are necessary for safe and competent practice?
<p>The enabling components are clear, detailed and allow the practitioner to assess their own compliance. Reference to standards and other legislation is helpful.</p> <p>Compliance with State/Territory regulations is important and is mentioned specifically in Domain 5 on Radiation Safety and Risk Manager</p>

5. Is the language clear and appropriate? Are there any potential unintended consequences of the current wording?

The language used in the documents is easy to read and comprehend, the definitions of the new terminology for the enabling components referred to in the document is clear and concise

6. Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if these capabilities are adopted?

Domain 1, section 8 on Medicines – State-based legislation that covers the use and administration of medicines by nuclear medicine technologist is important and must be emphasized. This includes the definition of appropriately qualified and what type of training program is deemed as ‘appropriate’

Domain 1, section 7 – the enabling component describing ‘taking appropriate and timely action’ mentions that the practitioner is responsible for conveying significant findings to the appropriate person and mentions the referrer and patient so that the finding can be actioned. This needs more clarification as the practitioner is then taking full responsibility if the incorrect finding is given to the referrer who actions a management decision that if this is incorrect may be significant implications possibly for patient safety and the professional practice of the nuclear medicine technologist

7. Are there implementation issues the National Board should be aware of?

Sufficient notice should be given to all registered practitioners as to the implementation start date of any revised document to allow time for review of any educational and training implications that may impact ongoing compliance with the revised standard, at least a 4 to 6 week notification period

8. Do you have any other general feedback or comments on the proposed draft revised professional capabilities?

The inclusion of cultural awareness and bio-ethics is in line with current best practice for all health institutions. The course providers will need to ensure that this is included in the academic curriculum.

The addition of a detailed section on medicines is important and as above will need to be included as part of university training. There may also be implications for current practitioner who may need additional qualifications and training / expertise.