



Medical Radiation Technologists Board of Queensland





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### **Foreword**

The Hon Paul Lucas MP
Deputy Premier and Minister for Health
Parliament House
BRISBANE QLD 4000

**Dear Deputy Premier** 

I have pleasure in presenting the Annual Report and Financial Statements of the Medical Radiation Technologists Board of Queensland for the year ended 30 June 2010.

I certify that this Annual Report complies with the prescribed requirements of the Financial Accountability Act 2009 and the Financial and Performance Management Standard 2009, and the detailed requirements set out in the Annual Report Requirements for Queensland Government Agencies.

A checklist outlining the annual reporting requirements can be found at www.healthregboards.qld.gov.au/publications.

As the Board was reconstituted in April 2010 I would like to thank retiring members Jennie Baxter, Catherine McHenry, Myrtle Green, Abramo Papp and Clare Endicott, whose collective dedication and expertise the Board appreciated greatly.

I'd also like to welcome Nicole Eastgate, Tracey Lloyd, Lisa O'Neil, Virginia Thorley and Melinda Wilson to the Board.

My appreciation is extended to all current members of the Board who held office during the year. In addition I express my gratitude to former Chairperson Wayne Nuss, and former Deputy Chairperson, Pam Rowntree, for their service and dedication since the inception of the Board.

The Board also records its appreciation for the administrative and operational support provided by the staff of the Office of Health Practitioner Registration Boards in assisting the Board to fulfill its statutory functions and obligations.

John Andersen Chairperson

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# Constitution, goals and functions

#### Constitution

The Medical Radiation Technologists Board of Queensland is constituted under section 9 of the *Medical Radiation Technologists Registration Act 2001* ("the Registration Act") as a body corporate with perpetual succession. The Board is subject to the provisions of the *Health Practitioner Registration Boards (Administration) Act 1999*, the *Health Practitioners (Professional Standards) Act 1999* ("the Professional Standards Act") and the *Financial Accountability Act 2009*.

#### Goals

Consistent with section 7(1) of the Registration Act, the Board's primary goals are:

- to protect the public by ensuring health care is delivered by registrants in a professional, safe and competent way;
- to uphold standards of practice within the profession; and
- to maintain public confidence in the profession.

#### **Functions**

The Board is directly responsible for the administration of the Registration Act and the *Medical Radiation Technologists Registration Regulation 2002* (as amended from time to time).

The Board's major functions are set out in section 11 of the Registration Act as follows:

- to assess applications for registration;
- to register persons who satisfy the requirements for registration;
- to monitor and assess whether registrants comply with any conditions of registration;
- to keep a register of, and records relating to, registrants;
- to promote high standards of practice of the profession by registrants;
- to develop or adopt programs for the continuing professional education of registrants and encourage their participation in the programs;
- to develop or adopt training programs in the practice of the profession that are relevant to a person's eligibility for registration;
- to confer and cooperate with interstate regulatory authorities;
- to confer and cooperate with entities engaged in the development of national policies about the regulation of the profession;
- to confer and cooperate with the following entities about the education of persons in the practice of the profession:

- > educational institutions; and
- entities responsible for accrediting courses or accrediting institutions to educate persons for the profession;
- to inform registrants and the public about the operation of the legislative scheme in its application to the profession;
- to examine and advise the Minister about the operation of the legislative scheme in its application to the profession;
- to monitor and enforce compliance with this Act;
- to undertake research, relevant to the legislative scheme, into the regulation of the profession;
- to collect and give to persons information about the practice of the profession by registrants; and
- to perform other functions given to the Board under the Registration Act or another Act.

In addition, the Board has a variety of functions under the Professional Standards Act. Those functions are listed under section 11 of that Act as follows:

- to receive complaints about its registrants and, if appropriate, refer the complaints to the Health Quality and Complaints Commissioner;
- to consult and cooperate with the Commissioner in investigating and disciplining its registrants and in relation to complaints about impaired registrants;
- to immediately suspend, or impose conditions on the registration of its registrants if the registrants pose a serious potential risk to the wellbeing of vulnerable persons;
- to conduct investigations, whether because of complaints or on its own initiative, about the conduct and practice of its registrants;
- to deal with disciplinary matters relating to its registrants that can be addressed satisfactorily through advising, cautioning and reprimanding;
- to bring disciplinary proceedings relating to its registrants before Panels or the Tribunal;
- to implement orders of Panels or the Tribunal relating to the Board's registrants;
- to establish health assessment committees to assess the health of registrants who may be impaired and make decisions about impaired registrants;
- to monitor its registrants' compliance with conditions imposed, or other disciplinary action taken, or undertakings entered into under this Act;
- to cancel or suspend, or impose conditions on its registrants' registration as a result of action taken under a foreign law;
- to consult and cooperate with other boards, foreign regulatory authorities and other relevant entities about the investigation and disciplining of its registrants and the management of its registrants who are impaired; and
- to exercise other functions given to the Board under the Act.



# Membership of the Board

Membership of the Board during 2009-10 constituted the following members appointed in accordance with the membership categories specified in section 15 of the Registration Act.

#### **Registrant members**

**Dominic Kennedy** 

Catherine McHenry\*

John Andersen Assoc Dip (Medical

Radiography) RMIT, Dip App Sc (Medical Imaging Technology), Grad Cert Mgnt, MIR [Chairperson]

Jennie Baxter\* Assoc Dip App Sc

(Therapeutic Radiography),

Grad Cert Mgnt, MIR

Nicole Eastgate<sup>#</sup> B App Sc (MRT)

B App Sc (MRT)

[Deputy Chairperson]
B App Sc (NMT),

Grad Cert Mgnt

Wayne Nuss Dip App Sc, Grad Dip Mgnt,

FIR

Amy Illidge M App Sc (Radiation

Therapy), MIR

Assoc. Prof. Pamela Rowntree Dip App Sc (Diagnostic

Radiography), Grad Dip Ed,

FIR

Melinda Wilson<sup>#</sup> B MedRadSc (Nuclear

Medicine), Grad Cert App Management (Public

Health)

#### **Public members**

Myrtle Green OAM\* Cert Club Admin, JP (Qual)

Abramo Papp\* B Arch, Grad Dip Comp Sc

(Dist)

Tracey Lloyd\* BA (Criminology & Criminal

Justice), Grad Cert Health

Promotion

Dr Virginia Thorley OAM\* PhD, IBCLC, FILCA

#### Lawyer

Clare Endicott\* BA, LLB (Hons), LLM
Lisa O'Neill\* LLB (QUT), Grad Cert
Business Admin (QUT)

\* Membership ceased when their terms of appointment expired on 10 April 2010

# Appointed as member when the Board was reconstituted from 10 April 2010

The Board members' current term of appointment expires on 10 April 2014.

As at 30 June 2010, the memberships of the Board's committees were as follows:

#### **Supervised Practice Committee**

Mr John Andersen (ex-officio)

Mr Tim Way

Mr Nic Biesot

Ms Carole Brady

Mr James Abbott

Ms Debbie Starkey

Mr Dominic Kennedy (Chair)

#### **Combined AIR/MRTB Committee**

Mr Tim Way (Chair)

Ms Debbie Starkey

Mr Nic Biesot

Ms Anne Connell

Ms Jenny Kindt

Ms Allison Dry

#### **Registration Committee**

Ms Amy Illidge (Chair)

Ms Nicole Eastgate

Associate Professor Pam Rowntree (Assessment of

Overseas Qualifications)

#### **Research and Awards Committee**

Associate Professor Pam Rowntree (Chair)

Ms Lisa O'Neil

Ms Melinda Wilson

Ms Amy Illidge

Ms Nicole Eastgate

# Board and committee meetings

Regular ordinary meetings of the Board are usually convened on the first Wednesday of each month (except January) at the Office of Health Practitioner Registration Boards.

During 2009-10 the Board held 11 ordinary Board meetings and 25 committee meetings.

Attendance by Board members at these various meetings is shown in the following table.

Members	Ordinary meetings	Committee
J Andersen	10	7
J Baxter*	9	4
D Kennedy	8	10
C McHenry*	9	3
W Nuss	10	7
A Illidge	9	10



P Rowntree	9	4
M Green*	8	-
C Endicott	6	1
A Papp*	9	-
N Eastgate#	1	1
T Lloyd#	2	-
L O'Neil#	2	-
V Thorley#	2	-
M Wilson#	2	-

<sup>\*</sup> Membership ceased when their terms of appointment expired on 10 April 2010

In addition, the following non-Board members assisted the Board by being members of the Board's committees as follows.

Member	Committee attendance
N Biesot	8
C Brady (nee McDonnell)	6
A Connell	3
A Dry	7
J Abbott	5
J Kindt	4
D Starkey	7
T Way	5
M Wilson	6

## The Register

Pursuant to section 11(d) of the Registration Act, the Board maintains a Register of medical radiation technologists, with separate registration for medical imaging technologists (radiographers), nuclear medicine technologists and radiation therapists.

Due to the introduction of national registration, the Office underwent significant restructuring at the end of the 2009-10 year, and hence it was not possible to provide registrant numbers at the usual 30 June time. Figures shown here are instead as at 21 June 2010.

At this date there were 2,692 registered medical radiation technologists, comprising 2,169 medical imaging technologists, 132 nuclear medicine technologists and 391 radiation therapists.

These figures represent a 'snap shot' in time as at 21 June, and hence does not include restorations to the register for the period 1 July 2010 to 30 September 2010, nor registrants who surrender or do not renew their registration, or those who otherwise have their registration cancelled after 30 June. The Register, available to the public at www.healthregboards.qld.gov.au contains current registration data.

Registrant numbers within each registration category as at 21 June 2010 are shown below:

	Medical imaging tecnologists	Nuclear medicine tecnologists	Radiation therapists	Total
General registrants (including deemed)	2069	125	369	2563
General registrations with probationary conditions	81	5	21	107
Provisional general registrations with probationary conditions	15	2	1	18
Provisional general registrants (including deemed)	-	-	-	-
Other	4	-	-	4
Total registrations	2169	132	391	2692

The 2,692 registrants at 21 June 2010 represent a net increase of 91(approximately 3.5%) over the 30 June 2009 figure. The net change in registrant numbers over the year is the product of significant numbers of additions to and deletions from the Register.

During 2009-10, 243 new registrations (for 195 medical imaging technologists, 11 nuclear medicine technologists and 37 radiation therapists) were processed by the Board.

Of the 243 new registrants, 46 registrants (40 medical imaging technologists, two nuclear medicine technologists and four radiation therapists) were processed under mutual recognition legislation.

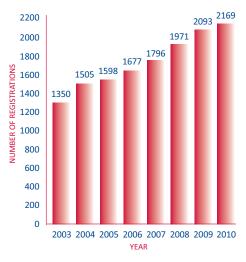
Of the 46 mutual recognition registrants, 30 registrants (26 medical imaging technologists, two nuclear medicine technologists and two radiation therapists) lodged a registration notice pursuant to the provisions of the *Mutual Recognition (Queensland) Act 1992* on the basis of holding current registration in the profession in another Australian State or Territory, while 16 (14 medical imaging technologists, and two radiation therapists) lodged a registration notice pursuant to the provisions of the *Trans-Tasman Mutual Recognition (Queensland) Act 2003* on the basis of holding current registration in the profession in New Zealand.

The following bar charts illustrate the change in the number of registrants (at 30 June for all years except this reporting year) each year since the commencement of registration in 2002-03.



 $<sup>^{\#}</sup>$  Appointed as member when the Board was reconstituted from 10 April 2010

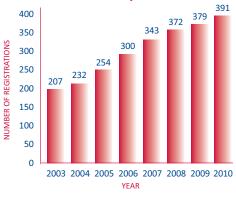
#### Medical imaging technologists



#### **Nuclear medicine technologists**



#### **Radiation therapists**



An analysis of the registration database as at 21 June 2010 provides the following information.

#### Age groupings

	% Medical imaging technology	% Nuclear medicine technology	% Radiation therapy
Under 25 years	9.5	11.5	14.0
25 - 34 years	32.0	44.5	44.0
35 - 44 years	24.0	26.0	22.0
45 - 54 years	20.5	13.5	14.5
55 years +	14.0	4.5	5.5
Total	100%	100%	100%

#### Gender

35% of medical imaging technologists were male and 65% were female;

- 39.5% of nuclear medicine technologists were male and 60.5% were female; and
- 25.5% of radiation therapists were male and 74.5% were female.

#### **Geographical distribution**

	% Medical imaging technology	% Nuclear medicine technology	% Radiation therapy
Within Brisbane	37.5	43	51
Elsewhere in south east Queensland	36.5	32.5	31.5
Total within south east Queensland (postcodes 4000 to 4399 and 4500 to 4581)	74	75.5	82.5
Elsewhere in Queensland	17	14.5	11.5
Outside Queensland	9	10	6
Total	100%	100%	100%

The geographical statistics are based on an analysis of postcode addresses of the registrants as shown on the Register. In some cases, the Register address differs from the practice address of a registrant. Registrants with addresses outside Queensland have chosen to retain Queensland registration, even though, in most cases, they do not currently practise their profession in Queensland.

# Administrative structure

Administrative and operational support for the Board's day to day operations is provided by the Office of Health Practitioner Registration Boards under a service agreement between the Board and the Office. The Board is one of 12 health practitioner registration Boards receiving such support from the Office, which is constituted under the Health Practitioner Registration Boards (Administration) Act 1999. The Office has a permanent staff establishment of 50.6 full-time equivalent positions (as at 30 June 2010) and a variable number of temporary positions.

Members of the staff of the Office with primary responsibilities for the administrative tasks of the Board as at 30 June 2010 were:



Executive Officer Mr Michael Demy-Geroe

Principal Co-ordinator Mrs Pauline Portier

Professional Adviser Ms Francesca Holloway

Registration Assessment

Officer Ms Angeline Lim

The Principal Co-ordinator is assigned the task of handling and managing the day to day administrative affairs of the Board (and other Health practitioner registration boards) under the direction of the Executive Officer the Directors of Board Support and Advice and Registration Services.

The Professional Adviser (Medical Radiation Technology), who is a registered medical radiation technologist (medical imaging), provides advice and assistance to the Board and registrants in relation to registration, supervision and related issues.

Other Office staff support the Board with services in human resource management, financial management, information technology, counter enquiries, records management, investigation of complaints about registrants, health assessment and monitoring of impaired practitioners and general administrative assistance.

Further information regarding the interrelationship between the Board and the Office is provided in the Office annual report.

### Access

#### The Office of the Board is located at

Level 19 179 Turbot Street Brisbane QLD 4000

## Correspondence to the Board should be addressed to:

The Executive Officer
Medical Radiation Technologists Board of
Queensland

GPO Box 2438 BRISBANE QLD 4001

#### **Board communication links are:**

Telephone: (07) 3225 2509 Facsimile: (07) 3225 2527

E-mail: mrt@healthregboards.qld.gov.au

Website: www.mrtboard.qld.gov.au

Copies of this annual report and the annual report of the Office are accessible to members of the public at the Office and on the websites of the Board and Office.

# Review of activities and operations

### **Registration Act**

The Registration Act was amended during 2009-10 by:

- Financial Accountability Act 2009 No. 9 ss 1, 2(2), 136 sch 1, which replaced references to the Financial Administration and Audit Act 1977 with the Financial Accountability Act 2009;
- Queensland Civil and Administrative Tribunal (Jurisdiction Provisions) Amendment Act 2009 No. 24 ss 1–2, ch 7 pt 9, which inserted provisions for the new Queensland Civil and Administrative Tribunal which replaced the previous Health Practitioners Tribunal;
- Health and Other Legislation Amendment Act 2009
   No. 44 ss 1, 2(3), pt 9, which:
  - extended the maximum period of provisional general registration to 12 months;
  - inserted provisions so that if the board failed to make a decision on an application to review the imposition of conditions on general registration, the conditions are taken to be confirmed rather than removed; and
  - inserted extensive provisions allowing for the cancellation of general registration where information or a document given was, or became, materially false, or where the registrant ceases to have, or does not have, the qualifications necessary for registration; and
  - Health Legislation (Health Practitioner Regulation National Law) Amendment Act 2010 No. 14 pts 1, 7, s 124 sch, which amended provisions in the Act to make it consistent with the introduction of the national registration scheme.

### **Registration Regulation**

The Medical Radiation Technologists Registration Regulation 2002 was amended during 2009-10 by:

- Queensland Civil and Administrative Tribunal (Jurisdiction Provisions) Amendment Act 2009 No. 24 ss 1–2, ch 7 pt 10, which inserted provisions for the new Queensland Civil and Administrative Tribunal which replaced the previous Health Practitioners Tribunal;
- Health Legislation Amendment Regulation (No. 2) 2010 SL No. 74 pts 1, 6 which increased fees payable under the Registration Act in line with movements in the Consumer Price Index - details of the fees now applicable are provided in the "Fees" section of this report; and
- Health Legislation Amendment Regulation (No. 3) 2010 SL No. 81 pts 1, 4, which:
  - inserted in Schedule 1 (Qualifications for general registration), part 2 "Master of Medical



- Radiations (Nuclear Medicine), Monash University"; and
- inserted in Schedule 1 (Qualifications for general registration), part 3 "Master of Medical Radiations (Radiation Therapy), Monash University".

# Complaints under the Registration Act

Four complaints were received by the Board during 2009-10 and dealt with under the Registration Act.

All of these complaints related to allegations of medical radiation technologists practising and/or being held out as medical radiation technologists without having current registration with the Board.

- In one case the Board resolved to issue a warning to the registrant for contravention of the Registration Act.
- In one case the Board issued a reminder to the registrant about the relevant provisions of the Registration Act.
- In two cases the Board considered there was insufficient evidence of a breach and took no further action.

No Board funds were spent during 2009-10 on investigations or inspections under Part 5 of the Registration Act.

# **Complaints under the Professional Standards Act**

The following tables and supporting information provide summary information in relation to the Board's handling of complaints, investigations, disciplinary proceedings and health assessments under the Professional Standards Act during 2009-10.

The Board received two new complaints under the Professional Standards Act in 2009-10.

- One complaint related to a conviction for a criminal offence against a registrant. The Board resolved to investigate the matter. The investigation was completed during 2009-10. The Board found that a ground for disciplinary action existed and resolved to commence disciplinary proceedings against the registrant before the Queensland Civil and Administration Tribunal.
- The other complaint related to an allegation that a registrant may have had a health condition which may have affected her ability to practise. The Board resolved to deal with this matter under the impairment section of the Professional Standards Act.

All new complaints are assessed to determine whether the complaint appears to provide a ground for disciplinary action and, if so, whether the complaint should be first investigated.

No complaints remained in assessment at the end of 2009-10.

The following table outlines the number of investigation conducted during 2009-10.

Investigations conducted	Number
Investigations open at 1 July 2010	2
Investigations commenced in 2009-10	1
Investigations completed in 2009-10	1
Ongoing investigations	2
Total costs	\$486.46

One investigation was completed during the year. The investigation related to a conviction for a criminal offence against a registrant. The Board resolved to commence disciplinary proceedings before the Queensland Civil and Administration Tribunal.

Another investigation relating to criminal charges being taken against a registrant for alleged inappropriate conduct against patients remain in abeyance pending finalisation of an appeal, in respect of those criminal proceedings.

The following table outlines the number of disciplinary proceedings conducted during 2009-10.

Type of proceeding	Board	PCRP	НРТ	Total
Disciplinary proceedings ongoing at the beginning of the reporting year	0	0	1	1
Disciplinary proceedings commenced in the reporting year	0	0	0	0
Disciplinary proceedings closed in the reporting year	0	0	0	0
Ongoing disciplinary proceedings	0	0	1	1

Type of proceeding	QCAT	Total
Disciplinary proceedings ongoing at 1 July 2009	1	1
Disciplinary proceedings commenced in 2009-10	0	0
Disciplinary proceedings completed in 2009-10	0	0
Disciplinary proceedings ongoing at 30 June 2010	1	1

The Board did not conduct or spend funds on health assessments of registrants under Part 5 of the Professional Standards Act during 2009-10.

The Board did not enter into any undertakings with registrants about their professional conduct or practice under sections 118(1)(c)(iv), 165(2)(b), 276(2)(a), or 299(2) (c) of the Professional Standards Act during 2009-10.

Consequently no copies of undertakings with registrants were provided to the Health Quality and Complaints Commissioner pursuant to section 379(5) of the Professional Standards Act.



# Health assessments and management of impaired registrants.

The Board's Health Assessment and Monitoring (HAM) program manages impaired registrants, in accordance with Part 7 of the Professional Standards Act.

Where a registrant suffers from a medical condition that may adversely affect their ability to safely and competently practise the profession, the Board may arrange for a health assessment by an appropriately qualified medical practitioner.

The Board may also require a new applicant seeking registration to undergo a health assessment under the Registration Act to ensure a known health condition does not compromise their practice.

During 2009-10, the Board conducted one health assessment under the Professional Standards Act and no assessments were required under the Registration Act.

During 2009-10, no costs were incurred by the Board for health assessments conducted under section 271 of the Professional Standards Act or section 46(1)(d) of the Registration Act.

Many registrants enter into undertakings following a health assessment which will allow the Board to monitor their health conditions and ensure that their medical condition does not affect their professional performance. It is usual for a registrant to be monitored for two to four years.

The Board may monitor such conditions as mental illness and substance abuse and has established monitoring tools such as supervised practice and a urine drug screening program to ensure that its impaired registrants deliver health care in a professional, safe and competent way.

During 2009-10, no registrants required monitoring by the Board.

Occasionally, the Board's Health Assessment and Monitoring program will conduct investigations on behalf of the Board where the ground for the investigation is possible impairment. No registrants required investigation on impairment grounds during 2009-10.

If a registrant fails to cooperate during a health assessment or the registrant and the Board can not agree on what undertakings are required to allow the Board to monitor the registrant's health, the Board may establish a health assessment committee.

The committee's function is to assess the registrant's health, make a finding as to whether the registrant is impaired and make recommendations to the Board. If the registrant is found impaired by the committee, it may impose conditions on the registrant.

The Board did not establish a health assessment committee during 2009-10.

#### Ministerial authorisations

During 2009-10, the Board did not receive from the Minister for Health any authorisations under section

392 of the Professional Standards Act or section 211 Registration Act for a person performing functions under those Acts to disclose information acquired in the performance of those functions about another person's affairs.

#### **Ministerial directions**

Section 37(1)(a) of the Registration Act and section 13(5) of the Professional Standards Act require the Board to include in its annual report copies of all written Ministerial directions given in the public interest to the Board during the financial year. The Board did not receive any directions during 2009-10.

### Legislative compliance

Queensland Health's Legislative Compliance Policy and Implementation Standard requires a statement in an annual report by a legislation Custodian concerning the Board's compliance with the Registration Act and Professional Standards Act.

To the best of the knowledge of the Custodian, during the course of the last financial year there have been no breaches by the Board of either the Registration Act or Professional Standards Act.

### **Criminal history checking**

Mandatory criminal history checking of all new applications made under the Registration Act was commenced on 1 July 2009. The following statistics report on the outcomes of this scheme from 1 July 2009 to 20 May 2010.

	MRT Board	Average across 12 Boards
Applications received	272	245
Applications checked	200	169
Positive criminal history identified	3	4.5
Conditions imposed	0	< 1
Undertakings imposed	0	< 1
Applications refused	0	< 1
Applications pending (further information required)	0	< 1
Additional processing time (days) due to external checking - Positive	21	10
Additional processing time (days) due to external screening – checking	1	2

The results from criminal history checking across all Boards returned a wide variety of offence types. It is important to note that some of these offences were charges only. Offence types include:



- drunk and disorderly, drink driving, public nuisance;
- assault;
- grievous bodily harm;
- drug possession / related drug offences;
- theft;
- fraud;
- burglary; and/or
- shoplifting.

In assessing criminal history, the Board was able to request further information or explanation as necessary. No applications were refused or conditions / undertakings imposed solely on the basis of criminal history. There was one application with a criminal history withdrawn before a decision was made by the Board.

The criminal history checking process was reviewed after six months of operation and an additional separation / checking mechanism was implemented. This has helped to ensure files are not released from the criminal history section inadvertently or incorrectly, and do not become confused with files at other stages of registration processing.

# Council of Australian Governments: National registration and accreditation

The Health Practitioner Regulation National Law Act 2009 passed through the Queensland Parliament and received Assent on 3 November 2009. Subsequently the Health Legislation (Health Practitioner Regulation National Law) Amendment Act 2010 received Assent on 21 April 2010. This Act provides for consequential, administrative and transitional amendments to the various pieces of legislation associated with the existing regulatory scheme. With the passage of this final piece of Queensland legislation, the process of transferring responsibility for administering ten health professions to the National Registration and Accreditation Scheme for the health professions is well advanced, and will take effect from 1 July 2010.

The Australian Health Workforce Ministerial Council had previously considered the inclusion of partially regulated professions against the criteria set out in the Intergovernmental Agreement governing the scheme. At that time, Ministers had agreed to the inclusion of Aboriginal and Torres Strait Islander health workers, Chinese medicine practitioners and medical radiation technologists from 1 July 2012.

The Board will therefore continue, until transition to the national scheme, with administrative and operational support arrangements as at present.

### **Supervised practice program**

The Board operates a Supervised Practice Program (SPP) under section 61 of the Registration Act and Part 3 of the Regulation.

The aim of the program is to provide probationary registrants with the experience, knowledge and conduct

standards required for the practice of the professions. The Board requires all new graduates of prescribed tertiary courses under the Regulation in the professions to undertake the program. Upon commencement, such persons are granted general registration with probationary conditions. They must then complete the equivalent of 48 continuous weeks under the program before becoming eligible for general registration without probationary conditions.

As at 21 June 2010, there were 125 registrants with probationary conditions on the program. They comprised 96 medical imaging technologists, seven nuclear medicine technologists and 22 radiation therapists.

The Board manages the program through its Supervised Practice Program Committee (SPPC) and the AIR/MRT Combined Committee, comprising representatives of the Australian Institute of Radiography (AIR) the Board.

- The Board, through the SPPC, is responsible for the initial approval; monitoring, auditing and ongoing suitability of professional practice settings (that is, places where professional practice is undertaken in Queensland).
- The Combined Committee is responsible for the design, development and approval of the progress and final reports submitted by medical imaging technology and radiation therapy probationary registrants during the course of the program. The Committee also reviews problems with reports or issues which are then raised for consideration by the AIR and the Board. During 2009-10, the progress and final reports were reviewed for currency and accuracy.

The current membership of the SPPC is:

- EJ Andersen (ex-officio) current Board chairperson
- D Kennedy (Committee Chairperson) Board member, medical imaging technology<sup>#</sup>
- T Way (Committee Deputy Chairperson) Industry representative, medical imaging technology
- D Starkey Industry representative, medical imaging technology
- N Biesot Industry representative, radiation therapy
- C Brady Industry representative, radiation therapy
- M Wilson\* Industry representative, nuclear medicine technology
- J Abbott Industry representative, medical imaging technology

The nuclear medicine technology representative was yet to be appointed at time of compiling this report.

The current AIR/MRT committee membership is:

•	T Way	(MI)	MRT Chair
•	N Biesot	(RT)	MRT
•	D Starkey	(MI)	MRT
•	J Kindt	(MI)	AIR Nomination
•	A Dry	(RT)	AIR Nomination
•	A Connell	(MI)	AIR Nomination



<sup>\*</sup> until April 2010 # from May 2010

Ms Francesca Holloway is the Professional Adviser to the Board. Her role includes management of the process of practice audits undertaken by Board appointed auditors. The Professional Adviser is also the facilitator for both the SPPC and AIR/MRT Combined Committee.

The number of sites approved as professional practice settings and their approved probationary registrant position numbers for 2009-10 are:

- 70 medical imaging sites (with 145 approved probationary registrant positions);
- 10 radiation therapy sites (with 38 approved probationary registrant positions); and
- 14 nuclear medicine sites (with 19 approved probationary registrant positions).

# General registration with conditions

In addition to the 125 registrants with probationary conditions (under the Supervised Practice Program), as at 21 June 2010, there were 50 medical radiation technology registrants for whom the Board had granted general registration with conditions. The nature of these conditions includes the following:

- supervisory conditions (these apply to persons who have been out of the workforce for some years or have practised less than one year in total over the past five years);
- registration restricted to mammography, including within the BreastScreen QLD training program;
- registration restricted to ultrasound and mammography under supervision;
- registration restricted to practice in a specific Health District; and
- a specified re-entry program must be completed.

# Research grants and awards program

During 2009-10, the Board awarded the following grants and awards under its Research Grants Policy:

- Scholarship to the value of \$5,000 awarded to Mrs Julie-Anne Outhwaite for the project Immobilisation study in head and neck radiation therapy;
- Research Implementation Grant to the value of \$15,959.00 awarded to Ms Jillian Becker for the project Implementation of a feedback and development resource – radiation therapy;
- Scholarship to the value of \$5,000 awarded to Ms
   Amy Brown for the project Investigation of the
   correlation between body mass index and prostate
   displacement in radiation therapy treatment;
- Published Article Award to the value of \$1,000
   awarded to Ms Huong Nguyen for the article
   The impact of IGRT for prostate radiotherapy on
   dosimetry and the traditional workflow practice of
   focus to skin distance measurements;
- Published Article Award to the value of \$2,000 awarded to Ms Elizabeth Brown for the article

- Conformal external beam radiotherapy in the treatment of anal canal carcinoma; and
- Research Grant to the value of \$10,000 awarded to Mr Gordon Matthew and Ms Devaney Carron for the project To evaluate if timely notification of radiographer described abnormalities improves patient outcomes and clinician satisfaction within Queensland Health Emergency setting.

### Council of Medical Radiation Practitioner Boards Australia and New Zealand (CMRPBANZ) formerly Council of Regulatory Authorities (CORA)

The then Board Chair Mr Wayne Nuss and Professional Adviser Ms Francesca Holloway, attended meetings of the CMRPBANZ on 26 October 2009, 12 February 2010 and 11 and 12 March 2010 in Melbourne.

Major matters discussed at the meeting of 26 October 2009 were:

- Board reports;
- National Registration Steering Committee;
- role of professional associations; and
- the accreditation function.

Major matters discussed at the meeting of 12 February 2010 were:

- policies/guidelines;
- return to practice;
- Continuing Professional Development (CPD);
- accreditation model;
- AIR practice standards, AIR accreditation model and project officer update;
- national standards; and
- Board reports.

Major matters discussed at the meeting of 11 and 12 March 2010 were:

- updated constitution of the Medical Radiation Practitioners Accreditation Authority;
- national registration accreditation model;
- policies / guidelines;
- structure of the Australian Pharmacy Council;
- Accreditation model, NZ Medical Radiation Technologist Board;
- reports from member Boards;
- AIR practice standards, AIR accreditation model and project officer update;
- national standards;
- structure of the Australian Optometry Council and the Australian Physiotherapy Council;
- discussion of the four models;
- responses from AIR to its model for accreditation;
- Medical Radiation Practitioners Accreditation Authority.



### Australian Accreditation Advisory Council of Medical Radiation Practitioner Boards Australia and New Zealand (AAACMRPB)

Matters relating to this were discussed at the CMRPBANZ (see above).

# Information session for final year students

The Board held a breakfast information session on 12 November 2009 for students about to graduate with qualifications in medical imaging technology or radiation therapy.

The information session included guest speakers from the Board, Radiation Health and the Australian Institute of Radiography. Each student was provided with an information pack about the professions and registration.

### **Board academic prizes**

The Board has established student academic prizes in medical imaging technology and radiation therapy in conjunction with the Queensland University of Technology (QUT), which is the only tertiary academic institution currently providing Queensland courses for those professions. As there are currently no Queensland courses in nuclear medicine technology, the Board does not offer academic prizes for that profession.

On 24 May 2010 the Chairperson presented the following student academic prizes:

Jesse Steindl: Prize for medical imaging

Yee Poon: Prize for Radiotherapy

### **Industry Liaison Committee**

The Industry Liaison Committee met on 24 November 2009 at which the following items were discussed:

- amendments to the Medical Radiation Technologists Act 2001;
- liaisons with professional associations;
- National Registration and Accreditation Scheme;
- fitness to practise;
- SPP audit process;
- research policy grants and awards;
- SPP/PDY presentation day; and
- student information and awards breakfast.

#### **Newsletters**

During 2009-10, the Board prepared one newsletter in December 2009 to inform registrants of Board activities and issues relevant to the profession. Major topics covered in the newsletter were:

- from the Chair;
- about the Board;
- on-line renewal and restoration works well;
- presentation day;
- professional practice site audit and re-accreditation;

- graduates' and awards breakfast;
- Council of Regulatory Authorities (CORA);
- advice on technicians/assistants;
- national registration update;
- national law bill enacted in Qld;
- Ministerial Council update;
- 2008-09 registration data;
- 2008-09 professional standards data;
- reminder Board recognises CPD programs;
- profile of a Board member;
- registrant information kit update; and
- Qld Health supports allied health re-entrants.

#### Office submissions

During 2009-10, the Board considered submissions from the Office of Health Practitioner Registration Boards regarding policy options and other matters as follows:

- on-line renewal and e-mail population update;
- mandatory criminal history checking policy;
- criminal history checking guidelines and Queensland Police Service process;
- transitional Office of Health Practitioner Registration Board; and
- Criminal History Screening Bill: Consultation Paper.

# Australian Health Ministers' Advisory Council Stakeholder Forum

On 10 July 2009, current Board Chair Mr John Andersen, and Deputy Chair Dominic Kennedy attended a stakeholder forum on the National Registration and Accreditation Implementation Scheme for health professionals.

The forum was addressed by the Hon Mr Paul Lucas, Deputy Premier and Minister for Health and featured presentations by Dr Andrew Wilson, Deputy Director-General Queensland Health, and by Dr Louise Morauta and Mr Christopher Robertson, both of the National Registration and Accreditation Project.

### Service agreement

During 2009-10, the Board continued to receive services under its service agreement with the Office of Health Practitioner Registration Boards. Under the agreement, the Office will provide administrative and operational support for the Board until 30 June 2010. A new service agreement extending until 31 July 2012 has been endorsed by the Board.

### Strategic plan

During 2009-10, the Board, as required by its current strategic plan for 2007–11, continued preparatory works for the introduction of national registration. These activities are set out in detail in the "Council of Australian Governments: National registration and accreditation" section above.



#### Overseas travel

During 2009-10, no overseas travel was undertaken.

#### **Consultancies**

The Board did not engage any consultants during 2009-10 and consequently had no expenditure on consultancies for the year.

#### **Fees**

The Board's activities are primarily funded through fees payable by registrants in relation to registration. Such fees are exempt from the Goods and Services Tax (GST) under the provisions of Division 81 of the *A New Tax System* (Goods and Services Tax) Act 1999.

As at 30 June 2010, the fees were prescribed under *the Medical Radiation Technologists Registration Regulation 2002* as follows:

Fee type	Amount (\$)
1 Application fee for general registration or special purpose registration for:	
(a) less than five weeks	nil
(b) more than five weeks	115.00
2 Registration fee for general registration or special purpose registration:	
(a) for a period of registration of less than 5 weeks	nil
(a) for a period of registration of more than 5 weeks but not more than 3 months	75.00
(b) for a period of registration of more than 3 months but not more than 6 months	150.00
(c) for a period of registration of more than 6 months but not more than 1 year	298.00
3 Restoration fee	373.00
4 Application for review of conditions	115.00
5 Replacement of certificate of registration	29.00
6 Certified copy of certificate of registration	29.00
7 Copy of the register or part of it - for each page	0.50

#### **Board Code of Conduct**

Under the *Public Sector Ethics Act 1994*, the Board is responsible for establishing a code of conduct for Board members to set the standard of conduct fundamental to good public administration. The Board's *Code of Conduct* is published on the Board's website and all new members are given training in the *Code* during their induction to the Board.

### Statement of Reasons: Judicial Review Act 1991

Under section 32 of the Judicial Review Act 1991, a person

who is aggrieved by an administrative decision is entitled to request from the decision maker a written Statement of Reasons in relation to the decision. The Board did not receive any such requests during 2009-10.

### **Right to Information**

The *Right to Information Act 2009* (RTI Act) gives the community a right to apply for access to documents held by government agencies, including the Medical Radiation Technologists Board of Queensland. The *Information Privacy Act 2009* (IP Act) is related to the RTI Act as it also allows individuals to apply for access or amendment to documents, but only if the documents contain their own personal information. These acts replaced the *Freedom of Information Act 1992* (FOI Act) as at 1 July 2009.

One application for access to documents under the FOI Act was carried over from 2008-09.

Due to the introduction of national registration, the following reporting information is up to 21 May, 2010, rather than the full year to June 30 due to Office commitments to wind up nine Boards that ceased to exist after June 30, 2010.

During the period 1 July 2009 to 21 May 2010, the Board received no applications under the RTI Act and two applications under the IP Act for access to documents. All were finalised by 21 May 2010. There were no applications for amendment of personal information.

The total of three applications processed during the period 1 July 2009 to 21 May 2010 required examination of 443 documents from the Board's records for decision making purposes. Of these, full or partial access was granted to 313 documents.

There were no applications for internal review of decisions on release of documents. The internal review officers of the Medical Radiation Technologists Board are Mr John Andersen in his capacity as Chair of the Medical Radiation Technologists Board of Queensland and Mr Michael Demy-Geroe in his capacity as Executive Officer.

No applications for external review were lodged with the Office of the Information Commissioner (Qld) following decisions on access to Board documents.

Section 201 of the RTI Act and section 18 of the FOI Act require the Board to publish a Statement of Affairs annually, setting out a range of information about the Board, including details of the categories of documents it holds and the arrangements for obtaining access to such documents. That Statement is provided as a supplement at the end of this report.

# Privacy of information held by the Board

During 2009-10, the Queensland Government introduced the *Information Privacy Act 2009* (IP Act) which includes Information Privacy Principles (IPPs) and these are listed in Schedule 3 of the IP Act. A copy of the IP Act can be accessed at www.legislation.qld.gov.au.

The Office of Health Practitioner Registration Boards (the Office) is committed to ensuring that all personal information held is managed with integrity and in accordance with the 11 IPPs and to ensuring that all such "personal information" held in its records is treated with



respect and confidentiality and will not knowingly disclose any "personal information" unlawfully. The Office's *Privacy Plan* outlines the types of personal information collected and stored by the Office.

The *Privacy Plan* applies to the collection, management and use of personal information. The IP Act defines "personal information" as "information or an opinion, including information or an opinion forming part of a database, whether true or not, and whether recorded in a material form or not, about an individual whose identity is apparent, or can reasonably be ascertained".

Examples of personal information include a person's name, address, date of birth or phone number. The IP Act covers information held in paper or electronic records and may extend to body samples or biometric data.

Also listed in the Office's Privacy Plan are:

- the legislation administered by the Board;
- types of personal information held by the Office of Health Practitioner Registration Boards (example client-related records, employee records, financial management systems information);
- registers managed by the Office;
- contractual arrangements with external bodies;
- how long each type of record is kept;
- accessing and amending personal information; and
- complaint and review procedures.

A copy of the *Privacy Plan* can be obtained by:

- writing to the Manager (Records Management),
   Office of Health Practitioner Registration Boards, GPO Box 2438, Brisbane Q 4001; or
- accessing the Board's website at www.healthregboards.qld.gov.au.

# **Information Privacy Principles** (IPPS)

The Information Privacy Principles set out in the IP Act covers collection, storage, use, and disclosure of personal information.

Many of the Principles only require "reasonable" steps to be taken having regard to the circumstances. Factors which will determine the "reasonableness" of steps to be taken will include the sensitivity of the information, the possible uses of the information, the context in which it was obtained, the financial and practicable effects of strategies for compliance, and the continued ability of the business unit to perform its legitimate functions.

The full text of the IPPs is set out in the IP Act and the *Privacy Plan*.

# Annual Report supplement: Statement of affairs and publication scheme

#### Introduction

It is a requirement under section 201 of the *Right to Information Act 2009* and section 18 of the *Freedom of Information Act 1992* that an agency must publish,

at intervals of not more than one year, an up to date statement of the affairs of the agency. In accordance with that section, this supplement contains information not already included elsewhere in this annual report that the Board is required to publish every year about its affairs.

## The effect of the Board's functions on members of the public

During 2009-10, the registration and disciplinary functions of the Board reduced risks to public health and safety by:

- ensuring only appropriately qualified and fit persons were registered; and
- requiring that proper professional standards were maintained by its registrants.

Documents held by the Office during 2009-10 included:

- client-related records;
- employee records;
- information systems records (i.e. databases financial, EDRMS, public registers); and
- other administrative records relating to the management of the Office.

The Board's publication scheme during 2009-10 included:

- policies and guidelines:
  - > Application for published article;
  - Australian Institute of Radiography (AIR)
     Guidelines for professional conduct for radiographers, radiation therapists and sonographers (Board endorsed);
  - > Award for published article;
  - > Code of Conduct for Board members;
  - > English language proficiency;
  - > Registration policy;
  - > Research grants application form;
  - > Research grants guidelines;
  - Research grants implementation grant application form;
  - > Research grants policy;
  - > Research grants research agreement;
  - > Research grants scholarship application form;
  - > Review of registration conditions;
  - > Supervised practice program guidelines; and
  - > Supervised practice program information kit;
- application policies:
  - > Certificates of Registration Status;
  - > Incomplete applications;
  - > Proof of identity;
  - > Reference requirements;
  - > Translation of documents; and
  - > Witnessing and certifying documents;
- criminal history checking:
  - > Criminal history checking overview;
  - > Criminal history checking Applicant policy; and
  - > Criminal history checking Board policy;
- management documents:
  - > Strategic Plan 2007-11; and
  - > Strategic Plan 2003-7;



- Board newsletters: September 2002 to December 2009; and
- annual reports: 2004-05 to 2008-09.

#### Literature available

The following publications are available for inspection and copies may be obtained free of charge:

- current annual report of the Board (including statement of affairs);and
- current bulletins and circulars published by the Board

The current policy documents of the Board are available for inspection on the Internet and copies may be downloaded (see publication scheme details above).

It should be noted, however, that pursuant to section 20(2) of the *Right to Information Act 2009* the Board may delete exempt matter from a copy of any policy document.

The Board does not have any literature available to the public for which a regular subscription is payable or by way of free mailing lists.

# Arrangements to obtain access to documents held by a Board

#### Free of charge documents

These documents may be obtained by written request to the Board. Alternatively, these documents can be inspected at the address of the Office of Health Practitioner Registration Boards:

Level 19, 179 Turbot Street Brisbane QLD 4000

If inspection is sought, advance notice must be given so as to arrange a suitable time for the inspection.

#### **Policy documents**

Copies of the Board's policy documents may be inspected and/or obtained by either a written or telephone request, or by accessing the Board's website.

#### Other documents

The accessibility of other documents held by the Board is subject to the privacy principles. However, the *Right to Information Act 2009* and the *Information Privacy Act 2009* give the community a right of access to documents held by government agencies.

Further details about making an application under the RTI and IP Acts are available on the office's website www. healthregboards.qld.gov.au. Enquiries can be directed to the Administration Officer (RT) on (07) 3234 0143.

### **Summary of financial performance**

The Board funded its activities from its retained surplus funds within an operational budget which showed a surplus at the end of the reporting period.

The Board's funding is fully sourced from monies

received from its registrants, and it receives no funding from elsewhere. The funds are primarily expended on administrative costs such as salaries and accommodation expenses, and also significantly, legal expenses and other costs associated with the boards' professional standards maintenance function. Additionally, the board has established a research grants program consistent with its legislative functions.

Registration fees have been benchmarked at a level adequate to meet the Board's obligations under the legislative scheme for health practitioner regulation. The fees are reviewed and adjusted annually in line with CPI movement. CPI increases of registration fees were approved in April 2010.

The Board conducts its operational activities in a manner calculated to minimize its costs and risks in relation to its liabilities and contingent liabilities. The internal auditors have reported their satisfaction that the current internal controls and systems are acceptable for the size and nature of the Board's operations and that there is a high level of compliance with Board internal controls, policies, procedures and statutory requirements.

### **External scrutiny**

The Queensland Audit Office advised that there were no significant issues arising from their audit. The Boards were not subject to any reports of any parliamentary committees, the Crime and Misconduct Committee or the Coroner.

The Queensland Ombudsman investigated one matter which resulted in a modification to the information obtained and recorded in the Board's Procedure for obtaining an expert opinion, including:

- the basis upon which a person is considered an expert;
- the issues consulted upon; and
- the reasons why the expert's opinion is accepted or rejected in the final investigator's report.

#### **Towards Q2**

The Board contributed to the Government's Q2 aim: Healthy Queensland – Making Queenslanders Australia's healthiest people by having included in their legislative goals the protection of the public by ensuring health care is delivered in a professional, safe and competent way, upholding standards of practice within the professions, and maintaining public confidence in the professions.

# **Whistleblowers Protection Act** 1994

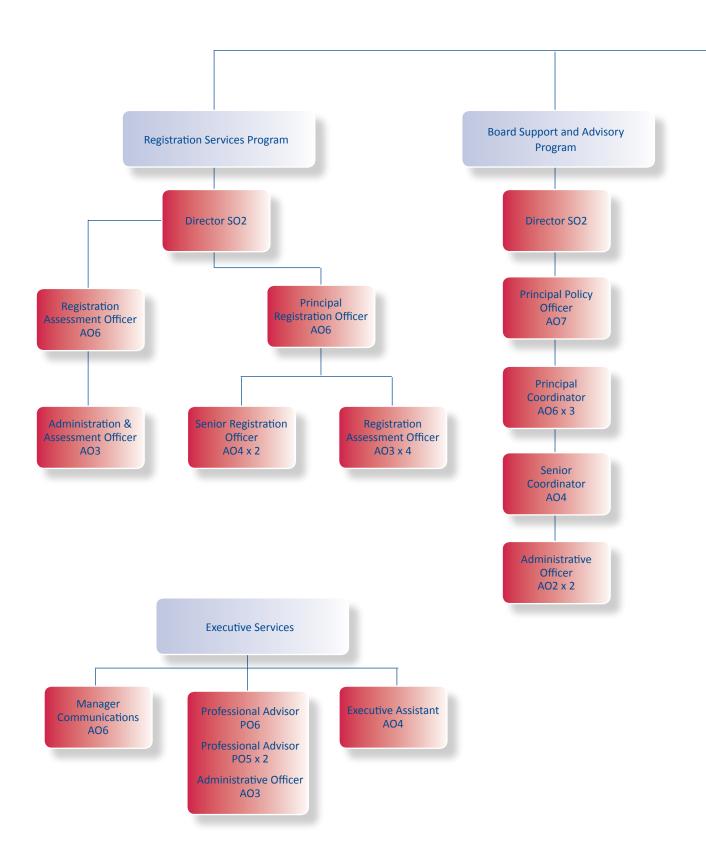
No public interest disclosures were received by the Board during the reporting year.

### Governance - human resources

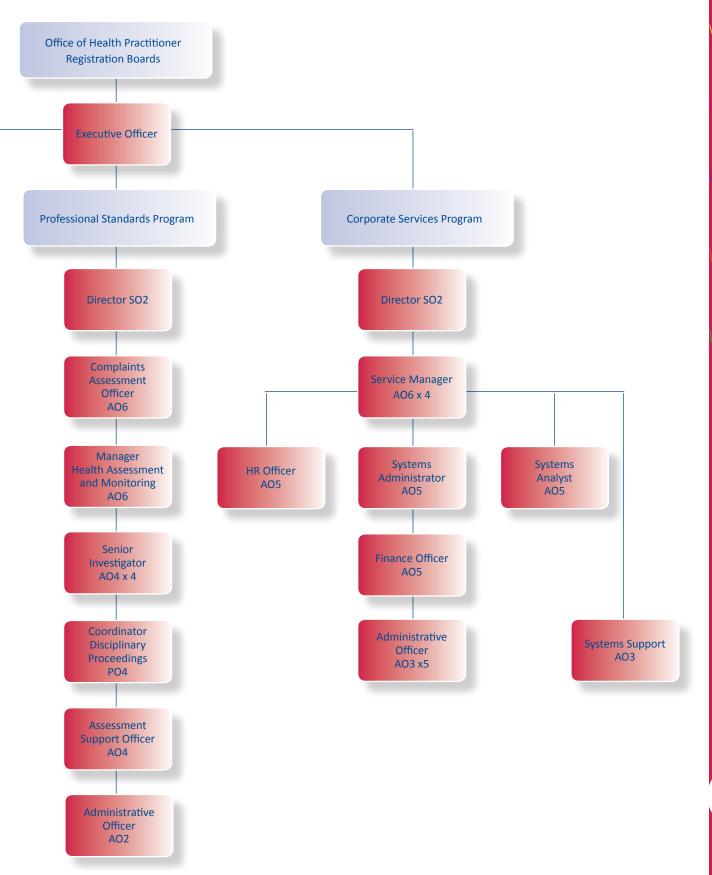
All members of the Board are appointed by the Governor-in-Council, and the Board does not employ any staff directly. All administrative, record keeping, information systems and financial services of the Board are provided by the Office under a service agreement.



# **Organisational chart**













# Financial report for the year ended 30 June 2010

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**Balance sheet** 

Statement of changes in equity

**Cash flow statement** 

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Certificate of the Medical Radiation Technologists Board of Queensland

Independent audit report

#### STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2010

	NOTE	2010 \$	2009 \$
INCOME FROM CONTINUING OPERATIONS		•	•
Registration and other fees Interest revenue Grant income Other revenue	2 -	841,455 64,196 - 247	803,199 90,751 83,250 36,969
Total Income from continuing operations	_	905,898	1,014,169
EXPENSES FROM CONTINUING OPERATIONS			
Administration expenses Service agreement expenditure Grants - Seminars and education Queensland Health - Surplus employee payment	3 4	174,235 516,502 5,000 79,624	174,100 523,111 11,925 -
Total Expenses from continuing operations	_	775,361	709,136
Ooperating results from continuing operations		130,537	305,033
Other comprehensive income	-		
Total Comprehensive Income	_	130,537	305,033



# STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2010

	NOTE	2010 \$	2009 \$
ASSETS		Ψ	<b>.</b>
CURRENT ASSETS Cash and cash equivalents Trade and other receivables Other current assets	5 6 7	1,850,997 - 550	1,669,093 62,663 1,902
TOTAL CURRENT ASSETS		1,851,547	1,733,658
TOTAL ASSETS		1,851,547	1,733,658
LIABILITIES			
CURRENT LIABILITIES Trade and other payables	8	3,841	16,489
TOTAL CURRENT LIABILITIES		3,841	16,489
TOTAL LIABILITIES		3,841	16,489
NET ASSETS		1,847,706	1,717,169
EQUITY Accumulated surplus		1,847,706	1,717,169
TOTAL EQUITY		1,847,706	1,717,169



## STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2010

	2010 \$	2009 \$
ACCUMULATED SURPLUS Balance at the beginning of the year	1,717,169	1,412,136
Operating results from continuing operations	130,537	305,033
Balance at the end of the year	1,847,706	1,717,169



#### STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2010

CASH FLOWS FROM OPERATING ACTIVITIES	NOTE	2010 \$	2009 \$
Inflows:			
Receipts from customers		914,756	931,931
Interest received		64,196	90,751
GST input tax credits from ATO		55,242	57,178
		1,034,194	1,079,860
Outflows:			
Supplies and services		(852,290)	(791,893)
		(852,290)	(791,893)
NET CASH PROVIDED BY OPERATING ACTIVITIES	13	181,904	287,967
NET ONOTHING NOTIFIED		101,004	201,001
Net increase / (decrease) in cash held		181,904	287,967
Cash at the beginning of the financial year		1,669,093	1,381,126
CASH AT THE END OF THE FINANCIAL YEAR	14	1,850,997	1,669,093



## NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### **OBJECTIVES OF THE BOARD**

The Medical Radiation Technologists Board of Queensland is constituted under Section 9 of the Medical Radiation Technologists Registration Act 2001 as a body corporate with perpetual succession. The Board is subject to the provisions of the Health Practitioner Registration Boards (Administration) Act 1999, the Health Practitioners (Professional Standards) Act 1999, the Financial Accountability Act 2009 and the Financial and Performance Management Standard 2009.

The principal objectives of the Board are to protect the public by ensuring health care is delivered by registered practitioners in a professional, safe and competent way, uphold standards of practice within the profession, and maintain public confidence in the profession.

#### NOTE 1 SIGNIFICANT ACCOUNTING POLICIES

#### (a) Basis of accounting

The financial report is a general purpose financial report that has been prepared in accordance with the *Financial Accountability Act 2009*, the *Financial and Performance Management Standard 2009* and Australian Accounting Standards (including Australian Interpretations).

The financial report has been prepared on a going concern basis, under the historical cost convention except where specifically stated. Unless specifically stated, the accounting policies adopted are consistent with those of the previous year.

The accounting policies set out below have been consistently applied to all years presented.

#### (b) Revenue recognition

#### Registration and other fees

Revenue from annual registration fees and other fees are recognised on receipt. Application fees and registration fees are levied in accordance with the *Medical Radiation Technologists Registration Regulation 2002*. Under this legislation, the registration period finishes at 30 June each year. Registrants who do not renew their registration are removed from the Board's register.

#### Interest revenue

Interest revenue is recognised on a time proportionate basis that takes into account the effective yield on the financial asset.

#### Grant revenue

Grants that are non-reciprocal in nature are recognised as revenue in the year in which the Board obtains control over them.

#### (c) Employee benefits

Employee benefits are recognised in the Office of Health Practitioner Registration Boards (OHPRB) financial statements. The Board receives all administrative and operational support from the OHPRB and pays for this support on a bi-annual basis. The Medical Radiation Technologists Board of Queensland has no employees.

#### (d) Accommodation

The Board is located in premises rented by the OHPRB from the Department of Public Works. Accommodation costs are paid by the OHPRB and reimbursed by the Board through a service agreement.



## NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### NOTE 1 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### (e) Cash and cash equivalents

For financial reporting purposes, cash includes all cash at bank, on hand and deposits at call with financial institutions.

#### (f) Trade and other receivables

Trade and other receivables are recognised at the amount due at the time of service delivery. The terms of trade are 60 days from the date of invoice. Collectability of debtors is reviewed on an ongoing basis. A provision for impairment is raised where doubt as to collection exists. Debts which are known to be uncollectable are written off.

#### (g) Acquisition of assets

All asset acquisitions are recorded at cost. Cost is determined as the value given as consideration plus costs incidental to the acquisition, including all other costs incurred in getting the assets ready for use. The carrying amounts of all non-current assets are reviewed at least annually and are not stated at amounts in excess of their recoverable amount.

#### (h) Trade and other payables

Trade and other payables are recognised liabilities for goods and services provided to the Board prior to the end of the financial year and which are unpaid. The amounts are non-interest bearing, unsecured and are normally paid within 30 days of recognition.

#### (i) Taxation

The activities of the Board are exempt from Commonwealth taxation except for Fringe Benefits Tax (FBT) and Goods and Services Tax (GST). GST credits receivable from and GST payable to the Australian Taxation Office are recognised.

#### (j) Insurance

The Board has a WorkCover insurance policy for workers' compensation and Directors and Officers liability insurance for the Board Members.

#### (k) Goods and services tax

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Statement of Financial Position are shown inclusive of GST.

#### (I) Rounding and comparatives

Amounts included in the financial statements are in Australian dollars and have been rounded to the nearest dollar. Where required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

#### (m) Judgements

The Board has made no estimates, assumptions or judgements which may cause material adjustments to the carrying amounts of assets and liabilities within the next reporting period.



#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### NOTE 1 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### (n) Issuance of financial statements

The financial statements are authorised for issue by the Chairperson and the Executive Officer at the date of signing the Management Certificate.

#### (o) Financial instruments

The Board does not enter into transactions for speculative purposes, nor for hedging. Apart from cash and cash equivalents, the Board holds no financial assets classified at fair value through profit or loss. All other disclosures relating to the measurement and financial risk management of financial instruments held by the Board are included in Note 19.

NOTE 2 REGISTRATION & OTHER FEES	2010 \$	2009 \$
Annual registration fees Restoration fees Application fees	787,159 23,424 30,872	746,358 18,054 38,787
	841,455	803,199
NOTE 3 ADMINISTRATION EXPENSES		
General operating expenses Board member expenses Conference expenses - Board Conference expenses - Staff Function costs Investigation expenses Legal expenses	72,908 70,368 3,058 3,699 4,703 665 18,834	70,919 60,531 3,169 5,000 3,592 3,601 27,288
NOTE 4 SERVICE AGREEMENT EXPENDITURE		
Service agreement - Salaries Service agreement - Non-salaries	410,219 106,283	405,304 117,807
	516,502	523,111
NOTE 5 CASH AND CASH EQUIVALENTS		
Cash at bank and on hand At call deposits	1,850,997	179,346 1,489,747
	1,850,997	1,669,093



## NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

NOTE 6 TRADE AND OTHER RECEIVABLES	2010 \$	2009 \$
GST receivable	-	. 867
Other debtors	-	719
Receivable from OHPRB	-	61,077
		62,663
NOTE 7 OTHER CURRENT ASSETS		
Prepayments	550	1,902
NOTE 8 TRADE AND OTHER PAYABLES		
Trade creditors	3,841	7,539
Payable to OHPRB		8,950
	3,841	16,489

#### NOTE 9 KEY MANAGEMENT PERSONNEL COMPENSATION

Names of Board Members who have held office during the financial year are:

John Andersen Abramo Papp (resigned 10/4/2010)
Jennifer Baxter (resigned 10/4/2010) Pamela Rowntree
Clare Endicott Nicole Eastgate (appointed 11/4/2010)
Myrtle Green (resigned 10/4/2010) Tracey Lloyd (appointed 11/4/2010)
Amy Illidge Lisa O'Neill (appointed 11/4/2010)
Dominic Kennedy Virginia Thorley (appointed 11/4/2010)
Catherine McHenry (resigned 10/4/2010)
Wayne Nuss

#### Remuneration of key management personnel for year ended 30 June 2010

Key management personnel comprise the members of the Board whom have authority and responsibility for planning, directing and controlling the activities of the Board. The remuneration paid to the Board Members are in the nature of short-term employee benefits and consist of meeting fees which are set by Governor in Council. In addition, Board Members may be reimbursed travel and accommodation costs incurred in the course of their duties as members of the Board.

Total short-term employee benefits paid, to all Board Members during the year was \$47,556 (2009: \$43,919). No other benefits were paid to or accrued by Board Members.

#### Transactions with Board Members as Registrants

The Board Members who are Registrants, paid registration fees to the Board which are within normal Registrants' relationships, on terms and conditions no more favourable than those which it is reasonable to expect would have been adopted if dealing with the Board Member at arm's length, in the same circumstances.



#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### NOTE 10 COMMITMENTS

The Board had no commitments of a significant nature at 30 June 2010.

#### **NOTE 11 CONTINGENT ASSETS**

The contingent asset amount is based on estimates by the Board's legal advisers of what would be receivable if the Board, as plaintiff, were to be successful in matters before the Health Practitioners Tribunal and have the Board's costs reimbursed by the defendant. As at 30 June 2010, the Board had no potential contingent assets.

#### **NOTE 12 CONTINGENT LIABILITIES**

Part of the normal business of the Board involves engaging in legal proceedings which, if unsuccessful, may result in costs being awarded against the Board. The members of the Board believe there are no such matters which are likely to result in a liability of the Board.

NOTE 13 CASH FLOW INFORMATION	2010 \$	2009 \$
Reconciliation of Net surplus / (deficit) to $\eta \not= t$ cash provided by operating activiti	es:	
Net surplus / (deficit)	130,537	305,033
Change in assets and liabilities		
(Increase) / Decrease in receivables	62,663	(3,950)
(Increase) / Decrease in prepayments	1,352	(1,107)
Increase / (Decrease) in payables	(12,648)	(12,010)
Net cash (used) / provided by operating activities	181,904	287,966
NOTE 14 RECONCILIATION OF CASH AND CASH EQUIVALENTS		
For the purpose of the Statement of Cash Flows, the Board considers cash to bank, and liquid investments. Cash at the end of the reporting period is recond Statement of Financial Position as follows:		
Cash at bank At call deposits	1,850,997	179,346 1,489,747
	1,850,997	1,669,093

#### NOTE 15 RELATED PARTY TRANSACTIONS

The Board paid expenses related to a service agreement with OHPRB amounting to \$516,502 (2009: \$523,111).



#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### **NOTE 16 CORPORATE INFORMATION**

Principal Place of Business and Registered Office until 30 June 2010: Level 8, Forestry House, 160 Mary Street, BRISBANE QLD 4000

No of Employees: 2010: Nil (2009: Nil).

#### **NOTE 17 AUDITOR'S REMUNERATION**

The auditor's remuneration is not directly paid by the Board. Remuneration is paid through a service level agreement with OHPRB (the service provider). For details of auditor's remuneration for the year ended 30 June 2010 refer to OHPRB's Financial Statements.

#### NOTE 18 NEW AND REVISED ACCOUNTING STANDARDS

Certain new accounting standards and interpretations have been published that are not mandatory for 30 June 2010 reporting periods. The Board has decided against early adoption of these standards. The Board's assessment of the impact of these new standards and interpretations is set out below:

AASB 9 Financial Instruments and AASB 2009-11 Amendments to Australian Accounting Standards arising from AASB 9 (effective from 1 January 2013)

Addresses the classification and measurement of financial assets and is likely to affect the
accounting for financial assets. AASB 9 only permits the recognition of fair value gains and losses
in other comprehensive income if they relate to equity investments that are not held for trading.

Revised AASB 124 Related Party Disclosures and AASB 2009-12 Amendments to Australian Accounting Standards (effective from 1 January 2011)

The amendment removes the requirement for government-related entities to disclose details of all
transactions with the government and other government-related entities and clarifies and simplifies
the definition of a related party. The amendment must be applied retrospectively.

The revised standard(s) and amendments are not expected to have a significant impact on the Board.

All other Australian accounting standards and interpretations with future commencement dates are either not applicable to the Board or have no material impact on the Board.



#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### **NOTE 19 FINANCIAL INSTRUMENTS**

The main risks arising from the Board's financial instruments are interest rate risk, credit risk and liquidity risk. The Board uses different methods to measure different types of risk to which it is exposed. These methods include sensitivity analysis in the case of interest rate risks and ageing analysis for credit risk. The Board reviews and approves policies for managing each of these risks to maintain a consistent level of quality across the Board which includes the minimisation of risk. The policies for managing each of the Board's risks are summarised below and remain unchanged from the prior year.

The Board holds the following financial instruments:

Financial assets	2010 \$	2009 \$
Cash and cash equivalents	1,850,997	1,669,093
Trade and other receivables	_	62,663
	1,850,997	1,731,756
Financial liabilities		
Trade and other payables	3,841	16,489

#### Credit risk

Credit risk is the risk of financial loss to the Board if a member or counterparty to a financial instrument fails to meet its contractual obligations, and arises principally from the Board's receivables from members.

The maximum exposure to credit risk at the reporting date is the carrying amount of the financial assets as summarised above.

Management has a credit policy in place and the exposure to credit risk is monitored on an ongoing basis. Credit evaluations are performed on all members requiring credit over a certain amount. The Board does not require collateral in respect of financial assets. Investments are allowed only in liquid securities and only with counterparties that have a credit rating equal to or better than an approved rating. There are no significant concentrations of credit risk within the Board.

The ageing of the Board's trade receivables at the reporting date was:

	2010 \$ Gross	2009 \$ Gross
Not past due (current)	-	62,663
Past due (30 day ageing)	· <u>-</u>	-
Past due (31 - 60 day ageing)	-	-
Past due (60+ day ageing)	_	<u>-</u>
	-	62,663

Based on historic default rates, the Board believes that no impairment allowance is necessary in respect of receivables not past due or past due by up to 60 days. For those receivables outstanding more than 60 days each debtor has been individually analysed and a provision for impairment established accordingly as necessary.



#### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2010

#### **NOTE 19 FINANCIAL INSTRUMENTS (CONTINUED)**

#### Liquidity risk

Liquidity risk is the risk that the Board will not be able to meet its financial obligations as they fall due. Prudent liquidity risk management implies maintaining sufficient cash and marketable securities and the availability of funding through an adequate amount of committed credit facilities. Due to the dynamic nature of the underlying businesses, the Board aims to maintain flexibility in funding by keeping sufficient committed credit lines available to meet the Board's requirements.

The following are the contractual maturities of financial liabilities, including estimated interest payments and excluding the impact of netting agreements:

30 June 2010	Carrying amount \$	Contractual cash flows \$	Less than 1 year \$	1 - 5 years \$	Over 5 years \$
Non-derivative financial liabilities					
Trade and other payables	3,841	3,841	3,841		
30 June 2009	Carrying amount \$	Contractual cash flows	Less than 1 year \$	1 - 5 years \$	Over 5 years \$
Non-derivative financial liabilities Trade and other payables	16,489	16,489	16,489	·	

#### Market risk

#### (a) Foreign exchange risk

Foreign exchange risk arises when future commercial transactions and recognised assets and liabilities are denominated in a currency that is not the entity's functional currency. The Board is not exposed to foreign exchange risk.

#### (b) Interest rate risk

The Board manages its exposure to interest rate fluctuation by continuously monitoring its debt and interest cover ratio to ensure any significant movement would not have a material impact on the performance of the Board The Board does not engage in any significant transactions which are of a speculative nature.

At the reporting date the interest rate profile of the Board's interest-bearing financial instruments was:

#### Board

Dourd	30 June 2010		30 June 2009		
	Effective		Effective		
	interest rate	Balance \$	interest rate	Balance \$	
Variable rate instruments					
Cash assets	1.02%	1,850,997	3.11%	1,669,093	

#### Interest rate sensitivity

The Board has quantified the impact on the 30 June 2010 and 30 June 2009 of a +/-50 basis points change in interest rates and determined that there would be no material impact on the surplus for those years.

#### Fair values

The carrying values of financial assets and liabilities are assumed to approximate their fair values due to their relatively short-term nature.



## CERTIFICATE OF MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

This general purpose financial report has been prepared pursuant to section 62(1)(a) of the *Financial Accountability Act 2009* (the Act), the *Financial and Performance Management Standard 2009* and other prescribed requirements. In accordance with section 62(1)(b) of the Act we certify that in our opinion:

- 1 (a) the prescribed requirements for establishing and keeping the accounts have been complied with in all material respects; and
  - (b) the statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, of the transactions of the Medical Radiation Technologists Board of Queensland for the financial year ended 30 June 2010, and of the financial position of the Board at the end of the year.

In the Board's opinion, there are reasonable grounds to believe that the Medical Radiation Technologist Board of Queensland will be able to pay its debts as and when they become due and payable.

Michael Demy-Geroe Executive Officer

Date: 27/08/10

Jóhn Andersen Chairperson

Date: 27/08/10



#### INDEPENDENT AUDITOR'S REPORT

To the Medical Radiation Technologists Board of Queensland

#### Report on the Financial Report

I have audited the accompanying financial report of the Medical Radiation Technologists Board of Queensland which comprises the statement of financial position as at 30 June 2010, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and certificates given by the Executive Officer and the Chairperson.

The Board's Responsibility for the Financial Report

The Board is responsible for the preparation and fair presentation of the financial report in accordance with prescribed accounting requirements identified in the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*, including compliance with Australian Accounting Standards (including the Australian Accounting Interpretations). This responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

#### Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on the audit. The audit was conducted in accordance with the *Auditor-General of Queensland Auditing Standards*, which incorporate the Australian Auditing Standards. These auditing standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of risks of material misstatement in the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control, other than in expressing an opinion on compliance with prescribed requirements. An audit also includes evaluating the appropriateness of accounting policies and the reasonableness of accounting estimates made by the Board, as well as evaluating the overall presentation of the financial report including any mandatory financial reporting requirements as approved by the Treasurer for application in Queensland.

I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my audit opinion.

#### Independence

The Auditor-General Act 2009 promotes the independence of the Auditor-General and all authorised auditors. The Auditor-General is the auditor of all Queensland public sector entities and can only be removed by Parliament.



The Auditor-General may conduct an audit in any way considered appropriate and is not subject to direction by any person about the way in which audit powers are to be exercised. The Auditor-General has for the purposes of conducting an audit, access to all documents and property and can report to Parliament matters which in the Auditor-General's opinion are significant.

#### Auditor's Opinion

In accordance with s.40 of the Auditor-General Act 2009 -

- I have received all the information and explanations which I have required; and
- in my opinion
  - the prescribed requirements in respect of the establishment and keeping of accounts have been complied with in all material respects; and
  - (ii) the financial report has been drawn up so as to present a true and fair view, in accordance with the prescribed accounting standards of the transactions of the Medical Radiation Technologists Board of Queensland for the financial year 1 July 2009 to 30 June 2010 and of the financial position as at the end of that

(as Delegate of the Auditor-General of Queen

Queensland Audit Office

Brisbane



#### INDEPENDENT AUDITOR'S REPORT

To the Medical Radiation Technologists Board of Queensland

#### Matters Relating to the Electronic Presentation of the Audited Financial Report

The auditor's report relates to the financial report of the Medical Radiation Technologists Board of Queensland for the financial year ended 30 June 2010 included on the Medical Radiation Technologists Board of Queensland's website. The Board is responsible for the integrity of the Medical Radiation Technologists Board of Queensland's website. I have not been engaged to report on the integrity of the Medical Radiation Technologists Board of Queensland's website. The auditor's report refers only to the statements named below. It does not provide an opinion on any other information which may have been hyperlinked to/from these statements. If users of the financial report are concerned with the inherent risks arising from electronic data communications they are advised to refer to the hard copy of the audited financial report, available from the Medical Radiation Technologists Board of Queensland, to confirm the information included in the audited financial report presented on this website.

These matters also relate to the presentation of the audited financial report in other electronic media including CD Rom.

#### Report on the Financial Report

I have audited the accompanying financial report of the Medical Radiation Technologists Board of Queensland which comprises the statement of financial position as at 30 June 2010, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and certificates given by the Executive Officer and the Chairperson.

The Board's Responsibility for the Financial Report

The Board is responsible for the preparation and fair presentation of the financial report in accordance with prescribed accounting requirements identified in the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*, including compliance with Australian Accounting Standards (including the Australian Accounting Interpretations). This responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

#### Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on the audit. The audit was conducted in accordance with the *Auditor-General of Queensland Auditing Standards*, which incorporate the Australian Auditing Standards. These auditing standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance whether the financial report is free from material misstatement.



An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of risks of material misstatement in the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control, other than in expressing an opinion on compliance with prescribed requirements. An audit also includes evaluating the appropriateness of accounting policies and the reasonableness of accounting estimates made by the Board, as well as evaluating the overall presentation of the financial report including any mandatory financial reporting requirements as approved by the Treasurer for application in Queensland.

I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my audit opinion.

#### Independence

The Auditor-General Act 2009 promotes the independence of the Auditor-General and all authorised auditors. The Auditor-General is the auditor of all Queensland public sector entities and can only be removed by Parliament.

The Auditor-General may conduct an audit in any way considered appropriate and is not subject to direction by any person about the way in which audit powers are to be exercised. The Auditor-General has for the purposes of conducting an audit, access to all documents and property and can report to Parliament matters which in the Auditor-General's opinion are significant.

#### Auditor's Opinion

In accordance with s.40 of the Auditor-General Act 2009 -

- (a) I have received all the information and explanations which I have required; and
- (b) in my opinion -
  - the prescribed requirements in respect of the establishment and keeping of accounts have been complied with in all material respects; and
  - (ii) the financial report has been drawn up so as to present a true and fair view, in accordance with the prescribed accounting standards of the transactions of the Medical Radiation Technologists Board of Queensland for the financial year 1 July 2009 to 30 June 2010 and of the financial position as at the end of that year.

J F Welsh FCPA

(as Delegate of the Auditor-General of Que

AUG 2010

Queensland Audit Office Brisbane



# **Notes**



# **Notes**



