



New Zealand
**Medical Radiation
Technologists Board**
Te Poari Ringa Hangarua Iraruke



Annual Report

2018

Throughout this report:

MIT: Medical Imaging Technologist

RT: Radiation Therapist

MRIT: Magnetic Resonance Imaging Technologist

NMT: Nuclear Medicine Technologist

Son: Sonographer

T-Scopes: Includes all training scopes of practice

REA: Registration Examination Assessment

the Health Practitioners Competence Assurance Act 2003 is referred to as the Act
the New Zealand Medical Radiation Technologists Board is referred to as the Board.

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For the year ended 31 March 2018

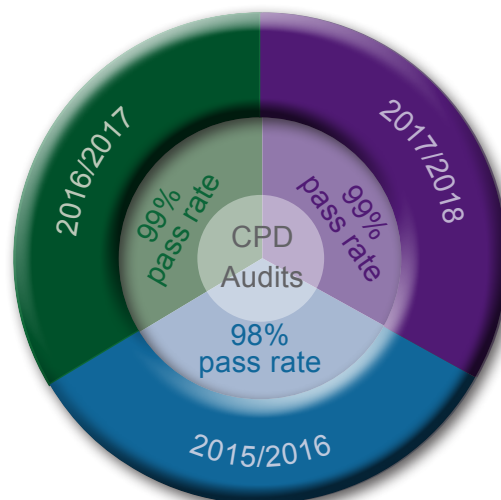
Numbers at a Glance

3268
APC's Issued

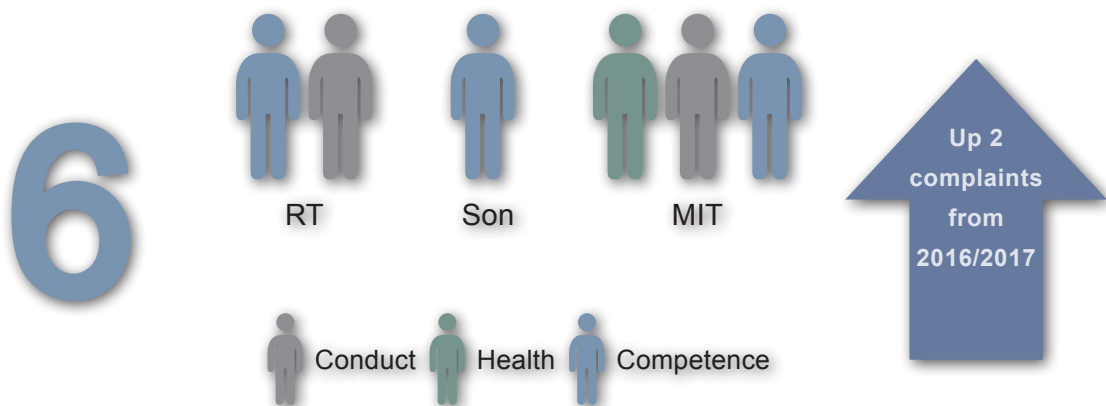
Up 141
APC's
from
2016/2017

298
New Registrants

Down
47 from
2016/2017



Notifications Received



114



Overseas Registered

From the Chair and Chief Executive

We are pleased to present the 2017/2018 report of the New Zealand Medical Radiation Technologists Board (the Board) who regulate practitioners performing medical imaging, radiation therapy, ultrasound, magnetic resonance and nuclear medicine.

The Board and secretariat had a busy 2017/18 with several significant projects showing considerable progress. The Board published its revised standards for CPD and the first Board audit based on these standards will take place in 2018. The Board went to consultation for a fees review and have initiated a fee increase for the 2018-19 APC year. Of note, this was the first practitioner fee increase in 10-years.

We invested in IT developments to support the rollout of an online examination in 2018-19. This includes an online pre-registration process, available from late-2018/early 2019. In addition, a review of the online registration application process resulted in an added function to assist applicants to electronically submit their supporting documents.

We published a consultation on the policy and guidelines of the online examination for overseas registration applications with non-equivalent academic qualifications. The final policy document is scheduled for publication later in 2018. March 2018 saw the first workshop for question writers and exam committee members with all scopes of practice being well represented. The Board has started working with the required software to manage the online examination.

We continue to manage our daily business and have seen several policy reviews undertaken during this period. An increase in applications from overseas registrants has added to the Board and secretariat workload, however all was managed in a timely manner. There were six notifications received during this period. We have undertaken three accreditation reviews these being for prescribed qualifications provided by the University of Auckland, University of Otago, and Unitec.

Members from the Board have attended the NZIMRT, ANZSNM and Radiology Managers conferences throughout the year. This representation is a large part of engaging with our stakeholders. The Board continues to meet every two-months in Wellington.

The secretariat continued business as usual while under challenging circumstances. The first in respect of accommodation, involved two physical moves within a six-month period as an aftermath of the 2016 Kaikoura earthquake. Due to remediation work MSS were required to vacate their office premises. While that remediation work was completed at the end of 2017, an independent engineering report identified a separate issue in terms of a potential health and safety risk associated with the building's construction. The secretariat is settled in alternative temporary accommodation while

negotiations continue in respect of a potential return to the accommodation we shared with a number of other regulatory authorities.

The situation with our accommodation has resulted in an extended period of additional costs in terms of lease obligations, however we expect to be able recoup at least a percentage of those costs through our business continuity insurance cover. At the time of writing this report it is unknown as to when the situation with our shared accommodation will be resolved, however the collective regulatory authorities are taking a proactive approach to bring this to resolution as soon as possible.

The second challenge is due to recent demolition work being carried out on the building next to the secretariat's current accommodation, resulting in relocation of a number of Board meetings and staff working remotely due to noise pollution. Despite these challenges the secretariat managed the APC renewal cycle with minimal disruption.

2017/18 saw the secretariat undertake an organisational review, resulting in the separation of the Chief Executive and Registrar roles. Mary Doyle remains as the Chief Executive and we welcomed Margaret Steel to the Registrar role. From the Chair's seat and on behalf of the Board, I would like to record our appreciation of Mary Doyle's abilities to keep the secretariat team together through the above changes and are pleased to have her professionalism now focused on strategic roles and planning for the future.

The Board would like to thank the secretariat staff for continuing throughout the major accommodation disruptions and allowing business as usual to continue with relative ease. We would like to thank Beryl Kelly (Board member) for her guidance through a very busy period of registrations and REA's while the secretariat was short staffed.

Megan Campbell (lay member) and Angela Slocombe (MRI) left the Board during the 2017/18 year and our thanks for their time and work they put in, particularly Megan for her involvement in the scope of practice review project. Replacing Megan and Angela we welcomed Anthony Bow (lay member) and Peter Dooley (MRI).

We acknowledge our Board members for their ongoing support through building moves and disruptions and for their time, dedication and expertise throughout the year.

Finally we thank all practitioners involved in REA's, assessments, supervision, committees and workshops.



Prue Lamerton
Chair



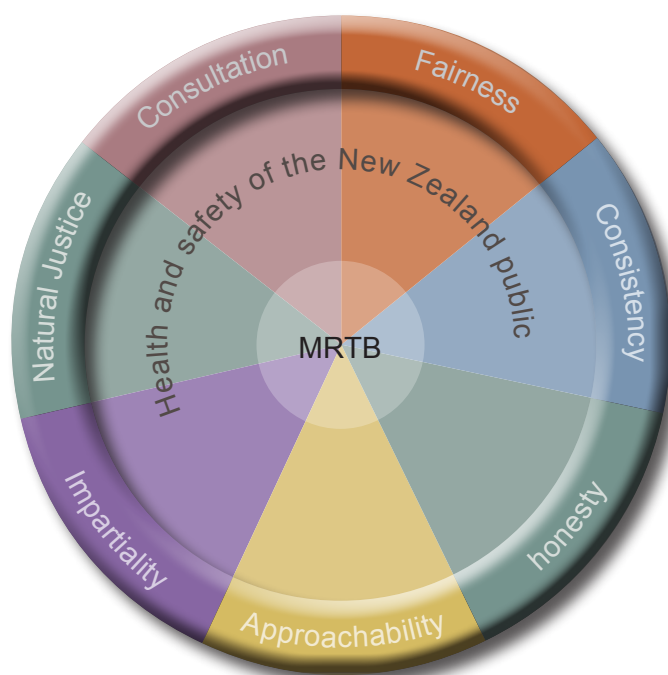
Mary Doyle
Chief Executive

The MRT Board

The Medical Radiation Technologists Board (the Board) is one of 16 New Zealand health regulatory authorities appointed by the Minister of Health under the Health Practitioners Competence Assurance Act 2003 (the Act). The Board is responsible for the administration of the Act in respect of the profession of medical radiation technology (encompassing the practices of medical imaging and radiation therapy).

The Board provides practitioners with a framework for the delivery of safe medical imaging and radiation therapy services to the New Zealand public.

The environment the Board operates within helps to determine its strategic direction. The Board works within an ever-changing environment that is subject to a number of influences including economic, political, social and technological.



Board role and Functions





The primary responsibility of the Board is to protect the health and safety of the New Zealand public by ensuring practitioners registered in the profession of medical imaging and radiation therapy are competent and fit to practise.

The Board has a number of functions defined by section 118 of the Act:

- Prescribe required qualifications for scopes of practice within the profession, and for that purpose, accredit and monitor educational institutions and programmes.
- Authorise the registration of medical imaging and radiation therapy practitioners, and maintain registers.
- Consider applications for annual practising certificates.
- Review and promote the competence of medical imaging and radiation therapy practitioners.
- Recognise, accredit, and set programmes to ensure on-going competence of medical imaging and radiation therapy practitioners.
- Receive and act on information from health practitioners, employers, and the Health and Disability Commissioner about the competence of medical imaging and radiation therapy practitioners.
- Notify employers, the ACC, the Director-General of Health, and the HDC when the practice of a medical imaging or radiation therapy practitioner may pose a risk of harm to the public.
- Consider cases of medical imaging and radiation therapy practitioners who may be unable to perform the functions required for their relevant scope of practice.
- Set the standards of clinical competence, cultural competence, and ethical conduct to be observed by the profession.
- Liaise with other authorities appointed under the Act about matters of common interest.
- Promote education and training in the profession.
- Promote public awareness of the responsibilities of the Board.

Board Members






Board members are appointed by the Minister of Health for up to a three-year term, and are eligible to apply for re-appointment to serve a maximum of three consecutive three-year-terms (nine-years).

		Term commenced	Term renewed	Term due to be completed
	Prue Lamerton Chair Nuclear Medicine Technologist	2010	2013; 2015	2018
	Dr Rosanne Hawarden Deputy Chair Lay Member	2010	2013; 2016	2019
	Anthony Bow Lay Member	2017		2020
	Peter Dooley Magnetic Resonance Imaging Technologist	2017		2020

Retired Members:

Angela Slocombe (February 2014 - April 2017)

Megan Campbell (July 2010 - June 2017)

	Term commenced	Term renewed	Term due to be completed
 Beryl Kelly Medical Imaging Technologist	2011	2014; 2017	2020
 Lizzie Macaulay Medical Imaging Technologist	2016		2019
 Sue McKenzie Lay Member	2010	2013; 2016	2018
 Billie Mudie Radiation Therapist	2015		2018
 Louise Tarr Sonographer	2015		2018

Board Meetings and Fees

	11 th Apr 2017	29 th Jun 2017	30 th Aug 2017	11 th - 12 th Oct 2017	14 th Dec 2017	28 th Feb - 01 st Mar 2018
<i>Prue Lamerton</i>	✓	✓	✓	✓	✓	✓
<i>Dr Rosanne Hawarden</i>	✓	✓	✓	✓	Apologies	✓
<i>Angela Slocombe</i>	Apologies	Term completed				
<i>Anthony Bow</i>	Term commenced August 2017		✓	✓	✓	✓
<i>Beryl Kelly</i>	✓	✓	✓	✓	Apologies	✓
<i>Billie Mudie</i>	✓	✓	Apologies	✓	✓	✓
<i>Lizzie Macaulay</i>		✓	✓	✓	✓	✓
<i>Louise Tarr</i>	✓	✓	✓	✓	✓	✓
<i>Megan Campbell</i>	✓	✓	Term completed			
<i>Peter Dooley</i>	✓	✓	Apologies	✓	✓	✓
<i>Sue McKenzie</i>	Apologies	✓	✓	✓	✓	✓

Position	Fee
Chairperson	\$31,680 annual honorarium
Board Member	\$660 day / \$82.50 hour

Board Committees

The Board has a number of standing committees who have delegated authority to oversee many of the on-going functions of the Board as well as progressing specific business improvement initiatives as set out in the Board's Strategic Directions 2017 - 2022 document. Committee membership was as follows:

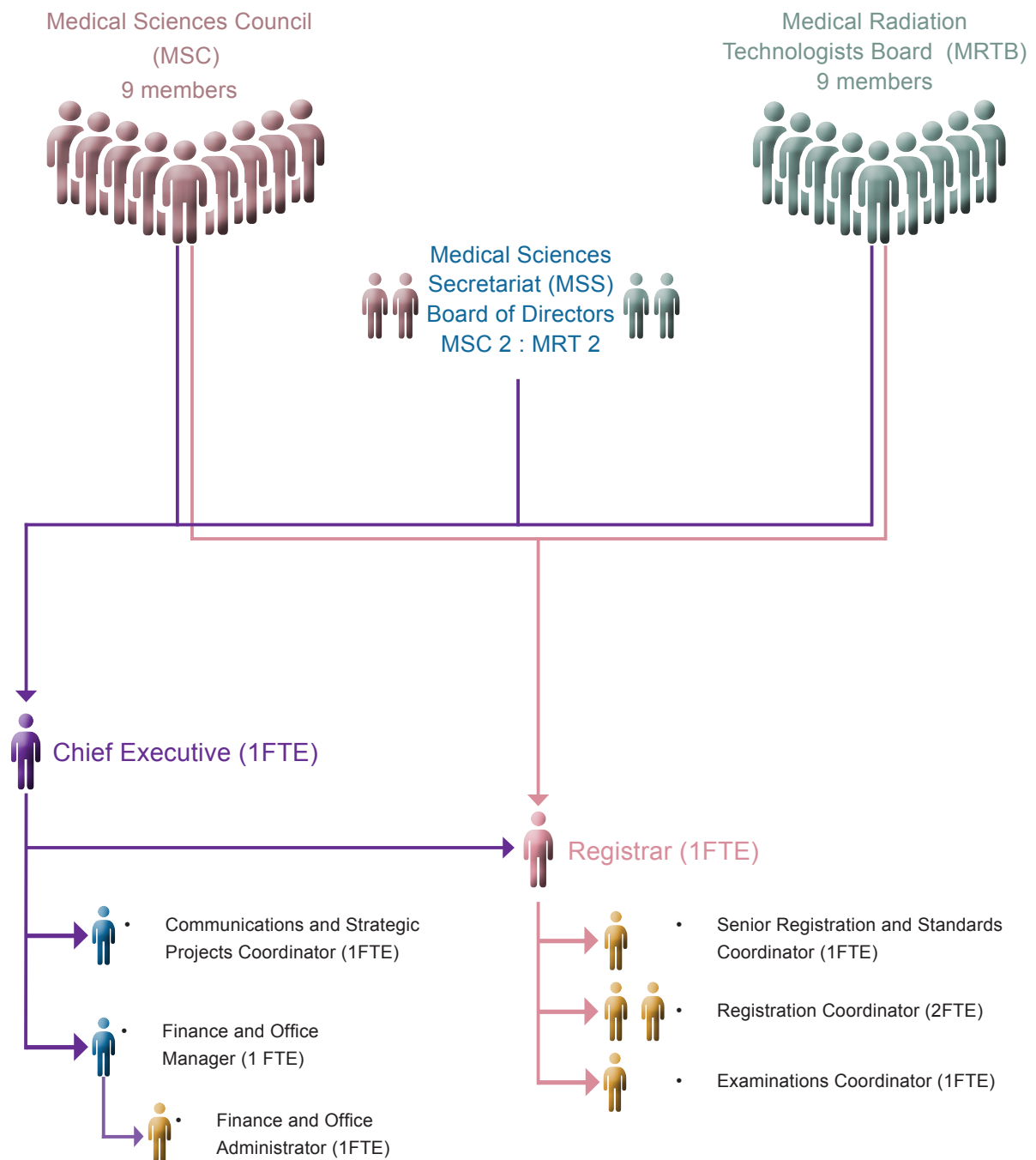
Committee	Membership	
Audit and Registration Examination Assessment Committee	Beryl Kelly Billie Mudie Prue Lamerton	
Education Committee	Sue McKenzie Louise Tarr Lizzie Macaulay	
Finance, Audit and Risk Committee	Dr Rosanne Hawarden Beryl Kelly Prue Lamerton	Anthony Bow (from December 2017)
Registrations and Practising Certificate Committee	Beryl Kelly Billie Mudie Lizzie Macaulay	Louise Tarr Peter Dooley Prue Lamerton
Professional Standards	Billie Mudie Sue McKenzie Prue Lamerton	
Online Examinations Committee	Billie Mudie Beryl Kelly Prue Lamerton Jayne Lloyd	Jacob Cameron Megan Campbell Nick Connolly Shelley Park

Secretariat

The Board works very closely with the Medical Sciences Council with whom they set up a jointly-owned company, Medical Sciences Secretariat (MSS).

MSS provides both regulatory authorities with business support services across all regulatory and corporate functions. This partnership arrangement has allowed the Board and the Council to contain costs and achieve operational synergies including consistency in the formulation and delivery of health regulation policy.

A number of staff changes were made to the MSS team in late 2017, with the separation of the Chief Executive / Registrar role, a disestablishment of the Deputy Registrar role and new roles of a Senior Registration and Standards Coordinator and an Examination Coordinator.



Strategic Priorities and Goals

The Medical Radiation Technologists Board Strategic Directions 2017-2022 document sets out the strategic goals and activities the Board plans to undertake during that five-year period. The document is a critical planning tool that sets a foundation upon which the Board fulfills its responsibilities under the HPCA Act (2003) in respect of the profession of medical radiation technology (encompassing the practices of medical imaging and radiation therapy). The document is reviewed each successive year.

A copy of the Board's Strategic Directions document can be downloaded from its website at www.mrtboard.org.nz



Priorities

To protect the health and safety of the public through the implementation of mechanisms that ensure medical imaging and radiation therapy practitioners are competent and fit to practise.

Strategic Priority	Strategic Goal
<i>STANDARDS</i>	Appropriate and sustainable standards of clinical competence, cultural competence, and ethical conduct for the protection of public health and safety
<i>Practitioner Competence</i>	Our regulatory frameworks support a competent and flexible workforce both in the short and long term
<i>ACCOUNTABILITY</i>	Strengthen our engagement with stakeholders and their confidence in the work of the Board.
<i>ORGANISATIONAL PERFORMANCE</i>	There are strong governance and organisational structures and robust practices in place to support the Board in achieving our legislative functions and responsibilities

Strategic Directions 2017-2022 reflects the scope of the Board's responsibilities and identifies key strategies and initiatives the Board plans to undertake

Objectives and Outcomes

STANDARDS

Strategic Objectives

1. Competence and ethical conduct standards continue to be current and relevant
2. Medical imaging and radiation therapy practitioners are cognisant of the purpose and content of the Board's competence and ethical conduct standards and comply with these
3. Relevant stakeholders (employers, educators, professional bodies) are cognisant of the purpose and content of the Board's competence and ethical conduct standards

2017/2018 Outcomes

- The Board's Chief Executive is an invited member of the Stakeholder Advisory Committee for the Australian Sonographers Accreditation Registry (ASAR) which facilitates ongoing communication in relation to Trans-Tasman sonography practice.
- The Board reviewed the framework for the assessment of overseas qualifications to align with the revised competence standards which were published in March 2017. An updated qualification assessment framework will be implemented later in 2018
- In conjunction with the Medical Sciences Council the Board established a joint Professional Conduct Committee for drink-drive conviction investigations

Practitioner Competence

Strategic Objectives

1. The Board's recertification standards are appropriate, relevant and proportionate to support practitioners with achieving lifelong competence
2. There are appropriate and sustainable processes in place to support the Board's recertification strategies

2017/2018 Outcomes

- The Board published a revised set of recertification (CPD) standards for medical imaging and radiation therapy practitioners in March 2017. Further work was undertaken during 2017 to bed-down the processes and tools to support the revised CPD framework. This included liaising with professional bodies who revised their programmes to ensure alignment with the Board's revised standards.
-

ACCOUNTABILITY

Strategic Objectives

1. The public understands the role and responsibilities of the Medical Radiation Technologists Board
2. Medical imaging and radiation therapy practitioners understand the role of the Board in regulating their profession
3. Other stakeholders understand the role of the Board

2017/2018 Outcomes

- The Board initiated planning to host a forum with education providers, scheduled for June 2018.
 - The Board had scheduled to undertake a review of the register to ensure currency and accuracy. Due to the impact of resourcing issues and the ongoing issues with the secretariat's accommodation, this has been rescheduled to later in 2018.
-

ORGANISATIONAL PERFORMANCE

Strategic Objectives

1. The Board's governance model is enabling, effective, and efficient
2. Policies and processes are current, relevant, and effective
3. Organisational systems support the efficient and effective delivery of our legislative functions
4. The Board has the necessary capabilities to deliver our strategic priorities
5. There is a robust framework for measuring the Board's performance

2017/2018 Outcomes

- The Board has refined their risk management reporting framework ensuring risk management policy and guidelines are current and the Risks Register is regularly revised and updated.
- A public consultation was held in respect of a review of practitioner fees. A revised schedule of fees was subsequently gazetted to take effect from February 2018. This was the first fees increase within the previous ten-years.
- The establishment of an information and records management system, inclusive of a dedicated cloud-based site for storing organisation documents is in progress.
- It was planned to invest in an IT quality improvement project to aid the collection of practitioner demographic data to better inform workforce issues. This project was delayed until 2018 to allow for other IT developments which included:
 - Introduction of an online pre-registration process
 - Enhancements to the online APC application process.

ONLINE EXAMINATION

- The Board has undertaken preparation work for the introduction of an online examination for overseas-trained practitioners with a non-equivalent qualification but significant clinical experience.
- Personnel and IT infrastructures were reviewed and subsequent changes made to improve the sustainability of administration systems and processes required to support the online examination and qualification assessment process.
- Content writers have been recruited and the first training day was held in March 2018.
- An Examinations Committee was established to review the content of the exams and the first meeting is scheduled for July 2018.

OTHER WORK TO SUPPORT PLANNED BUSINESS GOALS

- A review of all MSS staffing positions was undertaken in 2017. In addition to supporting the new registration processes (online exam and qualification assessments), the review acknowledged the high level of risk associated with the degree of dependence on the Chief Executive / Registrar position. Following a comprehensive consultation process with the staff team, a new structure was implemented, with the disestablishment of three positions and the creation of three new positions. The new structure resulted in a separation of the Chief Executive and Registrar roles with the incumbent remaining in the Chief Executive position. A new Registrar has been employed to provide support to both the Medical Radiation Technologists Board and the Medical Sciences Council in respect of technical application of the Act.
 - Ongoing issues with our accommodation post the Kaikoura earthquake added to the secretariat's workload and this had a particular impact for the Chief Executive and the Board Chair. Combined with changes to the organisational structure these issues resulted in a small number of strategic objectives being delayed in terms of timing.
-

Registrations and Practising Certificates

Medical radiation technology is a patient centered profession that encompasses the practices of medical imaging and radiation therapy. Medical imaging practitioners use different technologies to create images of the human body for diagnosis and the staging and management of disease. Radiation therapy practitioners use technology to create and evaluate images and data related to the localisation, planning and delivery of radiation treatments.

The Board has defined eight scopes of practice for registration in the profession of medical radiation technology (medical imaging and radiation therapy):

- Medical Imaging Technologist
- Radiation Therapist
- Nuclear Medicine Technologist
- Magnetic Resonance Imaging Technologist
- Sonographer
- Trainee Nuclear Medicine Technologist
- Trainee Magnetic Resonance Imaging Technologist
- Trainee Sonographer

A primary function of the Board is the registration of practitioners. In meeting its role to protect public safety, the Board has developed mechanisms to ensure registered practitioners meet required standards for safe and competent practice.

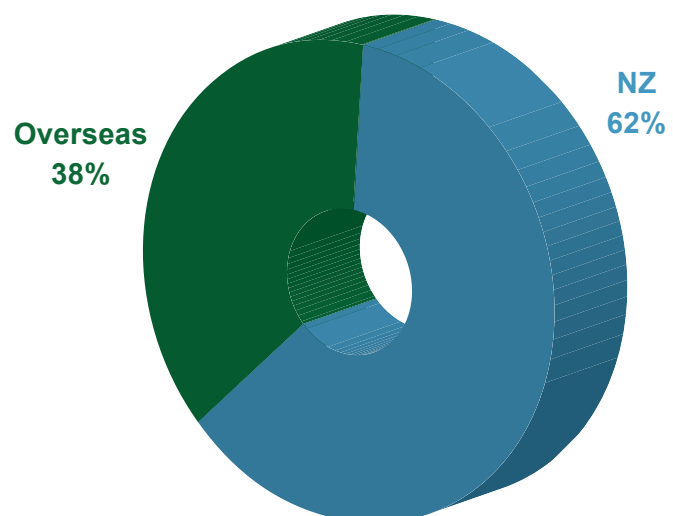
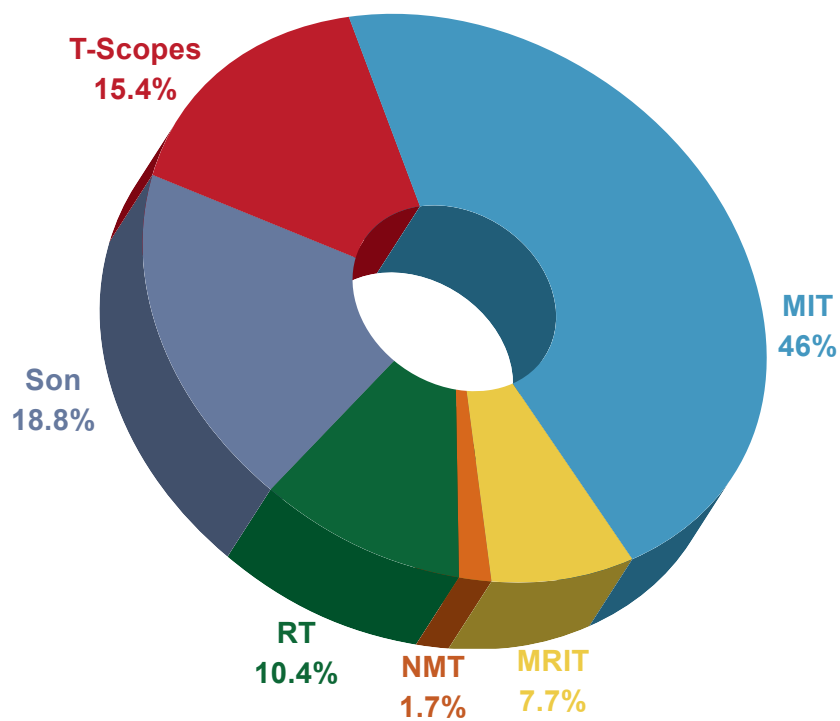
Registration Statistics

Between 1 April 2017 and 31 March 2018 the Board received **419** applications from persons seeking registration in one of the eight scopes of practice. **298** (71%) of these applications were approved and **33** (8%) declined due to the applicants not meeting the entry level registration requirements.

Of the remaining applications, **26** (6%) applicants were offered an opportunity to sit a Registration Examination Assessment (REA) as an alternative pathway to gaining registration. As at 31 March 2018 **45** (11%) applications were still being processed and the remaining **17** (4%) applicants withdrew their application for registration.

Scope of Practice	Approved	Declined	Offered REA	In Progress	Withdrawn	TOTAL
MIT	137	16	17	21	5	196
MRIT	23	8	3	6	4	44
NMT	5	2		1	4	12
RT	31	2		6	1	40
Son	56	5	6	5	2	74
T-MRIT	18			2		20
T-NMT	5			1		6
T-Son	23			3	1	27
TOTAL	298	33	26	45	17	419

Approved Registrations for 2017/2018



Approved Registrations by Country-Trained

Approved Applications

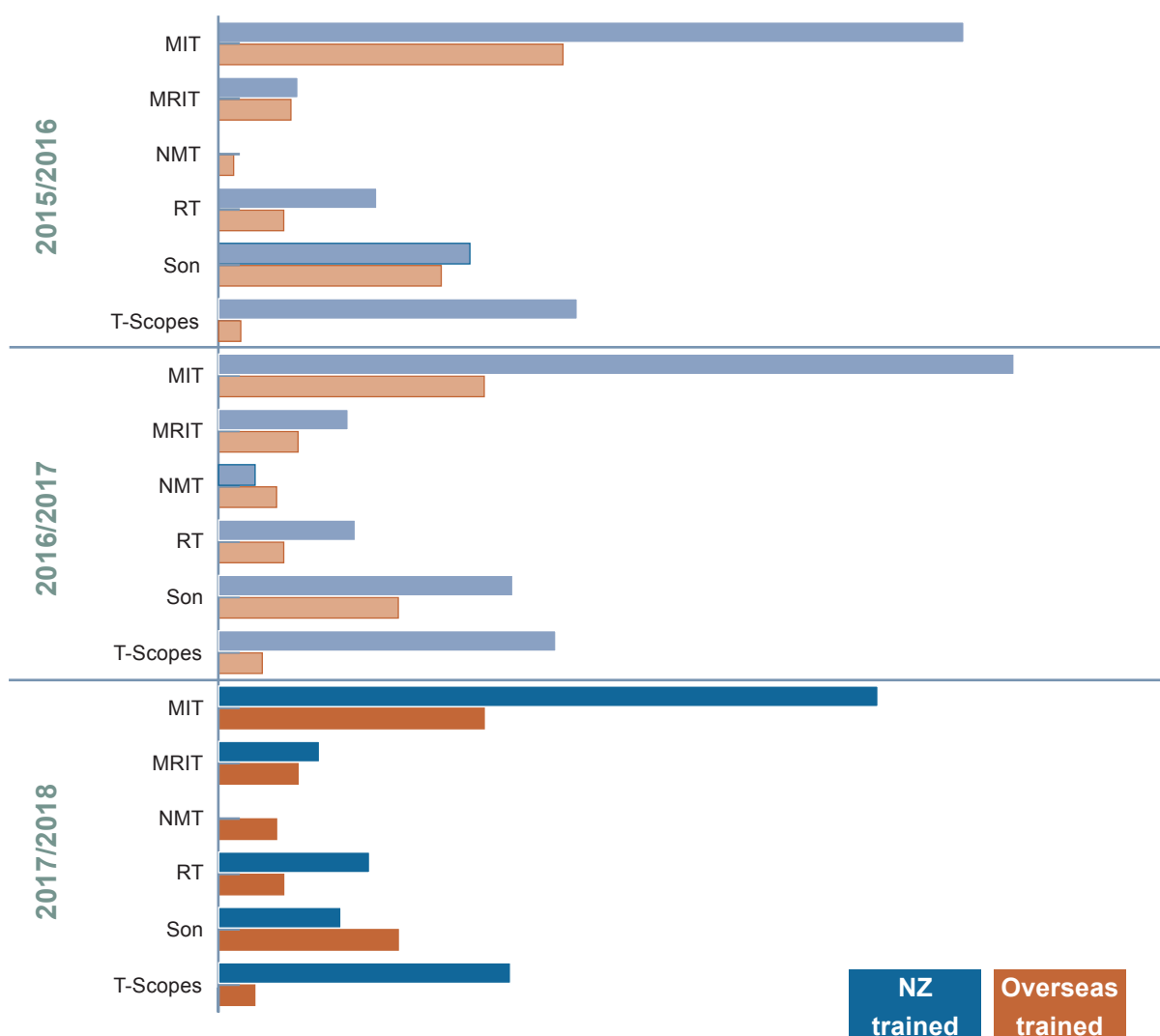
Country	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
Australia	5	5	5		20	1		1	37
Canada		1		2	8			1	12
Fiji	3								3
India	2	1							3
Ireland	4			3					7
New Zealand	92	14		21	17	15	5	21	185
Saudi Arabia	1								1
Scotland				1		1			2
South Africa	9								9
UK	20	2		4	7	1			34
USA					4				4
Zimbabwe	1								1
TOTAL	137	23	5	31	56	18	5	23	298

Approved Registrations for Previous Three-years

For the 2017/2018 year New Zealand-trained registration applications exceeded overseas-trained applications by **24%**.

Of note:

- The number of overseas-trained sonographer applications was greater than New Zealand-trained sonographer applications in 2017/2018.
- During both the 2017/2018 and 2015/2016 APC years, all Nuclear Medicine Technologists registered were overseas-trained.



Declined applications and REA offers by Country-trained

Declined Applications

Country	2016/2017	2017/2018
Australia	1	1
Belgium		2
Canada	1	2
Fiji	2	1
Germany		1
India	6	8
Jordan	1	
Malaysia		1
Nigeria	1	2
Pakistan	1	2
Philippines	8	5
Singapore	1	
South Africa	1	3
UK	3	3
USA	3	2
TOTAL	29	33

Offered a REA as an Alternative Pathway to Registration

Country	2016/2017	2017/2018
Australia	3	
Canada	4	2
Egypt		1
Fiji	8	3
India	7	2
Malaysia	1	1
Nigeria		1
Philippines	6	3
Singapore	1	
South Africa	3	4
UK	4	
USA	4	5
Zimbabwe	3	4
TOTAL	44	26

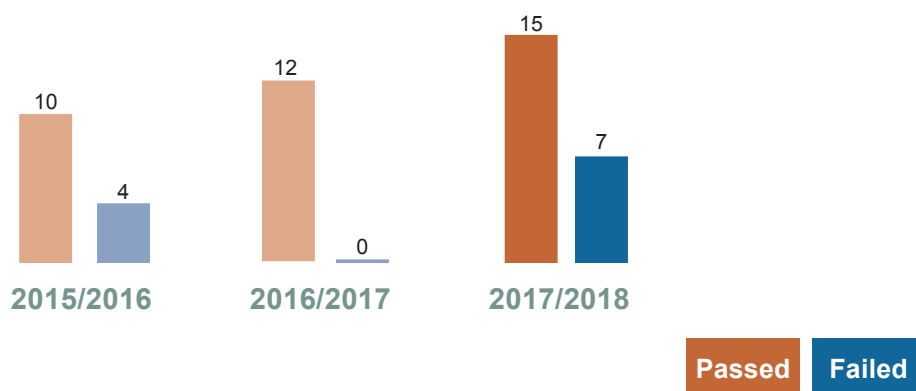
Registration Examination Assessments

The Board recognises that while some overseas-trained applicants may not have a qualification deemed as equivalent to the New Zealand prescribed qualification, they do have significant clinical experience in the relevant scope of practice in an overseas setting. A registration examination assessment (REA) may be offered to these applicants as a means of gaining New Zealand registration.

	MIT	MRIT	NMT	RT	Son	TOTAL
REA Offered	17	3			6	26
REA Sat	6	10	2		4	22
REA Passed	4	7			4	15

In 2017-2018 **22** applicants took up the offer to sit a REA. The 15 applicants (**68%**) who passed were subsequently granted New Zealand registration.

Although a REA may be offered as a pathway to registration, an applicant may not act on that offer. In 2017-2018, **26** REA's were offered, however only **22** REA's were completed. It is of note a REA can be sat up to two-years after being offered. Therefore REA's sat in 2017-2018 were not necessarily offered during the same period.



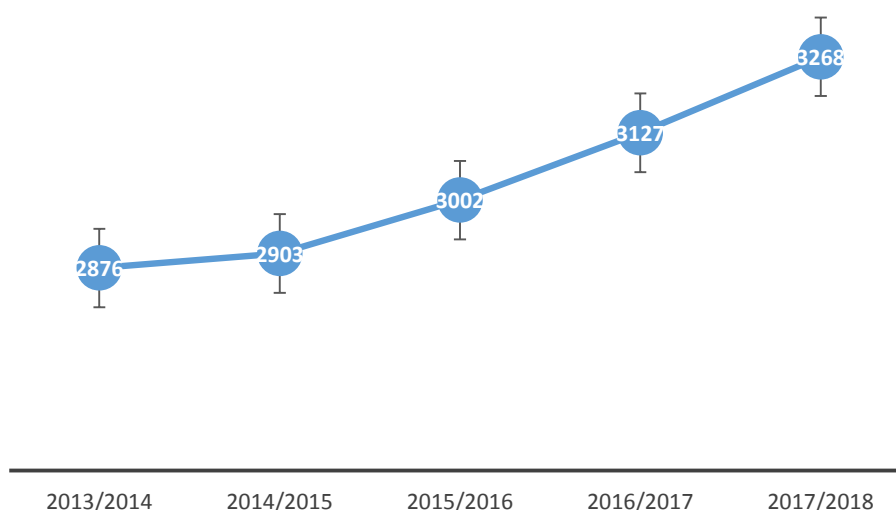
Annual Practising Certificates

All practitioners working in New Zealand must hold a current practising certificate (APC), which is renewed annually. To obtain an APC, practitioners must assure the Board they have maintained competence and are fit to practise.

In 2017-2018 the Board issued a total of **3268** annual practising certificates:

- **126** (4%) practitioners were issued an annual practising certificate with a condition
- **266** (8%) practitioners held an APC in more than one scope.

	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
APC's issued	1829	263	63	408	556	48	9	92	3268
APC's with conditions	44	2	13	11	51			5	126



When an annual practising certificate is issued, the Board is declaring to the New Zealand public that the practitioner is competent and fit to practise.

Conditions on Practice

Medical Imaging Technologist

- Must practise within CT only 4
- Must practise within mammography only 34
- Must practise under a Board approved supervisor when practising within lithotripsy 4
- Specific conditions pertaining to competence reviews 1
- Holding a non-clinical APC 1

Total **44**

Magnetic Resonance Imaging Technologist

- Must practise under supervision for 450 hours and provide a logbook and supervisor report 1
- When working in lithotripsy, must practice under the supervision of a urologist who is a holder of a current national radiation laboratory licence. 1

Total **2**

Nuclear Medicine Technologist

- May operate diagnostic CT on a hybrid PET or SPECT/CT 9
- May operate diagnostic CT independently 3
- Must practise within PET only 1

Total **13**

Radiation Therapist

- May practise within mammography independently 3
- Must practise within mammography only 1
- Must practise within treatment only 7

Total **11**

Sonographer

- Must practise under supervision 4
- Must practise within cardiac ultrasound only 29
- Must practise within obstetrics ultrasound only 1
- Must practise within obstetrics and gynaecology only 1
- Must practise within vascular ultrasound only 15
- Must not practise in obstetrics ultrasound 2

Total **51**

Trainee Sonographer

- Must practise within cardiac ultrasound only 3
- Must practise within vascular ultrasound only 2

Total **5**

Education and Continuing Professional Development

The Board accredits five New Zealand education providers who offer qualifications prescribed by the Board for the purpose of registration in the profession of medical imaging and radiation therapy.

Each education provider is subject to an on-going accreditation/monitoring process to ensure qualification programmes produce graduates capable of meeting the entry-level competence standards for the practice of medical imaging and radiation therapy.

Education Provider	Qualification Programme	Scope of Practice
ARA Institute of Canterbury	Bachelor of Medical Imaging	Medical Imaging Technologist
UNITEC Institute of Technology	Bachelor of Health Science (Medical Imaging)	Medical Imaging Technologist
Universal College of Learning (UCOL)	Bachelor of Applied Science (Medical Imaging Technology)	Medical Imaging Technologist
University of Otago (UoO)	Bachelor of Radiation Therapy	Radiation Therapist
University of Auckland	Postgraduate Diploma in Health Sciences in Magnetic Resonance Imaging	Magnetic Resonance Imaging Technologist
	Postgraduate Diploma in Health Sciences Medical Imaging (Nuclear Medicine pathway)	Nuclear Medicine Technologist
	Postgraduate Diploma in Health Sciences in Ultrasound	Sonographer

Practitioner Competence Audit

The Board's recertification programme is established under section 41 of the Health Practitioners Competence Assurance Act 2003 (the Act).

Recertification includes a number of mechanisms to monitor the ongoing competency of all practising medical imaging and radiation therapy practitioners. Continuing professional development (CPD) is a critical feature of the Board's recertification programme.

The 2017 audit was the last audit to be undertaken against the Board's previous CPD standards. The Board selected 10% of practitioners in each of the gazetted scopes of practice who hold a current practising certificate.

The following results for the five-year period from 2013 to 2017 demonstrates practitioners are actively engaging in on-going learning and professional development, with the majority of audited practitioners meeting the Board's ongoing competency requirements.

	2013		2014		2015		2016		2017	
Called for audit	264		266		270		291		303	
Audited	237	90%	246	92%	238	88%	270	93%	276	91%
Passed	230	97%	241	98%	236	99%	269	99.6%	274	99%
Unsuccessful	7	3%	5	2%	2	1%	1	<1%	2	1%

Fitness to Practise, Professional Conduct and Competence

The Board is responsible for monitoring medical imaging and radiation therapy practitioners, to ensure they meet and maintain practice standards in order to protect the health and safety of the New Zealand public.

Practitioners are asked to make a number of declarations in respect of their competence and fitness to practise when applying for registration, and each year they apply for a practising certificate.

The Board received a number of notifications during 2017/2018.

	Number		Outcome			Ongoing	Resolved
	New	Existing	Referred to competence review	Referred to PCC	Referred to HPDT		
MIT	3					1	2
MRIT							
NMT							
RT	2		1	1		1	1
Son	1	1					2
TOTAL	6	1	1	1		2	5

Fitness to Practise

Any health practitioner registered with the Board who, because of a mental or physical condition cannot make safe judgments, demonstrate acceptable levels of competence or behave appropriately in accordance with ethical, legal and practice guidelines, can expect to be the subject of an investigation by the Board.

In 2017-2018 the Board received one notification pertaining to a practitioner's fitness to practise.

Professional Conduct

The Health Practitioners Competence Assurance Act 2003 enables the Board to appoint a professional conduct committee (PCC) to investigate a complaint received by the Board alleging that the practice or conduct of a health practitioner registered with the Board may pose a risk of harm or serious harm to the public.

During the 2017/2018 year the Board received two professional conduct cases, one in relation to a conviction, and the second relating to a practitioner practising without registration or an APC.

Competence

One of the Board's functions is to act on information received from the public, health practitioners, employers and the Health and Disability Commissioner relating to the competence of health practitioners.

Competence reviews focus on supporting a practitioner through appropriate training, education and safeguards to assist with improving their standards of practice. Competence reviews undertaken by the Board are based on principles of natural justice, support and education.

During 2017-2018, the Board received three competence-related notifications:

1. One was closed with the practitioner granted registration, and an APC that included restrictions on their practice.
2. The second case involved a competence review, which at 31 March 2018 was ongoing.
3. The third competence notification resulted in a period of supervision. At 31 March 2018 the practitioner was not practising and did not apply for a 2018/2019 APC.

Financial Report for the Year Ended 31 March 2018

New Zealand Medical Radiation Technologists Board

Entity Information

For the Year ended 31 March 2018

Legal Name:	Medical Radiation Technologists Board (MRTB)
Entity Type:	Body Corporate
Charities Registration Number:	CC35408
Founding Documents:	Established by the Health Practitioners Competence Assurance Act 2003 (HPCA Act) and is an Authority under the Act
Entity's Purpose or Mission:	To protect the health and safety of members of the public by providing mechanisms to ensure that medical radiation technology practitioners are competent and fit to practise their professions
Entity Structure:	A nine member governance board
Main source of the entity's cash and resources:	Practitioners and applicants for registration
Main method used by entity to raise funds:	Fees and Levies (refer to section 130 and 131 of the HPCA Act)
Entities reliance on volunteers and donated goods or services:	No reliance is placed on volunteers or donated goods or services
Physical Address:	Level 3 - Panama House, 22 Panama Street, Wellington
Postal Address:	PO Box 11-905, Wellington 6142
Phone:	+64 4 801 6250
Email:	mrt@medsci.co.nz
Website:	www.mrtboard.org.nz

**INDEPENDENT AUDITOR'S REPORT
TO THE READERS OF
MEDICAL RADIATION TECHNOLOGISTS BOARD'S
PERFORMANCE REPORT
FOR THE YEAR ENDED 31 MARCH 2018**

The Auditor-General is the auditor of the Medical Radiation Technologists Board. The Auditor-General has appointed me, Stuart Signal, using the staff and resources of Staples Rodway Audit Limited, to carry out the audit of the performance report of the Medical Radiation Technologists Board on his behalf.

Opinion

We have audited the performance report of the Medical Radiation Technologists Board on pages 3 to 9, that comprise the entity information, the statement of financial position as at 31 March 2018, the statement of financial performance, the statement of movements in equity and statement of cash flows for the year ended on that date and the notes to the performance report that include accounting policies and other explanatory information.

In our opinion the performance report of the Medical Radiation Technologists Board on pages 3 to 9, present fairly, in all material respects:

- the entity information,
- its financial position as at 31 March 2018; and
- its financial performance and cash flows for the year then ended; and
- comply with generally accepted accounting practice in New Zealand and have been prepared in accordance with Public Benefit Entity Simple Format Reporting PBE-SFR-A (PS)

Our audit was completed on 24 October 2018. This is the date at which our opinion is expressed.

The basis of our opinion is explained below. In addition, we outline the responsibilities of the Medical Radiation Technologists Board and our responsibilities relating to the performance report,

Basis of opinion

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the Professional and Ethical Standards and International Standards on Auditing (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board. Our responsibilities under those standards are further described in the Responsibilities of the Auditor section of our report.

We have fulfilled our responsibilities in accordance with the Auditor-General's Auditing Standards.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of the Board for the performance report

The Board is responsible for preparing the performance report that is fairly presented and that complies with generally accepted accounting practice in New Zealand.

The Board is responsible for such internal control as it determines is necessary to enable the preparation of the performance report that is free from material misstatement, whether due to fraud or error.

In preparing the performance report, the Board is responsible on behalf of the Medical Radiation Technologists Board for assessing the Medical Radiation Technologists Board's ability to continue as a going concern. The Board is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless there is an intention to liquidate the Medical Radiation Technologists Board or to cease operations, or there is no realistic alternative but to do so.

The Board's responsibilities arise from the Health Practitioners Competence Assurance Act 2003.

Responsibilities of the auditor for the audit of the performance report

Our objectives are to obtain reasonable assurance about whether the performance report, as a whole, is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit carried out in accordance with the Auditor-General's Auditing Standards will always detect a material misstatement when it exists. Misstatements are differences or omissions of amounts or disclosures, and can arise from fraud or error. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of readers taken on the basis of these performance report.

We did not evaluate the security and controls over the electronic publication of the performance report.

As part of an audit in accordance with the Auditor-General's Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. Also:

- We identify and assess the risks of material misstatement of the performance report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- We obtain an understanding of internal control relevant to the audit 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 Board's internal control.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the governing body.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the governing body and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Medical Radiation Technologists Board's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the performance report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Medical Radiation Technologists Board to cease to continue as a going concern.
- We evaluate the overall presentation, structure and content of the performance report, including the disclosures, and whether the performance report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Our responsibility arises from the Public Audit Act 2001 and section 134(1) of the Health Practitioners Competence Assurance Act 2003.

Independence

We are independent of the Medical Radiation Technologists Board in accordance with the independence requirements of the Auditor-General's Auditing Standards, which incorporate the independence requirements of Professional and Ethical Standard 1 (Revised): *Code of Ethics for Assurance Practitioners* issued by the New Zealand Auditing and Assurance Standards Board.

Other than the audit, we have no relationship with, or interests in, the Medical Radiation Technologists Board.



Stuart Signal
Staples Rodway Audit Limited
On behalf of the Auditor-General
Hastings, New Zealand

New Zealand Medical Radiation Technologists Board

Statement of Financial Performance

For the Year ended 31 March 2018

	Note	2018	2017
		\$	\$
Income			
Registration Fees - Non NZ		46,122	47,475
Registration Fees - NZ		56,774	44,039
APC's		694,852	669,762
Examination Fees		36,522	17,390
Interest Received		33,141	34,541
Accreditation Income		24,233	-
Sundry Income		1,840	9,019
Total Income		893,484	822,226
Less Expenses			
Accreditation Expenses	24,233	-	-
Archiving	1,366	1,344	-
Audit Fees	6,048	5,900	-
Bad Debt	12,500	-	-
Bank Charges	18,226	10,524	-
Board Member Fees & Expenses	172,462	147,287	-
Catering	4,763	3,577	-
Chartered Accountancy Fees	-	-	-
Conference Expenses	3,483	4,686	-
Examiner Fees	51,404	45,145	-
General Expenses	874	849	-
Insurance	2,650	-	-
IT	1,849	1,329	-
Legal Expenses	3,820	41,934	-
MSS Service Charge	599,674	538,165	-
Postage	-	155	-
Printing, Stamps & Stationery	2,851	3,885	-
Project Costs	90,660	52,998	-
Telephone, Tolls & Internet	203	1,878	-
Training	904	3,506	-
Travel	94,498	87,907	-
Total Expenses		1,092,468	951,069
Net Surplus/(Deficit) For The Year		(198,984)	(128,843)

New Zealand Medical Radiation Technologists Board

Summary Statement of Cashflow

For the Year ended 31 March 2018

	2018	2017
	\$	\$
Operating Activities		
<i>Cash was provided from:</i>		
APC and Disciplinary Levies	1,006,862	697,721
Other Income received	206,508	179,600
Interest Received	33,140	38,929
<i>Cash was applied to:</i>		
Payments to Suppliers and Others	(1,024,137)	(986,545)
Net Cash Inflow/(Outflow) From Operating Activities	222,373	(70,295)
Net Increase in Cash Held	222,373	(70,295)
Cash at beginning of year	1,496,767	1,567,062
Closing Bank Balance	1,719,140	1,496,767
 <i>Represented By:</i>		
Cash and Cash Equivalents	169,140	296,767
Investment - Term Deposits	1,550,000	1,200,000
Closing bank balance	1,719,140	1,496,767

New Zealand Medical Radiation Technologists Board

Statement of Movements in Equity

For the Year ended 31 March 2018

	Note	2018	2017
		\$	\$
Opening Equity		826,708	955,551
Net surplus/(Deficit) For The Year	(198,984)		
Total Recognised Revenues & Expenses		(198,984)	(128,843)
Equity at End of the Year		627,724	826,708

New Zealand Medical Radiation Technologists Board

Statement of Financial Position

For the Year ended 31 March 2018

	Note	2018	2017
		\$	\$
Equity			
Retained Earnings	4	627,724	826,708
Total Equity		627,724	826,708

Represented by;


Current Assets			
Westpac Bank - Current	168,703	266,471	
Westpac Bank - Savings	437	30,297	
Westpac Bank - Term Deposits	1,550,000	1,200,000	
Accounts Receivable	43,413	28,329	
Provision for doubtful debt	(5,000)	-	
Prepayments	11,727	-	
Total Current Assets		1,769,280	1,525,097

Non-Current Assets			
Investments in MSS		50	50
Total Assets		1,769,330	1,525,147


Current Liabilities			
Medical Sciences Secretariat Ltd	64,201	(14,129)	
Accrued Expenses	8,664	6,122	
GST Due for Payment	106,226	66,792	
Income in Advance	962,515	639,654	
Total Current Liabilities		1,141,606	698,439

Net Assets/ (Liabilities)		627,724	826,708
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For and on behalf of the Board;

Chairperson: 
Prue Lamerton

Date: 24 October 2018

Chief Executive: 
Mary Doyle

Date: 24 October 2018

New Zealand Medical Radiation Technologists Board

Notes to the Financial Statements for the Year ended 31 March 2018

1. *Statement of Accounting Policies*

REPORTING ENTITY

The Board is constituted under the Health Practitioners Competence Assurance Act 2003.

These Financial Statements have been prepared in accordance with the Financial Reporting Act 2013.

BASIS OF PREPARATION

The financial statements have been prepared in accordance with Public Benefit Entity Simple Format Reporting - Accrual (PS) and have been prepared on the basis of historical costs.

All transactions have been reported using the accrual basis of accounting and prepared on the assumption that the reporting entity is a going concern.

SPECIFIC ACCOUNTING POLICIES

The following specific accounting policies which materially affect the measurement of financial performance and financial position have been applied:

Income Tax: The Board has been granted Charitable Status under the Charities Act 2005 and is exempt from Income Tax.

Investments are valued at cost: Investment Income is recognised on an accrual basis where appropriate.

Goods and Services Tax: The entity is registered for Goods and Services Tax. The financial statements have been prepared on an exclusive basis with the exception of accounts receivable and accounts payables which include GST.

Annual Practising Certificate Income: Annual Practising Certificate Income is recorded only upon receipt. Receipts for Annual Practising Certificates issued for the future year are shown as Income Received in Advance.

CHANGES IN ACCOUNTING POLICIES

All accounting policies are unchanged and have been consistently applied.

2. *Related Parties*

During the year the Medical Radiation Technologists Board purchased secretariat services on normal trading terms from Medical Sciences Secretariat Ltd. Members of the Board of Medical Radiation Technologists Board are directors of Medical Sciences Secretariat Ltd.

Medical Radiation Technologists Board owns 50% of the share capital of Medical Sciences Secretariat Ltd. Medical Sciences Council of New Zealand owns the remaining 50% of Medical Sciences Secretariat Ltd.

3. *Financial Management Agreement*

Medical Sciences Secretariat Limited ("MSS") has been established to provide business management support to the Medical Radiation Technologists Board ("MRTB") and the Medical Sciences Council of New Zealand ("MSCNZ").

MSS will provide financial management support to both MRTB and MSCNZ according to a number of conditions:

1. MSS undertakes not to make a profit from its business partnership with MRTB and MSCNZ.
2. Each board will be invoiced monthly for an amount equivalent to the expenses incurred by MSS.
3. GST is charged on these expenses incl. those that did not originally include GST (e.g. wages).
4. MSS will return GST refunds at a 50:50 split between MSCNZ and MRTB respectively.
5. All MSS expenses will be split and paid at 50:50 between MSCNZ and MRTB respectively.
6. At the end of each month and the financial year, MSS will show a nil financial balance on all its operations.

4. *Equity*

The following movements in Revenue Reserves have occurred:

	2018	2017
Retained Earnings	\$	\$
Opening Balance	826,708	955,551
Net Income Earned This Year	(198,984)	(128,843)
Closing Balance	627,724	826,708

5. *Lease Commitments*

The lease agreement at 80 The Terrace (commencement date 1 November 2014) is in the names of the Physiotherapy Board of New Zealand, Dental Council, Medical Sciences Council of New Zealand, Medical Radiation Technologists Board and Pharmacy Council of New Zealand (5 Health Regulatory Authorities), all of which have joint and several liability. This lease expires on 31 October 2023 with a right of renewal of a further six years. A premises rent free period of 13 months effective from 1 November 2014 was granted by the landlord as a contribution to the office fit-out.

The total lease commitment to the Medical Radiation Technologists Board at 31 March 2018 for 80 The Terrace is current: \$42,369 and non-current: \$194,192.

On vacation of 80 The Terrace following earthquakes, temporary premises at 22 Panama Street were obtained. This lease agreement, in the name of MSS Ltd (commencement date 1 June 2017) expires on 31 August 2018 with a right of renewal of a further one year. Subsequent to year end, the one year renewal was exercised.

	2018	2017
	\$	\$
Current	63,989	77,189
Non-Current	196,316	240,505
	260,305	317,694

6. *Contingent Liabilities*

The five regulatory authorities which are party to the lease of 80 The Terrace (refer Note 5) are jointly and severally liable for the rent. This creates a contingent liability of \$2,277,331.

7. *Revenue Categories*

Revenue from non-governmental sources for providing goods or services totaled \$860,343 (2017: \$787,685) and revenue from interest, dividends and other investments was \$33,141 (2017: \$34,541).

8. *Events After Balance Date*

There were no events that occurred after the balance date that would have a material impact on these financial statements.

9. *Earthquake Disruption Contingencies*

Medical Sciences Secretariat Ltd, Medical Radiation Technologists Board and Medical Sciences Council of New Zealand have been unable to occupy the leased premises located at 80 The Terrace since 17 February 2017, due to uncertainty around the building safety and the extent of remedial work required on the building following the Kaikoura earthquake on 14 November 2016. The rental on the property continues to be paid within the terms of the lease. Alternative premises have been leased on a short term basis. Details of lease commitments are disclosed in Note 5.

The ultimate resolution of these situations cannot be reliably estimated at the present time. Potential outcomes range from negotiating an early exit from the lease to receiving a rental abatement for premises not being available for use.



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2018