



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

Annual Report

1 APRIL 2018 - 31 MARCH 2019



THROUGHOUT THIS REPORT:

MIT: Medical Imaging Technologist

RT: Radiation Therapist

NMT: Nuclear Medicine Technologist

REA: Registration Examination Assessment

MRIT: Magnetic Resonance Imaging Technologist

Son: Sonographer

T-Scopes: Includes all training scopes of practice

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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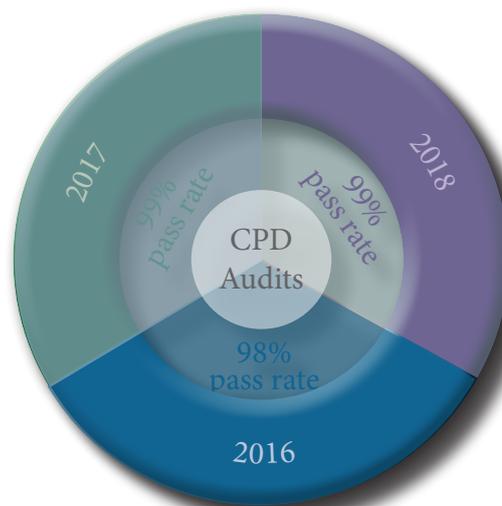
NUMBERS
AT A
GLANCE

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APC's Issued

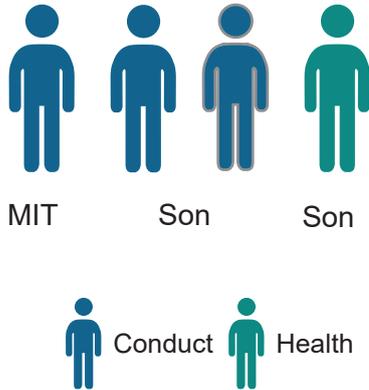
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New Registrants



Notifications Received

4



127



Overseas Registered



FROM THE CHAIR AND CHIEF EXECUTIVE

We are pleased to present the 2018/2019 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 the secretariat had a busy 2018/2019 with one significant project showing considerable progress. The online registration exam for mainly overseas applicants whose qualification is not equivalent to NZ will be rolled out in September 2019. There has been much work by the online exam committee, questions writers and MSS staff to get the project to this stage.

The Board published its revised standards for CPD and the first Board audit based on these standards took place in 2018. An increase in applications from overseas registrants has added to the Board and secretariat workload, however all was managed in a timely manner. We also received and managed a number of notifications that raised concerns about the practice and/or conduct of individual practitioners. As part of our regulatory responsibilities in 2018 we undertook a number of re-accreditation reviews of New Zealand education institutions that have been accredited by the Board in respect of the qualification programmes they provide and that can lead to registration in the medical imaging and radiation therapy profession.

Members from the Board have attended the NZIMRT, ANZSNM, ASUM 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 situation with our accommodation has resulted in an extended period of additional costs in terms of lease obligations, however we were able to recoup at least a percentage of those costs through our business continuity insurance cover. In 2018 the Board, along with its colleague responsible authority the Medical Sciences Council (with whom we jointly own the Medical Sciences Secretariat), made a decision to not return to the premises at 80 The Terrace which we had to vacate post the Kaikoura earthquake. This decision has been driven by ongoing concerns in respect of the building's seismic safety. On the advice of our auditors, the 2019 financial statements have made provision for treating the ongoing costs for the lease obligation related to the premises at 80 The Terrace, as an onerous contract in accordance with the financial reporting standards.

We would like to thank the secretariat staff for their diligence in ensuring that core Board systems and processes have been managed to a high standard. The team's support is critical to the Board meeting its legislative functions and responsibilities.

Prue Lamerton (nuclear medicine) and Sue McKenzie (lay member) left the Board during the 2018/19 year. Prue was the champion for the nuclear medicine scope of practice and latterly Chair of the Board. Under her chairmanship she provided guidance and support for several projects including revisions of the CPD standards, a scopes of practice review, and development of an online exam. She encouraged the Board to look to the future for the changes in technology advances and how these may change the way the Board considers future scopes of practice reviews. Sue McKenzie was our layperson who championed education and was involved in accreditation and monitoring of the academic institutions. Her governance leadership was valuable in ensuring a robust process was undertaken for all the reviews. Replacing Prue and Sue are Pru Burns (nuclear medicine) and Susan Yorke (lay member).

We acknowledge our Board members for their time, dedication and expertise throughout the year. Finally we thank all practitioners involved in REA's, assessments, supervision, committees and workshops.



Beryl Kelly (Chair)



Mary Doyle (CEO)



THE MRT BOARD

The Medical Radiation Technologists Board (the Board) is one of sixteen 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.

THE BOARD'S 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 ongoing 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



Prue Lamerton

Chair
Nuclear Medicine
Technologist

Term
commenced

2010

Term
renewed

2013;
2015

Term due to
be completed

2018



Beryl Kelly

Medical Imaging Technologist
Deputy Chair
(Chair from December 2018)

2011

2014;
2017

2020



Anthony Bow

Lay Member

2017

2020



Peter Dooley

Magnetic Resonance Imaging
Technologist

2017

2020



Dr Rosanne Hawarden

	Term commenced	Term renewed	Term due to be completed
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	2010	2013; 2016	2019
--	------	---------------	------



Lizzie Macaulay

Medical Imaging Technologist
(Deputy Chair from December 2018)

	2016		2019
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Sue McKenzie

Lay Member

	2010	2013; 2016	2018
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Billie Mudie

Radiation Therapist

	2015		2018
--	------	--	------



Louise Tarr

Sonographer

	2015		2018
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BOARD MEETINGS AND FEES

	12 th Apr 2018	21 st Jun 2018	23 rd Aug 2018	24 th - 25 th Oct 2018	12 th Dec 2018	27 th - 28 th Feb 2019
Prue Lamerton	✓	✓	✓	✓	✓	Term completed
Dr Rosanne Hawarden	✓	✓	✓	✓	✓	✓
Anthony Bow	✓	✓	✓	✓	✓	Apologies
Beryl Kelly	✓	✓	✓	✓	Apologies	✓
Billie Mudie	✓	✓	✓	✓	✓	✓
Lizzie Macaulay	✓	✓	✓	✓	✓	✓
Louise Tarr	Apologies	✓	✓	✓	✓	✓
Peter Dooley	✓	Apologies	✓	✓	✓	✓
Sue McKenzie	✓	✓	Apologies	✓	✓	✓

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

BOARD COMMITTEES

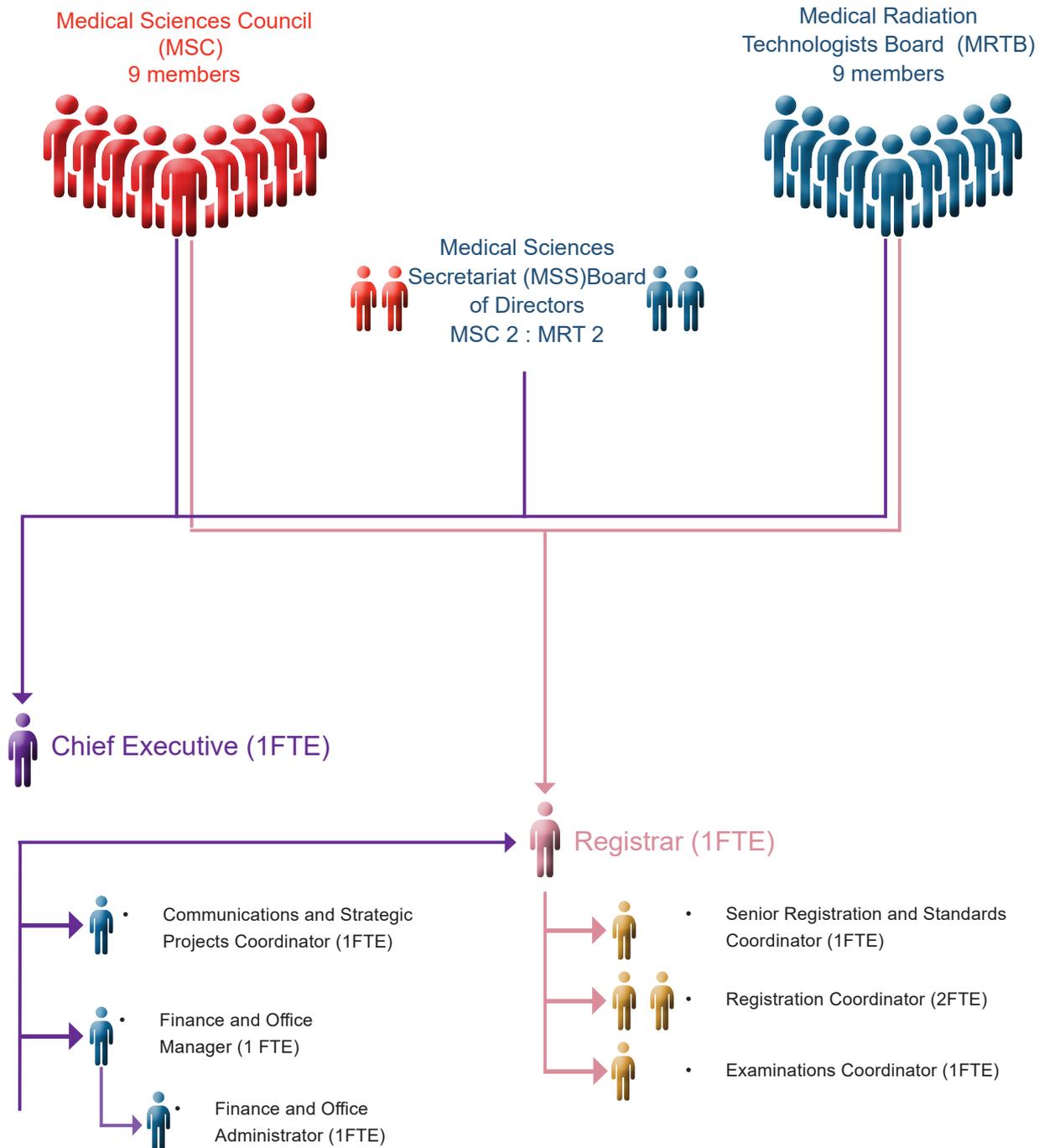
The Board has a number of standing committees with delegated authority to oversee many of the ongoing functions of the Board. Committee membership was as follows:

Committee	Membership	
Audit and Registration Examination Assessment Committee	Beryl Kelly Billie Mudie Prue Lamerton	
Education Committee	Sue McKenzie Louise Tarr Lizzie Macaulay	Peter Dooley (from December 2018)
Finance, Audit and Risk Committee	(Committee was dissolved December 2018)	
	Dr Rosanne Hawarden Beryl Kelly Prue Lamerton	Anthony Bow
Registrations and Recertification Committee	Beryl Kelly Billie Mudie Lizzie Macaulay	Louise Tarr Peter Dooley Prue Lamerton
Professional Standards	Billie Mudie Sue McKenzie Prue Lamerton	Anthony Bow (from February 2019) Louise Tarr (from February 2019)
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 another health regulatory authority, the New Zealand Medical Sciences Council (MSC), with whom they set up a jointly-owned company, Medical Sciences Secretariat (MSS).

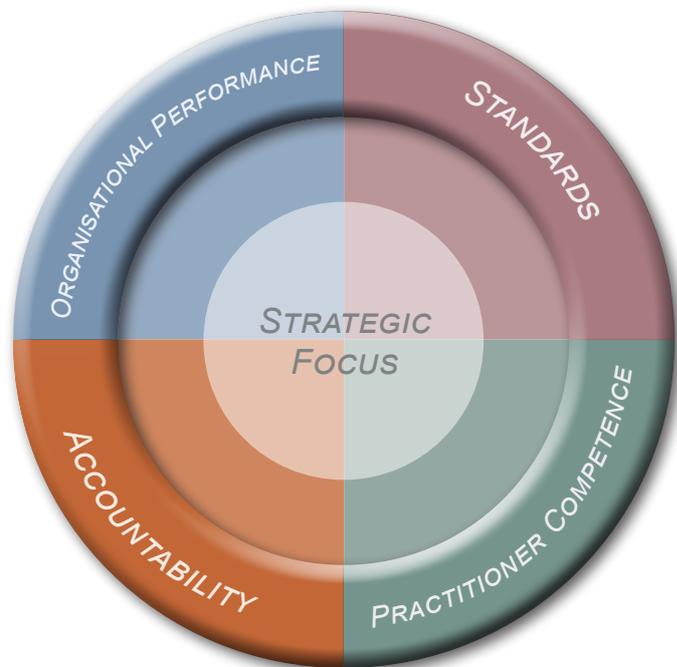
MSS provides both regulatory authorities with business support services across all corporate and regulatory functions. This partnership arrangement has allowed the Medical Radiation Technologists Board and the Medical Sciences Council to contain costs and achieve operational synergies including consistency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



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 Act 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

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.

2018/2019 Outcomes

- Significant progress was made with developing processes and tools to support the introduction of an online examination which is to be used to assess competence and safety to practise in respect of overseas-trained practitioners. Rollout of the first set of exams are scheduled to be offered from the last trimester of 2019.
 - In conjunction with the development of the online examination, the Board also reviewed its processes for the assessment of overseas qualifications which resulted in the adoption and application of a set of standardised assessment criteria that are linked to the clinical, ethical, and cultural competencies required of each scope of practice.
 - A public consultation process was used to review the Board's position on cultural competence with a revised policy being adopted in July 2018.
 - Accreditation reviews were undertaken for two New Zealand education providers of medical imaging programmes.
-

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.

2018/2019 Outcomes

- In 2017 the Board adopted a revised framework in respect of the continuing professional development (CPD) standards required of medical imaging and radiation therapy practitioners. In 2018 the first audit of practitioners' compliance and competence checks under the revised framework took place. While a number of improvements were identified in terms of the audit process, there were no significant concerns raised in terms of audit results.
- The Board continued its programme of regular reviews of policy documents pertaining to the recertification standards for the ongoing regulation of the profession.

ACCOUNTABILITY

Strategic Objectives

1. The public understands the role and responsibilities of the 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.

2018/2019 Outcomes

- In 2018 the Board held a very successful forum with New Zealand providers of medical imaging and radiation therapy education programmes. This gave us all an opportunity to openly discuss some of the issues facing all forum attendants from both regulatory and educational perspectives.
- The Board has been considering the appropriateness of its title and in a recent consultation sought feedback from relevant medical imaging and radiation therapy professional bodies and education providers as well as other New Zealand responsible health authorities, as to a proposal to apply for parliamentary approval for a name change. Following that consultation, a request has been put to the Minister of Health for the Board to be renamed the Medical Imaging and Radiation Therapy Services Council of New Zealand. The Board has been referred to the appropriate team within the Ministry of Health to continue to work this proposal through the required parliamentary processes.

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.

2018/2019 Outcomes

- A review of all financial policy documents was undertaken in 2018 and this exercise was a typical example of how the Board has managed to gain value for investment through managing this as a joint initiative with the Medical Sciences Council, another responsible authority with whom the Board has established a shared secretariat service (MSS).
- Significant progress has been made in respect of a centralised document management system used by secretariat staff and accessible to members to each of the responsible authorities (the Medical Radiation Technologists Board, and the Medical Sciences Council) served by MSS.
- Another jointly shared project has been the development of a system to collect demographic data from practitioners through the annual APC renewal process which is managed electronically. This quality improvement initiative will allow the Board to share generically formatted demographic data with the Ministry of Health which will ultimately assist with workforce modelling and future planning. During this inaugural year of data collection, a number of issues emerged and we are continuing to collaborate with the Ministry of Health to work towards achievable and cost-effect solutions to address those.

OTHER WORK TO SUPPORT PLANNED BUSINESS GOALS

- In 2018 the Board, in partnership with its colleague responsible authority the Medical Sciences Council, made a decision that our jointly owned secretariat service, Medical Sciences Secretariat, would not return to the premises we had leased at 80 The Terrace in Wellington. This decision was not taken lightly and was made in response to ongoing unresolved issues with being able to access information as to the seismic rating and safety of the building post the Kaikoura earthquake. The premises at The Terrace were co-shared with a number of other responsible authorities, all of whom have made a similar decision to not re-occupy the premises. The secretariat team remains in office accommodation located in the Wellington CBD (Panama Street). On the advice of independent auditors, the lease obligations pertaining to the Terrace tenancy have now been treated as an onerous contract with provisions accordingly being made in the 2019 financial statements. The Board has continued to work with their colleague RA's to try and secure a sub-lease of the Terrace premises.
- A further review of the MSS staff team in 2018 culminated in an agreement to increase the FTE by 1.8 FTE's which will be respectively allocated to the finance and registration functions within the team. It is expected these changes will strengthen the team's capacity to manage both the ongoing business-as-usual systems and processes as well as developmental priorities and projects as identified in the Board's strategic planning and annual business planning documents. Recruitment into the new positions will commence early in the 2019/2020 business year.

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.

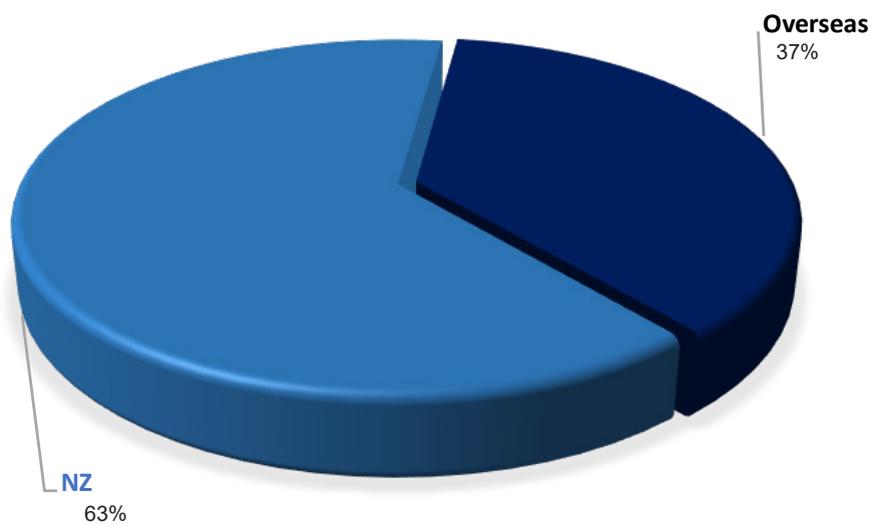
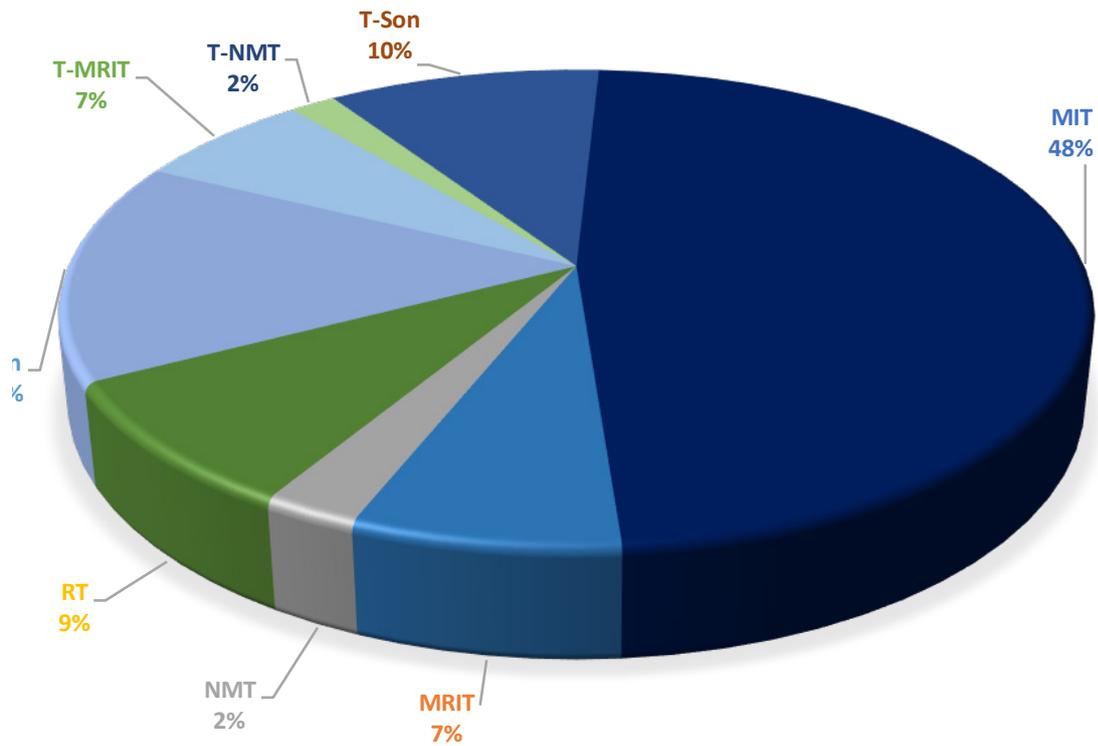
REGISTRATION STATISTICS

Between 1 April 2018 and 31 March 2019 the Board received **493** applications from persons seeking registration in one of the eight scopes of practice. **346** (70%) of these applications were approved and **23** (5%) declined due to the applicants not meeting the entry level registration requirements.

Of the remaining applications, **37** (8%) applicants were offered an opportunity to sit a Registration Examination Assessment (REA) as an alternative pathway to gaining registration. As at 31 March 2019 **69** (14%) applications were still being processed and the remaining **18** (4%) applicants withdrew their application for registration.

Scope of Practice	Approved	Declined	Offered REA	In Progress	Withdrawn	TOTAL
MIT	166	9	20	35	7	237
MRIT	25	9	6	3	2	45
NMT	9	1	3	3	1	17
RT	30	2	1	11	3	47
Son	52	2	7	13	3	77
T-MRIT	23			3	1	27
T-NMT	6					6
T-Son	35			1	1	37
TOTAL	346	23	37	69	18	493

APPROVED REGISTRATIONS FOR 2018/2019



APPROVED REGISTRATIONS BY COUNTRY - TRAINED

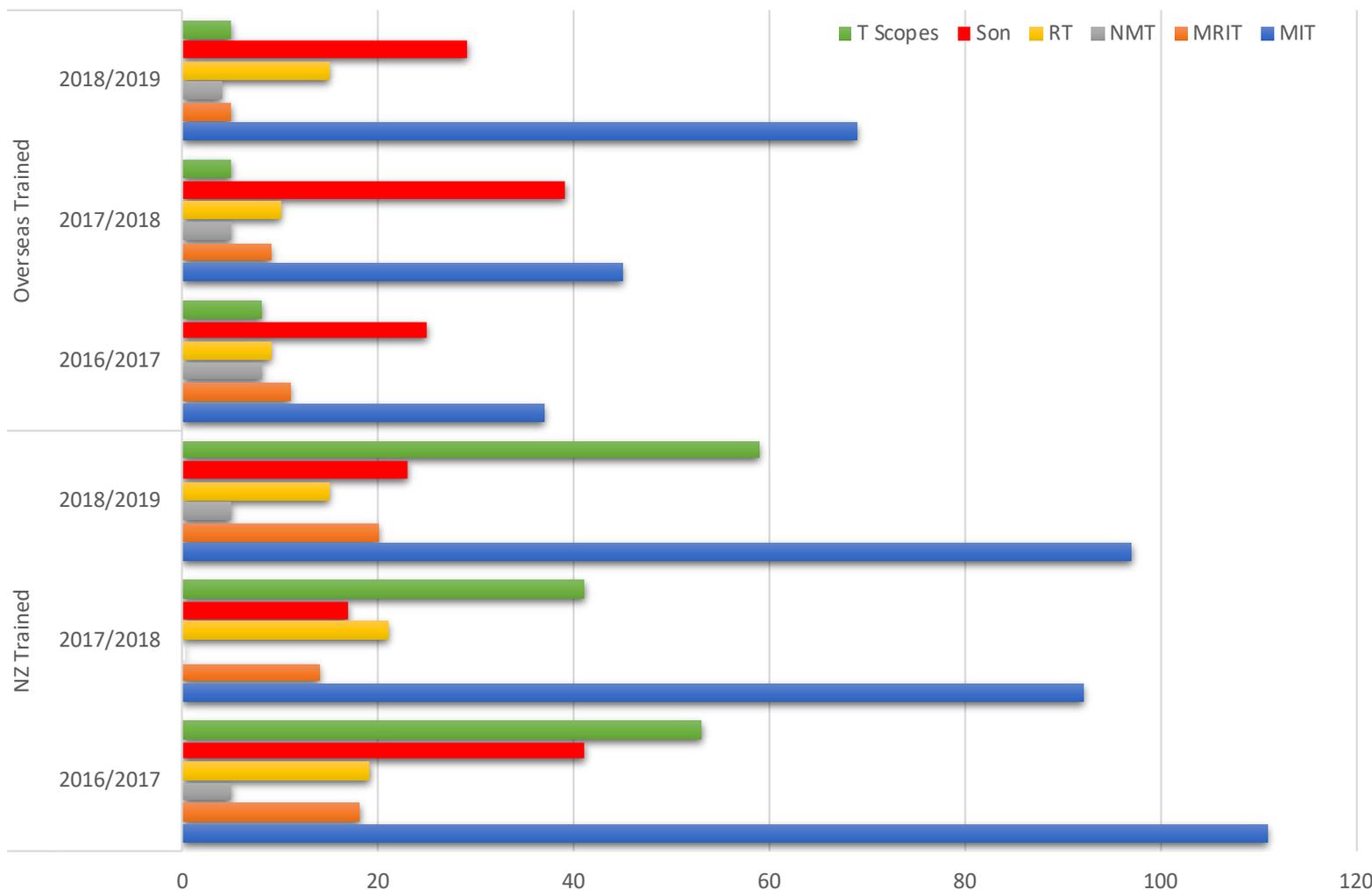
Country	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
Australia	8	2	3	6	11			3	33
Canada	2	1		1	6				10
Fiji	1								1
Italy	1								1
Ireland	2			3					5
New Zealand	97	20	5	15	23	22	6	31	219
Egypt	1								1
South Africa	19		1	2	3				25
UK	31	2		3	7	1			44
USA	3				2				5
Malaysia								1	1
Philippines	1								1
TOTAL	166	25	9	30	52	23	6	35	346

APPROVED REGISTRATIONS FOR PREVIOUS THREE YEARS

For the 2018/2019 year New Zealand-trained registration applications exceeded overseas-trained applications by **26%**.

Of note:

- The number of overseas-trained sonographer applications was greater than New Zealand-trained sonographer applications in 2018/2019.
- During the 2017/2018 years, all Nuclear Medicine Technologists registered were overseas-trained, however during the 2018/2019 **55%** of all Nuclear Medicine Technologists registered were New Zealand trained.
- The number of New Zealand trained and overseas-trained radiation therapists were the same in the 2018/2019 year.



DECLINED REGISTRATIONS BY COUNTRY - TRAINED

Declined Applications

Country	2017/2018	2018/2019
Australia	1	
Italy		1
Belgium	2	
Canada	2	
Fiji	1	
Germany	1	
India	8	1
Sudan		1
Malaysia	1	1
Nigeria	2	3
Pakistan	2	1
Philippines	5	3
South Africa	3	5
UK	3	5
USA	2	5
TOTAL	33	26

Offered a REA as an Alternative Pathway to Registration

Country	2017/2018	2018/2019
Australia		1
Italy		1
Canada	2	
Egypt	1	
Fiji	3	2
India	2	6
Malaysia	1	
Nigeria	1	
Philippines	3	5
South Africa	4	9
UK		1
USA	5	5
Zimbabwe	4	2
Germany		1
Iran		1
Namibia		1
Sri Lanka		1
Uganda		1
TOTAL	26	37

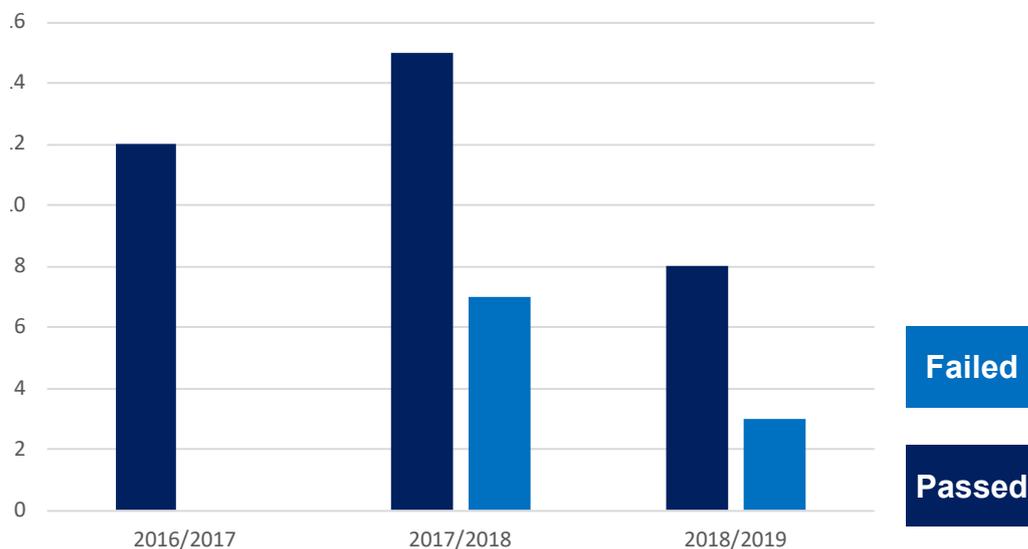
REGISTRATION EXAMINATION ASSESSMENTS

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	20	6	3	1	7	37
REA Sat	8	1			2	11
REA Passed	8					8

In 2018-2019 **11** applicants took up the offer to sit a REA. The eight applicants (**72%**) 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 2018-2019, **37** REA's were offered, however only **11** REA's were completed. It is of note a REA can be sat up to 12 months after being offered. Therefore REA's sat in 2018-2019 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 2018-2019 the Board issued a total of **3113** annual practising certificates:

- **178** (5%) practitioners were issued an annual practising certificate with a condition
- **280** (8%) practitioners held an APC in more than one scope.

	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
APC holders	1903	277	66	421	600	42	9	75	3393*
APC's with conditions	58	3	22	13	73			9	178

* This total differs from the number of APC's issued as 280 practitioners hold a single APC in multiple scopes of practice.



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 43
- Must practise under a Board approved supervisor when practising within lithotripsy 4
- Must practise under supervision for a specified amount of time 1
- Holding a non-clinical APC 6

Total 58

Magnetic Resonance Imaging Technologist

- Holding a non-clinical APC 2
- 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 3

Nuclear Medicine Technologist

- May operate diagnostic CT on a hybrid PET or SPECT/CT 14
- May operate diagnostic CT independently 3
- Must practise within PET only 1
- May perform diagnostic CT on a stand alone CT camera 1
- May operate diagnostic CT on a hybrid PET or SPECT/CT with supervision 2
- May perform diagnostic CT on a stand alone CT camera and on a hybrid PET or SPECT/CT 1

Total 22

Radiation Therapist

- May practise within mammography 1
- Must practise within mammography only 2
- Must practise within treatment only 4
- Must practise in CT Simulation and treatment only 6

Total 13

Sonographer

- Must practise under supervision 2
- Must practise within cardiac ultrasound only 45
- Must practise within obstetrics ultrasound only 1
- Must practise within obstetrics and gynaecology ultrasound only 1
- Must practise within vascular ultrasound only 18
- Must not practise in obstetrics ultrasound 2
- Must practise within paediatric cardiac ultrasound only 3
- Must contact the Board for conditions regarding practice 1

Total 73

Trainee Sonographer

- Must practise within cardiac ultrasound only 6
- Must practise within vascular ultrasound only 3

Total 9

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 accredited education provider is subject to an ongoing 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	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. In the 2018 audit the Board selected 20% 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 2014 to 2018 demonstrates practitioners are actively engaging in ongoing learning and professional development, with the majority of audited practitioners meeting the Board's ongoing competency requirements.

	2014		2015		2016		2017		2018	
Called for audit	266		270		291		303		552	
Audited	246	92%	238	88%	270	93%	276	91%	500	91%
Passed	241	98%	236	99%	269	99.6%	274	99%	498	99%
Unsuccessful	5	2%	2	1%	1	<1%	2	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 four notifications during 2018/2019. One practitioner was referred to a PCC relating to inappropriate behaviour.

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 2018-2019 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 2018/2019 year the Board received three professional conduct notifications, two in relation to inappropriate behaviour, and the third relating to a practitioner practising without registration or an APC. All three conduct notifications received were resolved.

NOTIFICATIONS RECEIVED

The Board received the following number of notifications during the 2018-2019 year across the medical imaging and radiation therapy professions.

	Number		Outcome				
	New	Existing	Referred to HDC	Referred to PCC	Referred to HPDT	Ongoing	Resolved
MIT	1	1		1		1	1
MRIT							
NMT							
RT		1				1	
Son	3					1	2
TOTAL	4	2		1		3	3

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 2018-2019, the Board received no competence-related notifications.

FINANCIAL REPORT

FOR THE YEAR ENDED
31 MARCH 2019

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD **ENTITY INFORMATION**

For the Year ended 31 March 2019

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

**INDEPENDENT AUDITOR'S REPORT
TO THE READERS OF
MEDICAL RADIATION TECHNOLOGISTS BOARD'S FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2019**

The Auditor-General is the auditor of Medical Radiation Technologists Board. The Auditor-General has appointed me, Chrissie Murray, using the staff and resources of Baker Tilly Staples Rodway Audit Limited, to carry out the audit of the financial statements of the Medical Radiation Technologists Board on his behalf.

Opinion

We have audited the financial statements of the Medical Radiation Technologists Board that comprise the statement of financial position as at 31 March 2019, the statement of financial performance, the statement of financial position, the statement of movements in equity and statement of cash flows for the year ended on that date and the notes to the financial statements that include accounting policies and other explanatory information.

In our opinion the financial statements of the Medical Radiation Technologists Board present fairly, in all material respects:

- the entity information,
- its financial position as at 31 March 2019; 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 Reduced Disclosure Regime

Our audit was completed on 30 September 2019. 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 financial statements and we explain our independence.

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 financial statements

The Board is responsible for preparing financial statements that are fairly presented and that comply 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 financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, 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 financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements, as a whole, are 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 financial statements.

We did not evaluate the security and controls over the electronic publication of the financial statements.

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 financial statements, 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 financial statements 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 financial statements, including the disclosures, and whether the financial statements represent 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.



Chrissie Murray
Baker Tilly Staples Rodway Audit Limited
On behalf of the Auditor-General
Wellington, New Zealand

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

STATEMENT OF FINANCIAL PERFORMANCE

For the Year ended 31 March 2019

	Note	2019	2018
		\$	\$
Income			
Registration Fees - Non NZ		87,561	46,122
Registration Fees - NZ		64,008	56,774
APC's		1,062,120	694,852
Examination Fees		26,845	36,522
Interest Received		35,944	33,141
Accreditation Income		24,557	24,233
Sundry Income		20,293	1,840
Total Income		1,321,328	893,484
Less Expenses			
Accreditation Expenses		24,882	24,233
Archiving		1,366	1,366
Audit Fees		6,148	6,048
Bad Debt		-	12,500
Bank Charges		22,621	18,226
Board Member Fees & Expenses		158,089	172,462
Catering		3,361	4,763
Conference Expenses		5,221	3,483
Examiner Fees		24,719	51,404
General Expenses		2,585	874
Insurance		7,215	2,650
IT		2,443	1,849
Legal Expenses		3,485	3,820
MSS Service Charge		806,777	599,674
Printing, Stamps & Stationery		1,691	2,851
Project Costs		98,989	90,660
Telephone, Tolls & Internet		-	202
Training		3,969	904
Travel		74,307	94,498
Total Expenses		1,247,868	1,092,468
Net Surplus/(Deficit) For The Year		73,460	(198,984)

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

SUMMARY STATEMENT OF CASHFLOW

For the Year ended 31 March 2019

	2019	2018
	\$	\$
Operating Activities		
<i>Cash was provided from:</i>		
APC and Disciplinary Levies	1,238,480	1,006,862
Other Income received	253,103	206,508
Interest Received	35,944	33,140
<i>Cash was applied to:</i>		
Payments to Suppliers and Others	(1,099,766)	(1,024,137)
Net Cash Inflow/(Outflow) From Operating Activities	427,761	222,373
Net Increase in Cash Held	427,761	222,373
Cash at beginning of year	1,719,140	1,496,767
Closing Bank Balance	2,146,901	1,719,140
 <i>Represented By:</i>		
Cash and Cash Equivalents	546,901	169,140
Investment - Term Deposits	1,600,000	1,550,000
Closing bank balance	2,146,901	1,719,140

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD
STATEMENT OF MOVEMENTS IN EQUITY

For the Year ended 31 March 2019

	Note	2019	2018
		\$	\$
Opening Equity		627,723	826,708
Net surplus/(Deficit) For The Year		73,460	(198,984)
Equity at End of the Year		701,183	627,723

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

STATEMENT OF FINANCIAL POSITION

For the Year ended 31 March 2019

	Note	2019	2018
		\$	\$
Equity			
Retained Earnings	4	701,183	627,723
Total Equity		701,183	627,723

Represented by;

Current Assets			
Westpac Bank - Current		546,464	168,703
Westpac Bank - Savings		438	437
Westpac Bank - Term Deposits		1,600,000	1,550,000
Accounts Receivable		-	43,413
Provision for doubtful debt		-	(5,000)
Prepayments		5,780	11,727
Total Current Assets		2,152,682	1,769,280

Non-Current Assets			
Investments in MSS		50	50
Total Assets		2,152,732	1,769,330

Non - current Liabilities			
Provision for onerous lease		82,023	-
Current Liabilities			
Medical Sciences Secretariat Ltd		76,357	64,201
Accrued Expenses		10,811	8,665
GST Due for Payment		131,550	106,226
Income in Advance		1,130,302	962,515
Provision for onerous lease		20,506	-
Total Current Liabilities		1,451,549	1,141,606

Net Assets/ (Liabilities)		701,183	627,723
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For and on behalf of the Board:

Chairperson: 
Beryl Kelly

Date: 30 September 2019

Chief Executive: 
Mary Doyle

Date: 30 September 2019

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 the new financial reporting framework Tier 3 Public Benefit Entity Simple Format Reporting (PBE-SFR-A (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 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:

	2019	2018
Retained Earnings	\$	\$
Opening Balance	627,723	826,708
Net Surplus/ (Deficit) For The Year	73,460	(198,984)
Closing Balance	701,183	627,724

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 whom 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 2019 for 80 The Terrace is current: \$46,018 and non-current: \$164,896.

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 2019. A subsequent 3 year lease has been signed to 31 August 2022.

	2019	2018
Lease Commitments	\$	\$
Current	76,664	63,989
Non- Current	228,696	196,316
	305,360	260,305

6. *Contingent Liabilities*

As at the reporting date, the Company has recognised the following provision.

	2019	2018
	\$	\$
Opening Balance		-
Additional provisions made in this financial year	102,529	-
Reversal of unused amount		-
	102,529	-
Provision for onerous lease (Current)	20,506	-
Provision for onerous lease (Non-current)	82,023	-
Closing Balance	102,529	-

As per note 5, the Board has undertaken to meet the lease obligations of Medical Sciences Council and Medical Radiation Technologists Board, who are jointly and severally liable for the lease of 80 The Terrace with the Dental Council, the Pharmacy Council of New Zealand and the Physiotherapy Board of New Zealand. As the Company continues to meet the lease commitment for 80 The Terrace but is unable to occupy the premises, the lease commitment is considered to be onerous.

The Company anticipates sub-letting the premises for at least part of the remaining lease term.

The provision has been calculated as the minimum amount payable under the contract, less expected recoveries from sub-letting. Value of office fit-out assets that are associated with the lease has been impaired to nil as at 31 March 2019.

7. *Revenue Categories*

Revenue from non-governmental sources for providing goods or services totalled \$1,265,090 (2018: \$860,343) and revenue from interest, dividends and other investments was \$35,945 (2018: \$33,141). Miscellaneous income from the settlement of the Business Interruption Insurance claim (lodged Feb 2017) amounted to \$19,354.

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.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD

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