



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

**Annual Report**

1 APRIL 2021 - 31 MARCH 2022



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.

# Contents

<b>Report from the Chair and Chief Executive</b>	<b>4</b>	<b>Registrations and Practising Certificates</b>	<b>24</b>
<b>Numbers at a Glance</b>	<b>6</b>	Registration Statistics	25
		Approved Registrations for 2021/2022	26
		Approved Registrations by Country-Trained	27
		Approved Registrations by Scope for Previous Three Years	28
		Declined Registrations by Country-Trained	29
		Registration Examination Assessments	30
		Annual Practising Certificates	31
		Ethnicity Statistics	32
		Conditions on Practice	34
<b>The MRT Board</b>	<b>8</b>		
The Board's Role & Functions	9		
Board Members	10		
Board Meetings and Fees	12		
Board Committees	13		
Secretariat	14		
<b>Strategic Priorities and Goals</b>	<b>16</b>	<b>Education &amp; Continuing Professional Development</b>	<b>36</b>
Priorities	17	Practitioner Competence Audit	37
Key Achievements and Outcomes	18		
Responsibility Authority Core Performance Standards Review	20		
Status of Recommendations for Improvement	21		
		<b>Fitness to Practise, Professional Conduct &amp; Competence</b>	<b>38</b>
		Notifications Received	39
		<b>Financial Report</b>	<b>40-53</b>

# From the Chair and Chief Executive

## Tēnā koutou katoa,

As we continue to work in the ever-changing COVID-19 environment we would like to extend a heartfelt thanks to all practitioners for their continuing dedication in providing the highest standard of care to the patients of Aotearoa. Equally we acknowledge the Medical Sciences Secretariat team who have continued to provide high quality support to the Board throughout the last year. Meetings were held both online and in person and through the leadership of the CEO, the Board's core business was able to continue largely uninterrupted.

## Board Membership

Beryl Kelly (MIT appointment) and Louise Tarr (Sonography) completed their terms on the Board in 2021. We were finally able to farewell them properly in June of this year and we wish them all the best. A particular thanks to Beryl who had been the previous Board chair and was instrumental in streamlining the Board's policy on registrations. We have welcomed Philip Thomas (MIT) and Carol Bagnall (Sonography) as the new appointments. Serving the MRTB to ensure the health and safety of the public is a very diverse and interesting role and we would encourage you all to consider these positions with the Board as they are advertised. It is very rewarding and will bring different skills to your professional development.

## Strategic Focus

The Board initiated a review of the scopes of practice in 2021 and whilst some aspects were put on hold, other phases of the review are underway including an upcoming review of the competence standards for medical imaging and radiation therapy practitioners. Cultural competence continues to be a major focus for the Board, and we are working with a Māori consultancy group Haemata to develop and strengthen our organisational responsiveness to working with and for Māori.

## Responsible Authority Review

In 2021 a review of the Board's performance was undertaken within the context of being a responsible authority appointed under the Health Practitioners Competence Assurance Act 2003 and in accordance with the provisions in that Act. We received a positive report that confirmed the Board is meeting its statutory functions and responsibilities under the Act.

The key outcomes and recommendations from that review are provided later in our 2021-2022 annual report.

## New Premises

In January of this year the secretariat team moved into new premises after outgrowing the previous office space in Panama St. The team services both the Board and our Medical Sciences Council colleagues and the new space on Customhouse Quay can house the team appropriately with meeting rooms and break out spaces away from the main open plan office. The Panama St lease was able to be surrendered thereby incurring no ongoing costs.

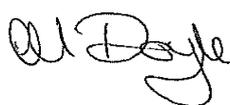
## Looking Ahead

While we have continued to register suitably qualified and experienced overseas-trained practitioners throughout these last two years, their ability to enter the country and practise in New Zealand has been severely limited. As New Zealand starts to re-open its borders after two years of various restrictions as we collectively responded to the global COVID-19 pandemic, we look forward to being able to facilitate the return of overseas-trained practitioners to join our medical imaging and radiation therapy workforce.

Ngā mihi,



**Billie Mudie**  
Chair



**Mary Doyle**  
Chief Executive



AT A GLANCE/AS AT 31 MARCH 2022

# New Registrations

## 8 Medical Imaging and Radiation Therapy Scopes of Practice

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



**350**

New registrations across the eight scopes of practice

The three largest groups of approved overseas applications from overseas trained practitioners were from:

**37** Australia

**36** South Africa

**34** UK

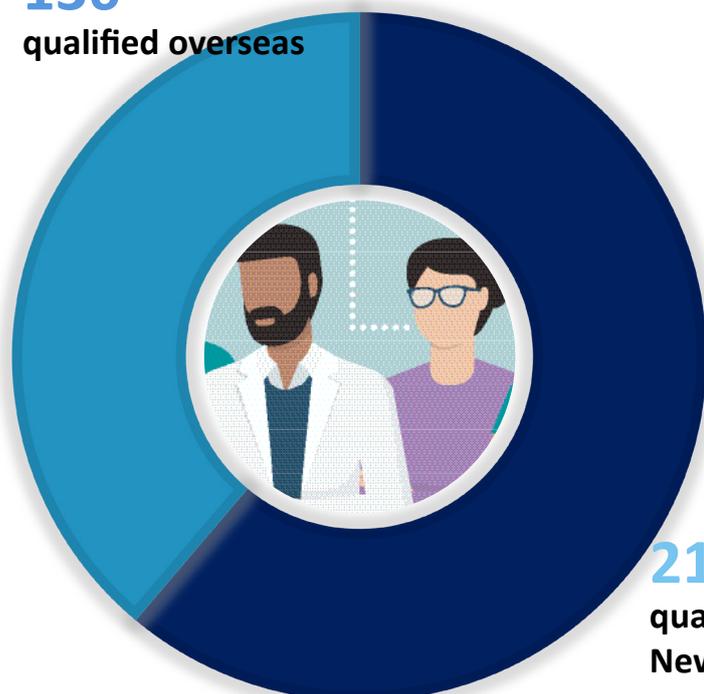
**61%**

practitioners qualified in New Zealand



**136**

qualified overseas



**214**

qualified in New Zealand

# Practising numbers and regulatory interventions



**3353**

**Annual Practising Certificates**  
received and processed

## Professional Standards:

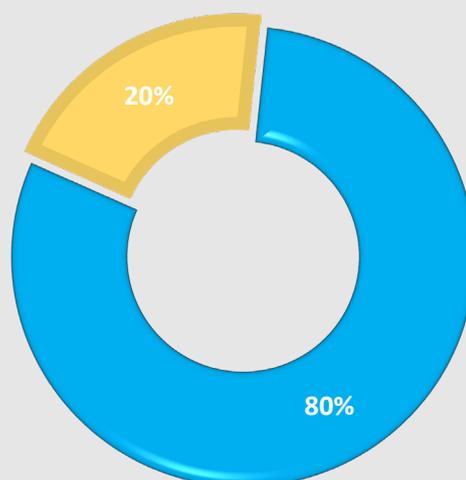
**5** NEW NOTIFICATIONS

■ conduct ■ competence

**4** Conduct cases

**0** Fitness to practise cases

**1** Competence case



# The Medical Radiation Technologists 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 several influences including economic factors, legislative and regulatory change, political factors, social and demographic factors, and technological change.

## 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 (HDC) 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 (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by the profession.
- Liaise with other authorities appointed under the Act about matters of common interest.
- Promote and facilitate interdisciplinary collaboration and cooperation in the delivery of health services.
- Promote education and training in the profession.
- Promote public awareness of the responsibilities of the Board.
- Exercise and perform any other functions, powers and duties as conferred or imposed by or under the Act or any other enactment.

## Board Members



**Billie Mudie**  
Radiation Therapist  
Chair

Term  
commenced

2015

Term  
renewed

2019

Term due to be  
completed

2022



**Anthony Bow**  
Lay Member  
Deputy Chair

2017

2020

2023



**Pru Burns**  
Nuclear Medicine Technologist

2019

2022



**Lizzie Macaulay**  
Medical Imaging Technologist

2016

2019

2023



**Peter Dooley**  
Magnetic Resonance Imaging  
Technologist

2017

2020

2023



**Philip Thomas**  
Medical Imaging Technologist

Term commenced	Term renewed	Term due to be completed
----------------	--------------	--------------------------

2021

2023



**Carol Bagnall**  
Sonographer

2021

2023



**Susan Yorke**  
Lay Member

2019

2022



**Beryl Kelly**  
Medical Imaging Technologist

2011

2014;  
2017

April 2021



**Louise Tarr**  
Sonographer

2015

2018

April 2021

## Board Meetings and Fees

Position	Fee
Chairperson	\$35,056 annual honorarium
Board Member	\$680 day / \$85.00 hour

	21 <sup>st</sup> April 2021	24 <sup>th</sup> June 2021	18 <sup>th</sup> August 2021	20 <sup>th</sup> October 2021	6 <sup>th</sup> December 2021	2 <sup>nd</sup> March 2022
Beryl Kelly	✓					Term Completed
Anthony Bow	✓	✓	✓	✓	✓	✓
Pru Burns	Apologies	✓	✓	✓	✓	✓
Billie Mudie	✓	✓	✓	✓	✓	✓
Lizzie Macaulay	✓	✓	✓	✓	✓	✓
Louise Tarr	✓					Term Completed
Peter Dooley	✓	✓	✓	✓	✓	✓
Susan Yorke	✓	✓	✓	Apologies	✓	Apologies
Carol Bagnall		Term Commenced	✓	✓	✓	✓
Philip Thomas		Term Commenced	✓	✓	✓	✓

## Board Committees

The Board has several standing committees with delegated authority to oversee some of the regulatory functions of the Board. Committee membership was as follows:

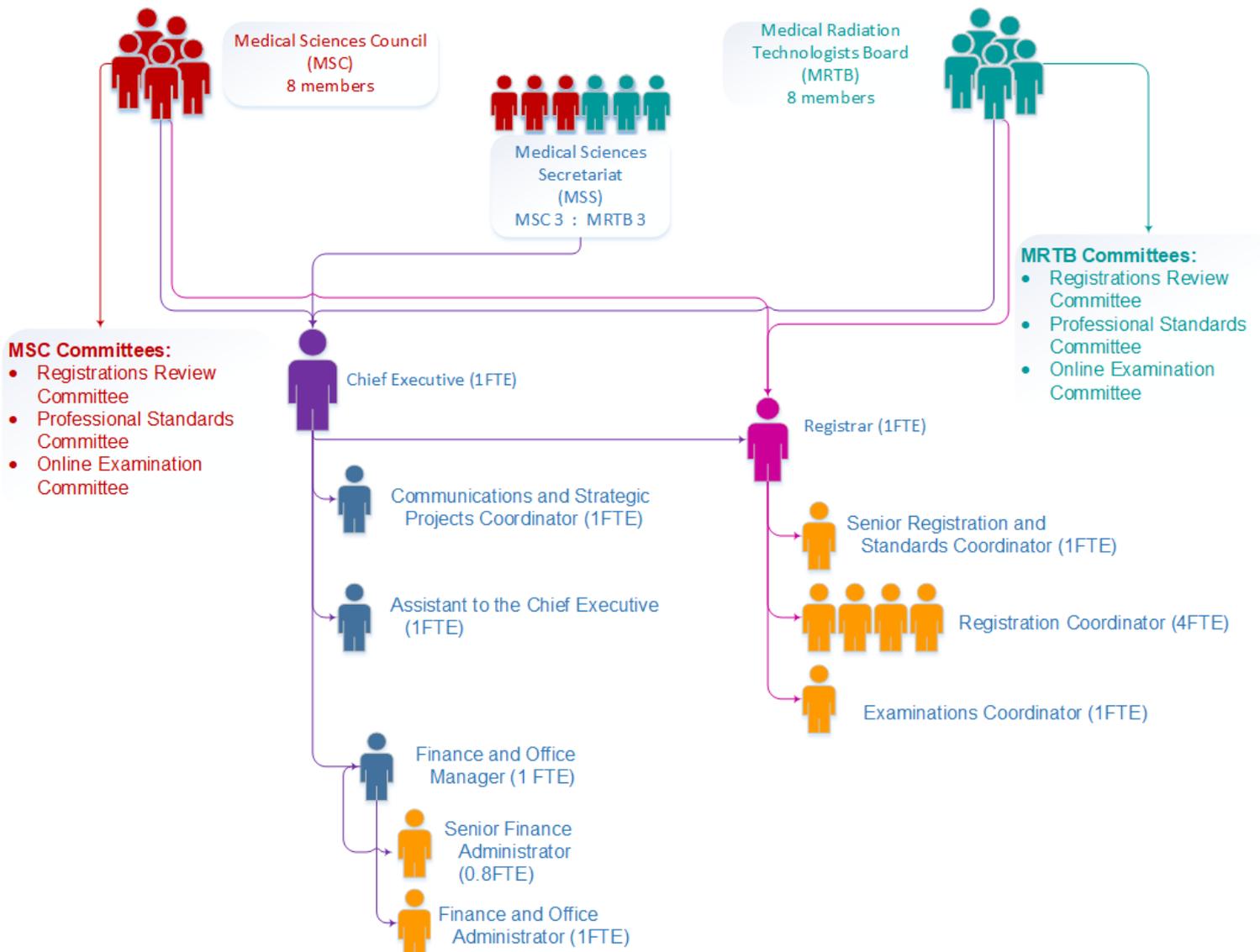
Committee	Membership
<b>Registrations Review Committee</b>	Lizzie Macaulay Susan Yorke Board member from the relevant scope of practice
<b>Professional Standards</b>	Billie Mudie Susan Yorke Anthony Bow
<b>Online Examinations Committee</b>	Billie Mudie Jacqueline Metzler Lizzie Macaulay (Chair) Catherine Sorensen Jacob Cameron Shelley Park Beryl Kelly

# Secretariat

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

The shared secretariat arrangement with the MSC enables the Board to achieve efficiencies in terms of costs and consistency in regulatory standards. While the Board and the MSC are separate authorities with legal responsibilities for the statutory regulation of different groups of health professionals, their strategic priorities and key initiatives are often similar.

Sharing secretariat resources enables both authorities to jointly manage key initiatives and subsequent annual business goals. Consequently, the individual strategic planning documents for the Board and the MSC share several similarities and common goals.



## Secretariat Staff (as of 31 March 2022)

<b>Chief Executive</b>	<p><b>Mary Doyle</b> Manages the strategic functions and overall business of the Board and is responsible for the general management and statutory compliance of the organisation.</p>
<b>Registrar</b>	<p><b>Caleb Bridgeman</b> Has delegated authority from the Board to manage the core regulatory functions under the HPCA Act. Manages procedures for notifications pertaining to concerns raised about a practitioner. Overall management of Registrations and Professional Standards Team.</p>
<b>Assistant to Chief Executive</b>	<p><b>Melissa Buist</b> Supports the Chief Executive with administrative and general tasks.</p>
<b>Registrations/ Recertification Team</b>	<p><b>Hayley Roud</b> <b>Varsha Parsotam</b> (resigned May 2021) <b>Katherine Allen</b> (resigned December 2021) <b>Isabella Rarm</b> <b>Ashely Raki</b> (commenced May 2021, resigned October 2021) <b>Devon Davies</b> (commenced May 2021) <b>Michaela Beer</b> (commenced February 2022)</p> <p>Completes and processes tasks relating to registration and recertification.</p>
<b>Professional Standards</b>	<p><b>Leanne Bartlett</b> Supports the Registrar with managing the complaints and notifications processes, reporting and monitoring. Leanne also supports the Registrar with accreditation and monitoring of education providers.</p>
<b>Online Examinations/ WBAs</b>	<p><b>Swas Lal (Hayley Roud seconded from 17 May 2021 to 24 December 2021)</b> Completes and processes tasks relating to the online examinations and REAs.</p>
<b>Finance Team</b>	<p><b>Pam Sceats</b> Financial Manager - manages the finance team and provides overall financial management.</p> <p><b>Louise Hurst</b> Senior Finance Administrator - manages the routine accounting activities and payroll.</p> <p><b>Dianne Heybrock</b> Finance Administrator - provides finance and office administrative support.</p>
<b>Communications and Strategic Projects</b>	<p><b>Miriam Brown</b> Manages the Board's ongoing communication strategies, including publications, website, consultations and online initiatives.</p>

# Strategic Priorities and Goals

The Board's Strategic Directions 2021-2026 document provides the foundational framework of our work over the next five years<sup>1</sup>. It identifies areas of particular focus and provides a benchmark against which we can measure our progress in achieving our strategic priorities. The document is a critical planning tool setting a foundation upon which the Board fulfils its responsibilities under the Act in respect of the profession of medical imaging and radiation therapy. The document is reviewed each year.

The Board has established a strong partnership approach with the Medical Sciences Council (the Council) through their shared secretariat structure which has manifested in common and consistent regulatory frameworks as well as efficient corporate functions. While the Board and the Council are separate authorities with legal responsibilities for the statutory regulation of different groups of health professionals, their strategic priorities and key initiatives are often similar. Sharing of their secretariat resources has enabled both authorities to jointly manage several key initiatives and subsequent annual business goals over the last year.

## Overarching Strategic Priority

The overriding focus of the Board's work is the health and safety of the public. The Board is not responsible for protecting the interests of medical imaging and radiation therapy practitioners. That said, the Board does have a responsibility for ensuring it undertakes its legislative functions consistently, fairly, and proportionately. The Board's intention is to achieve the best outcomes for the public through appropriate and sustainable regulation.

<sup>1</sup>From 2022 the Board has moved to a three-year strategic planning framework and a copy of the Medical Radiation Technologists Board *Looking Towards 2025: Titiro Whakamua 2025* is available on the website [www.mrtboard.org.nz](http://www.mrtboard.org.nz).

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>1. STANDARDS</i>	Appropriate and sustainable standards of clinical competence, cultural competence, and ethical conduct for the protection of public health and safety.
<i>2. PRACTITIONER COMPETENCE</i>	Our regulatory frameworks support a competent and flexible workforce both in the short and the long term.
<i>3. ACCOUNTABILITY</i>	The Board engages with the public and stakeholders to raise awareness of our functions and responsibilities and ensure our strategic decisions are informed through consultative and collaborative processes.
<i>4. ORGANISATIONAL PERFORMANCE</i>	Strong governance and organisational structures and robust business practices are in place to support the Board in achieving our legislative functions and responsibilities.

## Key Achievements and Outcomes

### Scopes Of Practice

We undertook preliminary planning work in relation to reviewing the scopes of practice for medical imaging and radiation therapy. This included a discussion forum with representatives from key stakeholder groups as a preliminary step to help inform the direction and parameters of the review. With the continued disruptions of our COVID-19 impacted world, the Board decided, as a starting point, to focus the scopes review on two key areas – the recognition of cardiac sonography as a specialist area of practice within the sonographer scope of practice, and the ongoing appropriateness of having training scopes of practice. Both review projects were in an initial conceptual stage as we ended our 2021-2022 business year, and we expect to be in a position to issue further communications later in 2022, as we develop the parameters of each review.

### Supervision Project

A review of the supervision framework continued throughout 2021-2022 with a revised Supervision policy document due for release mid-2022. The review is inclusive of identifying and establishing improved support mechanisms for practitioners engaged in the supervision process, and we would like to take this opportunity to thank our colleagues from other responsible authorities who have been willing to share their knowledge and resources with us. Also, our thanks to those medical imaging and radiation therapy practitioners who shared their supervision experiences and recommendations as to how we could improve the supervision experience for future practitioners, the aim of course being to better protect the health and safety of the public.

### Competence Standards

A re-draft of the competence standards for medical imaging and radiation therapy practitioners was completed in readiness for an initial hui with practitioner representatives. Unfortunately the 2021 hui was delayed due to pandemic-related disruptions and has since been re-scheduled for the second quarter of our 2022-2023 business year.

### Māori Responsiveness Plan

In late 2021 the Board endorsed an organisational Māori Responsiveness Plan in collaboration with our colleague authority, the Medical Sciences Council. As a component of that plan, in January 2022 the secretariat employed a Māori Advisor, the intention being for the incumbent of that position to take a lead role in guiding the organisation forward on its cultural responsiveness journey, with a specific focus on working with and for Māori within the context of improved health outcomes. However, after only a short time with us, the person appointed to the Māori Advisor role, decided to take up another employment opportunity. After considering a variety of options, it was agreed that, as a starting point, the organisation would engage the services of a well-known and highly respected Māori consultancy – Haemata – to work with us to continue our cultural responsiveness journey. We look forward to updating you on our cultural responsiveness travels in next year's annual report.

## **Right Touch Regulation**

The principles of right touch regulation have been formally adopted in a Board policy aimed to guide us in our regulatory work. Specifically, we look to ensure all our decisions have given due consideration to the principles of proportionality, consistency, transparency, accountability, agility, and target focused.

## **Policy review**

The Board has established a comprehensive suite of policies that help to guide our work through setting the standards for the practice of medical imaging and radiation therapy in Aotearoa New Zealand. Throughout the year we have continued to review our policy documents to ensure they continue to be relevant and fit for purpose. Much of our policy review work is managed in collaboration with our colleague authority, the Medical Sciences Council.

## **Reporting**

Over these last 12-months we have begun to lay the foundations for more data-based analytical reporting to help us with making timely and informed decisions.

## **Refreshed Website**

April 2021 saw the launch of our revised and refreshed website and after a few teething problems, this is now up and running smoothly inclusive of an improved “search” function. Hopefully this has made it easier for readers to find what they want when navigating the site.

# Responsibility Authority Core Performance Standards Review:

## Progress Against Recommendations for Improvement

A review report was issued to the Board in August 2021 by the Ministry of Health in respect of our performance regarding the core functions and responsibilities of responsible authorities as articulated in section 118 of the Health Practitioners Competence Assurance Act 2003.

Our performance was reviewed against twenty-three standards in total. Of those, sixteen were fully achieved, with the remaining seven standards assessed as being partially achieved. All “partially achieved” standards were deemed to have a low rating in terms of risk.

In its executive summary the reviewing agency, BSI Group New Zealand Limited, made several observations including:

- Processes and systems are well established to register applicants, issue practising certificates, review and improve competence, and respond to complaints, conduct and health notifications.
- There is a public website that contains key information on its role, functions, and the core regulatory processes. This includes policies, newsletters, annual reports, and the Board’s five-year strategic plan. A new-look website was implemented in April 2021.
- Policies are in place to support the setting of clinical and cultural competence and ethical conduct. Policies consistently recognise the Board’s principal purpose to protect public safety. The Board demonstrates the principles of right-touch regulation through its policies, processes, systems, consultations, plans and how it works with practitioners.
- There is a five-year Strategic Directions April 2021-March 2026 Plan implemented by way of an annual business plan. Priority initiatives include a scopes of practice review and looking to strengthen its engagement with Māori to seek advice on the various elements of its regulatory framework to better ensure the framework is responsive to the needs of Māori as tangata whenua of Aotearoa New Zealand.
- Recommendations for improvement identified from the performance review include completing the review of the scopes of practice, implementing a wider gender category for practitioners to self-identify (e.g. male/female/gender diverse), improvement to the notifications register, supporting the cultural initiatives, publicly reporting on the ethnicity breakdown and adding a general search function to the website.

## Status of Recommendations for Improvement

RELATED CORE PERFORMANCE STANDARDS	RECOMMENDATION	STATUS
<i>The RA has defined clear and coherent competencies for each of the scopes of practice.</i>	Discussion with the Board and Chief Executive advised that a scopes of practice review, inclusive of prescribed qualifications, had been paused mainly due to the impending health sector changes. However, the review of scopes is to be completed.	The parameters for a review of the scopes of practice for medical imaging and radiation therapy were reconsidered in 2021 with a decision to focus the first phase of the review on two key areas during 2022: inclusion of cardiac sonography as a specialist area of practice within the Sonographer scope; and a look at the ongoing appropriateness of training scopes of practice. Both review projects are underway as of August 2022, with consultations with key stakeholder representatives in progress as an initial step towards issuing public consultation documents later in 2022/early 2023.
<i>The RA maintains and publishes an accessible, accurate register of registrants, including, where permitted, any conditions on their practice.</i>	<p>It was identified that an improvement for the registration process would be for the gender categories of male/female to also include the ability to select gender diverse (or similar).</p> <p>Could also include in all other areas where practitioner feedback is sought e.g. responses to consultation documents and an opportunity when they apply for their APC renewal to update their gender identity should they wish.</p>	Both registration and APC application processes have been revised to include a widened range of gender options. These include a range of pre-determined gender categories plus an option for individuals to enter their self-articulated gender identify preference.
<i>Identifying and responding in a timely way to any complaint or notification about a health practitioner.</i>	Regarding the notifications register, to explore if the register can be better linked to the practitioner database such as an automated process and how this information is provided to the Board.	Notifications information is now included in the practitioner database and work is in progress for providing the Board with improved data analytics reporting.
<i>Considering information related to a health practitioner's conduct or the safety of the practitioner's practice.</i>		
<i>Ensuring all parties to a complaint are supported to fully inform the authority's consideration process.</i>		

---

*RELATED CORE  
PERFORMANCE STANDARDS*

*RECOMMENDATION*

*STATUS*

---

*The RA sets standards of clinical and cultural competence and ethical conduct that are informed by relevant evidence and are clearly articulated and accessible.*

That the Board proceed with its plan to review the competence standards, informed by and aligned to the principles of Te Tiriti o Waitangi as articulated in *Whakamaua*, and informed by the consultations and collaborations already planned.

A review of the competence standards was delayed until September 2022 due to COVID-19 related disruptions. Planning for a review hui, scheduled for September 2022, with practitioner representatives from all scopes of practice has been completed.

*Inclusive of one or more competencies that enable practitioners to interact effectively and respectfully with Māori.*

That the Board proceed with its planned review of the Cultural Competence policy document and ensure that cultural safety is incorporated as a key element within the cultural competence requirement.

Planning has commenced in terms of undertaking a review of key standards documents to ensure there is alignment across all relevant policy documents especially with regard to cultural safety principles and practices.

That in partnership with Māori, the Board develop, adopt, and promote tikanga best practice guidelines for its scopes of practice and include these in the requirements on practitioners.

The Board, along with our Medical Sciences Council colleagues and the team at Medical Sciences Secretariat are continuing to engage in a number of activities to build our collective understanding of cultural competence within Māori contexts. This has included joint workshops on te Tiriti o Waitangi, and organisational responsiveness in respect of working with Māori. We are also looking forward to a follow-up workshop with Haemata to explore the concept of “allyship” to help guide us as individuals contributing to our collective organisational journey. Learning basic te reo Māori is a collective goal for us and to that end our Board members, members of the Medical Sciences Council, and the staff team are engaged in a 10-week introductory Māori language programme. We plan to follow this up with a further 10-week self-paced interactive programme that will enable us to progress our Māori language learning journey.

That the Board (together with the Medical Sciences Council and the Medical Sciences Secretariat) develop a plan for developing te reo Māori and tikanga Māori practices within the organisations, commence activation of this plan and continue this activation over time.

---

*RELATED CORE  
PERFORMANCE STANDARDS*

*RECOMMENDATION*

*STATUS*

---

*Provides clear, accurate, and publicly accessible information about the purpose, functions and core regulatory processes.*

That the Board report publicly on the ethnicity breakdown of its workforce and this could be included in the annual report.

There is also an opportunity to add a general search function on the website.

Ethnicity data on the medical imaging and radiation therapy workforce were published in the Board's 2020-2021 annual report. Publication of ethnicity in all subsequent annual reports will be ongoing.

A general search function has been incorporated into the Board's website.

---

*The RA ensures that the principles of equity and of te Tiriti o Waitangi/ the Treaty of Waitangi (as articulated in Whakamaua: Māori Health Action Plan 2020-2025) are followed in the implementation of all its functions.*

That the Board shift its objective in this area from "better ensuring the framework is responsive to the needs of Māori as tangata whenua of Aotearoa New Zealand" to "aligning its regulatory framework to the principles of Te Tiriti o Waitangi (as articulated in Whakamaua: Māori Health Action Plan 2020-2025) and operationalising the principles of Te Tiriti in all its functions". The principles of tino rangatiratanga and of partnership can be used as the foundations of this alignment, bringing shape and focus to the principles of active participation, equity, and options.

Also, that the Board proceed with its planned work alongside the Medical Sciences Council to build a broad understanding of what cultural competence in Māori contexts and cultural safety in broader terms might look like within the scopes of the two RAs. The development and operationalising of this understanding can then be informed by the planned engagement with practitioners, alongside seeking information from other RAs, as well as other key thought leaders in the sector.

A joint Medical Radiation Technologists Board – Medical Sciences Council – and Medical Sciences Secretariat "Māori Responsiveness Plan" has been drafted. The plan is now being reviewed in consultation with Haemata, a Māori consultancy who are assisting the organisation with driving forward on our cultural responsiveness journey.

Our Registrar, Caleb Bridgeman (Kai Tahu) is a member of an Inter-RA Māori Strategic Leads and Influencers Network who are working on several collaborative initiatives to gain a consistent approach across Ras with regard to cultural responsiveness within a health regulatory context.

---

# Registrations & Practising Certificates

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.

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

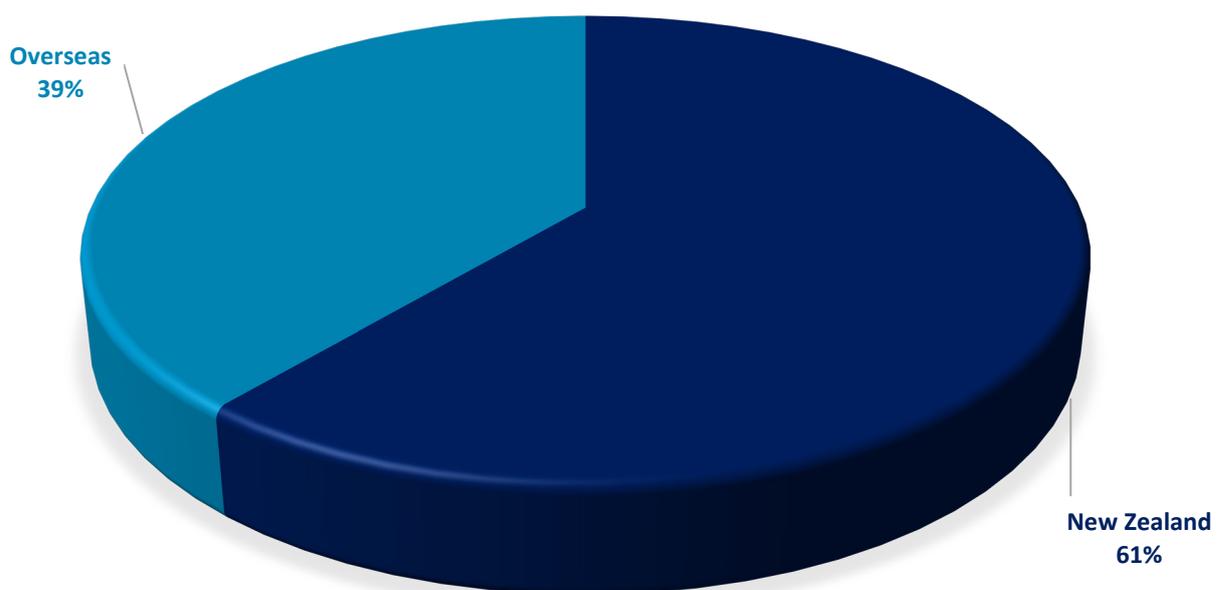
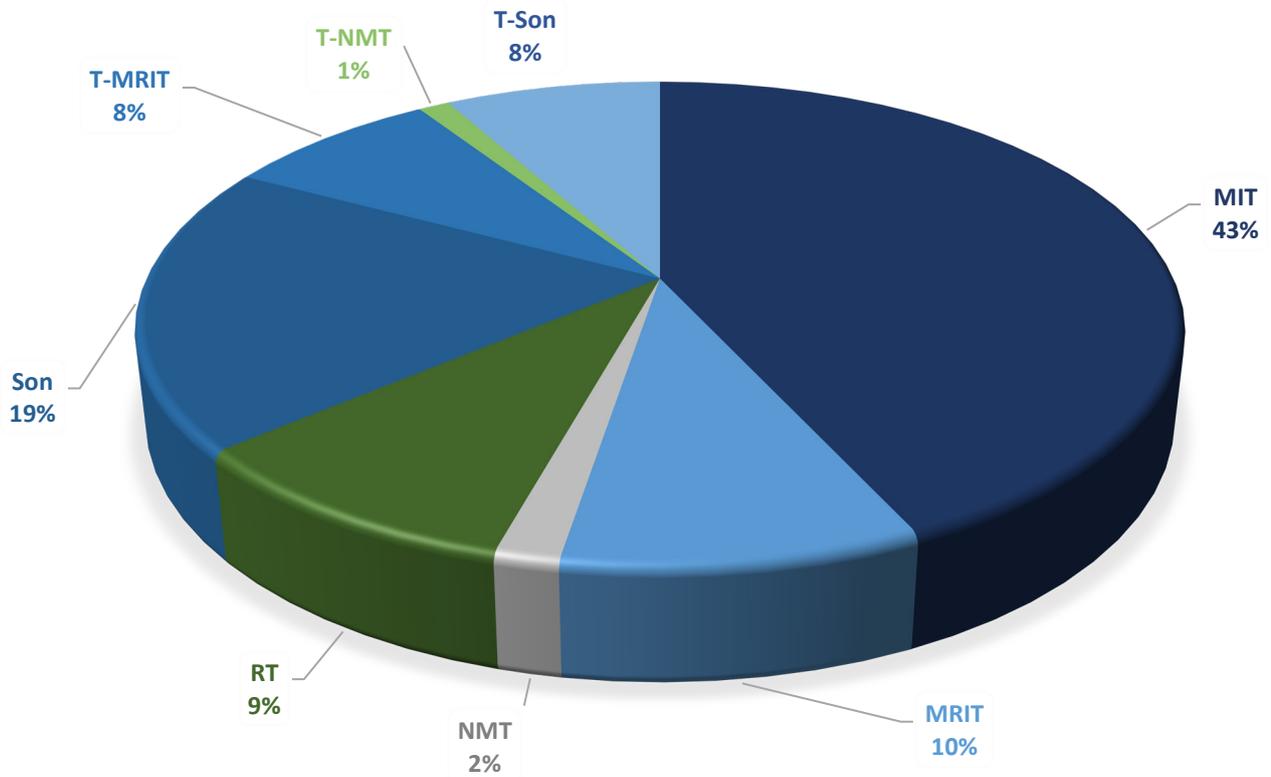
## Registration Statistics

Between 1 April 2021 and 31 March 2022 the Board received **427** applications from persons seeking registration in one of the eight scopes of practice. Of these 427 applications, **350** were approved (82%) and **29** (7%) declined due to the applicants not meeting the entry level registration requirements.

As of 31 March 2022, **34** (8%) applications were still being processed and the remaining **14** (3%) applicants withdrew their application for registration.

Scope of Practice	Approved	Declined	In Progress	Withdrawn	TOTAL
MIT	151	17	13	3	184
MRIT	33	4	3		40
NMT	6	2	4		12
RT	33		6	2	41
Son	67	6	6	5	84
T-MRIT	28		-		28
T-NMT	4		-	1	5
T-Son	28		2	3	33
<b>TOTAL</b>	<b>350</b>	<b>29</b>	<b>34</b>	<b>14</b>	<b>427</b>

## Approved Registrations for 2021/2022



## Approved Registrations by Country-Trained

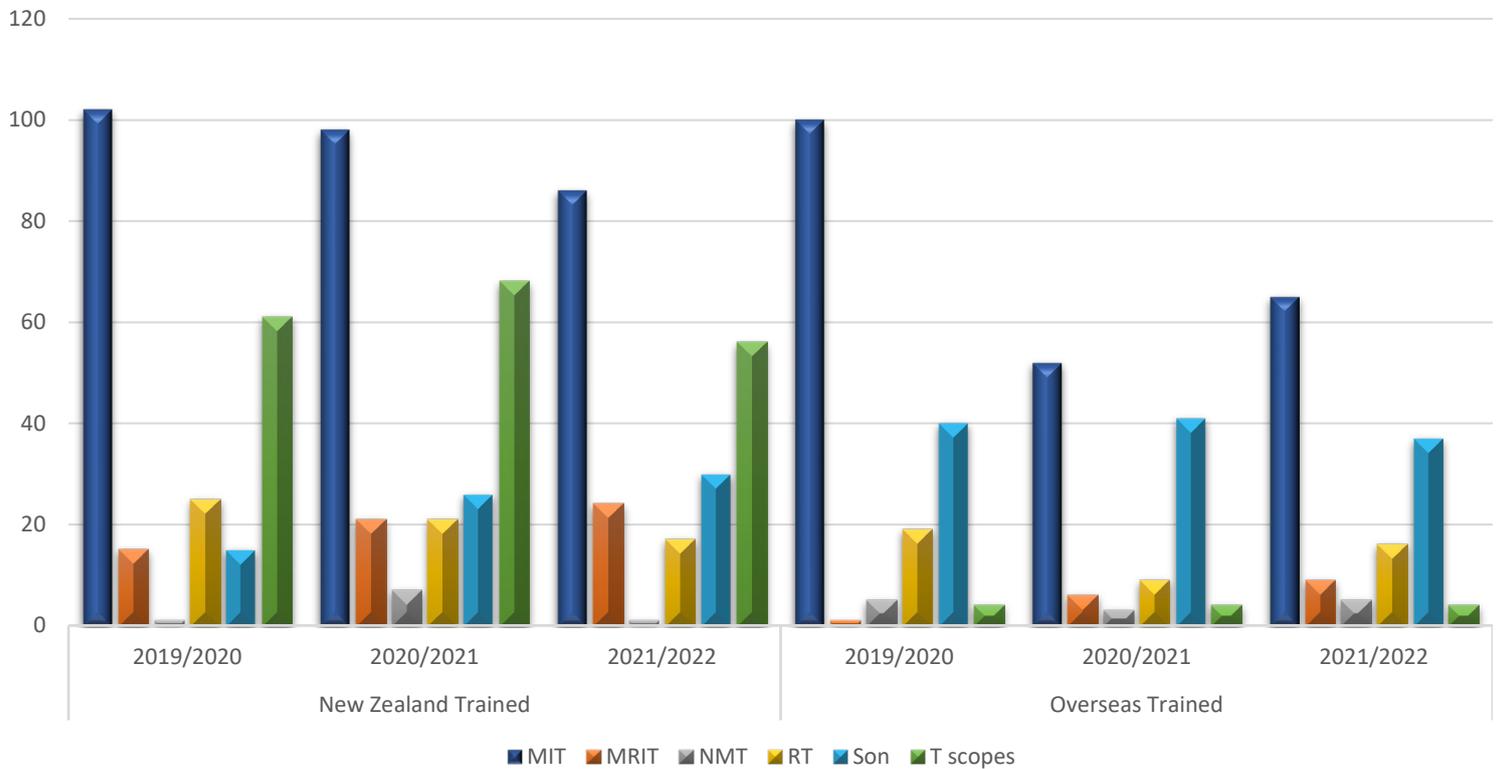
Country	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
Australia	10	1	3	7	12	-	-	4	37
Canada	1	-	1	-	5	-	-	-	7
UK	20	4	-	6	4	-	-	-	34
Fiji	1	-	-	-	-	-	-	-	1
India	1	-	-	-	1	-	-	-	2
Ireland	6	1	1	-	-	-	-	-	8
New Zealand	86	24	1	17	30	28	4	24	214
Philippines	3	-	-	-	-	-	-	-	3
France	-	-	-	-	1	-	-	-	1
Hong Kong	-	-	-	1	-	-	-	-	1
South Africa	21	3	-	2	10	-	-	-	36
USA	2	-	-	-	4	-	-	-	6
<b>Total</b>	<b>151</b>	<b>33</b>	<b>6</b>	<b>33</b>	<b>67</b>	<b>28</b>	<b>4</b>	<b>28</b>	<b>350</b>

## Online Examination Passed Applicants by Country-Trained

Country	2020/2021	2021/2022
South Africa	3	4
USA	5	4
New Zealand	1*	1*
Canada	2	2
UK	1	4
Australia	1	1
Philippines	-	1
India	-	1
<b>Total</b>	<b>13</b>	<b>18</b>

\* These applicants sat the online examination as a return-to-work requirement.

## Approved Registrations by Scope for Previous Three Years

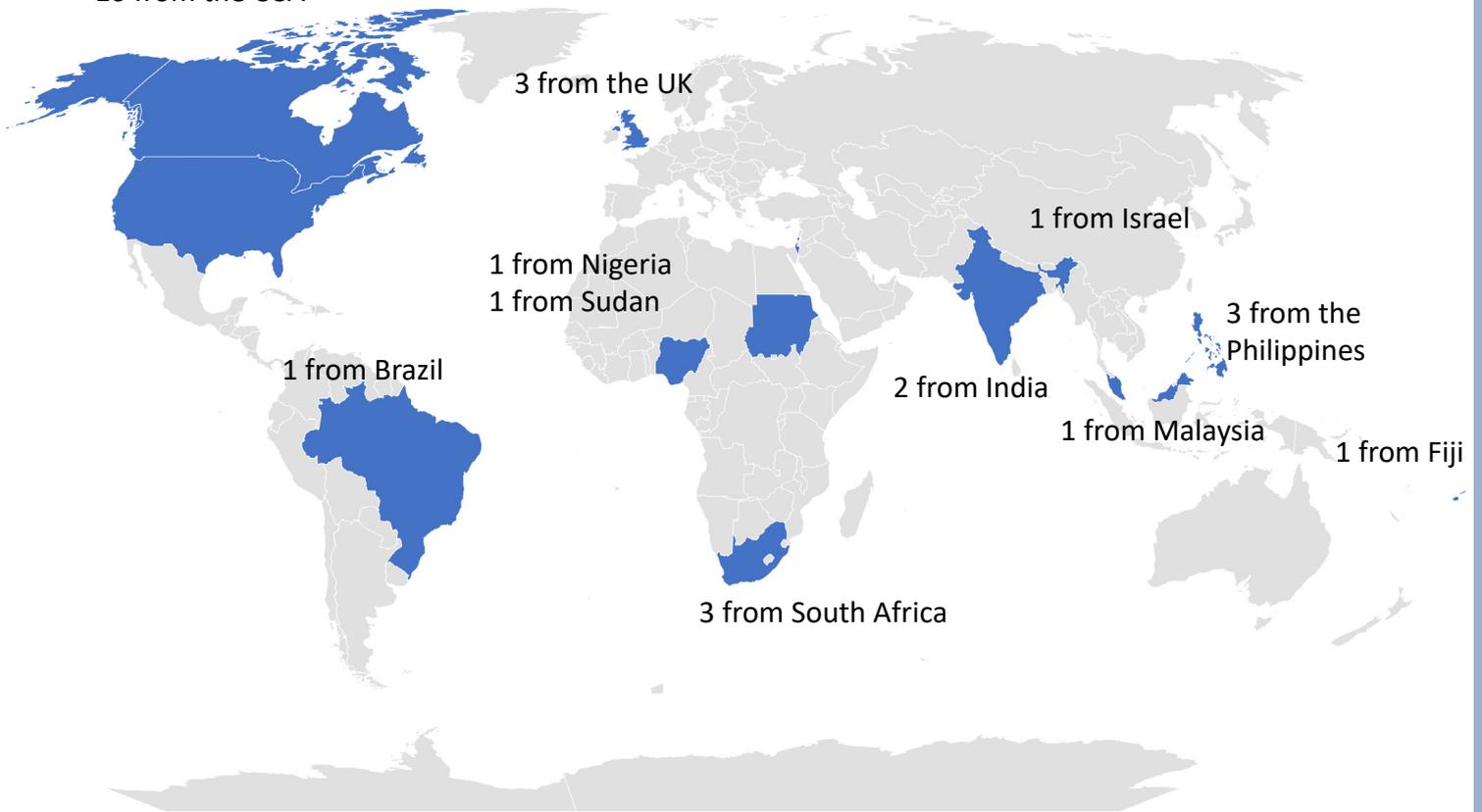


While MIT applications have reduced by 51 since 2019/2020, the MIT APC holders have increased by 27 in the last three years. This indicates that already registered MITs may have either returned to practise in New Zealand or stayed in New Zealand and obtained a 2021/2022 APC.

## Declined Registrations by Country-Trained

In the 2021/2022 year, **29** (6%) applicants were declined due to not meeting the entry level registration requirements.

2 from Canada  
10 from the USA



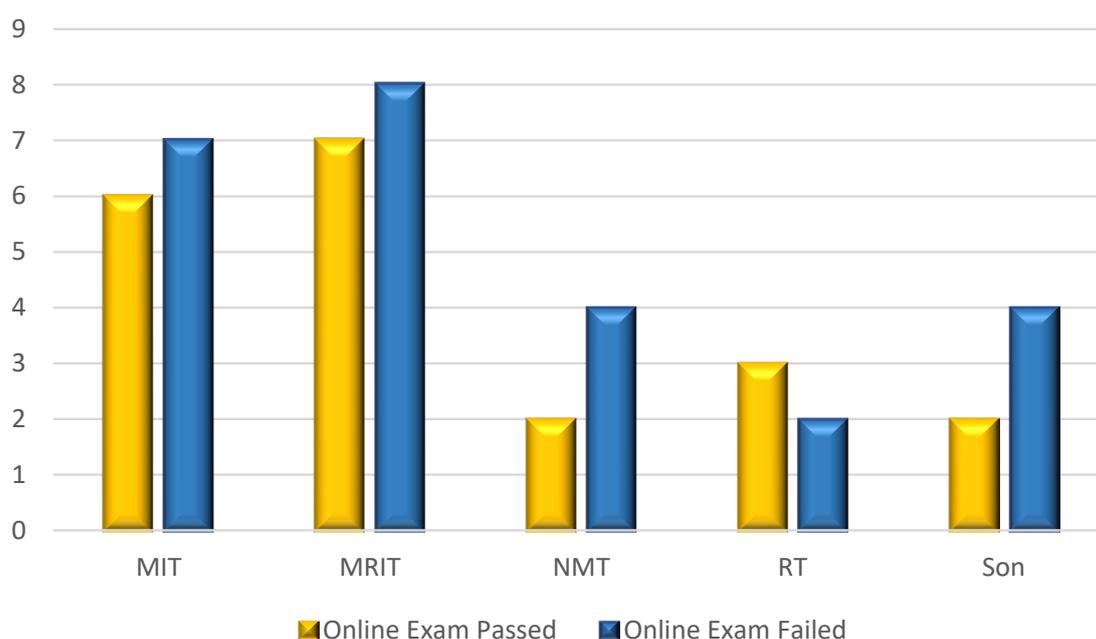
## Registration Examinations

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.

The Board offers an online registration examination assessment as a pathway to registration for all medical imaging and radiation therapy scopes of practice as a means of gaining New Zealand registration. The exception are cardiac sonographers who may be offered a registration examination assessment (REA).

In 2021-2022 **45** applicants sat the Board's online examination. The **18** applicants who passed were subsequently granted New Zealand registration with a period of supervision. In addition, in 2021-2022, one REA exam was offered and two REAs were sat and passed. These practitioners were all cardiac sonographers.

	MIT	MRIT	NMT	RT	Son	TOTAL
Online Exam Sat	11	11	2	4	5	<b>45</b>
Online Exam Passed	6	7	2	3	2	<b>18</b>
Online Exam Failed	7	8	4	2	4	<b>27</b>



## 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 demonstrate to the Board they have maintained competence and are fit to practise.

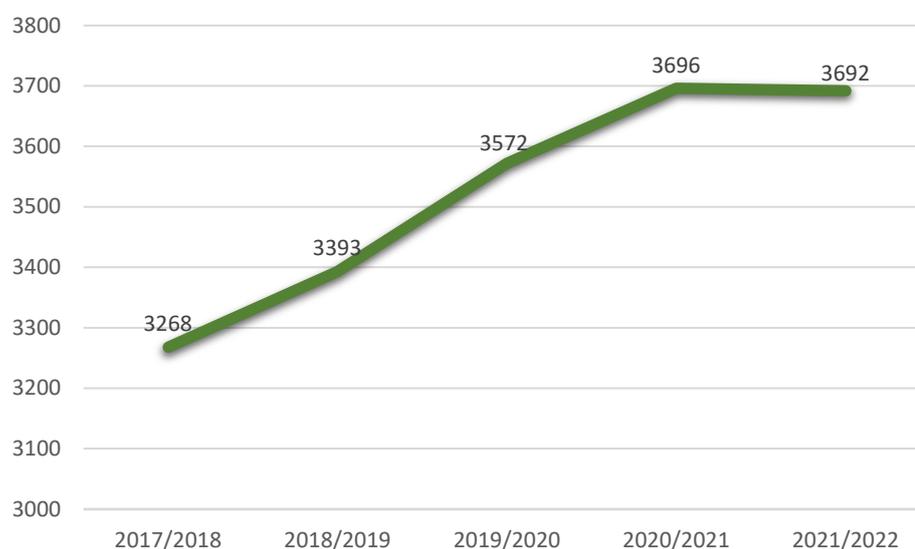
In 2021-2022 the Board issued a total of **3353** annual practising certificates:

- **240** (6%) practitioners were issued an annual practising certificate with a condition on their practice
- **339** (9%) practitioners held an APC in more than one scope.

	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
APC holders	2024	330	69	431	676	68	13	81	<b>3692*</b>
APC's with conditions	69	4	32	14	110	-	-	11	<b>240</b>

\* This total differs from the number of APC's issued as 339 practitioners hold a single APC in multiple scopes of practice.

Annual Practising Numbers over the last five years 2017-2022



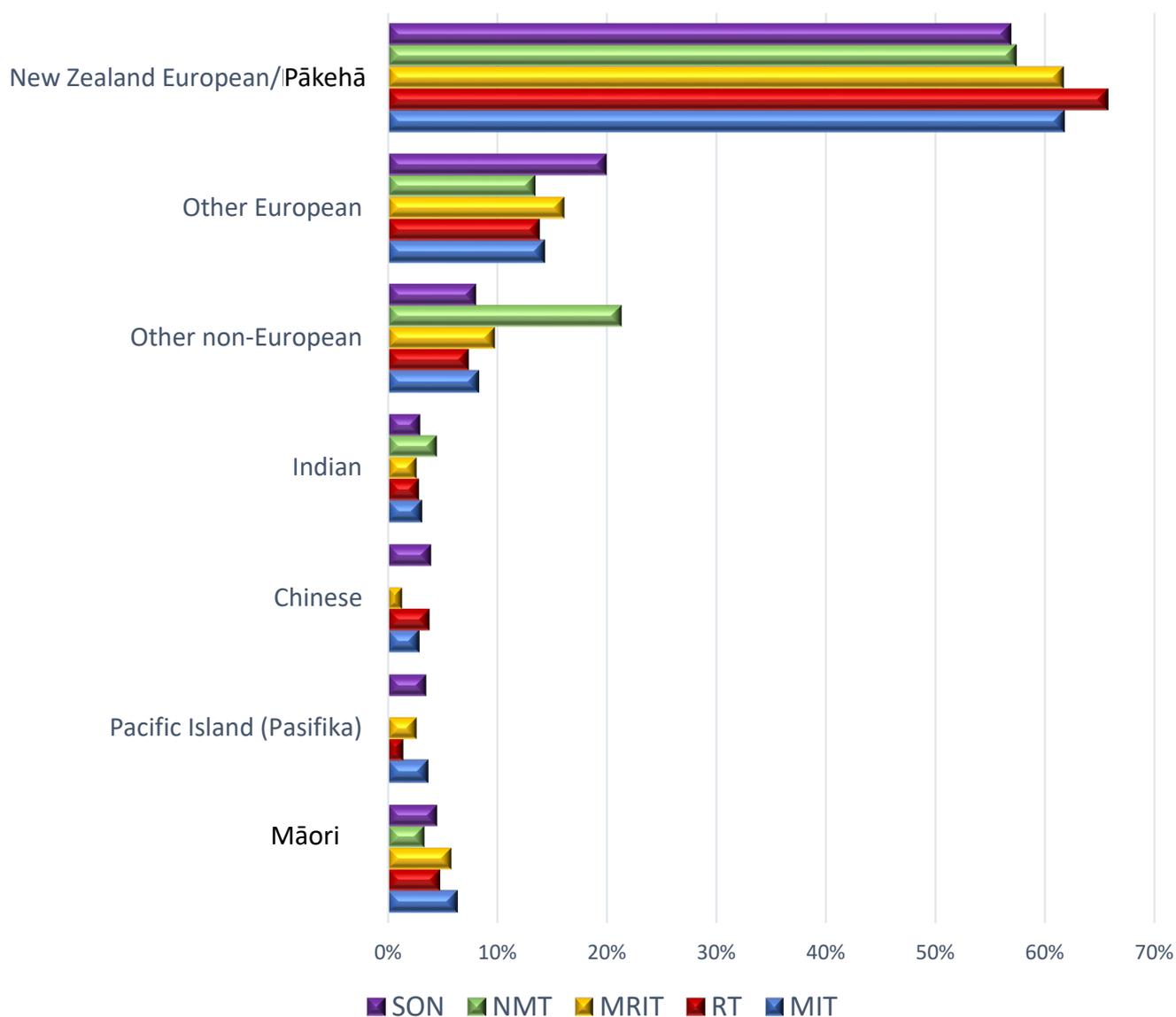
## Ethnicity Statistics

When applying for registration, practitioners can report up to three ethnicities. However, when reporting the data, we have assigned each practitioner a single ethnicity using a simplified version of Statistics New Zealand's Prioritisation standard.

The priority order is:

1. Māori
2. Pacific Island (Pasifika)
3. Chinese
4. Indian
5. Other non-European
6. Other European
7. New Zealand European/Pākehā.

The below graph shows the percentage of ethnicities of APC holders in 2021-2022. This data is inclusive of practitioners holding an APC in a training scope and those practitioners who also hold an APC in more than one scope of practice.



A further breakdown of Māori and Pasifika practitioners per scope of practice has been outlined in the tables below:

Ethnicity	MIT	MRIT	RT	SON	NMT
Māori	148	20	18	31	3
Cook Island Māori	2	1	2	1	-
Other Pacific Peoples/ Māori	1	-	-	-	-
Samoan/Māori	1	1	-	-	-
Niuean/Māori	2	-	-	-	-

Ethnicity	MIT	MRIT	RT	SON	NMT
Fijian Indian	60	9	5	17	-
Fijian	11	1	-	5	-
Samoan	10	-	1	1	-
Tongan	2	-	-	1	-
Other Pacific Peoples	1	-	-	-	-
Niuean	1	-	-	-	-
Tongan/Other Pacific Peoples	1	-	-	-	-
Fijian/Other Pacific Peoples	1	-	-	-	-
Tokelauan	1	-	-	1	-

## Conditions on Practice

### *Medical Imaging Technologist*

- Must practise under a Board approved supervisor when practising in lithotripsy 2
- Able to administer COVID-19 Vaccine 1
- Able to practise breast ultrasound 1
- Must practise within CT only 5
- Must practise within mammography only 44
- Must complete Mauriora/Clarify courses 2
- Must practise under supervision for a specified amount of time 2
- Holding a non-clinical APC 11
- Condition specific to practitioner 1

**Total**            **69**

### *Magnetic Resonance Imaging Technologist*

- Must practise under a Board approved supervisor when practising in lithotripsy 1
- Holding a non-clinical APC 2
- Must practise under supervision for a specified amount of time 1

**Total**            **4**

### *Nuclear Medicine Technologist*

- Holding a non-clinical APC 1
- May perform diagnostic CT on a hybrid SPECT/PET CT scanner 4
- May perform diagnostic CT on a standalone CT scanner 26
- Must practise under supervision on a diagnostic CT scanner 1

**Total**            **32**

## ***Radiation Therapist***

- Able to practise mammography 2
- Cannot practise in planning 1
- Must complete Mauriora/Clarify courses 2
- Must practise within CT Simulation and Treatment only 3
- Must practise within Treatment only 2
- Holding a non-clinical APC 4

**Total 14**

## ***Sonographer***

- Cannot practise in cardiac ultrasound 1
- Cannot practise in obstetrics 2
- Must complete Mauriora/Clarify courses 1
- Must practise under supervision for a specified amount of time 2
- Must practise within cardiac ultrasound only 84
- Must practise within Obstetrics and Gynaecology only 1
- Must practise within Obstetrics only 1
- Must practise within Vascular Ultrasound only 18

**Total 110**

## ***Trainee Sonographer***

- Must practise within cardiac ultrasound only 8
- Must practise within vascular ultrasound only 3

**Total 11**

# Education & 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
<b>ARA Institute of Canterbury</b>	Bachelor of Medical Imaging	Medical Imaging Technologist
<b>UNITEC Institute of Technology</b>	Bachelor of Health Science (Medical Imaging)	Medical Imaging Technologist
<b>Universal College of Learning (UCOL)</b>	Bachelor of Applied Science (Medical Imaging Technology)	Medical Imaging Technologist
<b>University of Otago</b>	Bachelor of Radiation Therapy	Radiation Therapist
	Bachelor of Medical Imaging (Honours)	Medical Imaging Technologist
<b>University of Auckland</b>	Postgraduate Diploma in Health Sciences in Magnetic Resonance Imaging	Magnetic Resonance Imaging Technologist
	Postgraduate Diploma in Health Sciences Nuclear Medicine	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 competence of all practising medical imaging and radiation therapy practitioners. Continuing professional development (CPD) is a critical feature of the Board's recertification programme.

20% of practitioners in each of the gazetted scopes of practice are subjected to an annual audit of their CPD.

In 2021, due to the on-going impact of the COVID-19 pandemic and the reduced opportunities for CPD during the 2020 year, the Board agreed not to undertake a CPD audit. However, practitioners were expected to continue undertaking professional development during this time and the requirements for the 1 April 2020 to 31 March 2023 trimester remained the same.

The following results for the four-year period from 2017 to 2020 demonstrates practitioners are actively engaging in ongoing learning and professional development, with most audited practitioners meeting the Board's ongoing competence requirements.

	2017		2018		2019		2020	
Called for audit	303		552		615		619	
Audited	276	91%	500	91%	544	89%	566	98%
Passed	274	99%	498	99%	532	98%	552	89%
Unsuccessful	2	1%	2	<1%	12	2%	14	2%

# Fitness to Practise, Professional Conduct & Competence

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

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

## Notifications Received

Notifications received in 2021-2022 related to practitioners from the following scopes of practice:

	Number		Outcome			
	New	Existing	Referred to HDC	Referred to PCC	Ongoing	Resolved
MIT	1	1		1	2	
MRIT	2				2	
NMT						
RT						
Son	2	1			1	2
<b>TOTAL</b>	<b>5</b>	<b>2</b>		<b>1</b>	<b>5</b>	<b>2</b>

## **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 2021-2022 the Board received no fitness to practise-related notifications.

## **Professional Conduct**

The Act enables the Board to appoint a professional conduct committee (PCC) to investigate a complaint 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 2021-2022 the Board received four professional conduct notifications:

- One in relation to a practitioner's standard of care.
- Two in relation to criminal convictions.
- One in relation to professional misconduct.

## **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 2021-2022, the Board received one competence related notification in relation to a practitioner practising below the required standard of practice. There was also one ongoing competence notification which was initially reported by HDC in the 2020/2021 year that was resolved and closed in 2021/2022.

# Financial Report

1 April 2021 - 31 March 2022

## NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

### ENTITY INFORMATION

*"Who are we?", "Why do we exist?"*

*For the Year ended 31 March 2022*

<i>Legal Name:</i>	Medical Radiation Technologists Board
<i>Entity Type:</i>	Body Corporate and Registered Charity
<i>Charities Registration Number:</i>	CC35408
<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 imaging and radiation therapy practitioners are competent and fit to practise.
<i>Entity Structure:</i>	An eight-member governance board comprising of: Carol Bagnall (commenced May 2021) Philip Thomas (commenced May 2021) Anthony Bow Peter Dooley Billie Mudie Prudence Burns Susan Yorke Elizabeth Macaulay Louise Tarr (departed May 2021) Beryl Kelly (departed May 2021)
<i>Main source of the entity's cash and resources:</i>	Practitioners and applications 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>Physical Address:</i>	Level 7, Perpetual Guardian, 99 Customhouse Quay, 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 OF NEW ZEALAND'S PERFORMANCE REPORT FOR THE YEAR ENDED 31 MARCH 2022

The Auditor-General is the auditor of Medical Radiation Technologists Board of New Zealand ('the 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 performance report of the Board, on his behalf.

#### Opinion

We have audited the performance report of the Board that comprise the statement of financial position as at 31 March 2022, the statement of financial performance, statement of movement 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 of the Board:

- present fairly, in all material respects:
  - its entity information and financial position as at 31 March 2022; and
  - its financial performance and cash flows for the year then ended; and
- comply with generally accepted accounting practice in New Zealand in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Public Sector).

Our audit was completed on 20 October 2022. This is the date at which our opinion is expressed.

The basis for our opinion is explained below. In addition, we outline the responsibilities of the Board and our responsibilities relating to the performance report and we explain our independence.

#### Basis for our opinion

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the Professional and Ethical Standards and the 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 members for the performance report**

The Board members are responsible for preparing performance report that are fairly presented and that comply with generally accepted accounting practice in New Zealand.

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

In preparing the performance report, the Board members are responsible for assessing the Board's ability to continue as a going concern. The Board members are also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless the Board members intend to wind-up the Board or to cease operations, or have no realistic alternative but to do so.

The Board members' responsibilities arise from the Healthcare Practitioners Competence Assurance Act 2003 and the Charities Act 2005.

### **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, 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 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 Board.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the Board and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the 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 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 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 responsibilities arise from the Public Audit Act 2001.

### **Independence**

We are independent of the 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: *International 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 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

*“How was it funded?” and “What did it cost?”*

*For the Year ended 31 March 2022*

	Note	Actual This Year \$	Actual Last Year \$
<b>Revenue</b>			
Fees, subscriptions and other revenue from practitioners		1,621,317	1,529,843
Interest, dividends and other investment revenue		9,711	25,490
Other revenue		723	23,912
<b>Total Revenue</b>		<b>1,631,751</b>	<b>1,579,245</b>
<b>Expenses</b>			
Employee related costs		657,337	574,586
Costs related to providing good or services		525,683	381,099
Other expenses		54,117	95,839
<b>Total Expenses</b>		<b>1,237,137</b>	<b>1,051,524</b>
<b>Surplus/(Deficit) For The Year</b>		<b>394,614</b>	<b>527,721</b>

# NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

## SUMMARY STATEMENT OF CASHFLOWS

"How the entity has received and used cash"

For the Year ended 31 March 2022

	Actual this Year \$	Actual Last Year \$
<b>Cash Flows from Operating Activities</b>		
<i>Cash was received from:</i>		
Fees, subscriptions and other receipts from practitioners	1,747,881	1,558,372
Interest, dividends and other investment receipts	8,220	25,490
Receipts from operating activity		
<b>Cash was applied to:</b>		
Payments to suppliers and employees	(1,228,163)	(1,214,586)
Cash advances to related parties	(145,100)	-
<b>Net Cash Flows From Operating Activities</b>	<b>382,838</b>	<b>369,276</b>
<b>Cash flows from Investing and Financing Activities</b>		
<b>Cash was received from:</b>		
Term Deposits	(950,000)	100,000
<b>Net Cash Flows from Investing and Financing Activities</b>	<b>(950,000)</b>	<b>100,000</b>
<b>Net Increase / (Decrease) in Cash</b>	<b>(567,162)</b>	<b>469,276</b>
Opening Cash	1,773,420	1,304,144
Closing Cash	1,206,258	1,773,420
<b>This is represented by:</b>		
Bank Accounts and Cash	1,206,258	1,773,420

# NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

## STATEMENT OF FINANCIAL POSITION

“What the entity owns?” and “What the entity owes?”

For the Year ended 31 March 2022

	Note	Actual This Year	Actual Last Year
<b>Assets</b>		\$	\$
<b>Current Assets</b>			
Bank accounts and cash	3	1,206,258	1,773,420
Debtors and prepayments	3	144,326	93,618
Term Deposits		2,100,000	1,150,000
<b>Total Current Assets</b>		<b>3,450,584</b>	<b>3,017,038</b>
<b>Non-Current Assets</b>			
Investments	3	50	50
<b>Total Non-Current Assets</b>		<b>50</b>	<b>50</b>
<b>Total Assets</b>		<b>3,450,634</b>	<b>3,017,088</b>
<b>Liabilities</b>			
<b>Current Liabilities</b>			
Creditors and accrued expenses	3	172,608	187,572
Income in Advance	3	1,310,920	1,238,403
Provision for onerous lease	3	41,896	33,453
<b>Total Current Liabilities</b>		<b>1,525,424</b>	<b>1,459,428</b>
<b>Non-Current Liabilities</b>			
Provision for onerous lease	3	49,456	76,520
<b>Total Non-Current Liabilities</b>		<b>49,456</b>	<b>76,520</b>
<b>Total Liabilities</b>		<b>1,574,880</b>	<b>1,535,948</b>
<b>Total Assets less Total (Net Assets)</b>		<b>1,875,754</b>	<b>1,481,140</b>
<b>Accumulated Funds</b>			
Accumulated surpluses or (deficits)		1,875,754	1,481,140
<b>Total Accumulated Funds</b>		<b>1,875,754</b>	<b>1,481,140</b>

For and on behalf of the Board;

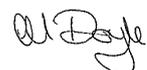
Chairperson:



Billie Mudie

Date: 19 October 2022

Chief Executive:



Mary Doyle

Date: 19 October 2022

# NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

## STATEMENT OF ACCOUNTING POLICIES

“How did we do our accounting?”

FOR THE YEAR ENDED 31 MARCH 2022

### *BASIS OF PREPARATION*

Medical Radiation Technologists Board was established by the Health Practitioners Competence Assurance Act 2003 and is a Responsible Authority under that Act.

The financial statements have been prepared in accordance with generally accepted accounting practice in New Zealand (NZ GAAP) and have been prepared on the basis of historical cost.

Medical Radiation Technologists Board has elected to apply PBE SFR-A (PS) Public Benefit Entity Simple Format Reporting - Accrual (Public Sector) on the basis that it does not have public accountability and has total annual expenses of equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

### *HISTORICAL COST*

These financial statements have been prepared on a historical cost basis. The financial statements are presented in New Zealand dollars (NZ\$) and all values are rounded to the nearest NZ\$, except when otherwise indicated.

### *CHANGES IN ACCOUNTING POLICIES*

There have been no changes in accounting policies during the financial year, however, some classification and presentational changes have been made and relevant prior year values have been updated to aid comparison (last year - nil).

### *GOODS AND SERVICES TAX (GST)*

All amounts are recorded exclusive of GST, except for Debtors and Creditors which are stated inclusive of GST.

### *INCOME TAX*

Medical Radiation Technologists Board is wholly exempt from New Zealand income tax having fully complied with all statutory conditions for these exemptions.

### *BANK ACCOUNTS AND CASH*

Bank accounts and cash in the Statement of Cash Flows comprise cash balances and bank balances.

### *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.

### *INVESTMENTS*

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

### *ONEROUS LEASE*

The Onerous Lease expense is recognised in full in the year that it was identified as onerous lease, or in the year of any adjustment to the value of the lease. The amount is the minimum net value to meet the contractual obligation, less revenue from sublease and discounting as at rate of 3%.

### *REVENUE RECOGNITION*

Revenue is received during February and March, relating to the next financial year. Therefore, receipts are shown on the balance sheet as income in advance and recognised in the statement of financial performance in the next financial year.

# NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

NOTES TO THE PERFORMANCE REPORT

FOR THE YEAR ENDED 31 MARCH 2022

## Note 1: Analysis of Revenue

Revenue Item	Analysis	This Year \$	Last Year \$
Fees, subscriptions and other revenue from members	Registration	162,856	180,251
	APC	1,349,311	1,270,456
	Other	119,584	128,538
	<b>Total</b>	<b>1,631,751</b>	<b>1,579,245</b>

**Note 2: Analysis of Expenses**

<b>Expense Item</b>	<b>Analysis</b>	<b>This Year</b> \$	<b>Last Year</b> \$
Employee related costs	ACC Levy	1,477	1,289
	Staff Expenses Recruitment	14,854	21,962
	Staff Training	10,648	7,198
	Staff Welfare	9,479	6,118
	Wages & Salaries	620,879	538,019
<b>Total</b>		<b>657,337</b>	<b>574,586</b>

<b>Expense Item</b>	<b>Analysis</b>	<b>This Year</b> \$	<b>Last Year</b> \$
Costs related to providing goods or services	Lease/Rental	57,404	8,248
	Personnel and Other Costs	10,638	22,711
	Board Member Fees	131,020	166,438
	Professional and Consultancy Fees	3,455	3,093
	Conference, Meetings, Workshops	13,095	4,418
	Catering	411	1,939
	Examinations, Assessors, Registrations	71,708	64,506
	Insurance	26,442	14,391
	IT	78,323	57,857
	MSS Services Charges	46,122	(13,734)
	Postage and Courier	1,187	1,887
	Printing and Stationery	4,447	3,303
	Project	27,524	-
	Publications/Subscriptions	1,128	5,473
	Security Documents	2,759	2,648
	Telephone and Tolls	2,980	4,327
Travel and Accommodation	47,040	33,594	
<b>Total</b>		<b>525,683</b>	<b>381,099</b>

<b>Expense Item</b>	<b>Analysis</b>	<b>This Year</b> \$	<b>Last Year</b> \$
Other Expenses	Accounting Fees	6,000	3,656
	Audit Fees	16,388	10,497
	Bad Debts	(23,000)	23,000
	Bank Charges	24,620	21,974
	CEO Review	4,251	5,770
	General Expenses	13,221	4,333
	Office Expenses	8,822	7,621
	Legal Fees	3,815	18,988
<b>Total</b>		<b>54,117</b>	<b>95,839</b>

### Note 3: Analysis of Assets and Liabilities

Asset Item	Analysis	This Year \$	Last Year \$
Bank accounts and cash	Westpac Bank - Current	1,205,819	1,772,982
	Westpac Bank - Saving	439	438
<b>Total</b>		<b>1,206,258</b>	<b>1,773,420</b>

Asset Item	Analysis	This Year \$	Last Year \$
Debtors and prepayments	Prepayments	8,782	74,341
	Debtors	11,238	41,210
	MSS Intercompany	121,748	-
	Provision for Doubtful Debt	-	(23,000)
	Accrued Income	2,558	1,067
<b>Total</b>		<b>144,326</b>	<b>93,618</b>

Asset Item - Non Current	Analysis	This Year \$	Last Year \$
Investments	Shares in MSS	50	50
<b>Total</b>		<b>50</b>	<b>50</b>

Liability Item	Analysis	This Year \$	Last Year \$
Creditors and accrued expenses	Accrued Expenses	7,786	5,686
	GST due for payment	153,114	152,830
	Accounts Payable	5,183	29,056
	WHT	6,525	
<b>Total</b>		<b>172,608</b>	<b>187,572</b>

Liability Item	Analysis	This Year \$	Last Year \$
Income received in Advance	Practitioner fees relating to 2022/23	1,310,920	1,238,403
<b>Total</b>		<b>1,310,920</b>	<b>1,238,403</b>

Liability Item	Analysis	This Year \$	Last Year \$
Current provision for onerous lease	Provision for onerous lease	41,896	33,453
<b>Total</b>		<b>41,896</b>	<b>33,453</b>

Liability Item	Analysis	This Year \$	Last Year \$
Non current provision for onerous lease	Provision for onerous lease	49,456	76,520
<b>Total</b>		<b>49,456</b>	<b>76,520</b>

**Note 4: Accumulated Funds**

<b>This Year</b>		<b>Accumulated Surpluses or Deficits</b>	<b>Total</b>
Description			
Opening Balance		1,481,140	<b>1,481,140</b>
Surplus/(Deficit)		394,614	<b>394,614</b>
Closing Balance		<b>1,875,754</b>	<b>1,875,754</b>
<b>Last Year</b>		<b>Accumulated Surpluses or Deficits</b>	<b>Total</b>
Description			
Opening Balance		953,419	<b>953,419</b>
Surplus/(Deficit)		527,721	<b>527,721</b>
Closing Balance		<b>1,481,140</b>	<b>1,481,140</b>

**Note 5: Commitments and Contingencies**

<b>Commitment</b>	<b>Explanation and Timing</b>	<b>At balance date</b>	<b>At balance date</b>
		<b>This Year</b>	<b>Last Year</b>
		<b>\$</b>	<b>\$</b>
<b>Lease Commitment: 22 Panama Street, Wellington</b>	<b>Current Portion</b>	-	28,176
	Non Current Portion	-	96,268
		-	124,444
<b>Lease Commitment: 99 Customhouse Quay, Wellington</b>	<b>Current Portion</b>	65,696	-
	Non Current Portion	281,488	-
		347,184	-
<b>Onerous Lease Commitment: 80 The Terrace, Wellington</b>	<b>Current Portion</b>	52,038	49,646
	Non Current Portion	31,039	80,154
		83,077	129,800
<b>Photocopier Lease</b>	<b>Current Portion</b>	1,404	1,404
	Non Current Portion	2,808	3,978
		4,212	5,382

**COMMITMENTS**

Medical Sciences Secretariat Ltd has a lease commitment at 80 The Terrace 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 right of renewal of a further six years.

Due to on-going earthquake investigations and repairs, it was decided to vacate 80 The Terrace. Temporary premises at 22 Panama Street were obtained. Subsequent to this, Medical Sciences Secretariat Limited has signed a 3 year lease through to 31 August 2022. However, on 1 January 2022, Medical Sciences Secretariat Limited signed a new 5 year lease at 99 Customhouse Quay. New tenants were found for 22 Panama Street.

FENZ is currently subleasing part of the floor space at 80 The Terrace that Medical Sciences Secretariat Limited is leasing.

There is also a photocopier lease which expires in March 2025.

**Contingent Liabilities and Guarantees**

There are no contingent liabilities or guarantees as at balance date (Last Year - nil).

## Note 6: Related Party Transactions

Description of Related Party Relationship	Description of the Transaction (whether in cash or amount in kind)	This Year	Last Year	This Year	Last Year
		\$	\$	\$	\$
		Value of Transactions	Value of Transactions	Amount Outstanding	Amount Outstanding
During the year the Medical Radiation Technologists Board purchased secretariat services on normal trading terms from Medical Sciences Secretariat Ltd. Three 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.	Secretariat Services	940,629	722,993	108,409	59,795
	Beryl Kelly	2,593	48,086	-	-
	Elizabeth Macaulay	12,781	19,782	1,164	-
	Billie Mudie	43,129	13,844	3,178	-
	Carol Bagnall	7,570	-	-	-
	Louise Tarr	1,700	12,013	-	-
	Peter Dooley	8,415	8,500	1,105	-
	Prudence Burns	8,368	10,816	1,232	-
	Susan Yorke	14,129	13,415	467	-
	Anthony Bow	48,756	20,272	5,078	-
Philip Thomas	6,630	-	-	-	

There were no other transactions involving related parties during the financial year. (Last Year - Nil).

Medical Sciences Secretariat processed payments valued at \$113,031 in total on behalf of the Medical Sciences Council and the Medical Radiation Technologists Board as their agent (last year-591,311). Commencing April 21 Medical Sciences Council and Medical Radiation Technologists Board directly paid the majority of their costs.

Included in the above table, are Medical Sciences Secretariat Board Fees for the following: Billie Mudie \$3,910, Anthony Bow \$21,861, Susan Yorke \$3,758.

#### **Note 7: Events After the Balance Date**

There were no events that have occurred after the balance date that would have a material impact on the Performance Report (Last Year - Nil)

#### **Note 8: Revenue Received in Advance**

Fees received during February and March are received in advance and apply for the following year beginning 1 April. Revenue in Advance for the current year was \$1,310,920 (Last Year - \$1,238,403)

#### **Note 9: Ability to Continue Operating**

The entity will continue to operate for the foreseeable future.



New Zealand  
**Medical Radiation  
Technologists Board**  

---

*Te Poari Ringa Hangarua Iraruke*