



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

Annual Report

1 APRIL 2022 - 31 MARCH 2023

The purpose of Te Poari Ringa Hangarau Iraruke | The Medical Radiation Technologists Board is to protect the health and safety of the Aotearoa | New Zealand public by providing mechanisms to ensure that medical imaging and radiation therapy practitioners are competent and fit to practise.

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.

Te Poari Ringa Hangarau Iraruke | The New Zealand Medical Radiation Technologists Board is referred to as the Board.

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From the Chair and Chief Executive

Tēnā koutou katoa,

The 2022-2023 year has passed with speed and Te Poari Ringa Hangarau Iraruke | The Medical Radiation Technologists Board has had a productive year. The Board has continued to meet online but has also had the opportunity to reengage in face to face meetings.

The Board is aware of issues that were caused by flooding and by Cyclone Gabrielle and wishes to acknowledge those members of the profession who worked above and beyond in support of their colleagues who were impacted.

In January we said farewell to our longstanding Chief Executive Mary Doyle. Mary left the organisation after many years and during her time she had held the position as both the Chief Executive and Registrar. Mary had led the organisation through a number of key achievements including through its first Ministry required audit of performance, and the COVID pandemic with associated impact on practitioners and also staffing. Mary was a highly valued member of staff and her contribution will be missed by the Board and its members.

At this time, we also welcome our new Chief Executive, Dr Susan Calvert. Sue joined the Board with a background in health, both as a practitioner and with experience in professional regulation.

Workforce

The Board is aware there are issues faced by the workforce due to a shortage of practitioners. To ensure there is representation and that a regulatory perspective is brought to discussions, members of both the Board and the Secretariat participate in a number of Manatū Hauora sector reference groups and Te Whatu Ora/Te Aka Whai Ora workforce development groups. These groups have been established to consider issues faced by specific health disciplines and to look at strategies to address workforce shortages. As a regulator, the Board has a key role in that it sets the scope of practice, defines the standards of competence and also accredits programmes of education. It is the Board's standards that people must demonstrate in order to be entered onto the register and therefore it is essential that the Board is part of the discussions.

Over the course of the year the Board has continued to engage with a number of stakeholders. This includes professional bodies like the New Zealand Institute of Medical Radiation Technology, international regulators, as well as providers of pre-registration programmes of education and other groups. Connecting with professional associations and education providers ensures that a regulatory perspective is part of discussions, it also enables the Board to gain an understanding of issues facing the sector through the lens of the education and professional parts of the profession.

Board Appointments

In 2022 we welcomed a new lay person onto the Board, Shannon Ioane. Shannon is a third lay member of the Board who works as a play therapist at Starship Hospital. Board appointments are made by the Minister of Health and our Board currently comprises representatives of the five different scopes of practice and three lay members. The Board has ultimate responsibility for protection of the health and safety of the public by ensuring that Medical Imaging Technologists and Radiation Therapists are competent and fit to practise their profession.

Recertification

Recertification is the process by which practitioners demonstrate their ongoing competence to practise their profession. Part of this is engaging in continuing professional development through participation in education, attendance at conferences, and many other activities. During 2022 the Board consulted with the professions on a revised framework for recertification. The proposal was that practitioners change from a three year recertification framework to a two year process. Overall responses to this proposal were positive and the Board made this change. The revised framework requires practitioners to, amongst other things, engage in a minimum amount of professional development each year. It further requires them to reflect on this education and to consider what, if any, changes they will make to their practice. Audit of practitioner compliance with the requirements of the programme began in 2023.

Developing Organisational Capability

During 2022 the Board worked with Haemata, a Māori consultancy, as it progressed its work and organisational capability with regard to cultural competence. Terms of reference for a Māori practitioner advisory committee have been developed and an expression of interest process will occur. The purpose of this group will be to support the Board through review of core documentation including the competency standards to ensure practitioners have the knowledge and skills that enable effective interaction with Māori.

The Board and staff have also engaged in learning to support their cultural capability.

Finally

Our next twelve months will be busy as we see a number of our strategic projects come to fruition. With the opening of the borders we note this can mean there are more internationally qualified practitioners who can potentially enter the workforce to support our locally educated practitioners. The downside of this of course is that our Aotearoa | New Zealand graduates can also move overseas for work.

As Board Chair and Chief Executive we want to acknowledge the work that is undertaken by the staff of the Medical Sciences Secretariat that ensures the responsive regulation of Medical Imaging Technologists and Radiation Therapists. The work undertaken by the staff supports the safety of the public. We also wish to acknowledge the Board members whose role as governors is to set the strategic direction of the Board and who have worked incredibly hard through this period of change.

Ngā mihi,



Billie Mudie
Chair



Dr Susan Calvert
Chief Executive



Numbers at a Glance

1 April 2022 - 31 March 2023

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



433

New registrations across
the eight scopes of practice

The three largest groups of approved applications
from internationally qualified practitioners were from:

46 South Africa

41 UK

37 Australia

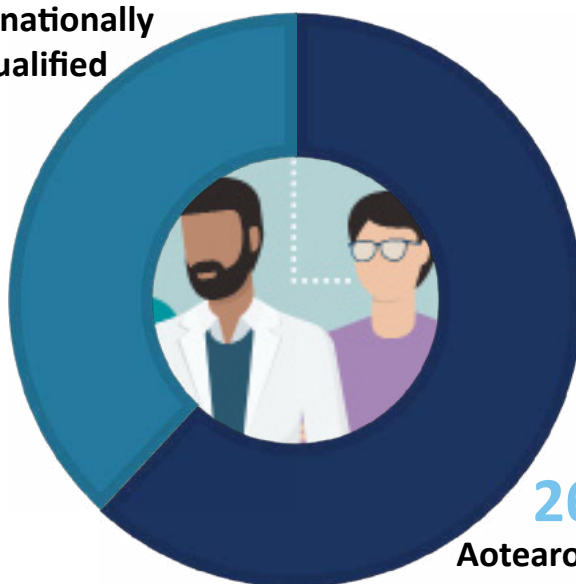
62%

practitioners
qualified in New
Zealand



165

Internationally
qualified



268

Aotearoa | New
Zealand graduates



3708

Practising Certificate Applications
received and processed

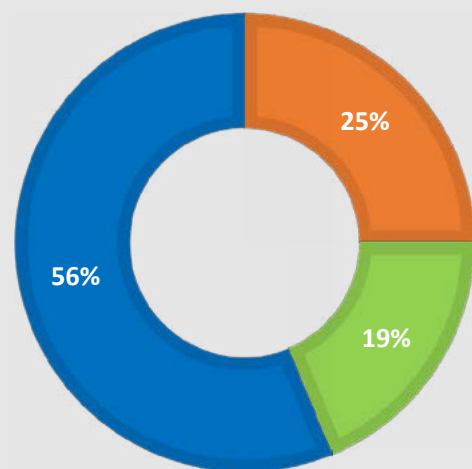
Professional Standards:

16 NEW COMPLAINTS AND NOTIFICATIONS

4 Conduct cases

3 Fitness to practise/health cases

9 Competence cases



Conduct Fitness to Practise Competence

Te Poari Ringa Hangarau Iraruke | The Medical Radiation Technologists Board

Te Poari Ringa Hangarau Iraruke | The Medical Radiation Technologists Board (the Board) is one of 18 New Zealand health responsible 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

		Term commenced	Term renewed	Term due to be completed
	Billie Mudie Radiation Therapist Chair	2015	2019; 2022	2024
	Anthony Bow Lay Member Deputy Chair	2017	2020	2023
	Pru Burns Nuclear Medicine Technologist	2019	2022	2025
	Lizzie Macaulay Medical Imaging Technologist	2016	2019	2023
	Peter Dooley Magnetic Resonance Imaging Technologist	2017	2020	2023
	Philip Thomas Medical Imaging Technologist	2021		2023
	Carol Bagnall Sonographer	2021		2023
	Susan Yorke Lay Member	2019	2022	2025
	Shannon Ioane Lay Member	2022		2025

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
Registrations Review Committee	Lizzie Macaulay Susan Yorke Board member from the relevant scope of practice
Professional Standards	Billie Mudie Susan Yorke Anthony Bow

In addition, the Board has an online examination committee with representatives from the Board and external advisors.

Online Examinations Committee	Lizzie Macaulay (Chair) Billie Mudie External advisors for the Board: Jacqueline Metzler Catherine Sorensen Jacob Cameron Shelley Park Beryl Kelly
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Sector Reference/Workforce Development Groups

Members of the Board are participating in a number of Manatū Hauora sector reference groups and Te Whatu Ora/Te Aka Whai Ora workforce development groups. These groups have been established to consider issues faced by specific health disciplines and to look at strategies to address workforce shortages.

Working Group	Membership
National Allied Health Technical and Scientific Working Groups	Pru Burns
MIT Sector Reference Group	Billie Mudie Lizzie Macaulay
Sonography Sector Reference Group	Carol Bagnall
Medical Imaging Technology Professional Steering Group	Pru Burns

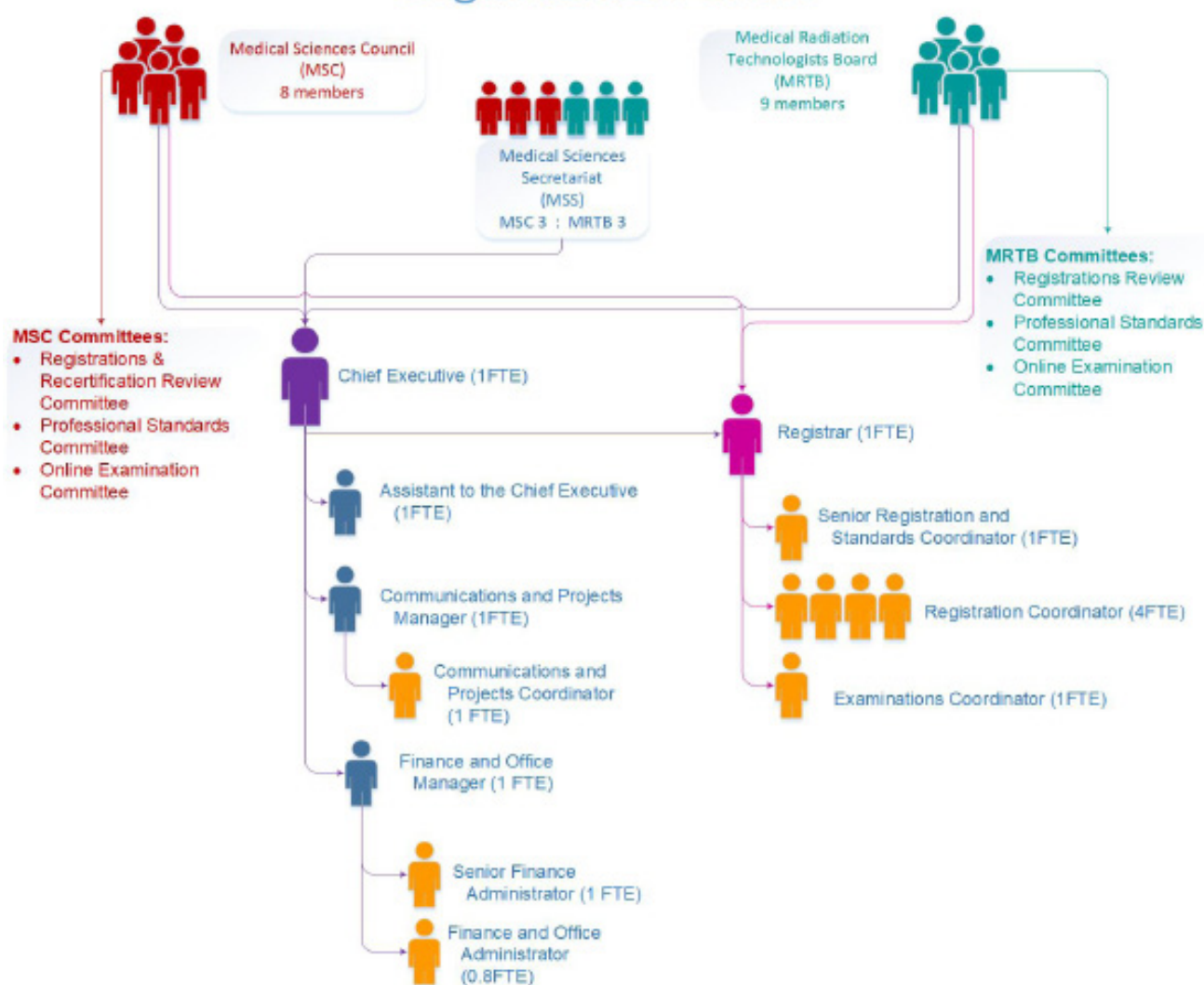
Secretariat

The Board works very closely with another health responsible authority, Te Kaunihera Pūtaiao Hauora o Aotearoa | the Medical Sciences Council, with whom they set up a jointly owned company, Te Rangatapu Pūtaiao a Rongoa | Medical Sciences Secretariat (MSS).

The shared secretariat arrangement with the Medical Sciences Council (the Council) enables the Board to achieve efficiencies in terms of costs and consistency in regulatory standards. 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 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 Council share several similarities and common goals.

Organisation Chart



Secretariat Staff (as at 31 March 2023)

Chief Executive	<p>Dr Susan Calvert Manages the strategic functions and overall business of the Board and is responsible for the general management and statutory compliance of the organisation.</p>
Registrar	<p>Caleb Bridgeman Has delegated authority from the Board to manage the core regulatory functions under the Health Practitioners Competence Assurance Act. Manages procedures for notifications pertaining to concerns raised about a practitioner. Overall management of Registrations and Professional Standards Team.</p>
Assistant to the Chief Executive	<p>Melissa Buist Supports the Chief Executive with administrative and general tasks.</p>
Registration/ Recertification	<p>Michaela Beer Anastasia Williams May Magtoto Emma Groos Completes and processes tasks relating to registration and recertification.</p>
Professional Standards	<p>Hayley Roud Supports the Registrar with managing the complaints and notifications processes, reporting, and monitoring. Hayley also supports the Registrar with accreditation and monitoring of education providers.</p>
Online Examinations/ Work Based Assessments	<p>Swas Lal Completes and processes tasks relating to the online examinations and registration examination assessments.</p>
Finance	<p>Pam Sceats Financial Manager - manages the finance team and provides overall financial management.</p> <p>Louise Hurst Senior Finance Administrator - manages the routine accounting activities and payroll.</p> <p>Dianne Heybrock Finance Administrator - provides finance and office administrative support.</p>
Communications and Strategic Projects	<p>Miriam Brown Communications and Projects Manager - manages the Board's ongoing communication strategies, including publications, website, consultations and online initiatives.</p> <p>Devon Davies Communications and Projects Coordinator - assists the communications and projects manager with the production of organisational communications.</p>

Strategic Priorities and Goals

The Board's document "Looking forward to 2026" outlined its strategic priorities for the three years from 2023-2026. The plan describes the work the Board plans to undertake in this time period and builds on the progress the Board has achieved with previous strategic plans.

The Board's focus is to better protect public safety through proportionate and transparent regulatory frameworks, ensuring compliance, and promoting collaboration. The strategic projects are aimed at delivering on this.

During 2022-2023 the Board reviewed its strategic priorities and refreshed its strategic plan. Its priorities are outlined in the revised document "Looking forward to 2026: The Board's 3-year Strategic Plan 2023-2026" and are as follows.

Strategic Priority 1: Alignment of Regulatory Frameworks with National Workforce Shortages

The regulatory mechanisms used by the Board must be fit for purpose now and into the future. The Board has acknowledged there are a number of challenges being experienced by the workforce and there is a need for its processes to be flexible and robust. Work has progressed on this priority over the course of 2022-2023. The main projects that have been initiated and progressed include:

1. Review of the competence standards for practitioners: this has largely been completed and has seen the standards move to a more principles-based framework.
2. Reviewed the recertification programme. This has led to a two-year programme with compliance monitoring occurring every alternate year. Practitioners are required to complete a minimum number of hours each calendar year.
3. Developed a formal supervision process for practitioners new to practise in Aotearoa | New Zealand. To ensure a consistent quality approach the Board is developing an education programme for those practitioners who are appointed as supervisors.
4. Reviewed the gazette notice to ensure the inclusion of cardiac sonography.

In progressing this strategic priority the Board will undertake a review of the Scope of Practice of Medical Imaging and Radiation Therapists next.

Strategic Priority 2: Meeting our Obligations as a Te Tiriti o Waitangi Partner

The Board acknowledges Te Tiriti o Waitangi as the founding document of Aotearoa | New Zealand. In collaboration with, and alongside its colleagues within both the health system and the medical imaging and radiation therapy education system, the Board has the ability to contribute to collective efforts to achieve equitable outcomes for Māori and the removal of barriers to achieve equity.

The Board has engaged in extensive education around Te Ao and Te Reo Māori and has participated in workshops that have included co-governance, allyship (being a good ally), and Te Tiriti o Waitangi. Terms of reference have also been developed for a Māori practitioner advisory committee. In order to recruit people onto this committee an expression of interest process will occur. The committee will be charged with providing advice to the Board around key documents including competence standards and policies. The advisory committee will be comprised of representatives of the scopes of practice as well as an independent lay member and a representative of the Board. Work will progress on this and other initiatives during 2023.

Strategic Priority 3: Development of a Data Strategy to Support Strategic Initiatives and Business-As-Usual Work Programme

During 2022-2023 the Board considered what data it needed to collect to provide it with understanding and to support its initiatives. Work will progress on development of dashboards that provide trends information. The Board has continued to provide data to Manatū Hauora | Ministry of Health to support its workforce modelling project.

The Board will progress the development of this work over 2023-2024. It plans to seek the advice of the Māori practitioner advisory committee to improve communications and inform its regulatory work. It also plans to review its communication plan to ensure it is inclusive of the review and determination of data requirements.

Responsible Authority Core Performance Standards Review:

Progress Against Recommendations for Improvement

In 2021 the Board, like all responsible authorities, was required to undertake a performance review by the Ministry of Health. This focused on the Board meeting the core functions and responsibilities as articulated in section 118 of the Health Practitioners Competence Assurance Act 2003.

Our performance was reviewed against 23 standards in total. Of those, 16 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.

The report made some recommendations to the Board for suggested improvements. While a large number of the actions were completed during 2021-2022 the following four pages provides an update.

RELATED CORE PERFORMANCE STANDARDS	RECOMMENDATION	STATUS AS AT 31 MARCH 2023
<i>The Responsible Authority 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.	Work has progressed on this with cardiac sonography being included in the sonographer scope of practice. An update to the gazette will occur when this process is completed. Work has also continued on the review of the scopes of practice including trainee scopes. Further work will be undertaken on this strategic project during 2023.

RELATED CORE PERFORMANCE STANDARDS	RECOMMENDATION	STATUS AS AT 31 MARCH 2023
<i>The Responsible Authority 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>	This matter was addressed in 2021-2022. When gender information is sought, further options are provided. This matter is now business as usual and is closed.
<i>Identifying and responding in a timely way to any complaint or notification about a health practitioner.</i>	<p>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.</p>	Actions required to link complaints and notifications occurred in 2022. Data analytics reporting is ongoing and is a Board strategic priority.
<i>Ensuring all parties to a complaint are supported to fully inform the authority's consideration process</i>		
<i>The Responsible Authority sets standards of clinical and cultural competence and ethical conduct that are informed by relevant evidence and are clearly articulated and accessible.</i>	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 <i>Whakamaua (Māori Health Action Plan 2020-2025)</i> , and informed by the consultations and collaborations already planned.	Work on the review of the competence standards has occurred over the course of 2022-2023 with the revised standards almost ready for gazette.

*RELATED CORE
PERFORMANCE STANDARDS*

RECOMMENDATION

*STATUS AS AT 31 MARCH
2023*

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.

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.

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.

During 2022-2023 the Board engaged in extensive development with regard to its knowledge of and use of Te Reo and Te Ao Māori and is incorporating tikanga within its processes and in its expectations of those staff who work with it. Terms of reference have been developed for a Māori practitioner advisory committee whose role will be to ensure that any revised competencies include those that will enable effective and respectful interaction with Māori.

This has become a Board strategic project.

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.

This action was completed in 2022, is now business as usual and is closed.

*RELATED CORE
PERFORMANCE STANDARDS*

RECOMMENDATION

*STATUS AS AT 31 MARCH
2023*

The Responsible Authority 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.

The Board engaged Haemata, a Māori consultancy, to work with it in order to develop its cultural capability and also as it operationalises the principles of Te Tiriti into its functions. Work continues on this matter and it is hoped that the formation of the Māori practitioner advisory committee will support further development of this work. The Board and Medical Sciences Secretariat staff engage with the Medical Sciences Council and other responsible authorities on matters of common interest.

Registration & 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 2022 and 31 March 2023 the Board received **554** applications from people seeking registration in one of the eight scopes of practice. Of these 554 applications, **433** were approved (78%) and **29** (5%) declined due to the applicants not meeting the registration requirements for entry to the register.

Of the remaining applications, **two** applicants were offered the opportunity to sit a registration examination assessment (a practical examination) and **16** (3%) were offered an opportunity to sit an online registration examination as they did not meet any other pathway to registration.

As of 31 March 2023, **64** (12%) applications were still being processed and the remaining **10** (2%) applicants withdrew their application for registration.

Table 1: Outcomes of applications for registration by scope 2022 - 2023

Scope of Practice	Approved	Declined	In Progress	Withdrawn	Offered online exam	Offered REA	TOTAL
MIT	207	9	26	2	5	-	249
MRIT	34	8	6	1	4	-	53
NMT	14	2	1	-	2	-	19
RT	34	2	2	-	2	-	40
Son	70	8	16	5	3	2	104
T-MRIT	28	-	2	-	-	-	30
T-NMT	3	-	2	-	-	-	5
T-Son	43	-	9	2	-	-	54
TOTAL	433	29	64	10	16	2	554

MIT Medical Imaging Technologist

MRIT Magnetic Resonance Imaging Technologist

NMT Nuclear Medicine Technologist

RT Radiation Therapist

Son Sonographer

T-MRIT Trainee Magnetic Resonance Imaging Technologist

T-NMT Trainee Nuclear Medicine Technologist

T-Son Trainee Sonographer

Approved Registrations for 2022/2023

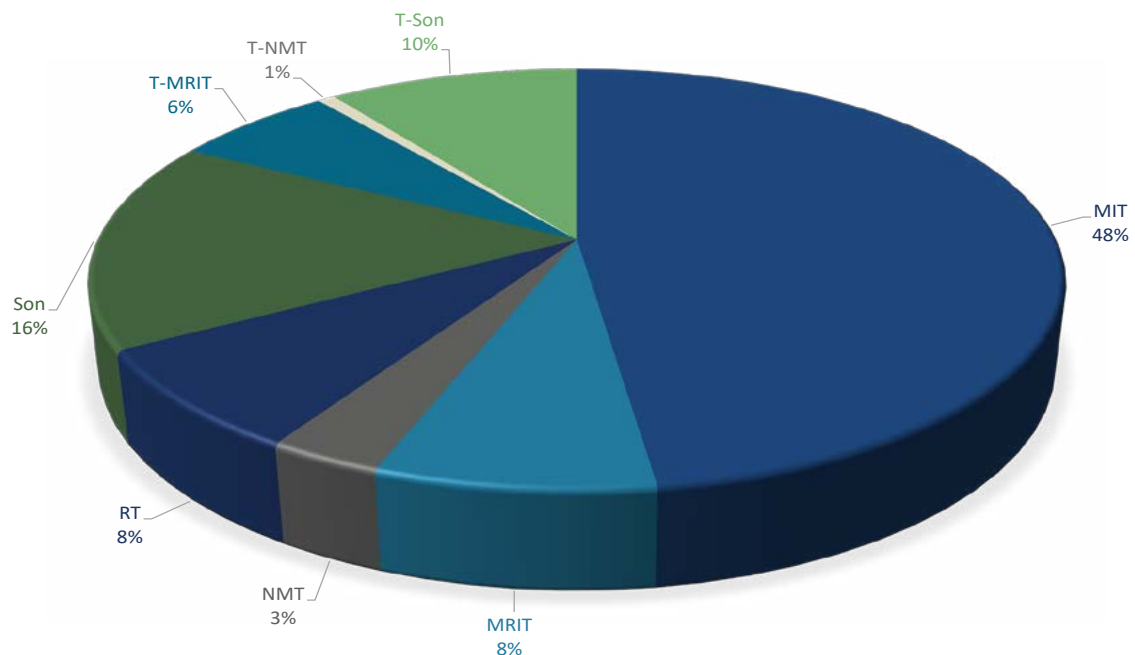


Figure 1: Approved registrations by scope of practice 2022-2023

Figure 1 shows the majority of approved registrations are in the medical imaging technologist scope of practice.

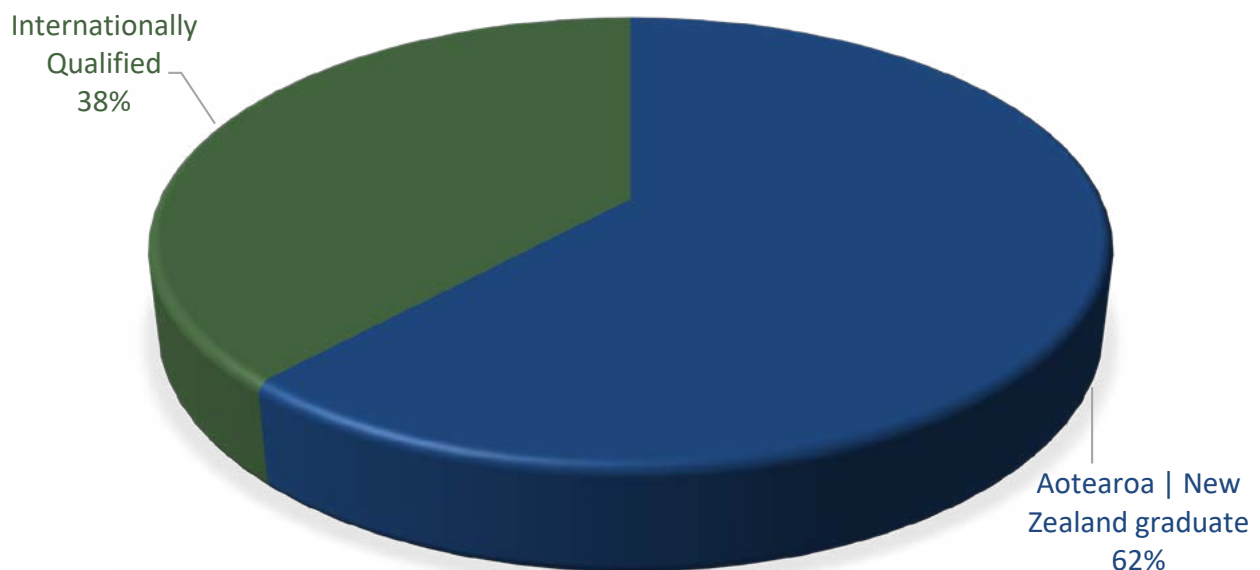


Figure 2: Approved registrations by Aotearoa | New Zealand graduate or internationally qualified

Figure 2 shows the majority of approved registration applications are from Aotearoa | New Zealand graduates.

Registrations by Country of Education

Table 2: Approved registrations by country of education across all scopes of practice 2022-2023

Country	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
New Zealand	125	25	3	22	27	28	3	35	268
Australia	8	2	2	2	15			8	37
Canada	3	4	1		8				16
UK	22	1	1	9	8				41
Fiji	4								4
India	1			1					2
Ireland	4	1	1						6
South Africa	37	1	3		5				46
USA	3		1		6				10
Italy			1						1
Nigeria			1						1
Portugal					1				1
Total	207	34	14	34	70	28	3	43	433

Online Examination Successful Applicants by Country of Education

Table 3: Online exam successful applicants by country of education 2020-2023

Country	2020/2021	2021/2022	2022/2023
South Africa	3	4	3
USA	5	4	-
New Zealand	1*	1*	-
Canada	2	2	5
UK	1	4	-
Australia	1	1	1
Philippines	-	1	2
India	-	1	-
Fiji	-	-	1
Total	13	18	12

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

Approved Registrations 2020-2023

Approved registrations of internationally qualified and Aotearoa | New Zealand graduates for the previous three years

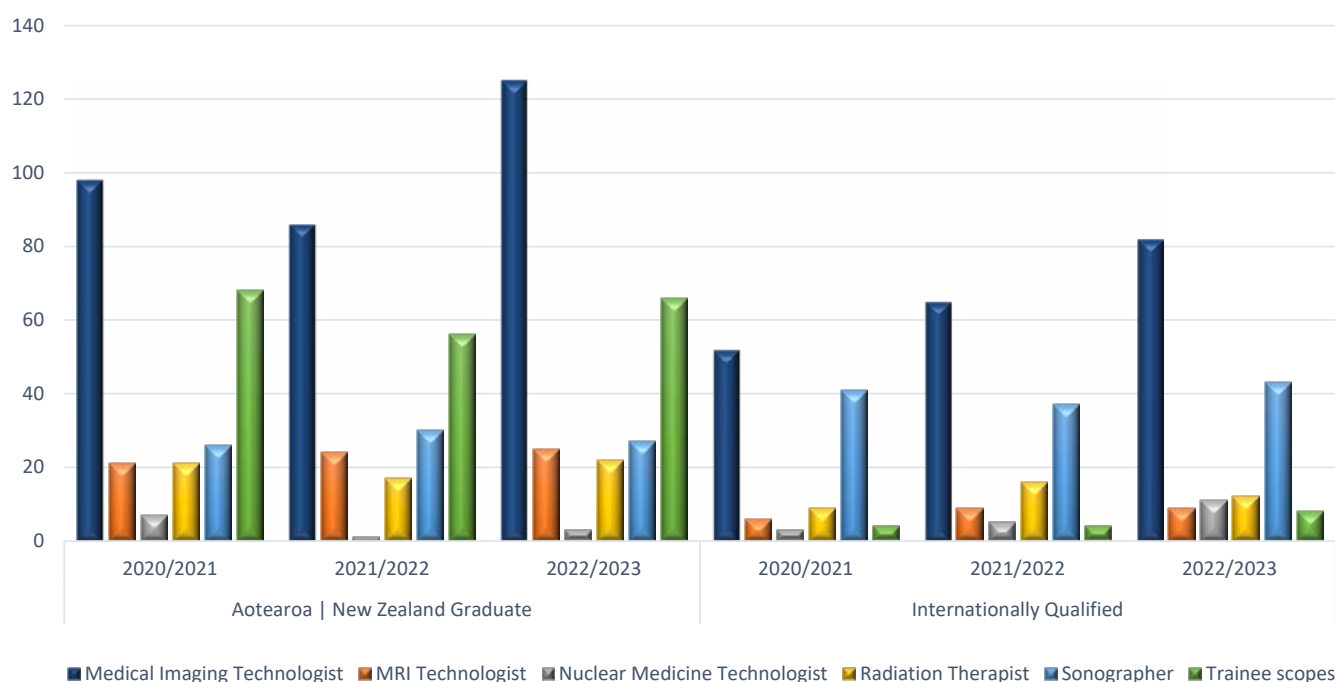


Figure 3: Comparison of Aotearoa | New Zealand graduate registrations and internationally qualified registrations granted over the last three practising years.

- New registrations have increased between 3% and 40% across each scope of practice since 2020/2021. This is an average increase of 21%.
- Aotearoa | New Zealand graduate registrations have increased by 11% since 2020/2021 while internationally qualified registrations have increased by 43% since 2020/2021.
- While the 2022/2023 internationally qualified Radiation Therapists decreased by four when compared to the previous year, the number of Aotearoa | New Zealand graduates increased by five.
- While the 2022/2023 Aotearoa | New Zealand Sonographer graduates decreased by three when compared to the previous year, the number of internationally qualified Sonographers increased by six.

Unsuccessful Applications

In the 2022/2023 year, **29** (5%) applications for registration were not able to demonstrate the ability to meet the entry level registration requirements.

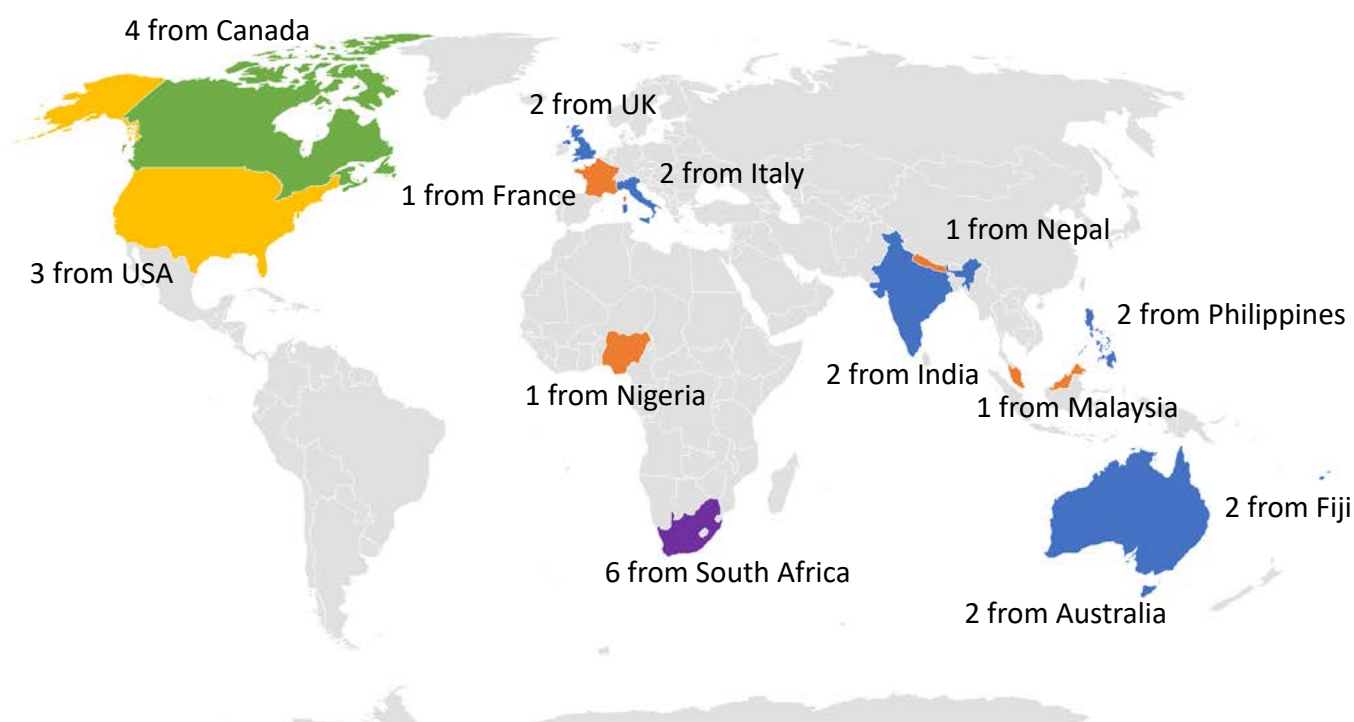


Figure 4: Unsuccessful applications between 1 April 2022 and 31 March 2023 by country of education

Of the 29 applicants who were not able to demonstrate the ability to meet the entry level registration requirements, 25 were offered the opportunity to sit the online examination as a pathway to registration. Of these 25, four were offered the examination subject to providing an International English Language Testing System (IELTS) result that met the Board's English language requirements. These four applicants were unable to provide a satisfactory result within the timeframe given and their application was subsequently declined.

The remaining 21 applicants who were offered the opportunity to sit the online examination either chose not to sit the examination or attempted the examination and were unsuccessful. These applications were subsequently declined.

Registration Examinations

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 Board recognises that while some internationally qualified 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. In these instances, the Board may offer the applicant an online examination as a pathway to registration.

As the Board does not currently have an online examination available for cardiac sonographers, they may be offered the registration examination assessment as a pathway to registration instead.

In 2022-2023, **33** applicants sat the Board's online examination. The **12** applicants who passed were subsequently granted registration with a period of supervision. In addition, in 2022-2023, three registration examination assessments were offered to cardiac sonographers and one registration examination assessment was sat and failed.

Table 4: Online exam statistics by scope 2022-2023

	MIT	MRIT	NMT	RT	Son	TOTAL
Online Exam Sat	14	11	2	1	5	33
Online Exam Re-Sit	7	3	1	-	4	15
Online Exam Passed	5	6	-	-	1	12
Online Exam Failed	9	5	2	1	4	21

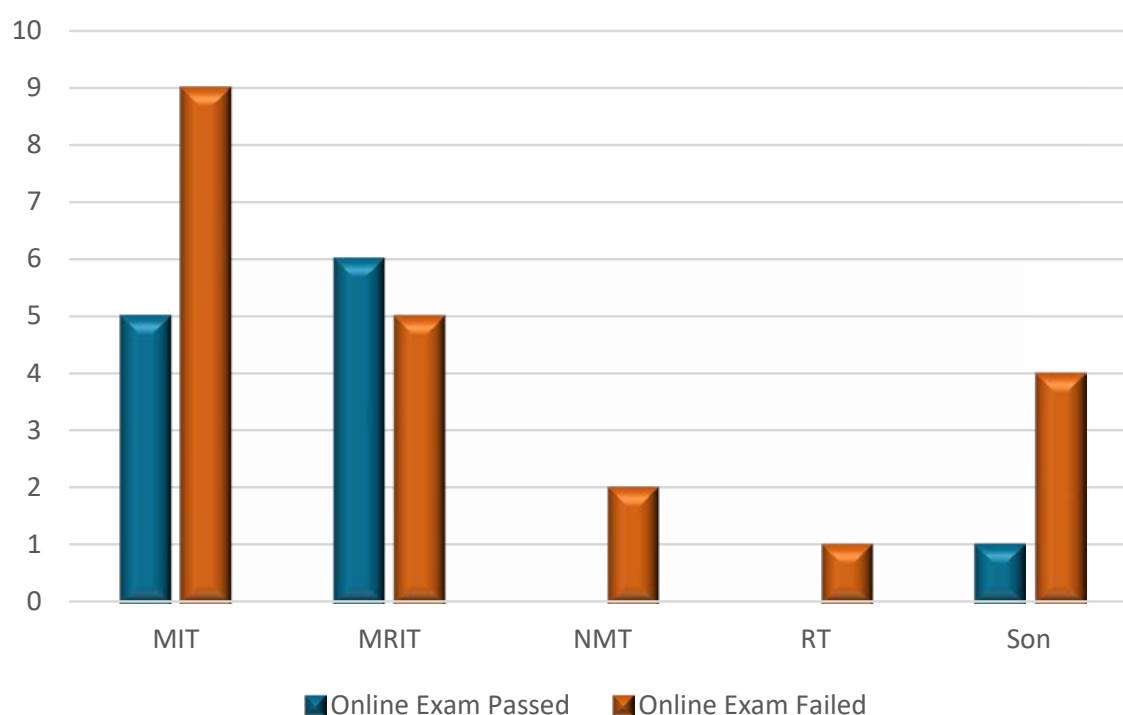


Figure 5: Online exam pass and fail numbers by scope 2022-2023

Practising Certificates

All practitioners working in New Zealand must hold a current practising certificate which is renewed annually. To obtain a practising certificate, practitioners must demonstrate to the Board that they have maintained their competence and are fit to practise.

In 2022-2023 the Board issued a total of **3708** practising certificates¹:

- **310** (8%) practitioners were issued a practising certificate with a condition on their practice.
- **332** (9%) practitioners held a practising certificate in more than one scope.

Table 5: Number of practising certificates issued between 1 April 2022 and 31 March 2023

	MIT	MRIT	NMT	RT	Son	T-MRIT	T-NMT	T-Son	TOTAL
Practising Certificate Holders	2186	370	80	489	745	70	11	89	4040*
Practising Certificates with Conditions	89	8	40	21	145	-	-	7	310

* This total differs from the number of practising certificates issued as 332 practitioners hold a practising certificate in multiple scopes of practice.



Figure 6: Practising numbers over the last five years 2018-2023

¹The statistics on this page are inclusive of annual and interim practising certificates issued. Previous annual reports from the Board excluded interim practising certificates from the data. Therefore, the statistics in this annual report may differ slightly to the statistics in previous annual reports.

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 2
- Must practise within CT only 5
- Must practise within mammography only 41
- Restricted to administering COVID-19 vaccine 2
- Must practise under supervision for a specified amount of time 12
- Holding a non-clinical APC 10
- Must complete Mauriora/Clarify courses 20

Total **95**

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 5

Total **8**

Nuclear Medicine Technologist

- Holding a non-clinical APC 1
- May perform diagnostic CT on a hybrid SPECT/PET CT scanner 26
- May perform diagnostic CT on a standalone CT scanner 5
- Must practise under supervision on a diagnostic CT scanner 2
- May perform diagnostic CT on a PET/CT scanner 3
- Must practise under supervision for a specified amount of time 3
- Must complete Mauriora/Clarify courses 1

Total **41**

Radiation Therapist

• Able to practise mammography	2
• Cannot practise in planning	2
• Must practise within CT Simulation and Treatment only	3
• Must practise within Treatment only	3
• Holding a non-clinical APC	4
• Must practise within planning only	1
• Must practise under supervision for a specified amount of time	5
• Must complete Mauriora/Clarify courses	1

Total **21**

Sonographer

• Cannot practise in cardiac ultrasound	2
• Cannot practise in obstetrics	2
• Holding a non-clinical APC	1
• Must practise under supervision for a specified amount of time	10
• Must practise within cardiac ultrasound only	103
• Must practise within Obstetrics and Gynaecology only	2
• Must practise within Obstetrics only	1
• Must practise within Vascular Ultrasound only	20
• Must complete Mauriora/Clarify courses	4
• Must complete a 3-month familiarisation period before sitting an REA	1

Total **146**

Trainee Sonographer

• Must practise within cardiac ultrasound only	6
• Must practise within vascular ultrasound only	1

Total **7**

The Board has identified that a number of conditions placed on practitioners could be described as enabling rather than restricting practice. The Board will consider the application of conditions as part of its work programme and review of the scopes of practice.

Demographics

Ethnicity

The next five figures show the percentage of practitioners of different ethnicities who held a practising certificate in 2022-2023. The data is inclusive of practitioners holding a practising certificate in a training scope and those practitioners who hold a practising certificate in more than one scope of practice.

When applying for registration, practitioners can report up to three ethnicities. Previously, the Board has reported ethnicity by assigning each practitioner a single ethnicity using a simplified version of the Statistics New Zealand's Prioritisation standard. The Board has used a different reporting method to report ethnicities for the 2022-2023 year.

The 2022-2023 statistics include every ethnicity that has been entered for every practising certificate holder. Therefore, each practitioner may be represented in more than one ethnic group as they can report up to three ethnicities.

Medical Imaging Technologists

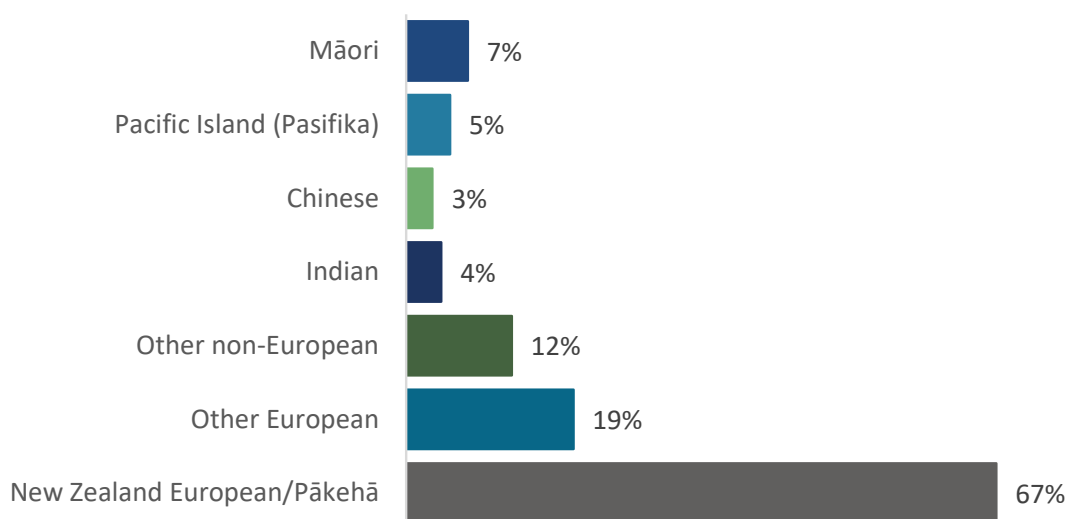


Figure 7: Ethnicity of Medical Imaging Technologist practising certificate holders 2022-2023

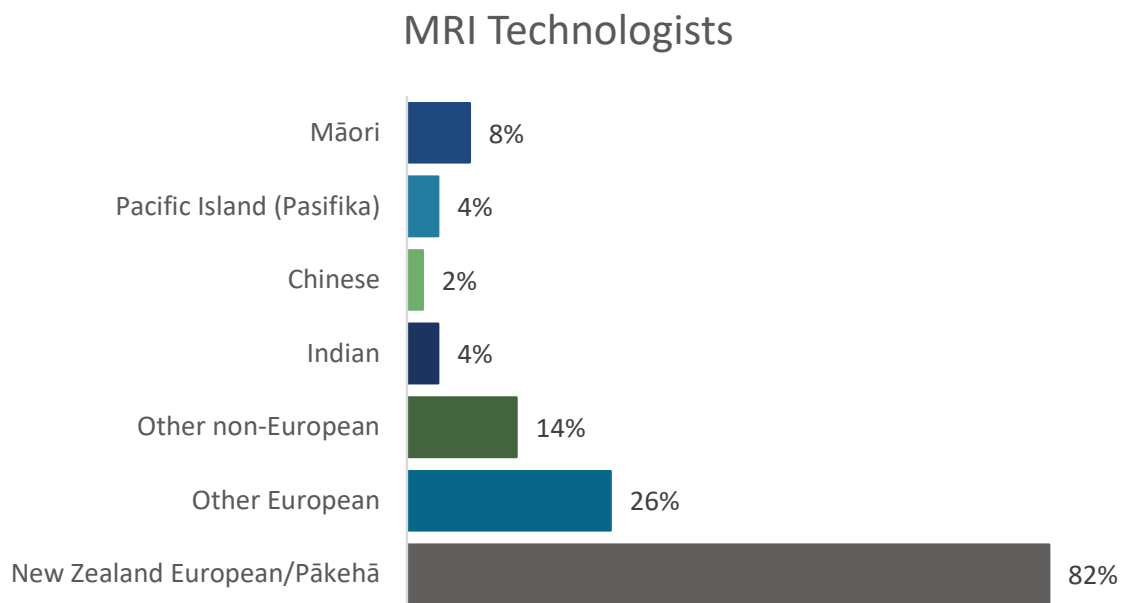


Figure 8: Ethnicity of Magnetic Resonance Imaging Technologist practising certificate holders 2022-2023

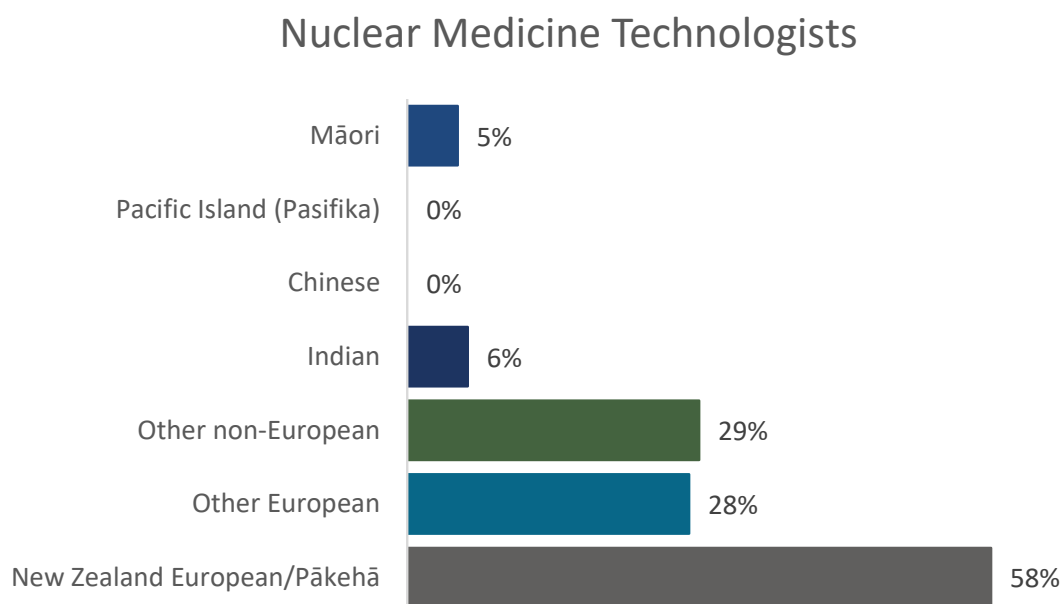


Figure 9: Ethnicity of Nuclear Medicine Technologist practising certificate holders 2022-2023

Radiation Therapists

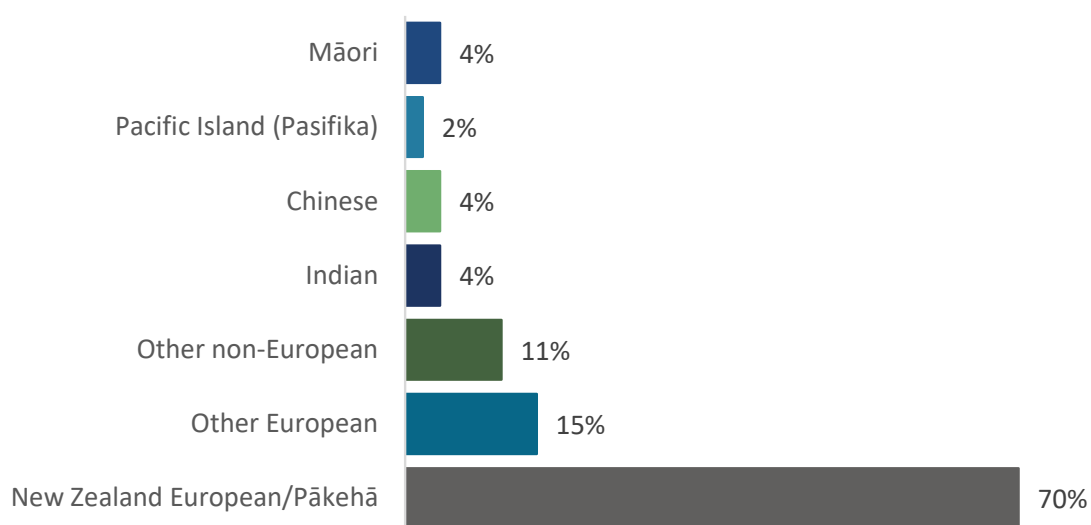


Figure 10: Ethnicity of Radiation Therapist practising certificate holders 2022-2023

Sonographers

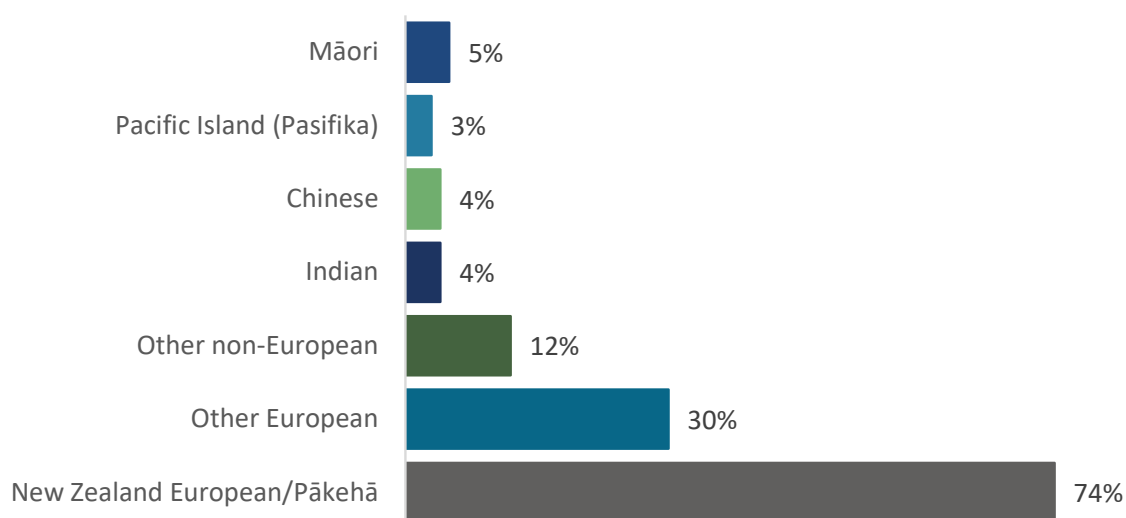


Figure 11: Ethnicity of Sonographer practising certificate holders 2022-2023

Figures 7-11 clearly show that regardless of modality, the majority of practitioners working in Aotearoa | New Zealand identify as New Zealand European/Pākehā. However, there is variation across all scopes of other ethnicities. Māori practitioners account for 4-8% of each scopes' number of practitioners. Caution should be taken in interpreting these figures as there may be some duplication given that a number of practitioners hold a practising certificate in more than one scope of practice.

Ethnicity of those practitioners who have identified as Māori and/or Pasifika has been broken down further in the table below:

Table 6: Ethnicity of practitioners who identified as Māori in 2022-2023

Ethnicity	Medical Imaging Technologist	MRI Technologist	Radiation Therapist	Sonographer	Nuclear Medicine Technologist
Māori	177	26	20	37	4
Cook Island Māori	3	1	2	2	-
Other Pacific Peoples/ Māori	1	-	-	-	-
Samoan/Māori	1	1	-	-	-
Niuean/Māori	2	-	-	-	-
Māori/Cook Island Māori	1	-	-	-	-
Samoan/Cook Island Māori	1	-	-	-	-
Tongan/Māori	1	-	-	-	-

Table 7: Ethnicity of practitioners who identified as Pasifika in 2022-2023

Ethnicity	Medical Imaging Technologist	MRI Technologist	Radiation Therapist	Sonographer	Nuclear Medicine Technologist
Fijian Indian	73	13	6	18	-
Fijian	12	1	-	4	-
Samoan	10	-	1	1	-
Tongan	3	-	1	1	-
Other Pacific Peoples	1	-	-	-	-
Niuean	1	-	-	-	-
Tongan/Other Pacific Peoples	1	-	-	-	-
Fijian/Other Pacific Peoples	2	-	-	-	-
Tokelauan	1	-	-	-	-
Fijian Indian/Other Pacific Peoples	1	-	-	-	-

Age

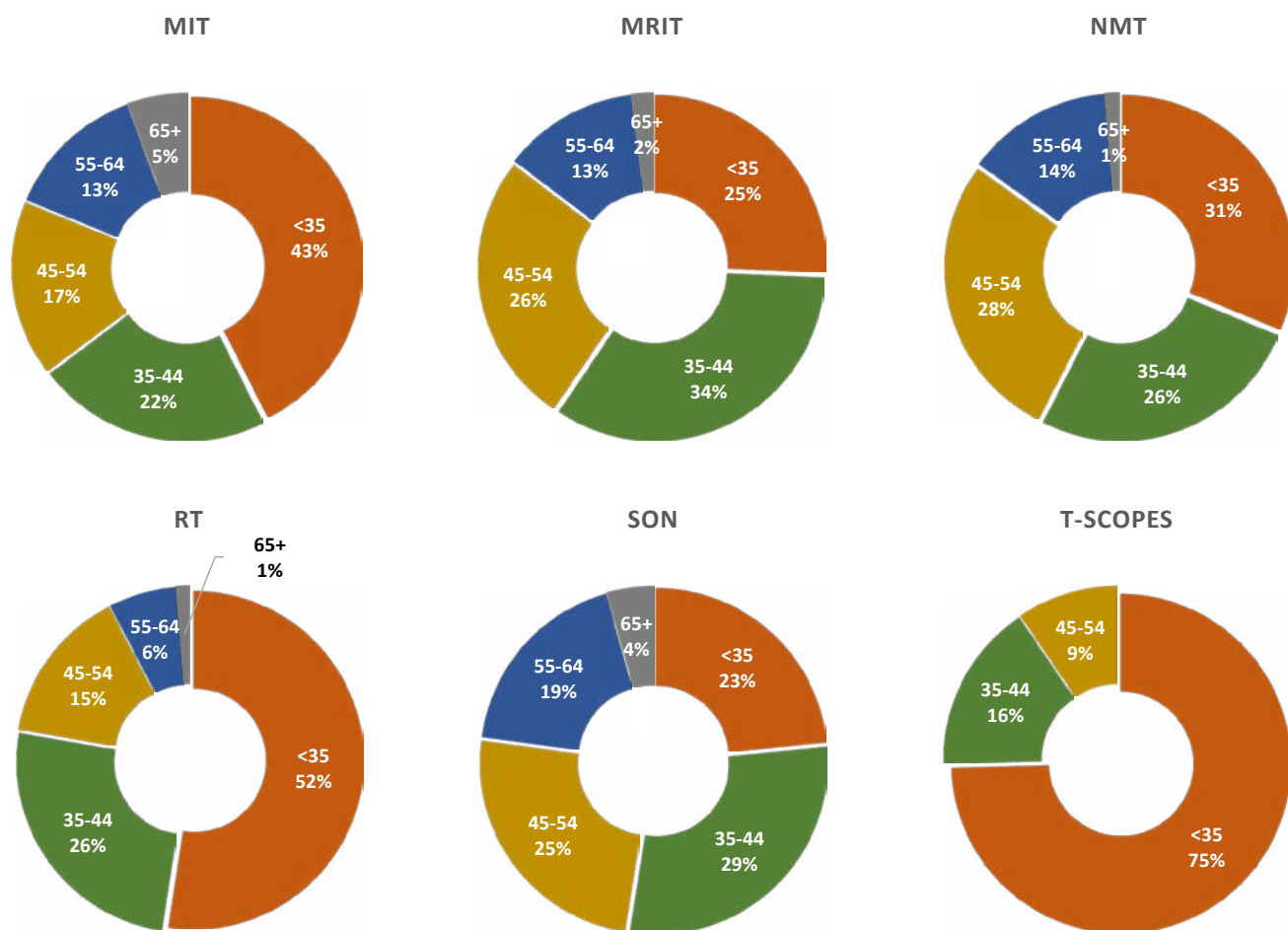


Figure 12: Practising certificate holders by age band for the 2022-2023 practising year

Figure 12 shows that approximately 80% of practitioners in all scopes are under the age of 55. However, this means that approximately 20% of the workforce will reach 65 in the next 10 years. Workforce planning is essential to ensure a continuous supply of practitioners across all scopes of practice. Of note is the number of practitioners in trainee scopes with 9% being in the 45-54 age group. These practitioners already hold a qualification and so are extending their skills and knowledge.

Gender

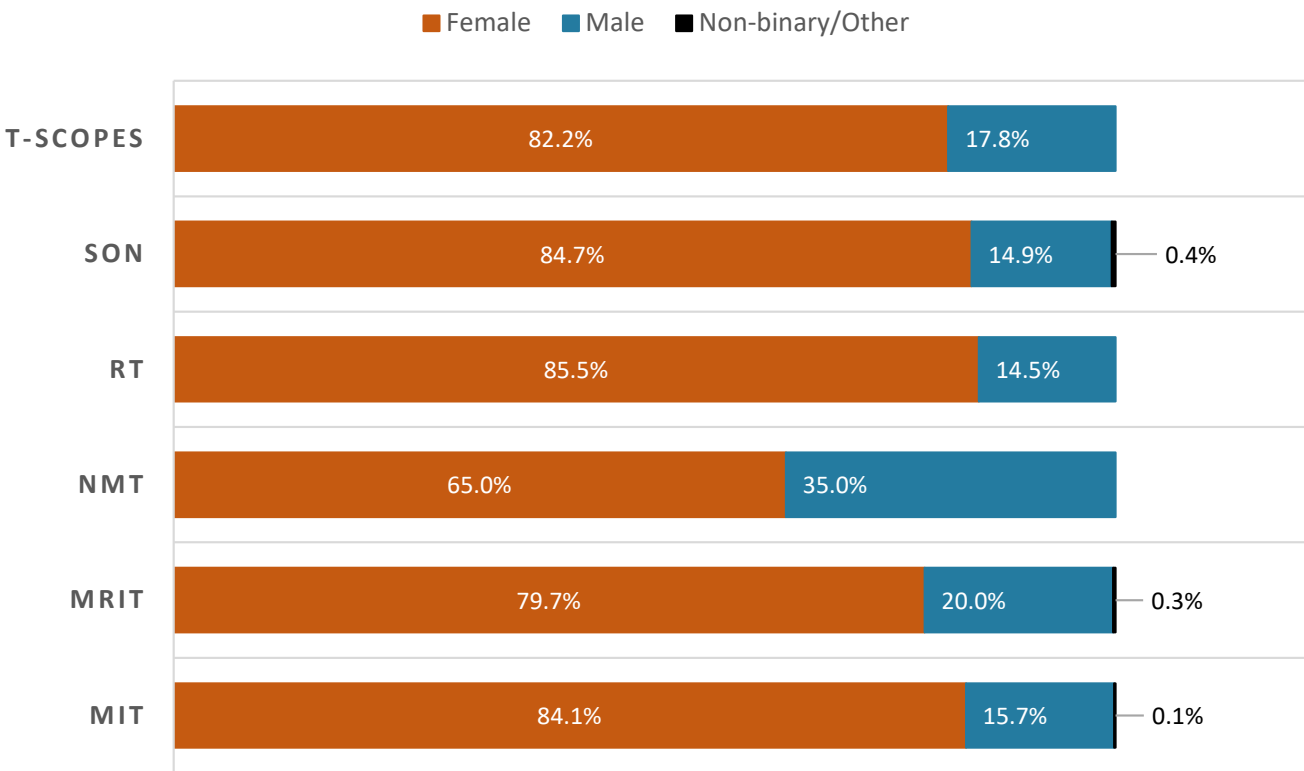


Figure 13: Practising certificate holders by gender for the 2022-2023 practising year

Figure 13 shows that across all scopes the majority of practitioners are female. Since the introduction of additional codes we now see that a number of practitioners identify as non-binary or other.

Education & Continuing Professional Development

The Board accredits five Aotearoa | 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 programmes leading to registration produce graduates capable of meeting the entry-level competence standards for the practice of medical imaging and radiation therapy.

Table 8 shows the education provider, programme of education and relevant scope of practice for each accredited qualification.

Table 8: Accredited education providers and qualifications

Education Provider	Qualification	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	Bachelor of Medical Imaging (Honours)	Medical Imaging Technologist
	Postgraduate Diploma in Health Sciences in Magnetic Resonance Imaging	Magnetic Resonance Imaging Technologist
	Postgraduate Diploma in Health Sciences in Nuclear Medicine	Nuclear Medicine Technologist
	Postgraduate Diploma in Health Sciences in Ultrasound	Sonographer

Continuing Professional Development

The Board's recertification programme is established under section 41 of the Health Practitioners Competence Assurance Act 2003 (the Act). Continuing professional development (CPD) is a critical component of the Board's recertification programme and provides a mechanism for supporting practitioners' practice to develop throughout their career. Failure to maintain currency of knowledge and skills as a practitioner places the public at risk of harm. The Recertification programme helps to ensure the public get the best possible medical imaging and radiation therapy services from practitioners who continue to be competent and fit to practise.

The Board expects the practitioner will be able to demonstrate engagement in a number of different activities that include variation in type of learning opportunities. Medical imaging and radiation therapy practitioners must be able to reflect on education they have completed and identify how this has impacted on their professional practice.

Board audit of practitioners' engagement in the recertification programme

The 2022 audit was the last audit to be undertaken against the Board's previous recertification policy. Under this policy, 20% of practitioners in each of the gazetted scopes of practice were subjected to an annual audit of their engagement in continuous development activities.

In September 2022, the Board consulted on changes to the CPD cycle and the percentage of practitioners being audited. Support for the changes was overwhelming, therefore, the Board decided to change from a three year to a two year cycle and from a 20% to a 40% audit rate.

To transition from a three year cycle to a two year cycle, 20% of practitioners will be audited in 2023 for one-year's worth of continuing professional development relating to the activities they undertook between January to December 2022. From 2025, up to 40% of practitioners in each of the gazetted scopes of practice who hold a practising certificate will be required to engage in a two-yearly audit of their compliance with the recertification policy.

Audit results

The following results from 2018 to 2022 demonstrate that practitioners are actively engaging in ongoing learning and professional development, with most audited practitioners meeting the Board's ongoing competence requirements.

Practitioners who successfully completed the audit met the minimum requirements set out in the recertification policy for the period being audited. Practitioners who did not successfully meet all minimum CPD requirements will be recalled for audit.

Table 9: Audit results 2018 - 2022

	2018		2019		2020		2022	
Called for audit	552		615		619		641	
Audited	500	91%	544	89%	566	91%	532	83%
Successful Completion	498	99%	532	98%	552	98%	520	98%
Not successful	2	<1%	12	2%	14	2%	12	2%

Competence and Fitness to Practise

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 processes focus on supporting a practitioner through appropriate 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.

The Board received nine new competence notifications during the 2022-2023 year. Of these notifications, eight were received from an employer and one was received from a health practitioner. There were also two active notifications received prior to the 2022-2023 year.

Tables 10 and 11 below provide a breakdown of competence referrals in the 2022-2023 year and a summary of their outcomes.

Table 10: Competence referrals

Source	New	Existing	Still active	Closed
Employer	8	2	7	3
Health Practitioner	1			1
Total	9	2	7	4

Table 11: Outcomes of competence notifications

Outcome	Competence review	Referred to Health and Disability Commissioner	Competence programme including supervision
New	7	1	1
Existing	1		1

Of the seven new competence notifications that were required to undergo a competence review, four ceased practise and will be required to undergo the competence review should they return to practise. Two are completing a competence programme and the final practitioner had yet to complete the competence review at the end of the reporting period.

Of the existing notifications, one practitioner successfully completed a competence programme and one has ceased practice.

Two competence reviews were completed in the 2022-2023 year. Members of competence review panels during the 2022-2023 year were:

- Naomi Rasmussen
- Catherine Sorensen
- Hilary Hopkinson
- Jiatian (Justin) Wang

Health/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 a review by the Board.

The Board received three new fitness to practise notifications in the 2022-2023 year. All notifications were received from an employer under section 45(2) of the Health Practitioners Competence Assurance Act. There was also an existing notification received in the 2020-2021 year.

Tables 12 and 13 provide a breakdown of new and existing fitness to practise notifications and their outcomes.

Table 12: Notifications of inability to perform required functions due to mental or physical (health) condition

New	Existing ¹	Still active	Closed
3	1	3	1

Table 13: Outcomes of fitness to practise notifications

Outcome	Health assessment	Conditions on practice	No further action
New	2		1
Existing		1	

Of the two notifications requiring a health assessment, both practitioners ceased practice and processes will continue should they return to practice. The practitioner with conditions is no longer practising.

¹Historic cases for which there has been no contact with the Board over the previous 24 month period have been removed from this report. They will be reincluded in the reporting should the practitioner return to practice in the future.

Complaints and Discipline

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.

The Board received four new conduct-related complaints during the 2022-2023 year. Tables 14 and 15 provide a breakdown of new and existing conduct complaints and initial processes for these complaints.

Table 14: Conduct complaints

Source	New	Existing ¹	Still active	Closed
Health practitioner	1	2	1	2
Employer	2		1	1
Other	1			1
Total	4	2	2	4

Table 15: Conduct referrals

	Refer to a PCC	Refer to Health	No further action	Ceased practise
New	0	0	3	1
Existing	1	1	0	0

Of the four new conduct notifications, three required no further action and one practitioner ceased practice and will be referred to a PCC should they return. Of the existing notifications, one was referred to a PCC that resulted in no further action.

¹Historic cases for which there has been no contact with the Board over the previous 24 month period have been removed from this report. They will be reincluded in the reporting should the practitioner return to practice in the future.

Financial Report

1 April 2022 - 31 March 2023

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

ENTITY INFORMATION

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

For the Year ended 31 March 2023

<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 nine member governance board comprising of: Carol Bagnall Philip Thomas Anthony Bow Peter Dooley Billie Mudie Prudence Burns Susan Yorke Elizabeth Macaulay Shannon Ioane (commenced November 2022)
<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 THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF NEW ZEALAND'S PERFORMANCE REPORT FOR THE YEAR ENDED 31 MARCH 2023

The Auditor-General is the auditor of the 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 of New Zealand on his behalf.

Opinion

We have audited the performance report of the Board that comprises the entity information and the statement of financial position as at 31 March 2023, the statement of financial performance, the 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 Board:

- presents fairly, in all material respects,
 - its entity information and financial position as at 31 March 2023; and
 - its financial performance and cash flows for the year then ended; and
- complies with generally accepted accounting practice in New Zealand and have been prepared in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Public Sector)

Our audit was completed on 26 March 2024. 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 Board and our responsibilities relating to the performance report 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 performance report

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

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

In preparing the performance report, the Board is responsible for assessing the 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 Board or to cease operations, or there is no realistic alternative but to do so.

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

Responsibilities of the auditor for the audit of the performance report

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

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

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

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

- We identify and assess the risks of material misstatement of the performance report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- We obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Board's internal control.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the governing body.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the governing body and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the 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 represents the underlying transactions and events in a manner that achieves fair presentation.

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

Our 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(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 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 2023

	Note	Actual This Year \$	Actual Last Year \$
Revenue			
Fees, subscriptions and other revenue from practitioners	1	1,729,115	1,621,317
Interest, dividends and other investment revenue	1	47,446	9,711
Other revenue	1	3,152	723
Total Revenue		1,779,713	1,631,751
Expenses			
Employee related costs	2	-	657,337
Costs related to providing good or services	2	1,594,050	525,683
Other expenses	2	55,000	54,117
Total Expenses		1,649,050	1,237,137
Surplus/(Deficit) For The Year		130,663	394,614

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

SUMMARY STATEMENT OF CASHFLOWS

"How the entity has received and used cash"

For the Year ended 31 March 2023

	Actual this Year \$	Actual Last Year \$
Cash Flows from Operating Activities		
<i>Cash was received from:</i>		
Fees, subscriptions and other receipts from practitioners	1,702,244	1,747,881
Interest, dividends and other investment receipts	31,641	8,220
Cash was applied to:		
Payments to suppliers and employees	(1,547,314)	(1,228,163)
Cash advances to related parties	(50,000)	(145,100)
Net Cash Flows From Operating Activities	136,571	382,838
Cash flows from Investing and Financing Activities		
Cash was received from:		
Term Deposits	(450,000)	(950,000)
Net Cash Flows from Investing and Financing Activities	(450,000)	(950,000)
Net Increase / (Decrease) in Cash	(313,429)	(567,162)
Opening Cash	1,206,258	1,773,420
Closing Cash	892,829	1,206,258
This is represented by:		
Bank Accounts and Cash	892,829	1,206,258

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 2023

	Note	Actual This Year \$	Actual Last Year \$
Assets			
Current Assets			
Bank accounts and cash	3	892,829	1,206,258
Debtors and prepayments	3	150,976	144,326
Term Deposits		2,550,000	2,100,000
Total Current Assets		3,593,805	3,450,584
Non-Current Assets			
Investments	3	50	50
Total Non-Current Assets		50	50
Total Assets		3,593,855	3,450,634
Liabilities			
Current Liabilities			
Creditors and accrued expenses	3	174,858	172,608
Income in Advance	3	1,374,674	1,310,920
Other liabilities	3	37,906	
Provision for onerous lease	3	-	41,896
Total Current Liabilities		1,587,438	1,525,424
Non-Current Liabilities			
Provision for onerous lease	3	-	49,456
Total Non-Current Liabilities		-	49,456
Total Liabilities		1,587,438	1,574,880
Total Assets less Total (Net Assets)		2,006,417	1,875,754
Accumulated Funds			
Accumulated surpluses or (deficits)		2,006,417	1,875,754
Total Accumulated Funds		2,006,417	1,875,754

For and on behalf of the Board:

Chairperson:

Elizabeth Macaulay



Date: 25 March 2024

Chief Executive:

Dr Susan Calvert



Date: 25 March 2024

NEW ZEALAND MEDICAL RADIATION TECHNOLOGISTS BOARD

STATEMENT OF ACCOUNTING POLICIES

"How did we do our accounting?"

FOR THE YEAR ENDED 31 MARCH 2023

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

Under a service agreement Medical Sciences Secretariat Limited (MSS) provides services directly to the Board ("Provided Services") and it arranges goods and services to be supplied to the Board by other suppliers ("Arranged Services"). In prior years, all expenses were classified by functions in note 2 to the financial statements. This year, the Board has changed its accounting policy and now aggregates MSS Provided Services and Arranged Services into two lines. This change in policies provides a more faithful presentation of the Secretarial Costs. Note 10 compares how the expenses would be presented under the old and new policies. There has been no other policy changes (last year - classification and presentational changes).

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 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 2023

Note 1: Analysis of Revenue			
Revenue Item	Analysis	This Year \$	Last Year \$
Fees, subscriptions and other revenue from members	Registration	202,839	162,856
	APC	1,451,715	1,349,311
	Other	125,159	119,584
	Total	1,779,713	1,631,751

Note 2: Analysis of Expenses

Expense Item	Analysis	This Year \$	Last Year \$
Employee related costs	ACC Levy	-	1,477
	Staff Expenses Recruitment	-	14,854
	Staff Training	-	10,648
	Staff Welfare	-	9,479
	Wages & Salaries	-	620,879
Total		-	657,337

Expense Item	Analysis	This Year \$	Last Year \$
Costs related to providing goods or services	MSS arranged services	140,311	46,122
	MSS provided services	1,150,023	-
	Lease/Rental	-	57,404
	Personnel and Other Costs	14,267	10,638
	Board Member Fees	164,060	131,020
	Professional and Consultancy Fees	-	3,455
	Conference, Meetings, Workshops	10,322	13,095
	Catering	387	411
	Examinations, Assessors, Registrations	87,361	71,708
	Insurance	11,650	26,442
	IT	1,615	78,323
	Postage and Courier	-	1,187
	Printing and Stationery	1,341	4,447
	Project	5,861	27,524
	Publications/Subscriptions	317	1,128
	Security Documents	-	2,759
	Telephone and Tolls	-	2,980
	Travel and Accommodation	6,535	47,040
Total		1,594,050	525,683

Expense Item	Analysis	This Year \$	Last Year \$
Other Expenses	Accounting Fees	-	6,000
	Audit Fees	16,572	16,388
	Bad Debts	-	(23,000)
	Bank Charges	35,746	24,620
	CEO Review	-	4,251
	General Expenses	896	13,221
	Office Expenses	-	8,822
	Legal Fees	1,786	3,815
Total		55,000	54,117

Note 3: Analysis of Assets and Liabilities

Asset Item	Analysis	This Year \$	Last Year \$
Bank accounts and cash	Westpac Bank - Current	892,386	1,205,819
	Westpac Bank - Saving	443	439
	Total	892,829	1,206,258

Asset Item	Analysis	This Year \$	Last Year \$
Debtors and prepayments	Prepayments	-	8,782
	Debtors	27,608	11,238
	MSS Intercompany	105,005	121,748
	Provision for Doubtful Debt	-	-
	Accrued Income	18,363	2,558
	Total	150,975	144,326

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

Liability Item	Analysis	This Year \$	Last Year \$
Creditors and accrued expenses	Accrued Expenses	22,080	7,786
	GST due for payment	146,737	153,114
	Accounts Payable	822	5,183
	WHT	5,219	6,525
	Total	174,858	172,608

Liability Item	Analysis	This Year \$	Last Year \$
Income received in Advance	Practitioner fees relating to 2022/23	1,374,674	1,310,920
	Total	1,374,674	1,310,920

Liability Item	Analysis	This Year \$	Last Year \$
Other liabilities	Onerous lease	37,906	-
	Total	37,906	-

Liability Item	Analysis	This Year \$	Last Year \$
Current provision for onerous lease	Provision for onerous lease	-	41,896
	Total	-	41,896

Liability Item	Analysis	This Year \$	Last Year \$
Non current provision for onerous lease	Provision for onerous lease	-	49,4560
	Total	-	49,456

Note 4: Accumulated Funds			
This Year		Accumulated	Total
Description		Surpluses or Deficits	
Opening Balance		1,875,754	1,875,754
Surplus/(Deficit)		130,663	130,663
Closing Balance		2,006,417	2,006,417

Last Year		Accumulated	Total
Description		Surpluses or Deficits	
Opening Balance		1,481,140	1,481,140
Surplus/(Deficit)		394,614	394,614
Closing Balance		1,875,754	1,875,754

Note 5: Commitments and Contingencies			
		At balance date	At balance date
		This Year	Last Year
Commitment	Explanation and Timing	\$	\$
Lease Commitment: 99 Customhouse Quay, Wellington	Current Portion	73,069	65,696
	Non Current Portion	208,418	281,488
		281,487	347,184
Onerous Lease Commitment: 80 The Terrace, Wellington	Current Portion	37,906	52,038
	Non Current Portion	-	31,039
		37,906	83,077
Photocopier Lease	Current Portion	1,404	1,404
	Non Current Portion	1,404	2,808
		2,808	4,212

COMMITMENTS

Medical Sciences Secretariat Limited 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 has been fully paid in May 2023.

On 1 January 2022, Medical Sciences Secretariat Limited signed a new 5 year lease at 99 Customhouse Quay. There is a right of renewal for a further 5 years.

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

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	1,150,023	940,629	120,842	108,409
	Beryl Kelly		2,593		-
	Elizabeth Macaulay	18,939	12,781	1,356	1,164
	Billie Mudie	39,374	43,129	3,098	3,178
	Carol Bagnall	20,548	7,570	634	-
	Louise Tarr		1,700		
	Peter Dooley	10,850	8,415		1,105
	Prudence Burns	9,966	8,368	88	1,232
	Susan Yorke	20,956	14,129	613	467
	Anthony Bow	73,435	48,756	4,375	5,078
	Philip Thomas	9,708	6,630		-
	Shannon Ioane	2,144		423	-

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

Medical Sciences Secretariat processed payments valued at \$217,577 in total on behalf of the Medical Sciences Council and the Medical Radiation Technologists Board as their agent (last year-\$113,031). Commencing April 22 Medical Sciences Council and Medical Radiation Technologists Board directly directly paid their costs where applicable.

Included in the above table, are Medical Sciences Secretariat Board Fees for the following: Billie Mudie \$4,900; Anthony Bow \$44,756; Susan Yorke \$9,363.

Note 7: Events After the Balance Date

The Operating lease agreement at 80 The Terrace was contracted to expire on 31 October 2023. Negotiations for the early exit of this lease was concluded with the landlord in May 2023 with the early termination of the lease agreed for 20 May 2023. There were no other 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 \$1,374,674 (Last Year - \$1,310,920).

Note 9: Ability to Continue Operating

The entity will continue to operate for the foreseeable future.

Note 10: Change in Presentation

Expense Item	Analysis	New Presentation \$	Old Presentation \$
Employee related costs	ACC Levy	-	1,609
	Staff Expenses Recruitment	-	12,999
	Staff Training	-	14,254
	Staff Welfare	-	9,126
	Wages and Salaries	-	686,378
	Total	-	724,366

Expense Item	Analysis	New Presentation \$	Old Presentation \$
Costs related to providing goods or services	MSS Provided Services	1,150,023	-
	MSS Arranged Services	140,311	64,681
	Lease/Rental	-	50,067
	Personnel and Other Costs	14,267	14,267
	Board Member Fees	164,060	202,397
	Professional and Consultancy Fees	-	2,235
	Conference, Meetings, Workshops	10,322	19,369
	Catering	387	6,007
	Examinations, Assessors, Registrations	87,361	120,545
	Insurance	11,650	19,592
	IT	1,615	106,464
	Māori Consultancy	-	43,960
	MSS Interest - Received	-	(1,480)
	Postage and Courier	-	2,868
	Printing and Stationery	1,341	5,000
	Project	5,861	30,925
	Publications/Subscriptions	317	6,360
	Security Documents	-	3,000
	Telephone and Tolls	-	3,595
	Travel and Accommodation	6,535	109,401
	Total	1,594,050	809,253

Expense Item	Analysis	New Presentation \$	Old Presentation \$
Other Expenses	Accounting Fees	-	7,983
	Audit Fees	16,572	7,977
	Bad Debts	-	-
	Bank Charges	35,746	37,517
	CEO Review	-	34,823
	General Expenses	896	4,668
	Office Expenses	-	10,732
	Legal Fees	1,786	3,485
	Total	-	41,896



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