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POLICY STATEMENT

Working under Supervision

Purpose

Under Section 22 (3) of the Health Practitioners Competence Assurance Act 2003 (the Act) the Medical Radiation Technologists Board (the Board) can place a condition on a practitioner's scope of practice to ensure the competent practice of the practitioner. This can include:

A condition that the applicant practise subject to the supervision of 1 or more nominated health practitioners or health practitioners of a stated class (Section 22 [3] [a])

Policy

1. Practitioners working in the profession of medical imaging and radiation therapy may be required to work under direct or indirect supervision in a number of circumstances.

Direct supervision requires a nominated medical imaging or radiation therapy technologist who holds a current annual practising certificate (APC) to be on-site at the clinical centre and available to provide direct supervision to the practitioner required to work under supervision.

Indirect supervision applies to practitioners who have been deemed as being competent by their nominated supervisor and can work on their own with access to a supervisor who may be either on-site or available by phone. The supervisor must be a registered health practitioner¹ with a current practising certificate (generally in the same scope of practice as the practitioner to be supervised)

¹ MRI and Nuclear Medicine supervision must be provided by a registered MRI/Nuclear Medicine Technologist with a current practising certificate

- 1.1 All practitioners registered in a training scope of practice in magnetic resonance imaging, nuclear medicine, or ultrasound must work under direct supervision for an initial minimum period of six months.
- 1.2 Registered medical imaging or radiation therapy practitioners (all scopes of practice excluding training scopes) who have not held a practising certificate for over three years and up to five years may be issued with an APC and required to work under direct supervision for a specified period.
- 1.3 Candidates undertaking a registration examination assessment (REA) must work under direct supervision for the period of their familiarisation period of the REA process (that is, up to maximum of three months).
2. Supervisors must be registered medical imaging or radiation therapy practitioners with a current practising certificate (generally in the same scope of practice as the practitioner to be supervised).²
3. The supervisor must work at the same site as the practitioner he/she is supervising.
4. Practitioners working under supervision must follow the supervision programme.
5. Practitioners working under supervision must immediately notify the Board if they move to another place of employment or cease employment.

² Supervision for MRI and Nuclear Medicine Technologists must be provided by practitioners who are registered in the same scope of practice, and hold a current practising certificate, as the practitioner to be supervised.

PROCEDURES

1. Supervision for Practitioners Registered in a Training Scope of Practice

1.1 Supervisors:

- 1.1.1 Ensure trainees are enrolled in a Board-approved postgraduate training programme.
- 1.1.2 Are responsible for the safe practise of trainees at all times.
- 1.1.3 Closely monitor the workload and degree of difficulty of examinations to be undertaken by trainees.
- 1.1.4 Ensure trainees have the required skills and knowledge to perform examinations.
- 1.1.5 Ensure patients' safety is never compromised by the limited skill and knowledge of trainees.
- 1.1.6 After an initial 6-month training period if the supervisor is satisfied trainees can work safely, follow department protocols and perform routine examinations competence, the supervisor can recommend/approve for trainees to participate in the on-call roster of the department under indirect supervision.
- 1.1.6 Facilitate and enable trainees to learn for themselves rather than "doing for" them.
- 1.1.5 Provide trainees with constructive feedback.
- 1.1.6 Act as a role model through demonstrating appropriate skills, attitudes and behaviour.
- 1.1.7 Must document the hours of work trainees work in that modality and include in their report to the Board.
- 1.1.8 Inform the Board (Registrations Manager) through the submission of a written report when trainees have completed their postgraduate course and are ready to apply for registration and an APC in the relevant scope of practice.

- 1.1.9 Inform the Board of any of the following circumstances:
 - 1.1.9.1 Trainees cease to be enrolled in the programme;
 - 1.1.9.2 Trainees move to another place of employment, continuing to practise in the training scope of practice;
 - 1.1.9.3 There has been a change of supervisors for trainees within the current workplace.
 - 1.1.9.4 Trainees have been working unsupervised for any period of time.

1.2 Trainee Practitioners:

- 1.1.1 Work under the direct supervision of a named supervisor for a minimum period of six-months.
- 1.2.2 May work on the on-call roster under indirect supervision after a minimum initial training period of six- months and only after approval by their supervisor.
- 1.2.3 If working on the on-call roster trainees must be supervised by a radiologist/nuclear medicine physician or a radiology registrar. This indirect supervision can be verbal or observational (the radiologist/registrar could be viewing at a remote workstation and communicating with the trainee).
- 1.2.4 While working on-call trainees must have a registered practitioner available to them at all times for consultation and guidance.
- 1.2.5 Follows department protocols at all times.
- 1.2.6 Inform the Board (Registrations Manager) of any of the following circumstances:
 - 1.2.6.1 Trainees have ceased employment;
 - 1.2.6.2 Trainees have withdrawn from the training programme;
 - 1.2.6.3 Trainees have moved to another place of employment and are continuing with the postgraduate programme. Trainees to provide the names of supervisors at the new places of employment.
 - 1.2.6.4 Names of any new supervisors appointed at the current workplace.
 - 1.2.6.5 If they believe inadequate supervision is being provided.

2. Supervision for Practitioners who are Returning to Work

2.1 Supervisors

- 2.1.1 Are responsible for the safe practise of practitioners at all times.
- 2.1.2 Closely monitor the workload and degree of difficulty of examinations to be undertaken by practitioners.
- 2.1.3 Ensure practitioners have the required skills and knowledge to perform examinations.
- 2.1.4 Ensure patients' safety is never compromised by the limited skill and knowledge of practitioners.
- 2.1.5 Ensure practitioners are able to participate in a roster that encompasses all duties relevant to the scope of practice that is being applied for.
- 2.1.6 Facilitate and enable practitioners to learn for themselves rather than "doing for" them.
- 2.1.7 Provide practitioners with constructive feedback.
- 2.1.8 Initially provide direct observation of practitioners at all times. As practitioners gain more experience supervisors may approve for indirect observational supervision to be provided by another registered medical radiation technologist who holds an APC in the relevant scope of practice.
- 2.1.9 As practitioners gain more experience supervisors may approve for them to carry out examinations independently.
- 2.1.10 Ensure practitioners are not rostered on-call.
- 2.1.11 Ensure they are familiar with the logbook and legislation module requirements for practitioners, and the competence requirements for being issued with an APC.
- 2.1.12 Notify the Board (Registrations Manager) when practitioners have completed their period of supervision.
- 2.1.13 Complete the Supervisor section of practitioners' logbooks to confirm whether or not practitioners are competent and fit to practise as medical imaging or radiation therapy practitioners in the relevant scope of practice.
- 2.1.14 Complete a Supervisor's report and return to the Board (Registrations Manager). A full written explanation is provided for any recommendation that practitioners are incompetent to practise in the relevant scope of practice.

- 2.1.5 Must notify the Board (Registrations Manager) if practitioners are working unsupervised for any period of time.

2.2 Practitioners

- 2.2.1 Provide the Board (Registrations Manager) with written confirmation from their employer of their placement at a Board-approved workplace, including the name of the supervisor, prior to being issued with a time limited APC/IPC.
 - 2.2.2 May be required to meet any costs associated with the period of supervision.
 - 2.2.3 Record all procedures in their logbook and ensure these reflect a range of duties relevant to their scope of practice.
 - 2.2.4 Record weekly comments in the logbook.
 - 2.2.5 Successfully complete the legislation module.
 - 2.2.6 Does not work on the on-call roster.
 - 2.2.7 Ensure their logbook is signed off by the supervisor to confirm they are competent and fit to practise in the relevant scope of practice.
 - 2.2.8 Submit their completed logbook and legislation module to the Board (Registrations Manager).
 - 2.2.9 Must notify the Board (Registrations Manager) if they believe inadequate supervision is being provided.
- 2.3 Any notification from Supervisors that return-to-work practitioners are not competent to practise in the relevant scope of practise is forwarded to the Board's Recertification Committee.
- 2.4 The Recertification Committee may, in accordance with its delegated authority, approve for the practitioner to be offered a registration examination assessment (REA).

3. Supervision for a Registration Examination Assessment (REA) Candidate

3.1 Supervisors

- 3.1.1 Ensure candidates work under direct supervision at all times.
- 3.1.2 Are responsible for the safe practise of candidates at all times.
- 3.1.3 Provide candidates with constructive feedback.
- 3.1.4 Facilitate and enable candidates to learn for themselves rather than “doing for” them.
- 3.1.5 Ensure candidates are prepared for a REA by complying with the relevant competency documents for the specified scope of practice.
- 3.1.6 Endorse the decision to notify the Board (Registrations Manager) that candidates are ready to undertake a REA.
- 3.1.7 Notify the Board if they consider candidates are not ready to undertake a REA.
- 3.1.8 Ensure all pre-requisites of a REA are completed and available for the REA assessors.
- 3.1.9 Liaise with the department’s manager to negotiate:
 - 3.1.9.1 The availability of appropriate rooms with a suitable range of patients and procedures on the day of a REA
 - 3.1.9.2 A suitable environment for the oral assessment
- 3.1.10 Manage the programme for a REA, scheduling tasks appropriate to the timetable and the department’s resources.
- 3.1.11 Inform patients and ensure consent is obtained for the examination, as required.
- 3.1.12 Check that candidates' logbooks and legislation modules have been sent to the Board office..
- 3.1.13 Must notify the Board (Registrations Manager) if candidates are working unsupervised for any period of time.

3.2 REA Candidates

- 3.1.1 Work under the direct supervision of a named supervisor at all times.

- 3.1.2 Record all procedures undertaken in a logbook, and records weekly comments their logbook.
- 3.1.3 Successfully complete the legislation module.
- 3.1.4 Submit their logbook and legislation module to the Board (Registrations Manager) at least two weeks prior to the scheduled REA.
- 3.2.5 Do not work on the on-call roster.
- 3.2.6 Must notify the Board (Registrations Manager) if they believe inadequate supervision is being provided.

Associated Forms and Templates:

Document Title	Document Reference
Supervisors Report	MRTB.Recert.4.1

Related Policy Documents:

Policy Title	Document Reference
Registration in the Profession of Medical Imaging and Radiation Therapy	MRTB.Reg.1
Registration Examination Assessments	MRTB.Reg.2
Issue of Practising Certificates	MRTB.Recert.1
Return to Work	MRTB.Recert.2