

Medical Radiation
Technologists Board
of Queensland



**annual
report**

2010-11

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Public availability of annual report

Copies of this annual report are publicly available at www.healthregboards.qld.gov.au and at no cost by contacting the Office as follows:

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Glossary

AIR	Australian Institute of Radiography
ANZSNM	Australian and New Zealand Society for Nuclear Medicine
Board	Medical Radiation Technologists Board of Queensland
COAG	Council of Australian Governments
CORA	Conference of Regulating Authorities
CPI	Consumer Price Index
HAM	health assessment and monitoring
IP Act	<i>Information Privacy Act 2009</i>
MIT	Medical Imaging Technologist
MRP	Medical Radiation Practitioners
MRPNSCRA	Medical Radiation Professionals National Steering Committee for Registration and Accreditation
MRS	Medical Radiation Science
MRT	Medical Radiation Technology
National Board	Medical Radiation Practice Board of Australia
National Law Act	<i>Health Practitioner Regulation National Law Act 2009</i>
National Scheme	National Registration and Accreditation Scheme
Office	Office of Health Practitioner Registration Boards
PCRP	Professional Conduct Review Panel
PID Act	<i>Public Interest Disclosure Act 2010</i>
Professional Standards Act	<i>Health Practitioners (Professional Standards) Act 1999</i>
QPS	Queensland Police Service
QTC	Queensland Treasury Corporation
Registration Act	<i>Medical Radiation Technologists Registration Act 2001</i>
Registration Regulation	<i>Medical Radiation Technologists Registration Regulation 2002</i>
RT	Radiation Therapist
RTI Act	<i>Right to Information Act 2009</i>
RTO	registered training organisations
SPPC	Supervised Practice Program Committee
WPA Act	<i>Whistleblowers Protection Act 1994</i>



Foreword – letter of compliance

The Hon Geoff Wilson MP
Minister for Health
Parliament House
BRISBANE QLD 4000

3 August 2011

Dear Minister

I am pleased to present the Annual Report and Financial Statement of the Medical Radiation Technologists Board of Queensland for the year ended 30 June 2011.

I certify that this annual report complies with:

- The prescribed requirements of the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*, and
- The detailed requirements set out in the *Annual Report Requirements for Queensland Government Agencies*.

A checklist outlining the annual reporting requirements can be found by accessing www.mrtboard.qld.gov.au/publications.htm

My appreciation is extended to all current members of the Board who held office during the year.

The Board also records its appreciation for the administrative and operational support provided by the staff of the Office of Health Practitioner Registration Boards in assisting the Board to fulfil its statutory functions and obligations.



A handwritten signature in black ink, appearing to read 'J Andersen', with a long horizontal flourish extending to the right.

John Andersen
Chairperson



Introductory information

Constitution

The Medical Radiation Technologists Board of Queensland is constituted under section 9 of the Registration Act as a body corporate with perpetual succession. The Board is subject to the provisions of the *Health Practitioner Registration Boards (Administration) Act 1999*, the Professional Standards Act and the *Financial Accountability Act 2009*.

Goals

Consistent with section 7(1) of the Registration Act, the Board's primary goals are:

- to protect the public by ensuring health care is delivered by registrants in a professional, safe and competent way;
- to uphold standards of practice within the profession; and
- to maintain public confidence in the profession.

Functions

The Board is directly responsible for the administration of the Registration Act and the Registration Regulation (as amended from time to time).

The Board's major functions are set out in section 11 of the Registration Act as follows:

- to assess applications for registration;
- to register persons who satisfy the requirements for registration;
- to monitor and assess whether registrants comply with any conditions of registration;
- to keep a register of, and records relating to, registrants;
- to promote high standards of practice of the profession by registrants;
- to develop or adopt programs for the continuing professional education of registrants and encourage their participation in the programs;
- to develop or adopt training programs in the practice of the profession that are relevant to a person's eligibility for registration;
- to confer and cooperate with interstate regulatory authorities;
- to confer and cooperate with entities engaged in the development of national policies about the regulation of the profession;
- to confer and cooperate with the following entities about the education of persons in the practice of the profession:
 - > educational institutions; and
 - > entities responsible for accrediting courses or accrediting institutions to educate persons for the profession;

- to inform registrants and the public about the operation of the legislative scheme in its application to the profession;
- to examine and advise the Minister about the operation of the legislative scheme in its application to the profession;
- to monitor and enforce compliance with this Act;
- to undertake research, relevant to the legislative scheme, into the regulation of the profession;
- to collect and give to persons information about the practice of the profession by registrants; and
- to perform other functions given to the Board under the Registration Act or another Act.

In addition, the Board has a variety of functions under the Professional Standards Act. Those functions are listed under section 11 of that Act as follows:

- to receive complaints about its registrants and, if appropriate, refer the complaints to the Health Quality and Complaints Commissioner;
- to consult and cooperate with the Commissioner in investigating and disciplining its registrants and in relation to complaints about impaired registrants;
- to immediately suspend, or impose conditions on the registration of its registrants if the registrants pose an imminent threat to the wellbeing of vulnerable persons;
- to conduct investigations, whether because of complaints or on its own initiative, about the conduct and practice of its registrants;
- to deal with disciplinary matters relating to its registrants that can be addressed satisfactorily through advising, cautioning and reprimanding;
- to bring disciplinary proceedings relating to its registrants before Panels or the Tribunal;
- to implement orders of Panels or the Tribunal relating to the Board's registrants;
- to establish health assessment committees to assess the health of registrants who may be impaired and make decisions about impaired registrants;
- to monitor its registrants' compliance with conditions imposed or other disciplinary action taken, or undertakings entered into, under this Act;
- to cancel or suspend, or impose conditions on, its registrants' registration as a result of action taken under a foreign law;
- to consult and cooperate with other boards, foreign regulatory authorities and other relevant entities about the investigation and disciplining of its registrants and the management of its registrants who are impaired; and
- to exercise other functions given to the Board under the Act.

Board and committee meetings

Regular ordinary meetings of the Board are usually convened on the first Wednesday of each month (except January) at the Office of Health Practitioner Registration Boards.



During 2010-11 the Board held 11 ordinary Board meetings and 21 committee meetings.

Attendance by Board members at these various meetings is shown in the following table.

Member	Ordinary Board	Committee
J Andersen	10	3
D Kennedy	11	8
W Nuss	10	-
A Illidge	9	11
P Rowntree	9	2
N Eastgate	10	13
T Lloyd	8	-
L O'Neill	10	1
V Thorley	11	-
M Wilson	10	2

In addition, the following non-Board members assisted the Board by being members of the Board's committees as follows.

Member	Committee attendance
N Biesot	8
C Brady (nee McDonnell)	7
A Connell	1
A Dry	1
J Abbott	7
J Kindt	1
D Starkey	5
T Way	6
LJ Michel	4

The Board also arranged on occasions for selected Board members to undertake special assignment activities to address particular issues.

Full details of the membership of the Board are set out below in *Governance – management and structure*.

Operating environment

As set out in detail in *Goals and Functions* above, the Board's primary responsibility is protection of the public by regulating the registration and professional conduct of the medical radiation technology profession within Queensland. Along with ensuring that registrants are appropriately qualified and fit to practice before being granted registration, the Board is also responsible for:

- investigating any complaints against practitioners, and instituting disciplinary action where necessary;
- ensuring unregistered people do not use any restricted titles of the profession, and instituting prosecution action where necessary; and
- conducting health assessments on applicants or registrants, and wherever possible, assisting registrants with health issues to manage and overcome these issues in a way that does not adversely place the public at risk.

In this way the Board fulfils its duties to protect the public, uphold standards of practice and maintain public confidence in the profession. Detailed information about these activities are given in sections below dealing with complaints and health assessments, as well as *Criminal history checking*.

The Board continued its preparations to transition into the National Scheme in 2012, (see *National registration and accreditation - Medical Radiation Professionals National Steering Committee*) and is pleased to announce that the membership of the National Board has now been announced, allowing it to commence operation.

The Board is pleased to report that:

- the profession in Queensland continues to grow (see *The Register*);
- the Board's Supervised Practice Program continues to grow in numbers and consistently produces high quality practitioners (see *Supervised practice program*);
- the Board continues to be soundly managed and maintained a sound financial position during 2010-11 (see *Financial performance*);
- the Board has continued its financial support to bring about improvements to the profession (see *Research grants and awards program*);
- the Board has continued its successful working relationship with other professional bodies; and
- the Office, which provides all administrative support to the Board, continues to do so in a professional and timely manner.

External scrutiny

The Queensland Audit Office advised that there were no significant issues arising from their audit. The Office was not subject to any reports of any parliamentary committees, the Crime and Misconduct Committee, the Queensland Ombudsman or the Coroner.

Review of proposed forward operations

With the implementation of Phase 2 of the National Scheme from 1 July 2012, the Board will be abolished and the profession will move to national regulation.

As the role and function of the re-structured Office of Health Practitioner Registration Boards will terminate on 30 June 2012 when the approved transitional arrangements for the remaining Boards takes effect, forward operational objectives of the Board for 2011-2012 under the current administrative support structure have been reviewed in that context. In lieu of an annual Operational Plan the Office will focus its activities on supporting the Boards to:

- continue to influence the development and implementation of the National Registration and Accreditation Scheme;
- maintain quality functions under the legislation;

- prepare for the transition to the national scheme for those Boards included in the scheme; and
- manage the transition to the future infrastructure for those Boards not included in the national scheme.

The Minister has requested that no new costs are to be incurred in the period leading into the full implementation of the national scheme. Therefore it is not intended that any significant strategic activity will be undertaken in regard to assets or information systems.

Provisional general registrants with probationary conditions	2	-	-	2
Provisional general registrants (including deemed)	-	-	-	-
Other	1	-	-	1
Total registrants	2241	140	423	2804

Non-financial performance

Towards Q2

The Board contributed to the Government's Q2 aim: *Healthy – Making Queenslanders Australia's healthiest people* by having included in their legislative goals the protection of the public by ensuring health care is delivered in a professional, safe and competent way, upholding standards of practice within the professions, and maintaining public confidence in the professions.

The Register

Pursuant to section 11(d) of the Registration Act, the Board maintains a Register of medical radiation technologists, with separate registration for medical imaging technologists (radiographers), nuclear medicine technologists and radiation therapists.

As at 30 June 2011 there were 2,804 registered medical radiation technologists, comprising 2,241 medical imaging technologists, 140 nuclear medicine technologists and 423 radiation therapists.

These figures represent a 'snap shot' in time as at 30 June 2011, and hence do not include restorations to the register for the period 1 July 2011 to 30 September 2011, nor registrants who surrender or do not renew their registration, or those who otherwise have their registration cancelled after 30 June. The Register, available to the public at www.healthregboards.qld.gov.au contains current registration data.

Registrant numbers within each registration category as at 30 June 2011 are shown below:

	Medical imaging technologists	Nuclear medicine technologists	Radiation therapists	Total
General registrants (including deemed)	2139	132	394	2665
General registrations with probationary conditions	99	8	29	136

The 2,804 registrants at 30 June 2011 represent a net increase of 112 (approximately 4%) over the 2010 figure. The net change in registrant numbers over the year is the product of significant numbers of additions to and deletions from the Register.

During 2010-11, 266 new registrations (for 200 medical imaging technologists, 15 nuclear medicine technologists and 51 radiation therapists) were processed by the Board. In addition, 33 registrants restored their registration between 1 July 2010 and 30 September 2010.

Of the 266 new registrants, 68 registrants (56 medical imaging technologists, three nuclear medicine technologists and nine radiation therapists) were processed under mutual recognition legislation.

Of the 68 mutual recognition registrants, 40 registrants (30 medical imaging technologists, three nuclear medicine technologists and seven radiation therapists) lodged a registration notice pursuant to the provisions of the *Mutual Recognition (Queensland) Act 1992* on the basis of holding current registration in the profession in another Australian State or Territory, while 28 (26 medical imaging technologists, and two radiation therapists) lodged a registration notice pursuant to the provisions of the *Trans-Tasman Mutual Recognition (Queensland) Act 2003* on the basis of holding current registration in the profession in New Zealand.

The following bar charts illustrate the change in the number of registrants each year since the commencement of registration in 2002-03.

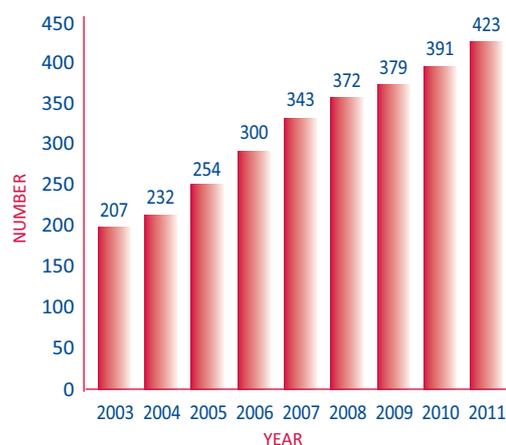
Registrant numbers - MIT's



Registrant numbers - NMT's



Registrant numbers - MIT's



An analysis of the registration database as at 30 June 2011 provides the following information.

Age groupings

	% of medical imaging technologists	% of nuclear medicine technologists	% of radiation therapists
Under 25 years	9.0	10.0	12.5
25 - 34 years	32.0	48.5	46.5
35 - 44 years	24.5	23.5	19.5
45 - 54 years	20.5	12.0	15.5
55 years and over	14.0	6.0	6.0
Total	100%	100%	100%

Gender

- 35% of medical imaging technologists were male and 65% were female;
- 39% of nuclear medicine technologists were male and 61% were female; and
- 26% of radiation therapists were male and 74% were female.

Geographical distribution

	% of medical imaging technologists	% of nuclear medicine technologists	% of radiation therapists
Within Brisbane	37.5	45.0	50.0
Elsewhere in south east Queensland	35.5	34.0	31.0
Total within south east Queensland (postcodes 4000 to 4399 and 4500 to 4581)	73.0	79.0	81.0
Elsewhere in Queensland	18.0	13.0	14.5
Outside Queensland	9.0	8.0	4.5
TOTAL	100.0	100.0	100.0

The geographical statistics are based on an analysis of postcode addresses of the registrants as shown on the Register. In some cases, the Register address differs from the practice address of a registrant. Registrants with addresses outside Queensland have chosen to retain Queensland registration, even though, in most cases, they do not currently practise their profession in Queensland.

Registration Act

The Registration Act was amended during 2010-11 by:

- *Fair Trading (Australian Consumer Law) Amendment Act 2010 No. 54 ss 1-2, 67 sch*, which included offences against the Australian Consumer Law (Queensland) in s45(2)(c)(i) of the Registration Act.

Registration Regulation

The Registration Regulation was amended during 2010-11 by:

- *Health Legislation Amendment Regulation (No. 1) 2011 SL No. 41 pts 1, 3*, which increased fees payable under the Registration Act in line with movements in the Consumer Price Index - details of the fees now applicable are provided in the "Fees" section of this report.

Complaints under the Registration Act

No complaints were received by the Board during 2010-11 under the Registration Act.

No Board funds were spent during 2010-11 on investigations or inspections under Part 5 of the Registration Act.

Complaints under the Professional Standards Act

The following tables and supporting information provide summary information in relation to the Board's handling of complaints, investigations, disciplinary proceedings and health assessments under the Professional Standards Act during 2010-11.

The Board received three new complaints under the Professional Standards Act in 2010-11:

- One complaint related to standard of treatment and boundaries. The Board resolved to investigate the matter and as at 30 June 2011 the investigation is not complete.
- One complaint related to the standard of treatment provided. The Board resolved to investigate the matter, which was completed during 2010-11. The Board found that no grounds for disciplinary action existed and resolved to take no further action.
- One complaint related to an allegation that a registrant may have had a health issue which affected her ability to practise. The Board resolved to investigate the matter, which was completed during 2010-11. The Board found that a ground for disciplinary action existed and resolved to commence disciplinary proceedings against the registrant before the Queensland Civil and Administration Tribunal.

All new complaints are assessed to determine whether the complaint appears to provide a ground for disciplinary action and, if so, whether the complaint should be first investigated.

No complaints remained in assessment at the end of 2010-11.

The following table outlines the number of investigations conducted during 2010-11.

Investigations conducted	Number
Investigations open at 1 July 2010	0
Investigations commenced in 2010-11	3
Investigations completed in 2010-11	2
Ongoing investigations	1
Total costs	\$293.66

The following table outlines the number of disciplinary proceedings conducted during 2010-11.

Type of proceeding	Board	PCRPP	QCAT	Total
Disciplinary proceedings on going at commencement of reporting year	0	0	1	1
Disciplinary proceedings commenced during the reporting year	0	0	2	2
Disciplinary proceedings closed in the reporting year	0	0	2	2
Disciplinary proceedings on going	0	0	1	1

The Board did not conduct or spend funds on health assessments of registrants under Part 5 of the Professional Standards Act during 2010-11.

The Board did not enter into any undertakings with registrants about their professional conduct or practice under sections 118(1)(c)(iv), 165(2)(b), 276(2)(a), or 299(2)(c) of the Professional Standards Act during 2010-11.

Consequently no copies of undertakings with registrants were provided to the Health Quality and Complaints Commissioner pursuant to section 379(5) of the Professional Standards Act.

Health assessments and management of impaired registrants

The Board's Health Assessment and Monitoring (HAM) program manages impaired registrants, in accordance with Part 7 of the Professional Standards Act.

Where a registrant suffers from a medical condition that may adversely affect their ability to safely and competently practise the profession, the Board will arrange for a health assessment by an appropriately qualified medical practitioner.

The Board may also require a new applicant seeking registration to undergo a health assessment under the Registration Act to ensure a known health condition does not compromise their practice.

During 2010-11, the Board conducted no health assessments under the Professional Standards Act and no assessments were required under the Registration Act.

During 2010-11, no costs were incurred by the Board for health assessments conducted under section 271 of the Professional Standards Act or section 46(1)(d) of the Registration Act.

Registrants may enter into undertakings following a health assessment which will allow the Board to monitor their health conditions and ensure that their medical condition does not affect their professional performance. It is usual for a registrant to be monitored for two to four years.

The Board may monitor such conditions as mental illness and substance abuse and has established monitoring tools such as supervised practice and a urine drug screening program to ensure that its impaired registrants deliver health care in a professional, safe and competent way.

During 2010-11, no registrants required monitoring by the Board.

Occasionally, the Board's Health Assessment and Monitoring program will conduct investigations on behalf of the Board where the ground for the investigation is possible impairment. No registrants required investigation on impairment grounds during 2010-11.

If a registrant fails to cooperate during a health assessment or the registrant and the Board can not agree on what undertakings are required to allow the Board to monitor the registrant's health, the Board must establish a health assessment committee.



The committee's function is to assess the registrant's health, make a finding as to whether the registrant is impaired and make recommendations to the Board. If the registrant is found impaired by the committee, it may impose conditions on the registrant.

The Board did not establish a health assessment committee during 2010-11.

Ministerial authorisations

During 2010-11, the Board did not receive from the Minister for Health any authorisations under section 392 of the Professional Standards Act or section 211 Registration Act for a person performing functions under those Acts to disclose information acquired in the performance of those functions about another person's affairs.

Ministerial directions

Section 37(1)(a) of the Registration Act and section 13(5) of the Professional Standards Act require the Board to include in its annual report copies of all written Ministerial directions given in the public interest to the Board during the financial year. The Board did not receive any directions during 2010-11.

Legislative compliance

Queensland Health's *Legislative Compliance Policy and Implementation Standard* requires a statement in an annual report by a legislation Custodian concerning the Board's compliance with the Registration Act and Professional Standards Act.

To the best of the knowledge of the Custodian, during the course of the last financial year there have been no breaches by the Board of either the Registration Act or Professional Standards Act.

Criminal history checking

Mandatory criminal history checking of all new applications made under the Registration Act was commenced on 1 July 2009. The following statistics report on the outcomes of this scheme from 1 July 2010 to 30 June 2011.

	MRT Board	Average across 12 Boards
Applications received	313	217
Applications screened	222*	182*
Applications sent to QPS within one working day of being ready for screening	100% (222)	>99%
Positive criminal history identified	5	4
Conditions imposed	Nil	Nil
Undertakings imposed	Nil	Nil
Applications refused	Nil	Nil

*Mutual recognition applicants are not screened for criminal history checks as there is not legislative authority to do so. Not all applications are sent for criminal history checking as some are

withdrawn prior to reaching this stage. International applicants must provide clearances to the Board from international authorities.

All applications (100%) were sent within one working day to the QPS after being ready for screening.

The results from criminal history checking across all Boards returned a wide variety of offence types. It is important to note that some of these offences were charges only. Offence types include:

- drunk and disorderly, drink driving, public nuisance;
- assault;
- grievous bodily harm;
- drug possession / related drug offences;
- theft;
- fraud;
- burglary; and/or
- shoplifting.

In assessing criminal history, the Board was able to request further information or explanation as necessary. No applications were refused or conditions / undertakings imposed solely on the basis of criminal history.

National registration and accreditation - Medical Radiation Professionals National Steering Committee

The Council of Australian Governments (COAG) at its meeting of 26 March 2008 signed an Intergovernmental Agreement on the health workforce which created a single national registration and accreditation system for ten health professions.

Medical Radiation Practitioners (MRPs) were excluded in the original COAG agreement, as they were only partially regulated i.e. registration for radiographers, radiation therapists and nuclear medicine technologists occurred only in Queensland, Victoria, Tasmania, Western Australia, the Northern Territory and the Australian Capital Territory.

In a July 2008 communiqué, the Health Ministers stated that they would consider other partially regulated health occupations for inclusion in the scheme.

Organisations and individuals were invited to provide a written submission to be considered by the Practitioner Regulation Subcommittee for advice to the Health Ministers.

The Conference of Regulating Authorities (CORA), representing the Medical Radiation Practitioner Boards, determined to establish a committee to facilitate the submission to the Health Ministers for inclusion of radiographers, radiation therapists and nuclear medicine technologists in the national regulation scheme. CORA invited the professional associations, the Australian Institute of Radiography (AIR) and Australian and New Zealand Society for Nuclear Medicine (ANZSNM) to participate in the submission development. The Departments of Health and professional organisations

were also asked to provide nominees who would represent the interests of members and non-members of the professional bodies in the two states who are not currently regulated, i.e. New South Wales and South Australia.

A Medical Radiation Science (MRS) university representative (from the Australian University MRS Heads of Discipline Group) was also requested in June 2010.

The committee was called the Medical Radiation Professionals National Steering Committee for Registration and Accreditation and was chaired by Mr Wayne Nuss, the Queensland Board member representative on CORA. The two main areas of consideration for the committee were registration standards and the formation of an accreditation council for the three professions.

The submission was prepared by the Queensland Board on behalf of CORA and submitted in October 2008.

The MRPNSCRA was informed, in March 2009, by the Australian Health Ministers Advisory Council that the submission had been successful and that MRPs would be admitted into the scheme in June 2012.

Registration Standards

In 2009 the MRPNSCRA considered a number of draft standards, based on the 'AHPRA template' for the 10 regulated professions' standards published on their web site. At its meeting of 11 March 2010 the MRPNSCRA resolved that working parties would be formed to develop draft registration standards. Each working party had a lead nominated from the MRPNSCRA. Wayne Nuss chaired the supervised practice program working party and was a member of the recency of practice working party.

Francesca Holloway, the Professional Adviser for the Queensland Board and secretary of CORA, was approved, by the MRPNSCRA at its October 2010 meeting, to project manage the registration standards submission to the National Board.

A submission with draft standards was approved by the MRPNSCRA and was sent with a covering letter from Mr Nuss to the Medical Radiation Practice Board of Australia in August 2011.

Accreditation Council

A sub-committee of the MRPNSCRA, with members from the AIR, ANZSNM, and CORA, considered the formation of an accreditation council for the three professions. Mr Nuss sat on the committee and it is anticipated that the Australian Medical Radiation Sciences Accreditation Council will be constituted in August 2011. The MRPNSCRA made a submission to the National Board for consideration of Australian Medical Radiation Sciences Accreditation Council as the accrediting body for the three professions recognised under the National Law Act.

Supervised practice program

The Board operated a Supervised Practice Program (SPP) under section 61 of the Registration Act and Part 3 of the Registration Regulation during 2010-11.

The aim of the program was to provide probationary registrants with the experience, knowledge and conduct standards required for the practice of the professions. The Board required all new graduates of prescribed tertiary courses under the Registration Regulation in the professions to undertake the program. Upon commencement, such persons were granted general registration with probationary conditions. They must then complete the equivalent of 48 continuous weeks under the program before becoming eligible for general registration without probationary conditions.

As at 30 June 2011, there were 139 registrants with probationary conditions on the program. They comprised 101 medical imaging technologists, eight nuclear medicine technologists and 29 radiation therapists. This represents an increase in numbers from 2009-10.

The Board managed the program through its Supervised Practice Program Committee (SPPC). The AIR/MRT Combined Committee was disbanded in December 2010 due to the introduction of the National Professional Development Program of the Australian Institute of Radiography.

The Board, through the SPPC, was responsible for the initial approval, monitoring, auditing and ongoing suitability of professional practice settings (that is, places where professional practice was undertaken in Queensland).

The SPPC also assessed the graduate's progress via the interim and final reports submitted by supervisors in the professional practice settings. In 2010 joint nuclear medicine technology progress and final report forms, developed by the Board and the Australian and New Zealand Society for Nuclear Medicine, were introduced.

The membership of the SPPC was:

- D Kennedy (Committee Chairperson) Board member, medical imaging technology
- EJ Andersen - Board member, medical imaging technology
- T Way (Committee Deputy Chairperson) - Industry representative, medical imaging technology
- D Starkey - Industry representative, medical imaging technology
- N Biesot - Industry representative, radiation therapy
- C Brady - Industry representative, radiation therapy
- J Abbott – Industry representative, medical imaging technology
- LJ Michel – Industry representative, nuclear medicine

The AIR/MRT* committee membership was:

- | | | |
|-------------|------|----------------|
| • T Way | (MI) | MRT Chair |
| • N Biesot | (RT) | MRT |
| • D Starkey | (MI) | MRT |
| • J Kindt | (MI) | AIR Nomination |
| • A Dry | (RT) | AIR Nomination |
| • A Connell | (MI) | AIR Nomination |

*Disbanded in December 2010



Ms Francesca Holloway was the Professional Adviser to the Board. Her role included management of practice audits undertaken by Board appointed auditors. The Professional Adviser was also the facilitator for both the SPP Committee and for the now disbanded AIR/MRT Committee.

The number of sites approved as professional practice settings and their approved probationary registrant position numbers for 2010-11 were:

- 94 medical imaging sites (175 with approved probationary registrant positions);
- 10 radiation therapy sites (with 38 approved probationary registrant positions); and
- 14 nuclear medicine sites (with 19 approved probationary registrant positions).

This represents an increase in the number of medical imaging sites and graduate positions from 2009-10.

General registration with conditions

In addition to the 139 registrants with probationary conditions (under the Supervised Practice Program), as at 30 June 2011, there were 40 medical radiation technology registrants for whom the Board had granted general registration with conditions. The nature of these conditions includes the following:

- supervisory conditions (these apply to persons who have been out of the workforce for some years or have practised less than one year in total over the past five years);
- registration restricted to mammography, including within the BreastScreen QLD training program;
- registration restricted to ultrasound and mammography under supervision;
- registration restricted to practice in a specific Health District; and
- a specified re-entry program must be completed.

Research grants and awards program

During 2010-11, the Board awarded the following grants and awards under its Research Grants Policy:

Published article awards:

- Judith Holt - \$1500 – *Radiographers' ability to perceive and classify abnormalities on mammographic images – results and a pilot project;*
- Clare Radley - \$500 – *Sentinel nodes from scintigraphy to surgery;*
- Beth Devereux - \$2000 – *A comparison of kV and MV imaging in head and neck image guided radiotherapy;*
- Amy Brown and Emma Day - \$1500 - *Assessment of motion & field placement verification of the prostate using gold seed fiducial markers: a feasibility study' ;*
- Angela Coles - \$1500 - *A patient presenting with an advanced squamous cell carcinoma to the left thigh' ;*

- Mark Middleton - \$3000 - *Successful implementation of image-guided radiation therapy quality assurance in the trans Tasman radiation oncology group 08.01 profit study' ;* and
- Debbie Watson - \$3000 - *Paediatric CT reference doses based on weight and CT Dosimetry phantom size: local experience using a 64-slice CT scanner'.*

Research Grant Program:

- Elizabeth Brown – Scholarship grant (\$5,000) and Research Grant Program (\$10,000) - *Biologically guided adaptive radiotherapy treatment planning for virally mediated head and neck cancer;*
- Tim Deegan – Scholarship grant – (\$5,000) and Research Grant Program (\$10,000) - *The role of core beam CT in prostate radiation therapy;*
- Kurt Burrows – Research Grant Program (\$8,000) - *Mechanical replication of clinical forces on thermoplastic masks in radiation therapy ;* and
- Michael Neep – Research Grant Program (\$10,000) – *Comparisons of the effectiveness of two types of X-Ray image interpretation education delivery methods; intensive training versus regular tutorials over 3 months.*

Information session for final year students

The Board held a breakfast information session on 11 November 2010 for students about to graduate with qualifications in medical imaging technology or radiation therapy.

The information session included guest speakers from the Board, Radiation Health and the Australian Institute of Radiography. Each student was provided with an information pack about the professions and registration.

Board academic prizes

The Board has established student academic prizes in medical imaging technology and radiation therapy in conjunction with the Queensland University of Technology, which is the only tertiary academic institution currently providing Queensland courses for those professions. As there are currently no Queensland courses in nuclear medicine technology, the Board does not offer academic prizes for that profession.

On 16 May 2011 the Chairperson presented the following student academic prizes:

- Troy Anderson : Prize for medical imaging
- Jessica Burley : Prize for radiotherapy

Industry liaison

The Board's Chair, John Andersen Chair, Deputy Chair and Chair SPPC, Dominic Kennedy and members Dr Virginia Thorley, Melinda Wilson, Wayne Nuss and Nicole Eastgate met on 29 November 2010 with industry representatives to discuss:

- National Registration and Accreditation Scheme;
- Supervised Practice Program /NPDP;

- Upgrading the Board's website;
- Registration and licensing of 2010 graduates;
- Supervisors workshop;
- Undergraduate course in MIT due to commence at Central Queensland University in 2011; and
- Research.

Newsletters

During 2010-11, the Board prepared one newsletter in December 2010 to inform registrants of Board activities and issues relevant to the profession. Major topics covered in the newsletter were:

From the Chair

- About the Board;
- Profile on a Board member: Nicole Eastgate;
- OHPRB in transition;
- Update on the national registration agency;
- Medical Radiation Practitioner National Steering Committee for Registration and Accreditation;
- Supervised Practice Program;
- Supervisors workshop;
- Changes to the Board's website – Supervised practice information;
- Presentation day;
- Board grants and awards;
- Graduates' and awards' breakfast;
- On-line registration;
- Registration data;
- Professional standards data;
- Registrant information; and
- Contacting the Board.

Office submissions

During 2010-11, the Board considered submissions from the Office of Health Practitioner Registration Boards regarding policy options and other matters as follows:

- Financial Delegation Manual;
- Budget Proposal 2010 – 2011;
- Workloads and Workflow Review;
- New State Procurement Policy;
- Service Agreement Report – 30 June 2010;
- Budget Adjustment - 2010-2011;
- Request for delegation under the Registration Act;
- Entertainment & Hospitality Expenses Policy and Guidelines;
- New Integrity and Accountability Reforms;
- Indemnity Insurance;
- Service Agreement – 30 June 2010;
- Disposition of Board assets on Transition to the NRAS; and
- Budget Proposals 2011-2012.

Financial performance

Summary of financial performance

The Board funded its activities from its retained surplus funds within an operational budget which showed a surplus at the end of the reporting period.

The Board's funding is fully sourced from monies received from its registrants, and it receives no funding from elsewhere. The funds are primarily expended on administrative costs such as salaries and accommodation expenses, and also significantly, legal expenses and other costs associated with the Boards' professional standards maintenance function.

Registration fees have been benchmarked at a level adequate to meet the Board's obligations under the legislative scheme for health practitioner regulation. The fees are reviewed and adjusted annually in line with CPI movement. CPI increases of registration fees were approved in April 2011.

The Board conducts its operational activities in a manner calculated to minimize its costs and risks in relation to its liabilities and contingent liabilities. The internal auditors have reported their satisfaction that the current internal controls and systems are acceptable for the size and nature of the Board's operations and that there is a high level of compliance with Board internal controls, policies, procedures and statutory requirements.

Budget summary

The Medical Radiation Technologists Board of Queensland returned a surplus for 2010-11 financial year. It should be noted a refund in the amount of \$150,000 will be paid in the next period; these savings were derived from below budgeted costs expended within the Service Agreement budget. However, most importantly the Board's net equity has increased to approx \$1.98m.

The budget performed well in most areas, with a final result where revenue decreased by 10% primarily due to the stabilisation of the qualified workforce. However greater returns from investments increased the Board's overall revenue for the 2010-2011 financial year. Also:

- fee income revenue decreased by approximately 16%;
- budgeted investment revenue increased by approximately 88% after the market staged a further recovery from returns of the previous year; and
- cash investments yielded an average return of 4.0% and managed cash fund investments achieved an average return of 5.48%, out-performing the benchmark as a result of QTC's active management, where returns are expected to remain relatively steady.

Overall Board expenditure was 23% below budget, a good result where savings were achieved throughout all areas primarily due to the conservative expenditure approach by the Board; for example the Board only awarded grants



to the value of approximately \$40 000 and investigation expenses were well below budget with savings of approximately 52%.

There are no inherent weaknesses in the financials and all current liabilities are fully funded. Given the decrease

in revenue and greater decrease in expenditure; the financials reflect a sound financial position.

Please note: minor variations may be applicable, as preparation of this information was compiled prior to the completion of the 2011 external audit.

Medical Radiation Technologists Board of Queensland Budget Summary of 2010/2011			
Description	Actual 10-11	Budget 10-11	Variance
Operating Income			
Fee Income	911,317	1,092,496	-16.15%
Interest Income	105,917	50,909	108.05%
Legal Cost Recoveries	6,000	-	100.00%
Sundry Income	30	2,460	-98.00%
Total Operating Income	1,023,263	1,145,864	-10.69%
Expenditure			
Board Related Expenditure			
Admin Expenses	70,021	101,724	-31.17%
Board Member Expenses	71,448	79,373	-9.99%
Conference Expenses - Board	3,070	3,960	-22.50%
Conference Expenses - Staff	1,594	3,785	-57.89%
Staff Expenses	1,911	2,123	-9.98%
Function Costs	8,624	9,086	-5.08%
Grants	39,909	53,820	-25.85%
Health Assessment Expenses	-	1,153	-100.00%
Investigation Expenses	3,434	7,209	-52.36%
Legal Expenses	14,190	16,375	-13.34%
Total Board Related Expenditure	214,201	278,609	-23.12%
Service Agreement Expenditure			
Non-Salaries S/A	114,207	164,086	-30.40%
Salaries S/A	498,171	561,365	-11.26%
Service Agreement	612,378	725,451	-15.59%
Total Service Agreement Expenditure	612,378	725,451	-15.59%
Total Operating Expenditure	826,579	1,004,060	-17.68%
Operating Surplus (Deficit)	196,684	141,804	38.77%

Fees

The Board's activities are primarily funded through fees payable by registrants in relation to registration. Such fees are exempt from the Goods and Services Tax (GST) under

the provisions of Division 81 of the *A New Tax System (Goods and Services Tax) Act 1999*.

As at 30 June 2011, the fees were prescribed under the *Medical Radiation Technologists Registration Regulation 2002* as follows:

Fee type	Amount (\$)
1 Application fee for general registration or special purpose registration for:	
(a) less than five weeks	nil
(b) more than five weeks	118.00
2 Registration fee for general registration or special purpose registration:	
(a) for a period of registration of less than 5 weeks	nil
(a) for a period of registration of more than 5 weeks but not more than 3 months	77.00
(b) for a period of registration of more than 3 months but not more than 6 months	154.00
(c) for a period of registration of more than 6 months but not more than 1 year	307.00
3 Restoration fee	382.00
4 Application for review of conditions	118.00
5 Replacement of certificate of registration	30.00
6 Certified copy of certificate of registration	30.00
7 Copy of the register or part of it - for each page	0.50

Governance – management and structure

Membership of the Board

Membership of the Board during 2010-11 constituted the following members appointed in accordance with the membership categories specified in section 15 of the Registration Act.

Registrant members

John Andersen	Assoc Dip (Medical Radiography) RMIT, Dip App Sc (Medical Imaging Technology), Grad Cert Mgnt, MIR [Chairperson]
Nicole Eastgate	B App Sc (MRT), MIR
Dominic Kennedy	B App Sc (MRT), MIR [Deputy Chairperson]
Wayne Nuss	Dip App Sc, Grad Dip Mgnt, FIR
Amy Illidge	M App Sc (Radiation Therapy), MIR
Assoc. Prof. Pamela Rowntree	Dip App Sc (Diagnostic Radiography), Grad Dip Ed, FIR
Melinda Wilson	B MedRadSc (Nuclear Medicine), Grad Cert App Management (Public Health)

Public members

Tracey Lloyd	BA (Criminology & Criminal Justice), Grad Cert Health Promotion
Dr Virginia Thorley OAM	PhD, IBCLC, FILCA

Lawyer

Lisa O'Neill	LLB (QUT), Grad Cert Business Admin (QUT)
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The Board members' current term of appointment expires on 10 April 2014.

During 2010-11 the memberships of the Board's committees were as follows:

Supervised Practice Program Committee (seven meetings)

Mr John Andersen (ex-officio)
Mr Tim Way

Mr Nick Biesot
Ms Carole Brady
Mr James Abbott
Ms Debbie Starkey
Mr Dominic Kennedy (Chair)
Ms Linda Jane Michel

AIR/MRT Combined Committee* (one meeting)

Mr Tim Way (Chair)
Ms Debbie Starkey
Mr Nick Biesot

Ms Anne Connell
Ms Jenny Kindt
Ms Allison Dry

* this committee ceased in December 2010

Registration Committee (11 meetings)

Ms Amy Illidge (Chair)
Ms Nicole Eastgate

Associate Professor Pam Rowntree (Assessment of Overseas Qualifications)

Research and Awards Committee (two meetings)

Associate Professor Pam Rowntree (Chair)

Ms Lisa O'Neil
Ms Melinda Wilson
Ms Amy Illidge
Ms Nicole Eastgate

In addition to Board and committee meetings, Board member Mr Wayne Nuss attended:

- a National Boards' workshop on 22-3 July 2010;
- a Conference of Regulating Authorities meeting on 13 September 2010; and
- National Steering Committee meetings on 7-8 October 2010, 6-7 December 2010 (together with a CORA meeting), 10-11 February 2011 and 18 April 2011,

Deputy Chair Mr Dominic Kennedy attended:

- the National Steering Committee meeting and CORA meeting on 10-11 February 2011,

Chair Mr John Andersen and Board member Ms Virginia Thorley attended:



- a NRAS forum on 14 March 2011, and Board member Ms Nicole Eastgate together with practitioners Ms Carole Brady and Ms Allison Dry attended;
- a supervisors' workshop planning meeting on 30 June 2011.

Administrative structure

Administrative and operational support for the Board's day to day operations is provided by the Office under a service agreement between the Board and the Office. The Board is one of four health practitioner registration Boards receiving such support from the Office, which is constituted under the *Health Practitioner Registration Boards (Administration) Act 1999*. The Office has a permanent staff establishment of 12.6 full-time equivalent positions (as at 30 June 2011) and a variable number of temporary positions.

Members of the staff of the Office with primary responsibilities for the administrative tasks of the Board as at 30 June 2011 were:

Executive Officer	Mr Michael Demy-Geroe
Professional Adviser	Ms Francesca Holloway
Program Manager – Registration and Professional Standards	Mr Kim Hudson
Registration & Assessment Officer	Ms Angeline Lim
Registration Officer	Ms Hildred Haworth
Administration & Assessment Officer	Ms Amy Werner

Other Office staff support the Board with services in human resource management, financial management, information technology, counter enquiries, records management, investigation of complaints about registrants, health assessment and monitoring of impaired practitioners and general administrative assistance.

The Professional Adviser (Medical Radiation Technology), who is a registered medical radiation technologist (medical imaging), provides advice and assistance to the Board and registrants in relation to registration, supervision and related issues.

Further information regarding the interrelationship between the Board and the Office is provided in the Office annual report.

Access

The Office of the Board is located at

Level 19
179 Turbot Street
Brisbane
QLD 4000

Correspondence to the Board should be addressed to:

The Executive Officer
Medical Radiation Technologists Board of Queensland
GPO Box 2438
BRISBANE QLD 4001

Board communication links are:

Telephone: (07) 3225 2509
Facsimile: (07) 3225 2527
E-mail: mrt@healthregboards.qld.gov.au
Website: www.mrtboard.qld.gov.au

Copies of this annual report and the annual report of the Office are accessible to members of the public at the Office and on the websites of the Board and Office.

Service agreement

During 2010-11, the Board continued to receive services under its service agreement with the Office of Health Practitioner Registration Boards. A new service agreement for the Board extending from 1 July 2010 to 30 June 2012 was endorsed by the Board and Office.

Strategic plan

During 2010-11, the Board, as required by its current strategic plan, continued preparatory works for the introduction of national registration. These activities are set out in detail in the "National registration and accreditation" section above.

Board Code of Conduct

Amendments to the *Public Sector Ethics Act 1994*, under the government's integrity and accountability reform program, took effect on 1 November, 2010. Under these changes a new Code of Conduct has been initiated from January 1, 2011.

The impact of the changes on Boards was examined within Office, and the Office of the Public Service Commissioner was notified that all Boards, as statutory authorities, wished to be included by regulation in the new single public service Code of Conduct.

All four Boards have adopted the whole of government Code and currently act under it.

Any new Board members initiated are required to read the code and adhere to it.

A copy of the whole of government code can be found on the Board's website.

Whistleblowers Protection Act 1994 and Public Interest Disclosure Act 2010

No public interest disclosures were received by the Board during the reporting year under the WPA Act.

With the repeal of the *Whistleblowers Protection Act 1994* and the introduction of the *Public Interest Disclosure Act 2010* (PID Act) on 1 January 2011, the way in which public interest disclosures are to be publically reported has changed. From 1 January 2011 agencies are no longer required to report public interest disclosures in annual reports.

Under section 61 of the PID Act, the Public Service Commission (PSC) is now responsible for the oversight of public interest disclosures and preparing an annual report on the operation of the PID Act. From 1 January 2011 agencies are required to report information about public interest disclosures to the PSC. The PSC will prepare an annual report on the operations of the PID Act and the information provided by agencies. The annual report will be made publicly available after the end of each financial year.

Governance – risk management and accountability

Risk Management

The Board's risk management is assessed and dealt with under the Office's *Office Risk Management Policy and Procedure Manual* which was revised in April 2011 with a view to better integration of risk management into the Office's decision making, planning and service delivery. Under this the Office is committed to:

- protecting employees, contactors, customers, the Boards, the community, the environment and its property from loss, injury or damage;
- achieving its objectives with minimal risks of adverse impacts; and
- ensuring the aggregate benefits/costs of its risk exposures are optimum.

Under the Manual the Office will:

- identify and manage all risks associated with its activities;
- quantify foreseeable risks;
- transfer foreseeable risk wherever possible; and/or
- eliminate or manage foreseeable risks.

A disaster recovery and business continuity plan is also in place which clearly defines procedures and responsibilities to ensure the Office is able to withstand unforeseen events. Risk management is a standing item on the Office's Management and Finance Committee agendas. The Policy and the risk register are reviewed on a six monthly basis. Under the Office's risk management framework an office-wide risk management culture has been introduced. The policy guides and encourages all staff to implement sound risk management practices aimed at eliminating or minimizing potential loss in all of our operational, technical, financial, commercial and administrative activities.

Agreement for support services, financial oversight & internal audit

As required under the *Health Practitioner Boards (Administration) Act 1999*, the Board and the Executive Officer entered into a Service Agreement which required the parties to work together and support the development of the most efficient and cost effective mechanism to deliver administrative and operational support .

Under the Agreement, the Office was obligated to: (a) ensure statutory compliance; (b) achieve appropriate quality standards in service delivery; (c) ensure staff were properly trained; and (d) pursue alternative service delivery options where appropriate in order to meet the Board's needs.

The Agreement contained accountability and governance measures which enabled the Board to monitor performance. The Executive Officer was required to provide a financial statement on a monthly basis to the Board as soon as possible after the end of each month itemising moneys collected, managed and disbursed under that part of the Budget entitled Service Agreement Related Expenses. The statement provided details of expenditure in each cost category showing expenditure in the past month, the year to date, and variance from estimates.

Additionally, the Executive Officer provided a performance report to the Board for each six month period. The report included: (a) Office achievement against operational objectives; (b) actual performance in delivery against agreed performance standards; (c) progress on special projects; (d) variances; (e) major events or breakdowns; (f) non-compliance of the Board or the Office with their obligations set out in the Agreement; and (g) other issues for discussion.

The Office contracts Crowe Horwath to conduct internal audits of the Board's accounts. On 20 May 2011 Crowe Horwath advised that they had completed their interim audit interim testing for the year ended 30 June 2011 and that there were no significant issues that came to their attention during the course of their planning and interim audit.

Governance – human resources

Human resources

All members of the Board are appointed by the Governor-in-Council, and the Board does not employ any staff directly, all administrative, human resources, record keeping, information systems and financial services of the Board are provided by the Office under a service agreement.

As the Board does not directly employ staff it does not have internal human resource policies for the purposes of the *Carers (Recognition) Act 2008*. The 2010-11



annual report of the Office sets out how it dealt with the requirements of this Act when providing services to the Board under the service agreement.

Seven (70%) of the ten current members of the Board are women.

Governance - operations

Overseas travel

During 2010-11, no overseas travel was undertaken.

Consultancies

The Board did not engage any consultants during 2010-11 and consequently had no expenditure on consultancies for the year.

Information systems and recordkeeping

Consistent with the *Public Records Act 2002*, *Information Standard 40: Recordkeeping* and *Information Standard 31: Retention and Disposal of Public Records*, the Office has adopted the following policies:

- *Vital Records Policy*, which provides a quick reference guide, consistent with the stages of information, for the management control of vital records within the Office, and provide definitions for vital, important and routine records. In addition, issues of corporate responsibility and “best practice” for the various stages of information management are also provided;
- *Records Management Policy*, which aims to:
 - > foster an organisational culture that recognises the strategic importance and the enduring value of records as critical assets of the organisation, essential to facilitate the provision of administrative, operational support and meet business, legislative and accountability requirements; and
 - > to develop, implement and maintain standardised recordkeeping practices that promote the sharing of knowledge and support evidence-based decision making to deliver high quality administrative services; and
- *Managing Emails – Public Records Policy and Procedure*, which advises all staff of the Office and Board members of their obligations in relation to managing emails that are public records.

In addition, the Office has implemented the TRIM electronic document and records management system to provide for the long-term retention of information. All staff have been trained in the operation of TRIM and trained in the Office’s *Data Entry Standards (TRIM) Policy*.

Other information

Statement of Reasons: Judicial Review Act 1991

Under section 32 of the *Judicial Review Act 1991*, a person who is aggrieved by an administrative decision is entitled to request from the decision maker a written Statement of Reasons in relation to the decision. The Board did not receive any such requests during 2010-11.

Right to information & information privacy

The *Right to Information Act 2009* (RTI Act) gives the community a right to apply for access to documents held by government agencies, including the Board. The *Information Privacy Act 2009* (IP Act) is related to the RTI Act as it also allows individuals to apply for access or amendment to documents, but only if the documents contain their own personal information.

During 2010-11, the Board received no applications under the RTI Act and no applications under the IP Act for access to documents. There were no applications for amendment of personal information. Also, no applications under either Act were carried over from 2009-10.

The following publications are available for inspection and copies may be obtained free of charge:

- current annual report of the Board (including statement of affairs); and
- current bulletins and circulars published by the Board.

The current policy documents of the Board are available for inspection on the Internet and copies may be downloaded (see “Publication scheme” details below).

It should be noted, however, that pursuant to section 20(2) of the *Right to Information Act 2009* the Board may delete exempt matter from a copy of any policy document.

The Board does not have any literature available to the public for which a regular subscription is payable or by way of free mailing lists.

Arrangements to obtain access to documents held by the Board

Free of charge documents

These documents may be obtained by written request to the Board. Alternatively, these documents can be inspected at the address of the Office of Health Practitioner Registration Boards at the address shown under “Access” earlier in this report.

If inspection is sought, advance notice must be given so as to arrange a suitable time for the inspection.

Policy documents

Copies of the Board’s policy documents may be inspected and/or obtained by either a written or telephone request, or by accessing the Board’s website.

Other documents

The accessibility of other documents held by the Board is subject to the privacy principles. However, the *Right to Information Act 2009* and the *Information Privacy Act 2009* give the community a right of access to documents held by government agencies.

Further details about making an application under the RTI and IP Acts are available on the Office website at www.healthregboards.qld.gov.au. Enquiries can be directed to the Office at the address shown under "Access" earlier in this report.

The Board's publication scheme during 2010-11 included:

Policies and guidelines:

- Research
 - > *Application for published article;*
 - > *Award for published article;*
 - > *Research grants application form;*
 - > *Research grants guidelines;*
 - > *Research grants implementation grant application form;*
 - > *Research grants policy;*
 - > *Research grants research agreement;*
 - > *Research grants scholarship application form;*
- Codes of Conduct
 - > *Australian Institute of Radiography (AIR) Guidelines for professional conduct for radiographers, radiation therapists and sonographers (Board endorsed);*
 - > *Code of Conduct for Board members;*
- Policies
 - > *English language proficiency;*
 - > *Registration policy;*
 - > *Review of registration conditions;*
- Supervised practice program
 - > *Supervisor professional practice setting notification form (form 501A);*
 - > *Supervised practice program 24 week progress report (form 601A) for medical imaging technology;*
 - > *Supervised practice program 24 week progress report (form 601B) for nuclear medicine technology;*
 - > *Supervised practice program 24 week progress report (form 601C) for radiation therapy;*
- application policies:
 - > *Certificates of Registration Status;*
 - > *Incomplete applications;*
 - > *Proof of identity;*
 - > *Reference requirements;*
 - > *Translation of documents; and*
 - > *Witnessing and certifying documents;*

- criminal history checking:
 - > *Criminal history checking overview;*
 - > *Criminal history checking – Applicant policy;*
 - > *Criminal history checking – Board policy;*
 - > *criminal history FAQs;*
- management documents:
 - > *Strategic Plan 2007-11; and*
 - > *Strategic Plan 2003-7;*
- annual reports: 2004-05 to 2009-10; and
- Board newsletters: September 2002 to December 2010.



Financial report for the year ended 30 June 2011

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Board of Queensland

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THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2011

	NOTE	2011 \$	2010 \$
Revenue			
Registration and other fees	2	911,113	841,731
Interest revenue		105,917	64,196
Other revenue		6,234	56
Total Revenue		1,023,264	905,983
Expenses			
Administration expenses	3	194,041	174,320
Service agreement expenditure	4	612,039	516,502
Grants - Seminars and education		20,160	5,000
Queensland Health - Surplus employee payment		-	79,624
Total Expenses		826,239	775,446
Profit / (Loss) for the Year		197,024	130,537
Other comprehensive income		-	-
Total Comprehensive Income		197,024	130,537



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2011

	NOTE	2011 \$	2010 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	5	1,900,003	1,850,997
Trade and other receivables	6	159,719	-
Other current assets	7	1,425	550
TOTAL CURRENT ASSETS		<u>2,061,147</u>	<u>1,851,547</u>
TOTAL ASSETS		<u>2,061,147</u>	<u>1,851,547</u>
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	8	<u>16,417</u>	<u>3,841</u>
TOTAL CURRENT LIABILITIES		<u>16,417</u>	<u>3,841</u>
TOTAL LIABILITIES		<u>16,417</u>	<u>3,841</u>
NET ASSETS		<u>2,044,730</u>	<u>1,847,706</u>
EQUITY			
Accumulated surplus / (deficit)		<u>2,044,730</u>	<u>1,847,706</u>
TOTAL EQUITY		<u>2,044,730</u>	<u>1,847,706</u>



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2011

	2011 \$	2010 \$
BALANCE AT BEGINNING OF THE YEAR	1,847,706	1,717,169
Operating results from continuing operations	<u>197,024</u>	<u>130,537</u>
BALANCE AT END OF THE YEAR	<u><u>2,044,730</u></u>	<u><u>1,847,706</u></u>



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2011

	NOTE	2011 \$	2010 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
<i>Inflows</i>			
Receipts from customers		758,029	914,756
Interest received		105,691	64,196
GST collected from customers		94,468	68,083
		<u>958,188</u>	<u>1,047,035</u>
<i>Outflows</i>			
Supplies and services		(909,007)	(852,290)
GST paid to suppliers		(175)	(12,841)
		<u>(909,182)</u>	<u>(865,131)</u>
NET CASH AND CASH EQUIVALENTS FROM OPERATING ACTIVITIES	13	<u>49,006</u>	<u>181,904</u>
Net increase / (decrease) in cash and cash equivalents held		49,006	181,904
Cash and cash equivalents at the beginning of the financial year		1,850,997	1,669,093
CASH AND CASH EQUIVALENTS AT THE END OF THE FINANCIAL YEAR	14	<u><u>1,900,003</u></u>	<u><u>1,850,997</u></u>



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

OBJECTIVES OF THE BOARD

The Medical Radiation Technologists Board of Queensland is constituted under Section 9 of the *Medical Radiation Technologists Registration Act 2001* as a body corporate with perpetual succession. The Board is subject to the provisions of the *Health Practitioner Registration Boards (Administration) Act 1999*, the *Health Practitioners (Professional Standards) Act 1999*, the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*.

The principal objectives of the Board are to protect the public by ensuring health care is delivered by registered practitioners in a professional, safe and competent way, uphold standards of practice within the profession, and maintain public confidence in the profession.

NOTE 1 SIGNIFICANT ACCOUNTING POLICIES

(a) Statement of compliance

The financial report is a general purpose financial report that has been prepared in accordance with the *Financial Accountability Act 2009*, the *Financial and Performance Management Standard 2009* and Australian Accounting Standards (including Australian Interpretations).

The financial report has been prepared on a going concern basis, under the historical cost convention except where specifically stated. Unless specifically stated, the accounting policies adopted are consistent with those of the previous year.

The accounting policies set out below have been consistently applied to all years presented.

(b) Revenue recognition

Registration and other fees

Revenue from annual registration fees and other fees are recognised on receipt. Application fees and registration fees are levied in accordance with the *Medical Radiation Technologists Registration Regulation 2002*. Under this legislation, the registration period finishes at 30 June each year. Registrants who do not renew their registration are removed from the Board's register.

Interest revenue

Interest revenue is recognised on a time proportionate basis that takes into account the effective yield on the financial asset.

Grant revenue

Grants that are non-reciprocal in nature are recognised as revenue in the year in which the Board obtains control over them.

(c) Employee benefits

Employee benefits are recognised in the Office of Health Practitioner Registration Boards (OHPRB) financial statements. The Board receives all administrative and operational support from the OHPRB and pays for this support on a bi-annual basis. The Medical Radiation Technologists Board of Queensland has no employees.

(d) Accommodation

The Board is located in premises rented by the OHPRB from AHPRA (Australian Health Practitioners Regulation Agency). Accommodation costs are paid by the OHPRB and reimbursed by the Board through a service agreement.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 1 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Cash and cash equivalents

For financial reporting purposes, cash includes all cash at bank, on hand and deposits at call with financial institutions.

(f) Trade and other receivables

Trade and other receivables are recognised at the amount due at the time of service delivery. The terms of trade are 30 days from the date of invoice. Collectability of debtors is reviewed on an ongoing basis. A provision for impairment is raised where doubt as to collection exists. Debts which are known to be uncollectable are written off.

(g) Acquisition of assets

All asset acquisitions are recorded at cost. Cost is determined as the value given as consideration plus costs incidental to the acquisition, including all other costs incurred in getting the assets ready for use. The carrying amounts of all non-current assets are reviewed at least annually and are not stated at amounts in excess of their recoverable amount.

(h) Trade and other payables

Trade and other payables are recognised liabilities for goods and services provided to the Board prior to the end of the financial year and which are unpaid. The amounts are non-interest bearing, unsecured and are normally paid within 30 days of recognition.

(i) Taxation

The activities of the Board are exempt from Commonwealth taxation except for Fringe Benefits Tax (FBT) and Goods and Services Tax (GST). GST credits receivable from and GST payable to the Australian Taxation Office are recognised.

(j) Insurance

The Board has a WorkCover insurance policy for workers' compensation and Directors and Officers liability insurance for the Board Members.

(k) Goods and services tax

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Statement of Financial Position are shown inclusive of GST.

(l) Rounding and comparatives

Amounts included in the financial statements are in Australian dollars and have been rounded to the nearest dollar. Where required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 1 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(m) Judgements

The Board has made no estimates, assumptions or judgements which may cause material adjustments to the carrying amounts of assets and liabilities within the next reporting period.

(n) Issuance of financial statements

The financial statements are authorised for issue by the Chairperson and the Executive Officer at the date of signing the Management Certificate.

(o) Financial instruments

The Board does not enter into transactions for speculative purposes, nor for hedging. Apart from cash and cash equivalents, the Board holds no financial assets classified at fair value through profit and loss. All other disclosures relating to the measurement and financial risk management of financial instruments held by the Board are included in Note 20.

(p) Adoption of New and Revised Accounting Policies

The following new standards and amendments to standards are mandatory for the first time for the financial year beginning 1 July 2010:

- AASB 2009-5 Further Amendments to Australian Accounting Standards arising from the Annual Improvements Project (applies to annual reporting periods beginning on or after 1 January 2010)
- AASB 2010-3 Amendments to Australian Accounting Standards arising from the Annual Improvements Project. (applies to annual reporting periods beginning on or after 1 July 2010)

The adoption of these standards did not have any impact on the current period or any prior period and is not likely to affect future periods.

<u>NOTE 2 REGISTRATION & OTHER FEES</u>	2011	2010
	\$	\$
Annual registration fees	871,584	787,435
Restoration fees	2,984	23,424
Application fees	36,545	30,872
	<u>911,113</u>	<u>841,731</u>

NOTE 3 ADMINISTRATION EXPENSES

General operating expenses	89,770	75,443
Board member expenses	71,448	70,368
Conference expenses - Board	3,070	3,058
Conference expenses - Staff	3,505	3,699
Function costs	8,624	4,703
Investigation expenses	1,546	665
Legal expenses	16,078	16,384
	<u>194,041</u>	<u>174,320</u>

THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 4 SERVICE AGREEMENT EXPENDITURE

	2011	2010
	\$	\$
Service agreement - Salaries	498,171	410,219
Service agreement - Non-salaries	113,868	106,283
	<u>612,039</u>	<u>516,502</u>

NOTE 5 CASH AND CASH EQUIVALENTS

Cash at bank and on hand	60,207	1,850,997
At call deposits	1,839,796	-
	<u>1,900,003</u>	<u>1,850,997</u>

NOTE 6 TRADE AND OTHER RECEIVABLES

Trade Debtors	5,300	-
Other debtors	154,193	-
Accrued Interest	226	-
	<u>159,719</u>	<u>-</u>

NOTE 7 OTHER CURRENT ASSETS

Prepayments	<u>1,425</u>	<u>550</u>
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NOTE 8 TRADE AND OTHER PAYABLES

Trade creditors	5,110	3,841
GST Payable	11,307	-
	<u>16,417</u>	<u>3,841</u>

NOTE 9 KEY MANAGEMENT PERSONNEL COMPENSATION

Names of Board Members who have held office during the financial year are:

John Andersen	Nicole Eastgate
Amy Illidge	Tracey Lloyd
Dominic Kennedy	Lisa O'Neill
Wayne Nuss	Virginia Thorley
Pamela Rowntree	Melinda Wilson



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 9 KEY MANAGEMENT PERSONNEL COMPENSATION (CONTINUED)

Remuneration of key management personnel for year ended 30 June 2011

Key management personnel comprise the members of the Board whom have authority and responsibility for planning, directing and controlling the activities of the Board. The remuneration paid to the Board Members are in the nature of short-term employee benefits and consist of meeting fees which are set by Governor in Council. In addition, Board Members may be reimbursed travel and accommodation costs incurred in the course of their duties as members of the Board.

Total short-term employee benefits paid to all Board Members during the year was \$56,290 (2010: \$47,556). No other benefits were paid to or accrued by Board Members.

Transactions with Board Members as Registrants

The Board Members who are Registrants, paid registration fees to the Board which are within normal Registrants' relationships, on terms and conditions no more favourable than those which it is reasonable to expect would have been adopted if dealing with the Board Member at arm's length, in the same circumstances.

NOTE 10 COMMITMENTS

The Board had no commitments of a significant nature at 30 June 2011.

NOTE 11 CONTINGENT ASSETS

The contingent asset amount is based on estimates by the Board's legal advisers of what would be receivable if the Board, as plaintiff, were to be successful in matters before the Health Practitioners Tribunal and have the Board's costs reimbursed by the defendant. As at 30 June 2011, the Board had no potential contingent assets.

NOTE 12 CONTINGENT LIABILITIES

Part of the normal business of the Board involves engaging in legal proceedings which, if unsuccessful, may result in costs being awarded against the Board. The members of the Board believe there are no such matters which are likely to result in a liability of the Board.

<u>NOTE 13 RECONCILIATION OF OPERATING ACTIVITIES</u>	2011	2010
	\$	\$
Reconciliation of Net surplus / (deficit) to net cash provided by operating activities:		
Net surplus / (deficit)	197,024	130,537
Change in assets and liabilities		
(Increase) / Decrease in receivables	(159,719)	62,663
(Increase) / Decrease in prepayments	(875)	1,352
Increase / (Decrease) in payables	<u>12,576</u>	<u>(12,648)</u>
Net cash (used) / provided by operating activities	<u>49,006</u>	<u>181,904</u>

THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

<u>NOTE 14 RECONCILIATION OF CASH AND CASH EQUIVALENTS</u>	2011	2010
	\$	\$
For the purpose of the Statement of Cash Flows, the Board considers cash to include cash on hand and at bank, and liquid investments. Cash at the end of the reporting period is reconciled to the related items in the Statement of Financial Position as follows:		
Cash at bank	60,207	1,850,997
At call deposits	1,839,796	-
	<u>1,900,003</u>	<u>1,850,997</u>

NOTE 15 RELATED PARTY TRANSACTIONS

The Board paid expenses related to a service agreement with OHPRB amounting to \$612,039 (2010: \$516,502).

NOTE 16 CORPORATE INFORMATION

Principal Place of Business and Registered Office until 30 June 2011:
Floor 19, 179 Turbot Street, Brisbane QLD 4000

No of Employees: 2011: Nil (2010: Nil).

NOTE 17 AUDITOR'S REMUNERATION

The auditor's remuneration is not directly paid by the Board. Remuneration is paid through a service level agreement with OHPRB (the service provider). For details of auditor's remuneration for the year ended 30 June 2011 refer to OHPRB's Financial Statements.

NOTE 18 NEW AND REVISED ACCOUNTING STANDARDS

Certain new accounting standards and interpretations have been published that are not mandatory for 30 June 2011 reporting periods. The Board has decided against early adoption of these standards. The Board's assessment of the impact of these new standards and interpretations is set out below:

AASB 2010-4 Further Amendments to Australian Accounting Standards arising from the Annual Improvements Project (applies to annual reporting periods beginning on or after 1 January 2011)

- These amendments are a consequence of the annual improvements project.
- These amendments result from proposals that were included in Exposure Draft ED 188 Improvements to IFRSs published in September 2009 and in ED 185 Rate-regulated Activities published in July 2009, and follow the issuance of the IASB Standard Improvements to IFRSs in May 2010. The amendment resulting from ED 185 provides only an exemption in AASB 1 for first-time adopters with operations subject to rate regulation.
- The annual improvements project provides a vehicle for making non-urgent but necessary amendments to Standards.

Revised AASB 124 Related Party Disclosures and AASB 2009-12 Amendments to Australian Accounting Standards (effective from 1 January 2011)

- The amendment removes the requirement for government-related entities to disclose details of all transactions with the government and other government-related entities and clarifies and simplifies the definition of a related party. The amendment must be applied retrospectively.

The revised standard(s) and amendments are not expected to have a significant impact on the Board.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 19 FINANCIAL INSTRUMENTS

The main risks arising from the Board's financial instruments are interest rate risk, credit risk and liquidity risk. The Board uses different methods to measure different types of risk to which it is exposed. These methods include sensitivity analysis in the case of interest rate risks and ageing analysis for credit risk. The Board reviews and approves policies for managing each of these risks to maintain a consistent level of quality across the Board which includes the minimisation of risk. The policies for managing each of the Board's risks are summarised below and remain unchanged from the prior year.

The Board holds the following financial instruments:

	2011 \$	2010 \$
Financial assets		
Cash and cash equivalents	1,900,003	1,850,997
Trade and other receivables	159,719	-
	<u>2,059,722</u>	<u>1,850,997</u>
Financial liabilities		
Trade and other payables	<u>16,417</u>	<u>3,841</u>

Credit risk

Credit risk is the risk of financial loss to the Board if a member or counterparty to a financial instrument fails to meet its contractual obligations, and arises principally from the Board's receivables from members.

The maximum exposure to credit risk at the reporting date is the carrying amount of the financial assets as summarised above.

Management has a credit policy in place and the exposure to credit risk is monitored on an ongoing basis. Credit evaluations are performed on all members requiring credit over a certain amount. The Board does not require collateral in respect of financial assets. Investments are allowed only in liquid securities and only with counterparties that have a credit rating equal to or better than an approved rating. There are no significant concentrations of credit risk within the Board.

The ageing of the Board's trade and other receivables at the reporting date was:

	2011 \$ Gross	2010 \$ Gross
Not past due (current)	159,719	-
Past due (30 day ageing)	-	-
Past due (31 - 60 day ageing)	-	-
Past due (60+ day ageing)	-	-
	<u>159,719</u>	<u>-</u>

Based on historic default rates, the Board believes that no impairment allowance is necessary in respect of receivables not past due or past due by up to 60 days. For those receivables outstanding more than 60 days each debtor has been individually analysed and a provision for impairment established accordingly as necessary.

THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 19 FINANCIAL INSTRUMENTS (CONTINUED)

Liquidity risk

Liquidity risk is the risk that the Board will not be able to meet its financial obligations as they fall due. Prudent liquidity risk management implies maintaining sufficient cash and marketable securities and the availability of funding through an adequate amount of committed credit facilities. Due to the dynamic nature of the underlying businesses, the Board aims to maintain flexibility in funding by keeping sufficient committed credit lines available to meet the Board's requirements.

The following are the contractual maturities of financial liabilities, including estimated interest payments and excluding the impact of netting agreements:

30 June 2011	Carrying amount \$	Contractual cash flows \$	Less than 1 year \$	1 - 5 years \$	Over 5 years \$
Non-derivative financial liabilities					
Trade and other payables	16,417	16,417	16,417	-	-
30 June 2010					
	Carrying amount \$	Contractual cash flows \$	Less than 1 year \$	1 - 5 years \$	Over 5 years \$
Non-derivative financial liabilities					
Trade and other payables	3,841	3,841	3,841	-	-

Market risk

(a) Foreign exchange risk

Foreign exchange risk arises when future commercial transactions and recognised assets and liabilities are denominated in a currency that is not the entity's functional currency. The Board is not exposed to foreign exchange risk.

(b) Interest rate risk

The Board manages its exposure to interest rate fluctuation by continuously monitoring its debt and interest cover ratio to ensure any significant movement would not have a material impact on the performance of the Board. The Board does not engage in any significant transactions which are of a speculative nature.

At the reporting date the interest rate profile of the Board's interest-bearing financial instruments was:

Board

	30 June 2011		30 June 2010	
	Effective interest rate	Balance \$	Effective interest rate	Balance \$
Variable rate instruments				
Cash assets	5.30%	<u>1,900,003</u>	1.02%	<u>1,850,997</u>

Interest rate sensitivity

The Board has quantified the impact on the 30 June 2011 and 30 June 2010 of a +/-50 basis points change in interest rates and determined that there would be no material impact on the surplus for those years.

Fair values

The carrying values of financial assets and liabilities are assumed to approximate their fair values due to their relatively short-term nature.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2011

NOTE 20 EVENTS OCCURRING AFTER BALANCE DATE

On 26 March 2008 the Council of Australian Governments executed an intergovernmental agreement to establish a single national scheme encompassing the registration and accreditation functions for a number of health professions including Medical Radiation Technologists.

As per the transitional arrangements in the Health Legislation (Health Practitioner Regulation National Law) Amendment Act 2010, section 250 (b), the Medical Radiation Technologist Board of Qld will transition to the Medical Radiation Technologist Practice Board of Australia from 1 July 2012, which will be the regulatory body responsible for Medical Radiation Technologists in Australia. The Australian Health Practitioner Regulation Agency (AHPRA) manages the registration and accreditation processes on behalf of the various health practitioner boards. AHPRA's operations are governed by the *Health Practitioner Regulation National Law Act 2009*, which came into effect on July 2010.

At the date of this report the proposed administrative arrangements, including the transfer of assets and liabilities, have not been fully determined.



THE MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

CERTIFICATE OF MEDICAL RADIATION TECHNOLOGISTS BOARD OF QUEENSLAND

This general purpose financial report has been prepared pursuant to section 62(1)(a) of the *Financial Accountability Act 2009* (the Act), and other prescribed requirements. In accordance with section 62(1)(b) of the Act we certify that in our opinion:

- 1 (a) the prescribed requirements for establishing and keeping the accounts have been complied with in all material respects; and
- (b) the statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, of the transactions of the Medical Radiation Technologists Board of Queensland for the financial year ended 30 June 2011, and of the financial position of the Board at the end of the year.
- 2 In the Board's opinion, there are reasonable grounds to believe that the Medical Radiation Technologists Board of Queensland will be able to pay its debts as and when they become due and payable.



Michael Demy-Geroe
Executive Officer

Date: 29/08/11



John Andersen
Chairperson

Date: 29-8-2011



INDEPENDENT AUDITOR'S REPORT

To the Medical Radiation Technologists Board of Queensland

Report on the Financial Report

I have audited the accompanying financial report of the Medical Radiation Technologists Board of Queensland, which comprises the statement of financial position as at 30 June 2011, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and certificates given by the Chairperson and Executive Officer.

The Board's Responsibility for the Financial Report

The Board is responsible for the preparation of the financial report that gives a true and fair view in accordance with prescribed accounting requirements identified in the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*, including compliance with Australian Accounting Standards. The Board's responsibility also includes such internal control as the Board determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on the audit. The audit was conducted in accordance with the *Auditor-General of Queensland Auditing Standards*, which incorporate the Australian Auditing Standards. Those standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance about whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the financial report that gives a true and fair view 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 entity's internal control, other than in expressing an opinion on compliance with prescribed requirements. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Board, as well as evaluating the overall presentation of the financial report including any mandatory financial reporting requirements approved by the Treasurer for application in Queensland.

I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my audit opinion.

Independence

The *Auditor-General Act 2009* promotes the independence of the Auditor-General and all authorised auditors. The Auditor-General is the auditor of all Queensland public sector entities and can only be removed by Parliament.

The Auditor-General may conduct an audit in any way considered appropriate and is not subject to direction by any person about the way in which audit powers are to be exercised. The Auditor-General has for the purposes of conducting an audit, access to all documents and property and can report to Parliament matters which in the Auditor-General's opinion are significant.

Opinion

In accordance with s.40 of the *Auditor-General Act 2009* –

- (a) I have received all the information and explanations which I have required; and
- (b) in my opinion –
 - (i) the prescribed requirements in relation to the establishment and keeping of accounts have been complied with in all material respects; and
 - (ii) the financial report presents a true and fair view, in accordance with the prescribed accounting standards, of the transactions of the Medical Radiation Technologists Board of Queensland for the financial year 1 July 2010 to 30 June 2011 and of the financial position as at the end of that year.

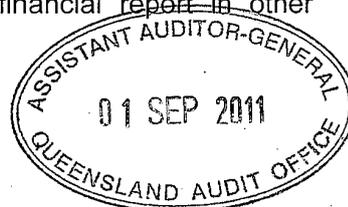
Other Matters - Electronic Presentation of the Audited Financial Report

This auditor's report relates to the financial report of the Medical Radiation Technologists Board of Queensland for the year ended 30 June 2011. Where the financial report is included on the Medical Radiation Technologists Board of Queensland's website the Board is responsible for the integrity of the Medical Radiation Technologists Board of Queensland's website and I have not been engaged to report on the integrity of the Medical Radiation Technologists Board of Queensland's website. The auditor's report refers only to the subject matter described above. It does not provide an opinion on any other information which may have been hyperlinked to/from these statements or otherwise included with the financial report. If users of the financial report are concerned with the inherent risks arising from publication on a website, they are advised to refer to the hard copy of the audited financial report to confirm the information contained in this website version of the financial report.

These matters also relate to the presentation of the audited financial report in other electronic media including CD Rom.



P BRAHMAN CPA
(as Delegate of the Auditor-General of Queensland)

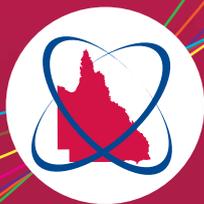


Queensland Audit Office
Brisbane



Notes





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