

# Queensland



## Subordinate Legislation 2002 No. 98

*Cooperatives Act 1997*  
*Medical Radiation Technologists Registration Act 2001*  
*Statutory Bodies Financial Arrangements Act 1982*  
*Transplantation and Anatomy Act 1979*

# MEDICAL RADIATION TECHNOLOGISTS REGISTRATION REGULATION 2002

## TABLE OF PROVISIONS

Section		Page
<b>PART 1—PRELIMINARY</b>		
1	Short title . . . . .	5
2	Commencement . . . . .	5
3	Definitions . . . . .	5
<b>PART 2—REGISTRATION</b>		
4	Qualifications for general registration—Act, s 44. . . . .	5
5	Period of registration—Act, s 56. . . . .	5
6	Notification of change in circumstances—Act, s 134. . . . .	6
<b>PART 3—PROBATIONARY REGISTRANTS</b>		
<i>Division 1—Supervised practice program</i>		
7	What is the supervised practice program—Act, s 61 . . . . .	6
<i>Division 2—Practice of the profession</i>		
8	What is practice of the profession—medical imaging technology— Act, s 61 . . . . .	7
9	What is practice of the profession—nuclear medicine technology— Act, s 61 . . . . .	7
10	What is practice of the profession—radiation therapy—Act, s 61 . . . . .	8
11	Practice of the profession generally— Act, s 61 . . . . .	8

***Division 3—Practice under the supervised practice program***

12	Probationary registrant not to be sole practitioner . . . . .	8
13	Period allowed for completion of the supervised practice program— Act, s 57 . . . . .	8
14	Minimum period for completion of the supervised practice program— Act, s 61 . . . . .	8
15	Probationary registrant to notify board when starting the supervised practice program . . . . .	9
16	Probationary registrant to tell board about change of supervisor . . . . .	9
17	Certain registrants to tell board about change of professional practice setting 10 . . . . .	9
18	Probationary registrants to give board reports . . . . .	10

***Division 4—Competencies***

19	Competencies to be demonstrated for completion of supervised practice program—medical imaging technology—Act, s 61 . . . . .	11
20	Competencies to be demonstrated for completion of supervised practice program—nuclear medicine technology—Act, s 61 . . . . .	11
21	Competencies to be demonstrated for completion of supervised practice program—radiation therapy—Act, s 61 . . . . .	12

***Division 5—Professional practice settings***

***Subdivision 1—General***

22	Section 57(2)(a) registrants to practise only in certain professional practice settings . . . . .	13
----	--	----

***Subdivision 2—Criteria for medical imaging technology profession***

23	Staff at professional practice setting—medical imaging technology . . . . .	13
24	Equipment at professional practice setting—medical imaging technology . . . . .	13
25	Procedures carried out at professional practice setting—medical imaging technology . . . . .	14
26	Access to professional development and research—medical imaging technology . . . . .	14

***Subdivision 3—Criteria for nuclear medicine technology profession***

27	Staff at professional practice setting—nuclear medicine technology . . . . .	15
28	Equipment at professional practice setting—nuclear medicine technology . . . . .	15
29	Quality control procedures—nuclear medicine technology . . . . .	16
30	Procedures carried out at professional practice setting—nuclear medicine technology . . . . .	16

---

31	Access to professional development and research—nuclear medicine technology . . . . .	17
	<b><i>Subdivision 4—Criteria for radiation therapy profession</i></b>	
32	Staff at professional practice setting—radiation therapy . . . . .	18
33	Equipment at professional practice setting—radiation therapy . . . . .	18
34	Procedures carried out at professional practice setting—radiation therapy . . . . .	18
35	Access to professional development and research—radiation therapy . . . . .	19
	<b><i>Subdivision 5—Board may decide about suitability of professional practice settings</i></b>	
36	Suitability show cause notice . . . . .	19
37	Representations about suitability show cause notices . . . . .	20
38	Ending suitability show cause process without further action . . . . .	20
39	Decision about suitability . . . . .	20
	<b><i>Division 6—Supervisors and other persons who supervise probationary registrants</i></b>	
40	Eligibility criteria for supervisors—Act, s 231 . . . . .	21
41	Eligibility criteria for other persons who supervise probationary registrants—Act, s 231 . . . . .	22
42	Declaration show cause notice . . . . .	22
43	Representations about declaration show cause notices . . . . .	23
44	Ending declaration show cause process without further action. . . . .	23
45	Declaration . . . . .	24
46	Notice to probationary registrant. . . . .	24
47	Responsibilities of supervisors and assistant supervisors—Act, s 61 . . . . .	24
48	Reports by persons ceasing to be supervisors—Act, s 62 . . . . .	25
	<b><i>Division 7—General</i></b>	
49	Statement of incomplete supervision . . . . .	25
	<b>PART 4—APPEALS</b>	
50	Who may appeal . . . . .	26
51	Starting appeals . . . . .	26
52	Hearing procedures . . . . .	27
53	Powers of court on appeal . . . . .	27
54	Appointment of assessors . . . . .	28

**PART 5—FEES**

55	Fees .....	28
56	Waiver of fee—financial hardship .....	28
57	Refund of registration fee .....	28
58	Refund of restoration fee .....	29

**PART 6—CONSEQUENTIAL AND OTHER AMENDMENTS**

59	Consequential and other amendments .....	29
----	--	----

	<b>SCHEDULE 1</b> .....	30
--	-------------------------	----

**QUALIFICATIONS FOR GENERAL REGISTRATION**

	<b>PART 1—MEDICAL IMAGING TECHNOLOGY</b> .....	30
--	--	----

	<b>SCHEDULE 2</b> .....	33
--	-------------------------	----

**FEES**

	<b>SCHEDULE 3</b> .....	34
--	-------------------------	----

**CONSEQUENTIAL AND OTHER AMENDMENTS**

	<b>COOPERATIVES REGULATION 1997</b> .....	34
--	---	----

	<b>STATUTORY BODIES FINANCIAL ARRANGEMENTS REGULATION 1997</b> .....	34
--	--	----

	<b>TRANSPLANTATION AND ANATOMY REGULATION 1994</b> .....	34
--	--	----

	<b>SCHEDULE 4</b> .....	35
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**DICTIONARY**

## **PART 1—PRELIMINARY**

### **1 Short title**

This regulation may be cited as the *Medical Radiation Technologists Registration Regulation 2002*.

### **2 Commencement**

This regulation commences on 12 May 2002.

### **3 Definitions**

The dictionary in schedule 4 defines particular words used in this regulation.

## **PART 2—REGISTRATION**

### **4 Qualifications for general registration—Act, s 44**

For section 44(1)(a) of the Act, a qualification stated in schedule 1, column 1, and conferred or awarded by the educational institution stated in column 2 for the qualification, is a qualification for general registration—

- (a) for a qualification in part 1 of the schedule—in the medical imaging technology profession; or
- (b) for a qualification in part 2 of the schedule—in the nuclear medicine technology profession; or
- (c) for a qualification in part 3 of the schedule—in the radiation therapy profession.

### **5 Period of registration—Act, s 56**

For section 56(1) of the Act, the general registration period is a financial year.

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## **6 Notification of change in circumstances—Act, s 134**

For section 134 of the Act, each of the following is a change in a registrant's circumstances of which the board must be advised—

- (a) a change in the registrant's name;
- (b) a change in the registrant's address;
- (c) for a special purpose registrant—a change in the way the registrant undertakes the special activity for which the registrant is registered;

*Examples of a 'change' for paragraph (c)—*

- 1. A registrant undertakes the activity at a different place.
  - 2. A registrant changes the amount of time spent doing the activity.
  - 3. A registrant ceases to do the activity.
- (d) the registrant ceases to be qualified for registration.

## **PART 3—PROBATIONARY REGISTRANTS**

### *Division 1—Supervised practice program*

## **7 What is the supervised practice program—Act, s 61**

(1) For section 61 of the Act, the supervised practice program is a program of supervision for probationary registrants that happens over a period of practice of the profession and includes the requirements set out in this part.

(2) The main objects of the supervised practice program include—

- (a) giving probationary registrants experience in, and instruction about, practising in the profession; and
- (b) helping probationary registrants to develop knowledge about practising in the profession; and
- (c) teaching probationary registrants the standards of conduct required of a registrant; and

- 
- (d) enabling a probationary registrant to meet the requirements for general registration without probationary conditions.

### *Division 2—Practice of the profession*

#### **8 What is practice of the profession—medical imaging technology—Act, s 61**

(1) Practice of the profession for the supervised practice program for the medical imaging technology profession is an activity carried out by a probationary registrant involving the production of images using ionising radiation and other modalities to help in the diagnosis and management of disease or injury in humans.

(2) Practice of the profession also includes opportunities for the probationary registrant to observe, and assist with, 1 or more of the following advanced imaging techniques—

- (a) angiography and interventional procedures;
- (b) bone mineral densitometry;
- (c) computed tomography scanning;
- (d) digital subtraction angiography;
- (e) paediatric imaging.

#### **9 What is practice of the profession—nuclear medicine technology—Act, s 61**

Practice of the profession for the supervised practice program for the nuclear medicine technology profession is an activity carried out by a probationary registrant involving the use of unsealed radioactive compounds and other modalities in the development and delivery of the following procedures—

- (a) imaging and measurement of physiological processes to help in the diagnosis of disease and injury in humans;
- (b) palliation or treatment of disease in humans.

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## **10 What is practice of the profession—radiation therapy—Act, s 61**

Practice of the profession for the supervised practice program for the radiation therapy profession is an activity carried out by a probationary registrant involving the development, implementation and verification of radiation therapy treatment plans to contain, cure or relieve disease in humans.

## **11 Practice of the profession generally— Act, s 61**

(1) Subject to subsection (2), a probationary registrant practises the profession only while the registrant has a supervisor under the supervised practice program.

(2) Subsection (1) does not apply to a period of not more than 28 days when the probationary registrant is changing the registrant's supervisor if the registrant gives the board notice under section 16 advising of a change of supervisors.

### ***Division 3—Practice under the supervised practice program***

## **12 Probationary registrant not to be sole practitioner**

A probationary registrant must not practise the profession at a place unless a general registrant in the profession is at the place.

Maximum penalty—20 penalty units.

## **13 Period allowed for completion of the supervised practice program—Act, s 57**

For section 57(2)(a)(ii) of the Act, the period is 2 years from the day the registrant is registered as a probationary registrant.

## **14 Minimum period for completion of the supervised practice program—Act, s 61**

(1) For section 61(2)(f) of the Act, the minimum period is as follows—

- (a) for a probationary registrant undertaking the supervised practice program by working on a full-time basis over a continuous

period—48 weeks from the day the registrant is registered as a probationary registrant;

- (b) otherwise—the number of weeks, from the day the registrant is registered as a probationary registrant, calculated using the following formula—

$$\frac{1824}{\text{AHW}}$$

(2) For paragraph (1)(b), if the number calculated using the formula is not a whole number, the number of weeks is the next highest whole number.

(3) To remove any doubt, it is declared that for a probationary registrant undertaking the supervised practice program, the minimum period is 48 weeks even if the registrant works more than 38 hours a week.

(4) In this section—

“AHW” means the average weekly hours a probationary registrant works in the profession.

### **15 Probationary registrant to notify board when starting the supervised practice program**

(1) A probationary registrant must, within 28 days of starting the supervised practice program or a partial program, notify the board that the registrant has started the program or partial program unless the registrant has a reasonable excuse.

Maximum penalty—10 penalty units.

(2) The registrant must notify the board in the approved form.

### **16 Probationary registrant to tell board about change of supervisor**

(1) A probationary registrant must, within 28 days after changing the registrant’s supervisor, notify the board of the change unless the registrant has a reasonable excuse.

Maximum penalty—10 penalty units.

(2) The registrant must notify the board in the approved form.

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## **17 Certain registrants to tell board about change of professional practice setting**

(1) A section 57(2)(a)<sup>1</sup> registrant must, within 28 days of changing the professional practice setting in which the registrant is undertaking the supervised practice program, notify the board of the change unless the registrant has a reasonable excuse.

Maximum penalty—10 penalty units.

(2) The registrant must notify the board in the approved form.

## **18 Probationary registrants to give board reports**

(1) A probationary registrant must give the board a report about the registrant's progress and performance in undertaking the supervised practice program or a partial program (a "**progress report**") at any time the board reasonably requires the registrant to give a report, unless the registrant has a reasonable excuse.

Maximum penalty—10 penalty units.

(2) Also, a section 57(2)(a) registrant must, unless the registrant has a reasonable excuse, give the board a progress report—

- (a) 6 months after the day the registrant starts the program; and
- (b) within 6 months after the last report.

Maximum penalty—10 penalty units.

(3) A registrant must give the board a report under subsection (1) within 28 days from the day the registrant receives a notice from the board requiring the report unless the registrant has a reasonable excuse.

(4) A report under this section must be—

- (a) in the approved form; and
- (b) signed by the registrant and the registrant's supervisor.

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<sup>1</sup> Section 57 (Imposition of probationary conditions) of the Act

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***Division 4—Competencies***

**19 Competencies to be demonstrated for completion of supervised practice program—medical imaging technology—Act, s 61**

A probationary registrant in the medical imaging technology profession must, to complete the supervised practice program, demonstrate competency to carry out general imaging techniques, including the following—

- (a) general radiographic examinations of the genito-urinary, respiratory and skeletal systems and the alimentary tract;
- (b) contrast examinations of the gastrointestinal, renal and reproductive systems;
- (c) mobile radiography, including mobile image intensification;
- (d) radiography in the context of an operating theatre;
- (e) trauma radiography.

**20 Competencies to be demonstrated for completion of supervised practice program—nuclear medicine technology—Act, s 61**

A probationary registrant in the nuclear medicine technology profession must, to complete the supervised practice program, demonstrate competency in the following—

- (a) undertaking preparation, dose dispensing and administration of diagnostic radiopharmaceuticals;
- (b) undertaking therapeutic and palliative radiopharmaceutical dose dispensing;
- (c) using aseptic laboratory skills for reconstituting radiopharmaceuticals and labelling blood products;
- (d) performing radionuclide planar imaging, SPECT imaging and ECG-gated imaging in adults and children, including studies of the heart, kidneys, lungs, skeleton, thyroid and tumours;
- (e) undertaking digital data analysis, processing and storage;
- (f) using dose calibrators, probes and radiation survey meters;

- (g) performing quality control and quality assurance procedures including—
  - (i) routine quality control of gamma camera, dose calibrators and other equipment used in the profession; and
  - (ii) quality control of radiopharmaceuticals;
- (h) managing patient case loads and associated administrative processes.

## **21 Competencies to be demonstrated for completion of supervised practice program—radiation therapy—Act, s 61**

A probationary registrant in the radiation therapy profession must, to complete the supervised practice program, demonstrate competency in the following—

- (a) performing routine and non-specialised procedures including external beam treatment;
- (b) undertaking treatment simulation processes;
- (c) undertaking treatment planning including the acquisition of patient and imaging data to —
  - (i) integrate the planning process; and
  - (ii) provide advice about the best radiation therapy for a patient; and
  - (iii) develop a treatment plan for the patient;
- (d) implementing a treatment plan in collaboration with a prescribing medical specialist and clinical staff;
- (e) verifying treatment delivery;
- (f) performing, with confirmation and assistance from a registrant in the radiation therapy profession who is not a probationary registrant, the following—
  - (i) integration of all types of medical images into the treatment planning process;
  - (ii) application of three-dimensional computer assisted treatment planning;

- (iii) advanced beam direction procedures;
- (iv) brachytherapy and artifact fabrication in the mould room.

### ***Division 5—Professional practice settings***

#### ***Subdivision 1—General***

#### **22 Section 57(2)(a) registrants to practise only in certain professional practice settings**

A section 57(2)(a) registrant must practise the profession only in a professional practice setting that meets the criteria mentioned in this division, subdivision 2, 3 or 4 (a “**suitable place**”).

#### ***Subdivision 2—Criteria for medical imaging technology profession***

#### **23 Staff at professional practice setting—medical imaging technology**

A professional practice setting for the medical imaging technology profession must have the following persons available, during a working day, to give a section 57(2)(a) registrant advice and direction about practising the profession—

- (a) for each section 57(2)(a) registrant who is undertaking the supervised practice program in the setting—at least 1 medical imaging technologist who is eligible under section 40 to be a supervisor and who is working on a full-time basis;
- (b) at least 1 medical imaging technologist who is eligible under section 41 to be another person who supervises probationary registrants.

#### **24 Equipment at professional practice setting—medical imaging technology**

A professional practice setting for the medical imaging technology profession must have the equipment needed to carry out general imaging,

including, for example, a fluoroscopy X-ray unit, a general X-ray unit and a mobile X-ray unit with an image intensifier.

## **25 Procedures carried out at professional practice setting—medical imaging technology**

(1) Diagnostic imaging examinations must be carried out at a professional practice setting for the medical imaging technology profession, including, for example—

- (a) contrast procedures, including gastrointestinal and renal tract procedures;
- (b) fluoroscopic procedures;
- (c) mobile radiography;
- (d) radiography of the chest and abdomen;
- (e) radiography of the skeletal system, including trauma radiography;
- (f) theatre radiography.

(2) A professional practice setting for the medical imaging technology profession must also allow a registrant to observe, and assist with, diagnostic imaging examinations using 1 or more of the following modalities or techniques—

- (a) angiography and interventional procedures;
- (b) bone mineral densitometry;
- (c) computed tomography scanning;
- (d) digital subtraction angiography;
- (e) paediatric imaging.

## **26 Access to professional development and research—medical imaging technology**

A professional practice setting for the medical imaging technology profession must allow the registrant to—

- (a) have access to, and take part in, professional development activities in the medical imaging technology profession; and

- (b) take part in research and development in the medical imaging technology profession.

### ***Subdivision 3—Criteria for nuclear medicine technology profession***

#### **27 Staff at professional practice setting—nuclear medicine technology**

(1) A professional practice setting for the nuclear medicine technology profession must have the following persons available, during a working day, to give a section 57(2)(a) registrant advice and direction about practising the profession—

- (a) at least 1 nuclear medicine technologist who is eligible under section 40 to be a supervisor and who is working on a full-time basis;
- (b) at least 1 nuclear medicine technologist who is eligible under section 41 to be another person who supervises probationary registrants.

(2) The professional practice setting must also have a nuclear physician or a specialist in nuclear medicine working at the setting.

#### **28 Equipment at professional practice setting—nuclear medicine technology**

A professional practice setting for the nuclear medicine technology profession must have the equipment generally used by a nuclear medicine technologist, including, for example, the following—

- (a) aerosol or fine aerosol generator;
- (b) dose calibrator;
- (c) ECG monitor;
- (d) film processor or digital image archiving system;
- (e) radiation and biological hazard spill kits;
- (f) radiation survey meter;
- (g) gamma camera capable of SPECT imaging.

**29 Quality control procedures—nuclear medicine technology**

(1) Quality control procedures must be routinely carried out on equipment used for nuclear medicine procedures and on radiopharmaceuticals prepared for use in nuclear medicine procedures at a professional practice setting for the nuclear medicine technology profession.

(2) Written protocols for the quality control procedures must be available to a section 57(2)(a) registrant practising in the setting.

**30 Procedures carried out at professional practice setting—nuclear medicine technology**

(1) The following diagnostic procedures must be carried out at a professional practice setting for the nuclear medicine technology profession—

- (a) bone scans, including 3-phase, whole body and SPECT imaging;
- (b) cardiac studies including myocardial perfusion and ECG-gated imaging;
- (c) lung scans;
- (d) renal studies including dynamic and static imaging;
- (e) tumour imaging, including, for example, gallium scans.

(2) A professional practice setting for the nuclear medicine technology profession must also allow a registrant to observe, and assist with, diagnostic procedures using 1 or more of the following modalities or techniques—

- (a) bone mineral densitometry;
- (b) clean room procedures in a radiopharmacy;
- (c) gamma probe;
- (d) positron emission tomography;

(3) A professional practice setting for the nuclear medicine technology profession must also allow a registrant to observe other medical imaging modalities, including, for example, general radiology, magnetic resonance imaging and ultrasound.

(4) A professional practice setting for the nuclear medicine technology profession must also allow a registrant to practise other diagnostic imaging procedures and therapeutic procedures including, for example, the following—

- (a) cerebral perfusion imaging;
- (b) endocrine imaging, including thyroid and parathyroid scans;
- (c) gastrointestinal studies, including biliary, liver, gastrointestinal haemorrhage and gastric emptying;
- (d) labelled white blood cell studies;
- (e) therapeutic and palliative procedures using beta-emitting radioisotopes;
- (f) therapeutic procedures using iodine-131 for thyrotoxicosis and thyroid cancer.

(5) A professional practice setting for the nuclear medicine technology profession must also allow a registrant to practise other radiopharmacy procedures including, for example, the following—

- (a) blood cell labelling;
- (b) elution of radioisotope generators;
- (c) quality control of radiopharmaceuticals;
- (d) reconstitution of radiopharmaceuticals.

(6) Written protocols for the diagnostic imaging procedures and therapeutic procedures must be available to a section 57(2)(a) registrant practising in the setting.

### **31 Access to professional development and research—nuclear medicine technology**

A professional practice setting for the nuclear medicine technology profession must allow the registrant to—

- (a) be given instruction about patient care and handling; and
- (b) have access to, and take part in, professional development activities in the nuclear medicine technology profession; and
- (c) take part in research and development in the nuclear medicine technology profession.

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***Subdivision 4—Criteria for radiation therapy profession***

**32 Staff at professional practice setting—radiation therapy**

A professional practice setting for the radiation therapy profession must have the following persons available, during a working day, to give a section 57(2)(a) registrant advice and direction about practising the profession—

- (a) for each section 57(2)(a) registrant who is undertaking the supervised practice program at the setting—at least 2 radiation therapists who are eligible under section 40 to be a supervisor and who are working on a full-time basis;
- (b) at least 1 radiation therapist who is eligible under section 41 to be another person who supervises probationary registrants.

**33 Equipment at professional practice setting—radiation therapy**

A professional practice setting for the radiation therapy profession must have the following—

- (a) diagnostic equipment used for radiation therapy treatment planning or virtual simulation;
- (b) linear accelerator;
- (c) treatment planning system.

**34 Procedures carried out at professional practice setting—radiation therapy**

(1) The following procedures must be carried out at a professional practice setting for the radiation therapy profession—

- (a) daily calibration checks;
- (b) external beam treatment, simulation and planning;
- (c) verification of treatment delivery.

(2) A professional practice setting for the radiation therapy profession must also allow a registrant to observe, and assist with—

- 
- (a) specialised and nonroutine treatment and planning procedures; and
  - (b) brachytherapy procedures.

### **35 Access to professional development and research—radiation therapy**

A professional practice setting for the radiation therapy profession must allow the registrant to—

- (a) have access to, and take part in, professional development activities in the radiation therapy profession; and
- (b) take part in research and development in the radiation therapy profession.

#### ***Subdivision 5—Board may decide about suitability of professional practice settings***

### **36 Suitability show cause notice**

(1) This section applies if the board reasonably believes a professional practice setting is not a suitable place.

(2) The board must give the person in charge of the setting a notice (a “**suitability show cause notice**”) that—

- (a) states that the board proposes to decide that the professional practice setting is not, or is no longer, a suitable place; and
- (b) states the ground for the proposed decision; and
- (c) outlines the facts and circumstances forming the basis for the ground; and
- (d) invites the person in charge to show within a stated period (the “**suitability show cause period**”) why the decision should not be made.

(3) The suitability show cause period must be a period ending not less than 21 days after the suitability show cause notice is given to the person in charge.

(4) The ground for a decision is that, in the board's reasonable opinion, the setting does not meet, or no longer meets, the requirements under subdivision 2, 3 or 4.

### **37 Representations about suitability show cause notices**

(1) The person in charge of the setting may make written representations about the suitability show cause notice to the board in the suitability show cause period.

(2) The board must consider any written representations (the “**written representations**”) made under subsection (1).

### **38 Ending suitability show cause process without further action**

(1) This section applies if, after considering any written representations for the suitability show cause notice, the board believes the professional practice setting is a suitable place.

(2) The board must not take any further action about the suitability show cause notice.

(3) The board must also as soon as practicable after coming to the belief give the following persons a notice that no further action is to be taken about the suitability show cause notice—

- (a) the person in charge of the professional practice setting;
- (b) any section 57(2)(a) registrant undertaking the supervised practice program in the setting.

### **39 Decision about suitability**

(1) This section applies if, after considering the written representations for the suitability show cause notice, the board—

- (a) still believes the ground under section 36 exists; and
- (b) believes the professional practice setting is not, or is no longer, a suitable place.

(2) This section also applies if there are no written representations for the suitability show cause notice.

(3) The board may decide the professional practice setting is not, or is no longer, a suitable place.

(4) If the board makes a decision mentioned in subsection (3), it must as soon as practicable give the person in charge of the setting a decision information notice about the decision.

(5) The decision takes effect on the day the decision information notice is given to the person in charge of the setting.

(6) The board must also give any section 57(2)(a) registrant undertaking the supervised practice program in the setting a notice about the decision and stating the registrant must undergo the program in another setting that meets the criteria in subdivision 2, 3 or 4.

***Division 6—Supervisors and other persons who supervise  
probationary registrants***

**40 Eligibility criteria for supervisors—Act, s 231**

A general registrant is eligible to be a supervisor of a probationary registrant if the general registrant—

- (a) is registered in the profession in which the probationary registrant is registered and—
  - (i) has been a general registrant or held equivalent registration under the law of another State or New Zealand for at least 1 year; or
  - (ii) has been registered in the profession under section 233<sup>2</sup> of the Act; and
- (b) is not a member of the probationary registrant's immediate family or household; and
- (c) is not subject to suspension of the registrant's registration under the *Health Practitioners (Professional Standards) Act 1999* or a corresponding law; and
- (d) is not subject to a condition, order or undertaking under the *Health Practitioners (Professional Standards) Act 1999* or a

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2 Section 233 (Transitional provision about registration) of the Act

corresponding law prohibiting the registrant from being a supervisor or otherwise supervising probationary registrants; and

- (e) has not been declared by the board to be ineligible to be a supervisor, or otherwise supervise probationary registrants, under section 45.

#### **41 Eligibility criteria for other persons who supervise probationary registrants—Act, s 231**

The following persons are eligible to be another person who supervises a probationary registrant—

- (a) a general registrant who is eligible to be a supervisor under section 40 and supervises a probationary registrant under the direction and control of the probationary registrant’s supervisor;
- (b) for the supervision of a probationary registrant in the nuclear medicine profession when the registrant is administering a radiopharmaceutical or carrying out a radiopharmacy procedure—
  - (i) a nuclear physician; or
  - (ii) a specialist in nuclear medicine; or
  - (iii) a person who undertakes radiopharmacy in a professional practice setting.

#### **42 Declaration show cause notice**

(1) This section applies if the board reasonably believes a person is not suitable to supervise probationary registrants or a particular registrant.

(2) The board must give the person a notice (a “**declaration show cause notice**”) that—

- (a) states that the board proposes to declare the person ineligible to supervise probationary registrants or the particular registrant; and
- (b) states the ground for the proposed declaration; and
- (c) outlines the facts and circumstances forming the basis for the ground; and

- (d) invites the person to show within a stated period (the “**declaration show cause period**”) why the declaration should not be made.

(3) The declaration show cause period must be a period ending at least 21 days after the declaration show cause notice is given to the person.

(4) The grounds for a declaration may include the following—

- (a) whether the person meets, or continues to meet, the eligibility criteria for supervisors or other persons who supervise;
- (b) whether any disciplinary action under the *Health Practitioners (Professional Standards) Act 1999* or a corresponding law has been taken against the person;
- (c) whether the person has fulfilled a supervisor’s or assistant supervisor’s responsibilities in relation to a probationary registrant.

#### **43 Representations about declaration show cause notices**

(1) The person may make written representations about the declaration show cause notice to the board in the declaration show cause period.

(2) The board must consider all written representations (the “**written representations**”) made under subsection (1).

#### **44 Ending declaration show cause process without further action**

(1) This section applies if, after considering any written representations for the declaration show cause notice, the board believes the person is suitable to supervise probationary registrants or a particular registrant.

(2) The board must not take any further action about the declaration show cause notice.

(3) The board must also as soon as practicable after coming to the belief give notice to the person that no further action is to be taken about the declaration show cause notice.

**45 Declaration**

(1) This section applies if, after considering any written representations for the declaration show cause notice, the board still believes the person is not suitable to supervise probationary registrants or a particular registrant.

(2) This section also applies if there are no written representations for the declaration show cause notice.

(3) The board may declare the person ineligible to be a supervisor or otherwise supervise a probationary registrant for—

- (a) if the board reasonably believes the person is not suitable to supervise probationary registrants—any probationary registrant; or
- (b) if the board reasonably believes the person is not suitable to supervise a particular probationary registrant—the particular registrant.

(4) If the board decides to make the declaration, it must as soon as practicable give the person a decision information notice about the decision.

(5) The declaration takes effect on the day the decision information notice is given to the person.

**46 Notice to probationary registrant**

(1) This section applies if the board makes a declaration under section 45 about a person who is, or is proposed to be, a probationary registrant's supervisor or assistant supervisor.

(2) The board must, as soon as practicable after making the declaration, give the probationary registrant a notice stating the registrant is required to give the board notice nominating another supervisor or assistant supervisor.

**47 Responsibilities of supervisors and assistant supervisors—Act,  
s 61**

(1) The responsibilities of a probationary registrant's supervisor or assistant supervisor include the following—

- 
- (a) advising the registrant about standards of conduct applying to practising in the profession and helping the registrant to apply the standards;
  - (b) helping the registrant to apply professional knowledge and skills in practising in the profession;
  - (c) helping the registrant to increase their competence and effectiveness through professional development;
  - (d) monitoring the registrant's progress and performance in undertaking the supervised practice program and discussing the progress and performance with the registrant.

(2) A registrant's supervisor must, when the registrant completes the supervised practice program, assess whether the registrant meets the competencies for the profession.

(3) A supervisor or assistant supervisor must immediately notify the board if the supervisor or assistant supervisor reasonably considers the registrant may not be complying with the Act or this regulation.

(4) A supervisor or assistant supervisor may discuss an issue about the registrant's progress and performance in undertaking the supervised practice program with the board.

#### **48 Reports by persons ceasing to be supervisors—Act, s 62**

For section 62(2)(a) of the Act, a probationary registrant's current supervisor is an entity.

#### ***Division 7—General***

#### **49 Statement of incomplete supervision**

(1) This section applies to a probationary registrant who, before completing the supervised practice program or a partial program—

- (a) ceases practising in the profession; or
- (b) is not supervised for a period of 28 days.

(2) The registrant must, unless the registrant has a reasonable excuse, give the board a notice about the cessation, or that the registrant has not

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been supervised for a period of 28 days (a “**statement of incomplete supervision**”)—

- (a) for a statement about the cessation—within 28 days after the cessation; or
- (b) for a statement that the registrant has not been supervised for a period of 28 days—within 28 days after the end of the period.

Maximum penalty—10 penalty units.

(3) The statement of incomplete supervision must be in the approved form.

## PART 4—APPEALS

### 50 Who may appeal

A person (the “**decision appellant**”) who is given, or is entitled to be given, a decision information notice for a decision (the “**initial decision**”) may appeal against the decision to the District Court.<sup>3</sup>

### 51 Starting appeals

(1) The appeal may be started at—

- (a) the District Court at the place where the decision appellant resides or carries on business; or
- (b) the District Court at Brisbane.

(2) Subsection (1) does not limit the District Court at which the appeal may be started under the *Uniform Civil Procedure Rules 1999*.

(3) The notice of appeal under the *Uniform Civil Procedure Rules 1999* must be filed with the registrar of the court within 28 days after—

- (a) if the decision appellant is given a decision information notice for the initial decision—the day the decision appellant is given the notice; or

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<sup>3</sup> The *Uniform Civil Procedure Rules 1999* contains provisions about appeals to the District Court.

(b) if paragraph (a) does not apply—the day the decision appellant otherwise becomes aware of the initial decision.

(4) The court may, at any time, extend the period for filing the notice of appeal.

## **52 Hearing procedures**

(1) In deciding the appeal, the court—

- (a) has the same powers as the person who made the initial decision; and
- (b) is not bound by the rules of evidence; and
- (c) must comply with natural justice.

(2) The appeal is by way of rehearing, unaffected by the initial decision, on the material before the person who made the initial decision and any further evidence allowed by the court.

## **53 Powers of court on appeal**

(1) In deciding the appeal, the court may—

- (a) confirm the initial decision; or
- (b) amend the initial decision; or
- (c) substitute another decision for the initial decision; or
- (d) set aside the initial decision and return the issue to the board with the directions the court considers appropriate.

(2) In substituting another decision for the initial decision, the court has the same powers as the person who made the initial decision.

*Examples—*

1. The court may decide a professional practice setting declared not to be a suitable place is a suitable place.
2. The court may decide a person declared to be ineligible to be a supervisor is eligible to be a supervisor.

(3) If the court amends the initial decision or substitutes another decision for the initial decision, the amended or substituted decision is, for this regulation (other than this part) taken to be the decision of the person who made the initial decision.

**54 Appointment of assessors**

(1) If the court is of the opinion that the appeal involves a question of special knowledge and skill, the court may appoint 1 or more assessors who in the court's opinion possess the special qualifications necessary for the particular case to assist the court in deciding the appeal.

(2) An assessor may advise the court on any matter, but all questions of law and fact are to be decided by the court.

(3) The court may give the weight to the advice that it considers appropriate.

**PART 5—FEES****55 Fees**

The fees payable under the Act are stated in schedule 2.

**56 Waiver of fee—financial hardship**

The board may waive, wholly or partly, the payment of a fee by a person if the board is satisfied payment of the fee would cause the person financial hardship.

**57 Refund of registration fee**

(1) The board must refund the registration fee accompanying a person's application for registration, or renewal of registration, if—

- (a) the board refuses to grant the application; or
- (b) the person withdraws the application before it is decided.

(2) Subsection (3) applies if, within 3 months after the board decides to register a person or renew a person's registration, the person surrenders the registration.

(3) The board must refund the registration fee paid by the person less the amount of the registration fee stated in schedule 2 for a period of registration of not more than 3 months.

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## **58 Refund of restoration fee**

(1) The board must refund the registration component of a restoration fee accompanying a person's application for restoration of general registration if—

- (a) the board refuses to grant the application; or
- (b) the person withdraws the application before it is decided.

(2) Subsection (3) applies if, within 3 months after the board decides to restore a person's registration, the person surrenders the registration.

(3) The board must refund the registration component of the restoration fee paid by the person less the amount of the registration fee stated in schedule 2 for a period of registration of not more than 3 months.

(4) In this section—

**“registration component”**, of a restoration fee, means the amount of the restoration fee less \$75.

## **PART 6—CONSEQUENTIAL AND OTHER AMENDMENTS**

### **59 Consequential and other amendments**

Schedule 3 amends the regulations mentioned in it.

## **SCHEDULE 1**

### **QUALIFICATIONS FOR GENERAL REGISTRATION**

section 4

#### **PART 1—MEDICAL IMAGING TECHNOLOGY**

<b>Qualification</b>	<b>Institution</b>
Bachelor of Applied Science (Medical Radiation Technology)	Queensland University of Technology
Bachelor of Medical Radiation Science in Diagnostic Radiography	University of Newcastle
Bachelor of Applied Science (Medical Radiation Sciences) Diagnostic Radiography	University of Sydney
Bachelor of Applied Science (Medical Radiation Technology) Diagnostic Radiography	University of Sydney
Bachelor of Applied Science (Medical Imaging)	Charles Sturt University
Bachelor of Medical Radiation	University of South Australia
Bachelor of Applied Science in Medical Radiations	Royal Melbourne Institute of Technology
Bachelor of Radiography and Medical Imaging	Monash University
Bachelor of Science (Medical Imaging Science)	Curtin University of Technology
Bachelor of Health Science (Conversion Program)	Wellington Institute of Technology, New Zealand

SCHEDULE 1 (continued)

<b>Qualification</b>	<b>Institution</b>
Bachelor of Health Science (Medical Imaging)	Unitec Institute of Technology, New Zealand
Bachelor of Medical Imaging	Christchurch Polytechnic Institute of Technology, New Zealand
Bachelor of Applied Science (Medical Imaging Technology)	Manawatu Polytechnic (trading as Universal College of Learning), New Zealand

**PART 2—NUCLEAR MEDICINE TECHNOLOGY**

<b>Qualification</b>	<b>Institution</b>
Bachelor of Medical Radiation Science in Nuclear Medicine	University of Newcastle
Bachelor of Applied Science (Medical Radiation Sciences) Nuclear Medicine	University of Sydney
Bachelor of Applied Science (Medical Radiation Technology) Nuclear Medicine	University of Sydney
Bachelor of Applied Science (Nuclear Medicine Technology)	Charles Sturt University
Bachelor of Medical Radiation	University of South Australia
Bachelor of Applied Science in Medical Radiations	Royal Melbourne Institute of Technology
Bachelor of Health Science (Conversion Program)	Wellington Institute of Technology, New Zealand

## SCHEDULE 1 (continued)

**PART 3—RADIATION THERAPY**

<b>Qualification</b>	<b>Institution</b>
Bachelor of Applied Science (Medical Radiation Technology)	Queensland University of Technology
Bachelor of Medical Radiation Science in Radiation Therapy	University of Newcastle
Bachelor of Applied Science (Medical Radiation Sciences) Radiation Therapy	University of Sydney
Bachelor of Applied Science (Medical Radiation Technology) Radiation Therapy	University of Sydney
Bachelor of Medical Radiation	University of South Australia
Bachelor of Applied Science in Medical Radiations	Royal Melbourne Institute of Technology
Bachelor of Health Science (Medical Radiation Therapy)	University of Otago, New Zealand
Bachelor of Health Science (Conversion Program)	Wellington Institute of Technology, New Zealand

## SCHEDULE 2

### FEES

section 55

	\$
1. Application fee for general registration or special purpose registration . . . . .	100.00
2. Registration fee for general registration or special purpose registration—	
(a) for a period of registration of not more than 3 months	55.00
(b) for a period of registration of more than 3 months but not more than 6 months . . . . .	110.00
(c) for a period of registration of more than 6 months but not more than 1 year . . . . .	220.00
3. Restoration fee . . . . .	295.00
4. Application for review of conditions . . . . .	100.00
5. Replacement of certificate of registration . . . . .	25.00
6. Certified copy of certificate of registration . . . . .	25.00
7. Copy of the register or part of it—for each page . . . . .	.50

## **SCHEDULE 3**

### **CONSEQUENTIAL AND OTHER AMENDMENTS**

section 59

#### **COOPERATIVES REGULATION 1997**

**1 Schedule 5, item 12—**

*insert—*

*‘Medical Radiation Technologists Registration Act 2001’.*

#### **STATUTORY BODIES FINANCIAL ARRANGEMENTS REGULATION 1997**

**1 Schedule 3—**

*insert—*

*‘Medical Radiation Technologists  
Registration Act 2001*

*Medical Radiation Technologists  
Board of Queensland’.*

#### **TRANSPLANTATION AND ANATOMY REGULATION 1994**

**1 Section 5, ‘under the *Medical Act 1939*’—**

*omit, insert—*

*‘registrant under the *Medical Practitioners Registration Act 2001*’.*

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## SCHEDULE 4

### DICTIONARY

#### section 3

**“assistant supervisor”** means a person who is eligible under section 41 to be another person who supervises a probationary registrant and assists the registrant’s supervisor in the supervision of the registrant under the supervised practice program.

**“decision appellant”** see section 50.

**“decision information notice”**, for a decision of the board, is a notice stating the following—

- (a) the decision;
- (b) the reasons for the decision;
- (c) that the person to whom the notice is given may appeal against the decision within 28 days;
- (d) how the person may appeal against the decision to the District Court.

**“declaration show cause notice”** see section 42(2).

**“declaration show cause period”** see section 42(2)(d).

**“ECG”** means electrocardiogram.

**“full-time basis”**, for undertaking the supervised practice program or working in a professional practice setting, means working at least 38 hours a week undertaking the program or in the setting.

**“initial decision”** see section 50.

**“nuclear physician”** means a person who is registered under the *Medical Practitioners Registration Act 2001* as a nuclear physician.

**“practice of the profession”** means practice of the profession for the supervised practice program.

**“professional practice setting”** means a place, or 2 or more places, where a section 57(2)(a) registrant practises the profession.

### SCHEDULE 4 (continued)

*Examples of professional practice settings—*

1. A professional practice setting may consist of 1 place that enables a section 57(2)(a) registrant to carry out all the activities the registrant must carry out in the practice of the profession.
2. A professional practice setting may consist of 2 or more places that together enable a section 57(2)(a) registrant to carry out all the activities the registrant must carry out in the practice of the profession.

**“section 57(2)(a) registrant”** means a probationary registrant to whom section 57(2)(a) of the Act applies.

**“specialist in nuclear medicine”** means a person who is registered under the *Medical Practitioners Registration Act 2001* as a specialist in nuclear medicine.

**“SPECT”** means single photon emission computed tomography.

**“suitability show cause notice”** see section 36(2).

**“suitability show cause period”** see section 36(2)(d).

**“suitable place”** see section 22.

**“written representations”**—

- (a) for part 3, division 5—see section 37(2); and
- (b) for part 3, division 6—see section 43(2).

#### ENDNOTES

1. Made by the Governor in Council on 9 May 2002.
2. Notified in the gazette on 10 May 2002.
3. Laid before the Legislative Assembly on . . .
4. The administering agency is the Department of Health.