

# Response template for providing feedback to public consultation – draft revised professional capabilities for medical radiation practice

This response template is an optional way to provide your response to the public consultation paper for the **Draft revised professional capabilities for medical radiation practice.** Please provide your responses to any of the questions in the corresponding text boxes; you do not need to answer every question if you have no comment.

### Making a submission

Please complete this response template and send to <u>medicalradiationconsultation@ahpra.gov.au</u>, using the subject line '*Feedback on draft revised professional capabilities for medical radiation practice*'.

### Submissions are due by midday on Friday 26 April 2019.

#### **Stakeholder details**

Please provide your details in the following table:

Name:	Matthew Fairbairn
Organisation Name:	Sunshine Coast Hospital and Health Service

## Your responses to the preliminary consultation questions

1. Does any content need to be added to any of the documents?
No
2. Does any content need to be amended or removed from any of the documents?
Ultrasound physics includes transducer design and operation, identification of artefacts and
understanding of the biological effects of ultrasound Largely not relevant for bladder scanning in radiation therapy setting.
a. Safely and effectively deliver medicine to patients/clients in accordance with procedures
Radiation therapy departments have nursing staff which handle these issues
b. Actively monitor the effects of medication and manage adverse reactions to medicines in
accordance with protocols Radiation therapy departments have nursing staff which handle
these issues
c. Recognise and respond in an appropriate and timely way to a patient's/client's deteriorating condition, or inability to undergo a procedure consistent with duty of care and statutory
requirements Does this scope extend beyond a nurse call in a radiation therapy setting?
d. Select appropriate equipment and triage patients/clients according to their clinical presentation,
national standards and other factors. – A very high level skill in a radiation therapy setting, may
not be appropriate to more junior staff.
3. Do the key capabilities sufficiently describe the threshold level of professional
capability required to safely and competently practise as a medical radiation
practitioner in a range of contexts and situations?
Yes
4. Do the enabling components sufficiently describe the essential and measurable
characteristics of threshold professional capability that are necessary for safe and
competent practice?

Yes
5. Is the language clear and appropriate? Are there any potential unintended consequences of the current wording?
Language is clear and appropriate with no reasonably unforeseen unintended consequences of wording. The content itself could lead to some unintended consequences for radiation therapy practice.
6. Are there jurisdiction-specific impacts for practitioners, or governments or other stakeholders that the National Board should be aware of, if these capabilities are adopted?
The content itself could lead to some unintended consequences for radiation therapy practice if not amended.
7. Are there implementation issues the National Board should be aware of?
There may be some additional training required for radiation therapists based on the content around medications, recognising the declining patient and ultrasound.
8. Do you have any other general feedback or comments on the proposed draft revised professional capabilities?

I think it is important to acknowledge that a radiation therapist is a very specialised profession and as a result it is difficult apply the same broad standards that apply to other medical radiation science professions in some instances.