Submission by Medical Radiation Australia in response to the Interim Report

Medical Radiation Australia (MRA) is the leading body for medical radiation science education in Australia. It is comprised of the Heads of Discipline of Australian programs in Medical Radiation Science (MRS). Medical Radiation Science is made of three distinct subspecialties as registered by the Australian Health Practitioners Regulatory Agency (Ahpra), Diagnostic Radiography (DR), Nuclear Medicine (NM) and Radiation Therapy (RT) under the Medical Radiation Practice Board of Australia (MRPBA) https://www.medicalradiationpracticeboard.gov.au/. A further area of specialisation, Sonography, is accredited by Australian Sonographer Accreditation Register (ASAR) https://www.asar.com.au/. These four areas of specialisation are grouped within the Australian and New Zealand Standard Classification of Occupations (ANZSCO) Occupation Group 2512 Medical Imaging Professionals (251211 Medical Diagnostic Radiographers, 251212 Medical Radiation Therapist, 251213 Nuclear Medicine Technologist, 251214 Sonographer).

Medical Radiation Australia welcomes the measures outlined in the Interim Report to overcome student placement poverty (particularly sections 2.2.4 and 2.3.3.2). In supporting these directions, we make the following recommendations:

Recommendation 1: that the Australian Government include all Medical Radiation Science students (along with nursing and teaching students) as an urgent priority to receive financial support while undertaking compulsory unpaid work integrated learning (WIL)/ clinical placements.

Recommendation 2: that the Australian Government extend the eligibility for Rural Health Multidisciplinary training (RHMT) program for subsidised accommodation from current limited to domestic Commonwealth supported place (CSP) students to include fee-paying domestic students and international students.

Solution 1: The need for financial support to address student placement poverty as a priority equity measure for students enrolled in priority courses, i.e., those with identified workforce shortages and with compulsory unpaid WIL/ clinical placements.

1.1 Student placement poverty in courses with compulsory unpaid WIL/clinical placements

It is now well established that unpaid compulsory placements cause great financial hardship for students, act as an enabler for attrition and even exclude students, particularly those from marginalised groups, from being able to study. (See for example Cherastidtham, I., Norton, A., and Mackey, W. (2018).)

These barriers are especially problematic in vital professions such as medical radiation science, nursing and teaching, for which there are current and increasing projected **workforce shortages**.

1.2 The medical radiation science professions are highly skilled with current and increasing projected workforce shortages.

According to labour market insights from Australian government, which group all the MRS subspecialties as Medical Imaging Professionals (https://labourmarketinsights.gov.au/occupation-profile/medical-imaging-

professionals?occupationCode=2512#:~:text=Medical%20Imaging%20Professionals%20operate%20X ,Radiologists%20and%20other%20Medical%20Practitioners.) have a "below average" unemployment rate and a "very high skills level" (**Skill level 1**).

The National Skills Commission 2022 Priority List identifies current shortages across all States and Territories in Australia for medical radiation science professionals https://www.nationalskillscommission.gov.au/topics/skills-priority-list

The Australian Government's 2021 NSC Employment Projections for the five years to November 2026 https://labourmarketinsights.gov.au/our-research/employment-projections/ showed a projected employment growth for medical imaging professionals (Occupation unit group 2512, including all MRS professionals) of 14.7%, compared to registered nurses (Occupation code 2544) of 13.9%, medical practitioners (Occupation code 253) of 11.7%, and school teachers (Occupation code 241) of 9.4%.

1.3 Medical Radiation Science Profession programs have extensive unpaid clinical placement requirements.

To gain the very high skills level required for this professional occupational group, MRS programs are typically 4 years undergraduate study or 2-3 years post-graduate study for entry into the profession. Graduates from the programs are eligible for professional registration (Ahpra) or accreditation (ASAR) on graduation from their program of study. For MRS programs accredited by Ahpra "Education providers must be able to show that all students demonstrate all enabling components for all key capabilities (for the relevant division of registration) in the clinical setting, before they complete their program of study" (Fact Sheet for education providers Professional capabilities for medical radiation practice, 8 November 2019 p.1). Similarly, ASAR program accreditation for sonography programs requires the education provider to demonstrate 'that graduates have achieved each graduate competency outcome on completion of the course' (Standards for the Accreditation of Sonographer Courses, ASAR 2023).

This requirement means that all Ahpra accredited programs in medical radiation science must have extensive clinical placement hours embedded into their courses. Undergraduate MRS programs of study typically require students to undertake approximately 40-50 fulltime weeks (approx. 1400-1600 hours or 200 – 250 days) of unpaid clinical placement, split across multiple clinical placements, throughout their course so that each student has all Professional Capabilities and their enabling components assessed in the clinical setting. Similarly, ASAR recommends for student sonographers a minimum volume of experience equivalent to 2000 hours (approximately 270 days).

The extent of clinical placement in Medical Radiation Science Professions programs far exceeds that of nursing (800 hours) and teaching (60-80 days). This means that students enrolled in MRS programs are more likely to face higher levels of financial, well-being and mental health stress than students enrolled in other priority courses such as nursing and teaching, due to the higher requirement in MRS courses for compulsory unpaid placements. This leads to the following recommendation.

Recommendation 1: that the Australian Government include all Medical Radiation Science students (along with nursing and teaching students) as an urgent priority to receive financial support while undertaking compulsory unpaid clinical placements.

Solution 2: The need for expansion to the Commonwealth Department of Health funding for the Rural Health Multidisciplinary training (RHMT) program for subsidised accommodation from current limited to domestic CSP students to include fee-paying domestic students and international students.

Currently the Commonwealth Department of Health funding for the Rural Health Multidisciplinary training (RHMT) program is only available to domestic CSP students. The RMHT is an important initiative to support health students to undertake clinical placement in rural area with the aim of improving recruitment and retention of health workers in rural and remote Australia.

Many MRS students must travel extended distances to **undertake clinical placements in locations remote to their home address, including in rural locations.** Currently only domestic CSP students can take advantage of the support offered by RHMT program, and this leads to Recommendation 2.

Recommendation 2: that the Australian Government extend the eligibility for Rural Health Multidisciplinary training (RHMT) program for subsidised accommodation from current limited to domestic CSP students to include fee-paying domestic students and international students.

Summary

MRA requests that the Australian Government address the support gaps for students in the Medical Radiation Science Professions through the two stated recommendations.

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Reference

Cherastidtham, I., Norton, A., and Mackey, W. (2018). University attrition: what helps and what hinders university completion? Grattan Institute.