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Australian Institute of Radiography
Professional Accreditation and Education Board

Education policies

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Preface

The Australian Institute of Radiography (AIR) is the professional association representing the Medical Radiation Science profession (Radiographers, Medical Imaging Practitioners, Radiation Therapists, Sonographers) in Australia.

The AIR is a member of the International Society of Radiographers and Radiological Technologists (ISRRT). The management of the affairs of the AIR is conducted by Board of Directors of the AIR. The Board of Directors is comprised of an elected delegate from each State of Australia and the Chief Executive of the AIR.

This publication provides information about: -

- The Medical Radiation Science (MRS) profession
- The Education Policy of the AIR
- Professional Accreditation and Education Board (PAEB)
- Professional Accreditation and Education Committee (PAEC)
- Accrediting procedures for graduates of accredited programmes
- Guidelines for the development of educational programmes
- Procedures for the accreditation and reaccreditation of educational programmes
- Guidelines of the Professional Development Year (PDY)
- The National Professional Development Programme (NPDP)
- The Research Policy of the AIR

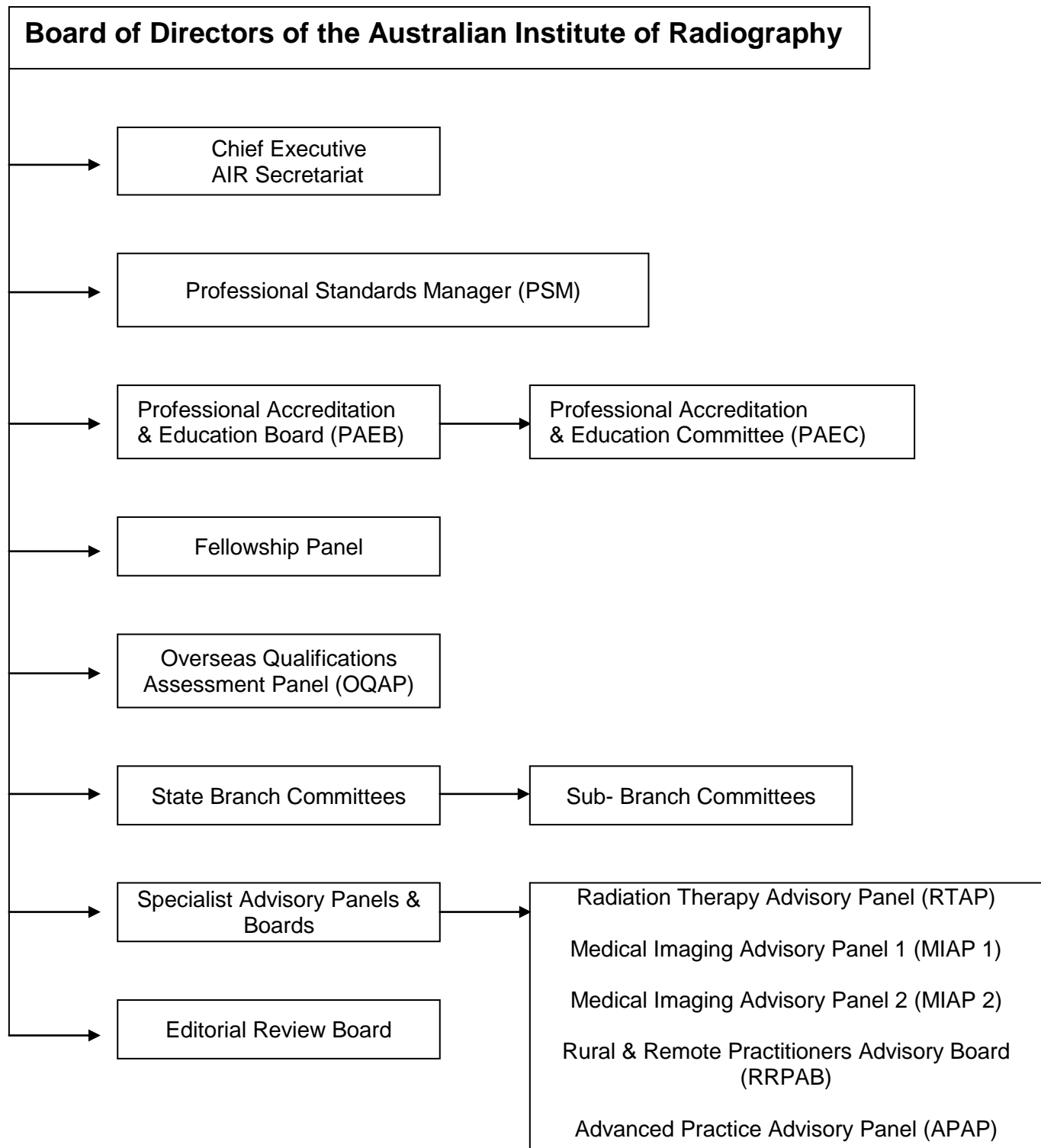
The Education Policy of the Australian Institute of Radiography was first published in 1987 as the Charter and Policies of the Professional Accreditation and Education Board.

In 1992 the Education Policy of the Australian Institute of Radiography incorporating the Accreditation Procedures of the Professional Accreditation and Education Board replaced the Charter and Policies of the Professional Accreditation and Education Board.

This document, the AIR Education Policies December 2010 replaces these previous publications.

Management Structure

The diagram below presents the managerial structure of the Australian Institute of Radiography. This structure allows for the full range of functions that the Australian Institute of Radiography is involved in within Australia.



Abbreviations

AIR	Australian Institute of Radiography
ASMMIRT	Annual Scientific Meeting of Medical Imaging and Radiation Therapy
BoD	Board of Directors of the Australian Institute of Radiography
CBA	Competency Based Assessment
CPD	Continuing Professional Development
CBS	Competency Based Standards
CT	Computed Tomography
CEO	Chief Executive Officer of the Australian Institute of Radiography
FIR	Fellow of the AIR
IMP	Intern Model Programme
MIAP 1	Medical Imaging Advisory Panel 1 – General radiography, CT & MRI.
MIAP 2	Medical Imaging Advisory Panel 2 – Ultrasound & Breast Imaging
MIR	Ordinary Member of the AIR
MRI	Magnetic Resonance Imaging
MRS	Medical Radiation Science
NPDP	National Professional Development Programme
OQAP	Overseas Qualification Assessment Panel
PAEB	Professional Accreditation and Education Board
PAEC	Professional Accreditation and Education Committee
PDY	Professional Development Year
PSM	Professional Standards Manager
RPP	Resumption of Professional Practice
RRPAB	Rural & Remote Practitioners Advisory Board
RTAP	Radiation Therapy Advisory Panel
US	Ultrasound

Definitions

“Medical Radiation Science” is the collective term that includes Radiographers, Radiation Therapists, Sonographers and Nuclear Medicine Technologists.

The term **“Radiographer”** used within this document refers to those professionals that may be called, within Australia and internationally, Radiographer, Diagnostic Radiographer, Medical Imaging Technologist, and Medical Imaging Scientist.

The term **“Radiation Therapist”** used within this document refers to those professionals that may be called or have been called, within Australia and internationally, as Therapeutic Radiographer, Radiation Therapy Technologist and Therapy Radiographer.

The term **“Medical Radiation Science Practitioner”** (or shortened to Practitioner) is used within this document when referring collectively to Radiographers and Radiation Therapists.

Where the term **“member”** is used in this document in relation to a committee or board, it is defined as any Ordinary, Fellow or Life Member of the AIR who holds a Validated Statement of Accreditation.

A **Graduate Practitioner** is a graduate from an AIR accredited Medical Radiation Science programme whom, upon completion of such a programme, would receive the Provisional Statement of Accreditation of the AIR. The graduate practitioner is required to successfully complete the National Professional Development Programme (or formerly the Professional Development Year) of the AIR to gain recognition as an accredited practitioner.

An **Accredited Practitioner** is a practitioner who has achieved a level of competence commensurate with the Competency Based Standards for the Accredited Practitioner (2005) to enable them to accept the responsibilities of practicing independently and be capable of performing the expected role of a practitioner in a sole practitioner situation. An accredited practitioner has either successfully completed the National Professional Development Programme (or formerly the Professional Development Year) and received the Validated Statement of Accreditation, graduated from an AIR accredited programme which satisfies the requirement for the issuing of a Validated Statement of Accreditation, or in the case of an overseas qualified practitioner, has been assessed by the AIR as being equivalent to an AIR accredited practitioner.

The term **“programme”** used in this document refers to a structured academic course of study, such as a Bachelor degree or a Graduate-entry Master degree. Some institutions may use the term “course”.

The term “**unit of study**” used in this document refers to a structured component of an academic programme, and might also be known as a unit, a subject or a course.

The term “**discipline**” used in this document refers to the major professional theme of a MRS academic programme, most commonly medical imaging or radiation therapy. Some institutions may use the terms “strand” or “stream”.

1 The Medical Radiation Science Profession

The AIR has a responsibility to both Australian and International communities to establish and maintain professional and educational standards so that members of the Medical Radiation Science (MRS) profession may contribute to the provision and development of health science and related fields. This may be achieved through the application of clinical practice, education, continuing professional development, and research.

Documents previously published by the AIR have defined the role and function of the practitioner appropriate for that period of development of the profession. These publications include:

- i. The Conjoint Board of the Australian Institute of Radiography and the Royal Australasian College of Radiologists, "Syllabus and Regulations" 1977
- ii. The Role and Function of the Medical Radiographer, Radiographer Education and Professional Qualification, issued by the Federal Council of the AIR 1979 and revised in 1983
- iii. The Role and Function of the Medical Radiographer, Charter and Policy of the Professional Accreditation and Education Board 1987
- iv. The AIR Competency Based Standards 2005 (replacing those of 1992)
- v. The AIR Competency Based Assessment 2009 (replacing those of 2006 & 1995)
- vi. The AIR Educational Policies, June 2010 (replacing those of 2005, 2004 & 1998 and The Education Policy of the AIR 1992)

This document, AIR Education Policies December 2010, defines the MRS profession, in particular medical imaging and radiation therapy and replaces previous versions of the AIR Educational Policies.

This document acknowledges that the MRS profession is a dynamic and expanding profession. There are no specific boundaries of professional practice and, as the understanding and education of MRS develops as technology advances, the role of the MRS practitioner expands into new areas of professional practice and responsibility.

The MRS profession, like other health professions, has a hierarchy of expertise. MRS professionals assume clinical roles ranging from graduate practitioners to experts and specialists. MRS professionals assume upper level management roles such as Chief or Director of MRS services within both the public and private sectors. MRS professionals may assume various roles including higher education and research.

The description of the profession and professional practice within this document, therefore, is written in terms that allow development, expansion and interpretation of the profession and the professional role.

Medical Imaging

Medical Imaging is the professional practice of providing a range of diagnostic imaging examinations and therapeutic procedures using ionising or non-ionising radiation.

This may be done:

- to produce an image to confirm or exclude a clinical diagnosis,
- to assist, monitor and manage treatment processes,
- for screening programs,
- for research.

Medical imaging procedures may include, but not exclusively, general radiography, fluoroscopy, angiography, interventional radiography, computed tomography, computed radiography, mammography, ultrasound, magnetic resonance imaging, bone mineral densitometry and nuclear medicine (nuclear medicine education policies and procedures are not addressed within this document).

Radiographers are health care professionals who provide a range of medical imaging procedures for diagnosis and management of medical conditions, and provide an informed opinion regarding those procedures.

Radiographers are responsible for optimising diagnostic quality whilst maintaining radiation safety. The Radiographer is responsible for the welfare of patients whilst they are in their care.

Key dimensions of the medical imaging profession include:

- Pre-procedure decision making, planning, and evaluation
- Post-procedure decision making, planning, and evaluation
- Patient assessment and welfare
- Clinical methods
- Professional communication
- Image interpretation and evaluation
- Management, administration and legal requirements
- Quality assurance
- Professional education and development
- Promotion of the profession
- Research and development
- Radiation safety

- Occupational health and safety

For further detail regarding the Scope of Practice for an Accredited Medical Imaging Practitioner refer to the Competency Based Standards (2005).

Radiation Therapy

Radiation Therapy is the treatment of malignant and benign disease using ionising radiation.

This may be done:

- to cure disease,
- to palliate the symptoms and signs of disease,
- as a primary treatment modality,
- in combination with other treatment modalities,
- to improve the quality of life,
- for research.

Radiation Therapy procedures may include simulation, planning, kilovoltage & megavoltage external beam treatment, brachytherapy treatment, ancillary equipment development and construction, imaging for treatment planning purposes, stereotactic radiation therapy and radiosurgery.

Radiation Therapists are health care professionals primarily concerned with the design and implementation of radiation treatment and issues of care and wellbeing of people diagnosed with cancer and other conditions.

The Radiation Therapist is required to provide the Radiation Oncologist with an informed opinion about the optimum radiation therapy procedure for each patient, and the welfare and quality of life of patients undergoing radiation therapy treatment. The Radiation Therapist is responsible for the welfare of patients whilst they are in their care.

Key dimensions of the radiation therapy profession include:

- Pre-procedure decision making, planning, and evaluation
- Post-procedure decision making, planning, and evaluation
- Patient assessment and welfare
- Clinical methods
- Professional communication

- Critical reasoning and evaluation
- Management, administration and legal requirements
- Quality assurance
- Professional education and development
- Promotion of the profession
- Research and development
- Radiation Safety
- Occupational Health and Safety

For further detail regarding the Scope of Practice for an Accredited Radiation Therapist refer to the Competency Based Standards (2005).

2 Education Policies

Medical Radiation Science professionals are one of a group of occupations that may be collectively known as the Health Science professions. Health Science professionals work in a wide range of occupational situations. Therefore it is accepted that MRS professionals must possess specific professional understanding (knowledge, skills and attributes) relating to the medical radiation sciences and generic understanding (knowledge, skills and attributes) required of all health science professionals.

Aims of the Education Policies

The aims of the AIR's Education Policies are:

- To ensure that Medical Radiation Science graduates entering the profession possess understanding (knowledge, skills and attributes) appropriate for best professional practice.
- To ensure that MRS educational programmes develop the skills necessary for life-long learning
- To ensure that MRS practitioners possess generic understanding (knowledge, skills and attributes) essential to all health science professionals
- To ensure that appropriate avenues exist for members to gain postgraduate qualifications
- To encourage members to undertake continuing professional development
- To ensure that members have the capacity to, and are encouraged to, undertake research in medical radiation sciences and related fields.

In addressing these aims three distinct levels of education must be considered. The levels that provide the framework upon which these Education Policies have been developed include:

- Those programmes leading to accredited practitioner status in the profession
- Those programmes leading to postgraduate qualifications in specific discipline areas
- Continuing professional education and development

Summary of the Education Policy Statements

POLICY STATEMENT 1

The AIR develops, implements, monitors and accredits education standards for the Medical Radiation Sciences profession.

POLICY STATEMENT 2

The minimum standard of Medical Radiation Science education is to be at the Bachelor degree level (undergraduate pathway) and Master degree level (graduate-entry pathway).

POLICY STATEMENT 3

The AIR requires the development of introductory knowledge and understanding of research and research methods within the undergraduate and graduate-entry pathways into the profession.

POLICY STATEMENT 4

The AIR encourages the participation of graduates in honours programmes.

POLICY STATEMENT 5

The AIR requires a minimum standard of competency in clinical practice.

POLICY STATEMENT 6

The AIR encourages the development of course-work and research-based postgraduate programmes.

POLICY STATEMENT 7

The AIR encourages the development of distance education packages for continuing professional development.

POLICY STATEMENT 8

The AIR encourages the development and distribution of short courses.

POLICY STATEMENT 9

The AIR encourages participation in professionally-based research projects.

POLICY STATEMENT 10

The AIR encourages members to participate in conferences and seminars.

POLICY STATEMENT 11

The AIR encourages publications by members.

POLICY STATEMENT 12

The AIR encourages members to attain the award of Fellowship of the Australian Institute of Radiography.

POLICY STATEMENT 13

The AIR requires participation in continuing professional development.

POLICY STATEMENT 14

The AIR encourages further development of competency in all aspects of clinical practice.

Rationale for the Education Policy Statements

Policy Statement 1

The AIR develops, implements, monitors and accredits education standards for the Medical Radiation Sciences profession.

The AIR, as a national organisation with international and Government collaboration, ensures that practitioners are of a suitable academic and professional standard. It is essential that one body oversee the education standards of Medical Radiation Science Practitioners within Australia and those entering Australia.

Policy Statement 2

The minimum standard of Medical Radiation Science education is to be at the Bachelor degree level (undergraduate pathway) and Master degree level (graduate-entry pathway).

Education at a Bachelor degree level provides the necessary academic entry into the Medical Radiation Science profession via the undergraduate pathway. Education at the Master degree level provides the necessary academic entry into the Medical Radiation Science profession via the graduate-entry pathway.

Policy Statement 3

The AIR requires the development of introductory research methods and projects within the undergraduate and graduate-entry pathways into the profession.

To develop and extend the knowledge of Medical Radiation Science and related fields, research is essential. Practitioners may undertake research in a range of environments such as in a postgraduate programme or in a clinical setting. Many postgraduate programmes feature some form of research project with the depth of research required varying with the award. To enable practitioners to begin to undertake research, a basic knowledge of research methods must be developed at the undergraduate or graduate-entry level.

Policy Statement 4

The AIR encourages the participation of graduates in honours programmes.

An honours degree via the undergraduate pathway should provide graduates with the opportunity to further their understanding of either a specific area of medical radiation science or Medical Radiation Science generally. An honours degree may be used as a pathway to postgraduate higher degrees or professional research.

Policy Statement 5

The AIR requires a minimum standard of competency in clinical practice.

All practitioners must be competent to undertake the clinical and professional roles they assume. See Competency Based Standards for the Accredited Practitioner (2005).

Policy Statement 6

The AIR encourages the development of course-work and research-based postgraduate programmes.

Postgraduate education plays a vital role in providing avenues for professionals to extend their knowledge, skills and attributes in a variety of areas. Members gaining higher degrees should bring increased knowledge, expertise, enthusiasm and recognition to the profession.

Postgraduate awards may be at the level of Graduate Certificate, Graduate Diploma, Master Degree, Doctor of Philosophy, and Professional Doctorate.

Policy Statement 7

The AIR encourages the development of distance education packages for continuing professional development.

Postgraduate education should be available to all members, irrespective of location. The demographic distribution of Australia's population requires some health services to be located in centres quite remote from the larger cities and towns. The development of modules of study or programmes of study delivered by distance education is important in ensuring that members isolated from larger cities have the opportunity to participate in professional education and development.

Policy Statement 8

The AIR encourages the development and distribution of short courses.

State branches of the AIR and educational institutions offer short courses on a variety of topics. These courses play an important role in the delivery of new material at times when developments emerge. Short courses also provide refresher material for practitioners who have not practised for a significant length of time. These courses are able to provide opportunities for members to participate in continuing professional development.

Policy Statement 9

The AIR encourages participation in professionally-based research projects.

Research fosters the development of the profession. Research encourages communication and recognition within and between professions and related discipline areas.

Undertaking research requires knowledge of research methods and collaboration with experienced researchers both within and outside the profession.

Policy Statement 10

The AIR encourages members to participate in conferences and seminars.

Presentations at national and international conferences have continuing educational value in two respects. Firstly, practitioners attending such conferences are able to gain information on a wide range of topics. Secondly, the conference presenter gains substantially from the research associated with the presentation to peers.

State branches of the AIR regularly conduct seminars and workshops on a variety of themes. The AIR encourages the conduct of seminars in the regional centres of each State, so as to ensure all practitioners have the opportunity to maintain and further their knowledge.

Policy Statement 11

The AIR encourages publications by members.

The AIR makes available for all MRS professionals the opportunity to publish the results of research and to comment on professional issues in the professional journal of the AIR.

The AIR also encourages its members to publish in international journals so as to further enhance the reputation of Australian practitioners in MRS.

Policy Statement 12

The AIR encourages members to attain the award of Fellowship of the Australian Institute of Radiography.

Fellowship of the AIR is the highest level of membership and demonstrates a commitment to self-development and the profession.

Fellowship is attained by accumulated points requiring a considerable commitment over an extended period.

Policy Statement 13

The AIR requires participation in continuing professional development.

The AIR defines continuing professional development as the ongoing maintenance and growth of professional excellence through participation in lifelong learning activities which are planned and implemented to achieve this for the benefit of participants, patients and the public.

Activities used by the AIR members for continuing professional development fall into one of five groups:

- organised programmes,
- writing / publication,
- self-directed learning,
- professional services
- other individual choice activities.

The AIR conducts programmes to assist members in gaining credits for their triennium CPD programme. The maintenance of a Validated Statement of Accreditation is dependent upon successful completion of the AIR CPD programme or a comparable equivalent.

Policy Statement 14

The AIR encourages further development of competency in all aspects of clinical practice.

The community expects and the profession requires that all practitioners, including recent graduates and experienced professionals, are competent in the procedures that they will undertake in the clinical setting. Clinical competence should be promoted and emphasised from undergraduate education to continuing education.

3 Professional Accreditation and Education Board

The Professional Accreditation and Education Board (PAEB) was established to advise the Board of Directors on matters related to undergraduate, graduate-entry and postgraduate education and development of the Medical Radiation Science profession.

Responsibilities

- Develop and implement policies related to the education and development of the Medical Radiation Science profession.
- Define the Competency Based Standards incorporating the Scope of Practice for the Radiographer and Radiation Therapist.
- Develop the Competency Based Assessment process and tools for the assessment of radiographers and radiation therapists where such an assessment is deemed necessary.
- Develop the educational and professional requirements necessary for attaining the Provisional Statement of Accreditation and the Validated Statement of Accreditation.
- Establish and publish guidelines for the development of Medical Radiation Science courses leading to provisionally accredited and accredited practitioner levels in the profession.
- Establish procedures for the accreditation and reaccreditation of educational programmes leading to provisionally accredited and accredited practitioner levels in the profession.
- Undertake accreditation processes of undergraduate and graduate-entry Medical Radiation Science programmes and other programmes as required.
- Issue the Provisional Statement of Accreditation.
- Recommend the issue of a Validated Statement of Accreditation.
- Liaise with the AIR advisory panels, committees, boards and the Board of Directors on educational matters.

- Promote continuing professional development.
- Develop, maintain and promote the Education Policies document of the AIR.
- Liaise with the PAEC in each State in implementing educational policy and procedures.
- Establish the process for the issuing of the Provisional Statement of Accreditation and the Validated Statement of Accreditation.
- Develop guidelines for the conduct of the National Professional Development Programme and the Professional Development Year.
- Liaise with each state PAEC regarding the National Professional Development Programme and the Professional Development Year.
- Encourage participation in the AIR CPD programme by graduates in the National Professional Development Programme and the Professional Development Year.
- Consider appeals/failures/exemptions resulting from the National Professional Development Programme and the Professional Development Year.
- Assess new or current overseas undergraduate and graduate-entry programmes.
- Monitor opportunities for continuing and postgraduate education.
- Maintain the Competency Based Standards, Competency Based Assessment & Resumption of Professional Practice documents.
- Act as the facilitators of Competency Based Assessments & Resumption of Professional Practice programmes.
- Encourage research by members.

- Provide the Board of Directors with minutes of meetings and lists of correspondence.
- Provide the Board of Directors with an annual report and the following year's budget by mid-October

Membership

The membership of the PAEB shall consist of a minimum of six and a maximum of eight members who hold a current Validated Statement of Accreditation or equivalent, comprising the following categories:

- One member shall be appointed from each State.
- It shall include at least one Radiographer, one Radiation Therapist and one Medical Radiation Science academic. A Medical Radiations academic is defined as a member of the AIR holding a fulltime appointment in an institution conducting an AIR accredited course.
- A member of Board of Directors may be appointed to the PAEB from time to time as Board of Directors deem necessary. It is noted that all members of Board of Directors are ex-officio members of the PAEB. PAEB may co-opt consultants as deemed necessary.

Term of office

The members of the PAEB shall hold office for two years, but upon retiring shall be eligible for reappointment, serving a maximum of three consecutive terms of office or as determined by the Board of Directors.

The PAEB members from Victoria, New South Wales and Queensland shall be nominated in odd-numbered years. The members from Western Australia, South Australia and Tasmania shall be nominated in even-numbered years.

Appointments

At least one month prior to the Board of Directors' meeting in November, at which members of the PAEB will be appointed, State Branch committees shall provide nominations for appointment to the PAEB. Three nominations from the Branch committees shall be made and shall include one Radiographer, one Radiation Therapist and one Medical Radiation Science academic.

Appointments of all members of the PAEB shall be made by Board of Directors from respective State Branch committee nominations. Any variation of these requirements can only be made with the approval of the Board of Directors. Appointments shall take effect from the first day of January in the year following the Board of Directors' November meeting.

Casual Vacancies

The Board of Directors will appoint a member to fill any casual vacancy occurring on the PAEB from nominations received from the relevant State Branch committee or as determined by the Board of Directors. The member so appointed shall retain office only so long as the vacating member of the PAEB would have retained office if the vacancy had not occurred.

Office Bearers

Officers of the PAEB shall be elected annually. Two officers shall be appointed: Chairman and Honorary Secretary. Election of office bearers shall take place at the first meeting of the PAEB held after the 1st of January each year. The Chairman shall be elected for one term of office with a possibility of one further consecutive term or as determined by the Board of Directors. The Honorary Secretary shall be eligible for re-election.

Meetings

The venue for meetings of the PAEB shall be the Secretariat of the AIR, or such alternative location as is agreed upon.

Four members of the PAEB will constitute a quorum.

Two meetings per year will be held at such times as determined by the PAEB, subject to the approval of the Board of Directors. Such meetings shall be held at least six weeks prior to a scheduled Board of Directors meeting to ensure minutes are available for the subsequent Board of Directors meeting (with the ASMMIRT meeting exempt from this requirement), or at other times by agreement with the Board of Directors. In extenuating circumstances, and with the approval of the Board of Directors, additional meetings may be held when called for by the Chairman, or three or more members of the PAEB.

Each member shall be entitled to one vote at any meeting of the PAEB. The Chairman shall have a casting vote in addition to the vote to which the Chairman is entitled as a member. If a member of the PAEB is unable to attend any meeting, a member of the State Branch shall be entitled to attend on the member's behalf. The appointment of their proxy shall be made in a manner acceptable to the State Branch committee and the Board of Directors. Each question submitted to a meeting of the PAEB shall be decided by a majority vote.

A copy of the unconfirmed minutes of each meeting of the PAEB shall be forwarded to the Executive Officer within 30 days of the meeting.

4 Professional Accreditation and Education Committee

The Professional Accreditation and Education Committee is a sub-committee of the PAEB and was established to implement within its area of jurisdiction the nationally held educational and development policies of the AIR.

Responsibilities

- Implement the education and development policies of Board of Directors and the PAEB at the State Branch level
- Promote continuing professional development
- Implement and administer the Professional Development Year and to promote participation in the AIR CPD programme by those undertaking the Professional Development Year
- Ensure that, within the geographical area of jurisdiction of the PAEC, the education guidelines of the PAEB regarding academic programmes are fulfilled. For the purpose of this clause, the geographical area of jurisdiction of the PAEC shall equate with the geographical area of jurisdiction of the relevant State Branch as defined in the Clause 17 of the Constitution of the AIR.
- Inform the PAEB of any changes or proposed changes to existing educational programmes or proposals for additional programmes, in the area of the PAEC's jurisdiction, and to recommend a course of action to the PAEB to accommodate changes which have been made or are proposed
- Grant, upon application and following consultation with the PAEB, deferment of the Professional Development Year to graduates of approved courses within the PAEC's jurisdiction
- Provide a recommendation to the PAEB on any application for exemption to all or part of the Professional Development Year
- Process applications for the Validated Statement of Accreditation from graduates within the area of jurisdiction of the PAEC and recommend to the PAEB that the Validated Statement of Accreditation be issued
- Supervise and assess any additional clinical experience which may be required of graduates from an approved programme, prior to their being eligible for the Validated Statement of Accreditation
- Inform students of the requirements for the National Professional Development Programme during their first and final years in relevant accredited programmes
- Advise other relevant PAECs, the PAEB and the Secretariat of known movements interstate during the Professional Development Year
- Report annually, in writing, to the PAEB (October) and the relevant State Branch committee (at State Branch annual meeting)
- Institute and promote continuing education courses

- Provide the PAEB at the beginning of each calendar year with:
 - A list of office bearers of the PAEC
 - The address for correspondence of the Chairman and Honorary Secretary of the PAEC
 - A list of co-opted consultants and an indication of their area of expertise

Membership

The membership of a PAEC shall consist of a minimum of three and a maximum of six all of whom must be members of the AIR who hold a current Validated Statement of Accreditation.

The members of the PAEC shall include one Radiographer, one Radiation Therapist, the PAEB member from that State and one representative from the institutions conducting AIR accredited Medical Radiation Science programmes in that State.

A PAEC may co-opt consultants as deemed necessary.

In the event of no member of the PAEC being a member of the State Branch committee, a liaison member of the Branch committee shall be appointed as an ex-officio member of the PAEC, without the right to vote.

Term of Office

The members of a PAEC shall hold office for two years but upon retiring shall be eligible for reappointment serving a maximum of three consecutive terms of office or as determined by the State Branch committee.

Appointments

The PAEB shall appoint the persons nominated by the State Branch committee to the PAEC of that State.

At least two months prior to the annual meeting at which the PAEC nominees are selected, the State Branch committee shall call for nominations for the PAEC. State Branch committee nominations shall be forwarded to the Secretary of the PAEB by the first day of December in the year in which they are made.

Appointments by the PAEB shall take effect on the first day of January in the year following that in which nominations are received from a State Branch committee. The State Branch should ensure a rotation of membership such that half of the members of the PAEC shall be elected in each year.

Casual Vacancies

Casual vacancies on the PAEC shall be appointed by the PAEB from State Branch committee nominations. The member so appointed shall retain office for only as long as the vacating member of the PAEC would have retained office if the vacancy had not occurred.

Office Bearers

Office bearers of the PAEC shall be elected annually from the members of the PAEC. The election shall be made by the full membership of the PAEC. The two officers appointed shall be the Chairman and Honorary Secretary/Treasurer. Election of office bearers shall take place at the first meeting of a PAEC held in each calendar year. Retiring officers shall be eligible for re-election.

Meetings

The Venue for meetings of a PAEC shall be as determined by the members of the PAEC from time to time.

Three members of the PAEC shall constitute a quorum.

Meetings may be held when called for by the Chairman or three members of the PAEC.

Each member of the PAEC shall be entitled to vote at any meeting of the PAEC, and shall have one vote. The Chairman shall have a casting vote in addition to the vote to which the Chairman is entitled as a member. Every question submitted to a meeting shall be decided by a majority vote.

Minutes of meetings shall be kept and unconfirmed copies forwarded to the Secretary of the PAEB following each meeting.

A high level of communication should be maintained between the PAEC and the relevant State Branch committee via the liaison member and the submission of a report to every Branch meeting.

5 Accreditation of Professional-entry MRS programmes

The purpose and process of the AIR's accreditation of professional-entry MRS programmes is fully described in the document Accreditation of Professional-entry Programmes in Medical Imaging and Radiation Therapy (2010) available from the website www.air.asn.au.

6 Provisional & Validated Statements of Accreditation

The AIR has established two levels of accreditation for graduates from AIR accredited programmes conducted by universities within Australia and overseas qualified practitioners assessed as acceptable by the AIR. These are the Provisional Statement of Accreditation and the Validated Statement of Accreditation.

This section outlines:

- the procedures a graduate from an accredited programme within Australia must undertake to obtain the Validated Statement of Accreditation from the AIR, and
- the procedures an overseas qualified practitioner must undertake to obtain the Validated Statement of Accreditation.

Graduate Practitioner

A graduate practitioner is a graduate from an AIR accredited Medical Radiation Science programme whom, upon completion of such programme, would receive the Provisional Statement of Accreditation from the AIR. The graduate practitioner is required to successfully complete the National Professional Development Programme (or formerly the Professional Development Year) to gain recognition as an accredited practitioner.

Accredited Practitioner

An Accredited Practitioner is a practitioner who has achieved a level of competence commensurate with the Competency Based Standards for the Accredited Practitioner (2005) to enable them to accept the responsibilities of practicing independently and be capable of performing the expected role of a practitioner in a sole practitioner situation.

An accredited practitioner has either successfully completed the National Professional Development Programme (or formerly the Professional Development Year) and received the Validated Statement of Accreditation, graduated from an AIR accredited programme which satisfies the requirement for the issuing of a Validated Statement of Accreditation, or in the case of an overseas qualified practitioner, has been assessed by the AIR as being equivalent to an AIR accredited practitioner.

Procedures for gaining a Validated Statement of Accreditation

Graduates of Australian Programmes

Procedure 1:

This procedure is followed by graduates from a programme that is accredited by the PAEB to produce graduate practitioners at the conclusion of the programme. These graduates will be eligible for Provisional Accreditation status. Upon satisfactory completion of the National Professional Development Programme (or formerly the Professional Development Year), the graduate may apply for the Validated Statement of Accreditation.

or

Procedure 2:

This procedure is followed by graduates from a programme that is accredited by the PAEB to produce accredited practitioners at the conclusion of the program. These graduates will be eligible for a Validated Statement of Accreditation without the requirement of a National Professional Development Programme.

Graduates of Non-Australian Programmes

Procedure 3: (Approved International Programmes)

This procedure is followed by overseas graduates where the program has been accredited by the PAEB and the graduate has completed 12 months of satisfactory clinical experience within the first three years following graduation. Such graduates will be eligible for a Validated Statement of Accreditation.

or

Procedure 4: (Non-approved International Programmes)

This procedure is followed by graduates from international programmes that have not been accredited by the AIR. All overseas graduates must successfully apply to the AIR for assessment of their qualifications before being eligible for a Validated Statement of Accreditation.

Applying for Statements of Accreditation

Provisional Statement of Accreditation:

Practitioners eligible for the Provisional Statement of Accreditation should complete the application form for a Provisional Statement of Accreditation available at www.air.asn.au, obtain validation from the appropriate university co-ordinator and forward the application with the prescribed fee to the AIR Secretariat.

Validated Statement of Accreditation:

Practitioners eligible for the Validated Statement of Accreditation should complete the application form for a Validated Statement of Accreditation available at www.air.asn.au and forward it to:

The National Professional Development Programme Co-ordinator if completing the National Professional Development Programme

or

The Honorary Secretary or nominee of the relevant State PAEC with the original of the final assessment report if completing the Professional Development Year.

or

The Honorary Secretary or nominee of the relevant State PAEC if a graduate from a programme that is accredited by the PAEB to produce accredited practitioners at the conclusion of the programme.

or

The AIR Secretariat if being awarded a Validated Statement of Accreditation as directed by the Overseas Qualification Assessment Panel or the PAEB.

Appeal Process

Procedure 1 (Graduates of Australian Programmes)

Appeals against non-eligibility for a Validated Statement of Accreditation should be directed to the relevant PAEC. The PAEC will forward a recommendation to the PAEB. Appeals against PAEC decisions should be directed to the PAEB.

Procedure 3 & 4 (Graduates of International Programmes)

Appeals by applicants from international programmes should be directed to Board of Directors of the AIR.

In all cases a written appeal with supporting documentation is required and must be received within 28 days of notification of lack of eligibility. In all cases, appeal decisions will be reviewed and ratified by Board of Directors of the AIR and notification will be made by Board of Directors.

Note that, as successful completion of academic requirements for procedure 2 leads to a Validated Statement of Accreditation, appeals to the AIR or PAEB are not possible.

7 National Professional Development Programme

Comprehensive details of the National Professional Development Programme are described in the NPDP Guide available at the AIR website www.air.asn.au.

8 Professional Development Year

No new enrolments to the Professional Development Year (PDY) will occur after 1 November 2010.

The following information is applies to graduate practitioners who commenced the PDY prior to 1 November 2010.

In 1992 the AIR introduced the PDY. This is a requirement for all graduate practitioners to become eligible for a Validated Statement of Accreditation, the requirement for Ordinary Membership of the AIR. The PDY is a mediated entry to the profession, allowing the further development of clinical competency based on skills and knowledge acquired during the undergraduate programme.

The rationale for implementing the PDY was:

That a graduate practitioner in the first postgraduate year will require the guidance of more experienced practitioners in their field of Medical Radiation Science

and

That a graduate practitioner is not placed in a sole practitioner situation as this is not considered an appropriate environment compatible with mediated entry to the profession that facilitates further development of clinical skills and competencies and requires the guidance of more experienced practitioners in their field of Medical Radiation Science.

This policy document establishes the national requirements for the PDY. The requirements, conditions, responsibilities and forms of assessment will:

- Be the minimum standard implemented nationally,
- Fulfil the conditions necessary for a graduate practitioner to become eligible for a Validated Statement of Accreditation,
- Not permit the PDY to be undertaken overseas. Should international students undertaking entry-level Medical Radiation Science programmes in Australia require the AIR Validated Statement of Accreditation they must complete the PDY in Australia. Universities should inform students of this requirement prior to their commencing the programme.

Expectation of the PDY

The PDY should ensure that the graduate practitioner develops the necessary competencies of the Accredited Practitioner: see the AIR Competency Based Standards for the Accredited Practitioner (2005). It would be expected that the PDY will incorporate controlled introduction of those elements which lead to independent practice.

Following successful completion of an Interim PDY assessment at the 24-week (full-time equivalent) point and with employer approval these elements may include:

Medical Imaging

- responsibility for a specific area, room or case load ,
- shifts (where multiple accredited practitioners are rostered), and,
- supervised on-call work.

Radiation Therapy

- responsibility for a case load,
- shifts (where multiple accredited practitioners are rostered)

These elements may be undertaken without immediate supervision following satisfactory completion of the interim PDY assessment, but with access to supervision at all times. It is expected that this supervision would be available on-site, where support, inquiry and review are available as required. It is expected that ongoing mentoring from an appropriate clinical supervisor will occur during these periods.

Graduate Practitioner

A graduate practitioner is a graduate from an AIR accredited Medical Radiation Science programme whom, upon completion of such a programme, would receive the Provisional Statement of Accreditation of the AIR. The graduate practitioner is required to successfully complete the PDY of the AIR to gain recognition as an accredited practitioner.

Graduate Practitioner Medical Imaging

The graduate practitioner is expected to competently undertake the following procedures with a degree of supervision commensurate with experience: the radiographic examinations of the skeletal, alimentary, genitourinary, hepatobiliary and respiratory systems in situations that do not require medically urgent action and, where available, commonly performed operative theatre procedures and ward radiography.

Graduate Practitioner Radiation Therapy

The graduate practitioner is expected to competently perform the following with a degree of supervision commensurate with experience: assume a responsible role in simulation, planning, treatment, quality assurance & quality control, in routine external beam radiation therapy procedures.

Accredited Practitioner

An Accredited Practitioner is a practitioner who has achieved a level of competence commensurate with the Competency Based Standards for the Accredited Practitioner (2005) to enable them to accept the responsibilities of practicing independently and be capable of performing the expected role of a practitioner in a sole practitioner situation. An accredited practitioner has either successfully completed the National Professional Development Programme (or formerly the Professional Development Year) and received the Validated Statement of Accreditation, graduated from an AIR accredited programme which satisfies the requirement for the issuing of a Validated Statement of Accreditation, or in the case of an overseas qualified practitioner, has been assessed by the AIR as being equivalent to an AIR accredited practitioner.

Structure of the Professional Development Year

The purpose of the PDY is to allow the graduate practitioner mediated entry into the profession. The PDY should be structured so this development can occur.

Duration of PDY

The PDY must be undertaken during employment with or attachment to an accredited clinical centre, on a full-time, part-time or locum basis and will commence on the first day of employment or attachment. The PDY is 48 weeks full-time equivalent, and must be completed within 3 years of graduation. Under extenuating circumstances, however, approval may be sought from the PAEB for an extension of the 3-year requirement.

Commencement of PDY

Students must have successfully completed all programme requirements and be eligible to graduate prior to commencement of the PDY period. Graduate practitioners must have been issued with a Provisional Statement of Accreditation prior to the commencement of the PDY.

Assessment

Documented assessment of the graduate practitioner's skills, competencies and professional attributes at the Interim (24-week) and Final (48-week) points of the PDY period must be undertaken. This assessment should be forwarded to the relevant State PAEC within 14 days of these periods.

Assessment shall not only be on clinical skills but also on adherence to the AIR Guidelines for Professional Conduct for Radiographers and Radiation Therapists and the professional attributes exhibited during the PDY.

Satisfactory assessment

Satisfactory assessment certified at the Final 48-week point by the clinical supervisor(s) will qualify the graduate practitioner to be eligible for the Validated Statement of Accreditation and satisfy Ordinary Membership criteria of the AIR. The Interim assessment is an indication of the progress of the graduate and addresses possible areas where additional attention may be required to achieve a satisfactory Final assessment.

Should a graduate undertake their PDY in more than one clinical centre, an Interim report should be completed by each clinical centre at the completion of each period of employment.

Assessment forms for the PDY can be downloaded from the AIR website www.air.asn.au.

Accredited Clinical Centres

An accredited clinical centre is one that meets the following requirements:

- **Range of procedures:** Provides the range of experience such that graduate practitioners have the opportunity to satisfactorily complete the PDY and reach the level of accredited practitioner.
- **Staffing:** For Medical Imaging have a minimum staffing ratio of 1 full-time AIR accredited Radiographer per graduate practitioner, and for radiation therapy have a minimum staffing ratio of 2 full-time AIR accredited Radiation Therapists per graduate practitioner. Sole practice locations are not eligible for accreditation.
- **Supervision:** Provides the graduate practitioner with supervision, facilitation and mentoring by experienced accredited practitioner/s. The level and degree of supervision will be in accordance with the requirements as specified in the "Expectation of the PDY"

- **Sole Practice Centres/Situations:** Are not considered as appropriate environments in which a PDY graduate practitioner could achieve the required mentored entry into the profession. Sole practice situations are defined as those where the graduate practitioner is alone and does not have the professional support of an accredited practitioner who is a full-time employee of the institution.

Approval as an accredited clinical centre is made by application to the State PAEC. Such accreditation will be valid for 5 years unless reviewed or revoked or otherwise specified by the State PAEC. Changes to structure or staffing at a centre may require a reaccreditation application. The clinical centre may be a public or private hospital or a private or group practice. In the instance of a group practice each site shall be accredited independently to ensure all conditions such as staffing ratios and range of procedures are met.

Suitable Clinical Supervisor

A suitable clinical supervisor is a practitioner who holds a Validated Statement of Accreditation issued by the AIR and who conforms to the AIR Guidelines for Professional Conduct. The accredited clinical centre's nominated clinical supervisor is responsible for completing the Interim and Final PDY assessment forms and for discussing these with the graduate practitioner.

Clinical Rostering

The accredited clinical centre should roster the graduate practitioner across the range of clinical areas to facilitate the development of skills consistent with professional expectations to fulfil the Scope of Practice for an accredited practitioner by providing opportunities for the graduate to meet the competency requirements of the PDY assessments. The clinical supervisor(s) must be able to verify that the graduate practitioner has reached the standard of accredited practitioner.

Variations of the PDY

Deferments

Deferments of any form may be granted upon application to the PAEC in the State in which the graduate practitioner completed their bachelor degree. An application for deferment must be received by the PAEC within 2 years of completion of an approved programme of study.

Exemptions

Applications for exemption from any or all of the PDY shall be made through the PAEC of the State in which the graduate practitioner completed their programme of study. The PAEC will forward this request to the PAEB. A letter confirming receipt of the application shall be sent to the applicant by the PAEC. The PAEB shall deal with the exemption application promptly and shall notify the applicant and the PAEC concerned and the State regulating authority of the outcome of their decision.

Appeals

An applicant may lodge an appeal against the outcome of the PDY assessment/s. Appeals should be directed to the relevant PAEC within 14 days of receipt of the assessments or recommendation. The PAEC will investigate the appeal both with the graduate practitioner and the clinical supervisor, and forward a recommendation to the PAEB within 14 days of receipt of the appeal. The PAEB will forward a written recommendation with supporting documentation to Board of Directors for a final decision.

An applicant may lodge an appeal against the outcome of a request for exemption from the PDY if additional, new supporting evidence is available. Appeals should be directed to the PAEB within 14 days of receipt of the initial advice of outcome. The PAEB will investigate the appeal in the light of the additional evidence, and forward a recommendation within 14 days of receipt of the appeal to the Board of Directors.

Exceptional Circumstances

Notwithstanding that all graduate practitioners must undertake the PDY in its full form the PAEB will review applications of exceptional circumstances. If a determination of clinical competence is required a CBA may be recommended.

Where the PDY is not completed within the recommended 3 year period, the PAEB will first assess the applicant against the Competency Based Standards for the Accredited Practitioner (2005) and then consider the options, which may include but are not limited to:

- Complete the PDY with additional formal study of contemporary clinical and professional practice
- Complete the PDY without additional formal study of contemporary clinical and professional practice
- Undertake a Competency Based Assessment
- Decline the applicant's request

Responsibilities of the Graduate Practitioner undertaking the PDY

- Inform the State PAEC in the state of graduation when he or she is undertaking a PDY interstate
- Ensure that the PDY is undertaken at an accredited clinical centre
- Inform the State PAEC of the clinical centre/s where and when the PDY is being undertaken
- Inform the employer that the graduate practitioner is undertaking a PDY
- Ensure that the Application for Provisional Statement of Accreditation has been completed, signed and submitted to the University Coordinator prior to commencement of the PDY
- Notify State PAEC if the graduate practitioner becomes aware that conditions in the accredited clinical centre change or if experience is not meeting the expectations of the Competency Based Standards for the Accredited Practitioner (2005).
- Ensure that Interim and Final PDY assessments are completed within the stipulated timeframe and forwarded to the relevant State PAEC.

Professional Development Year CPD Programme

- Graduate practitioners are encouraged to join the AIR's PDY CPD Programme. CPD undertaken during the PDY will assist each graduate practitioner participant to:
- Clearly identify their professional goals for the future;
- Attain individual professional goals by providing a structured process and the necessary infrastructure;
- Consolidate the foundation for individual lifelong learning;
- Develop and maintain high standards of clinical practice;
- Gain new knowledge, skills and attributes;
- Demonstrate accountability through certification of professional development.

Details of the PDY programme are available from the AIR website www.air.asn.au.

Responsibilities of the State PAEC with respect to the PDY

Each PAEC is responsible for:

- Preparing and maintaining a comprehensive register of accredited clinical centres and their nominated clinical supervisors. This register should include accreditation dates and placement numbers for PDYs;
- Accrediting clinical centres for a specified number of graduate practitioners and for a period of up to five years;
- Implementing the format of the PDY as specified by the PAEB and the Education Policy of the AIR;
- Maintaining a register of all graduate practitioners undertaking the PDY who have graduated from universities located within the PAEC's jurisdiction. This register shall include graduate practitioners who are undertaking their PDY in another State or Territory of Australia' the starting date of the individual beginning practitioner's PDY and any variations which may arise during the PDY;
- Update and review the register of accredited clinical centres;
- Ensuring that verification of the graduate practitioners' satisfactory progress is completed at the end of the 24th (equivalent) week and at the conclusion of the PDY (48th week or equivalent) for all graduate practitioners on their register;
- Advising the Secretariat of those graduate practitioners who have successfully completed the requirements of the PDY by forwarding the graduate's application for the Validated Statement of Accreditation to the Secretariat.
- Mediating disputes between the graduate practitioner and the clinical supervisor where disagreement exists concerning a PDY assessment. The PAEC will instigate, review and report the outcome to the PAEB. Where a disputed report is confirmed, the PAEC report will detail those competency or clinical experience areas which are unsatisfactory;
- Collecting data on staffing profiles and the range of examinations for each accredited clinical centre. At the time of receipt of reports from the clinical centre, the PAEC will ensure that the number of graduate practitioner places does not exceed the approved number;
- Ensuring that accredited clinical centres maintain their accreditation via a short annual questionnaire that ensures staffing ratios and range of clinical experiences have not altered and confirming the nominated clinical supervisor.
- Withdraw accreditation from those clinical centres which no longer fulfil the guidelines of a satisfactory clinical centre. Three (3) months notice must be given in this event and clinical centres affected may appeal to the PAEB within 28 days of notification.
- Inform other State PAECs of the names of graduates undertaking or transferring the PDY to a State different from that where the undergraduate degree was awarded.

9 Fellowship

The highest category of membership within the AIR is that of Fellow. Recipients of this award will have demonstrated an extensive knowledge of medical imaging or radiation therapy.

Comprehensive details of the Fellowship process are described in the document Fellowship Guidelines 2010 available at the AIR website www.air.asn.au.

10 Research Policy of the Australian Institute of Radiography

The AIR supports the concept of a strong base in research as a vital component in the development of the profession. Research is an integral part of any profession as it leads to professional development and growth. Concrete and abstract concepts, which are critically analysed and researched, lead to innovation and development.

Undergraduate and graduate-entry students are encouraged, through investigative or inquiry-based projects, to develop an understanding of research and evidence-based practice. These basic tools are further developed and refined at the postgraduate level, so that prospective researchers are thoroughly acquainted with research design, methods and skills.

Policy on Research

The AIR encourages a positive research & development environment, and acts as a facilitator in promoting increased awareness and opportunities for members to embark on research projects. The AIR encourages the publication and presentation of all research activities locally and internationally. The AIR supports the publication and presentation of research activities in “The Radiographer” and at the AIR ASMMIRT. The AIR encourages practitioners to be active and critically reflective consumers of relevant research.

Strategy

The AIR should provide opportunities through Panels, State branches and Sub-branches so that all individuals and groups are able to embark on research projects. Members shall be encouraged to present research findings at the scientific meetings of the AIR and to publish their papers in “The Radiographer”, the peer-reviewed scientific journal of the AIR

The AIR will support members to undertake relevant research projects relating to medical radiation science by offering two research scholarships annually, one each for a medical imaging member and a radiation therapy member. The research scholarships will be administered by the PAEB.

Action

The AIR shall:

- Promote the AIR research policy to members and universities;
- Encourage participation in research as a major means of achieving the requirement of CPD;
- Investigate industry contacts for research sponsorship or scholarship;
- Establish a scholarship to allow support during postgraduate studies for research Masters or PhD students in Medical Radiation Science or related fields;
- Maintain a research grants program with suitable guidelines that focus research activities to Medical Radiation Science;
- Clarify the legal position of ownership for sponsored activity;
- Promote existing funds e.g. Nicholas Outterside trust fund;
- Provide opportunities for operators of postgraduate programs to promote courses in printed journals and by advertising on AIR websites;
- Increase the number of papers published in “The Radiographer” and “Spectrum”;
- Continue to develop “The Radiographer” as a high quality publication;
- Continue with the peer review process for “The Radiographer” and encourage the Editorial Review Board to rapidly process proffered papers and promote publication of research;
- Develop annual awards to reward original research papers at national conferences and original research publications in “The Radiographer”;
- Encourage the use of expert speakers by State branches;
- Include research workshops/sessions at national conferences.

The AIR, through the strategies outlined, is committed to developing a strong research culture in the profession. The AIR will attempt to encourage all members to develop a research and publication/presentation focus in the clinical and academic arenas and to utilise all available resources.

The AIR believes this commitment to research will ensure the continuing development of the roles of Medical Radiation Sciences practitioners and the profession.

11 Magnetic Resonance Imaging

Comprehensive details of MRI accreditation and guidelines for development of programmes in MRI are available at the AIR website www.air.asn.au.

12 Breast Imaging

Comprehensive details of certification in mammography and guidelines for the development of programmes in mammography are available at the AIR website www.air.asn.au.

13 Continuing Professional Development

Comprehensive details of the AIR Continuing Professional Development Programme are described in the document Guide to AIR Continuing Professional Development Triennial Programme 2007 available at the AIR website www.air.asn.au.

14 Resumption of Professional Practice

Comprehensive details of the AIR Resumption of Professional Practice Programme are described in the document Resumption of Professional Practice 2010 available at the AIR website www.air.asn.au.