

# ASMIRT



**Annual Report** 



Australian Society of Medical Imaging and Radiation Therapy Annual Report 2023

# Published by

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# **Postal address**

PO Box 16234 Collins Street West VIC 8007

T +61 3 9419 3336 F +61 3 9416 0783 E info@asmirt.org www.asmirt.org

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We acknowledge the Traditional Custodians of the lands and seas upon which we and our members work and live. We pay our respects to Elders, past, present and emerging.

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#### The Year at a Glance



# Member Engagement

- 10,000 practitioners celebrated NRRTW in 2023
- LinkedIn followers increased by 70%
- JMRS CT Virtual Issue promoted to 95 countries
- Social media followers surpassed number of members

# **Member Services**

- More than 7200 calls taken
- 98% of enquiries resolved in one call
- Email enquiries outstripped calls three to one
- Members saved \$48,000 on purchases through Member Advantage
- Membership renewals grew in 2023

# **Conference and Events**

- 4429 registrations for events
- More than 600 students registered for events
- A record 71 events were conducted
- Over 215 hours of CPD were delivered
- New masterclasses in Townsville and Darwin

# Advocacy

- The Secretariat contributed to 13 major consultations
- Precis of these consultations were sent via eNews
- Eight advocacy-related articles were published in Spectrum
- We received calls from members daily seeking advice, outside of membership

# JMRS

- Gained first Impact Factor of 2.1
- Over 500,000 full-text article viewings
- Radiation therapy article had the highest citations at 73
- Medical imaging article downloaded 13,749 times
- Seven virtual issues and themed collections produced

# Professional Development

- 98% of CPD enquiries closed within 24 hours
- Eight main hospitals supported their staff with access to the ASMIRT CPD portal
- 116 organisations were endorsed to run ASMIRT-recognised events and programs
- Over 215 hours of CPD were delivered

# Grants and Scholarships

- 20 Rural Clinical Placement Scheme grants were issued
- Three Research Grants were awarded
- Two Postgraduate Study Scholarships were awarded
- Establishment of the Dorothy Lorimer Bursary



# Message from the President



collaboration. And out of those collaborations have emerged great outcomes for our members, the broader medical radiation practitioner community and, most importantly, our patients.

This has been a year of

Carolyn Heyes President

ASMIRT collaborated with the Rural Alliance in Nuclear Scintigraphy (RAINS) on the delivery of the largest medical radiation practitioner education event in Australasia, ASMIRT

2023 in Sydney. National conferences are a great opportunity to catch up with people you rarely see and provide a solid base for cross-disciplinary learning and collaboration. The scientific program was simply outstanding in its quality and diversity. My thanks go to the Conference Convenor Johnathan Hewis for his incredible energy and enthusiasm. I would also like to thank Adam Steward, Dr Geoff Currie, Dr Yolanda Surjan, Dr Yobelli Jimenez and Dr Andrew Kilgour as Scientific and Workshop Chairs for bringing their specific areas of expertise.

# This has been a year of collaboration

The annual conference is where we present the Society's awards. I was proud to present the Nicholas Outterside Medallion to Cherry Agustin, Anthony Buxton and Dr Andrew Kilgour; Life Membership to Jacobus (Jim) de Jong; and the inaugural Board of Directors Award to Elizabeth Phillips. These members have provided outstanding service to the Society over many years and are significant role models for the newer members of our professions. Fellowship was awarded to Dr Giovanni Mandarano, Dr Yolanda Surjan and Andrew Murphy. Andrew was also conferred with Advanced Practitioner status. The prestigious Varian Award was presented to Dr Nigel Anderson. An outstanding group of individuals.



(Above): Nicholas Outterside Medallion recipient, Cherry Agustin



(Above): Nicholas Outterside Medallion recipient, Anthony Buxton



(Above): Nicholas Outterside Medallion recipient, Dr Andrew Kilgour

A full list of Life Membership and Nicholas Outterside Medallion recipients can be found on page 10; Fellows and Advanced Practitioners can be found on page 15.



(Above): Life Membership recipient, Jacobus de Jong



(Above): Board of Directors Award recipient, Elizabeth Phillips



(Above): Varian Award recipient, Dr Nigel Anderson

I would also like to congratulate the winners of our annual Research Scholarships and I know they will collaborate with their peers to make the best of their research. Congratulations go to Dr Karen Dobeli, recipient of the Research Scholarship (Imaging); Dr Vikneswary Batumalai, recipient of the Research Scholarship (Radiation Therapy); and Katherine McCoombe, recipient of the Novice Researcher Scholarship.

We continue to collaborate in meetings and submissions that are of importance to our professions and those closely related to or supporting our own. Throughout the reporting period we worked on projects with the Peak Imaging Coalition, the Radiation Oncology Alliance, Allied Health Professionals Australia, the International Society of Radiographers and Radiological Technologists, the New Zealand Institute of Medical Radiation Technology, the Royal Australian and New Zealand College of Radiologists, the Medical Radiation Practice Board of Australia, the Australian Radiation Protection and Nuclear Safety Agency, among many others.

To ASMIRT Board specific matters, the Board of Directors met eight times during the year, and I am pleased to say that three of those meetings were face-to-face – in Sydney, Townsville and Melbourne. Laura Adamson joined the Board during the year as the Director representing New South Wales. I would like to thank Christopher Dransfield for his previous service in that position. Dr Bronywn Hilder also stepped down from the Board after a year as immediate past president. She has been a stalwart and her support to me during my first year in the role of President was of immense value. Thank you to the entire Board for your dedication, I appreciate all that you do.

Directorship comes with significant responsibilities and liabilities, both personal and to the membership and we ensure that Directors are and remain well trained and supported in their duties. ASMIRT Board Directors receive training through the Australian Institute of Company Directors.

The Society's performance at the end of the financial year 1 November 2022 to 31 October 2023 was strong, with positive returns on our investments and healthy membership numbers. The Board and management of the Society are cognisant of balancing sufficient spending on member services and ensuring the ongoing viability of the organisation, and I believe we strike the right balance, where the member offering increases responsibly.

Finally, I would like to thank the staff at the Secretariat, and our wonderful volunteers for the time that they dedicate to the various activities of the Society. Our committees, reference groups, working parties, Branch executives and Branch committees and all those who represent ASMIRT and the professions on a lengthy list of external bodies and committees. There are too many to be listed individually – but I sincerely thank you all.





In last year's annual report, I was pleased to tell that we ended the year with a greater sense of normality, resuming face-to-face meetings and events after the restrictions of the COVID-19 pandemic. For this 2023 report, I can safely say that we are back to operating at full capacity, providing more for members than ever before.

Sally Kincaid Chief Executive Officer

As an example of the scope of ASMIRT operations, in just the events and CPD space

we delivered 70 events and 106 CPD hours to 3426 registrants due in no small part to the dedication of our Branch committees. These figures don't even include ASMIRT 2023 in Sydney!

The Sydney conference was attended by over 1000 delegates. The team co-ordinated 16 workshops, 194 presentations, 70 posters and two major social events.

The opening ceremony of our annual conference always sets the tone for what is to follow. ASMIRT 2023 was no exception, with a Welcome to Country as we gathered on the traditional lands of the Gadigal clan of the Eora Nation and a performance by The Chris O'Brien Lifehouse Choir.



(Above): Welcome to Country

Dr Ben Bravery gave the opening keynote address with the heart-warming story of his life as a zoologist, diagnosed with cancer in his late 20s, and whose experience through his treatment and recovery shaped his decision to become a psychiatrist. His story prefaced many more discussions through the conference on personcentred care and the patient experience.

# We finish the year having provided more for members than ever before

With the success of the masterclass in Western Australia in 2022, we took the same concept to Townsville and Darwin in 2023. The masterclasses provide an opportunity for face-to-face CPD for members who are often unable to attend events in larger centres. We try to schedule Board meetings and other workshops in conjunction with the masterclasses so that post the formalities members have the opportunity to connect with the national organisation and talk to Directors and staff from the Secretariat. Importantly, the masterclasses are open to all practitioners without cost with the dual aims of building rapport among practitioners and showcasing the value of membership to those currently outside of the ASMIRT fold.

President Carolyn Heyes and I attended the annual conference of the New Zealand Institute of Medical Radiation Technology (NZIMRT) in Queenstown, and we used the opportunity to meet with our counterparts across the Tasman. We continue to work closely with NZIMRT on several projects across the regulatory, research and promotion space, and the friendship between the two organisations is strong.

Speaking of research and collaboration, we shared the excellent news that the ASMIRT and NZIMRT *Journal of Medical Radiation Sciences* (JMRS) received its first ever Impact Factor. JMRS recorded a factor of 2.1, which is an excellent first result. An Impact Factor is measure of the number of times an article is cited within a year. Most journals have an Impact Factor of less than

one, and a factor of three is regarded as good. Congratulations to Cherry Agustin, the Editor-in-Chief of JMRS and the dedicated editorial team, who are all hard-working volunteers.

Strong relationships are everything, and one of the major stakeholders of the Society is the regulator, Ahpra. My thanks go to their Executive Officer Adam Reinhard, Chair of the MRPBA Cara Miller, the Board and the Accreditation Committee for their positive and collaborative approach. We met formally several times during the year and held productive and frank conversations around capabilities, standards and scope of practice.

As always, the Society has been involved in a great deal of advocacy and advancement of the professions on behalf of members. The committees and reference groups that advise across the scope of issues important to members have provided summaries of their numerous projects through pages 22 to 32. Their tireless work throughout the year can never be underestimated and I am grateful that we have such an engaged membership who advocate so passionately for the professions.

Member numbers increased slightly during the year, which is an excellent result, considering less than 50 percent of peak bodies recorded any growth in membership in 2023. At the end of the 2022–23 membership year we had 8848 members and 1198 student members.

You may note the Society has a healthy balance sheet. We are purposely conservative with members funds to future proof the organisation. It wasn't too long ago that ASMIRT was in a delicate financial position and the Board and management have purposely pursued a strategy that ensures we have sufficient funds invested to occasionally run deficits to further develop the services and support we provide to members.

Significant monies have been invested carefully, and ASMIRT uses the interest from investments to maintain programs such as our scholarships and grants.

We finish the year having provided more for members than ever before, so it just remains for me to thank the Board of Directors for making my job so easy, to the members for your continued support of your professional organisation, and to the staff at the Secretariat who are always here to assist you – and who make all things possible. Our professional standards and CPD team of Min Ku, Tanya Morgan, Alan Malbon and Patricia Fanning; our events and communications and marketing teams of David Leach, Robert Hilkes, Shane Maria Howell, Anne Romanjuk, Sarah Tormey and Olivia Abbott de Bono; and our finance and administration team of Bruce Su, Kathleen O'Connor, Sue Elliott and Amarnie McVean.



(Above): Dr Ben Bravery delivering the keynote address



(Above): The Chris O'Brien Lifehouse Choir

# **ASMIRT Board of Directors**



# Carolyn Heyes President

Carolyn is the President of ASMIRT. Carolyn has previously been a member of many ASMIRT committees, at both state and national levels. She has held numerous roles throughout

her career, including tutor radiographer, deputy chief radiographer and chief radiographer; she is currently a senior radiographer at The Royal Children's Hospital Melbourne. Carolyn is keen to advance the profession and has a special interest in orthopaedic imaging, decreasing patient dose and increasing patient care.



# Naomi Gibson Vice-President

Naomi is the Vice-President of ASMIRT and the Queensland representative on the ASMIRT Board of Directors. Living and working in regional Queensland for over three decades, Naomi understands

the need for effective communication and a high level of engagement within regional Queensland and to its members. As Deputy Director, she thrives on managing a diverse workforce, balancing technological innovations with the multiple challenges of a regional setting. Naomi's vision is to work together with regional members and other members across Australia to build a strong network through effective communication.



# Dr Georgia Halkett Honorary Treasurer Western Australia Representative

Georgia is the Western Australia representative on the ASMIRT Board of Directors. Georgia trained as a radiation therapist and worked clinically

before completing her PhD and embarking on a research career. Georgia is Associate Professor and Senior Research Fellow at Curtin University, and a graduate of the Australian Institute of Company Directors. She is Honorary Treasurer, Board Liaison for the Fellowship Panel, Co-Board Liaison for the Research Committee, and sits on the Editorial Review Board of the Journal of Medical Radiation Sciences. Georgia is committed to supporting and mentoring medical radiation practitioners to lead and participate in research projects.



# Natalie Kidd Honorary Secretary Tasmania Representative

Natalie is the Tasmania representative on the ASMIRT Board of Directors. She is also the Honorary Secretary and Board Liaison for the

Education Committee. Her clinical role is Manager / Chief Radiation Therapist of the Northern Cancer Service, Tasmania. Natalie is passionate about the training and development of radiation therapy staff and students, in conjunction with leading change in the field of radiation therapy.



# Dr Nigel Anderson Victoria Representative

Nigel is the Victoria representative on the ASMIRT Board of Directors. He recently completed a threeand-a-half-year tenure as the inaugural chair of the ASMIRT

Research Committee and is now Board Liaison for the Membership and Advocacy Committee. Nigel is currently the Radiation Therapy Manager / Chief Radiation Therapist at Austin Health in Melbourne. He is passionate about research and development, having completed his PhD in 2019, and is keen to ensure medical radiation practitioners advocate and lead change through evidence-based practice.



# Rachel Kearvell South Australia Representative

Rachel is the South Australia representative on the ASMIRT Board of Directors. Her current role involves managing a private radiation oncology centre and team

in Adelaide. Rachel has worked as a radiation therapist in both Australia and the United Kingdom and in both public and private practice. Rachel was previously a member of the Professional Standards Committee and the Radiation Therapy Advisory Panel. As Board Liaison for the Professional Standards Committee, Rachel's vision is to advance the profession and ensure medical radiation practitioners have a voice in all policy creation that impacts their important work.



# Laura

# Adamson New South Wales Representative

Laura is the New South Wales representative on the ASMIRT Board of Directors. She is currently a Senior Quality Improvement and Research

Radiation Therapist at Westmead and Blacktown Hospitals in Sydney; and is the Co-Board Liaison for the Research Committee. Laura is passionate about research and quality improvement, having recently completed her Master of Philosophy. She is keen to see more medical radiation practitioners involved in research and quality improvement to ensure Australian medical radiation consumers receive world class care. Laura is a strong advocate for medical radiation practitioners developing and exemplifying leadership at all levels.

# Life Membership

The following individuals have been awarded Life Membership of ASMIRT for their dedication and commitment to the Society. George Adair Edmund Arozoo Carolyn Astill David Balmanno Keith Barry Jennie Baxter Paul Boulton Mark Bower Gregory Brown John Bruce Martin Buckley Ronald Callaway Rosa Cameron Helen Clough Kathleen Collett Neville Cooper Joycelyn Cottrell Ian Crichton Jacobus de Jong Arthur Dunn Clive Felmingham **Clifton Fitzsimons** Robert Fleav Robert George Kevin Grainger William Haining Elvie Haluszkiewicz Harry Hanson David Hartley Bruce Harvey Kay Hatherly Gerald Hayward Hilary Heindorff Lynda Herrod Ernest Hughes

Kenneth Jackson Fiona Jeffs John Laughton Ian Lynch Alan Malbon Ronald Mccartney Colin Mildon Mavis Milne Ian Morris Jocelyn Morse Jocelyn Murray Wayne Nuss Teresa Ong Joseph Petroni John Poller Gordon Rvan John Ryan John Scascighini Brian Starkoff William Thomas Gillian Tickall Graham Truman Tim Way Christopher Whennan

# Nicholas Outterside Medallion

The Nicholas Outterside Medallion is named after the first President of ASMIRT. The following individuals have been awarded the Nicholas Outterside Medallion for their valuable contribution to the profession. N Outterside

M Dobson DE Hartley PJ Skene J Williams R Callaway AM Knights

PG Young RP Georae K Reynolds **TD** Hughes **BF** Young A Berry GM Brown R Logan R McCartney J Poller T Irwin IW Lynch AE Parrv JA Quirk JD Drummond **BR** Innes DW Macinnis JE Ryan C Mildon J Portwood M Fleet **GM** Truman N Cooper **EM Hughes** W Nuss J Petroni M Schirmer P Rowntree J Tate GR Kenworthy **IR** Stankevicius DG Balmanno A McCormack N Hicks G Power JWP Laughton J Andersen J Baxter KM Collett H Hanson DS Kaye JW de Jong **BL Kelly** J Scascighini

I Morris G Tickall C Astill G Burt J Lavan A Malbon M Baird AE Kelly l Egan F Holloway J Smylie E Caruana T Ong **BA Starkoff** GL Brown AN Smith **BM** Harvey E Haluszkiewicz M Zelesco JE Page EMG Burke **CB** Dransfield CJ Whennan C Vanderley-Reichner TR Way SA Maresse LJ Smith GJ Rattray MY Ku J Brooks M Bower R Hart GT Tidswell C Knipe C Heyes D Ogilvie J Harris M Hercus P Eastgate S Merchant C Agustin A Buxton A Kilgour

\*Nicholas Outterside Medallion recipients listed in order of year received, from 1982 onward.

# About ASMIRT

The Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) is the peak body representing medical radiation practitioners in Australia.

# Vision

Its vision is excellence in medical radiation practice for a healthier Australia.

# Mission

Its mission is to empower medical radiation practitioners to provide excellent patient care through leadership in advocacy, education, professional standards, research and innovation.

Its key goals are:

# Advocacy

- Advocate for high quality and safe patient care.
- Engage with key government agencies, industry stakeholders and the wider community.
- Advocate for the best possible health outcomes, equity and access.
- Advocate for the recognition of the role, scope and professional status of the medical radiation practitioner in health care.
- Advocate for the wellbeing of the medical radiation practitioner.
- Foster engagement with universities and support for students.

# **Professional standards**

- Provide ASMIRT Professional Practice Standards.
- Promote Fellowship.
- Provide professional code of conduct.
- Define scopes of practice.
- Provide the professional code of ethics.
- Advise, consult and contribute to policy and position statements of external agencies.

# Education

- Provide and promote a range of educational opportunities.
- Provide a suite of certifications across the professions.
- Champion career pathways for better health outcomes.
- Support and encourage members to meet their regulatory requirements.
- Provide education and information for patients and the general public.

# Research and innovation

- Encourage promote and support evidence-based research to improve patient care and outcomes.
- Conduct research for members, the profession and patients.
- Support the timely translation of research into practice.
- Provide the leading journal for medical radiation sciences – Journal of Medical Radiation Sciences.
- Encourage innovation in the profession.

# Membership

- Be the organisation of choice for medical radiation practitioners.
- Measure and respond to member satisfaction.
- Develop a strong range of benefits for members.
- Support and recognise ASMIRT state branches and volunteers.
- Increase collaboration with other professional organisations.

# Values

- Dignity of the individual; compassion, confidentiality.
- Trust, respect, integrity and ethical practice.
- Open and transparent communication.
- Consultation with all stakeholders.
- Recognition, reward and support for service contribution.
- Responsive and professional attitude.
- Energy and enthusiasm
   passion for the medical radiation science professions.
- Participation.
- Leadership.

#### Advocacy

# Our Advocacy

# **Five quick stats**

Advocacy is one of the six key goals of ASMIRT's stated mission.	
ASMIRT receive calls from members daily on a range of topics.	
The Secretariat contributed to 13 major consultations over the past year.	
Eight advocacy-related articles were published in Spectrum.	
Consumers contact ASMIRT to seek advice on procedures and technical protocol.	

A key component of ASMIRT's mission is to empower medical radiation practitioners to provide excellent patient care through leadership in advocacy.

ASMIRT continue to work on projects with key stakeholders to progress issues of common interest.

The Peak Imaging Coalition – of which ASMIRT is a founder member – is a collaborative forum for professional associations in clinical medical imaging. Meetings occur three times a year, including one face-to-face meeting. Member associations are:

- ASMIRT
- Australasian College of Physical Scientists and Engineers in Medicine
- Australasian Society for Ultrasound in Medicine
- Australasian Sonographers Association
- Medical Imaging Nurses Association
- The Royal Australian and New Zealand College of Radiologists.

ASMIRT also contributed to the Diagnostic Imaging Advisory Committee, which involves a highly technical workload.

ASMIRT is also a member of the Radiation Oncology Alliance, a collaborative forum for associations with members specialising in radiation oncology. Other member associations in the Alliance are the Australasian College of Physical Scientists and Engineers in Medicine, the Royal Australian and New Zealand College of Radiologists, and the Cancer Nurses Society of Australia.

The addition of a consumer representative also enhances the knowledge and conversation around key service issues.

Through these interdisciplinary professional groups, issues such as the Medicare reform, standards of practice, workforce shortages, Indigenous health, advanced practice, artificial intelligence and industry innovations were discussed, including mechanisms of collaboration.

# Member advocacy

ASMIRT receive calls from members daily on a range of topics, outside of seeking membership. The work ASMIRT does is designed to focus on its members and to make seeking advice and assistance seamless and easy. Calls can include issues such as:

- Membership assistance
- Resuming practice
- Access to a support person
- Access (or where to look) for specific resources
- Protocol and procedural advice
- Student assistance (secondary and tertiary)
- Legal teams seeking expert witnesses
- Advice on Ahpra notifications
- Advice with litigation matters.

The ASMIRT Secretariat contibuted to 13 major consultations and a number of other external consultative documents over the past year ranging from issues affecting the medical radiation practitioner directly and indirectly through government changes to legislation. Precis of these consultations are sent via eNews and through *Spectrum* to update members, with links to the main consultation pages for access to the full documents.

The following advocacy-related articles were published in *Spectrum* throughout the year:

- The Umbrella Series Dementia: the forgotten patients
- Mind your head positive strategies to maintain mental health
- Ahpra consultation draft Data Strategy
- Supervised practice and what it means for you
- Health Practitioner Regulation National Law changes
- Victorian Civil and Administrative Tribunal requirements for health practitioner regulation
- Raising awareness of anaphylaxis the new Acute Anaphylaxis Clinical Care Standard
- Radiation Oncology MBS Item numbers an update.

# **Consumer advocacy**

The profession is undergoing significant change in a time of workforce shortages to adapt and adopt rapidly advancing technology. Consumers who engage with the medical radiation workforce will contact ASMIRT (usually by phone) as their first port-of-call to seek advice on the new technology, and on procedures and technical protocol. With the array of information readily available to consumers through the internet, it is significant that ASMIRT is considered part of a consumer's resource network.

#### **Grants and Scholarships**

# Grants and Scholarships

# **Five quick stats**

1	20 Rural Clinical Placement Scheme scholarships were issued.	
2	Three Research Grants were awarded.	
3	Two Postgraduate Study Scholarships were awarded.	
4	Establishment of the Dorothy Lorimer Bursary.	
5	Five research surveys from the membership advertised in eNews for data accrual.	

Each year, ASMIRT offer a range of opportunities for members to apply for grants and scholarships to assist in their professional growth and development. These include:

- Rural Clinical Placement Scheme up to \$1000 (from semester 2, 2023 onward) for students enrolled in an Australian university
- International Travel Scholarships up to \$5000 for qualified practitioners and \$3500 for early career graduates
- Research Grants up to \$5000 for novice researchers and up to \$10,000 for new and experienced researchers
- Postgraduate Study Scholarships up to \$5000 for graduate certificate, up to \$10,000 for graduate diploma, and up to \$15,000 for master's degree.

Twenty Rural Clinical Placement Scheme scholarships were issued in 2023. All scholarship recipients must write an article about their clinical placement experience for publication in *Spectrum*.

Three Research Grants were awarded in 2022:

- Dr Karen Dobeli Research Grant for '3-dimensional spectral CT analysis of body lesions: A pilot study'
- Dr Vikneswary Batumalai Research Grant for 'mRi vErSus cbct guided SABR fOr paNcreATic cancEr (RESONATE)'
- Katherine McCoombe Novice Researcher Grant for 'Spectral CT urogram imaging protocol optimisation'.

Two Postgraduate Study Scholarships were awarded:

- Josephine Cannon for Master of Health Professional Education
- Pempe Akdemir for Graduate Certificate in Health Leadership and Management.

In 2023, a new ASMIRT grant was established – the Dorothy Lorimer Bursary – which will be awarded annually to an ASMIRT member "who will bring substantive international knowledge to Australian practice".

ASMIRT also manage the Crestani Foundation Grant (for early career radiation therapy graduates) on behalf of the Crestani Foundation. The 2022 recipient was Galina Betzis.

# 2022-23 snapshot

Grant/ Scholarship	Number of applications	Number of recipients
Rural Clinical Placement Scheme Semester 1	<b>Semester 1 = 10</b> Deakin University, Monash University, RMIT University, University of Newcastle, University of Canberra	<b>Semester 1 = 7</b> DI = 5 RT = 2
Rural Clinical Placement Scheme Semester 2	Semester 2 = 24 Queensland University of Technology, University of Newcastle, Deakin University, RMIT University, Charles Sturt University, UniSA, University of Sydney, Central Queensland University	Semester 2 = 13 DI = 7 RT = 4 NM = 2
International Travel Scholarships*	DI =1 Early career DI = 1 RT = 8 Early career RT = 0	Awaiting results
Research Grants	MI = 5 Novice MI = 1 RT = 2 Novice RT = 0	MI = 1 Novice MI = 1 RT = 1 Novice RT = 0
Postgraduate Study Scholarships	MI = 5 RT = 2	MI = 1 RT = 1

\*Due to COVID-19 travel restrictions in 2020 and 2021, two sets of this scholarship were offered in 2023.

DI = diagnostic imaging; RT = radiation therapy; NM = nuclear medicine; MI = medical imaging

### **Continuing Professional Development**

# Continuing Professional Development

# **Five quick stats**

98% of CPD enquiries are closed within 24 hours.	
Eight hospitals support their staff with access to the ASMIRT CPD portal for recording their yearly CPD.	
116 endorsement packages were renewed for organisations running ASMIRT-recognised educational events and programs.	
Over 215 hours of CPD were delivered.	
All ASMIRT-imposed CPD requirements have now been removed.	

# **Professional development**

ASMIRT has a strong commitment to continuing professional development (CPD). We aim to maintain professional competency, provide professional development education, and improve the skills and knowledge of all medical radiation science practitioners. ASMIRT play a key role by providing innovative education content, events, masterclasses, certification career pathways, advanced practice and Fellowship.

# Fellowship

Fellowship of ASMIRT is a professional qualification - an outstanding academic achievement. The path to Fellowship is varied. However, it typically involves evidence of continued formal training post-qualification and evidence of substantial achievement in, or contribution to, the profession.

# Advanced practice

An Advanced Practitioner is defined as a professional who fulfils all aspects of the expectations for the ASMIRT Certified Practitioner and, additionally, demonstrates expertise across seven dimensions of practice, and can provide evidence of their advanced capability in each dimension. While the dimensions of practice are described individually, the Advanced Practitioner recognises their practice as holistic and can draw appropriately upon all aspects of their expertise to provide optimal, expert, contextual patient care. At the ASMIRT 2023 Conference, Andrew Murphy was recognised as an Advanced Practitioner Diagnostic Radiography – Image Interpretation.



(Above): Advanced Practitioner Diagnostic Radiography – Image Interpretation, Andrew Murphy

# **CPD** requirements

All ASMIRT-imposed CPD requirements have now been removed. The Medical Radiation Practice Board of Australia (MRPBA) sets the CPD regulatory standard required for registration as a medical radiation practitioner. The MRPBA provides the audit function as its role as the Aphra national regulator.

# CPD enquiries throughout the year

The CPD team assists members and non-members with access and use of the ASMIRT CPD portal. Enquiries come from both emails and phone calls, of which 98 percent are all closed within 24 hours.

The five main CPD enquiries in the reporting year related to:

- Unable to log in to the Member Portal username and password access
- Corporate CPD portal access
- Temporary or permanent upgrade from corporate CPD to full membership and vice-versa
- CPD and maternity leave and other leave
- Access to CPD records and Statements of Compliance.

Additionally, there are eight main hospitals that have undertaken to support their staff with access to the ASMIRT CPD portal for recording their yearly CPD. And 116 endorsement packages were renewed for organisations running ASMIRTrecognised educational events and programs.

#### **ASMIRT Fellows and Advanced Practitioners**

# Fellows

Frederick G Tvrrell Mavis J Milne Clifton Fitzsimons Robert F Fleay Jocelyn R Murray Judith B Best (Williams) Colin W Cook Margaret L Gibson Miles F Green William A Haining Dorothy Lorimer Kenneth A Jackson Ronald C Duncan Gerald Hayward Ruth Atkinson Gordon T Rvan David E Hartley Beryce J Moore Archer R Wilkinson John A Quirk Joan M Pryor Mary R Rowley Beverley F Young Gregory M Brown Denis K Almond Alan Hanton Alwin Kan Kathleen M Collett John E Ryan Michael T Enright Robert P George Anne Ward Robert J Borrett Alan R Garside Anthony M Knights Graham M Truman Bruce M Harvey Andrew N Horrex Ian T Morris Joycelyn Cottrell Philip D Brough Marilyn D Mather

Elizabeth Watson David G Balmanno Wayne JA Nuss Josephine Smylie Margo Gill Reginald Verrocchi Edmund M Arozoo Lawrence K Lo Peter Rouse Jeffrey W Siegmann John H Tostevin Johnny Fricke Pamela A Rowntree Ratnasundar Sivaganasundram Anthony N Smith Karl Fung Teresa A Ong Julie A Tate Graham L Brown Peter Buchanan Edward Caruana Suzanne Cummins Ingrid Egan Thomas Eng Paul Foulstone Brian A Starkoff Tracy Vitucci Colin Hornby Ian Walsh Madeleine Shanahan Reuben Dixon **Robert Phillips** Anne M Grant Kay Hatherly Goran Obradovic Gregory Rattray Eric J Yeomans Kathleen M Nagle Nelson Piyaratna Joy M Brumby Lino Piotto Kim Duffy Melissa Hopkins Julie Miller

Karen L Dobeli Paul A Fenton Georgia K Halkett Christopher D Perry Teresa A Wong Robert Davidson Mark Middleton Bronwyn Hilder Judith Holt Marilvn Zelesco Rebecca J Owen Charlotte A Sale Janet B Gawthrop Eileen M Giles Deborah E Starkey Sarah J Everitt Ingrid M Jolley Mary-Ann Carmichael Jenna Dean Susan P Merchant Kelly Spuur Linda Bell Kathryn Squibb Nadine Thompson Niael Anderson Elizabeth Brown Shavne Chau Edel Doyle Giovanni Mandarano Andrew Murphy Yolanda Surjan

# Advanced Practitioners

Alison Brown Mary Job Christine Kenny Andrew Murphy Don Nocum Carolyn Sanderson Tegan Wilde Nick Woznitza

\*Fellows listed in order of year received, from 1982 onward.

# Annual Conference and Events

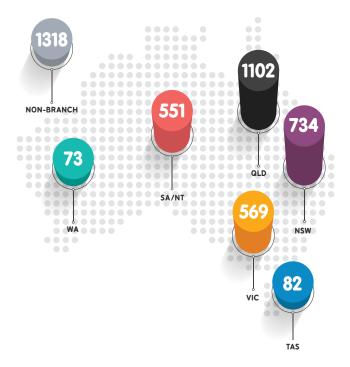
1	4429 registrations for events.
2	More than 600 students registered for events.
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4	Over 215 hours of CPD were delivered.
5	New masterclasses in Townsville and Darwin.

Through the strong links between Branches and the Secretariat, ASMIRT continues to provide quality CPD and social events for members. It was incredible to see a record 71 events conducted nationally through the passion of volunteers and commitment of just four dedicated staff.

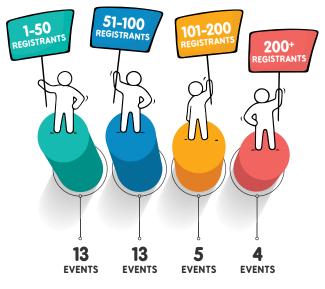
We saw a consistent focus on several themes across events and jurisdictions: person-centred care, including caring for people with disabilities or different age groups; artificial intelligence, its current and future role in our professions; maintaining self-care, and early career skills advancement all had strong attendances.

It was also excellent to see more than 600 students register for events. The commitment and obvious enthusiasm to learn about their chosen profession is clear.

# Registrations to events per state



# **Registrations per event**



# **Branch events**

The great majority of events continue to be Branch organised events, with excellent participation across all states. From major events - such as the Tasmania Winter Weekend, South Australia Education Weekend, Beaming on in Brisbane and the Victoria Winter Education Weekend - to half-day events focussed on a single theme and small one-hour virtual events. Our virtual events and webinars are hugely popular, with a diverse range of topics available such as the recognition and management of anaphylaxis, cultural safety training, and publishing your research paper. All these CPD opportunities require theming, organisation, promotion and execution. It is the members' experience, networks and determination that make this happen.

# Masterclasses

After the successful Western Australia Masterclass in 2022, ASMIRT took two masterclasses on the road in 2023 with one in Townsville and the other in Darwin. The selection of these locations was influenced by the desire to bring face-to-face CPD to more remote areas.

Masterclasses will be extended in 2024, bringing more face-to-face CPD to members who otherwise have limited in-person options.

# ASMIRT 2023, Sydney

Attended by more than 1000 delegates, with 194 presentations, 16 workshops, five concurrent sessions of education over three and a half days, and 45 exhibiting companies, ASMIRT 2023 was a huge success. It was the first conference held in collaboration with the Rural Alliance In Nuclear Scintigraphy (RAINS), thereby bringing all the medical radiation professions together under one roof.

The conference theme was 'Champions of change: Honouring the past, Embracing the present, Shaping the future' and all these elements were thoroughly explored over the course of the weekend, not only at the conference venue itself, but through site tours and group meetings.

The atmosphere was relaxed and warm and the stunning backdrop of Sydney Harbour for some of the social events certainly helped enhance this feeling.

# Post-conference survey results

Of the 188 respondents to our post-conference survey:

- 84.41% said that ASMIRT 2023 provided them with networking opportunities that would help their current or future career
- 87.23% said the content variety was good to excellent
- 80.32% said they were satisfied with the overall content of presentations and panels delivered
- 94.10% would recommend the conference to colleagues and industry contacts
- 60.64% actively engaged with exhibitors in the exhibition hall.













# Member Engagement

# **Five quick stats**

- 1 10,000 practitioners celebrated NRRTW in 2023.
- **2** LinkedIn followers increased by 70%.
- **3** Promoted JMRS CT Virtual Issue to 95 countries.
- **4** New website coming in 2024.
- **5** Social media followers surpasses number of members.

It has been a year of consolidation, growth and strong performance for the marketing and communications team. On several fronts we are seeing increased activity and engagement in ASMIRT communications as well as marketing campaigns.

One of the communications and marketing key aims through 2023 and progressing well into 2024 is to foster a sense of pride in members, for the professions and the Society. To deliver a community of proud practitioners we are focussing on communicating the impact our professions make to the health outcomes of individuals. We will continue to demonstrate member and Society achievements through stories, recognition months/days/weeks as well as collaborative communications with other organisations. We will also continue to be a voice of compassion and assertiveness in equity of access to health care, education and many other areas of importance to our members.

To this end, we had the greatest participation in National Radiographers and Radiation Therapists' Week ever. Before the campaign went live in November 2023, more than 260 sites and 10,000 individual practitioners were already committed to celebrating their own work, their focus on personcentred care and sharing this with their healthcare colleagues and patients.

We have also engaged strongly with the editorial team of our research journal, the Journal of Medical Radiation Sciences (JMRS) and our sister organisation, the New Zealand Institute of Medical Radiation Technology (NZIMRT) who co-own the journal. We publicised JMRS' first Impact Factor of 2.1, which is particularly high for a first report. We organised the joint promotional efforts of six international journals, led by JMRS, in its crossjournal Virtual Issue on CT. The promotion reached at minimum, 53,000 members for the participating organisations across 95 countries. To demonstrate member value in JMRS we also promoted JMRS article inclusions in Wiley compilations for NAIDOC Week. Breast Cancer Awareness Collection and the Evidence-Based Healthcare Collection, and featured selected abstracts from Women's Health Week and NAIDOC Week compilations in Spectrum.

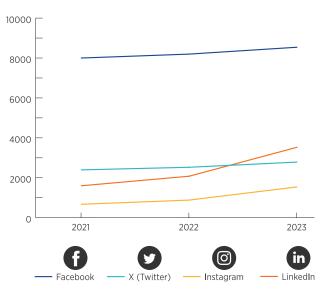
# **Communications performance**

The year has seen growth in followers across most of our communication channels, with exceptionally strong participation rates across the Society's electronic direct mail. Through our social media channels, we have seen not only growth in followers, but also individual visits to our respective pages.

The growth across all channels is attributed to a greater breadth of communications. Some of the strongest performing social media posts for the year have been novel, or the personal stories of members. A post about Marie Curie's birthday, NRRTW celebrations, and students sharing their vacation research scholarships experiences are good examples of strong performing posts.

# Social media

### Social media followers



### Social media followers

Platform	2021	2022	2023
Facebook	8006	8199	8537
X (Twitter)	2399	2524	2580
Instagram	676	883	1535
LinkedIn	1603	2079	3522

#### Social media page visits

Platform	Increase in page visits as %
Facebook	58%
X (Twitter)	64%
Instagram	22%
LinkedIn	26%

# **Electronic direct mail**

Electronic direct mail (EDM) includes the sending of not only targeted emails but also Events News and eNews. Over the period we increased the campaigns sent from 128 in 2022, to 131 in 2023. The audience reached dropped from approximately 700,000 to 688,344 due to greater segmentation.

Association/Society industry benchmarks for 2022, sourced from Campaign Monitor\*, one of the world's largest EDM platforms, shows ASMIRT performs strongly.

### EDM performance

EDM metric	Industry average as %	ASMIRT performance as %
Open rate	27.9	54.4
Click through rate	1.4	3.2
Unsubscribe	0.2	0.1
Bounce/undeliverable	6.23	0.3

# Spectrum

*Spectrum* continues to be very well-received, with most members opting to receive a hard copy of the magazine. In an age where most things are online or virtual, people still like to have something tangible as a member benefit. *Spectrum* maintains a circulation rate of 8500 per issue, and there are five issues published per year.

The magazine continues to cover a range of issues of importance to medical radiation practitioners, including advocacy, medico-legal, CPD, education, standards, ethics in research and wellbeing. *Spectrum* also published numerous interviews, reflections, reviews and industry news, including extensive coverage of our annual conference.

# **Review of communications**

Over the same period, we undertook a review of several communications tools and enablers:

- **Style guide** The ASMIRT Style Guide was comprehensively redeveloped to ensure brand integrity and unity across ASMIRT communications. The ASMIRT acronym is being applied more frequently as the logo, particularly where there is little room for the crest to be displayed without compromise.
- **Supplier agreements** Agreements with several suppliers to the communications and marketing team have been reviewed and there has been some changes to new providers with more competitive rates.
- Website A complete review of the ASMIRT website has been undertaken, looking at the structure, visual design and content of the current website. A proposed new structure and design has been delivered and we are hoping to complete a website rebuild in 2024.

\*Campaign Monitor: https://www.campaignmonitor.com/ resources/guides/email-marketing-benchmarks/



# **Member Services**

# **Five quick stats**

	1	More than 7200 calls taken.
	2	98% of enquiries resolved in one call.
	3	Email enquiries outstripped calls three to one.
	<ul> <li>4 Members saved \$48,000 on purchases through Mem Advantage.</li> <li>5 Membership renewals grew in 2023.</li> </ul>	

# Member enquiries

The membership services team is the key touchpoint between members and ASMIRT. The team is tasked with dealing with member enquiries efficiently and with a focus on personal service. We are happy to report that all forms of member enquiries are resolved with one contact in 98 percent of cases. This exceptionally high completion rate allows members to get on with their important work and gives them confidence that we can resolve their issues quickly and satisfactorily.

# We can resolve their issues quickly and satisfactorily

While the team took more than 7200 calls from members in 2023, the vast majority of requests, more than 21,000, came via email and were dealt with the same efficiency. More than 95 percent of email enquiries were closed within the same day and with one contact point.

The five main enquiries from members in the reporting period were:

- unable to log in to the Member Portal (most common query being that their membership had accidentally lapsed)
- the process for, or status of, overseas qualification assessment
- temporary or permanent change of membership category
- a broad membership-related question
- certification related questions.

# Membership renewals and growth

The major undertaking for the membership services team each year is the membership renewal program. In 2023, the team managed renewals for 6860 members. This task included the renewal of current members, the change of membership categories for some members, and assisting members with updating their personal and professional details. We are also happy to report that ASMIRT is following the trend of 49 percent of associations (Carvalho, 2023) that saw membership growth. At a time when cost-of-living pressures are impacting personal budgets, it is rewarding to see that ASMIRT membership is a must-have for many practitioners.

# Member Advantage program

The Member Advantage program is an offering from the Society to a range of products and services at discounted rates. Members purchased \$178,000 in products over the period, saving approximately \$48,000. The program covers everything from discounts for travel, discounted gift cards, corporate rates for electrical goods and more. The Member Advantage program is accessible through the ASMIRT Member Portal.

# Professional indemnity insurance and journey insurance

Apart from changing our professional indemnity insurance provider from Guild Insurance to Berkley Insurance through our broker, Marsh Pty Ltd, the year was largely uneventful. As is testament to the exceptional practice and expertise of our members, claims against members remain very infrequent.

As a key member benefit, it is crucial that the professional indemnity insurance provided to members is an exceptional product and we are comfortable that Berkley, as one of the world's largest insurers in this specialist area, is well up to the task.

A new benefit for 2023 – and at no cost to members – is the inclusion of journey injury insurance with Chubb.

This insurance is provided to eligible members in states where workers' compensation insurance doesn't provide protection for travel to and from work (including in New South Wales, Victoria, South Australia, Western Australia and Tasmania).

Members may want to familiarise themselves with the policy, but in general terms (and not in the insurer's exact words), cover commences from the time an individual leaves their normal place of residence and travels directly to their normal place of employment. Cover ceases upon arrival at their normal place of employment. Cover re-commences for the return journey from their normal place of employment by direct travel to their normal place of residence and ceases upon arrival at their normal place of residence. The cover is for medical and rehabilitation costs, as well as loss of income within limits.



#### **ASMIRT Committees**

# Membership and Advocacy Committee

# **Committee members**

Jenna Dean (Chair)

Adam Westerink

Beatrice Tanner

Magdalena Dolic

Sabrina Lewicki

Lyndal Newmarch

Sharon Ponniah

Naomi Gibson (ASMIRT Board Liaison)

Nigel Anderson (ASMIRT Board Liaison)

Robert Hilkes (ASMIRT Staff Liaison)

The Membership and Advocacy Committee is looking forward to building on the progress achieved in 2023 for 2024. A central focus for the reporting period was the member survey that was sent out to all ASMIRT members in the first quarter of 2023. The Committee members met at the National Conference in Sydney to discuss the feedback provided in the survey to develop a plan to address the items that were raised.

The key themes related to:

- Advocacy clarifying what it means to demonstrate advocacy as an organisation
- CPD access and resources connecting members with more opportunities for CPD as part of their membership
- Member benefits ensuring that the current member benefits are understood and visible to members and ensuring that member benefits are reviewed regularly to ensure value.

As a result of this, the Committee is exploring opportunities to improve the access and visibility of CPD tools on the ASMIRT website and promotion of membership benefits such as the Member Advantage platform and the various ASMIRT Research Grants and Scholarships, International Travel Scholarship, and the Crestani Foundation Scholarship. We will continue to work closely with the Secretariat to progress these projects. There were a number of ideas and projects proposed during the year, and the next 12 months should see these into fruition for the benefit of our members and the profession as a whole.

Activities the Committee completed in the reporting period include:

- Member survey review and analysis
- *Spectrum* content review article collation to support CPD activities promotion planned in the members portal in 2024
- Planning of CPD content review review to be conducted in 2024 with result informing work with the Secretariat to optimise access to relevant CPD for members.

I would like to thank the members of the Committee for their valuable contributions throughout the year. I am looking forward to a productive and progressive 2024.

# Jenna Dean

Chair, Membership and Advocacy Committee

# Professional Standards Committee

# **Committee members**

Dr Andrew Kilgour (Chair) Christopher Hicks (Deputy Chair) Clare McLaren Edel Doyle Katie Scott Karen Thomas Sarah Hauville Rachel Kearvell (ASMIRT Board Liaison) Min Ku (ASMIRT Staff Liaison)

The Professional Standards Committee had some membership changes in 2023. We welcomed Katie Scott, who has a medical imaging background, as our new Tasmania representative. We also said goodbye to Lisa Roberts (radiation therapy), who Chaired the Committee for a number of years. Lisa led some great initiatives from the Committee and she will be sorely missed.

The Committee has two major projects that have been simmering for a while. We have two subcommittees to lead these projects:

- Christopher Hicks will lead the development of new levels within the existing professional practice standards, designed to reflect the various levels of experience and expertise within the profession. These will be developed in collaboration with sub-committees of other ASMIRT committees. It is planned to call for expressions of interest from these committees soon
- Andrew Kilgour will lead the development of a medical imaging staffing model. This will be based on public radiology departments initially, with the hope of expanding it to private radiology in the future. This project has been delayed by issues with ethics approval but should be underway in the near future.

I thank the Committee for its commitment and dedication and look forward to a productive 2024.

# Dr Andrew Kilgour

Chair, Professional Standards Committee

# **Education Committee**

# **Committee members**

# Elizabeth Phillips (Chair)

Eileen Giles (Deputy Chair)

Tony Buxton

Bernadette Byrne

Clare Herbert

Kim Hayward

Nicholas Maddock

Natalie Kidd (ASMIRT Board Liaison)

Tanya Morgan (ASMIRT Staff Liaison)

The Education Committee attended the ASMIRT 2023 Conference in Sydney where we held a face-to-face meeting. (Most of our meetings and communications are via Zoom and email.) During that meeting, the Committee was able to develop the guidelines and procedures / policies for the new Dorothy Lorimer Bursary.

The standardisation of all ASMIRT certifications is still high on the priority list for the Committee, which is working with the ASMIRT Board and various reference groups to achieve this.

The Committee provide strategic guidance where and when required and is available to assist the reference groups, working parties and other teams to improve our professions. Members from the Committee have also met, as required, with the CT Reference Group and the Breast Imaging Reference Group to assist with issues or concerns.

Regular meetings with other ASMIRT committee chairs allow for discussions about concerns, issues and projects. By attending these meetings as Committee Chair, I can maintain cross pollination of knowledge and utilise experiences available within the ASMIRT membership.

In 2022–23, we were proud to announce the inaugural Postgraduate Study Scholarship recipients:

- Josephine Cannon Master of Health Professional Education
- Pempe Akdemir Graduate Certificate in Health Leadership and Management.

Postgraduate Study Scholarships will continue to be made available for members to assist with further education.

New initiatives and projects that the Committee is currently focussed on include:

• Dorothy Lorimer Bursary: This new grant - with a value of up to \$50,000 - is awarded to an

ASMIRT member who will bring substantive international knowledge to Australian practice. This grant expects a member to travel, deeply learn and upon return comprehensively convey practical learnings

- Student clinical placement support: A new initiative we are currently investigating to aid and assist students for placement, including in rural and remote regions
- Review and standardisation of ASMIRT certifications
- MRI for radiation therapists certification.

Consultation documents reviewed by the Committee providing advice, consultation and feedback, included:

- JMRS CPD Q&A
  - Special Issue Medical Imaging
  - Special Issue Radiation Therapy
  - March 2023 Issue: Medical Imaging and Radiation Therapy
  - June 2023 Issue: Medical Imaging and Radiation Therapy
  - September 2023 Issue Medical Imaging and Radiation Therapy
  - December 2023 Issue Medical Imaging and Radiation Therapy
- Aphra Review of accreditation arrangements for 2024–2029 cycle
- Aphra Data strategy
- Australian Government Department of Employment and Workplace Relations – Jobs and Skills Australia discussion paper
- RANZCR Draft Standards of Practice for Clinical Radiology
- IAEA Handbook for Training Radiation Therapists TCS-58
- Australian Medical Council Assessment of RANZCR.

The Committee made other contributions to our profession throughout the year including but not limited to:

- presenting, adjudicated and chaired sessions at national, state and local conferences and educational events
- providing an independent peer review of the CPD Q&A prior to publication in JMRS.

I would like to thank current and past members for their devotion to our Committee, our profession and the Society.

# **Elizabeth Phillips**

Chair, Education Committee

# **Research Committee**

# **Committee members**

Dr Elizabeth Brown (Chair)

Dr Yolanda Surjan (Deputy Chair)

Dr Giovanni Mandarano

Goran Obradovic

Georgia Williams

Katrina Smith

Michael Neep

Rachael Beldham Collins

Shayne Chau

Dr Vikneswary Batumalai

Dr Georgia Halkett (ASMIRT Board Liaison)

Laura Adamson (ASMIRT Board Liaison)

Tanya Morgan (ASMIRT Staff Liaison)

This year has been one of growth – of new ideas and initiatives, and in awareness of the Research Committee and its work. The continual increase in interest and involvement in research among Australian medical radiation practitioners is incredibly exciting and something which the Committee is committed to supporting.

I would like to acknowledge and thank members of the Committee, and the ASMIRT Board and liaisons for their tireless efforts throughout the year. Their passion for research and growing research in our membership is what makes all that has been achieved possible.

This year saw some changes in the Committee's membership with Rhys Fitzgerald departing and Shayne Chau re-joining. We would like to thank Rhys for his contribution to the Committee and for his valuable input into its many initiatives. It is lovely to welcome Shayne back and we look forward to the fresh ideas he will bring to the team.

As in previous years, we continue to collaborate with and support our Society's journal, the *Journal* of *Medical Imaging and Radiation Sciences* with the contribution of more virtual issues in 2022–23:

- Advocating patient safety: Celebrating NRRTW (November 2022)
- Celebrating Women's Health Week: Prevention, Care and Wellbeing (September 2023).

Members of the Committee have once again been active contributors to conferences, workshops and webinars throughout the year both locally and nationally:

- ASMIRT 2023 workshop I've got an idea! Getting started in research and developing a project protocol
- ASMIRT 2023 presentation Update on current research support service initiatives
- JMRS Journal manuscript peer review series
  - Part 1: Introduction to peer review
  - Part 2: Ensuring quality in qualitative studies
- NSW Branch Research Empowerment webinar Building a strong future for MRPs.

The Committee also enjoyed putting together the 'Get to know a researcher' series for *Spectrum*, which showcased clinician researcher profiles with the aim of highlighting Australian medical radiation science researchers and sharing their experiences and tips with readers. As a result of the success of this series, the Committee is brainstorming in earnest for a follow up series to feature in *Spectrum* next year.

The Committee has continued its hard work on many research related initiatives this year including:

- Review and comment on numerous consultation documents
  - Aphra Data strategy
  - IAEA Handbook for training Radiation Therapists TCS-58
- Virtual Committee meetings (November 2022, May and August 2023)
- A hugely productive face-to-face meeting in March 2023
- Continued work on the Research Support Services available to members. Policies for the promotion of new research projects and publications and presentations are in the final stages of being made available to members.
   Plans for mentorship, statistical, presentation and publication supports are ongoing and hoped to come online over the next 12-18 months
- Following on from the success of the research workshop run at ASMIRT 2023, the Committee is planning on running similar workshops in different formats over the coming year. It is hoped that we can reach more members from across the country to support their interest in research.

Three research grants were awarded in 2023: Research Grants to Dr Karen Dobeli (medical imaging) and Dr Vikneswary Batumalai (radiation therapy) and the Novice Researcher Scholarship to Katherine McCoombe. We wish Karen, Vikneswary and Katherine all the best in their respective research and we look forward to hearing about the results in years to come.

# Dr Elizabeth Brown

Chair, Research Committee

# Editorial Review Board

This report highlights the activities and achievements of the *Journal of Medical Radiation Sciences* from November 2022 to October 2023. The Editorial Review Board and International Advisory Panel members are listed in the Tables below.

Members of the Editorial Review Board			
Board member	Professional practice		
Cherry Agustin (Editor-in-Chief)	Radiation therapy		
Ann Poulos (Deputy Editor)	Medical imaging		
Paul Kane (Deputy Editor)	Radiation therapy		
Associate editors	Professional practice		
Linda Bell	Radiation therapy		
Elizabeth Brown	Radiation therapy		
Jillian Clarke	Medical imaging		
James Crowhurst	Medical imaging		
Karen Dobeli	Medical imaging		
Gay Dungey	Radiation therapy		
Rhys Fitzgerald	Radiation therapy		
James Hayes	Medical imaging		
Peter Kench	Medical imaging		
Kellie Knight	Radiation therapy (United States)		
Stephen Knight	Medical imaging		
Michael Neep	Medical imaging		
Dean Paterson	Radiation therapy		
Daniel Pham	Radiation therapy (United States)		
Tristan Reddan	Medical imaging		
Warren Reed	Medical imaging		
Kelly Spuur	Medical imaging		
James Stanley	Biostatistics (New Zealand)		
Zhonghua Sun	Medical imaging		
Andrea Thompson	Medical imaging		
Nick Woznitza	Medical imaging (United Kingdom)		

# Members of the Editorial Review Board

### Members of the Editorial Review Board (continued)

Review Board members	Professional practice			
Patrick Brennan	Medical imaging			
Rob Davidson	Medical imaging			
Georgia Halkett	Radiation therapy			
Sarah Lewis	Medical imaging			
News and online editors	Professional practice			
Darien Montgomerie	Radiation therapy			
Adam Westerink	Medical imaging			

#### Members of the International Advisory Panel

Panel member	Country	Professional practice
Kamarul Amin Abdullah	Malaysia	Medical imaging
Nicole Harnett	Canada	Radiation therapy
Michelle Leech	Ireland	Radiation therapy
Paul Lockwood	United Kingdom	Medical imaging
Eric Pei Ping Pang	Singapore	Radiation therapy
Wilfred CG Peh	Singapore	Radiology
Suresh Rana	United States	Medical physics – oncology
Ronnie A Sebro	United States	Radiology
Euclid Seeram	Canada	Medical imaging
Vincent WC Wu	Hong Kong	Radiation therapy
Michael Ying	Hong Kong	Medical imaging/ sonography

The annual publisher's report from Wiley – which includes the top downloaded and cited articles – was submitted to the ASMIRT Board. An article describing the journal's achievements in its 10th anniversary of publication was published in the December issue of *Spectrum*.

The Board had a hybrid meeting in August 2023 in Melbourne, with representatives from ASMIRT, NZIMRT and Wiley present.

### Citation, readership and Altmetric

Congratulations to all medical radiation practitioners and researchers for their contribution to producing a successful journal! The 2022 JMRS Impact Factor of 2.1 was announced in mid-2023. The Impact Factor was calculated by using the number of citations from articles published in 2020 and 2021. A radiation therapy article (doi: 10.1002/jmrs.421) received the highest number of citations (73 citations) during this period.

#### **JMRS Editorial Review Board**

Articles from JMRS were downloaded 64 percent more than the average downloads in 2022 from all Wiley journals. In addition, there were close to 500,000 full-text article viewings in 2022. The most downloaded article was a medical imaging article (doi: 10.1002/jmrs.583) which was downloaded 13,749 times (as at 7 September 2023).

The most frequently mentioned article online from JMRS was 10.1002/jmrs.448 (Altmetric score 72, as at 7 September 2023).

Visit the JMRS homepage (www.jmrsjournal.com) to view the Altmetric scores of the most frequently discussed articles in social media for the past month (look for 'trending articles'), the most cited articles in the past two years, and the most read articles.

### JMRS virtual and special issues

### Virtual issues and key collections

A virtual issue is a compilation of previously published articles with a common theme. The 2023 virtual issues were Celebrating Women's Health Week: Prevention, Care and Wellbeing; Celebrating the Ray: The Altmetric top 10 (NRRTW 2023); and Current Advice and Future Insights in CT. The Wiley team also produced curations which included articles from JMRS. The collections were related to Partnering with Patients: The Cornerstone of Cancer Care and Research; NAIDOC Week 2023; Breast Cancer Awareness Special Collection; and World Evidence Based Healthcare Day Collection.

#### Special themed issues

The special themed issue, Horizon Scanning: The Impact of Technology and Integration on the MRS Profession, was published in April 2023. The special themed issue, Particle Therapy, is expected to be published in early 2024. The call for papers is currently underway for Value Based Medical Radiation Sciences special issue.

### Supporting authors and reviewers

Our goal is to produce a journal that represents many of the professional interests of medical radiation practitioners. Authors and reviewers participated in JMRS education programs in 2023. It is expected that these programs will continue in 2024.

- Journal Peer Review Webinar series the following were delivered and recorded in 2023: Part 1: Introduction to Peer Review, and Part 2: Ensuring Quality in Qualitative Studies. Part 3: Quantitative Study Peer Review Tips is expected to be delivered in 2024.
- ASMIRT 2023 Conference publications workshop.

### Peer review

There were 159 submitted manuscripts in 2022 and 48 percent were accepted for publication. There were 345 reviews that were submitted in 2022 with a median number of days to completion of 15 days.

Thank you to the peer reviewers – listed in JMRS December issue – for your support and commitment.

# JMRS highlights

Gained first Impact Factor of 2.1

70 articles from researchers across 11 countries

JMRS topics rate in the top 10 of ASMIRT social posts

Leads international collaboration of five journals with 53,000 members throughout 95 countries

Featured in Wiley's World Evidence-Based Healthcare Day Collection

Featured in Wiley's NAIDOC Week 2023 research collection

### Acknowledgements

After more than 10 years editing the *Radiographer* and JMRS, Associate Professor Ann Poulos is stepping down as the Deputy Editor in Medical Imaging. Her commitment to the advancement of our profession through research and publication is inspiring. I am personally grateful for her guidance and support. Dr Karen Dobeli will commence as the Deputy Editor in Medical Imaging from January 2024.

Thank you to the members of the Editorial Review Board, International Advisory Panel, deputy editors, associate editors and news and online editors for your commitment to producing a quality journal. Thank you to members of the ASMIRT Research Committee for their commitment to producing JMRS virtual issues.

Thank you to ASMIRT CEO Sally Kincaid, NZIMRT Executive Officer Linda Whitehead and the ASMIRT Board of Directors for their ongoing support. Thank you also to the ASMIRT Secretariat and Kate Chadwick from NZIMRT Communications for promoting JMRS to members.

### **Cherry Agustin**

Editor-in-Chief, Journal of Medical Radiation Sciences

# Overseas Qualifications Assessment Panel

Panel members names are withheld for reasons of confidentiality.

The Overseas Qualifications Assessment Panel received and assessed a total of 146 applications during the reporting period (see Tables). These include applications from international students completing an Australian program, those requiring a renewal of their skills assessment letters for the purposes of migration and other applicants wishing to migrate to Australia.

#### Table 1. Applications accepted by country and modality

Country	Imaging	naging Ultrasound	
Brunei	0	0	1
Cambodia	1	0	0
Canada	1	3	0
China	24	0	0
France	1	0	0
Hong Kong	8	0	0
India	1	0	0
Iran	1	0	0
Ireland	2	3	1
Kenya	1	0	0
Korea	4	0	0
Malaysia	8	1	0
Mauritius	1	0	0
New Zealand	1	4	0
Nepal	1	0	0
Pakistan	1	0	0
Philippines	6	0	0
Russia	0	1	0
Saudi Arabia	0	0	1
Scotland	1	1	1
Singapore	2	0	0
South Africa	2	1	0
United Kingdom	15	7	3
Vietnam	7	0	1
Zimbabwe	4	1	0
Total	93	22	8

Country	Imaging	Ultrasound	Radiation therapy
Canada	0	1	0
Fiji	1	0	0
Hong Kong	2	0	0
India	1	1	1
Iran	3	0	0
Jordan	1	0	0
Nigeria	1	1	0
Pakistan	2	0	0
Philippines	0	2	0
Scotland	0	0	0
Singapore	1	0	0
South Africa	2	0	0
Thailand	1	0	0
United Kingdom	1	1	0
Total	16	6	1

Table 2. Applications rejected by country and modality

One diagnostic medical imaging and one ultrasound appeal was submitted during this period, both unsuccessful.

The online platform continues to streamline applications and ensures the efficiency in assessment processing times, promoting good communication between assessors, chairperson and ASMIRT's Professional Standards Manager.

The Panel continue to engage with the Department of Home Affairs (the Department), relating to visa process changes and the Temporary Skills Shortage Visa updates.

Continued collaboration with the assessing authority professional bodies and the Department of Employment and Workplace Relations is facilitated through regular bulletins, newsletters, 'lunchtime raps', conferences and symposia. This engagement between assessing authorities and the Department enables sharing of data and regular insights into the Australian labour market, skills assessment quality assurance projects currently underway, while also offering the opportunity to provide input and feedback during various consultation periods. An example of this is the Best Practice Principles and Standards Discussion Paper, that was open for consultation from mid-August 2023.

The Panel engaged in the June 2023 Australian and New Zealand Standard Classification of Occupations (ANZSCO) review, which sought feedback relating to professional titles and descriptors, offering input into descriptors that

AS	MI	RT	Par	ıel

ASMIRT Panel

reflect the current scope of practice across medical imaging, radiation therapy and sonography professions.

The Panel also engaged in the Australian Bureau of Statistics (ABS) public consultation on two topics related to ANZSCO. Based on feedback provided, the ABS reviewed elements of the ANZSCO Maintenance Strategy with several adjustments made, particularly with the prioritisation framework. Other concerns raised will require further exploration which will be considered further across the next two years, ahead of finalisation of the strategy in early 2025.

The Panel continues their work with the Australian Sonographers Accreditation Registry as part of their Stakeholder Advisory Committee. The key focus was the discussion of a pathway for United Kingdom qualified sonographers to enter and work in Australia and to ensure that they achieve the required levels of competency given the changes in programs. The other key item of note is that the workforce is not keeping up with demand, and it is evident that all stakeholders must work towards tangible solutions collaboratively to remain sustainable.

To ensure the sustainability of this group, the Panel welcomed two new members at the October face-to-face meeting. The group continues to plan for the succession of Panel members, and ongoing management of the increasing number of applications from each of the professions managed by ASMIRT as the assessing authority.

I would like to express my thanks to the Panel for their continued tireless efforts throughout this year. As workforce shortages continue, this voluntary work is appreciated.

### Chair

Overseas Qualifications Assessment Panel

## **ASMIRT** Panels

# Fellowship Panel

# **Panel members**

Goran Obradovic (Warden) Dr Georgia Halkett (ASMIRT Board Liaison)

# Diagnostic Radiography Panel members

Kelly Spuur

Nadine Thompson

# **Radiation Therapy Panel members**

Greg Rattray

Jenna Dean

Dr Kathryn Squibb

Mary-Ann Carmichael

Our Radiation Therapy Panel member, Charlotte Sale, was unable to continue as a member of the Fellowship Panel due to work commitments. I would like to thank Charlotte for being on the Panel and for providing valuable input in the assessment process. I wish her all the very best.

At the ASMIRT 2023 Conference in Sydney, three successful candidates received their Fellowship:

- Andrew Murphy
- Dr Giovani Mandarano
- Dr Yolanda Surjan.

A fantastic achievement and a well-deserved effort demonstrating a wide array of work seen in each applicant's final submission.

A Fellowship session and assignment was approved for the Sydney conference, where the focus was on artificial intelligence and ethical considerations: "What important ethical issues need consideration as the medical radiation science professions navigate into the era of artificial intelligence?" The session was chaired by myself, and Dr Geoff Currie AM from Charles Sturt University.

We had three candidates submit their Fellowship assignment and they all scored highly. One of the candidates is very close to submitting.

During the year, several contacts were made to the Warden and constructive feedback was provided. There are several candidates working towards Fellowship, however no submissions have been made so far. I would like to thank all the members of the Panel for their support during 2023 and we look forward to working together in 2024.

**Goran Obradovic** Warden, Fellowship Panel



(Above): Fellowship recipient, Andrew Murphy



(Above): Fellowship recipient, Dr Giovani Mandarano



(Above): Fellowship recipient, Dr Yolanda Surjan

# Reference Groups and Working Parties

This report details the work and highlights of ASMIRT's Reference Groups and Working Parties.

### **Breast Imaging Reference Group**

The Group concluded the year:

- Reviewing and revising the clinical pathways process for Certificate of Mammographic Practice holders that had lapsed certification
- Updating the Certificate of Mammographic Practice policies and procedures manual
- Reviewing and updating the PGMI Digital Reference slide deck from 2017
- Providing names of speakers for a mammography CPD seminar series
- Increasing research profiles and encouraging mammographers to present at the ASMIRT conference
- Identifying ways in which to increase the numbers of mammographers in the workforce (given the ageing mammography workforce).

State	Renewal	New	Clinical pathways	GDM*	Total
NSW	33	6	0	0	39
Qld	38	13	0	0	51
Vic	47	18	0	0	65
Tas	7	2	0	1	10
АСТ	2	2	0	0	4
SA	29	5	0	0	34
WA	8	2	0	0	10
Other	2	0	0	0	2

### Applications received 2022-23

\*Graduate Diploma in Mammography

### **Radiation Therapy Reference Group**

This Group was asked to review and contribute to the revision of the International Atomic Energy Agency (IAEA) Handbook for the Education of Radiation Therapists (currently being updated from the 2014 version).

The Group received many high calibre nominations for the 2023 Varian Award.

There are several projects that the Group is working on, including a position paper and research on stereotactic body radiation therapy in the Australian environment and a Proknow contouring challenge to be piloted and introduced for students.

# **Computed Tomography Reference Group**

This Group focussed their efforts on the improvement of CT practice in Australia. The Group is currently working on an amended study / ethics proposal (Perceived Disparities in the Capabilities and Knowledge of Urban and Rural Radiographers in CT Practice) to be presented to the ASMIRT Board for consideration. The study has been undertaken in collaboration with the Rural and Remote Reference Group and the Research Committee, and aims to explore two distinct but strongly interrelated areas for radiographers' capability in CT:

- To explore perceived gaps in knowledge of medical radiation science practitioners currently working in CT in Australia
- To explore perceived gaps in knowledge and capability that exist between metropolitan and rural practitioners practising in CT.

### Magnetic Resonance Imaging Reference Group

This Group reviewed the MRI Certification syllabus with suggestions for new textbooks, new examination questions and potentially new areas for examination. A new question set will be a project earmarked for 2024.

#### General Radiography Reference Group

This Group has been contributing to various consultation documents.

### **Rural and Remote Reference Group**

This Group reviewed and awarded the Rural Clinical Placement Grant applications for semester 1 and semester 2. Seven grants were issued in semester 1 to five radiography and two radiation therapy students. Semester 2 saw an increase in the amount for the placement grant and 13 grants being issued to seven radiography, four radiation therapy and two nuclear medicine students. More information on this grant can be found on page 13.

The Group was pleased to see applications from nuclear medicine students and encourage future applications from this cohort.

Given the increase in the value of the grant, and the competitive nature of grants, the Group recommend that applicants consider seeking assistance with their applications to ensure that they meet all the criteria and demonstrate robust arguments to be awarded the grant.

### Advanced Practice Reference Group

This Group contributed to a letter promoting advanced practice positions in New South Wales. The letter was sent to the HSU Medical Radiation Science Award Reform Committee for consideration and provided a case for inclusion of advanced practice within the new award reform to recognise advanced clinical expertise. The Group has been reviewing the advanced practice guidelines and is researching the possibility of an enhanced practice pathway. The ASMIRT Professional Standards Committee and the Group will be discussing how the advanced practice pathway, including an enhanced pathway, will fit into the new PPS levels (Foundation – Advanced) document.

## Particle Therapy Reference Group

This Group met several times over the course of the year, with the final meeting being held at the Particle Therapy Symposium held in Brisbane in early December.

Current discussion is on the ToRs and a position paper on radiation therapist requirements to work in particle therapy. The Group also contributed to the JMRS Particle Therapy Special Issue.

### **Ultrasound Reference Group**

This Group has been consulted on a range of issues relating to ultrasound. A project delivering ultrasound CPD to members commenced in August, with delivery of two webinars on imaging of the scrotum and the liver. The Group is working to connect with providers of ultrasound CPD to partner with and increase our ultrasound CPD offerings.

### **Brachytherapy Reference Group**

This Group provided advice to an enquiry about a practitioner wanting to progress brachytherapy advanced practice within their workplace.

A member of the Group has been accepted to participate in the Radiation Oncology Alliance Brachytherapy Working Group.

# AI in Medical Imaging Reference Group

This Group completed the year creating a document for contribution to a textbook on AI in radiology. This invitation from the United Kingdom provided the Group an opportunity to detail what the professional body has undertaken to support radiographers in their practice using AI.

### Nuclear Medicine Technology Reference Group

This Group has been working to increase the nuclear medicine membership through student cohorts and to support them with access to relevant CPD resources and webinars.

# **Global MRP Reference Group**

This Group is identifying opportunities for assistance to low- and middle-income countries. This includes resources such as textbooks, education material and volunteer practitioners to engage and enhance the profession.

### AI in Radiation Oncology Reference Group

A new member from Western Australia joined the Group. The Group has contributed to an editorial for the JMRS AI Special Issue. They also commented and provided feedback to the consultation document Draft Standards of Practice for Artificial Intelligence in Radiation Oncology.

An opportunity has presented for a few members of the Group to participate in the Radiation Oncology Alliance Adaptive RT Working Group.

### Angiography Reference Group

This Group participated in the IRSA 2023 Conference and is investigating how to take a leading role in advancing radiographers in the field of diagnostic/angiography radiography.

### **Ergonomics Working Party**

This Party has final amendments to make to the guidelines document before release to the profession. A presentation on the survey results was delivered at ASMIRT 2023, highlighting areas of concern and solutions. It is the intent of the Group to write up the results of their research for publication.

### MR Linac Staffing Working Party

The MR Linac Staffing and Scope of Practice document – detailing staffing requirements and the role of the radiation therapist in the MRI linac environment – has been written, approved and uploaded onto the ASMIRT website.

# Cultural and Linguistically Diverse Working Party

This Party has been working on the collation of case studies as the basis of their two guideline documents for consumers and practitioners.

### Indigenous Working Party

Some members of this Party are working with the CALD Working Party to develop their two guideline documents for consumers and practitioners.

# Range of consultation documents that our groups contributed to in 2022-23

Group	Contributions			
AAQA	Jobs and Skills Australia discussion paper Privacy Act review			
Ahpra	Public statements (warnings), Interim prohibition orders, Criminal history			
ABS	ANZSCO code			
IAEA	IAEA Radiation Therapist Handbook			
AMC	AMC accreditation assessment of RANZCR			
ASA	Ultrasound assessment of the gravid cervix to assess for risk of pre-term birth			
RANZCR	Draft Standards of Practice for Clinical Radiology Draft Standards of Practice for Artificial Intelligence in Radiation Oncology			
MSAC	MSAC application 1758 – Expansion of MBS Item numbers 12320 and 12322 for bone mineral testing to include patients aged 60–69 years			
AAQA = Australian Skills Quality Authority; Ahpra = Australian Health Practitioner Regulation Agency; ABS = Australian Bureau of Statistics; IAEA = International				

Regulation Agency; ABS = Australian Bureau of Statistics; IAEA = International Atomic Energy Agency; AMC = Australian Medical Council; ASA = Australian Sonographers Association; RANZCR = Royal Australian And New Zealand College of Radiology; MSAC = Medical Services Advisory Committee.



# **Directors' Report**

The Directors present this report on the entity for the financial year ended 31 October 2023. The following people were Directors and Officers of the Company at any time during the year. Our mission, objectives and strategies are outlined on page 11 of this report.

President
Vice-President
Honorary Treasurer
Honorary Secretary
Board Member
Board Member
Board Member

# **Review of operations**

Refer to the Chief Executive Officer's report for commentary. The total comprehensive income / (loss) for the year was \$493,274 profit (2022 profit \$366,083).

### Dividends

No amounts have been paid or declared by way of dividends during this year or in the prior year.

### Changes in state of affairs

During the financial year there was no significant change in the state of affairs of the Society other than that referred to in the financial report or notes thereto.

### Environmental regulation

The Society's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or a state or territory.

### Court proceedings

No person has applied for leave of court to bring proceedings on behalf of the Society or intervene in any proceedings to which the Society is a party for the purpose of taking responsibility on behalf of the Society for all or any part of those proceedings. The Society was not a party to any such proceedings during the year.

# **Board meetings**

During the reporting period, eight (8) meetings of Directors were held. Attendances by each Director during the period are outlined in the Board meeting attendance table below.

# Board meeting attendance 1 November 2022 to 31 October 2023

Board Director	NOV 2022	FEB 2023	MAR 2023	APR 2023	JUN 2023	JUL 2023	AUG 2023	OCT 2023	Eligible	Attended
Laura Adamson	N/A	N/A	N/A	N/A	$\checkmark$	~	~	$\checkmark$	4	4
Nigel Anderson	~	~	$\checkmark$	~	$\checkmark$	~	Partial Attendance	$\checkmark$	8	8
Christopher Dransfield	Apology	Apology	$\checkmark$	Apology	N/A	N/A	N/A	N/A	4	1
Naomi Gibson	~	~	$\checkmark$	~	$\checkmark$	~	~	$\checkmark$	8	8
Georgia Halkett	~	~	$\checkmark$	~	$\checkmark$	~	~	$\checkmark$	8	8
Bronywn Hilder	~	~	$\checkmark$	~	N/A	N/A	N/A	N/A	4	4
Carolyn Heyes	~	~	$\checkmark$	~	$\checkmark$	~	~	$\checkmark$	8	8
Rachel Kearvell	~	~	$\checkmark$	~	$\checkmark$	~	~	$\checkmark$	8	8
Natalie Kidd	~	~	~	~	$\checkmark$	~	Apology	~	8	7

#### **Directors' Report**

#### Auditor's independence declaration

A copy of the auditor's independence declaration as required under Section 307 C of the *Corporations Act 2001* is set out on page 36.

#### After balance date events

There has not been any matter or circumstance, other than that referred to in the financial report or notes thereto, that has arisen since the end of the financial year, that has significantly affected, or may significantly affect, the operations of the Society, the results of those operations, or the state of affairs of the Society in financial years after the financial year.

#### Likely developments

The likely developments in the operations of the Society and the expected results of those operations in financial years subsequent to the financial year ended 31 October 2023 are as outlined in the Chief Executive Officer's report.

## **Performance measures**

Membership at 31 October 2023

Total membership	8848
Resignations and removals	1236
Admissions and re-admissions	1060

#### Members guarantee

The Society is limited by guarantee. If it is wound up the Constitution states that each active (financial) member is required to contribute a maximum of the unpaid amount of their membership, each, towards any outstanding obligations of the Society. At 31 October 2023 the number of active (financial) members was 6860.

#### Finance

The Society's profit from ordinary activities for the year amounted to \$457,718 (2022 profit \$652,528).



# Indemnification of Officers and Auditors

During the financial year, the Society paid a premium in respect of a contract insuring the Directors of the Society and all Officers against a liability incurred as such a Director or Officer to the extent permitted by the *Corporations Act 2001*. The contract of insurance prohibits disclosure of the nature of the liability and the amount of the premium.

The Society has not otherwise, during or since the financial year, indemnified or agreed to indemnify an Officer or auditor of the Society or of any related body corporate against a liability incurred as such an Officer or auditor.

Signed in accordance with a resolution of the Board pursuant to Section 298(2) of the *Corporations Act 2001*.

Carolyn Heyes President

Melbourne 30 January 2024

Georgia Halbett

Dr Georgia Halkett Honorary Treasurer



### AUDITOR'S INDEPENDENCE DECLARATION UNDER SECTION 307C OF THE CORPORATIONS ACT 2001 TO THE DIRECTORS OF AUSTRALIAN SOCIETY OF MEDICAL IMAGING & RADIATION THERAPY

I declare that, to the best of my knowledge and belief, during the year ended 31 October 2023 there have been:

- no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- no contraventions of any applicable code of professional conduct in relation to the audit.

William Back

William Buck Audit (Vic) Pty Ltd ABN 59 116 151 136

000

C. L. Sweeney Director Melbourne, 30 January 2024

Level 20, 181 William Street, Melbourne VIC 3000

+61 3 9824 8555

vic.info@williambuck.com williambuck.com

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# Statement of profit or loss and other comprehensive income for the year ended 31 October 2023

	Note	2023 \$	2022 \$
Revenue from continuing operations			
Membership subscriptions		3,426,124	3,371,302
Rendering of services		718,514	636,665
Conference revenue	15	1,061,040	746,853
Finance revenue		208,905	80,716
Total revenue	4(a)	5,414,583	4,835,536
Expenses from continuing operations			
Conference expense	15	(958,282)	(632,025)
Employee benefits expense	4(b)	(1,692,730)	(1,530,159)
Depreciation and amortisation expense	4(c)	(75,353)	(90,952)
Publication expense		(430,515)	(423,987)
Printing and stationery expense		(9,004)	(8,358)
Board and panel expenses		(283,992)	(212,414)
Insurance		(362,763)	(333,869)
Seminar and social expenses		(140,964)	(92,404)
Computer – consumables		(258,692)	(203,033)
Telephone		(30,471)	(17,497)
Bank charges		(13,636)	(11,044)
Travelling expenses		(51,690)	(29,965)
Postage		(6,134)	(5,027)
Other expenses	4(d)	(642,639)	(592,274)
Total expenses		(4,956,865)	(4,183,008)
Surplus / (loss) before income tax		457,718	652,528
Income tax expense	5	-	-
Surplus / (loss) after income tax	14	457,718	652,528
Other comprehensive income			
Items that will not be reclassified subsequently to profit or loss			
Gain / (loss) on fair value movements on investments held at FVOCI		35,556	(286,446)
Other comprehensive income for the year		35,556	(286,446)
Total comprehensive income / (loss) for the year		493,274	366,083
Total comprehensive income / (loss) attributable to the members of the	entity	493,274	366,083

# Statement of financial position at 31 October 2023

Assets         Current assets         Cash and cash equivalents       6       5,811,885       5,284,672         Tade and other receivables       7       11,845       5,033         Other assets       8       225,522       197,651         Financial investments       9       1,780,040       1,680,148         Total current assets       7,829,292       7,167,442         Non-current assets       7,829,292       2,973,167         Property, plant and equipment       10       1,712,203       1,727,442         Intangibles       9       3,008,742       2,973,167         Toperty, plant and equipment       10       1,712,203       1,727,442         Intangibles       9       3,008,742       2,973,167         Total non-current assets       4,721,602       4,718,008         Current liabilities       10       6.67       1,7379         Total assets       12,550,904       1,885,492       1,885,492         Liabilities       2,550,904       1,885,492       2,973,161         Provisions       12       351,483       322,294         Other liabilities       2,523,499       2,347,802         Non-current liabilities       2,523,492       2,347		Note	2023 \$	2022 \$
Cash and cash equivalents         6         5,811,885         5,284,672           Trade and other receivables         7         11,845         5,013           Other assets         8         225,522         197,651           Financial investments         9         1,780,040         1,680,148           Total current assets         7,829,292         7,167,484           Non-current assets         7,829,292         7,167,484           Property, plant and equipment         10         1,712,023         1,727,442           Intangibles         10         1,712,023         1,727,442           Intangibles         10         _667         _17,379           Total non-current assets         4,721,612         4,718,008           Total assets         12,550,904         11,885,492           Liabilities         12,550,904         11,885,492           Current liabilities         13         1,886,721         1,817,694           Trade and other payables         11         285,295         207,814           Provisions         12         _523,492         2,347,802           Non-current liabilities         2,523,493         322,294           Total current liabilities         _19,337         _22,896	Assets			
Trade and other receivables       7       11,845       5,013         Other assets       8       225,522       197,651         Financial investments       9       1,780,040       1,680,148         Total current assets       7,829,292       7,167,484         Non-current assets       9       3,008,742       2,973,187         Property, plant and equipment       10       1,712,203       1,727,442         Intangibles       10       _667       _17,379         Total anon-current assets       4,721,612       4,718,008         Current liabilities       12,550,904       11,885,492         Liabilities       12,852,95       207,814         Provisions       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694         Total current liabilities       13       1,886,721       1,817,694         Total current liabilities       13       1,886,721       1,817,694         Total current liabilities       2,523,499       2,347,802       2,2866         Total current liabilities       13       1,886,721       1,817,694         Total current liabilities       2,19,337       _22,896       2,234,802         Total ino	Current assets			
Other assets         8         225,22         17,651           Financial investments         9         1,780,040         1,680,148           Total current assets         7,829,292         7,167,484           Non-current assets         9         3,008,742         2,973,187           Property, plant and equipment         10         1,712,203         1,727,442           Intangibles         10         667         17,379           Total anon-current assets         4,721,612         4,718,008           Total assets         1,2550,904         11,885,492           Liabilities         12         51,483         322,294           Other liabilities         11         285,295         207,814           Provisions         12         351,483         322,294           Other liabilities         13         1,886,721         1,817,694           Total current liabilities         13         1,886,721         1,817,694           Total current liabilities         13         1,886,721         1,817,694           Total current liabilities         13         1,886,721         2,896           Total current liabilities         2,523,499         2,347,802           Provisions         12         1,9337 <td>Cash and cash equivalents</td> <td>6</td> <td>5,811,885</td> <td>5,284,672</td>	Cash and cash equivalents	6	5,811,885	5,284,672
Financial investments       9       1,780,040       1,680,148         Total current assets       7,829,292       7,167,484         Non-current assets       9       3,008,742       2,973,187         Property, plant and equipment       10       1,712,203       1,727,442         Intangibles       10       667       1,7379         Total non-current assets       4,721,612       4,718,008         Total assets       2,550,904       11,885,492         Liabilities       2       207,814         Current liabilities       11       285,295       207,814         Provisions       11       285,295       207,814         Provisions       12       31,483       322,294         Other liabilities       2,523,493       322,294         Total current liabilities       2,523,493       322,294         Non-current liabilities       2,523,493       322,294         Total current liabilities       2,523,493       322,294         Total non-current liabilities       2,523,493       322,896         Total non-current liabilities       2,542,835       2,370,698         Total non-current liabilities       2,542,835       2,370,698         Net assets       10,008,068 <td>Trade and other receivables</td> <td>7</td> <td>11,845</td> <td>5,013</td>	Trade and other receivables	7	11,845	5,013
Total current assets         7,829,292         7,167,484           Non-current assets         9         3,008,742         2,973,187           Property, plant and equipment         10         1,712,203         1,727,442           Intangibles         10         _667         _17,379           Total non-current assets         4,721,612         4,718,008           Total assets         12,550,904         11,885,492           Liabilities         12         351,483         322,294           Other payables         11         285,295         207,814           Provisions         12         351,483         322,294           Other liabilities         13         1,886,721         1,817,694           Total current liabilities         2,534,93         2,347,802         2,347,802           Non-current liabilities         2,523,99         2,347,802         2,347,802           Total non-current liabilities         2,524,836         2,370,698           Total non-current liabilities         2,542,836         2,370,698           Not current liabilities         2,542,836         2,370,698           Total non-current liabilities         2,542,836         2,370,698           Net assets         10,008,068         9,514,794 <td>Other assets</td> <td>8</td> <td>225,522</td> <td>197,651</td>	Other assets	8	225,522	197,651
Non-current assets         Interfact assets           Financial investments         9         3,008,742         2,973,187           Property, plant and equipment         10         1,712,203         1,727,442           Intangibles         10         1,712,203         1,727,442           Intangibles         10         667	Financial investments	9	<u>1,780,040</u>	1,680,148
Financial investments         9         3,008,742         2,973,187           Property, plant and equipment         10         1,712,203         1,727,442           Intangibles         10	Total current assets		7,829,292	7,167,484
Property, plant and equipment       10       1,72,203       1,727,442         Intangibles       10      672      7379         Total non-current assets      4,721,612      4,718,008         Total assets      4,721,612      4,718,008         Liabilities      4,721,612      4,718,008         Current liabilities	Non-current assets			
Intangibles       10       667       17,379         Total non-current assets       4,721,612       4,718,008         Total assets       12,550,904       11,885,492         Liabilities       5       5         Current liabilities       5       207,814         Provisions       11       285,295       207,814         Other liabilities       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694         Other liabilities       2,523,499       2,347,802       2,523,499       2,347,802         Non-current liabilities       2,523,499       2,347,802       2,2896       2,2896       2,2896       2,2896       2,2896       2,2896       2,2896       2,2896       2,2896       2,252,896       2,370,698       2,2896       2,252,896       2,370,698       2,2896       2,252,896       2,370,698       2,2896       2,370,698       2,252,896       2,370,698       2,514,993       2,2896       2,514,993       2,2896       2,370,698       3,314,89       3,514,794       3,314,89       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794       3,514,794 </td <td>Financial investments</td> <td>9</td> <td>3,008,742</td> <td>2,973,187</td>	Financial investments	9	3,008,742	2,973,187
Total non-current assets         4,721,612         4,718,008           Total assets         12,550,904         11,885,492           Liabilities         Current liabilities         11         285,295         207,814           Provisions         11         285,295         207,814           Provisions         12         351,483         322,294           Other liabilities         13         1,886,721         1,817,694           Total current liabilities         2,523,499         2,347,802           Non-current liabilities         2,523,499         2,347,802           Non-current liabilities         19,337         22,896           Total non-current liabilities         19,337         22,896           Total inon-current liabilities         19,337         22,896           Total inon-current liabilities         2,542,836         2,370,698           Net assets         10,008,068         9,514,794           Equity         1         303,148         965,564           Reserves         14         303,148         965,564           Retained surplus         14         9,704,920         8,549,230	Property, plant and equipment	10	1,712,203	1,727,442
Total assets         12,550,904         11,885,492           Liabilities         Current liabilities         Suppression         Suppression           Trade and other payables         11         285,295         207,814           Provisions         12         351,483         322,294           Other liabilities         13         1,886,721         1,817,694           Total current liabilities         2,523,499         2,347,802           Non-current liabilities         2,523,499         2,347,802           Provisions         12         19,337         22,896           Total non-current liabilities         19,337         22,896           Total liabilities         2,542,836         2,370,698           Net assets         10,008,068         9,514,794           Equity         14         303,148         965,564           Retained surplus         14         9,704,920         8,549,230	Intangibles	10	667	17,379
Liabilities         Current liabilities         Trade and other payables       11       285,295       207,814         Provisions       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694         Total current liabilities       2,523,499       2,347,802         Non-current liabilities       2,523,499       2,347,802         Provisions       12       19,337       22,896         Total non-current liabilities       19,337       22,896         Resets       10,008,068       9,514,794         Equity       10,008,068       9,514,794         Reserves       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Total non-current assets		4,721,612	4,718,008
Current liabilities       11       285,295       207,814         Provisions       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694         Total current liabilities       2,523,499       2,347,802         Non-current liabilities       2,523,499       2,347,802         Provisions       12       19,337       22,896         Total non-current liabilities       19,337       22,896         Total liabilities       19,337       22,896         Total liabilities       19,337       22,896         Total non-current liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity       Reserves       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Total assets		12,550,904	11,885,492
Trade and other payables       11       285,295       207,814         Provisions       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694         Total current liabilities       2,523,499       2,347,802         Non-current liabilities       2       19,337       22,896         Total non-current liabilities       12       19,337       22,896         Total liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity       14       303,148       965,564         Reserves       14       9,704,920       8,549,230	Liabilities			
Provisions       12       351,483       322,294         Other liabilities       13       1,886,721       1,817,694 <b>Total current liabilities</b> 2,523,499       2,347,802 <b>Non-current liabilities</b> 12       19,337       22,896 <b>Total non-current liabilities</b> 2,542,836       2,370,698 <b>Net assets</b> 10,008,068       9,514,794 <b>Equity</b> 14       303,148       965,564         Reserves       14       9,704,920       8,549,230	Current liabilities			
Other liabilities       13       1,886,721       1,817,694         Total current liabilities       2,523,499       2,347,802         Non-current liabilities       12       19,337       22,896         Total non-current liabilities       12       19,337       22,896         Total non-current liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity       1       303,148       965,564         Reserves       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Trade and other payables	11	285,295	207,814
Total current liabilities       2,523,499       2,347,802         Non-current liabilities       1       19,337       22,896         Provisions       12       19,337       22,896         Total non-current liabilities       19,337       22,896         Total non-current liabilities       19,337       22,896         Total non-current liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Provisions	12	351,483	322,294
Non-current liabilities           Provisions         12         19,337         22,896           Total non-current liabilities         19,337         22,896           Total liabilities         2,542,836         2,370,698           Net assets         10,008,068         9,514,794           Equity         14         303,148         965,564           Retained surplus         14         9,704,920         8,549,230	Other liabilities	13	1,886,721	1,817,694
Provisions       12       19,337       22,896         Total non-current liabilities       19,337       22,896         Total liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Total current liabilities		2,523,499	2,347,802
Total non-current liabilities       19,337       22,896         Total liabilities       2,542,836       2,370,698         Net assets       10,008,068       9,514,794         Equity            Reserves       14       303,148       965,564         Retained surplus       14       9,704,920       8,549,230	Non-current liabilities			
Total liabilities         2,542,836         2,370,698           Net assets         10,008,068         9,514,794           Equity         2000 - 100000000000000000000000000000000	Provisions	12	19,337	22,896
Net assets         10,008,068         9,514,794           Equity         14         303,148         965,564           Retained surplus         14         9,704,920         8,549,230	Total non-current liabilities		19,337	22,896
Equity         14         303,148         965,564           Retained surplus         14         9,704,920         8,549,230	Total liabilities		2,542,836	<u>2,370,698</u>
Reserves         14         303,148         965,564           Retained surplus         14 <u>9,704,920</u> <u>8,549,230</u>	Net assets		10,008,068	9,514,794
Retained surplus         14         9,704,920         8,549,230	Equity			
	Reserves	14	303,148	965,564
<b>Total equity</b> 10,008,068 9,514,794	Retained surplus	14	9,704,920	8,549,230
	Total equity		10,008,068	9,514,794

# Statement of changes in equity for the year ended 31 October 2023

	Retained surplus \$	Special purpose funds \$	Share revaluation reserve \$	Education fund reserve \$	Total \$
Balance at 31 October 2021	7,930,197	664,477	454,038	100,000	9,148,712
Surplus from operations	652,528	-	-	-	652,528
Revaluation increment / (decrement)	-	-	(286,446)	-	(286,446)
Transfers to reserves	(33,495)	33,495			
Balance at 31 October 2022	8,549,230	697,972	167,592	100,000	9,514,794
Surplus from operations	457,718	-	-	-	457,718
Revaluation increment / (decrement)	-	-	35,556	-	35,556
Transfers to reserves	697,972	(697,972)			
Balance at 31 October 2023	9,704,920		203,148	100,000	10,008,068

# Statement of cashflows for the year ended 31 October 2023

	Note	2023 \$	2022 \$
Cashflows from operating activities			
Receipts from customers and members		5,788,441	5,223,510
Payments to suppliers and employees		(5,326,840)	(4,594,926)
Interest received	4(a)	208,905	80,716
Net cashflows from operating activities		670,506	651,461
Cashflows from investing activities			
Payments for investments	9	(99,891)	(66,758)
Purchase of property, plant and equipment	10	(43,402)	(6,815)
Net cashflows used in investing activities		(143,293)	(73,573)
Net increase/(decrease) in cash and cash equivalents		527,213	577,888
Cash and cash equivalents at beginning of year		5,284,672	4,706,784
Cash and cash equivalents at end of year	6	5,811,885	5,284,672

# Notes to the financial statements for the year ended 31 October 2023

# 1. Corporate information

The financial report of Australian Society of Medical Imaging and Radiation Therapy ('the Society') for the year ended 31 October 2023 was authorised for issue in accordance with a resolution of the Board of Directors on Tuesday 30 January 2024.

The Society is a public company, limited by guarantee, incorporated and operating in Australia.

If the Society is wound up, the Constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding obligations of the Society. At 31 October 2023, the number of financial members was 6860 (2022: 6811).

The nature of the operations and principal activities of the Society are described in Note 3.

# Principal registered office

#### Principal place of business

Suite 1040-1044, Level 10, 1 Queens Road Melbourne Vic 3004 Tel: 03 9419 3336 Suite 1040-1044, Level 10, 1 Queens Road Melbourne Vic 3004 Tel: 03 9419 3336

# 2. Summary of significant accounting policies

#### a) Basis for preparation

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards - Simplified Disclosure issued by the Australian Accounting Standards Board ('AASB') and the *Corporations Act 2001.* The Society is a not-forprofit entity for financial reporting purposes under Australian Accounting Standards.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise.

The financial statements, except for the cashflow information, have been prepared on an accruals

basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar.

# New or amended Accounting Standards and Interpretations adopted

The Society has adopted all of the new or amended Accounting Standards and Interpretations issued by the AASB that are mandatory for the current reporting period. Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted. The adoption of these Accounting Standards and Interpretations did not have any significant impact on the financial performance or position of the Society.

#### b) Revenue recognition

#### Revenue recognition accounting policy

The Society recognises revenue as follows:

#### Revenue from contracts with customers

Revenue is recognised at an amount that reflects the consideration to which the Society is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the Society: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Variable consideration within the transaction price, if any, reflects concessions provided to the customer such as discounts, rebates and refunds, any potential bonuses receivable from the customer and any other contingent events. Such estimates are determined using either the 'expected value' or 'most likely amount' method. The measurement of variable consideration is subject to a constraining principle whereby revenue will only be recognised to the extent that it is highly probable that a significant reversal in the amount of cumulative revenue recognised will not occur. The measurement constraint continues until the uncertainty associated with the variable consideration is subsequently resolved. Amounts received that are subject to the constraining principle are recognised as a refund liability.

#### Membership income

Membership income is recognised equally over the membership period.

#### Sponsorship fees

Sponsorship income is recognised equally over the sponsorship period.

#### Interest

Interest revenue is recognised as interest accrues using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

#### Other revenue

Other revenue is recognised when it is received or when the right to receive payment is established.

#### Donations

Donations are recognised as revenue when received.

#### c) Government grants

Government grants are recognised when there is reasonable assurance that the grant will be received and all attaching conditions will be complied with such that the Society has gained control of the grant income. When the grant relates to an expense item, it is recognised over the periods necessary to match the grant on a systematic basis to the costs that it is intended to compensate.

If conditions are attached to the grant which must be satisfied before it is eligible to receive the contribution, the recognition of the grant as revenue will be deferred until those conditions are satisfied.

When grant revenue is received whereby the entity incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the state of financial position as a liability until the service has been delivered to the contributor, otherwise the grant is recognised as income on receipt.

#### d) Borrowing costs

Borrowing costs are recognised as an expense when incurred.

#### e) Cash and cash equivalents

Cash and short-term deposits in the Statement of Financial Position comprise cash at bank and on hand and short-term deposits with an original maturity of three months or less. For the purposes of the Statement of Cashflows, cash and cash equivalents consist of cash and cash equivalents as defined above.

#### f) Trade and other receivables

Trade receivables are recognised initially at fair value and subsequently measured at amortised cost, less allowance for doubtful debts. Trade receivables are due for settlement on 7 to 90-day terms from the date of recognition.

Collectability of trade receivables is reviewed on an ongoing basis. Debts which are known to be uncollectible are written off.

#### g) Goods and services tax

Revenues, expenses and assets are recognised net of the amount of goods and services tax (GST), except:

- (i) where the amounts of GST incurred is not recoverable from the taxation authority, it is recognised as part of the cost of acquisition of an asset or as part of an item of expense; or
- (ii) for receivables and payables which are recognised inclusive of GST.

The net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables or payables.

Cashflows included in the Statement of Cashflows are on a gross basis. The GST component arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cashflows.

#### h) Property, plant and equipment

Plant and equipment are stated at cost less accumulated depreciation and accumulated impairment losses.

Land and buildings are measured at cost less accumulated depreciation on buildings less any impairment losses recognised.

Depreciation is calculated on a straight-line basis over the estimated useful life of the assets as follows:

Buildings	50 years
Building renovations and electrical works	10 years
Computer equipment	3 years
Office furniture and equipment	5 years

#### (i) Impairment

The carrying values of plant and equipment are reviewed for impairment at each reporting date, with recoverable amount being estimated when events or changes in circumstances indicate that the carrying value may be impaired.

The recoverable amount of plant and equipment is the higher of fair value less costs to sell and value in use. In assessing value in use, the estimated future cashflows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset.

For an asset that does not generate largely independent cash inflows, recoverable amount is determined for the cash-generating unit to which the asset belongs, unless the asset's value in use can be estimated to be close to its fair value.

An impairment exists when the carrying value of an asset or cash-generating units exceeds its estimated recoverable amount. The asset or cash-generating unit is then written down to its recoverable amount.

For plant and equipment, impairment losses are recognised in the income statement in the cost of sales line item. However, because land and buildings are measured at revalued amounts, impairment losses on land and buildings are treated as a revaluation decrement.

#### (ii) Derecognition and disposal

An item of property, plant and equipment is derecognised upon disposal or when no further future economic benefits are expected from its use or disposal.

Any gain or loss arising on derecognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is included in profit or loss in the year the asset is derecognised.

#### i) Financial instruments

#### (i) Initial recognition and measurement

Financial assets and financial liabilities are recognised when the entity becomes a party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the Society commits itself to either purchase or sell the asset (ie. trade date accounting is adopted). Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified 'at fair value through profit or loss', in which case transaction costs are recognised in profit or loss immediately. At initial recognition an entity at its sole option may irrevocably designate investment in an equity instrument as fair value through other comprehensive income (FVOCI).

#### (ii) Classification and subsequent measurement

Financial instruments are subsequently measured at fair value, amortised cost using the effective interest rate method, or cost. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as the amount at which the financial asset or financial liability is measured at initial recognition less principal repayments and any reduction for impairment, and adjusted for any cumulative amortisation of the difference between that initial amount and the maturity amount calculated using the effective interest method. The effective interest method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cashflows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense item in profit or loss. At initial recognition an entity at its sole option may irrevocably designate investment in an equity instrument as FVOCI, unless the asset is held for trading, or contingent consideration in a business combination. Under this option, only qualifying dividends are recognised in other comprehensive income and never reclassified to profit and loss, even if the asset is impaired, sold or otherwise derecognised.

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

#### (iii) Financial liabilities

Non-derivative financial liabilities other than financial guarantees are subsequently measured at amortised cost. Gains or losses are recognised in profit or loss through the amortisation process and when the financial liability is derecognised.

#### (iv) Impairment

At the end of each reporting period, the Society assesses whether there is objective evidence that a financial asset has been impaired.

A financial asset or a group of financial assets will be deemed to be impaired if, and only if, there is objective evidence of impairment as a result of the occurrence of one or more events (a 'loss event'), which has an impact on the estimated future cashflows of the financial asset(s).

#### **Financial Statements**

In the case of financial assets, a significant or prolonged decline in the market value of the instrument is considered a loss event. Impairment losses are recognised in profit or loss immediately. Also, any cumulative decline in fair value previously recognised in other comprehensive income is reclassified to profit or loss at this point.

In the case of financial assets carried at amortised cost, loss events may include indications that the debtors, or a group of debtors, are experiencing significant financial difficulty, default or delinquency in interest or principal payments, indications that they will enter into bankruptcy or other financial reorganisation and changes in arrears or economic conditions that correlate with defaults.

For financial assets carried at amortised cost (including loans and receivables), a separate allowance account is used to reduce the carrying amount of financial assets impaired by credit losses. After having undertaken all possible measures of recovery, if the management establishes that the carrying amount cannot be recovered by any means, at that point the writing off amounts are charged to the allowance account or the carrying amount of impaired financial assets is reduced directly if no impairment amount was previously recognised in the allowance accounts.

When the terms of financial assets that would otherwise have been past due or impaired have been renegotiated, the Society recognises the impairment for such financial assets by taking into account the original terms as if the terms have not been renegotiated so that the loss events that have occurred are duly considered.

#### (v) Derecognition

Financial assets are derecognised where the contractual rights to receipt of cashflows expires or the asset is transferred to another party whereby the entity no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are either discharged, cancelled or expired. The difference between the carrying amount of the financial liability, which is extinguished or transferred to another party and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed, is recognised in profit or loss. On derecognition of an investment in equity which was elected to be classified under fair value through other comprehensive income, the accumulative gain or loss previously accumulated in the investment's revaluation reserve is not reclassified to profit and loss but is transferred to retained earnings.

#### j) Trade and other payables

Trade payables and other accounts payable arise when the Society becomes obliged to make future payments resulting from the purchase of goods and services.

# k) Employee leave benefits(i) Wages, salaries and annual leave

Liabilities for wages and salaries and annual leave expected to be settled within 12 months of the reporting date are recognised in other payables in respect of employees' services up to the reporting date. They are measured at the amounts expected to be paid when the liabilities are settled plus on costs. Liabilities for non-accumulating sick leave are recognised when the leave is taken and are measured at the rates paid or payable.

#### (ii) Long service leave

The liability for long service leave is recognised in the provision for employee benefits and measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures, and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currencies that match, as closely as possible, the estimated future cash outflows.

#### I) Critical accounting estimates and judgements

The Directors evaluate estimates and judgements incorporated into the financial statements based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the Society.

#### m) Unearned income

Government grants received in advance are booked as deferred revenue within liabilities until all attaching conditions have been complied with.

#### n) Contract liabilities

Contract liabilities represent the Society's obligation to transfer goods or services to a customer and are recognised when a customer pays consideration, or when the Society recognises a receivable to reflect its unconditional right to consideration (whichever is earlier) before the Society has transferred the goods or services to the customer.

#### o) Intangibles

Software is recorded at cost. Software has a finite life and is carried at cost less accumulated amortisation and any impairment losses. It has an estimated useful life of between one and three years. It is assessed annually for impairment.

#### p) Fair value of assets and liabilities

The Society measures some of its assets and liabilities at fair value on either a recurring or nonrecurring basis, depending on the requirements of the applicable Accounting Standard.

Fair value is the price the Society would receive to sell an asset or would have to pay to transfer a liability in an orderly (ie. unforced) transaction between independent, knowledgeable and willing market participants at the measurement date.

As fair value is a market-based measure, the closest equivalent observable market pricing information is used to determine fair value. Adjustments to market values may be made having regard to the characteristics of the specific asset or liability. The fair values of assets and liabilities that are not traded in an active market are determined using one or more valuation techniques. These valuation techniques maximise, to the extent possible, the use of observable market data.

To the extent possible, market information is extracted from either the principal market for the asset or liability (ie. the market with the greatest volume and level of activity for the asset or liability) or, in the absence of such a market, the most advantageous market available to the entity at the end of the reporting period (ie. the market that maximises the receipts from the sale of the asset or minimises the payments made to transfer the liability, after taking into account transaction costs and transport costs).

#### q) Provision

Provisions are recognised when the entity has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result, and that outflow can be reliably measured. Provisions recognised represent the best estimate of the amounts required to settle the obligation at the end of the reporting period.

# 3. Segment information

The Society operates in the one industry, that being the promotion of diagnostic radiography, radiation therapy, magnetic resonance imaging, computed tomography and ultrasound.

Financial Statements		
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# 4. Revenues and expenses

	2023 \$	2022 \$
(a) Revenue		
Membership subscriptions	3,426,124	3,371,302
Rendering of services	718,514	636,665
Conference revenue	1,061,040	746,853
Finance revenue	208,905	80,716
	5,414,583	4,835,535
Breakdown of finance revenue		
Bank interest receivable	208,905	80,716
Total finance revenue	208,905	80,716
(b) Employee benefits expense		
Wages and salaries	1,484,165	1,360,014
Superannuation	154,329	137,361
Payroll tax	43,921	24,647
Workers' compensation cost	10,315	8,137
	1,692,730	1,530,159
(c) Depreciation and amortisation expense		
Land and buildings	43,410	41,382
Computer equipment	12,961	19,742
Intangible software	16,712	27,369
Furniture and equipment	2,270	2,460
	75,353	90,952
(d) Other expenses		
Other allocation and general expenses	95,031	101,118
Other administrative expenses	547,608	491,156
	642,639	592,274

Financial Statements		

# 5. Income tax

No provision has been made for taxation in the financial report, as the Society is exempt from income tax under Section 50-5 of the *Income Tax Assessment Act 1936*.

# 6. Cash and cash equivalents

The Society's cash and cash equivalents are subject to external restrictions that limit amounts available for discretionary use, these include:

	2023 \$	2022 \$
Cash at bank - Bendigo Bank	368,511	236,876
Cash at bank - Bendigo Bank - Special Purpose Fund	-	1,148
Cash at bank - Commonwealth Bank	118,600	32,406
Cash at bank - Commonwealth Bank Direct Investment	5,130,363	4,821,350
Cash at bank - Creditor	194,411	192,890
Total unrestricted cash and cash equivalents	5,811,885	5,284,672

Cash at bank earns interest at floating rates based on daily bank deposit rates.

#### **Reconciliation to Statement of Cashflows**

For the purpose of the Statement of Cashflows, cash and cash equivalents comprise the following at 31 October 2023:

Cash at bank and on hand

5,811,885 5,284,672

# 7. Trade and other receivables (current)

	2023 \$	2022 \$
Trade receivables (i)	11,845	5,013

(i) Trade receivables are non-interest bearing and are generally on 7 to 90-day terms. An allowance for doubtful debts has not been made, however balances that are 12 months old or longer that have become uncollectible are directly written off to bad debts.

#### Credit risk - accounts receivable and other debtors

The Society does not have any material credit risk exposure to any single receivable or group receivables. The above table details the Society's accounts receivable and other debtors exposed to credit risk (prior to collateral and other credit enhancements) with ageing analysis and impairment provided for thereon. Amounts are considered as past due when the debt has not been settled within the terms and conditions agreed between the Society and the customer or counterparty to the transaction. Receivables that are past due are assessed for impairment by ascertaining solvency of the debtors and are provided for where there are specific circumstances indicating that the debt may not be fully repaid to the Society. The balances of receivables that remain within the initial trade terms (as detailed in the table below) are considered to be of high credit quality.

## 8. Other assets

	2023 \$	2022 \$
Other	4,664	419
Prepayments	176,931	40,090
Conference advances	43,227	156,442
Security deposits	700	700
	225,522	197,651

# 9. Financial investments

	2023 \$	2022 \$
Current assets		
La Trobe Financial 12 months term deposit	1,780,040	1,680,148
	1,780,040	1,680,148
Non-current assets		
Macquarie Investment Account – at fair value through other comprehensive income	2,948,540	2,901,582
Shares in listed companies – at fair value through other comprehensive income	60,202	71,605
	3,008,742	2,973,187

Financial investments consist of investments in ordinary shares, and therefore have no fixed maturity date or coupon date.

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# 10. Property, plant, equipment and intangibles

	Buildings & land at cost \$		Furniture & equipment at cost \$	Intangible assets at cost \$	Total \$
Year ended 31 October 2023					
At 1 November 2022, net of accumulated depreciation and impairment	1,704,512	18,531	4,399	17,379	1,744,821
Additions	30,430	9,600	3,372	-	43,402
Disposals	-	-	-	-	-
Revaluation increment	-	-	-	-	-
Depreciation - reversal at disposal	-	-	-	-	-
Depreciation charge for the year	(43,410)	(12,961)	(2,270)	(16,712)	(75,353)
At 31 October 2023, net of accumulated depreciation and impairment	1,691,532	15,170	5,501	667	1,712,870
At 31 October 2023					
Cost or fair value	1,937,862	356,516	244,737	191,924	2,731,039
Accumulated depreciation and impairment	(246,330)	(341,346)	(239,236)	(191,257)	(1,018,168)
Net carrying amount	1,691,532	15,170	5,501	667	1,712,870
Year ended 31 October 2022					
At 1 November 2021, net of accumulated depreciation and impairment	1,745,894	34,161	4,155	44,748	1,828,958
Additions	-	4,112	2,704	-	6,816
Disposals	-	-	-	-	-
Revaluation increment	-	-	-	-	-
Depreciation - reversal at disposal	-	-	-	-	-
Depreciation charge for the year	(41,382)	(19,742)	(2,460)	(27,369)	(90,953)
At 31 October 2022, net of accumulated depreciation and impairment	1,704,512	18,531	4,399	17,379	1,744,821
At 31 October 2022					
Cost or fair value	1,907,432	346,916	241,365	191,924	2,687,637
Accumulated depreciation and impairment	(202,920)	(328,385)	(236,966)	(174,545)	942,816
Net carrying amount	1,704,512	18,531	4,399	17,379	1,744,821

The useful life of the assets was estimated as follows both for 2023 and 2022:

Buildings	50 years
Buildings - renovation/electrical works	10 years
Computer equipment	3 years
Furniture and equipment	5 years

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# 11. Trade and other payables (current)

	2023 \$	2022 \$
Unsecured trade payables at amortised cost (i)	101,828	22,175
Other payables - sundry creditors at amortised cost	28,823	23,995
Indirect taxes payable	154,644	161,644
	285,295	207,814

(i) Trade payables are non-interest bearing and are normally settled within 30-day terms.

# 12. Provisions

	Annual leave \$	Long service leave (current) \$	Long service leave (non-current) \$	Total \$
At 1 November 2022	_160,850	161,444	22,896	345,190
Arising during the year	134,874	51,994	-	186,868
Utilised	(134,350)	(23,329)	-	(157,679)
Discount rate adjustment			(3,559)	(3,559)
At 31 October 2023	161,374	190,109	19,337	370,820

Employee provisions represent amounts accrued for annual leave and long service leave. The current portion for this provision includes the total amount accrued for annual leave entitlements and the amounts accrued for long service leave entitlements that have vested due to employees having completed the required period of service. Based on past experience, the Society does not expect the full amount of annual leave or long service leave balances classified as current liabilities to be settled within the next 12 months. However, these amounts must be classified as current liabilities since the Society does not have an unconditional right to defer the settlement of these amounts in the event employees wish to use their leave entitlement.

The non-current portion for this provision includes amounts accrued for long service leave entitlements that have not yet vested in relation to those employees who have not yet completed the required period of service.

# 13. Other liabilities

	2023 \$	2022 \$
Contract liabilities	1,827,607	1,786,211
Other creditors	59,114	31,483
	1,886,721	1,817,694

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# 14. Retained surplus and reserves

	2023 \$	2022 \$
Movements in retained surplus were as follows:		
Balance at 1 November	8,549,230	7,930,197
Net surplus / (loss) for the year	457,718	652,528
Transfer (to)/from special purpose funds reserve	697,972	(33,495)
Balance at 31 October	9,704,920	8,549,230

#### Reserves

	Special purpose funds \$	Share revaluation reserve \$	Education reserve fund \$	Total \$
At 1 November 2022	697,972	167,592	100,000	965,564
Net increase/(decrease) transferred from/(to) retained surplus	(697,972)	-	-	(697,972)
Revaluation of financial investments		35,556		35,556
At 31 October 2023		203,148	100,000	303,148
			2023 \$	2022 \$

#### Total special purpose funds

#### Nature and purpose of reserves

#### Special purpose funds

The special purpose funds represent the accumulated amounts generated by activities in each ASMIRT Branch and Sub-branch. They can only be used by the relevant Branch or Sub-branch to fund member activities. In the 2023 financial year, the special purpose fund reserves were closed off and consolidated into the general funds of the Society.

#### Education fund reserve

The education fund reserve has been set up to allow the Board to allocate scholarships and subsidies to disadvantaged radiographers and students from developing countries to attend the Society's Annual Scientific Meetings of Medical Radiation and Therapy (ASMMIRT).

#### Share revaluation reserve

The reserve is used to recognise increments and decrements in the fair value of financial assets at fair value through other comprehensive income.

697,972

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# 15. Conference

The ASMIRT 2023 Conference was held in Sydney (the 2022 conference was held in Cairns).

	ASMIRT 2023 \$	ASMIRT 2022 \$
Income		
Other income	450,509	296,461
Conference registrations	610,531	450,392
Total income	1,061,040	746,853
Expenses		
Conference and meeting expenses	352,597	315,093
Total expenditure	605,685	316,932
Total expenses	958,282	632,025
Conference surplus for year	102,758	114,828

# 16. Auditor's remuneration

	2023 \$	2022 \$
Amount received or due and receivable by the auditor for:		
Audit of the financial report	17,500	16,650
	17,500	16,650

# 17. Director and Executive disclosures

#### (a) Details of key management personnel

#### (i) Directors

The Directors' names and positions are listed as per the following:				
Carolyn Heyes	President (from May 2022)			
Naomi Gibson	Vice-President (from May 2022)			
Dr Georgia Halkett	Honorary Treasurer (from February 2021)			
Natalie Kidd	Honorary Secretary (from November 2020)			
Rachel Kearvell	Board Member (from May 2022)			
Dr Nigel Anderson	Board Member (from May 2022)			
Laura Adamson	Board Member (from April 2023)			

#### (ii) Executives

Sally Kincaid	Chief Executive Officer
Bruce Su	Chief Financial Officer and Company Secretary
Min Ku	Professional Standards Manager
Tanya Morgan	Education Manager
David Leach	Conference and Sales Manager
Robert Hilkes	Marketing and Communications Manager

#### (b) Compensation of key management personnel

- (i) Directors are not allowed to be compensated for their voluntary services under the Society's Constitution. No payments have been made to Directors this financial year nor last year.
- (ii) The total benefits payments made to the Executives for the year ended 31 October 2023 are detailed below:

	2023 \$	2022 \$
Short-term benefits	752,735	668,889
Post-employment benefits	80,468	68,064
Total	833,203	736,953

(iii) There were no other related party transactions.

# 18. Members guarantee

The Society is limited by guarantee. If the Society is wound up, the Constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding obligations of the Society. At 31 October 2023, the number of financial members was 6860 (2022: 6811).

# 19. Contingencies

There were no contingent assets or contingent liabilities for the current or previous year.

# 20. Events after balance sheet date

The Directors are not aware of any significant events since the end of the reporting period.



The Board of Directors declare that:

- a) The attached financial statements and notes, as set out on pages 37 to 53, thereto comply with Australian Accounting Standards –Simplified Disclosures.
- b) The attached financial statements and notes, as set out on pages 37 to 53, thereto give a true and fair view of the Society's financial position at 31 October 2023 and performance of the Society for the year ended 31 October 2023.
- c) In the Board's opinion, the attached financial statements and notes, as set on pages 37 to 53, thereto are in accordance with the *Corporations Act 2001*; and
- d) In the Board's opinion, there are reasonable grounds to believe that the Society will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of the Board made pursuant to Section 295(5) of the *Corporations Act 2001*.

On behalf of the Board

Carolyn Heyes President

Melbourne 30 January 2024

Georgin Halbett

Dr Georgia Halkett Honorary Treasurer

#### **Financial Statements**



# Australian Society of Medical Imaging and Radiation Therapy Independent auditor's report to members

## REPORT ON THE AUDIT OF THE FINANCIAL REPORT

### Opinion

We have audited the financial report of Australian Society of Medical Imaging and Radiation Therapy (the Company), which comprises the statement of financial position as at 31 October 2023, the statement of comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information, and the directors' declaration.

In our opinion, the accompanying financial report of the Company, is in accordance with the *Corporations Act 2001*, including:

- i. giving a true and fair view of the Company's financial position as at 31 October 2023 and of its financial performance for the year then ended; and
- ii. complying with Australian Accounting Standards Simplified Disclosures and the *Corporations Regulations 2001*.

# **Basis for Opinion**

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the auditor independence requirements of the *Corporations Act 2001* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We confirm that the independence declaration required by the *Corporations Act 2001*, which has been given to the directors of the Company, would be in the same terms if given to the directors as at the time of this auditor's report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

# **Other Information**

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 31 October 2023, but does not include the financial report and the auditor's report thereon.

Level 20, 181 William Street, Melbourne VIC 3000

+61 3 9824 8555

vic.info@williambuck.com williambuck.com.au

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#### **Financial Statements**



Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report, or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

### **Responsibilities of the Directors for the Financial Report**

The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Simplified Disclosures and the *Corporations Act 2001* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the Company to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

### Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of these financial statements is located at the Auditing and Assurance Standards Board website at: <a href="http://www.auasb.gov.au/auditors\_responsibilities/ar4.pdf">http://www.auasb.gov.au/auditors\_responsibilities/ar4.pdf</a>

This description forms part of our independent auditor's report.

Willian Bock

William Buck Audit (Vic) Pty Ltd ABN 59 116 151 136

C. L. Sweeney

Director Melbourne, 30 January 2024









Australian Society of Medical Imaging and Radiation Therapy