Annual report

Financial statements and reports for the year ended 31 October 2016
Vision

“Strength and excellence in the medical radiation science profession”

Mission

The Australian Society of Medical Imaging and Radiation Therapy is the national professional organisation representing medical radiation practitioners in Australia.

Our aims are to promote, encourage, cultivate and maintain the highest principles of practice and proficiency in respect of medical radiation science. The Society facilitates educational activities, discussion and consultation among members and others. We recognise Medical Radiation Practice Board of Australia (MRPBA) approved programs of study across Australia, set standards of competency in practice and encourage scholarship and continuing professional development.

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 contributions
- Responsive and professional attitude
- Energy and enthusiasm – passion for the Medical Radiation Science profession
- Participation and
- Leadership.

Our goals are to

- Represent all practitioners in the Australian MRS profession
- Be the global benchmark organisation in the MRS profession
- Maintain excellence in MRS practice through endorsed standards that underpin Australian licensing and registration
- Provide educational support along the pathway to professional practice
- Provide Continuing Professional Development (CPD) programs that ensure standards, proficiency and competency is maintained at the highest level
- Develop and maintain Professional Practice Standards (PPS) and assessments that demonstrate global best practice
- Assess proficiency of overseas qualified practitioners seeking employment in Australia
- Provide a cohesive, unified voice in dealings with all parties with MRS and
- Provide the resources (human, physical and financial) necessary to fulfil these goals.

Art ◗ Science ◗ Humanity
Contents

President’s Message 4
Acting Chief Executive’s Message 6
The Secretariat 8
Specialist Panels and Boards
  Radiation Therapy Advisory Panel 8
  Medical Imaging Advisory Panel 1 8
  Medical Imaging Advisory Panel 2 9
  Educational Standards and Advisory Panel 11
  Overseas Qualifications Assessment Panel 11
  Fellowship Panels 12
  Rural and Remote Practitioners Advisory Panel 12
  Editorial Review Board / JMRS 13
  Advanced Practice Advisory Panel 15
ISRRT 15
Presidents 16
Fellows as at 31 October 2016 17
Directors’ Report 18
Financial Statements 25

Composition of the Board

President  Patrick Eastgate, PMASMIRT, Qld
Vice President  Bronwyn Hilder, FASMIRT, Tas
Honorary Treasurer  Carolyn Heyes, PMASMIRT, Vic
Honorary Secretary  Robin Hart, PMASMIRT, WA
Whip  Jo Page, PMASMIRT, NSW
Board Member, SA  Denise Ogilvie, PMASMIRT (from May 2016)
Board Member, NSW  Jillian Harris, PMASMIRT (from May 2016)
Board Member, Qld  Adam Westerink, PMASMIRT (from August 2016)

Australian Society of Medical Imaging and Radiation Therapy
ABN 26 924 779 836

Secretariat: 25 King Street, Melbourne Vic 3000 Australia
Postal address: PO Box 16234, Collins Street West Vic 8007. Tel +61 3 9419 3336 Fax +61 3 9416 0783
email: info@asmirt.org, website: www.asmirt.org
Message from the President
– Patrick Eastgate

With ASMMIRT 2017 in Perth fast approaching I have the great privilege of writing this report whereby I will endeavour to provide a review of the past 12 months and what to look forward to in 2017 and beyond.

2016 was a challenging but exciting year for our Board and ASMIRT. Early in the year we introduced a new constitution to members, who enthusiastically voted in favour of the changes, and in favour of changing our name from AIR to ASMIRT. There will be further proposed changes at this year’s AGM as we continue to ensure that our Constitution meets our changing needs as a service business. The word ‘business’ is a timely reminder that ASMIRT is a not-for-profit organisation (NFPO) and as such the Board must ensure it not only complies with the Corporations Act but also that it remains a viable business now and into the future. This requirement underpins both the strategy and every decision taken by our Board.

One of the key drivers for my tenure as President has been to ensure we bring ASMIRT back into an annual operating surplus so that it can meet the changing needs of our broad spectrum of members. This has been a challenge that the Board has readily championed and you will see the fruits of our labour in the Treasurer’s Report.

In late 2016 our Board commissioned an external and independent review of our organisation. Much of the findings of this review will be the drivers for our Board in 2017 to see if we can get ASMIRT to be a leading NFPO in Australia.

2016 was also a year where our Board set out to position ASMIRT to make and champion significant changes. One of the most significant of these changes was the appointment of Ms Sally Kincaid as our CE and I hope you will make the time to meet her during ASMMIRT 2017. Sally brings a wealth of experience and real energy and vision to ASMIRT that will ensure that changes we aspire to in 2017 will be met. I would also take this further opportunity in thanking Paul Gloster for his time acting as our CE in 2016. Paul is such a credit to our organisation with his dedication and commitment and as a Board we look forward to continuing to work with Paul in 2017. I would also take this opportunity to thank all the ASMIRT staff for their continued support and commitment.
ASMIRT made a number of firm position statements on key issues including Registered Nurses being able to request imaging ... supporting the drive for sonographers to extend their role into MSK injections ... and provided feedback on recent challenges relating to coal workers’ pneumoconiosis (CWP).

through 2016, and I hope the changes we introduce in 2017 will enhance their passion and drive within our organisation.

We are also working to increase the benefits of membership for all our members. The most recent development has been a new partnership with BMS Insurance Brokers to ensure we are getting the best coverage for our members.

In 2016 ASMIRT made a number of firm position statements on key issues including Registered Nurses being able to request imaging. In collaboration with ASA and ASUM we supported the drive for sonographers to extend their role into MSK injections. We were also asked to provide feedback on recent challenges relating to coal workers’ pneumoconiosis (CWP), also known as black lung disease. Our profile was further enhanced through a number of articles in the media throughout the year and while we still have a lot of work to do in this space, it is something to which we are very much committed.

ASMIRT has continued to foster collegial relationships with our allied representative bodies, including the MRPBA, ASA, ASUM, ANZSNM, ACPSEM and RANZCR. We are delighted to continue our working relationships with these organisations in 2017.

Another exciting project ASMIRT has committed to has been to set up a process and benchmark for Radiographer Commenting. This process started early in 2017 with representation by local and global experts championing patient safety and providing medical imaging professionals a stepping stone to Advanced Practice. I hope you will support this initiative as it progresses in 2017.

Some big ticket items for 2017 ... first and foremost, our website and the data base that sits behind it both need a significant overhaul. Our CPD program needs to be aligned with other stakeholders, simple to understand and use in recording your CPD, and with the ability to provide evidence for auditing purposes. Did I mention an ‘App’?... let me not get too ahead of myself!

Our Board and CE will be looking to our volunteers and staff to foster real innovation to ensure the future viability of the society. I will report to you on these as the year progresses.

Finally to Dr Robin Hart (Rob) who will step down at our AGM as the West Australian Board member, and Jo Page who is stepping down as her term of Immediate Past President comes to an end, my sincere thanks.

Rob has been a committed Board member whose eloquent ways with words was something to behold. Your wisdom and thoughtfulness will always be something I will seek out.

Jo was an outstanding President of AIR, and her wisdom, friendship and mentorship established through long service to both the Society and the Board are peerless. I cannot thank her enough for the support she has shown to me as I took up the chain of office – and beyond.

We wish you both all the very best and hope we will continue to cross paths.

Patrick Eastgate
President
Message from the
Acting Chief Executive
– Paul Gloster

I am writing again this year (for the reporting period 1 November 2015 to 31 October 2016) in the role of Acting Chief Executive in the knowledge that by the time this article is published and read that there will be a new full time Chief Executive. I would like to thank the Board of Directors for their support and confidence in me for this period and to the Secretariat staff, especially the Executive Team for their significant ‘sharing of the load’ and for helping to make this such a roundly successful and strategically important year for the Society.

The year has been an exceptionally busy period at the office, not least because of the need to straddle two significant roles but also as a result of the unprecedented level of activity (both internal and outward facing) at a strategic and operational level. Much energy and time has been devoted towards the planning and preparation and outflow from the significant Constitution changes as well as all that has been involved in the planning and operationalisation of our new Organisation name – Australian Society of Medical Imaging and Radiation Therapy (both important strategic steps approved by ASMIRT members at the Brisbane AGM in April 2016).

The new Constitution provides much needed “contemporization” in respect to language and terminology and in relation to ASIC requirements. It also means that the Society can plan for a broadening of its membership base to accommodate the diversity of radiation science (MRS) practitioners, without diminishing the importance of our Professional members. The new organisation name also more accurately reflects the diversity of our membership – notably now including reference to Radiation Therapists.

The Board of Directors has ensured that we have continued to engage with and communicate with our key stakeholders – notably this year with AHPRA (Allied Health Professions Registration Agency), MRPBA (Medical Radiation Practice Board of Australia), RANZCR (Royal Australian and New Zealand College of Radiologists), ACPSEM (Australian College of Scientists and Engineers in Medicine), and the various Departments of Health, at a state and federal level. This year also saw our renewed membership of AHPA (Allied Health Professions Australia) – a notable conduit.
2016 has seen a phenomenal growth in student members following a direct promotion. The increase in student members is a very welcome outcome and we encourage all members, including students to become actively involved with their local branches and local branch events.

The Board remains committed to bolstering the array of member benefits to further strengthen the membership value proposition. This year saw the appointment of our new combined malpractice, public and products liability insurance policy (PI) broker – BMS. The Board are very excited regarding future learning initiatives and the prospect for enhanced information and learning opportunities to members in relation to safe working practices, risk mitigation and adherence to best practice. The learning opportunities here further augmenting a significantly attractive package of PI cover which includes $20m cover but which also affords full (and often ignored/overlooked) ‘run-off’ PI coverage for eligible members into retirement. In 2016, the Board were also very excited to launch the Member Advantage program, providing to eligible ASMIRT members a vast array of retail, travel and dining purchase discounts across a huge diversity of outlets. Again – watch this space.

It was a very busy year for our Conference and Events Department – testament being the quality, range and scale of learning offerings available to ASMIRT members throughout the year. It was a great pleasure to attend the excellent (and very well attended) ASMIRT 2016 Conference in Brisbane in April 2016. This Conference owes its great success to the quality of the presenters and speakers as well as to the army of dedicated and industrious volunteers at the QLD branch who strove (with our excellent Secretariat team) to ensure that all ran smoothly and to time and according to the rigorous planning established between the Convening Committee and David Leach with approval from the Board of Directors. August 2016 also provided an opportunity for the Board to attend the MedRad Forum in Hobart. This very successful event provided a showcase for a diverse array of topical and interesting presentations. The WA Branch and the Perth Convening Committee are putting significant effort into the planning and preparation for the ASMMIRT “Reach” Conference in Perth 24-26 March 2017. I am sure that this event will be a great success – I encourage you to attend this Conference and other future ASMMIRTs to come.

2016 has seen a phenomenal growth in student members following a direct promotion. The increase in student members is a very welcome outcome and we encourage all members, including students to become actively involved with their local branches and local branch events.

I would like to reiterate my sincere thanks to the countless individuals on the panels and State Branches for their unstinting service to the organisation, the Society and their profession, to the Board for their considerable support last year (notably Jo Page – Immediate Past-President and Patrick Eastgate – President) and to the Secretariat Staff and Executive Team for solid support throughout the year. I would also like to extend a very special mention to Min Ku and David Leach who were especially committed to ensuring such a successful conclusion to the year and via continuous sharing of tasks and projects and to many long days and late nights at the office throughout the year. A real team effort!

Paul Gloster
Acting Chief Executive
Secretariat staff, panels and boards to 31 October 2016

Staff at the Secretariat

Paul Gloster  Acting Chief Executive
Min Ku  Professional Standards Manager
David Leach  Conference & Events Manager
Bruce Su  Financial Controller
Toula Mandranis  Executive Assistant to the Chief Executive and Board (Part-time)
Kathleen O’Connor  Senior Administration Officer – Membership
Samantha Farmer  Administration Officer - Membership
Patricia Fanning  Administration Officer – CPD/MRI/CT Coordinator (Part-time)
Angela Coughlin  Events Coordinator
Stephanie Dunbar  Communications Content Coordinator
Nicole Hancock  Professional Accreditation and Education Board Support, Internship Coordinator
Emily Chapple  Administrative Assistant – CPD, Finance (Part-time)
Joelle Delafosse  Administrative Support (Casual)
Susan Elliot  Receptionist

Specialist Panels & Boards

Radiation Therapy Advisory Panel (RTAP)

Panel members
Anthony Arnold  NSW  Chair
Kevena Choma  Qld  Secretary
Aniko Cooper  QLD
Michael Young  Tas
Donna Matthews  SA
Katherine Fox  Vic
Rachel Kearvell  WA
Rebecca Height  Vic
Aimee Lovett  NSW

This year RTAP welcomed two new members to the panel – Aimee Lovett from NSW and Rebecca Height from Victoria. Both Rebecca and Aimee have both made a valuable contribution to the panel and our projects. As chair Anthony Arnold is also our representative on the national Tripartite Committee and has provided the panel with updates on projects which impact on radiation therapy in Australia.

This year RTAP has had one teleconference (1/4/16) and one face to face meeting at ASMMIRT. The aim of these meetings was to introduce the new panel members to the panel and progress work on projects such as the new Radiation Therapist Scope of Practice document and the publication of the 2014 RT Workforce Model.

The Radiation Therapist Scope of Practice document is still a work in progress with final compilation and editing an ongoing task. Following this the draft scope of practice document will be circulated for consultation.

Following the consultation period RTAP aim to finalise the document and make public as a reference document for the profession.

RTAP have been working on a manuscript to publish the work around the development of the update 2014 Workforce Model. This manuscript has finally been accepted for publication and the finalised article is expected to be available soon.

Most activity of the panel this year was undertaken via email discussion. Throughout the year the panel has reviewed and provided expert comment on a number of documents related to radiation therapy practice. These include the document from the Rural Radiation Therapy Special Interest Group which is associated with the Tripartite Committee and an ESTRO document on the credentialing of radiation therapy technologists in Europe.

This year RTAP was pleased to announce David Willis as the winner of the Varian Award. David has made an outstanding contribution to radiation therapy practice throughout his career and continues to do so.

We are not expecting any changes to the Common Practice Framework which is an ESTRO document from 2014. There will be a new update expected to be available soon.

This year as chair of MIAP1, I was aware that as we are all time poor, we need processes to make life easier which includes the use of electronic media to assist us whenever possible. Online form checking and replies, electronic form submission and electronic meeting agendas all make life easier. It has also resulted in reduced turnaround times for participants in the certification programs as well as a system that is quick and efficient.

While there is still more work to do with online forms, the forms that can be generated online make them more legible, easier to follow, quicker to check and result in fewer errors. A big thank you to the secretariat staff that have been helping to format documents than me. We have also looked at turning the certification entry examinations into an online exam, which would give us more flexibility and improve access. It would also allow us to mark the examinations better.

This year MIAP1 scheduled four teleconferences, (23rd February, 21st June, 16th August and 18th October) and two face-to-face meetings – ASMIRT 21st April in Brisbane and 11th November in Melbourne.

This year there has also been an increase in requests for information or comments from MIAP1. There are increased questions about scope of practice, e.g. contrast media safety, administration of drugs other than contrast media, and concerns about other practitioners such as dental assistants using radiation.

Marnie Rawle  Qld
Bosco Yu  NSW
Brendon Erskine  Vic
Ngon Tran  Vic

This year MIAP1 scheduled four teleconferences, (23rd February, 21st June, 16th August and 18th October) and two face-to-face meetings – ASMIRT 21st April in Brisbane and 11th November in Melbourne. This year as chair of MIAP1, I was aware that as we are all time poor, we need processes to make life easier which includes the use of electronic media to assist us whenever possible. Online form checking and replies, electronic form submission and electronic meeting agendas all make life easier. It has also resulted in reduced turnaround times for participants in the certification programs as well as a system that is quick and efficient.

While there is still more work to do with online forms, the forms that can be generated online make them more legible, easier to follow, quicker to check and result in fewer errors. A big thank you to the secretariat staff that have been helping to format documents than me. We have also looked at turning the certification entry examinations into an online exam, which would give us more flexibility and improve access. It would also allow us to mark the examinations better.

This year there has also been an increase in requests for information or comments from MIAP1. There are increased questions about scope of practice, e.g. contrast media safety, administration of drugs other than contrast media, and concerns about other practitioners such as dental assistants using radiation.

This year as chair of MIAP1, I was aware that as we are all time poor, we need processes to make life easier which includes the use of electronic media to assist us whenever possible. Online form checking and replies, electronic form submission and electronic meeting agendas all make life easier. It has also resulted in reduced turnaround times for participants in the certification programs as well as a system that is quick and efficient.

While there is still more work to do with online forms, the forms that can be generated online make them more legible, easier to follow, quicker to check and result in fewer errors. A big thank you to the secretariat staff that have been helping to format documents than me. We have also looked at turning the certification entry examinations into an online exam, which would give us more flexibility and improve access. It would also allow us to mark the examinations better.

This year there has also been an increase in requests for information or comments from MIAP1. There are increased questions about scope of practice, e.g. contrast media safety, administration of drugs other than contrast media, and concerns about other practitioners such as dental assistants using radiation.

Medical Imaging Advisory Panel 1 (MIAP1)

Panel members
Christine Vanderley-Reichner  Tas  Chair
Barry Tanian  WA
Karen Dobeli  Qld

This year MIAP1 scheduled four teleconferences, (23rd February, 21st June, 16th August and 18th October) and two face-to-face meetings – ASMIRT 21st April in Brisbane and 11th November in Melbourne. This year as chair of MIAP1, I was aware that as we are all time poor, we need processes to make life easier which includes the use of electronic media to assist us whenever possible. Online form checking and replies, electronic form submission and electronic meeting agendas all make life easier. It has also resulted in reduced turnaround times for participants in the certification programs as well as a system that is quick and efficient.

While there is still more work to do with online forms, the forms that can be generated online make them more legible, easier to follow, quicker to check and result in fewer errors. A big thank you to the secretariat staff that have been helping to format documents than me. We have also looked at turning the certification entry examinations into an online exam, which would give us more flexibility and improve access. It would also allow us to mark the examinations better.

This year there has also been an increase in requests for information or comments from MIAP1. There are increased questions about scope of practice, e.g. contrast media safety, administration of drugs other than contrast media, and concerns about other practitioners such as dental assistants using radiation.
We can only direct them to current state legislation which is difficult to interpret in the modern era.

But recently there has been many questions seeking advice on how to move from one specialist modality to another, or how to update clinical skills and practice for the changing imaging and radiation therapy environment.

The increasing variety of hybrid equipment (CT/PET/PECT/ MRI) means that many staff will be using this equipment, but feel they need more information than what is supplied by the application specialists. This is despite the fact that they may not be operating outside MRPB guidelines, which support performing tasks within your capability. We are also seeing discussion from diagnostic radiographers wanting to perform PET. Currently there are no obvious pathways beyond university study which has little practical component and may be beyond the reach of a working family.

This year I was privileged to represent ASMIRT on the RANZCR working group to update the iodinated contrast media guidelines. While it was a lot of work, I hope it will be useful to many of you in your day to day work.

MIAP1 have provided expert advice and reviewed many different groups over the year:

• Australian Health Practitioner Regulation Agency (AHPPA) and the Medical Board of Australia announced they had commissioned an independent review on the use of chaperones to protect patients to consider whether, and if so in what circumstances, it is appropriate to impose a chaperone condition on the registration of a health practitioner to protect patients while allegations of sexual misconduct are investigated.

• ARPANSA-Code for Radiation Protection in Planned Exposure Situations (Planned Exposure Code)

• Standards Australia for representation. This requires someone with a highly technical background in Medical Radiation. We felt that this should be opened to the entire membership. It is displayed on the ASMIRT website.

• MBS- Medicare Benefits Schedule (MBS) Review Taskforce was established last year to conduct an independent clinician led review of the MBS. The Taskforce is considering every one of the more than 5,700 items on the MBS, in particular how the items can be aligned with contemporary clinical evidence and practice and improve health outcomes for all Australians. The BMD description has been improved to include the radiographer

• Concerns over whether having a physical disability such as colour blindness would preclude someone from a career in MI.

• Nominating to ARPANSA of a suitable radiographer to sit on their expert panels.

• The use of L + R lead markers in this digital age. The consensus is that while markers are required on all images, and lead are preferred , it is the radiographers responsibility to accurately annotate the image with all necessary labels to ensure an accurate diagnosis. This is part of National standards. (NSQHS Five)

CERTIFICATION PROGRAMS: MRI and CT

The CT and MRI certification exams were held on Saturday the 21st March and Sunday the 20th September. MIAP1 will again hold examinations on Saturday 19th March and one on Sunday 18th September in 2017. A total of 270 applicants sat the exams in 2016. This compares with 243 in 2014 and 227 in 2015. The 2016 number included participants in the Angiography pilot examination.

This increased participation also leads to an increase in the number of participants in the ongoing certificate programs.

We have spent a lot of time trying to reduce turnaround times for Level 2 certification, application and renewal. Applicants now send their data electronically and then using the ASMIRT electronic meeting program, the data is shared by the panel and checked. This has reduced turnaround times, but more importantly, we have a paper trail and reduced the reliance on Australia post.

Nuclear Medicine Technologists have been allowed to sit the examination this year. This has been a long process but it fits neatly with the change from AIR to ASMIRT.

Angiography/Interventional Certification

After much discussion following the combined Cardiac and Vascular Interventional Angiography Pilot examination, it has been decided to split the examination into two, cardiac interventional imaging and vascular interventional imaging. While we recognise that there are many radiographers who work in a hybrid laboratory, it is beyond the resources of the organisation to offer three different examinations. The successful candidates in the hybrid examination have been offered certification entry in both streams. The first examinations for the two streams will be on the 19 March 2017.

Re-entry programs

Last year’s re-entry program for those certificate holders who had let their certificates lapse was a great success with many lapsed participants re-joining us. It has highlighted the increased need to use electronic and social media to alert participants of their expiry dates. It may be worthwhile doing this again in the future.

I would also like to thank the Secretariat team for their help and hard work, Patricia Fanning, Min Ku and Paul Gloster and the rest of the team. Without their support of the secretariat to the members, it would be difficult to maintain a volunteer organisation.

While this is a small panel in numbers it has been a pleasure to work with a hardworking and cohesive panel. I thank my fellow panel members for their hard work. We look forward to working with Adam Westerink as our board liaison, but most of all we look forward to continuing to support the members in their endeavours.

Christine Vanderley-Reichner
Chair, MIAP1

Medical Imaging Advisory Panel 2 (MIAP2)

Panel members

Elizabeth Phillips (Breast Imaging & Ultrasound)
Harj Bariana (Breast Imaging & Ultrasound)
Reine Hobbs (Breast Imaging & Ultrasound)
Jenny Huntley (Breast Imaging)
Carolyn Madeley (Breast Imaging)
Cameron Moore (Sonography)

The Medical Imaging Advisory Panel held 2 face to face meetings in 2016. Our first meeting for the year was held at ASMIRT Brisbane in April while the other was held in Melbourne at the ASMIRT Secretariat in September. In 2016, MIAP2 continues to summarize their Breast and Ultrasound Meeting with news in the Spectrum.

The major issues the panel discussed and acted upon this year include:

1. Breast Imaging Policy

The Breast Imaging Education Policy is a standalone document since December 2010. The panel has finalised the major revisions to the Breast Imaging Education Policy, which also incorporates the Accreditation documents. This revised document was put on the ASMIRT website and sent to course co-ordinators to be implemented prior to course accreditation 30th October 2016.

2. The Graduate Diploma in Mammography (GDM)

There have been 2 cohorts of GDM students graduate. MIAP2 knows that these mammography technologist graduates are of a high standard and are suitably qualified to help fill the gap in the workforce. However, it is still apparent that a National Job Description and remuneration at an appropriate level
will need to be organised. Some of these graduates are currently being employed under different awards depending on the state.

3. Certificate of Clinical Proficiency in Mammography (CCPM)
Since 2013, the CCPM has a three-year accreditation and links to the VSQA. This has streamlined the process of CCPM renewal. Renewals will now be emailed to members. MIAP2 continues to review, renew and issue CCPM’s.

4. Update on the Certificate of Clinical Proficiency in Mammography (CCPM)
The ASMIRT Certificate of Clinical Proficiency in Mammography continues to provide demonstration of a high level of competence and is a recommendation for Breast Screen staff and sought by many in diagnostic mammography practice.
During the past twelve months 39 new CCPM’s have been awarded in comparison to 58 in the 2014-2015 period. 213 CCPM’s have been renewed, an increase from the previous year total of 113.
Several applications were received from Northern Territory, New Zealand, Canada & Hong Kong trained radiographers, every application was individually assessed.

5. The Digital PGMI Reference Set
The imaging grading tool used in BSA to assess mammograms as Perfect, Good, Moderate or Inadequate with each description matching a specified image quality criteria, has been adapted to suit the digital imaging environment. The Digital Reference Set was established and produced early 2011. Subsequently this set was published on the AIR website and endorsed by Breast Screen Australia’s National Quality Management Committee (NMQC).
The panel are currently reviewing this Reference Set.

6. Update on the Advanced Breast Imaging Certificate (ABIC)
This award is a Life Time Award. It is given for recognition of outstanding contribution to the Breast Imaging.

7. Name Change to ASMIRT
These changes occurred at the AGM in 2016 with the AIR (now ASMIRT) recommending both a Name Change and a Change of Membership.
These changes will be more inclusive for all persons who are in imaging professions regardless of their pathways to learning. MIAP2 feels this is a positive step toward the imaging future in Australia.

8. Panel Members
Gaynor James GJ (Breast Imaging), SA Resigned from MIAP2 in April 2016 due to personal commitments. The MIAP2 Panel would like to acknowledge Gaynor’s support to the Panel during her term.
Cameron Moore CMo (Sonography) NSW MIAP2 welcomed Cameron in Sept 2016. Cameron will assist with and represent General Ultrasound along with Elizabeth and Harj on the Panel.

9. Several queries have been sent to MIAP2 regarding the CCPM
Several Radiation Therapists have expressed interest in undertaking the CCPM. Currently, this is not an appropriate pathway due to a RT limited scope of practice and Radiation Licensing Requirements.

10. MIAP2 responded / commented to correspondence and queries regarding but not limited to:
- NSW EPA Licenses for GDM’s
- Credentialing Health Practitioners and Definitions of Scope of Practice
- Breast Industry Discussion with Marketing Media
- BSC Vic Online Course
- APHRA & GDM Concerns
- ISRRRT Position Statement – Radiographer/Medical Radiation Technologist’s Role in Authorisation and Justification of Medical Exposure as a Team Approach
- Evaluation of Overseas Qualifications re CCPM
- CCPM Course Requirements

11. APHRA continues to provide only limited registration for some radiographers specializing in mammography. MIAP2 is in support of radiographers receiving conditional registration with ability to obtain recency of practice in other modalities. The panel feels very strongly that as we are first and foremost fully qualified Medical Radiation Scientists.

12. Correspondences
The Co-Chairs administered approximately 250 items of inward and outward correspondence (emails and phone calls) between 1st November 2015 to 31st October 2016, in addition to the 252 applications for the Certificate of Clinical Proficiency in Mammography and its renewal.

13. MIAP2 Accreditation of CCPM Courses
In Sept 2016, the Panel review the following courses:
- Breast Screen Victoria Course – Academic & Clinical Components
- Breast Screen Qld - Clinical Component
- University of NSW - Academic Component
- University of SA - Academic & Clinical Components

Request for a 6 month Extension was granted
- Breast Screen WA (Academic & Clinical Components)
- Breast Screen NSW (Clinical component)

Recommendations
Full accreditation was granted till Oct 2019
- Breast Screen Victoria Course – Academic & Clinical Components.
- Breast Screen Qld - Clinical Component
- University of SA - Academic & Clinical Components

Conditional Accreditation
- University of NSW Academic course

MIAP2 Panel Members wish to acknowledge the support of the Board and staff at ASMIRT. Harj and I would like to acknowledge and give special thanks to Min Ku, Paul Gloster, Lynne Ingram and Carolyn Heyes for their assistance and support throughout the year.

Elizabeth Phillips
Co-Chair, MIAP2
Education Standards and Advisory Panel (ESAP)

Panel members
Natalie Pollard NSW Chair
Annalaise Takla Vic Hon Secretary
Naomi Gibson QLD
Jane Shepherson SA
Julie Burbury QLD
Sue Merchant SA
Mary-Ann Carmichael Vic

Nicole Hancock, Administrative Support, ASMIRT

The Educational Standards and Advisory Panel (ESAP) undertook a number of tasks during 2016, with activities centred on professional practice standards matters. ESAP held seven teleconferences during 2016, in February, March, April, June, August, October and December. In addition to these, ESAP held four face-to-face meetings in April, July, September and November, with the April meeting held in Brisbane and all others held in Melbourne.

As with 2015, ESAP have continued to respond to enquiries from practitioners both past and current in relation to standards and recency of practice requirements for national registration under the Australian Health Practitioner Regulation Agency (AHPRA). Whilst ESAP recognises that this is a primary function of the MRPBA, we have provided ongoing advice and assistance to ensure that the professional body supports the profession and its practitioners in the most appropriate way possible. ESAP is extremely grateful for the support received from the ASMIRT Board of Directors (BoD) in this ever changing area.

Throughout 2016, ESAP have continued to receive requests from practitioners who have had a period absent from the profession wishing to become ASMIRT members. The majority of practitioners are submitting an application to ASMIRT upon completion of an AHPRA return to work program, with the biggest hurdle being that in the majority of cases applicants have not completed sufficient CPD to be eligible for ASMIRT membership. ESAP continues to work with both the BoD and ASMIRT Secretariat in navigating through the complexities associated with this.

Each year, the ASMIRT Research Scholarship scheme offers two scholarships for research in the fields of radiation therapy and medical imaging, worth $10 000 each. The ESAP received five (5) research scholarship applications, and a decision was reached at our face to face meeting in November at the secretariat in Melbourne to award 2 scholarships, one in the field of radiation therapy and the other in the field of medical imaging. The BoD was notified of this recommendation upon conclusion of the December ESAP meeting. In addition, ESAP reviewed and recommended changes to the research scholarship guidelines and application form, with these recommendations provided to the BoD for comment.

ESAP met with the MRLO Board at the ASMIRT conference held in Brisbane in April 2016 to discuss author guidelines for MRLO units of learning. ESAP have been involved throughout 2016 in the accreditation of Advanced Practitioners and have worked with the Advanced Practice Advisory Panel (APAP) in the assessment of applications received under the Champion Pathway. The Champion Pathway closed on the 31st December 2016. ESAP are currently working with APAP to review the process for managing and reviewing applications.

ESAP continues to work closely with the BoD in providing advice regarding the VsoA and membership pathways in the move to implement the new constitution. Other activities conducted throughout 2016 include providing comment on professional standards documents from the NZIMRT, revision of ASMIRT policy documents and the partial completion of a desktop audit for the CSU Graduate Diploma of Mammography.

The workload for ESAP remains high, and activities for 2016 have been challenging in the face of ongoing changes to the profession at a national level. ESAP would like to acknowledge the continued support offered by the Board of Directors, the CEO and all the staff at the secretariat over the past year.

Natalie Pollard
Chair, ESAP

Overseas Qualifications Assessment Panel (OQAP)

Panel members – Names withheld on grounds of privacy
OQAP assessed a total of 147 applications from 1st November 2015 until 30th October 2016. As expected, the majority of applications were received from the Medical Imaging fraternity (81). The number

Table 1: Applications rejected by country and modality

<table>
<thead>
<tr>
<th>Countries</th>
<th>Ultrasound</th>
<th>Imaging</th>
<th>Radiation Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brazil</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Canada</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United Kingdom</td>
<td>7</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>USA</td>
<td>5</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Pakistan</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Phillipines</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Portugal</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Africa</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>19</td>
<td>6</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 2: Applications accepted by country and modality

<table>
<thead>
<tr>
<th>Countries</th>
<th>Ultrasound</th>
<th>Imaging</th>
<th>Radiation Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>6</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Canada</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>England</td>
<td>2</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>Fiji</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>India</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Ireland</td>
<td>1</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>New Zealand</td>
<td>1</td>
<td>13</td>
<td>1</td>
</tr>
<tr>
<td>Portugal</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Serbia</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scotland</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>South Africa</td>
<td>7</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>10</td>
<td>28</td>
<td>4</td>
</tr>
<tr>
<td>United States, USA</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Wales</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Zimbabwe</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>38</td>
<td>75</td>
<td>8</td>
</tr>
</tbody>
</table>
Allison Dry
Chair, OQAP

Work throughout the year. To deliver, and for their dedication and hard work that our marvellous panel continues this opportunity to express my appreciation of the previous year. The panel continues to manage the workload efficiently, despite the panel size reducing slightly in the previous year. Monitoring will continue to ensure manageable and equitable workloads are allocated to busy panel members.

OQAP had 2 face-to-face meetings this year, held in May and October. This year we were joined by two ASA observers. This has offered networking opportunities for both parties and demonstrates the rigour of the OQAP assessment process relating to Ultrasound assessments.

Issues with individual assessments continue to be efficiently resolved via email or teleconference discussions in between meetings, as required.

OQAP's on-line documentation for applications was improved in 2015, delivering improved application forms and frequently asked questions sections. These have been invaluable, and we continue to update online information for applicants where we identify a potential lack of clarity in the information provided.

The panel would once again like to express their appreciation of the outstanding work that Min Ku continues to offer the OQAP panel, her support and timely management of requests being highly appreciated by all.

I have been fortunate enough to take over the role of chair of OQAP this year, and appreciate that I have big shoes to fill, following the excellent work completed by my predecessor Lisa Roberts. I would like to take this opportunity to express my appreciation of the work that our marvellous panel continues to deliver, and for their dedication and hard work throughout the year.

Allison Dry
Chair, OQAP

of applications from candidates seeking Ultrasound recognition continues to be high (57) with the remaining applications were submitted from Radiation Therapists (9). The tables below demonstrate further details relating to the total assessments completed and the subsequent outcomes.

Application numbers submitted to OQAP in the last year remains consistent with the previous year. The panel continues to manage the workload efficiently, despite the panel size reducing slightly in the previous year. Monitoring will continue to ensure manageable and equitable workloads are allocated to busy panel members.

OQAP had 2 face-to-face meetings this year, held in May and October. This year we were joined by two ASA observers. This has offered networking opportunities for both parties and demonstrates the rigour of the OQAP assessment process relating to Ultrasound assessments.

Issues with individual assessments continue to be efficiently resolved via email or teleconference discussions in between meetings, as required.

OQAP's on-line documentation for applications was improved in 2015, delivering improved application forms and frequently asked questions sections. These have been invaluable, and we continue to update online information for applicants where we identify a potential lack of clarity in the information provided.

The panel would once again like to express their appreciation of the outstanding work that Min Ku continues to offer the OQAP panel, her support and timely management of requests being highly appreciated by all.

I have been fortunate enough to take over the role of chair of OQAP this year, and appreciate that I have big shoes to fill, following the excellent work completed by my predecessor Lisa Roberts. I would like to take this opportunity to express my appreciation of the work that our marvellous panel continues to deliver, and for their dedication and hard work throughout the year.

Allison Dry
Chair, OQAP

Two members submitted applications for Fellowship during the past year. These applicants were both successful and received their awards at ASMIMRT. The panels conducted one face to face meeting during the year whilst attending ASMIMRT. The majority of business has been conducted via email communication.

The members of both panels were required to perform a secondary round of adjudication for both major ‘best presentation’ prizes for ASMIMRT. The video recordings of the presentations were used to perform this task in the week following the conference. This process resulted in a delay in the announcement of the prize winners.

Fellowship session assignments were approved for both ASMIMRT and the Queensland RT Weekend conference. Five members submitted assignments from the ASMIMRT session.

Updated guidelines have been published on the website. A further review is being undertaken to improve the wording for the requirements for publications and to enable the addition of online educational modules as a new category of assessable activity.

A number of members have sought advice on their précis in the past few months.

There have been 2 submissions received in October for assessment by the panels this year. These are currently under evaluation awaiting the panel's decision.

Greg Rattray
Fellowship Warden

Fellowship Panels

Warden
Greg Rattray  Qld

Diagnostic Panel
Deborah Starkey  Qld
Reuben Dixon  Vic
Ingrid Jolley  Vic

Therapy Panel
Janet Gawthrop  Vic
Paul Foulston  Vic
Eileen Giles  SA

Two members submitted applications for Fellowship during the past year. These applicants were both successful and received their awards at ASMIMRT.

The panels conducted one face to face meeting during the year whilst attending ASMIMRT. The majority of business has been conducted via email communication.

The members of both panels were required to perform a secondary round of adjudication for both major ‘best presentation’ prizes for ASMIMRT. The video recordings of the presentations were used to perform this task in the week following the conference. This process resulted in a delay in the announcement of the prize winners.

Fellowship session assignments were approved for both ASMIMRT and the Queensland RT Weekend conference. Five members submitted assignments from the ASMIMRT session.

Updated guidelines have been published on the website. A further review is being undertaken to improve the wording for the requirements for publications and to enable the addition of online educational modules as a new category of assessable activity.

A number of members have sought advice on their précis in the past few months.

There have been 2 submissions received in October for assessment by the panels this year. These are currently under evaluation awaiting the panel's decision.

Greg Rattray
Fellowship Warden

Rural and Remote Practitioners Advisory Panel (RRPAP)

Panel Members
Fiona Jeffs  Vic  Chair
Judith Krontz  Qld  Vice Chair
Carolyn Dunstan  SA  Secretary
Christine Loosemore  Tas  Minutes Secretary
Christopher Dransfield  NSW  RRPAP Membership Notes:
Simon Fenn  NSW
Gilda Brieffies  WA
Delphia Marietta  Qld
Tom Randell  NT
Liam Jukes  Vic  RT Rep

RRPAP Membership Notes:
• Delphia Marietta has filled the vacant Qld position, previously held by Izan Gill.
• Liam Jukes has replaced Kenton Thompson as the RT Rep.
• We welcome Tom Randell as the inaugural RRPAP member from NT.

2016 meetings
• Teleconferences : February 9th, June 14, August 16, October 11th
• Face to face meeting April 21.
• Pending face to face meeting to be held November 12 & 13 in Melbourne

2016 report
• Meeting with the Board:
  – Two of our members met with the Board at the face to face in Brisbane, on April 21.
• Student Rural Clinical Placement Grants:
  – A total of 35 applications were received. Two of these did not fit the criteria. The total quota of 16 was approved. We were concerned about the quality of the applications and the format in which they were sent. This is the first time that the full quota of 16 grants has been approved. The panel are delighted with this interest.
  – First year students now receive the Spectrum at no cost. This may have increased their awareness of the availability of a rural placement grant
  – Approval of a structured social media
campaign to include universities and closing dates of the grant application
– Clarification was confirmed that the grant is to be applied for and awarded in the same year of placement.
– Questionnaires have been finalized and accepted. The grant money will not be forwarded to the student until such time as a Spectrum article and the survey questions have been completed.

DI_ERRW (Diagnostic Imaging Enhancing the Rural and Remote Workforce)
• Four members assisted with reviewing 24 applications...
• The funding for this has now ceased.
• Part Two of the Rural Clinical Placement Grant survey questions has been modified for the DI_ERRW recipients.
• The Chair of the panel, (Fiona Jeffs), attended the SARRAH (Service for Australian Rural and Remote Allied Health) Conference in October, held at Port Lincoln, SA.
• Simon Fenn has been asked to talk about the RRPAP and Rural and Remote Imaging at the NSW Branch Radiation Conference in November. He will also be talking and encouraging Mi/RTs towards Advanced Practice.
• The National Standards Document of Limited X Ray Operators is currently on the AIR website.
• An E Poster was presented at ASMMIRT in Brisbane, April 2016. It mentioned where each panel member came from, their work place, and the type of work they do. It was unfortunate that the hall was extremely noisy and it was difficult to hear the presentation and also the other presentations.
• We brought attention to a position in Cloncurry, QLD, for a Radiography Assistant when there was no radiographer to assist. The position is really in the form of a LXO. There is not enough work at this site to warrant employing a radiographer. We referred this to the Board. A letter will be sent to clarify the position with reference to the LXO document.
• Provisional schedule of meetings will be drawn up at the face to face in Melbourne, along with formalization of panel positions for 2017.

Carolyn Dunstan
Secretary, RRPAP

Editorial Review Board (ERB), Journal of Medical Radiation Sciences (JMRS)

Overview
This report highlights the activities and achievements of Journal of Medical Radiation Sciences (JMRS) from November 2015 – October 2016. The names of the Editorial Review Board (ERB) and International Advisory Panel (IAP) members are listed in Tables 1 and 2.

The annual publisher’s report from Wiley was submitted to the Board. This report contains information like the frequency of article download, country of residence of readers and number of submissions.

The ERB members had a telephone and web conference meeting in June 2016. Some members of the ERB also met during the ASMMIRT meeting in April 2016. The members of the IAP met with some members of the ERB via web conference in July 2016. Members of the ERB attended the Wiley scientific publications forum and meetings with other Wiley medical editors throughout the year.

Achievements
1. Journal ranking
The Chinese Academy of Science (CAS) National Science Library ranked JMRS 431 out of the 939 open access journals in medicine in 2015 prior to the inclusion of JMRS in Medline. JMRS was also awarded 2 out of the 3 stars. With a two-star rating JMRS is considered a recommended journal.

For more information go to http://gooa.las.ac.cn

2. Promotions
Throughout the year, JMRS was promoted to ASMMIRT/NZIMRT members and to the wider MRS community. The following are some of the items that were promoted in 2016.

• The most cited, most downloaded articles and articles with the highest altmetric scores were compiled and published in Spectrum newsletter in November 2016.
• Stephanie Dunbar and Darien Montegomier, the Communications Coordinators of ASMMIRT and NZIMRT respectively promoted the activities of JMRS on the social media platforms.
• To encourage readers of the printed copy of JMRS to open the plastic sleeve we began publishing brief article titles on the front cover page.
• The publications of JMRS was promoted in #MedRadJClub (Twitter journal club)
• JMRS was promoted in Australasian Health and Medical Journal Editors Network through the editor in chief’s involvement with this group.

• The activities of JMRS were promoted during the annual scientific meetings of ASMMIRT and NZIMRT.
• A publications workshop was held during the annual scientific meetings. These workshops were facilitated by members of the ERB. The convener for the ASMMIRT workshop was Karen Dobeli while Paul Kane was the convener for the NZIMRT workshop.

3. Publons
JMRS peer reviewers can now collect a verified record of their peer review contribution via Publons. Peer reviewers can use this as evidence of peer review workload and continuing professional development. To register with Publons go to https://publons.com/in/wiley.

In early 2017, a newsletter will be published in Spectrum highlighting the rewards of JMRS peer reviewers. On this newsletter it also mentions the 30% discount on books purchased by reviewers from Wiley online bookstore.

4. ORCID
The corresponding authors of JMRS are required to include their ORCID identifier in ScholarOne as part of the submission process. By obtaining an ORCID identifier others can find your research output including your publications with ease. It can sometimes be difficult to find the work of certain individuals because many share similar names. Hence, many research grant providers now expect applicants to provide their ORCID identifier on their application. The other authors are also encouraged to register for an ORCID identifier. It is free to register at https://orcid.org/register.

5. Peer review feature in ScholarOne
ScholarOne, the manuscript management software of JMRS was chosen to have an additional feature introduced which lists names of potential reviewers to consider who published on the same subject as the submitted manuscript. Editors are therefore provided with possible options to consider when deciding who to invite to review. The suggested names of reviewers and their relevant publications are from journals that are indexed in Web of Science where JMRS can also be accessed from.

6. JMRS App – available for Apple and Android devices
Users of Android devices can now access the JMRS App for free in https://play.google.com/store/apps/details?id=com.wiley.jams.jmrs
Apple users can also access for free the JMRS App.
Call for submissions
You may have noticed that there are more articles in radiation therapy compared to medical imaging. I am therefore urging colleagues in medical imaging (including nuclear medicine) and radiology to consider publishing in JMRS. Please promote to your colleagues that JMRS is the only fully open access journal with the target audience of medical radiation sciences profession. JMRS is accessible from many journal indexes including PubMed and MEDLINE.

Feedback
Your feedback about the activities of JMRS is valuable so please do not hesitate to contact Cherry Agustin at: cherry.agustin@newcastle.edu.au (email).

Future
The ERB will continue to develop strategies to further improve the quality of the publications in JMRS. With the support of Wiley, ASMIRT and NZIMRT we are committed to (a) promoting the publications from JMRS and rewarding authors with top publications through further promotions and (b) rewarding reviewers. The goal of the ERB members is for the publications of JMRS to be cited with the long term goal of achieving an Impact Factor.

Acknowledgements
Thank you to the authors, readers and peer reviewers for supporting and promoting JMRS. For the members of the ERB, IAP and the editors for your recommendations and actions that led to a successful year. Thank you to Stephanie Dunbar (ASMIRT) and Darien Montgomerie (NZIMRT) for their ongoing promotion of JMRS.

Thank you to the team from Wiley for producing a quality journal: Simon Goudie, Journal Manager, Sylvia Cheong, Productions Editor, Emma Fitzsimons, Commercial Sales, Martha Rundell, ScholarOne and Novelyn Membrano from the Editorial Office for replying and acting on queries from authors, reviewers and editors.

Cherry Agustin
Editor in Chief,
Journal of Medical Radiation Sciences

Publications report
Four issues of the Journal of Medical Radiation Sciences and 10 issues of Spectrum were published this year. Total costs amounted to $349,107.

Table 1: Members of the Editorial Review Board, Journal of Medical Radiation Sciences

<table>
<thead>
<tr>
<th>Name</th>
<th>Professional Practice, AIR or NZIMRT Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cherry Agustin (Editor-in-Chief)</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Ann Poulos (Deputy Editor)</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Paul Kane (Deputy Editor)</td>
<td>RT, NZIMRT</td>
</tr>
</tbody>
</table>

ASSOCIATE EDITORS

<table>
<thead>
<tr>
<th>Name</th>
<th>Professional Practice, AIR or NZIMRT Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elizabeth Brown</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Jenny Cox*</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Karen Dobeli</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>James Hayes</td>
<td>MI, NZIMRT</td>
</tr>
<tr>
<td>Peter Kench</td>
<td>NM, ASMIRT</td>
</tr>
<tr>
<td>Kellie Knight</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Daniel Pham</td>
<td>RT, ASMIRT (UniteD States)</td>
</tr>
<tr>
<td>Warren Reed</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Charlotte Sale</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Zhonghua Sun</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Sylvia Van Dyk</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Nick Woznita</td>
<td>MI, ASMIRT (United Kingdom)</td>
</tr>
</tbody>
</table>

(Available positions: 2 ASMIRT (Editor – MI and RT*) and 2 NZIMRT (Editors – MI and RT)

REVIEW BOARD MEMBERS

<table>
<thead>
<tr>
<th>Name</th>
<th>Professional Practice, AIR or NZIMRT Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joanne Adlam</td>
<td>MI, NZIMRT</td>
</tr>
<tr>
<td>Scott Bowman</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Patrick Brennan</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Rob Davidson</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Shane Dempsey</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Gay Dungey</td>
<td>RT, NZIMRT</td>
</tr>
<tr>
<td>Georgia Halkett</td>
<td>RT, ASMIRT</td>
</tr>
<tr>
<td>Sarah Lewis</td>
<td>MI, ASMIRT</td>
</tr>
<tr>
<td>Peter White</td>
<td>RT, ASMIRT (Hong Kong)</td>
</tr>
</tbody>
</table>

Suzanne Henwood left the ERB in 2016. Elizabeth Brown was acting associate editor in 2016 during the temporary leave of absence of Rebecca Owen. *Jenny Cox left the ERB in Nov 2016.

Table 2: Members of the International Advisory Panel

<table>
<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Professional Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicole Harnett</td>
<td>Canada</td>
<td>Radiation Therapy</td>
</tr>
<tr>
<td>Michelle Leech</td>
<td>Ireland</td>
<td>Radiation Therapy</td>
</tr>
<tr>
<td>Jonathan McNulty</td>
<td>Ireland</td>
<td>Medical Imaging</td>
</tr>
<tr>
<td>Wilfred CG Peh</td>
<td>Singapore</td>
<td>Radiology</td>
</tr>
<tr>
<td>Euclid Seeram</td>
<td>Canada</td>
<td>Medical Imaging</td>
</tr>
<tr>
<td>Suresh Rana</td>
<td>USA</td>
<td>Medical Physics - Oncology</td>
</tr>
<tr>
<td>Vincent WC Wu</td>
<td>Hong Kong</td>
<td>Radiation Therapy</td>
</tr>
<tr>
<td>Michael Ying</td>
<td>Hong Kong</td>
<td>Medical Imaging</td>
</tr>
</tbody>
</table>

Note: Mohd Hanafi Ali left the IAP in 2016
Advanced Practice Advisory Panel (APAP)

Panel Members

Nadine Thompson  
NSW  
Chair

Gary Denham  
NSW  
Honorary Secretary

Alison Brown  
NSW  
Chair, APAP

Charlotte Sale  
Vic

Peter Rosenow  
Vic

Michael Fuller  
SA

Rachael Dantu  
SA

Kathryn Squibb  
TAS

Mary Job  
Qld

Four new members were appointed to APAP in July: Nadine Thompson, Gary Denham, Mary Job and Alison Brown in 2016. They joined existing members Charlotte Sale, Peter Rosenow, Michael Fuller, Rachael Dantu and Kathryn Squibb. Kimberley Ross resigned from her position on APAP and Jill Harris was elected NSW board representative and could no longer continue as APAP chair. APAP would like to thank both Kimberley and Jill for their participation and leadership.

Jill Harris attended the International Radiographer Advanced Practice Conference hosted by Sheffield Hallam University. This was an enlightening and valuable experience. It was enlightening to find out that, whilst the UK have had advanced practitioners for many years, and are certainly way ahead of Australia in certain areas, they are still struggling in other areas.

One example is the issue of acceptance of AP in the broader health community and their move towards accrediting advanced practitioners with a minimal masters degree as the educational underpinning. Canada are also still struggling to introduce AP on a national basis and the US are also experiencing similar issues. The commonality between the international hurdles was interesting and a collaborative forum will be set up to discuss strategy and methods of overcoming the resistance.

One teleconference and one face-to-face meeting were held in August and September respectively. The meetings enabled a new chairperson to be elected and to consolidate the panel with new and returning members.

APAP has commenced work on updating the application process for advanced practice and is working with ESAP to streamline the process and ensure potential applicants are well supported with appropriate guidance and mentoring. Queries from potential applicants have been responded to appropriately and support is being provided.

APAP would like to thank the BoD for their ongoing support of advanced practice and looks forward to a busy and productive upcoming year.

Nadine Thompson  
Chair, APAP

Four new members were appointed to APAP in July: Nadine Thompson, Gary Denham, Mary Job and Alison Brown in 2016. They joined existing members Charlotte Sale, Peter Rosenow, Michael Fuller, Rachael Dantu and Kathryn Squibb. Kimberley Ross resigned from her position on APAP and Jill Harris was elected NSW board representative and could no longer continue as APAP chair. APAP would like to thank both Kimberley and Jill for their participation and leadership.

Jill Harris attended the International Radiographer Advanced Practice Conference hosted by Sheffield Hallam University. This was an enlightening and valuable experience. It was enlightening to find out that, whilst the UK have had advanced practitioners for many years, and are certainly way ahead of Australia in certain areas, they are still struggling in other areas.

One example is the issue of acceptance of AP in the broader health community and their move towards accrediting advanced practitioners with a minimal masters degree as the educational underpinning. Canada are also still struggling to introduce AP on a national basis and the US are also experiencing similar issues. The commonality between the international hurdles was interesting and a collaborative forum will be set up to discuss strategy and methods of overcoming the resistance.

One teleconference and one face-to-face meeting were held in August and September respectively. The meetings enabled a new chairperson to be elected and to consolidate the panel with new and returning members.

APAP has commenced work on updating the application process for advanced practice and is working with ESAP to streamline the process and ensure potential applicants are well supported with appropriate guidance and mentoring. Queries from potential applicants have been responded to appropriately and support is being provided.

APAP would like to thank the BoD for their ongoing support of advanced practice and looks forward to a busy and productive upcoming year.

Nadine Thompson  
Chair, APAP

Four new members were appointed to APAP in July: Nadine Thompson, Gary Denham, Mary Job and Alison Brown in 2016. They joined existing members Charlotte Sale, Peter Rosenow, Michael Fuller, Rachael Dantu and Kathryn Squibb. Kimberley Ross resigned from her position on APAP and Jill Harris was elected NSW board representative and could no longer continue as APAP chair. APAP would like to thank both Kimberley and Jill for their participation and leadership.

Jill Harris attended the International Radiographer Advanced Practice Conference hosted by Sheffield Hallam University. This was an enlightening and valuable experience. It was enlightening to find out that, whilst the UK have had advanced practitioners for many years, and are certainly way ahead of Australia in certain areas, they are still struggling in other areas.

One example is the issue of acceptance of AP in the broader health community and their move towards accrediting advanced practitioners with a minimal masters degree as the educational underpinning. Canada are also still struggling to introduce AP on a national basis and the US are also experiencing similar issues. The commonality between the international hurdles was interesting and a collaborative forum will be set up to discuss strategy and methods of overcoming the resistance.

One teleconference and one face-to-face meeting were held in August and September respectively. The meetings enabled a new chairperson to be elected and to consolidate the panel with new and returning members.

APAP has commenced work on updating the application process for advanced practice and is working with ESAP to streamline the process and ensure potential applicants are well supported with appropriate guidance and mentoring. Queries from potential applicants have been responded to appropriately and support is being provided.

APAP would like to thank the BoD for their ongoing support of advanced practice and looks forward to a busy and productive upcoming year.

Nadine Thompson  
Chair, APAP

ISRT Representative

As the ISRRT Councillor 2016 has been a year of networking with other Councillors from ISRRT member countries. My focus this year was to improve communication with our Asia / Australasian regional countries. Following on from winning the bid for the 2019 Asia Australasia Conference of Radiological Technologists (AACRT) which will be held in Adelaide in conjunction with the ASMMIRT I have continued to promote Australia within the region and worldwide.

I have ensured a steady flow of information to the Board of Directors (BOD) (ASMRIT) from the ISRRT and related organisations such as World Health Organisation (WHO), European Congress of Radiology (ECR), International Atomic Energy Agency (IAEA) and the International Radiology Quality Network. One of my roles is to scan the information and summarise any issues requiring BOD action.

At the Brisbane ASMMIRT I manned the AIR Booth promoting the profession, ISRRT and the forthcoming World Congress in Seoul Korea 20th-23rd October 2016.

I attended the World Congress representing Australia at the ISRRT Council meeting. There were 48 member countries represented. Several issues relating to internal ISRRT policies and Code of Ethics were debated as per any organisation.

I had the opportunity to brief the Council on our name change from AIR to ASMRIT and the reasons why.

To formally announce to the Council the departure of Mr David Collier as Chief Executive and the incoming Acting Chief Executive Mr Paul Gloster. I received countless good will wishes for David from the councillors present and the ISRRT Board of Directors.

I also provided an update as to the closure of the Medical Radiations Learning Online (MRLO).

Outcomes to note from the meeting include the pending retirement of the Chief Executive Officer Dr Alexander (Sandy) Yule. Sandy has served as the CEO for over a decade and will be sadly missed. I extended on behalf of the Board an acknowledgement of the great role he has played and the friendship and professional relationship he fostered between the ISRRT and ASMRIT. The incoming CEO will be Mr Dimitris Katsifarakis from Greece, formerly the ISRRT Regional Director for Europe who will take over from Sandy on the 1st January 2017.

There was a Council vote to determine who would fill the vacancy left by Dimitris and this went to Ms Bodil Anderssen from Sweden.

Mr Jonathon Mazal resigned as the Regional Director – The Americas and this vacancy was filled by Ms Sharon Wartenbee from the USA.

Sharon was previously the Regional Co-ordinator Public Relations and Communication of The Americas and this vacancy was filled by Ms Aneesa Ali from Trinidad and Tobago.

The 2020 World Congress was announced and will be hosted by Ireland in Dublin. The 2016 Marian Frank Award recipient was Ms Dominique Zerroug from France for her work with the ISRRT and her support for the radiographers in French Speaking Africa.

Council agreed to establish a working party to investigate funding models for member countries and Associate members. This working party will be chaired by Sija Geers, Europe/Africa, and along with Marcia Smoke from The Americas. I volunteered to represent Asia/Australasia in forming the committee.

I attended the Asian Forum at the Congress and the hot topic was collaboration between the regional countries with regard to educational opportunities. I have presented the ASMRIT BOD with a Briefing Note regarding the role Australia could have within the region.

During the Congress I manned the ISRRT Booth to promote the 2017 ASMMIRT to be held in Perth, Western Australia, March 24-26, 2016 I shared the booth with representatives from Port of Spain, Trinidad and Tobago who were promoting the 2018 World Congress April 12 -15 and representatives from Hong Kong who were promoting the AACRT meeting June 23-25, 2017.

There were 36 Australians who attended the World Congress in Seoul in October who enjoyed the experience.

I look forward to promoting ASMRIT and the ISRRT in 2017. Hope to see a lot of members in Perth at the conference.

Christopher Whennan  
ISRRT Councillor
<table>
<thead>
<tr>
<th>Year</th>
<th>President</th>
<th>Position</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>1950-51</td>
<td>Outterside N*</td>
<td>FFIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1951-52</td>
<td>Quenault WA*</td>
<td>FFIR</td>
<td>SA</td>
</tr>
<tr>
<td>1952-53</td>
<td>Ryan EA*</td>
<td>FFIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1953-54</td>
<td>Anderson HW*</td>
<td>FFIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1954-55</td>
<td>Smith AR*</td>
<td>FFIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1955-56</td>
<td>James DA*</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>1956-57</td>
<td>Goninon EF*</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1957-58</td>
<td>Grant DJ*</td>
<td>MIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1958-59</td>
<td>Knight AW*</td>
<td>FFIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1959-60</td>
<td>Fleay RF</td>
<td>FIR</td>
<td>WA</td>
</tr>
<tr>
<td>1960-61</td>
<td>Braden AH*</td>
<td>MIR</td>
<td>SA</td>
</tr>
<tr>
<td>1961-62</td>
<td>Callow JW*</td>
<td>FIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1962-63</td>
<td>Wilson DK*</td>
<td>MIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1963-64</td>
<td>Fitzsimons CJ</td>
<td>FIR</td>
<td>WA</td>
</tr>
<tr>
<td>1964-65</td>
<td>Smith AR*</td>
<td>FFIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1965-66</td>
<td>Butler JJ*</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1966-67</td>
<td>Wilson DK*</td>
<td>MIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1967-68</td>
<td>Moores J (Mrs)*</td>
<td>MIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1968-69</td>
<td>Smith AR*</td>
<td>FFIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1969-70</td>
<td>Butler JJ*</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1970-71</td>
<td>Jones D</td>
<td>MIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1971-72</td>
<td>Ryan GT</td>
<td>MIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1972-73</td>
<td>Hartley DE</td>
<td>FIR</td>
<td>WA</td>
</tr>
<tr>
<td>1973-74</td>
<td>Knights AM</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1974-75</td>
<td>Dimmick JR</td>
<td>MIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1975-76</td>
<td>Skene PJ</td>
<td>FIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1976-77</td>
<td>Lord BA*</td>
<td>MIR</td>
<td>SA</td>
</tr>
<tr>
<td>1977-78</td>
<td>Hughes TD*</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>1978-79</td>
<td>Saunders JH*</td>
<td>FIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1979-80</td>
<td>Heindorff H (Miss)</td>
<td>MIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1980-81</td>
<td>Hayward G</td>
<td>FIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1981-82</td>
<td>George RP</td>
<td>FIR</td>
<td>SA</td>
</tr>
<tr>
<td>1982-83</td>
<td>Mildon C</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>1983-84</td>
<td>Stewart G</td>
<td>MIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1984-85</td>
<td>Cooper N</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1985-86</td>
<td>Cooper N</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1986-87</td>
<td>Quirk J</td>
<td>FIR</td>
<td>SA</td>
</tr>
<tr>
<td>1987-88</td>
<td>Stankevicius IR*</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>1988-89</td>
<td>Duffy PJ</td>
<td>FIR</td>
<td>NSW</td>
</tr>
<tr>
<td>1989-90</td>
<td>Kenworthy GR</td>
<td>FIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1990-91</td>
<td>Balmannino DG</td>
<td>FIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1991-92</td>
<td>Morris IT</td>
<td>FIR</td>
<td>WA</td>
</tr>
<tr>
<td>1992-93</td>
<td>Schirmer MB</td>
<td>MIR</td>
<td>SA</td>
</tr>
<tr>
<td>1993-94</td>
<td>Collett KM (Mrs)</td>
<td>FIR</td>
<td>QLD</td>
</tr>
<tr>
<td>1994-95</td>
<td>Hicks N</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>1995-96</td>
<td>Hansen H</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>1996-97</td>
<td>Nuss W</td>
<td>FIR</td>
<td>QID</td>
</tr>
<tr>
<td>1997-98</td>
<td>Malbon A</td>
<td>MIR</td>
<td>VIC</td>
</tr>
<tr>
<td>1998-99</td>
<td>Cotrell J (Mrs)</td>
<td>FIR</td>
<td>SA</td>
</tr>
<tr>
<td>2000-01</td>
<td>Slattery P</td>
<td>MIR</td>
<td>NSW</td>
</tr>
<tr>
<td>2001-02</td>
<td>Ong T (Ms)</td>
<td>FIR</td>
<td>SA</td>
</tr>
<tr>
<td>2002-03</td>
<td>Rowntree P (Ms)</td>
<td>FIR</td>
<td>QLD</td>
</tr>
<tr>
<td>2003-04</td>
<td>Smylie J (Ms)</td>
<td>FIR</td>
<td>VIC</td>
</tr>
<tr>
<td>2004-06</td>
<td>Hamilton S</td>
<td>MIR</td>
<td>TAS</td>
</tr>
<tr>
<td>2006-09</td>
<td>Whennan C</td>
<td>MIR</td>
<td>WA</td>
</tr>
<tr>
<td>2009-11</td>
<td>Way T</td>
<td>MIR</td>
<td>QLD</td>
</tr>
<tr>
<td>2011-13</td>
<td>Harvey B</td>
<td>FIR</td>
<td>VIC</td>
</tr>
<tr>
<td>2013-16</td>
<td>Page J (Ms)</td>
<td>MIR</td>
<td>NSW</td>
</tr>
<tr>
<td>2016-</td>
<td>Eastgate P</td>
<td>MIR</td>
<td>QLD</td>
</tr>
</tbody>
</table>

*Deceased
Fellows

1974  Almond Dk  SA
1992  Arozoo Em  SA
1968  Atkinson R (Miss)  NSW
1989  Balmanno DG  QLD
1962  Best (Williams) JB (Mrs)  VIC
1977  Borrett RJ  SA
1988  Brough Pd  VIC
1995  Brown Gl  QLD
1973  Brown GM  VIC
2003  Brumby JM (Ms)  VIC
1995  Buchanan P  VIC
2016  Carmichael MA (MRS)  Qld
1996  Caruana E  NSW
1975  Cottrell J (Mrs)  SA
1996  Cummins S (Mrs)  QLD
2008  Davidson R  VIC
1999  Dixon R  VIC
2007  Dobell KJ (MRS)  QLD
2004  Duffy K (Mrs)  QLD
1967  Duncan Rc  NSW
1996  Egan I (MRS)  NSW
1996  Eng T  VIC
1976  Enright MT  QLD
2014  Everitt SJ (Mrs)  VIC
2007  Fanton PA  VIC
1961  Fitzsimons C  WA
1961  Fleay RF  WA
1996  Foulstone P  VIC
1993  Fricke J  VIC
1994  Fung K  HK
1977  Garside AR  VIC
2013  Gawthrop JB (Ms)  VIC
1976  George RP  SA
1962  Gibson ML (Mrs)  VIC
1991  Gill M (Mrs)  QLD
2013  Giles EM  SA
2000  Grant AM (Mrs)  QLD
1962  Green MF  VIC
2007  Halkett Gk (Ms)  WA
1963  Haining WA  VIC
1974  Hanton A  SA
1970  Hartley DE  WA
1979  Harvey BM  VIC
2000  Hatherly K (Ms)  VIC
1967  Hayward G  VIC
2010  Holdsworth AA (Mrs)  TAS
2010  Holt J (Mrs)  QLD
2004  Hopkins M (Mrs)  NSW
1997  Hornby C  VIC
1985  Horrex AN  WA
1965  Jackson KA  NSW
2014  Jolley IM (Mrs)  VIC
1974  Kan A  VIC
1977  Knights AM  WA
1992  Lo U (Ms)  VIC
1963  Lorimer D (Miss)  VIC
1988  Mathers MD (Mrs)  VIC
2016  Merchant SP (Ms)  SA
2008  Middleton M  QLD

2005  Miller J (Miss)  VIC
1959  Milne MJ (Miss)  VIC
1970  Moore BJ (Miss)  NSW
1985  Morris IT  WA
1981  Murray JR (Mrs)  VIC
2001  Nagle KM (Miss)  VIC
1989  Nuss WJA  QLD
2000  Obradovic G  WA
1994  Ong TA (Mrs)  WA
2011  Owen RJ (Mrs)  QLD
2007  Perry CD  VIC
1999  Phillips R  NSW
2003  Piotto L  SA
2001  Piyaratna N  NSW
1972  Pryor JM (Miss)  VIC
1971  Quirk JA  SA
2000  Rattray G  QLD
1992  Rouse P  VIC
1972  Rowley MR (Rev Sister)  VIC
1993  Rowntree PA (Ms)  QLD
1968  Ryan GT  NSW
1975  Ryan JE  VIC
2012  Sale CA (Miss)  VIC
1998  Shanahan M (Ms)  VIC
1992  Siegmann JW  SA
1993  Sivaganasundram R  VIC
1993  Smith AN  NSW
1989  Smylie J (Ms)  VIC
2013  Starkey DE (Mrs)  QLD
1996  Starkoff BA  QLD
1994  Tate JA (Ms)  VIC
1992  Tostevin JH  WA
1978  Truman GM  SA
1958  Tyrell FG  VIC
1991  Verrocchi R  VIC
1996  Vitucci T (Mrs)  NSW
1997  Walsh I  QLD
1976  Ward A (Mrs)  VIC
1988  Watson E (Ms)  WA
1970  Wilkinson AR  WA
2007  Wong TA (Mrs)  WA
2000  Yeomans EJ  NSW
1972  Young BF (Miss)  VIC
2010  Zelesco M (Mrs)  WA
Directors’ Report

The directors present this report on the entity for the financial year ended 31 October 2016. The following persons were directors and officers of the company at any time during, or since the end of, the year.

Directors

<table>
<thead>
<tr>
<th>Ms Jo Page</th>
<th>President (till April 2016)</th>
</tr>
</thead>
</table>
| Qualifications | 1979: Certificate of Therapeutic Radiography (Sydney Tech College)  
| | 1995: Bachelor of Applied Science in Radiation Therapy (Sydney University) |
| Experience | Nov 2013 - Present: Director of Radiation Therapy, Radiation Oncology, Chris O’Brien Lifehouse  
| | Aug 2008 - 2013: Director of Radiation Therapy, Radiation Oncology, Royal Prince Alfred Hospital  
| | 2002 - July 2008: Deputy Chief Radiation Therapist, Radiation Oncology, Royal Prince Alfred Hospital  
| | 1992 - 2002: Deputy Chief Radiation Therapist, Senior Radiation Therapist, Radiation Oncology, Mater Hospital - Radiation Oncology Associates  
| | 1989 - 1992: Assistant Manager, Front Office Metropole Hotel and Convention Centre  
| | 1982 - 1989: Senior Radiation Therapist, Radiation Oncology, Royal Prince Alfred Hospital  
| | 1977 - 1980: Radiation Therapist, Radiation Oncology, Royal Prince Alfred Hospital |
| Interest in the Society | Member since 1981  
| | June 2006 - Present: NSW Board of Directors of the AIR  
| | 1996 - 2001: NSW Representative on RTAP  
| | 1995 - 2001: NSW PAEC  
| | 1996 - 2005: NSW State Committee member  
| | 1998 - 2004: Member of Northern Sydney Sub-Branch  
| | 2005: Chairperson of NSW State Committee  
| | 1996: Member Convening Committee, 47th ANC/14th RTS, Bathurst  
| | 2000: Member Convening Committee, 51st ANC/18th RTS, Sydney  
| | 2002: Co-Convenor 53rd ANC/20th RTS, Coffs Harbour  
| | 2004: Scientific Coordinator, 2nd ASMMIRT, Auckland  
| | 2009: Scientific Coordinator CSM 2009, Brisbane  
| | 2012: Member Convening Committee, 10th ASMMIRT - Sydney |
| Interest in contracts | Nil |

<table>
<thead>
<tr>
<th>Mr Patrick Eastgate</th>
<th>President (from May 2016)</th>
</tr>
</thead>
</table>
| Qualifications | 1996: Bachelor of Nursing - QUT  
| | 2000: Bachelor of Applied Science - Medical Imaging - QUT  
| | 2014: Masters of Applied Science (Image Interpretation) - CSU  
| | 2011: Certificate IV TAE40110 - Training and Assessment  
| | Current: PhD Candidate - QUT |
| Experience | 1997-2000: (1 year F/T, 3 years P/T) - Registered Nurse, Radiation Oncology, Royal Brisbane and Women’s Hospital  
| | 2001: PDY Radiographer, Royal Brisbane and Women’s Hospital  
| | 2002: Staff Radiographer, Royal Brisbane and Women’s Hospital  
| | 2002 - 2003: Staff Radiographer and Relieving Shift Coordinator - The Princess Grace Hospital, London, UK  
| | 2003 - 2005: Senior Radiographer, Middlesex Hospital (UCLH) (NHS), London, UK  
| | 2005 - 2006: Senior Radiographer, The Cornwall District Hospital (NHS), Truro, Cornwall, UK  
| | 2007 - 2008: Staff Radiographer, Royal Brisbane and Women’s Hospital  
| | 2008 - 2009: Acting Senior Radiographer Emergency, Royal Brisbane and Women’s Hospital  
| | 2009 - 2015: Radiographer, Advanced (Clinical Education Coordinator), during this time I have been seconded on a number of QH Projects on a part time capacity.  
| | 2015 - present: A/ Radiographer Assistant Director, Department of MI, Royal Brisbane and Women’s Hospital |
| Interest in the Society | 2008: Member of AIR State Committee  
| | 2009 - 2011 Chair Queensland Branch  
| | 2009: Member of Scientific Program for CSM, Brisbane  
| | 2009 - present: Member of APWG then APAP  
| | 2012 - present: Board of Directors  
| | 2013 - 2014: Member of MRPBA Workforce Innovation and Reform Working Party  
| | 2014 - 2015: Organising Committee AIR/NZIMRT 2014  
| | 2015 - Present: Organising Committee ASMMIRT 2016 |
| Interest in contracts | 2012 - 2014: Board Member MRLO  
<p>| | Director: Egg Cup Training |</p>
<table>
<thead>
<tr>
<th>Ms Carolyn Heyes</th>
<th>Honorary Treasurer</th>
</tr>
</thead>
</table>
| **Qualifications** | 1986: Diploma of Applied Science Medical Radiations (RMIT)  
2002: Diploma Frontline Management (Swinburne) |
| **Experience** | January 2012- present: Radiographer Manager Austin Health  
2001 – Jan 2012: Deputy Chief MIT The Royal Children’s Hospital Melbourne  
1997 - 2001: Tutor Radiographer St Vincent’s Hospital Melbourne  
1996 - 1997: Radiographer St Vincent’s Hospital Melbourne  
1995 - 1996: Sole Radiographer Carlton Radiology  
1990 - 1992: Radiographer Western Hospital  
1987 - 1990: Radiographer Prince Henry’s Hospital Melbourne  
1985 - 1987: Radiographer John Fawkner Hospital  
1983 - 1985: Student radiographer |
| **Interest in the Society** | Member since 1984; ISRRT Member since 1999  
2013 - Present: Victorian Representative Board of Directors of the AIR  
2012: Member Convening Committee ANZPIC12  
2008: Deputy Convener 8th ASMMIRT Melbourne  
2003-2012: Member MIAP1  
1991 - 1993, 2002-2012: Member Victorian Branch Continuing Education Committee  
1989 - 1992: Librarian Victorian Branch AIR  
1986: Student Liaison and Coordinator Student Workshop 38th ANC Melbourne |
| **Interest in contracts** | Nil |

<table>
<thead>
<tr>
<th>Ms Bronwyn Hilder</th>
<th>Vice President / Assistant Honorary Treasurer</th>
</tr>
</thead>
</table>
| **Qualifications** | 1987: Bachelor of Science, University of Queensland  
1988: Diploma of Applied Science (Therapeutic Radiography) with Distinction, Queensland University of Technology  
2002: Graduate Diploma in Applied Science (Radiation Therapy), Queensland University of Technology  
2003: Diploma, Canadian Association of Medical Radiation Technologists (Radiation Therapy)  
2007: Graduate Certificate in Health Management, Queensland University of Technology  
2008: Masters of Health Science, (Medical Radiation Sciences), University of Sydney  
2012: Masters of Applied Management (Health) |
| **Experience** | W P Holman Clinic, Royal Hobart Hospital:  
Jun 2016 - present: Chief Radiation Therapist; Apr 2015 - May 2016: Acting Chief Radiation Therapist  
Jan 2011 - April 2015: Deputy Chief Radiation Therapist; Apr 2010 - Dec 2010: Acting Chief Radiation Therapist  
Oct 2007 - April 2010: Deputy Chief Radiation Therapist  
Southern Zone Radiation Oncology Services, Mater Centre, South Brisbane:  
Feb 2006 - Oct 2007: PO4 Charge Radiation Therapist  
July 2004 - Feb 2006: PO3 Advanced Skills Radiation Therapist  
Nova Scotia Cancer Center, Halifax, Canada: May 2003 - May 2004: Radiation Therapist Grade 3,  
Wesley Radiation Oncology, Auchenflower 4066: Jan 2003 - Apr 2003: Senior Radiation Therapist (Casual)  
Sept 2001 - Dec 2002: Supervisor Radiation Therapist (Permanent Planning)  
Auchenflower: Feb 1995 - Sept 2001: Supervisor Radiation Therapist (Treatment/Planning rotational)  
Sep 1991 - Feb 1995: Staff Radiation Therapist, Wesley Radiation Oncology,  
Cromwell Hospital:  
Sep 1990 - Aug 1991: Senior II Radiographer; Apr 1990 - July 1990: Locum Basic Grade Therapeutic Radiographer  
The Middlesex Hospital, London, England:  
Mar 1990: Locum Basic Grade Therapeutic Radiographer  
Queensland Radium Institute, Herston:  
Dec 1988 - Jan 1990: Staff Therapeutic Radiographer; Feb 1986 - Dec 1988: Cadet Therapeutic Radiographer |
| **Interest in the Society** | Member since 1988  
2010: Awarded Fellowship of the AIR  
Mar 2013 - present: TAS Board of Directors, AIR  
2013: Secretary and Student Liaison, TASMIRT  
2011: Scientific Co-ordinator, Tas Branch Winter Weekend  
2010 - 2012: Tasmanian representative on RTAP  
2010: Member of the Steering committee for the review and development of Practice Standards  
2009: Scientific Co-ordinator, Tas Branch Winter Weekend  
Nov 2007 - 2009: Tasmanian representative on the PAEB  
2007 - 2009: Chair of the PAEB  
Feb 2005 - Oct 2007: Queensland representative on the PAEB  
June 2005 - 2006: Member of the Competency Based Assessment Steering Committee  
May 2008 - present: AIR representative on the Tasmanian Radiation Advisory Council  
2002: Scientific Co-ordinator, Qld Radiation Therapy Weekend  
1999: Scientific Co-ordinator, Qld Radiation Therapy Weekend  
1998: Scientific Co-ordinator, AIR 16th Radiation Therapy Symposium  
1994: Social Committee, AIR 12th Radiation Therapy Symposium |
<p>| <strong>Interest in contracts</strong> | Nil |</p>
<table>
<thead>
<tr>
<th>Dr Robin Hart</th>
<th>Honorary Secretary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Qualifications</strong></td>
<td></td>
</tr>
<tr>
<td>BSc (Hons) (Medical Imaging Science) 1997 (Curtin)</td>
<td></td>
</tr>
<tr>
<td>PhD 2001 (UWA)</td>
<td></td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
</tr>
<tr>
<td>2016 - present: Adjunct Associate Professor, Monash University</td>
<td></td>
</tr>
<tr>
<td>2010 - present: Clinical Associate Professor, Centre for Forensic Science, University of Western Australia</td>
<td></td>
</tr>
<tr>
<td>2007 - present: Supervising Medical Imaging Technologist, Departments of Cardiology and Radiology, Royal Perth Hospital, Western Australia</td>
<td></td>
</tr>
<tr>
<td>2006 - present: Adjunct Associate Professor, School of Exercise, Biomedical and Health Sciences, Faculty of Computing Health and Science, Edith Cowan University, Western Australia</td>
<td></td>
</tr>
<tr>
<td>2002 - present: Subject Matter Expert, Space Medicine and Health Care Systems, Johnson Space Centre, Houston, Texas</td>
<td></td>
</tr>
<tr>
<td>2006 - 2008: Director, Research and Development, AION Diagnostics Pty Ltd</td>
<td></td>
</tr>
<tr>
<td>2005 - 2006: Senior Research Fellow, Centre of Excellence in eMedicine, Western Australia</td>
<td></td>
</tr>
<tr>
<td>2001 - 2004: Research Co-ordinator and Lecturer, Department of Medical Imaging Science Curtin University of Technology, Western Australia</td>
<td></td>
</tr>
<tr>
<td>2000 - 2001: Postdoctoral Research Fellow, University of Dundee, Scotland</td>
<td></td>
</tr>
<tr>
<td>1995 - 2000: Medical Imaging Technologist and Neurosonographer, Royal Perth Hospital, Western Australia</td>
<td></td>
</tr>
<tr>
<td><strong>Interest in the Society</strong></td>
<td></td>
</tr>
<tr>
<td>2013 - present: Board member (WA), Board of Directors, ASMIRT, Melbourne, Australia</td>
<td></td>
</tr>
<tr>
<td>2011 - 2012: Chair, Professional Accreditation and Education Board, Australian Institute of Radiography, Melbourne, Australia</td>
<td></td>
</tr>
<tr>
<td>2009 - 2010: Clinical member, Professional Accreditation and Education Board, Australian Institute of Radiography, Melbourne, Australia</td>
<td></td>
</tr>
<tr>
<td><strong>Interest in contracts</strong></td>
<td></td>
</tr>
<tr>
<td>Nil</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ms Lynne Ingram</th>
<th>Whip (till April 2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Qualifications</strong></td>
<td></td>
</tr>
<tr>
<td>1980: Associate Diploma Diagnostic Radiography - Sturt CAE</td>
<td></td>
</tr>
<tr>
<td>1995: DMU Part 1 - ASAR</td>
<td></td>
</tr>
<tr>
<td>2007: Graduate Certificate Health Service Management - Flinders University</td>
<td></td>
</tr>
<tr>
<td>2010: Master of Health Administration - Flinders University</td>
<td></td>
</tr>
<tr>
<td>2016: Graduate Certificate Organisational Learning - Flinders University</td>
<td></td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
</tr>
<tr>
<td>1980 - current: Radiographer - Flinders Medical Centre, SA (Trauma, Ultrasound, Angiography, Theatre, Portables, General, Nuclear Medicine, Fluoroscopy, Mammography)</td>
<td></td>
</tr>
<tr>
<td>1998 - 2006: Section Leader ED, Theatre, Portables</td>
<td></td>
</tr>
<tr>
<td>2006 - current: QA Project Radiographer (CPD, Accreditation, Risk, Quality &amp; Change Management)</td>
<td></td>
</tr>
<tr>
<td>2009 - 2013: Radiation Safety Officer FMC</td>
<td></td>
</tr>
<tr>
<td>2012 - 2013: Local Facilitator Clinical Leadership Program in Australia (Program Facilitator &amp; Leader of Allied Health Professionals for SA Health)</td>
<td></td>
</tr>
<tr>
<td>2003 - current: FMC CPD Program</td>
<td></td>
</tr>
<tr>
<td>1998 - 2006: UniSA Clinical Practicum Supervisor</td>
<td></td>
</tr>
<tr>
<td>1999 - 2004: Visiting Tutor UniSA</td>
<td></td>
</tr>
<tr>
<td>2002 - 2004: Lecturer for Remote Operators Course – EPA</td>
<td></td>
</tr>
<tr>
<td>2009 - current: – UniSA Medical Radiation Program Advisory Board</td>
<td></td>
</tr>
<tr>
<td>– UniSA Clinical Advisory Committee</td>
<td></td>
</tr>
<tr>
<td>– UniSA Disciplinary Advisory Committee</td>
<td></td>
</tr>
<tr>
<td>2005 - 2010: SA Governor’s Radiation Protection Committee</td>
<td></td>
</tr>
<tr>
<td>2010: Golden Key International Honour Society Life Member</td>
<td></td>
</tr>
<tr>
<td><strong>Interest in the Society</strong></td>
<td></td>
</tr>
<tr>
<td>AIR Member from 2004</td>
<td></td>
</tr>
<tr>
<td>2005 - 2010: SA Member AIR PAEB</td>
<td></td>
</tr>
<tr>
<td>2013 - 2016: AIR Board of Directors</td>
<td></td>
</tr>
<tr>
<td><strong>Interest in contracts</strong></td>
<td></td>
</tr>
<tr>
<td>2013 - 2016: Board Member MRLO</td>
<td></td>
</tr>
<tr>
<td>2014 - current: MRPAC Assessor Team member</td>
<td></td>
</tr>
<tr>
<td>2014 - current: RANZCR/NATA Medical Imaging Accreditation Advisory Committee</td>
<td></td>
</tr>
<tr>
<td>2014 - current: NATA Accreditation Technical Assessor</td>
<td></td>
</tr>
</tbody>
</table>
### Ms Jillian Harris  Board Member (from May 2016)

**Qualifications**
- 1985: Diploma of the College of Radiographers (Therapy) UK
- 1999: Post Graduate certificate in Counselling
- 2000: Post Graduate Diploma in Counselling
- 2002: Post Graduate Diploma in Group Facilitation

**Experience**
- Jan 2016 - present: Director of Radiation Therapy, Western Sydney Local Health District.
- Dec 1998 - November 2004: Deputy Director Radiation Therapy, Westmead Hospital.
- Jan 1986 - December 1987: Therapy Radiographer, Bristol Royal Infirmary, UK.

**Interest in the Society**
- Member since 1997
- 2016 - present: NSW representative on Board of Directors of ASMIRT
- 2013 - 2016: Member of the Board Of Directors for Medical Radiation Learning On Line
- 2009 - 2016: Member of the Advanced Practice Advisory Panel to the AIR (Chair 2012-2016).
- 2015 - 2016: Member of the NSW branch committee of the AIR
- 2007 - 2009: Member of the NSW Radiation Therapy Joint Advisory Committee
- 2004: Member of the AIR "Future directions working party" - 2004.
- 1999 - 2004: Member of NSW state branch committee
- 2001 - 2004: Secretary of the NSW State branch of the AIR
- 2001 - 2005: NSW Radiation Therapy Advisory Panel (RTAP) representative
- 2001 - 2004: Secretary RTAP
- 2002 - 2004: NSW representative on the federal tripartite committee
- 2002 - 2007: Member of the NSW state tripartite committee
- 2002 - 2003: Secretary NSW State Tripartite Committee
- 2004: Chairperson NSW State Tripartite committee
- AIR representative on the ROJIG Quality Working Party

**Interest in contracts**
- Nil

### Ms Denise Ogilvie  Board Member (from May 2016)

**Qualifications**
- 1977: Diploma of Applied Science in Medical Radiography (RMIT)
- 1988: Certificate in Small Business Apparel
- 2017: Company Directors Course – Australian Institute of Company Directors (MAICD)

**Experience**
- 2006 - present: Lecturer and course co-ordinator at the University of South Australia in Medical Radiation Sciences
- 2010 - present: Casual radiographer at Royal Adelaide Hospital
- 2015 - present: Casual radiographer Adelaide Private Practice
- 1984 - 2006: Senior Radiographer Private Practice
- 1998 - 2000: Centre Manager Private Practice
- 1990 - 1998: Senior radiographer Private Practice
- 1985 - 1990: Radiographer private practice
- 1979 - 1983: Business owner gastronomy business, Germany
- 1975 - 1979: Student and Radiographer Royal North Shore Hospital, Sydney

**Interest in the Society**
- 2016 - present: South Australian Representative on Board of Directors ASMIRT
- 2015 - 2016: Chairperson South Australian Committee of AIR
- 2007 - present: Committee member South Australian Branch AIR
- 2013 - present: University representative of Student Committee of SA Branch ASMIRT
- 2011: Scientific Convenor for National conference for Medical Imaging

**Interest in contracts**
- Nil

### Mr Adam Westerink  Board Member (from August 2016)

**Qualifications**
- 2005: B Applied Science (Medical Radiations - Medical Imaging), Queensland University of Technology

**Experience**
- 2016 - present: Board Member (QLD), Board of Directors, ASMIRT, Melbourne, Australia
- 2014 - present: Associate Lecturer, Queensland University of Technology
- 2011 - present: Radiographer Team Leader, Royal Brisbane & Women's Hospital, Queensland
- 2010 - 2011: Senior Radiographer, Royal Brisbane & Women's Hospital, Queensland

**Interest in the Society**
- 2016 - present: Board Member (QLD), Board of Directors, ASMIRT, Melbourne, Australia
- 2012 - 2015: Chairperson, Queensland Branch Committee, ASMIRT, Melbourne Australia
- 2011 - 2012: Committee Member, Queensland Branch Committee, ASMIRT, Melbourne Australia

**Interest in contracts**
- Nil
Objectives and Strategies

The long term key objectives of the Society have remained constant since ASMIRT was first incorporated in 1950. These objectives are to set professional standards, to advocate for and reinforce the role of the profession, to deliver professional education and research, to deliver valuable member services, to encourage and enhance the capability, capacity and culture of our staff and volunteers, and to ensure the financial sustainability of the Society so as to support our strategies, our systems, our processes and our infrastructure.

The Board of ASMIRT annually reviews these broad objectives. Currently the Board is pursuing short term (one to three years) objectives as outlined below;

• Defining the ASMIRT professional standards for key stakeholders, including;
  – registration boards;
  – governments and public policy makers;
  – employers;
  – educators;
  – members; and
  – the public

• Raising the awareness and understanding of the role of the medical radiation science profession among stakeholders

• Advancing the interests of our members by providing timely, consistent and united responses to issues affecting our profession

• Recognition as the premier provider of professional clinical focused education services in the medical radiation science field

• Implementing a research program that sustains and advances our profession

• Achieving a 90% membership satisfaction (measure by biennial survey)

• Achieving managed succession for committees and panels with competition for roles

• Delivering services more efficiently, quickly and effectively with minimal turnover in our people

• Sustaining membership growth of 10% per annum

• Reducing dependence on income from membership subscriptions to contribute less than 50% of total income

• Achieving a 10% surplus on operating costs that will be reinvested in member services

• Ensuring our current systems, processes and infrastructure are fit-for-purpose, accessible and engage all staff and members

Principal Activities, and Achievement of Objectives

Principal activities

The principal activities of the Society during the financial year were to promote diagnostic radiography, radiation therapy, MRI and ultrasound in Australia.

During the financial year, there were no significant changes in the nature of these activities.

Review of operations

Refer to the Acting Chief Executive’s report for commentary. The total comprehensive income/(loss) for the year was $706,346 profit. (2015 loss ($303,054)).

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.

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 25.

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 31st October 2016 are as outlined in the Acting Chief Executive’s report.
Performance measures

Membership

<table>
<thead>
<tr>
<th>Membership at 31 October 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Membership (incl CPD)</td>
</tr>
<tr>
<td>CPD Membership</td>
</tr>
<tr>
<td>Resignations and removals</td>
</tr>
<tr>
<td>Admissions and re-admissions</td>
</tr>
<tr>
<td>Deaths</td>
</tr>
</tbody>
</table>

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 the 31st October 2016 the number of active members was 6,784 (2015: 6,680)

Finance

The Society’s profit from ordinary activities for the year amounted to $269,750. (Last year’s deficit $332,041). This was budgeted for.

Meetings of Board of Directors

Board meetings were held as follows:

1. 50th Meeting, Melbourne  
   20th – 22nd November 2015
2. 57th Teleconference, Melbourne  
   15th December 2015
3. 51st Meeting, Melbourne  
   19th – 21st February 2016
4. 58th Teleconference, Melbourne  
   15th March 2016
5. 52nd Meeting, Brisbane  
   22nd – 24th April 2016
6. 59th Teleconference, Melbourne  
   31st May 2016
7. 53rd Meeting, Melbourne  
   24th – 26th June 2016
8. 60th Teleconference, Melbourne  
   2nd August 2016
9. 54th Meeting, Hobart  
   26th – 28th August 2016
10. 61st Teleconference, Melbourne  
    11th October 2016

Board of Directors’ attendance at meetings

During the financial year ended 31st October 2016, 5 face to face meetings of the Board and 5 teleconference meetings were held.

The number of meetings attended by each Director while they were Directors during the year, including teleconference meetings, are listed in the table below.

<table>
<thead>
<tr>
<th>Directors</th>
<th>Meetings</th>
<th>Teleconferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>J Page</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>P Eastgate</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>C Heyes</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>B Hilder</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>R Hart</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>L Ingram (till Apr 2016)</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>J Harris (from May 2016)</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D Ogilvie (from May 2016)</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>A Westerink (from Aug 2016)</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
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 (as shown above) 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 company 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 S298(2) of the Corporations Act 2001.

B. Hilder
Vice President

C. Heyes
Honorary Treasurer

Melbourne 10 January 2017

Auditor’s Independence Declaration to the Directors of Australian Society of Medical Imaging and Radiation Therapy

As lead auditor for the audit of the financial report of the Australian Society of Medical Imaging and Radiation Therapy, I declare that, to the best of my knowledge and belief, during the year ended 31 October 2016 there have been no contraventions of:

(a) the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and

(b) any applicable code of professional conduct in relation to the audit.

HLB Mann Judd
Chartered Accountants

Melbourne 10 January 2017
## CONSOLIDATED STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED 31 OCTOBER 2016

<table>
<thead>
<tr>
<th>Note</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

### Revenue from continuing operations
- Membership subscriptions: 2,665,599
- Rendering of services: 622,954
- Conference revenue: 18, 806,425
- Dividends: 3,861
- Finance revenue: 14,343

### Revenue
- Total revenue: 4,425,210

### Expenses from continuing operations
- Conference expense: (678,009)
- Employee benefits expense: (1,389,582)
- Depreciation and amortisation expense: (100,642)
- Publication expense: (349,107)
- Printing and stationery expense: (36,698)
- Board and panel expenses: (200,870)
- Research Grants: (226,558)
- Insurance: (530,758)
- Seminar and social expenses: (111,555)
- Computer – consumables: (122,219)
- Telephone: (18,189)
- Bank charges: (46,203)
- Travelling expenses: (34,698)
- Postage: (9,372)
- Other expenses: (327,921)

### Total expenses
- Total expenses: (4,155,460)

### Surplus / (Loss) before income tax
- 269,750

### Income tax expense
- 5

### Surplus / (Loss) after income tax
- 16, 269,750

### Other comprehensive income
- Items that will not be reclassified subsequently to profit or loss
  - Gain on revaluation of land and buildings: 450,000
- Items that will be reclassified subsequently to profit or loss
  - Gain / (loss) on available for sale assets: (13,405)

### Total comprehensive income / (loss) for the year
- 706,346

### Total comprehensive income / (loss) attributable to the members of the entity
- 706,346

To be read in conjunction with the notes to the financial statements included on pages 30-47.
CONSOLIDATED STATEMENT OF FINANCIAL POSITION AS AT 31 OCTOBER 2016

<table>
<thead>
<tr>
<th>Note</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**ASSETS**

**Current Assets**

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>1,473,500</td>
<td>906,800</td>
</tr>
<tr>
<td>Trade and other receivables</td>
<td>18,968</td>
<td>30,490</td>
</tr>
<tr>
<td>Other assets</td>
<td>66,043</td>
<td>124,421</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>1,558,511</td>
<td>1,061,711</td>
</tr>
</tbody>
</table>

**Non-current Assets**

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Available-for-sale financial investments</td>
<td>37,519</td>
<td>50,922</td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>4,182,992</td>
<td>3,786,834</td>
</tr>
<tr>
<td>Intangibles</td>
<td></td>
<td>26,387</td>
</tr>
<tr>
<td><strong>Total Non-current Assets</strong></td>
<td>4,220,511</td>
<td>3,864,143</td>
</tr>
</tbody>
</table>

**TOTAL ASSETS**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>5,779,022</td>
<td>4,925,855</td>
</tr>
</tbody>
</table>

**LIABILITIES**

**Current Liabilities**

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade and other payables</td>
<td>886,101</td>
<td>401,381</td>
</tr>
<tr>
<td>Provisions</td>
<td>180,663</td>
<td>165,046</td>
</tr>
<tr>
<td>Other current liabilities</td>
<td>804,493</td>
<td>1,136,939</td>
</tr>
<tr>
<td>Interest bearing loans &amp; borrowings</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td>1,871,257</td>
<td>1,703,367</td>
</tr>
</tbody>
</table>

**Non-current Liabilities**

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provisions</td>
<td>36,485</td>
<td>57,553</td>
</tr>
<tr>
<td><strong>Total Non-current Liabilities</strong></td>
<td>36,485</td>
<td>57,553</td>
</tr>
</tbody>
</table>

**TOTAL LIABILITIES**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>1,907,742</td>
<td>1,760,920</td>
</tr>
</tbody>
</table>

**NET ASSETS**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>3,871,280</td>
<td>3,164,935</td>
</tr>
</tbody>
</table>

**EQUITY**

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reserves</td>
<td>1,380,850</td>
<td>919,398</td>
</tr>
<tr>
<td>Retained surplus</td>
<td>2,490,430</td>
<td>2,245,537</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td>3,871,280</td>
<td>3,164,935</td>
</tr>
</tbody>
</table>

To be read in conjunction with the notes to the financial statements included on pages 30-47.
## CONSOLIDATED STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 31 OCTOBER 2016

<table>
<thead>
<tr>
<th></th>
<th>Retained surplus</th>
<th>Special purpose funds</th>
<th>Asset revaluation reserve</th>
<th>Share revaluation reserve</th>
<th>Education Fund reserve</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Balance at 31 October 2014</td>
<td>2,596,373</td>
<td>425,276</td>
<td>330,000</td>
<td>16,340</td>
<td>100,000</td>
<td>3,467,989</td>
</tr>
<tr>
<td>Surplus / (loss) from operations</td>
<td>(332,041)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>(332,041)</td>
</tr>
<tr>
<td>Revaluation increment (decrement)</td>
<td>–</td>
<td>–</td>
<td>28,987</td>
<td>–</td>
<td>–</td>
<td>28,987</td>
</tr>
<tr>
<td>Transfers to reserves</td>
<td>(18,795)</td>
<td>18,795</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Balance at 31 October 2015</td>
<td>2,245,537</td>
<td>444,071</td>
<td>330,000</td>
<td>45,327</td>
<td>100,000</td>
<td>3,164,935</td>
</tr>
<tr>
<td>Surplus / (loss) from operations</td>
<td>269,750</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>269,750</td>
</tr>
<tr>
<td>Revaluation increment (decrement)</td>
<td>–</td>
<td>–</td>
<td>450,000</td>
<td>(13,405)</td>
<td>–</td>
<td>436,595</td>
</tr>
<tr>
<td>Transfers to reserves</td>
<td>(24,857)</td>
<td>24,857</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Balance as at 31 October 2016</td>
<td>2,490,430</td>
<td>468,928</td>
<td>780,000</td>
<td>31,922</td>
<td>100,000</td>
<td>3,871,280</td>
</tr>
</tbody>
</table>

To be read in conjunction with the notes to the financial statements included on pages 30-47.
CONSOLIDATED STATEMENT OF CASHFLOWS
FOR THE YEAR ENDED 31 OCTOBER 2016

<table>
<thead>
<tr>
<th>Note</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Cash flows from operating activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receipts from customers and members</td>
<td>4,110,362</td>
<td>3,195,899</td>
</tr>
<tr>
<td>Payments to suppliers and employees</td>
<td>(3,994,359)</td>
<td>(3,952,250)</td>
</tr>
<tr>
<td>Interest received</td>
<td>4a</td>
<td>14,343</td>
</tr>
<tr>
<td>Interest and other costs of finance paid</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Receipt of government grants</td>
<td>456,770</td>
<td>536,374</td>
</tr>
<tr>
<td>Net cash flows from / (used in) operating activities</td>
<td>6</td>
<td>587,116</td>
</tr>
<tr>
<td>Cash flows from investing activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase of property, plant and equipment</td>
<td>10</td>
<td>(13,786)</td>
</tr>
<tr>
<td>Payments for intangible assets</td>
<td>(6,630)</td>
<td>–</td>
</tr>
<tr>
<td>Proceeds from disposal of available for sale investments</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Net cash flows from / (used in) investing activities</td>
<td></td>
<td>(20,416)</td>
</tr>
<tr>
<td>Cash flows from financing activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for available for sale investments</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Net cash flows from / (used in) financing activities</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Net increase/(decrease) in cash and cash equivalents</td>
<td>566,700</td>
<td>(240,452)</td>
</tr>
<tr>
<td>Cash and cash equivalents at beginning of year</td>
<td>906,800</td>
<td>1,147,252</td>
</tr>
<tr>
<td>Cash and cash equivalents at end of year</td>
<td>6</td>
<td>1,473,500</td>
</tr>
</tbody>
</table>

To be read in conjunction with the notes to the financial statements included on pages 30-47.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 OCTOBER 2016

1 CORPORATE INFORMATION
The financial report of Australian Society of Medical Imaging and Radiation Therapy ("the Society"), formerly Australian Institute of Radiography ("the Institute") and its controlled entity ("the Group") for the year ended 31st of October 2016 was authorised for issue in accordance with a resolution of the Board on Tuesday 10th January 2017.

Australian Society of Medical Imaging and Radiation Therapy ("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 the 31st of October 2016 the number of financial members was 6784 (2015: 6680).

Principal Registered Office
25 King Street
Melbourne Vic 3000
tel (03) 9419 3336

The nature of the operations and principal activities of the Group are described in note 3.

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 (including Australian Accounting Interpretations) and the Corporations Act 2001. The Society and its controlled entity are not-for-profit entities 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 cash flow 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 Accounting Standards and Interpretations
Accounting Standards issued by the AASB that are not yet mandatorily applicable to the Group, together with an assessment of the potential impact of such pronouncements on the Group when adopted in future periods, are discussed below:

- AASB 9: Financial Instruments and associated Amending Standards (applicable to annual reporting periods beginning on or after 1 January 2018).

The Standard will be applicable retrospectively (subject to the provisions on hedge accounting outlined below) and includes revised requirements for the classification and measurement of financial instruments, revised recognition and derecognition requirements for financial instruments and simplified requirements for hedge accounting.

The key changes on initial application include certain simplifications to the classification of financial assets, simplifications to the accounting of embedded derivatives, upfront accounting for expected credit loss, and the irrevocable election to recognise gains and losses on investments in equity instruments that are not held for trading in other comprehensive income. AASB 9 also introduces a new model for hedge accounting that will allow greater flexibility in the ability to hedge risk, particularly with respect to hedges of non-financial items.

Although the directors anticipate that the adoption of AASB 9 may have an impact on the Group’s financial instruments, it is impracticable at this stage to provide a reasonable estimate of such impact.

- AASB 15: Revenue from Contracts with Customers (applicable to annual reporting periods beginning on or after 1 January 2018, as deferred by AASB 2015-8: Amendments to Australian Accounting Standards – Effective Date of AASB 15).

When effective, this Standard will replace the current accounting requirements applicable to revenue with a single, principles-based model. Except for a limited number of exceptions, including leases, the new revenue model in AASB 15 will apply to all contracts with customers as well as non-monetary exchanges between entities in the same line of business to facilitate sales to customers and potential customers.

The core principle of the Standard is that an entity will recognise revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for the goods or services. To achieve this objective, AASB 15 provides the following five-step process:

• identify the contract(s) with a customer;
• identify the performance obligations in the contract(s);
• determine the transaction price;
• allocate the transaction price to the performance obligations in the contract(s); and
• recognise revenue when (or as) the performance obligations are satisfied.

The transitional provisions of this Standard permit an entity to either: restate the contracts that existed in each prior period presented per AASB 108: Accounting Policies, Changes in Accounting Estimates and Errors (subject to certain practical expedients in AASB 15); or recognise the cumulative effect of retrospective application to incomplete contracts on the date of initial application. There are also enhanced disclosure requirements regarding revenue.

Although the directors anticipate that the adoption of AASB 15 may have an impact on the Group’s financial statements, it is impracticable at this stage to provide a reasonable estimate of such impact.

- AASB 16: Leases (applicable to annual reporting periods beginning on or after 1 January 2019).

When effective, this Standard will replace the current accounting requirements applicable to leases in AASB 117: Leases and related Interpretations. AASB 16 introduces a single lessee accounting model that eliminates the requirement for leases to be classified as operating or finance leases. The main changes introduced by the new Standard include:

• recognition of a right-to-use asset and liability for all leases (excluding short-term leases with less than 12 months of tenure and leases relating to low-value assets);
• depreciation of right-to-use assets in line with AASB 116: Property, Plant and Equipment in profit or loss and unwinding of the liability in principal and interest components;
• variable lease payments that depend on an index or a rate are included in the initial measurement of the lease liability using the index or rate at the commencement date;
• by applying a practical expedient, a lessee is permitted to elect not to separate non-lease components and instead account for all components as a lease; and
• additional disclosure requirements.

The transitional provisions of AASB 16 allow a lessee to either retrospectively apply the Standard to comparatives in line with AASB 108 or recognise the cumulative effect of retrospective application as an adjustment to opening equity on the date of initial application.
Although the directors anticipate that the adoption of AASB 16 will impact the Group's financial statements, it is impracticable at this stage to provide a reasonable estimate of such impact.

- **AASB 2014-3: Amendments to Australian Accounting Standards – Accounting for Acquisitions of Interests in Joint Operations (applicable to annual reporting periods beginning on or after 1 January 2016).**

This Standard amends AASB 11: Joint Arrangements to require the acquirer of an interest (both initial and additional) in a joint operation in which the activity constitutes a business, as defined in AASB 3: Business Combinations, to apply all of the principles on business combinations accounting in AASB 3 and other Australian Accounting Standards except for those principles that conflict with the guidance in AASB 11; and disclose the information required by AASB 3 and other Australian Accounting Standards for business combinations. The application of AASB 2014-3 will result in a change in accounting policies for the above described transactions, which were previously accounted for as acquisitions of assets rather than applying the acquisition method per AASB 3.

The transitional provisions require that the Standard should be applied prospectively to acquisitions of interests in joint operations occurring on or after 1 January 2016. As at 30 June 2016, management is not aware of the existence of any such arrangements that would impact the financial statements of the entity going forward and as such is not capable of providing a reasonable estimate at this stage of the impact on initial application of AASB 2014-3. The directors anticipate that the adoption of AASB 2014-10 may not have an impact on the Group’s financial statements.

- **AASB 2014-1: Amendments to Australian Accounting Standards (Parts E): This is applicable to annual reporting periods beginning on or after 1 January 2018 and defers the application date of AASB 9: Financial Instruments (December 2010) to annual reporting periods beginning on or after 1 January 2018. This part also makes consequential amendments to hedge accounting disclosures set out in AASB 7: Financial Instruments: Disclosures, and to AASB 132: Financial Instruments: Presentation to permit irrevocable designation of “own use contracts” as measured at fair value through profit or loss if the designation eliminates or significantly reduces an accounting mismatch. This part is not expected to impact the Group’s financial statements.**

- **AASB 2014-5: Amendments to Australian Accounting Standards arising from AASB 15.**

This Standard is applicable to annual reporting periods beginning on or after 1 January 2018 and makes consequential amendments to various Australian Accounting Standards arising as a result of the issue of AASB 15: Revenue from Contracts with Customers. AASB 2014-5 is not expected to impact the Group’s financial statements.

- **AASB 2014-10: Amendments to Australian Accounting Standards – Sale or Contribution of Assets between an Investor and its Associate or Joint Venture (applicable to annual reporting periods beginning on or after 1 January 2018, as deferred by AASB 2015-10: Amendments to Australian Accounting Standards – Effective Date of Amendments to AASB 10 and AASB 128).**

This Standard amends AASB 10: Consolidated Financial Statements with regards to a parent losing control over a subsidiary that is not a “business” as defined in AASB 3 to an associate or joint venture, and requires that:

- a gain or loss (including any amounts in other comprehensive income (OCI)) be recognised only to the extent of the unrelated investor’s interest in that associate or joint venture;
- the remaining gain or loss be eliminated against the carrying amount of the investment in that associate or joint venture; and
- any gain or loss from remeasuring the remaining investment in the former subsidiary at fair value also be recognised only to the extent of the unrelated investor's interest in the associate or joint venture. The remaining gain or loss should be eliminated against the carrying amount of the remaining investment.

The application of AASB 2014-10 will result in a change in accounting policies for transactions of loss of control over subsidiaries (involving an associate or joint venture) that are businesses per AASB 3 for which gains or losses were previously recognised only to the extent of the unrelated investor’s interest.

The transitional provisions require that the Standard should be applied prospectively to sales or contributions of subsidiaries to associates or joint ventures occurring on or after 1 January 2018. The directors anticipate that the adoption of AASB 2014-10 may not have an impact on the Group’s financial statements.

b. **Principles of consolidation**

The consolidated financial statements incorporate the assets, liabilities and results of entities controlled by the Society at the end of the reporting period. A controlled entity is any entity over which the Society has the power to govern the financial and operating policies so as to obtain benefits from its activities.

Where controlled entities have entered or left the Group during the year, the financial performance of those entities is included only for the period of the year that they were controlled. A list of controlled entities is contained in Note 21 to the financial statements.

In preparing the consolidated financial statements, all intragroup balances and transactions between entities in the consolidated group have been eliminated in full on consolidation.

c. **Revenue recognition**

Revenue is recognised to the extent that it is probable that the economic benefits will flow to the Group and the revenue can be reliably measured. The following specific recognition criteria must also be met before revenue is recognised:

i) **Provision of service**

Revenue from the provision of services is recognised in the accounting period in which the services are rendered.

ii) **Dividends**

Revenue is recognised when the Group’s right to receive payment is established.

iii) **Interest**

Revenue is recognised using the effective interest rate method.

d. **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 Group 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.

e. Borrowing costs
Borrowing costs are recognised as an expense when incurred.

f. 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.

g. 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 7–90 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.

h. 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.
Cash flows 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.

i. Property, plant and equipment
Plant and equipment is stated at cost less accumulated depreciation and accumulated impairment losses.
Land and buildings are measured at fair value less accumulated depreciation on buildings less any impairment losses recognised after the date of revaluation.
Depreciation is calculation on a straight line basis over the estimated useful life of the assets as follows:
- Buildings: 50 years
- Building Renovations & 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 cash flows 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) Revaluations
Following initial recognition at cost, land and buildings are carried at a revalued amount which is the fair value at the date of the revaluation less any subsequent accumulated depreciation on buildings and any subsequent accumulated impairment losses.
Fair value is determined by reference to market-based evidence, which is the amount for which the assets could be exchanged between a knowledgeable willing buyer and a knowledgeable willing seller in an arm’s length transaction as at the valuation date.

Any revaluation increment is credited to the asset revaluation reserve included in the equity section of the balance sheet, except to the extent that it reverses a revaluation decrease of the same asset previously recognised in profit or loss, in which case the increase is recognised in profit or loss.

Any revaluation decrease is recognised in profit or loss, except that a decrease offsetting a previous revaluation increase for the same asset is debited directly to the asset revaluation reserve to the extent of the credit balance existing in the revaluation reserve for that asset.

Additionally, any accumulated depreciation as at the revaluation date is eliminated against the gross carrying amounts of the assets and the net amounts are restated to the revalued amounts of the assets.

Upon disposal, any revaluation reserve relating to the particular asset being sold is transferred to retained earnings.

Independent valuations are performed with sufficient regularity to ensure that the carrying amounts do not differ materially from the assets’ fair values at the balance sheet date.
iii) 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.

j. Financial Instruments

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 company 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.

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 cash flows will necessitate an adjustment to
the carrying value with a consequential recognition of an income or
expense item in profit or loss.

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.

(i) Available-for-sale investments
Available-for-sale investments are non-derivative financial assets
that are either not capable of being classified into other categories
of financial assets due to their nature or they are designated as
such by management. They comprise investments in the equity
of other entities where there is neither a fixed maturity nor fixed or
determinable payments.

They are subsequently measured at fair value with any
remeasurements other than impairment losses and foreign exchange
gains and losses recognised in other comprehensive income. When the
financial asset is derecognised, the cumulative gain or loss pertaining
to that asset previously recognised in other comprehensive income is reclassified into profit or loss.

Available-for-sale financial assets are classified as non-current
assets when they are expected to be sold within 12 months after
the end of the reporting period. All other available-for-sale financial
assets are classified as current assets.

(ii) 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.

Impairment
At the end of each reporting period, the company 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 cash flows of the
financial asset(s).

In the case of available-for-sale 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 company 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.

Derecognition
Financial assets are derecognised where the contractual rights to receipt of cash
flows 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.

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

l. 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.

m. Critical Accounting Estimates and Judgments
The directors evaluate estimates and judgments 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 Group.

Key estimates
(i) Impairment – general
The Group assesses impairment at the end of each reporting period by evaluation of conditions and events specific to the Group that may be indicative of impairment triggers. Recoverable amounts of relevant assets are reassessed using value-in-use calculations which incorporate various key assumptions.

With respect to cash flow projections for intangibles, growth rates have been factored into valuation models for the next five years on the basis of management’s expectations around the Group’s continued ability to generate revenues. Pre-tax discount rates of 16% have been used in this model.

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

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 company measures some of its assets and liabilities at fair value on either a recurring or non-recurring basis, depending on the requirements of the applicable Accounting Standard.
Fair value is the price the company 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. Provisions
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.

r. Interest in Joint Arrangements
Joint arrangements represent the contractual sharing of control between parties in a business venture where unanimous decisions about relevant activities are required.

Joint venture operations represent arrangements whereby joint operators maintain direct interests in each asset and exposure to each liability of the arrangement. The Group’s interests in the assets, liabilities, revenue and expenses of joint operations are included in the respective line items of the consolidated financial statements.

Gains and losses resulting from sales to a joint operation are recognised to the extent of the other parties’ interests. When the Group makes purchases from a joint operation, it does not recognise its share of the gains and losses from the joint arrangement until it resells those goods/assets to a third party.
3 SEGMENT INFORMATION
The Group operates in the one industry, that being the promotion of diagnostic radiography, radiation therapy, MRI, CT and ultrasound.

4 REVENUES AND EXPENSES

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership subscriptions</td>
<td>2,665,599</td>
<td>2,418,261</td>
</tr>
<tr>
<td>Rendering of services</td>
<td>622,954</td>
<td>786,991</td>
</tr>
<tr>
<td>Conference revenue</td>
<td>806,425</td>
<td>–</td>
</tr>
<tr>
<td>Dividends</td>
<td>3,861</td>
<td>–</td>
</tr>
<tr>
<td>Finance revenue</td>
<td>14,343</td>
<td>9,591</td>
</tr>
<tr>
<td></td>
<td>4,113,182</td>
<td>3,214,843</td>
</tr>
</tbody>
</table>

Breakdown of finance revenue:
- Bank interest receivable: 14,343
- Total finance revenue: 14,343

(b) Other income

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government grants</td>
<td>312,028</td>
<td>155,000</td>
</tr>
</tbody>
</table>

Government grants were received for project administration and standards review. There are no unfulfilled conditions or contingencies attaching to these grants.

(c) Employee benefits expense

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages and salaries</td>
<td>1,219,973</td>
<td>1,314,982</td>
</tr>
<tr>
<td>Superannuation</td>
<td>109,145</td>
<td>116,924</td>
</tr>
<tr>
<td>Fringe benefit tax</td>
<td>13,473</td>
<td>3,733</td>
</tr>
<tr>
<td>Payroll tax</td>
<td>39,822</td>
<td>44,782</td>
</tr>
<tr>
<td>Workers' compensation cost</td>
<td>7,169</td>
<td>6,253</td>
</tr>
<tr>
<td></td>
<td>1,389,582</td>
<td>1,486,674</td>
</tr>
</tbody>
</table>

(d) Depreciation and amortisation expense

- Land and buildings: 58,598 71,683
- Computer equipment: 4,444 3,859
- Amortisation: 33,017 98,297
- Furniture and equipment: 4,583 3,229
<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>100,642</td>
<td>177,068</td>
</tr>
</tbody>
</table>

(e) Other expenses

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other allocation and general expenses</td>
<td>28,762</td>
<td>18,183</td>
</tr>
<tr>
<td>Other administrative expenses</td>
<td>299,159</td>
<td>170,769</td>
</tr>
<tr>
<td>MRLO Impairment Loss (refer also to note 21)</td>
<td>–</td>
<td>177,278</td>
</tr>
<tr>
<td></td>
<td>327,921</td>
<td>366,230</td>
</tr>
</tbody>
</table>
5 INCOME TAX

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

6 CASH AND CASH EQUIVALENTS

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on hand</td>
<td>493</td>
<td>349</td>
</tr>
<tr>
<td>Cash at bank – Bendigo Bank</td>
<td>150,889</td>
<td>129,117</td>
</tr>
<tr>
<td>Cash at bank – Bendigo Bank – Special Purpose Fund</td>
<td>1,622</td>
<td>2,677</td>
</tr>
<tr>
<td>Cash at bank – Commonwealth</td>
<td>37,070</td>
<td>11,706</td>
</tr>
<tr>
<td>Cash at bank - Commonwealth Direct Investment</td>
<td>806,173</td>
<td>605,059</td>
</tr>
<tr>
<td>Cash at bank – Grant</td>
<td>477,253</td>
<td>157,892</td>
</tr>
<tr>
<td></td>
<td>1,473,500</td>
<td>906,800</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash at bank and on hand</td>
<td>1,473,500</td>
<td>906,800</td>
</tr>
</tbody>
</table>

Reconciliation of net surplus after tax to net cash flows from operations

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net surplus / (loss)</td>
<td>269,750</td>
<td>(332,041)</td>
</tr>
<tr>
<td>Adjustments for:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>67,626</td>
<td>78,771</td>
</tr>
<tr>
<td>Amortisation</td>
<td>33,017</td>
<td>98,297</td>
</tr>
<tr>
<td>MRLO Impairment Loss</td>
<td>–</td>
<td>177,278</td>
</tr>
<tr>
<td>Doubtful debts</td>
<td>7,146</td>
<td>–</td>
</tr>
<tr>
<td>Changes in assets and liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Increase) / decrease in trade and other receivables</td>
<td>4,376</td>
<td>(9,353)</td>
</tr>
<tr>
<td>(Increase) / decrease in other assets</td>
<td>58,378</td>
<td>(56,094)</td>
</tr>
<tr>
<td>(Decrease) / increase in trade and other payables</td>
<td>484,723</td>
<td>(548,792)</td>
</tr>
<tr>
<td>(Decrease) / increase in provisions</td>
<td>(5,452)</td>
<td>174</td>
</tr>
<tr>
<td>(Decrease) / increase in other liabilities</td>
<td>(332,448)</td>
<td>381,374</td>
</tr>
<tr>
<td>Net cash from / (used in) operating activities</td>
<td>587,116</td>
<td>(210,386)</td>
</tr>
</tbody>
</table>
7 TRADE AND OTHER RECEIVABLES (CURRENT)

<table>
<thead>
<tr>
<th>2016</th>
<th>Gross Amount $</th>
<th>Past due and impaired $</th>
<th>Past Due but not impaired (days overdue)</th>
<th>Within initial Trade Terms $</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;30 $</td>
<td>31-60 $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>&gt;90 $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Trade and term receivables</td>
<td>35,614</td>
<td>(16,646)</td>
<td>11,771</td>
<td>4,932</td>
</tr>
<tr>
<td>Total</td>
<td>35,614</td>
<td>(16,646)</td>
<td>11,771</td>
<td>4,932</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2015</th>
<th>Gross Amount $</th>
<th>Past due and impaired $</th>
<th>Past Due but not impaired (days overdue)</th>
<th>Within initial Trade Terms $</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>&lt;30 $</td>
<td>31-60 $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>&gt;90 $</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Trade and term receivables</td>
<td>39,990</td>
<td>(9,500)</td>
<td>17,154</td>
<td>10,930</td>
</tr>
<tr>
<td>Total</td>
<td>39,990</td>
<td>(9,500)</td>
<td>17,154</td>
<td>10,930</td>
</tr>
</tbody>
</table>

(i) Trade receivables are non-interest bearing and are generally on 7-90 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 Group does not have any material credit risk exposure to any single receivable or group receivables. The above table details the Group’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 company 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 Group. 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

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Prepayments</td>
<td>25,495</td>
<td>30,475</td>
</tr>
<tr>
<td>Security Deposits</td>
<td>1,048</td>
<td>1,048</td>
</tr>
<tr>
<td>Conference &amp; Seminar Advances</td>
<td>33,881</td>
<td>63,632</td>
</tr>
<tr>
<td>Other</td>
<td>5,619</td>
<td>29,266</td>
</tr>
<tr>
<td>Total</td>
<td>66,043</td>
<td>124,421</td>
</tr>
</tbody>
</table>

9 AVAILABLE FOR SALE FINANCIAL INVESTMENTS

Shares in listed companies – at fair value | 37,519 | 50,922 |

Available-for-sale investments consist of investments in ordinary shares, and therefore have no fixed maturity date or coupon date.
## 10 Property, Plant and Equipment

<table>
<thead>
<tr>
<th>Buildings &amp; Land</th>
<th>Computer Equipment</th>
<th>Furniture &amp; Equipment</th>
<th>Computer Intangibles</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

### Year ended 31 October 2016

At 1 November 2015
- net of accumulated depreciation and impairment: 3,755,698
- Additions: 450,000
- Depreciation charge for the year: (58,598)
- At 31 October 2016, net of accumulated depreciation and impairment: 4,147,100

Additions
- 463,783

Depreciation charge for the year
- (67,625)

At 31 October 2016
- net of accumulated depreciation and impairment: 4,182,992

### At 31 October 2016

Cost or fair value
- 5,076,449

Accumulated depreciation and impairment
- (893,457)

Net carrying amount
- 4,182,992

### Year ended 31 October 2015

At 1 November 2014
- net of accumulated depreciation and impairment: 3,827,381
- Additions: –
- Depreciation charge for the year: (71,683)
- At 31 October 2015, net of accumulated depreciation and impairment: 3,755,698

Additions
- 30,065

Depreciation charge for the year
- (78,771)

At 31 October 2015
- net of accumulated depreciation and impairment: 3,786,834

### At 31 October 2015

Cost or fair value
- 4,612,665

Accumulated depreciation and impairment
- (825,832)

Net carrying amount
- 3,786,834

The useful life of the assets was estimated as follows both for 2016 and 2015:
- Buildings – revaluation: 50 years
- Buildings – renovation & Electrical Works: 10 years
- Computer equipment: 3 years
- Furniture and equipment: 5 years
11 INTANGIBLES

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>RTO Project - Software</td>
<td>222,541</td>
<td>215,911</td>
</tr>
<tr>
<td>Less: MRLO Amortisation</td>
<td>(222,541)</td>
<td>(189,524)</td>
</tr>
<tr>
<td>Total Intangibles</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12 TRADE AND OTHER PAYABLES (CURRENT)

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade payables (i)</td>
<td>256,925</td>
<td>242,433</td>
</tr>
<tr>
<td>Other payables - Sundry creditors</td>
<td>102,712</td>
<td>110,694</td>
</tr>
<tr>
<td>Grant payables</td>
<td>477,189</td>
<td>–</td>
</tr>
<tr>
<td>Indirect Taxes Payable</td>
<td>49,275</td>
<td>48,254</td>
</tr>
<tr>
<td></td>
<td>886,101</td>
<td>401,381</td>
</tr>
</tbody>
</table>

(i) Trade payables are non-interest bearing and are normally settled within 30-day terms
(ii) There were no Grant payables as at 31 October 2015 as the funds were received in advance as at this date (refer to Note 15). The reclassification was because the balance of the Grant represents unutilised funds that will be returned due to the cessation of the agreement.

13 INTEREST BEARING LOANS AND BORROWINGS

Financing facilities available
At reporting date, the following financing facilities had been negotiated and were available:
Total facilities:
- overdraft (secured by floating charge over the building ) | 250,000 | 250,000 |
Facilities used at reporting date:
- overdraft | – | – |
Facilities unused at reporting date:
- overdraft | 250,000 | 250,000 |
Total facilities | 250,000 | 250,000 |
Facilities used at reporting date | – | – |
Facilities unused at reporting date | 250,000 | 250,000 |
14 PROVISIONS

<table>
<thead>
<tr>
<th></th>
<th>Annual leave</th>
<th>Long service leave</th>
<th>Long service leave</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Current)</td>
<td>(Non Current)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>At 1st November 2015</td>
<td>79,209</td>
<td>85,837</td>
<td>57,553</td>
<td>222,599</td>
</tr>
<tr>
<td>Arising during the year</td>
<td>110,733</td>
<td>17,499</td>
<td>–</td>
<td>128,232</td>
</tr>
<tr>
<td>Utilised</td>
<td>(104,614)</td>
<td>(8,001)</td>
<td>–</td>
<td>(112,615)</td>
</tr>
<tr>
<td>Discount rate adjustment</td>
<td>–</td>
<td>–</td>
<td>(21,068)</td>
<td>(21,069)</td>
</tr>
<tr>
<td>At 31st October 2016</td>
<td>85,328</td>
<td>95,335</td>
<td>36,485</td>
<td>217,148</td>
</tr>
<tr>
<td>Current 2016</td>
<td>85,328</td>
<td>95,335</td>
<td>–</td>
<td>180,663</td>
</tr>
<tr>
<td>Non-current 2016</td>
<td>–</td>
<td>–</td>
<td>36,485</td>
<td>36,485</td>
</tr>
<tr>
<td></td>
<td>85,328</td>
<td>95,335</td>
<td>36,485</td>
<td>217,148</td>
</tr>
<tr>
<td>Current 2015</td>
<td>79,209</td>
<td>85,837</td>
<td>–</td>
<td>165,046</td>
</tr>
<tr>
<td>Non-current 2015</td>
<td>–</td>
<td>–</td>
<td>57,553</td>
<td>57,553</td>
</tr>
<tr>
<td></td>
<td>79,209</td>
<td>85,837</td>
<td>57,553</td>
<td>222,599</td>
</tr>
</tbody>
</table>

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 Group 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 Group 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.

15 OTHER CURRENT LIABILITIES

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Subscription Income received in advance</td>
<td>584,318</td>
<td>438,815</td>
</tr>
<tr>
<td>Grant received in advance</td>
<td>–</td>
<td>597,753</td>
</tr>
<tr>
<td>Credit Cards</td>
<td>7,593</td>
<td>18,226</td>
</tr>
<tr>
<td>ANZPIC Conference</td>
<td>51,397</td>
<td>3,068</td>
</tr>
<tr>
<td>ROSIS Conference</td>
<td>27,833</td>
<td>27,833</td>
</tr>
<tr>
<td>Breast WA Conference</td>
<td>100,044</td>
<td>42,626</td>
</tr>
<tr>
<td>WA Radiology Golf Day</td>
<td>11,092</td>
<td>–</td>
</tr>
<tr>
<td>Other Creditors</td>
<td>22,217</td>
<td>8,619</td>
</tr>
<tr>
<td></td>
<td>804,493</td>
<td>1,136,939</td>
</tr>
</tbody>
</table>
## 16 RETAINED SURPLUS AND RESERVES

### Movements in retained surplus were as follows:

<table>
<thead>
<tr>
<th>Description</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance 1st November</td>
<td>$2,245,537</td>
<td>$2,596,373</td>
</tr>
<tr>
<td>Net surplus / (loss) for the year</td>
<td>$269,750</td>
<td>$(332,041)</td>
</tr>
<tr>
<td>Transfer (to)/from Special purpose funds reserve</td>
<td>$(24,857)</td>
<td>$(18,795)</td>
</tr>
<tr>
<td>Balance 31st October</td>
<td>$2,490,430</td>
<td>$2,245,537</td>
</tr>
</tbody>
</table>

### Reserves

<table>
<thead>
<tr>
<th></th>
<th>Special purpose funds</th>
<th>Asset revaluation reserve</th>
<th>Share revaluation reserve</th>
<th>Education reserve fund</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>At 1 November 2015</td>
<td>444,071</td>
<td>330,000</td>
<td>45,327</td>
<td>100,000</td>
<td>919,398</td>
</tr>
<tr>
<td>Net increase / (decrease) transferred from /</td>
<td>24,857</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>24,857</td>
</tr>
<tr>
<td>(to) retained surplus</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revaluation of land and buildings</td>
<td>–</td>
<td>450,000</td>
<td>–</td>
<td>–</td>
<td>450,000</td>
</tr>
<tr>
<td>Revaluation of available-for-sale investments</td>
<td>–</td>
<td>–</td>
<td>(13,405)</td>
<td>–</td>
<td>(13,405)</td>
</tr>
<tr>
<td>At 31 October 2016</td>
<td>468,928</td>
<td>780,000</td>
<td>31,922</td>
<td>100,000</td>
<td>1,380,850</td>
</tr>
</tbody>
</table>

### (i) Special Purpose Fund Reserves are represented by:

- **NSW Education**: $128,327, $130,073
- **NSW General**: $2,761, $3,686
- **Northern Territory**: $2,429, $2,429
- **Gold Coast**: $9,908, $9,736
- **North Queensland Education**: $17,467, $17,467
- **Queensland Education**: $110,461, $101,727
- **Queensland General**: $9,218, $9,065
- **SA Education**: $28,289, $23,041
- **SA General**: $4,115, $6,031
- **SA Student Sub Committee**: $2,427, $1,881
- **TAS AE Ryan Education**: $31,901, $29,901
- **Tasmania General**: $4,069, $4,172
- **VIC CT Users Group**: $21,792, $22,523
- **VIC Education**: $32,665, $24,215
- **VIC General**: $14,974, $16,882
- **VIC Development & Research**: $23,038, $19,156
- **WA Education**: $26,185, $21,340
- **WA General**: $(1,097), $746
- **Total special purpose funds**: $468,928, $444,071
16 RETAINED SURPLUS AND RESERVES (continued)

Nature and purpose of reserves

Special purpose funds
The special purpose funds represent the accumulated amounts generated by activities in each Branch and Sub-branch. They can only be used by the relevant Branch or Sub-branch to fund members’ activities.

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 Group’s Annual Scientific Meetings of Medical Radiation and Therapy (ASMMIRT).

Asset revaluation reserve
The asset revaluation reserve is used to record increases in the fair value of land and buildings and decreases to the extent that such decreases relate to an increase on the same asset previously recognized in equity. The reserve can only be used as an offset against any disposal of these assets.

Net unrealised gains reserve
This reserve records increases in the fair value of available-for-sale investments in listed shares and decreases to the extent that such decreases relate to an increase on the same asset previously recognized in equity. The reserve can only be used when the available-for-sale investments are disposed of.

17 FINANCIAL INSTRUMENTS

The Group’s principal financial instruments comprise of trade receivables, trade payables, cash, short term deposits, other interest bearing liabilities and available for sale shares. The main purpose of holding these instruments is to invest surplus members’ funds in order to maximise returns while not exposing the Group to a high level of risk.

This note presents information about the Group’s exposure to the financial instrument risks, its objectives, policies and processes for measuring and managing risk.

The Board of Directors has responsibility for the establishment and oversight of the risk management framework, identifying and analyzing the risks faced by the economic entity. Management’s policies are approved and reviewed by the Board of Directors on a regular basis. This includes credit risk policies and future cash flow requirements.

The main risks arising from holding these financial instruments are cash flow risk, interest rate risk, liquidity risk and credit risk. Policies for managing the main risks are summarised below:

Interest rate risk
Exposures to interest rate risk, which is a risk that the financial instruments’ value will fluctuate as a result of changes in market interest rates. The majority of financial assets are cash at bank and security deposits with floating interest rates. The policy of the Group is to have fixed interest term deposits to reduce interest rate risk.

The following tables detail the exposure of the Group to interest rate risk as at 31 October 2016 and 2015. The interest rate risk profile of the financial instruments held by the Group is set out on following page:
### 17 FINANCIAL INSTRUMENTS (continued)

<table>
<thead>
<tr>
<th></th>
<th>Weighted Average Effective Interest Rate</th>
<th>Maturing within 1 year</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash &amp; cash equivalents</td>
<td>1.25</td>
<td>1.84</td>
<td>1,473,500</td>
</tr>
<tr>
<td>Trade &amp; other receivables</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Available-for-sale assets</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Total Financial Assets</td>
<td>–</td>
<td>–</td>
<td>1,473,500</td>
</tr>
<tr>
<td>Financial Liabilities</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Total Financial Liabilities</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
</tbody>
</table>

**Financial Assets:**


**Financial Liabilities:**


**Liquidity risk**

Liquidity risk arises when the Group is unable to meet its financial obligations as they fall due. The Group manages liquidity risk by monitoring forecasted cash flows and ensuring that adequate surplus funds are maintained.

Ultimate responsibility for liquidity risk rests with the Board of Directors, which has established a process to manage the Group’s short, medium and long term funding and liquidity. The Group manages the liquidity risk by maintaining adequate cash reserves and, by continuously monitoring actual cash flows while matching the maturity profiles of financial assets and liabilities. Given the current surplus of cash assets, and based on prior periods’ data, liquidity risk has been assessed as minimal.

The following liquidity risk disclosures reflect all contractual fixed pay-offs, repayments and interest resulting from recognised financial liabilities and financial guarantees as at 31 October 2016. For the other obligations the respective undiscounted cash flows for the respective upcoming fiscal years are presented. The timing of cash flows for liabilities is based on the contractual terms of the underlying contract.

However, where the counterparty has a choice of when the amount is paid, the liability is allocated to the earliest period in which the Group can be required to pay. When the Group is committed to make amounts available in instalments, each instalment is allocated to the earliest period in which the Group is required to pay.

The risk implied from the values shown in the table below, reflects a balanced view of cash inflows and outflows of non-derivative financial instruments. Leasing obligations, trade payables and other financial liabilities mainly originate from the financing of assets used in the Group’s ongoing operations such as property, plant, equipment and investments in working capital.

Liquid non-derivative assets comprising cash and receivables are considered in the Group’s overall liquidity risk. The Group ensures that sufficient liquid assets are available to meet all the required short-term cash payments.
### 17 FINANCIAL INSTRUMENTS (continued)

#### Financial Liability and Financial Asset Maturity Analysis

<table>
<thead>
<tr>
<th></th>
<th>Within 1 year</th>
<th>1 to 5 Years</th>
<th>Over 5 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financial Liabilities:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade payable and other payables (excluding estimated annual leave and deferred income)</td>
<td>886,101</td>
<td>401,381</td>
<td>–</td>
</tr>
<tr>
<td>Finance lease liabilities</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total expected outflows</strong></td>
<td>886,101</td>
<td>401,381</td>
<td>–</td>
</tr>
</tbody>
</table>

| **Financial Assets:** |     |     |     |     |     |     |     |     |
| Cash on hand          | 1,473,500 | 906,800 | – | – | – | – | 1,473,500 | 906,800 |
| Trade receivable and other debtors | 18,968 | 30,490 | – | – | – | – | 18,968 | 30,490 |
| Other financial assets | – | – | 37,519 | 50,922 | – | – | 37,519 | 50,922 |
| **Total anticipated inflows** | 1,492,468 | 937,290 | 37,519 | 50,922 | – | – | 1,529,987 | 988,212 |

**Net (outflow) / inflow on financial instruments**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>financial instruments</td>
<td>606,367</td>
<td>535,909</td>
</tr>
</tbody>
</table>

#### Credit risk

Credit risk refers to the risk that a counterparty will default on its contractual obligations resulting in financial loss to the Group. The Group has adopted a policy of only dealing with creditworthy counter parties as a means of mitigating the risk of financial loss from defaults. The Group’s exposure is continuously monitored and credit limits are reviewed annually.

Credit risk associated with the Group’s financial assets is minimal as it does not have any significant credit risk exposure to any single party.

The credit risk on liquid funds and bank bills is limited because the counter parties are recognised banks with appropriate credit ratings. Trade receivables are concentrated in Australia.

#### Financial assets that are either past due or impaired

Amounts are considered as “past due” when the debt has not been settled within the terms and conditions agreed between the Group 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 Group.

As at reporting date, there is no event to indicate that any of the financial assets were impaired.

There are no financial assets that have had their terms renegotiated so as to prevent them from being past due or impaired, and they are stated at the carrying amounts as indicated.

The Group does not have any derivative financial instruments at 31 October 2016 and 2015.

#### Financial instruments measured at Fair Value

The financial instruments recognised at fair value in the statement of financial position have been analysed and classified using a fair value hierarchy reflecting the significance of the inputs used in making the measurements. The fair value hierarchy consists of the following levels:

- quoted prices in active markets for identical assets or liabilities (Level 1);
- inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (as prices) or indirectly (derived from prices) (Level 2); and
- inputs for the asset or liability that are not based on observable market data (unobservable inputs) (Level 3).

Included within Level 1 of the hierarchy are listed shares, government securities and units in managed funds. The fair value of these financial assets has been based on relevant market quotations at the end of the reporting period, excluding transaction costs. In valuing mortgage bonds, included in Level 2 of the hierarchy, valuation techniques such as comparison to similar investments for which market observable prices are available have been adopted to determine the fair value of these investments.

No transfers between the levels of the fair value hierarchy occurred during the current or previous reporting periods.
17 FINANCIAL INSTRUMENTS (continued)

Sensitivity analysis

Taking into account past performance, future expectations, economic forecasts and management’s knowledge and experience of the financial markets, the Group believes the following movements are ‘reasonably possible’ over the next 12 months:

At 31 October 2016, if interest rates had changed by +/- 200 basis points from the year end rates with other variables held constant, the net result for the year would have been $29,470 lower/higher (2015: change of 200 basis points, $18,136 lower/higher), mainly as a result of lower/higher interest income from cash and cash equivalents.

Significant assumptions used in the interest rate sensitivity analysis include:
- Reasonably possible movements in interest rates were determined based on the Group’s current credit rating and mix of debt in Australia, relationships with finance institutions, the level of debt that is expected to be renewed as well as a review of the last two year’s historical movements and economic forecaster’s expectations.
- The net exposure at balance date is representative of what the Group was and is expecting to be exposed to in the next twelve months from reporting date.

<table>
<thead>
<tr>
<th></th>
<th>Profit</th>
<th>Equity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year ended 31 October 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>+/- 2% in interest rates</td>
<td>+/-29,470</td>
<td>+/-29,470</td>
</tr>
<tr>
<td>+/-10% in listed investments</td>
<td>+/-</td>
<td>+/-3,752</td>
</tr>
<tr>
<td>Year ended 31 October 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>+/- 2% in interest rates</td>
<td>+/-18,136</td>
<td>+/-18,136</td>
</tr>
<tr>
<td>+/-10% in listed investments</td>
<td>+/-</td>
<td>+/-5,092</td>
</tr>
</tbody>
</table>

18 CONFERENCE

The Group hosted the annual conference ASMMIRT 2016 at Brisbane in April 2016.

In 2015, the Group’s affiliate New Zealand Institute of Medical Radiation Technology (“NZIMRT”) hosted the 2015 NZIMRT-AIR Scientific Meeting at Wellington, New Zealand. During the year ended on 31 October 2015, the Group had 30% share in the profit split, which was $31,376.

<table>
<thead>
<tr>
<th></th>
<th>ASMMIRT 2016 $</th>
<th>NZIMRT 2015 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income</td>
<td>270,139</td>
<td>–</td>
</tr>
<tr>
<td>Conference registrations</td>
<td>536,287</td>
<td>–</td>
</tr>
<tr>
<td>Total income</td>
<td>806,425</td>
<td>–</td>
</tr>
<tr>
<td>Expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conference and meeting expenses</td>
<td>357,843</td>
<td>–</td>
</tr>
<tr>
<td>Conference venue</td>
<td>320,166</td>
<td>–</td>
</tr>
<tr>
<td>Total expenditure</td>
<td>678,009</td>
<td>–</td>
</tr>
<tr>
<td>Conference surplus for year</td>
<td>128,416</td>
<td>–</td>
</tr>
</tbody>
</table>
19 AUDITORS’ REMUNERATION

The auditor of the Group is HLB Mann Judd.

<table>
<thead>
<tr>
<th>Amount received or due and receivable by HLB Mann Judd for:</th>
<th>2016 $</th>
<th>2015 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>An audit of the financial report of the Group</td>
<td>36,000</td>
<td>35,000</td>
</tr>
<tr>
<td>Other services (acquittal)</td>
<td>955</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>36,955</strong></td>
<td><strong>35,000</strong></td>
</tr>
</tbody>
</table>

20 DIRECTOR AND EXECUTIVE DISCLOSURES

(a) Details of key Management personnel

(i) Directors:
The Directors’ names and positions are listed as per following:
- Ms Jo Page President (till April 2016)
- Mr Patrick Eastgate President (from May 2016)
- Ms Carolyn Heyes Honorary Treasurer
- Ms Bronwyn Hilder Vice President/Assistant Honorary Treasurer
- Dr Robin Hart Honorary Secretary
- Ms Lynne Ingram Whip (till April 2016)
- Ms Jillian Harris Board Member (from April 2016)
- Ms Denise Ogilvie Board Member (from April 2016)
- Mr Adam Westerink Board Member (from August 2016)

(ii) Executives:
- Mr Paul Gloster Acting Chief Executive & Operations Manager
- Ms Min Ku Professional Standards Manager
- Mr Bruce Su Financial Controller & Company Secretary
- Mr David Leach Conference & Events 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.


(iii) There were no other related party transactions.

21 CONTROLLED ENTITIES

Subsidiaries of Australian Society of Medical Imaging and Radiation Therapy Ltd:
The College of the Australian Institute of Radiography Ltd T/A Medical Radiation Learning Online.
Country of Incorporation: Australia

The entity was incorporated on 18th of October 2012 by the Society being College of Australian Institute of Radiography (“CAIR”) trading as Medical Radiation Learning Online (“MRLO”). The entity was established as a separate public company limited by guarantee, in order to achieve registered training organisation status and develop the online learning hub. Registered training organisation status was achieved on 18th of November 2013.

The Society considers that it controls CAIR on the basis that the operations of CAIR are operated and monitored from Head Office through organisation of various webinars and seminars and returns will be generated by the Society through management fees for their services. As such, the Society has exposure, or rights, to variable returns from its involvement with CAIR, and the operations have a synergy with those of the Society being related to education and training in the field of radiography and are controlled operationally and financially by the management of the Society.

During the 2016 financial year, the residual balance of the software has been fully amortised.
22 PARENT INFORMATION

The following information has been extracted from the books and records of the parent and has been prepared in accordance with the Australian Accounting Standards.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td>1,553,541</td>
<td>1,433,382</td>
</tr>
<tr>
<td>Non-current assets</td>
<td>4,220,510</td>
<td>3,837,756</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>5,774,052</td>
<td>5,271,138</td>
</tr>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td>1,870,439</td>
<td>1,672,628</td>
</tr>
<tr>
<td>Non-current liabilities</td>
<td>36,485</td>
<td>57,553</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td>1,906,923</td>
<td>1,730,181</td>
</tr>
<tr>
<td><strong>Equity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issued capital</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Retained earnings</td>
<td>2,486,279</td>
<td>2,621,559</td>
</tr>
<tr>
<td>Financial assets reserve</td>
<td>1,380,850</td>
<td>919,398</td>
</tr>
<tr>
<td>Revaluation surplus</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total equity</strong></td>
<td>3,867,129</td>
<td>3,540,957</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement of Profit or Loss and Other Comprehensive Income</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total profit / (loss)</td>
<td>(110,423)</td>
</tr>
<tr>
<td>Other comprehensive income</td>
<td>436,595</td>
</tr>
<tr>
<td><strong>Total comprehensive income / (loss)</strong></td>
<td>326,172</td>
</tr>
</tbody>
</table>

Guarantees
Australian Society of Medical Imaging and Radiation Therapy Ltd has not entered into any guarantees, in the current or previous financial years, in relation to the debts of its subsidiaries.

Contingent liabilities
Australian Society of Medical Imaging and Radiation Therapy Ltd has no contingent assets or contingent liabilities for the current or previous year.

Contractual commitments
At 31st of October 2016, Australian Society of Medical Imaging and Radiation Therapy Ltd has not entered into any contractual commitments for the acquisition of property, plant and equipment (2015: Nil).

23 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 31st October 2016 the number of financial members was 6784 (2015: 6680).

24 COMMITMENTS

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

26 EVENTS AFTER BALANCE SHEET DATE
The directors decided to close off MRLO’s operation on 2 November 2016 and transfer MRLO as a business name under Australian Society of Medical Imaging and Radiation Therapy Ltd. Based on this, the Society has declared the intercompany receivable from MRLO as unrecoverable and has been fully written off this year. Similarly, the intercompany payable recorded in the accounts of MRLO has been released to income statement for the year ended at 31 October 2016.
Board of Directors Declaration

The Board declares that:

a) The attached financial statements and notes, as set out on pages 26-47, thereto comply with Australian Accounting Standards.

b) The attached financial statements and notes, as set out on pages 26-47, thereto give a true and fair view of the Group’s financial position as at 31 October 2016 and performance of the Group for the year ended 31 October 2016.

c) In the Board’s opinion, the attached financial statements and notes, as set on pages 26-47, thereto are in accordance with the Corporations Act 2001; and

d) In the Board’s opinion, there are reasonable grounds to believe that the Group 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

B. Hilder
Vice President

C. Heyes
Honorary Treasurer

Melbourne 10 January 2017
Independent Auditor’s Report to the members of
Australian Society of Medical Imaging and Radiation Therapy

We have audited the accompanying financial report of Australian Society of Medical Imaging and Radiation Therapy Ltd (“the Company”), which comprises the consolidated statement of financial position as at 31 October 2016, the consolidated statement of comprehensive income, the consolidated statement of changes in equity and the consolidated statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the directors’ declaration for the consolidated entity. The consolidated entity comprises the company and the entities it controlled at the year’s end or from time to time during the financial year.

Director’s Responsibility 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 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.

Auditors’ Responsibility
Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor’s judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company’s preparation of the financial report that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company and its controlled entities’ internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

Our audit did not involve an analysis of the prudence of business decisions made by directors or management.

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

Independence
In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001.

Opinion
In our opinion, the financial report of the Australian Society of Medical Imaging and Radiation Therapy is in accordance with the Corporations Act 2001, including:
(i) giving a true and fair view of the consolidated entity’s financial position as at 31 October 2016 and its performance for the year ended on that date; and
(ii) complying with Australian Accounting Standards and the Corporations Regulations 2001.

HLB Mann Judd
Chartered Accountants
Melbourne 10 January 2017

Tim Fairclough
Partner
### Balance Sheet as at 31 October 2016

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Asset</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current investments in Bendigo Bank limited:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>– Fixed term deposits</td>
<td>69,811</td>
<td>67,906</td>
</tr>
<tr>
<td>– Accrued interest</td>
<td>1,066</td>
<td>1,129</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td>70,877</td>
<td>69,035</td>
</tr>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Creditors</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Accounting and Audit Fees</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td>70,877</td>
<td>69,035</td>
</tr>
<tr>
<td>Accumulated surpluses</td>
<td>70,877</td>
<td>69,035</td>
</tr>
<tr>
<td><strong>TRUST FUNDS</strong></td>
<td>70,877</td>
<td>69,035</td>
</tr>
</tbody>
</table>

### Income Statement

For the year ended 31 October 2016

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest Received</td>
<td>1,842</td>
<td>2,123</td>
</tr>
<tr>
<td><strong>Total income</strong></td>
<td>1,842</td>
<td>2,123</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounting and Audit Fees</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Application of Grant</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>NET SURPLUS / (DEFICIT)</strong></td>
<td>1,842</td>
<td>2,123</td>
</tr>
<tr>
<td>Trust Funds at beginning of year</td>
<td>69,035</td>
<td>66,912</td>
</tr>
<tr>
<td><strong>Trust Funds at end of year</strong></td>
<td>70,877</td>
<td>69,035</td>
</tr>
</tbody>
</table>
1 SUMMARY OF ACCOUNTING POLICIES

Financial Reporting Framework
The trust is not a reporting entity because in the opinion of the trustees there are unlikely to exist users of the financial report who are unable to command the preparation of reports tailored so as to satisfy specifically all of their information needs. Accordingly, this 'special purpose financial report' has been prepared to satisfy the trustees reporting requirements. The report has been prepared in accordance with the Corporations Act 2001, however, the disclosure requirements are not in accordance with all Accounting Standards and interpretations issued by the Australian Accounting Standards Board.

The financial report has been prepared on the basis of historical cost and except where stated, does not take into account changing money values or current valuations of non-current assets. Cost is on the fair values of the consideration given in exchange for assets.

Significant Accounting Policies
The financial report has been prepared in accordance with the basis of accounting specified by all applicable Accounting Standards. The following significant accounting policies have been adopted in the preparation of the financial report.

(a) investments

Investments are brought to account at cost. Interest revenue is recognised on an accrual basis.
The Trustees of the Nicholas Outterside Memorial Trust declare that:

a) The financial statements set out on page 50-51 comply with accounting standards.

b) The financial statements set out on page 50-51 give a true and fair view of the financial position and performance of the Trust.

c) In the Trustees opinion, there are reasonable grounds to believe the Trust will be able to pay its debts as an when they become due and payable.

Signed in accordance with a resolution of the Trustees.

Ernest Hughes FIR (Hon), FCoR, LM
Trustee

Gordon Stewart
Trustee

Melbourne 10 January 2017
Independent Audit Report to the Members
of Nicholas Outterside Memorial Trust

We have audited the accompanying financial report, being a special purpose financial report, of Nicholas Outterside Memorial Trust ("the trust"), which comprises the balance sheet as at 31 October 2016, the income statement for the year ended on that date, a summary of significant accounting policies, other explanatory notes and the trustees' declaration.

Trustees’ responsibility for the financial report
The trustees of the trust are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements, which form a part of the financial report, are appropriate to meet the needs of the members. The trustees’ responsibility also includes establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor’s responsibility
Our responsibility is to express an opinion on the financial report based on our audit. No opinion is expressed as to whether the accounting policies used, as described in Note 1, are appropriate to meet the needs of the members. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the trustees, as well as evaluating the overall presentation of the financial report.

The financial report has been prepared for distribution to members for the purpose of fulfilling the trustees’ financial reporting requirements under the Trust’s constitution. We disclaim any assumption of responsibility for any reliance on this report or on the financial report to which it relates to any person other than the members, or for any purpose other than that for which it was prepared.

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

Independence
In conducting our audit, we have complied with the independence requirements of the Australian professional ethical pronouncements.

Audit opinion
In our opinion, the financial report presents fairly, in all material respects the financial position of the Nicholas Outterside Memorial Trust as at 31st October 2016 and of its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements.

Basis of Accounting
Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the trustees’ financial reporting responsibilities under the Corporations Act 2001. As a result, the financial report may not be suitable for another purpose.

Tim Fairclough
Partner

Melbourne 10 January 2017