



ASMIRT Annual Report 2022





**Australian Society of Medical Imaging and
Radiation Therapy Annual Report 2022**

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

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About ASMIRT

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

Vision

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

Mission

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

Its key goals are:

Advocacy

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

Professional standards

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

Education

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

Research and innovation

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

Membership

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

Values

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



Leadership and Secretariat



Carolyn Heyes

ASMIRT President



Message from the President

It is with great honour that I present this report – my first since taking on the role of ASMIRT President in May 2022. It certainly has been a busy and productive year and I look forward to sharing the year ahead with you all.

First and foremost, I would like to thank Bronywn Hilder for all her work over the past four years whilst in the position as President. She showed extraordinary dedication and focus dealing with everything that was thrown her way during the COVID-19 pandemic, the initial unknown and ongoing changes that came with it. She kept a steady hand on the wheel throughout, working with external stakeholders, and with a determined focus on ASMIRT members. Did I mention that she was also completing her doctorate at the same time? She has been an exceptional mentor to me, offering ongoing support throughout my adjustment to this new position.

Two new members joined the Board of Directors during the year, Dr Nigel Anderson from Victoria and Rachel Kearvell from South Australia. I would also like to thank Naomi Gibson from Queensland who has taken on the role of Vice-President. I really do appreciate all that you do.



(Above): Board Members at ASMIRT 2022 (absent: Georgia Halkett)

It's a pleasure to see that, for the seventh consecutive year, the Society's financial performance at the end of the financial year 1 November 2021 to 31 October 2022 remains stable, with positive returns on our investments. Such a strong recovery from our position seven years ago and the Society looks well set up for the future.

Despite COVID-19 and all the misery of lockdowns, overcrowded hospitals, many of us struggling with full PPE for hours on end at work, we managed

to hold our first face-to-face conference in May in Cairns. The atmosphere was electric – there was just so much excitement and pleasure at being able to meet again in person – and in such delightful tropical surrounds. On behalf of all the delegates, my hearty thanks go to Millie Taylor-Brown and Janelle Couch, conference co-convenors from Cairns, for a great event.

To ensure best practice, the Board underwent training in governance and financial management

The Board of Directors met eight times during the year, and I am happy to say that two of the meetings were face-to-face, one at the Cairns conference and the other in Melbourne last August. An appointment to the Board of Directors comes with significant responsibilities and liabilities, both personal and to the membership. To ensure best practice, the Board underwent training in governance and financial management (necessary to fulfil the role of a Board Director in any organisation) and there will be ongoing training in the future. They all give so freely of their time and expertise, and I thank them all for their tireless support.

We welcomed a new Advanced Practitioner and two new Fellows during the year. Don Nocum is an advanced practice interventional radiographer who specialises in radiation dose optimisation within the field of interventional radiology and vascular angiography. Shayne Chau and Edel Doyle both achieved ASMIRT Fellowship.



(Above): Don Nocum (left) and Bronwyn Hilder



(Above): Shayne Chau (left) and Goran Obradovic



(Above): Edel Doyle (left) and Bronwyn Hilder

We have had a significant increase in the number of online events held throughout the year. COVID-19 has required us to be much more creative in the way we deliver our education and CPD activities. Clouds and silver linings! We have also undertaken a review of our certifications and the development and release of some new ones – one for Angiography and another for RT in MRI. Our Preliminary Image Evaluation certification too, has now been fully released and two rounds of exams have been held.

It would be remiss of me not to congratulate the winners of our annual Research Scholarships. Congratulations go to Dr Yobelli Jimenez, recipient of the 2021 Research Scholarship and Mikaela Doig, recipient of the 2021 Novice Researcher Scholarship.

Finally, I would like to thank all our staff at the Secretariat, and our wonderful volunteers for the time that they dedicate to the Society. Our committees, reference groups, working parties, branch executives and branch committees and all those who represent ASMIRT and the profession on a lengthy list of external bodies and committees. There are too many to be listed individually – but I thank you all – we couldn't do it without you!

ASMIRT Board of Directors



**Carolyn
Heyes**
President

Carolyn is the President of ASMIRT. Carolyn has previously been a member of the Medical Imaging Advisory 1 Panel and in Victoria, a member and

chair of the Continuing Education Committee and member of the then Professional Accreditation and Education Committee. She has recently stepped down as the Radiographer Manager at Austin Health in Melbourne. Carolyn is keen to advance the profession and has a special interest in orthopaedic imaging, decreasing patient dose and increasing patient care.



**Naomi
Gibson**
Vice-President

Naomi is the Vice-President of ASMIRT and the Queensland representative on the ASMIRT Board of Directors. Living and working in regional

Queensland for nearly three decades, Naomi understands the need for effective communication and a high level of engagement within regional Queensland and to its members. As MRI Team Leader, she thrives on managing a diverse workforce, balancing technological innovations with the multiple challenges of a regional setting. As an ASMIRT Board member, Naomi's vision is to work together with regional members and other members across Australia to build a strong network through effective communication.



**Dr Georgia
Halkett**
Honorary Treasurer

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

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



**Natalie
Kidd**
Honorary Secretary

Natalie is the Tasmania representative on the ASMIRT Board of Directors. She is also Board Liaison for the Education Committee. Her clinical role

is Chief Radiation Therapist at Launceston General Hospital. Natalie is passionate about the training and development of radiation therapy staff and students, in conjunction with leading change in the field of radiation therapy.

Leadership



Bronwyn Hilder

Bronwyn is the Immediate Past-President of ASMIRT. She has worked nationally and internationally in both public and private services. Her clinical role is Chief

Radiation Therapist at the WP Holman Clinic at the Royal Hobart Hospital. She has previously been a member and chair of the then Professional Accreditation and Education Board and a member of the Radiation Therapy Advisory Panel. She has presented locally, nationally and internationally, has a research interest in the area of advanced practice for radiation therapists and a focus on providing optimal patient care.



Dr Nigel Anderson

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

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



Rachel Kearvell

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

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



Christopher Dransfield

Christopher is the New South Wales representative on the ASMIRT Board of Directors. In 2012 he was awarded the Nicholas Outterside Medallion for

services to the profession. Christopher is currently on the NSW State Committee and is Co-Board Liaison for the Membership and Advocacy Committee. He was a member and chair of the Rural and Remote Practitioners Advisory Panel for 14 years and Diagnostic Convenor for the national conference in 2002. He currently provides senior locum relief services for government and private agencies nationally. He has a passion for patient focussed care and considers it a privilege to serve our communities.



Sally Kincaid

ASMIRT Chief
Executive Officer



Message from the Chief Executive Officer

What a strange year it was... but as it came to a close I felt as if it really was returning to some sense of normality.

One of the highlights of the year for the Society – and for many members – was the resumption of face-to-face events and most notably the resumption of our annual conference, held in Cairns in May. What a joyous and happy occasion it was. Over 800 delegates joined in the strong scientific program – and made the most of unfettered social events. Most delegates were able to move around unmasked for the first time in over two years, and while there were some cases of COVID-19 as a result it was far from the virus ‘super spreader’ event some had feared – it was just a ‘super’ event all round! At the opening ceremony two Nicholas Outterside Awards were presented to Patrick Eastgate and Carolyn Heyes. Life Memberships were awarded to three former presidents, Bruce Harvey, Gillian Tickall and Tim Way. National Rural Health Commissioner Dr Ruth Stewart gave the keynote address at the opening ceremony, demonstrating a strong understanding and appreciation of the place of medical radiation practitioners in the future of rural health structure.

**There is no other body
who can advocate and fight
for the recognition of the
profession in the same way**

We were also able to facilitate the first face-to-face meeting of the combined committees (since their inception), along with representatives of the reference groups at the conference. A long, busy and very productive day discussing areas of professional interest and potential future direction, which will feed into the ongoing strategic planning of the Society. A similar face-to-face was planned for the branch executives later in the year to discuss issues pertaining to branch membership and engagement.

There were a number of other events – face-to-face and online throughout the year – and the incredible effort put into all these by the

Leadership

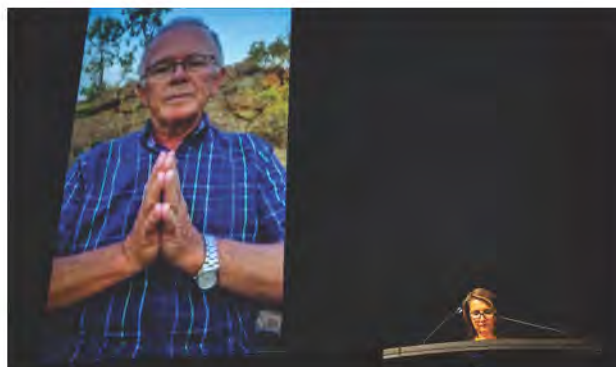
convenors, their committees and branch executives is to be commended. We even managed to create a Masterclass for our members in Western Australia, who had been somewhat 'cut off' from the eastern states through the pandemic; a great chance to reconnect and reaffirm our commitment to a national organisation working for all medical radiation practitioners.

President Carolyn Heyes and I attended the annual conference of the New Zealand Institute of Medical Radiation technology (NZIMRT) in Palmerston North. We have started working much more closely with the NZIMRT on a number of projects. Most of the other major stakeholders in our professional group (ACPSEM, ASA, ASUM and RANZCR) have a combined Australia/New Zealand constitution and presence. Our two organisations are independent of one another, though much of the policy around our work concerns both countries. We have requested their inclusion in the Radiation Oncology Alliance and the Peak Imaging Coalition to ensure that the voice of medical radiation practitioners is united. This collaboration means that the practices and policies that are signed off are consistent with practice for practitioners on both sides of the Tasman.

While we are talking about collaboration, we are extremely lucky in our relationship with the Regulator. Many of the other regulated professions do not have such ready access and open relationships with their regulatory boards, so my thanks go to their Executive Officer Adam Reinhard, Chair of the National Board Cara Miller, the Board and the Accreditation Committee for their positive and collaborative approach. We met twice during the year and held really productive and frank conversations around capabilities, standards and national implications for medical radiation practitioners resulting from the Victorian State Coroner's report into the death of Peta Hickey, among others.

As always, the Society has been involved in a great deal of advocacy on behalf of members. A summary of these projects can be seen in the individual reports from the committees (pages 14-24), whose tireless work throughout the year can never be underestimated. They have also been involved in the development and updating of certification exams, creation of new scholarships and review of a multitude of official projects that elevate and protect the profession. There is no other body who can advocate and fight for the recognition of the profession in the same way.

Member numbers increased slightly during the year, which was gratifying. At the end of the 2021-2022 financial year they stood at 8815. It was particularly encouraging to see student numbers over 2000 - a strong indication of the future strength of the



(Above): Life Member - Bruce Harvey



(Above): Life member - Gillian Tickall (left)

(Above): Life member - Tim Way (left)



(Above): Nicholas Outterside - Patrick Eastgate (left)

(Above): Nicholas Outterside - Carolyn Heyes (left)

organisation. Student committees have worked well and hard throughout the year to bring events and connection to their cohorts, and it was fantastic to be able to meet and host some of the Student Ambassadors at ASMIRT 2022 in Cairns.

We finish the year in a strong financial position, a strong membership position and re-energised branch committees around the country. It just remains for me to thank the Board of Directors for making my job so easy, to the members for your continued support of your professional organisation, and to the staff at the Secretariat who are always here to assist you - and who make all things possible. Our professional standards and CPD team of Min Ku, Tanya Morgan, Alan Malbon and Patricia Fanning; our events and communications team of David Leach, Shane Maria Howell, Anne Romanjuk, Sarah Tormey and Clare Aldham/Jodie Buckley; and our finance and administration team of Bruce Su, Kathleen O'Connor, Sue Elliott and Lucinda Shaw.

Communications

It was a busy and challenging year, with a few changes in the communications team. We also made changes in the delivery of our eNews and Event News, making the decision to email on alternating weeks, allowing us to send dedicated, succinct messaging to over 12,000 recipients each week.

128 campaigns were sent, which included eNews, Event News, surveys, specific branch event invitations, conference communications and more! There were over 700,00 emails sent with a 50.6 percent open rate – a fantastic result. Our eNews open rate was about 52 percent with a click rate of around five percent.

It was gratifying to see growth in all our communications platforms, one of the largest being LinkedIn.

Social media engagement

Platform	2021	2022	Difference +
eNews	12,135	12,541	406
Facebook	8006	8199	193
Twitter	2399	2524	125
Instagram	676	883	207
LinkedIn	1603	2079	476

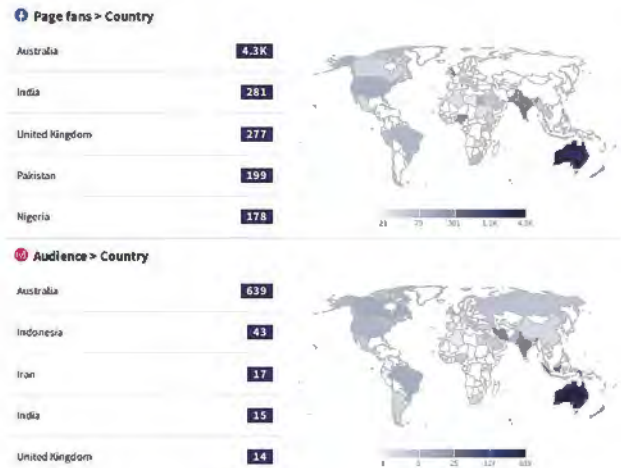


On top of our growth there is also expansion beyond Australia. Below is an example from 2022 of the top 10 countries our eNews reached.

eNews reach in 2022

Country	Opens	Clicks	Shares
Australia	2760	809	0
New Zealand	17	2	0
United Kingdom	16	7	0
United States	13	103	0
Canada	11	1	0
Singapore	8	0	0
Ireland	6	6	0
Korea South	5	4	0
Netherlands	5	0	0
China	4	1	0

Facebook and Instagram also have reach beyond Australia and that we will continue to grow – with the use of relevant hashtags where applicable.



(Above): Facebook and Instagram reach in 2022

The focus for the year ahead is to review our website with the aim of making it more functional. We will also be looking at streamlining the eNews and Event News to ensure the information that people need is front and centre and easy to digest in the best possible format for the person receiving it.

Spectrum

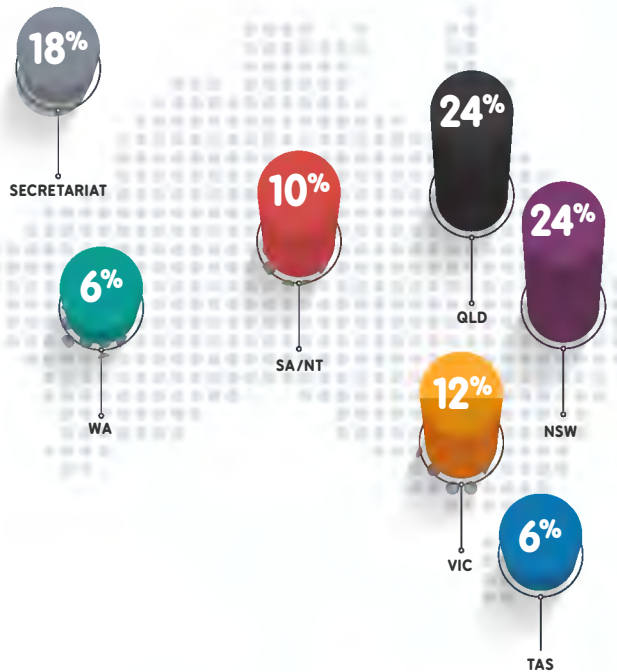
Spectrum continues to be an excellent vehicle for communicating with our members, with an increasing number of article submissions received by members and committees. During the year, *Spectrum* covered a range of issues of importance to medical radiation practitioners, including advocacy, medico-legal, CPD, education, standards, ethics in research, and wellbeing. Our special series included career pathways, forensic imaging and the umbrella series. *Spectrum* also published numerous interviews, reflections, reviews and industry news, including extensive coverage of our annual conference. One of the most popular articles was an interview with two of our radiation therapists (Mary Job and Kate Wildermuth-Watt from Queensland) competing in 'My Kitchen Rules', which was something of a change from their day jobs!



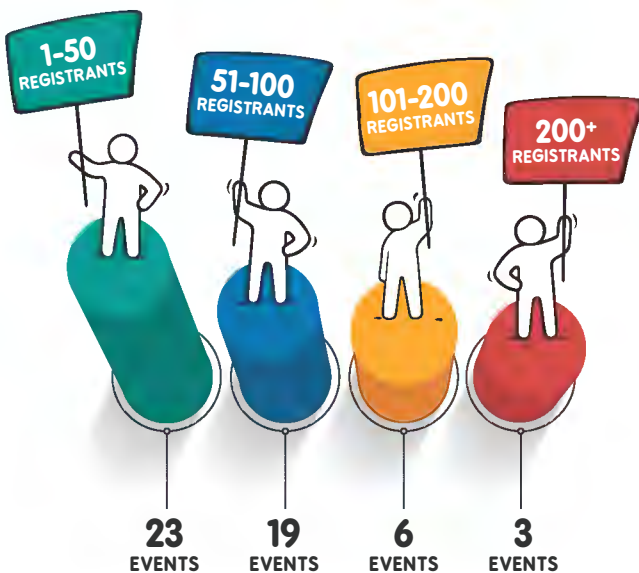
Conferences and Events

The conferences and events team had another successful year as events gradually transitioned back to either in-person or hybrid format, with an almost equal split between events with virtual audiences and those with in-person attendees. The number of events in each state and the number of registrations per event are shown in the figures.

Events per state (includes online events available to all)



Registrations per event



Highlights

The MedRad Forum returned to New South Wales after a six-year hiatus and a new event, the Master Class, made its inaugural appearance in Western Australia.

The ASMIRT 2022 Conference in Cairns had a lively and celebratory atmosphere as attendees came together after years of social and travel restrictions. It offered a great chance to reconnect, network and exchange new ideas.

The Queensland Branch and its associated sub-branches and committees hosted another year of inspiring and informative events, including the Emerging and Future Technologies Seminar, CEC Breast Seminar, Student Paper Night, Christmas in July and the Surfing the Ray Radiation Therapy Weekend.

The South Australia and Northern Territory Branch once again delivered interesting and popular activities, including the Quiz Night, held off-campus for the first time in years, and the Conference Paper Practice Night.

The Western Australia Branch hosted a range of events, including the Assisted Dying Legislation event, which showcased presenters who had key roles in the development of state laws associated with the Assisted Dying Legislation.

The New South Wales RT Educators' Group and Student Committee were back with a year of engaging online events. Topics were diverse and mostly related to current issues that play a key role in patient, practitioner and student care environments. The Image Critique webinar had an exceptionally high number of registrations – 367 students and practitioners.

The Victoria Branch held its Student Paper Day online, with presenters of the Best MI and Best RT papers going on to represent Victoria at ASMIRT 2022, and then take home the RT prize. The CEC delivered another successful webinar, Spotlight on Diversity, addressing how to meet the health care needs of trans young people, those from traditional and modern Indigenous cultures and non-English speaking patients, as well as the diversity in our workforce. Mantra Lorne was the setting for the 2022 Winter Education Weekend with 107 delegates attending over two days. With the rural aspect in mind, attendees also heard about limited X-rays, recovery from the Wye River bushfires and a report from our Rural Placement Award winner.

October saw the paranapple convention centre in Devonport welcome 57 delegates to Tasmania for the Swing into Spring Education Weekend. A brilliant program included combined MI/RT sessions of proffered papers and invited speaker presentations as well as the inclusion of an extremely well received and well-timed Burnout Recovery Workshop.

ASMIRT Fellows

1958 Tyrrell FG
1959 Milne MJ
1961 Fitzsimons C
1961 Fleay RF
1961 Murray JR
1962 Best (Williams) JB
1962 Cook CW
1962 Gibson ML
1962 Green MF
1963 Haining WA
1963 Lorimer D
1965 Jackson KA
1967 Duncan RC
1967 Hayward G
1968 Atkinson R
1968 Ryan GT
1970 Hartley DE
1970 Moore BJ
1970 Wilkinson AR
1971 Quirk JA
1972 Pryor JM
1972 Rowley MR
1972 Young BF
1973 Brown GM
1974 Almond DK
1974 Hanton A
1974 Kan A
1975 Collett KM
1975 Ryan JE
1976 Enright MT
1976 George RP
1976 Ward A
1977 Borrett RJ
1977 Garside AR
1977 Knights AM
1978 Truman GM
1979 Harvey BM
1985 Horrex AN
1985 Morris IT

1986 Cottrell J
1988 Brough PD
1988 Mather MD
1988 Watson E
1989 Balmanno DG
1989 Nuss WJA
1989 Smylie J
1991 Gill M
1991 Verrocchi R
1992 Arozoo EM
1992 Lo LK
1992 Rouse P
1992 Siegmann JW
1992 Tostevin JH
1993 Fricke J
1993 Rowntree PA
1993 Sivaganasundram R
1993 Smith AN
1994 Fung K
1994 Ong TA
1994 Tate JA
1995 Brown GI
1995 Buchanan P
1996 Caruana E
1996 Cummins S
1996 Egan I
1996 Eng T
1996 Foulstone P
1996 Starkoff BA
1996 Vitucci T
1997 Hornby C
1997 Walsh I
1998 Shanahan M
1999 Dixon R
1999 Phillips R
2000 Grant AM
2000 Hatherly K
2000 Obradovic G
2000 Rattray G
2000 Yeomans EJ
2001 Nagle KM
2001 Piyaratna N
2003 Brumby JM
2003 Piotto L

2004 Duffy K
2004 Hopkins M
2005 Miller J
2007 Dobeli KI
2007 Fenton PA
2007 Halkett GK
2007 Perry CD
2007 Wong TA
2008 Davidson R
2008 Middleton M
2010 Hilder B
2010 Holt J
2010 Zelesco M
2011 Owen RJ
2012 Sale CA
2013 Gawthrop JB
2013 Giles EM
2013 Starkey DE
2014 Everitt SJ
2014 Jolley IM
2016 Carmichael MA
2016 Dean J
2016 Merchant SP
2016 Spuur K
2017 Bell L
2017 Squibb K
2017 Thompson N
2021 Anderson N
2021 Brown E
2022 Chau S
2022 Doyle E

Advanced Practitioners

Alison Brown
Mary Job
Don Nocum
Tegan Wilde
Nick Woznitza



Committees
and Panels,
Reference
Groups and
Working
Parties

Overseas Qualifications Assessment Panel

Panel members names are withheld for reasons of confidentiality.

The Overseas Qualifications Assessment Panel received and assessed 122 applications from 1 November 2021 to 31 October 2022 (see Tables). This includes applications from international students completing an Australian program, those requiring a renewal of their skills assessment letters for the purposes of migration, and other applicants wishing to migrate to Australia.

Table 1. Applications accepted by country and modality

Country	Imaging	Ultrasound	Radiation therapy
Australia	46	0	2
Bangladesh	0	1	0
Brazil	0	1	0
Canada	0	2	0
Fiji	2	0	0
India	2	0	0
Ireland	3	2	0
New Zealand	1	4	1
Nigeria	0	1	0
Philippines	2	0	0
Singapore	1	0	0
South Africa	8	5	0
Sri Lanka	1	0	0
United Kingdom	15	4	2
United States	0	1	0
Total	81	21	5

Table 2. Applications rejected by country and modality

Country	Imaging	Ultrasound	Radiation therapy
Belarus	0	1	0
Canada	1	1	0
Hong Kong	0	2	0
India	1	1	0
Iran	0	0	1
Malaysia	1	0	0
Nepal	1	0	0
South Africa	2	0	0
Sri Lanka	1	0	0
United Kingdom	0	1	1
Total	7	6	2

Two appeals were submitted during this period. The first medical imaging appeal was rejected, and the second is currently under review. Applicants can provide additional documentation to support their applications instead of via the appeal route.

A body of work to benchmark Australian university programs is currently underway to ensure overseas programs meet the Australian standards.

The Panel continue to assess and manage overseas assessment applications efficiently, streamlined by the implementation of an online platform that promotes ease of access for assessors. The Panel also welcomed two new diagnostic imaging assessors as part of ASMIRT's succession planning strategy. Training was undertaken in person in early October.

The Panel continue to monitor and offer feedback to the Department of Home Affairs relating to visa process changes and the Temporary Skills Shortage Visa implementation, introduced in March 2018.

Communications, newsletters and workshops continue to be regularly scheduled and run between the Australian Government Department of Education, Skills & Employment (DESE) and multiple Assessing Authorities, as part of a program of quality assurance and information

Committees and Panels, Reference Groups and Working Parties

sharing events. ASMIRT has been able to engage and collaborate with the Department of Home Affairs and other Assessing Authorities with transparency, robust engagement and feedback occurring between all parties.

An Assessing Authorities Quality Assurance (AAQA) workshop was held in early December, with the ASMIRT Professional Standards Manager presenting as part of the panel, relating to effects of the COVID-19 pandemic on Assessing Authority timelines.

In January 2022, DESE held its first meeting relating to the newly initiated Migrant Skills Incentives to fill skills shortages and assist in the economic recovery from the COVID-19 pandemic. (The aim is to provide opportunities to migrants currently onshore in Australia, the ability to join the workforce and address skills shortages.)

The incentive program is designed to enable migrants access to free, fast-tracked skills assessments, free employability assessments and subsidised training to improve their employment arrangements. The desired outcome is to assist Australian businesses and industries address workforce pressures. There are three pilot incentives:

- Incentive 1 – Faster migrant skills assessments (28 February – June 2022)
- Incentive 2 – Skills assessments opportunities for migrants (refugee/humanitarian) (28 February – June 2023)
- Incentive 3 – Employability assessments (September 2022 – June 2023).

ASMIRT submitted requests for tenders for all three incentives and was successful for the priority occupation of sonography (ANZSCO code 251214). Further information can be found at www.dewr.gov.au/skills-support-individuals/skills-assessment-pilots.

DESE-AAQA workshops were held in April, wherein Panel members undertook training on evaluating non-original documents, as part of Assessing Authorities skills training. Workshops were also held in May and related to three key topics:

- Being responsive to employer needs: discussion of the National Workforce Strategy 2022-27
- Unlocking a hidden resource: discussion of the 2022-23 Migration Program and Humanitarian Program
- Ensuing employability: discussing how employers can assist applicants with 'soft skills' and gain local knowledge.

In June 2022, the Australian Bureau of Statistics released two documents: Skills in ANZSCO Options Paper, and ANZSCO Maintenance Strategy, for discussion and feedback via DESE-AAQA.

With this continued engagement process the Panel is apprised, updated and able to offer valuable input across the national assessing authorities forum, with direct feedback to the DESE.

Panel meetings and supplementary meetings continue to be held in the virtual environment. These provide opportunities for the Panel to discuss complex applications and resolve identified issues with individual assessments efficiently.

I would like to acknowledge the Panel's ongoing support during a challenging year, and I look forward to developing new networking opportunities in 2023.

Chair

Overseas Qualifications Assessment Panel

Editorial Review Board

This report highlights the activities and achievements of the *Journal of Medical Radiation Sciences* from November 2021 to October 2022. The Editorial Review Board and International Advisory Panel members are listed in the Tables below.

Members of the Editorial Review Board

Board member	Professional practice
Cherry Agustin (Editor-in-Chief)	RT
Ann Poulos (Deputy Editor)	MI
Paul Kane (Deputy Editor)	RT
Associate editors	Professional practice
Linda Bell	RT
Elizabeth Brown	RT
Jillian Clarke	MI – sonography
James Crowhurst	MI
Karen Dobeli	MI
Gay Dungey	RT
Rhys Fitzgerald	RT
James Hayes	MI
Peter Kench	MI – nuclear medicine
Kellie Knight	RT (United States)
Stephen Knight	MI
Michael Neep	MI
Dean Paterson	RT
Daniel Pham	RT (United States)
Tristan Reddan	MI – sonography
Warren Reed	MI
Kelly Spuur	MI
James Stanley	Biostatistics (New Zealand)
Zhonghua Sun	MI
Andrea Thompson	MI
Sylvia Van Dyk	RT
Nick Woznitza	MI (United Kingdom)

Members of the Editorial Review Board (continued)

Review Board members	Professional practice
Patrick Brennan	MI
Rob Davidson	MI
Georgia Halkett	RT
Sarah Lewis	MI
News and online editors	Professional practice
Darien Montgomerie	RT
Adam Westerink	MI

Members of the International Advisory Panel

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

The annual publisher's report from Wiley – which contains the top downloaded and cited articles – was submitted to the Board. A 'JMRS 2021 top 10' article was subsequently published in the December 2022 issue of *Spectrum* magazine.

The Editorial Review Board had a virtual and face-to-face hybrid meeting in August 2022 with representatives from ASMIRT, the New Zealand Institute of Medical Radiation Technology and Wiley. Some of the items discussed were strategies in response to feedback from authors, reviewers and editors; diversity, equity and inclusion; and journal marketing, including the tenth anniversary of JMRS in 2023.

Citation, readership and Altmetric

JMRS will be included in the Impact Factor Journal Citation Report of Clarivate™ from 2023, the same year that we celebrate 100 years since the start of our Society and 10 years since the first JMRS publication. Congratulations to all medical radiation practitioners for this significant achievement.

The JMRS has a calculated 2021 Impact Factor of 1.932, a Journal Citation Indicator score of 0.45 and is ranked 125 out of the 200 radiology, nuclear medicine and medical imaging journals in the Clarivate™ Impact Factor journal list. The 2021 SCImago Journal Rank indicator is 0.35 and positioned at quartile Q3 or top 50 to 75 percent of the radiological and ultrasound technology journals. SCImago Journal Rank is a weighted citation score that combines the number of citations and prestige of the citing journal. The number of full text downloads continues to rise with over 500,000 downloads in 2021. Readers are predominantly from the United States, Australia, the United Kingdom and China.

JMRS Special Issues

Articles of similar topics were compiled and published as Virtual Issues in 2022. They were:

- Leading the Way – Advanced Practice in Medical Radiation Practice (November 2021)
- Forever Learning – Education in MRS (September 2022)
- Medical Ultrasound Awareness Month (October 2022).

The Special Issue, Horizon Scanning: the impact of technology and integration on the MRS profession, will be published in April 2023.

Peer review and continuing professional development

There was a 27.9 percent increase in the number of submissions from 2020 to 2021. There were 156 manuscripts submitted in 2021 and 45 percent were accepted for publication. The median days to review completion was 16 days, in 2021. Thank you to the peer reviewers, listed in the December 2022 Issue, for your support and commitment.

Members of the Board value continuing professional development. In 2022, a publications workshop was held at the ASMIRT 2022 Conference in Cairns. Virtual publications workshops are scheduled for 2023, in addition to the publications workshop at the ASMIRT 2023 Conference. Plans are also underway to create a reviewer training program. Several JMRS editors completed the medical editor course in October.

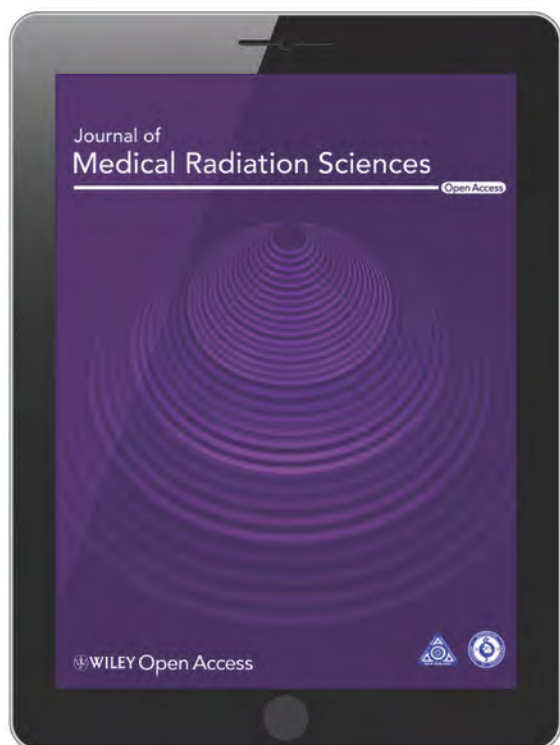
In 2022, there were updates made to the JMRS author guidelines, including the option to submit a manuscript in any style at first submission and having no limit to the number of references (however the word limit still applies).

Acknowledgements

Thank you to the members of the Editorial Review Board, International Advisory Panel, deputy editors, associate editors and news and online editors for your commitment to producing a quality journal. Thank you to members of the ASMIRT Research Committee for their commitment to produce Virtual Issues. And, as always, thank you to the ASMIRT Secretariat for their ongoing support.

Cherry Agustin

Editor-in-Chief, JMRS



(Above): JMRS online platform

Fellowship Panel

Panel members

Goran Obradovic (Warden)

Georgia Halkett (ASMIRT Board Liaison)

Diagnostic Radiography Panel members

Nadine Thompson

Kelly Spuur

Radiation Therapy Panel members

Jenna Dean

Greg Rattray

Charlotte Sale

The Fellowship Panel wish to acknowledge and thank Past Warden Madeleine Shanahan for undertaking the role until the end of 2021.

Two successful candidates, Edel Doyle and Shayne Chau, were awarded their Fellowship at the ASMIRT 2022 Conference in Cairns. It was the Panel's first face-to-face conference for over two years, and it was a pleasure to see so many delegates in attendance. It was also a great opportunity to remind members what Fellowship is about, demonstrate the Fellowship journey to those who may already be eligible, and to discuss how rewarding and satisfying the achievement of Fellowship is. The Panel is there to assist candidates on their Fellowship journey and Panel members are excited to be able to assist those who are considering this process.

A Fellowship session and assignment for the Cairns conference focussed on 'the concept of burnout and resilience in health care'. This was supported by the plenary session keynote by Alison Coughlan that focussed on The Resilience Revolution: transforming personal, team and organisational wellbeing at work. The Panel was delighted that four members completed the 2022 Fellowship assignment and would like to thank the various assessors and mentors for their contribution.

It is pleasing to see that quite a few members have contacted the warden regarding Fellowship requirements. Feedback was provided to prospective submissions in 2022 highlighting the need for a shorter version (precis) of the Fellowship guidelines. The Panel has been working on this document and hope to have it made available to members soon through the members' resource area on the ASMIRT website.

A full list of ASMIRT Fellows can be found on page 12 of this report.

I would like to thank all the members of the Panel for their support in 2022 and we look forward to a fantastic 2023.

Goran Obradovic

Warden, Fellowship Panel

Research Committee

Committee members

Elizabeth Brown (Chair)

Yolanda Surjan (Deputy Chair)

Giovanni Mandarano

Goran Obradovic

Michael Neep

Rachael Beldham-Collins

Rhys Fitzgerald

Katrina Smith

Dr Vikneswary Batumalai

Georgia Williams

Georgia Halkett (ASMIRT Board Liaison)

Tanya Morgan (ASMIRT Staff Liaison)

I would like to start by acknowledging and thanking the members of the Research Committee and our Board and Liaisons for their tireless efforts throughout the year. What has been achieved, as outlined in this report, would not be possible without their passion to see our members engage in research.

This year saw a change in the leadership of the Committee with Nigel Anderson taking up a role on the Board of Directors and transferring to the Membership and Advocacy Committee as a Board Liaison. We sincerely thank Nigel for his hard work and drive as the inaugural Chair of the Research Committee. The Committee was able to achieve great things under his leadership, which places it on a great path for the years to come. We wish Nigel all the best in his new role.

I am honoured to step into the role of Chair and hope that I can fill the big shoes Nigel has left. I am pleased to welcome Yolanda Surjan as Deputy Chair and I look forward to working alongside her.

We also thank Gagandeep Kaur for her contributions to the Committee since its inception and for her valuable input into the many initiatives of the Committee.

We continue to collaborate with and support our Society's journal, the *Journal of Medical Radiation Sciences*, with the contribution of three Virtual Issues in 2021-2022:

- Leading the Way - Advanced Practice in Medical Radiation Practice (November 2021)
- Forever Learning - Education in MRS (September 2022)

- Medical Ultrasound Awareness Month (October 2022).

Our Committee members have been active this year in convening and contributing to conferences and seminars in their own states and nationally, including MedRad Forum 2022 and the ASMIRT 2022 workshop, How to Successfully Publish in a Peer Reviewed Journal.

2022 also saw the presentation and publication of the Research Demographics Survey undertaken by the Committee in late 2020. It is hoped that the results of this survey and recommendations stemming from it will help guide the direction of targeted strategies the Committee can work towards to better support the membership in their research endeavours.

The Committee has continued its work on many research building initiatives over the period, including:

- Review and comment on numerous consultation documents - NHMRC: Investigating Clinician Researcher Career Pathways (Report); Cancer Australia: Australian Cancer Plan; ACPSEM: Position Paper on the Safety of Magnetic Resonance Linear Accelerators
- Development of the Abstract Submission and Ethics Approval process and guidelines. A clear statement regarding ethical approval for all ASMIRT abstract submissions was discussed, created and published in *Spectrum*
- The provision of information to populate the Research Resources portal within the ASMIRT member platform. Plans for mentorship, statistical, presentation and publication support are ongoing, and it is hoped this will come online during 2023
- In-person meeting at the ASMIRT 2022 Conference. The Committee met to discuss the ASMIRT Strategic Plan and how the Committee can support the Society in achieving these goals. We will continue to work with the Board in creating measurable KPIs to support the conduct of research in the profession and build capacity across the country.

Two research scholarships were awarded in 2021: the Research Scholarship to Dr Yobelli Jimenez and the Novice Researcher Scholarship to Mikaela Doig. We wish both Yobelli and Mikaela the best in their respective research and we look forward to hearing about the results in years to come.

The Committee is excited for what 2023 will bring as we continually strive to encourage innovation, support translation of research into practice and promote evidence-based research to improve patient care and outcomes.

Elizabeth Brown

Chair, Research Committee

Education Committee

Committee members

Elizabeth Phillips (Chair)

Anthony Buxton (Deputy Chair)

Bernadette Byrne

Clare Herbert

Nicholas Maddock

Eileen Giles

Kim Hayward

Natalie Kidd (ASMIRT Board Liaison)

Tanya Morgan (ASMIRT Staff Liaison)

The Education Committee found the reporting year to have similar challenges to that of our colleagues; the COVID-19 pandemic is still influencing us in both our professional and personal lives with communication methods being affected and influenced by the coronavirus.

ASMIRT held its national conference in Cairns in May, its first face-to-face conference since 2019. I was grateful that the Committee was able to attend and meet in person, as most of our meetings and communication remain on Zoom and via email. The in-person Committee meeting enabled discussions on the Society's Strategic Plan.

The Committee is working with the Board and various reference groups with regards to standardisation of all ASMIRT Certifications and is providing specific strategic guidance to the reference groups, working parties and pop-up teams to help improve the profession for all ASMIRT members. Committee members have also met with the Computed Tomography Reference Group and the Breast Imaging Reference Group to assist with issues or concerns.

As Chair of the Committee, I have attended regular meetings with other committee chairs to discuss items and projects that are across several committees. This regular communication has assisted with and maintained cross-pollination of knowledge and experience within ASMIRT.

Projects the Committee has undertaken include:

- Postgraduate Study Scholarship – a new scholarship introduced by the Committee. First round applications closed October 2022
- CT Certification review
- Magnetic Resonance in Radiation Therapy Certification – syllabus reviewed, pilot to occur in November 2022.

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

- ASMIRT Postgraduate Study Scholarship proposal
- ASMIRT submission – Victorian Coronial Inquest, P Hickey
- ASMIRT email submission – Radiography standard in India
- MRPBA – 2021 preliminary consultation on revised supervised practice arrangements for medical radiation practitioners
- MRPBA/Aphra – Statement on artificial intelligence in medical radiation practice
- Aphra – Draft guidelines for risk-based accreditation decision making
- Aphra – 2020/21 annual accreditation activity snapshot report
- Aphra – English language standards public consultation
- JMRS CPD – Q&A
 - March Issue Radiation Therapy
 - March Issue Medical Imaging
 - June Issue Radiation Therapy
 - June Issue Medical Imaging
 - September Issue Radiation Therapy
 - December Issue Medical Imaging
 - December Issue Radiation Therapy
- Cancer Australia – Australian Cancer Plan
- ACPSEM – Position paper on the safety of magnetic resonance linear accelerators
- ACPSEM – Radiation Oncology Medical Physicist Curriculum CTG consultation document
- ACPSEM – Diagnostic imaging medical physicist curriculum review.

The Committee has made other contributions to our profession throughout the year, including:

- Bernadette Byrne – Teaching on the Run workshop at ASMIRT 2022
- Anthony Buxton and Nicholas Maddock – *Spectrum* ASMIRT Certification articles:
 - Assessment strategies undertaken (July 2022)
 - Exam question creation guidelines (September 2022)
- Presented, adjudicated and chaired sessions at both national and state conferences and events
- Provided an independent peer review of the continuing professional development Q&A prior to publication in JMRS.

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

Elizabeth Phillips

Chair, Education Committee

Professional Standards Committee

Committee members

Andrew Kilgour (Chair)

Christopher Hicks (Deputy Chair)

Clare McLaren

Lisa Roberts

Karen Thomas

Sarah Hauville

Edel Doyle

Rachel Kearvell (ASMIRT Board Liaison)

Christopher Dransfield (ASMIRT Board Liaison)

Min Ku (ASMIRT Staff Liaison)

Although 2022 saw life begin to return to normal in a range of settings, there are still hangovers from the stresses of the COVID-19 pandemic that are affecting us all. This extrapolates to Committee work in a number of contexts, but I would like to thank members of the Professional Standards Committee for their ongoing commitment despite the difficulties faced.

I have a hard act to follow in taking over the role of Committee Chair from Lisa Roberts, and I would like to thank Lisa for setting the bar for leadership of the Committee at a high level. This year, we saw the review of the Code of Conduct and a finalised Professional Standards document. This is an exceptional piece of work and has now been published on the ASMIRT website. I would like to thank Lisa, Edel Doyle and Christopher Hicks for their substantive work on this document.

In the 2021 Annual Report, a medical imaging staffing model was mentioned. Although such a model has existed for radiation therapy for many years, medical imaging is a far more complex undertaking. While radiation therapy is somewhat consistent in what takes place across different sites, medical imaging has many variations, with the patient and modality mix widely variant across public and private, and regional and metropolitan locations. Thus, to kickstart the process, the Committee decided to start with public radiology departments and is currently seeking interest from chiefs and managers of such departments. It has been suggested that this would also be a good research project to undertake, given the

opportunity to publish this once the project has concluded. Therefore, a draft ethics application has also been developed to that end.

Committee members have contributed their expertise to 20 external consultation documents this year. Additionally, members also contributed to a review of the new MRI in Radiation Therapy syllabus and were excited to see this new certification go live after the pilot in November.

At the ASMIRT 2022 Conference in Cairns, the Board met with the various committees, and after a brainstorming session and individual meetings with the Committee members present, a strategic plan for the committees was developed. The Committee has set ourselves the task of deciding how we can meet the Board's goals for us to achieve, and then implementing these plans. I believe we have a challenging but exciting year ahead, and a great Committee to achieve our targets.

Dr Andrew Kilgour

Chair, Professional Standards Committee

Membership and Advocacy Committee

Committee members

Adam Westerink (Chair)

Sarah-Jane Attard

Hannah Hickling

Beatrice Tanner

Millie Chen

Jenna Dean

Debra Lee

Magdalena Dolic

David Leach (ASMIRT Staff Liaison)

The Membership and Advocacy Committee is poised for a productive and progressive 2023, thanks to the important groundwork completed in 2022.

A central focus for the reporting period was planning the member survey that will be sent out to ASMIRT members in 2023. The Committee members identified a number of important areas in the membership and advocacy domains where it was key to understand the opinions and preferences of the members. Having this information available is crucial in tailoring a 2023 Committee action plan that aligns with the voice of the members.

The Committee continued to provide articles and other items that could be of interest to members for inclusion in the Society's eNews, which has been particularly helpful over the past year. Covering a range of issues and from a variety of sources the information provided has helped introduce members to resources such as AuntMinnie and Radiopedia. We will continue to horizon scan for other materials and resources that will be of benefit to members in the provision of care to our patients.

There were a number of ideas and projects that were proposed during the year, and the next 12 months should see these materialise into something more tangible for our members and profession.

Activities the Committee completed in the reporting period include:

- a review of ASMIRT award guidelines
- a review of ASMIRT scholarships and grants
- advocacy scoping exercise across professional bodies.

I would like to thank the members of the Committee for their contributions throughout the year. I am looking forward to a productive and progressive 2023.

Adam Westerink

Chair, Membership and Advocacy Committee

Reference Groups and Working Parties

This report details the work of ASMIRT's reference groups and working parties over the reporting period. ASMIRT acknowledges that our members experienced another year of turmoil in the healthcare system, however they have continued to demonstrate exceptional care for their patients. ASMIRT expresses their gratitude to our many volunteers for the provision of their expertise and advice, their significant input to many consultation and position papers during the year, and for sharing their valuable time and commitment to progress the profession.

As with other years, there has been a range of different topics and submissions addressing and challenging the changing landscape of health care. The range of consultation documents that our groups have contributed to is shown in the Table. ASMIRT's advocacy is continuing, as we are recognised as a contributing stakeholder.

The following are some of the highlights our groups and working parties have engaged in throughout the year.

Breast Imaging Reference Group

The Group had a busy year reviewing mammography applications from overseas, undertaking clinical pathways processes with return-to-work mammographers, and the credentialing of the academic and clinical modules that lead to a Certificate of Mammographic Practice.

CCPM/CMP (from 1 July) issues and renewals 1 November 2021 to 31 October 2022

State	Renewal	New	Clinical pathways	GDM*	Total
NSW	38	6	0	0	44
Qld	59	5	0	0	64
Vic	62	10	0	0	72
Tas	22	2	0	0	4
ACT	2	0	0	0	2
SA	38	6	2	0	46
WA	17	3	0	0	20
Other	6	0	0	0	6

*Graduate Diploma in Mammography
The total number of applications seen this year was 258.

Radiation Therapy Reference Group

Radiation therapy consultation papers were not as prolific this year and, as such, there were less documents to review. The Group has revised the Varian Award matrix and have used this to make recommendations to the Board regarding the Varian Award nominations. The Group is currently working on a project to be approved by the Board with regards to radiation therapy scope of practice in adaptive radiation therapy.

Computed Tomography Reference Group

The Group has been focussing their efforts on the improvement of computed tomography practice in Australia. They are currently working on a proposal to the Board regarding the identification of perceived gaps in knowledge of medical radiation science practitioners in computed tomography practising in Australia.

Rural and Remote Reference Group

As with the other reference groups, the Rural and Remote Reference Group has contributed to many pertinent consultation papers. The Group has reviewed and awarded the Rural Clinical Placement Grant applications for both semesters 1 and 2. A total of 20 from 25 applications were awarded for the 2022 year to students enrolled from the following universities: Queensland University of Technology, Monash University, RMIT University, Charles Sturt University, Curtin University, Newcastle University, University of Canberra, Deakin University and The University of Sydney. The Group continue to encourage students to apply for this grant when undertaking rural and remote placements.

Advanced Practice Reference Group

The Group met twice during the year over Zoom. Discussions have focussed on the direction of advanced practice, revision of the ASMIRT Advanced Practitioner Pathway documents, recertification processes and development of the advanced practitioner in Australia. One application for advanced practitioner was received.

Particle Therapy Reference Group

The Group had a fruitful year with meetings conducted bi-monthly to keep abreast of the national and international scene. The Group previously reviewed training and education requirements for practitioners in particle therapy and have commenced development of content in this area. The Group is currently working on a Particle Therapy Issue for JMRS and focussing on the upcoming 2023 ASMIRT Conference. Three new members commenced with the group as of 2022, with the departure of two members.

Committees and Panels, Reference Groups and Working Parties

Ergonomics Working Party

The Party has completed the year obtaining ethics for their project to survey medical radiation practitioners in Australia about occupational health and safety in their workplaces. The survey closed in mid-November and focus groups will be conducted after that time. The Party intends to have this project completed mid-2023 with presentations and recommendations to follow.

MR-linac Staffing Working Party

The Party was formed to develop the scope of practice document regarding the staffing requirements and the role of the radiation therapist in the MRI-linac environment. Three meetings have occurred so far, with a draft document being formulated.

Indigenous Working Party

The Party met once in the year to discuss thoughts and ideas on how to progress resources to assist practitioners gain a working knowledge of factors that contribute to and influence the health and wellbeing of Aboriginal and Torres Strait Islander Peoples.

Reference group and working party contributions to consultations 2021 to 2022

Group/Party	Contributions
Australian Government Health Policy Analysis	Allied health workforce data – gap analysis
Ahpra	Risk-based accreditation decision-making English language skills
ASUM	Obstetric communication guidelines – endorsement request
ACPSEM	Position paper on the safety of magnetic resonance linear accelerators – open for review Radiation oncology medical physicist curriculum Diagnostic imaging medical physicist curriculum
ACSQHC	Diagnostic imaging safety and quality issues and accreditation model Diagnostic imaging standards
AHPA	Ngayubah Gadon consensus statement and guiding paper – draft
AAQA	Changes to the ANZSCO code
Cancer Council	Optimal Care Pathway – neuroendocrine tumours

Reference group and working party contributions to consultations 2021 to 2022 (continued)

Group/Party	Contributions
Cancer Australia	Low-dose CT technical parameters protocol
Cooperative Trials Group for Neuro-Oncology	Australian cancer plan
DIAC	Supervision requirements for nuclear medicine diagnostic imaging services under Medicare
DIMSAC	Proposed pelvic MRI item for investigation of subfertility
Government of South Australia	Gastroenterology clinical prioritisation criteria Radiation consultation
MSAC application 1702	Abdominal magnetic resonance imaging for rare genetic conditions associated with increased risk of renal tumours
MSAC application 1713	Cardiac MRI in the diagnosis of myocarditis
MRPBA	Statement on artificial intelligence
Member enquiry	Email regarding radiography practice (India)
Newspaper article	Gaming against cancer
Professions Reference Group	Feedback on annual accreditation activity snapshot report
Queensland Health	Prescribed infringement offences consultation
RANZCR	Consultation invitation – specialty recognition for interventional radiology and interventional neuroradiology
RAINS	Pharmacology course
SIRA	New South Wales workers compensation
Tasmania Health	Senate terms of reference and operational framework

AHPA = Allied Health Professionals Association; Ahpra = Australian Health Practitioner Regulation Agency; ACSQHC = Australian Commission on Safety and Quality in Health Care; ACPSEM = Australasian College of Physical Scientists and Engineers in Medicine; ASUM = Australasian Society for Ultrasound in Medicine; AAQA = Australian Skills Quality Authority; ANZSCO = Australian and New Zealand Standard Classification of Occupations; DIAC = Diagnostic Imaging Advisory Committee; DIMSAC = Diagnostic Imaging Medical Services Advisory Committee; MRPBA = Medical Radiation Practice Board of Australia; State Insurance Regulatory Authority; MSAC = Medical Services Advisory Committee; RAINS = Rural Alliance in Nuclear Scintigraphy; RANZCR = Royal Australian And New Zealand College of Radiology; SIRA = State Insurance Regulatory Authority.



Statutory Report

Directors' Report

The Directors present this report on the entity for the financial year ended 31 October 2022. The following people were Directors and Officers of the Company at any time during the year. Our mission, objectives and strategies are outlined on page 2 of this report.

Carolyn Heyes	President
Naomi Gibson	Vice-President
Dr Georgia Halkett	Honorary Treasurer
Natalie Kidd	Honorary Secretary
Bronwyn Hilder	Immediate Past-President
Christopher Dransfield	Board Member
Rachel Kearvell	Board Member
Dr Nigel Anderson	Board Member

Board meetings

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

Board meeting attendance 1 December 2021 to 31 October 2022

Board Director	DEC 2021	FEB 2022	MAR 2022	APR 2022	MAY 2022	JUL 2022	AUG 2022	OCT 2022	Eligible	Attended
Nigel Anderson	NA	NA	NA	NA	✓	✓	✓	✓	4	4
Shayne Chau	✓	✓	✓	✓	✓	NA	NA	NA	5	5
Christopher Dransfield	✓	✓	✓	Apology	✓	✓	✓	✓	8	7
Naomi Gibson	✓	✓	✓	✓	✓	✓	✓	✓	8	8
Georgia Halkett	✓	✓	✓	✓	✓	✓	✓	✓	8	8
Carolyn Heyes	Apology	✓	✓	✓	✓	✓	✓	✓	8	7
Bronwyn Hilder	✓	✓	✓	✓	✓	✓	✓	✓	8	8
Rachel Kearvell	NA	NA	NA	NA	✓	✓	✓	✓	4	4
Natalie Kidd	✓	✓	✓	✓	✓	✓	✓	✓	8	8

Review of operations

Refer to the Chief Executive Officer's report for commentary. The total comprehensive income/ (loss) for the year was \$366,083 profit (2021 profit: \$2,874,609).

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 29.

After balance date events

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

Likely developments

The likely developments in the operations of the Society and the expected results of those operations in financial years subsequent to the financial year ended 31 October 2022 are as outlined in the Chief Executive Officer's report.

Performance measures

Membership at 31 October 2022

Total membership	8815
Resignations and removals	1197
Admissions and re-admissions	1131

Members guarantee

The Society is limited by guarantee. If it is wound up the Constitution states that each active (financial) member is required to contribute a maximum of the unpaid amount of their membership, each, towards any outstanding obligations of the Society. At 31 October 2022 the number of active (financial) members was 6811.

Finance

The Society's profit from ordinary activities for the year amounted to \$652,529 (2021 profit: \$2,518,723).



Indemnification of Officers and Auditors

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

The Society has not otherwise, during or since the financial year, indemnified or agreed to indemnify an officer or auditor of the 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 Section 298(2) of the *Corporations Act 2001*.

A handwritten signature in black ink, appearing to read 'C. Heyes'.

Carolyn Heyes
President

A handwritten signature in black ink, appearing to read 'Georgia Halkett'.

Georgia Halkett
Honorary Treasurer

Melbourne 25 February 2023




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

I declare that, to the best of my knowledge and belief, during the year ended 31 October 2022 there have been:

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


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


C. L. Sweeney
Director
Melbourne, 1 March 2023

Statement of profit or loss and other comprehensive income for the year ended 31 October 2022

	Note	2022 \$	2021 \$
Revenue from continuing operations			
Membership subscriptions		3,371,302	3,100,254
Rendering of services		636,665	682,285
Donation		-	1,595,263
Conference revenue	15	746,853	397,600
Finance revenue		<u>80,716</u>	<u>22,600</u>
Total revenue	4(a)	4,835,536	5,798,002
Expenses from continuing operations			
Conference expense	15	(632,025)	(266,891)
Employee benefits expense	4(b)	(1,530,159)	(1,387,415)
Depreciation and amortisation expense	4(c)	(90,952)	(100,027)
Publication expense		(423,987)	(393,264)
Printing and stationery expense		(8,358)	(11,041)
Board and panel expenses		(212,414)	(2,197)
Insurance		(333,869)	(329,045)
Seminar and social expenses		(92,404)	(51,973)
Computer – consumables		(203,033)	(206,408)
Telephone		(17,497)	(16,824)
Bank charges		(11,044)	(6,213)
Travelling expenses		(29,965)	(582)
Postage		(5,028)	(8,072)
Other expenses	4(d)	(592,274)	(499,328)
Total expenses		(4,183,008)	(3,279,280)
Surplus / (loss) before income tax		<u>652,529</u>	<u>2,518,723</u>
Income tax expense	5	-	-
Surplus / (loss) after income tax	14	<u>652,529</u>	<u>2,518,723</u>
Other comprehensive income			
Items that will be reclassified subsequently to profit or loss			
Gain / (loss) on fair value movements on investments held at FVOCI		<u>(286,446)</u>	<u>355,886</u>
Other comprehensive income for the year		(286,446)	355,886
Total comprehensive income / (loss) for the year		<u>366,083</u>	<u>2,874,609</u>
Total comprehensive income / (loss) attributable to the members of the entity		366,083	2,874,609

Note: The accompanying notes form part of these financial statements.

Statement of financial position at 31 October 2022

	Note	2022 \$	2021 (Restated) \$
Assets			
Current assets			
Cash and cash equivalents	6	5,284,672	4,706,784
Trade and other receivables	7	5,013	23,037
Other assets	8	197,651	52,529
Financial investments	9	<u>1,680,148</u>	<u>1,613,392</u>
Total current assets		<u>7,167,484</u>	<u>6,395,742</u>
Non-current assets			
Financial investments	9	2,973,187	3,259,633
Property, plant and equipment	10	1,727,442	1,784,210
Intangibles	10	17,379	44,748
Total non-current assets		<u>4,718,008</u>	<u>5,088,591</u>
Total assets		<u>11,885,490</u>	<u>11,484,333</u>
Liabilities			
Current liabilities			
Trade and other payables	11	207,814	163,162
Provisions	12	322,294	302,708
Other liabilities	13	1,817,694	1,842,511
Total current liabilities		<u>2,347,802</u>	<u>2,308,380</u>
Non-current liabilities			
Provisions	12	<u>22,896</u>	<u>27,241</u>
Total non-current liabilities		<u>22,896</u>	<u>27,241</u>
Total liabilities		<u>2,370,697</u>	<u>2,335,621</u>
Net assets		<u>9,514,795</u>	<u>9,148,711</u>
Equity			
Reserves	14	965,565	1,218,515
Retained surplus	14	<u>8,549,230</u>	<u>7,930,197</u>
Total equity		<u>9,514,795</u>	<u>9,148,711</u>

Note: The accompanying notes form part of these financial statements.

Statement of changes in equity for the year ended 31 October 2022

	Retained surplus \$	Special purpose funds \$	Share revaluation reserve \$	Education fund reserve \$	Total \$
Balance at 31 October 2020	<u>5,248,227</u>	<u>627,724</u>	<u>98,152</u>	<u>100,000</u>	<u>6,074,103</u>
Prior year adjustment – retained surplus	200,000	-	-	-	200,000
Balance at 31 October 2020 (Restated) Note 1(r)	<u>5,448,227</u>	<u>627,724</u>	<u>98,152</u>	<u>100,000</u>	<u>6,274,103</u>
Surplus from operations	2,518,723	-	-	-	2,518,723
Revaluation increment / (decrement)	-	-	355,886	-	355,886
Transfers to reserves	<u>(36,753)</u>	<u>36,753</u>	<u>-</u>	<u>-</u>	<u>-</u>
Balance at 31 October 2021 (Restated) Note 1(r)	<u>7,930,197</u>	<u>664,477</u>	<u>454,038</u>	<u>100,000</u>	<u>9,148,713</u>
Surplus from operations	652,529	-	-	-	652,529
Revaluation increment / (decrement)	-	-	(286,446)	-	(286,446)
Transfers to reserves	<u>(33,495)</u>	<u>33,495</u>	<u>-</u>	<u>-</u>	<u>-</u>
Balance at 31 October 2022	<u>8,549,231</u>	<u>697,972</u>	<u>167,592</u>	<u>100,000</u>	<u>9,514,796</u>

Note: The accompanying notes form part of these financial statements.

Statement of cashflows for the year ended 31 October 2022

	Note	2022 \$	2021 \$
Cashflows from operating activities			
Receipts from customers and members		5,223,510	4,219,277
Donation		-	1,595,263
Payments to suppliers and employees		(4,594,926)	(3,527,792)
Interest received	4(a)	80,716	22,600
Payments for finance costs		(57,839)	-
Net cashflows from operating activities		<u>651,461</u>	<u>2,309,349</u>
Cashflows from investing activities			
Payments for investments	9	(66,758)	(1,613,392)
Purchase of property, plant and equipment	10	(6,815)	(22,926)
Payments for intangible assets	10	-	(40,761)
Net cashflows used in investing activities		<u>(73,573)</u>	<u>(1,677,079)</u>
Net increase/(decrease) in cash and cash equivalents		577,888	632,270
Cash and cash equivalents at beginning of year		<u>4,706,784</u>	<u>4,074,514</u>
Cash and cash equivalents at end of year	6	<u><u>5,284,672</u></u>	<u><u>4,706,784</u></u>

Note: The accompanying notes form part of these financial statements.

Notes to the financial statements for the year ended 31 October 2022

1. Corporate information

The financial report of the Australian Society of Medical Imaging and Radiation Therapy ('the Society'), formerly the Australian Institute of Radiography ('the Institute'), for the year ended 31 October 2022 was authorised for issue in accordance with a resolution of the Board of Directors on Saturday 25 February 2023.

The Society is a public company, limited by guarantee, incorporated and operating in Australia. If the Society is wound up, the Constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding obligations of the Society. At 31 October 2022 the number of financial members was 6811 (2021: 6665).

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

Principal registered office

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

Principal place of business

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

2. Summary of significant accounting policies

a) Basis for preparation

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

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

The financial statements, except for the 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 or amended Accounting Standards and Interpretations adopted

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

b) Revenue recognition

Revenue recognition accounting policy

The Society recognises revenue as follows:

Revenue from contracts with customers

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

Variable consideration within the transaction price, if any, reflects concessions provided to the customer such as discounts, rebates and refunds, any potential bonuses receivable from the customer and any other contingent events. Such estimates are determined using either the 'expected value' or 'most likely amount' method. The measurement of variable consideration is subject to a constraining principle whereby

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revenue will only be recognised to the extent that it is highly probable that a significant reversal in the amount of cumulative revenue recognised will not occur. The measurement constraint continues until the uncertainty associated with the variable consideration is subsequently resolved. Amounts received that are subject to the constraining principle are recognised as a refund liability.

Membership income

Membership income is recognised equally over the membership period.

Sponsorship fees

Sponsorship income is recognised equally over the sponsorship period.

Interest

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

Other revenue

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

Donations

Donations are recognised as revenue when received.

c) Government grants

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

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

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

d) Borrowing costs

Borrowing costs are recognised as an expense when incurred.

e) Cash and cash equivalents

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

f) Trade and other receivables

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

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

g) Goods and services tax

Revenues, expenses and assets are recognised net of the amount of Goods and Services Tax (GST), except:

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

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

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

h) Property, plant and equipment

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

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

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

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

i) Impairment

The carrying values of plant and equipment are reviewed for impairment at each reporting date, with recoverable amount being estimated when events or changes in circumstances indicate that the carrying value may be impaired. The recoverable amount of plant and equipment is the higher of fair value less costs to sell and value in use. In assessing value in use, the estimated future cashflows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset.

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

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

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

ii) Derecognition and disposal

An item of property, plant and equipment is derecognised upon disposal or when no further future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is included in profit or loss in the year the asset is derecognised.

i) Financial instruments

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 (i.e. trade date accounting is adopted). Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified 'at fair value through profit or loss', in which case transaction costs are recognised in profit or loss immediately. At initial recognition an entity at its sole option may irrevocably designate investment in an equity instrument as FVOCI.

Classification and subsequent measurement

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

Amortised cost is calculated as the amount at which the financial asset or financial liability is measured at initial recognition less principal repayments and any reduction for impairment, and adjusted for any cumulative amortisation of the difference between that initial amount and the maturity amount calculated using the effective interest method.

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

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

(i) 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 because of the occurrence of one or more events (a 'loss event'), which has an impact on the estimated future cashflows of the financial asset(s).

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

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

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

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

j) Trade and other payables

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

k) Employee leave benefits

i) Wages, salaries and annual leave

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

(ii) Long service leave

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

l) Critical accounting estimates and judgements

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

m) Unearned income

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

n) Contract liabilities

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

o) Intangibles

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

p) Fair value of assets and liabilities

The 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 (i.e. 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 (i.e. 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 (i.e. the market that maximises the receipts from the sale of the asset or minimises the payments made to transfer the liability, after taking into account transaction costs and transport costs).

q) Provision

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

r) Restatement of comparative

The comparative balances for the year ended 30 June 2021 have been restated as it was discovered that there was an error in the application of AASB15 for calculating deferred income. The error has been corrected by restating each of the affected line items within the statement of financial position for the prior period. To this end, the deferred income decreased by \$200,000 and retained earnings increased by \$200,000. The error had no impact on the reported surplus for the year ended 30 June 2021.

3. Segment information

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

4. Revenues and expenses

	2022 \$	2021 \$
(a) Revenue		
Membership subscriptions	3,371,302	3,100,254
Rendering of services	636,665	682,285
*Donation	-	1,595,263
Conference revenue	746,853	397,600
Finance revenue	<u>80,716</u>	<u>22,600</u>
	<u>4,835,535</u>	<u>5,798,002</u>
*Bequest from the estate of Dorothy Lorimer was invested as 12 months term deposit with La Trobe Financial.		
Breakdown of finance revenue		
Bank interest receivable	<u>80,716</u>	<u>22,600</u>
Total finance revenue	<u>80,716</u>	<u>22,600</u>
(b) Employee benefits expense		
Wages and salaries	1,360,014	1,230,059
Superannuation	137,361	117,717
Payroll tax	24,647	33,028
Workers' compensation cost	<u>8,137</u>	<u>6,611</u>
	<u>1,530,159</u>	<u>1,387,415</u>
(c) Depreciation and amortisation expense		
Land and buildings	41,382	41,382
Computer equipment	19,742	19,040
Intangible software	27,369	35,879
Furniture and equipment	<u>2,460</u>	<u>3,726</u>
	<u>90,952</u>	<u>100,027</u>
(d) Other expenses		
Other allocation and general expenses	101,118	157,895
Other administrative expenses	<u>491,156</u>	<u>341,433</u>
	<u>592,274</u>	<u>499,328</u>

5. Income tax

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

6. Cash and cash equivalents

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

	2022 \$	2021 \$
Cash at bank - Bendigo Bank	236,876	82,652
Cash at bank - Bendigo Bank - Special Purpose Fund	1,148	1,349
Cash at bank - Commonwealth Bank	32,406	87,997
Cash at bank - Commonwealth Bank Direct Investment	4,821,350	4,427,390
Cash at bank - Creditor	<u>192,890</u>	<u>107,396</u>
Total unrestricted cash and cash equivalents	<u>5,284,672</u>	<u>4,706,784</u>

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 2022:

Cash at bank and on hand	<u>5,284,672</u>	<u>4,706,784</u>
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7. Trade and other receivables (current)

	2022 \$	2021 \$
Trade receivables (i)	5,013	23,037

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

Credit risk – accounts receivable and other debtors

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

8. Other assets

	2022 \$	2021 \$
Other	419	409
Prepayments	40,090	51,420
Conference advances	156,442	-
Security deposits	700	700
	<u>197,651</u>	<u>52,529</u>

9. Financial investments

	2022 \$	2021 \$
Current assets		
La Trobe Financial 12 months term deposit	<u>1,680,148</u>	<u>1,613,392</u>
	<u>1,680,148</u>	<u>1,613,392</u>
Non-current Assets		
Macquarie Investment Account – at fair value through other comprehensive income	2,901,582	3,194,036
Shares in listed companies – at fair value through other comprehensive income	<u>71,604</u>	<u>65,596</u>
	<u>2,973,187</u>	<u>3,259,632</u>

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

10. Property, plant, equipment and intangibles

	Buildings & land at cost \$	Computer equipment at cost \$	Furniture & equipment at cost \$	Intangible assets at cost \$	Total \$
Year ended 31 October 2022					
At 1 November 2021, net of accumulated depreciation and impairment	1,745,894	34,161	4,155	44,748	1,828,958
Additions	-	4,112	2,703	-	6,815
Disposals	-	-	-	-	-
Revaluation increment	-	-	-	-	-
Depreciation - reversal at disposal	-	-	-	-	-
Depreciation charge for the year	<u>(41,382)</u>	<u>(19,742)</u>	<u>(2,460)</u>	<u>(27,369)</u>	<u>(90,953)</u>
At 31 October 2022, net of accumulated depreciation and impairment	<u>1,704,512</u>	<u>18,531</u>	<u>4,399</u>	<u>17,379</u>	<u>1,744,821</u>
At 31 October 2022					
Cost or fair value	1,907,432	346,916	241,365	191,924	2,687,637
Accumulated depreciation and impairment	<u>(202,920)</u>	<u>(328,385)</u>	<u>(236,966)</u>	<u>(174,545)</u>	<u>(942,815)</u>
Net carrying amount	<u>1,704,512</u>	<u>18,531</u>	<u>4,399</u>	<u>17,379</u>	<u>1,744,821</u>
Year ended 31 October 2021					
At 1 November 2020, net of accumulated depreciation and impairment	1,787,276	31,307	6,849	39,866	1,865,298
Additions	-	21,894	1,032	40,761	67,687
Disposals	-	-	-	-	-
Revaluation increment	-	-	-	-	-
Depreciation - reversal at disposal	-	-	-	-	-
Depreciation charge for the year	<u>(41,382)</u>	<u>(19,040)</u>	<u>(3,726)</u>	<u>(35,879)</u>	<u>(100,027)</u>
At 31 October 2021, net of accumulated depreciation and impairment	<u>1,745,894</u>	<u>34,161</u>	<u>4,155</u>	<u>44,748</u>	<u>1,828,958</u>
At 31 October 2021					
Cost or fair value	1,907,432	342,804	238,662	191,924	2,680,822
Accumulated depreciation and impairment	<u>(161,538)</u>	<u>(308,643)</u>	<u>(234,507)</u>	<u>(147,176)</u>	<u>(851,863)</u>
Net carrying amount	<u>1,745,894</u>	<u>34,161</u>	<u>4,155</u>	<u>44,748</u>	<u>1,828,958</u>

The useful life of the assets was estimated as follows both for 2022 and 2021:

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

11. Trade and other payables (current)

	2022 \$	2021 \$
Unsecured trade payables at amortised cost (i)	22,175	40,194
Other payables – sundry creditors at amortised cost	23,995	8,642
Indirect taxes payable	<u>161,644</u>	<u>114,326</u>
	<u>207,814</u>	<u>163,162</u>

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

12. Provisions

	Annual leave \$	Long service leave (current) \$	Long service leave (non-current) \$	Total \$
At 1 November 2021	<u>161,341</u>	<u>141,368</u>	<u>27,241</u>	<u>329,950</u>
Arising during the year	138,435	20,076	-	158,511
Utilised	(138,925)	-	-	(138,925)
Discount rate adjustment	<u>-</u>	<u>-</u>	<u>(4,345)</u>	<u>(4,345)</u>
At 31 October 2022	<u>160,850</u>	<u>161,444</u>	<u>22,896</u>	<u>345,189</u>
Current 2022	160,850	161,444	-	322,294
Non-current 2022	<u>-</u>	<u>-</u>	<u>22,896</u>	<u>22,896</u>
	<u>160,850</u>	<u>161,444</u>	<u>22,896</u>	<u>345,189</u>
Current 2021	161,341	141,368	-	302,709
Non-current 2021	<u>-</u>	<u>-</u>	<u>27,241</u>	<u>27,241</u>
	<u>161,341</u>	<u>141,368</u>	<u>27,241</u>	<u>329,950</u>

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

13. Other liabilities

	2022 \$	2021 (Restated) \$
Contract liabilities*	1,786,211	1,836,648
Other creditors	<u>31,482.58</u>	<u>5,863</u>
	<u>1,817,694</u>	<u>1,842,511</u>

*Note 1(r) Restatement of comparative

14. Retained surplus and reserves

	2022 \$	2021 (Restated) \$
Movements in retained surplus were as follows:		
Balance at 1 November	7,930,197	5,248,227
Net surplus / (loss) for the year	652,529	2,518,723
Transfer (to)/from special purpose funds reserve	<u>(33,495)</u>	<u>(36,753)</u>
Prior year adjustment - retained surplus*	-	200,000
Balance at 31 October	<u>8,549,230</u>	<u>7,930,197</u>

*Note 1(r) Restatement of comparative

Reserves

	Special purpose funds \$	Share revaluation reserve \$	Education reserve fund \$	Total \$
At 1 November 2021	<u>664,477</u>	<u>454,037</u>	<u>100,000</u>	<u>1,218,517</u>
Net increase/(decrease) transferred from/(to) retained surplus	33,495	-	-	33,495
Revaluation of financial investments	<u>-</u>	<u>(286,446)</u>	<u>-</u>	<u>(286,446)</u>
At 31 October 2022	<u>697,974</u>	<u>167,591</u>	<u>100,000</u>	<u>965,565</u>

	2022 \$	2021 \$
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(i) Special purpose fund reserves are represented by:

NSW Education	161,672	152,660
NSW Riverina / ACT Sub-branch	(3,056)	(3,056)
NSW General	(2,338)	(2,262)
Northern Territory	2,429	2,429
Gold Coast	11,391	11,950
North Queensland Education	36,038	35,907
Queensland Education	178,575	179,460
Queensland General	5,109	4,741
SA Education	44,758	44,228
SA General	1,234	1,109
SA Student Sub-committee	4,941	4,212
Tasmania AE Ryan Education	55,191	45,503
Tasmania General	6,497	3,497
Victoria Education	112,195	103,816
Victoria General	7,138	7,612
Victoria Development & Research	33,965	33,379
WA Education	47,021	43,440
WA general	<u>(4,786)</u>	<u>(4,147)</u>
Total special purpose funds	<u>697,974</u>	<u>664,479</u>

Financial Statements

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 Society's Annual Scientific Meetings of Medical Radiation and Therapy (ASMMIRT).

Share revaluation reserve

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

15. Conference

The ASMIRT 2022 Conference was held in Cairns (2021: Joint ASMIRT / NZIMRT 2020 Conference was postponed in 2020 and held virtually in 2021).

	ASMIRT 2022 \$	ASMIRT/ NZIMRT 2021 \$
Income		
Other income	296,461	101,380
Conference registrations	<u>450,392</u>	<u>296,220</u>
Total income	<u>746,853</u>	<u>397,600</u>
Expenses		
Conference and meeting expenses	315,093	266,891
Total expenditure	<u>316,932</u>	<u>266,891</u>
Conference surplus for year	<u>114,828</u>	<u>130,709</u>

16. Auditor's remuneration

The auditor of the Society was changed from HLB Mann Judd to William Buck in this financial year.

	2022 \$	2021 \$
Amount received or due and receivable by the auditor for:		
Audit of the financial report	<u>16,650</u>	<u>32,500</u>
	<u>16,650</u>	<u>32,500</u>

17. Director and executive disclosures

(a) Details of key management personnel

(i) Directors

The Directors' names and positions are listed as per the following:

Carolyn Heyes	President (from May 2022)
Naomi Gibson	Vice-President (from May 2022)
Georgia Halkett	Honorary Treasurer (from February 2021)
Natalie Kidd	Honorary Secretary (from November 2020)
Bronwyn Hilder	Immediate Past-President (from May 2022)
Christopher Dransfield	Board Member (from January 2020)
Rachel Kearvell	Board Member (from May 2022)
Nigel Anderson	Board Member (from May 2022)

(ii) Executives

Sally Kincaid	Chief Executive Officer
Bruce Su	Chief Financial Officer and Company Secretary
David Leach	Conference and Events Manager
Min Ku	Professional Standards Manager

(b) Compensation of key management personnel

(i) Directors are not allowed to be compensated for their voluntary services under the Society's Constitution. No payments have been made to Directors this financial year nor last year.

(ii) The total benefits payments made to the Executives for the year ended 31 October 2022 are detailed below:

	2022 \$	2021 \$
Short-term benefits	668,889	612,833
Post-employment benefits	<u>68,064</u>	<u>59,005</u>
Total	<u><u>736,953</u></u>	<u><u>671,838</u></u>

(iii) There were no other related party transactions.

18. Members guarantee

The Society is limited by guarantee. If the Society is wound up, the Constitution states that each member is required to contribute a maximum of \$100 each towards meeting any outstanding obligations of the Society. At 31 October 2022 the number of financial members was 6811 (2021: 6665).

19. Contingencies

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

20. Events after balance sheet date

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

Board of Directors Declaration

The Board declares that:

- a) The attached financial statements and notes, as set out on pages 30 to 46, thereto comply with Australian Accounting Standards – Simplified Disclosures;
- b) The attached financial statements and notes, as set out on pages 30 to 46, thereto give a true and fair view of the Society's financial position at 31 October 2022 and performance of the Society for the year ended 31 October 2022;
- c) In the Board's opinion, the attached financial statements and notes, as set on pages 30 to 46, thereto are in accordance with the *Corporation Act 2001*; and
- d) In the Board's opinion, there are reasonable grounds to believe that the Society will be able to pay its debts as and when they become due and payable.

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

On behalf of the Board



Carolyn Heyes
President

Melbourne 25 February 2023



Georgia Halkett
Honorary Treasurer

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

REPORT ON THE AUDIT OF THE FINANCIAL REPORT

Opinion

We have audited the financial report of the Australian Society of Medical Imaging and Radiation Therapy (the Company), which comprises the statement of financial position as at 31 October 2022, statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information, and the directors' declaration.

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

- i. giving a true and fair view of the Company's financial position as at 31 October 2022 and of its financial performance for the year then ended; and
- ii. complying with Australian Accounting Standards – Simplified Disclosures and the *Corporations Regulations 2001*.

Basis for Opinion

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

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

Emphasis of Matter

The financial report of Australian Society of Medical Imaging and Radiation Therapy for the year ended 31 October 2021 was audited by another auditor – HLB Mann Judd, who expressed an unmodified opinion to that report. The comparative balance for the year ended 31 October 2021 has been restated for a correction of an error. Refer to Note 2(r) for further details regarding the restatement of comparatives.

Other Information

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 31 October 2022, but does not include the financial report and the auditor's report thereon.

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

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

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

Responsibilities of the Directors for the Financial Report

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

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

Auditor's Responsibilities for the Audit of the Financial Report

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

A further description of our responsibilities for the audit of these financial statements is located at the Auditing and Assurance Standards Board website at http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf

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

WilliamBuck
ACCOUNTANTS & ADVISORS

We also provide the directors with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.



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



C. L. Sweeney
Director
Melbourne, 1 March 2023





Australian Society of Medical Imaging
and Radiation Therapy