



# ASMIRT

Inclusion of Medical Radiation Sciences in  
the Commonwealth Practice Payment Scheme.  
From the Australian Society of Medical Imaging  
and Radiation Therapy (ASMIRT)

**2026-2027 Pre-Budget Submission**

# What are the Medical Radiation Sciences?

The Medical Radiation Sciences (MRS) are a group of professions that work in the two distinct areas of medical diagnosis and the treatment of cancer.

The professions cover:

1. **Radiographers** – 16,467 professionals that use x-ray, CT and MRI to create images for diagnosis. Medical imaging is the second most utilised diagnostic tool in Australia after pathology. More than 30 million sets of images and 39% of the population[i] will need the services of a radiographer each year.
2. **Radiation Therapists** – 3,003 professionals that provide targeted cancer care to one in three people with cancer. This can rise to care for 50% of people with cancer if there are enough practitioners. Radiation Therapy is well tolerated and the most economic cancer treatment available[ii].
3. **Nuclear Medicine Technologists** - 1,374 professionals that use exacting amounts of radiopharmaceuticals to highlight the function of organs in a diagnostic setting. Radiopharmaceuticals are also a breakthrough treatment in directly targeting and killing cancer cells. 700,000 services[iii] are performed each year.

## Background & Policy Context

The Commonwealth Practice Payment (CPP) Scheme was announced in the 2024-25 Accord Budget Measures and came into effect on 1 July, 2025. Currently, the scheme provides \$331.60 a week for domestic students undertaking mandatory practicum placements in Bachelor or Masters qualifications in teaching, nursing, midwifery, and social work.

The scheme is designed to ease cost-of-living pressure on students, improve equity, and increase access to tertiary education opportunities for more Australians, particularly in outer suburban and regional areas. It is focused on critical professions that are key enablers of the Australian economy.

The scheme is a welcome support for students undertaking placement and acknowledgement that students may endure financial hardship during this crucial learning experience.

Research of Medical Radiation Sciences (MRS) students — Radiography, Radiation Therapy, and Nuclear Medicine - conducted by the Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) found that:

**94.7% of students are not confident they can manage full-time placement along with the extra working hours needed to support themselves financially**[iv].

**The same survey shows however, that the inclusion of MRS students in the CPP would be sufficient to cover students' extra expenses during placement in 79% of cases**[v].

The above-mentioned Student Clinical Placement Survey, July 2025, was conducted by ASMIRT. The survey was sent to 1,987 MRS students and it received 448 responses.

# Commonwealth Practice Payment Eligibility Criteria and MRS Student Alignment

| CPP Eligibility        | MRS Professions Status   |
|------------------------|--|
| Mandatory Placement    | ✓ Up to 2,100 hours (56 weeks)   |
| Critical Profession    | ✓ Mandatory service during COVID   |
|                        | ✓ Shortages across most of AU[vi]  |
| Regional Participation | ✓ 20% study regionally[vii]  |
|                        | ✓ 34% work regionally[viii]  |
| Equity Focus           | ✓ 70% female   |
|                        | ✓ 60% of workforce under 44 y/o  |
| Economic Enablers      | ✓ Radiation therapy is cost effective (0.06c for every \$1 spent on cancer)[ix]. 48% of cancer diagnosis includes RT as best practice care[x]. It is effective and inexpensive and gives patients longer, productive lives.  |
|                        | ✓ Medical Imaging (MI) is the second most utilised diagnostic tool after pathology. 30 million sets of images are taken per annum. It is crucial in acute medical interventions through to early diagnosis and treatment, for 39 percent of the Australian population each year. |

## Placement Hours Comparison Chart

Medical Radiation Sciences has the **longest placement requirements** of any allied health profession.

| Profession                        | Hours of placement |
|-----------------------------------|--------------------|
| Audiology                         | 300                |
| Dentistry                         | 1140               |
| Dietetics                         | 802                |
| <b>Medical Radiation Sciences</b> | <b>2100</b>        |
| Midwifery                         | 1007               |
| Nursing                           | 810                |
| Occupational Therapy              | 1000               |
| Orthoptics                        | 637                |
| Optometry                         | 1425               |
| Paramedicine                      | 640                |
| Pharmacy                          | 300                |
| Physiotherapy                     | 900                |
| Prosthetics                       | 788                |
| Psychology                        | 300                |
| Social Work                       | 525                |
| Speech Pathology                  | 690                |

# Medical Radiation Science Students' Current Financial and Emotional State

*The statistics provided below on the financial and work status of MRS students are taken from the Student Clinical Placement Survey, Australian Society of Medical Imaging and Radiation Therapy, July, 2025.*

## **Medical Radiation Science Students Financial and Work Status While Studying**

- 89 percent work while studying
- 62 percent study between 21 and 25+ hours per week
- 30 percent work 16 to 20 hours per week on top of study
- A further 30 percent work 21 hours a week or more on top of study
- 72 percent require more than \$400 per week for their basic needs while studying.

## **Medical Radiation Science Students Financial and Work Status While on Placement**

- 90 percent require more money during placement
- 95 percent do not feel confident they can manage full-time placement along with the hours needed to support themselves financially
- 65 percent work 11 to 21+ hours per week on top of full-time placement
- The most prevalent additional costs during placement are travel (95%), accommodation (77%), utilities (69%) and food (18%).
- For 79 percent of students the CPP would be sufficient to meet their extra financial needs.

## **Methods Used by Students to Support Themselves During Placement**

- 79 percent will work extra hours before placement to save money
- 65 percent will work hours on top of full-time placement
- 48 percent will borrow money from family/friends
- 23 percent do not think they can earn what they need to support themselves.

### **Of this group:**

- 26 percent will either drop out or defer
- 15 percent will skip meals and/or sleep in their car
- 30 percent will consider studying part-time
- 40 percent will look for other ways to borrow money.

## **Stressors of working during placement**

- 75 percent cannot apply themselves academically as they would want to
- 65 percent cannot apply themselves to placement as they would like to
- 90 percent report being always tired
- 82 percent are regularly stressed
- 35 percent are reporting low self-esteem.

## Student Voices:

The Student Clinical Placement Survey received 186 testimonials. Below is a small sample of student concerns.

“I work six days a week to survive while on placement. The stress and exhaustion compromise both my education and patient safety.”

“I am working 84 days in a row with no break in order to support myself. As a result, I am constantly tired and stressed and I cannot apply myself fully to my placement. This creates a risk when working with patients. Was this any other profession, it would be considered unethical but because we are students it's fine?”

“Pay us please, I am about to face homelessness.”

“I have spent around \$7000 on my last 6 week placement as I had to pay rent for placement as well as my accommodation at home. I also had to pay for fuel expenses as my placement was over 6hrs away.”

“There are many financial needs in our household, but I have limited capacity to work due to my university studies and clinical placements. I had to give up my previous jobs because of placement commitments. My wife also has limited ability to work as she is the primary carer for our two children. Her income alone is not enough to cover our living expenses”.

“Being able to work and support myself during a full time 36 week placement has been virtually impossible and incredibly stressful. It has had a huge impact on my mental health and I've had to rely on my parents.”

“Having to pay rent as well as accommodation for placement, food and transport whilst not having income due to the demanding placement hours and location away from employment makes it impossible to live healthily during this time. I go without food, work outside of placement hours to afford accommodation (combined with savings), this cycle is exhausting and restrains my time to study whilst on placement. I become sick and run down as I do not have the money to maintain a nutritious diet and have an adequate amount of rest each day or to see a doctor when I do get sick, leading to hospital visits and severe health complications.”

## Systemic Risks & Workforce Implications

- **Workforce Attrition:** The financial barrier of unpaid placements risks a drop in graduation rates, particularly in the final year of the Medical Radiation Sciences course where students are almost work ready, exacerbating existing workforce shortages. Up to 25% of students are considering dropping out, deferring or undertaking study parttime.
- **Equity & Access Concerns:** Students from rural/remote areas and low socio-economic backgrounds are disproportionately affected by the financial commitments of placements away from home, thereby limiting workforce diversity and reach.

## Policy & Economic Justification

- **Investment in Workforce Readiness:** Providing financial support through the CPP will secure a stable, qualified workforce ready to meet Australia's existing and growing healthcare demands. The Medical Radiation Professionals are currently on the Occupation Shortage List[xii].
- **Cost effectiveness of treatment:** Ensuring the throughput of MRS students by inclusion in the CPP will provide greater access to cost effective treatments. Radiation Therapy is the most cost-effective cancer treatment currently available. For every \$1 spent on cancer treatment 0.06 cents is spent on radiation therapy[xiii].

Twenty percent of cancer patients who should receive radiation therapy in line with best practice care do not[xiv]. This is due to multiple factors, including workforce shortages.

- **Positive Socio-Economic Multiplier Effect:** Alleviating student poverty reduces attrition, increases workforce supply with a strong emphasis on regional and remote areas where students who study regionally are more likely to work regionally. These important effects improve patient outcomes—yielding system-wide economic benefits.
- **Utilisation of Existing Capital:** Within the public health system, Category 3 non-urgent patients can wait up to a year for a non-urgent scan which may impact treatment options, as well as associated costs[xv] further down the line. Undersupply of practitioners is partially responsible for the underutilisation of equipment.

## Cost of inclusion

The ongoing cost of inclusion of MRS students in the CPP at the current rate of \$331.60 per week of placement is \$15,518,880 per annum.

This relies on the following calculation:

| Student year | Student numbers | Placement weeks | CPP contribution p/w | Sub total   |
|--------------|-----------------|-----------------|----------------------|-------------|
| 2nd          | 900             | 13              | \$331.60             | \$3,879,720 |
| 3rd          | 900             | 13              | \$331.60             | \$3,879,720 |
| 4th          | 900             | 26*             | \$331.60             | \$7,759,440 |

**Total    \$15,518,880 p.a**

\*The 4th year placement may vary between 26 weeks to 30 weeks, being course dependent. Different courses will also load placement weeks differently between years of the course, but the greatest placement commitment will be in the 4th year.

## Conclusion & Recommendation

The evidence presented demonstrates that Medical Radiation Sciences (MRS) — Radiography, Radiation Therapy, and Nuclear Medicine — meet and exceed the Commonwealth Practice Payment (CPP) Scheme eligibility criteria. MRS students face the longest placement requirements of any allied health profession, with placements extending to 2,100 hours, significantly greater than comparable professions already covered under the scheme.

Without financial support, MRS students are forced to work excessive hours on top of fulltime placements, borrow money, or sacrifice their wellbeing — outcomes that compromise patient safety, reduce placement quality, and threaten graduation rates. The result is an avoidable risk of workforce attrition at a time when shortages in MRS professions are already acute, with direct impacts on cancer treatment capacity, diagnostic imaging access, and patient outcomes nationwide.

The CPP's objectives — to alleviate student financial hardship, improve equity, and strengthen Australia's workforce in critical professions that are economic enablers — are directly aligned with the needs of MRS students and the national imperative to secure a sustainable and skilled healthcare workforce. The cost of inclusion, estimated at \$15.5 million annually, is modest compared to the economic, social, and health system benefits of ensuring workforce continuity in these essential professions.

## Recommendation:

The Australian Society of Medical Imaging and Radiation Therapy strongly recommends that the Australian Government extend as part of the budget process the Commonwealth Practice Payment Scheme to include Medical Radiation Sciences.

This policy action will:

- **Support student equity and wellbeing** by addressing placement-related financial stressors.
- **Strengthen workforce supply** in critical, shortage-listed professions essential to cancer treatment, diagnostic imaging, and broader healthcare delivery.
- **Deliver economic efficiency** by securing access to cost-effective treatments and improving patient outcomes, particularly in regional and rural Australia.

Inclusion of MRS in the CPP Scheme is essential to ensuring that students can complete their training, patients receive timely care, and Australia retains a sustainable, skilled, and equitable medical radiation sciences workforce.

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[i] Pathology, Imaging and other Diagnostic Services Report, 2022-23, Australian Institute of Health and Welfare, <https://www.aihw.gov.au/reports/diagnostic-services/pathology-imaging-and-other-diagnosticservices>

[ii] Shining a Light: Radiotherapy Cancer Treatment in Australia, 2022, Evohealth, p.6

[iii] Re-indexation of Nuclear Medicine Related Items on The Medicine Benefits Schedule, Pre Budget Submission, Australian Association of Nuclear Medicine Specialists, 2022, p.13

[iv] Student Clinical Placement Survey, Australian Society of Medical Imaging and Radiation Therapy (ASMIRT), July, 2025, q.18.

[v] ASMIRT, q.13.

[vi] Occupational Shortage List, Jobs & Skills Australia, 2025, <https://www.jobsandskills.gov.au/data/occupation-shortages-analysis/occupation-shortage-list>

[vii] ASMIRT, q.3.

[viii] Membership and Advocacy Survey, Australian Society of Medical Imaging and Radiation Therapy (ASMIRT), February, 2025, q.5.

[ix] Evohealth, p.6.

[x] Evohealth, p.6.

[xi] Radiation Oncology Health Program Grant Scheme Review, Australian Government, Department of Health, 2020. <https://www.health.gov.au/sites/default/files/documents/2021/05/radiation-oncologyhealth-program-grants-rohpg-scheme-2020-review-report-rohpg-scheme-2020-review-report.pdf>

[xii] Jobs & Skills Australia, 2025

[xiii] Evohealth, p.6.

[xiv] Evohealth, p.6.

[xv] Patients Waiting for Treatment, Victorian Agency for Health Information, <https://vahi.vic.gov.au/planned-surgery/patients-waiting-treatment>