



Australian Government

Australian Radiation Protection and Nuclear Safety Agency

Interaction between regulatory bodies, health authorities & professional organisations

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Australian radiation regulatory framework



- Six states and two territories + Commonwealth Australia, i.e. nine jurisdictions
- Each jurisdiction regulates radiation safety & monitors compliance



Australian radiation regulatory framework



ARPANSA

- radiation safety regulator for Commonwealth organisations;
- takes best international practice into account in rulemaking; and
- promotes national uniformity

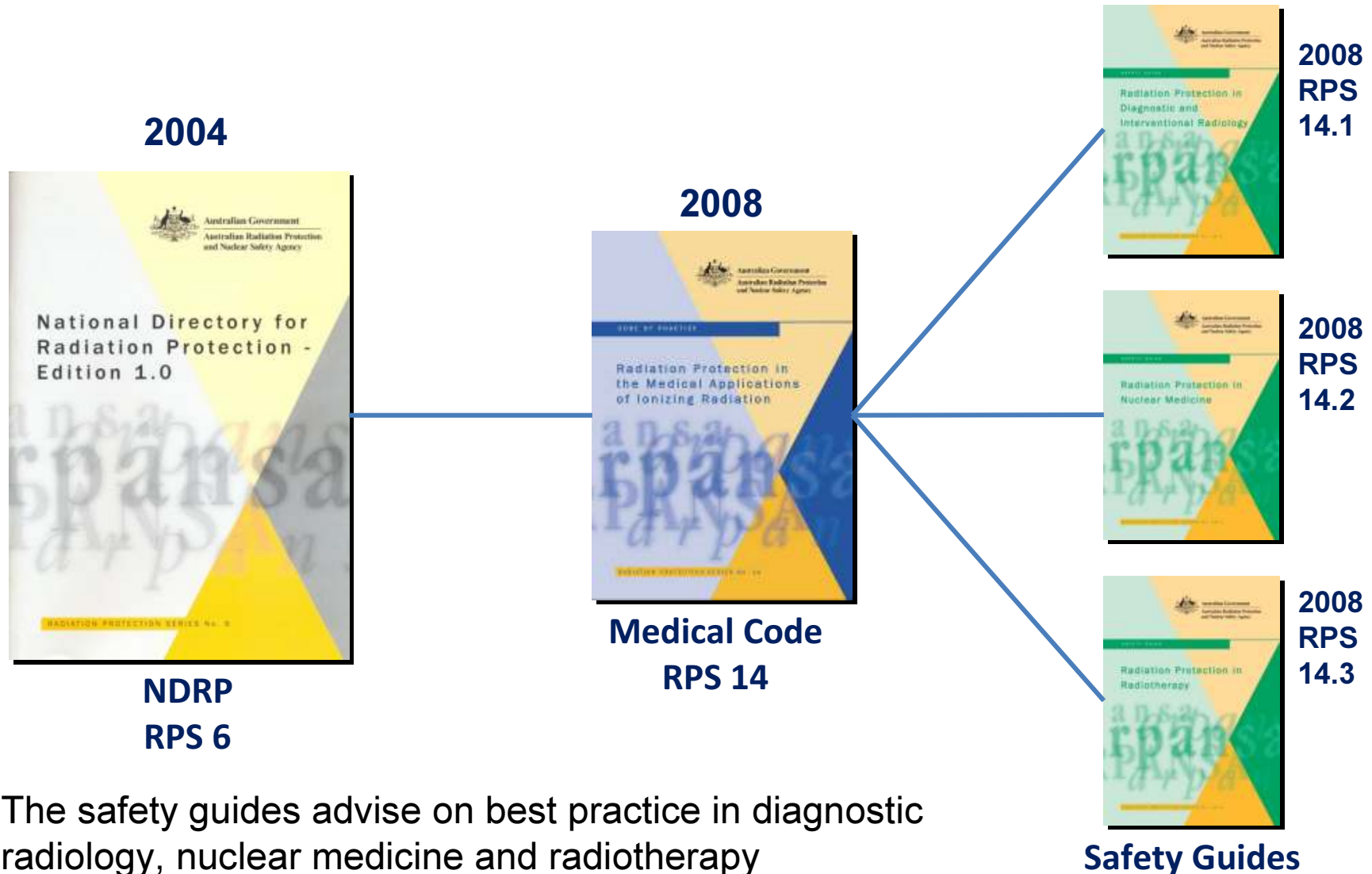


Australian radiation regulatory framework

- The *Radiation Health and Safety Council (RHSC)*, and the CEO of ARPANSA, may request the *Radiation Health Committee (RHC)*, comprised of State/Territory regulators and ARPANSA + other members, to develop draft policies, codes and standards, in communication with stakeholders;
- to be considered by the jurisdiction and adopted by the Australian Health Ministers for inclusion in the
- National Directory for Radiation Protection which is then mandatory in each jurisdiction



Medical Code & Safety Guides





Medical Code & Safety Guides

2002 saw the beginnings of the Medical Code & associated Safety Guides

3 working groups were established to cover the various fields

The working groups consisted of representatives from:

- *Nominated radiation regulators from the States & Territories*
- *Experts in their field, plus secretariat support from ARPANSA*
- *Nominated clinicians & practitioners from their respective professional bodies*
- *Nominated medical physicists from their respective professional bodies*





Medical Code & Safety Guides

Drafts and the Regulatory Impact Statement were circulated to the appropriate committees, radiation regulators, and finally to the public for comment.

To assist in this process a conference was held 2007 where all interested parties discussed how these documents would impact their world of medical radiation.





Medical Code & Safety Guides

Implementation Issues:

- The States & Territories did not begin to adopt the Code into their legislation until January 2010.
- The legal framework in the States & Territories varies and may impact on uniformity in implementation



External drivers such as the National Hospital Accreditation Scheme and the National Diagnostic Imaging Accreditation Scheme, want a uniform approach to the compliance of the use of radiation in medicine.



Moving on

- A liaison panel with ARPANSA, RHC and the Royal Australian & New Zealand College of Radiologists (RANZCR) monitor Medical Code implementation issues.
- ARPANSA has representation on the national Hospital Accreditation Scheme and the National Diagnostic Imaging Accreditation Scheme committees.
- Web information (Inside Radiology) and web-based educational programs for lay public, medical students and professionals



Moving on

- **ARPANSA has designed a tool that will assist clinical practices to create and record their practice diagnostic reference levels (DRLs), initially for CT imaging and in the future, for other diagnostic imaging modalities**
- **These local DRLs will aid in the creation of national DRLs which has two objectives:**
 - i. **Help to show that the clinical practice is compliant with important sections of the Code**
 - ii. **The ultimate goal of optimising radiation doses delivered to patients**



Australian Clinical Dosimetry Service

- ARPANSA to host a new Australian Clinical Dosimetry Service
- Providing an integrated approach to medical, planning and dosimetric quality assurance that involves radiation oncologists, radiation therapists and medical physicists
- Promoting best practice standards in radiation oncology, including assisting the introduction of new treatment technologies
- The dosimetry service aims to implement Level III audits. Level III dosimetry measures the entire treatment chain, spanning the whole planning and treatment process.
- All these measures are designed to ensure radiation safety to the patient



Lessons learned

- Put as much resource and effort into implementation as into production
- Maintain communication with stakeholders about its implementation
- Develop evidence-based strategies to monitor the outcome