

## MRTB Competence Standards consultation outcome 2024

This consultation ran from 22 July – 19 August 2024, proposing changes to the competence standards for medical imaging and radiation therapy practitioners. A total of 55 responses were received, 51 were from individuals and four were from organisations.

Thank you to those who took the time to read and respond to the consultation document. There was an average **agreement rate of 92%** with the proposed changes, therefore, the Board has agreed to move forward with these changes to the competence standards.

### Response to feedback received

The table below outlines the feedback received to the proposed changes and the Board’s response.

Feedback received	Decision made
<i>Domain one: Professionalism</i>	
References to more guidance material to support the principles discussed in the standards.	The following has been added to the guidance section: ‘Practitioners should also be aware of the guidelines and standards provided by relevant professional associations and others for further support.’
<i>Domain Two: Communication and Collaboration</i>	
Change ‘spelt out’ to ‘explained’ in the sentence ‘Using plain language (avoiding the use of colloquialisms, slang, acronyms – unless spelt out in the first instance).’ as ‘spelt out’ infers written communication.	This change has been made.
Change ‘plain language’ to ‘appropriate language’.	‘Plain language’ will remain as this is a term widely used and references the <a href="#">Plain Language Act 2022</a> .
<i>Domain Three: Medical Imaging Practice</i>	
Change <b>behaviour 3.4.6</b> <i>Apply knowledge of pathophysiology, anatomy and radiobiological principles</i> to ‘Integrate knowledge of pathophysiology, anatomy, physics, and radiobiological principles’.	This change has been made.
Use “ionising” spelling instead of “ionizing” in <b>behaviour 3.3.2</b> .	This change has been made.

<i>Domain Four: Magnetic Resonance Imaging (MRI) Practice</i>	
Change <b>behaviour 4.4.7</b> <i>Apply knowledge of pathophysiology, anatomy and tissue characteristics</i> to 'Integrate knowledge of pathophysiology, anatomy, physics and tissue characteristics.'	This change has been made.
<i>Domain Five: Nuclear Medicine Practice</i>	
Change <b>behaviour 5.4.5</b> <i>Apply knowledge of pathophysiology, anatomy, and radiobiological principles</i> to 'Integrate knowledge of pathophysiology, anatomy, physics and radiobiological principles.'	This change has been made.
<i>Domain Seven: Sonography Practice</i>	
Change <b>behaviour 7.4.7</b> <i>Apply knowledge of anatomy to identify and support sonographic information and interpretation</i> to 'Integrate knowledge of pathophysiology, anatomy, and tissue characteristics to identify and support sonographic information and interpretation.'	This change has been made. There were a number of different suggestions for this behaviour – the resulting change is a combination of these suggestions.
<i>General Feedback</i>	
Suggest reordering of the behaviours under each competence standard to align more logically with how they are applied in practice.	These changes have been made.

We received a large amount of feedback that would require more significant changes to the competence standards than what was being proposed in this consultation. This feedback will be considered as part of the more extensive review of the scope of practice and competence standards which is planned over the next few years.