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# Role and Responsibility of Approved Radiographers and X-ray Operators Policy

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## 1. Background

This document clarifies the roles and responsibilities of approved radiographers/ medical imaging technologists (MITs) and x-ray operators (XROs) in the provision of the WA Country Health Service (WACHS) X-ray Operator Service.

The Radiological Council of Western Australia (the Council) is the statutory body appointed under the state's [Radiation Safety Act 1975](#) (WA) (the Act). The Council has established requirements relating to training, ongoing approval and patient and operator safety. These requirements are administered under the radiation safety legislation by the way of registration of x-ray equipment and premises and the licensing of persons using the equipment. Registration and licensing conditions are issued outlining specific requirements for the registration and licensing category.

For medical radiography and radiology registrations (including XRO registrations), the registration conditions must be displayed within the workplace so that all persons involved in radiographic examinations remain familiar with the requirements.

The Council's XRO logbook, which must be maintained by all XROs, summarises the requirements that must be adhered to under the WA radiation safety legislation.

However, the Council's broad requirements do not always cover the day to day matters that must be followed to ensure that a high standard of service delivery is maintained across WACHS imaging sites.

The purpose of this document is to provide the guidelines MITs need to follow in their support role to the XROs in their region. The document also provides guidelines for XROs and is intended to assist with the implementation of new technologies and the way in which the service will interface with telehealth systems as they evolve.

## 2. Policy Statement

### 2.1 Approved Radiographers

- 2.1.1 Are appointed by the Radiological Council; MITs wishing to be appointed need to attend the approved X-ray Operator course (currently provided by Curtin University) and apply to the Council in writing. Applications need to include an up to date Curriculum Vitae.
- 2.1.2 Must assess XRO images at least fortnightly, document findings and provide feedback to XROs as necessary. Approved Radiographers may delegate XRO image assessment to experienced MITs where appropriate but must review all reports and findings.

- 2.1.3 Must visit XRO sites within their region at least once per year. Wherever possible, it is recommended that sites be inspected and XROs provided face to face support as frequently as possible.
- 2.1.4 Must provide an ongoing support role to XROs within their designated region. This is to include being available to provide assistance over the telephone at acute times when XROs are having difficulty with any part of an examination.
- 2.1.5 Must carry out a three (3) yearly XRO assessment as required by regulation 38(2)(d) of the Radiation Safety (General) Regulations 1983 (WA) under the Act. The assessment must be made using the Council's assessment form which must be dated and signed by the XRO and the Approved Radiographer. The assessment form must be returned to the Council to enable the XRO database to be maintained.
- 2.1.6 Must monitor examination numbers performed by XROs under their supervision and resources permitting; provide training sessions for XROs as per 2.2.13 and 2.2.14.
- 2.1.7 Must monitor the numbers of XROs under their supervision at each health service and communicate this information with Health Service Managers with the aim of helping to effectively manage the XRO workforce, the Approved Radiographer workload within their region and the numbers of staff attending the approved XRO course.
- 2.1.8 Must provide and keep records of introductory training sessions to new XROs to ensure understanding of local equipment and procedures.

### 2.2 X-ray Operators (XROs)

- 2.2.1 Must only perform the x-ray examination when an MIT is not available to the health service unit.
- 2.2.2 Must attend and pass a Radiological Council approved X-ray Operator course.
- 2.2.3 Must attend a training session with their site's Approved Radiographer after completing the approved X-ray Operator course and prior to commencing XRO duties, this is to ensure appropriate knowledge and understanding of local equipment and procedures.
- 2.2.4 Must be formally assessed every three (3) years by an Approved Radiographer to maintain approval.
- 2.2.5 Are to have their images reviewed by an Approved Radiographer on a fortnightly or more frequent basis.
- 2.2.6 X-ray examinations performed by x-ray operators are restricted to chest and extremity radiography only. Additional views may be permitted in the case of a **medical emergency** when, in the opinion of the referring medical practitioner, such views are considered essential for the **immediate medical care** of the patient. XROs **must consult with their Approved Radiographer** (or a supervising radiographer) for authorisation and guidance in such circumstances (refer to [Appendix 1: X-Ray Operators Decision Making Flowchart](#)).

- 2.2.7 X-ray examinations performed by X-ray Operators are limited to those patients presenting with trauma or other pathology of an acute nature essential for the immediate medical care of the patient. The radiographic views the XROs are permitted to perform and the equipment they operate may not be appropriate in routine examinations for diagnosing pathology of a degenerative or non-acute nature. All exceptions must be discussed with an Approved or Supervising MIT prior to imaging (refer to [Appendix 1: X-Ray Operators Decision Making Flowchart](#)).
- 2.2.8 Must, in the interests of simplicity and uniformity, only undertake routine anterior-posterior, posterior-anterior (AP/PA), oblique and lateral projections. All projections are undertaken with either a horizontal or vertical beam and no other tube angulation is applied.
- 2.2.9 May perform x-ray examinations on patients of any age as there are no regulatory restrictions on patient age.
- 2.2.10 Are required to consult with their Approved Radiographer (or an MIT) to assess whether (or not) an examination should be attempted if the patient to be imaged is a child under the age of three (3) or if consideration should be given to transferring the patient to a MIT site.
- 2.2.11 Are required to document every examination they perform in their log book.
- 2.2.12 Should perform at least 20 examinations per year to maintain their competence.
- 2.2.13 If an XRO has performed between 15-19 examinations across a continuous 2 year period they must either re-attend the approved XRO course or, if Approved Radiographer resourcing can facilitate and is agreed to by both the Health Service and the Approved Radiographer, participate in a 1 day training session with an Approved Radiographer who can confirm the XRO is competent prior to performing further XRO duties. If an XRO has performed less than 15 examinations within a continuous 2 year period it is considered the XRO has not maintained appropriate experience and competency levels and the XRO must re-attend the approved X-Ray Operator course prior to recommencing XRO duties. The purpose of this is to ensure that a suitable minimum competency level of WACHS XROs is maintained.
- 2.2.14 As nurses, XROs are responsible for working within their scope of practice and may refuse to perform x-ray examinations in situations which are contrary to Departmental policy or are in conflict with special circumstances e.g. pregnancy.
- 2.2.15 Are required to follow the WACHS [Consumer Identification Policy for Community Health Settings and Residential Aged Care](#). (A WACHS Patient Identification Policy is in development [July/August 2019])
- 2.2.16 Must ensure images and request forms are transmitted for reporting within the regional agreed workflow.
- 2.2.17 Assist Approved Radiographers in maintaining accreditation under the Diagnostic Imaging Accreditation Scheme (DIAS) or other relevant standards.

- 2.2.18 Must maintain records of professional development and training using the WACHS Learning Management System as per WACHS [Workforce Learning and Development Policy](#).
- 2.2.19 A Nurse Practitioner who requests a medically urgent x-ray and is the only XRO available to perform the examination must discuss the investigation rationale with a Medical Officer and document accordingly in the medical notes. In the absence of a local Medical Officer an Emergency Telehealth Service (ETS) doctor can be contacted

### 3. Patient Information

It is a requirement for all WACHS locations performing Medical Imaging to provide patients with information on the examinations that are to be performed. WACHS has adopted standard consumer information from The Royal Australian and New Zealand College of Radiologists (RANZCR) [Inside Radiology](#) for dissemination to WACHS patients. Patient information on plain radiography can be found [here](#).

### 4. Definitions

<p><b>Approved Radiographer</b></p>	<p>An Approved Radiographer is a person with MIT qualifications who has been appointed by the Radiological Council for the purpose of monitoring and assessing XRO performance. Approved radiographers are often MIT's employed in a position that would involve providing a support role to XROs.</p> <p>MITs wishing to become an Approved Radiographer need to attend the approved X-ray Operator course (currently provided by Curtin University) and apply to the Council in writing. Applications need to include an up to date Curriculum Vitae.</p> <p>All hub hospitals that have XROs performing x-ray examinations within the hub and spoke model of service delivery must have an Approved Radiographer.</p>
<p><b>Supervising Radiographer / Medical Imaging Technologist (MIT)</b></p>	<p>A health practitioner with medical imaging qualifications registered in the area of medical imaging technology under the <a href="#">Health Practitioner Regulation National Law (WA) Act 2010</a>. In Western Australia, MITs now complete a 4 year degree course at Curtin University graduating with a Bachelor of Science (Medical Imaging Science).</p> <p>The MIT / Supervising Radiographer is employed in the region of the XRO and is familiar with the XRO skill set and service delivery of the region. The supervising MIT can fulfil all of the criteria in the absence of an Approved Radiographer with the exception of assessing XROs practical competency.</p>
<p><b>X-ray Operator (XRO)</b></p>	<p>An XRO is a health practitioner (most often a nurse, but can be a doctor) who has been approved by the Radiological Council to undertake a limited range of basic radiographic examinations in remote and rural practices where a diagnostic radiography service would not otherwise be available.</p>

	Persons wanting to become an XRO must attend and pass a recognised x-ray operator course approved by the Radiological Council of Western Australia
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## 5. Roles and Responsibilities

**Individual staff** are required to:

- maintain records to support responsibilities
- maintain equipment to support a diagnostic standard.

**Operational Managers / Line Managers** are required to:

- ensure service delivery aligns with scope of practice
- support resources for recency of practice
- monitor compliance of competency achievement of individual staff

**All Staff** are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

## 6. Compliance

It is a requirement that all staff performing x-ray examination comply with the [Radiation Safety Act 1975](#) (WA).

All approved radiographers and XROs must be approved and registered with the Radiological Council of Western Australia.

Failure to comply with this policy document may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

## 7. Evaluation

Monitoring of compliance with this document is to be conducted by National Association of Testing Authorities (NATA) assessments carried out under WACHS for regions not under a private service provider. Sites that are under a private service provider are to be monitored by the WACHS Area Chief Medical Imaging Technologist triennially.

## 8. Standards

[National Safety and Quality Healthcare Standards](#)

Clinical Governance Standard: 1.3, 1.6, 1.7, 1.20, 1.22, 1.23, 1.25 and 1.26

## 9. Legislation

[WA Radiation Safety Act 1975 \(WA\)](#)

[Health Practitioner Regulation National Law \(WA\) Act 2010.](#)

## 10. Related WACHS Policy Documents

[Consumer Identification Policy for Community Health Settings and Residential Aged Care](#)

[Workforce Learning and Development Policy](#)

## 11. Related WA Health System Policies

[Radiation Safety OD0453/13](#)

## 12. Policy Framework

[Public Health](#)

## 13. Appendix

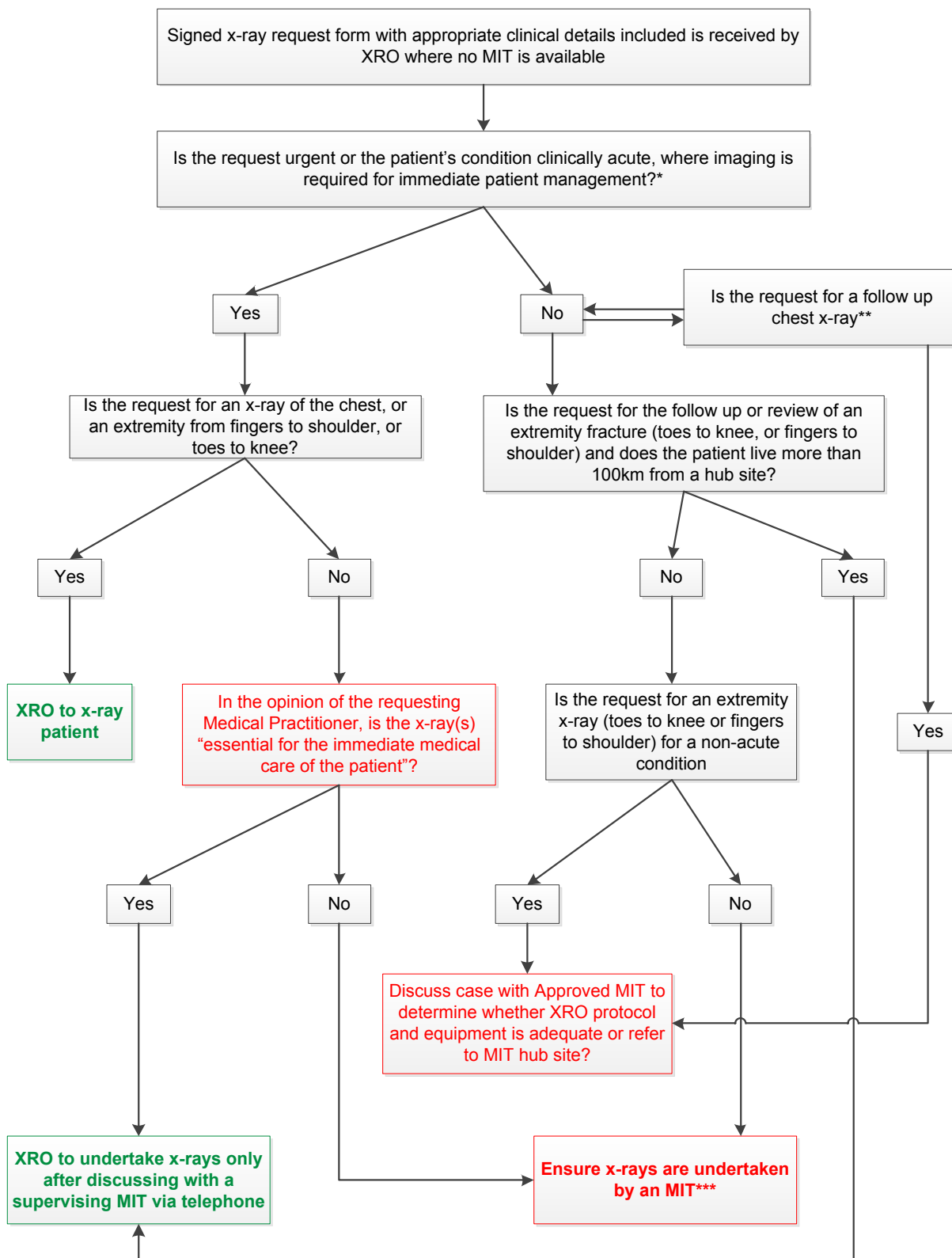
Appendix 1: [X-ray Operators Decision Making Flowchart](#)

**This document can be made available in alternative formats  
on request for a person with a disability**

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## Appendix 1: X-ray Operators Decision Making Flowchart



\* Consultation with Approved MIT is required if child is under the age of three (3) years

\*\* Follow up chest x-rays may be discussed with Approved MIT but all other non-urgent CXR to be referred to an MIT hub site

\*\*\* Some extremity imaging should only be performed by an MIT due to the complexity of the examination, accessory equipment requirements and projections needed for a diagnostic examination