



## NSAMRT Site Visits FAQs

Throughout May & June, 2016, Julie Avery, Executive Director of NSAMRT, and a member of the NSAMRT executive council visited clinical sites across the province. The intent of the visits was to have an opportunity to talk with as many technologists and therapists as possible. We have created this FAQ document to share the answers to a variety of questions we heard throughout the visits.

### 1. What sites did you visit?

*We visited the following clinical sites*

- |  |  |
|--|--|
| <input type="checkbox"/> <i>Aberdeen Regional Hospital</i>   | <input type="checkbox"/> <i>NS Cancer Center – Halifax</i>     |
| <input type="checkbox"/> <i>Amherst Regional Hospital</i>    | <input type="checkbox"/> <i>South Shore Regional Hospital</i>  |
| <input type="checkbox"/> <i>Cape Breton Regional</i>         | <input type="checkbox"/> <i>St. Martha’s Regional Hospital</i> |
| <input type="checkbox"/> <i>Colchester Regional Hospital</i> | <input type="checkbox"/> <i>Valley Regional Hospital</i>       |
| <input type="checkbox"/> <i>Dartmouth General Hospital</i>   | <input type="checkbox"/> <i>Victoria General Hospital</i>      |
| <input type="checkbox"/> <i>Halifax Infirmary</i>            | <input type="checkbox"/> <i>Yarmouth Regional Hospital</i>     |
| <input type="checkbox"/> <i>IWK Health Center</i>            |  |

*We also offered teleconferencing to the following sites:*

- |  |  |
|--|--|
| <input type="checkbox"/> <i>Buchanan Memorial</i>            | <input type="checkbox"/> <i>New Waterford</i>          |
| <input type="checkbox"/> <i>Eastern Shore Memorial</i>       | <input type="checkbox"/> <i>Northside Harbour View</i> |
| <input type="checkbox"/> <i>Glace Bay</i>                    | <input type="checkbox"/> <i>Sacred Heart</i>           |
| <input type="checkbox"/> <i>Guysborough Memorial</i>         | <input type="checkbox"/> <i>St. Mary’s Memorial</i>    |
| <input type="checkbox"/> <i>Hants Community</i>              | <input type="checkbox"/> <i>Strait-Richmond</i>        |
| <input type="checkbox"/> <i>Inverness Consolidated</i>       | <input type="checkbox"/> <i>Twin Oakes Memorial</i>    |
| <input type="checkbox"/> <i>Musquodoboit Valley Regional</i> | <input type="checkbox"/> <i>Victoria County</i>        |



2. What is the current status of NSAMRT regulation?

*The new ACT, Bill 70, was passed into legislation in the spring of 2013. NSAMRT is now waiting for the regulations to be reviewed by the government. Once this is done, the College will be proclaimed and the new ACT will then govern MRTs. Sonographers will also become part of the College. The earliest this will likely happen will be spring 2017.*

3. How is the role of a regulator different from that of a union and an association?

*The role of a **regulator** is to serve and protect the public interest. Once proclaimed, the regulator protects the public by the setting of the standards of practice for MRTs and Sonographers, the setting of the entrance to practice requirements for MRTs and Sonographers, by ensuring ongoing competency of members is maintained through the continuing professional development (CPD) program and by addressing concerns through the complaints and discipline process.*

*The role of an **association** is to advocate for its members, to act as a voice on issues that affect its members and their practice. It provides services such as educational courses and conferences to its members.*

*The role of a **union** is to help resolve workplace issues by being a voice for employees and to the represent employees during contract negotiations. They play a role in ensuring employers meet their minimum obligations and investigate any suspected breaches of workplace safety or discrimination laws.*

*Currently, NSAMRT is an association with some regulatory capacity. The primary focus is member services, such as MRT education and advocacy. NSAMRT also has a regulatory role with the establishment of the entrance to practice standards as well as the ability to hear a complaint and discipline a member based on the 1967 ACT that the NSAMRT is governed by.*

*Once proclaimed NSAMRT and NSSDMS (sonography society) will join together to become the Nova Scotia College of Medical Imaging and Radiation Therapy Professionals (NSCMIRTP). NSCMIRTP will be a full regulatory college with stronger regulatory powers but will maintain a members' services branch that will allow us to continue to offer conferences and other education support to our members.*

4. What is the difference between working in a non-regulated environment versus a self-regulated or an umbrella-regulated environment?

*In a non-regulated environment, the employer sets the entrance to practice standards and there are no common ongoing minimum practice standards associated with the profession. For example, sonography is currently unregulated in Nova Scotia, so the employer sets the standards to practice. Nova Scotia Health Authority (NSHA) has established that sonography technologists must be registered with Sonography Canada, but this is employer driven and can change at any time by said employer. If the employer wished to hire someone and do on the job training, that would be the employers right to do so.*



Two current examples of what can happen when MRTs are **not** regulated:

- Because the ACT governing MRTs in Nova Scotia is from 1967 there are several large gaps in the legislation. It currently does not cover MRT positions outside a hospital environment. There is currently a MRT position being filled by a non-MRT who had on the job training. Under Bill 70 this will not happen.
- In Manitoba, MRTs are not regulated. The association reached out to MRT regulators across Canada last fall because certain parties were considering including multiple MRTs roles into the nursing scope of practice. Some nurses believe they are safe to perform CTs, x-rays, and MRIs with on the job orientation. Manitoba MRTs are hoping that regulators from other provinces will be able to explain to government how this is not in the best interest of public safety.

*Umbrella legislation is directed by the government. It brings multiple professional groups together and regulates them under one Act. The groups may or may not have a lot in common regarding scope of practice standards, entrance to practice guidelines, discipline processes etc. These are developed and determined by the government with input from the various professional groups that fall under the umbrella legislation.*

*Self-regulation is directed by the professional group itself whereby a professional group is in the best position to regulate their own practice and work as they have the best understanding of what the role and responsibilities of that profession are. With self-regulation the professional group develops their own entrance to practice standards, scopes of practices, CPD, and discipline process which all employers and members in the province must adhere to.*

*Members will pay dues for regulation regardless of whether it is umbrella legislation or self-regulation. When the NSAMRT surveyed umbrella legislation vs self-regulation across the country, the fees to members were similar.*

5. What difference will there be for MRTs once the College is proclaimed?

*The principle difference MRTs will see in their day to day practice will be the requirement of CPD. Currently, while not required, many MRTs are doing ongoing professional development on their own but are not formally tracking it. With CPD, all members will be required to do ongoing professional development and track what they are doing. Each year a percentage of the members will be audited for compliance to ensure that CPD is being done.*

6. What will the CDP program requirements be?

*The exact requirements are still being developed by the credentials committee who are reviewing what other Colleges require in Nova Scotia and other MRT regulators across the country are doing to inform our CPD framework. What we do know is that we want to ensure a flexible, broad framework that will allow MRTs a CPD program that works for all members. Activities like student preceptorship,*



*attendance at lunch and learns, conferences, and volunteering on committees will count towards CPD credits. While some activities performed during working hours can count towards CPD, it is unlikely that all CPD hours can be fulfilled this way.*

7. Will dues go up more once the college is proclaimed?

*There are currently no plans for additional dues increases. The executive council would like to establish a process and criteria to assess the need for any future dues increases. Once this is developed it will be shared with the membership.*

8. Will dues be reduced once reserve funds are established?

*No, dues will not be reduced once reserve funds are established because it will take several years to build reserve funds to the required levels. Once those levels are met, they must be maintained.*

*The operational reserve fund will not likely be touched from year to year, but will need to be adjusted according to changes in contracts and agreements. While the contingency fund and special projects funds are expected to be used each year therefore will require ongoing replenishment.*

9. Will there be a sliding scale for dues and CPD credits for part-time and casual employees?

*There will not be a sliding scale for CPD or dues.*

*Dues is payment for a license to practice, just as there is no sliding scale for a driver's license. The license means you have met the criteria to practice and you are legally entitled to work as an MRT in the province of Nova Scotia.*

*CPD is a means of ensuring that all MRTs and sonographers are maintaining currency with their profession. If you work part-time or casual you must remain up to date therefore you still require completion of the CPD requirements.*

10. Why was the new dues required?

*Multiple factors came together resulting in the need for a dues increase. The three principle ones were:*

- The NSAMRT was running at a deficit of \$15-\$25,000 annually. Day to day operations for NSAMRT were no longer being covered by the annual dues of the membership. The executive council had thought proclamation was going to occur sooner and had planned to implement the dues increase with the proclamation of the new College. With a change in government and the new health authority changes, proclamation has been delayed and it was no longer fiscally responsible to delay an increase any longer.*
- With movement toward the College, there are additional requirements that need to be met, including the formation of multiple committees to ensure the organization is ready for proclamation. Additionally, there are several organizations that the NSAMRT belongs to that require a commitment including the Alliance of MRT Regulators, the Network of Health*



*Regulators, and Canadian Network of Agencies for Regulation and Fair Registration Practices.*

- *The formation of reserve funds including an operational and contingency fund are essential components of sound financial health for an organization like the NSAMRT. These funds allocate resources for discipline and complaints investigations, legal representation, special projects and operations.*
- *As part of the NSAMRT strategic plan, hiring an Executive Director was identified as a critical role for the organizational succession plan and workload. The dues structure was based on a half-time position with the intent of transitioning to a full time position when proclamation occurs.*

11. *What is the added value of the dues increase?*

*With the increased revenues NSAMRT will be able to invest many areas including;*

- *ED (salary, travel expenses, professional memberships, incidentals, office expenses)*
- *Video/telecommunications platform*
- *Contingency fund*
- *Education for all volunteers (leadership & collaboration)*
- *Continuing Professional Development platform*
- *New website*
- *Support committee work*
- *Elimination of the deficit*

12. *Why was an executive director required?*

*NSAMRT currently has a membership of just over 600 members with 35 member volunteers performing most of the work. With the increasing time demands, volunteer burn out was a growing concern. In addition many of the other organizations NSAMRT is a member of meet during the day or in other provinces. This means volunteers were needing to take time away from work and often having to use vacation time to attend these meetings or on some occasions NSAMRT was not represented at these meetings as executive council members were unable to leave work.*

*It is no longer possible to sustain NSAMRT solely as a volunteer organization. NSAMRT needs to be represented in discussions and decisions that affect the practice and profession of MRTs. The workings of the Association has become much more complex in recent years as Medical Radiation Technologists form part of the collaborative provision of health services to Nova Scotians, and as the public expects more accountability from all health professionals. We simply cannot continue to operate as a volunteer organization. The hiring of an Executive Director was a necessary step to ensure the future of our profession.*

13. *What will the new College do for members?*

*The principle mandate of the new College will be protection of the public. What it will ensure is you as a member of the public and your family will be assured the MRT or sonographer providing patient care has met the minimum standard to practice and are doing ongoing maintenance of professional development.*



*As a MRT or sonographer you will know that your colleagues have met the ongoing requirements of membership, ensuring you are working with competent professionals. A regulatory body cannot advocate for the membership it advocates for public safety. However many of the issues MRTs are concerned with in clinical practice link back to safe and effective service to the public, the College can speak and advocate on these points.*

*NSCMIRTP will also continue to support members on an educational basis as this supports safe practice which is in the public's interest. The new College will continue to offer educational opportunities and support bursaries for members to attend conferences. Acceptable lists of conferences will be expanded to recognize that there are many conferences beyond the NSAMRT and CAMRT conferences that can benefit members.*

14. Getting time off and funding for education is very difficult. Will the College be able to help technologists?

*What NSAMRT is able to do is develop a better understanding of what the new policies at NSHA are for allowing time or funding for educational opportunities for employees. With a better understanding of the constraints on employers and employees, NSAMRT will strive to organize events that better meet the criteria for time off and funding.*

*NSAMRT will also continue to financially support lunch and learns, bursaries and other educational opportunities to help members more easily access education and CPD experiences.*

*One particular initiative NSAMRT is working on is an Atlantic conference that will be offered to all members of the four Atlantic regulators/associations with free registrations. We are currently looking at venues and possibilities to offer this in 2018.*

15. What is NSAMRT doing to be less Halifax centric?

*Some members vocalized the feeling that NSAMRT was a Halifax association and not a provincial one. Geography has played a role in how easy it is to participate at the executive and committee level. NSAMRT is trying to eliminate this barrier to become more reflective of its membership by making it easier for volunteers outside the Halifax area to contribute to NSAMRT. Currently there are approximately 5 individuals from outside Halifax area on committees. Two candidates for the Executive Council are from outside metro. During the June Annual General Meeting (AGM), one of these candidates was successful and will be a member of the 2016-17 Executive Council.*

*Moving forward the executive council and communications committee is reviewing ways to improve province wide participation and removal of barriers.*

*Each year, the AGM of the NSAMRT rotates around the province to avoid being held in one location.*

*With the new funding model, the NSAMRT was able to invest in an online voting platform for the first time this year to ensure every member has equal opportunity to vote. Historically, only those*



members who attended the AGM were able to vote for positions on the Executive Council. This year 45% (300 members) cast votes!

16. Why was the new dues rate communicated to members with short notice?

*The new dues rate was communicated to the membership on several occasions over the past 8 years. What became apparent to the executive council, after the specific amount was announced in Sept 2015, was that communication was not effectively reaching the membership.*

*The Executive Council made every attempt to be transparent but recognizes that the communication strategies could have been better, particularly that more than e-blasts should have been used to keep members both informed and up to date.*

*In addition while a rough estimate of the dues was given several years ago no exact number was given to members until Sept 2015. Council wanted to wait to ensure the dues rate was based on sound financial principles and that the amount would be what NSAMRT required to be sustainable.*

*With the deficit increasing annually and the decision to hire an ED, the executive council realized a dues increase was needed for 2016. It took time to complete a proper financial review to ensure the required amount of dues was based on sound financial principles and evidence. This meant an exact number was not available until Sept. 2015. Ideally members should have been given more notice and going forward a process will be developed to better inform members of any change in dues structure.*

*To read a detailed account of communications from the executive council re the new dues rate please follow the link to the NSAMRT website which contains a full time line.*

*<http://nsamrt.ca/edops/index3.php>*

17. What was the purpose of the site visits?

*As part of the strategic plan communication strategy, the executive council decided to do site visits as part of improving communication with its members. In the fall of 2015 it became clear to the executive council while information was being sent out to members it was not reaching members at the level required to have an informed membership.*

*The executive council is in the process of developing a multipronged communication strategy in order to better disseminate information to members. Site visits allowed for two way communication with hundreds of members across the province. By listening to members, the executive council is able to increase membership input and engagement levels, which are both important outcomes for NSAMRT.*

*Feedback on the site visits has been informative and the executive council is evaluating the option of future site visits.*

18. Can payroll deduction be done at our site and be remitted to NSAMRT each year?

*Several issues around payroll deduction came to light when NSAMRT was doing site visits across the province this spring. We discovered not all facilities provided the option for payroll deduction , the*



*amount deducted varied across the province and once collected , some employers did not submit monies to NSAMRT directly (they returned it to the employees)*

*While NSAMRT does not have the ability to force an employer to provide payroll deduction for employees, NSAMRT and NSHA have been working together to develop a common standard across the province. It is unlikely that this year payroll deduction will be possible in sites that are not already doing it. In 2017 NSHA and NSAMRT hope to be offering payroll deduction to all MRTs that will be forwarded directly to NSMART.*