| Health and Other Legislation Amendment Bill 2022 | | |
|--|--|---|
| Sı | ubmission No: ubmitted by: ublication: | 4 Australian Diagnostic Imaging Association |
| A | ttachments: | |
| Sı | ubmitter Comments: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |



australian diagnostic imaging association

HEALTH AND OTHER LEGISLATION AMENDMENT BILL 2022

Submission to Health and Environment Committee, December 2022

Thank you for the opportunity to provide a submission on the *Health and Other Legislation Amendment Bill 2022.*

ADIA is the peak body for radiology practices, representing over 750 clinics throughout Australia, both in the community and in private and public hospitals. ADIA promotes the ongoing development of policy, standards, and appropriate funding to ensure that all Australians have affordable access to quality radiology services (including nuclear medicine). This supports radiology's central role in the diagnosis, treatment, and management of a broad range of conditions in every branch of medicine, including almost all cancers.

If you have any questions about this submission, please contact Chris Kane (CEO) on or

This submission refers to the Explanatory Notes.

Notifications to the Queensland Cancer Register

The Bill amends the *Public Health Act 2005* to, *inter alia*, "modernise the Queensland Cancer Register so that it more accurately reflects the incidence of cancer and knowledge regarding cancer-related treatments in Queensland by extending notification requirements to diagnostic imaging practices and enabling additional data to be collected from existing notifiers" (page 2).

ADIA supports the Queensland Government's aspiration to include radiology data in the Queensland Cancer Register, and has engaged directly with Cancer Alliance Queensland (CAQ) and Queensland Health on development of the proposal since September 2021.

Determining whether each radiology service provided in Queensland is in-scope – "where a diagnostic imaging procedure, such as a scan, indicates that the individual has, has had, may have or may have had cancer, and the director of the diagnostic imaging practice reasonably suspects that the procedure was carried out to identify whether cancer is present, or to support or inform treatment of the cancer" (page 16) – would be a very time-consuming process for the reporting radiologist and radiology practice. We are pleased that Cancer Alliance Queensland is building a tool to automate this process for radiology practices (page 17), with a pilot currently being conducted between an ADIA member and CAQ.

However, there is still substantial work required to finalise and implement the tool within Queensland radiology practices. ADIA strongly suggests that there are measures in place if this tool is not ready to begin notification before the amendments commence 12 months after proclamation. (page 18).

Approved by: Chris Kane, CEO