



Medical Physics certification in Africa

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Current status is widely varied



- SAF: highly developed system including annual re-licensing and CPD compliance and auditing. Highly regulated. Medical physicists are part of the Medical and Dental Board (Medical Science Committee including Medical Biological Scientists and Genetic Counsellors).
- GHA: well developed system
- NAM, KEN and BOT recognizes SAF (and other?) system.
- GHA and ZIM: Registration with Allied Health Board
- Overseas qualifications accepted
- Several countries have academic programmes

Regional Initiatives



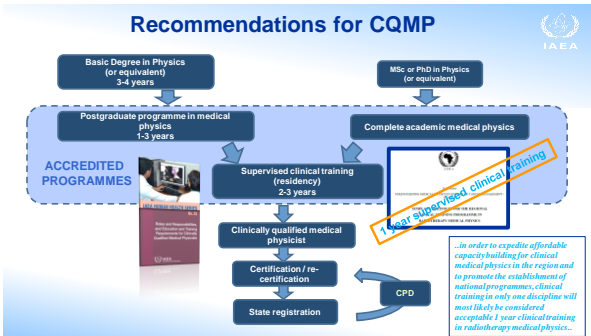
- Professional societies (FAMPO survey)
 - CMR, EGY, GHA, KEN, NER, NIR, MOR, SAF, TUN and UGA
 - This is based on a survey conducted by FAMPO but we are unsure of the validity of the information.
 - No known intra-regional cooperation
- National initiatives to introduce structured clinical training
 - ALG, ETH, KEN, MAR, MOR, NIR, SUD, TUN, UGA, ZAM, ZIM

IAEA support to Medical Physics

Medical Physics
 Why the involvement of the international association of physicists in medicine
 IAEA contribution to international harmonization of guidelines for clinical medical radiation physicists
 International Atomic Energy Agency, Vienna, Austria

HOW IAEA SUPPORTS EFFORTS TO INCREASE THE NUMBER OF QUALIFIED MEDICAL PHYSICISTS WORLDWIDE
 H. Deho, K. Christaki, J. Lewiska, G. Leoni, G.L. Poli, S. Samsomandjrah, P. Toroi, D. van der Meer
 Division of Medical Radiation Physics Section, Division of Human Health, Department of Nuclear Sciences and Applications, International Atomic Energy Agency

Medical Physics International



Documentation: portfolio

Examples of documents that the portfolio can incorporate:

- Curriculum vitae
- Progress reports
- "Summary of Competency Achievement" demonstrating the level of **competency** achieved in each sub-module
- Samples of work prepared by the Resident. The samples of work could be:
 - ❑ Departmental reports, e.g. commissioning and clinical implementation of new equipment or treatment technique.
 - ❑ Assignments on key competencies.
 - ❑ A presentation delivered covering key aspects of the module

The **clinical supervisor** will examine the portfolio at regular intervals and provide feedback to the Resident.

The **National Coordinator** will review the portfolio at the end of the Resident's programme and rate the portfolio as satisfactory or unsatisfactory.

The portfolio itself is evidence of having undergone a clinical training programme. It can also serve as a baseline reference for **self-study and lifelong learning**

Documentation: portfolio (RAF)



Documentation: portfolio (RAF)



TABLE 3.1. PORTFOLIO FOR THE MODULE: EBRT Reference Dosimetry including instrumentation and calibration. (TCS No. 17 Sub-module 1.1, 1.2, 1.3, 1.4, 1.5) FROM THE REGIONAL CLINICAL TRAINING PROGRAMME FOR RADIO THERAPY MEDICAL PHYSICS RESIDENTS. THE SUGGESTED DURATION FOR THIS MODULE IS 5 WEEKS.

SUB-MODULE	ACTIVITY	PROCEDURES TO ACHIEVE COMPETENCY	COMMENTS, ACHIEVEMENT AND DATE OF SUPERVISOR
kilovoltage therapy	Instrument quality control (QC), calibration and cross-calibration of field dosimetry systems	Selection criteria for type of ionisation chamber Demonstrate a familiarity with QA recommendations for radiative dosimetry equipment such as: • Electrode • Barometer • Pressure • Geometry Check the traceability to a PDE for a calibration frame used for detector dose determination Demonstrate a familiarity with the method to express uncertainty in dose measurement	
	Beam quality	Perform measurements and establish the EFT ₂ for a low and medium energy X-ray beam according to an International Code of Practice	
	Output calibration	Influence factors on the measured quantity (air density, recombination, polarity, temperature, etc. effects, leakage, humidity) Formulation Application of an International Code of Practice, e.g. ICRU-277 [1] and TRS-398 [2]	
⁶⁰ Co teletherapy	Instrument QC, calibration and cross-calibration of field dosimetry systems	Selection criteria for type of ionisation chamber Demonstrate a familiarity with QA recommendations for radiative dosimetry equipment such as: • Electrode • Barometer • Humidity	

The clinical supervisor(s) "signs off" on satisfactory completion of a competency assessment and that the portfolio is kept up-to-date.

IAEA support of the MMP



Syllabus of the MMP and clinical medical physics programme based on the IAEA documents (IAEA-TCS-56, TCS-37, TCS-47 and TCS-50) and RAF documents. IAEA support: selection, fellowships, evaluation.



African Regional Co-Operative Agreement for Research, Development and Training Related to Nuclear Science and Technology (AFRA)

ACADEMIC AND CLINICAL TRAINING PROGRAMMES AND PORTFOLIOS FOR THE REGIONAL TRAINING IN MEDICAL PHYSICS

Minimum Requirements for Medical Physics Education in AFRA Member States

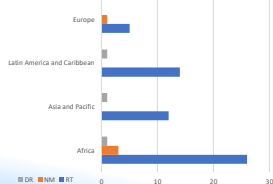


ICTP MMP graduation 2017/2018
<https://www.ictp.int/about-ictp/medical-centre/news>

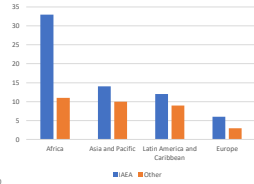
IAEA support of the MMP



Thesis topics of MMP graduates per Region



MMP fellows: sponsor per Region



The survey of MMP graduates



The survey aimed at evaluating the results of the programme in terms of capacity building. In particular the following points were investigated:

- rate of graduates returning to their home country (best-case scenario) or returning to the same Region
- rate of graduates working as clinical medical physicists or working in a non-clinical environment, but in an area related to medical physics
- local recognition of the MMP degree
- status of medical physics in the graduates' countries (indicators: existence of professional association, certification process and CPD credits) and graduates involvement in such professional activities
- graduates' degree of appreciation of the programme
- use of educational material or knowledge acquired during the MMP in their current profession

Certification (global survey 2017)

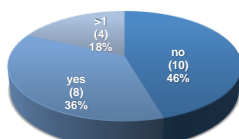


Availability of national certification process

Existence of a national professional association

Certification available?

National professional association?



Recognition and harmonization of the profession

Proposed structure of a certification body



- Executive (strategic, communication, finances and administrative)
- Governance (legislative and ethics)
- Operational (assessment criteria, accreditation, CPD)
- Assessment committee
- Appeals
- Preferably embodied within an existing Health professions council

Draft IAEA publication: *Guidelines for the certification of Clinically Qualified Medical Physicists (2020)*

AMPLE: IAEA e-learning



Cyber Learning Platform for Nuclear Education and Training (CLP4NET)

Advanced Medical Physics Learning Environment (AMPLE) is an e-learning programme run by IAEA under a RCA project named "Strengthening the effectiveness and extent of medical physics education and training"



Groups in AMPLE



The purpose of the "groups" is to maintain confidentiality (e.g. residents work and grades). Groups also facilitate collaboration among "roles".

For example groups of:

- Resident
- Clinical Supervisor
- National Speciality Coordinator
- National Program Coordinator

Groups in proposed Certification Platform



The purpose of the "groups" is to maintain confidentiality (e.g. registrants and assessors). Groups also facilitate collaboration among "roles".

For example groups of:

- Administrators
- Assessors, executive
- Registrants (role of voluntary, fully and partially certified professionals)
- National Program Coordinator
- Access to CPD activities (online)

FAMPO initiative with coordination by IAEA

Conclusion



- Diverse situation
- The acceptance of a clinical training programme as a competency-based initiative is a difficulty for many authorities. The FAMPO initiative may encourage recognition.
- Adapting the guidelines has led to some success in Africa
- The ICTP MMP programme has yielded encouraging results albeit not a perfect solution
- Imaging medical physics is lagging
