



RADIATION PROTECTION COMMISSION

Sorbonne Building, Unit F22, Mosta Technopark, Mosta

Radiation Protection Expert Approval Application

(in compliance with Basic Safety Standards for Ionising Radiation Regulations, SL 585.01)

Name _____

New applicant Re/approval Cert. No.: _____

Home Address _____

Phone _____ Fax _____

Mobile _____ e-mail _____

Work Address _____

Phone _____ Fax _____

Mobile _____ e-mail _____

Application for which applicant seeks approval as Proposed Radiation Protection Expert

Radiation Protection Expert Area		
1	Diagnostic Radiology	
2	Radiotherapy	
3	Nuclear Medicine	
4	Dentistry	
5	Veterinary Radiography	
6	Non-Destructive Testing	
7	Fixed Gauges and fixed screening devices	
8	Mobile gauges and mobile screening devices	
9	Research with un-sealed sources	
10	Research with x-ray equipment and sealed sources	
11	Other application	

Requirement 1 : Continued Active Employment

A Radiation Protection Expert needs a minimum of 60 months experience in the preceeding 6 years.

Such employment must have covered the minimum number of years outlined in the Guidance document (DOC 53) and must be related to radiation work.

List the total number of months of active employment in a radiation related area by adding all the months in active employemnt claimed in the positions below.	Months
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Summary of work engagements

Use this page and the following page as necessary to document your continuing active employment. This can also include any part time work. For each engagement, you are required to name an individual who can supply verification of occupational activities and has knowledge of your job functions.

Note: For part time work: 1 Month is equivalent to 170hrs

Position No. 1

Dates of employment: _____
Start date End Date Total time (Months)

Facility Name _____

Employer Contact Name: _____

Facility Address _____

Employer Contact Telephone No: _____

In the space below, provide a summary of the summary of work performed during this engagement.

Position No. 2

Dates of employment: _____
Start date End Date Total time (Months)

Facility Name _____

Employer Contact Name: _____

Facility Address _____

Employer Contact Telephone No: _____

In the space below, provide a summary of the summary of work performed during this engagement.

I hereby attest the foregoing occupational summary record to be a true account of my work experience. The RPC has my consent to make inquiries as necessary to verify my claimed occupational activities.

Signature

Date

Summary of work engagements (continued)

Photocopy this page as necessary to document your continuing active employment.

Position No.

Dates of employment:

Start date

End Date

Total time (Months)

Facility Name

Employer Contact Name:

Facility Address

Employer Contact Telephone No:

In the space below, provide a summary of the summary of work performed during this engagement.

Position No.

Dates of employment:

Start date

End Date

Total time (Months)

Facility Name

Employer Contact Name:

Facility Address

Employer Contact Telephone No:

In the space below, provide a summary of the summary of work performed during this engagement.

Position No.

Dates of employment:

Start date

End Date

Total time (Months)

Facility Name

Employer Contact Name:

Facility Address

Employer Contact Telephone No:

In the space below, provide a summary of the summary of work performed during this engagement.

Requirement 2 : Points

The demonstration of an effort to keep up to date, contribute to knowledge, or maintain continued growth in the areas the individual is approved in, by obtaining the minimum points required in document DOC 53, by engaging in one or more of the seven categories below.

If needed, each page can be photocopied in order to add additional activities within each category.

Supporting documentation is required for all points claimed. All supporting documentation shall be keyed by section number to the proper section of the application and attached to the back of this application.

A. Regulatory Learning Activities

- 1.1 Attending a national meeting on radiation protection legislation in Malta that has been notified to the Commission

Appropriate documentation: attendance certificates.

Notes on filling in the table below:

Document Number: The number written down should be marked on the verification document/s supplied.

Training Course: The name of the training course or workshop.

Document Description: State what kind of document is being attached, eg. Certificate of attendance, examination result, letter of verification etc.,

Number of Points: Write the number of points from the list provided in Annex 1 for each activity.

Doc. No.	Event	Cat. No.	Document Description	Number of Points
1a				
1b				
1c				
1d				
1e				
Total Number of points for this category.				

B. General Learning Activities

- 2.1 Attendance at international, radiological meeting
- 2.2 Attendance at, national radiological meetings of professional societies
- 2.3 Attending a radiation related course/workshop organised within an undertaking
- 2.4 Online virtual real-time radiation related meeting or presentation
- 2.5 Planned self-directed radiation related learning, e.g computer-based e-learning.
- 2.6 Visits to overseas departments for special training
- 2.7 Membership of radiation protection related body, committee, working group or official sub-committees
- 2.8 Formal non-radiation safety related on the job training activities and experiences, e.g. development of interpersonal skills, time management etc.

Appropriate documentation: attendance certificates, pass certificates of examination taken during courses, letters of enrollment etc.

Notes on filling in the table below:
Document Number: The number written down should be marked on the verification document/s supplied.
Training Course: The name of the training course or workshop.
Document Description: State what kind of document is being attached, eg. Certificate of attendance, examination result, letter of verification etc.,
Number of Points: Write the number of points from the list provided in Annex 1 for each activity.

Doc. No.	Event Training Course, Meeting, etc.	Cat. No.	Document Description	Number of Points
2a				
2b				
2c				
2d				
2e				
2f				
2g				
2h				
2i				
2j				
2k				
2l				
2m				
2n				
2o				
Total Number of points for this category.				

C. Practice Activities

- 3.1 Documented advice to undertaking on regulatory obligations not related to medical exposures
- 3.2 Development of Radiation safety programme implemented in an organisation.
- 3.3 Documented example of the development of safety culture within an organisation
- 3.4 Documented example of optimisation of the radiation protection
- 3.5 Documented design of new facilities.
- 3.6 Workplace, environmental and individual monitoring
- 3.7 Waste management
- 3.8 Direct responsibility of Radiation Protection at a facility
- 3.9 Performing RP Risk Assessment per practice area
- 3.10 Performing a RP Safety Audit
- 3.11 Emergency response preparations
- 3.12 Accident and incident investigation.
- 3.13 Training of exposed workers.
- 3.14 Supervision and mentoring of staff
- 3.15 Preparation and delivery of formal lectures or seminars, first presentation
- 3.16 Repeat delivery of formal lectures or seminars.
- 3.17 Publication of an RP related paper in a recognised scientific journal
- 3.18 Oral or poster presentation on a radiation protection

Appropriate documentation: The first page of the article or paper is adequate, provided that the title, the author(s), name(s) and the name and date of the publication appear. Official membership certificate, letters of appointment etc.

Doc. No.	Title	Cat. No.	Document Description	Number of Points
3a				
3b				
3c				
3d				
3e				
3f				
3g				
3h				
3i				
3j				
3k				
3l				
3m				
3n				
3o				
3p				
3q				
3r				
3s				
3t				
3u				
3v				
3w				
3x				
3y				
3z				
Total Number of points for this category.				

Documented Evidence attached to this application

	Copy of qualification required	
Section	Total No. of documents	Total No. of sheets
A		
B		
C		

DECLARATION OF CONSENT FOR CONTACT DATA TO BE AVAILABLE PUBLICLY

Please tick box if consenting or leave blank if you do not approve.

If successful I consent to have my contact details (phonre & email address) included on a list of Approved Radiation Protection Expert which will be made available on the RPC's website

Note: In accordance with the published Criteria for RPE Approval your name and area of expertise will be listed in the publicly available register on the RPC website.

DECLARATION OF THE AUTHORISED OR RESPONSIBLE PERSON

I, (name and surname) _____ certify that the information provided in this form is correct.

I.D. Number: _____

Signature : _____

Date : _____

The Radiation Protection Commission will process your data in accordance with the principles of the Data Protection Act. We will not release any Information held about you to third parties except where necessary for the fulfillment of this application. We may process your address, telephone, fax or e-mail details to contact you in connection with this application. Completion and submission of this application form signifies your consent to the processing of this data. Please contact us if you would like us to inform you about the personal data we hold about you or if you require such data to be corrected.

Return of Forms

Completed forms to be sent to
Radiation Protection Commission
Sorbonne Building
Unit F22
Mosta Technopark
Mosta MST 3000

APPENDIX 1

The list below outlines three (3) different activities that, if carried out, will award points towards the Continuing Professional Development of an individual aspiring to become approved as a Radiation Protection Expert or for subsequent re-approval. An individual will have to meet the number of points required for each practice as listed in guidance document DOC 53 RPE Criteria.

An individual approved as a Radiation Protection Expert in one area of practice and who wishes to become approved in another area can use the number of points acquired in the approved practice area towards his application in another practice area. Similarly, an individual applying for multi practice area, will only need the number of points of that practice area that carries the maximum number of CPD points.

			Max per year	Max per 5 years	Minimum % of total points in 5 years
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A	Regulatory Learning	1	Attending a national meeting on radiation protection legislation in Malta, Such meetings be notified to the Commission 2 points per hour	8	20	10%
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B	Learning	1	Attendance at international, radiological meeting 2 points per hour	15	25	20%
		2	Attendance at, national radiological meetings of professional societies 1 point per hour	4	10	
		3	Attending a radiation related course/workshop organised within an undertaking. 0.5 point per hour	4	10	
		4	Online virtual real-time radiation related meeting or presentation 0.5 point per hour	4	10	
		5	Planned self-directed radiation related learning, e.g computer-based e-learning. 2 point per topic	2	10	
		6	Visits to overseas departments for special training 4 point per day	12	20	
		7	Membership of medical physics related body, committee, working group or official sub-committees 2 points per year	2	10	
		8	Formal non-radiation safety related on the job training activities and experiences, e.g. development of interpersonal skills, time management etc. 1 point per topic	2	10	

C	Practice	1	Documented advice to undertaking on regulatory obligations not related to medical exposures 2 points per documented activity	4	20	
		2	Development of Radiation safety programme 10 point per complete radiation safety programme developed	10	30	
		3	Documented example of the development of safety culture within an organisation 2 points per documented activity	4	12	
		4	Documented example of optimisation of the radiation protection 2 points per documented activity	8	24	

5	Documented design of new facilities. 4 points per facility	4	12
6	Workplace, environmental and individual monitoring 2 points per documented advice/analysis of results	4	12
7	Waste management 2 points per documented advice	4	12
8	Direct responsibility of Radiation Protection at a facility 4 point per assignment of responsibility.	8	24
9	Performing RP Risk Assessment per practice area 2 point per initial risk assessment 1 point per adapting existing risk assessment	4	20
10	Performing a RP Safety Audit 5 point per Safety Audit	10	20
11	Emergency response preparations 2 points per documented activity	4	15
12	Accident and incident investigation. 4 points per investigation	8	20
13	Training of exposed workers. 1point per contact hour	4	20
14	Supervision and mentoring of staff 2 points per 8 contact hours with 1 or more staff member(s)	6	18
15	Preparation and delivery of formal lectures or seminars, first presentation 4 points per development and delivery of 1 hour lecture	8	16
16	Repeat delivery of formal lectures or seminars. 0.5 points per hour of repeat delivery	2	10
17	Publication of an RP related paper in a recognised scientific journal Lead author=50 pts Co-author= 50pts/number of authors)	50	50
18	Oral or poster presentation on a radiation protection, 10 points for oral presentation at international event 5 points for poster presentation at international event 5 points for oral presentation at national event 2 points for poster presentation at national event	10	30

50%