

## Document Control Report

<b>Title</b>			
The Quality Assurance of Procedures Standard Operating Procedure - IR(ME)R 2017			
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		Radiology	
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1.0	Sept 2017	Final	Approved and signed off by the Lead Clinician for Radiology
1.1	Nov 2017	Final	Amendments to document made following CQC IR(ME)R inspection
2.0	Sept 2020	Final	Reviewed and Updated to include IR(ME)R 2017 regulations in the references and text.
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Standard Operating Procedure		Referrers, practitioners and operators.	
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<b>Superseded Documents</b>			
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September 2020		September 2023	Three years
<b>Consulted with the following stakeholders:</b>		<b>Contact responsible for implementation and monitoring compliance:</b>	
<ul style="list-style-type: none"> <li>• Clinical Audit lead Radiology</li> <li>• Radiologists</li> <li>• Radiographers</li> <li>• Practitioner Referrers</li> <li>• Medical Physics</li> </ul>		Radiology Governance Lead	
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<b>Approval and Review Process</b>			
<ul style="list-style-type: none"> <li>• Lead Clinician in Clinical Radiology</li> </ul>			

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**Policy categories for Trust's internal website (Bob)**

Radiology

**Tags for Trust's internal website (Bob)**Referral, Referrer, Practitioner, Operator,  
Medical Physics,

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### 1. Introduction

IR(ME)R (2017) regulations describe quality assurance as “any planned and systematic action necessary to provide adequate confidence that a structure, system, component or procedure will perform satisfactorily and safely complying with agreed standards and includes quality control”

**This does not apply to quality assurance of radiography equipment**, it applies to the quality assurance of procedures in place under IR(ME)R to ensure safe working practice.

It is essential that all procedures both work and are seen to work; all procedures need to be regularly reviewed or audited to ensure continued adherence to regulations.

## 2. Purpose

The Standard Operating Procedure (SOP) has been written to:

- Ensure Quality Assurance (QA) programmes are in place to review all SOPs in relation to IR(ME)R.
- To ensure all of these procedures are regularly reviewed to ensure that they are effective and applicable as well as identify any changes that may be necessary in the future.

## 3. Scope

This Standard Operating Procedure (SOP) relates to the following staff groups who may be involved in both the making of medical imaging exposures and the audit or review of procedures:

- Radiographers (Operators)
- Radiologists (Practitioners)
- Medical Physics
- Clinical Audit Lead Radiology

## 4. Location

This Standard Operating Procedure applies to the Radiology Departments at the North Devon District Hospital, Barnstaple; Bideford and District Hospital, Bideford; and Tyrell Hospital, Ilfracombe.

Staff undertaking ionising radiation exposures at these sites must be able to demonstrate competence as per the organisations policy on assessing and maintaining competence, and be involved in the auditing and review of QA programmes.

## 5. Equipment

All Standard Operating Procedures for IR(ME)R over the above sites are included along with the necessary equipment used to ensure the quality assurance of these procedures.

## 6. Procedure

Regular audits are essential to ensure that:

- Standard Operating Procedures are up to date and effective.
- QA programmes for IR(ME)R are appropriate and being followed.
- All procedures are working and being seen to work.

Audit of the IR(ME)R employers procedures will take place in their entirety every three years. This will be accomplished by auditing at least four of the procedures per year.

All Audits will be registered with the Trust Clinical Audit and Effectiveness Programme which allows them to be monitored and documented through each phase (planned, active, action phase and completed). It will also allow transparency throughout the Trust as to what is being audited and results published.

These audits will be undertaken by or supervised by one of the 3 Radiation Protection Supervisors (RPS) in the department. A minimum of 10 patients will be selected at each audit and checked to ensure that the procedure being audited is being adhered to in each case.

As well as the registered audits of procedures regular dose and DRL audits, reject analysis and medical imaging examinations audits will be performed monthly within the department by the RPS, or delegated individual, to ensure doses are being kept as low as is reasonably practicable. These 'mini' audits will be documented on the radiology G Drive (Public G:/ Clinical governance/IR(ME)R/Audit) and will be produced for review at the biannual Radiation Safety Group meeting.

The results of all QA audits will be reviewed, along with reviewing and amending of any procedural changes relating to IR(ME)R at the Radiation Safety Group Meeting that is held biannually.

The Annual Radiology Department Audit Meeting will involve all staff groups within the department; results and feedback from audits will be disseminated here. Any urgent or unexpected findings of audit that need immediate dissemination will be done via the email cascade, radiology newsletter and staff meetings.

## 7. References

Ionising Radiation (Medical Exposures) Regulations 2017. Statutory Instruments 2017 No 1322

[http://www.legislation.gov.uk/ukxi/2017/1322/pdfs/ukxi\\_20171322\\_en.pdf](http://www.legislation.gov.uk/ukxi/2017/1322/pdfs/ukxi_20171322_en.pdf)

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- Radiology authorisation and IRMER assessment working practice document.
- Ionising (Medical Exposures) Regulations 2000. Statutory Instruments 2000 No 1059 – <http://www.opsi.gov.uk/si/si2000/20001059.htm>

- IRMER – Ionising Radiation (Medical Exposures) Amendment Regulations 2006  
[http://www.opsi.gov.uk/si/si2006/uksi\\_20062523\\_en.pdf](http://www.opsi.gov.uk/si/si2006/uksi_20062523_en.pdf)
- Society of Radiographers (2012) IR(ME)R 2000 and IR(ME) Amendment Regulations 2006 & 2011 - <http://www.sor.org/learning/document-library/irmer-2000-and-irme-amendment-regulations-2006-2011/1-irmer-employers-procedures#e-quality-assurance-programmes>

## 8. Associated Documentation

Northern Devon Healthcare NHS Trust Policies for:

- Northern Devon Healthcare NHS Trust Radiation Policy