

CQC RPH IR(ME)R FINAL REPORT ACTION PLAN (230109)

Ref No	Area Of Ownership /Responsibility	Reason(s) for Recommendation	Priority	Actions required	Action Assigned to	Action deadline	Progress / Evidence of completion	Status
CQC IR(ME)R Inspection 2022 Action 001	Cardiology/Radiology	Referral guidelines were not available for the clinical cath lab procedures AND The service's inventory of radiological equipment did not include all the information required 7 by the legislation, namely the model number, serial number or unique identifier and year of manufacture AND The service used training records to ensure that all practitioners and operators, were adequately trained, however, not all education and training was documented and up to date.	1	Create action plan	Cardiology / Radiology	09.01.23	See below	Closed
FINAL REPORT: The employer must ensure referral guidelines are available for Cardiology								
Final Report FR 01	Cardiology	Referral guidelines were not available for the clinical cath lab procedures	2	New Cardiology procedural document DNxx Ionising Radiation Procedures for Cardiology to reference referral guidance and pathways	SB / EP / DB	13.01.23	Document drafted and reported to RPC and Health and Safety Committee (Chair's Action for latter). Now awaiting sign off 10.01.23 at Quality & Risk Management Group.	Open
FINAL REPORT: The equipment inventory must contain all the information required in this regulation								
FR 02	Radiology	The service's inventory of radiological equipment did not include all the information required 7 by the legislation, namely the model number, serial number or unique identifier and year of manufacture	2	Existing equipment register to be updated include model number. Register includes cardiology imaging equipment.	AB	13.01.23	Action completed	Closed
FINAL REPORT: The employer must keep and have available an up-to-date record of all relevant training by all practitioners and operators								
FR 03	Radiology/Cardiology	The service used training records to ensure that all practitioners and operators, were adequately trained, however, not all education and training was documented and up to date.	2	Have a clear training needs analysis in relation to the IR(ME)R 2017 regulation of what is required per role (this should include significant accidental and unintended exposures [SAUE] training to identify exposure)	Radiology HR	28.02.23	Training needs analysis in progress with RPH Education Team.	Open
			2	Collate all current personnel and training records to evidence the training required by IR(ME)R 2017 Scope central systems for recording.	Radiology HR	28.02.23	Underway.	Open
			2	Have a clear training needs analysis in relation to the IR(ME)R 2017 regulation of what is required per role (this should include significant accidental and unintended exposures [SAUE] training to identify exposure)	Cardiology EP/MB	28.02.23	Training needs analysis in progress with RPH Education Team.	Open
			2	Collate all current personnel and training records to evidence the training required by IR(ME)R 2017 Scope central systems for recording.	Cardiology EP/MB	28.02.23	Underway.	Open

Actions to be monitored at local divisional level and reported to the Radiation Protection Committee (RPC)
Governance pathway will be:
 RPC
 Health & Safety Committee
 Quality & Risk Management Group
 Quality & Risk Committee (sub-board level)