**IR(ME)R, CQC and auditing referrers practice in BNSSG General Practice - checklist**

**CQC**

The CQC are regulators for the [Ionising Radiations (Medical Exposures) Regulations 2017 (and subsequent updates) aka IR(ME)R](https://www.gov.uk/government/publications/ionising-radiation-medical-exposure-regulations-2017-guidance/guidance-to-the-ionising-radiation-medical-exposure-regulations-2017) and expect any individuals referring for imaging comply with IR(ME)R regulations and request within the individuals agreed scope of practice and entitlements [Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) - Care Quality Commission.](https://www.cqc.org.uk/guidance-providers/ionising-radiation/ionising-radiation-medical-exposure-regulations-irmer)

**IR(ME)R**

[IR(ME)R](https://www.legislation.gov.uk/uksi/2017/1322/contents) is a law and is designed to protect patients from unintended consequences of ionising radiation exposures by insisting that a framework is in place to ensure all radiation exposures are justified and optimised. If a patient receives an unintended or accidental radiation exposure which is deemed 'significant' or 'clinically significant', the event (incident) needs to be reported to the CQC IRMER inspectorate by the site that performed the radiation exposure.   This is usually reported by a Medical Physics Expert appointed by that site to advise on IRMER compliance.

There are many criteria under which an exposure can be deemed significant or clinically significant and if this referral has been generated by an individual employed at the practice the GP Practice may be named in an incident and a subsequent investigation undertaken. If this is the case, GP Practices may wish to highlight that they were involved in an IRMER radiation incident in future CQC communications as good practice.

**Audit**

As part of the 2024 amendments to [IR(ME)R Regulation 7](https://www.gov.uk/government/publications/ionising-radiation-medical-exposure-regulations-2017-guidance/guidance-to-the-ionising-radiation-medical-exposure-regulations-2017) is around clinical audit. This regulation requires the employer’s procedures to provide for the carrying out of clinical audit activities relating to healthcare, involving exposures to ionising radiation, and may be carried out by a range of professionals.

To comply with this regulation practices can utilise the audit template found on [ALMC Imaging Guidance for Non Medical Referrers](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) for **ALL STAFF WHO REFER FOR IMAGING.**

**CHECKLIST**

|  |  |  |
| --- | --- | --- |
| **ACTION** | **COMMENTS** | SIGN & DATE |
| **ONBOARDING – see process on** [ALMC Imaging Guidance for Non Medical Referrers.](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) | | |
| Individual NMRs, Supervisors and employers have read the Protocol and are aware of the NMR criteria, imaging entitlement for their profession or level of practice and onboarding process. |  |  |
| All NMRs have completed the ‘Imaging Competency Assessment form’ found [here](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) and retained as evidence. \*This needs to be updated every 3 years following IR(ME)R training. |  |  |
| All NMRs have completed the ‘Referrer Confirmation of Competence’ form found [here](:%20ALMC%20Imaging%20Guidance%20for%20Non%20Medical%20Referrers) and sent as per the onboarding process found on the above link.  *\*This needs to be updated every 3 years following IR(ME)R training.* |  |  |
| All NMRs are logged on the ‘Onboarding template for Practices’ found [here](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) |  |  |
| **SUBCONTRACTED STAFF** |  |  |
| All subcontracted staff have read the protocol and relevant SOP found [here](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) and are compliant with adhering to processes. |  |  |
| **ADVANCED PRACTITIONERS** |  |  |
| All Advanced Practitioners staff have read the protocol found [here](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/) and are compliant with adhering to processes.  *\*entitlements may change for APs but for now they need to adhere to those in the protocol for their profession.* |  |  |
| **ICE SYSTEM – training and application** |  |  |
| Guidance can be found on the following REMEDY page [ICE System for Radiology & Pathology](https://remedy.bnssg.icb.nhs.uk/adults/radiology-imaging/ice-system-for-radiology-pathology-referrers/) |  |  |
| All staff are registered in ICE using their full registered name, correct profession and if applicable, registration number. |  |  |
| All staff are aware that their entitlements on ICE may not reflect their scope on the imaging protocol so only request within the scope on the protocol |  |  |
| All staff have accessed & completed ICE training |  |  |
| **INDEMNITY** |  |  |
| Individual NMRs, supervisors and employers have this additional skill is covered through GP Indemnity (MDU etc) |  |  |
| **AUDIT** |  |  |
| Facilitation of Individual NMRs, supervisors and employers to undertake an audit of practice (as per the guidance) and utilising the form found here  [ALMC Imaging Guidance for Non Medical Referrers](https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/). – this maybe requested at any time from the imaging managers. |  |  |
| EMIS SNOMED code of ‘plain Xray’ to be used when requesting an image to allow for auditing of results |  |  |
| **TRAINING** |  |  |
| Individual NMRs, supervisors and employers ensure IR(ME)R training for NMRs is updated every 3 years. See REMEDY & ALMC page for more information: [ICE system for Radiology & Pathology learners](https://remedy.bnssg.icb.nhs.uk/adults/radiology-imaging/ice-system-for-radiology-pathology-referrers/) |  |  |
| If the individual is requesting MRIs, please ensure they complete the [eLFH MRI safety training](https://www.e-lfh.org.uk/programmes/mri-safety/) |  |  |
| **MRI/CT/USS** |  |  |
| Only those professions indicated on the protocol and SOP are able to request the above imaging |  |  |
| **TVUSS** |  |  |
| Only those who are FRSH trained can request TVUSS for lost coils only |  |  |

NOTE:

All documents and links are subject to amendments and updates. For current guidance please head to:

<https://avonlmc.co.uk/guidance/radiological-imaging-for-non-medical-requesters/>