

Outsourcing, Insourcing: Considerations when working with Ionising Radiation

Outsourcing has become an integral approach to sustain a pressured NHS service. Elective recovery programmes include initiatives to outsource a range of patient services commissioned by the NHS including the provision of diagnostic imaging and image reporting. It is likely that multiple stakeholders will be engaged in this process with support from procurement, contractual and operational teams. Such initiatives often come with challenging time pressures, yet a legal requirement to ensure the safety of occupationally exposed workers and patients remains. When outsourcing involves the use of ionising radiation with multiple employers involved, compliance with 'cooperation between employers' is required under the Ionising Radiations Regulations 2017¹ (IRR 2017) Reg. 16. It is important that appropriate advice is sought from the Radiation Protection Advisor (RPA) and Medical Physics Expert (MPE) at the earliest opportunity to ensure the legal responsibilities are identified in the agreement. This advice sheet aims to provide examples of compliance aspects under IRR 2017 regarding staff and public safety and the Ionising Radiation (Medical Exposure) Regulations 2017² (IR(ME)R 2017) regarding patient safety, when considering the contractual terms of the outsourced / insourced service / agreement.

Practical Considerations / Arrangements:

- Define what each employer involved is contributing regards staff and equipment.
- Define the nature, location, and duration of the work.
- Confirm each employer is a registered radiation employer with the Health & Safety Executive regards use of type of radiation involved (IRR 2017 Reg. 5, 6, 7).
- Confirm each employer is registered to provide healthcare with the relevant health and social care regulator; Care Quality Commission in England³; Care Inspectorate Wales⁴; Care Inspectorate Scotland⁵ or Regulation and Quality Improvement Authority Northern Ireland⁶.
- Confirm each employer has an appointed RPA and MPE (IRR 2017 Reg. 14, IR(ME)R 2017 Reg. 14 respectively).

Responsibilities and Considerations under IRR 2017:

Designated Area: (IRR 2017 Reg. 17)

- Define which employer will have responsibility for the controlled or supervised area.
- Agree handover arrangements if a designated area is handed to another employer. This will determine which employer provides the radiation risk assessment, local rules, contingency plans and rehearsal and potentially the Radiation Protection Supervisor (RPS) (IRR 2017 Reg. 8,9,13,16,18).
- Agree which employer will conduct environmental monitoring (IRR 2017 Reg. 20).

Dosimetry:

- Agree which employer is responsible for the provision and management of personal dosimetry and how results will be shared, including dose history (IRR 2017 Reg. 12,16).
- Consider classification requirements of staff (IRR 2017 Reg. 21,22,23,24,25).
- The employer responsible for the designated area is responsible for the staff doses received in that area (IRR 2017 Reg. 12).

Personal Protective Equipment (PPE):

- If PPE is required, agree which employer is providing PPE and conducting the maintenance (IRR 2017 Reg. 10,11).

Staff Radiation Incidents:

- Agree which employer will manage staff related radiation incidents (IRR 2017 Reg. 26).

Join the BIR today
at www.bir.org.uk

The British Institute of Radiology
Audrey House
16-20 Ely Place
London
EC1N 6SN

T : +44(0)20 3668 2220
|
E : admin@bir.org.uk

www.bir.org.uk

Registered Charity
No. 215869

VAT Registration
No. GB 233 7553 63

Training:

- Identify staff from either employer that will be acting as outside workers.
- The employer holding responsibility for the designated area will need to ensure sufficient training has been provided (e.g. radiation risks, pregnancy, and local rules) (IRR 2017 Reg. 15,18).

Responsibilities and considerations under IR(ME)R 2017:

Employer's IR(ME)R procedures:

- Agree whose Employer Procedures (A-N of Schedule 2 IR(ME)R 2017) will be applied to each part of this service e.g. pregnancy enquiry, carers and comforters. This will depend on the extent and split of the provision across the IR(ME)R duty holders (IR(ME)R Reg. 10,11).
- Agree who will provide the IR(ME)R duty holders, referrers, practitioners, and operators.
- Agree how the duty holder information, patient dose and image are communicated back.
- Agree which employer is responsible for the 'clinical evaluation' and how it is communicated.
- Agree inclusion / exclusion of non-medical and research exposures (IR(ME)R 2017 Reg. 3,12).
- Agree auditing arrangements (IR(ME)R 2017 Reg. 6, 7).

Patient dose /risk:

- The engaging employer may request audits for 'assessment of patient dose' from the providing employer (IR(ME)R 2017 Reg. 12).
- Agree how and by whom the 'risk and benefit' information is communicated to the patient.

Patient Radiation Incidents:

- Agree how incidents including Clinically Significant (CSAUE) and Significant Accidental Unintended Exposures (SAUE) are communicated between employers.
- Agree which employer takes responsibility to investigate and report these patient radiation incidents (IR(ME)R 2017 Reg. 8). This will depend on the provision split and when in the (IR(ME)R) processes (referral, justification, exposure, clinical evaluation) the incident occurred.

Equipment:

- If the providing employer provides equipment, the engaging employer may require assurance of equipment critical examination (IRR 2107 Reg. 32) commissioning, maintenance, and quality assurance programme (IR(ME)R 2017 Reg. 15).
- Comparison of dose reference levels may affect protocols employed.

Training:

- The employer is responsible for the appropriate training of their staff as practitioners and operators, but the engaging employer may seek assurance (IR(ME)R 2017 Reg.17).
- Duty holders may need entitlement in the other employer's IR(ME)R procedures.
- Duty holders may need training in IT systems, IR(ME)R employer procedures and protocols.

Other areas for consideration: Emergency response; bookings; IT provision.

References:

1. [The Ionising Radiations Regulations 2017 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
2. [The Ionising Radiation \(Medical Exposure\) Regulations 2017 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
3. [What is registration? - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk)
4. [Register as an independent healthcare service | Healthcare Inspectorate Wales \(hiw.org.uk\)](https://www.hi.wales.nhs.uk)
5. [Applying registration applicant guidance_july21-web.pdf \(careinspectorate.com\)](https://www.careinspectorate.com)
6. [Regulation and Quality Improvement Authority - Social & Healthcare Services Directory Northern Ireland | Regulation and Quality Improvement Authority \(rqia.org.uk\)](https://www.rqia.org.uk)

Join the BIR today
at www.bir.org.uk

The British Institute of Radiology
Audrey House
16-20 Ely Place
London
EC1N 6SN

T : +44(0)20 3668 2220
|
E : admin@bir.org.uk

www.bir.org.uk

Registered Charity
No. 215869

VAT Registration
No. GB 233 7553 63