

Q-Pulse Database	DIAIMA	
Document Number	EP-Guidance-002	
Document Title	Guidance on Records of Training and Education	

1. Objectives

To ensure that all operator and practitioner duties under IRMER, are performed by staff with appropriate qualifications, experience and training

To define the means by which records of training and competence shall be maintained for IRMER operators and practitioners.

2. Responsibilities

Service Leads will ensure that:

- Entitlement of Non-Medical Operators and Practitioners for those competences identified in their procedures is restricted to those who have the appropriate basic qualifications, experience and (where applicable) state registration, as defined in Employer's Procedures 'EP1 and EP2', and, in addition, have been appropriately trained.
- Individuals are identified who are competent to train others in these competences.
- A system is in place for maintaining associated training records, and is implemented.

Lead Clinicians will ensure that:

- Entitlement of registered Medical and Dental Practitioners, who are Practitioners under IRMER and Operators for clinical radiation procedures identified in their procedures is restricted to those who have the appropriate qualifications and experience, together with state registration, as defined in Employer's Procedures 'EP1 and EP2'.
- A system is in place for maintaining associated training records, and is implemented.

Managers entitled (authorised) in accordance with procedure 'EP1' to assess competences, shall ensure that recommendations for initial entitlement, and any subsequent updates of the scope of entitlement for any duty holder, are properly supported by training records held in accordance with this Procedure and where appropriate this should include refresher training.

Individual staff members will satisfy themselves that they have appropriate training and experience to undertake competences that they are entitled to perform. They will maintain a personal portfolio of their education, training, experience, and competence, and take personal responsibility for ensuring that they only perform procedures for which they have maintained competency.

3. Procedures

Service Leads shall assign to each newly qualified or newly appointed non-medical staff member who performs duties under IRMER, an authorised competency assessor, or shall undertake this task themselves.

Authorised Competency Assessors shall be responsible for:

- Assessing evidence of qualifications, experience and registration with regard to the basic requirements for entitlement identified in procedure EP2.
- Assessing the need for basic training with regard to Schedule 2 of the IRMER and arranging for such training in this regard as might be deemed appropriate.
- Assessing and recording competences in accordance with procedure EP2 and making a recommendation to the Service Lead for initial scope of entitlement.

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- Keeping a separate file for each duty holder assessed, with copies of training records that can be made available to the Service Lead or to the IRMER Inspector in support of those competences comprising their scope of entitlement.

The Lead Clinician will be responsible for ensuring that each member of medical staff under his/her management:

- is entitled to undertake the roles of practitioner and operator for the range of medical exposures assigned to them.
- has appropriate qualifications, clinical experience, and documented training (including ARSAC licence(s)) for the practitioner and operator tasks that are assigned to them.
- is entitled to undertake the operator task of clinical evaluation, and has received appropriate documented training.

Each duty holder will maintain a prospective personal portfolio (hard copy or electronic) which contains accurate details of education, training and acquired competences, including dates on which they were acquired. This record should be compliant with any recommendations or mandatory requirements for Continuing Medical Education (CME) or for Continuous Professional Development (CPD) established by the HPC, College of Radiographers, IPEM, or other Professional organisations.

Every staff member will co-operate with their Competency Assessor in ensuring that he/she maintains competency following training, and following any period of extended absence (Sick leave, Maternity Leave, Leave of Absence etc)

Newly appointed clinical staff will undergo assessment during the early stages of their employment to confirm and document basic competencies before he/she undertakes specific procedures relating to medical exposures. Competences for trainees will be confirmed by their Competency Assessor(s) / Tutor(s) through initialling of their personal training portfolio.

4. Training Records

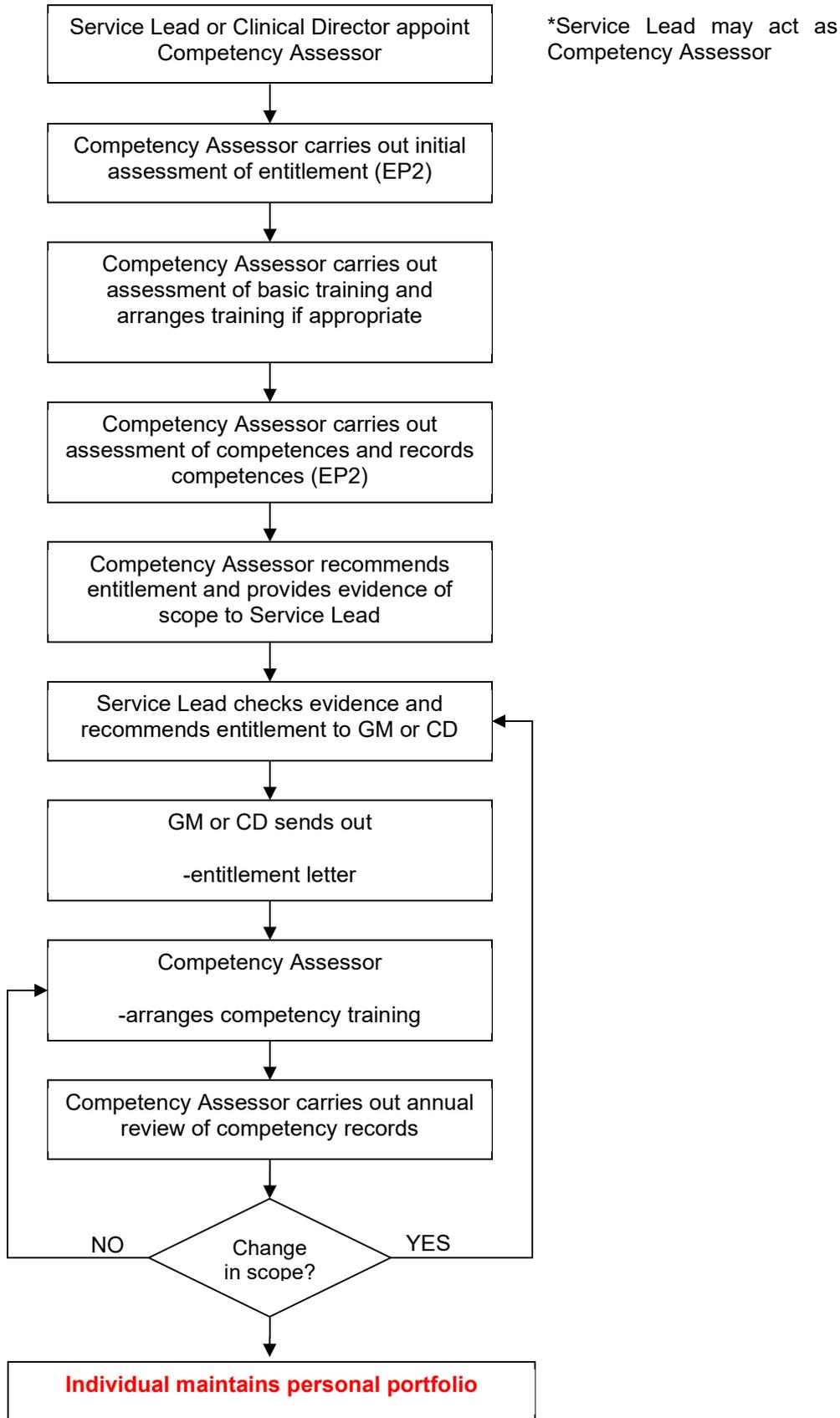
For trainees, a summary of theoretical instruction and practical training received will be submitted to their Tutor/Competency Assessor and to the Clinical Director (for medically qualified staff) or the Service Lead (for other groups) on completion of their initial training. Individuals will be entitled to act as a practitioner or operator if the Clinical Director / Service Lead judges that the evidence demonstrates the competence required for entitlement as a practitioner and/or operator.

Each operator and practitioner will submit a summary of the training record annually to the Lead Clinician (for medically qualified staff) or the Service Lead (for other groups) and competences reviewed at Appraisal / Personal Development Programme interviews.

Records of clinical competencies for practitioner and operator duties performed under the terms of the IR(ME)R 2017 Regulations will be maintained by the Lead Clinician for all medical duty holders, and the Service Lead for non-medical duty holders. These records will include the date on which members of staff achieve competency for each clinical procedure.

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