**Employer’s Written Procedure 13**

# Reducing the magnitude of unintended exposures

#### Objectives

To ensure that the risks and magnitudes of unintended doses to patients are as low as reasonably practicable.

####  Responsibilities

In accordance with Employer’s Procedure ‘EP19’, NSS will maintain an inventory of equipment owned by NSS.

NSS Medical Physics will work with in conjunction with the SBSP Programme Manager and the breast screening centres to identify equipment replacement priorities.

The Lead Medical Physicist will ensure all X-ray equipment within the SBSP follows a suitable quality assurance program, for both physics and radiographers, and will ensure oversight of results. Any issues identified shall be communicated to the host health boards for each centre. This will be through the Superintendents and QA Radiographers meetings, annual QA audit visits and Update training days.

Operators will be trained to undertake safely all aspects for which they are entitled, and this training will include radiation protection and the correct use of equipment.

Any incident occurring within the SBSP will have an investigation that includes NSS Medical Physics. Learning outcomes will be shared across the SBSP to prevent occurrences elsewhere within the programme.

####  Equipment Management

Critical examination and acceptance testing of new radiation equipment shall be initiated by the local manager responsible for each of the items of equipment, and shall be carried out by NSS Medical Physics and the appropriate Radiation Protection Adviser.

Radiation equipment that exhibits faults likely to cause patient overexposure must be withdrawn from clinical use until repaired by a trained service engineer or procedures put in place to modify use of equipment. Such equipment must be appropriately labelled to warn operators.

Equipment handover forms must be used by the physics team when performing quality assurance checks of radiation equipment.

If a MPE indicates that the risks of unintended radiation exposure of patients are too great, or that the radiation doses to patients for procedures performed are unnecessarily high, because of the age or reliability of radiation equipment, they may agree that the relevant equipment should be withdrawn from service. Risks from both continued use of the equipment and the implications of withdrawal of the service must both be taken into account.