



# RADIATION SAFETY POLICY

## Policy Statement

Public Health Wales will use ionising radiation safely in order to protect the health and wellbeing of patients, service users, staff and others.

## Policy Commitment

Public Health Wales will:

- Provide a robust framework for the management and safe use of ionising radiation
- Ensure that the use of ionising radiation is compliant with current legislation, standards and guidance
- Ensure that managers and staff are aware of their roles in the safe use of ionising radiation
- Keep radiation doses and dose rates as low as reasonably practicable
- Restrict the use of ionising radiation to practices that are justified and ensure that each intentional exposure of a patient is individually justified
- Optimise exposure to ionising radiation in order to reduce radiation dose, provided that this is consistent with the desired outcome
- Keep radiation doses to staff and members of the public within statutory dose limits
- Identify radiation hazards and control risks
- Inform staff of radiation risks and provide instruction, training, supervision and protective equipment
- Record, analyse and review radiation incidents to minimise future risks
- Manage radiation equipment in accordance with accepted best practice
- Demonstrate compliance through record keeping and audit
- Entitle duty holders associated with the exposure of patients to ionising radiation
- Appoint Radiation Protection Advisers, Medical Physics Experts and Radiation Protection Supervisors
- Cooperate with other employers where the activities of one employer could affect the safety of individuals associated with the other
- Make records available at the request of authorised external agencies

Public Health Wales recognises its obligations under the following legislation:

- The Ionising Radiations Regulations 2017
- The Ionising Radiation (Medical Exposure) Regulations 2017

## Supporting Procedures and Written Control Documents

This policy is supported by local procedures in services/departments that use radiation.

### Other related documents are:

- [Health and Safety Policy](#)
- [Incident Reporting Policy](#)

## Scope

This policy applies to ionising radiation. This means high energy radiation including:

- Radiation produced by medical x-ray equipment
- Radiation emitted by radon gas that may be present in the workplace

This policy applies to risks arising from work with ionising radiation in Public Health Wales, including:

- Exposure of patients as part of their medical diagnosis
- Exposure of staff and others

This policy applies to all staff employed or contracted by Public Health Wales.

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**Disclaimer**

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or [Corporate Governance](#).**

<b>Summary of reviews/amendments</b>				
<b>Version number</b>	<b>Date of Review</b>	<b>Date of Approval</b>	<b>Date published</b>	<b>Summary of Amendments</b>
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2	2015,	20 August 2014		Minor amendments to Appendix 1 following review by Trust Radiation Protection Group, plus revisions requested by Partnership Forum policy group
3	2016	25 October 2016		Document reviewed. No amendments required.
4	2018	24 October 2018	01 November 2018	Document updated to take account of new regulations and new policy/procedure templates

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# 1 Introduction

Public Health Wales uses ionising radiation in some of its screening programmes. It also has premises in areas that may be affected by radon gas. Public Health Wales has a moral and legal duty to minimise the risks arising from its work with radiation<sup>1</sup>. This policy describes how Public Health Wales uses radiation safely in order to protect the health and wellbeing of patients<sup>2</sup>, service users, staff and others.

Refer to local service/department procedures for more details.

A glossary of terms is provided in Appendix 1.

## 2 Scope, aim and objectives

### 2.1 Scope

This policy covers the safe use of radiation. It applies to all staff<sup>3</sup> who use radiation, are involved with medical exposures or work in areas where there are radiation risks. It is also relevant to those who manage or advise services that make medical exposures.

It controls the risks to staff, patients and others arising from:

- Medical x-ray equipment
- Radon

It will need to be revised before Public Health Wales starts any work involving other sources of radiation (e.g. radioactive materials).

### 2.2 Aim

The aim of this policy is to outline how Public Health Wales will discharge its statutory duties to ensure that radiation doses to patients, service users, staff, and other persons resulting from the work of the Organisation are as low as reasonably practicable.

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<sup>1</sup> In this document, the term *radiation* refers specifically to ionising radiation.

<sup>2</sup> The term *patients* refers to service users undergoing medical exposures.

<sup>3</sup> The term *staff* refers to all staff employed or contracted by Public Health Wales.

### **2.3 Objectives**

This policy will:

- Outline the regulations that apply to the use of radiation
- Detail the specific roles and responsibilities for those staff who are charged with the management of radiation safety
- Describe the arrangements for radiation safety
- Outline the training requirements for staff
- Outline the assurance arrangements

## **3 Legal and regulatory environment**

The use of ionising radiation is governed by The Ionising Radiations Regulations 2017. These regulations, and any amendments, are referred to in this policy as IRR. The regulations are supported by an approved code of practice and other official and professional guidance. The Health and Safety Executive enforces IRR.

The use of ionising radiation for medical exposures is governed by The Ionising Radiation (Medical Exposure) Regulations 2017. These regulations, and any amendments, are referred to in this policy as IRMER. The regulations are supported by official and professional guidance. Healthcare Inspectorate Wales monitors compliance with IRMER on behalf of the Welsh Ministers.

There are additional regulations applicable only to radioactive sources. They are not relevant to current work within Public Health Wales.

## **4 Roles and responsibilities**

### **4.1 Chief Executive**

Public Health Wales is the employer under IRR and IRMER. The Chief Executive:

- Takes overall responsibility for compliance with IRR and IRMER on behalf of Public Health Wales
- Appoints a suitable Radiation Protection Adviser

## **4.2 Executive Director of Public Health Services**

The Executive Director of Public Health Services:

- Is the Trust Board's nominated Director responsible for ensuring compliance with this policy
- Ensures that Public Health Wales follows the appropriate notification/registration/consent process with the Health and Safety Executive, as advised by the Radiation Protection Adviser

## **4.3 Divisional Directors**

Divisional Directors whose services use radiation are responsible for:

- Ensuring that radiation safety arrangements throughout their division follow best practice and comply with IRR
- Ensuring that sufficient funds are made available to service/department managers to implement all radiation protection requirements in this policy or as advised by the Radiation Protection Adviser

In addition, Divisional Directors whose services make medical exposures are responsible for:

- Ensuring that radiation safety arrangements throughout their Division comply with IRMER
- Ensuring that written procedures are in place in accordance with IRMER Schedule 2
- Entitling individuals to act as IRMER referrers, practitioners and operators, or authorising appropriate staff to undertake this task on their behalf
- Appointing one or more Medical Physics Expert(s)

## **4.4 Head of Estates and Health and Safety**

The Head of Estates and Health and Safety is responsible for:

- Assessing the risk from radon gas in premises occupied by staff
- Ensuring that action is taken to reduce the risk to an acceptable level

## **4.5 Service/department managers**

Managers of services/departments that use radiation are responsible for:

- Implementing all radiation protection arrangements in this policy or as advised by the Radiation Protection Adviser
- Ensuring that radiation risk assessments are carried out and reviewed
- Appointing Radiation Protection Supervisors in consultation with the Radiation Protection Adviser
- Putting in place local rules for radiation safety in consultation with the Radiation Protection Adviser and assisted by the Radiation Protection Supervisors
- Ensuring that relevant staff are informed of the local rules and are trained how to follow them
- Ensuring that periodic reviews of an individual's compliance with the provisions of the local rules are undertaken and recorded
- Ensuring that periodic reviews of the local rules are undertaken and recorded
- Making arrangements to monitor the radiation doses received by staff who work with radiation, for example by issuing personal dosimeters
- Involving the Radiation Protection Adviser as appropriate
- Submitting an annual report to the Radiation Safety Group to demonstrate the level of compliance with this policy

In addition, managers of services/departments that make medical exposures are responsible for:

- Putting in place the written procedures required by IRMER Schedule 2
- Putting in place written procedures for patient referrals
- Putting in place written protocols for medical exposures
- Ensuring that before individuals act as referrers, practitioners or operators they are formally entitled by an authorised person
- Keeping an auditable record of such entitlements
- Keeping a list of referrers, practitioners and operators, specifying the scope of practice for which they are entitled
- Putting in place a quality assurance programme for equipment used for medical exposures
- Keeping an inventory of equipment used for medical exposures
- Involving the Medical Physics Expert as appropriate
- Submitting an annual report to the Radiation Safety Group to demonstrate the level of compliance with this policy



#### **4.6 Radiation Protection Adviser**

The Chief Executive will appoint one or more suitable individuals as Radiation Protection Advisers. The Radiation Protection Adviser advises on the measures to be taken to comply with IRR, together with other relevant legislation on the use of radiation. The scope of the advice will include:

- The implementation of requirements for controlled and supervised areas
- The prior examination of plans for installations and the acceptance into service of new or modified sources of radiation in relation to any engineering controls, design features, safety features and warning devices provided to restrict exposure to radiation
- The regular calibration of equipment provided for monitoring levels of radiation and the regular checking that such equipment is serviceable and correctly used
- The periodic examination and testing of engineering controls, design features, safety features and warning devices and regular checking of systems of work provided to restrict exposure to radiation
- Risk assessment
- The designation of controlled and supervised areas
- The conduct of the various investigations required by IRR
- The drawing up of contingency plans
- Dose assessment and recording

The Radiation Protection Adviser is a member of the Radiation Protection Group and normally reports to the Chief Executive through this route. If the Radiation Protection Adviser believes that immediate action is required he/she reports directly to the Divisional Director and if necessary to the Chief Executive.

#### **4.7 Radiation Protection Supervisors**

Service/department managers will appoint one or more members of staff to act as Radiation Protection Supervisors. Each Radiation Protection Supervisor plays a supervisory role in assisting Public Health Wales to comply with IRR. Appendix 3 gives the role specification for a Radiation Protection Supervisor.

## **4.8 Duty holders under IRMER**

### *4.8.1 Employer*

In the context of IRMER, the employer is considered to be Public Health Wales. If Public Health Wales contracts a third party to provide services then Public Health Wales is the employer for the purpose of IRMER, but the third party is the employer for employment law purposes.

Equipment ownership has no impact on the employer responsibilities under IRMER.

### *4.8.2 IRMER referrers*

Referrers are registered health care professionals who are entitled to refer individuals to a practitioner for medical exposures. They must supply enough information to enable the practitioner to decide whether each exposure is justified.

### *4.8.3 IRMER practitioners*

Practitioners are registered health care professionals who are entitled to take responsibility for individual medical exposures within a specified scope of practice. They justify and authorise exposures, either directly or by issuing guidelines to operators.

### *4.8.4 IRMER operators*

Operators are staff who are entitled to undertake the practical aspects of medical exposures within a specified scope of practice. They are responsible for optimising exposures by selecting appropriate equipment and methods. They may also authorise exposures by following guidelines issued by a practitioner.

### *4.8.5 Medical Physics Expert*

The Divisional Director will appoint one or more suitable individuals as Medical Physics Experts. A Medical Physics Expert must also be entitled as an IRMER operator. A Medical Physics Expert is involved with certain aspects of medical exposures, including:

- Optimisation
- Specification and quality assurance of medical radiological equipment
- Analysis of events involving accidental or unintended exposures
- Training of staff in relevant aspects of radiation safety
- Provision of advice to Public Health Wales relating to compliance with IRMER

#### **4.9 All staff**

All staff working with radiation must:

- Exercise reasonable care and follow the local rules and related working instructions
- Use, as instructed, any protective equipment and personal dosimeters provided, and report any defects in such equipment and dosimeters to the department manager and Radiation Protection Supervisor
- Undertake any training deemed necessary
- Follow Public Health Wales' incident reporting procedure if an incident occurs in which a member of staff or other person is unintentionally exposed to radiation

## **5 Arrangements for radiation safety**

### **5.1 Radiation Protection Group**

The Radiation Protection Group is responsible for overseeing the management of radiation safety throughout Public Health Wales. The Director of Screening Division chairs the Group. It reports to the Health and Safety Group on matters of staff and public safety and to the Quality, Safety and Improvement Committee on matters of patient safety. This provides assurance to the Board and Chief Executive about the radiation safety arrangements within Public Health Wales. The terms of reference and membership of the Radiation Protection Group are given in Appendix 2.

### **5.2 Arrangements for the safety of patients undergoing medical exposures**

The following arrangements apply to departments where medical exposures are undertaken.

#### *5.2.1 Written procedures*

Each department must have the following standard operating procedures required by IRMER Schedule 2:

- To identify correctly the individual to be exposed to ionising radiation
- To identify individuals entitled to act as referrer or practitioner or operator within a specified scope of practice
- For making enquiries of females of childbearing potential to establish whether the individual is or may be pregnant or breastfeeding

- To ensure that quality assurance programmes in respect of written procedures, written protocols, and equipment are followed
- For the assessment of patient dose and administered activity
- For the use and review of diagnostic reference levels
- For exposures within medical and biomedical research programmes
- For the giving of information and written instructions to patients receiving radioactive medicinal products
- For the carrying out and recording of an evaluation for each medical exposure including, where appropriate, factors relevant to patient dose
- To ensure that the probability and magnitude of accidental or unintended doses to patients from radiological practices are reduced so far as reasonably practicable
- To ensure that the referrer, the practitioner, and the individual exposed or their representative are informed of the occurrence of any relevant clinically significant unintended or accidental exposure, and the outcome of the analysis of this exposure
- To be observed in the case of non-medical imaging exposures
- To establish appropriate dose constraints and guidance for the exposure of carers and comforters

Each department must also have the following:

- Written procedures for patient referrals
- Written protocols for medical exposures

All new or updated IRMER procedures must be submitted to the Radiation Protection Group for ratification and formal adoption on behalf of Public Health Wales.

#### *5.2.2 Entitlement of referrers, practitioners and operators*

Entitlement must only be undertaken by authorised individuals following the department's standard operating procedure.

The department must keep an auditable record of each entitlement including:

- Role (referrer, practitioner or operator)
- Name of person being entitled
- Scope of practice
- Name and signature of person undertaking the entitlement

- Date

Each department must keep a list of its referrers, practitioners and operators, specifying the scope of practice for which they are entitled.

#### *5.2.3 Referral criteria*

Public Health Wales, through the Radiation Protection Group, has established referral criteria for medical exposures, reflecting current national professional guidance. These are referenced in departmental documentation.

#### *5.2.4 Equipment used for medical exposures*

Each department must set up a quality assurance programme for equipment used for medical exposures. This programme must:

- Enable the radiation dose to a patient to be estimated
- Ensure that all equipment is tested before it is first used, at regular intervals, and after maintenance
- Specify acceptable performance criteria for equipment and ensure that corrective action is taken if these criteria are not met

Each department must keep an inventory of equipment used for medical exposures that contains the following information:

- Name of manufacturer
- Model number
- Serial number or other unique identifier
- Year of manufacture
- Year of installation

### **5.3 Arrangements for the safety of staff, public and others**

The following arrangements apply to departments where work with radiation is undertaken.

#### *5.3.1 Radiation risk assessments*

Managers must ensure that a radiation risk assessment is carried out for each activity where work with radiation is involved. Radiation risk assessments must be reviewed regularly and whenever there are changes to equipment or working practices.

### *5.3.2 Controlled and supervised areas*

Certain rooms may need to be designated as controlled or supervised areas according to the level of radiation risk. Warning signs will indicate the presence of such areas and the Radiation Protection Supervisor will ensure that staff work safely in accordance with local rules.

### *5.3.3 Local rules*

Each department with controlled or supervised areas must have local rules to protect staff and others. Local rules specify general radiation protection arrangements and particular requirements identified in IRR.

The Radiation Protection Supervisor must ensure that all staff are adequately supervised. The Radiation Protection Supervisor must report any non-compliance with the local rules to the department manager who, in consultation with the Radiation Protection Adviser, will investigate the reasons for the non-compliance and put in place measures to ensure that such breaches are not repeated. In instances where breaches are identified by the Radiation Protection Adviser as serious or in instances where breaches cannot be resolved within the department the manager will seek a solution by referring the issue to the Divisional Director and the chair of the Radiation Protection Group.

### *5.3.4 New or modified equipment installations*

The radiation safety features of all new equipment installations must be subject to a critical examination. The critical examination is the responsibility of the installer. The department manager must obtain confirmation that the outcome is satisfactory before putting the equipment into use. The manager must consider the implications for radiation safety before making any modifications to equipment or premises, and should consult the Radiation Protection Adviser if necessary.

### *5.3.5 Staff of other employers*

Staff of other employers such as agency staff, staff on secondment or staff of contractors may need to undertake work in Public Health Wales involving radiation or located in a radiation area. Managers must act in collaboration with such employers to define responsibilities and exchange information to ensure the safety of all staff.

## **5.4 Incident reporting**

### *5.4.1 Radiation incidents involving patients*

Staff must report all incidents involving accidental or unintended radiation exposures of patients using the Public Health Wales incident reporting procedure. The department manager must carry out an appropriate level of investigation and take any remedial and/or preventative action. If the

investigation shows that a significant overexposure occurred, a more detailed investigation is required and Public Health Wales may need to report the incident to Healthcare Inspectorate Wales. Where appropriate, the Medical Physics Expert should be consulted for advice.

#### *5.4.2 Radiation incidents involving staff or others*

Staff must report all incidents involving accidental radiation exposures of staff or others using the Public Health Wales incident reporting procedure. The department manager must carry out an appropriate level of investigation and take any remedial and/or preventative action, in consultation with the Radiation Protection Supervisor. Where appropriate, the manager should ask the Radiation Protection Adviser to assess the risks associated with the incident and advise about the need for reporting the incident to the Health and Safety Executive.

## **5.5 Radon**

Radon is a gas that emits radiation. It occurs naturally in some parts of the country. Staff may receive a radiation dose by breathing in radon in their workplace. Public Health Wales has a duty to protect staff from this risk. The Head of Estates and Health and Safety makes arrangements to:

- Review the potential radon hazard in all workplaces used by Public Health Wales staff
- Monitor the level of radon in workplaces identified as being in radon affected areas
- Undertake remedial work to reduce levels in any workplaces that are above the relevant action level
- Re-monitor such workplaces every 2-3 years
- Re-monitor other workplaces on a less frequent basis

The Head of Estates and Health and Safety should consult the Radiation Protection Adviser about the suitability of the arrangements.

## **6 Training requirements**

Before allowing any individual to work with radiation, a manager must assess the individual's training requirements, provide any required training, monitor the training programme and assess the individual's performance.

Radiation Protection Supervisors need more detailed training as specified by the Health and Safety Executive. The Radiation Protection Adviser can recommend suitable training if required.

There are additional training requirements for duty holders under IRMER. Before any individual is formally entitled to act as referrer, practitioner or operator, arrangements must be made to assess their experience and to determine what training must be undertaken before entitlement can take place. Departments must keep training records for referrers, practitioners and operators. This should include records of professional qualifications and update training relevant to their role(s) under IRMER.

## **7 Communication to staff**

Department managers must put systems in place to keep all staff aware of their general responsibilities with regard to radiation protection and keep all staff aware of the need to report any incident or near misses involving radiation that may have resulted in the unintended exposure of patients, staff or other persons.

The local rules identify potential hazards and provide measures that enable staff to work safely. Managers must ensure that all staff working within the department are made aware of all issues detailed in the local rules and are given training in their implementation and observance.

This policy will be posted on the Public Health Wales intranet site.

## **8 Monitoring compliance**

The Radiation Protection Group monitors compliance with this policy by reviewing:

- Annual reports from Radiation Protection Supervisors and managers
- Reported radiation incidents
- Radiation Protection Adviser inspection visits and audits including review of personal dosimetry results
- Patient radiation dose surveys
- Reports of inspections by relevant external bodies



## **Appendix 1 - Glossary of Terms**

*Ionising radiation* – a type of high energy radiation that can lead to damage in human tissue and increase the risk of cancer.

*IRMER* – an abbreviation for the Ionising Radiation (Medical Exposure) Regulations 2017

*IRR* – an abbreviation for the Ionising Radiations Regulations 2017

*Justification* – ensuring that the benefit from a medical exposure outweighs the risk from the radiation.

*Medical exposure* – in this policy, this means the use of ionising radiation during medical diagnosis.

*Optimisation* – ensuring that the radiation dose is as low as reasonably practicable consistent with the intended purpose.

*Patient* – in this policy, this means anyone undergoing a medical exposure.

*Radon* – a gas that occurs naturally and emits ionising radiation.

*Radiation dose* – a measure of the amount of ionising radiation. In general, a higher radiation dose means a higher risk.

*Radiation protection* – the protection of people and the environment from the harmful effects of ionising radiation.

*X-ray* - a type of ionising radiation used for medical imaging.

## **Appendix 2 - Radiation Protection Group**

### **Terms of reference**

The Chief Executive has established a Radiation Protection Group to oversee the management of radiation safety throughout Public Health Wales. The Director of Screening Division chairs the Group.

The remit of the Radiation Protection Group is to:

- Review the Radiation Safety Policy
- Establish and review referral criteria for medical exposures
- Evaluate and ratify procedures drafted by managers to control work involving ionising radiation and radiation risks to patients and other persons
- Monitor and review the level of compliance with the Radiation Safety Policy and procedures within Public Health Wales
- Receive annual reports from Radiation Protection Supervisors and managers demonstrating the level of compliance with the Radiation Safety Policy and procedures
- Initiate remedial action where required
- Keep the Chief Executive informed of specific issues that require his/her attention

The Radiation Protection Group reports to the Health and Safety Group on staff and public safety matters and to the Quality, Safety and Improvement Committee on patient safety matters.

### **Membership**

- Chair
- Heads of programmes that use ionising radiation
- Managers of departments that use ionising radiation
- Radiation Protection Supervisors
- Radiation Protection Adviser
- Medical Physics Expert
- Nominated clinician (IRMER practitioner)
- Trade Union or Health and Safety Representative
- Public Health Wales Health and Safety Manager

- Screening Division Risk, Health, Safety and Clinical Governance Manager
- Facilities Compliance Officer (representing Head of Estates and Health and Safety)

## **Appendix 3 - Radiation Protection Supervisor role specification**

Base Location: [INSERT LOCATION HERE]

Department: [INSERT DEPARTMENT HERE]

Accountable to: [INSERT SERVICE MANAGER HERE]

Reports to: [INSERT LINE MANAGER HERE]

Liaises with: Radiation Protection Adviser

**Job Summary** The Radiation Protection Supervisor (RPS) plays a supervisory role in assisting Public Health Wales to comply with the requirements of the Ionising Radiation Regulations 2017. The RPS is directly involved in the work with ionising radiation and exercises close supervision to ensure that the work is done in accordance with local rules.

The only responsibility of the RPS specified under the regulations is to supervise the work with ionising radiations. Overall responsibility for radiation safety lies with the departmental manager.

### **Main duties and responsibilities**

#### **1 Restriction of exposure**

Observe, from time to time, all procedures involving ionising radiation and to keep a record of this process for audit purposes. Issue instructions necessary to maintain radiation doses as low as reasonably practicable.

#### **2 Notification of changes and incidents**

Notify the manager, in writing:

- Of any change in work activity, equipment, usage or conditions that might affect radiation safety
- Immediately of any incident or suspected incident involving unintended radiation exposure of staff or others

### **3 Local rules and systems of work**

Assist in the writing of local rules and systems of work and ensure that all staff comply with them.

### **4 Information, instruction and training**

Attend courses and receive training as recommended by the Radiation Protection Adviser. Ensure that necessary safety information and guidance is given to all staff, outside contractors and any other persons who enter controlled or supervised radiation areas.

### **5 Additional duties**

Provide a report to the Radiation Protection Group.