[Name of Dental Practice] [How to use templates](https://www.psm.sdcep.org.uk/templates/how-to-use-templates/)

[Date]

**Example Radiology Quality Assurance and Audit Programme**

[This is an example of the types of quality assurance and audit activities that a practice might carry out for their radiology quality assurance and audit programme. Amend as appropriate.]

| **QA item/process** | **What to audit**(e.g. QA record) | **Audit considerations**(e.g. are items up to date and satisfactory) | **Outcome/comments/actions required**  | **Carried out by** | **Date** | **Next review due** |
| --- | --- | --- | --- | --- | --- | --- |
| **QA of Image Quality**  |
| Quality ratings of radiographs | Image quality ratings record/log  | Are up-to-date records of image quality ratings held? |  |  |  |  |
| Analysis of radiograph quality | Image quality analysis record[[e.g. Quality Assessment of Radiographic Images template]](https://www.psm.sdcep.org.uk/templates/radiation-protection/) | Is analysis current?Is radiograph quality satisfactory?Has reject image analysis been carried out?Has corrective action been taken if required? |  |  |  |  |
| **QA of Patient Dose & Equipment** |
| Equipment inventory | Inventory document[[e.g. X-ray Machine Inventory template, ancillary equipment template]](https://www.psm.sdcep.org.uk/templates/radiation-protection/) | Is inventory complete and up to date? |  |  |  |  |
| Equipment testing and maintenance | Records and reports [e.g. [X-ray Machine Routine Testing and Maintenance Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/), [X-ray Machine Routine Surveillance Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/), external reports (from engineer, MPE, RPA)] | Is there a schedule for equipment testing and maintenance? (e.g. dates when next tests due indicated in test records)Have appropriate tests and maintenance been carried out (i.e. critical exam, acceptance test, routine and safety tests, maintenance, routine surveillance) at appropriate frequency?Are reports available?Have recommendations been actioned? |  |  |  |  |
| Assessment of dose | Reports of representative patient dose from routine testingLocal DRLs | Are local DRLs in place?Have the representative patient doses for each machine and type of exposure been monitored and compared to the local DRLs?If consistently higher, has an investigation been carried out and action taken? |  |  |  |  |
| **QA of Image Processing and Viewing Facilities**  |
| Digital Imaging | External servicing/maintenance reports Records of QA checks and tests[e.g. [Digital Detector Check Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/), [Digital Monitor Check Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/)] | Has servicing/maintenance of digital imaging system been carried out at appropriate frequency?Is there a recorded assessment of phosphor plate/digital sensor condition and performance?Is there a recorded assessment of monitors used for viewing digital images?Has corrective action been taken if required? |  |  |  |  |
| Film Imaging | External servicing/maintenance reports for automatic processorQA records[e.g. [X-ray Film Stock Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/), [Developer & Fixer Changing Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/), [Radiograph Processing Unit Cleaning Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/)]Records of QA tests[e.g. [Radiograph Processing Unit/ Darkroom Light Test Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/)] | Has servicing/maintenance of automatic processor been carried out at appropriate frequency?Are there up-to-date records of film & chemical stocks, developer & fixer changing and processor cleaning?Have processing units/darkrooms been checked regularly to ensure they are light tight? (at least annually recommended)Is there a recorded assessment of performance (e.g. step-wedge tests)?Has corrective action been taken if required? |  |  |  |  |
| **QA of Training**  |
| Staff training | Staff training records[e.g. [Radiography Training Record template](https://www.psm.sdcep.org.uk/templates/radiation-protection/) or [example Employer’s Procedure](http://www.sdcep.org.uk/additional-resources-for-radiation-protection/) EP9, Appendix 1] | Are there up-to-date records of training and CPD for each staff member involved in radiography?Are these regularly reviewed? |  |  |  |  |
| **Employer’s Procedures** |
| Document QA | Master copy of the practice’s Employer’s Procedures | Are there practice specific Employer’s Procedures in place? Are these reviewed regularly? (annual review recommended)Are document control measures in place? (e.g. version no., authorisation, page numbers)Are all duty holders aware of current version? |  |  |  |  |
| QA of compliance with the Employer’s Procedures | Relevant records and logs, observation of practice | Are the practice’s Employer’s Procedures followed by all relevant duty holders? E.g. may include audits[[1]](#footnote-2) of:* entitlements, to ensure that duty holders’ competencies for their scope of duties have been assessed and are supported by appropriate training
* referrals, justifications, authorisations and clinical evaluations
* incident reporting and outcomes
* research and non-medical exposures (if applicable)
* any other processes specified in the procedures
 |  |  |  |  |
| **Employer’s Protocols** |
| QA of protocols | Master copy of the practice’s Employer’s Protocols [e.g. [example Employer’s Protocols for Exposures](https://www.sdcep.org.uk/published-guidance/practice-management/additional-resources-for-radiation-protection/)] | Are there practice specific Employer’s Protocols in place? Are these being reviewed regularly? (annual review recommended)Are document control measures in place? (e.g. version no., authorisation, page numbers)Are all duty holders aware of current version? |  |  |  |  |
| **Radiation Risk Assessment** |
| QA of Risk Assessment | Practice’s radiation risk assessment | Is there a practice specific radiation risk assessment in place?Is this reviewed regularly (3-yearly recommended)? |  |  |  |  |
| **Local Rules** |
| QA of Local Rules | Master copy of the practice’s Local Rules[e.g. [Local Rules template](https://www.sdcep.org.uk/published-guidance/practice-management/additional-resources-for-radiation-protection/)] | Are there practice specific Local Rules in place? Are these reviewed regularly? (annual review recommended)Are document control measures in place? (e.g. version no., authorisation, page numbers)Are all duty holders aware of current version? |  |  |  |  |

1. More detailed records of each of the audits should be held. A [Record of Audit template](https://www.psm.sdcep.org.uk/templates/radiation-protection/) can be downloaded from SDCEP’s Practice Support Manual. [↑](#footnote-ref-2)