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IR(ME)R CPD Requirement Clarification

There has been some confusion regarding IR(ME)R CPD requirement for practitioners and operators who partake in dental radiography. It has been observed that there are some practitioners who take it for granted that by fulfilling the GDC guidance of 5 hours verifiable CPD per 5 year cycle on Radiation Protection, this satisfies the IR(ME)R training requirement. This is not always the case. The GDC guidance is general and 'strongly recommended' rather than mandatory. There may be some registrants who are not currently practicing radiography and thus it may not be appropriate for them to carry out CPD in this subject. Also IR(ME)R CPD needs to be completed every 5 years whereas the GDC requirement is 5 hours of verifiable CPD during a five year cycle, the situation could potentially arise whereby a registrant could complete the CPD in first year of a five year cycle and then wait until the last year of the following cycle before completing the training again. This could result in a gap of 9 years between training and retraining.

With regard to the IR(ME)R Regulations, IR(ME)R 2000 :- Regulation 11 states:

Training

11.—(1) Subject to the following provisions of this regulation no practitioner or operator shall carry out a medical exposure or any practical aspect without having been adequately trained.

(2) A certificate issued by an institute or person competent to award degrees or diplomas or to provide other evidence of training shall, if such certificate so attests, be sufficient proof that the person to whom it has been issued has been adequately trained.

(3) Nothing in paragraph (1) above shall prevent a person from participating in practical aspects of the procedure as part of practical training if this is done under the supervision of a person who himself is adequately trained.

(4) The employer shall keep and have available for inspection by the appropriate authority an up-to-date requirement such exposures or, where the employer is concurrently practitioner or operator, of his own training, showing the date or dates on which training qualifying as adequate training was completed and the nature of the training.

(5) Where the employer enters into a contract with another to engage a practitioner or operator otherwise employed by that other, the latter shall be responsible for keeping the records required by paragraph (4) and shall supply such records to the employer forthwith upon request.

EXPLANATORY NOTES (*This note is not part of the Regulations*)

Regulation 11 prohibits a practitioner or operator from carrying out a medical exposure without having been adequately trained and requires the employer to keep a record of training qualifications of all practitioners and operators engaged by him. In addition, the employer is under an obligation to take steps to ensure compliance with the training requirements including continuing education after qualification (regulation 4). Again, sole practitioners and partners must keep records about their own training and comply with the

requirements themselves. Proof of adequate training is provided by way of a certificate or other evidence attesting to a person's training.

[IR(ME)R 2000 05.09. 2012 updated 13.01.2017 (DoH) (IR(ME) (Amendment) Regulations 2006] (together with notes on good practice)

6.7. Regulation 4(4)

6.7.1. This regulation requires the employer to ensure that practitioners and operators are both adequately trained and undertake continuing education and training. With regard to the latter, it is to be noted that the duty is not on the employer to provide continuing education and training himself. The obligation will be satisfied if he takes steps to ensure that the practitioner and operator seek out and attend such education and training. Where the employer is also the practitioner and/or operator, he must himself ensure that he undertakes appropriate continuing education and training.

6.7.2. In cases where the employer engages sub-contractors, the obligation to ensure compliance with this regulation will be satisfied by the employer if he includes a clause in the contract stipulating that the practitioner or operator to be engaged by him must have been adequately trained and undertake continuing education and training. Records of previous and continuing education and training must be kept by the sub-contracted company (or in the case of the self-employed, themselves) e.g. for agency staff, the agency employer is responsible for keeping up-to-date training records on the staff supplied by the agency. These records also must be made available to the employer, upon request. See also regulation 11 (see below)

6.7.3. Requirements for continuing education are integral to the functions of health professionals and employers should make provisions for such training

Training - Regulation 11

13.1. This regulation prohibits any practitioner or operator from carrying out a medical exposure or any practical aspect without having been adequately trained. An exception is made for trainees where they participate in practical aspects under the supervision of someone who is adequately trained. Adequate training is training that satisfies the requirements of Schedule 2.

13.2. The regulation also requires the employer to keep and have available for inspection an up-to-date record of all practitioners and operators engaged by him showing the date on which training was completed and the nature of the training. Where the employer is concurrently practitioner or operator, he must keep a record of his own training,

13.3. Training records should be available separately from general personal records and preserved for periods consistent with Health Departments' guidance on retention of records.

13.4. Regulation 11(5) makes clear that, where an employer engages individuals to act as practitioners or operators but those individuals remain employed by another body, e.g. agency staff, then the second party i.e. the agency are responsible for keeping and maintaining the training records. These must be made available to the first employer upon request so that he can make them available to officials acting on behalf of the appropriate authority as the Regulations require.

With relation to training itself, the guidance is (from DoH & NRPB - Guidance Notes for Dental Practitioners on the Safe Use of X-ray Equipment – June 2001)

Appendix 3 Adequate training requirements under IR(ME)R 2000

Adequate training

A3.2 *IRMER practitioners and operators* must have received adequate training. Appropriate standards for adequate training are recommended in this appendix. If assessment shows that training is inadequate, arrangements must be made for the *IRMER practitioner* and *operator* to receive the appropriate education and training. This may require self-assessment when the *IRMER practitioner* is also the *Legal Person*.

A3.3 Adequate training for an *IRMER practitioner* comprises:

- a) for UK graduates, an undergraduate degree conforming to the requirements for the undergraduate dental curriculum in dental radiology and imaging(28) and the core curriculum in dental radiography and radiology for undergraduate dental students(26);
- b) for non-UK graduates, the *Legal Person* should establish whether the *IRMER practitioner's* undergraduate degree matches the above requirements. Where the *IRMER practitioner* is also the *Legal Person* he or she should seek the advice of the Dental Practice Adviser and/or the Postgraduate Dental Dean.

A3.4 Adequate training for operators needs to address two groups of operators:

(a) *Operators whose duties include selecting exposure parameters and/or positioning the film the patient and the tube head*

- Dental practitioners should fulfil the requirements of A3.3 above.
- Dental nurses should possess a Certificate in Dental Radiography, conforming to the syllabus prescribed by the College of Radiographers (29).
- Dental hygienists and therapists should have received an equivalent level of training to that for dental nurses.

All other dental nurses should obtain the Certificate in Dental Radiography before undertaking radiography.

(b) *Other operators*

Dental nurses (and any other PCDs) whose duties include film processing and quality assurance should preferably possess the Certificate in Dental Nursing (or the equivalent). Failing this they must have received adequate and documented training, specific to the tasks that they undertake, and this training may be provided 'in-house'. Dental nurses (and any other PCDs) who 'press the exposure button' as part of a patient exposure that has been physically set up by an adequately trained *operator*, may only do so in the continued presence, and under the direct supervision, of that *operator*. They must have received documented instruction appropriate to this task.

Continuing education and training:

A3.5 Continuing education and training in all aspects of dental radiology must be part of *IRMER practitioners' and operators' life-long learning*.

A3.6 *IRMER practitioners*, together with *operators*, whose duties include radiography, must update their knowledge of and skills in intra-oral and panoramic radiology, as appropriate. This is especially important when installing panoramic equipment or digital imaging devices for the first time, and when implementing new techniques such as the paralleling technique. It is equally relevant if QA programme identifies serious or persistent deficiencies in image quality, arising out of the procedures recommended at paragraphs 5.6 and 5.12. THIs continuing professional development (CPD) can include a mixture of Verifiable CPD and General CPD. Within the five-yearly 250 hour recertification cycle an average practitioner would be expected to devote at least 5% of the hours to radiology and radiation protection.

A3.7 Practitioners are recommended to attend formal courses covering all aspects of radiation protection as part of their five-yearly recertification cycle. **Such courses would**

normally be expected to provide at least five hours of Verifiable CPD. Postgraduate dental deans therefore need to ensure that such courses are offered on a regular basis. Appropriate courses would be expected to cover:

- a) the principles of radiation physics;
- b) risks of ionising radiation;
- c) radiation doses in dental radiography;
- d) factors affecting doses in dental radiography;
- e) the principles of radiation protection;
- f) statutory requirements;
- g) selection criteria;
- h) quality assurance.

A3.8 Operators whose duties include radiography are recommended to attend a continuing education and training course every five years. Appropriate courses would be expected to cover:

- a) the principles of radiation physics;
- b) risks of ionising radiation;
- c) radiation doses in dental radiography;
- d) factors affecting dose in dental radiography;
- e) the principles of radiation protection;
- f) statutory requirements;
- g) quality assurance.

As per GDC

The GDC's position is that GDC registrants who practice radiography should comply with the IR(ME)R guidelines on radiography CPD.

The GDC's guidance is general, and 'strongly recommended' rather than mandated, because it must apply to all GDC registrants. Some may not be currently practising radiography, and so it may not be appropriate for them to undertake the radiography CPD. However, their understanding is that the IR(ME)R CPD rules are mandatory. As such, all those who are practising radiography must abide by them. This would be in compliance with standard 1.5.1 of the standards for the dental team which states that:

1.5.1 You must find out about the laws and regulations which apply to your clinical practice, your premises and your obligations as an employer and you must follow them at all times. This will include (but is not limited to) legislation relating to:

- *the disposal of clinical and other hazardous waste*
- *radiography*
- *health and safety*
- *decontamination*
- *medical devices.*

(Further information on laws and regulations can be found on their website. Your professional association or defence organisation can also help you to find out which laws and regulations apply to your work.)

As per BDA

The BDA guidance on 'Radiation Protection' (May 2012) with relation to IR(ME)R training update mentions on page 4 under training section, '*IRMER practitioners (dentists) must undertake formal training on radiation protection as part of their recertification cycle, providing at least five hours of verifiable CPD. However, regardless of this cycle, IRMER practitioners should ensure training has been updated within the last five years*

Conclusion

With relation to IR(ME)R CPD requirement, NHS England expects practitioners and operators to have 5 hours of verifiable CPD in specific IR(ME)R training, as described above, within the last five years unless they have qualified in the UK within the last 5 years. Attending postgraduate IR(ME)R courses of 5 hours or longer provided by the Deanery should suffice. However, if the training is completed over two or more courses or is an online course, it is the responsibility of the practitioner (or the operator) to provide proof that the radiation course/s that they have attended or carried out fulfil all aspects of IR(ME)R requirements as described earlier in continuing education and training guidance.