Radioactive Substances Risk Management Policy

**Policy Statement**

To ensure the Cardiff and Vale University Health Board (UHB) delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, we will manage our use of radioactive substances and exposure to radon in a safe manner and in such a way as to minimise their impact on people and the environment.

**Policy Commitment**

The UHB will:

- Provide a robust framework and use best available techniques (BAT) to manage radioactive substances
- Ensure that radioactive substances management is safe and compliant with current legislation, standards and guidance in order to protect the UHB, patients, staff, members of the public and the environment
- Ensure that managers and staff are aware of their roles in the safe management of radioactive substances
- Keep radiation doses and dose rates as low as reasonably practicable (ALARP)
- Limit the amount of radioactive material kept on our premises by only procuring material for work that is justified
- Optimise radioactive substances management processes in order to reduce the amount of radioactive waste that we produce
- Where practicable and within terms of permit, reduce the amount of radioactive waste disposed to the environment by accumulating and storing it securely and allowing it to decay
- Dispose of radioactive waste in compliance with Environmental Permits issued by Natural Resources Wales and other statutory and regulatory requirements
- Ensure that arrangements for the transport of radioactive materials satisfy the requirements of the Office for Nuclear Regulation
- Monitor the concentration in air of naturally-occurring radioactive radon gas on its premises and take remedial action to limit exposure where necessary
- Demonstrate compliance through record keeping and audit
- Appoint Radioactive Waste Adviser(s), Dangerous Goods Safety Adviser(s), Radiation Protection Adviser(s) and Radiation Protection Supervisors
Supporting Procedures and Written Control Documents

This Policy is supported by two procedures:

- Radioactive Substances Risk Management Procedure
- Best Available Techniques for the Management of Radioactive Substances

They describe the following with regards to safe and effective management of radioactive substances:

- Duties associated with the management of radioactive substances
- Procurement and use of radioactive substances
- Transport of radioactive materials
- Management of radioactive waste including its generation, storage, disposal and recording
- Arrangements for monitoring and limiting exposure to airborne radon
- Demonstration of compliance with regulatory requirements and dealing with instances of non-compliance

Other supporting documents include:

- Ionising Radiation Risk Management Policy
- Exposure of Patients to Ionising Radiation Procedure
- Exposure of Staff and Members of the Public to Ionising Radiation Procedure
- Health and Safety Policy
- Waste Management Policy
- Waste Management Operational Procedures

Scope

This policy applies to all of our staff in all locations including those with honorary contracts.

Equality Impact Assessment

An Equality Impact Assessment (EqIA) has / has not been completed [delete as necessary] and this found there to be a positive/negative/ no impact [delete as necessary]. Key actions have been identified and these can be found in………./or incorporated within this policy/supporting procedure.

Note: if an EqIA has not been completed indicate why
A Health Impact Assessment (HIA) has / has not been completed [delete as necessary] and this found there to be a positive/negative/ no impact [delete as necessary]. Key actions have been identified and these can be found in………./or incorporated within this policy/supporting procedure. 

Note: if a HIA has not been completed indicate why

Policy Approved by

Quality, Safety and Experience Committee

Group with authority to approve procedures written to explain how this policy will be implemented

Radiation Protection Group

Accountable Executive or Clinical Board Director

Executive Director of Therapies and Health Science

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 the Governance Directorate.

Summary of reviews/amendments

<table>
<thead>
<tr>
<th>Version Number</th>
<th>Date Review Approved</th>
<th>Date Published</th>
<th>Summary of Amendments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>25/07/2019</td>
<td>04/09/2019</td>
<td>New document</td>
</tr>
</tbody>
</table>