



IQIPS Standards and Criteria

Audiology

Domain 1: Patient Experience

The purpose of the Patient Experience Domain is to ensure that service delivery is patient-focused and respectful of the individual patient and their specific requirements. This is achieved through provision of appropriate information and support for patients and carers with due regard to differences in culture, religion, age and other factors. Effective feedback systems for patients and carers are necessary.

STANDARDS:

PE1	The service implements and monitors systems to ensure patients are able to access patient friendly information about what happens before, during and after specific examinations/procedures.
PE2	The service implements and monitors systems to ensure the privacy, dignity, comfort and security of patients are respected throughout contact with the service.
PE3	The service implements and monitors systems to ensure informed patient consent is obtained for each examination/procedure.
PE4	The service implements and monitors systems to ensure that service delivery is patient focused.
PE5	The service implements and manages systems to ensure that patients are able to feedback on their experience of the service and that the feedback is acted upon.



PE1 The service implements and monitors systems to ensure patients are able to access patient friendly information about what happens before, during and after specific examinations/procedures.	
Rationale: The service should provide clear, relevant and up-to-date information in a range of formats about the service, which explain the purpose and nature of the examination/procedure. The information should contain sufficient detail and be written in a way that allows patients and their carers to make informed decisions about their care.	
C1	There are defined roles and responsibilities for each area of development and maintenance of patient information
C2	There are systems in place to ensure that patients are provided with information within specified timescales about the details and purpose of their examination/ procedure to allow preparation for each appointment
C3	There are systems in place to ensure patients are able to access information in relevant formats
C4	There are systems in place to ensure patients are aware who is present at and who is performing their examination/procedure
C5	There are systems in place to ensure patients know how, when and by whom results/reports will be communicated
C6	There are systems in place to ensure that patients have access to information about peer/self-help and support groups
C7	There are systems in place to ensure patient information materials are developed, available and reviewed with lay/patient representatives and updated within specified timescales



PE2 The service implements and monitors systems to ensure the privacy, dignity, comfort and security of patients are respected throughout contact with the service.	
Rationale: The service should actively promote patients' privacy, dignity and security. Due regard should be paid to differences in culture, religion, age and other factors with reference to equality and diversity legislation.	
C1	There are defined roles and responsibilities for professional leadership and management with regards to privacy, respect, comfort and security of the patient population
C2	There are systems in place to encourage and support staff to be welcoming and to act with discretion and respect towards patients and carers
C3	There are systems in place to ensure that patients' privacy, dignity and security are maintained
C4	There are systems in place to help maintain patients' comfort



PE3 The service implements and monitors systems to ensure informed patient consent is obtained for each examination/procedure.	
Rationale: The service should ensure that patients are involved in decisions about their examinations / procedures. Valid, informed consent to examinations/ procedures is central to patient involvement in their own care.	
C1	There are defined roles and responsibilities for obtaining informed consent
C2	There are systems in place to ensure that patients are able to discuss their examination/procedure options with an appropriate staff member
C3	There are systems in place to enable patients to give or withhold informed consent for all examinations/procedures
C4	There are systems in place to arrange taking of consent from children and patients with particular needs for all examinations/procedures
C5	There are systems in place to enable patients to give or withhold informed consent for access to and distribution of test results and reports
C6	There are systems in place to enable patients to give or withhold informed consent for their data to be used for teaching and/or research purposes



PE4 The service implements and monitors systems to ensure that service delivery is patient focused.	
Rationale: The service should ensure that patients are involved in decisions about their examination. Due regard should be paid to differences in culture, religion, age and other factors, and the service should ensure that it complies with relevant legislation.	
C1	There are defined roles and responsibilities for professional leadership and management to ensure patient-focused care
C2	There are systems in place to ensure that the service is accessible to all patients and carers
C3	There are systems in place to ensure appointments are available to meet patient needs and circumstances and co-ordinated with other appointments where possible
C4	There are systems in place to ensure positive identification of patients
C5	There are systems in place to ensure specific requirements of patients and careers are identified and responded to
C6	There are systems in place to ensure that relevant information is communicated to individual patients during their contact with the service, including arrangements for transfer/continuity of care



PE5 The service implements and manages systems to ensure that patients are able to feedback on their experience of the service and that the feedback is acted upon.	
Rationale: The service should encourage patients and carers to give and use feedback to improve and develop the service.	
C1	There are defined roles and responsibilities for obtaining and managing feedback from patients, carers and relatives
C2	There are systems in place to develop, agree and maintain materials to support patient feedback, involving input from patients/lay people
C3	There are systems in place to ensure patients and carers are able to give feedback in a variety of formats and in confidence
C4	There are systems in place to ensure results of patient feedback are collated, analysed and findings are disseminated to relevant parties and acted upon



Domain 2: Facilities, Resources and Workforce

The purpose of the Facilities, Resource and Workforce Domain is to ensure that adequate resources are provided and used effectively to provide a safe, efficient, comfortable and accessible service. This is achieved through appropriate and adequate facilities (rooms and equipment); motivated and competent staffing; and the integration of sound business planning principles within the service.

STANDARDS:

FRW 1	The service implements and monitors systems to ensure the facilities and environment support delivery of the service.
FRW 2	The service implements and monitors systems to procure and manage equipment to deliver the service.
FRW 3	The service implements and monitors systems to recruit, manage and support staff to deliver the service.
FRW 4	The service implements and monitors systems to ensure staff are fully trained and competent to deliver the service.
FRW 5	The service implements and monitors systems to engage in integrated service and workforce review, planning and development.
FRW 6	The service implements and monitors systems to manage its budget and service contracts.
FRW 7	The service implements and monitors systems to manage complaints.



FRW1 The service implements and monitors systems to ensure the facilities and environment support delivery of the service.	
Rationale: The service should provide an environment and facilities which are safe, clean and comfortable and fit for purpose for staff, patients and others.	
C1	There are defined roles and responsibilities for each area of facilities and environment management for supporting service delivery
C2	There are systems in place to ensure that all areas used by the service meet the specific needs of the patient population (including children and those with particular needs) and staff
C3	There are systems in place to ensure the management of space to facilitate efficient working
C4	There are systems in place to ensure that all areas used by the service are well maintained
C5	There are systems in place to ensure that access to particular areas is restricted where appropriate
C6	There are systems in place to ensure the management and control of environmental conditions



FRW2 The service implements and monitors systems to procure and manage equipment to deliver the service.	
Rationale: The service has a duty to assure the appropriate procurement, installation, operation, maintenance, quality assurance and replacement of all equipment (including software) and consumables.	
C1	There are defined roles and responsibilities for the procurement and management of all equipment and consumables
C2	There are systems in place for the procurement of all equipment and consumables
C3	There are systems in place to assure installation, calibration, operation and performance of equipment
C4	There are systems in place to ensure equipment is appropriate for patients, staff, children and those with particular needs
C5	There are systems in place to ensure maintenance and quality assurance of all equipment with corresponding records
C6	There are systems in place to ensure equipment failures and faults are monitored and managed
C7	There are systems in place to ensure that equipment replacement is planned and implemented



FRW3 The service implements and monitors systems to recruit, manage and support staff to deliver the service.	
Rationale: The service should ensure that the management of staff is effective, fair, consistent and supportive. Management should comply with current legislation and current best practice.	
C1	There are defined roles and responsibilities for management and professional leadership
C2	There are systems in place to ensure clear definition and management of tasks for staff to deliver the service
C3	There are systems in place to ensure there are sufficient staff within the service with an appropriate mix of skills to enable delivery of the service
C4	There are systems in place to ensure agreed contracts of employment, job descriptions/job plans, and that staff appraisals or personal development plan reviews are conducted for all staff
C5	There are systems in place to ensure that employment policies and any changes are communicated and consistently applied
C6	There are systems in place to manage all out of hours service provision including staff rotas
C7	There are systems in place to ensure that in collaboration between the employer and employee support is available to manage stress and achieve a work/life balance
C8	There are systems in place for managing conflicts of interest
C9	There are systems in place to ensure staff are able to feedback in confidence on the service and contribute to service management



FRW4 The service implements and monitors systems to ensure staff are fully trained and competent to deliver the service.	
Rationale: The service has a duty to ensure that all staff are competent, skilled and supported to maintain, improve and widen scope of their competencies.	
C1	There are defined roles and responsibilities for the management of staff competence
C2	There are systems in place to support and manage the recruitment of staff
C3	There are systems in place to ensure staff are competent to undertake the role to which they have been appointed, including a process for remedial action if concerns around staff competency are raised
C4	There are systems in place to check qualifications and registration of relevant staff are up-to-date
C5	There are systems in place to ensure all staff are properly inducted into new roles, including any additional education
C6	There are systems in place to ensure staff are adequately supervised while training
C7	There are systems in place to ensure the service maintains competencies to address the requirements of providing the service (including where appropriate provision for children, and those with particular needs)
C8	There are systems in place to ensure that all staff are supported in the maintenance of necessary skills, knowledge and levels of competence via CPD, and to develop new competencies to the level as defined by the relevant statutory or professional body



FRW5 The service implements and monitors systems to engage in integrated service and workforce review, planning and development.	
Rationale: The service should review clinical and non-clinical practice and workforce deployment. All service improvement activities and workforce development should facilitate an effective service in response to changing healthcare needs.	
C1	There are defined roles and responsibilities for each area of service review, planning and improvement, and workforce planning and development
C2	There are systems in place to support service review, improvement and planned developments with the involvement of patients, staff, users and others
C3	There are systems in place to ensure strategic service planning and workforce planning are integrated
C4	There are systems in place to assess, agree and implement workforce development initiatives, which include the involvement of senior managers
C5	There are systems in place to support engagement with content and delivery of relevant education and training
C6	There are systems in place to support and monitor staff retention and ensure succession planning arrangements



FRW6 The service implements and monitors systems to manage its budget and service contracts.	
Rationale: The service should manage its budgets and service contracts effectively and efficiently to ensure high-quality care for patients.	
C1	There are defined roles and responsibilities for budget and contract management
C2	There are systems in place to ensure regular monitoring and reporting of budgets
C3	There are systems in place to ensure all staff are aware of budget management processes and the implications for their area of responsibility
C4	There are systems in place to ensure engagement with wider financial planning processes
C5	There are systems in place to procure, manage and monitor delivery of contracted services
C6	There are systems in place to ensure arrangements for dealing with income generated by service activity and/or charitable donations



FRW7 The service implements and monitors systems to manage complaints.	
Rationale: The service has a duty to manage complaints effectively from patients, staff and others, within specified timescales, and use information from complaints to inform development of care and service delivery.	
C1	There are defined roles and responsibilities for managing complaints
C2	There are systems in place to manage verbal and written complaints
C3	There are systems in place to investigate and respond to complaints within specified timeframes
C4	There are systems in place to train staff in dealing with those wanting to make complaints
C5	There are systems in place to ensure complaints are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



Domain 3: Safety

The purpose of the Safety Domain is to ensure that services provide the highest level of safety for patients, staff and others who come into contact with the service. This is achieved through assessment and management of the risks associated with delivery of the service.

STANDARDS:

SA1	The service implements and monitors systems to manage the risk of infection.
SA2	The service implements and monitors systems to manage the risks associated with hazardous substances and materials.
SA3	The service implements and monitors systems to manage safe moving & handling.
SA4	The service implements and monitors systems to manage violence & aggression.
SA5	The service implements and monitors systems to ensure general health & safety of patients, staff & others.



SA1 The service implements and monitors systems to manage the risk of infection.	
Rationale: The service has a duty to minimise infection by providing training and equipment and upholding rigorous standards of hygiene.	
C1	There are defined roles, responsibilities and accountabilities regarding infection control
C2	There are systems in place to define, assess and manage the risk of infection
C3	There are systems in place to manage patients with contagious and communicable disease and/or suppressed immune systems
C4	There are systems in place to ensure the care of any individual exposed to contagious and communicable diseases
C5	There are systems in place to ensure decontamination of equipment and the environment following an incident
C6	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



SA2 The service implements and monitors systems to manage the risks associated with hazardous substances and materials.	
Rationale: The service has a duty to minimise the potential of harm from hazardous substances and materials by providing appropriate training and equipment.	
C1	There are defined roles, responsibilities and accountabilities for the control of hazardous substances and materials
C2	There are systems in place to define, assess and manage risks associated with hazardous substances and materials
C3	There are systems in place to ensure the safe storage, handling and disposal of hazardous substances and materials
C4	There are systems in place to ensure appropriate protective equipment is available, maintained and used appropriately
C5	There are systems in place to ensure decontamination and care of people following an incident
C6	There are systems in place to ensure decontamination of equipment and environment following an incident
C7	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



SA3 The service implements and monitors systems to manage safe moving & handling.	
Rationale: The service has a duty to minimise the potential for harm from moving and handling patients and equipment by providing training and appropriate lifting aids.	
C1	There are defined roles and responsibilities for moving and handling
C2	There are systems in place to define, assess and manage risks associated with moving and handling
C3	There are systems in place to ensure that moving and handling aids are available. Maintained and used appropriately
C4	There are systems in place to assure the safe transport of patients
C5	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon
C6	There are systems in place to define, assess and manage the holding and restraint of patients including specific policies for children and vulnerable adults



SA4 The service implements and monitors systems to manage violence & aggression.	
Rationale: The service should minimise the potential for violent or aggressive behaviour and support staff, patients, and others involved in such incidents.	
C1	There are defined roles and responsibilities regarding the management of violence and aggression
C2	There are systems in place to define, assess and manage violence and aggression
C3	There are systems in place to ensure support for patients, staff and others who have been involved in an incident
C4	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



SA5 The service implements and monitors systems to ensure general health & safety of patients, staff & others.	
Rationale: The service has a duty to promote a good health and safety culture, manage adverse events and minimise risk.	
C1	There are defined roles and responsibilities for each area of general health & safety
C2	There are systems in place to define, assess and manage general health and safety risks
C3	There are systems in place to manage adverse healthcare events
C4	There are systems in place to maintain staff awareness and training on health and safety including fire
C5	There are systems in place to ensure health and safety equipment is available , maintained and used appropriately
C6	There are systems in place to ensure appropriate signage and hazard warnings
C7	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



Domain 4: Clinical

The purpose of the Clinical domain is to promote the service's role in rapid and accurate diagnosis and treatment. This is achieved through administrative and clinical practices appropriate to the patient population including children; effective management of risk and emergencies; and the review of existing and new clinical practice to develop and improve the service.

STANDARDS:

CL1	The service implements and monitors systems to assure the delivery of the service from referral to discharge from the service, including follow-ups
CL2	The service implements and monitors systems to assure the quality of the diagnostic test
CL3	The service implements and monitors systems to assure the clinical and technical quality of the interpretation of diagnostic results, and their reporting and communication in a timely manner
CL4	The service implements and monitors systems to assure the clinical and technical quality of treatments, interventions and invasive procedures
CL5	The service implements and monitors systems to manage drugs, contrast media, gases and medical devices
CL6	The service implements and monitors systems to minimise clinical risk and manage incidents and errors arising from clinical activity
CL7	The service implements and monitors systems to manage clinical records
CL8	The service implements and monitors systems to review current and emerging clinical practice, implementing new and innovative practice as appropriate
CL9	The service implements and monitors systems to manage the physiological science specialism specific risks.



CL1 The service implements and monitors systems to assure the delivery of the service from referral to discharge from the service, including follow-ups	
Rationale: The service should work collaboratively with colleagues to agree and deliver appropriate end to end pathways to ensure diagnosis and/or treatment within specified timescales with minimal delays.	
C1	There are defined roles and responsibilities for leadership and integrated governance for diagnostic/treatment pathways
C2	There are systems in place to manage diagnostic/treatment pathways from referral to discharge from the service within specified timescales, including the management of DNAs and cancellations
C3	There are systems in place to ensure a collaborative approach to define and deliver diagnostic/treatment pathways and to maintain communication within and outside the service
C4	There are systems in place to ensure clinically relevant information is received from referrers and patients
C5	There are systems in place to ensure vetting, justification and prioritisation of referrals
C6	There are systems in place to ensure the specific needs of children are met
C7	There are systems in place to manage unexpected diagnoses, red flags and indications of potential medical emergencies



CL2 The service implements and monitors systems to assure the quality of the diagnostic test	
Rationale: The service should ensure that all diagnostic tests are carried out in accordance with agreed protocols for children and adults by competent staff working within their defined scope of practice.	
C1	There are defined roles and responsibilities for managing the quality of each group of diagnostic tests
C2	There are systems in place to develop, agree, maintain and apply protocols for each diagnostic test
C3	There are systems in place to ensure that all test protocols are accessible and communicated to all appropriate staff
C4	There are systems in place to assure the diagnostic quality of the test



CL3 The service implements and monitors systems to assure the clinical and technical quality of the interpretation of diagnostic results, and their reporting and communication in a timely manner	
Rationale: The service should ensure that the results of all diagnostic tests are reported in accordance with agreed local practice by competent staff working within their defined scope of practice to deliver accurate and effective interpretation of the test data. The results of diagnostic tests should be made available in an appropriate format to the referrer or the patient as appropriate in a timely fashion.	
C1	There are defined roles and responsibilities for interpreting and reporting test results
C2	There are systems in place to develop and agree the structure and content of diagnostic reports to meet local needs
C3	There are systems in place to ensure that all appropriate staff are aware of the agreed formats for reporting/communication of results
C4	There are systems in place to assure the quality and accuracy of the interpretation and reporting of test results
C5	There are systems in place to ensure communication of diagnostic reports to referrers and multidisciplinary team meetings within specified timescales
C6	There are systems in place to manage alterations and amendments to diagnostic reports



CL4 The service implements and monitors systems to assure the clinical and technical quality of treatments, interventions and invasive procedures	
Rationale: The service should ensure that all interventional procedures and treatments are conducted in accordance with agreed protocols for children and adults by competent staff working within their defined scope of practice.	
C1	There are defined roles and responsibilities for staff who carry out treatments or interventional procedures
C2	There are systems in place to define, assess and manage risks related to treatments or interventional procedures
C3	There are systems in place to develop, agree, maintain and implement protocols for all treatments and interventional procedures which should be evidence based, validated and objective
C4	There are systems in place to ensure that protocols for treatments and interventional procedures are accessible and communicated to all appropriate staff
C5	There are systems in place to assure and measure the quality and outcomes of treatments or interventional procedures



CL5 The service implements and monitors systems to manage drugs, contrast media, gases and medical devices	
Rationale: The service has a duty to ensure that drugs, including controlled drugs and contrast media are prescribed, prepared and administered safely to reflect statutory requirements. Systems should reflect differences between adults and children. All drugs and contrast media should be stored appropriately and adverse reactions should be dealt with efficiently and effectively.	
C1	There are defined roles and responsibilities for drugs and contrast media management
C2	There are systems in place to manage the prescription and administration of drugs and contrast media
C3	There are systems in place to ensure the identification and management of patients at risk of adverse reactions to specific drugs and contrast media
C4	There are systems in place to manage the preparation, administration and withdrawal of drugs and contrast media
C5	There are systems in place to ensure the management and care of patients receiving drugs and contrast media, including response to adverse reaction
C6	There are systems in place to ensure that drugs and contrast media are securely and safely stored



CL6 The service implements and monitors systems to minimise clinical risk and manage incidents and errors arising from clinical activity	
Rationale: The service should minimise clinical risk and manage incidents and errors by implementing an effective risk management and reporting system.	
C1	There are defined roles and responsibilities for risk management
C2	There are systems in place to define, assess and manage clinical risk
C3	There are systems in place to ensure appropriate response to clinical incidents
C4	There are systems in place to manage medico-legal and research examinations or procedures, and this includes ensuring that requests are justified
C5	There are systems in place to ensure incidents and errors are reported, investigated, recorded and analysed with findings disseminated to relevant parties and acted upon



CL7 The service implements and monitors systems to manage clinical records	
Rationale: The service has a duty to manage, store and transfer all patient data in a secure manner to reflect statutory requirements and maintain patient confidentiality.	
C1	There are defined roles, responsibilities and accountabilities for each area of clinical records management
C2	There are systems in place to maintain patient confidentiality
C3	There are systems in place to ensure the secure and confidential storage, retrieval, transmission and transportation of patient records
C4	There are systems in place to manage sharing of patient data between organisations
C5	There are systems in place to ensure control and audit of access to patient data



CL8 The service implements and monitors systems to review current and emerging clinical practice, implementing new and innovative practice as appropriate	
Rationale: The service should carry out clinical audits to explore the effect of current clinical practice. Audit information should be used in collaborative review processes to develop practice. The service should review emerging developments in clinical practice and develop new clinical practices in line with current research and guidance	
C1	There are defined roles and responsibilities for clinical governance, including reviewing current practice and the development of new clinical practices
C2	There are systems in place to ensure regular audit of current clinical practice, review and dissemination of findings and appropriate action
C3	There are systems in place for reviewing emerging clinical practices and implementing new practice as appropriate
C4	There are systems in place to ensure governance arrangements to support introduction and audit of new clinical practices
C5	There are systems in place to support engagement in research and development activities

CL9 The service implements and monitors systems to manage the physiological science specialism specific risks.	
Rationale: Audiology has specialism specific safety concerns over and above those covered by the other generic material in this domain. These are covered by this standard and associated criterion.	
C1	There are defined roles and responsibilities regarding clinical audiology risks
C2	There are systems in place to ensure the maintenance and checking of the safety of electrical equipment
C3	There are systems in place to ensure that there is appropriate management of patients who have any adverse reaction or distress resulting from audiological examinations/procedures
C4	There are systems in place to ensure adequate supervision of patients undergoing procedures with the potential to cause an adverse reaction, including vestibular tests
C5	There are systems in place to ensure that patients with a clinical history that contraindicates any audiology procedures are identified, risk assessed and procedures modified appropriately
C6	There are systems in place to ensure that adequate guidance is given to patients regarding the safe usage of devices and consumables issued