

**REGISTRATION of  
QUALITY CONTROLLERS (MGPS)**

**POLICY, GUIDANCE and  
APPLICATION FORM**

**3<sup>rd</sup> Edition**

**September 2015**

# **REGISTRATION of QUALITY CONTROLLERS (MGPS)**

## **POLICY, GUIDANCE and APPLICATION FORM**

This document has been prepared on behalf of the NHS Pharmaceutical Quality Assurance Committee by the Medical Gas Sub Group.

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## **POLICY, GUIDANCE and APPLICATION FORM**

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HTM = Health Technical Memorandum

= Scottish Health Technical Memorandum

QC(MGPS) = Quality Controller – Medical Gas Pipe line Systems (as defined by HTM 02-01 2006 and 02-01)

# **REGISTRATION of QUALITY CONTROLLERS (MGPS)**

## **POLICY AND GUIDANCE**

### **GUIDANCE NOTES**

#### **1. Background**

In 1972 Hospital Technical Memorandum No. 22 (HTM 22) was published 'Piped Medical Gases, Medical Compressed Air and Vacuum Installations' as a direct result of a number of patient injuries and fatalities. The document intended to both raise awareness of the dangers of piped medical gases and control their system design, installation and maintenance. A new edition and supplement followed in 1977. The position of Suitably Qualified Person (SQP) was introduced - being a pharmacist with suitable skills to assist the Authorised Person (AP) by carrying out identity and purity tests as part of the initial system commissioning and after certain hazardous engineering work on existing pipeline systems.

In 1994 a completely revised, upgraded and expanded document HTM 2022 'Medical Gas Pipeline Systems' was published. In this document the SQP became a Quality Controller, Medical Gas Pipeline Systems (QC(MGPS)) and the role was no longer restricted to pharmacists, but could be other suitably trained and experienced scientists.

This was followed in 2006 by the publication of the current HTM 02-01 and in 2012 by the current SHTM 02-01.

It is a requirement of the current HTM 02-01 and SHTM 02-01 that a register of suitably trained and experienced QC(MGPS) is maintained in the UK.

The *Quality Controller (Medical Gas Pipeline Systems)* register has been established by the Medical Gas Sub Group of the NHS Pharmaceutical Quality Assurance Committee and is operated under the auspices of the aforementioned committee.

This register provides a list of all QC(MGPS) currently carrying out medical gas testing within the UK.

#### **2. Appointment to the Register of QC(MGPS)**

*"Only individuals who have been appointed to the Quality Controller (MGPS) register may act as a Quality Controller (MGPS)."*

*Ref : HTM 02-01 Part B Chapter 7, para 7.56 SHTM 02-01 Part B Chapter 7, para 7.58*

*"Inclusion on the register will normally be sufficient to qualify an individual to act as Quality Controller (MGPS) for any hospital trust. However, the trust's chief pharmacist may exercise the option to specify, or otherwise limit, those registered as Quality Controller (MGPS) who may operate on their site"*

*Ref : HTM 02-01 Part B Chapter 7, para 7.58*

*"Inclusion on the register will normally be sufficient to qualify an individual to act as Quality Controller (MGPS) for any healthcare organisation. However, the healthcare organisation's chief*

*pharmacist may exercise the option to specify, or otherwise limit, those registered as Quality Controller (MGPS) who may operate on their site”*

*Ref : SHTM 02-01 Part B Chapter 7, para 7.60*

## **2.1 HTM 02-01 and SHTM 02-01 QC(MGPS) Acceptance Criteria**

HTM 02-01 (published May 2006) and SHTM 02-01 (2012) are both explicit in the acceptance criteria for registration.

To be appointed to the register and be allowed to act as a Quality Controller (MGPS) the candidate needs to meet the following competency requirements:-

- *be a graduate who is eligible for membership of the Royal Pharmaceutical Society of Great Britain (RPSGB now RPS), Royal Society of Chemistry (RSC) or Institute of Biology (now Royal Society of Biology).*
- *have successfully completed an accredited training course for QC testing of medical gases and piped medical gas systems*
- *have had extensive practical experience of QC testing of medical gases and piped medical gas systems*
- *be familiar with the requirements of HTM 02-01/ SHTM 02-01*
- *undertake regular CPD in medical gases and MGPS. This would normally involve attending an approved refresher course at least every five years*

*Ref : HTM 02-01 Part B Chapter 7, para. 7.59 SHTM 02-01 Part B Chapter 7 para. 7.61*

## **2.2 Exception arrangements applied during register development**

During the development of the register, the HTM allowed a number of transitional arrangements which could be applied and which were designed to prevent exclusion of Quality Controllers (MGPS), who did not meet the above criteria but nevertheless are competent in testing procedures.

For NHS staff the transitional arrangements could be applied at the discretion of the regional QA Specialist.

Individuals who were not eligible for membership of the RPSGB (as it was at the time of publication of the HTM, now Royal Pharmaceutical Society) Royal Society of Chemistry or Institute of Biology (now Royal Society of Biology) but who met the remaining criteria described above and had extensive experience of medical gas testing in the two years prior to the publication of the current HTM 02-01 were appointed to the Quality Controller (MGPS) register and could continue to act as a Quality Controller (MGPS).

Individuals who had extensive experience of medical gas testing in the two years prior to the publication of the current HTM 02-01 and are acting as QC(MGPS) at time of publication of the current HTM 02-01 but had not completed an accredited training course were allowed to continue to act as QC MGPS and could be admitted to the register under transitional arrangements provided they subsequently completed an accredited training course.

**These transition arrangements have expired and can no longer be applied.**

## 2.3 New applications

All new applications for QC (MGPS) registration should comply with the requirements of the current HTM and SHTM.

An application form is attached as an appendix to this document (Appendix 2)

## 3. Responsibilities and Liabilities

### 3.1 QC(MGPS)

#### 3.1.1 Application

On application to the register, it is the responsibility of the QC(MGPS) candidate to provide accurate and truthful evidence of training, experience and competency on the application form.

Details of how the candidate will retain knowledge and expertise in this field should also be provided.

#### 3.1.2 Maintenance of registration

Once accepted on to the register, the QC(MGPS) is responsible for :-

- maintaining their knowledge and expertise
- their own actions; and must maintain a high standard of objectivity and professional conduct.
- notifying the Medical Gas Sub Group (MGSG) of any changes in circumstances, employment, role or level of activity in medical gas testing
- informing the MGSG of involvement in any incident where their actions have directly contributed to an adverse patient event. Notification should be provided in a timely manner.
- ensuring that they have the appropriate professional indemnity and public liability insurance along with DBS / PVG clearance as required.

Note – the local Chief Pharmacist should ensure this is the case.

Further Note: the QC(MGPS) should also inform the MGSG of any incident or situation that they encounter that could/should be shared to increase knowledge, raise awareness or otherwise educate and inform other members of the QC(MGPS) Register.

DBS = Disclosure and Barring Service  
PVG = Protecting Vulnerable Groups Scheme (Scotland)  
Access NI – Northern Ireland

### 3.2 NHS Pharmaceutical Quality Assurance Committee (NHS PhQAC)

3.2.1 NHS PhQA Committee has overall responsibility for the QC(MGPS) Register and for approving the guidance notes and policy document which accompany it.

In addition the Committee will arbitrate in the event of any dispute surrounding inclusion on the register.

3.2.2 NHS PhQA Committee has empowered the MGSG to undertake the routine management of the register under the auspices of HTM 02-01 and SHTM 02-01 as described in paragraph 3.3., and reviews the activity of the Sub Group through annual reports.

### **3.3 NHS Pharmaceutical Quality Assurance Committee (NHS PhQAC) Medical Gas Sub Group (MGSG)**

The Medical Gas Sub Group is responsible for the ongoing routine management of QC(MGPS) Register, on behalf of the NHS PhQA Committee; for reviewing and ratifying applications from NHS candidates; and for considering / ratifying applications (as appropriate) from commercial candidates for addition to the Register on behalf of the parent committee.

Ratification of applicant suitability for admission to the register is carried out by the Medical Gas Sub Group on the basis of information provided in the application form which will include :-

- evidence of accredited and formally assessed training
- provision of the required number of completed permits to work
- provision of permits to work for the different medical gases routinely tested – oxygen, nitrous oxide, medical and surgical air, nitrous oxide : oxygen 50:50 (if possible) and vacuum.
- supporting statements and sign off from the relevant regional QA Specialist
- supporting statements from the mentoring QC(MGPS) as appropriate
- any supplementary work based evidence of practice e.g. practice workbook

It should be understood that the Medical Gas Sub Group is not in a position to assess the standard of practical testing carried out. This should be carried out locally by the regional Quality Assurance Specialist and / or an experienced registered QC(MGPS) acceptable to the MGSG.

**The NHS PQA committee or the Medical Gas Sub Group do not take responsibility for the standard of work carried out by individuals on the register and are not liable in the event of an incident involving a Quality Controller on the register.**

### **3.4 'regional' Quality Assurance Specialists**

*Appointments to the QC(MGPS) register will be made ONLY by regional QA Specialists/ regional quality control pharmacists.*

*Ref : HTM 02-01 Part B, Chapter 7, para 7.57 SHTM 02-01 Part B, Chapter 7, para 7.59*

It is the responsibility of individual 'regional' QA specialists to approve the appointment of local NHS pharmacy candidates for inclusion on the register. Those same managers may receive expressions of interest from non-pharmacy staff e.g. personnel working in Clinical Physics departments. The regional QA Specialist should collate application forms and approve as appropriate or forward these to the Medical Gas Sub Group for assessment and approval. If approached by potential commercial QC(MGPS) candidates, the regional QA Specialist may choose to support the submission if the candidate is known to the regional QA Specialist or may prefer to refer applicants to another regional QA Specialist with greater knowledge of the applicant, or directly to the Medical Gas Sub Group.

It is also the responsibility of the 'regional' QA specialist to provide details of any amendments required re NHS pharmacy QC(MGPS) within their region. The application form in Appendix 2 can be used to advise the Medical Gas Sub Group of any alterations. Guidance provided in Appendix 4 may also be useful.

### 3.5 Chief Pharmacist

*"Inclusion on the register will normally be sufficient to qualify an individual to act as Quality Controller (MGPS) for any hospital trust. However, the trust's chief pharmacist may exercise the option to specify, or otherwise limit, those registered as Quality Controller (MGPS) who may operate on their site"*

Ref : HTM 02-01 Part B Chapter 7, para 7.58

*"Inclusion on the register will normally be sufficient to qualify an individual to act as Quality Controller (MGPS) for any healthcare organisation. However, the healthcare organisation's chief pharmacist may exercise the option to specify, or otherwise limit, those registered as Quality Controller (MGPS) who may operate on their site"*

Ref : SHTM 02-01 Part B Chapter 7, para 7.60

Medical gases are medicines and as such, the chief pharmacist has overall responsibility for the quality, delivery and use.

The chief pharmacist should have a role in their management, procurement, dispensing and quality assurance, which includes storage and delivery systems (of which the MGPS is a part), regardless of operational infrastructures.

With respect to testing medical gases following any interruption in supply, the chief pharmacist may choose to specify QC (MGPS) who may operate in their geographical area. The QC (MGPS) register should be readily available to allow selection to be made. In practice, it will be the Authorised Person who will contact the QC(MGPS) and therefore, the AP should also be aware of any restrictions in those eligible to test.

The chief pharmacist may also wish to ensure that documentary evidence of continuing and recent experience in MGPS testing is provided before any testing commences.

Best practice would recommend that a letter of authorisation should be issued by the Chief Pharmacist to each QC(MGPS) permitted to work within the relevant corporate body.

## 4. QC (MGPS) training requirements

*The Quality Controller (MGPS) should also receive specific training covering the responsibilities and duties which he/she will be required to carry out.*

Ref: HTM 02-01 Part B Chapter 7, para 7.19 SHTM 02-01 Part B Chapter 7, para 7.16

- 4.1 All persons wishing to register as QC (MGPS) must undertake formal accredited and assessed training. The course syllabus should meet requirements listed in the relevant HTM 02-01.

Appendix 3 lists the minimum criteria to be included on a training course.

If the criteria are met then the course will be accredited by the NHS PQA committee. The course syllabus should be sent to the Medical Gas Sub Group for approval, and should include details of all assessment methods used.



- 4.2 To maintain registration, the QC (MGPS) should undertake accredited update training at least every 5 years. Ongoing competency should be formally assessed.

*Ref: HTM 02-01 Part B Chapter 7, para 7.17 Refresher training and reassessment  
SHTM 02-01 Part B Chapter 7, para 7.17 Refresher training and reassessment*

- 4.3 Those Quality Controllers accepted on to the register must also maintain evidence of practical experience and ongoing training from suitable sources to retain registration.

*Ref: HTM 02-01 Part B Chapter 7, para 7.23*

**It is the responsibility of the individual to ensure that evidence of ongoing training is available.**

## **5. Exclusion / removal from the register**

In the event that a person listed on the Register of QC(MGPS) should wish to retire, withdraw or otherwise require removal of their name from the Register, the guidance given in Appendix 4 should be followed.

In all events, the individual concerned, or their employer, must keep the Medical Gas Sub Group (MGSG) suitably and promptly informed

## **6. Appeals process**

Any dispute over inclusion or suspension / removal the register will be escalated to the NHS PhQAC for consideration and resolution.

The outcome of the appeal will be final.

## **7. Register format**

The QC(MGPS) Register will be maintained as an electronic database. A secure copy is available in the public domain of the QAInfozone website.

The Register records the name of the QC(MGPS), current email contact details and the appropriate registration number. Differentiation is made between NHS and commercial QC (MGPS).

The register is reviewed periodically following MGSG meetings where applications have been reviewed and following update training.

## 8. References

1. 'Clinical Risk Management and Use of Medical Gases in Hospitals', Martin Knowles, Tim Root, Paul Jones, London, Eastern and South East Specialist Pharmacy Services, March 2004
2. Medical Gases, Health Technical Memorandum 02-01: Medical gas pipeline systems, Part A Design, installation, validation and verification
3. Medical Gases, Health Technical Memorandum 02-01: Medical gas pipeline systems, Part B Operational management
4. Scottish Health Technical Memorandum 02-01; Medical gas pipeline systems Part B Operational management

<b>Document History</b>	<b>Issue date and reason for change</b>
Version 1	November 2006
Version 2	May 2009 – update to include QC (MGPS) registration application form
Version 3	September 2015 – update to include guidance for suspension/removal from QC (MGPS) register
Version 4	

## Appendix 1

### Guidance for completion of the QC(MGPS) registration application form

1.1 The form in Appendix 2 should be completed as fully as possible

Include:

- qualifications,
- evidence of successful completion of formal training e.g. certificate
- courses attended,
- experience of medical gas testing
- copies of FIVE Permit-To-Work forms (PTW)
- copies of relevant test reports
- other evidence of relevance e.g. practice workbook

1.2 The QC(MGPS) registration application form is also available on the NHS PhQA committee website and directly from the Medical Gas Sub Group via the contact addresses below.

[Lynn.morrison@ggc.scot.nhs.uk](mailto:Lynn.morrison@ggc.scot.nhs.uk)

[Tim.sizer@nbt.nhs.uk](mailto:Tim.sizer@nbt.nhs.uk)

1.3 The completed form should then be returned to:-

- In the case of NHS pharmacy-based applicants: send to the regional QA specialist for **assessment** and **approval**. When approved, the regional QA specialist will forward the application to the Medical Gas Sub Group for ratification and subsequent appointment to the Register.
- In the case of NHS non-pharmacy-based applicants: send to the regional QA specialist for **collation** and **comment/ approval as appropriate**. When considered and comments made, the regional QA specialist will forward the application to the Medical Gas Sub Group for ratification / approval with subsequent appointment to the Register.
- For applications from individuals or commercial bodies not part of the NHS: send to one of the regional QA specialists for **oversight** and **comment**. When considered and comments made, the regional QA specialist will forward the application to the Medical Gas Sub Group for **assessment** and **approval** with subsequent appointment to the Register.  
Note :- The local regional QA Specialist may choose to support the submission if the candidate is known to them or may prefer to refer applicants to another regional QA Specialist with greater knowledge of the applicant, or directly to the Medical Gas Sub Group.

1.4 It may be necessary to return the form to the candidate for more information and therefore it is vital that appropriate and full contact details are accurately provided.

1.5 Successful applicants will be assigned a registration number and a certificate will be provided as evidence of registration.

**Appendix 2**

**Application form for QC(MGPS) registration**

**Applicant Details**

Name : \_\_\_\_\_

Contact Details

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel No : \_\_\_\_\_

Fax No : \_\_\_\_\_

E mail : \_\_\_\_\_

Are you employed by the NHS, a commercial concern or both? \_\_\_\_\_

Current Post : \_\_\_\_\_

Current Employer (as appropriate): \_\_\_\_\_

Time in post (years): \_\_\_\_\_

Description and locations of current duties with respect to medical gases: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Relevant previous post: \_\_\_\_\_

Description of duties in this post with respect to medical gases: \_\_\_\_\_

\_\_\_\_\_

*Continue on separate sheets if necessary*

**QC(MGPS) Application for**

Name:

**Qualifications and Training**

Relevant Qualifications (*HTM 02-01 Part B Chapter 7, para. 7.59 or SHTM 02-01 Part B Chapter 7, para. 7.61*) e.g. MRPharmS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Accredited medical gas training and refresher courses

Course title	Date	Organisation

No. of years practical experience of medical gas testing: \_\_\_\_\_

No. of tests (permits) carried out in the last 12 months: \_\_\_\_\_

No. of air compressor plants tested in the last 12 months  
(medical / surgical / dental air): \_\_\_\_\_

**Gases tested in last 12 months**

NOTE: Medical air plant testing may be used as supplementary evidence of continuing competency, but only in conjunction with evidence of practical experience in testing oxygen, medical /surgical air, nitrous oxide and 50:50 oxygen / nitrous oxide mixtures in wards and departments. When submitting permits to work / portfolio as appropriate please include evidence of having tested either nitrous oxide or nitrous oxide/oxygen 50:50 mix.

- Oxygen
- Medical / surgical air
- Nitrous oxide (state when last tested)
- Nitrous oxide / oxygen mixture (state when last tested)
- Vacuum
- Other medical gases e.g. Heliox® / CO<sub>2</sub>

**QC(MGPS) Application for**

Name:
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**Largest installation tested within last 12 months (no. of terminal units tested)**

- Less than 10 outlets
- Between 10 and 50 outlets
- Between 50 and 100 outlets
- Between 100 and 500 outlets
- More than 500 outlets

**How often do you carry out medical gas testing ?**

- Weekly
- Monthly
- Quarterly
- Six monthly

**Do you have access to and have you read and understood the relevant sections of:-**

HTM 02-01(2006) or 02-01 as applicable?

Yes  No

Registration of Quality Controllers (MGPS) – policy and guidance (current)

Yes  No

**How do you keep up to date with changes in MGPS best practice** – including advances in test methodology and equipment?

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**IMPORTANT:** Attach pdf, scans or photocopies of **completed Permit-to-Work** forms (minimum 5 examples of different medical gases) as evidence of medical gas testing activities and test reports. Ideally these will be accompanied with a copy of the matching test report.

Please ensure documents, entries on documents and signatures are fully legible.

For new installations where there is no Permit to Work, attach a copy of the **test certificates** and along with a confirmatory statement signed by the appropriate Authorised Person. Ensure the permits show evidence of testing different medical gases.

**QC(MGPS) Application for**

Name: \_\_\_\_\_

Applicant signature \_\_\_\_\_

Date \_\_\_\_\_

**For regional QA specialist approval**

Application approved \_\_\_\_\_ (signature of regional QA specialist)

Date \_\_\_\_\_

**For Medical Gas Sub Group approval**

Application approved \_\_\_\_\_ (signature Chair Med Gas Sub Group)

Date \_\_\_\_\_

Comments (as appropriate)

**For Official Use only**

Registration Number: \_\_\_\_\_

NHS

Commercial

Both

## **Appendix 3**

### **Education and training**

The HTM contains guidance for course content to facilitate appropriate accreditation.

*Ref: HTM 02-01/ SHTM 02-01 Part B Chapter 7*

The following topics should be included:-

#### **Course content**

- Medical Gas production and quality control, chemical and physical properties and safety requirements
- Medical gas systems – pipework and plant structure and basic principles of operation (including alarms and reserve supplies)
- Permit to work system and role of QC(MGPS)
- Principles and procedures of MGPS QC testing – including test equipment principles, calibration etc
- Problem systems and coping with emergencies
- Record keeping
- Legal requirements and regulations
- Cylinder management

All the above will be required for a new / inexperienced QC(MGPS)

For experienced QC(MGPS) personnel, update or refresher training courses should aim to cover the above (as appropriate) and additional topical subjects.

Copies of course syllabuses should be sent to the Medical Gas Sub Group for assessment and approval as appropriate.

#### **Learning outcomes**

All training courses should set out clear aims and learning outcomes:

The Quality Controller (MGPS) should be able to demonstrate knowledge and understanding by being able to :-

- Describe MGPS structure and components, and the statutory and guidance requirements for its safe, efficient operation and management (e.g. COSHH and Health and Safety at Work etc Act 1974)
  - Define chemical and physical properties of medical gases
  - Define principals of testing for contaminants (including moisture) in gases and the use of gas-testing analytical equipment, including maintenance and calibration
  - Maintain and calibrate gas testing equipment (including in the field calibration)
  - Test a medical gas system to current quality control standards and produce a report on the suitability of the system for supplying medical gases
  - Identify the origins and likely causes of MGPS contamination
  - Complete relevant sections of an MGPS permit-to-work
  - Advise on the extent of QC testing pertinent to engineering work on an MGPS
  - Advise on safe use and management of medical gases and medical gas cylinders
- Keep and analyse records of liquid and compressed gas usage to ensure maximum efficiency of purchase



## Appendix 4

### **QC(MGPS) Policy Guidance statement for Suspension / Removal from Register**

In the event that a person listed on the Register of QC(MGPS) should wish to retire, withdraw or the removal of their name from the Register is otherwise required, the following guidance should be followed.

In all events, the individual concerned, or their employer, must keep the Medical Gas Sub Group (MGSG) suitably and promptly informed.

Short Reference	Reason for potential Suspension/ Removal from Register	Course of Action
<b>A4.1</b>	<b>QC(MGPS) who choose to discontinue medical gas testing due to: retirement; ill health; new role or new job not connected with medical gas testing, etc.</b>	<ul style="list-style-type: none"> <li>a) Notification of this change in circumstances should be sent to the MGSG and the relevant regional QA specialist.</li> <li>b) The MGSG will remove the QC(MGPS) name from the register.</li> <li>c) Confirmation that this has been carried out will be sent to the relevant regional QA specialist, employer (as appropriate) and the QC(MGPS)</li> </ul>
<b>A4.2</b>	<b>Moving to a new job/ role retaining medical gas testing elements</b>	<ul style="list-style-type: none"> <li>a) Any NHS QC(MGPS) moving to another job within the NHS but wishing to remain on the register to continue to test medical gases can do so with the provision of a supporting statement to MGSG from the previous employer and from the new employer.</li> <li>b) Any NHS QC(MGPS) moving to commercial status can do so with a satisfactory reference to MGSG from their previous NHS employer (line manager) and a satisfactory reference and/or PVG / DBS clearance from their new employer. If self employed, provide evidence of PVG / DBS clearance.</li> <li>c) Any commercial QC(MGPS) moving to NHS employment will similarly require a supporting statement from previous employer and new employer and two references from NHS “customers” to be submitted to MGSG to facilitate retention on the register.</li> </ul>

## Appendix 4 (continued)

Short Reference	Reason for potential Suspension/ Removal from Register	Course of Action
A4.3	QC(MGPS) unable to meet HTM 02 – 01 and (s) HTM 01-01 update training requirements	<p>a) QC(MGPS) status will remain active but pending successful completion of update training within a period of 12 months. This is provided that active testing has been undertaken up until proposed refresher training date. MGSG to be informed of training date and outcome from assessment.</p> <p>b) If training not completed during agreed time, then the QC(MGPS) will be suspended from the register.</p> <p>c) Following suspension from the register, the QC(MGPS) wishes to resume testing activities subsequent to completion of appropriate training, application may be submitted to MGSG in the usual manner according to policy.</p> <p>d) If update training has not been completed within 2 years or if a period of 2 years or more without active practice, then participation in the full course is required. Note – it is the responsibility of the QC(MGPS) to contact the MGSG to inform the group of missed training dates.</p>
A4.4	QC(MGPS) who fails refresher / update training assessment	<p>a) QC(MGPS) will be <b>suspended</b> from the register</p> <p>b) The relevant regional Quality Assurance (QA) Specialist and Chief Pharmacist / Employer will be contacted and advised of the situation and the QC(MGPS) suspended from the register.</p> <p>c) The QC(MGPS) will be expected to review their skills and present themselves to a panel of the Medical Gas Sub Group for interview within 3 months.</p> <p>d) If the QC(MGPS) passes the interview, then the suspension will be lifted.</p>

Short Reference	Reason for potential Suspension/ Removal from Register	Course of Action
<p><b>A4.4</b> continued</p>	<p><b>QC(MGPS) who fails refresher / update training assessment</b></p>	<p>If the QC(MGPS) fails the interview:</p> <ul style="list-style-type: none"> <li>a) The QC(MGPS) will continue to be suspended and will be asked to work with another registered QC(MGPS) who will act as a mentor and who will take responsibility for all testing.</li> <li>b) The relevant Regional QA Specialist and Chief Pharmacist / Employer will be contacted and advised of the situation.</li> <li>c) The mentor will produce a report on performance of the QC(MGPS) which will be submitted to the MGSG for consideration.</li> <li>d) The QC(MGPS) will be asked to attend a second interview within 3 months, the outcome of which will determine continuation or removal of registration.</li> </ul>
<p><b>A4.5</b></p>	<p><b>QC(MGPS) involved in an incident directly connected to or related to an omission or error during medical gas testing</b></p> <p><b>The incident may or may not have resulted in adverse patient event</b></p>	<ul style="list-style-type: none"> <li>a) QC(MGPS) to inform the MGSG of any such incident promptly</li> </ul> <p>It is also the responsibility of the employer or persons who engaged the services of the QC(MGPS) to inform the MGSG of any such incident</p> <ul style="list-style-type: none"> <li>b) QC(MGPS) registration to be suspended pending outcome of local investigation following formal instruction provided from the contractor/ employer to the MGSG.</li> </ul> <p>Contractor / employer to provide MGSG with formal notification of outcome of investigation and instruction to remove or reinstate QC(MGPS) as required.</p>

**Appendix 4** continued

Short Reference	Reason for potential Suspension/ Removal from Register	Course of Action
A4.6	<p><b>QC(MGPS) involved in incident <u>not related to medical gases</u> but in another area of practice resulting in suspension from employment</b></p>	<p>a) QC(MGPS) to inform the MGSG of any such incident promptly</p> <p>It is also the responsibility of the employer or persons who engaged the services of the QC(MGPS) to inform the MGSG of any such incident</p> <p>b) Formal instruction to be provided to the MGSG from the contractor/ employer regarding suspension of QC(MGPS) registration pending outcome of investigation</p> <p>c) Contractor / employer to provide MGSG with formal notification of outcome of investigation and instruction to remove or reinstate QC(MGPS) as required.</p>
A4.7	<p><b>QC(MGPS) suspected of professional misconduct</b></p>	<p>The QC(MGPS) Register has been set up to control the technical competency of QC(MGPS) and protect patient wellbeing. Issues of professional misconduct should be addressed through local management procedures.</p> <p>Where there is evidence of alleged professional misconduct:</p> <p>a) A request for suspension from the register may be submitted in writing to the MGSG from local contractor / employer.</p> <p>b) The MGSG will convene an extraordinary meeting to review the request and action accordingly. All information provided will be treated confidentially</p> <p>c) In the case of NHS employee, if evidence cannot be provided due to NHS HR processes or legal reasons, then the request will be acceded to through a suspension, which will be reviewed regularly. The relevant regional QA specialist should also be involved in this decision.</p> <p>d) Following any investigation, MGSG should receive formal notification of outcome and instruction to remove or reinstate the QC(MGPS) as required. Suitability for reinstatement may be supported via a reference from employer.</p> <p>e) If a satisfactory outcome to a suspension cannot be determined then the matter must be</p>

		<p>escalated to the NHS PhQAC for resolution.</p> <p>f) Their decision on this matter will be final and will be communicated to the individual concerned and MSGG.</p> <p>All relevant correspondence will be treated in confidence and will be shared with NHS PhQAC members only and purely for the purposes of allowing appropriate decisions to be made.</p> <p>The MSGG may require to review each situation on an individual basis.</p>
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