



Institute of
Medical
Illustrators

Quality Assurance Standards

Teledermatology Level 1 Audit Criteria

Institute of Medical Illustrators: Quality Assurance Standards Teledermatology Level 1 Audit Criteria–

Review of evidence:

Date:

Contact:

Email:.....

Tel:

Trust:

Head of Dept:

Line Manager:

Chief Exec:.....

Address:

.....

.....

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IMI Audit Support Officer:.....

Contact:

IMI Digital Auditor:.....

Contact:

IMI Virtual Auditor:.....

Contact:

NB: Numbers are consistent with the standard Level 1 QAS criteria, so are not always sequential.

1. Patient Experience

Criteria Level 1

What will be submitted/ where can it be found

**We have given examples here of how you can submit evidence. Please delete our suggested examples and write in what you have submitted.*

PEC 1 - The service is accessible to all patients/visitors

The service is compliant with the Disability Discrimination Act 1995 (DDA).
Opening hours and access to service information is appropriately displayed.

Show us around your department via virtual tour/during the site visit to demonstrate this or submit photographs of access and signage.

PEC 2 - Relevant information is communicated effectively to patients and clients

Patients have the opportunity to discuss the procedure or service with a member of staff.
Department code of conduct is clearly displayed for patients.

*Noting/documentation of patient procedure which includes giving them the opportunity to ask questions.
An image of your code of conduct on the wall.*

PEC 3 - Patients' privacy and dignity is respected

Patients required to remove clothing are offered a private area to undress.
All photographers should be polite, considerate and treat each patient fairly with due consideration.

*Show us a changing area during a virtual tour or send a photograph of it.
Digital copies of policies or processes in place.*

PEC 4 - Valid patient consent for the procurement and use of media is obtained

A process is in place to record and validate patient consent.
Photographers are aware of organisational consent policy or guidelines.
A procedure is in place to deal with withdrawal of consent, both at the time of visit and post visit.

*Screen share during the virtual meeting to show us how you would access your policies and procedures.
Send consent form/procedures/policies digitally.*

PEC 3 - Patients' privacy and dignity is respected

Patients required to remove clothing are offered a private area to undress.
All photographers should be polite, considerate and treat each patient fairly with due consideration.

*Show us a changing area during a virtual tour or send a photograph of it.
Digital copies of policies or processes in place.*

PEC 6 - Chaperones to accompany patients where necessary

All staff are aware of organisational chaperone procedure.
Chaperone available if requested.
A chaperone is verbally offered to all vulnerable patients, and those who need to remove clothes.

Send a copy of your chaperone procedure/training documents.

2. Service Management

Criteria Level 1

What will be submitted/ where can it be found

*Example: Policy/process/screen grab/photograph/leaflet/
email*

SM 3 - Quality standards are defined and monitored

There is a standard operating procedure for monitoring the quality of work produced.

The quality of work is reviewed on an ad-hoc basis.

Send documents digitally (quality review assessments etc).

SM 6 - Descriptions of work undertaken in all areas of service are documented

Technical work instructions are available to all staff for the use of specialist equipment and clinical photography standardisation.

Detailed administrative standard operating procedures are available to all staff (e.g. booking in work, image management duties etc.)

Send documents digitally e.g. workflows/ standard operating procedures/process maps, and show us where they are virtually.

3. Human Resources

Criteria Level 1

What will be submitted/ where can it be found

*Example: Policy/process/screen grab/photograph/leaflet/
email*

HR 1- All staff have a clearly defined Job Description

All staff have a job description.

*Send documents digitally (quality review
assessments etc).*

HR 2 - Staff undergo induction

All staff attend organisational inductions.

*Send documents digitally (e.g. a screengrab
of a system showing staff have attended their
induction).*

HR 3 - All staff have personal appraisals & maintain continuing professional development (CPD)

All staff have had personal appraisals.
Clinical Illustration staff must have evidence
of CPD.

*Send documents digitally or demonstrate/show
during interviews with staff members.*

HR 4 - All Clinical Photographic staff should be on the Academy for Healthcare Science Accredited Register or working towards it

All clinical photographers have obtained (or are
working towards) a level of qualification that
makes them eligible for AHCS registration.
(Not applicable to administrative staff or those
who are not Clinical Photographers).

*Send documents digitally, and we can discuss
this during the virtual visit.*

HR 6 - Disclosure and Barring Service (DBS) Check is obtained for appropriate staff

All patient-facing staff undergo an appropriate l
evel DBS check.

*Send documents digitally. This may need to be
confirmation from HR that all staff have DBS
checks.*

HR 8 - There is evidence of staff training

All staff have attended any organisational mandatory
training (e.g. fire safety and manual handling).
Staff can access department protocols and
standard operating procedures.
All staff are aware of how to request further training.

*Send documents digitally. Screengrabs of
systems showing staff members mandatory
training etc.
Show us how systems are accessed v
ia screen sharing.*

4. Policy Procedures	
Criteria Level 1	What will be submitted/ where can it be found <i>Example: Policy/process/screen grab/photograph/leaflet/ email</i>
PP 1 - Department copyright and consent policies are established	
Photographic copyright and consent policies are available to all department staff.	<i>Send documents digitally.</i>

5. Communication	
Criteria Level 1	What will be submitted/ where can it be found <i>Example: Policy/process/screen grab/photograph/leaflet/ email</i>
COM 1 - Department administration and communication is consistent for both patients and clients	
All staff have knowledge of administrative and communication procedures (e.g. telephone answering, sending letters or appointments, taking client requests etc.)	<i>Send documents digitally (quality review assessments etc).</i>

6. Health & Safety

Criteria Level 1

What will be submitted/ where can it be found

*Example: Policy/process/screen grab/photograph/leaflet/
email*

SRM 1 - All areas of service adhere to organisational health and safety policy

All staff complete organisational health and safety training (fire, manual handling, infection control).
All staff are aware of organisational protocol for calling for assistance in an emergency and working alone.

Send documents digitally and/or discuss during the virtual visit.

SRM 2 - Risk assessments are undertaken for all areas of service and regularly evaluated

The department complies with organisational risk management and clinical governance procedures. Identified risks posed to or by patients/staff are handled promptly.
All staff are aware of departmental/organisational protocol for reporting risks and accidents.
Staff working in clinical areas follow organisational infection control procedures and regulations.

*Send documents digitally.
Discuss this during the virtual visit.*

7. Information and Department Governance

Criteria Level 1

What will be submitted/ where can it be found

*Example: Policy/process/screen grab/photograph/leaflet/
email*

GOV 1 - Departmental governance – resources and data are managed in a directed and controlled manner

All software licences are up to date.
Controls are in place to protect privacy and confidentiality of identifiable patient information.
Staff that handle patient data have attended organisational information governance and safeguarding training.

Send documents digitally.

GOV 2 - Organisational governance – maintain partnership and communication with governing organisation

All staff are aware of information and clinical governance policies and can locate them.
There is a process in place to report governance issues to governing organisation.

*Send documents digitally.
Discuss this during the virtual visit.*

IG 1- Media is stored appropriately (e.g. audio, video, still)

All media is stored securely.

*Show us where media is stored during the virtual meeting.
Send screengrabs of your digital storage.*

IG 2- Access to media and data is controlled

Access to data and media is controlled and restricted to authorised personnel.
There is an agreed department policy/procedure detailing access to data and media.

*Show us how access to systems is authorised.
Send policies digitally.*

8. Finance and Resources	
Criteria Level 1	What will be submitted/ where can it be found <i>Example: Policy/process/screen grab/photograph/leaflet/ email</i>
FR 3 - An agreed process is in place for the ordering, purchase & receiving of goods and services	
There is a process in place for ordering consumables and equipment.	<i>Send documents digitally.</i>
FR 4 - All department assets are documented	
An equipment asset register has been established.	<i>Send documents digitally.</i>

