Australian Government
Australian Radiation Protection and Nuclear Safety Agency

arpansa

Resolution of comments from public submissions on *Standard for Radiation Dosimetry Service Providers.* Radiation Protection Series S-3

Public consultation period: 16 December 2024 – 7 February 2025

ARPANSA's Radiation Health Committee has prepared a draft Standard for Dosimetry Service Providers (DSPs) that it would like feedback on before it is implemented as a voluntary industry standard. This document stipulates standards for dosemeters and dosimetry service providers regarding quality, performance, information management, record keeping and reporting.

It was identified by the International Atomic Energy Agency (IAEA), when they reviewed Australia's radiation regulations in 2018, that there needs to be a national standard for dosimetry service providers. This is to encourage each provider to be guided by the same set of principles to ensure consistent service provision and comprehensive monitoring of occupational radiation exposures in Australia.

This Standard will first be published as a voluntary standard in the Radiation Protection Series (RPS) as *RPS S-3 the Standard for Radiation Dosimetry Service Providers*, with a view to later establishing an independent accreditation mechanism to support regulatory implementation.

This document had previously undergone targeted consultation with all DSPs active in the Australian market, and was then provided for wider public consultation from 16 December to 7 February 2025.

Commenter	Comment	Resolution
1	Regarding Section 4.8 Reporting of Results: 1. Unless I'm missing something, I think four weeks between receiving dose results from the dosimetry laboratory and reporting to the wearer or nominated representative is excessive. Essentially these will be electronic records and passing them onto the end-user should not need four weeks. I would consider a two week timeframe more appropriate. 2. Should there be some provision for high dose results (above notification thresholds) to be reported separately and more immediately than doses within thresholds? Other: There is no timeframe for the dosemeter analysis laboratory to process the dosimeters and return results to the DSP. Can they take as long as they like?	1. The period of 4 weeks was considered as sufficient required to resolve any issues or questions that the DSP may have before sending them to the end user. The four-week window allows thorough review of the results by the distributor before sending the results to the end user. A reduction to 2 weeks is considered likely to result in significant non compliance by the DSP due to failure to meet the 2. This reporting is covered in the scope of Section 4.9. S&T define reporting requirements for DSP and licence holders and there are differences between jurisdictions. Other: Recommend not setting this limit at this stage. Provided the 4 week timeframe is met it will constrain the reporting process from the lab to the DSP.
2	I would like to see some more clarification around location of wearing the radiation badge. There should be some specifications around location of where badge is worn. Specifically torso, I see many staff members wearing their badges in many different locations on their body (eg chest, hip, shoulder). It would be great to have a definition in the legislation to keep the positioning as standardised as possible.	This standard relates to requirements for DSP and not to technical details around the monitors. Nationally agreed wearing requirements are desirable but should be developed separately from this standard.
3	Thank you for the opportunity to provide feedback on this critical service standard. I do not feel too strongly about the direction ARPANSA is taking, but I want to add the following comments to help build the future. The proposed standard appears simple at face value but could be quite complex in achieving its objective for an emerging service provider. I would like to express my concern regarding the requirements for alignment with ISO 17025 accreditation in relation to the ISO 14146	Personal Dosimetry is the primary method of measurement of personal dose which is fundamental to the radiation protection system. The requirement to be an ISO 17025 accredited laboratory certified against ISO14146 was included to ensure that this fundamental measurement system maintains the integrity of this quality assurance system. This is not intended to be a barrier for new businesses entering the market and the DSP standard does not prevent a single business operating as manufacturer, laboratory or distributor. However, it does set the

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	testing criteria. These requirements may be perceived as excessive and might not fully support the objectives of The Competition and Consumer Act 2010 in Australia. The UK Health Security Agency (UKHSA) is an exemplary model of how a governmental body can effectively assist organizations in offering services like Personal Radiation Monitoring Services (PRMS). The proposed standard seems to limit the potential roles of local dosimetry service providers (DSPs) to those of distributors and information management platforms, which may lessen the incentive for these providers to offer more comprehensive services. Furthermore, while ARPANSA identifies itself as a key player in PRMS, it appears that the proposed standard has been developed with input from only a select number of service providers in Australia. I would encourage establishing standards that would empower small businesses and tertiary hospitals to take on greater responsibilities, benefiting from a collaborative relationship with local authorities and ARPANSA. Additionally, I would like to raise a point regarding using Electronic Personal Dosimeters (EPDs) in certain scenarios. Given that these devices are typically manufactured under stringent standards that align closely with the ISO requirements set forth by ARPANSA, their utilization by local users—such as Radiation Safety Experts, Advisors, and Officers—may warrant consideration, especially in sensitive situations like monitoring conditions for pregnant staff, where a rapid response is crucial. I propose the development of an online dosimetry portal (e.g., CLARA) that could enhance service delivery by incorporating features such as: - Order placement and management - Access to view individual worker doses - Registration of new workers and termination of existing ones - Viewing and downloading of detailed reports	requirements for the DSP at international best practice which is met by the current DSP in the market. The use of EPDs is difficult since these devices can be reset and therefore do not ensure a permanent record of dose. The DSP standard does not explicitly prohibit the use of EPD or other types of dosimetry technology such as the Instadose. The decision on whether they meet the requirements to be included on the scope of accreditation for a DSP will rest with the accrediting body (NATA, NVLAP etc). Most DSP have an online dosimetry portal and the features included on these portals are at the discretion of the DSP. Suggest rewording 4.8 to be consistent with wording: “The DSP shall provide dose reports to the wearer or nominated representative within four weeks of receiving the results from the dosimetry laboratory. If an online dose reporting system is available, access to this system must be provided to the wearer or their nominated representative.”

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	- Tracking the status of ordered dosemeters Moreover, I would like to reference the HSE Statement on the Approval of Dosimetry Services, which outlines the criteria for providing Personal Dosimetry Services as defined by the HSE. (attached) https://www.hse.gov.uk/radiation/assets/docs/dosimetry-state.pdf	
4	A last quick read has revealed the following: (a) at 2.2 first sentence "...accreditation..." should read "...certified... equivalent certification program...". Technically speaking (based upon my experience as an old auditor (ISO amongst others). Accreditation is NOT the same as CERTIFICATION - refer https://www.jasanz.org/accreditation-or-certification plus it shouldn't be a noun. I'm pretty sure that I have raised this in the past. (b) at 2.3 second sentence "...certified laboratory ..." should be "...accredited laboratory..." As per (a) above, a laboratory is accredited to ISO 17025 not certified. It's correct at 3.2. (c) at 3.4 typo second sentence "...facility..." should be "...facility's..." (d) at 4.1 second last sentence last para "...or equivalent accreditation..." should be "...or equivalent certification..." as per (a) above. Correct at 4.2! (e) at 4.8 "...four weeks..." should be "..X working days..." much better as allowance is made for close down/holidays and such. (f) at 4.10 "...without prior approval...: should be "...without prior written approval..." - it's tighter and ensures traceability for changes. My two cents worth! Have a great weekend!!	All these changes are accepted except (e). In order to avoid confusion between countries and jurisdictions, using week instead of working day is preferred.

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5	Contributors to drafting and review Change Martin Burston to Martin Butson	Change accepted