



# Diabetic Eye Screening Return to Grading Following a Period of Absence

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Version 1.0, 7<sup>th</sup> February 2013

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Guidance for programmes when graders return to work following a period of absence

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| <b>Project/Category</b> | Guidelines                                          |
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| <b>Owner</b>            | Anne Stevenson                                      |
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| <b>Authorised By</b>    | QAC and TEWC                                        |
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| <b>Audience</b>         | NDESP, QA Team, Programme Managers, Clinical Leads. |

#### ***Distribution***

| <b>Name / group</b> | <b>Responsibility</b> |
|---------------------|-----------------------|
|                     |                       |

#### ***Amendment history***

| <b>Version</b> | <b>Date</b> | <b>Author</b> | <b>Description</b>                         |
|----------------|-------------|---------------|--------------------------------------------|
| 0.1            |             | AS            | Draft for QAC                              |
| 0.2            | 6/2/13      | LL            | Updated following comments from TEWC       |
| 1.0            | 7/2/13      | KB            | Final. Front cover & version control added |
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#### ***Review / approval***

| <b>Version</b> | <b>Date</b> | <b>Requirement</b> | <b>Signed</b> |
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## **Return to Grading Following a Period of Absence**

Prior to returning to grading following an extended absence, graders should demonstrate the minimum achievements to the Clinic Lead who is responsible for the sign off of competency for all graders: -

- Grader has passed modules 7&8 of the City & Guilds diploma in diabetic screening and within timescales for full completion of diploma.
- Grader has completed the on-line test and training set and *results reviewed locally* (number of sets completed to be local decision based on clinical lead discretion – length of absence etc).
- Grader has completed at least one 1:1 grading session with the Clinical Lead or designated deputy.
- Grader to shadow grading colleague (and/or Ophthalmologist) sessions to observe any 'hands on' changes to methods/software/process.
- Grader to initially grade alongside colleagues enabling them to ask for immediate support if required.
- Grader to confirm that they understand and will work to the latest national and local grading protocols.

**Further supervised grading sessions may be required at the Clinical Lead's discretion depending on level of changes to grading criteria/process, skills, past experience and duration of absence.**

### **Further steps that may be considered by Clinical Lead to return people to work:**

- Grader to have 100% QA sample for unsupervised primary grading for specified time period. Feedback from Clinical Lead or designated deputy on results
- Grader to undertake secondary grading only for a minimum period – this will allow the Clinical Lead or designated deputy to observe arbitration rates, allow the grader to be subjected to higher disease prevalence and risk reduction in disease being missed (as if missed at primary would not progress to secondary)
- Grader to contribute to MDTs
- The grading results need to be checked against standard outcomes
- Clinical Lead to decide/recommend grader to attend any external training courses as available