



SOUTH EAST OF ENGLAND
PHOTOTHERAPY NETWORK

Auditing our phototherapy service

Against the BAD Phototherapy Service
Standards (2022): why it matters, what it
involves, and what it can win for your unit

Phototherapy nursing teams · 2026



WHY IT MATTERS

Why audit our phototherapy service?

It keeps patients safe

UV treatment carries real risks: burns, eye injury and long-term skin cancer. Audit checks that the safeguards happen every time.

It proves quality, not just claims it

"We think we do this" becomes "we can show we do this" – for patients, the Trust and inspectors.

It drives improvement

Measured against the BAD standards, gaps become clear, fixable actions – and re-audit shows the change.





BRITISH ASSOCIATION
OF DERMATOLOGISTS
HEALTHY SKIN FOR ALL

September 2022

SERVICE GUIDANCE AND STANDARDS FOR THE USE OF PHOTOTHERAPY

Next Review: September 2024



NICE has accredited the process used by the British Association of Dermatologists to produce Service Guidance and Standards. Accreditation is valid until December 2023.
For full details on our accreditation, visit: www.nice.org.uk/accreditation

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THE BAD STANDARDS

Eight standards, one framework

1 Referral and assessment

2 Information and consent

3 Staff, training and education

4 Clinical management

5 Equipment and facilities

6 Governance and audit

7 Discharge

8 Skin cancer surveillance

Each standard lists audit outcomes with BAD's own **green, amber and red** bands, based on 50 consecutive cases a year.

WHAT A GOOD AUDIT COVERS

A good audit has three parts



TOOL 1 + PAPER FORM 1a

Case notes

50 consecutive patients a year, one tick-box form each

- Referral and waiting times
- Information and consent
- Discharge letters
- Cumulative dose flags



TOOL 2

Unit, facilities and staff

Lead nurse, with medical physics

- Protocols and governance
- Equipment and calibration
- Staff training tracker
- Erythema (burns) log



TOOL 3

Patients' views

Questionnaire near the end of the course

- Information and consent
- Privacy and dignity
- Access and waiting
- Results and experience

Together the three tools cover all 8 BAD standards.

DOING THE AUDIT

What doing the audit involves

1

Plan

Agree a lead and a time period; register with your audit team

2

Notes

Tick form 1a for 50 consecutive patients, then type into Tool 1

3

Unit

Walk round, check the registers, fill in Tool 2

4

Patients

Hand out Tool 3 for 2 to 4 weeks; aim for 30 or more forms

5

Review

Results and red, amber, green ratings appear automatically

6

Act

Action plan, governance meeting, network return



Answers are Yes, No or N/A



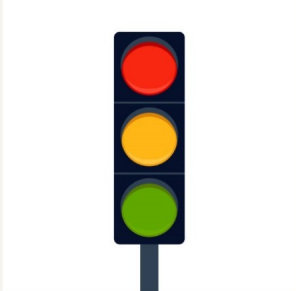
Can't find it in the notes?
Tick No



No patient names, numbers
or dates

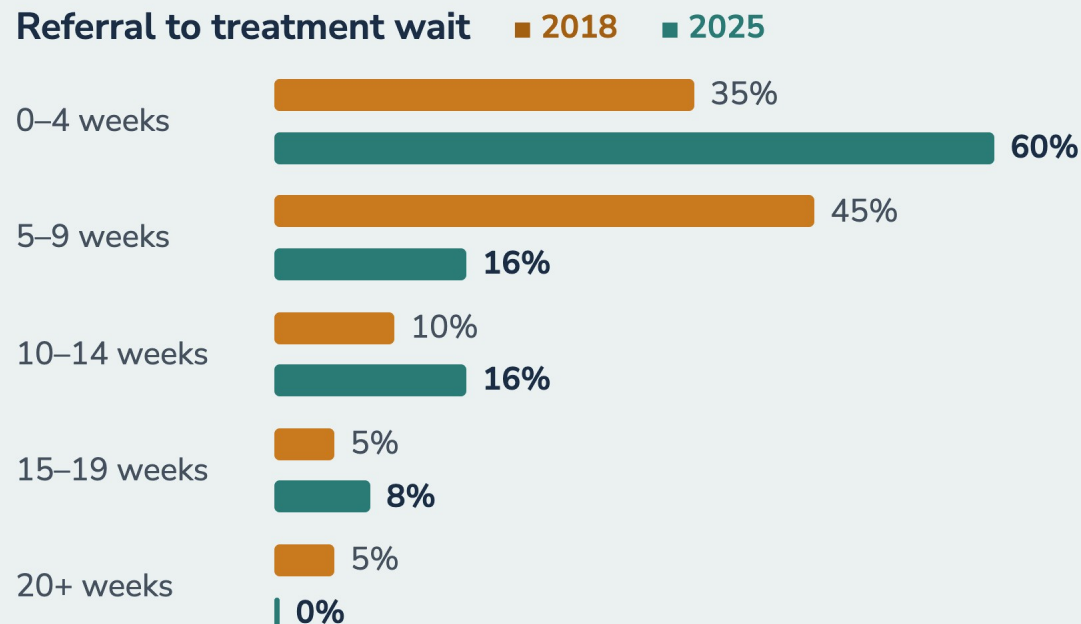
What our audit of 50 case notes found

Standard	What we found	Rating
2A.1 Leaflet before treatment	100%, recorded on the nursing pre-treatment checklist	Met
2B.1 Consultant discussed risks	76% recorded	Partly met
2B.2A Two-stage consent	66%, down from 85% at the previous audit	Not met
2C.1 Questionnaire offered	No evidence in notes; no phototherapy questionnaire	Not met
2A.3 Leaflets up to date	Last reviewed 2019; English only	Not met
7A.4 Summary to GP	Discharge summary written but not always sent	Partly met
8A.1 High dose flagged	No system to flag high cumulative doses to GPs	Not met



Clear ratings turn findings into priorities

Re-audit shows what has changed



TWO-STAGE WRITTEN CONSENT

85% → 66%

Standards can slip without anyone noticing. Only re-audit picks up the drift, and shows whether our actions worked.



STANDARD 2C.1

Why we ask patients

BAD 2022 asks units to offer a satisfaction questionnaire to enough patients, in a suitable format and language, at least once a year.

Patients see what notes cannot: whether information made sense, dignity, access and results.

The notes recorded a leaflet for every patient audited. Yet 22% of patients surveyed said they had not had one, or could not remember.

GSTT patient surveys, 2021 and 2025

Measure	2021	2025
Replies	79 (online)	111 of 120 (paper)
Positive words about the nurses	89%	95%
Given an information leaflet	87%	78%
Result met or beat expectations	64%	64%
Would recommend the unit	–	92%
Interested in home phototherapy	83%*	64%
Interested in self-service booking	65%	77%

* 2021: narrowband UVB patients only (15 of 18). Handing out paper forms at check-in lifted replies to 93% of those offered.

USING THE RESULTS

Audit is your evidence when you ask for support

WHAT THE AUDIT SHOWS

Written consent in only 66% of notes

No patient questionnaire in use

Training tracker shows overdue updates

64% of patients want home phototherapy

Staffing under pressure

WHAT TO ASK FOR

→ A consent template in the electronic record

→ Admin time to run the survey at least once a year

→ Protected study time, backfill and course funding

→ Support for a home phototherapy business case

→ A staffing review every 12 months (BAD 3A.3)

The BAD standard + our result + the risk + what we need = a request a manager can say yes to

NEXT STEPS

Getting started

1. Download the tools from the network website
2. Agree a lead and register with your audit team
3. Complete notes, unit and patient parts
4. Present results and actions at governance
5. Send the one-row return to the network
6. Re-audit in 12 months



THE TOOLS

Tool 1 + 1a Case notes (Excel and paper form)

Tool 2 Unit, facilities and staff training (Excel)

Tool 3 Patient questionnaire (Word and Excel)



www.phototherapy.support