Public Services Delivery
Scotland

NHS SCOTLAND

Safety Action Notice

Reference: SAN2603 **Issued:** 10 June 2026

Medical weighing in GP surgeries: clinical risks due to inappropriate weigh scales

Summary

A survey[1] by the Society of Chief Officers of Trading Standards in Scotland (SCOTTS) found widespread use of inaccurate and non-compliant patient weighing scales across primary care settings:

- 82% of GP practices were non-compliant, using equipment that was unsuitable, unsafe, or did not meet requirements
- Only 18% of practices were fully compliant with legal[2] and NHS standards[3]
- 43% of practices were using scales not legal for clinical use (e.g. domestic/bathroom scales)
- 55% of weighing devices failed to meet NHS Class III accuracy requirements
- 18% of scales tested were inaccurate, with the largest error recorded at −59 kg (41 kg reading for a 100 kg load)

Weigh scales that do not meet legal or NHS requirements for Class III medical weighing instruments present a risk of incorrect clinical decisions including medication dosing. Action is required to ensure only compliant, accurate and properly calibrated devices are used.

Action

1. This notice should be brought to the attention of all relevant staff, including estates, facilities, medical physics, primary care, procurement, and clinical governance leads.

2. Identify and review all patient weighing equipment in primary care settings (including GP practices and community services).

3. Remove any non-compliant or unsuitable devices from clinical use, including domestic/bathroom scales.

4. Ensure all patient weighing devices meet the requirements of class III or higher of the Non-Automatic Weighing Instruments Regulations

5. Verify accuracy of all devices using appropriate, traceable test weights.

6. Stop unsafe calibration practices, including:

    - Use of untraceable weights
    - Use of body weight as a test method

Action (continued)

7. Ensure appropriate servicing, calibration, and maintenance arrangements are in place, with documented traceability.

8. Review procurement arrangements to ensure only compliant equipment is purchased.

9. Ensure incidents involving incorrect weight measurement are reported appropriately, including where they contribute to medication or clinical error.

Equipment details

Table 1 List of weighing instrument attributes and their descriptions

Attribute	Description
Manufacturer(s):	multiple manufacturers (system-wide issue)
Brand(s):	various
Device type:	patient weighing scales (inc. platform, chair, and stand-on scales)
Model / Product code:	various
Manufacture dates:	all potentially affected
Serial numbers:	all potentially affected

Background Information

Accurate measurement of patient weight is a fundamental requirement for safe clinical care. Weight is routinely used to inform diagnosis, monitoring and treatment, including calculation of medication doses, fluid management and nutritional assessment. Errors in weight measurement can lead to inappropriate clinical decisions, including under- or over-dosing of medicines, with potential for significant patient harm.

Regulatory requirements

Patient weighing equipment placed on the market since 2003 is regulated under the Non Automatic Weighing Instruments Regulations 2016, which apply across the UK. These regulations require that any weighing instrument used for the determination of mass in the practice of medicine (including monitoring, diagnosis and treatment of patients) must:

- have undergone appropriate conformity assessment prior to being placed into service
- meet defined essential performance and accuracy requirements
- be properly marked and traceable
- be suitable for its intended clinical purpose

Use of non-compliant or non-verified instruments (e.g. domestic or “bathroom” scales) for clinical weighing is therefore not permitted under the regulations.

Background Information (continued)

NHS requirements and safety alerts

In addition to statutory requirements, NHS guidance and safety alerts across the UK have established minimum standards for patient weighing equipment. These include:

- class III accuracy standard as the minimum requirement for all patient weighing undertaken for monitoring, diagnosis or treatment
- withdrawal from use of Class IIII or unclassified devices for clinical weighing
- implementation of organisational controls, including procurement, maintenance, calibration and training arrangements
- immediate removal from service of inaccurate or unsuitable devices

These requirements were set out in Estates and Facilities Alert EFA/2010/001, Medical patient weighing scales, which remains applicable across UK healthcare systems.

Accuracy class and clinical significance

Accuracy class is a critical determinant of measurement reliability. Class III medical weighing devices provide significantly greater precision than lower class instruments. For example:

- a typical Class III device may display weight in increments of 0.1–0.2 kg with relatively small permitted error
- a Class IIII device may only display to 1 kg increments and allow substantially greater error

At a body weight of 90 kg, the permitted error on a Class III device is typically within ±0.2 kg, whereas a Class IIII device may permit deviations of several kilograms. This can result in clinically significant discrepancies, particularly where repeated measurements or dose calculations are involved.

Lower class devices and those without any declared accuracy class are also significantly more likely to be inaccurate, further increasing risk.

Calibration, verification and maintenance

To ensure ongoing accuracy, patient weighing equipment must be subject to regular calibration and verification using traceable standards. This includes:

- use of certified test weights with known traceability
- testing across an appropriate range (ideally near maximum capacity)
- documented maintenance and calibration records
- prompt action on any failures or identified inaccuracies

Calibration methods must be robust and reproducible. Practices such as using unverified weights, force gauges or staff body weight as a test load are not acceptable, as they do not provide traceability or assurance of accuracy.

Background Information (continued)

Suitability for patient groups

Weighing equipment must also be appropriate for the patient population being measured. This includes:

- adequate resolution (scale division size) for the clinical application (e.g. smaller divisions for infants and children)
- appropriate capacity and design (e.g. baby scales, chair scales, bariatric scales where required)
- use of equipment that is fit for purpose in the clinical environment

Using equipment with insufficient resolution (e.g. 1 kg divisions for infants) or inappropriate design can lead to clinically unsafe measurements.

Clinical risk and system factors

Evidence from national and international sources demonstrates that inaccurate or poorly managed weighing processes contribute to medication errors and adverse clinical outcomes. Failures may arise from:

- inaccurate or unsuitable equipment
- lack of standardisation in measurement practices
- poor governance of calibration and maintenance
- inadequate awareness of requirements

In addition, incidents resulting from incorrect weight measurement may be recorded as prescribing or clinical errors rather than equipment-related failures, meaning the underlying risk may be under recognised at system level.

References and other resources

1. Project report, Medical Weighing, Society of Chief Officers of Trading Standards in Scotland (SCOTSS), May 2026
2. Non Automatic Weighing Instruments Regulations 2016
3. Estates & Facilities Alert EFA/2010/001, Medical patient weighing scales, 15 March 2010

Distribution of this alert

This alert has been distributed to Incidents and Alerts Safety Officers (IASOs) in all health boards and local authorities in Scotland. **If you wish to share the alert informally with colleagues**, please inform them that they may also receive it through the formal local distribution. The local distribution may include additional actions tailored to address local needs, agreed upon by the IASO in consultation with department heads and professional leads.

You can contact your local IASO to discuss this alert and who it should be distributed to. If you do not know who your IASO is, you can find their contact details here: Find your Incidents and Alerts Safety Officer.

Suggested onward distribution (may not include all affected departments)

Clinical Governance leads
Community Health Service providers
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Health & Safety
Medical Physics / Clinical Engineering departments
Patient Safety / Risk Management leads
Pharmacy and Medicines Management teams
Primary Care Leads / GP practices
Procurement teams
Risk Management

Information about IRIC

Incident Reporting & Investigation Centre (IRIC), Facilities Division, NHS Scotland Assure Public Services Delivery Scotland, Tel: 0131 275 7575, email: nss.iric@nhs.scot

Accessibility: Please contact us using the above details if you are blind or have a sight impairment and would like to request this alert in a more suitable format.

IRIC remit: general information about adverse incidents, safety alerts and IRIC's role can be found in DL(2024)32, *Safety of Health, Social Care, Estates and Facilities Equipment: NHS Board and Local Authority Responsibilities*, issued 16 December 2024.

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