



## Policy for Nurse Referring for Radiological Procedures in CHI

Crumlin | Temple Street | Tallaght | Connolly

<b>Area of use:</b>	All of organisation <input checked="" type="checkbox"/>	CHI at Connolly <input type="checkbox"/>	CHI at Crumlin <input type="checkbox"/>
	CHI at Herberton <input type="checkbox"/>	CHI at Tallaght <input type="checkbox"/>	CHI at Temple Street <input type="checkbox"/>
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## CONTENTS

1.0	Purpose of the Policy.....	3
2.0	Persons Affected .....	3
3.0	Policy Statement.....	4
4.0	Legislation and Professional Regulatory Framework .....	5
5.0	Glossary of acronyms, terms & definitions.....	5
6.0	Definitions .....	6
7.0	Responsibilities .....	10
7.1	Health Information Quality Authority (Hiqa) And The Undertaking.....	10
7.2	Local Implementation Group.....	11
7.3	Director of Nursing .....	11
7.4	Nurse Referral of Radiological Procedures Site Co-Ordinator .....	12
7.5	The Clinical Supervisor .....	13
7.6	Patient’s Named Consultant.....	13
7.7	Nurse Undertaking Education Programme.....	14
7.8	Nurse Authorised to Refer for Radiological Procedures .....	14
7.9	Radiographer Services Manager (RSM) .....	16
7.10	Consultant Radiologist – Head of Radiology.....	16
7.11	Radiation Protection Advisor (RPA) .....	17
7.12	Radiation Protection Officer (RPO) / Radiation Protection Unit (RPU).....	17
7.13	Radiographers .....	17
8.0	Procedure .....	18
8.1	Eligibility to Refer .....	18
8.2	Indemnity.....	19
8.3	Verification of Referring Status .....	19
8.4	Good Referral Practice.....	19
8.5	Reporting of Near Misses .....	20
8.6	Communication .....	20
8.7	Record Keeping.....	20
8.8	Changes to The Status of Nurse Referring for Radiological Procedures .....	21
9.0	Implementation and Education Plan .....	21
9.1	Implementation.....	21
9.2	Education.....	21
10.0	Evaluation.....	22
10.1	Monitoring .....	22
10.2	Audit Of Referring Practice.....	22
10.3	User Involvement... ..	22
11.0	References.....	23
12.0	Appendices.....	28
	<i>Appendix 1 - Key Shareholders</i>	
	<i>Appendix 2 - Scope of Practice Nurse Referral for Radiological procedures within CHI Template</i>	
	<i>Appendix 3 - Pathway to Registration</i>	
	<i>Appendix 4 - Referral Process Flow Chart</i>	
	<i>Appendix 5 - Audit Tool</i>	
	<i>Appendix 6 - State Claims Agency 2021</i>	

## 1.0 Purpose of the policy

The purpose of this policy is to:

- Provide written clear guidance, underpinned by regulatory frameworks and conditions, to facilitate authorised nurse referral for radiological procedures in CHI, and within the scope of professional practice.
- Highlight best practice, supported by relevant documents and policies, which will support authorised nurse referrers to maintain and improve their referring competencies.
- Support new ways of working and providing better access to meet service user needs in partnership and collaboration with multidisciplinary teams within CHI.
- Provide clear lines of responsibility and accountability to support authorised nurses to refer patients for radiological procedures.
- Communicate CHI structures and processes to support authorised nurse referring for radiological procedures.
- Ensure effective and efficient utilisation of nurses' competencies and skills.
- Support nursing practice to ensure safe referral for radiological procedures and associated nursing record keeping.
- Increase awareness of risk management issues associated with radiological procedures among nurses.
- This policy will be reviewed every three years or following any changes to:
  - Government legislation
  - Professional Regulatory Body Guidelines
  - Evidence – based practice / research or following a
  - Request by the Radiation Safety committee

## 2.0 Persons Affected

- The child, parent/guardian and his/her family.
- Registered nurses who are in permanent employment in Children's Health Ireland and who are authorised by the Director of Nursing to refer for radiological procedures.
- The Director of Nursing of Children's Health Ireland.
- Nursing Line Managers
- Nurse Referral Site Coordinators
- Consultant Medical Practitioner who is acting as the clinical supervisor for the candidate Nurse Referrer of radiological procedures
- Patient's named Consultant when the authorised Nurse Referrer refers patients for radiological procedures independently.
- Radiography Services Managers
- Radiographers
- Radiation Protection Officer (RPO) Radiographers
- Radiation Protection Advisors (RPA)
- Cross-Site Lead for Radiology
- Radiologists
- CHI Nurse Referral for Radiological Procedures Implementation Group

### 3.0 Policy Statement

- The nursing service will provide a clear written policy for nursing staff which will direct the development and implementation of nurse referring for radiological procedures within the overall clinical governance framework, legislation and professional guidelines.
- Referring for radiological procedures is an expansion of a nurse's scope of practice, beyond the skills, competence and knowledge an individual practitioner possesses at the point of registration.
- This policy is developed within the legislative and regulatory framework outlined in the Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes (NMBI, 2020) and the National Nurse and Midwife Authority to Refer for Radiological Procedures Guideline (2021).
- This policy must be read in conjunction with the legislation, regulation, medical radiological procedures Local Rules and the Nursing and Midwifery Board of Ireland guidance documents listed below,
- Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education (Nursing and Midwifery Board of Ireland, 2020).
  - a. National Nurse and Midwife Authority to Refer for Radiological Procedures Guideline (2021, <https://www.olchc.ie/healthcare-professionals/chi-nursing-practice-guidelines/radiology-nurse-midwife-authority-to-refer-to-radiology-procedures-guideline-2021.pdf>)
  - b. National Consent Policy (2022) available on Q Pulse/CHI at Crumlin hospital website <https://www.olchc.ie/healthcare-professionals/nursing-practice-guidelines-in-chi-at-crumlin/consent-policy-national.pdf>
  - c. Radiation Safety Procedures for CHI at Temple Street (PP-CLIN-RAD-5) and CHI at Crumlin
  - d. Policy for the protection of the unborn child arising from ionising radiation received during medical diagnostic or therapeutic procedures (PP-CHI-RAD-02)
  - e. HSE National Open Disclosure Policy
  - f. Refer Guidelines (available at <https://www.irefer.org.uk/>)
- Nurse referral for radiological procedures at CHI must be embedded within a sound, robust multi-disciplinary clinical governance framework with regular multi-disciplinary auditing and evaluation. This policy supports these principles.
- Nurse Referrers are listed, with their scope of practice as approved by the CHI Nurse Referral for Radiological Procedures Implementation Group, on a database which is available from the Director of Nursing Office and the site RSMs.

**Please note that this is not an exhaustive list as associated PPPGs will be developed as necessary.**

## 4.0 Legislation and Professional Regulatory Framework

- Irish law was amended in 2007 to allow the opportunity for nurses to expand their scope of practice to include authority to refer for radiological procedures. In 2013, the European Council Directive 2013/59/Euratom, laid down basic safety standards for protection against the dangers arising from exposure to medical radiological procedures, this was transposed into Irish law by two separate statutory instruments.
- The first statutory instrument (SI) is SI 256 of 2018, European Union (Basic Safety Standards for Protection Against Dangers Arising from Medical Exposure to Radiological procedures) Regulations 2018 relating to medical exposures of patients to radiological procedures. HIQA is the competent authority for SI 256 of 2018. It replaces SI 478 (2002) and all its amendments including SI 303 and stipulates the definitions and conditions for medical radiological procedures, including the definition of prescriber now being changed to 'referrers'.
- SI 256 of 2018 stipulates that: 4. (1) A person shall not refer an individual for medical radiological procedures to a practitioner unless the person referring ("the referrer") is— (a) a registered nurse or registered midwife within the meaning of the Nurses and Midwives Act 2011 (No. 41 of 2011) who meets the standards and requirements set down from time to time by the Nursing and Midwifery Board of Ireland in relation to the prescribing of medical radiological procedures by nurses or midwives. Please note that it is not only nurses who refer; other disciplines are also included in this legislation.
- The second statutory instrument is SI 30 of 2019. It replaces SI 125 (2000) and lays down basic safety standards for protection of the public and workers against the dangers arising from exposure to radiological procedures. The Environmental Protection Agency (EPA) is the competent authority for SI 30 2019.

## 5.0 Glossary of acronyms, terms and definitions

The Nursing and Midwifery Board of Ireland (NMBI) is the statutory regulatory body for Nurses and Midwives in Ireland.

- Following consultation with the Faculty of Radiologists and the Irish Institute of Radiographers and Radiation Therapists (IRRT), NMBI published the Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes (NMBI, 2020).
- The Standards and Requirements document outlines the requirements for nurse education and the approval process for education providers for the provision of education for authority to refer for radiological procedures in terms of learning outcomes, competencies for authority to refer for radiological procedures, syllabus/indicative content, theoretical and clinical instruction and scope of practice for referring for radiological procedures.

In addition, nurses referring patients for radiological procedures must practice in accordance with guidance issued by NMBI including:

- a. *Recording Clinical Practice: Professional Guidance (NMBI, 2015).*
- b. *The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI, 2021).*
- c. *The Scope of Nursing and Midwifery Practice Framework (NMBI, 2015).*
- d. Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes (NMBI 2020)

## 6.0 Definitions

### **ALARA:**

As Low as Reasonably Achievable.

### **Candidate Advanced Nurse Practitioner:**

Are registered nurses who under the supervision of clinical mentor/clinical supervisor develop their education, knowledge, skills, competency, leadership and clinical decision making including judgement along with behaviours to a level at which they are identified as expert clinical practitioners. They work within agreed parameters i.e. scope of practice, agreed criteria while meeting all their legal, regulatory and professional requirements.

### **Child:**

For the purposes of this policy a child is defined as someone who is 16 years of age or under.

### **CIS:**

Clinical Indemnity Scheme.

### **Clinical Nurse Specialist:**

The speciality area is a defined area of nursing and midwifery practice. This specialist practice encompasses a major clinical focus of care to patients or clients and their families in hospital, community and outpatient settings. The specialist nurse or midwife will work with medical and paramedical colleagues.

### **The CNS/CMSp role centres on 5 core competencies:**

- Clinical Focus (Direct Care and Indirect Care)
- Patient/Client Advocate
- Education and Training
- Audit and Research
- Consultant

### **Clinical Responsibility:**

“Clinical responsibility” as per SI 256 of 2018 means responsibility of a practitioner for individual medical exposures, in particular, justification; optimisation; clinical evaluation of the outcome; cooperation with other specialists and staff, as appropriate, regarding practical aspects of medical radiological procedures; obtaining information, if appropriate, on previous examinations; providing existing medical radiological information or records to other practitioners or the referrer, as required; and giving information on the risk of radiological procedures to patients and other individuals involved, as appropriate.

### **Clinical Supervisor:**

A registered medical practitioner at consultant level in the Nurse Referrer's area of practice. The clinical supervisor is a patient's named consultant within the relevant Department. The clinical supervisor must agree to observe, supervise and provide guidance. The clinical supervisor will document and supervise the clinical assessment in which the nurse will be deemed competent or not competent to refer patients for radiological procedures. S/he will act in a supervisory function for the Nurse Referrer. This supervisory function will not at any time be delegated to a NCHD.

### **Competence:**

The ability of the registered nurse to practise safely and effectively fulfilling her/his professional responsibility within her/his scope of practice (Review of Scope of Practice for Nursing and Midwifery, Nursing and Midwifery Board of Ireland (NMBI), 2015).

### **Database of nurses with authority to refer:**

is a list of all nurse referrers in CHI which is available from the Office of the Director of Nursing and from the site RSMs.

### **Education Programme Co-ordinator:**

The Education supervisor in the University charged with the role of educating the nurse referrer.

### **HSE:**

Health Services Executive.

### **Radiological procedures:**

Radiation that produces ionisation in matter. Examples are alpha particles, gamma rays, x-rays and neutrons. When these radiations pass through the tissues of the body, they have sufficient energy to damage DNA. (Health Protection Agency, 2009). For the purposes of this document, radiological procedures include ionising and non-ionising diagnostic imaging modalities.

### **Justification of medical exposures as per SI 256 2018:**

- (1) "A person shall not carry out a medical exposure unless it—
- (a) shows a sufficient net benefit, weighing the total potential diagnostic or therapeutic benefits it produces, including the direct benefits to health of an individual and the benefits to society, against the individual detriment that the exposure might cause, and
  - (b) takes into account the efficacy, benefits and risks of available alternative techniques having the same objective but involving no or less exposure to radiological procedures.
- (2) An undertaking shall ensure that each medical or biomedical research."

### **LIG:**

Local implementation group.

### **Medical exposure as per SI 256 2018:**

means exposure incurred by patients or asymptomatic individuals as part of their own medical or dental diagnosis or treatment, and intended to benefit their health, as well as exposure incurred by Carers and Comforters and by volunteers in medical or biomedical research.

### **Medical Physics Expert:**

an individual having the knowledge, training and experience to act or give advice on matters relating to radiation physics applied to medical exposure, who whose competence in this respect is recognised by the Minister.

### **NCHD:**

Non-Consultant Hospital Doctor.

**NIMIS:**

National Integrated Medical Imaging System is a computer-based system for storing and reporting of medical images. NIMIS incorporates both the RIS and the PACS.

**NMBI:**

Nursing and Midwifery Board of Ireland.

**Nurse:**

A woman or man whose name is entered in the Nursing and Midwifery Board of Ireland (NMBI) register and includes a midwife and nursing (Nurses Act 1985).

**Nurse Referral of Radiological Procedures Site Co-ordinator:**

Member of senior nursing management team who has been delegated responsibility for the nurse referrer of radiological procedures initiative in the hospital by the Director of Nursing.

**Nurse Referrer:**

A person whose name is entered on the register of nurses as maintained by NMBI established by the Nurses and Midwives Act (2011) and who meets the standards and requirements set down by Nursing and Midwifery Board of Ireland to allow them to refer individuals for radiological procedures. The Director of Nursing will authorise nurses who have successfully completed the education programme to be entered on the national database and to commence referring for radiological procedures in CHI. S/he will be an Advanced Nurse Practitioner or Clinical Nurse Specialist who has completed the appropriate education pertaining to the referral of patients for radiological procedures.

**Optimisation as per SI 256 2018:**

“An undertaking shall ensure that all doses due to medical exposure for radio diagnostic, interventional radiology, planning, guiding and verification purposes are kept as low as reasonably achievable consistent with obtaining the required medical information, taking into account economic and societal factors.”

**Patient's named consultant:**

This is the Consultant Medical Practitioner in the Nurse Referrer's area of practice who in collaboration with multidisciplinary colleagues, assumes responsibility for treatment actions that may be necessary as a result of findings on radiographic studies that the Nurse Referrer has requested. This Consultant assumes full responsibility for reviewing and following up on all reports except referral of radiological procedures by a RANP.

In cases where nurse referrers of radiological procedures are Registered Advanced Nurse Practitioners, the responsibility for treatment actions and follow up of reports rests with the individual RANP. The scope of practice for each RANP is stated in their individual protocols.

This Consultant Medical Practitioner may or may not have been the Clinical Supervisor of the Nurse Referrer.

**PPPG:**

Policies, Procedures, protocols and Guidelines.



### Practitioner:

Practitioners as per SI 413 2019 and SI 332 2019 are Radiologists, Nurse Referrers, Radiographers, medical consultants of clinical areas.

“Practical aspects of a medical radiological procedure may be delegated by—

- (a) the undertaking, or
- (b) the practitioner,

as appropriate, to one or more individuals—

- (i) registered by the Dental Council,
- (ii) registered by the Medical Council,
- (iii) registered by the Nursing and Midwifery Board of Ireland,
- (iv) whose name is entered in the register established and maintained by the Radiographers Registration Board pursuant to section 36 of the Health and Social Care Professionals Act 2005, or
- (v) recognised by the Minister under Regulation 19,

as appropriate, provided that such person has completed training in radiation safety prescribed or approved pursuant to Regulation 22(3) by the appropriate body.”

“A referrer shall not refer an individual to a practitioner for a medical radiological procedure unless the referral—

- (a) is in writing,
- (b) states the reason for requesting the particular procedure, and
- (c) is accompanied by sufficient medical data to enable the practitioner to carry out a justification assessment in accordance with paragraph (1).

A practitioner carrying out a medical radiological procedure on foot of a referral shall, having taken into account any medical data provided by the referrer under paragraph (10)(c), satisfy himself or herself that the procedure as prescribed in the referral is justified.

The referrer and the practitioner shall seek, where practicable, to obtain previous diagnostic information or medical records relevant to a planned exposure and consider these data to avoid unnecessary exposure.”

### Radiographer:

is defined as a healthcare professional of graduate level who is trained to undertake imaging of anatomy using specialised equipment for the diagnosis and treatment of pathology using ionising or non-radiological procedures. A Radiographer is eligible to be entered on the Radiographers Registration Board (RRB) administered by CORU, (Health and Social Care Professionals).

### Radiologist:

is a specialist medical practitioner who is responsible for the justification of requests for medical radiological procedures exposures and who produces a formal radiology report.

#### **RANP:**

Advanced nurse practice in Ireland refers to registered nurses and registered midwives who engage in continuing professional development (CPD) and clinical supervision to practise as expert practitioners and demonstrate exemplary clinical leadership. Registered Advanced Nurse Practitioners (RANPs) work within an agreed scope of practice and meet established criteria set by Nursing and Midwifery Board of Ireland (NMBI) to register as an RANP (NMBI 2015).

#### **RIS:**

Radiology Information System which incorporates the electronic ordering system on NIMIS.

#### **RPA:**

Radiation Protection Adviser (RPA) is defined under SI 30 (2019) as having the knowledge, training and experience needed to give radiation protection advice in order to ensure the effective protection of individuals. The RPA advises the Radiation Safety Committee and CEO on compliance with radiation protection legislation and good practice and all matters relating to radiation safety in the hospital. They are a member of the local implementation group.

#### **RPO/RPU**

Radiation Protection Officer / Radiation Protection Unit. An individual or group who undertake the primary day-to-day responsibility for the implementation and supervision of radiation safety within the Hospital

#### **RSM:**

Radiographer Services Manager provides managerial, strategic and professional leadership to the Radiology department ensuring the provision of a safe, responsive and efficient service to all stakeholders. S/he is a member of the local implementation group.

#### **Scope of Practice:**

The NMBI Scope of Practice is the range of roles, functions, responsibilities and activities which a registered nurse or midwife is educated, trained and competent in and has authority to perform. The individual Practitioner's scope of practice is determined by a range of factors that gives them the authority to perform a particular role or task (NMBI 2015; SI 256 of 2018). The scope of referral for radiological procedures practice is determined by national legislation, national and local guidelines, education information and training, and the individual referrers' levels of competence.

#### **X-Ray:**

A discrete quantity of electromagnetic energy without mass or charge, emitted by an X-Ray machine (Health Protection Agency, 2009).

## **7.0 Responsibilities**

### **7.1 Health Information Quality Authority (HIQA) and the Undertaking**

- The Health Information and Quality Authority (HIQA) as the regulator will require examples of documents pre-inspection and during on-site inspections, information and records relating to medical exposures that have been carried out to identify:
- *The individuals carrying out the practical aspects of the exposure are trained and competent*
- Training records for individuals who are delegated the practical aspects of a medical radiological procedure
- The undertaking's records of each delegation of the practical aspects of a medical radiological procedure as made by the undertaking or the practitioner

- Records of registration or recognition by the appropriate body for individuals who are delegated the practical aspects of a medical radiological procedure
- Rotas and rosters for practitioners, referrers, those delegated the practical aspects of a medical radiological procedure.
- Therefore, the undertaking is responsible to have systems in place to ensure that the responsibilities for medical exposures along the service-user pathway for medical exposure are allocated to appropriate persons as required by this regulation. The service-user pathway when undergoing a medical exposure involves referral, justification, optimisation, the practical conduct of the exposure and communication of the outcome (HIQA 2019).

## 7.2 CHI Nurse Referring for Radiological Procedures Implementation Group

The Implementation Group (IG) has responsibility to:

- Approve the Policy on Nurse Referral of Radiological Procedures in CHI in collaboration with the Director of Nursing, the CMO and the cross-site lead for Radiology.
- Implement policies, protocols, guidelines to support the practice change.
- Ensure robust clinical competency assessment systems are in place.
- Establish a link to the national database of nurse referral of radiological procedures.
- Monitor impact of the change in practice on radiology services.
- Ensure risk management structures are in place
- Review any unexpected incidents or events.
- Review multi-disciplinary audit and monitoring reports on nurse referral of radiological procedures at pre-determined CHI Implementation Group meetings. These will be presented by the Site Co-ordinators responsible for Nurse Referral of Radiological Procedures.
- Oversee evaluation process of all aspects of the change.
- Report to the CHI Radiation Safety Committee biannually. Nurse Referring should be a standing agenda item on the Radiation Safety Committee.

## 7.3 Director of Nursing

The Director of Nursing has responsibility for:

- The professional practice of each nurse with authority to refer patients for radiological procedures within CHI.
- Oversight of the introduction of nurse referral for radiological procedures in accordance with patient needs and service demands within CHI.
- Planning the strategic direction of nurse referral for radiological procedures in line with national and local policy direction, supported by the CHI NRR Implementation Group.
- Signing the Nurse Referrer of Radiological Procedures Declaration Form on behalf of the CHI NRR Implementation Group.
- Ensuring that all entrants to the nurse referral for radiological procedures education programme are selected according to criteria indicating their potential to refer safely in the area in which they will practice.
- Ensuring an organisational policy for nurse referral of radiological procedures is in place and up to date.
- Ensuring appropriate Clinical Supervisor arrangements are in place to support the Nurse undertaking the education programme.

- Ensuring the authorised Nurse Referrer is a member of a multidisciplinary team under the medical direction of a designated “patient’s named consultant”, who bears ultimate responsibility for patient care in a particular area of the hospital.
- Ensuring there is a commitment to continuing education for staff supporting the nurse referral of radiological procedures.
- Nominating a named individual with responsibility for the initiative locally and for liaison with the education provider, Nursing and Midwifery Board of Ireland and the HSE Offices of the Nursing Services Director.
- Ensuring access to a computer, email and internet for data input to the Nurse Referral of Radiological Procedures Data Collection System.
- Ensuring risk management systems are in place and processes for adverse event reporting.
- Ensuring a mechanism to audit the nurse referral of radiological procedures practices is in place to include input from key stakeholders.
- Being aware of the professional, regulatory and organisational requirements for nurses who are authorised to refer patients for radiological procedures with regard to continued competence for maintaining referral authority.
- Oversight of the process to safely manage and quality assure the practices pertaining to nurse referral of radiological procedures within CHI.
- Maintaining a current database of nurses with authority to refer patients for radiological procedures in CHI.
- Demonstrating a commitment to comply with and ensure data input for the Nurse Referral of Radiological procedures Data Collection System.
- Supervision and support of the Nurse Referral of Radiological procedures by the Site Co-ordinator with responsibility for the initiative locally.

#### **7.4 Nurse Referral of Radiological Procedures Site Co-ordinator has responsibility for:**

- Co-ordinating the development, implementation, monitoring and evaluation of the structures and processes to support safe nurse referral of radiological procedures (and ensure its compliance with the requirements and standards of Nursing and Midwifery Board of Ireland and the Health Service Executive).
- Acting as a central point of contact for nurse referral of radiological procedures for clinical supervisors, medical practitioners and key stakeholders in order to communicate regarding the nurse referral of radiological procedures initiative.
- Liaising with nurses, both undertaking educational preparation and those authorised to refer patients for radiological procedures, the Implementation Group, Risk Management colleagues, colleagues working in the Radiology Department and all other relevant stakeholders.
- Facilitating authorised nurses referring patients for radiological procedures within CHI to meet their responsibilities to ensure safe and effective prescribing.
- Supporting the implementation of the multi-disciplinary monitoring, audit and the evaluation processes for nurses authorised to refer patients for radiological procedures.
- Oversight of the multi-disciplinary audit and evaluation of nurse referral of radiological procedures in line with the hospital audit policy.
- Providing reports on the progress of nurse referral of radiological procedures in CHI to the appropriate committees or groups.
- Ensuring a link to the national database of authorised nurse referrers of radiological procedures is accessible to relevant healthcare professionals in CHI.
- Maintain a current database of nurses with authority to refer for radiological procedures in that CHI site.

- Informing the Radiography Services Managers of authorised nurse referrers of radiological procedures in a timely fashion.

## 7.5 The Clinical Supervisor

S/he will be a Consultant Medical Practitioner who, in collaboration with multidisciplinary colleagues, has identified a need in his/her clinical area of the hospital, where an authorised Nurse Referrer will be deemed to improve service delivery to the patient, as part of his/her multi-disciplinary team, by prescribing radiological procedures.

There should be one Clinical Supervisor per RANP / candidate ANP/CNS.

### ***The Clinical Supervisor has responsibility for:***

- Observing, supervising and providing guidance to the nurse referrer and candidate nurse referrers.
- Documenting and supervising the clinical assessment to deem the nurse competent or not competent to refer patients for radiological procedures.
- Providing a supervisory function for the Nurse referrer and candidate nurse referrer providing support, teaching and learning opportunities in the clinical practicum.
- Facilitating learning by encouraging critical thinking and reflection.
- Providing dedicated time and opportunities for the nurse undertaking the education programme to conduct the required number of full episodes of care to include referral of patients for radiological procedures.
- Ensuring the nurse integrates theory with practice.
- Verifying and documentation of all supervised practice for the duration of the programme.
- Liaising with Radiology and Radiographer colleagues to explore any issues arising around Nurse Referring in his/her clinical area of the hospital.
- Formally assess the nurse's competence in the clinical practicum using the Assessment Tool for Assessing Clinical Competence.
- Documenting that the nurse is competent or not competent using the Assessment Tool for Assessing Clinical Competence (Appendix 1).
- Collaborating with the Programme Co-ordinator to ensure adequate support for the nurse in the clinical practicum.
- Signing the Nurse Referral of Radiological Procedures Declaration Form (Appendix 2) to confirm his/her commitment to the process.
- The Clinical Supervisor has no further role following the nurse's completion of the education programme other than to participate in the nurse referrer's audit in the first year of referral. The patient's named consultant then takes over the role of day to day supervision of the Nurse Referral.

## 7.6 Patient's named consultant

The patient's named Consultant has complete responsibility for:

- Treatment actions that may be necessary as a result of findings on radiographic studies that the Nurse Referrer may have requested.
- Providing continued support, teaching and learning opportunities in the clinical practicum.
- Facilitation of on-going learning by encouraging critical thinking and reflection.

- Providing dedicated time and opportunities for the Nurse Referrer to independently refer for radiological procedures.
- Ensuring the Nurse Referrer continues to integrate theory with practice.
- Ensuring the Nurse Referrer performs and completes audits as described above and reports to the prescribing site co-ordinator in a timely and consistent fashion.
- Liaising with Radiology (RSM, RPA, RPO) to ensure that no issues arise concerning the Nurse Referring in his/her clinical area of the hospital.

## 7.7 Nurse Undertaking Education Programme

The nurse when undertaking the education programme has responsibility for:

- Successfully completing the Certificate in Nurse Referral for Radiological procedures programme (Children's).
- Register on the database.
- Ensuring that the theoretical and clinical experience requirements and assessments are completed within the required timeframe.
- Liaising with the Clinical Supervisor in relation to theoretical and clinical experience requirements and assessments.
- Discussing with the Director of Nursing/Prescribing Site Co-ordinator any situations where these responsibilities cannot or are not being fulfilled.
- Presenting evidence of successful completion of the programme to the Director of Nursing and to the CHI NRR Implementation Group.

## 7.8 Nurse Authorised to Refer for Radiological procedures

The Nurse with authority to refer for radiological procedures will:

- Perform the assessment of the patient, determining what the problem is and will make the decision to refer for radiological procedures within their scope of practice as outlined in their individual Radiological Procedure document.
- Demonstrate a commitment to comply with and ensure data input on NIMIS.
- Complete the appropriate education pertaining to the referral of radiological procedures.

Comply with the NMBI Nurse Authority to Refer for radiological procedures Requirements & Standards, procedures and guidelines for example: open disclosure, reporting referral errors/incidents and near misses, audit of referral patterns/practices and data protection

- Attend the CHI NRR Implementation Group as requested.
- Complete the appropriate education pertaining to the referral for radiological procedures.
- Ensure his / her name is entered in the HSE National database.
- Practice in compliance with all of the relevant statutory provisions, NMBI guidelines and local policy.
- Comply with relevant legislation when referring for radiological procedures as per SI 256 of 2018 full accountability and responsibility for this process/action

“A referrer shall not refer an individual to a practitioner for a medical radiological procedure unless the referral—

- (a) is in writing,
- (b) states the reason for requesting the particular procedure, and
- (c) is accompanied by sufficient medical data to enable the practitioner to carry out a justification assessment in accordance with paragraph (1).

- A practitioner carrying out a medical radiological procedure on foot of a referral shall, having taken into account any medical data provided by the referrer under paragraph (10) (c), satisfy himself or herself that the procedure as prescribed in the referral is justified.
- The referrer and the practitioner shall seek, where practicable, to obtain previous diagnostic information or medical records relevant to a planned exposure and consider these data to avoid unnecessary exposure.
- Wherever practicable and prior to a medical exposure taking place, the referrer or the practitioner shall ensure that—

(a) the patient or his or her representative,

(c) in the case of a patient who lacks, or may lack, capacity under the Assisted Decision-Making (Capacity) Act 2015 (No. 64 of 2015), the intervener in respect of the patient, is provided with adequate information relating to the benefits and risks associated with the radiation dose from the medical exposure.

## Optimisation

- An undertaking shall ensure that all doses due to medical exposure for radio diagnostic, interventional radiology, planning, guiding and verification purposes are kept as low as reasonably achievable consistent with obtaining the required medical information, taking into account economic and societal factors.”
- This PPPG will be reviewed and updated at least every three years by the document author/owner, or earlier if required due to updated guidance, evidence or legislation. Compliance with key principles or procedures described within this PPPG should be audited on an annual basis.

### 7.6.6 “the practitioner or the referrer shall provide:

- (a) the patient or his or her representative,
- (c) in the case of a patient who lacks, or may lack, capacity under the Assisted Decision-Making (Capacity) Act 2015 (No. 64 of 2015), the intervener in respect of the patient, with the information referred to before he or she leaves the hospital or other place where the exposure was carried out.

The information to be provided is the following:

- (a) information on the risks of ionising radiation; and
- (b) appropriate written instructions with a view to restricting doses to persons in contact with the patient as far as reasonably achievable.

## Responsibilities

- An undertaking shall ensure that the justification process of individual medical exposures involves the practitioner, and the referrer
- Input information for the National Nurse Referral for Radiological procedures Minimum Data Set on all referrals written in the Nurse referring for Radiological procedures audit if decided.



- Commit to and undertake continuing professional development to maintain her/his competence for referral authority.
- Inform the line manager or the Director of Nursing of any concerns pertaining to her/his competence.
- Conduct audits of her/his referral of radiological procedures practice.
- Furnish reports to the CHI NRR Implementation Group as requested and Radiation Safety Committee biannually.
- Work collaboratively with other members of the healthcare team in order to enhance positive outcomes for patients and their families consistent with family centred care.
- Liaise with Radiologists to guide best practice in the use of radiological procedures.
- Act as an educated advisor to other students undertaking the certificate in nurse referral of radiological procedures.
- Maintain on going communication and collaboration with members of the health care team including the radiologists and radiographers.
- Discuss with the Director of Nursing or designate any situations where these responsibilities cannot or are not being fulfilled.

## 7.9 Radiographer Services Manager (RSM)

*The RSM will:*

- Facilitate the introduction of nurse referral of radiological procedures in accordance with patient needs and service demands within the Radiology department of CHI.
- Maintain a current database in the Radiology department of nurses with authority to refer for radiological procedures in CHI as provided by the Director of Nursing / Nurse Referral Site Co-ordinator.
- Inform radiographers in a timely fashion of authorised nurse referrers when the list is received / updated from the Director of Nursing / Nurse Prescribing Site Co-ordinator.
- Review the Audit Report of the Nurse Referrer at the CHI NRR Implementation Group to measure the impact on the workload of the Radiology Department.
- Participate in multidisciplinary audit of nurse referring or delegating it to other Radiographers as required.
- Have oversight of the process to safely manage and quality assure Nurse Referring practices within the Radiology Department.
- Support the Nurse Referral Site Coordinator responsible for the Nurse Referring of Radiological Procedures Initiative locally.
- Ensure that all adverse incidents involving the referral for radiological procedures are reported to the RSM, RPA and the RPO Radiographer.
- Attend the CHI NRR Implementation Group.

## 7.10 Consultant Radiologist – Cross Site Lead for Radiology

*The Cross Site Lead for Radiology has responsibility for:*

- Signing the Nurse Referral of Radiological Procedures Declaration Form on behalf of CHI Radiology before the nurse undertakes the certificate education programme, or as delegated to individual site heads of departments.
- Complying with relevant legislation SI 256 of 2018 and SI 30 of 2019.
- Being clinically responsible (along with his/her Radiology colleagues) for all medical ionising radiation exposures performed by Radiographers in CHI.
- Determining the manner in which services involving radiation will be delivered.
- Approval of the policy for Nurse Referring for Radiological Procedures in Children's Health Ireland in collaboration with the Director of Nursing and the CMO.



- Inform all teams in a timely fashion of authorised nurse referrers when the list is received / updated from the Director of Nursing / Nurse Prescribing Site Co-ordinator.
- Review the Audit Report of the Nurse Referrer at the CHI NRR Implementation Group
- Reviewing and approving amendments to Radiography imaging and referral protocols.
- Clarification of the above regulation:
  - The Practitioner (Radiologist) becomes the prescriber if they accept a request from a non-authorised prescriber.
  - The Radiologist delegates the responsibility to the Radiographer who ensures the prescriber is authorised to prescribe independently.
  - The Radiologist is still responsible.

All communication about reports and their transmission must be between the patient's named Consultant and the Radiologist only. Where the interpretation of images is included in the scope of practice of RANPs who are referrers of patients for radiological procedures, communication about reports and their transmission will be between the patient's named Consultant, the RANP who referred for the radiological procedure and the Radiologist.

### 7.11 Radiation Protection Advisor (RPA)

*The RPA has responsibility for:*

- Attending CHI NRR Implementation Group meetings.
- Advising the Clinical Directors on all matters relating to radiation safety.
- Advising the Radiation Safety Committee on all matters relating to radiation safety.
- Co-operating with Heads of Department provision of advice on guidance on radiation protection matters.
- Investigating and reporting notifiable incidents to the EPA Office of Radiological Protection (ORP) or HIQA as appropriate.
- Proposing and review changes to policies, procedures and local rules.

### 7.12 Radiation Protection Officer (RPO) / Radiation Protection Unit (RPU)

*The RPO / RPU has responsibility for:*

- Attending CHI NRR Implementation Group meetings.
- Liaising with the nurse managers responsible for the nurse referring initiative.
- Reporting to the Radiation Protection Advisers (RPA), Radiographer Service Managers (RSM) and Radiation Safety Committee any incidents or other abnormal situation involving radiological procedures, as per radiation safety procedures (PP-Clin-RAD-5) and risk management protocols.

### 7.13 Radiographers

*It is the responsibility of the Radiographers to:*

Participate in multidisciplinary audit of nurse referring as requested by the RSMs.

**Comply with legislation as per SI 256 (2018) and amendments (SI413 of 2019 and SI 332 of 2019)**

“(4) Practical aspects of a medical radiological procedure may be delegated by—

(a) the undertaking, or (b) the practitioner, as appropriate, to one or more individuals—

(i) registered by the Dental Council,

(ii) registered by the Medical Council,

(iii) registered by the Nursing and Midwifery Board of Ireland,

(iv) whose name is entered in the register established and maintained by the Radiographers Registration Board pursuant to section 36 of the Health and Social Care Professionals Act 2005, or

(v) recognised by the Minister under Regulation 19, as appropriate, provided that such person has completed training in radiation safety prescribed or approved pursuant to Regulation 22(3) by the appropriate body.”.

- Be appropriately qualified to undertake ionising radiation examinations.
- Implement the ALARA Principle.
- Ensure that they are satisfied that the ionising radiation examination requested is justified as per legislation before proceeding with the medical exposure.
- Seek, where practicable, to obtain previous diagnostic information or medical records relevant to the planned exposure and consider these data to avoid unnecessary exposure as per legislation.
- Optimise the radiographic examination as per the legislation and in accordance with the ALARA Principle.
- Ensure the radiation protection of the patient and ensuring that the most appropriate ionising radiation examination is performed which will be of benefit to the patient as per the legislation

## 8.0 Procedure

### 8.1 Eligibility to Refer:

Nurses authorised for referral of children for radiological procedures in children must:

- Be registered in the Children's/General nurse division of the Nursing and Midwifery Board of Ireland (NMBI) Register.
- Have successfully completed an NMBI approved education programme in Nurse Referral of Radiological procedures in Children.
- Be permanently employed by the health service provider.
- Have received written approval for referral authority for radiological procedures from the Director of Nursing and be entered on the national database.
- Have a full understanding of the Policy for Nurse Referring for Radiological Procedures in Children's Health Ireland.
- Comply with other specific requirements that CHI at Temple Street and Crumlin have to authorise a nurse referring for radiological procedures to practise within CHI Temple Street and Crumlin.
- Complies with the NMBI Nurse Authority to Refer for Radiological Procedures Standards and Requirements, 2020, CHI policies, procedures and guidelines for example: open disclosure, reporting referral errors/incidents and near misses, audit of referral patterns/practices and data protection.

## 8.2 Indemnity

- The Clinical Indemnity Scheme (CIS), run by the States Claims Agency, provides clinical indemnity for nurse referral of for radiological procedures on the basis of enterprise liability.
- Therefore, relevant nurses and clinical supervisors in the enterprises/health service provider covered by the CIS are indemnified for clinical negligence in relation to nurse referral for radiological procedures.

### *CIS state:*

**“With respect for nurse prescribing of ionising radiation, the CIS provides indemnity cover to nurse prescribers and to registered practitioners who act as clinical supervisors of nursing prescribers of ionising radiation whilst they undergo training” (States Claims Agency 2021)**

## 8.3 Verification of referring status:

- The database of nurses authorised to refer for radiological procedures within CHI is available from the offices of the Director of Nursing and the Radiography Services Managers to verify the prescribing status of nursing staff in CHI.
- The database will be provided directly to the RSMs, the Radiation Safety Committee and updated as required.

## 8.4 Good Referral practice:

*The nurse authorised to refer patients for radiological procedures shall:*

- Clinically examine the patient, determining what the problem is and independently decide to refer for a radiological procedure which will address the clinical question.
- The referral for imaging must influence patient management/ treatment (SI 256 (2018) – justifiable).
- Hold full accountability and responsibility for this process, understanding the legal and ethical implications of such decisions.
- Involve the patients and where appropriate, the family/significant others in the patient assessment process.
- Provide evidence based rationale for clinical decisions and nursing interventions with regards to radiological procedures and/or referral to medical practitioner, if applicable, and record same in healthcare record.
- Refer only those radiological procedures specifically agreed for the scope of practice of the individual Nurse Referrer.
- Acknowledge his/her scope of practice for referring; recognising any limitations of competence/knowledge and in such case refer to the patient’s named medical Consultant.
- Participate in the development and review of the Policy Nurse Referring for Radiological Procedures in Children’s Health Ireland in collaboration with the Site Co-ordinator, the CHI NRR Implementation Group, the Director of Nursing, Radiography Services Managers, RPOs, Radiographers and Radiologists, relevant medical doctors and the Quality, Safety and Risk Management Department.
- Adhere to the Royal College of Radiology Referral guidelines (iRefer, 2017) in accordance with best practice and the Consultant Radiologist in Administrative Charge.
- Adhere to patient pathway (Appendix 4).

## 8.5 Reporting of near misses:

*The nurse authorised to refer patients for radiological procedures examinations shall:*

- Comply with the requirements/policies of CHI for reporting error/incidents and near misses.
- Participate in the detection, reporting and analysis of incidents and co-operate with system improvements designed to reduce the likelihood of errors.
- Report all safety incidents and near misses to her/his line manager.
- Record all incidents involving the referral of radiological procedures and report to the RSM in the absence of the RPO. Such incidents will be reviewed and investigated, where considered appropriate, locally.
- Report all notifiable incidents to HIQA as appropriate by the RPA through the hospital Risk Manager.

## 8.6 Communication:

- The Advanced Nurse Practitioner / candidate ANP who is authorised to refer patients for radiological procedures must communicate effectively with the patient and where appropriate, family members/significant others and other health care professionals involved in their care.
- The Advanced Nurse Practitioner / candidate ANP who is authorised to refer for radiological procedures must ensure that the patients and appropriate family members/significant others are aware that they are being referred for radiological procedures by a nurse.

## 8.7 Record keeping:

*The nurse authorised to refer patients for radiological procedures shall:*

- Accurately and comprehensively document all referral decisions and actions in the patient's healthcare record.
- This allows for the episode of care to be communicated to other healthcare professionals, as needed.
- Ensure all written communication is legible, unambiguous and does not lead to misunderstanding between healthcare professionals, thus preventing errors in the referral of patients for radiological procedures.
- Ensure that each referral shall:
  - Be "in digital writing" (as per current legislation) and be legible.
  - Electronic referrals may be entered in NIMIS.
  - State the name of the referring nurse (as entered on NMBI Register) and include the Nursing and Midwifery Board of Ireland personal identification number.
  - Be signed by the referring nurses using name as entered on NMBI register.
  - Outline the clinical history, including findings of clinical assessment undertaken.
  - State the examination requested.
  - Ensure that female patients of childbearing age, where appropriate, are assessed for the possibility of pregnancy and their answer must be recorded in writing or on NIMIS in accordance with legislation and local rules.
  - If the patient is to be treated as if pregnant, the management of this patient will be discussed with and determined by the patient's named consultant.
  - Ensure that the full contact details of the Nurse Referrer are evident on the Diagnostic Imaging Request form to facilitate contact in the event a radiographer needs further information.
  - Ensure the request (electronic) for a radiographic study written by the Nurse Referrer includes the name of the patient's named Consultant.

- Comply with guidelines and policies on the use of abbreviations and documentation standards for prescribing of radiological procedures.

## 8.8 Changes to the status of Nurse Referring for Radiological Procedures

- The authorised Nurse Referrer for radiological procedures is responsible for maintaining competence for their referral authority as per Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programmes (Nursing and Midwifery Board of Ireland 2020).
- If a nurse referring for radiological procedures is not practicing for an extended period of time, he/she must meet with the Nurse Referral Site Coordinator on return to work to discuss Scope of Practice and competency in relation to nurse referring. Each nurse should undertake an appropriate number of episodes under supervision until they reach a level of competence to be formally assessed and will involve a review of the current policy and other associated policies, procedures and guidelines.
- The nurse must undertake three episodes of supervised referring and three formal assessments under supervision that must be signed off by the Consultant and these should be documented and filed in their portfolio and a copy sent to the Nurse Referral Site Coordinator via their Directorate Nurse Manager.
- The Nurse Referrer is responsible for informing the line manager or Director of Nursing of any concerns pertaining to her/his level of competence.
- The authority to refer patients for radiological procedures is subject to review, suspension or possible termination if the Nurse Referrer is subject to disciplinary action or fitness to practice review by their regulatory body or internally within CHI.
- The authority to refer for radiological procedures terminates automatically if the nurse referrer no longer has an active unrestricted registration.
- In the event of a termination of contract, the nurse referrer will notify in writing the Director of Nursing one month in advance of the final date and also provide the reason for the termination for example, resignation, or change in employment.
- The database of nurses authorised to refer for radiological examinations will be updated to reflect any changes and the RSMs informed of these changes by the Director of Nursing. The national database will also need to be notified and updated.
- Further educational requirements may be deemed necessary if an authorised Nurse Referrer moves from one clinical area to another within CHI and their Scope of Practice will need to be reviewed by the LIG.

## 9.0 Implementation and Education Plan:

### 9.1 Implementation

- Nurse Referral of Radiological procedures in CHI will be implemented under the guidance of the CHI NRR Implementation Group and in line with national guidelines.
- The plan must be disseminated to all relevant parties in the service where nurse referral will occur.
- This policy will be disseminated to all relevant managers and stakeholders to communicate this change in practice.

### 9.2 Education

All Nurse Referrers will:

- Have successfully completed the approved education programme before commencing independent referring of radiological procedures.
- Be registered as a referrer of Radiological Procedures on the national database.

## 10.0 Evaluation

- On-going monitoring is necessary to track changes in outcomes over time and to ascertain that these systems are operating as planned.
- This policy will be updated every 3 years.

### 10.1 Monitoring

- Audit findings are monitored and discussed at the LIG meetings in order to put in place measures to continuously improve patient outcomes and identify actions to achieve improvement.

The nurse authorised to refer for Radiological Procedures shall:

- Enter all requests into NIMIS.
- The NIMIS administrator will generate statistical reports on referring practices for to the Nurse Referral Site Coordinator and used to monitor the referring practices in CHI.
- These reports will be disseminated to the Director of Nursing, relevant medical consultants, CHI NRR Implementation Group and the Radiation Safety Committee on a biannual basis or as often as required.
- Reports from NIMIS will be used as a data source to aid the audit process.

### 10.2 Audit of Referring Practice

*The nurse authorised to refer for Radiological procedures shall:*

- Conduct self-audit / peer audit of their referral practice using the CHI referral audit tool.
- Ensure that clinical decision for referral is audited quarterly.

Number of audits to be taken:

- Year 1 10 referral episodes per quarter
- Year 2 10% to a maximum of 10 referral episodes biannually i.e. 20 annually
- Year 3 and biannually thereafter, 10% or a maximum of 10 referral episodes.

Disseminate results to the Nurse Referral Site Co-ordinator, relevant nursing management, relevant medical consultants and the CHI NRR Implementation Group.

Use results to implement actions and improvement plans as required.

### 10.3 User Involvement

The views and experiences of the patients and families attending the organisation will be considered in order to provide a quality service

## 11.0 References

Health Protection Agency (2022) retrieved from <https://www.gov.uk/topic/health-protection/radiation>

Health Service Executive (2019) *Guidelines for reporting patient safety incidents from medical ionising radiation*. Available online at <https://www.hiqa.ie/sites/default/files/2019-10/Guidance-notification-of-significant-events.pdf>

HIQA (2019) *Guidance on the assessment of compliance in undertakings providing medical exposure to ionising radiation* [https://www.hiqa.ie/sites/default/files/2019-10/Guidance\\_assessing-compliance-in-ionising-radiation.pdf](https://www.hiqa.ie/sites/default/files/2019-10/Guidance_assessing-compliance-in-ionising-radiation.pdf) accessed 09-09-2022

HIQA (2019) *Statutory notifications for accidental or unintended medical exposures to ionising radiation* <https://www.hiqa.ie/sites/default/files/2019-10/Guidance-notification-of-significant-events.pdf>

Nursing and Midwifery Board of Ireland (2008) *Ionising Radiation Nurse Prescriptive Authority Requirements & Standards*, Dublin: NMBI.

Nursing and Midwifery Board of Ireland (2015) *Scope of Nursing and Midwifery Practice Framework*. Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2020) *Nurse Authority to Refer for Radiological Procedures Standards and Requirements for Education Programme*. Nursing and Midwifery Board of Ireland Dublin.

Radiological Protection Institute of Ireland (2013). *Guidelines for reporting radiological incidences to the Radiological Protection Institute of Ireland*. Available online from [https://www.epa.ie/pubs/advice/radiation/RP11\\_Guide\\_Report\\_Incidents\\_03.pdf](https://www.epa.ie/pubs/advice/radiation/RP11_Guide_Report_Incidents_03.pdf)

SI 256 of 2018 and its amendments SI 332 2019 and SI 413 2019: European Union legislation ([Basic Safety Standards for protection against dangers arising from medical exposure to ionising radiation](#)), Regulations 2018.

[S.I. No. 30 of 2019, Radiological Protection Act, 1991 \(Ionising Radiation\) Order, 2019.](#)

[iRefer Guidelines Making the best use of Clinical Radiology by Royal College of Radiologists 8<sup>th</sup> edition 2017](#)

ONMSD (2021) *National Nurse and Midwife Authority to Refer for Radiological Procedures Guideline, 2021* - Office of the Nursing and Midwifery Services Director (ONMSD), Health Service Executive

## Appendix 1: Key Stakeholders

This policy was reviewed and approved by the following key stakeholders:

<b>Nurse Referring for Radiological Procedures in Children's Health Ireland</b> <b>CHI Nurse Referral for Radiological Procedures Implementation Group 2022</b>
<ul style="list-style-type: none"><li>• Tracey Wall - Chief Director of Nursing Chair (<i>Chair</i>)</li><li>• Dr Siobhan Hoare - Specialty Lead Radiology (<i>Co-Chair</i>)</li><li>• Dr David Rea – Head of Radiology CHI at Crumlin</li><li>• Fionnuala O'Neill - ADON Nursing Practice Development Coordinator CHI at Crumlin</li><li>• Caroline O'Connor- ADON Nursing Quality, Practice &amp; Research Co-ordinator CHI at Temple Street</li><li>• Frieda Clinton - Advanced Nurse Practitioner Haematology Oncology, CHI RANP Nurse Referrer Representative</li><li>• Laura Mannix - Radiation Protection Officer CHI at Crumlin</li><li>• Aoife Mooney - Radiation Protection Officer CHI at Temple Street</li><li>• Dr Louise Bowden - Radiation Protection Advisor CHI</li><li>• Jennie Cook - Principal Physicist CHI at Crumlin</li><li>• Jason Goldrick - Radiography Services Manager 2 CHI at Crumlin</li><li>• Sara McGeough - Radiography Services Manager 2 CHI at Temple Street</li></ul>



## Appendix 2: Scope of Practice Nurse Referral for Radiological procedures within CHI Template



### SCOPE OF PRACTICE DOCUMENT

#### Details of Individual Registered Advanced Nurse Practitioner (RANP) / Clinical Nurse Specialist (CNSp) referring for Radiological Procedures, Scope of Practice and Patient Pathway

##### Details Nurse Referrer

<b>Name:</b>	
<b>Job Title:</b>	
<b>NMBI PIN:</b>	
<b>Phone (extn, bleep):</b>	
<b>Work Email:</b>	
<b>Work Address:</b>	
<b>Education Programme:</b>	This is a standardised national education programme which facilitates nurses to develop the competencies necessary to fulfill their role as nurse referrers for radiological procedures. It involves a theoretical component, clinical component and assessment strategies.
<b>Referral Module:</b>	Masters in Advanced Practice- Module of Nurse Referring for Radiological Procedures
<b>University:</b>	University College Dublin
<b>Date completed:</b>	

##### Details of Clinical Supervisor/Medical Mentor

<b>Name:</b>	
<b>Speciality:</b>	
<b>Medical Council No.:</b>	
<b>Phone, extn, bleep:</b>	
<b>Email:</b>	
<b>Work Address:</b>	

##### Details of Nurse Manager

<b>Name:</b>	
<b>Job Title:</b>	
<b>NMBI PIN:</b>	
<b>Phone (extn, bleep):</b>	
<b>Work Email:</b>	
<b>Work Address:</b>	

This scope of Practice has been discussed and approved.....

## Description of Scope of Practice

Nurses with the authority to refer for Ionising Radiation shall be called Nurse Referrers for the purpose of this document.

It is understood that each nurse referrer within their own Scope of Practice must make an independent decision to refer for a radiological procedure and is professionally accountable for their decision. Please use the iRefer guidelines to support your referral practice. <https://www.irefer.org.uk/>

Each Nurse Referrers must make a clinical assessment, including patient history and a clinical examination

### Brief description of Scope of Practice and agreed caseload for the RANP/CNS:

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<b>Nurse Referrer:</b>		<b>Dept:</b>	
------------------------	--	--------------	--

*Age profile for referring from 0-18 years (PAEDIATRICS LONG TERM PATIENTS 18+) Please complete the table below with details of the Ionising and non-ionising procedures. Use the IRefer guidelines to inform practice. <https://www.irefer.org.uk/>*

## General X-ray

Request	Indication	Date Approved

## Fluoroscopy

Request	Indication	Date Approved

## CT

Request	Indication	Date Approved

## Ultrasound

Request	Indication	Date Approved

**MRI**

Request	Indication	Date Approved

**Nuclear Medicine**

Request	Indication	Date Approved

**Other**

Request	Indication	Date Approved

## Appendix 3 - Pathway to Registration



### Nurse Referral of Patients for Radiological Procedures – Pathway to Registration

Applying for Nurse Referral Status	
Step 1	<p>Staff member (CNS, ANP candidate), in collaboration with multidisciplinary colleagues, identifies the introduction / expansion of authorised nurse referral for radiological procedures as a contributory factor to improved service delivery to the patient within his / her service area. This is discussed with the Assistant Director of Nursing (ADoN) Nurse Referral for Radiological Procedures Site Co-ordinator (Site Co-ordinator) and Director of Nursing.</p> <p>Once a Clinical mentor is identified, or if a requirement for a nurse referrer is agreed outside of the ANP programme, the nurse applies to undertake the Professional Certificate in Nurse Referral for Radiological Procedures programme. In the case that the requirement for a Nurse referrer is agreed outside of the RANP programme this may be accessed as a stand-alone programme or as part of a Masters in Advanced Practice (Referring Pathway) programme.</p>
Step 2	The Site Co-ordinator completes the Site Declaration and Clinical Learning Environment Audit forms. The candidate's mentor, Head of Radiology and the Director of Nursing sign the approval form.
Step 3	The Site Co-ordinator communicates to Implementation Group, that there are x number of nurse referrer candidates in training and sites they are attending. This will give the IG an idea of the volume of potential referrers for the year.
On Completion of Education Programme	
Step 5	<p>On successful completion of the education programme, the Candidate will inform the Site Co-ordinator.</p> <ul style="list-style-type: none"> <li>The candidate will register her Certificate with NMBI. <a href="mailto:Maureen.nolan1@hse.ie">Maureen.nolan1@hse.ie</a></li> <li>The Nurse Referrer reviews national and local nurse referral policies.</li> <li>The Nurse Referrer will draft his/her Scope of Practice document in collaboration with Consultants in their service.</li> <li>The Nurse Referrer will meet with the Site Coordinator and the Director of Nursing to discuss the scope of practice.</li> <li>Nurse Referrer will contact the Medical Physics and Radiology team regarding review of scope with modality leads and relevant Radiologist. Review includes visit to each area and discussion of specific imaging requirements and NIMIS codes for referring nurse.</li> <li>Nurse Referrer amends scope of practice to reflect visit.</li> <li>The nurse referrer will send their Scope of Practice to the site coordinator for submission to the Implementation group and will ensure the content is sufficient for review.</li> </ul>
Presentation to Implementation Group	
Step 6	Site Co-ordinator will submit the Scope of Practice to the CHI NRR. It will be tabled for approval by CHI NRR in due course.
Step 7	The Nurse Referrer will be invited to attend a meeting of the IG group with their mentor to review scope of practice with the group. The referrer will be given ample notice to prepare for attending the IG group meeting. If amendments to scope are required following review, these must be submitted by the Nurse Referrer to the Site coordinator prior to final approval. If the IG requires the referrer to attend the group again ample notice and a rationale as to why this is required will be given to the referrer and their mentor.
Following approval by Implementation Group	

Step 8	Once approved by CHI IG, the Nurse Referrer will be added to the Nurse Referrers local database. The database is updated by the Site Co-ordinator and circulated to the Head Of Radiology and Radiography Services Manager (RSM) at the respective CHI site for further dissemination in the Radiology Dept.
Step 9	The National Lead for the Implementation and Audit of Nurse & Midwife Referral for Radiological Procedures will register the nurse's name on the HSE National Database of Nurse & Midwife Referrers on notification that the individual has been ratified by CHI IG.
Step 10	Site Co-ordinator will inform the Director of Nursing (DON), Radiography Services Managers, Head of Radiology and Radiation Protection Officer (RPO) at the respective CHI site when the new Nurse Referrer's name is added to the national database.
Step 11	A member of the CHI Implementation group will update CHI Radiation Safety Committee at next meeting of new Nurse Referrers coming on stream.
Step 12	DON will write a formal letter of commencement to the Nurse Referrer. This will authorise the nurse to refer from a designated date. The letter of commencement will be copied to RSM, Head of Radiology, RPO Radiographer, and Consultants in the service area and the Site Co-ordinator.
Step 13	The Nurse Referrer is issued with access to the National Integrated Medical Imaging System (NIMIS) by their local RIS-PACs office.
Step 14	The new nurse referrer will arrange a meeting with the Nurse Referral for Radiological Procedures Site Co-ordinator re. Nurse Referral of Patients for Radiological Procedures auditing requirements.
Step 15	The Scope of Practice will be filed on a database of Referrers with access by the Site Coordinator and the referrer.

## Appendix 4 - Referral Process Flow Chart (NMBI, 2020)

### Referral process flow chart

A referral for an imaging procedure is a request for a clinical opinion from a specialist practitioner usually a radiologist. A useful investigation is one in which the result will assist in the clinical management of the person. The aim of all procedures is to obtain the maximum information with the minimum radiation dose.



The person should be informed of the results of the procedure and the appropriate follow-up care will be arranged.

## Appendix 5 - Audit Tool

### Audit of Nurse referring for Radiological Procedures

Name of Prescriber:

NAME

Item	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5	Patient 6	Patient 7	Patient 8	Patient 9	Patient 10	Compliance Score per Item
An assessment of the patients/service users' needs has been recorded by the nurse/midwife referrer											0%
Physical examination											0%
Patient/service user history											0%
Clinical findings are documented											0%
<b>For handwritten referrals:</b>											0%
The referral is legible											0%
The referral is in ink/indelible											0%
The referral is signed by the Registered Nurse referrer											0%
<b>For handwritten and electronic referrals:</b>											0%
The name of the nurse is stated on the referral											0%
The name of the patient's Consultant is on the referral											0%
Clinical indication/rationale for decision to refer for ionising radiation - Radiological Procedures											0%
Clinical impression correlates with the imaging procedure requested											0%
The ward / clinical area is stated on the referral											0%
The referral is dated and timed (24-hour clock)											0%
The full name of the patient/service user is on the referral											0%
The address of the patient/service user is on the referral											0%
The patient/service user date of birth is stated											0%
The type of image procedure requested is clear											0%
The anatomical site requested for imaging is clear											0%
Limb side correlates with the notes											0%
Pregnancy status is documented as appropriate											0%
If pregnancy is documented is this specified in the notes and the referral											0%
If pregnancy is documented is it specified in the notes and the referral regarding the identification of the registrar /consultant with whom it was discussed?											0%
<b>Compliance Score per Patient</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	



## Appendix 6 - State Claims Agency 2021



Gníomhaireacht Bainistíochta an Chisteáin Náisiúnta  
National Treasury Management Agency

An Gníomhaireacht um Éilimh ar an Stát  
State Claims Agency

February 2021

### Nurse and Midwife Authority to Refer for Radiological Procedures.

The Clinical Indemnity Scheme (CIS) was established in July 2002 and is managed by the State Claims Agency (SCA). Under the scheme, the State assumes full responsibility for the indemnification and management of all clinical negligence claims against enterprises and practitioners covered by the scheme. This includes the voluntary and statutory services of the Health Service Executive. For more information on which enterprises are covered by the scheme, please go to [www.stateclaims.ie](http://www.stateclaims.ie)

In relation to Nurse and Midwife Authority to Refer for Radiological Procedures, the CIS provides vicarious indemnity cover to nurse and midwife referrers and to all health practitioners providing professional medical services for and on behalf of the hospital/enterprise.

CIS indemnity is provided in respect of a suit for personal injuries brought by a person alleging negligence, statutory or at common law, in respect of the provision of, or failure to provide, professional medical services. Such a suit may be against any health practitioner, in their role regarding nurse and midwife referrals for radiological procedures, whether sued alone or together, arising from the referral for a medical radiological procedure or procedures by such a nurse and midwife referrer. The CIS does not provide cover in respect of criminal matters, i.e. where the Director of Public Prosecutions (DPP) directs criminal charges against as health practitioner.

The CIS does not provide representation for health practitioners in relation to fitness to practice issues. In that regard, the States Claims Agency advises health practitioners to purchase additional benefits cover, specifying cover in respect of criminal and fitness to practice matters, from their relevant defence organisations.

For the avoidance of any doubt, private practice settings and/or their indemnity/insurance providers are not required to extend indemnity to cover nurse midwife referrers for radiological procedures, employed by the voluntary and statutory services of the Health Service Executive, authorised to practice in their services on foot of a SLA between the HSE and the particular private practice setting. The HSE nurse and midwife referrer practicing in these settings is indemnified by the CIS in respect of the provision of his/her services.

For any queries regarding this please contact [StateClaims@ntma.ie](mailto:StateClaims@ntma.ie)

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