Children's Health Ireland

Crumlin | Temple Street | Tallaght | Connolly

CHI TERMS OF REFERENCE FOR NURSE REFERRING FOR RADIOLOGICAL PROCEDURES IMPLEMENTATION GROUP

Area of use:	All of organisation ☒	CHI at Connolly ☐	CHI at Crumlin ☐
	CHI at Herberton ☐	CHI at Tallaght ☐	CHI at Temple Street ☐
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1.0 Guideline statement

Irish Law was amended in 2007, 2018 giving nurses the opportunity to expand their scope of practice to include authority to refer for Radiological Procedures by amending the Statutory Instrument (S.I.) No. 303 which incorporated an amendment to the definition of "prescriber" of medical ionising radiation to include registered nurses maintained on the register of nurses by Nursing and Midwifery of Ireland as An Bord Altranais[1]

This Implementation Group has been created to guide the referrer/mentor and members of the LIG in the sign off process for referrers in the service. Its purpose is to support the referrer/mentor/ LIG chair in this process.

In 2018, this law was superseded by SI 256 and the term "prescriber" was replaced with "referrer" which is defined as a person who is entitled to refer an individual for medical radiological procedures to a practitioner. Referrers include dentists, medical practitioners, radiographers as well as appropriately trained nurses.

This Local Implementation Group (LIG) has been created to guide the referrer/mentor and other relevant staff in the sign off process for referrers in the service. Its purpose is to support the referrer/mentor/ LIG chair in this process.

The Requirements and Standards document outlines the requirements for the 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 referral practice.

Purpose / Remit of this multidisciplinary taskforce

This LIG will give an opportunity to the nursing team to liaise with radiology colleagues on the progress of Nurse Referring for Ionising Radiation in CHI. This group will meet with the referrer and mentor to review the scope of practice for the service.

2.0 Objectives

- Create a space that supports the Nurse referrer and their mentor in the sign off of the nurse referrer Scope of practice document (Sara)
- Create and implement policies, guidelines, and algorithms to support the Nurse Referring for Radiological procedures in clinical areas.
- Gives support to the nurse referrer in all aspects of nurse referring.

[1] *The name An Bord Altranais was changed following the signing of Commencement Order S.I. No. 385 of 2012, 'the body known as An Bord Altranais, or in the English language as the Nursing Board, established by that section 6 shall continue in being and shall be known as Bord Altranais agus Cnáimhseachais na hÉireann or, in the English language, as the Nursing and Midwifery Board of Ireland' (Government of Ireland, 2012).*

- Approve the Scope of Practice of the Implementation group for each nurse referrer
- Ensure risk management processes are in place and robust
- Review any unexpected incidents or events as reported through the risk management process as they arise and escalate as necessary.
- Ensure audit processes are in place and feedback to individuals to facilitate learning.
- Report any updates or concerns to the hospital radiation safety committee.

3.0 Meeting format

- The meeting will be planned in advance giving at least two weeks' notice of the suggested dates by email to the referrer and the mentor.
- An arrangement can be made to meet virtually if required.
- The referrer and site coordinator will ensure all documentation is ready and available for the meeting and the required visits to radiology happen and the required Scope of Practice template is used as agreed by the group.
- The meeting will be chaired by the Chair/co chair of the Implementation group
- Minutes will be taken by dedicated clerical support to the committee
- Introductions will be made and the chair will review the documentation
- It is a given that the Registered Nurse Referrer/Mentor and the members of the group are clear about the role and function of the Registered Advanced Nurse Practitioner/Clinical Nurse Specialist role and that this expanded scope was undertaken to support the service.
- The Scope of Practice will be approved pending any minor correction or edits.
- The mentor and the intended Nurse Referrer will attend the meeting at the appointed time.
- The meeting should take 10 minutes per candidate during which time the scope of practice document will be signed off by the chair of the group.
- Minor editions to the group can be submitted by email and may be dealt with as decided by the group.

4.0 Accountability / Reporting

- The Committee is accountable to the CHI CEO
- The Committee reports to the CHI Radiation Safety Committee
- The Committee will report progress to the CHI Nurse Practice Committee

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5.0 Committee Membership

Title	Name
Members	Chief Director of Nursing Chair, Specialty Lead Radiology- Co-Chair DoN/Directorate Nurse Lead – relevant to applicant (s) Principal Physicist Radiology Radiography services Manager from both sites RPOs from both sites Nurse Practice Co-Ordinator, Assistant Director of Nursing, Referring Site co-ordinator from relevant site of applicant Registered Advanced Nurse Practitioner Clinical Nurse Specialist Head of Radiology – relevant to applicants site appropriate lead invited to the meeting
Co-opted members	Other individuals will be invited to sit on the committee as co-opted members for specific projects to which they can make a particular contribution.

6.0 Committee Membership Terms

- Members are expected to attend all meetings or if not available to send agreed representation.
- If a committee member is unable to attend meetings they will be requested to source alternate representation to sit on the committee
- A quorum for this meeting is 50% + 1 of the group plus one, there needs to be a sufficient spread across sites. (It must have a Radiologist, an RSM, a Site Coordinator, Director of Nursing or designate, and an RPO.)

7.0 Committee Meetings

- Frequency: Monthly initially this could occur two weekly until the backlog is cleared
- Duration: One hour – to two hours
- Notification: Members will be notified one week in advance of the meeting and any relevant documentation for review will be submitted to the member at this time.
- Timeframe: Set out at the beginning of the year and next meeting confirmed at the end of each meeting
- Apologies in advance to the chair / secretary

8.0 Responsibilities of the Co-Chairperson(s)

- Accountable for all aspects of the committee's work and its success
- Provides leadership and direction in meeting objectives
- Ensures any follow-up from meetings is acted upon
- Ensures a formal, periodic review of the committee functions and a process for improvement / renewal
- Risks will be managed through the organisational risk management framework and serious risks escalated
- Reports into the Quality, Safety, Risk Management Executive committee

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9.0 Responsibilities of the Secretary / Admin

- Sends out the agenda the week prior to the next meeting
- Records and disseminates the minutes and any associated papers to the committee members prior to the next meeting
- Plans meeting dates and books venues
- Ensures attendance list completion
- Holds a database of Nurse referrers across CHI
- Holds a copy of the signature sheets of the sign off for each referrer

10. Responsibilities of Committee Members

- Actively participate in the work of the committee, including decision making
- Provide feedback and /or review of documentation within the requested timeframes
- Respect the confidentiality of committee business where this requirement is conferred by the Chairperson
- Consider any conflict of interest regarding committee business
- Co-opt /seek expert advice on an as needs basis at the direction of the Chairperson
- Demonstrate a good attendance and submit an apology for non-attendance in advance of any meeting, or, if appropriate, send a suitable individual to deputise for the member

11.0 Linkage with other Committees

As required

12.0 Review of Terms & Membership

- An annual self-audit that contributes to the review of the ToR
- Self-audit results provided to the Hospital Clinical Governance
- A formal, periodic review of the committee functions and a process for improvement / renewal
- Review of membership – relevant to the purpose, attendance

References

(2022) Childrens Health Ireland, *Nurse Referring for Radiological Procedures in Childrens Health Ireland*, CHI, Dublin

(2017) Nursing and Midwifery Board of Ireland (2017) *Requirements and Standards for Nurse Education Programmes for Authority to Prescribe Ionising Radiation (X-Ray*). NMBI, Dublin.

(2021) HSE (2021) *National Nurse and Midwife Authority to Refer for Radiological Procedures Guideline*, HSE, Dublin, Ireland.