

Reference Number: UHB 330 Version Number: 2	Date of Next Review: 13 Sep 2019 Previous Trust/LHB Reference Number: Ref No:173
Referrals By Non-Medical Practitioners For Diagnostic Imaging Investigations (Excluding Clinical Trials And Research) Policy	
<p>Policy Statement</p> <p>To ensure the Health Board delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, we will manage the application process for Non Medical Referral (NMR) status and governance of practice in order to facilitate safe, appropriate pathways of care within the UHB.</p> <p>A Non-Medical Referrer (NMR) is defined as a registered healthcare professional other than a Medical or Dental professional, i.e. Nurse practitioner, extended scope therapist, etc. who has been entitled by Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) Employer to act as a Referrer in compliance with the Regulations according to the specific responsibilities of that role.</p>	
<p>Policy Commitment</p> <p>We will</p> <ul style="list-style-type: none"> • Only support applications for NMRs within Cardiff and Vale UHB where approval has been given by their Directorate and it can be demonstrated that it is a requirement of the role. • Provide information that Directorates are aware of their responsibility that NMRs employed within their Directorate are competent to fulfil their clinical role as a referrer and provide governance to their practice in this role. • Receive a clear audit framework with each NMR application to ensure a governance of practice process exist for NMRs within individual Directorates. • Ensure all non-Medical/Dental healthcare professionals who act as referrers are identified, agreed and recorded in a local register. • Have arrangements in place that only healthcare professionals registered with an appropriate Regulatory Body are enabled to refer as a NMR. • Demonstrate a specified Scope of Practice and Scheme of Work for each NMR. • Ensure NMR's have undergone suitable radiation safety training appropriate to clinical imaging. • Manage a review programme where compliance against NMR authorisation is assessed. 	
<p>Supporting Procedures and Written Control Documents</p> <p>This Policy is supported by:</p> <ul style="list-style-type: none"> • Non Medical Referrer procedure • Statement of Authorisation, Scope of Practice and Scheme of Work for NMR <p>They describe the following with regard to Non-Medical Referrers referral to DII:</p>	

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- Application process for NMR entitlement
- Responsibilities of Directorates supporting the practice of NMR's
- Management of referral practice of NMR's against their defined Scope of Practice and dealing with instances non-compliance
- Duties associated with the practice of NMRs

Other supporting documents are:

- Ionising Radiation Policy
- Exposure of Patients to Ionising Radiation Procedure
- Exposure of Staff and Members of the Public to Ionising Radiation Procedure

Equality Impact Assessment	An Equality Impact Assessment (EqIA) has been completed and this found there to be no impact.
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Health Impact Assessment	A Health Impact Assessment (HIA) is not required for this policy
Policy Approved by	Quality, Safety and Experience Committee
Group with authority to approve procedures written to explain how this policy will be implemented	Radiation Protection Group
Accountable Executive or Clinical Board Director	Executive Director of Therapies and Health Sciences

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

Summary of reviews/amendments			
Version Number	Date Review Approved	Date Published	Summary of Amendments
1	Xx/xx/xx	01/07/2005	New Policy
2	13/09/2016	07/10/2016	New policy format with supporting procedural document. Removal of information relating to resources supporting the implementation

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