

Clinical Support and Imaging CMG

Extended Scope of Practice Roles Policy

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REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

V2 revised Trust format

V3 revised process for approval and, revised application and review forms

KEY WORDS

Scope of practice, extended roles,

1 INTRODUCTION AND OVERVIEW

- 1.1 This document sets out the University Hospitals of Leicester (UHL) NHS Trust's Policy and Procedures for identifying, approving and reviewing Extended Scope of Practice roles for Allied Health Professionals (AHPs), Health Care Scientists (HCSs) and Nurses within the Clinical Support and Imaging (CSI) Clinical Management Group (CMG).
- 1.2 The policy aims to ensure a consistent approach to extended scope of practice roles by
- Defining extended scope of practice roles
 - Providing guidance on identifying and approving extended scope of practice roles
 - Providing clear roles and responsibilities of the Executive Team, Heads of Service / General Managers and employees

In this policy the term extended role will be used to mean extended scope of practice role

2 POLICY SCOPE –WHO THE POLICY APPLIES TO AND ANY SPECIFIC EXCLUSIONS

- 2.1 This Policy applies to any Allied Health Professional, Health Care Scientist or Nurse employed by UHL, and working within the CS CGM, who undertakes extended roles
- 2.2 The Policy also applies to Heads of Service / General Managers / Executive Team responsible for approving and monitoring extended roles
- 2.3 All AHPs and Nurses undertaking extended roles must be professionally registered with the Health and Care Professions Council (HCPC) and Nursing and Midwifery Council (NMC) respectively.
- 2.4 HCSs undertaking extended roles are encouraged to be on a voluntary register.

3 DEFINITIONS AND ABBREVIATIONS

- 3.1 The Health and Care Professions Council (HCPC) defines 'scope of practice' as:
'the limit of your knowledge, skills and experience. It is made up of the activities you carry out within your professional role, provided that you have the knowledge, skills and experience to do them lawfully, safely and effectively'. (HCPC 2020)
- 3.2 'Extended scope practice' or 'extended practice' indicates working outside or beyond the recognised elements of AHP or HCS practice, using skills and techniques that are:
- not included in the defined core skills of a registered AHP or HCS; and
 - not included in the qualifying professional education curriculum for AHP or HCS
- 3.3 Extended Role Practitioners do not necessarily use the word 'extended scope' in their job title, they may be called clinical specialists.
Extended Role Practitioners are not the same as Advanced Clinical Practitioners (ACPs) as described by Health Education England.

4 ROLES – WHO DOES WHAT

4.1 Executive Responsibility

The Chief Nurse has executive responsibility for this policy.

4.2 Clinical Support & Imaging Clinical Management Group (CMG) Clinical Director and Head of Nursing are responsible for ensuring that:

- a) proposed extended roles for AHP and HCS are approved by the CMG Quality and Safety Committee
- b) proposed extended roles for AHP and HCS meet the current and future workforce development needs of the service / CMG
- c) there is a consistent approach to the development of professional roles
- d) a register is maintained, by the CMG Management Team, detailing the extended roles approved, dates of approval and review

4.3 Clinical Director and Head of Nursing for other Clinical Management Groups (CMGs) are responsible for ensuring that:

- a) relevant staff from their CMG contribute to the development of extended roles, as agreed
- b) relevant staff from their CMG participate in the education and training, and practical assessment of competence of staff undertaking extended roles, as required

4.4 The CSI Extended Scope of Practice Roles Committee will:

- a) carry out the duties laid down in the Terms of Reference of the Extended Scope of Practice Roles Committee (Appendix 1)
- b) ensure the agreed processes are followed for development and approval of extended roles, for approving individual applications, and re-evaluating extended roles (Appendix 2)
- c) consider applications for extended roles that are outside the normal scope of practice and forward applications to the CMG Quality & Safety Committee for approval (Appendix 3)
- d) ensure a consistent approach across the CMG to the development of extended roles

4.5 Heads of Service / General Managers have responsibility for:

- a) Producing robust business cases / service development plans that support the implementation of new extended roles, with due consideration for patient safety and governance
- b) engaging with relevant staff within other CMGs in developing and agreeing extended roles
- c) agreeing with relevant staff in other CMGs their role in the education and training, and assessment of competence of staff undertaking extended roles, where relevant
- d) ensuring individual members of staff have adequate resources to undertake the role
- e) ensuring individual members of staff have access to essential to role training and to education, training, support and supervision as appropriate to extended scope of practice role
- f) ensuring any extended roles are lawful
- g) ensuring that job descriptions and job specifications reflect the extended roles undertaken by individual members of staff, once agreed, as appropriate, and on-going competency requirements
- h) considering and approving applications for individuals to undertake extended roles
- i) reviewing all extended roles and monitoring the ongoing competence of individuals within these roles, by ensuring staff complete an annual re-affirmation of competence to practice, as part of their annual appraisal, or sooner if there is a change in practice/role
- j) Maintaining a register of staff undertaking extended roles, detailing approval and review

dates

4.6 All members of staff CSI AHP and HCS staff undertaking extended roles are responsible for:

- a) ensuring they have the necessary skills, knowledge and experience to be able to practice lawfully, safely and effectively in those new areas
- b) completing all education, training, supervised practice and competency assessments required to undertake the role
- c) seeking appropriate clinical supervision, training and CPD to support their practice in new areas
- d) ensuring they continue to meet the standards set by their relevant professional group and regulatory body
- e) continuing to act in the best interests of the service users
- f) ensuring they do not undertake an extended role if they feel they are not competent to do so or no longer able to maintain competency
- g) monitor and evaluate the extended role in terms of quality eg outcomes and patient safety
- h) maintain a record of training and assessment undertaken and a log of extended scope of practice experience as part of their CPD Portfolio and registration requirements

5. POLICY IMPLEMENTATION AND ASSOCIATED DOCUMENTS –WHAT TO DO AND HOW TO DO IT

This policy is supported by the following processes / procedures / standards found in the associated documents as detailed below, which must be used in conjunction with this policy:

Procedure / Process / Standard	Appendix
Terms of Reference for Extended Scope of Practice Roles Group	1
Process to Agree and Approve Extended Scope of Practice Role(s)	2
Extended Scope of Practice Roles Role Application Form	3
Extended Scope of Practice Roles – Individual Application Form	4
Extended Scope of Practice Roles – Annual Review	5

6. EDUCATION AND TRAINING REQUIREMENTS

- 6.1 AHP or HCS staff undertaking an extended role must have the knowledge, skills and competence to undertake the role, as identified in the role application form, and accept responsibility for updating their knowledge, skills and competence required in order to fulfil the role.
- 6.2 The practitioner must accept full responsibility and accountability of the role.
- 6.3 The Head of Service / General Manager must ensure that the individual member of staff has access to appropriate education and training.
- 6.4 The Head of Service / General Manager must ensure that the individual member of staff has access to support and supervision from someone with the relevant experience and skills
- 6.5 To be able to assess the knowledge and competency of others the assessor must:
 - Be confident and competent in performing the skill

- Practice the skill regularly enough to maintain competency
- Have a sound knowledge of current policies and procedures
- Ideally be identified by the line manager as a Leicestershire Competency Assessment Tool (LCAT) assessor

7. PROCESS FOR MONITORING COMPLIANCE

It will be the responsibility of the Heads of Service / General Managers and the Extended Scope of Practice Roles Committee to monitor compliance, as described in the Policy Monitoring Table.

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangements
All new roles will be approved by the Quality & Safety Committee	Head of Nursing	Minutes of the Quality & Safety Committee	Quarterly	Report to Quality & Safety Committee
All new roles and review of existing roles will be managed in line with this Policy	Head of Service / General Manager	Minutes of Extended Scope of Practice Roles Group and Database	Quarterly	Report to Quality & Safety Committee
A register will be maintained of all approved roles and review dates	CSI Administration Team	Database	On-going	Report to Quality & Safety Committee

8. EQUALITY IMPACT ASSESSMENT

- 8.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2 As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

9. SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

College of Occupational Therapists Essential Briefing – Extended Scope of Practice. 2013

Health and Care Professions Council (HCPC) – Standards of Conduct, Performance and Ethics. January 2016

Health and Care Professions Council (HCPC) – Standards of Proficiency.

Health and Care Professions Council (HCPC) – Standards of continuing professional development

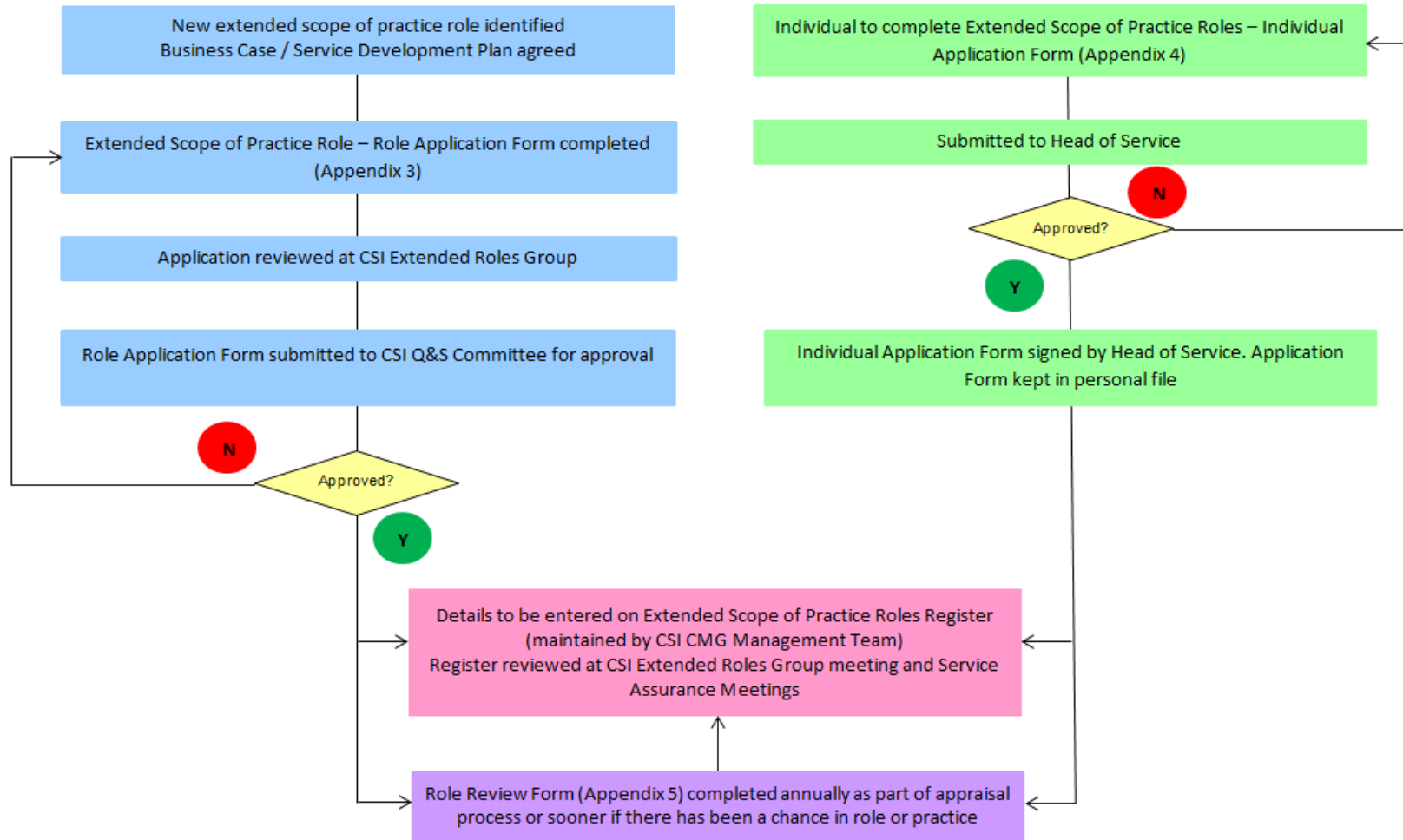
Nursing and Midwifery Council (NMC) – The Code, Professional standards of practice and behaviour for nurses, midwives and nursing associates

10. PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

- a) This policy will be reviewed and evaluated by the Professional Advisory Group for Extended Roles to ensure its continued effectiveness and efficiency. The findings of this review will be reported to the CSI CMS Quality & Safety Committee.
- b) This document will be uploaded onto SharePoint and available for access by Staff through INsite. It will be stored and archived through this system.
- c) This policy will be reviewed every 3 years or where there is any significant change required, driven by incidents, risk or national guidance.

- Membership: CSI CMG Head of Nursing (Chair)
Heads of Service or delegated representative from:
- Dietetics
 - Occupational Therapy
 - Physiotherapy
 - Radiography
 - Pharmacy – for advice on medication issues
 - Medical Physics
 - Speech & Language Therapy
 - Other services as required
- AHP Education & Practice Development Practitioner
- Purpose:
- To ensure the agreed processes are followed for development and approval of extended roles, for approving individual applications, and re-evaluating extended roles
 - To consider applications for extended scope of practice roles that are outside the normal scope of practice and forward approved applications to the Quality & Safety Committee for approval
 - to ensure all approved roles are reviewed within the agreed review timescale
 - to ensure a consistent approach across the CMG to the development of extended scope of practice roles
 - to act as a resource in the development of extended scope of practice roles
 - to ensure a register is maintained of all extended scope of practice roles within the CMG and staff undertaking these roles
- Quorum: • Chair/Deputy Chair plus 3 members
- Meetings: • The group will meet bi-monthly
- Minutes & Reporting: • Meetings will be documented to include attendance, apologies, actions and progress
• Reports will be made to the CSI CMG Quality & Safety Committee
- Sub-Committees: N/A
- Review: • The role and remit of the group will be reviewed in line with the review date of this policy

Process for the Approval of Extended Scope of Practice Roles



Extended Role Title: _____

Summary of Extended Role:

Support for Extended Scope of Practice Role

Head of Service / General Manager name: _____

Head of Service / General Manager signature: _____ Date: _____

Lead Clinician name: _____

Lead Clinician signature: _____ Date: _____

Competency Assessor name: _____

Competency Assessor signature: _____ Date: _____

Approval by CMG Quality & Safety Committee

Chair of Quality & Safety Committee: _____

Signature: _____ Date: _____

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Service Area
Summary of area of professional practice developed/to be developed
Aims & Objectives
Benefits & Risks
What evidence base is available to support the proposed extended role? (Summarise & provide details as an appendix to application)
Are there any potential additional costs associated with the extended role? YES/NO If YES how will these additional costs be addressed?
Recurrent eg. Manpower, Training and Development
Non-recurrent eg. IT, equipment, Training and Development
What support has been gained from other Services/Specialities/CMGs/Trusts? (NB Only applicable when extended role function occurs within multi-disciplinary team based service)
Are any other Trust's undertaking the proposed extended role? YES / NO. If YES give details
Current stance of professional body(ies) for the proposed extended role
Post implementation audit plans of extended role. (NB Include audit methodology and tools/checklists)
Revalidation process and Review date.
A relevant policy, guidelines, procedure, standard operating procedure (SOP), Patient Group Directive (PGD), Clinical Management Guideline (CMG) or LocSSIPs for the extended role should be attached as an appendix to this application. (NB. Needs to include stages of role, indications, exceptions, complications and management of complications)
Training requirements and assessment of competency
(NB. Needs to include learning outcomes, assessment of practical skills, observed practical identified (No.), supervised practices identified (No.), number of practices which need to be undertaken within a stated time frame to maintain competence, level of skill, mechanics of updating skills identified.)

**Extended Scope of Practice Roles
Individual Application Form**

Name: _____

Post: _____

PIN/Registration No.: _____

Extended Role(s) to be undertaken: _____

Self declaration

I have completed training and development, and relevant competencies to enable me to undertake the extended scope of practice role(s) competently, safely and in line with policy/guidelines and legislation.

I will maintain up-to-date knowledge and skills through CPD, and undertake the extended scope of practice role often enough to maintain my confidence and competence

Signed Applicant: _____ Date: _____

To be completed by Lead Clinician / Supervisor or Consultant

I confirm that the above applicant has the skills and knowledge required to enable them to undertake the extended scope of practice role.

Lead Clinician name: _____

Lead Clinician signature: _____ Date: _____

Competency Assessor name: _____

Competency Assessor signature: _____ Date: _____

To be completed by Head of Service / General Manager

I confirm that the above applicant has the skills and knowledge required to enable them to undertake the Extended Scope of Practice Role

Head of Service / General Manager name: _____

Head of Service / General Manager signature _____ Date: _____

This review should be undertaken as part of the annual appraisal process

Name: _____

Post: _____

PIN/Registration No.: _____

Extended Role(s)
undertaken: _____

Cells below will expand to accept text

Has there been any change in practice since last review? Yes/No
If yes, please give details
Have there been any factors impacting on your extended role since the last review?
Activity – comments / details of activity levels
Evaluation of Role / Service – details of any audits/research/publications/presentations
Risk – details of any complaints / incidents
CPD Evidence

Any identified training needs in relation to your extended scope of practice role, should be recorded in your Personal Development Plan (PDP)

Self-declaration		
I undertake the extended scope of practice role often enough to maintain my confidence and competence		
I maintain up-to-date knowledge and skills through CPD, to enable me to undertake the extended scope of practice role(s) competently, safely and in line with policy/guidelines and legislation		
Signature	Print	Date

To be completed by Clinical Lead/Supervisor or Consultant		
I confirm that the extended scope of practice role is undertaken safely and in line with relevant policy/guidelines		
I confirm that the extended scope of practice role is still required as part of the service		
Signature	Print	Date

To be completed by Head of Service / General Manager		
I confirm that the extended scope of practice role is still required as part of the service		
Signature	Print	Date

Original to be kept in individual's personal file
 Copy to be kept by individual for CPD evidence