

Registered Health Practitioner Initiated Radiology Referrals Policy

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Purpose

This policy recognises the evolving role of health practitioners in the provision of healthcare at Canterbury DHB and the associated need for them, in approved circumstances, to be able to complete radiology referrals for imaging or simple imaging guided procedures in order to expedite the clinical assessment and management of patients.

Safety and quality of care provided to patients is paramount. This policy is intended to ensure that Canterbury DHB policies and practices are safe and compliant with the Radiation Safety Act 2016 and that registered health staff are:

- Working within the requirements of their scope of practice.
- Referring only in approved clinical circumstances, and with the knowledge and support of their service and Canterbury DHB Radiology.
- Aware of the patient safety, administrative and regulatory requirements involved in this process.

Policy

A registered Health Practitioner may only initiate radiology referrals at Canterbury DHB if:

- They are a registered Midwife who is permitted to refer for and take responsibility for obstetric ultrasound reports under their scope of practice as defined by the HPCAA *and* the Director of Midwifery has authorised them to refer for obstetric ultrasound at Canterbury DHB

or

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- They are a Nurse Practitioner (NP) or Registered Medical Officer employed by Canterbury DHB who is permitted to take responsibility for referrals as defined by the HPCAA
- or
- They are a Registered Health Practitioner employed by Canterbury DHB whose service has in place a Registered Health Practitioner initiated radiology agreement that has been approved by Canterbury DHB Radiology. The Agreement must define the clinical circumstances under which they can refer, and the scope of what they can refer for.
 - The Registered Health Practitioners and their associated services are primarily responsible for ensuring strict compliance with the agreed scope of practice, and are wholly responsible for ensuring processes are in place to follow-up on referrals and act on any abnormal reports. They are also responsible for ensuring the appropriateness, accuracy and quality of referrals. Expanding the scope of other Registered Health Practitioners to encompass referring for Radiology is not expected to increase the expectations of, or transfer any additional responsibility to the Radiology service or its staff.

Scope

Midwives (authorised by the Director of Midwifery)

Nurse Practitioners (authorised by the Director of Nursing)

Registered Nurses (authorised by the Director of Nursing)

Allied Health Staff (authorised by the Director of Allied Health)

Clinical Directors or Chiefs of referring services, SMOs, RMOs

Chief of Radiology

Radiologists

Medical Radiation Technologist staff

Radiology Nursing Staff

Associated documents

- Service specific, Canterbury DHB Radiology Agreement
- Radiation Safety Act 2016
- Health Practitioner Competency Assurance Act
- Registered Health Practitioner Initiated Radiology Referrals Procedure

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Roles and Responsibilities

Applicant(s) seeking approval to refer to Radiology must

- Clearly articulate the clinical circumstances under which they can refer, the scope of what they can refer for, and the relevance of radiology referral and results to their scope of practice.
- Successfully complete the Canterbury DHB Health Practitioner Initiated Radiology training package. This can be accessed via the CDHB online learning site.
- Participate actively in the audit of referrals as part of annual performance reviews.

The Radiology Service will

- Maintain a register of approved service agreements for radiology referral privileges. This register is to be available on line via the Radiology intranet site for the purposes of audit and information.
- Only authorise Information Services to enable electronic orders and sign off for Medical Officers, Nurse Practitioners, Midwives and other Health Practitioners who have a completed current service agreement in place and whose Professional Leader has requested they have access.

The Professional Leader of Health Practitioners seeking to refer for Radiology is responsible for

- When an applicant is not a Medical Officer, Nurse Practitioner or Midwife with a current practising certificate the CDHB professional lead, or delegate, approving the application as being within the professional scope and knowledge of the applicant.
- Once a scope of access has been approved, for requesting/authorising, contact Information Services to enable individual Health Practitioner access to electronic orders for Radiology.

Referring clinical services are responsible for:

- Ensuring that an agreement approved by Canterbury DHB Radiology is in place before any Health Practitioner in their service commences referring.
- Ensuring that their Health Practitioners complete all necessary training,
- Ensuring strict compliance with the agreed scope of practice. If circumstances change and the scope needs to be expanded then an updated policy should be submitted to Canterbury DHB Radiology for review.
- Ensuring appropriate, accurate, quality referrals are completed by their Health Practitioners.

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- Ensuring clear guidelines are in place so that the Health Practitioner referring for Radiology knows which senior medical officer or team to identify as responsible for the results.
- Ensuring processes are in place to follow-up on referrals and act on any abnormal reports.

Measurement or evaluation

Audit of the approved clinical area and clinicians will be the responsibility of the clinical area.

Policy Owner	Chief of Radiology
Policy Authoriser	Chief of Radiology
Date of Authorisation	13/7/2017

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