

Expanded Practice Protocol for Registered Nurses to Refer Patients for Renal Ultrasound Scans (USS)

CATEGORY:	Procedural Document
CLASSIFICATION:	Clinical
PURPOSE	The purpose of this expanded practice protocol is to support registered nurses to refer patients for renal ultrasound scans.
Controlled Document Number:	992
Version Number:	1
Controlled Document Sponsor:	Executive Chief Nurse
Controlled Document Lead:	Advanced Practitioner in Renal Transplantation Urology Advanced Practitioner
Approved By:	Executive Chief Nurse Executive Medical Director (or nominated deputy) Group Manager Imaging Associate Director of Nursing, Div. B Associate Director of Nursing, Div. D Clinical Service Lead, Nephrology Clinical Service Lead, Urology Matron, Nephrology Matron, Urology
On:	1 st March 2017
Review Date:	1 st February 2018
Distribution:	
• Essential Reading for:	All registered nurses who currently refer patients for renal ultrasound scans and registered nurses who wish to expand their practice to include this skill.
• Information for:	All registered clinical staff involved in the management of patients, who require a renal USS.

EVIDENCE FOR PRACTICE

The Royal College of Nursing (RCN) produced a cross-professional guidance document regarding clinical imaging referrals from non-medically qualified professionals (Aston et al, 2008). It was anticipated that this would enhance the safety and delivery of patient services. Developing the registered nurse's role also has a positive impact on patient care, and levels of job satisfaction are higher among post holders (RCN, 2005).

A review of the literature shows support for registered nurses' ability to appropriately refer for diagnostic imaging and highlights the positive impact this skill can have on patient management (Free et al 2009, Puckeridge et al 2010).

In particular these studies suggest that enabling registered nurses to refer selected groups of patients for imaging tests will:

- Reduce waiting times for patients
- Ensure appropriate care delivery
- Provide a holistic approach to patient care.

For the purpose of this protocol, where the term registered nurse is used; this applies to advanced practitioners in renal transplantation, trainee advanced practitioners in renal transplantation, advanced practitioners in urology, clinical nurse specialists in urology and registered nurses working within the urology specialist nursing team.

The expanded practice protocol supports registered nurses referring patients for renal USS. Enabling registered nurses to refer for renal USS facilitates continuity of care, with the patient being referred by the actual practitioner that has reviewed them in clinic and has assessed that a renal USS scan is required. This avoids delays in the time to referral, helping to ensure timely diagnosis and clinical management of the patient. Prompt referral for renal USS is also an essential part of ensuring patients on suspected urological cancer pathways meet the relevant national targets. Following referral, the registered nurse must ensure that there is a process in place for the full USS report to be reviewed by a competent practitioner and appropriate actions taken. The USS reports of patients referred following assessment in haematuria clinic, must be reviewed by medical staff at the patient's second clinic visit. Otherwise, where competent, the registered nurse making the referral may review the report; if not competent, the report must be reviewed by the appropriate medical staff.

CONSENT

Although formal written consent is not required for minor procedures, verbal consent for referral for renal USS by a registered nurse must be obtained where possible and this must be recorded in the patient's records. For further information regarding consent and mental capacity please refer to the following documents:

- Department of Health Reference Guide to Consent for Examination or Treatment (2009).
- The Trust's Policy and Procedural document for consent to examination or treatment (current version).
- *Mental Capacity Act (2005)*.

INDICATIONS

All referrals must be made only for patients who fit the agreed department criteria as indicated in appendices 3a-c.

The signature of the registered nurse requesting the renal USS must appear on the approved specimen signatory list held in the appropriate imaging department.

CONTRAINDICATIONS

1. The patient has capacity and does not give consent for referral for renal USS by the registered nurse.
2. The patient prefers to be seen by a member of the medical team.
3. The patient is under 16 years of age.

LIMITATIONS TO PRACTICE

If the patient is medically unstable or the registered nurse is concerned about the patient's condition they must refer the patient to the appropriate medical practitioner for advice on any further action to be taken, and this must be recorded in the patient's records.

If the registered nurse is not competent to or able to review the renal USS report in a timely manner, they must ensure that there is a process in place for timely review of the report by medical staff or a competent practitioner. This includes:

- Direct referral to medical staff by the registered nurse
- Review at a multi-disciplinary team meeting
- An established process in place for the report to be reviewed by medical staff as part of the patient's suspected cancer pathway.

The USS reports of patients referred following assessment by registered nurses in haematuria clinic, must be reviewed by medical staff at the patients' second clinic visit.

CRITERIA FOR COMPETENCE

1. The registered nurse must have undertaken education and training and completed any relevant role specific competencies as recognised by the relevant Matron.

2. Evidence of satisfactory supervised practice must be provided by the registered nurse as witnessed by a practitioner who is already competent in referral of patients for renal USS (Appendix 1).
3. The number of supervised practices required to achieve competence will be determined by the registered nurse and their supervisor taking into account the registered nurse's own learning needs.
4. Evidence of competence must be provided and a copy kept in the registered nurse's personal file and in the department where the skill is practised (Appendix 2). In addition, a copy must be taken to the Imaging Department (who will arrange PICS referral privileges).
5. Registered nurses new to the Trust, who have been performing the skill elsewhere, must read, understand and be signed off against this protocol. Evidence of appropriate education and competence must be provided and checked by their line manager before undertaking this expanded practice at the Trust. The decision as to whether the registered nurse needs to complete Trust training will be at the discretion of the registered nurse's line manager.
6. In accordance with codes of professional practice, registered nurses have a responsibility to recognise, and to work within, the limits of their competence. In addition, registered nurses have a responsibility to practise within the boundaries of the current evidence based practice and in line with up to date Trust and national policies and procedural documents. Evidence of continuing professional development and maintenance of skill level will be required and confirmed at the registered nurse's annual appraisal by their line manager.

A list of registered nurses competent to perform this skill must be kept by their line manager and within Imaging.

PROTOCOL AND SKILLS AUDIT

The controlled document leads will lead the audit of the protocol with support from the Practice Development Team. The audit will be undertaken in accordance with the review date and will include:

- Adherence to the protocol
- Any untoward incidents or complaints
- Number of registered nurses competent to refer patients for renal USS
- Number of registered nurses listed in imaging as being able to refer.

All audits will be logged with the Risk and Compliance Unit.

CLINICAL INCIDENT REPORTING AND MANAGEMENT

Any untoward incidents and near misses must be reported via the Trust incident reporting system, and where required escalated to the appropriate

management team. In addition, the Risk and Compliance Unit must be notified by telephone of any Serious Incidents (SI).

REFERENCES

Aston J, Murray M, Freeman C, Coats M, Wadsworth R, Jackson S, Rote S, Adam J, (2008). **Clinical imaging requests for non-medically qualified referrers**. Royal College Of Nursing, London.

Department of Health (2000) **The NHS Plan: A Plan for Investment, a Plan for Reform**. Department of Health. London.

Free B, Lee GA, Bystrzcki, A (2009) Literature review of studies on the effectiveness of nurses ability to order and interpret X rays. **Australasian Emergency Nursing Journal**. 12(1), 8-15.

Mental Capacity Act 2005,
<http://www.legislation.gov.uk/ukpga/2005/9/contents>
[accessed 08.04.16]

Nursing and Midwifery Council. (2015). The Code: Professional standards of practice and behaviour for nurses and midwives. Nursing and Midwifery Council, London. <https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf> [accessed 05.04.16].

Puckeridge, D; Higgins, M; Hutton A. (2010) Nurse-initiated x-rays: a leap forward for children and nurses. **Neonatal, Paediatric and amp; Child health Nursing** 13(1), 7-12.

Royal College of Nursing (2005) **Maxi nurses: nurses working in advanced and extended roles promoting and developing patient-centred health care**. Royal College of Nursing, London.
http://www2.rcn.org.uk/_data/assets/pdf_file/0007/194713/maxi_nurses_advanced.pdf [accessed 08.04.16]

University Hospitals Birmingham NHS Foundation Trust (current version)
Policy for consent to examination or treatment, University Hospitals Birmingham NHS Foundation Trust
http://uhbpolicies/Microsites/Policies_Procedures/consent-to-examination-or-treatment.htm
[accessed 05.04.16]

University Hospitals Birmingham NHS Foundation Trust (current version)
Procedure for consent to examination or treatment. University Hospitals Birmingham NHS Foundation Trust
http://uhbpolicies/Microsites/Policies_Procedures/consent-to-examination-or-treatment.htm
[accessed 05.04.16]

University Hospitals Birmingham NHS Foundation Trust (current version)
Working with carers: common core principles, University Hospitals
Birmingham NHS Foundation Trust
<http://uhbhome/working-with-carers-common-core-principles.htm>
[accessed 05.04.16]

University Hospitals Birmingham NHS Foundation Trust (current version)
**Expanded Practice Protocol for a uro-oncology nurse specialist led
review clinic for the management of renal cell carcinoma patients with
low risk disease.** University Hospitals Birmingham NHS Foundation Trust.
<http://uhbpolicies/assets/EppUroOncologyNurseRenalCellCarcinoma.pdf>
[accessed 13.05.16].

PROTOCOL SUBMISSION DETAILS

Protocol reviewed by:

Jill McCready	Advance Practitioner in Renal Transplantation
Michelle Miletic	Urology Advanced Practitioner
Richard Borrows	Consultant Nephrologist
Kesavapilla Subramonian	Consultant Urologist
Tina Jones	Operations Manager – Medical Physics
Clair Powell	Senior Radiographer
Liesel Thompson	Practice Development Nurse
Belinda Chambers	Practice Development Nurse

Protocol submitted to and approved by:


Executive Chief Nurse


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Date:

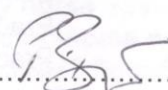
01/03/2017
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Executive Medical Director
(or nominated deputy)


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Date:


Group Manager Imaging


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Date:

13.10.2016
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Associate Director of Nursing, Division B


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Date:

13.2.17
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Associate Director of Nursing, Division B


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Date:

20/2/17
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Clinical Service Lead, Urology


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Date:

21/1/17
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Clinical Service Lead, Nephrology


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Date:

30/12/16
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Matron, Urology


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Date:

03/02/17
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Matron, Nephrology


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Date:

07/01/2017
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EVIDENCE OF SUPERVISED PRACTICE

To become a competent practitioner, it is the responsibility of each registered nurse to undertake supervised practice in order to refer patients for renal ultrasound scans, in a safe and skilled manner.

Name of Registered nurse:

DATE	DETAILS OF REFERRAL	SATISFACTORY STANDARD MET	COMMENTS	PRINT NAME, SIGNATURE & DESIGNATION
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		
		Yes / No		

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CRITERIA FOR COMPETENCE

END COMPETENCE: Referral of patients for renal ultrasound scanning (USS) by registered nurses.

Date(s) of Education and supervised practice:

Name of registered nurse:

Registration Number:

Clinical Area / Department:

Name of Supervisor:

Designation:

Element of Competence To Be Achieved	Date Achieved	Registered Nurse Sign	Supervisor Sign
Demonstrate knowledge of the <ul style="list-style-type: none"> • indications • contraindications • limitations to practice for the referral of patients for renal USS by registered nurses according to this expanded practice protocol.			
Demonstrate knowledge and understanding of the appropriate department referral criteria given in Appendix 3: ----- (insert title and letter of appropriate department referral criteria.)			
Demonstrate knowledge and understanding of the anatomy and physiology, clinical conditions, their medical and surgical treatment and potential complications relevant to the appropriate referral criteria in Appendix 3.			
Demonstrate accurate history taking before decision for Renal USS is made.			

Element of Competence To Be Achieved	Date Achieved	Registered Nurse Sign	Supervisor Sign
Accurately identify patients who require Renal USS.			
Demonstrate knowledge and understanding of what information is required on the referral form, and the rationale behind it.			
Demonstrate correct completion of a Renal USS referral form and / or request via PICS.			
Discuss the legal and professional aspects associated with registered nurses referring for renal USS.			
Demonstrate provision of accurate and correct information / education to patients, in a way that the patient understands.			
Demonstrate involvement of the patient and their families/carers, in decision making about their care and treatment.			
Demonstrate application of the Trust Principles for Carers.			
Demonstrate ability to answer patient's/carer's questions or to refer on to an appropriate source of information.			
Demonstrates an understanding of the importance of timely review of the full USS report by a competent practitioner and the actions required/pathways in place to ensure this happens.			
(If applicable) Demonstrates competence in the timely review of the full USS report, ensuring appropriate actions are taken and documented.			
Demonstrate a working knowledge of the NMC Code: Professional Standards of Practice and Behaviour for Nurses and Midwives (2015).			
Demonstrate maintenance of the patient's privacy and dignity throughout the referral process.			
Demonstrate an understanding of the incident reporting process.			

Element of Competence To Be Achieved	Date Achieved	Registered Nurse Sign	Supervisor Sign
Demonstrate accurate record keeping in relation to assessment and management of care.			
Demonstrate the ability to check the patient's infection status on PICS and practise safe infection prevention and control practices throughout the referral process as appropriate, to include standard precautions.			
Discuss any health and safety issues in relation to this practice.			
Demonstrate a working knowledge of the Trust's policy and Department of Health's requirements for consent to examination or treatment.			
Demonstrate a working knowledge of the Mental Capacity Act.			
Discuss why it is important to audit this registered nurse led practice.			

I declare that I have expanded my knowledge and skills and undertake to practise with accountability for my decisions and actions. I have read and understood the Expanded Practice Protocol for the referral of patients for renal ultrasound scans by registered nurses.

Signature of Registered Nurse:

Print name:

Designation:

Date:

I declare that I have supervised this registered nurse and found her/him to be competent as judged by the above criteria.

Signature of Supervisor:

Print Name:.....

Date:

Designation:

A copy of this record must be placed in the Registered nurse's personal file, a copy must be stored in the clinical area by the line manager and a copy can be retained by the individual for their Professional Portfolio. In addition, a copy must be taken to the Imaging Department.

CRITERIA FOR RENAL ULTRA SOUND SCAN (USS) REFERRAL BY ADVANCED PRACTITIONERS/TRAINEE ADVANCED PRACTITIONERS IN RENAL TRANSPLANTATION	
Request	Referral Criteria
Renal Transplant USS	Patients post renal transplantation seen in follow-up clinic whose blood results (urea and creatinine) are elevated from their normal baseline but have normal drug levels. Patients are referred to assess for obstruction and/or hydronephrosis.

An Advanced Practitioner/Trainee Advanced Practitioner in Renal Transplantation may request the above examinations in accordance with the approved referral criteria above.

Clinical Service Lead, Nephrology

Clinical Service Lead, Imaging

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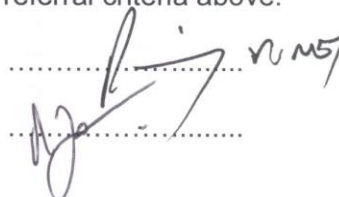


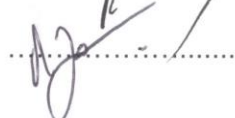

CRITERIA FOR RENAL ULTRA SOUND SCAN (USS) REFERRAL BY ADVANCED PRACTITIONERS (AP) IN UROLOGY AND CLINICAL NURSE SPECIALISTS (CNS) IN UROLOGY	
Request	Referral Criteria
Renal USS	<p>Patients under the care of a urology or uro-oncology consultant, meeting one of the following criteria:</p> <ol style="list-style-type: none"> 1. The patient has been assessed in the haematuria clinic and requires investigation for suspected cancer of the bladder or renal tract. The patient has not had a renal USS within the previous 4 months. 2. The patient has been reviewed in an AP or CNS led-clinic and has one of the following: <ul style="list-style-type: none"> • Visible or non-visible haematuria on urinalysis • Loin pain • Supra-pubic pain <p>Clinical assessment suggests suspected kidney or bladder stones or cancers of the bladder or renal tract.</p> 3. The patient has been reviewed in renal cell carcinoma clinic and requires renal USS to identify any changes or recurrence of cancer, in accordance with Expanded Practice Protocol for a uro-oncology nurse specialist led review clinic for the management of renal cell carcinoma patients with low risk disease (current version).

An Advanced Practitioner or Clinical Nurse Specialist in Urology may request the above examinations in accordance with the approved referral criteria above.

Clinical Service Lead, Urology

Clinical Service Lead, Imaging

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CRITERIA FOR RENAL ULTRA SOUND SCAN (USS) REFERRAL BY REGISTERED NURSES WORKING WITHIN THE UROLOGY SPECIALIST NURSING TEAM	
Request	Referral Criteria
Renal USS	Patients under the care of a urology or uro-oncology consultant and being assessed in the haematuria clinic. The patient has been assessed as requiring investigation for suspected cancer of the bladder or renal tract and has not had a renal USS within the previous 4 months.

An Registered Nurse working within the Urology Specialist Nursing Team may request the above examinations in accordance with the approved referral criteria above.

Clinical Service Lead, Urology

Clinical Service Lead, Imaging

