



Introducing New Clinical Procedures or Practices

This procedural document supersedes: CORP/RISK 3 v.6 – Introducing New Clinical Procedures or Practices.



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Date Revised	December 2017
Approved by (Committee/Group)	Policy Approval and Compliance Group on behalf of the Patient Safety Review Group
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Target audience:	Trust-wide

Amendment Form

Version	Date Issued	Brief Summary of Changes	Author
Version 7	11 December 2017	<ul style="list-style-type: none"> • DBTH Trust log inserted and name throughout. • Business support group (BSG) changed to Corporate Investment Group (CIG) • Training section adjusted to reflect all clinical staff groups 	Ray Cuschieri Lisette Caygill
Version 6	11 February 2015	<ul style="list-style-type: none"> • Care Groups reflected throughout. • Responsibility of PSRG to maintain a register of new procedures and to include in annual PSRG report. • Equality Impact Assessment section and form included. 	Deputy Medical Director and Head of Risk and Legal Services
Version 5	10 April 2014	<ul style="list-style-type: none"> • Minor changes to job titles. • Short review date given in light of proposed changes to the CSUs structure. 	Deputy Director of Nursing, Midwifery and Quality
Version 4	June 2011	<ul style="list-style-type: none"> • Title change. • Amend so applies to all 'clinicians', doctors, nurses, midwives and allied health professionals. 	Deputy Medical Director Deputy Director of Nursing
Version 3	December 2008	<ul style="list-style-type: none"> • New divisional structures and reporting mechanisms updated in line with organisational changes. 	Medical Director and Risk Manager

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1. INTRODUCTION

The Trust is keen to support appropriate innovation and the introduction of developments, in terms of medical technology and procedures. However, it is important that the introduction of such procedures is carried out in a recognised way and subject to monitoring in order to minimise clinical risk, from the patient's, practitioner's and Trust's point of view. This may also apply to procedures already done in the Trust but where a different group of clinicians is going to undertake them e.g. nurses doing endoscopies, radiographers doing x-ray interpretation.

For the purpose of this paper, the term clinician relates to all registered Health Professions including Medicine, Nursing, Midwifery, all Allied Health Professions and Scientists.

2. PROTOCOL

The following outline protocol is suggested:

1. Any health professional that wishes to introduce any new procedure, which goes beyond minor incremental changes or developments to their clinical practice, should raise it within their specialty initially. This should be raised for discussion within the Clinical Care Group at their Clinical Governance meetings.
2. Once agreed locally, it will be necessary to apply in writing to the Medical Director (as the Clinical Governance Lead for the Trust) and the application must be submitted on the pro-forma attached at **Appendix 1**. Once the application is received he/she may seek appropriate professional advice about the advisability of such a change in practice. The application will also be forwarded to the Director of People and Organisational Development and Director of Nursing, Midwifery and Allied Health Professionals for their consideration and advice.

The Medical Director will wish to be assured that appropriate basic training has been undertaken prior to carrying out any new procedures in the Trust. The professional's competency for such new work would also need to be verified before the Medical Director considered the request.

3. Agreement to the introduction of a new technique would then be formally sought from the Patient Safety Review Group (PSRG). The clinician applying to introduce the new procedure will be invited to present his/her application to the group and provide evidence as appropriate in advance in support of their application. The applicant will need to assure the PSRG, as a minimum, the following:
 - They are technically competent to carry out the procedure;
 - The new procedure is evidence based;
 - The training implications for other professions have been considered and accounted for e.g. nursing staff, theatre staff etc;
 - The provision of training for the introduction of new equipment;
 - The introduction of appropriate written 'Patient Information', which must

- cover the risk and benefits of the procedure;
 - Training programmes for junior staff in the consenting of patients for the new procedure;
 - The outline plans for audit and review of practice by an MDT.
4. In the case where a new group is going to undertake an established procedure, appropriate on-going supervision must be provided.
 5. Arrangements would be made to ensure that a review would be undertaken after a specified number of procedures had been performed.
 6. In the case of a professional who has been newly appointed to the Trust, the appropriate Care Group would require a list of any new procedures/skills the professional would be bringing to the Trust and evidence of competency for this work. The Care Group would then inform the Medical Director for the same checking process to apply as above.
 7. New procedures approved by Patient Safety Review Group (PSRG) will be entered on a central register by the PSRG administrator and included in the annual PSRG report

Colleagues are asked to liaise with the Medical Director at an early stage in considering the introduction of such procedures.

The foregoing is clearly in addition to any procedures required on the basis of ethical research approval, indemnification for alleged negligence as well as financial implications following the introduction of new procedures. A business case may have to be taken to the Clinical Investment Group (CIG) if the proposal has any increase or decrease in resources needed.

3. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment For All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. See **Appendix 2**.

4. TRAINING/SUPPORT

The training requirements of staff will be identified through a training needs analysis. Role specific education will be delivered by the service lead.

5. MONITORING

Patient Safety Review Group (PSRG) will review the Annual register in April of each year and ensure each new procedure has been reviewed as detailed in **Appendix 1**.

Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

APPENDIX 1

**PROTOCOL FOR INTRODUCING NEW
CLINICAL PROCEDURES OR PRACTICES**

Clinician Name.....	Clinical Grade.....
Details of New Procedure.....(Continue on separate sheet if required)	
Date approved by Care Group Clinical Governance group:	
Verification of Competence (to undertake procedure)	
Details of training or Qualifications attained.....	
Please attach details of training courses, copies of certificates of achievement in support of verification of competency	
Evidence Based Practice	
Please state briefly details of Evidence Based practice/research in support of application (e.g. NICE guidelines)	
.....(Please attach additional documents as required)	

Training Implications				
Have the training requirements for all staff groups supporting the introduction of the procedure been considered and where necessary training has/will be undertaken (Please attach details of training where appropriate)				
Nursing staff	Training required		Lead Manager	
Midwifery staff	Yes/No			
AHP's (Allied Healthcare Professionals)	Yes/No			
Medical staff	Yes/No			
	Yes/No			
	Yes/No			
Medical Equipment				
Please give details of any equipment for which the user will need training to ensure that they are competent to use it, which may be utilised as part of the new procedure outlined above. (Please attach additional information as required)				
Equipment Name	Training required	Staff Group	Training Package Developed	Lead Person for training
	Yes/No		Yes/No	
	Yes/No		Yes/No	
	Yes/No		Yes/No	

APPENDIX 2 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/ Strategy	Care Group/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
CORP/RISK 3 v.7 – Introducing New Clinical Procedures or Practices	Medical Director	Lisette Caygill	Existing Policy	5/12/17
1) Who is responsible for this policy? Deputy Medical Director and Head of Risk and Legal				
2) Describe the purpose of the service / function / policy / project/ strategy? To ensure new clinical procedures are introduced in a controlled and monitored way				
3) Are there any associated objectives? Legislation, targets national expectation, standards				
4) What factors contribute or detract from achieving intended outcomes? – none				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Details: [see Equality Impact Assessment Guidance] - no				
<ul style="list-style-type: none"> If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] – N/A 				
6) Is there any scope for new measures which would promote equality? [any actions to be taken] no				
7) Are any of the following groups adversely affected by the policy? no				
Protected Characteristics	Affected?	Impact		
a) Age	No			
b) Disability	No			
c) Gender	No			
d) Gender Reassignment	No			
e) Marriage/Civil Partnership	No			
f) Maternity/Pregnancy	No			
g) Race	No			
h) Religion/Belief	No			
i) Sexual Orientation	No			
8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<i>*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form in Appendix 4</i>				
Date for next review: December 2020				
Checked by: R Cuschieri		Date: 5/12/17		