

DELEGATION OF DUTY POLICY

The OHC&AT Board of Directors has agreed this Policy and as such, it applies across the organisation – 29th June 2018.

Jay Mercer
Chair of OHCAT Board



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Chair of OHC Board



Delegation of Duty Policy

INTRODUCTION

Orchard Hill College and Academy Trust (OHC&AT) is committed to providing outstanding educational opportunities for all our pupils and students. As part of this commitment, our specialist provision offers tailored healthcare support including therapies and nursing for children and young people with additional learning needs. Healthcare teams include a range of registered professionals, Health Care Assistants (HCAs), Health Learning Assistants (HLAs), Assistant Practitioners (APs), nursing and therapy Learning Support Assistants (LSAs) and students. It is vital that every member of staff involved in delivering healthcare is clear about their own level of accountability and that registered staff are confident when delegating tasks to their colleagues.

This policy sets the standard of expected performance for staff employed by OHC&AT working to deliver the programmes designed by registered healthcare staff, and is for use alongside local developed competency frameworks. This policy sets out the OHC&AT framework to support safe delegation and supervision of healthcare activities to all staff.

Please note that all references to OHC&AT include both Orchard Hill College (OHC) and Orchard Hill College Academy Trust (OHCAT) as employers, unless otherwise specified.

DEFINITIONS

Skilled Not Registered Staff (SNR)

For the purposes of this policy, the term SNR describes the support worker who has a role or task delegated to them.

Registered Practitioner (RP)

A practitioner who is registered with a recognised professional body i.e. the Health Professions Council (HPC), the Nursing and Midwifery Council (NMC) etc.

AIMS AND OBJECTIVES

This policy provides a framework for OHC&AT staff who are engaged in the delivery of health and social care to work collaboratively on tasks proposed for delegation, to ensure that pupils and students receive safe and effective care from the most appropriate person.

The aim of this policy is to enable each discipline to learn from the experience of others. It prevents duplication and promotes a shared approach to support the delivery of health and social care by multidisciplinary teams.

SCOPE

This policy applies to all RPs and SNRs employed by OHC&AT who within the course of their work are required to delegate and undertake tasks within the course of their employment.

OHC&AT recognises that there are many potential duties for delegation. There is no set list defined by OHC&AT; any delegated duty will be considered to be within the remit of this policy.

UNDERSTANDING DELEGATION AND COMPETENCE

In the context of this policy, delegation is the process by which a registered practitioner can allocate work to a SNR worker who has been assessed and deemed competent to undertake that task. This worker then carries the responsibility for that task. In this process the RP retains professional accountability.

Principles of delegation

The RP must ensure that delegation is appropriate and apply the following principles:

- The primary motivation for delegation is to serve the interests of our pupils and students.
- The RP undertakes appropriate assessment, planning, implementation and evaluation of the delegated task.
- Every delegation has to be safe; the primary motivation for delegation should be to meet the health and social care needs of the pupil or student. Where required, appropriate risk assessments will be undertaken and documented.
- Related documentation will be held in the pupil or student's clinical record.
- The RP is responsible for the pupil or student's involvement in the assessment of care and for developing a personalised care plan.
- The person to whom the task is delegated must have the appropriate role/level of experience and competence and confidence to carry it out.
- The SNR must undertake training to ensure competency in carrying out any tasks required. Line Managers will ensure that the necessary training is provided, including competency assessment, with updates provided at intervals defined by policy or the individual's needs.
- The task to be delegated is discussed and the SNR worker can carry out the delegated work/task once they and the RP are both confident in the SNR's ability to do so.
- The level of supervision and feedback provided is appropriate to the task being delegated. This will be based on the recorded knowledge and competence of the SNR worker, the needs of the patient/service user, the service area setting and the tasks assigned.

- In multidisciplinary team settings, supervision arrangements will vary and depend on the number of professional disciplines in the team and the line management structures of the RPs.
- Individual teams must ensure there are well defined lines of accountability and SNR workers understand their level of accountability.
- The SNR worker shares responsibility for raising any issues in supervision and requesting additional information and support.
- The SNR worker will be expected to make decisions within the context of a set of goals/care plan which has been agreed with the pupil or student and the care team.
- The SNR worker must be aware of the extent of their expertise at all times and seek support when appropriate, to ensure they continue to work within their scope of expertise.
- All clinical records are completed within OHC&AT policy and professional standards requirements.

ACCOUNTABILITY

OHC&AT is accountable to both the criminal and civil courts to ensure that its activities conform to legal requirements. OHC&AT staff are accountable to the organisation to work within the requirements of their contract of employment. RPs are also accountable to regulatory and professional bodies in terms of standards of practice and care.

The law imposes a duty of care on practitioners, whether they are Health Care Assistants (HCAs), Allied Health Professionals (AHPs), students, Registered Nurses, Doctors or others, when it is “reasonably foreseeable” that they might cause harm to patients through their actions or their failure to act (Cox, 2010).

When delegating work to others, RPs have a legal responsibility to have determined the knowledge and skill level required to perform the delegated task. The RP is accountable for delegating the task and the SNR is accountable for accepting the delegated task, as well as being responsible for their own actions in carrying it out.

The RP must delegate to the SNR on a named pupil/student basis, and all actions must be reflected in the records/care plans/competency assessments. **At no point should generic delegation of duty be taken.** All pupil/student care and subsequent decision making should be made on a case by case basis dependent on the individual’s needs.

Employers accept ‘vicarious liability’ for their employees. This means that provided that the employee is working within their sphere of competence and in connection with their employment, the employer is also accountable for their actions.

What is competence?

There are two key questions to be answered when considering delegation of activities:

1. Does the RP view the SNR worker as competent to carry out the task?
2. Does the SNR worker feel competent to perform the task?

Competence is an individual's ability to effectively apply knowledge, understanding, skills and values within a designated scope of practice. It is evidenced in practice by the effective performance and understanding of the specific role and its related responsibilities. Competence also involves individuals in critical reflection about, and modification of, their practice. Capability is a step further than competence and relates to the individual's full range of potential which may go beyond their current scope of practice.

The following table clarifies the related terms and their meanings:

Term	Basic meaning
Competence	General, overall capacity; holistic; rests on consensus view of what forms good practice
Competency	Specific ability that makes up competence
Competencies	Abilities to undertake specific tasks that relate to specific ability
Capability	Potential competence
Performance	Competence in action

RESPONSIBILITIES

Managers

To ensure the safe and effective implementation and ongoing use of this policy, managers must ensure that:

- Staff are in a position to act in line with the contents of this policy and related documents.
- All staff have received appropriate training and maintain continuing professional development (this includes both RPs and SNRs).
- Staff are compliant with requirements identified with this and other related policies.
- Managers must ensure RPs who are registered with the HCPC or the NMC meet the required accountable standards.

Registered Practitioners

Registered practitioners are expected to:

- Understand and comply with their professional code of practice.
- Ensure that, having read and understood this policy, they are in a position to work in accordance with this policy.
- Report any breach of this policy in a timely and appropriate way and ensure incidents are logged via the relevant recording system.
- Prioritise the safety and wellbeing of pupils and students at all times.
- Ensure that clinical notes are kept up to date and accurately reflect care that has been delegated.

- Ensure that each pupil/student has an up to date care plan in place that is reflective of the individual's needs.
- Ensure that SNR staff have successfully completed any related training and associated competency framework assessments.
- Seek advice and report to managers and/or accountable bodies as appropriate any situation where another organisation's policy appear to contradict or conflict with recognised codes of practice.

Staff Not Registered

SNR staff must:

- Ensure they understand and comply with this policy at all times.
- Ensure they understand the purpose and benefits of the task.
- Comply with the requirements to be adhered to as a delegated task.
- Report any associated incidents in a timely way using the relevant reporting system – failure to do so may lead to disciplinary action.
- Ensure that pupil/student notes are kept up to date and accurately reflect care that has been delivered.
- Attend all related training specific to the delegated duty.
- Complete the relevant competency assessment framework which has been signed off by the person delegating the duty.
- Seek supervision and/or advice for any tasks where they have concerns or are not confident, or where there is an unexpected response from the pupil or student.

TRAINING

OHC&AT will provide training and continuing professional development relevant to specific delegated duties, in order to meet the responsibilities identified in this policy.

It is an individual's responsibility to identify specific training requirements during their Performance Review process throughout the year.

POLICY REVIEW DETAILS

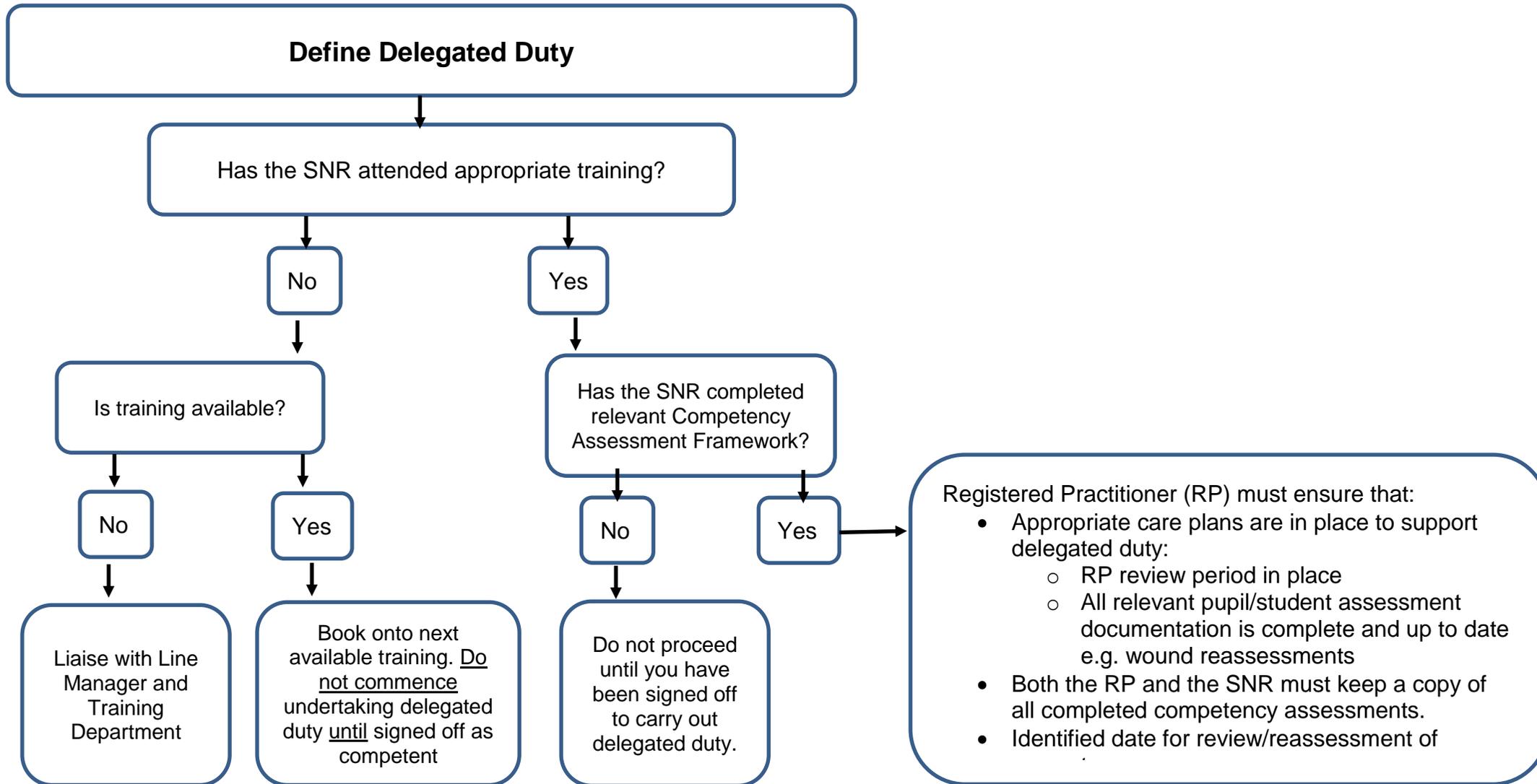
<i>Version:</i>	1.0
<i>Reviewer:</i>	Lisa Watkins, Shikara Rajballi
<i>Approval body:</i>	Family Board
<i>Date this version approved:</i>	29 th June 2018
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RELATED POLICIES AND PROCEDURES

Administration of Medication & Prescribed Substances in College Policy
Asthma Policy
Child Protection, Adult Protection & Safeguarding Policy

Health & Safety Policy
Intimate Care Policy
Mental Capacity & Consent Policy
Risk Assessment Policy
Staff Code of Conduct
Supporting Pupils in Schools with Medical Conditions Policy
Whistleblowing Policy

APPENDIX A: DELEGATED DUTY FLOW CHART



APPENDIX B: CHECKLIST OF REQUIREMENTS

	Actioned Y/N	Date	Comment	Signed
Defined remit of delegated task				
Local Area Governance / Line Manager agreement				
Have the requirements within this policy been adhered to?				
Are there current supporting guidelines for the delegated task? If not, should there be?				
Are there any training implications? If yes, consider contacting the Training Department				
If training is required, who will be able to deliver it?				
Are there funding considerations?				

APPENDIX C: NURSE DELEGATED DUTY CONSIDERATION

Must be a nurse <i>** if no nurse present ring 999</i>	Can be delegated with training and competency sign-off *always child-specific, and always with a completed a signed competency assessment	Can be delegated with training
Catheterisation (apart from female intermittent catheterisation)	Female intermittent catheterisation	Writing care plans (to be signed off by nurses)
Assessment and signing off competencies	Gastrostomy, jejunostomy and NG feeding	First aid at work (BLS)
Assessment of pupil/student	Tracheostomy care (external training)	Temperature check
Report writing	Suctioning – all	Choking management
Safeguarding – assessment where physical issue (SG lead should always been informed – see SG policy)	Oxygen therapy	Epipen
Development and updating of clinical protocols	Epilepsy rescue medication – specific training for individual medication	Asthma and inhalers
Naso-gastric tube insertion	SATs/HR/BP monitoring	Seizure management
Interpretation of weights and heights	Medication administration	Hoist weighing (Therapy)
Liaison with other medical related professionals around clinical issues	VNS	
All routine injections e.g. insulin	Training of staff (in-house or external)	
Respiratory and suctioning assessment, risk assessments, and obtaining required equipment (with Therapy)		
Obtaining baseline observations		
Pressure care		
** Where there is a lack of clarity or unclear level of risk	Diabetes management – BM checks	
** Where evolving clinical picture	Management of insulin pumps	
** Where condition not stable		
** Where a condition is changing rapidly		

** Escalation where student is unwell and there is concern from staff		
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This list is not exhaustive and may be changed due to changing student population and/or needs.

APPENDIX D : THERAPY DELEGATED DUTY CONSIDERATION

Must be a Therapist <i>If no SALT on site and there are eating and drinking concerns call 07917 108873</i> <i>If no Physio/OT onsite and there are manual handling concerns please call 07791 028144</i>	Can be delegated with training and competency sign-off *always student-specific, and always with a completed a signed competency assessment	Can be delegated with training
Manual handling assessment for personal care, postural management and mobility, and signing off competencies	Following manual handling for personal care, postural management and mobility guidelines (with competency signing off)	Mandatory Induction and refreshers as standard
Eating and Drinking and Oral intake management, and signing off competencies	Following eating and drinking guidelines (with competency signing off)	All eating and drinking training delivered by SaLTs
		Universal training in additional to bespoke training
Communication and AAC assessments		Following communication guidelines and using AAC as/when required by guidelines
Risk assessment and prescription of sensory equipment (student specific)	Following sensory guidelines and risk assessment	
Risk assessment of specialist equipment e.g toileting, specialist seating, standing frames, splints (student specific)	Following equipment guidelines and risk assessment	
LOLER checks	LOLER checks	
Clinical Music Therapy Sessions		
Respiratory assessment and chest physiotherapy, developing treatment plan and guidelines with nursing	Following chest physiotherapy and positioning guidelines	

Assessment of aquatic therapy for students with a physiotherapy clinical need, risk assessments and developing guidelines	Following aquatic therapy guidelines and programmes	
Assessment of pupil/student		
Report writing		
Safeguarding – assessment where physical issue (SG lead should always been informed – see SG policy)		
Development and updating of clinical protocols		
Referrals to community teams for therapy specific requirements		
		Hoist weighing (Therapy and Nursing)
Liaison with other medical related professionals around clinical issues		
** Where there is a lack of clarity or unclear level of risk		
** Where evolving clinical picture		
** Where condition not stable		
** Where a condition is changing rapidly		
** Escalation where student is unwell and there is concern from staff		

This list is not exhaustive and may be changed due to changing student population and/or needs.