

FAQS Orthoptist Support Workforce



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Clinical Practice

Can Clinical Assistants work alone with patients?

Clinical Assistants can work alone with patients.
Clinical Assistants should work with patients who have previously been assessed by a registered clinician or are a member of a specific patient group as determined by a clinical protocol. They must only complete tasks for which they have received appropriate training and education. Clinical Assistants may carry a case load of patients with non-complex needs and have previously been seen by a registered clinician.

Can Clinical Assistants work alone in clinical areas with no direct supervision?

Clinical Assistants can work unsupervised in clinical areas provided they have acquired the appropriate competency for the tasks they carry out and are working within protocols written and agreed by registered clinicians.

Can Clinical Assistants work in Community settings?

Clinical Assistants can work in community settings for example supporting community orthoptic clinics, glaucoma clinics or in school settings provided they have acquired the appropriate competency for the tasks they carry out and are working within protocols written and agreed by registered clinicians.

Can Clinical Assistants run educational sessions?

Clinical Assistants may contribute to the training and education of staff and students in respect of tasks and responsibilities within the scope of their practice. For example: Experienced Clinical Assistants may demonstrate their own work to newly appointed and trainee support staff or support the clinical experience of Orthoptic students by demonstrating use of technical equipment.

How do tasks get delegated to Clinical Assistant?

Clinical Assistants should work within agreed protocols, carrying out tasks for which they are competent, they should never be asked to work beyond their competency.

Do Clinical Assistants need competencies to work to?

For tasks which have been delegated by a registered professional and involve direct patient care, it is necessary to demonstrate adequate training and education has been provided to the Clinical Assistant. Written evidence of this is needed, whether that is in the form of a formal competence, or a documented supervisory session which details the training provided and competency achieved. Competencies can provide a step-by-step guide for a particular task which can be helpful when assessing an individual's capability against a standard. Therefore, in order to delegate appropriately, a written competence can be helpful in ensuring all steps are followed and make the process of delegation more straight forward.

What Clinical Assistant tasks need competencies?

Any task which has been delegated to the Clinical Assistant which requires training and involves direct patient care should be fully documented. Although not required, a written competence is good practice and a good demonstration of the Clinical Assistant's capability in a delegated task.

Can Clinical Assistants be on delegation logs for research studies?

Clinical Assistants can be involved in research studies. They can be listed on a delegation log provided the tasks they are performing in the research study satisfy the following:

- are part of their job role
- comply with their job description
- have received the correct training, including training specifically to do with the research study
- are competent to undertake the tasks.

Clinical Assistants can provide an invaluable contribution to research studies and should be involved in all aspects which are relevant to their role.

Can Clinical Assistants gain consent from patients for research studies?

Clinical Assistants may be able to manage the consent process for patients entering research trials. This will need to be assessed on a trial by trial basis. The Clinical Assistant will need to complete the Good Clinical Practice (GCP) training and Consent Training in order to undertake this role.

Are Clinical Assistants able to participate in national audits?

If the audit task is within the Clinical Assistants scope of practice, they should be able to participate within a national audit, for example: National Vision screening Audit.

Are Clinical Assistants able to lead on service improvement projects?

Clinical Assistants may be expected to lead on specific service improvement projects within their scope of practice, for example: Developing a telephone reminder system to support patients with a poor attendance record.

Leadership, Education and Training

Can the Support Workforce assist with the support of pre-registration students on placement?

Yes, Clinical Assistants can demonstrate technical equipment to Orthoptic students on placement.

Can Clinical Assistants mentor/buddy students?

Clinical Assistants who have good knowledge of the department and support systems in place for students are well placed to be mentors/buddies.

It is <u>advisable</u> that the Clinical assistant undertakes the practice-based learning on offer from the provider university to ensure they hold the knowledge of what is expected from the students whilst on placement.

Are Clinical Assistants able to line manage junior staff?

Clinical Assistants (Band 3) and Senior Clinical Assistants (Band 4) cannot have line management responsibility. Senior Clinical Assistants (Band 4) may give supervision and day to day allocation of work to junior staff. Lead Clinical Assistants (Band 5) will be expected to have line management responsibility for the support team.

How would a Band 5 Lead Clinical Assistant balance their clinical work with administrative and managerial duties?

In the same way registered orthoptists who also have management responsibilities, the postholder would have to be given appropriate time to complete all tasks and ideally have a job plan which recognises the breadth of responsibility.

Workforce

Do Clinical Assistants need a degree?

No, Band 3 Clinical Assistants will be expected to have gained qualifications and/or experience to level 3, Band 4 Clinical Assistants will be expected to have gained qualifications and/or experience to level 4. Band 5 Clinical Assistants will be expected to have gained qualifications and/or experience to level 4 and have additional training and experience in administrative and managerial processes.

What is the link between the Regulated Qualifications Framework (RQF) or Scottish Credit and Qualifications Framework (SCQF) and Agenda for Change pay banding?

There is not a direct link between the levels defined in the frameworks and Agenda for Change pay banding, however it is acknowledged that with increasing level of responsibility of role, there should be a corresponding increase in Agenda for Change (AfC) banding.

The frameworks can be used in conjunction with National job profiles to help match job roles to AfC banding. BIOS are aware of the lack of specific profiles for our Support Workforce and work is ongoing to have profiles produced, currently generic AHP and Health Science Services profiles maybe used.

We have long standing vacancies at Band 5, can non-registered staff be used to help address these shortages?

Clinical Assistants cannot be used as replacements for registered clinical professionals as they have not received the required training and do not hold the correct registration.

Clinical Assistants are an essential part of our workforce. Ensuring the workforce has the right skill mix to deliver efficient, timely and economical care is important. Clinical assistants can be utilised in many areas to support services, clinicians and, most importantly, patients.

Clinical Assistants must be used in roles appropriate to their own skill set and level of practice. The resources in the toolkit will help provide a guide to the level of practice which can be expected from a Clinical Assistant (Band 3) and Senior Clinical Assistant (Band 4).

What resources are available from the BIOS to support the development of the orthoptic support workforce?

A full list of the resources available for the Support Workforce can be found <u>here</u>.

What role do Band 2 staff have?

Band 2 staff can be utilised in the department in an administration and clerical role. It is not expected Band 2s will have a clinical role with patients. For more advice about role expectations, you can click here. You can find more information regarding job re-banding on the NHS Job Evaluation webpages here, under Chapter 3, Section 4 'Re-Evaluation of changed jobs'.





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