

Delegation of Healthcare Activities Policy

Policy implemented: April 2019
Last reviewed: January 2025
Next review due: January 2027

At Salutem our policies are regularly updated and reviewed. However, occasionally policies may be reviewed after the set next review date after some consultation and research. In these rare occasions, the out-of-date policy will remain **VALID** until it is reviewed by the policy sponsor.

1. Summary

This policy provides the process that Salutem Care and Education will apply to ensure that there is a clear, safe and effective pathway of delegation of clinical activity and tasks in its' locations between itself and the commissioning authorities. This policy is to be read in conjunction with the Delegation of Clinical Tasks Matrix.

2. Document Control

Initial purpose and scope of the new policy/procedure agreed by:	Chief Quality Officer
Sponsor Technical review carried out:	Group Head of Nursing and Clinical Practice
Final Information Governance quality check carried out:	Quality Assurance Inspection & Regulation Director
Date implemented:	January 2025
Version Number:	V4.0
Date of the next review:	January 2027
Department responsible:	Quality Team
Job Title of Lead Person:	Melinda Glover
Author / Main Contact, including their job title (if different from above):	Group Head of Nursing and Clinical Practice

In addition to this policy, local authorities and other commissioners may have their own policies, procedures and guidance which Services must comply with. These policies should complement this policy.

However, there may be additional requirements put in place by local authorities and other commissioners and these must be adhered to. Changes must not be made to Salutem's policies and procedures without corporate approval but, where needed, local procedures should be developed to accompany these.

EQUALITY AND DIVERSITY STATEMENT

The Salutem Group is committed to the fair treatment of all in line with the Equality Act 2010. An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any such factors and all will be treated with dignity and respect.

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This policy must be brought to the attention of all employees.

The controlled version of this policy and its associated documents are available on BLINK. Printed or downloaded copies are uncontrolled and may not be up to date.

4. Definitions

Healthcare clinical delegation is when a regulated and registered healthcare professional (a clinician), such as a doctor, nurse, occupational therapist, physiotherapist, dietician or speech and language therapist, delegates to support workers healthcare activities or clinical tasks related to an individual we support (IWS) at a Salutem location.

Delegation is the process by which the delegator allocates clinical or non-clinical treatment of care to a competent person. As the delegator they are accountable for their decision to delegate, and they remain accountable for the delegated task/activity.

5. Principles

A delegated healthcare activity may be a new activity/task or complement the existing package of care explicitly prescribed by the commissioning body to a Salutem location for which the prescriber will retain accountability for the outcome of the activity/task.

When delegating any aspect of care, it must be determined that the delegation is in the best interests of the young person/adult. The person who delegates the task is accountable for the appropriateness of the delegation and should determine whether the delegation is part of the young person/adult daily care or to be adopted in a business continuity situation.

The Care Act 2014 sets out that Social Care providers should engage in discussion with local commissioners before they carry out a delegated healthcare activity. The responsibility and accountability for all delegated clinical tasks remains with the commissioning body and their clinician (this would be the commissioning body clinician) who is delegating the task to Salutem staff.

Where it is the commissioning body requesting a delegation activity arrangement with Salutem; It is important that these tasks fall within contractual commissioning arrangements and agreed care package; service registration provisions, Salutem insurance limitations and within Salutem policy and procedures. This agreement between Salutem and its commissioning partner providers must be clear and in writing, specifically pertaining to whom delegation and accountability of the activity/task lies and what the delegated task is and entails. Where that is agreed, the particulars of the agreement should include frequency of training and assessments of competencies. Salutem should not undertake a delegated clinical task without an agreement in place. At the time of referral/preadmission stage the agreement of delegated healthcare

activity/task along with the training and competence assessment should be in place prior to admission of the IWS.

The commissioning body should advise their clinician that they are responsible as a delegator and that it is their responsibility to ensure that Saluitem staff are suitably trained and competent to carry out the activity/task. The healthcare professional should determine the level of knowledge and skills required by the Saluitem staff to undertake the delegated activity and whether the activity is being performed safely at the appropriate standard of performance. ***“It is important to work closely with providers and provider forums to agree arrangements for delivery of training, for approval of prior learning and for competency checking, including intervals”*** (Key Findings: *Delegated healthcare activities and the commissioning of adult social care. pg11. May-Dec 2022*).

A review of the training of staff must take place whenever there is a change in circumstances or where there is concern expressed about the ability of the member of staff to perform a specific task.

The level of supervision provided must be appropriate to the healthcare activity delegated and consideration of the following:

- complexity of the task
- competence of the care staff
- needs of the IWS
- setting in which the care is being given.

It is also important to note that care staff may choose not to perform the task if they do not feel competent to perform it. However, the Manager/Regional Director/Head/Principal needs to determine whether the delegated activity forms part of a key function in a job role as per job description or if it falls outside contractual obligations.

Some healthcare clinical tasks may be considered invasive or requiring clinical judgment. Such tasks are not considered as appropriate to delegate to Saluitem staff. Saluitem has guidelines noted in the *Delegated Clinical Tasks Schedule* to which tasks may be considered safe to perform following appropriate training and assessment of competence. All Saluitem staff must seek authorisation from the Chief Quality Officer if they are requested to perform tasks that are not listed on the Saluitem *Delegated Clinical Tasks Matrix* prior to any undertaking.

Some of the delegated healthcare tasks will require additional training and assessment of competence. In some cases, these may be available through SaluTem's Learning and Development Team (L&D). SaluTem requires that the Manager/Head/Principal checks with L&D team whether the training is available in the suite of training offered by SaluTem Care and Education. If this is not the case, the Manager/Head/Principal should seek to have this training delivered by the commissioning body who have delegated the healthcare activity before submitting a training request to L&D Team.

Delegated Clinical Matrix Summary

Tier 1

These are the tasks that fall within the normal range of care/support activities undertaken by SaluTem staff when they have received the appropriate training. Staff should evidence that they have received and understood the training and certification should be added onto the electronic training platform (*Your Hippo*). Support staff are not permitted to pass on any training they have received for these tasks to other staff unless they have been recognized as a trainer and assessor. Competence to complete these tasks must be re-assessed as agreed between SaluTem and the commissioning body.

Tier 2

These tasks may be delegated by a health professional from a commissioning body to SaluTem support/care workers. The tasks in this category are clinical tasks, which in appropriate circumstances, can be delegated to support/care staff. This category of clinical task delegation will require training and competence assessment specific to the young person/adult needs by the commissioner health care professional, who will assess SaluTem staff against a series of competencies. The health professional must provide written procedures for the SaluTem staff to follow and specify regular review dates.

Tier 3

These tasks are considered invasive or require clinical judgement and cannot be performed by SaluTem care/support staff. However, nurses that work at SaluTem if in agreement with commissioning bodies may undertake these tasks with the appropriate training provided. The Commissioning body will remain accountable for the delegation of the clinical activity.

6. Areas of Governance

This policy has been written with expert contribution from appropriate stakeholders. The Information Governance Team will monitor, reflect on and gain organisational learning from the implementation of this policy. This policy will be reviewed and updated two years from implementation unless legal changes demand a timelier amendment.

The application of this policy and its associated documents is mandatory for all services staff, volunteers, agency staff and all other Salutem representatives. Staff understanding of this policy and associated documents will be assured through training, assessment of competency and supervision.

Staff understanding of this policy will be assured through training and the delivery of awareness raising workshops as deemed necessary by SLT. The people we support will be involved in the review to ensure it captures the important issues for them.

7. Areas of Responsibility

Executive Board / Directors are responsible for ensuring the availability of resources to ensure the implementation of this policy, completion of training and systems to ratify, communicate and review this policy.

They ensure there are clear disciplinary and other measures for staff who do not adhere to this policy.

They ensure the policy is monitored and organisational learning is enabled by systems of data collection and analysis as appropriate.

Principals/Heads/Regional Directors/Registered Managers ensure that there are written and recorded agreements in place between Salutem and the location specific to the activity/task being delegated, its delivery, the frequency of training and competence assessments. They will ensure that their staff receive appropriate and specific training before engaging in any activity listed in Tier 1 to 3, that staff are assessed as competent, and that staff have refresher training as required and agreed.

They are to audit periodically to ensure policy has been embedded effectively.

If any exceptions to this procedure are required these must be discussed through line management processes and have the written agreement of the Divisional Director. These

should be escalated to the procedure author (delegator) for any required amendments to be made.

Managers/Heads, or their delegate must ensure that for each shift there are identified persons with responsibility for overseeing the delegated activities.

Individual Staff should ensure that they have undertaken training and understood what is expected of them and that they are up to date, and their competency assessments are signed off.

8. Learning and Development

Salutem is committed to ensuring that all staff are aware of what is expected of them so that everyone is appropriately supported. Staff should speak to their line manager in relation to their learning needs using supervision and through the appraisal process.

9. Associated Documents

- Supporting Health Needs Policy
- Delegation of Clinical Tasks Matrix
- Letter of agreement between Salutem and Prescribing Partner

10. Useful Links

[Governance toolkit delegated healthcare activities](#)

11. References

- Skills for Care
- Delegated healthcare activities and the commissioning of adult social care.
- Care Act 2014

12. Version Control

This is a controlled document. As a controlled document, any printed copies of this document, or saved onto local or network drives should be actively monitored to ensure the latest version is always available.

Version Number	Date	Status	Changes
V1.0	April 2019	Implemented	New policy
V2.0	November 2022	Revisions	Adjustments throughout
V3.0	July 2024	Revision	Adjustments
V4.0	January 2025	Revision	Prescriber Draft Letter