

UCD Site Declaration Form (May 2025)
Requirements for Nurse Authority to Refer for Radiological Procedures
Education Programme

All parts of this form must be completed in full. Completed form MUST be submitted to University College Dublin as part of the UCD application process. Incomplete forms will be returned and your application may not be considered.

To be completed by the applicant (please type details in Block Capitals)	
N.B. Please indicate your choice of <i>Nurse Authority to Refer for Radiological Procedures</i> education programme by ticking one of the following programme options: Adult Only <input type="checkbox"/> Children Only <input type="checkbox"/> Adult & Children <input type="checkbox"/>	
Surname as per Nursing and Midwifery Board of Ireland (NMBI) registration	
First name as per NMBI registration	
NMBI personal identification number (PIN)	
Clinical area/specialty in which you are currently employed	
Have you one year full time post registration experience?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you successfully completed a minimum National Framework of Qualifications level 8 module in health assessment and physical examination skills?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Director of Nursing/ Head Of Service/Service Manager/Designate	
Name and email address of Referring Site Co-ordinator (RSC)/link person/clinical facilitator/ or designate	Name:
	Email Address:
What is the intended programme commencement date?	September 20_____
If you are employed by the HSE or a HSE funded agency (Section 38) or the Irish Prison Service please indicate whether your HSE electronic funding application has been submitted and/or approved. Please note: UCD applications will not be processed if you have not submitted a HSE electronic funding application. UCD will not offer you a place on this programme until you provide evidence that HSE funding has been approved. No offer of a place will be made after the UCD application closing date.	Submitted Yes <input type="checkbox"/> No <input type="checkbox"/>
	Approved Yes <input type="checkbox"/> No <input type="checkbox"/>

Criteria for the Health Service ProviderThis section must be completed by Director of Nursing/ Head of Service Manager/Service Manager/Designate

Governance Arrangements	Yes	No	Comment/Evidence
Do you have in place local governance arrangements to oversee the introduction and implementation of Nurse Authority to Refer for Radiological Procedures?			
Do you have in place a firm commitment by the health service provider's senior management to support nurses to refer patients for radiological procedures?			
Do you have in place a named Referral Site Coordinator/link person/clinical facilitator delegated by the Director of Nursing Head of Service/Service Manager/Designate) who has responsible for this initiative locally and for liaising with the applicant/student, designated medical practitioner mentor and UCD programme director?			
Do you have clinical indemnity arrangements in place for nurse authority to refer for radiological procedures? (Please note the Clinical Indemnity Scheme managed by the State Claims Agency indemnifies employees of the HSE and HSE Funded Agencies (Section 38)).			
Have you committed to supporting the applicant to complete all aspects of the programme learning outcomes including attending lectures in person where possible?			
Have you identified a medical practitioner/mentor who has agreed to support the candidate for the duration of the education programme (i.e. September - December)?			
Risk Management	Yes	No	Comment/Evidence
Do you have a local 'Nurse Authority to Refer for Radiological Procedures' policy, procedure, protocol or guideline (PPPG)? Health service providers can adopt the HSE ONMSD (2025) <i>National Nurse Authority to Refer for Radiological Procedures Guideline</i> and develop addenda regarding local governance arrangements if they so wish			
Do you have risk management systems in place?			
If yes, is there a process for;			
• Reporting and monitoring of adverse event/incident			
• Reporting and monitoring of near misses			
• Reporting and monitoring of referral errors			
Do you have in place or are you planning to put in place an agreed schedule for routine audit of nurse/midwife referrals for radiological procedures?			
The Clinical Learning Environment	Yes	No	Comment/Evidence
Is the quality of the learning environment audited on an annual basis and is it currently fit for purpose?			
Do students and medical practitioner mentors have access to the programme learning outcomes, the NMBI referral for radiological procedure standards, the HSE national referral guidelines and local referral policy documents at the point of practice?			
Does the learning environment provide learning opportunities that reflect the programme learning outcomes?			
Does the student have access to iRefer guidelines at the point of practice?			
Are medical practitioner mentors and unit staff fully appraised and familiar with their role in relation to supporting student nurse referrers?			

Does the clinical learning environment provide appropriate assessment opportunities for students?			
Are there structures within which concerns around clinical practice are raised and addressed			
Do Referral Site Coordinators meet with students and the medical practitioner mentors on a regular basis?			

Signatures	
Name of Director of Nursing/ Head of Service/Service Manager/Designate: (Block Capitals)	
Work Location/Department:	
Contact telephone number:	
Work email address:	
Signature:	
NMBI Number (If relevant):	
Date:	
Name of Medical Practitioner/Mentor: (Block Capitals)	
Work Location/Department:	
Contact telephone number:	
Work email address:	
Signature:	
Medical Council Registration Number (MCRN):	
Date:	
Name of Head of Radiology (Consultant Radiologist): (Block Capitals)	
Work Location/Department:	
Contact telephone number:	
Work email address:	
Signature:	
Medical Council Registration Number (MCRN):	
Date:	
Applicants Signature:	
Date:	