A regional advanced clinical practice programme has been set up in the West Midlands to help clinical practitioners move into this new and demanding role.

A framework for advanced clinical practice

In this article...

- Why advanced clinical practitioners are important in the NHS
- Developing a standardised competency framework for ACPs
- Defining an education curriculum for the role

Authors

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Abstract


The NHS needs a skilled, knowledgeable workforce of advanced clinical practitioners, who require multidisciplinary approach to their postgraduate development. To meet these demands we set up a regional programme to help clinical practitioners move into these new and demanding roles. As a result, health professionals who want to progress their career and advance their practice have an opportunity in the West Midlands to qualify as advanced clinical practitioners.

National challenges faced by the NHS, including an ageing workforce, a rise in long-term conditions, recruitment difficulties and greater patient expectations require new models of healthcare provision and a flexible workforce. Building staff capacity includes developing new and advanced roles, and innovative attitudes toward the mix of skills in teams.

The Five Year Forward View (NHS England, 2015) identified a need for new models of care, greater patient empowerment, improved system leadership, a modernised workforce, accelerated innovation and improvements in quality of care and greater efficiency. The West Midlands region has identified its own workforce needs:

» The ability to work across patient pathways and with new models and frameworks of care (NHS England, 2015);
» Upskilling the existing workforce and looking at future workforce models that may require new roles;
» New and enhanced roles such as nursing associates, physician associates and models of advanced clinical practitioners (ACPs).

There is a national supply and skills shortage in the medical and non-medical workforce and ACPs are becoming increasingly important in maintaining services. The West Midlands is meeting this challenge by developing a multiprofessional ACP workforce. Our definition of an ACP is given in Box 1.

Although ACPs exist in the West Midlands, historically the roles have developed in an ad hoc way with little coordination and collaboration. The development and benefits of these roles in an emergency department are outlined in Box 2.

Regional advanced practice programme

We set up a regional advanced practice programme (RAPP), which brought together organisations from across the West Midlands region. These included higher education institutions (HEI) as well as those in acute care, mental health, and community and primary care to:
» Explore the role and education of ACPs;
» Discuss and agree core/specialist competencies and a curriculum.

The programme is sponsored and managed by University Hospitals Coventry and Warwickshire Trust and funded by Health Education England in the West Midlands.

5 key points

1. There is a national supply and skills shortage in both the medical and non-medical workforce
2. Advanced clinical practitioner roles are becoming increasingly important in maintaining services for patients
3. The advanced clinical practitioner role has not been clearly defined
4. A standardised curriculum will ensure consistency in the standards to which advanced clinical practitioners should adhere, no matter where they practise
5. A regional advanced practice programme can support practitioners who are moving into these demanding roles
The key issue for RAPP was to address the supply and skills shortages in the medical and non-medical workforce. We aim to support the development of a skilled, knowledgeable ACP workforce to do this and to enhance the capacity of the existing health workforce to ensure a high-quality service for patients, now and in the future. The core principles of the ACP role include:

- Autonomous practice;
- Critical thinking;
- Advanced levels of decision making and problem solving;
- Values-based care;
- Innovating practice;
- Management and leadership.

RAPP’s objectives were to:

- Scope the potential demand of trusts for ACP roles and current HEI provision of ACP education;
- Gain agreement across trusts and HEIs in the West Midlands for a standard competency framework to educate and train ACPs;
- Identify core and specialist competences for ACPs;
- Agree a timetable for commissioning an ACP curriculum once competencies had been decided on;
- Agree broad content and timetable of a toolkit for the deployment of ACPs.

Fig 1 outlines the planned outcomes of the programme.

**Developing the framework**

Work to develop the framework began in September 2014 and is continuing to embed roles, train and develop ACPs for long-term sustainability. At the beginning of the process a communication strategy was developed, including networking meetings and involvement with key local and national stakeholders. This provided contact with existing ACPs from a range of specialities, allowed sharing of information and promoted engagement with the project.

We used three key sources of data to establish a regional baseline on ACP education and provision. We looked at NHS trusts’ workforce plans for 2014 and, in order to gain an understanding of the role and the demand for it, carried out surveys from June 2014 until December 2014 of:

- Universities’ current curriculum for ACP training;
- NHS healthcare organisations.

These activities highlighted that organisations are at varying stages of embedding ACP roles and the roles are not always identified in workforce plans. New ACP roles are being created by reorganising existing workforce posts, rather than there being an increase in overall workforce numbers for the organisation.

There was clear engagement between HEIs and trusts as they were either already working together or wanted to do so, which enabled targeted training, teaching and learning. All organisations recognised the importance of the ACP role and saw it as filling a workforce gap.

**Defining competencies**

Consultation workshops with existing ACPs were held between September 2014 and January 2015 with around 300 people attending from across the West Midlands. Main outcomes included:

- Guidance and examples of core and specialist competences for ACPs;
- Identification of skills and competencies that an ACP requires;
- Agreement to support changes in service delivery and embed new modules of care;
- Agreement to a standardised ACP model for the West Midlands and to support the alignment of educational and professional standards.

**Developing an MSc course**

A sub-group of staff teaching on ACP courses at HEIs in the West Midlands shared details of their curricula and worked together to develop an MSc in advanced clinical practice for a range of professionals across the West Midlands. This standardised approach aimed to ensure:

- ACP competence;
- Clear outlined model and framework;
- Consensus across all HEIs – a core curriculum making up 80% of the course that is standardised across universities and disciplines;
- 20% of the curriculum allows for local academic and specialty variation;
- Primary, secondary, (nurse, midwife and allied health professional), mental health and learning disabilities are included.

The MSc gives practitioners the skills to be an ACP. It runs for three years as follows:

- Year 1 (60 credits): must include clinical health assessment and clinical decision making. Exit point: postgraduate certificate in advanced health assessment and clinical decision making;
- Year 2 (60 credits): must include prescribing (as appropriate), research methods and leadership. Exit point: postgraduate diploma in advancing clinical practice;

**Structured approach to education**

The Master’s, delivered by nine HEIs in the West Midlands, is suitable for those who want to become a qualified ACP or are in an ACP role but not yet qualified to Master’s level. It aims to produce ACPs who will:

- Enhance the quality of clinical care;
Innovation

BOX 2. BENEFITS OF THE ACP IN EMERGENCY CARE

The context
The emergency care centre at Royal Stoke University Hospital is a large teaching hospital and trauma centre with around 120,000 attendances a year.

The issues
Patients attending the emergency departments (EDs) have the right to receive high-quality care and treatment in a timely manner. This is measured using various targets and quality indicators. In recent years, increased ED attendances and demand for unscheduled care have led to unprecedented pressures. These increased attendances, coupled with a national shortage of middle-grade doctors, have led to a review of the emergency care workforce to find new ways of working.

Addressing the issues
To help meet the challenges associated with emergency care, we have recruited 10 ACPs (all nurses) since 2004. The team now comprises:
- Eight band 8a ACPs
- One band 7 trainee ACP (adult care)
- One band 8a ACP (children’s care).
The team covers seven days a week, 08.00-00.00.

Patients present with a wide range of pathologies, from minor injury and illness to life-threatening and life-limiting conditions, so our ACPs need to develop a wide range of knowledge and skills.

ACPAs assess, diagnose and treat patients, prescribing when indicated and referring for specialist opinions if necessary. Senior clinicians are used to support decisions and for escalation. Examples of patient conditions treated by ACPs include breathlessness, chest pain, stroke, falls/injuries, abdominal pain and infections.

The ACPs also undertake non-clinical work is also done in the form of teaching, audit and departmental projects such as domestic violence, elderly care, sepsis and patient experience groups.

Advantages
ACPAs are frontline clinical staff who are experienced and permanent members of the workforce. A key advantage of this role is consistency. By knowing how the systems and processes work, they can improve the patient’s journey through the department, which contributes to shorter waiting times and a better patient experience.

Training and education
ACPAs need support in the clinical environment and time to develop. Training is largely done in clinical practice, with support and supervision. They need to be educated and mentored by the team and consultants/senior doctors. Natalie Ruscoe, ACP nurse, Emergency Care Centre, University Hospitals of North Midlands Trust

- Develop into enquiring and reflective clinicians;
- Expand the professional boundaries of clinical practice as a result of increased theoretical knowledge, interprofessional working and supervised practice;
- Implement service developments and clinical practice via teaching, supervision, clinical audit, and research and business/project management across all care groups and across the life span;
- Adopt a proactive approach to continuing professional development;
- Develop enhanced nurse–patient relationships;
- Respond to the changing demands of healthcare practice;
- Influence the strategic direction of patient care in their field of practice and across the life span at local and national level.

Information about the MSc was circulated to healthcare organisations, professional networks and individuals across the West Midlands. Health Education England in the West Midlands has funded the course for September 2015 and January 2016 cohorts. This does not cover student backfill or any other support. Organisations submitted an employer support form for September 2015 and January 2016 cohorts. This does not cover student backfill or any other support. Organisations submitted an employer support form and signed up to providing support, time for staff to attend university, a relevant ACP placement throughout the course and, once qualified, a suitable ACP post.

On completion of the MSc the student will be a recognised ACP. They will have an expert knowledge base, complex decision-making skills and clinical competencies for expanded autonomous scope of practice, the characteristics of which are shaped by the context in which they practise.

Over 250 professionals embarked on the course in September 2015 and January 2016, 70% of whom were nurses. To secure sustainability an evaluation is being commissioned to establish whether the framework has been implemented effectively.

Framework development
An ACP framework has been developed for health professionals, workforce managers, employers, education providers, allied health professionals and ACPs. It provides the pathway for organisations to:
- Train ACPs;
- Develop existing clinicians;
- Link education and training standards;
- Embed the role within workforce plans.

The framework highlights the four domains associated with the ACP role: clinical skills, education and research, leadership and management (NHS Wales, 2010). These are integral to the ACP role as practitioners develop their own skills, work in the local team and influence the wider team inside and outside their organisation.

The ACP framework for the West Midlands was launched at the end of January 2016 (Health Education England, 2015). To further support this work a toolkit is being developed, which will contain information about becoming a qualified ACP and help organisations implement the ACP roles.

Conclusion
As part of this work HEIs have engaged in and contributed to the standardisation of modules for the advanced clinical practice courses and existing ACPs have helped develop core and specialist competencies for their specialty. Senior leaders have been influential in discussing the ACP role and programme in their organisations, embedding the role in workforce plans and influencing future commissioning.

The success of this programme has been due to the engagement of all stakeholders across the West Midlands who have set out core competencies and developed the ACP pathway with a standardised education curriculum. The programme is feeding into wider work led by HEE with a view to developing a set of national principles and one national definition for the ACP role.

References

For more on this topic go online...
- Developing a portfolio for advanced practice
  Bit.ly/NTAdvancedPortfolio

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