East Midlands
Advanced
Clinical Practice
Framework
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SECTION 1 INTRODUCTION AND BACKGROUND

1.1 Introduction

This framework has been developed in partnership with organisations across East Midlands to provide a common understanding and define the functions, knowledge, skills and competences of healthcare professional staff working in advanced clinical roles. Thereby:

- defining advanced clinical practice (ACP)
- providing an understanding of both specialist and generalist aspects of such roles
- stating principles, demonstrable practice and function descriptors for the role
- informing and improving access to future education and learning opportunities
- facilitating the transferability of roles
- providing an identified career pathway for healthcare professionals.

1.2 National factors and policy drivers

Advanced clinical practice roles are increasingly seen as key to the delivery of healthcare services. This Framework provides the foundation on which all future advanced clinical practice roles within East Midlands should be developed and existing roles can be reviewed and subsequently supported. The Framework has been developed for employers, service leads, education providers and senior or Advanced Clinical Practitioners themselves. Both local organisations and national bodies state that there is a need for Registered Nurses and Allied Health Professionals to advance their skills and knowledge to provide safe, effective and timely care for those accessing services.

These roles are essential to supporting the current workforce challenges, including significant levels of medical consultant vacancies in high pressure specialty services (e.g. urgent care) and the reduction of medical trainees working in other areas (e.g. surgery) Across the United Kingdom it has been recognised that frameworks are essential to effectively support and enable the future development of the advanced clinical practice role. Scotland and Wales have a single framework for healthcare professionals undertaking advanced clinical practice roles and regional clusters in England are also developing similar frameworks.

1.3 National policy direction and key workforce factors

There are a number of national policy drivers that have directly impacted on workforce development. Some of the factors worth highlighting are:

- impact of the Working Time Directive on the workforce
- increasing vacancies in higher specialty training grade roles
- need for Specialty and Associate Specialist Career grade doctors
- Modernising Nursing Careers and the RCN National Career Framework
- Modernising Allied Health Professional Careers
- Promoting the move towards an increasing competent and flexible workforce
- Front Line Nursing sets the direction for nursing in the future
- Chief Nurses Care and Compassion Six Cs highlight that it is essential if we are to understand the impact of what we do and ensure we deliver truly compassionate care.
1.4 Local workforce factors and key drivers

Development of a regional framework supporting Advanced Clinical Practitioner roles was initiated by a local drive to establish healthcare professional solutions for urgent and emergency care. Local workforce planning intelligence and the geographical workforce profile demonstrated to Health Education East Midlands (HEEM) and its key stakeholders that there was a growing need to plan for and develop healthcare professionals to undertake an Advanced Clinical Practice role. This role was seen as especially contributing to the development of non-medical solutions to providing service delivery.

This role development is supported by Health Education East Midlands Strategy 2014 – 2018 which sets out a commitment to build the capacity, capability and behaviours of todays and tomorrows workforce to deliver high quality care and meet the changing landscape of healthcare into the future.

1.5 Development of this framework

Key activities undertaken as part of the development of this framework have included:

- discussions and information generated by Local Health Community Workforce Teams
- engagement events bringing together local multidisciplinary clinicians to identify needs
- visits to Trust emergency areas to understand and review current advanced clinical practice activities and functions
- gather roles descriptions and organisational competency packages within East Midlands.
- mapping the role capacity, capabilities and behaviours against the National Occupational Standards defined functions
- taking into account existing national, regional and local framework examples
- wide reaching web-consultation
- oversight of development through the East Midlands Emergency Care Board
SECTION 2 DEFINING ADVANCED CLINICAL PRACTICE

2.1 Definition of Advanced Clinical Practice role

Extensive desk research has been undertaken to review and analyse existing advanced practice frameworks as well as understand local developments and role functions. The role of the Advanced Clinical Practitioner is not new; over the past few years there has been a steady increase in the number of posts which includes the words ‘Advanced’ or ‘Practitioner’ or both in the title. This has led to confusion and debate about the definition of the role and the features which distinguish it from other healthcare roles, subsequently leading to a lack of clarity about what an ‘Advanced Clinical Practitioner’ actually is. From the intelligence gathered and tested out within the working group sessions, the following definition has been agreed.

2.1 East Midlands Advanced Clinical Practice definition

“A role, requiring a registered practitioner to have acquired an expert knowledge base, complex decision-making skills and clinical competences for expanded scope of practice, the characteristics of which are shaped by the context in which the individual practices. Demonstrable, relevant education is recommended for entry level which is to be at masters level and which meets the education, training and CPD requirements for Advanced Clinical Practice as identified within the framework”.

2.2 Benefits for a single definition and standardised framework

To deliver these benefits consistently across the East Midlands organisations have agreed through the LETB to a single framework that will support employers, service leads and senior nurses articulate the role, its function and the educational requirements. Setting a standard and career pathway for individual undertaking that role, enables East Midlands to develop and sustain the future of advanced clinical practice roles. Through an evidence based foundation the framework clearly identifies the expectations for the role from which care can be delivered. The Framework will:

- support workforce planning and development of new roles
- provide transparency, standardisation and assurance for existing roles
- provide a mechanism for role transferability across the region
- inform and shape educational development, commissioning and investment
- enable workforce transformation.

2.3 Relationship between Specialist and Generalist Roles

In defining the requirements for Advanced Clinical Practice, it was necessary to draw the distinction between this role and that of Specialist and more advanced generalist roles. The term advanced clinical practice has been used for a number of years to describe those working in often unique roles with skills that are in advance of their primary practice. Often included under this advanced practice umbrella is both ‘Specialist’ and ‘Generalist’ roles. Within healthcare there is not a shared understanding of the ‘Specialist’ role amongst stakeholders, professionals and the public and this may reduce the impact and effectiveness of such roles. Figure 1 demonstrates that the term ‘Specialist’ should be
considered as one pole of the ‘Specialist - Generalist’ continuum which is separate from the developmental continuum from novice to expert. The diagram provides clarity and defines a ‘Specialist’ practitioner within a particular context which may for example be a client group, a skill set or an organisational context.

![Diagram showing the relationship between Specialist and Advanced Clinical Practice](image)

**Figure 1 Relationship between Specialist and Advanced Clinical Practice**

### 2.4 Progression from novice to expert

The advanced clinical practitioner is characterised by high levels of clinical skill, competence and autonomous decision-making, and reflects a particular benchmark on the career development ladder as exemplified in the Career Framework for Health. Whilst many ‘Specialist’ practitioners may function at an ‘advanced’ level, it is possible to identify roles which might characterise the ‘Junior-Level Specialist’ and/or the ‘Advanced Generalist’ (Figure 2). Importantly, this model also recognises the developmental pathway towards advanced level practice. Accepting that the knowledge, skills and competence may be different for individual practitioners, with some following a ‘Specialist’ route through focusing on high-level skills and decision-making within a particular client group or clinical context, whilst others will develop a portfolio that reflects a greater breadth of practice.

A newly appointed advanced clinical practitioner can be identified as a novice; one who recognises their own development needs and has a plan for learning the new skill, before moving on to the next stage in their development. The descriptors articulated in Appendix 1 identify the personal growth and development expected from an Advanced Clinical Practitioner as they progress within their role from Competent to Proficient to Expert.
2.5 Pillars of Advanced Clinical Practice Role

East Midlands, along with similar areas across the United Kingdom, recognise that there are many practitioners who function at an ‘Advanced’ level but may not always be working within a specifically clinical role or to a comparable standard or expectation. Locally, clinicians identified that all Advanced Clinical Practitioners should be expected to work, practice and function to the same standard and will be supported and empowered by their organisations to make high-level decisions of similar complexity and responsibility. Within this framework, a core principle is for advanced practice to be defined as a level of practice rather than a specific role. The required level of practice is characterised by functions set out within the clinical, research, education and managerial/leadership domains. These functions are articulated as pillars of advanced practice shown in figure 3 below.

Whilst the specific composition of individual roles will be determined locally, every Advanced Clinical Practice post will contain a minimum level of each pillar in order to be deemed competent. Figures 3 and 4 below indicate how individual roles may potentially reflect different mixes, but reinforce that, for the advanced practice clinical roles within East Midlands the clinical pillar will always be the most prominent.
2.6 Core principles of an advanced clinical practitioner.

The following principles will be used to enhance and further clarify understanding of the functions of the ACP:

**Autonomous Practice:** ACPs practice autonomously. They have the freedom to exercise judgement about their actions in turn accepting responsibility and being held to account for them.

**Critical Thinking:** Practising autonomously requires “self-regulatory judgement that results in demonstrating the ability to interpret, analyse, evaluate and infer” (Mantzoukas et al, 2007; 33). Effectively employing critical thinking allows ACPs to explore and analyse evidence, cases and situations in clinical practice, enabling a high level of judgement and decision making.

**High Levels of Decision Making and Problem Solving:** ACP will demonstrate expertise in complex decision making in relation to their role. This includes determining what to include in the decision making process and making a decision based on judgement and critical thinking / problem solving. This in turn directly impacts on their ability to practice autonomously.

**Values Based Care:** At this level of practice, individuals are required to have a high level of awareness of their own values and beliefs. Care is negotiated with service user/carers as an equal partner. Practitioners will consistently demonstrate ‘Working in a positive and constructive way with difference and diversity. Putting the values, views and understanding of individual service users/ carers at the centre of everything we do’.

**Improving Practice:** ACP will deliver advanced practice which is evidence based within service acting as a positive role model that enables change regardless of their “job title”.
### 2.7 Advanced Clinical Practice functions

This table provides the detail by which outcomes can be demonstrated.

<table>
<thead>
<tr>
<th>Advanced Clinical Practice</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Clear decision making/clinical judgment and problem solving</td>
<td>• Evidences the principles of teaching and learning</td>
</tr>
<tr>
<td>• Critical thinking and analytical skills</td>
<td>• Teaching competence in delivering theoretical knowledge and clinical skills</td>
</tr>
<tr>
<td>• Evidence of critical reflection and learning</td>
<td>• Supports others to develop knowledge, skills and competences</td>
</tr>
<tr>
<td>• Successful outcome when managing complexity</td>
<td>• Acts as a coach and mentor to the inter-professional team</td>
</tr>
<tr>
<td>• Acts in line with Clinical Governance standards</td>
<td>• Ability to create and promote a learning environment</td>
</tr>
<tr>
<td>• Acts to uphold equality, diversity and decision-making</td>
<td>• Acts, provides and advises on service user/carer teaching documents and information giving.</td>
</tr>
<tr>
<td>• Robust assessment and diagnosis, making appropriate referrals and or discharge</td>
<td>• Ability to develop service user/carer education materials.</td>
</tr>
<tr>
<td>• Evidence of higher levels of autonomy when assessing and managing risk</td>
<td>• Evidences and maintains competence as a sign off mentor</td>
</tr>
<tr>
<td>• Competent and safe to prescribe in line with legislation</td>
<td></td>
</tr>
<tr>
<td>• Level of confidence and assurance</td>
<td></td>
</tr>
<tr>
<td>• Ability to prescribe and/or advise therapeutic interventions to improve service user outcomes</td>
<td></td>
</tr>
<tr>
<td>• Higher level of communication skills</td>
<td></td>
</tr>
<tr>
<td>• Ensures services service user focus through public involvement</td>
<td></td>
</tr>
<tr>
<td>• Evidence of promoting and influencing others to deliver value based care</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Management and Leadership</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Abilities to identify a need for change, lead innovation and manage implementation of a service development</td>
<td>• Ability to access research/use information systems</td>
</tr>
<tr>
<td>• Ability to develop a case for change, negotiate and influence</td>
<td>• Critical appraisal/evaluation skills</td>
</tr>
<tr>
<td>• Confidence at leading networks groups and initiating team development</td>
<td>• Involvement in research, audit and service evaluation</td>
</tr>
<tr>
<td></td>
<td>• Ability to implement research findings into practice - including use of and development of policies/protocols and guidelines.</td>
</tr>
<tr>
<td></td>
<td>• Confidence at public speaking, presentations and writing publications</td>
</tr>
</tbody>
</table>
2.8 Descriptors for Advanced Clinical Practice

The descriptors identified within Appendix 1 of this framework articulate how Advanced Clinical Practitioners can be expected to develop as they gain experience and confidence within their role.

Each of the four pillars; Clinical Skills; Education; Research and Management and Leadership are further described in terms of the expectation of ACPs as they develop from Competent practitioners, to Proficient practitioners to Expert practitioners. This generally coincides with the Practitioner’s developing their own skill (competent) working within the local team (proficient) and then influencing the wider team (expert)
SECTION 3 EDUCATION, TRAINING AND DEVELOPMENT

3.1 East Midlands approach to education development for the role

Each Health community within East Midlands has undertaken a considerable level of work to develop the Advanced Clinical Practitioner role locally. Role requirements, job descriptions, education and assessment processes as well as the supporting infrastructure required to ensure successful development of individuals new to the role have generally been implemented. At this time, East Midlands has taken the decision to build on this local investment and create a standardised framework describing the collective expectations for the role as articulated within the Framework Pillars, the core principles, domains and functions. There is no intention at the moment to create and impose a standard job description or single education programme and support structure.

All Advanced Clinical Practitioners do however need to undertake or have included within their development, Figure 5

- Increased knowledge and clinical skill development to meet a defined competence level
- A robust process of assessment of both theoretical and practical skills and knowledge
- Academic, clinical and professional support to a consolidate, apply and assimilate newly gained knowledge and skills

Figure 5 Education Provision
3.2 Theoretical and academic development

Theoretical knowledge and clinical skills development can be, and is being, accessed through a number of routes. Some examples are;

- Locally, health communities and individual Trusts have worked closely with Higher Education Institutes (HEIs) to develop bespoke accredited programmes at Masters level
- Development of in-house programmes utilising support and expertise from current Advanced Clinical Practitioners and Medical colleagues
- Use of simulation suites and technology based learning and exercises
- Inter-professional learning alongside medical students within medical schools
- Accessing Medical Royal College e-learning platforms

Typically individuals and Trusts will utilise a combination of these options in order to ensure that ACP learners get full exposure to the appropriate levels of education, learning and training. However theoretical knowledge and clinical skills are developed, it is expected that the developmental programme will enable successful learners to graduate to work at a level equivalent to “middle grade” medical staff as part of the non-medical workforce solution.

3.3 Robust process of assessment

Critical to the implementation, acceptance and sustainability of this role is that Advanced Clinical Practitioners are widely recognised as being consistently competent and capable in fulfilling the requirement of the role in its entirety. Given that the ACP is expected to have a level of clinical knowledge and skills commensurate with some areas of medicine, it is appropriate that comparable assessment strategies are utilised to ensure robust, valid and reliable assessments are undertaken resulting in practitioners deemed fit for purpose.

Assessment tools used will be a mixture of;

- Assignments, exams, projects etc testing theoretical clinical knowledge
- Objective Structured Clinical Examinations (OSCEs)
- Mini Clinical Evaluation exercises (Mini-CEX)
- Case based discussions
- Direct observation of clinical skills
- Development of Clinical Competence Portfolio

Assessment is likely to be undertaken by a range of assessors. These will include HEI colleagues with appropriate academic and clinical experience, medical practitioners and healthcare professionals who are competent at the required level. All assessors will need to demonstrate that they possess the required knowledge and clinical skills and be familiar with all of the chosen assessment tools. There will be a strong need for collaboration and working across normal professional and organisational boundaries to ensure that learning and assessment in practice delivers practitioners who consistently meet the required outcomes.
3.4 Support to succeed

Notwithstanding the effort individual ACPs put into their learning and practice, they are also reliant on the support of particular individuals as well as the whole team surrounding them. It is expected that each ACP will have an identified clinical supervisor who will act as a critical friend, teacher, coach, mentor, assessor and support throughout the formal ACP programme. This does not mean they are the sole support for the ACP during this period however they provide a framework of stability and can provide an overview of the developing practitioner as a whole. A range of other staff will also undertake most of the roles identified but may do so for shorter focussed periods. These may include staff at consultant level, medical staff, senior practitioners and educators. There is a need to ensure that the work teams who will be instrumental on a day to day basis are clear about the role and responsibility they play in supporting the development of individual ACPs as well as being aware of the importance they will play in nurturing and supporting the personal development of an individual into this demanding role.

Thought needs to be given as to how on-going supervision will be established and maintained once an ACP has been developed to the required competency levels. This is to ensure support for the ACP but also ensure patient safety and promote ongoing professional development.

3.5 The competent practitioner

Whilst individual organisations may currently chose slightly different routes to develop their ACPs, all the delivered programmes, development requirements and infrastructure need to ensure that the outcome is the same. Individuals deemed competent ACPs need to be able to demonstrate that they can demonstrate the knowledge, skills and outcomes across all 4 pillars and meet the requirements of the Advanced Clinical Practice Framework. This will enable individuals to:

- deal with complex issues both systematically and creatively, making sound judgments and decisions in the absence of complete data and communicate their conclusions clearly to specialist and non-specialist audiences
- demonstrate self-direction and originality in solving problems and act autonomously in planning and implementing treatment and care
- function effectively and safely in circumstances requiring sound judgment, personal responsibility and initiative in complex and unpredictable clinical environments.
- continue to advance their knowledge and understanding and to develop new skills to a high level.

3.6 Career Progression

Advanced Clinical Practitioners may develop themselves or their post to consultant level. These addition to the pillars builds on an individual’s skills and knowledge at a strategic level working to influence and interpret national, regional and local strategy.
Figure 6 shows the levels of a healthcare professional consultant:

Nationally the five recognised consultant components for non-medical practitioners are; expert advanced clinical practice, education, training and development, leadership and consultancy, research and evaluation, strategic service development.

It is expected that the consultant role reaches high/expert levels across all of these five component compared with the Advanced Clinical Practitioner, where the requirement is a fully realised expert within the clinical pillar, with lower levels of expertise and practice in the other components/pillars working at a level to influence strategic service development.
SECTION 4  WORKFORCE PLANNING TO SUPPORT THE ROLE

4.1 Embedding the role

It is clear that Advanced Clinical Practice roles are valued as part of the current workforce and seen as a response to changing patient and service need and addressing current workforce challenges. Through collaborative implementation of this framework East Midlands organisations will:

- Create a safe and effective response to significant clinical service pressures
- Provide a clear framework for
  - career development
  - professional accountability
  - education & training of advanced clinical practitioners
- added value and contribution to care delivery,
- Manage the immediate and long term issue associated with workforce pressure in shortage areas
- Enhance care through a shared model of rigorous assessment of knowledge skills and competence.
- Enable openness and transparency in relation to the clinical activity and function of the role
- Create a clear progression route that takes into account succession planning and career development
- Standardise and promote consistent governance and quality standards
- Create a peer review network
- a multi-professional model supporting a 24 hour seven day service.
- Create innovative roles that following care pathways across organisational boundaries

To embed the role and ensure its sustainability it is necessary that the organisational governance and infrastructure arrangements take into account:
- clinical governance and patient safety arrangements
- supporting systems and infrastructure (e.g. ordering diagnostic tests)
- professional and managerial pathways of accountability
- assessment against, and progression through, the competencies identified within this framework
- provide a career framework to support recruitment and retention

4.2 Workforce planning to ensure a future supply

This framework aims to provide a consistent standard, sustainable and transferable workforce for East Midlands. Health Education East Midlands is working in partnership with health and social care organisations in order to identify the appropriate demand and to ensure that appropriate commissioning arrangements are in place for sufficient appropriately skilled staff.
Organisations should identify their ACP requirements both in terms of capacity and capability within their annual workforce plans. Further support for this process is available from:

Health Education England East Midlands Office  
1 Mere Way  
Ruddington Field Business Park,  
Ruddington, Nottingham  
NG11 5SJ  
0115 823 3300  
Or via our website http://em.hee.nhs.uk/

You can get advice from your **Local Workforce Teams**, each of the East Midlands counties – Derbyshire, Leicestershire and Rutland, Lincolnshire, Northamptonshire and Nottinghamshire – has its own Local Workforce Team. These teams support health and social care employers with workforce development and planning, ensuring the local care community’s priorities are identified to inform our investment decisions.


**Education**

For help in relation to available education go to the **Learning Beyond Registration (LBR)** site. LBR is a vital part of developing competent, capable practitioners appropriately prepared to deliver a dynamic, flexible, quality, client-focused service. To this end NHS East Midlands aims to commission a suite of modules/programmes from a range of universities and can be accessed via [http://lbr.eastmidlands.nhs.uk/](http://lbr.eastmidlands.nhs.uk/) or contact the LBR lead in your Local Workforce Teams.
Appendix I

East Midlands descriptors for Advanced Clinical Practice 1

The descriptors articulate how Advanced Clinical Practitioners can be expected to develop as they gain experience and confidence within their role. They described the expectation of ACPs as they develop from Competent practitioners, to Proficient practitioners to Expert practitioners. The descriptors are part of developing a clear, transferable framework across East Midlands.
### Clinical Skills

<table>
<thead>
<tr>
<th>Pillar Domains</th>
<th>Competent</th>
<th>Proficient</th>
<th>Expert</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Autonomous Practice:</strong></td>
<td></td>
<td><strong>Demonstrates a professional understanding of autonomy.</strong></td>
<td><strong>Demonstrates the application of autonomous critical appraisal and evaluation skills in the context of working practice.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Versed in organisational processes, ethical insight to enable freedom and confidence to act with authority when making decisions.</strong></td>
<td><strong>Act within the organisational processes confidently demonstrating their freedom to act and authority when making decisions.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Demonstrates confidence and high level communication skills when working within the boundaries of the organisations policy.</strong></td>
<td><strong>Has the confidence and ability to communicate and influences the local policy in terms of the political context of the role and its future potential to deliver services .</strong></td>
</tr>
<tr>
<td><strong>Critical Thinking:</strong></td>
<td></td>
<td><strong>Demonstrates critical thinking and analytical skills in their practice and attainment of knowledge.</strong></td>
<td><strong>Able to synthesizes experience evidence and knowledge to apply within unfamiliar situations.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Incorporates analysis, critical thinking and reflection to inform their clinical assessments.</strong></td>
<td><strong>Courage to challenge and question others in complex situations</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Has developed advanced psychomotor skills, with creativity ability to make the decisions required of them in their nursing practice</strong></td>
<td><strong>Challenging existing thinking with new ideas</strong></td>
</tr>
<tr>
<td><strong>High Levels of Decision Making and Problem Solving:</strong></td>
<td><strong>Demonstrate decision making skills in assessment, diagnosis referral and discharge</strong></td>
<td><strong>Decisions are combine logical analysis, experience, wisdom, and advanced methods to make sound, timely decisions.</strong></td>
<td><strong>Demonstrates the ability to make decisions and solve complex, difficult, and intractable problems</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Confident to seek, second opinion, relevant information and the answers to key questions from several sources.</strong></td>
<td><strong>Demonstrates advanced skill and keen insight in gathering, sorting, and applying key information.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Has solutions and suggestions that are effective in addressing the problem at hand</strong></td>
<td><strong>Delivers solutions and decisions that have a positive, far-reaching, and</strong></td>
</tr>
</tbody>
</table>

*Version 5d 1st September 2014*
| Values Based Care:                                                                                                                                                                                                 | Improving Practice:                                                                                                                                                                                                 |                                                                                                                                                                                                 |
|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Demonstrate and lives the NHS, organisational, personal and professional values. Developing therapeutic interventions to improve service user outcomes by demonstrating personal ability to understand an individual’s health and social needs. Communicates effectively to promote good workplace with benefits for those in their care and staff alike. | Understands and has knowledge and experience in change management techniques. Is knowledgeable and versed in Clinical Governance and trust accountability for practice changes. Ensures improvement is in the service user best interest. Takes seriously feedback and embraces learning from incidents and complaints. | Possesses personal strength and vision to innovate and to embrace new ways of working. Demonstrates and articulates clinical governance in practice. Undertakes clinical audit and service evaluation to ensure change has improved and developed the service. Promotes and encourages others to listen and value opinions, helping staff to understand all perspectives. |
| Works to improve the values of others in health of the individual and the whole community. Leads teams and builds relationships based on compassion, empathy, respect and dignity. Shows good communication and listening skills demonstrates courage to ensure effective multi-professional team working. | Demonstrates deep resolve and resilience throughout the decision making process. Is well respected and sought out often by others for input, support, and direct decision making. | Demonstrates strong leadership at a strategic level able to engage in and influences local regional and national policy. Demonstrates work upstream to influence the social, political, and economic factors affecting nursing practice. Strong leadership and actions to make vision and strategy a reality. Present and published audit findings, improvement and innovation local and nationally to share and develop others within the NHS. Provides leadership and influence in policy development and lessons learnt from national enquiries and reviews. |
| Influences and leads integration to ensure improved pathways through shared values and behaviours. Is exemplar at ensuring engagement and “no decision about me without me” | | |
## Education

<table>
<thead>
<tr>
<th>Pillar Domains</th>
<th>Competent</th>
<th>Proficient</th>
<th>Expert</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role model</td>
<td>Understands and demonstrates the characteristics of a role model to members in the team/and or service</td>
<td>Demonstrates the characteristics of an effective role model at a higher level</td>
<td>Is able to develop effective role model behaviour in others</td>
</tr>
<tr>
<td>Mentorship and coaching</td>
<td>Demonstrates understanding of mentorship and coaching principles and processes and applies these appropriately with team members</td>
<td>Demonstrates ability to support others within the team to effectively mentor and/or coach</td>
<td>Demonstrates ability to effectively mentor and/or coach within the wider environment</td>
</tr>
<tr>
<td>Leading and shaping education and training</td>
<td>Demonstrates an understanding of current teaching and learning principles relevant to current areas of practice Participates in the delivery of formal and informal education programmes within the team</td>
<td>Demonstrates an ability to design and implement a local approach to workforce education planning and development Leads on and participates in education and training delivery out with the team</td>
<td>Contributes to and shapes the approach to workforce education planning and development within the wider environment Shapes, contributes or is accountable for the creation or development of accredited education</td>
</tr>
<tr>
<td>Promotion creation of learning environment</td>
<td>Demonstrates an understanding of East Midlands Quality Standards for local Training and Education providers and undertakes appropriate role in meeting the standards</td>
<td>Shapes how East Midlands Quality Standards for local Training and Education providers are implemented and outcomes improved on within the local area</td>
<td>Contributes and shapes how East Midlands Quality Standards for local Training and Education providers are implemented and outcomes improved on within the wider environment</td>
</tr>
<tr>
<td>Maintain and improve fitness to practice in self and others</td>
<td>Demonstrates individual fitness for practice through continuing to develop skills, knowledge and behaviours that underpin the agreed requirements of the role</td>
<td>Demonstrates own fitness for practice, supports and ensures others within the team continue to develop and demonstrate their fitness for practice</td>
<td>Takes a lead role in ensuring the development of staff groups within the wider environment demonstrate their fitness for practice</td>
</tr>
<tr>
<td>Educating and supporting patients, service user and carers</td>
<td>Demonstrate an active contribution to the education and awareness raising for patients, service users and carers</td>
<td>Demonstrates an ability to engage with patients, service users and carers to improve the provision of education and awareness raising</td>
<td>Contributes and shapes the provision of education and awareness raising for patients, service users and carers within the wider environment</td>
</tr>
<tr>
<td>Management and Leadership</td>
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<tr>
<td><strong>Pillar Domains</strong></td>
<td><strong>Competent</strong></td>
<td><strong>Proficient</strong></td>
<td><strong>Expert</strong></td>
</tr>
<tr>
<td>Developing case for change</td>
<td></td>
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<tr>
<td></td>
<td>Contributes to the development of a case for change. Taking into account workforce vision and business strategy</td>
<td>Creates vision of future change and translates this into clear direction for others</td>
<td>Convincing others within the wider environment to share the vision for change at a more strategic level</td>
</tr>
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<td></td>
<td>Demonstrates an ability to think 4-12 months ahead within a defined area and contribute to the planned service improvement work programme.</td>
<td>Demonstrates the ability to think over a year ahead within a defined area and can generate formal arguments and evidence to support change</td>
<td>Demonstrates the ability to think over a longer term and across the wider environment contributing to the management of organisational politics and changes in the external environment</td>
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<tr>
<td>Identifying need for change, leading innovation and managing change, including service development</td>
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<td></td>
<td>Contributes to improving quality through effectively undertaking agreed change management and project managing roles</td>
<td>Develops clear understanding of priorities and formulates practical short-term plans in line with workplace strategy</td>
<td>Takes a lead to ensure innovation produces demonstrable improvements in service provision which is embedded into working practices in the short medium and long term</td>
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<td></td>
<td>Identifies where innovation could support improvements to service delivery and can articulate changes required to implement</td>
<td>Recognises and implements service improvements and innovation through successfully managing the process of change with a team</td>
<td>Takes the lead in service innovation and improvement, facilitating adoption and spread in accordance with best practice</td>
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<tr>
<td>Negotiation and influencing skills</td>
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<td></td>
<td>Demonstrates an understanding of organisational behaviours and cultural climate within the team and how this can be utilised to effectively deliver service priorities</td>
<td>Demonstrates an understanding and ability to influence behaviours and the cultural climate at service level.</td>
<td>Demonstrates leadership and ability to influence at a strategic level the behaviour and cultural climate in light of public and media perceptions</td>
</tr>
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<td></td>
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<td>Demonstrates how to obtain co-operation of relevant stakeholders both within and outwith service level to deliver improved patient services</td>
<td>Understanding the role of health and social care organisational boundaries to promote and build integrated service for the future</td>
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<td>Demonstrates the ability to develop and support increased levels of co-operation across potentially diverse groups when faced with potentially contentious issues and decisions</td>
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<tr>
<td>Networking</td>
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<tr>
<td></td>
<td>Promote the sharing of information and resources</td>
<td>Create opportunities to bring individuals and groups together to achieve goals</td>
<td>Identifies opportunities where working in collaboration with others within and across networks can bring added benefits</td>
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<tr>
<td></td>
<td>Actively seek the views of others</td>
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<tr>
<td>Team development</td>
<td>Demonstrate a clear sense of their role, responsibilities and purpose within the team. Recognise the common purpose of the team and respect team decisions</td>
<td>Demonstrate the ability to motivate individuals and/ or team</td>
<td>Can recognise the role they play in supporting more strategic motivational activities with both individuals and teams within a wider environment. Adopts a team approach within the wider environment, acknowledging and appreciating efforts, contributions and compromises</td>
</tr>
</tbody>
</table>

| Research |
|---|---|---|---|
| **Pillar Domains** | **Competent** | **Proficient** | **Expert** |
| Ability to Access Research / Use Information Systems | Demonstrates ability to access research /use appropriate information systems | Demonstrates ability to access research and show teams use of appropriate information systems | Demonstrates ability to lead teams and services to access/use appropriate information systems |
| Critical Appraisal/Evaluation Skills | Demonstrates ability to critically evaluate and review literature | Demonstrates application of critical appraisal and evaluation skills in the context of working practice | Is recognised as undertaking peer review activities within working practice |
| Identifies Gaps in Evidence Base | Demonstrates ability to identify where there is a gap in evidence base to support practice | Demonstrates an ability to formulate appropriate and rigorous research questions to bridge the gaps | Demonstrates ability to design a successful strategy to address the research questions and support implementation into practice |
| Implement Research Evidence into Working Practice | Demonstrates ability to apply research evidence base into working practice | Demonstrates ability to apply research and evidenced based practice within team and or service | Is able to use research evidence to shape policy/procedure at an organisational level |
| Develops and evaluate research protocols / guidelines and working practices | Demonstrates ability to describe core features of research protocols/guidelines | Demonstrates ability to design a rigorous protocol/guideline to address previously formulated research questions | Demonstrates active involvement in the critical review of research protocols/guidelines |
| | Demonstrates their application into working practice | Demonstrates ability to apply protocols/ guidelines with teams | Demonstrates ability to lead protocol/guidelines at an organisational level |
| Supervision of Others Undertaking Research | Demonstrates the understanding of research governance | Is able to contribute to research supervision in collaboration with others | Is a research supervisor for postgraduate students |
| Establishes Research Partnerships | Demonstrates the ability to work as a member of the research team | Demonstrates ability to establish new multidisciplinary links to conduct research projects | Demonstrates ability to show leadership within research teams concerning the conduct of specialist research |
Appendix II

Case Studies of Advanced Practice Models from across East Midland’s organisation

Lincoln County Hospital Advanced Practice in Emergency Care

The long term plan is to develop practitioners who can see, treat and discharge any patient, of any age, with any presenting complaint.

We currently have 8 nurses working as advanced practitioners. All have previously completed modules in history taking, clinical examination and non-medical prescribing, but because of staffing issues in MEAU and the ED were not getting many opportunities to regularly practice and develop their advanced skills.

The opening of the Ambulatory Care Unit in November 2013 was an opportunity to utilise the skills of these individuals and further develop their practice. This is an ideal environment to gain experience with relatively well patients and with less time pressure than the ED. Nurse practitioners assess all patients and initiate their investigations prior to consultant review. All staff are working to a basic competency framework and being assessed and evaluated by the consultants.

As the ambulatory care service becomes established, the nurse practitioners are taking the opportunities to expand their scope of practice by working with an experienced clinician either on minors, or in a RAT (rapid assessment and triage) role with a consultant in majors. The RAT role is felt to be the next logical step to assist with assessment skills and initial investigations and treatment before a medic makes the diagnostic and on-going treatment decisions. Natural curiosity will mean that the advanced practitioners will start to learn as they follow up the patients they initially assessed, without the pressure of having to make diagnostic decisions at this stage. Again the minor injuries and RAT competences will have a competency framework to work through.

While the nurse practitioners are developing, they will all be expected to attend the multi-professional in-house training programme which covers the College of Emergency Medicine curriculum. At some stage all practitioners will be expected to complete a MSc in advanced practice.

The final stage of the process is to develop diagnostic reasoning skills and clinical decision making. This will be supported by clinical supervision, with the possibility of placement to specific clinical areas to gain exposure to more specialist skills such as paediatrics or care of the elderly.
Nottingham University Hospitals NHS Trust - Advanced nurse practitioners for frail older people

At Nottingham University Hospitals NHS Trust we are developing the role of advanced nurse practitioners (ANPs) for frail older people. These ANPs will eventually provide a service to frail older patients both within healthcare of the older person and across the hospital. This project is being funded by Nottingham Hospitals Charity for the first two years. Four experienced nurses have started their training with a further three nurses being recruited to start training September 2014. We plan to recruit three more nurses every year until we have a team of twelve qualified advanced nurse practitioners. Training is through an MSc in Advanced Clinical Practice and experiential learning on Healthcare of the Older Person (HCOP) wards, under the clinical supervision of consultant geriatricians. This model allows clinical skills to be embedded in practice and for the trainees to learn specialty skills of geriatric medicine. Work placements are rotated regularly to support the trainees learning particularly in dementia and delirium, falls and orthogeriatrics. Additional placements are given in other areas such as the acute admissions unit and the community. The trainees attend further training courses organised by the hospital (such as advanced life support) and study sessions with the junior doctors. We are currently undertaking a Delphi exercise to gain national consensus on the competences required in addition to the core advanced clinical skills for these nurses to become advanced nurse practitioners for frail older people.

When qualified the advanced nurse practitioners will, working in collaboration with the medical, nursing, allied health professionals and community teams, and with patients and their carers, lead the comprehensive geriatric assessment process for frail older patients. They will provide expert advice and care for frail older patients who have acute physical illness combined with multiple needs including co-morbidities, and needs relating to their mental health, functional abilities and rehabilitation, behavioural, and social and physical environment. A number of patients will be reaching the end of their natural life and there will be a palliative element to their care. Patients will often be cared for by family or other informal carers and communicating with carers and meeting their needs will be an important part of the role. The advanced nurse practitioner role will include activities previously undertaken by medical staff including physical examination, ordering and interpreting diagnostic tests, advanced health needs assessments, differential diagnosis, prescribing medication and discharging patients. They will have advanced communication skills, be able to communicate effectively and calmly in difficult situations and with sometimes distressed people and those with limited communication skills. They will provide leadership by role modelling excellent practice and by identifying, researching and developing better ways of working. They will be a source of expert knowledge on the ward and within the hospital for both nurses and doctors and will do bedside teaching and formal teaching to ensure quality of care is maintained.
Appendix III

Bibliography

Our thanks to NHS Wales from which this Framework has been developed.

Department of Health (2010) Prime Minister’s independent Commission on the Future of Nursing and Midwifery


Department of Health (2013) Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values

NMC Nursing: Towards 2015

NHS Wales (2013) Framework for Advanced Nursing, Midwifery and Allied Health Professional Practice in Wales


http://www.england.nhs.uk/everyonecounts/
Appendix IV

Documents from the following local organisations, including protocols and competences have informed the Framework

- Chesterfield Hospital NHS Foundation Trust
- Derby Hospitals NHS Foundation Trust
- Kettering General Hospital NHS Trust
- Northampton General Hospital NHS Trust
- Nottingham University Hospitals NHS Trust
- Sherwood Forest Hospital foundation Trust and South Yorkshire
- United Lincolnshire Hospital NHS Trust
- University Hospitals of Leicester NHS Trust