



HELLO  
April  
2023

# WELCOME

Welcome to the Scottish Advanced Practice newsletter which has been produced for practitioners working in Scotland in advanced practice roles. This newsletter will provide details of advanced practice developments across professional groups in Scotland.

**If you are interested in contributing to this newsletter, please contact one of the team below:**

Colette Henderson

[c.m.j.henderson@dundee.ac.uk](mailto:c.m.j.henderson@dundee.ac.uk)

Dr Clair Graham

[clair.graham@nhs.scot](mailto:clair.graham@nhs.scot)

Mandy Allen

[mandy.allen@glasgow.ac.uk](mailto:mandy.allen@glasgow.ac.uk)

Jan Meechie

[jan.meechie@uws.ac.uk](mailto:jan.meechie@uws.ac.uk)

Cheryl McKain

[Cheryl.McKain@ggc.scot.nhs.uk](mailto:Cheryl.McKain@ggc.scot.nhs.uk)

Michelle McGuinness (NHS 24)

[Michelle.McGuinness@nhs24.scot.nhs.uk](mailto:Michelle.McGuinness@nhs24.scot.nhs.uk)

Thanks to James Todd, Marketing Business Partner, University of the West of Scotland.



## Leadership

### The North of Scotland Advanced Practice Academy is hosting the International Council of Nurses Nurse Practitioner/Advanced Practice Nurse Network Conference in Aberdeen 9-12th September 2024

Although the name implies this conference is nursing specific, the UK is unique in having a multiprofessional approach to advanced practice. The organising committee are keen to reflect this and ensure that all professions are represented at the conference.

The [website for the conference](#) remains under development as the organisation of the conference continues. Please follow us on Twitter @NPAPN2024 and visit the website for updates.

Home Venue Visit Aberdeen

# International Council of Nurses NP/APN

13th Network Conference, Aberdeen, Scotland, UK  
9-12 September 2024



ICN Nurse Practitioner / Advanced  
Practice Nurse Network



International Council of Nurses  
*The global voice of nursing*

### ICN NP/APN Aberdeen, Scotland, UK 2024

Please save the date for the 13th International Council of Nurses Nurse Practitioner / Advanced Practice Nursing Network



**The Remote and Rural Healthcare Education Alliance**

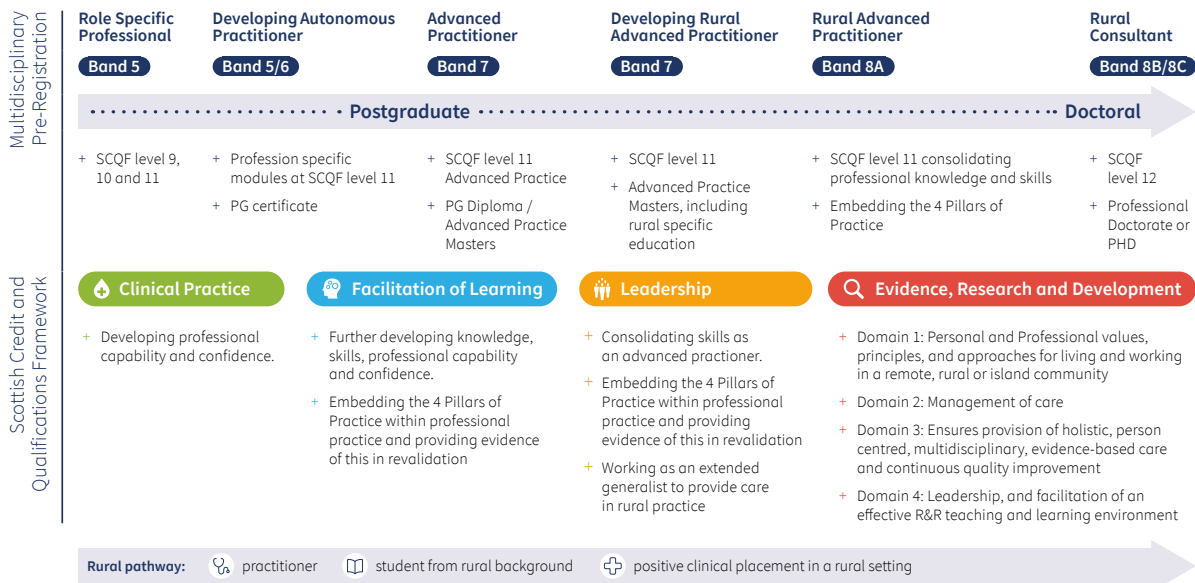
# New Multidisciplinary Education Pathway supports a Bright future for Rural Advanced Practice

## Rural Advanced Practice

Following a two-year collaborative programme of research and stakeholder consultations, **NHS Education for Scotland (NES)** and the **Scottish Rural Medicine Collaborative (SRMC)** have developed a new multidisciplinary rural education pathway. **The Rural Advanced Practice (RAP)** pathway identifies the knowledge and skills needed to become a Rural Advanced Practitioner. It illustrates how multidisciplinary team members can progress their clinical careers in rural areas by accessing education that meets the needs of the remote and rural (R&R) health and social care workforce. It utilises one of the key findings from the international research programme, Making it Work (2020)<sup>1</sup>, by creating a Rural career framework to provide support with recruitment and retention of rural staff.



## Multidisciplinary Rural Advanced Practice Educational Pathway



© NHS Education for Scotland 2020. This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on 0131 656 3200 or email [allformats@nes.scot.nhs.uk](mailto:allformats@nes.scot.nhs.uk) to discuss how we can best meet your requirements. NESD1389 | Published in February 2021



## The Multidisciplinary Rural Advanced Practice Capability Framework for Primary and Community Care, details the competencies required to become a Rural Advanced Practitioner.



This framework builds on the NES requirements for Advanced Practice and identifies the additional Scottish Credit and Qualifications Framework (Level 11) knowledge and skills required to become a Rural Advanced Practitioner. It guides the University of the Highlands and Islands, who have been commissioned by NES to develop and deliver the MSc in Rural Advanced Practice. The Capability Framework<sup>2</sup> and related competencies outline the knowledge, skills and attitudes required of Rural Advanced Practitioners. The framework:

- Aligns with the NHS Education for Scotland's (NES) Nursing Midwifery & Allied Health Professionals (NMAHP) Post Registration Career Development Framework<sup>3</sup> (Level 7) and expands upon the current NES advanced practice competencies<sup>4</sup>
- Applies across multidisciplinary R&R professional roles
- Defines and shows the scope of practice and capabilities required of those working in a Rural Advanced Practitioner role<sup>5,6,7</sup>
- Provides suitable guidance so that modules delivered by education providers can be aligned and quality assured
- Supplies an outline against which the skills set of a practitioner can be assessed in R&R practice

The first cohort of the new MSc in Rural Advanced Practice will commence in September 2023. NES are providing funding for 12 rural practitioners currently working for NHS Scotland to undertake the MSc in Rural Advanced Practice. The prerequisite for applying for the course is that practitioners will already have a Diploma in Advanced Practice and wish to progress their rural career and achieve an MSc in Rural Advanced Practice. The three-year MSc programme will be open to national and international multidisciplinary registered health and social care practitioners wishing to progress a career in rural practice.

## The Development of the Rural Practice Supervision Hub

Recognising the major challenges in providing effective rural practice supervision, (the cornerstone of public and professional safety) and to support

the implementation of this new programme by equipping supervisors to be effective in their role, NES are currently developing a Rural Practice Supervision Hub that will provide learning resources to promote excellence in supervision. The Hub is in the early stages of development and will be available to view soon.

This Rural Practice Supervision Hub will utilise the new NES National Clinical Supervision Framework which is currently under development and will build on the NES Advanced Practice toolkit. The Hub will be co-produced by NES, with input from Rural Advanced Practice Supervisors, Rural NHS Boards, and Advanced Practice Academies.

It will provide a sustainable, supportive, accessible, web-based, digital platform to:

- **Connect** and educate multidisciplinary Rural Practice Supervisors nationally. These supervisors might not have had the opportunity to interact otherwise.
- **Provide** a shared context for people to communicate and share information and personal experiences in a way that builds understanding and insight.
- **Enable** dialogue between multidisciplinary rural practitioners to explore new possibilities, solve challenging R&R problems and create new, mutually beneficial opportunities.
- **Stimulate** learning, by serving as a vehicle for effective communication, coaching and self-reflection.
- **Capture** and share existing knowledge to help rural supervisors improve their practice by providing a forum to identify solutions to problems and a process to collect, evaluate and develop best practice.
- **Introduce** collaborative processes to the multidisciplinary group and Rural Health Boards to encourage the free flow of ideas and exchange information.
- **Generate** new knowledge to help members transform their practice to accommodate changes in Rural needs and technologies and achieve excellence in Rural Practice Supervision.

If you are an experienced rural practice supervisor and interested in helping to develop this world-leading rural multidisciplinary practice supervision hub, please contact: [rrheal@nes.scot.nhs.uk](mailto:rrheal@nes.scot.nhs.uk) or [Claire.savage@nhs.scot](mailto:Claire.savage@nhs.scot) or [sylvia.hazlehurst@nhs.scot](mailto:sylvia.hazlehurst@nhs.scot).

[2 Multidisciplinary Rural Advanced Practice Capability Framework.pdf](#)

[3 https://www.careerframework.nes.scot.nhs.uk/](https://www.careerframework.nes.scot.nhs.uk/)

[4 https://www.advancedpractice.scot.nhs.uk/education/advanced-nurse-practitioner-national-competencies.aspx](https://www.advancedpractice.scot.nhs.uk/education/advanced-nurse-practitioner-national-competencies.aspx) [3 Shaping the Future Together: Remote and Rural General Practice Working Group report - gov.scot \(www.gov.scot\)](#)

[5 https://www.gov.scot/publications/transforming-nmahp-education-career-development-paper-5/](https://www.gov.scot/publications/transforming-nmahp-education-career-development-paper-5/)

[6 Transforming nursing, midwifery and health professions roles: advance nursing practice - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/transforming-nmahp-education-career-development-paper-5/)

[7 Allied Health Professions Specialist and Advanced Practice Short Life Working Group \(scot.nhs.uk\)](https://www.gov.scot/publications/allied-health-professions-specialist-and-advanced-practice-short-life-working-group-report-1-2022/)



# Facilitating Learning

In November 2022 a group of students from Rotterdam University Institute of Healthcare visited the University of Dundee and NHS Tayside. These students are all enrolled on a 2 year Master Advanced Nursing Practice programme at the Rotterdam University Institute of Healthcare. The programme is funded centrally and one of the key requirements of the programme is that students gain an understanding of advanced practice internationally. To achieve this Rotterdam University Institute of Healthcare has collaborated with Swansea University, the University of Texas, Texas Women's University, the University of Minnesota and the University of Dundee to develop international student placements.

November 2022 was the first time that the University of Dundee School of Health Sciences has been involved with this and we look forward to welcoming students again in November 2023. The following images show some of the placement areas which includes a day spent in the School of Health Sciences.

Many thanks to our colleagues who kindly supported and facilitated these placements;

Lizanne Hamilton Smith NHS24, Karen Hamilton and Andy Nisbet from the Scottish Ambulance Service, Margaret Swankie from Dundee Health and Social Care Partnership and Carol Ann Pereira NHS Tayside.



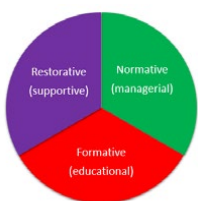
## Mentoring examples within Advanced Practice

The development and progression of advanced practice roles has led to the acquisition of skills and development to masters levels that also cross the four pillars of practice as outlined by NHS Education for Scotland (NES). Mentoring can provide a supportive environment for those developing towards or within these roles. This theme of mentoring was recently discussed at an advanced physiotherapy practice network meeting within Lothian. An overview of what mentoring means and three examples of mentoring in practice by advanced practitioners was presented:

1. Light touch mentoring programme
2. Mentoring an APP trainee scheme
3. Mentoring for newly appointed advanced practitioner

## Mentoring Overview

Mentorship, like clinical supervision, can include formative, restorative and normative components (Proctor 2008) (Figure 1). Developing skills and knowledge is a significant component but it's also important to consider the restorative element and the creation of a safe environment for someone to check in and deal with stress. This is more important than ever as we face extremely challenging times in healthcare. (Figure 1).



Adapted from Proctor 2008

Figure 1



Figure 2

The key elements of mentorship are vision, support and challenge. This relates closely to clinical practice, and how as physiotherapists we help patients to visualise short- and long-term goals, gently challenge negative beliefs and facilitate goal-orientated outcomes (Figure 2).

The key skills of a mentor are synonymous with those of a physiotherapist, including active listening, effective feedback, curious questioning and reflection. This links with the educational theory of Constructivism and active learning, which encourages the learner to construct their own ideas and knowledge, leading to deeper learning and understanding. Just like in clinical practice, we know that the didactic provision of information with the patient as a passive recipient doesn't always lead to change or understanding (Figure 3).



Figure 3

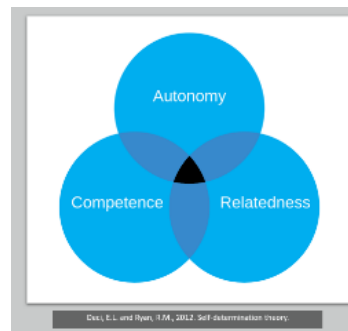


Figure 4

We can also consider this in terms of the self-determination theory, which suggests that people are motivated to grow and change by three fundamental psychological needs: autonomy (the need to feel in control and make our own choices), relatedness (the need to feel connected, understood and appreciated) and capability (the need to feel competent). We can see that this is very similar to the values of person-centred care, where we help to create safe environments and good relationships with patients, to challenge and support them to make well-informed decisions and to feel competent and capable (Figure 4).

Mentors shouldn't feel under pressure to always be educational teachers or know all the answers. Just like in clinical practice, it is ok to say, "I don't know", and this can help to build trust. Mentors can assume any role that feels natural in the relationship, including confidant, agony aunt, teacher and cheerleader, though it's important not to try to be a therapist. The most rewarding role to assume is that of co-learner so that you can become a partner in the process, problem-solve together and learn together.

Kate Purcell

Advanced Physiotherapy Practitioner, NHS Lothian [Kate.Purcell@nhslothian.scot.nhs.uk](mailto:Kate.Purcell@nhslothian.scot.nhs.uk)

Former lecturer and Fellow of the Higher Education Academy and private physiotherapy mentor at [www.physiotherapytutor.com](http://www.physiotherapytutor.com). Clinical lead mentor for the Physiotherapy Matters Clinical Mentoring Team.

## Light touch Mentoring to Programme

The clinical mentoring programme within the Integrated MSK Service is a light touch mentoring programme, adapted from the programme developed by Edinburgh Community Physiotherapy Service, to introduce the role of Advanced Practice Physiotherapy (APP) to band 6 and 7 musculoskeletal (MSK) physiotherapists within NHS Lothian. The purpose of the programme is to challenge and develop clinical reasoning skills and evidence-based reasoning, to discuss cases concisely, and to consider the patient journey including escalation considerations.

The first cohort was delivered between September 2021 until February 2022 with four MSK physiotherapists and four mentors, and cohort two commenced in November 2022. This is a six-month programme of up to four hours per month, therefore requiring less time commitment from MSK physiotherapists and mentors than the trainee post (see example below). The programme is structured as follows:

- **Month one:** the MSK physiotherapist shadows a clinic with their APP mentor
- **Months two:** the mentor observes the physiotherapist assessing one new patient followed by discussion and completion of reflective practice sheets. The physiotherapist independently assesses three further new patients and completes reflections, and discusses these cases with their mentor
- **Month three:** group discussion with all MSK physiotherapists and two mentors with the focus on succinct presentation of cases – 5-minute case presentation followed by 10-minute discussion
- **Month four:** as month two
- **Month five:** the physiotherapist compiles a portfolio of cases
- **Month six:** group discussion as month three and submission of portfolio to mentor

Participants completed a questionnaire at the beginning of the programme and on completion to identify confidence levels in various areas of clinical practice and to gain feedback on the programme. The results demonstrated improved confidence in all areas and overall feedback was very positive. Physiotherapists reported that participating in the programme positively influenced their practice within the four pillars:

- Clinical practice: improved clinical reasoning, person-centred care and shared decision-making, optimising the patient journey including escalation considerations and managing complexity
- Leadership: sharing learning within teams, having open and challenging conversations
- Facilitating learning: the mentoring programme provided a positive and supportive learning environment and they felt more open to receiving feedback and seeking out further peer review opportunities within their teams outwith the mentoring programme
- Research and development: improved knowledge of evidence base and application into practice, in-depth reflection and evaluation of practice

Feedback on how the programme could be improved included setting clearer expectations at the beginning on how to deliver case studies and develop portfolios.

Nina Chalmers Advanced Physiotherapy Practitioner, NHS Lothian [Nina.Chalmers@nhslothian.scot.nhs.uk](mailto:Nina.Chalmers@nhslothian.scot.nhs.uk)

## Mentoring an APP Trainee Scheme

This scheme was developed in collaboration with MSK Physiotherapy services across NHS Lothian and has been running for 7 years. The scheme offers an experienced, senior MSK Physiotherapy the opportunity to complete a trainee scheme with the MSK Pathways APP Service.

The duration and clinical focus of the scheme has varied over the years from 6 months to 1 year. Some trainees have focussed solely on the spinal speciality, whereas others have had opportunities across spinal and peripheral specialities. The trainee progresses through clinical delivery at a pace and extent suitable to their abilities, and the length of the program (Figure 5).

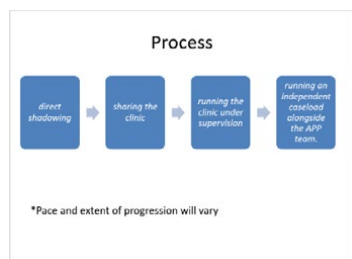


Figure 5

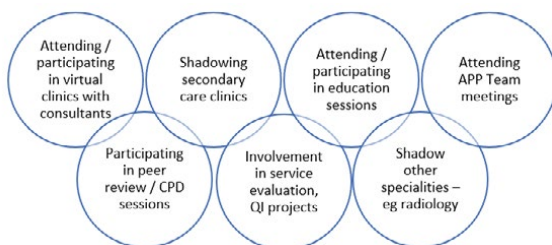


Figure 6

Leadership	Facilitation of Learning
Evidence a positive impact of non-occupancy leadership qualities and behaviours	Role model exemplary facilitation and teaching skills and develop those skills in others
Role model highly developed verbal, non-verbal and written communication skills	Lead on strategies that enable effective collective practice
Discuss how feedback is used by the organization to positively improve services	Act as an experienced supervisor, mentor, facilitator and support others to take on these roles
Promote a culture of improvement to enable concerns to be raised, addressed and/or responsibly escalated	Develop and facilitate the use of educational materials for students, staff and service users
Lead innovation and quality improvement and promote involvement of others	Develop, lead and support teaching, supervision and assessment skills in others

Figure 7

Drivers behind this scheme included:

1. Creating career development opportunities for MSK Physiotherapists. To provide the MSK Physio with an opportunity to explore APP working, and gain experience of it without changing roles permanently.
2. Contributing to APP workforce planning. This provides workforce development opportunities - specialist roles, with considerable training requirements.
3. Contributing to succession planning.

Overall, this scheme has been well received and brings benefits to the various staff groups involved. Key learning from running this scheme include the importance of designating one key mentor per trainee, the benefits of having a robust trainee information pack, including details of the expectations and portfolio resources. Lastly, the importance of involving the trainee in the wide range of advanced practice activities, beyond immediate clinical work. Figure 6 below shows some of the activities all trainees are encouraged to complete.

Through this scheme, the trainee has the opportunity to develop skills, knowledge and behaviours at advanced practice level across all four pillars. Examples of how this could be mapped against the NMAHP Development Framework for level 7 Leadership and Facilitation of Learning pillars is detailed below (Figure 7). Career Framework ([scot.nhs.uk](http://scot.nhs.uk)).

Karen Outram, Advanced Physiotherapy Practitioner and MSK Pathways Lead, NHS Lothian  
[Karen.Outram@nhslothian.scot.nhs.uk](mailto:Karen.Outram@nhslothian.scot.nhs.uk)

## Mentoring for newly appointed advanced practitioners

Mentoring is an important component in the development of an advanced practitioner especially when new to the role of advanced practitioner. An opportunity arose to formalise this process with a new member of staff starting just shortly before the health pandemic. Normally mentoring would be based on an informal arrangement around joint working in clinic. However, the challenges of remote working made this difficult.

The format of mentoring was a 1:1, hour-long session via MS teams. We used a mentee-driven programme via an open-style approach utilising facilitation and coaching styles. To formalise the programme, we developed a mentoring guide to aid conversations along with a checklist on the operational components of the role and a way to record actions and goals. We also used the National Education Scotland (NES) mentoring handbook and personal log.

The structure of the sessions (Figure 8) focused initially on the operational processes and procedures and the wider clinical components (clinical supervision was provided in addition to these sessions). The sessions were roughly monthly, moving to every 2 to 3 months with the focus on developing other areas of the pillars such as leadership, facilitating learning and communication styles. This moved to more focus on specific projects and developing into a leadership position. Overall, we did 9 sessions over a year and a half and have now moved to more ad hoc with a focus on one very specific topic. The sessions always acted as a focus on wellbeing of both mentee and mentor and as an important check-in, especially with the development of more remote working.

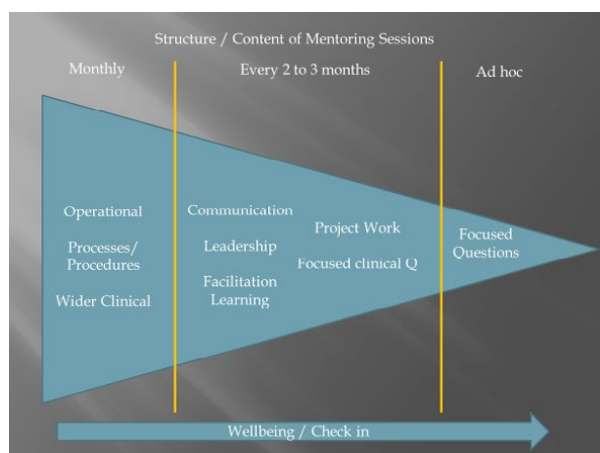


Figure 8. Structure and Content of Sessions

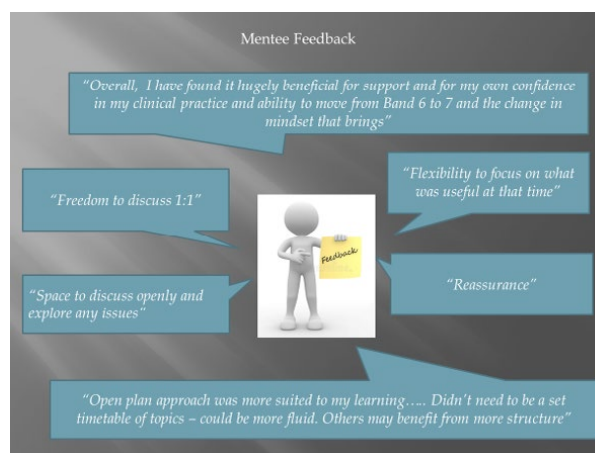


Figure 9

Feedback from the mentee (Figure 9) was that open plan sessions allowed freedom to discuss issues that were pertinent at the time, although other mentees may prefer more structure. Overall, they found it hugely supportive in developing confidence in their clinical practice ability with the move from experienced physiotherapist to advanced practitioner and with the change in mindset that advanced practice brings. They welcomed this support through the development and learning in the first year or two in the role.

From a mentor perspective (Figure 10) the sessions gave a different perspective on how things can be done, and how problems can be tackled from different viewpoints. It provides a great way to self-reflect on your development and journey and to know your strengths and is a rewarding experience to see someone develop.

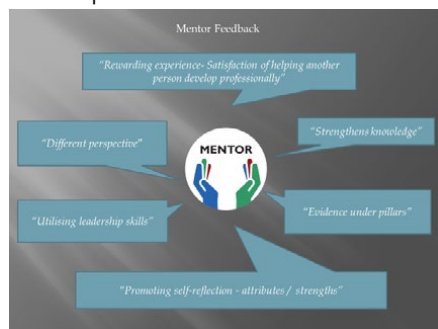


Figure 10. Benefits for Mentor

Documenting the sessions as a mentor also helped to strengthen evidence of working across the pillars of practice especially facilitation of learning and leadership and provide evidence of level 7 knowledge, skills and behaviours (Figure 7).

Gavin Ritch Advanced Physiotherapy Practitioner and Chair of Lothian Advanced Physiotherapy Practitioner Network NHS Lothian [Gavin.Ritch@nhslothian.scot.nhs.uk](mailto:Gavin.Ritch@nhslothian.scot.nhs.uk)





## Advancing Care, Advancing Practice

Our conference in November 2022 during Advanced Practice Week, saw us delivering a hybrid event after 2 years of virtual only. We had a free to join research day on MS Teams, followed by a face-to-face event at Beancross farm near Falkirk for £50 per person with virtual access through a live stream feed (£30 per person).

The research day was well attended with 123 registered delegates. This allowed advanced practice colleagues across Scotland to share their work and learn from each other. There were 3 invited speakers who delivered diverse sessions on the advanced practice research landscape, support with undertaking research, and a doctoral studies journey. The 17 delegate presentations were a mixture of snappy 5-minute poster pitches and 20-minute short presentations, with the voted prize winner being Dianne Brands and colleagues from the Ambulatory Care Team in Aberdeen on the redesign of their service. The evaluation was substantially positive with delegates giving an average rating of 4.6 out of 5 and a clear appetite for similar events in the future.

The face-to-face day had a brilliant variety of sessions provided by leading experts, with access to 2 optional break-out sessions, and culminated in the announcement of the ACAP prizes and awards. All sessions were rated either excellent or good by the majority of the 83 delegates with the venue and lunch also receiving substantially favourable reviews.



### Key elements of the programme:

Holistic Resilience with Patricia Armstrong: Leading to change

Long COVID with Dr John Harden: Deputy National Clinical Director & Christopher Doyle: Senior Policy Manager Scottish Government

Realistic Medicine with Dr Jude Marshall: NHS GGC

Non-Medical Authorisation of Blood Products with Andy King-Venables: Scottish National Blood Transfusion Service

NES Adults with Incapacity Course. Overview from Jane Harris from NES and first cohort, Followed by presentations from ANPs: Moira Bradley, NHS GGC & Wendy Downie, NHS Grampian

Care Homes: The National Framework, with Dr Paul Baughan

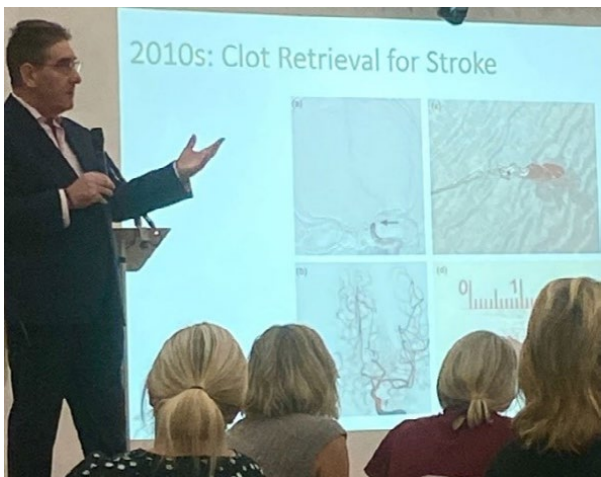
Caring: Human Factors with Dr Graham Nimmo: University of Edinburgh

Breakout sessions included: QI with Elaine Hamilton; Back Pain MSK Nick Kinniburgh; Paediatrics with Claire Colvine; Breast exam Deborah McCrone.

**Poster prizes were awarded:**

People's Choice - Christine Haining - "Homegrown ANPs"

Judges Choice - Cindy Tsang - "Think 5 before 5pm"



The inspiration awards went to: Team - DGH ANPs, and the Individual award - Sarah McCann.



Please join us for our next conference later this year. Dates and provisional programme will be shared widely through advanced practice networks and on online/social media:



Dr Sharon Oswald (Chair)  
Karen Kindness (Comms)

## Advanced Practice Conferences

This year UK Advanced Practice week is November 12-18, 2023. Please keep an eye out for conferences and events that will be organised during this week. The editorial team are interested in reporting on any updates in the next issue of this newsletter. Please contact one of the editorial team if you would like to contribute to a future newsletter with an update.

## Save the Date!

The Association of Advanced Practice Educators UK will hold their annual virtual conference on Friday 23rd June 2023. The theme for the conference is education. Full programme detail will be available at: AAPE UK The conference will be recorded and available on YouTube after the event. Please consider submitting a poster!



*"The Evolving Role of Education in Advancing Practice"*

**Save the Date!**

AAPE UK Annual Conference & AGM  
Friday 23rd June 2023

**AAPEUK**   
Association Of Advanced Practice Educators

Proudly sponsored by  
 **HALLAM MEDICAL**

Faculty and Students presentations

## International Collaboration Conference Event

12th June 2023 | 8am Central Time | 2pm GMT (Scotland & Wales) UK | 3pm Rotterdam

### Save the Date!

A virtual international conference is being organised for Monday 12th June 2023, 1400. This event is the result of a collaboration of faculty and students from Rotterdam University Institute of Healthcare, Swansea University, the University of Texas Health Science Center, Texas Women's University, the

University of Minnesota and the University of Dundee. The CPD event will include presentations from faculty and students and be available on zoom. Anyone interested in attending can contact [c.m.j.henderson@dundee.ac.uk](mailto:c.m.j.henderson@dundee.ac.uk)





## Evidence, Research and Development

This publication in PLoS ONE provides detail of an ongoing systematic review of reviews looking at identifying current gaps in advanced practice nursing research globally: [A global perspective of advanced practice nursing research: A review of systematic reviews protocol](#)

This review has a nursing focus, and the team are keen to identify how many APNs are involved with undertaking the systematic reviews we are reviewing. Further progress updates will follow.

### New Journal!

The International Journal for Advancing Practice is a new quarterly journal that focuses on advanced practitioners across a range of healthcare-related specialties. The IJAP is the first journal of its kind to address the needs, focus and range of advanced practitioners on a truly international scale. Search for the journal at <https://www.magonlineibrary.com/journal/ijap> to read more and submit research!

**INTERNATIONAL JOURNAL FOR**  
**Advancing Practice**

**CALL FOR PAPERS**

Is there a subject you would like to see covered in the *International Journal for Advancing Practice*?

The journal invites submissions on all aspects of advancing practice from all specialties. We would particularly welcome articles on **clinical practice, leadership and management, education, and research.**

If you have any queries or questions regarding submitting an article to the journal, please contact the Editor: [ijap@markallengroup.com](mailto:ijap@markallengroup.com)

[www.internationaljournalforadvancingpractice.com](http://www.internationaljournalforadvancingpractice.com)

# Introducing an Allied Health Professions Education fund to support the Transforming Roles programme: Evaluating the Impact one year on.

Authors: Elspeth Lee, Juliet Harvey, Jane Dudgeon and Jackie Todd  
NHS Greater Glasgow & Clyde (Practice Education, Practice Development, Learning and Education)

## Background

NHS Greater Glasgow & Clyde's (NHSGGC) AHP Director identified funding in 2021 to support Allied Health Professionals (AHP) advanced practitioners and those aspiring to be advanced practitioner AHPs to undertake MSc-level modules at Glasgow Caledonian University (GCU) in academic year 2021/22. This investment in AHP advanced practitioner development supports the current national NMAHP transforming roles agenda (NHS Education Scotland, 2020), links with our Quality Strategy and Learning and Development Strategic Framework (NHSGGC, 2019; NHSGGC, 2023) and is desired to support AHP professionals to be able to work competently in advanced roles (Brandenburg & Ward, 2022).

## Methodology

### Design

Senior Leaders agreed the need for Learning and Development at advanced practitioner roles and consulted with their teams as to what was required. They supported the formation of a Short Life Working Group (SLWG). The SLWG scoped the situation considering learning needs of AHPs, availability of opportunities, course content and what is provided by other professions and funding bodies. The funding, application and review process was developed and managed by the AHP education fund SLWG. A representative from each AHP profession was invited to join the group. An arrangement was made with GCU to provide the education. Ten modules were identified from the MSc Advanced Practice programme, based on AHPs' current learning needs, listed below:

- Prescribing for Healthcare Practitioners
- Supporting Anticipatory Care for Long Term Conditions
- Advanced Assessment & Management of Injury
- Applied Pathophysiology for Advancing Professional Practice
- Social Action Approaches in Public Health
- Advanced Leadership for Health & Social Care Practitioners
- Advanced Research Methods
- Clinical Investigations
- Advancing Professional Practice
- Recognition of Prior Learning

## Assessment of Impact

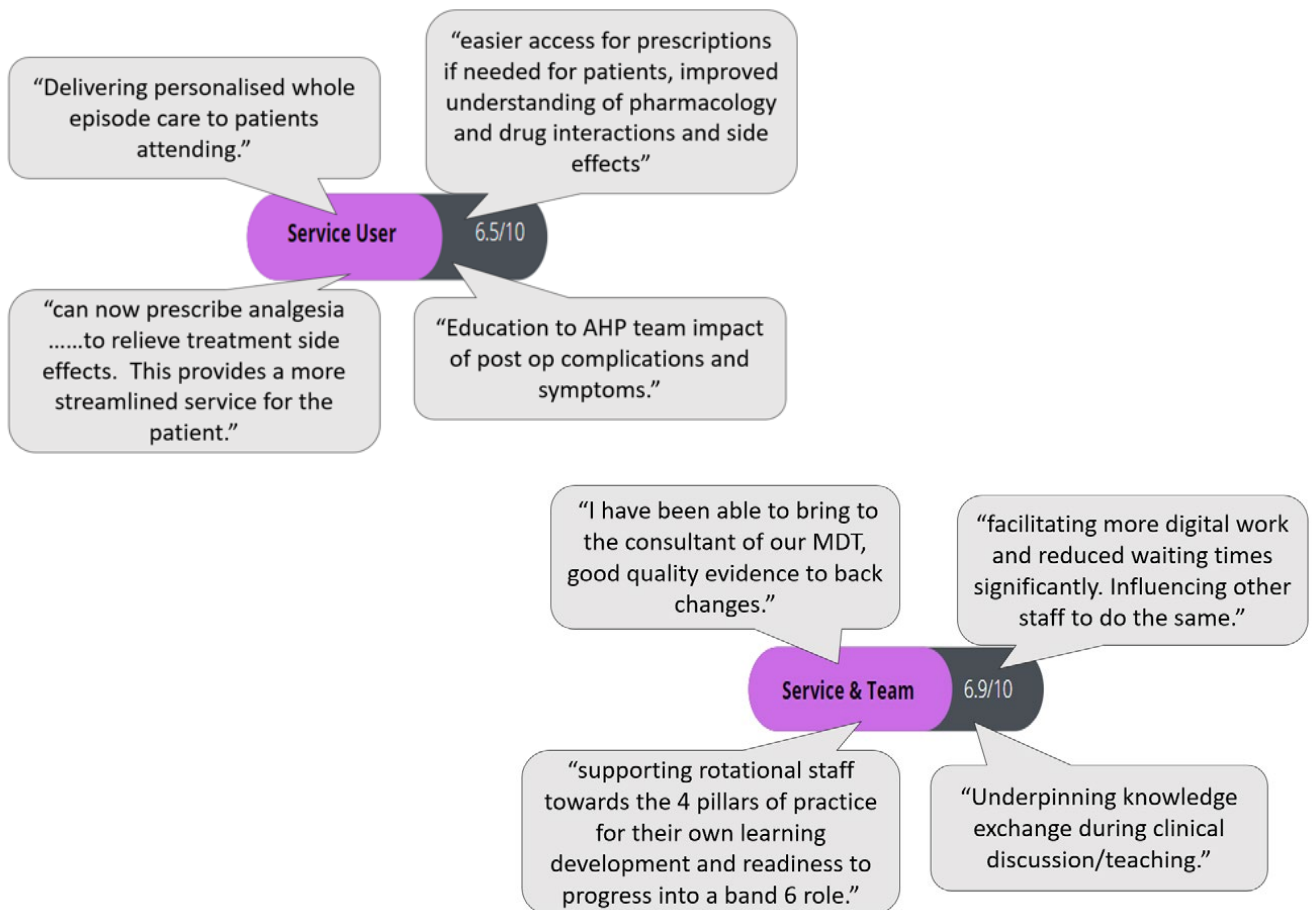
To gain an understanding of the impact of undertaking these modules, a focus group was conducted after the first trimester of the programme. This was in addition to a comprehensive feedback survey sent three months after completion of each module (trimester A and trimester B year).

### 1) Focus Group

Data was gathered to understand the value of funding being provided via the AHP education fund via focus group. This was undertaken to gather data from a sample of the AHPs who completed a module in trimester A (September –December 2021). The focus group was facilitated by an AHP Practice Education Lead and a Practice Development Physiotherapist who were members of the NHSGGC AHP Education Fund SLWG. The focus group had five participants from four AHP professions. This was supplemented by a case study and comments on the impact sent by three AHPs from two professions. The focus group followed recommendations by the National Council for Voluntary Organisations (2021). Mentimeter and MS WhiteBoard supported data gathering and share back of the collective information as definition was gained. The sessions started with introductions, agreement of terms and quantitative data collection using a 10-point scale covering Advance Practice roles and the overarching impression of impact on them personally, and for service users and services/teams. This was followed by a deeper investigation into each of the areas, quiet reflection time, then documentation of thoughts on the WhiteBoard, followed by a discussion of themes and story sharing for examples. The focus group also made recommendations regarding module provision for the AHP Education Fund SLWG to consider.



## Impact on the service users, service and team



## Emergent themes of impact on the service users, service and team

**Service User Engagement:** Knowledge of how to involve service users in data gathering has enabled service user– centred design of services

**Advocacy:** Increased knowledge of health and social care policy has led to greater advocacy in supporting service users' rights

**Perspective:** Enabled a broader perspective of service provision across health and social care. More structured vision of the future of therapy provision

**Care Delivery:** Delivery of better care that is holistic, personalised and patient centred. Delivery of relevant care autonomously, right time, right place for whole episode of care with provision of quicker evidence-based decision making. Increased use of digital technology to support care delivery

**Reduce Patient Journey and Duplication:** Quicker patient access to assessment and treatment. More efficient use of professionals' time

**Learning & Development:** Support colleagues (with own and other professionals) by sharing learning, reflection and promoting discussion about current evidence and relevant policies to inform service delivery – IST, Journal Club, Presentation, Education Sessions. Encouraging others to undertake MSc level study and motivated to undertake further study. Increased enthusiasm for sharing knowledge by supporting students for example supporting practice-based learning, supervision of research student (to PhD)

**Collaboration:** Clinical discussion & collaboration activity

**Quality Improvement:** Skills to implement change enabled introduction of new treatment options and their impact to be evaluated. Improved quality and robustness with data gathering with evidence generation process. Able to evaluate better – critical evaluation of evidence, examination of effectiveness of existing or new interventions

**Research:** More knowledge on research methods, leading on research and negotiating dedicated time to lead multi-professional team research activity

**Funding:** Apply for funding to support future service development, research projects

**Respect:** Increased respect from colleagues

## Personal impact of undertaking the modules



## Emergent themes of personal impact of undertaking the modules

### Increased Confidence/Competence in:

- Continuing learning at an advanced level (including literature search/critique skills).
- Undertaking research/applying learning
- Clinical knowledge and putting it into practice to make complex clinical decisions (critical thinking skills)
- Working with other professions. Assertive/proactive engagement when seeking further assessments, sharing concerns/feeding back to colleagues and problem-solving
- More confidence in being an AHP leader with impact on leading data collection, entrusted with more responsibility within the multi-professional team and leading service redesign

Impact on Clinical Practice: Enhanced holistic approach - Improved clinical knowledge and understanding the impact of related aspects/issues on the patient as a whole - supporting enhanced person-centred assessments, care planning and treatment for example, leading anticipatory care planning conversations and prescribing.

### Career Progression/Development:

- Better placed to apply for and secure promoted posts and confidence to do so (learning will contribute to career progression)
- AHPs undertaking the modules have moved to promoted posts within the board and one out with the board
- Increased understanding of four pillars of practice and NHS Education Scotland (NES) resources

### Motivation:

- To undertake research in the future and put it into practice
- Reignited love of learning and putting it into practice
- More likely to get involved in service-improvement in future
- Motivation to engage in further learning, evidence-based practice
- Quality improvement and make changes to existing practice/service
- Sense of achievement



## Challenges identified by respondents pertinent to NHSGGC

- Lack of and inequity in provision of study leave
- Vast amount of work required in undertaking an MSc module was not anticipated- applicants would benefit from information on notional amount of study time required
- Stressful applying for AHP Education funding due to timescales
- Managers would have benefitted from details of eligibility for funding
- Investment in employees- would be beneficial to have a stipulation of remaining within the board following study
- Unable to implement new skills and knowledge due to clinical pressure
- Range of modules available could be broader

## Conclusion & Discussion

Funding can be a barrier for AHP staff accessing education opportunities once in employment (Haywood et al, 2012, Kumar, 2013) yet research suggests that there is a direct correlation between workplace learning and job satisfaction in the NHS (Iliopoulos et al, 2018).

The introduction of funded opportunities across NHSGGC for AHP advanced practitioners (AHP APs), aspiring AHP APs in 2021/22, to support transforming roles, was well received and had a positive impact on individuals, service users, teams and services. The modules supported the learning and development of successful applicants, benefiting not only their confidence, knowledge and skills, but also supporting career progression, increasing motivation at work and enhancing patient care. This concurs with findings in the literature (Anderson et al, 2021).

Whilst the impact data showed many positive benefits, data also showed that variance in the amount of study leave granted, tight timeframes between the module application process opening and closing, and the significant time investment required to complete a module, were all challenges identified by applicants to the fund. Feedback also identified that some groups of staff would like the module choice to be broadened. Further funding has been secured for 2022/23. This funding will continue to support registered staff and will also be used to support the learning and development of AHP Healthcare Support Workers. The SLWG are scoping other Higher Education Institutions to establish opportunities to meet these learning needs. A guidance document on study leave is currently being developed to help address the current variation in study leave allocation.

It is clear from the impact data gathered one year on that ongoing investment is required to continue to support staff access funded learning and development opportunities, supporting the transforming roles agenda and to meet the changing health needs of our patient population. Work will continue to try to establish a permanent fund, in line with what is available to nursing and midwifery staff across NHSGGC.

**Acknowledgments** - the authors would like to acknowledge the contributions from all members of the AHP Education Fund SLWG, AHP Senior Leaders and Fiona Smith, AHP Director in NHSGGC.

## References

Anderson, M., et al. (2021). Securing a sustainable and fit-for-purpose UK health and Care workforce. *Health Policy* 397: 10288, pp1992–2111. Available from: [https://doi.org/10.1016/S0140-6736\(21\)00231-2](https://doi.org/10.1016/S0140-6736(21)00231-2)

Brandenburg C & Ward EC (2022) "There hasn't been a career structure to step into": a qualitative study on perceptions of allied health clinician researcher careers. *Health Res Policy Syst.* 2022 Jan 9;20(1):6. Available from Doi: [10.1186/s12961-021-00801-2](https://doi.org/10.1186/s12961-021-00801-2)

Haywood, H., Pain, H., Ryan, S. and Adams, J. (2013). The Continuing Professional Development for Nurses and Allied Health Professionals Working Within Musculoskeletal Services: A National UK Survey. *Musculoskeletal Care.* 11: 63–70. Available from <https://doi.org/10.1002/msc.1032>

Iliopoulos, E., Morrissey, N., Baryeh, K., Polyzois, I. (2018). Correlation between workplace learning and job satisfaction of NHS healthcare professionals. *British Journal of Healthcare Management.* 24 (5). Available from: <https://doi.org/10.12968/bjhc.2018.24.5.226>

Kumar S. Making the Most of What You Have: Challenges and Opportunities from Funding Restrictions on Health Practitioners Professional Development (2013). *The Internet Journal of Allied Health Sciences and Practice.* 11(4), Article 3.

National Council for Voluntary Organisations (2021). Measuring your Impact: Focus groups. Available from: <https://www.ncvo.org.uk/help-and-guidance/strategy-and-impact/impact-evaluation/measuring-your-impact/focus-groups/#/>

NHS Education Scotland (2020). NMAHP transforming roles agenda. [online] [viewed 23rd February] Available from: <https://www.nes.scot.nhs.uk/our-work/transforming-nmahp-roles/>

NHS Greater Glasgow & Clyde (2019) Quality Strategy: The Pursuit of Health Care Excellence 2019–2023 Available from: [190219-the-pursuit-of-healthcare-excellence-paper\\_low-res.pdf \(nhsggc.org.uk\)](https://www.nhs.uk/quality/190219-the-pursuit-of-healthcare-excellence-paper_low-res.pdf)

NHS Greater Glasgow & Clyde (2022) Learning & Development Strategic Framework, in press. Overview Available from: [335867 Robertson Dudgeon Learning Development Strategy V02.mp4 \(vimeo.com\)](https://www.nhs.uk/learning-development/335867-Robertson-Dudgeon-Learning-Development-Strategy-V02.mp4)

## Student Research

What are the experiences, perceptions, and educational needs of registered nurses to allow them to provide nurse-led end-of-life care in a hospice in-patient setting? An extended literature review.

### ABSTRACT

**Background:** As the population ages there are increasing numbers of patients dying, which has seen end-of-life care become an international public health priority. There is consensus that dying patients receive the best end of life care in hospices. However, acute hospitals continue to care for the highest numbers of patients at the end-of-life. It is therefore paramount to explore new modalities of hospice care to widen access for patients at the end-of-life. A number of UK hospices have introduced nurse-led end-of-life care in-patient care, however the evidence to support this is unclear.

**Aim:** This literature review investigates the experiences and perceptions of hospice registered nurses to provide nurse-led end-of-life care in hospice in patient unit settings.

**Methods:** A search of CINAHL, Medline and Web of Science electronic databases and a hand search of the British Medical Journal of Support and Palliative Care (BMJ SPC) was conducted using key words and Boolean operators. Primary research articles published in English in peer-reviewed journals from 2000 – 2022 were included. Critical appraisal of the research studies was undertaken using the Critical Appraisal Skills Program (CASP) tool for qualitative studies, and a thematic analysis approach used to elicit common themes from the data.

**Results:** The literature search identified eight qualitative research studies. Data analysis and synthesis revealed four key themes relating to the perceptions and experiences of hospice registered nurses providing hospice in-patient end-of-life care. The themes of self-awareness, personal attributes and occupational identity, relational nursing, and existential suffering and spiritual care were found to be consistent with findings from the wider literature. However, research specific to nurse-led end-of-life hospice care was limited.

**Conclusion:** To deliver quality end of life care hospice nurses must possess the required personal attributes and be highly trained in self-awareness, relational nursing, and existential suffering and spiritual care. The evidence for nurse-led end of life hospice care is limited, and further research is required to inform clinical practice. The results do, however, provide fresh insights into the education and training needs of hospice nurses, which can be supported by self-awareness training, clinical supervision, and practice-based education and teaching by expert role models. The findings can also inform end-of-life care training and education for nurses and carers in other settings.

V Turnbull ANP



Queen Margaret  
University  
EDINBURGH

# Experiences of Advanced Nurse Practitioner (ANP) roles in mental health services in the United Kingdom (UK): A Scoping Review

**Background:** Increasing capacity and capability of the workforce are key drivers for the development of ANP roles and numbers of advanced practitioners are increasing in the UK. ANP role implementation in mental health services is new in many areas, therefore it is important to understand experiences of ANP role development to support effective implementation in practice.

**Aim:** To conduct a scoping review of existing literature, identifying key themes to explore experiences of ANP roles in mental health services in the UK, to enhance understanding of experiences of patients, carers and professionals in relation to role implementation.

**Methods:** Database searches were conducted using CINAHL, MEDLINE, Web of Science, PsychNet and Google Scholar. Limits were applied for peer-reviewed publications published in English between 2010-2022. Google and Google Scholar were searched for grey literature and the first five pages of results were reviewed for inclusion. Reference lists were handsearched for further relevant publications. Included publications were critically appraised using the Critical Appraisal Skills Programme (CASP) or Joanna Briggs Institute (JBI) appraisal tools dependent on study design.

**Results:** The search identified seven publications for inclusion. The PAGER (Patterns, Advances, Gaps, Evidence for Practice, Research Recommendations) framework was used to analyse and report findings. Key themes relate broadly to understanding of ANP role, opportunities, and challenges of role development.

**Conclusions:** ANP role introduction in mental health services offers opportunities to enhance provision of person-centred care and improve provision of physical healthcare, whilst offering development opportunities and improved career pathways for staff. Challenges to role development can be addressed by promoting role understanding amongst key stakeholders and ensuring development is led by service objectives. Future research on patient experience of ANPs in mental health services and professional development of ANPs, their learning needs and career pathways is necessary to support successful implementation in practice and succession planning for advanced roles in this specialty.

Shona Oliphant, Mental Health Advanced Nurse Practitioner, Older Adult CMHT, NHS Fife.



School of Health Sciences  
University of Dundee

 **NHS Scotland Academy**   
Accelerated training through collaboration

