

National Academy of Advanced Clinical Practice

The ACP (Paediatrics) Faculty

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National ACP framework



Health Education England



- A new comprehensive national framework
- Alignment with devolved nations
- Co-produced with system, academics, patients, services users and policy leads
- Multi-professional focus and support
- Collaboration with Medicine to support intelligent and collegiate development of roles
- Training and assessment rethought to build trust, understanding and respect

Advanced Clinical Practice

- What is it?
- Why do we need it?
- Drivers?

Multi-professional framework for advanced clinical practice in England



"New solutions are required to deliver healthcare to meet the changing needs of the population. This will need new ways of working, new roles and new behaviours."

What is it?

- Multi-professional framework for advanced clinical practice in England
- Published November 2017

Multi-professional framework for advanced clinical practice in England



"New solutions are required to deliver healthcare to meet the changing needs of the population. This will need new ways of working, new roles and new behaviours."

“Multi-professional work requires flexibility in attitude and behaviours and for professionals to value and respect the distinct contribution each professional makes.”

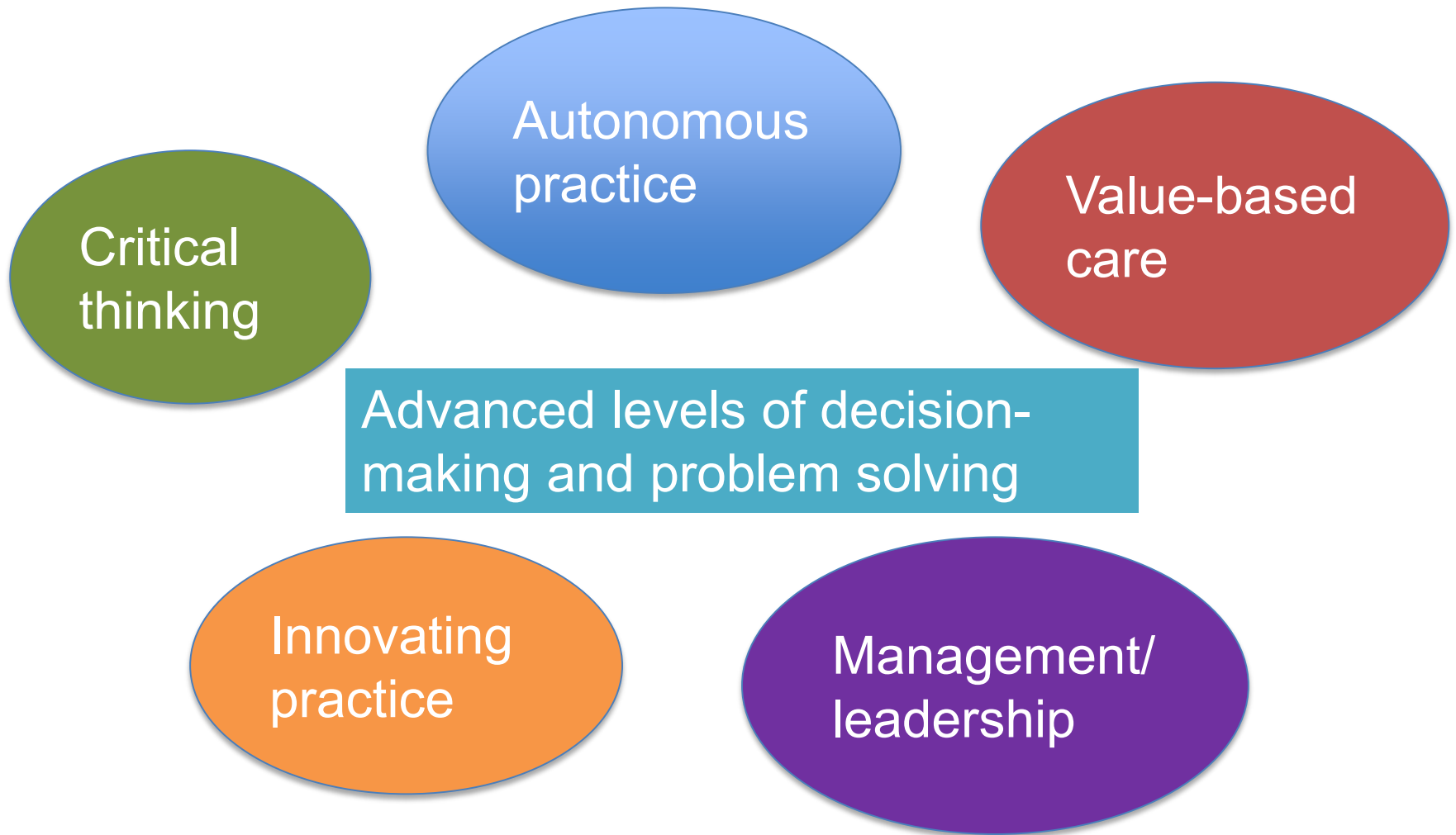
“New ways of working and delivering healthcare requires employers to ensure that clinicians have the professional development they need to adapt to changing circumstances. Clinicians need to see there are appropriate career pathways open to them to enable them to expand their contribution to healthcare and their personal job satisfaction.”

“Evidence consistently shows that multi-professional team working delivers better outcomes for patients and more effective and satisfying work for clinicians.

Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making.

This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence.

Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes.



Domains of ACP

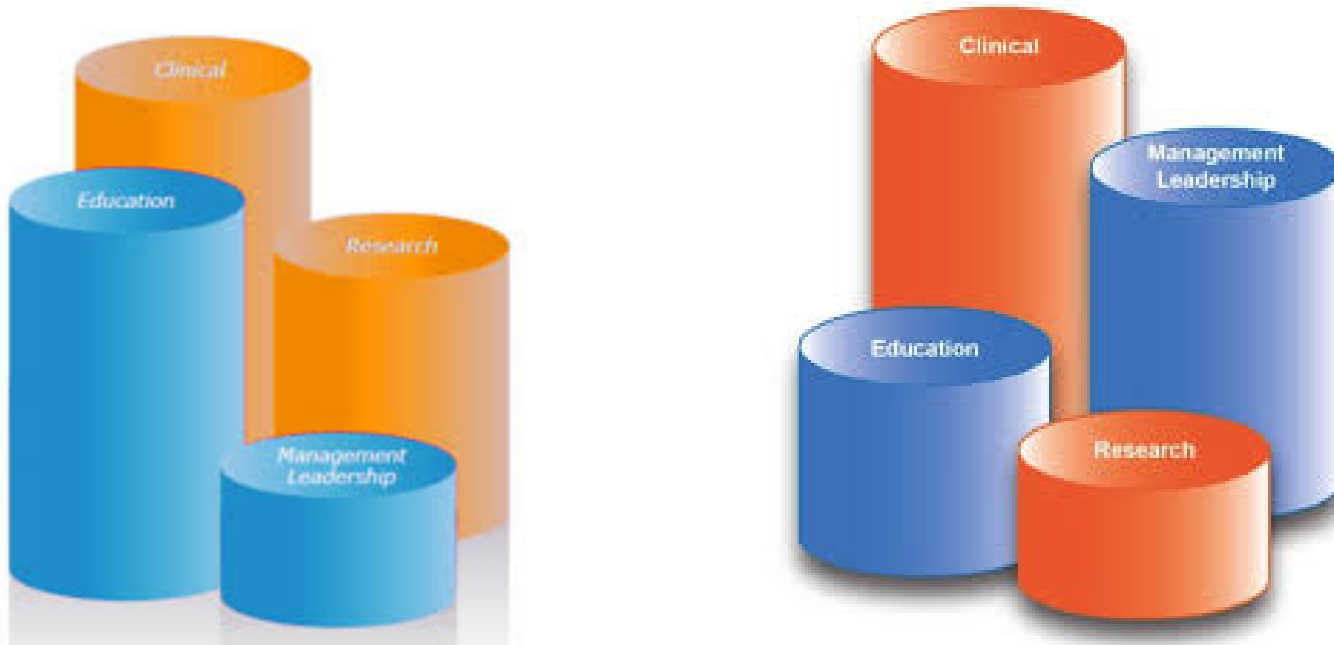
1. Clinical Practice
2. Leadership and Management
3. Education
4. Research

Multi-professional framework for
advanced clinical practice in England



"New solutions are required to deliver healthcare to meet the changing needs of the population. This will need new ways of working, new roles and new behaviours."

The Four Pillars – Domains of Advanced Clinical Practice



Clinical Practice

- 1. Health and care professionals working at the level of advanced clinical practice should be able to:
 - 1.1 Practise in compliance with their respective code of professional conduct and within their scope of practice, being responsible and accountable for their decisions, actions and omissions at this level of practice.
 - 1.2 Demonstrate a critical understanding of their broadened level of responsibility and autonomy and the limits of own competence and professional scope of practice, including when working with complexity, risk, uncertainty and incomplete information.
 - 1.3 Act on professional judgement about when to seek help, demonstrating critical reflection on own practice, self-awareness, emotional intelligence, and openness to change.

1. Clinical Practice

- 1. Health and care professionals working at the level of advanced clinical practice should be able to:
 - 1.11 Evidence the underpinning subject-specific competencies i.e. knowledge, skills and behaviours relevant to the role setting and scope, and demonstrate application of the capabilities to these, in an approach that is appropriate to the individual role, setting and scope.

2. Leadership and Management

- 2.5 Lead new practice and service redesign solutions in response to feedback, evaluation and need, working across boundaries and broadening sphere of influence.
- 2.6 Actively seek feedback and involvement from individuals, families, carers, communities and colleagues in the co-production of service improvements.
- 2.7 Critically apply advanced clinical expertise in appropriate facilitatory ways to provide consultancy across professional and service boundaries, influencing clinical practice to enhance quality, reduce unwarranted variation and promote the sharing and adoption of best practice

3. Education

- 3.1 Critically assess and address own learning needs, negotiating a personal development plan that reflects the breadth of ongoing professional development across the four pillars of advanced clinical practice.
- 3.2 Engage in self-directed learning, critically reflecting to maximise clinical skills and knowledge, as well as own potential to lead and develop both care and services.
- 3.3 Engage with, appraise and respond to individuals' motivation, development stage and capacity, working collaboratively to support health literacy and empower individuals to participate in decisions about their care

4. Research

- 4.3 Critically appraise and synthesise the outcome of relevant research, evaluation and audit, using the results to underpin own practice and to inform that of others.
- 4.4 Take a critical approach to identify gaps in the evidence base and its application to practice, alerting appropriate individuals and organisations to these and how they might be addressed in a safe and pragmatic way.
- 4.5 Actively identify potential need for further research to strengthen evidence for best practice. This may involve acting as an educator, leader, innovator and contributor to research activity and/or seeking out and applying for research funding.

Why do we need it?

- Practitioners working to their full potential and to optimise their contribution to meeting population and individuals', families' and carers' needs
- Workforce solutions that will enable individuals to work at or beyond their traditional scope of practice in ways that delivers better health and care solutions to the right person, by the right person at the right time

Workforce planning & governance

1. **Care pathway:** Consider where ACP roles can best be placed within health/care pathways to maximise their impact
2. **Role:** Define a clear purpose and objectives for ACP roles.
3. **Impact:** Consider and evaluate the impact of ACP roles on service user experience/outcomes and on service delivery and improvement objectives.
4. **Placement:** Ensure clarity about the service area the individuals will work within
5. **Support:** Ensure clear and unambiguous support for the role from the organisation/employer at all levels
6. **Succession:** Develop a succession plan for future workforce.

Accountability

1. Individual practitioners, as registered professionals, continue to hold professional responsibility and accountability for their practice.
2. Employers recognise and accept potential new responsibilities and greater accountability in relation to governance and support for these roles and associated level of practice.
3. Professional support arrangements, which recognise the nature of the role and the responsibilities involved must be explicit and developed.
4. Employers must ensure regular review and supervision is carried out by those who are appropriately qualified to do so.

So...

- Where do we go from here??
- Can Advanced Practice emerge organically and self regulate or be regulated?
- Who determines if a Practitioner meets the ACP framework requirements?
 - HEIs? Employers? Regulatory Bodies? Individuals? An independent body?

Academy for Advanced & Consultant Level Practice

- HEE have approved the formation of a National Academy for Advanced Practice
- Work is in progress



Academy for Advanced Practice

What the Academy intends to do (1)

Assure Safety and Public/Peer Confidence in the ACP Brand by:

- Maintaining a Directory that has an 'open to view' section of those individuals that have demonstrated that they meet and continue to meet the ACP/Consultant Framework requirements through:
 1. Successfully completing an Academy accredited programme
 2. Demonstrating compliance with the ACP/Consultant Framework through an Equivalence pathway
 3. Successfully completing a portfolio/equivalence route

Academy for Advanced Practice

What the Academy intends to do (2)

Assure Safety and Public/Peer Confidence in the ACP Brand by;

- Provide a consistently applied definition of ACP & Consultant
- Agree Educational Standards of Training for ACP programmes
- Accredited programmes that use the ACP Framework and that provide an award that has ACP in the title
- Provide Portfolio and Equivalence pathways to demonstrate that practitioners meet the ACP Framework requirements
- Quality Assure the processes
- Link with statutory regulator

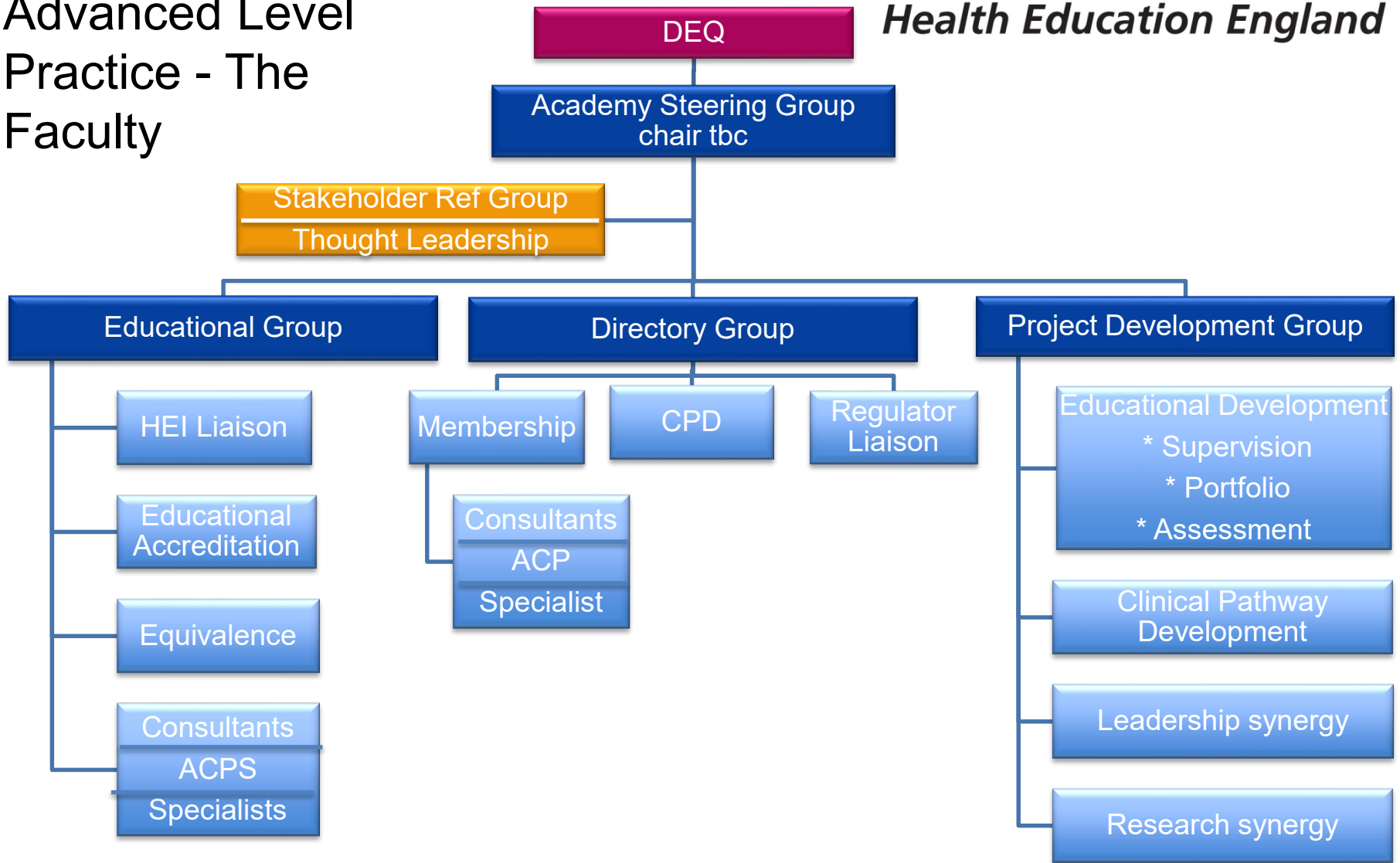
Academy for Advanced Practice

- It is **not** secondary registration
- It does **not** replace role of the Royal Colleges e.g. RCEM
- It does **not** replace the function of the statutory register
- It does not replace the role/function of professional bodies

HEE Academy of Advanced Level Practice - The Faculty



Health Education England



NHS Career Framework – level not pay-band

Health Education England

| | Ambulance service professions | Allied health professions | Dental care professions | Healthcare science | Health informatics | Management | Midwifery | Nursing | V |
|--|-------------------------------|--|-----------------------------|---|---|----------------------------------|--------------------------------|-------------------------------|---|
| 9 More senior staff | | Director of therapies | | Director of regional genetics services | Director of information management and technology | Director of human resources | Director of maternity services | Director of nursing | |
| 8 Consultant practitioners | | Consultant radiographer | | Consultant clinical scientist (medical physics) | Access, booking and choice manager | Maxillofacial laboratory manager | Consultant midwife | Nurse consultant in stroke | |
| 7 Advanced practitioners | | Specialist occupational therapist (team leader): teaching patients new ways of doing things to strengthen hand movement when dexterity has been lost | | Specialist respiratory physiologist | Head of communications | Head of accounts | Head of midwifery | District nurse (team manager) | H |
| 6 Senior practitioners/ specialist practitioners | Emergency care practitioner | Senior occupational therapist: teaching patients methods to conserve energy for daily living when stamina is reduced | Senior dental technologist | Senior biomedical scientist | Special projects manager | Project manager | Community midwife | Community psychiatric nurse | C |
| 5 Practitioners | Paramedic | Occupational therapist: giving advice on how the home environment can be changed to help patients cope with physical problems following an accident | Dental technician | Cardiac physiologist | Web developer | Payroll manager | Midwife | Neonatal nurse | C |
| 4 Assistant practitioners/ Associate practitioners | Control room duty officer | Trainee occupational therapist: under supervision, assessing the needs of patients with social problems | Assistant dental technician | Critical care technologist | Helpdesk adviser | General office manager | | Community care assistant | M |

NHS Career Framework – level not payband

Health Education England

| | Ambulance service professions | Allied health professions |
|--|-------------------------------|---|
| 9 More senior staff | | Director of therapies |
| 8 Consultant practitioners | | Consultant radiographer |
| 7 Advanced practitioners | | Specialist occupational therapist (team leader teaching patients ways of doing things to strengthen hand movement when dexterity has been affected) |
| 6 Senior practitioners/ specialist practitioners | Emergency care practitioner | Senior occupational therapist: teaching patients methods to conserve energy for daily living when stamina is reduced |
| 5 Practitioners | Paramedic | Occupational therapist: giving advice on how the home environment can be changed to help patients cope with physical problems following an accident |
| 4 Assistant practitioners/ Associate practitioners | Control room duty officer | Trainee occupational therapist: under supervision, assesses the needs of patients with social problems |

| |
|--|
| 8 Consultant practitioners |
| 7 Advanced practitioners |
| 6 Senior practitioners/ specialist practitioners |
| 5 Practitioners |

| | Management | Midwifery | Nursing |
|----------------------------------|--------------------------------|-------------------------------|---------|
| Director of human resources | Director of maternity services | Director of nursing | |
| Maxillofacial laboratory manager | Consultant midwife | Nurse consultant in stroke | |
| Head of accounts | Head of midwifery | District nurse (team manager) | |
| Project manager | Community midwife | Community psychiatric nurse | |
| Payroll manager | Midwife | Neonatal nurse | |
| General office manager | | Community care assistant | |

Senior Level Practice



Health Education England

Senior level practice involves the critical application of professional knowledge and skills, underpinned and informed by experience and learning gained through activity and professional development as a registered practitioner.

Its focus is on contributing to developing and delivering services within a particular sphere of practice; e.g. relating to a particular population/patient group, individuals presenting with a particular health condition(s), patient pathway, healthcare environment, or broad intervention approach. It can involve either the deepening of professional knowledge and skills in a particular, specialist area, or the broadening of professional knowledge and skills to meet needs across a wide service delivery area.

It is characterised by the capability and confidence to practise independently and as part of a multi-professional team; active engagement in service evaluation and improvement; and contributing to team leadership and others' learning.

Advanced Level Practice

Advanced level practice is delivered by experienced, registered practitioners who have progressed their knowledge, skills and behaviours beyond those required for senior level practice.

It is underpinned by a Master's level award, or equivalent evidence of learning, that encompasses the four pillars of clinical practice, leadership and management, education and research, and leads to the demonstration of core and area-specific capabilities relevant to scope of practice and role.

It is characterised by a high degree of autonomy in practice and the ability to make decisions independently. It is manifested in the ability to analyse complex problems in a range of contexts and settings; the synthesis and interpretation of information (including that is incomplete or ambiguous, and relating to the evidence base); the management of risk; and the formulation and progression of new approaches to service delivery to enhance people's experiences and outcomes of care.

Consultant Level Practice



Health Education England

Consultant level practice builds directly on the attributes of advanced level practice.

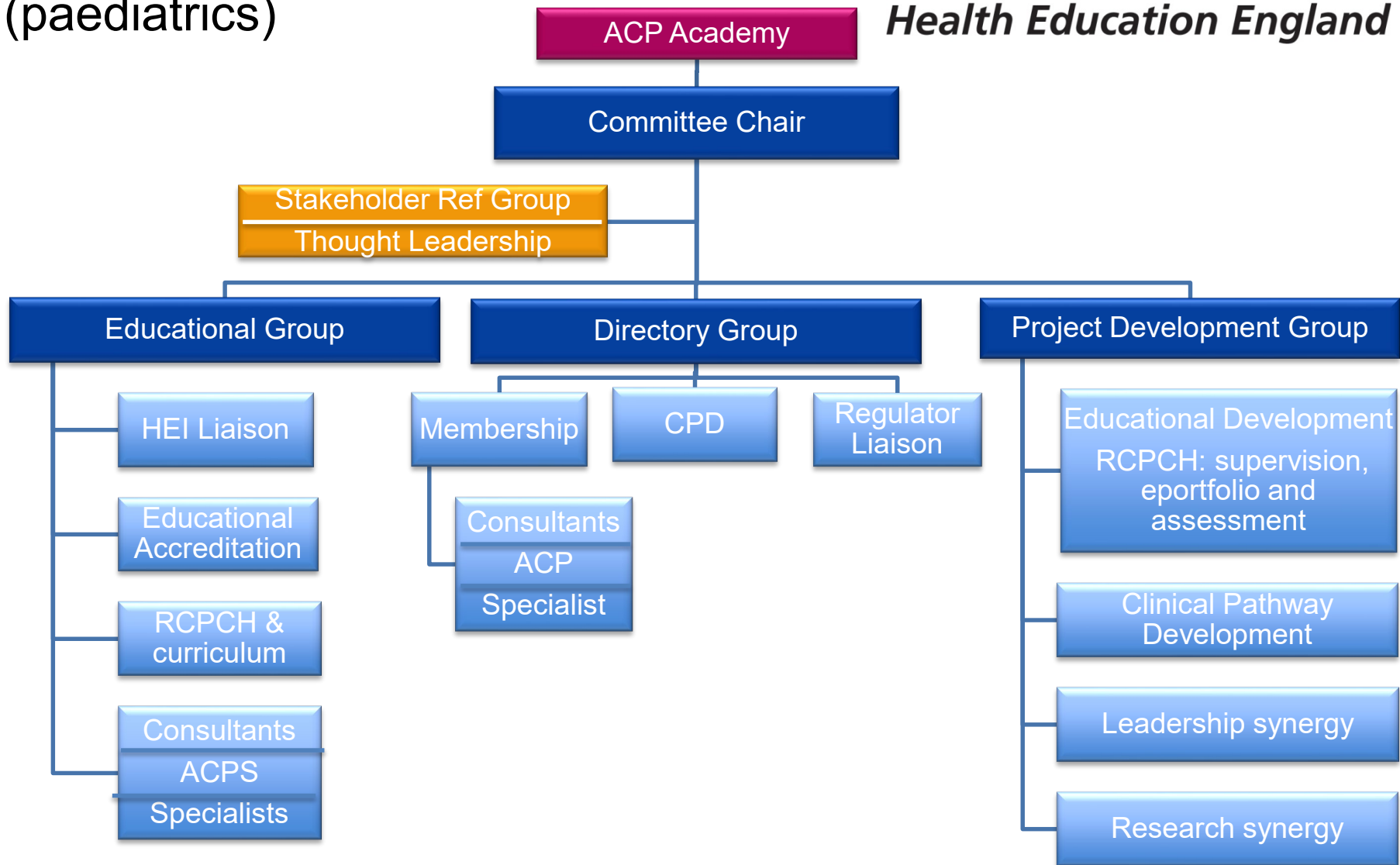
It is underpinned by doctoral-level learning (not necessarily a doctoral-level qualification) and spans the four pillars of practice.

It involves exercising a wide sphere of influence at local/regional, national and international levels, within and beyond the practitioner's profession, and that is founded on the practitioner's clinical expertise. It involves demonstrating and leading clinical excellence; exercising strategic leadership and initiating quality improvements and systems developments; facilitating others' learning and development; and contributing to knowledge creation, dissemination and implementation. It is characterised by the capacity to manage high levels of complexity, uncertainty, unpredictability and risk through critical thinking and problem-solving, and to initiate and lead innovative approaches at service and system levels to optimise people's experiences and outcomes of care.

HEE Faculty (paediatrics)



Health Education England



ACP Faculty (Paediatrics)

Generic ACP recognition by the academy

Specialist ACP recognition by the faculty

- Identifies the criteria by which specialty can be recognised on the directory
- Sets out individual subspecialty criteria (eg neonatology) which reflects scope of practice (modular approach)
- Recognises different pathways to support multi-professional entry
- Approves paediatric MSc programmes provided by HEIs
- Ultimately feeds into quality assurance process

RCPCH collaboration

ACP (paediatrics) curriculum development

- RCPCH expertise and support
- ACP (Paediatrics) MSc programmes: Faculty, RCPCH, HEIs and lead employers

ACP (paediatrics) Committee:

- overall structure: HEE (chair) and multi-professional representation
- RCPCH representation and support

ACP eportfolio (commissioned by HEE)

Educational supervision of ACP (Paediatrics) in training

Assessment of ACP (Paediatrics) in training

RCPCH Annual Conference

The ACP Academy and the new Faculty of ACP (Paediatrics)

Monday 13th May 2019

Lunchtime ACP faculty workshop

Tuesday 14th May 2019

Lunchtime ACP workforce workshop (PiMM)