

Advanced practice seminar 12 June 2017

Meeting report

The Council hosted an advanced practice seminar on 12 June bringing together members of the Council's advanced practice working group and three external speakers:

- John Clark, Health Education England
- Sam Foster, trailblazer lead for the advanced practice apprenticeship (England)
- Katrina Maclaine, Chair of the Association of Advanced Practice Educators (AAPE, UK-wide)

The event was led by Ruth Taylor, the Council's executive lead for workforce.

Over 20 members from across England, Wales and Scotland sent representatives to the meeting, most of whom were their HEI's lead for advanced practice programmes. Sally Gosling of the Chartered Society of Physiotherapy attended to represent the views of allied health professionals.

The presentations given by Sam Foster and Katrina Maclaine are available on our website.

The seminar gave members an opportunity to hear about policy developments, particularly in England, and to ask questions and contribute views.

A consultation on the advanced practice apprenticeship Standard (England) was launched on 13 June and will close on **25 July 2017**. Members are encouraged to respond to this consultation.

Introduction

Introducing the event, Ruth noted that advanced practice education is becoming increasingly important across the UK. Both Wales and Northern Ireland already have advanced practice frameworks. Scotland has an aspiration to develop an additional 500 advanced nurse practitioners over the next five years and has had an advanced practice toolkit since 2007. NHS Education Scotland is currently undertaking work to coordinate and commission post-registration education to meet Government targets. To help inform this work, the Council has recently completed a review for our members of the current provision of post-registration education in Scotland, including advanced practice.

In March's update to the Five Year Forward View, the NHS in England made a commitment to supporting new Advanced Clinical Practice nurse roles. It said:

“senior nurse roles are valuable in their own right, and also have been shown sometimes to offer a better alternative to medical locums and unstable Tier 1 hospital rotas. Training is typically service-based alongside an accredited university programme. HEE and NHS Improvement will publish a new national ACP framework, and deploy ACPs in trusts in the first instance where they can make a demonstrable impact in high priority areas such as A&E, cancer care, elective services or reducing locum costs by converting medical posts.”

Ruth noted that the exclusive focus in that document on nurse roles was unfortunate as we know how highly valued advanced practitioners are in the allied health professions.

Health Education England and NHS Improvement have been working on a national advanced practice framework. More recently, a trailblazer group, led by Sam Foster, has begun to work on the creation of an advanced practice apprenticeship. Initially this will be used only in England but it may ultimately become relevant elsewhere, depending on apprenticeship developments in the rest of the UK.

The national advanced practice framework and advanced practice apprenticeship are both intended to be relevant across nursing and the allied health professions.

Alongside these initiatives, the RCN's new credentialing offer may further drive the uptake of advanced practice education in nursing.

We know there are challenges facing advanced practice education: not least the difficulties releasing staff, budgetary challenges and funding cuts. As national initiatives develop, additional questions arise around duration and level of practice, recognition of prior learning, scope of the curriculum, degree of flexibility in course design and the role of universities.

National framework for advanced practice (England)

A national framework for advanced practice is due to be published this summer and will be circulated by the Council to members. The framework draws on similar work in the other UK nations. It aims to be multi-professional and is built around the four pillars of advanced practice. The framework will be pitched at MSc level, but will not prescribe a full MSc qualification. Over time, the framework may help to introduce more consistency in an environment where a huge number of advanced practice roles and job titles exist. It does not however aim to prevent local flexibility. The framework will be reviewed annually.

Health Education England recently conducted an advanced practice survey of HEIs. Results of this survey will be circulated to Council members when available.

Advanced practice apprenticeship developments

It is proposed that the advanced practice apprenticeship will result in the award of a full Masters degree. There has been a very high level of interest in the development of this apprenticeship. Two HEIs – Birmingham and London South Bank University are on the trailblazer group and are about to start working on the End Point Assessment plan. It has not been decided whether or not the EPA will be integrated.

The standard is intended to be used across healthcare professions so is intended to be generic with scope to include specific areas of clinical practice as appropriate.

The trailblazer is using different networks to consult more widely on the development of the standard. The Council and our working group on advanced practice is one such network.

A final standard is likely to be submitted to the Institute for Apprenticeships this October.

Association of Advanced Practice Educators (AAPE)

The Association of Advanced Practice Educators is involved in both the national framework and the trailblazer's apprenticeship development.

Katrina gave attendees an overview of advanced practice policy across the UK. Wales has opted for advanced practice resulting in a full MSc award but has found affordability a challenge. Advanced practice is being prioritised by the CNO in Northern Ireland and provided as a full MSc at Ulster university.

There is significant local variability across regions in England, which prompted the development of the national framework. However, it has become clear that the national framework cannot be prescriptive because of the demand for local determination. Medical colleges are involved in advanced practice discussions.

The AAPE is working on a paper on the principles of advanced practice education.

For advanced practice to thrive it is essential that high quality and credible academic staff are recruited and retained. HEIs can struggle to offer staff competitive pay and conditions. The infrastructure for teaching advanced practice needs to be scaled up and properly resourced.

HEIs have a role to play in talking to employers about advanced practice development, support and staff retention.

There is a risk that apprenticeship development will result in the end of alternative funding arrangements.

Points raised by members

- Employers will invest when they see the positive impact on patient care. More work needs to be done to highlight the good work done by advanced practitioners. Research is currently being commissioned on the impact of Masters level advanced practice (literature review and primary research).
- The main incentives for employers to invest in advanced practice is likely to be a reduction in medical locum costs. However, it is not easy to ensure that highly trained staff stay within sponsoring organisations.
- Over time the national framework will need to reflect the NMC's new pre-registration education standards, particularly regarding prescribing.
- To be of use multi-professionally, any prescribing element of the advanced practice framework should include the prescription of both treatments and medication.
- There is no protected title for advanced practitioners and nothing in the framework will be mandatory.
- Advanced practice is still not a registerable role. The NMC might be interested in regulating it in the future but this becomes more difficult if advanced practice jobs are multi-professional. The case for NMC regulation would become more compelling if more advanced practice fitness to practise cases were brought to the NMC.
- Members discussed advanced practice education level. There was no clear consensus on whether masters level study or a full masters award was more appropriate or practically feasible. This is a conversation that has also recently taken place in Scotland which has opted for a diploma rather than a full masters award (a position which has been challenged by Council of Deans of Health Scotland members).
- Mentorship and employer support is vital to the development of advanced practice.
- Members discussed apprenticeship requirements for formal English and maths Level 2 qualifications. It was felt that most people studying at advanced practice level would already have formal qualifications at this level but there could be some circumstances where this was not the case.
- The implications of RCN credentialing are not yet clear. There was some suggestion that some employers might want to recruit credentialed staff.
- It would be useful for someone to try to project numbers of advanced practice staff in England and understand likely levels of employer demand for the apprenticeship programme. Sam said that there were some good examples of workforce planning at STP level.

The Council's advanced practice group was keen to meet again in the future. Members will be sent links to the draft apprenticeship standard, the national framework and relevant work by AAPE. The Council's advanced practice working group is available as a reference group for the trailblazer's work, including the development of the standard and EPA arrangements.