

Supporting Advanced Practitioner Training

A guide to funding and processes

Faculty of Advancing Practice
East of England



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1.0 Introduction

NHS England's, 'Next Steps on the Five Year Forward View', (2017) clearly sets out the current challenges faced by the NHS, in terms of resources available to deliver safe, quality, effective care, and the patient and public demands and expectations in the way services are commissioned in the future. They signal how the health service needs to change, arguing for a more engaged relationship with people and communities to promote well-being and prevent ill-health. This requires workforce transformation and a consistent approach to the expansion of new roles and new ways of working, which includes the development of advanced practice roles as set out in the NHS long term plan, (2019) and the interim NHS people plan, (2019).

A key driver for the implementation of advanced practitioner roles is to enable practitioners to work at the top of their licence, reaching their full potential and optimising their contribution to meeting population, individuals', families', and carers' needs through different models of service delivery and multi-disciplinary working.

The East of England (EoE) Faculty of Advancing Practice has been established to lead and promote advanced practitioners as part of the workforce solutions that support service change and work with local systems to identify demand, commission high quality education and training and vitally to support the supervisory needs of learners. EoE Health Education England (HEE) acknowledges that by embracing the continued development of advanced practitioners across our organisations it will enable us to further improve the standards of care that we provide our patients by.

1. Building services and teams based on population need and developing advanced skills in areas to reflect local patient demand.
2. Support career development and subsequent retention of skilled professionals.
3. Strengthen multi-professional teams, which in turn improve safety, patient experience, productivity, and the working lives of clinicians.
4. Enables improved outcomes for patients through the development of research, technology and practice delivered through advanced practitioners.
5. Increase skill mix in multi-disciplinary teams.
6. Improve team working across traditional professional boundaries.
7. Allows advanced practitioners to strengthen leadership in clinical teams through a higher level of accountability and responsibility, and thereby leading to delivering more complex patient care.
8. Manage challenges associated with junior doctor rota gaps and reduce locum spend.
9. Help build the senior clinical decision making and partnership working in the multi-professional team.
10. Enabling holistic high-quality patient care delivery and improved outcomes.

2.0 What is Advanced Practice?

Advanced practitioners have been introduced successfully throughout the region and the numbers continue to grow due to service needs and drivers. Traditionally these roles have been implemented as a reactive service response, rather than with a planned and co-ordinated approach which has led to large variations in how organisations have deployed these roles and their scope and level of practice. In recognition of this, in 2017 HEE published the [Multi-professional framework for advanced clinical practice in England](#) which provides a clear definition of advanced practice.

‘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.

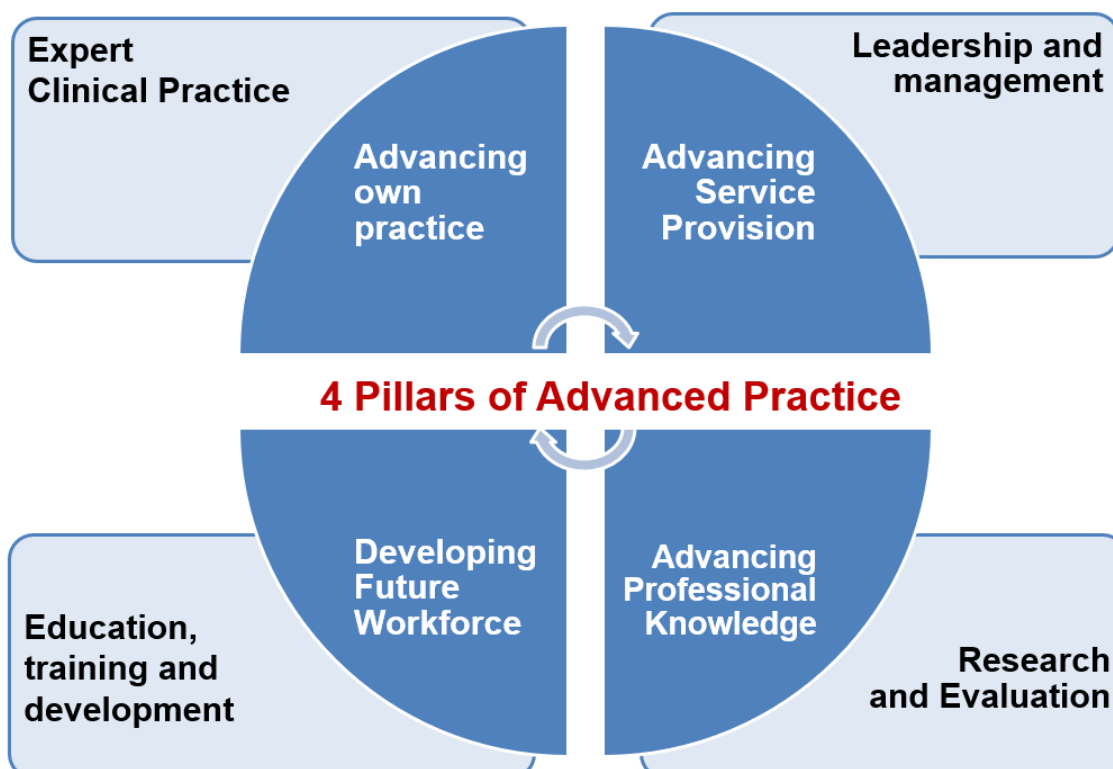
Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families, and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people’s experience and improve outcomes’.

It clearly defines that advanced practice should be delivered by an experienced health care professional, it is a level of practice not a job description, underpinned by master’s level education and which is characterised by breadth of capabilities and competencies, not depth of expertise or specialism. Key principles include safe, effective, autonomous decision making in complex and uncertain situations, within the practitioner’s own scope of practice.

All health and care professionals in the EoE working at the level of advanced practice should have developed their skills and knowledge to enable them to meet the minimum capabilities and competencies across all 4 pillars of advanced practice as outlined in the ‘multi-professional framework for advanced clinical practice’.



Advanced practice refers to a level of practice. Currently many titles are used for health and care professionals who work at this level such as 'Advanced Clinical Practitioner', 'Advanced Nurse Practitioner' and 'Advanced Practice Therapeutic Radiographer'. It is important to note that some professionals have been given the term 'advanced' in their role descriptor but may not be working at this level for various reasons. It is advised that organisations review their current advanced practice workforce and ensure that practitioners can map effectively against these capabilities. If gaps are identified such professionals should be supported, developed, and facilitated to work across all four pillars of advanced practice.



More information about Advanced Practice roles can be found here:

<https://www.hee.nhs.uk/our-work/advanced-clinical-practice/what-advanced-clinical-practice>.

3.0 Education and training

In the East of England, all universities offer Advanced Clinical Practice (ACP) pathways, and most universities offer an apprenticeship route. A list of universities in England with Advanced Clinical Practice apprenticeship pathways can be found here: <https://findapprenticeshiptraining.apprenticeships.education.gov.uk>.

Entry criteria

When advertising for and recruiting trainees, managers should ensure that they meet the university entry criteria for the ACP programmes. This may vary slightly between Higher Education Institutions (HEIs) but as a guide includes:

- A degree at 2:1 (there may be some exceptions, i.e., previous level 7 study)
- Working in a clinical area for a minimum of three years and is currently working in a relevant clinical area; and
- Must be able to attend university during term time, (university attendance may vary between HEIs).

The standard entry and qualification requirements for the apprenticeship ACP integrated degree include:

- Level 2 English and maths. Apprentices without level 2 English and maths will need to achieve this level prior to taking the end-point assessment. Some HEIs will provide modules that allow practitioners to achieve level 2 English and maths skills as part of the ACP degree, an example being the Open University.
- Hold a current registration with one of the statutory regulators of health and care professions

More information on the requirements of the ACP integrated degree can be found here <https://www.instituteforapprenticeships.org/apprenticeship-standards/advanced-clinical-practitioner-degree/>.

Managers must ensure that their trainee candidates meet the above criteria to successfully enrol on the ACP programme and receive HEE funding. In order to make sure a candidate is suitable prior to undertaking the training programme it is recommended that managers make a conditional offer subject to successfully gaining a place on the course. Although unlikely, universities can reject a candidate's application to a programme. Candidates should be encouraged to complete the university application as soon as a conditional offer is made.

Where a learner has prior experience or learning in Advanced Practice but does not have a master's degree, HEE can provide funding to support 'top-up' modules to a full master's degree via an APL/APEL (accreditation of prior learning/accreditation of prior experiential learning) route.

All EoE funding models can be found in the section [7.0 HEE Financial Support](#).

4.0 Workforce planning

The development of an advanced practitioner role should initially be driven by an analysis of service need and scrutiny of the capabilities and capacity of the existing and available workforce. Crucially, expectations regarding the level of practice and the specific capabilities required in the context must be seen as a key element linked to competence assessment.

It is advised that the following documents should be held by NHS organisation to provide an audit trail of local decision-making:

- Job description ([Appendix 1 Generic AP Job Description](#)) and rationale / business case for the post.
- Matching or locally evaluated summary report for the post.
- Local record of those posts for which the use of the advanced practice title is approved by the Trust board.
- Nature and number of advanced practice posts to be reflected in the Trust/ organisation workforce plan.
- Evidence that appropriate clinical and educational supervisors have been identified to support the advanced practitioners. (HEE guidance around workplace supervision for Advanced Clinical Practice roles can be found here <https://www.hee.nhs.uk/workplace-supervision-advanced-clinical-practice.>)

Key indicators that should be evidenced in a robust business case:

- What outcomes are expected from the advanced practice role?
- When will these outcomes be achieved and how will these be measured pre and post implementation?
- What risks and unintended consequences might there be to the introduction of this role and how may they be mitigated against?
- What resources and support are required for role development (clearly include any work based and educational supervision requirements) and succession planning?
- Is workforce optimised to ensure clinical and financial benefits are maximised?
- How will on-going competence and capability be reviewed and enabled?
- What reporting and line management structure will be in place?
- What processes will identify gaps in performance and/ or shortfalls in implementation and how will these be addressed?
- Has a quality assurance model been considered to measure this e.g., CQC 5 key lines of enquiry which will support inspection?

It is advised that employing organisations who currently have, or are considering Advanced Practice roles undertake the **Advancing Practice Readiness Checklist** ([Appendix 2](#)), and access HEE / E-learning for health [Advanced Practice Toolkit](#) to help with commissioning and business cases for new posts.

5.0 Recruitment

The recruitment process for trainee / advanced practitioner posts should be robust and evidence supports that the success of advanced practitioner roles is synonymous with a candidate with the right attitude.

An example Job description and role specification criteria can be found in ([Appendix 1 Generic AP Job Description](#))

*Any practitioner with limited or questionable degree level study will require discussion with the Higher Educational Institute to assess suitability to study at master's level. Apprenticeship requirements also state the need for level 2 (GCSE or equivalent) maths and English.

6.0 Professional registration and regulation

All Advanced Practitioners will remain under the regulation of their professional bodies and must continue to comply with the relevant standards of proficiency.

The Centre for Advancing Practice will also maintain a public directory of individuals who have completed either a Centre accredited advanced practice programme or is able to evidence that their education and clinical training maps against the Multi professional advanced practice framework.

Within the EoE it is expected that all Advanced Practitioners will be working towards or be on the public register. This will enable organisations to clearly demonstrate that all advanced practitioners are working at and meet the national minimal level of practice therefore ensuring quality of care and patient safety.

Practitioners can gain access onto the directory via the following routes.

- Undertaking an accredited ACP MSc programme
- Undertaking the Supported Portfolio route*
- Undertaking the independent Portfolio route*

*The portfolio route is still in development and should be available to practitioners in the Autumn of 2021, updates can be found on the Centers website, <https://advanced-practice.hee.nhs.uk/welcome/>

7.0 HEE Financial support

Employers can apply to HEE East of England in advance of an upcoming finance year to receive funded Advanced Clinical Practice training places at Higher Education institutions (HEIs) with HEE accredited courses or whose courses align to the four pillars outlined in the Advanced Clinical Practice framework ([see section 2.0 What is advanced clinical practice?](#)).

An indicative commissioning timeline can be found in [Appendix 3](#). HEE demand scoping information will be sent to organisations via their non-medical education

leads, directors of nursing, heads/directors of midwifery and advanced practice leads as well as ICS workforce leads, with instructions on how to apply.

HEE East of England currently funds Advanced Clinical Practice training places via two models: full MSc courses and top-ups to a full MSc. Advanced Critical Care practitioners and Surgical Care Practitioner training will also be funded. **Please note, these funding models and the rates applied to them are subject to the outcome of the national education funding reform and may change after the publication of this document.**

Access to HEE funding for Advanced Clinical Practice training places is conditional and employers are not guaranteed receipt of funding through the act of applying to HEE, (see section [9.0 Organisational commitments](#) for more information).

Full MSc funding

Subject to the outcome of the national education reform, for learners starting courses between financial years 2021/22 and 2023/24, HEE East of England will be funding training grants for learners undertaking a full Advanced Clinical Practice course, both for standard MSc courses and apprenticeship degrees.

The training grant is a total of £18,000 per learner, which will be paid over 36 months (3 years) i.e., £6,000 per annum. Funding is paid out by HEE in monthly arrears from the month the course starts.

This funding will be directed to the employing organisation.

Organisations in receipt of training grants are required to use £2,600 of the £6,000 per annum funding for supervision. Remaining funding should be used for tuition fees and to ensure the infrastructure surrounding the learner which enables their supported learning in practice. Examples include:

- To enable regular clinical supervision between trainee and supervisor.
- To develop a local educational faculty for advanced clinical practice.
- To develop robust governance structures for the training, supervision, and development of advanced practitioner's posts.
- To develop in-house educational resources to support advanced practitioners' development.
- To enable trainees to attend and present at local/national conferences.
- To enable trainees to attend academic study days.

Surgical care practitioners

Subject to the outcome of the national education reform, for learners starting courses between financial years 2021/22 and 2023/24 a training grant is available at a total of £12,000 per learner, which will be paid over 24 months (2 years) i.e., £6,000 per annum which reflects the length of the training programme. Funding is paid out by HEE in monthly arrears from the month of course start.

Top-up to MSc funding

Top-up funding can also be applied for where an employer has learners without a full master's degree in Advanced Clinical Practice, but who have sufficient prior learning or experience against the four pillars outlined in the Advanced Clinical Practice framework to 'top-up' to a master's degree and can evidence this through the Recognition of Prior Learning (RPL) process (examples include APL and APEL (accreditation of prior learning/accreditation of prior experiential learning)). For example, top-up funding could be used where a learner has a postgraduate diploma in Advanced Clinical Practice but requires top-up to a full master's degree.

Top-up funding for Advanced Clinical Practice training places is a total of £4,400 for up to a total of 100 credits paid over 24 months (2 years) i.e., £2,125 per annum. Where a learner requires more than 100 credits to top-up to a master's degree, the learner or employer will need to pay the additional amount. HEE East of England also provides funding as part of the top-up model for an initial HEI learning needs assessment to assess the learner's prior experience and level 7 evidence at a one-off cost of £150.

This funding is directed to the allocated HEI by HEE on behalf of the employer, where the HEI is in the East of England. If the employer requires a funded place in a HEI outside of the East of England, HEE will transfer the course fee funding to the employer instead. Funding is paid out by HEE in monthly arrears from the month of course start.

HEE Portfolio route

The HEE portfolio route is currently in development, and it is anticipated that it will be available for practitioner to access from Autumn 2021.

The supported portfolio route is a *funded, time-limited approach* for *experienced NHS clinicians*, who believe they have a portfolio evidencing 'equivalence' of level 7 educational attainment/experience against all 4 pillars of advanced practice (i.e., clinical, research, education, leadership).

Individuals seeking the supported portfolio route may already have a clinical MSc or PGDip in Advanced Clinical Practice, but which may not map entirely to the Framework. These individuals, may, with appropriate support and specific, targeted interventions from a HEI, subsequently be able to demonstrate educational equivalence based on their knowledge and skills. *This route is intended to be more reflexive to the individual needs of these experienced clinicians* and provide value for money and equality of opportunity across professions, NHS sectors and specialties to access and register onto the Directory.

Once funding is available the EoE faculty will inform practitioner and organisations via the ICS Advancing Practice faculties on how to apply and the eligibility criteria.

Priority workforce funding

Subject to the outcome of the national education reform, from 2023/24 HEE EoE will also have the potential to allocate an annual higher rate of £10K, per learner

commencing Advanced Clinical Practice full MSc training (both standard MSc courses and apprenticeship degrees). This will be allocated at the discretion of the regional director with the aim of targeting areas of particular risk, including geographic challenges or specific speciality workforce challenges.

The higher annual training grant is a total of £30,000 per learner, which will be paid over 36 months (3 years) i.e., £10,000 per annum. Funding is paid out by HEE in monthly arrears from the month of course start.

8.0 Accessing apprenticeships

Employing organisations are encouraged to access Advanced Clinical Practice training for learners via an apprenticeship pathway where possible. Subject to the outcome of the national education reform, this will enable the organisation to receive the HEE training grant as well as accessing the apprenticeship levy to pay tuition fees.

In the East of England, most universities offer an apprenticeship route for Advanced Clinical Practice. A list of universities in England with Advanced Clinical Practice apprenticeship pathways can be found here

<https://findapprenticeshiptraining.apprenticeships.education.gov.uk>.

Employers can utilise their apprenticeship levy to fund apprenticeship pathways. Employers engage directly with the university to access apprenticeships. The employer completes an application form and signs a contract with the university and the employees who are supported on the apprenticeship are funded by the employers' digital account.

If an organisation does not have access to its own apprenticeship levy it can access an apprenticeship pathway via two routes:

1. A levy-paying organisation can agree to transfer levy funding to a non-levy paying organisation. The organisation receiving the funding must set up a digital account. See <https://accounts.manage-apprenticeships.service.gov.uk/service/index> on how to create an account to manage apprenticeships.
2. If an apprenticeship levy transfer is not possible then the government's Education & Skills Funding Agency (ESFA) will subsidise 95% of the costs of a university apprenticeship course, the remaining 5% of costs (£600) being paid by the employing organisation.

9.0 Organisational commitments

Organisations receiving funding from HEE to support Advanced Clinical Practice training places are expected to:

- Provide an advanced practitioner training post whilst the learners are undertaking the course.
- Guarantee an advanced practitioner post for the trainee at the organisation upon qualification.

- Ensure the Advanced Clinical Practice course the learners are undertaking is aligned to all 38 capabilities of the four pillars outlined in the Advanced Clinical Practice framework, (if unsure advice can be sought via the EoE Faculty of Advancing Practice).
- Provide appropriate clinical support and supervision to learners during the length of the Advanced Clinical Practice course.
- Request Advanced Clinical Practice training places aligned to the organisation's local ICS workforce plans.
- Engage with HEE in confirming the details of learners it plans to commence Advanced Clinical Practice training, in advance of the learners starting their course. Details of learners should be sent to quality.eoe@hee.nhs.uk. Details required will include (but are not limited to) learners': full name; professional group; speciality; named supervisor, expected start and completion date.

2023/24 commissions

As of 2023/24, HEE East of England will also require organisations to demonstrate the following before funding for training places is agreed.

- Can identify local population/service need for advanced practitioner workforce development.
- Understanding of the wider national Advanced Practice agenda.
- Links directly to the key principles in the Health Education England Multi-Professional Framework for Advanced Clinical Practice (2017).
- Provides a positive learning environment with a named identified supervisor and agreed supervision plan.
- Has an identified lead for Advanced Practice within the organisation/Primary Care Training Hub.
- Regular communication with HEE East of England Advancing Practice Faculty and the Quality and Commissioning team.
- A clear plan for evaluation and impact assessment of the roles.
- Requests places for a named individual who has the support of the employer and supervisor and meets the academic requirements to undertake this programme of study.

10.0 Payment and conditions

For information about payment and conditions, please see the new NHS Education Contract section of the HEE website here <https://www.hee.nhs.uk/our-work/new-nhs-education-contract>.

11.0 Clinical supervision

Health-care professionals moving into trainee advanced practitioner roles will require high quality supervision. Supervision will support not only their confidence and capability to work at an advanced level but also underpin and strengthen practitioner and patient safety.

It is expected that practitioners will commit to achieving the assessment requirements for the level of advanced practice, and it is acknowledged that they will be reliant on the support of others to do so. High quality supervision of all trainee advanced practitioners is required within your organisation and directly affects the trainees experience and capacity for learning opportunities.

Employers must ensure that they can deliver practice-based support, leadership, senior clinical mentorship, and supervision to the student while they are in the practice setting. The standards for advanced practice cannot be met by academic study alone and it is an expectation of the employer by accepting a trainee advanced practitioner that they will be providing this complementary and essential aspect of training within practice.

Organisational responsibilities

The following recommendations have been based on the 'HEE guidance on workforce supervision for advanced clinical practitioners'. Organisations are advised to start to review current practices and ensure adequate supervision is in place for trainees and qualified advanced practitioners. The EoE Faculty of Advancing Practice is supporting the development of National and Regional resources, and this will be available in due course.

It will be an expectation for organisations to hold a register of advanced practitioner supervisors to ensure planning for supervisor capacity. It should be part of the organisational advanced practitioner leads responsibility to ensure that these supervisors are delivering high-quality supervision, with forums of support available to ensure triangulation of experience and share best practice.

Future workforce planning of advanced practitioner roles should also be mindful of supervisor capacity. Supervisors will be required to assist in the formative process and support trainee development not only whilst training, but throughout their career development.

It is recommended that organisations have a formal review process for all trainee advanced practitioner, where an annual assessment is undertaken to review progress through the course and identify and discuss any issues if required. This can be via the development of an Advanced Practice Oversight Group (APOG) or existing organisational education forum etc.

It is advisable that each employing organisation has a medical lead for advanced practice to sit alongside the professional lead for advanced practice.

Co-ordinating Education Supervisor and Associate Workplace Supervisors

A trainee will require the support of a **Co-ordinating Educational Supervisor** who must be identified before the practitioner starts training, and is a prerequisite for an HEI Masters in Advanced Clinical Practice programme. This will need to be a registered health care professional experienced in supervision (Consultant or an experienced advanced practitioner) and in the relevant field of advanced practice.

The coordinating education supervisor will not need to hold the same professional registration as the developing advanced clinical practitioner/trainee.

The Co-ordinating Education Supervisor must be an experienced practitioner working at an advanced level or beyond. If the individual is an advanced practitioner, they must have been qualified for at least 3 years. Only if an individual shows outstanding supervision and knowledge skills may they then be considered for the role of coordinating education supervisor before the 3-year point. Occasionally academic courses may insist on this role being performed by a medically qualified practitioner, such as the non-medical prescribing module.

The Co-ordinating Education Supervisor will provide a consistent supervisory relationship throughout the advanced practitioners development and will:

- Have an in-depth understanding of the advanced practitioner's role in the specialty, pathway or setting, including factors which may differentiate roles in advanced clinical practice from traditional Uni-professional roles in the same setting;
- Have a high level of awareness of the range of potential professionals and respective scope of registration for each;
- Have an understanding of the practice-based and off-the-job components of advanced clinical practice development;
- Support the developing practitioner/trainee with socio-professional aspects of professional development;
- Support the developing practitioner/trainee to balance the competing workplace and development demands as an employed registered professional; signposting to more specialist professional or personal support when indicated;
- Have completed professional development which includes a focus on multi-professional supervision and practice-based education;
- Guide and signpost the developing practitioner/ trainee to identify Associate Workplace Supervisors who can support specialty, pathway or setting-specific knowledge and skills;
- Ensure access to sufficient, structured, practice-based learning opportunities to ensure the practitioner can develop the agreed advanced clinical practice competences and capabilities;
- Ensure that competency and capability verification is conducted by a suitably authorised or approved registered professional;
- Act as a link with the designated higher education provider/university where required for both apprentice and non-apprentice development routes;
- Maintain an overview of the practitioner's progress against an agreed individual learning plan and local/area-specific curriculum;
- Maintain an overview of and address issues of professional and public safety.

A trainee advanced practitioner may need more than one supervisor to meet their needs across the 4 pillars of advancing practice and therefore the Co-ordinating Education Supervisor will need to ensure that **Associate Workplace Supervisors** are in place. Associate Workplace Supervisors will:

- work collaboratively with the coordinating education supervisor and the developing practitioner/trainee to support a specified aspect of advanced practice development in a specialty, pathway or setting; guiding the practitioner's development in the specified aspect of advanced practice from uni-professional to a multi-professional advanced practice level;
- have an in depth understanding of the specified aspect (clinical, education, leadership/management or research) of advanced practice in relation to the practitioner's specified advanced practice role;
- have an awareness of the range of potential professionals and scope of registration for those developing in the advanced practice setting;
- have completed professional development with a focus on supervision and practice-based education.

Experienced supervisors are likely to have gained supervisory knowledge throughout their employment but will require specific supervisory training pertaining to advanced practice. The advanced practice agenda is evolving and moving at great pace and supervisors will need to have an awareness of current and future developments through attending training and their organisational lead for Advanced Practice. Organisations will need to ensure the level of supervisory knowledge and skills is of optimum quality for its trainees with a system in place for monitoring this on a continual basis.

Initially, it will be the case that most advanced practitioner supervisors are senior doctors, usually medical GP principals or medical consultants. As advanced practice roles continue to develop within the region, these will be increasingly joined by senior advanced practitioner.

Commitment of the supervisor

Supervisors should meet regularly with their supervisees. In the first two years of training, these meetings will involve the setting and review of personal learning plans, review, and performance of supervised learning events etc. The supervisor will be responsible for the creation and administration of the trainee advanced practitioners training rotation and activities. These should have assigned learning objectives that may be reviewed at supervision meetings.

Supervision can take place in many forms:

- Case based studies
- Critical reflection of an observation of a clinical skills or consultation
- Professional support and well-being including the socio-professional factors affecting a trainee and how to manage
- Action learning sets

- Facilitated discussion
- Personal learning plans and educational progress

Where a trainee is developing in advanced practice in a speciality/role with a nationally agreed curriculum, supervision arrangements should be guided by the relevant curriculum. Developed credentials can be found on The Centre for Advancing Practice under [credentials](#). For those trainees where a credential is still in development, we advise referring to the 'Multi-professional framework for advanced clinical practice in England' (HEE,2017) and ensuring any organisational competencies that may have been developed within the trainee's speciality are also utilised when creating a personal learning plan. It is the supervisor's responsibility to ensure they have the correct knowledge whilst supervising a trainee and to seek out information where knowledge gaps appear.

Time should be allocated within the job plan for both the supervisor and the trainee to ensure that supervision takes place and to minimise the risk of a breakdown in supervision or training.

Records of supervision meetings should be kept, and if possible uploaded to the advanced practitioner's professional portfolio e.g., the Practitioner's ePortfolio (PeP) or national ePortfolio, when available. This allows review of objectives and presentation of evidence of supervised learning for both the advanced practitioner and supervisor, as necessary. This assures effective educational governance.

One of the major tasks for a supervisor is the delivery of effective and focussed feedback to the advanced practitioner. This may be on their clinical performance, their academic activities or in other areas such as feedback of multisource feedback surveys. Training in this is required for advanced practice supervision as it is for other staff groups, such as medical trainees and it is recommended that advanced practice supervisors have undertaken clinical supervision training as a minimum. Regional supervision training is currently being developed and will be available for all those that supervise advanced practitioner trainees in the immediate future.

Who can supervise?

Supervisors:

- Come from the multi-professional workforce and do not need to hold the same professional registration as the trainee.
- Have expert knowledge of the area of practice they are supervising
- Have education experience and are a skilled facilitator able to support learning, development, assessment and verification of competence and capability

A readiness checklist for advanced practice supervisors can be found in [Appendix 6](#).

Time for supervision

As already stated, the work involved in advanced practitioner supervision should be recognised in job plans. It is recommended that supervisors should have 1 hour per week (0.25PA) for each trainee advanced practitioner they supervise and 1 hour per

month (0.0625PA) for each trained advanced practitioner supervised. In addition, the supervisor should have 1 PA (4 hours) per trainee, per year to support the annual assessment.

In the event that the Co-ordinating Educational Supervisor is on leave for a prolonged period the employer **must** have a replacement supervisor in place.

It is essential that each trainee has a dedicated professional lead (line manager) and a Co-ordinating Educational Supervisor. It is preferable that line management should be provided by either an experienced advanced practitioner or an individual who has in depth knowledge of the requirements of the role. Some of these roles may be undertaken by the same person. Where this is not possible, and the line manager has no experience/knowledge of the advanced practitioner role an educational supervisor must be included within the PDP process before qualifying or at any point where objectives are formed/amended or updated. In addition, it is essential that there are clear lines of clinical, professional, and managerial accountability.

Supervision for ACP apprenticeships

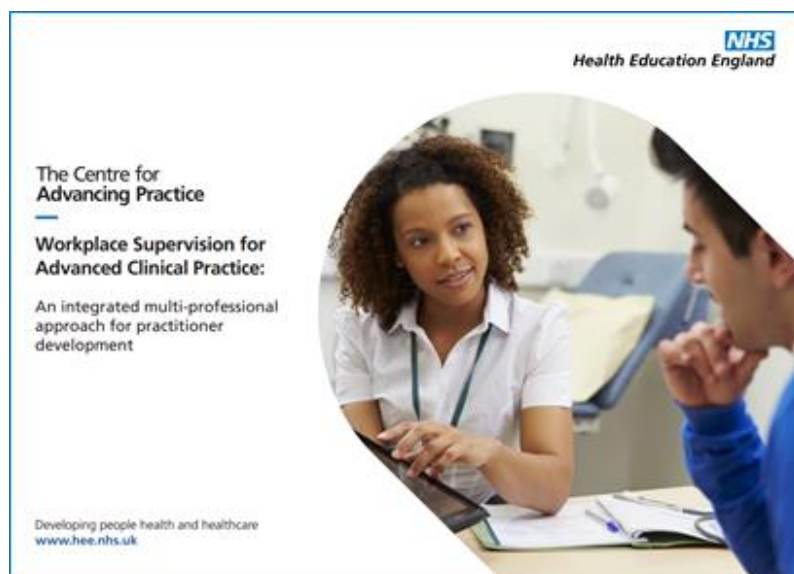
Employers who wish to support staff to undertake an ACP apprenticeship programme should also give careful consideration as to how they will supervise and support the trainee as they complete the clinical elements of training and put key learning into practice, and subsequently successfully transition into qualified advanced practitioner roles upon completion of their studies. An ACP apprenticeship programme will differ to a traditional MSc in terms of time commitments and have prerequisite qualificatory entry requirements such as providing evidence of maths and English qualifications. It is advisable to speak with your preferred Higher Education Institution for further guidance.

Engagement with academic ACP providers

The Co-ordinating Education Supervisor should have knowledge regarding the training pathway their advanced practitioner trainee is completing. Ensuring they have knowledge regarding the Masters curriculum, academic requirements for the trainee and sourcing the contact details of the link lecturer will ensure triangulation of support for not only the trainee but the supervisor also. A list of Higher Education Institutions providing ACP course provision within the East of England region is provided within this document for reference.

Supervision resources

HEE full guidance on workforce supervision for advanced Clinical practitioners can be accessed here,
<https://www.hee.nhs.uk/sites/default/files/documents/Workplace%20Supervision%20for%20ACPs.pdf>



The Centre for Advancing Practice has created some short video resources to accompany the '[Workplace Supervision for Advanced Clinical Practice: An integrated multi-professional approach for practitioner development](#)' guidance. The videos provide practice insights for each of the fundamentals of supervision set out in the guidance and are a useful resource for everyone who is either developing or providing supervision for trainee advanced practitioners.

The links to the videos can be found on the [Centre for Advancing Practice](#) website under [resources](#).

Clinical assessment of competence

A key element of the preparation for individuals to practice at the level of advanced practice will be a formal assessment of achievement of the capabilities, specific to the context of their practice. It is critical to the implementation, acceptance, and sustainability of advanced practice that health and care professionals working at this level are widely recognised as having a consistent level of competence. They must also be equally capable of fulfilling the specialist requirements of functioning at this level.

Assessment outside formal programmes of study will need to be valid and reliable and may include one of the following: case-based presentation, theoretical and/or practical tests of knowledge skills and behaviours critical reflections, portfolio of evidence etc.

To ensure assessment in the workplace is valid and reliable:

- assessors must be occupationally competent, recognised as such by employers and education providers, and be familiar with the chosen assessment tool.
- a range of assessors, trained in the relevant assessments, should be used, including educators with appropriate academic and clinical experience and competent health and care professionals at the required level.
- healthcare providers must invest in and support staff to undertake assessment(s) in practice. Work-based assessment must happen within the work setting

undertaken by experienced clinicians aware of the benchmark level of capability required for this level of practice, especially where a variety of professions are undertaking advanced practice skills. There will be a strong need for collaboration and working across professional and organisational boundaries to ensure that learning and assessment in practice delivers practitioners who consistently meet the required outcomes in all settings.

12.0 HEE East of England Faculty of Advancing Practice

Each of the seven HEE regions in the country has a Faculty of Advancing Practice, of which the East of England Faculty is one. The faculty was established in January 2021 and will lead and promote advanced practitioners as part of the workforce solutions that support service change. The faculty will be working closely with HEE Centre of Advancing practice, governing bodies, local organisations and employees, education providers and healthcare professionals to identify demand, commission high quality education and training and vitally to support the supervisory needs of learners.

Key areas of work for the regional faculty will be:

- Ensure that Advanced Practice is embedded across all agendas and enabling functions, e.g., apprenticeships, business intelligence, commissioning, finance etc.
- Identify trainee Advanced Practitioner and support their progress.
- Support ongoing development of Advanced Practitioners
- Supporting HEIs in obtaining AP programme accreditation and identifying training demands and course development.
- Review current supervision programmes and ensure supervision is developed and provided in line with new national standards.
- Ensure robust governance structures for advanced practice are developed across all ICS.

The faculty team can support advancing practice employers with the following:

- workforce planning for Advanced practitioner development.
- accessing Advanced Clinical Practice apprenticeship programmes.
- signposting to locally available Advanced Clinical Practice programmes and appropriate modules.
- signposting and advising advanced practitioner supervisors.
- operational advice around Advanced Practice clinical supervision.

The faculty team can also support local advancing practice education providers with queries regarding the programme accreditation process (see <https://www.hee.nhs.uk/our-work/advanced-clinical-practice/programme-accreditation>).

The faculty team can be contacted via EoEapfaculty@hee.nhs.uk.

13.0 HEE Centre for Advancing Practice

HEE has established the Centre for Advancing Practice to oversee the workforce transformation of advanced level practice, by establishing and monitoring standards for education and training, accrediting advanced level programmes, supporting, and recognising practitioners and growing and embedding the advanced and consultant practice workforce.

The centre will deliver this through five key functions.

- Programme accreditation
- Practitioner recognition
- Advanced practice directory
- HEE Credentials
- Workforce solutions

Information on all five workstreams can be found on the HEE Centre of Advancing Practice website, <https://advanced-practice.hee.nhs.uk/>

'Building a recognised and visible advanced practitioner workforce is a priority for the NHS; there is a clear and identified need for highly experienced clinicians who are trained to an advanced level of practice'.

HEE 2021

The HEE Centre for Advancing Practice can be contacted via advancedpractice@hee.nhs.uk.

Answers to Frequently Asked Questions about Advanced Clinical Practice can be found here <https://www.hee.nhs.uk/our-work/advanced-clinical-practice/advancing-practice-frequently-asked-questions>.

14.0 Contact information

East of England Advancing Practice Faculty

Email address: EoEapfaculty@hee.nhs.uk

Webpage: <https://www.hee.nhs.uk/our-work/advanced-practice/EOE>

To receive up to date information on national and regional developments and updates regarding advanced practice, complete [this survey](#) to sign up to our mailing list (<https://tinyurl.com/bjjcw3y8>).

Centre for Advancing Practice

Email address: advancedpractice@hee.nhs.uk.

Webpage: <https://advanced-practice.hee.nhs.uk/>

Quality & Commissioning Team

For queries regarding commissioning and finances of HEE East of England funded Advanced Clinical Practice training (or any other non-medical training HEE East of England fund), please contact quality.eoe@hee.nhs.uk.

Concerns, issues, or queries about the quality of Advanced Clinical Practice training (or any other education training programmes) can be sent to qualityframework.eoe@hee.nhs.uk. Please see Schedule 3 “Quality and Performance” within the new NHS Education Contract for more information: <https://www.hee.nhs.uk/our-work/new-nhs-education-contract>.

15.0 References / bibliography

NHS Next steps on the NHS five year forward view

<https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf>

NHS Long Term plan

<https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf>

NHS People Plan

https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf

NHS Multi-professional framework for advanced clinical practice in England:

[Multi-professional framework for advanced clinical practice in England](#)

Gov.uk apprenticeship training webpage:

<https://findapprenticeshiptraining.apprenticeships.education.gov.uk>.

Advanced Clinical Practice Toolkit:

<https://cs1.e-learningforhealthcare.org.uk>

HEE Advanced Clinical Practice webpage:

<https://www.hee.nhs.uk/our-work/advanced-clinical-practice>

HEE Quality webpage:

<https://www.hee.nhs.uk/our-work/quality>.

New NHS Education Contract:

<https://www.hee.nhs.uk/our-work/new-nhs-education-contract>

16.0 Appendices

Appendix 1 Glossary

ACP	Advanced Clinical Practice
AP	Advancing Practice
APL/APEL	Accreditation or prior learning/experience
APOG	Advanced Practice Oversight Group
ARCP	Annual Review of Competence Progression
CPD	Continuing Professional Development
CQC	Care Quality Commission
EOE	East of England
GCSE	General Certificate of Secondary Education
HEE	Health Education England
HEI	Higher Education Institution
ICS	Integrated Care System
LWAB	Local Workforce Action Board
MAG	Medical Appraisal Guide
MDT	Multidisciplinary team
MSc	Master of Science
NHS	National Health Service
PA	Programmed Activity
PDP	Professional Development Plan
PeP	Practitioner ePortfolio
PGDip	Postgraduate Diploma
RAG	Red, Amber, Green
RPL	Recognition of Prior Learning
SMART	Specific, measurable, achievable, relevant, time-bound
STP	Sustainability Transformation Partnership

Appendix 2 Generic AP Job Description and personal specification

This job description has been developed to provide a general overview of the responsibilities that you would expect to see within an 'Advanced practitioners' job description. It is not an exhaustive list, and it can be tailored and adapted to meet the speciality requirements.

**[INSERT NAME OF HOSPITALS/NHS TRUST]
Job description**

Job title:	Advanced Practitioner
Department:	[INSERT DEPARTMENT/SPECIALTY]
Band:	Band 8a
Hours of duty:	[INSERT HOURS]
Contract type:	[INSERT TYPE]
Responsible to:	[e.g., Consultant Medical Staff]
Reports to:	[e.g., Consultant Medical Staff – clinical day to day function Advanced Clinical Practitioner Team Leader]
Base:	[INSERT SITE]

Job summary

The post holder will be practising as an Advanced Practitioner within their designated specialty/directorate. The role will encompass the skills of assessment, examination, diagnosis, and treatment within an agreed scope of practice. The post holder will assist in the safe assessment, treatment, referral, and discharge of patients in their designated directorate.

The post holder will:

- Work towards health promotion and prevention and comprehensively assess patients for risk factors and early signs of illness.
- Draw on a diverse range of knowledge in their decision-making to determine evidence-based therapeutic interventions, which will include prescribing medication where legally allowed and actively monitoring the effectiveness of therapeutic interventions.
- Plan and manage complete episodes of care, working in partnership with others, delegating and referring as appropriate to optimise health outcomes and resource use, and provide direct support to patients and clients.
- Work in partnership with patients and support them to manage and live their lives.

In addition, they will help to develop a programme of practice development for staff in (area name) who will also be caring for these patients. His or her practice should be developed to an advanced level whereby the Advanced Practitioner can directly or indirectly influence all aspects of care and management of patients within their speciality, and across a population.

The post will be structured around the 4 pillars of advanced practice, available time allocated as indicated in brackets:

- *Expert clinical practice* (0.7)
- *Professional Leadership and consultancy* (0.1)
- *Education, training, and development* (0.1)
- *Practice and service development, research, and evaluation* (0.1)

Principal responsibilities

Clinical

- Uses specialist knowledge and specific training to act autonomously in assessing, planning, and implementing a comprehensive management plan within their defined scope of practice.
- Elicit a patient history appropriate to the clinical situation, which will include, presenting complaint, history of the present illness, past medical history, social history, family history, medications, allergies, review of systems, risk factors and appropriate targeted history.
- Perform a physical examination tailored to the needs of the patients and the demands of the clinical situation.
- Assess and prioritise patients undergoing treatment.
- Demonstrate continual evaluation of the patients and use expertise to recommend adjustments/amendments to treatment plans, in consultation with the patient and members of the multi-professional team.
- Make direct referrals to other members of the health care team.
- Requests bloods and radiological test as appropriate and within agreed scope
- Request and perform diagnostic tests as agreed locally and within agreed scope.
- Chase, view and Interpret results and report findings.
- Discuss and agree assessment outcomes with patients, carers, and other health care professionals to enable patients to make an informed decision regarding their treatment.
- Communicate highly complex information to patients, carers, and families during the consent process prior to commencement of treatment plans and invasive procedures including explaining treatment options.
- Authorise the decision to admit patients and/or proactively initiate discharge.
- Actively supports patients and their families through communicating difficult and highly complex sensitive information using a variety of methods to ensure effective understanding in a timely manner.
- Proactively supports patients, carers, and families in coming to terms with their illness/condition.
- Provides empathy and reassurance through understanding the quality-of-life issues associated with their illness/conditions and treatment related side effects.
- Ensure that accurate, essential, and appropriate written and verbal information is conveyed to the wider MDT to ensure effective management of patients.

- Ensure dignity, privacy and cultural and religious beliefs are respected at all times.
- Adheres to professional code of conduct, works within the boundaries of their scope of practice and always manage associated clinical risk effectively.

Professional leadership and Management

- Act as a role model by demonstrating high standards of holistic care.
- Act in such a way as to be a credible, effective leader, demonstrating effective clinical leadership on a daily basis.
- Take key responsibility for supporting the wider MDT.
- Effectively manage own diary and workload.
- Ensure that documentation is of a very high standard reflective of Advanced Practice, adhering to local and national guidelines.
- Identify the skills set and terms of reference required of the Advanced Practitioner role, ensuring they reflect the individual, holistic needs of patients undergoing care.
- Works in collaboration with the MDT to investigate clinical incidents associated with patients in their care.
- Assess and monitor risk in own and others' practice, acting on results, thereby ensuring safe delivery of care.
- Diffuse potential complaints and hostile situations with staff, patients and carers using highly developed negotiation and interprofessional skills
- Provide representation, as appropriate at various local and national meetings, providing feedback to the organisation on clinical and professional issues which have an impact on care and standards of practice within their sphere of responsibility.
- Develop formal and informal links outside the organisation, sharing good practice, innovative ideas, and promote staff and service development.
- Establish and maintain a regional and national network of contacts relevant to the service.
- Promote the service through formal and informal presentations within and outside the organisation through study days, conferences, and written papers.

Education and Training

- Has obtained the theoretical knowledge; MSc in Advanced Practice or equivalent, in conjunction with practical experience; evidenced in a supporting portfolio, to a level that allows the job responsibilities to be delivered at a high standard.
- Has obtained Non-Medical Prescribing if appropriate to registered profession.
- Identify own personal developmental and educational needs to work at an advanced level and beyond. Ensure appropriate action is taken to maintain and further develop skills.
- Maintain a professional portfolio and participate in continuing professional development.
- Maintain competencies and attend mandatory lectures and training as required by the Trust.
- Receive clinical supervision to clinically improve knowledge and the quality of care delivered to patients.

- Utilises professional knowledge and skills, underpinned by theoretical and relevant practical experience to teach, motivate, and support junior staff on a range of clinical practices.
- Participates in the delivery of specialist training and development of other healthcare workers within the Trust.
- Develop and organise study days and training sessions for self and others within the clinical team.
- Participates in the supervision and mentorship of multi-professional students and junior staff.
- Undertake clinical supervision for trainee APs.
- Carry out training needs analysis, using the results to design, develop and deliver a teaching programme promoting practice development for those staff caring for patients within the speciality. This will include the development of links with other organisations and innovative approaches to staff development.

Research, service development and audit

- Maintain up to date knowledge in the specialist field, using information to affect change in practice and ensuring effective dissemination of new knowledge.
- Participate in service development. Writes protocols, guidelines, and procedures for own remit which, impacts on other members of the multi-disciplinary team.
- Participate in the development and evaluation of protocols and guidelines and procedures using current literature and research.
- Participates in the development of patient information to improve patient care.
- Liaise with MDT, including consultants, senior nursing colleagues and management in the development of services, contribute ideas and make recommendations for service improvements.
- Implement policies informing members of the multidisciplinary team of any changes.
- In collaboration with the MDT ensure that clinical practice is patient centred and researched based, in accordance with professional practice, guidelines, and national and local benchmarks.
- Support relevant audit activity in the specialities to evaluate the effectiveness of care interventions and disseminates outcomes with any potential changes to clinical practice which improves health outcomes.
- Regularly audits own practice.
- Where appropriate participate in research projects and/or support the wider MDT with research initiatives.
- Promote and disseminate research and audit findings relevant to the service
- Continue to develop and promote the Advanced Clinical Practitioner role through professional publications and conference papers

Multi-disciplinary liaison

- Ensure effective communication is maintained between members of the multidisciplinary team to ensure appropriate individuals are informed of changes in patient conditions or treatment plan.

- Be a core member of the multidisciplinary team providing specialist knowledge and advice.
- Establish and maintain excellent communication with individuals and groups exploring complex issues relating to care options and decisions.
- Promote collaborative working relationships and effective communication between all members of the team.

Responsibilities for Financial & Physical Resources

- Responsible for reporting faults with equipment and removing from the clinical area until repaired
- Uses specialist equipment to assist in the monitoring, diagnosis, and treatment of patients.
- Influence decisions regarding the allocation of financial resources through consultation, service redesign, participation in meetings and audits.

Responsibilities for Human Resources

- Allocates work and advises junior staff within their clinical area.
- Participates in the Trusts Appraisal process and professional revalidation if appropriate.
- Undertake clinical and educational supervision with assigned consultant supervision
- Report sickness and return to work promptly in accordance with organisational policy.

Freedom to Act

- Directed by national guidance as well as local protocols and guidelines, is able to analyse each clinical situation and formulate a management plan.
- Practitioners are accountable for their own professional actions within a locally agreed scope of practice.
- Responsible for ensuring accurate interpretation and dissemination of local and national policies within speciality.
- Practitioners are responsible for managing and prioritising own workload against the needs of patients and service requirements.
- Uses own initiative, acts independently, and takes appropriate action.

Physical Effort

- Performs physical examination and clinical skills.
- Managing patients who are unwell and thus periods of intense physical effort are required on a regular or as per shift basis.
- Moving and handling of patients and equipment.
- Frequent use of a computer to record, review and order results / tests.

Mental Effort

- Required to perform procedures in the management of unwell patients.
- Regular concentration required during clinical procedures.
- Daily concentration on patient assessment and delivery of care.
- Required to respond instantaneously to patient's needs, thus sometimes unpredictable work arises.

Emotional Effort

- The practitioner is required to deliver clinical support via a range of treatments and experiences, which can be highly distressing and challenging. i.e.
 - Frequently dealing with agitated / sedated patients
 - Discuss diagnosis with patient and their relatives.
 - Provides advice and support to unwell patients/ carers who may be concerned about an aspect of their plan of care.
 - Explaining possible diagnoses for unfavourable test results.
 - Responsible for the counselling and information giving to patients and families within their care.

Working Conditions

- Work involves bodily fluids, i.e., blood / faeces and sharps.
- The practitioner will have direct patient contact, delivering direct patient care in a variety of settings in accordance with the need of the patient.
- Frequent exposure to uncontained bodily fluids / foul linen during general patient care.
- Exposed to patients with infectious conditions.

Health and Safety

In addition to the Trust overall responsibility for your health and safety you have a personal responsibility for your own health and safety. As such, you are required to inform your line manager of any safety issues that you identify that could affect you or others within the workplace. You must co-operate with management and colleagues at all times in achieving safer work processes and workplaces, particularly where it can impact on care.

As a Trust employee you will be trained in the correct use of any equipment provided to improve safety and health within the Trust. You will be required to use equipment when necessary and as instructed which will include checking the equipment is safe to use and to report any defects immediately to your line manager.

Person specification (*To be adapted for the role as required)

Education/Qualification	Essential	Desirable	Assessment criteria
Professional Registration with either NMC, GPhC or HCPC.	X		Cert/PIN
Evidence of continuing education	X		Cert/Port
Possession of 1 st degree in a clinical field e.g., Nursing, physiotherapy at a minimum 2:2 classification	X		Cert
MSc in Advanced Practice or equivalent (i.e., registered on Centre of advancing practice directory)	X		Cert
Non-Medical Prescribing if appropriate to registered profession.	X		Cert

Significant post qualification experience [minimum 4 years] in a relevant clinical field.	X		Cert
Leadership/management course		X	Cert

Experience	Essential	Desirable	Assessment criteria
Significant experience of working as a registered practitioner and within a relevant specialty [4-5 years Minimum]	X		App/Ref
Evidence of recent teaching, mentorship, and supervision of staff	X		Port/Int
Evidence of audit experience		X	Port/Int
Evidence of involvement in change management		X	App/Int/Ref
Evidence of multi-professional working	X		App/Int/Ref

Skills and Ability	Essential	Desirable	Assessment criteria
Evidence of both theoretical and practical skills and competency in patient management	X		App/Port/Cert/Ref/Int
Strong leadership skills	X		App/Int
Effective communication both written and verbal	X		Int/Ref
Presentation Skills	X		Int
Ability to develop protocols and guidelines		X	Port/Ref
Ability to write reports for senior management		X	Int/Ref
Works under own initiative with strong organisational skills and can work to deadlines	X		Int/Ref
Able to use problem solving skills	X		Int/Ref
Time management ~ able to prioritise	X		Int/Ref
Able to manage change both personally and leading others	X		Int /Ref
Computer skills (i.e., for radiology, pathology, microbiology ordering as per Trust protocols, utilising patient systems)	X		Cert/Port

Knowledge	Essential	Desirable	Assessment criteria
Demonstrate an understanding of current developments in the relevant speciality	X		Int
Demonstrate the ability to utilise current research finding in practice	X		App/Int

Understand, encourage, and support clinical supervision	X		Port/Ref
Knowledge of current NHS, professional and educational issues		X	Int
Knowledge of clinical governance and risk assessment/management	X		Int/Ref
Knowledge of infection control issues	X		App/Int/Ref

Disposition	Essential	Desirable	Assessment criteria
Visionary – motivated	X		App/Int
Creative/innovative and adaptable	X		App/Int/Ref
Demonstrates enthusiasm and flexibility	X		App/Int/Ref
Approachable/receptive and assertive	X		App/Int/Ref

Other requirements	Essential	Desirable	Assessment criteria
Must be flexible with working environment and shift patterns	X		Int
Able to develop scope of roles and responsibilities for self and other trust staff	X		Int
Able to care for both physical and emotional needs of self and others	X		App/Int/Ref





This job description is not meant to be exhaustive. It describes the main duties and responsibilities of the current post. It may be subject to change in the light of developing organisational and service need, and wherever possible change will follow consultation with the post holder

Appendix 3 Advanced Practice Readiness Checklist

Advanced Practice Readiness Checklist

Is my organisation ready to implement and support Advanced Clinical Practice?

Many employers have expressed a wish for support to develop such roles and this **Readiness for AP Checklist** has been developed for employers to self-assess their readiness for advanced clinical practice and identify possible next steps. The checklist is based on the key principles of the 'Multi-professional framework for Advanced Clinical Practice in England' and should be carried out by the AP lead (or other senior education lead responsible for AP) at an organisational, departmental/practice level and individual trainee and supervisor level. Organisations should (B)RAG rate their extent of readiness, where black signifies there is no evidence and green signifies that the factor is fully embedded within the organisation.

	No evidence this factor is embedded
	Some evidence this factor is embedded in few parts of the organisation
	Evidence this factor is embedded in most parts of the organisation
	Fully embedded in organisation

An action plan with SMART objectives should then be developed by the organisation, co-ordinated by the AP lead (or other senior education lead) in conjunction with colleagues and the executive sponsor.

The self-assessment is a tool available to help organisations establish their organisational readiness and will not have an impact on any future funding an organisation will receive to support advanced clinical practice.

Please also refer to the HEE AP Toolkit when completing the checklist.

Readiness Factor	Example	(B)RAG rating	Explanation of Rating
Awareness and commitment			
There is understanding, support and commitment for AP roles at executive and director level.	Named executive sponsor, board member on AP forum		
AP is understood at an operational level	Job descriptions current, job plans current, workforce plans		
AP is understood at clinical level	Clinical leads engaged and involved in AP forum		
An AP is lead is identified within the organisation.	Clinical lead is an AP		
Understand and agree to engage with tripartite selection process between employer, HEE and HEI	Person(s) nominated to represent organisation in selection process		
Strategic workforce case for advanced practice			
Workforce Strategy includes description of role of AP in delivering long term plans.	Workforce plans		
There is named strategic leadership and operational leadership for AP	Named executive sponsor, named clinical AP lead		
There is a business case to underpin the workforce planning for AP level roles to maximise their impact, including standardised titles and banding with a succession plan where appropriate.	Business case, workforce scoping/planning document		
Clearly identified budget for AP development	Finance budget/reports		
There are discussions for AP rollout with our STP and Local Workforce Action Board (LWAB) partners	Meeting agendas/minutes		
Operational need & best use of advanced practice roles			
Need for AP roles actively considered and identified	Business case, workforce scoping/planning document		

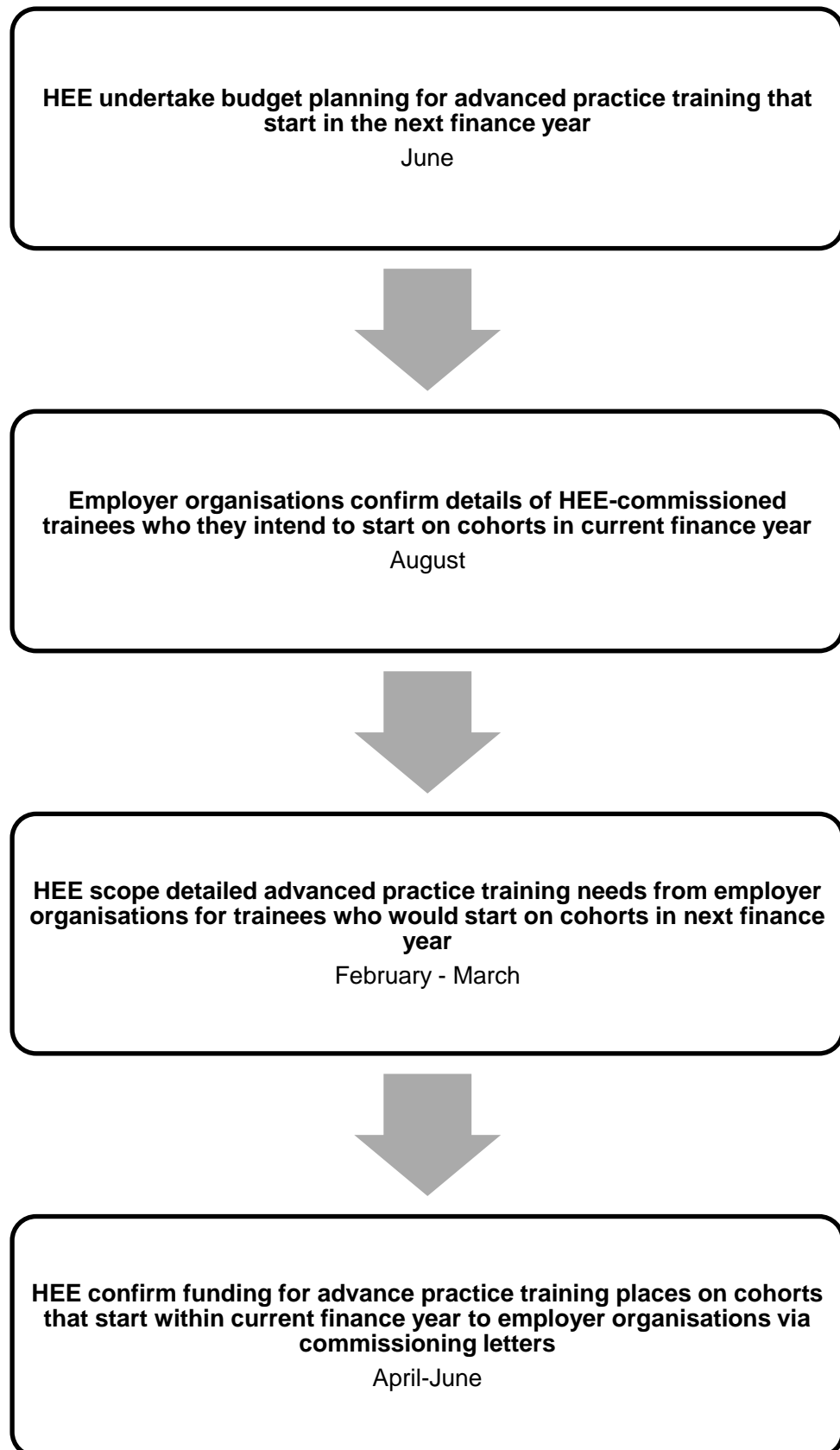
Health Education England

Specialty rotas are not filled or have high agency spend.	Rota document, bank/agency spend		
Areas (including cross-service working) identified where investment in AP roles can bring greatest benefit.	Business case, workforce scoping/planning document		
To ensure patient safety, there are clear governance and support arrangements for AP.	Governance structures, reporting structures, trainee feedback		
There are robust processes for recruitment and selection into AP level roles and for monitoring progress and certifying completion of training.	Application forms, process map of selection process		
Understanding current advanced practice workforce			
Identified where advanced roles exist and mapped against the Framework to establish where development is needed for transition to AP roles.	Workforce planning/scoping document		
Trainee APs identified and plans put in place to develop them	Workforce planning/scoping document		
There is for a plan for AP comms and engagement.	Communication plan/engagement		
AP forum planned or already in place and active.	Forum agendas/minutes		
Enablers for Advanced Practice			
Title of AP is defined and consistently used	Job descriptions current, job plans current, workforce plans		
Generic AP job descriptions, including purpose and scope are developed and agreed.	Job descriptions current, job plans current		
There are agreed career development pathways and opportunities where AP features for nurses and AHPs encompassing all four pillars of the Framework	Training pathway documents, curricula, competencies. Rotations/placement examples		
There are agreed and funded education pathways to support AP development.	Communications, meeting minutes with funding streams.		
Commitment to provide protected study time (and study leave) for all trainee APs	Contracts of employment, job plans.		

Health Education England

Planned and common approach to clinical supervision in place for AP roles (including, trainees)	Job plans, clinical supervision timetables		
We have appropriately banded, defined, substantive AP posts for trainees to move into on completion of their training.	Future job descriptions and job plans. Rotations examples		
Planned approach to supporting those seeking AP status via portfolio or credentialling.	Individual learning plans, business cases		
Each AP trainee has a named supervisor who is familiar with the requirements of AP.	Workforce reviews, local AP supervisor database		
Potential AP trainees meet the university entry requirements and are prepared for the demands of education and training for AP	AP recruitment and selection strategy		
Supervision			
All AP supervisors have time specified in their job plans for supervision of AP (minimum 1 hour per week)	Job plans, clinical supervision timetables		
There are processes to ensure that the HEE supervision fee is accessible at service level	Job plans, clinical supervision timetables		
There is support, training and induction for staff who supervise clinicians in AP roles in training and beyond	Supervisor database, supervisor network events		
Peri and Post Implementation			
There are mechanisms for evaluating the impact of AP roles	Service evaluation		
Workplace assessment of AP trainees is carried out by competent assessors who are familiar with the assessment tools	AP strategy, workforce reviews, supervisor database		
There are links with speciality-specific AP networks e.g., Royal College of Emergency Medicine, Faculty of Intensive Care Medicine	AP strategy, network events		
Self-funding AP trainees (who may be outside the organisational AP strategy) are supported, where appropriate, to integrate their roles into service needs for maximum impact	Individual learning plans, business cases		

Appendix 4: Indicative commissioning timeline (East of England)



Appendix 5: HEE financial support in 2022/23 and 2023/24

Please note: the funding models and rates outlined below are subject to the outcome of the national education reform.

2022/23 Finance Year			
Programme	Funding Model*		Length
	Tuition	Training Grant	
Full Advanced Clinical Practice MSc	N/A	£6,000	36 months
Top Up to Advanced Clinical Practice MSc	£2,125**	N/A	24 months
Advanced Clinical Practice Apprenticeship Degree	N/A	£6,000	36 months
Surgical Care Practitioner MSc	N/A	£6,000	24 months

2023/24 Finance Year			
Programme	Funding Model*		Length
	Tuition	Training Grant	
Full Advanced Clinical Practice MSc	N/A	£6,000	36 months
Full Advanced Clinical Practice MSc (priority workforce***)	N/A	£10,000	36 months
Top Up to Advanced Clinical Practice MSc	£2,125**	N/A	24 months
Advanced Clinical Practice Apprenticeship Degree	N/A	£6,000	36 months
Surgical Care Practitioner MSc	N/A	£6,000	24 months

*Per annum, per learner.

**In addition, HEE East of England will fund an initial HEI assessment of the learner's prior experience and learning at a one-off cost of £150

***See [Priority workforce funding](#)

Appendix 6: Advanced Clinical Practice Supervisor Readiness Checklist

**ADVANCED PRACTICE
SUPERVISOR READINESS CHECKLIST**

GUIDANCE FOR SUPERVISORS

East of England Faculty of Advancing Practice

Introduction

Supervision is an essential element of training to be an advanced practitioner.

If you have been asked to supervise a trainee advanced practitioner, it is important to ensure you have the experience, knowledge, and expertise to provide good quality supervision.

Are you ready to supervise your advanced practice trainee?

The following checklist is for supervisors to self-assess their readiness to supervise a trainee AP. You can assess yourself as **fully ready**, **partially ready** or **not ready**.

Health Education England

Factors suggesting readiness for Advanced Practice	Examples of evidence	Am I ready?	Personal Action Plan
I understand the importance of supervising the trainee Advanced Practitioner to ensure patient and practitioner safety.	HCPC standards of conduct, performance and ethics ; NMC Standards for student supervision and assessment ;	Choose an item.	
I have time to provide a minimum of 1 hour of supervision to my trainee per week.	Job plans	Choose an item.	
I understand the ACP MSc programme/curriculum/credential that my trainee is undertaking.	HEI programme handbooks; credential ; specialist AP curriculum e.g. RCEM ACP Curriculum and Assessment	Choose an item.	
I understand the advanced practice role my trainee is training to do and the skills, knowledge, and behaviours they need to be capable and competent to do it.	ACP Job description	Choose an item.	
I understand the 4 pillars of advanced practice and how these can be supported and developed for my trainee.	Multi-professional framework for Advanced Clinical Practice in England	Choose an item.	
I understand the core capabilities of advanced clinical practice as articulated in the multi-professional framework for Advanced practice	Multi-professional framework for Advanced Clinical Practice in England	Choose an item.	
I understand my role as a coordinating / associate supervisor in supporting and developing the trainee Advanced Practitioner.	Workplace supervision for Advanced Clinical Practice: An integrated multi-professional approach for practitioner development	Choose an item.	

Health Education England




I have undertaken formal supervisor training to enable me to supervise my trainee Advanced practitioner.	Examples of formal training include: Roadmap supervisor training; Clinical Educator Programmes; PgCert in Clinical Education; Practice Educator programmes; local supervisor training courses	Choose an item.	
I know how to complete a learning needs analysis; a personal development plan and a learning contract to support my trainee's development.	Documentation review	Choose an item.	
I know how to assess my trainee's capability and competence to undertake newly learned skills and how to evidence this has been achieved.	Specialty curriculum frameworks; portfolio of evidence; HEI led practice assessments.		
Supervision sessions with my trainee will be planned and prioritised each week to monitor progress.	Job plans; clinic rotas		
I am aware that over extended periods of absence I must liaise with my line manager to appoint another supervisor to supervise the trainee.			
I have ongoing support for my role as a supervisor and have negotiated protected time to undertake this responsibility.	Job plan; discussion with line manager; appraisal documentation; participation in supervisor forums; peer support; supervision sessions.		
I know who is leading on Advanced Practice for the organisation and how to access support if my trainee runs into difficulties.	Organisation policy		

Health Education England

Appendix 7: ACP Course Provision within the East of England

Please check directly with the Higher Education Institution to confirm course details, commencement, and application process. For specialist Advanced Practice course provision please liaise directly with each Higher Education Institution.

Higher Education Institution	MSC ACP Programmes and Contact details
Anglian Ruskin University 	MSc Advanced Clinical Practitioner Degree Apprenticeship MSc Advanced Practice (Clinical) Contact Person: Lorna O'Reilly Email: Lorna.OReilly@aru.ac.uk Website: https://aru.ac.uk/
The Open University 	MSc in Advanced Clinical Practice MSc Advanced Clinical Practitioner Degree Apprenticeship Contact Person: Helen Heenan Email: helen.heenan@open.ac.uk Website: https://www.open.ac.uk/
University of Essex 	MSc Advanced Clinical Practice MSc Advanced Clinical Practice Apprenticeship Contact Person: Penny Hodgkinson Email: pahodg@essex.ac.uk Website: https://www.essex.ac.uk/
University of Bedfordshire 	MSc Advanced Clinical Practitioner Integrated Degree Apprenticeship Contact Person: Rachel Bruce Email: Rachel.Bruce@beds.ac.uk Website: https://www.beds.ac.uk/

Higher Education Institution	MSc ACP Programmes and Contact details
<p>University of Hertfordshire</p> 	<p>MSc Advanced Clinical Practice</p> <p>MSc Advanced Clinical Practice (Apprenticeship)</p> <p>Contact Person: Elaine Gannon Email: e.gannon@herts.ac.uk</p> <p>Website: https://www.herts.ac.uk/</p>
<p>University of Suffolk</p> 	<p>MSc Advanced Clinical Practice</p> <p>Contact Person: Rachel Heathershaw Email: r.heathershaw2@uos.ac.uk</p> <p>Website: https://www.uos.ac.uk/</p>
<p>University of East Anglia</p> 	<p>MSc Advanced Clinical Practitioner Degree Apprenticeship</p> <p>MSc Advanced Professional Practice</p> <p>Contact Person: Dr Gabrielle Thorpe Email: gabrielle.thorpe@uea.ac.uk</p> <p>Website: https://www.uea.ac.uk/</p>