

Consultant Practitioner

Lucy Buckley—Consultant Clinical Practitioner

Lucy Buckley is a Consultant Clinical Practitioner in Oncology at The Christie NHS Foundation Trust



Lucy Buckley is a Consultant Clinical Practitioner (CCP) working as a Consultant Colorectal Radiographer at The Christie NHS FT.

Lucy believes that Advancing Practice provides a different role to the traditional medical model, as they can cross multidisciplinary boundaries to ensure the patient is at the centre of everything the NHS delivers.

Lucy's career pathway has transitioned from an enhanced practitioner, into an Advanced Practitioner (ACP), and now into her CCP role. The Christie NHS FT recognised the impact of ACP and CCP within the colorectal cancer patient pathway and has supported this career progression and service transformation.

There is a national shortage of clinical oncologists, the Royal College of Consultant Clinical Oncologists report that there will be a 26% shortage by 2026. The value of ACP in cancer is highly recognised and is now giving opportunities for career progression within a clinical setting.

Whilst the opportunity to develop the ACP and then the CCP role has come from gaps in the service due to reduced medical resources, the impact is larger than this. ACP's are able to use their fundamental professional background to provide expert advice, judgement, and clinical resource to patients.

In 2010 Lucy was appointed as a Specialist Colorectal Radiographer, she would develop to support colorectal cancer patients during their radiotherapy treatment, working at an enhanced level of practice.

She then had the opportunity complete the ACP MSc where she completed modules in clinical skills and examination, non-medical prescribing, and leadership and management. She has continued to develop her knowledge and skills through additional learning after the completion of her ACP training. As a CCP radiographer, she considers factors impacting radiotherapy treatment delivery that she has gained from her previous experiences, which a medic would not be aware of.

Radiotherapy treatment has developed significantly with developments in technology. ACP and CCP enables continued technological development to improve patient outcomes, reduce toxicities, improve early interventions and assessment all while enabling care to be provided closer to home.



I look forward to the day when I first meet a patient and I do not have to explain what an ACP or CCP does and they recognise the experience, knowledge and impact we can have."



The Christie

Enhanced > Advanced > Consultant


Lucy's week is generally split across the 4 pillars of ACP/CCP practice - with different days taking on different roles and responsibilities. She undertakes a 60% clinical workload while the other 40% is spread across the leadership, education, and research pillars. While the pillars may be perceived as separate, Lucy implements all 4 pillars to improve and develop the colorectal patient pathway and experience, as well as other oncological disease sites.

Clinically, Lucy works autonomously, undertaking clinical histories and examinations, dealing with interpretation of diagnosis, treatment decision making, and discussions with patients regarding their diagnosis, treatment options, and prognosis. Lucy was the first radiographer internationally to be able to prescribe blood products to ensure patients are managed safely and timely during their cancer treatment.

“ The ACP role includes leadership - this leadership role enables junior staff to be supported with expert clinical knowledge and understanding by the ACP - improving staff retention, experience and support.”

She utilises the education pillar through her lecturing with HEIs, working as a subject matter expert for colorectal cancer and radiotherapy. She provides management and leadership for ACPs within the radiotherapy pathway and contributes to develop new posts. She undertakes local and national research, including service evaluations, audits, trials, and both national and international publications/ presentations.

Lucy believes her most important role as a CCP is to be an advocate for the patient, whether this is during Multidisciplinary team (MDT) meetings discussing treatment options, or when looking at implementing new treatment approaches.



JOB ROLES FOR CLINICAL PILLAR

- Clinical examinations
- Interpretation of diagnosis investigations
- Treatment decision making
- Prescribing chemotherapy and other medication
- Delineation of radiotherapy volume


CLINICAL



JOB ROLES FOR LEADERSHIP PILLAR

- Line management
- Developing policies as subject matter expert
- Coaching staff
- Developing new posts

LEADERSHIP



JOB ROLES FOR EDUCATION PILLAR

- HEI lecturer
- Patient information development
- Staff coaching
- Training delivery

EDUCATION



JOB ROLES FOR RESEARCH PILLAR

- Recruitment to national trials
- Service evaluations
- Audits
- Publications and presentations

RESEARCH

Lucy works across the four pillars of Advanced Practice