

Advancing Practice in the South East Region

A guide to implementing and funding advanced practice 2024-2025



Foreword

This South East (SE) Advancing Practice guidance has been designed to support organisations in our region in enabling advanced practice transformation across services, to help build the advanced practice workforce of the future to have a positive impact in pathways of care for our people.

Our investment is aligned with the NHSE Business Plan 2023/24, NHS People Plan, and NHS Long Term Workforce Plan to ensure that across the South East region there are the right numbers of staff, with the skills, values, and behaviours, available at the right time and in the right place, to deliver high quality care to our population.

Our focus in the South East Region will be:

- Continued collaborative working with our Integrated Care Board (ICB) system partners, providers, advanced practice organisation and training hub leads, and our SE Workforce Training and Education colleagues to identify workforce demand, enabling transformation and impact in care pathways, through investment in workforce education and training development.
- Assuring the quality of advanced practice education and training by commissioning Centre of Advancing Practice accredited advanced practice programmes, by working closely with our Higher Education Institute (HEI) partners, and by supporting supervisor preparation to ensure the supervisory needs of advanced practice learners are met in practice.

Our South East multi-professional advanced practitioner workforce continues to grow, and our practitioners are making a significant contribution to leading and responding to population health priorities. Our aim is to drive education and training quality to ensure advanced practitioners are not only fit for 21st century care but that best use is made of their skills and expertise to address these priorities. We want to thank all our colleagues and partners who work in partnership with us. Our continued shared passion and determination will mean we are and can continue to make a difference for the people in the South East.



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Annual Funding Timeline

This is a summary of the timeline of key activities for the development and funding of trainee advanced practitioners by the South East Region Faculty of Advancing Practice. This is intended as a guide for employers within the region to understand the annual processes for applying for funding, where this fits in with the commissioning cycle and organisational workforce planning. It also details the scheduled key educational quality checks between the Faculty and employer.

Process	Responsible	Activity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
NHS England SE Faculty of Advancing Practice sends first communication for 24/25 funding offers to employers' advanced practice (AP) leads.	NHS England/ Employer	Employer begins internal recruitment and selection processes for trainee advanced practitioners.	█											
Faculty sends second communication for 24/25 funding offers to AP leads.	NHS England/ Employer	Employer identifies ACP MSc apprentices who may qualify for supervision fee. Employer identifies trainee advanced practitioners who require dissertation or NHS England recognised credential to complete their training.		█										
Funding window open 1st - 31st March for 24/25.	Employer	Employer AP Lead completes Faculty online application process for successful trainees from internal recruitment and selection process for full MSc/top-up dissertation/ supervision fee/credential.			█									
Funding decisions communicated to employer by 15th April 2024.	NHS England	Funding decisions for 24/25 communicated to employer AP Leads by 15th April. No changes to trainee names or application requests accepted after this date.				█								
Employer accepts funding offers and responds to funding conditions.	Employer	Employer reviews funding decisions and responds to any conditions set by the Faculty by 26th April 2024.				█								
Funding commitment statements sent out 1st May 2024.	NHS England	Funding commitment statements sent to employer for completion by trainees, supervisor and manager. Deadline for returns 17th May 2024. Failure to complete this process by this date will result in the funding offer being withdrawn. Successful trainees apply to HEI as soon as funding confirmed.					█							
Faculty trainee AP progress quality monitoring check-in call with AP lead.	NHS England	Employer AP Lead and Faculty review progress of current NHS England funded trainee APs.					█							
Scoping process for 25/26	NHS England	Region begins employer led scoping process for commissioning clinical education activity for AP programmes for 25/26					█							
Review and analysis of clinical education activity scoping	NHS England	Review and analysis of clinical education activity scoping for 25/26 ACP programmes – input from ICS and NHS England programme leads						█						
Develop business plans for AP roles	Employer	Organisations develop business plans for AP roles, if needed, to secure organisational funding commitment for 25/26.								█				
Refining of clinical education activity	NHS England	Refining of clinical education activity model for 25/26 – further input from ICS and NHS England programme leads.								█	█	█		
Regional clinical education activity model submitted	NHS England	Regional clinical education activity model submitted into the 25/26 Multi-Professional Education and Training Investment Plan (METIP).										█		
Employer workforce planning	Employer	Employer works with ICS and workforce planning to identify service need for AP for 25/26. Employer completes learning needs analysis and begins process to inform NHS England of clinical education programme activity requirements for AP for 25/26.										█		
Faculty trainee AP progress quality monitoring check-in call with AP lead.	Employer	Employer AP Lead and Faculty review progress of current NHS England funded trainee APs.											█	
AP scoping and preparation for recruitment and selection.	Employer	Job plans and job descriptions for AP roles agreed. Employer uses 2025 scoping process for commissioning clinical education activity for AP programmes to inform selection and recruitment of trainees for full commissions.												█

South East Region Faculty of Advancing Practice

FAQ 2024/25

These are some frequently asked questions and answers to assist organisations in the South East when developing advanced practice roles and to prepare for submitting applications for Advanced Practitioner (AP) funding in 2024/25.

If you have other questions not included in this document and need an answer prior to submitting an application, please contact england.acpenquiries.se@nhs.net

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Section 1 - Advanced Practitioners in the Workforce

Q1. What is an advanced practitioner?

Answer: Advanced Practice (AP) is delivered by experienced, registered health 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 area specific clinical competence. Advanced practitioners come from a range of professional backgrounds such as Nursing, Pharmacy and Allied Health Professionals. The [Multi-professional framework for advanced clinical practice in England \(2017\)](#) provides a clear and consistent approach to the development of advanced practice across England.

Q2. How do I know if I need an advanced practitioner role in my service?

Answer: For successful delivery of high-quality services that are focused on meeting person and population need, it is important that a structured workforce planning process is used to identify where advanced practice will have the greatest impact in a person's journey through health and care pathways, and the types of advanced practice roles that may exist or need to be developed.

The advanced practice workforce should be developed and deployed in a way which meets population, and therefore service, demand.

Many [Workforce Planning and Modelling Tools](#) exist, which will support you to understand the needs of your population and how to build a workforce that meets these needs. It may be helpful depending on your focus to have commissioners, HR, finance, management, and clinicians to contribute to these discussions.

The [NHS England Star](#) tool supports workforce transformation, helping providers understand their workforce requirements and providing a range of potential solutions.

Q3. How do I develop an advanced practitioner role?

Answer: The Advanced Practice Lead in your organisation should be aware of staff currently working in advanced practice roles, be able to help managers understand the need for these roles and how they may transform services. In order to establish advanced practice roles, you will need to articulate the business case for this investment, in collaboration with your AP Lead, to take into account population and system need. Job descriptions should be mapped to the [Multi-Professional framework for advanced clinical practice in England \(2017\)](#) and job plans should support the four pillars of advanced practice. [The Centre for Advancing Practice](#) webpage has further resources to support you with the development of advanced practice. Further resources can be found on our regional website under our [tools and resources page](#).

Section 2 – Training an Advanced Practitioner

Q4. What commitment is expected of the trainee advanced practitioner whilst studying?

Answer: Trainees are required to attend university teaching days, practise clinical skills in their workplace and complete work-place based assessments of competencies. They will also need time to meet their supervisor regularly to plan their individual educational needs and monitor their progress. The requirements of supervisors are explained in more detail in the [Workplace Supervision for Advanced Clinical Practice](#) document and [NHS England supervision resources](#). It is expected that each trainee will dedicate many hours to independent study to become successful in achieving the qualification. The notional number of hours of study and teaching expected is approximately 100 hours per 10 academic credits (which includes both contact hours and independent study hours) however, the actual time spent may be more, or less, dependent on individual learners. It is therefore important for trainees to have sufficient work-based learning time to develop their advanced skills.

Q5. How much time will the trainee advanced practitioner be away from their job studying?

Answer: For trainees on the apprenticeship programme, the apprentice will have off the job learning of a minimum of 6 hours per week, irrespective of the number of hours worked per week. Apprentices MUST be employed for a minimum of 30 hours per week. The Gov.UK apprenticeship funding rules can be found in more detail [here](#). For trainees on the MSc Advanced Clinical Practice programme, employers are expected to provide the trainee with sufficient study leave and protected time for work-based learning per week. The HEI (Higher Education Institute) programme lead will provide information on the total amount of study days required.

Q6. I understand advanced practice training can include a Non-Medical Prescribing (NMP) element, what happens if I already have it, or I don't need it?

Answer: If a student already has the NMP qualification or doesn't need it the training provider is likely to provide a choice of module(s) that the student can undertake instead and agree this with their employer

Q7. What supervision is required?

Answer: Good supervision is a key factor for successful completion of training. Trainees who are not well supervised can struggle and some have dropped out. Each trainee advanced practitioner requires a named Co-ordinating Educational Supervisor who has completed training in multi-professional supervision and is familiar with the requirements of advanced practice. Supervisors must be willing and have protected time (in their job plan) to support the trainee. Trainees will need time to meet their supervisor regularly to plan their individual educational needs and monitor their progress. The requirements of supervisors are explained in more detail in the [Workplace Supervision for Advanced Clinical Practice](#) document, [Advanced practice workplace supervision - Minimum standards for supervision](#) document and [NHS England supervision resources](#).

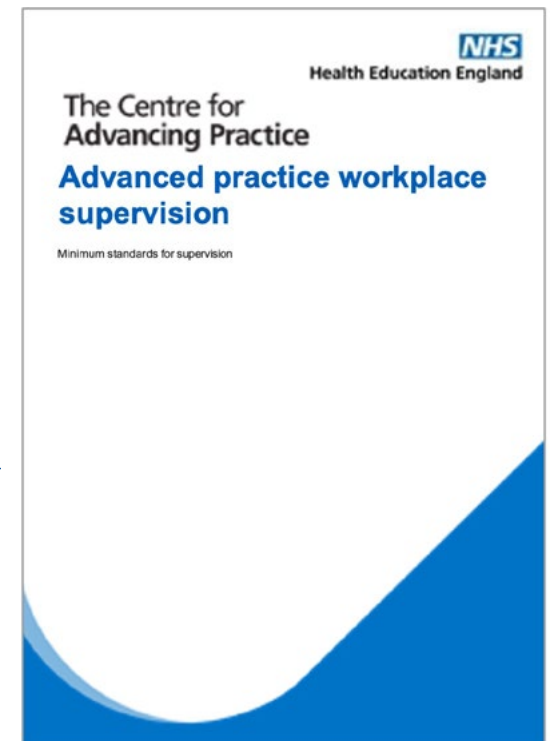


Q8. I have been asked to supervise a trainee advanced practitioner. How do I know if I am the right person?

Answer: 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. There are tools that can help you decide if you are ready to supervise your trainee or if you need further training to be able to undertake this role. The NHS England [Supervisor Readiness Checklist](#) can help you self-assess your readiness to supervise a trainee advanced practitioner.

There is also guidance on the minimum expected requirements of supervision in the NHS England [Advanced practice workplace supervision, Minimum standards for Supervision](#) document.



Section 3 – NHSE Funding

Q9. How does the NHS England demand scoping exercise inform the funding process?

Answer: NHS England will scope your intention to access the MSc in Advanced Clinical Practice in May/June each year as part of the annual investment planning process called the Multi-Professional Education and Training Investment Plan (METIP).

We will ask for you to submit detail of your intention/forward planning to support ongoing discussions across advancing practice, nursing, allied health professions, pharmacy, transformation and workforce planning and intelligence teams, Integrated Care Board (ICB) systems and Higher Education Institute (HEI) partners. This helps inform the funding allocation, dependent on HEI capacity.

Funding requests are required to align with and support overarching ICB and organisational workforce plans. It is expected that where individuals are receiving funding to complete an ACP MSc programme of study, they will be enabled to function at advanced level as per the NHS England [Multi-professional framework for advanced clinical practice in England \(2017\)](#). The funding window will open in March 2024 when the number of commissions you requested in May/June 2023 should align with your applications for funding.

Q10. I am thinking of employing a trainee advanced practitioner, what is NHS England South East's funding offer in 24/25?

Answer: NHS England is supporting the development of advanced practice roles in 24/25 by offering a package of funding and support for advanced practice trainees. There are four potential options and employers are invited to put forward requests for funding, subject to NHS England budget constraints, under one of the following offers available.

- 1. ACP MSc** – Funding for tuition fees for a period of three years for an Advanced Clinical Practice MSc. NHS England will pay the full tuition costs plus an education grant. The education grant is approximately £6000 per annum, per individual, paid directly to the employer. £2,600 of the education grant must be made available at service level to directly support the supervision of the trainee. Some HEIs may offer an option to complete the ACP MSc over 3.5 years. NHS England will only offer funding for 3 years. Any additional funding for longer programmes must be funded by the employer.
- 2. ACP Apprenticeship** – Funding for a national Level 7 Advanced Clinical Practice Apprenticeship programme that has a typical length of 36 months is paid via the apprenticeship levy. NHS England will provide a supervision fee of £2,600 per annum, per individual paid directly to the employer. This must be made available at service level to directly support the supervision of the trainee.

3. ACP Top Up Modules - Part Qualified Staff – There is the possibility of funding those who have completed a PgDip in advanced clinical practice (not any other PgDip), to undertake the additional modules to achieve the full MSc mapped to the multi-professional framework. NHS England will fund tuition costs directly to the HEI to staff that have existing academic and workplace capabilities and that can be further supported to achieve the full ACP requirements. This is in recognition that a number of students do not need to embark on the full apprenticeship or master's programme to achieve all the learning they need to operate as an advanced practitioner. Top-up modules from ACP PGDip to ACP MSc must be completed within the academic year.

4. ACP credential – There are a number of NHS England endorsed specialty credentials in development that meet workforce development needs in high-priority areas. NHS England will consider funding a credential as an addition to the ACP MSc to meet the specialised training needs of your workforce.

Funding for single modules will not be provided. Trusts may use alternative NHS England workforce development or CPD funding to support standalone modules for individuals.

ePortfolio (supported) route - [the ePortfolio \(supported\) route](#) has been specifically designed to enable recognition with the Centre for Advancing Practice of existing, experienced advanced practitioners, regularly working clinically in advanced practitioner roles, who have normally completed their advanced practice experiential and educational learning before 2017 when NHS England's Multi-professional framework for advanced clinical practice in England was published.

Overview of funding

Training pathway	Tuition fees	Additional funding
ACP MSc	Full tuition fees paid to the HEI for a period of 3 years practice	An education grant of approximately £6,000 per annum paid directly to the employing organisation via the education contract. (£2,600 of this must be available at service level to support trainee supervision)
ACP Apprenticeship	N/A (paid by the employer through the apprenticeship levy)	£2,600 per annum to support trainee supervision
ACP Top-up modules	Tuition fees paid to the HEI for named modules agreed Between NHS England and the employer. Modules must be completed within a single academic year and must upskill the individual to fully meet the Multi-professional framework for advanced clinical practice	£2,600 per annum to support trainee supervision
ACP credentials	Any module that meets the NHS England endorsed credential criteria	None

Q11. I am considering employing a trainee advanced practitioner, why would I choose the apprenticeship route rather than the non-apprenticeship Advanced Clinical Practice MSc programme?

Answer: NHS England funding for Advanced Clinical Practice programmes is limited and therefore levy paying employers are encouraged to adopt the apprenticeship programme and consider apprenticeships as their primary option. This will enable support to be provided for an increased number of applicants. To view the Apprenticeship Standard for an Advanced Clinical Practitioner, [click here](#). Employers should ensure that individuals put on to an apprenticeship route are committed to completing the full programme.

Q12. What is the education grant and what is the responsibility of the employer on receiving this?

Answer: The education grant MUST be used to ensure the infrastructure around the trainee which enables their supported learning in practice.

This list is not exhaustive, but examples may include:

- To enable regular clinical supervision between trainee and supervisor
- To develop a local education faculty for advanced practice
- To develop advanced practice action learning sets
- To develop in house education resources to support advanced practice development
- To enable the trainee to attend and present at local/national conferences

Q13. What is the supervision fee and what is the responsibility of the employer on receiving this?

Answer: The £2,600 supervision fee is available to support trainees on a full ACP MSc pathway, to contribute to organisational costs of supporting an advanced practitioner.

A lack of support often results either in individuals withdrawing from the programme or seeking alternative employment; employers should consider whether they can fully support individuals before seeking funding for training.

The supervision fee should be made available at service level to support individual supervision of the trainee. The supervision fee is directly linked to the quality of supervision and assessment of the trainee. This will be assessed at the 6 monthly bipartite quality review between NHS England SE Faculty of Advancing Practice and the AP Lead. Issues with supervision quality will be dealt with at regional level but may be escalated and managed accordingly for further investigation and could result in funding offers being withdrawn.

The expectations of employers in return for the supervision fee are:

- Sufficient study leave for university training. It is not acceptable for trainees to be taking unpaid or annual leave for dedicated training days.
- Supervision provided by an appropriately trained supervisor. The expectation is that trainees will have a minimum of 1 hour of supervision per week over the course of their training.
- Inclusion of postgraduate medical education department in discussion of supervision where appropriate, to enable suitable job-planning.
- Sufficient work-based learning opportunities to gain clinical competence at an advanced level.
- Appropriate governance in place in line with the [Multi-Professional framework for advanced clinical practice in England \(2017\)](#) and [Centre for Advancing Practice Governance Maturity Matrix](#)

The supervision fee must not be used for equipment or capital costs. Further guidance for employers on the use of supervision funding can be found on our regional web page – [Supervision Funding for Advancing Practice Training in the South East Region Guidance for Employers](#).

At the end of the year, employers will be required to report on their use of the supervision fee in meeting these expectations. Where the expectations are not met, funding may be discontinued and where there is a pattern within an employer of advanced practice trainees not being supported appropriately, future funding for advanced practice may be fully withdrawn from the employer.

Q14. How and when does the education grant/ supervision fee get paid to the employer?

Answer: A data validation exercise between NHS England and the employer will take place to confirm trainee enrolment. The education grant/supervision fee will be paid as below:

- Trusts: The fee will be paid directly to the employer via the Education Contract finance schedules after an individual has enrolled and started the programme, based on the validation exercise.
- Primary Care: Fees will be paid after an individual has enrolled and started the programme, based on the validation exercise. The payment mechanism is dependent on the ICS and Training Hub you are in. Please email [england.acpenquiries.se@nhs.net](mailto:acpenquiries.se@nhs.net) if you require more detail.

Q15. How is the supervision fee calculated for part time staff?

Answer: The apprenticeship and MSc programmes require the student to work for a minimum of 30 hours per week. All employers receive the same amount of supervision fee per learner irrespective of whether the student is working full time or part time.

Q16. Can a trainee fund their own advanced practice programme?

Answer: For most trainees, self-funding a master's level ACP programme is not recommended for several reasons. Advanced practice roles can only make the desired impact on patient care when integrated and fully supported by organisations as a strategic plan, rather than individuals self-funding their own development. In addition, the availability of places on ACP MSc programmes is coordinated by universities in conjunction with NHS England and it cannot be guaranteed that places will be available for applicants who are self-funding.

Q17. What are the minimum hours the employee needs to be employed, to be a trainee advanced practitioner?

Answer: For the apprenticeship programme it is a minimum of 30 hours per week. For the MSc Advanced Clinical Practice programme, this will differ at each university but again, this will generally be a minimum of 30 hours. If the employer is recruiting a new person as a trainee advanced practitioner, then it is suggested they are recruited on a minimum contract of 30 hours. For existing employees, if they work less than 30 hours per week, please contact the relevant programme lead at the Higher Education Institute to discuss their suitability for the programme.

Q18. Which organisations can apply for funding?

Answer: NHS organisations such as Trusts and GP Practices (via their Training Hub) in the NHS England SE region are invited to submit their expressions of interest for advanced practice training for new learners. Independent providers of NHS services can also be considered.

Q19. What are the conditions that need to be met to qualify for funding?

Answer: The decision by NHS England South East Region to award funding for advanced practice is on confirmation of the following at organisation, Trust or Primary Care Hub level:

- Completion of the [Readiness for Advanced Clinical Practice](#) checklist to identify areas for development.
- An identified local population/service need for advanced practice workforce development
- Alignment to the key principles in the [Health Education England Multi-Professional framework for advanced clinical practice \(2017\)](#) and guidance from The Centre for Advancing Practice.
- A positive learning environment with an identified, named Co-ordinating Educational Supervisor and agreed supervision plan.
- An identified lead for advanced practice within the employer.
- Regular communication with NHS England SE Advancing Practice Faculty with 6 monthly bipartite quality reviews between the Advanced Practice lead and the Faculty to assess trainee progress
- A plan to measure and evaluate the impact of this workforce transformation on service and patient outcomes.
- A named individual who has the support of the employer, has a named supervisor, and meets the academic requirements to undertake this programme of study.

Q20. Is this funding for new or existing employees and does NHS England have a preference?

Answer: The funding offer is for both new and existing NHS staff and NHS England welcome applications for both. However, for employers who are planning on recruiting a new member of staff, it is recommended financial commitment for the recruitment is obtained as soon as possible and with plenty of time prior to the Higher Education Institute admissions process.

The employer should provide assurance that there will be an advanced practice post on completion of training, demonstrated in the service/division establishment by way of a job description and job plan, to avoid investing in the upskilling of staff who cannot then put their advanced skills into practice. Employers are asked to confirm if a job description or job plan is in place when submitting their applications for funding.

Q21. How can we ensure new trainees are ready for advanced practice?

Answer: It is essential that anyone applying to become an advanced practitioner fully understands the expectations and commitment needed to train for this role. We have developed a [Readiness to become an advanced practitioner](#) that you can use in your recruitment and selection processes to help aspiring trainees assess if they are ready to become advanced practitioners.

Section 4 – NHSE Funding Application Process

Q22. How do I apply for NHS England funding?

Answer: All applications are required to be submitted via the template provided within the employer's SharePoint folder, links for these folders can be accessed by the Advancing Practice Leads only, and are available via the Faculty. Templates which are not completed fully will not be accepted.

Applications open on Friday 1st March 2024 and the deadline for submissions is 31st March 2024.

Employers must have completed a [Readiness for Advanced Clinical Practice Checklist](#) before submitting their applications.

Q23. Who should complete the application?

Answer: NHS England requires a single Advancing Practice Lead (or an individual responsible for advanced practice within an organisation) contact for each employer to submit applications for this funding. This person will act as the key liaison for all enquiries relating to the applications for funding being applied for. This is to ensure there has been appropriate scrutiny applied to the application including agreement for recruitment (where needed) and alignment with organisational workforce development needs. Applications from individuals seeking funding will not be accepted if not submitted through the Advancing Practice Lead.

Q24. What happens after I have submitted my application?

Answer: NHS England will review all applications and the indicative demand. Funding will be confirmed where possible, depending on the allocated budget by 28th April 2024. It may not be possible to provide funding for all applications received and where you are not successful, you will be notified. Successful applications must be completed in full. Incomplete applications will NOT be accepted.

Q25. Can I make changes to the application after the closing date?

Answer: **No changes to the names or details will be allowed after the window has closed and the offers have been made.** This is due to the large number of applications received and the validation exercise that must happen between NHS England and the HEI.



Section 5 – HEIs and Student Support

Q26. What HEIs can individuals study at?

Answer: NHSE funds Centre for Advancing Practice accredited ACP MSc programmes. NHSE are currently going through a procurement exercise which in 2024-2025 will result in a definitive framework of Universities with whom we can commission education programmes.

If funding is agreed by NHS England, individuals are responsible for successfully securing a place on the ACP MSc programme. Funding will then be paid from NHS England to HEIs directly via the NHS education and training contract.

Q27. Which HEI and Advanced Clinical Practice programme is the right choice?

Answer: It is very important for trainees and AP Leads to carefully review the content of the ACP MSc programme for the HEI requested. All the programme details can be found on each university's website but if further information is required, contact should be made with the HEI directly. The programme requested must be checked to ensure it meets the needs of the trainee's scope of practice and that the trainee meets the HEI's entry criteria.

An offer of funding from NHS England does not guarantee a place at the selected HEI. If a candidate fails to secure a place at their chosen HEI, the funding offer will be withdrawn.

Requests to change the HEI after funding applications have been submitted will not be accepted and any offer of funding will be withdrawn.

Q28 What is an NHS England Centre of Advancing Practice accredited ACP MSc course?

Answer: To become Centre accredited, programmes meet standards set out in the [Multi-Professional framework for advanced clinical practice in England](#) and [Standards of Education and Training](#) set by NHS England so they consistently meet the standards, put patients at the heart of what we do, and deliver a high quality academic and clinical programme.

NHS England [accredited programmes](#) are one of the benchmark routes to recognition for practitioners and ensures a consistent level of quality across England.

To find out if the programme you wish to complete has been accredited you should look for the Centre benchmark on the HEI prospectus or search the [Centre for Advancing Practice Accredited Programmes](#).

Q29. What are the HEI's admission requirements for a trainee advanced practitioner?

Answer: Basic entry requirements for HEI courses can be found on their websites. The links to these can be found in [Appendix 1](#).

The Advancing Practice Lead must check that the trainee meets the entry criteria before submitting an application for funding. Special consideration may need to be given for candidates who have qualifications from overseas. These candidates should check in advance that their qualifications meet the entry criteria for the HEI.

Any questions about HEI entry requirements, course content, their application process or individual modules should be referred directly to the HEI.

Q30. How is an application made for the HEI programme?

Answer: Once a funding offer has been made and all required documentation completed, the trainee must submit an application to the agreed HEI. This should be actioned as soon as the above processes are completed. This is usually by the end of May after the funding window closes.

Q31. What support can trainee advanced practitioners expect during their studying?

Answer: All HEI programmes will be taught by lecturers and expert clinical practitioners in their field who will offer dedicated academic support and guidance and students will be allocated a named personal tutor. The HEI may also offer support through a dedicated librarian and a comprehensive student support service. Students also find their cohort of colleagues of immeasurable value as a support network. In the case of failing students, the matter would be discussed with the student in the first instance.

The [NHS England SE Faculty Trainee in need of support](#) guide trainees and employers where to find support.



Q32. What happens if the trainee discontinues their ACP MSc programme before it is completed?

Answer: It is recognised, from time to time, some trainees may have to suspend their study e.g., for long term sickness, personal reasons etc. Where a trainee is discontinuing their studying but will be returning to complete this, and have indicated the timescales to the HEI, this is called 'stepping off' and NHS England will consider resuming funding when the student returns to study. However, these are reviewed on a case-by-case basis as it is dependent on whether the student is able to complete the course within the timescales available on their return.

Where a student is not returning to study, NHS England will discontinue the supervision funding at the point they leave the programme. In all circumstances NHS England should be informed immediately by contacting england.acpenquiries.se@nhs.net

There are implications on the use of levy funding for not continuing an apprenticeship programme and these should be discussed on a case-by-case basis.

Q33. What happens if the trainee advanced practitioner leaves the employer that NHS England is currently funding for another employer?

Answer: This will be reviewed on an individual basis and no guarantee of continued funding can be provided to either the employer or employee. The funding is linked to a workforce need, not an individual's personal development and so if the trainee moves from the original place of employment funding may stop.

NHS England would first consider how it can continue funding the current employer who was granted the funding for a trainee advanced practitioner and, only where that is not possible, look to see how the trainee advanced practitioner can continue to be supported. In all circumstances NHS England should be informed immediately by contacting england.acpenquiries.se@nhs.net

Appendix 1

Advanced practice workplace supervision - Minimum standards for supervision

Introduction

High quality supervision for healthcare professionals moving into trainee advanced practice roles is essential for supporting the development of confidence and capability and underpins patient and practitioner safety. NHS England's Workplace supervision for advanced clinical practice (2020) provides further in-depth, evidence based information and recommendations on how to develop quality supervision in the workplace. The following guidance is for supervisors, managers, employers, and trainee advanced practitioners to advise of the NHS England Centre for Advancing Practice minimum expected standards for supervision.

Why do we need supervision?

The transition from experienced professional to trainee advanced practitioner and then to qualified advanced practitioner requires significant adjustment. The transition can be characterised by periods of feeling disconnected, lack of familiarity with the new situation and arrival of a new set of unfamiliar expectations. Work role transition requires a change in identity and the development of new knowledge and skills, as well as a change in behaviour. High quality supervision can support this transition.

Minimum standards:

To ensure high quality supervision for trainees:

- Supervision for the trainee advanced practitioner is mandatory.
- The trainee must have a named, allocated co-ordinating education supervisor before commencing training in advanced practice.
- Throughout the period of training, there must be a minimum of one hour of scheduled supervision every week; of which one in four (once a month) is a scheduled hour with the co-ordinating education supervisor (see page 3 for definition of role).
- In certain practice contexts, where there is high risk, it will be necessary to debrief/provide daily supervision to ensure patient and practitioner safety.

Where a health professional is developing in advanced practice in a specialty/role with a nationally agreed curriculum, supervision arrangements should be guided by the relevant specialty curriculum.

Where no national curriculum exists, agreement of capabilities to be achieved at advanced level must be approved by the employer.

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 experience as an educator and are a skilled facilitator able to support learning, development, assessment and verification of competence and capability.

A trainee advanced practitioner may need more than one supervisor to meet their needs across the 4 pillars of advancing practice:

- **A Co-ordinating Education Supervisor** who provides a consistent relationship throughout training and must have an in-depth understanding of the advanced practitioner's role within the speciality.
- **Associate Workplace Supervisors** who work collaboratively with the co-ordinating education supervisor to guide trainee development in one or more of the 4 pillars of advancing practice.

Minimum standards:

The co-ordinating education supervisor must:

- be an experienced practitioner.
- have completed some formal supervisor development. Examples of formal training include: Clinical educator programmes; PgCert in clinical education; practice educator programmes; local supervisor training courses.
- have completed the "Supervisor readiness checklist" (Appendix 2.0) before agreeing to take on the role.

If the co-ordinating education supervisor is an advanced practitioner:

- must have been working at advanced level for a minimum of 3 years. There should be clear justification for an advanced practitioner with less than 3 years' experience undertaking this role.

Associate workplace supervisors must:

- demonstrate expert knowledge and capability of the area of practice they are supervising.

There must be a delegate or replacement supervisor in the event the co-ordinating education supervisor is on leave for a prolonged period of 4 weeks or more.

Where supervisor standards exist in a specific area of advanced level practice (e.g. as set by a capability or curriculum framework, including a credential specification), these generic standards should be used to complement (rather than override) them.

These roles are defined in detail in Health Education England's (2020) [Workplace Supervision for Advanced Clinical Practice](#).

When should supervision take place?

The amount of supervision needed by a trainee advanced practitioner will vary dependent on the stage they are at, their personal learning needs and the practice context.

Minimum standards:

- To have a first meeting with the identified co-ordinating education supervisor at induction or no later than four weeks before commencing training to discuss a supervision plan.
- Throughout the period of training, a minimum of an hour of scheduled supervision every week; of which one in four (once a month) is a scheduled hour with the co-ordinating education supervisor.
- Time should be allocated in the job plan for both supervisor and trainee.
- Remaining weekly supervision may be with the co-ordinating education supervisor OR with an identified associate supervisor with knowledge and skills matched to the curriculum/competence/capability focus of supervision for that week.

Scheduled supervision in advanced clinical practitioner apprenticeships should be within the off-the-job training time.

What does good supervision look like?

Supervision can take many forms. The diagram below illustrates just some of the different types of supervision a trainee could receive to support their development.



Critical reflection on an observation of a clinical skill or consultation



Case based discussions



Communication skills development through coaching



Professional support and well being



Action learning sets

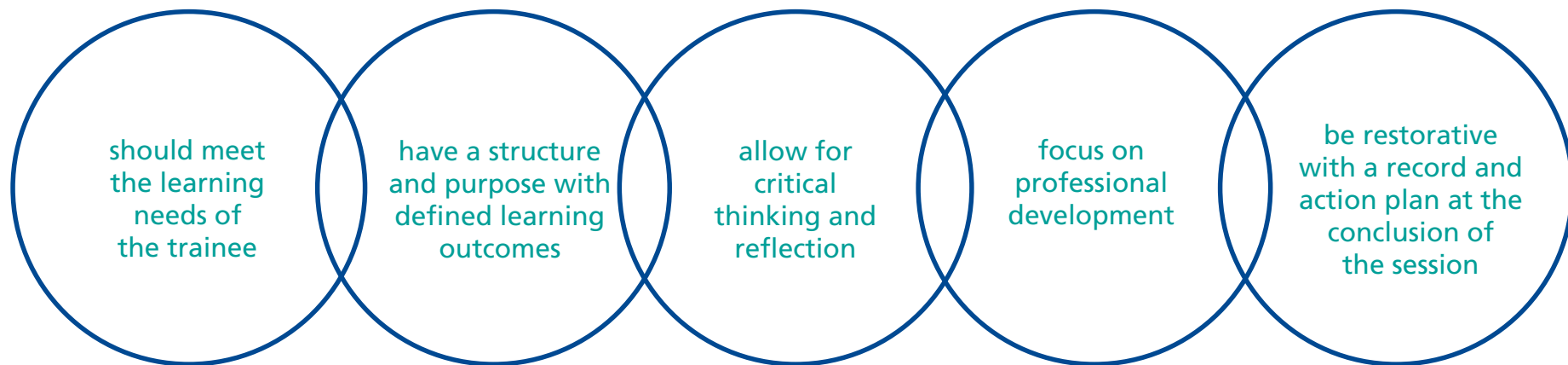


Facilitated discussion on challenging situations such as conflict resolution, difficult conversations etc



Educational progress and personal learning plans

The five key elements of a supervision session



Minimum standards:

The following must be agreed/discussed at the first meeting with the identified co-ordinating education supervisor:

- the advanced practice curriculum/scope of advanced practice capabilities which is required for the trainee role;
- an individual learning needs analysis against the relevant curriculum/capabilities;
- a learning plan which clearly identifies workplace development;
- a supervision learning contract to set expectations and boundaries.

A tripartite review of academic and workplace development with the co-ordinating education supervisor, trainee and the Higher Education Institution (HEI) should occur once every 12 months at a minimum.

What are the trainee advanced practitioner roles and responsibilities in the supervisory relationship?

The success of the supervisory relationship is dependent on both the trainee and the supervisor actively engaging in the process.

Minimum standards:

The trainee advanced practitioner should:

- be appraised of their own scope of practice and responsibilities as a registered practitioner;
- actively contribute to supervision, seek feedback and recognise own development needs;
- work in partnership with their supervisor to negotiate and agree the learning plan, to address performance or support enhanced learning opportunities;
- complete a "Readiness to become an advanced practitioner checklist" (Appendix 3.0) to help identify learning needs.

References and further resources for managers, supervisors and trainee advanced practitioners.

NHS England (2020)

[Workplace Supervision for Advanced Clinical Practice: an integrated multi-professional approach for practitioner development.](#)

[NHS Health Education England Centre for Advancing Practice website](#) NHS (2017)

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

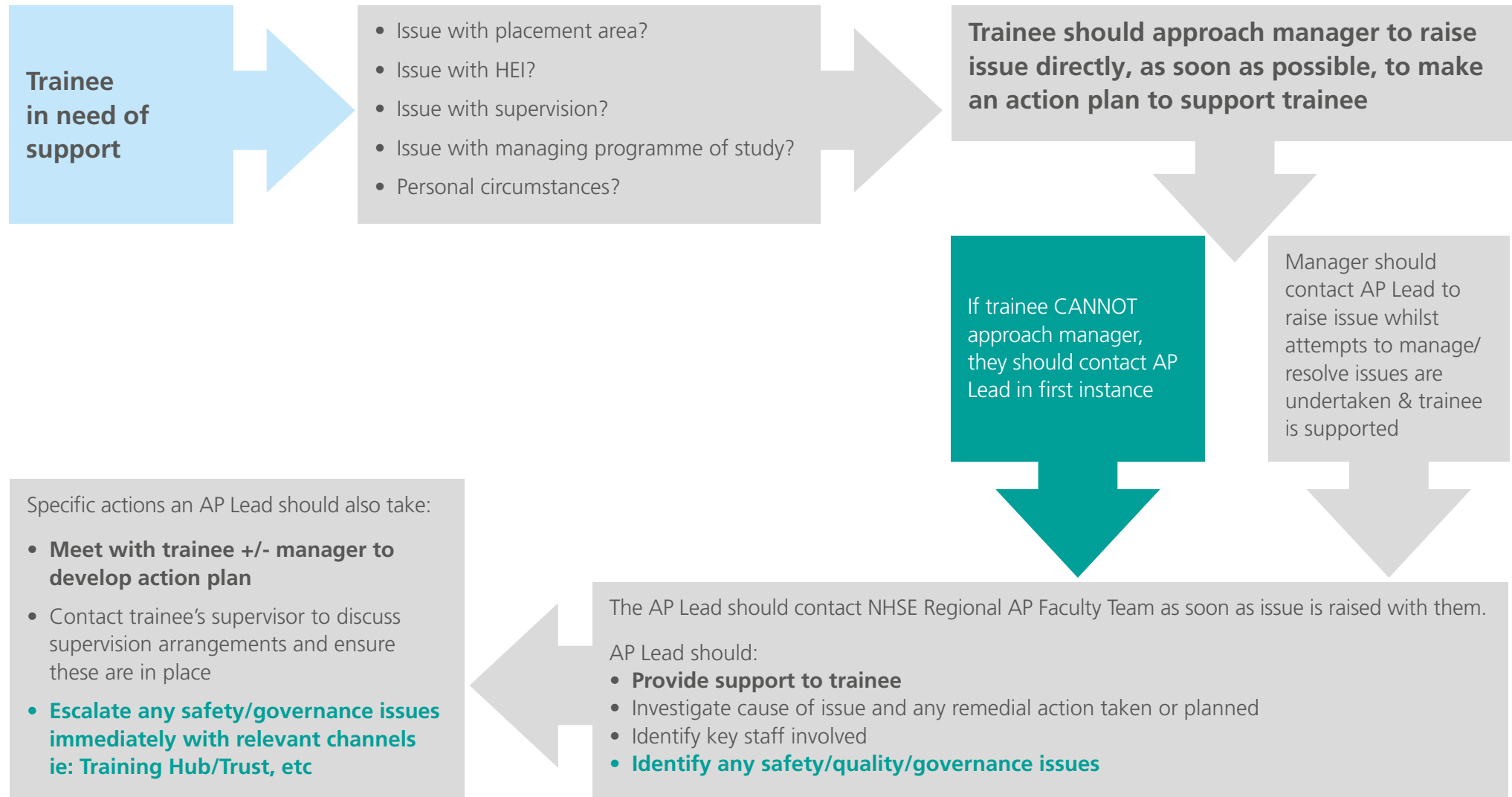
[The Permeable Practitioner](#) – ideas and resources to support health and care professionals to navigate uncertainty in everyday practice.

Martin, P., Copley, J. & Tyack, Z. (2014) Twelve tips for effective clinical supervision based on a narrative literature review and expert opinion. *Medical Teacher* 36:201-207.

[NHS England, The Centre for Advancing Practice, Credentials - Advanced Practice](#)

Appendix 2

Trainees in need of support: general principles

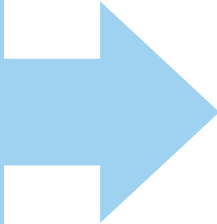


Trainees in need of support

Trainees needing support with HEI studies

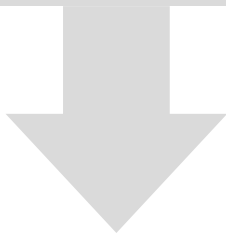
There is an expectation for all Advanced Practice trainees that they are proactive in managing their learning journey. This includes acting to manage & resolve problems that may occur during the course of their training programme, with the support of their manager, supervisor, organisational Advancing Practice lead and NHS England Regional Advancing Practice faculty

Trainee needing support with MSc Programme/ University studies



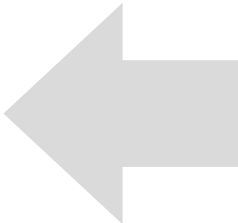
Within 4 weeks of trainee needing support

Trainee contacts MSc ACP pathway lead or personal tutor at HEI to organise support for studies



Within 1 week of trainee contacting HEI:

Trainee contacts manager & supervisor(s) to discuss issues and to make appropriate arrangements for adjustments in practice placement if needed



The trainee MUST report to their manager IMMEDIATELY:

- **If they intend to leave the programme**
- If they refer on assignments/need to resubmit assignments: these may be university assignments or practice placement assignments/portfolios/skills, etc.
- If they get into difficulties in attending required study days, and/or are unable to attend.
- If they are considering asking for a deferment, or to intermit on their programme.

The manager MUST report this to NHSE within 7 days of being informed of any the above by the trainee.

If the manager cannot be contacted for any reason, the trainee should contact their supervisor instead. The supervisor MUST then contact NHSE within 7 days.

Managers/supervisors should contact NHSE via england.acpenquiries.se@nhs.net and head the email 'Trainee concern' all 'Trainee concern' emails will be answered within 7 days of receipt.

Trainees in need of support

Trainee needing support in placement areas

There is an expectation for all Advanced Practice trainees that they are proactive in managing their learning journey. This includes acting to manage & resolve problems that may occur during the course of their training programme, with the support of their manager, supervisor, organisational AP Lead and NHS England Regional AP Faculty.

Trainee needing support in the training placement area: these may be work-related or personal circumstances

- Trainee should meet with manager of placement area to raise any issues at earliest opportunity: within 7-10 days from start of issue
- Trainee should also contact supervisor to arrange support and make an action plan of how to resolve issues (same time frame as with manager)
- **Any issues relating to patient safety or safety of the placement environment MUST be reported to manager and supervisor immediately**

- If issues cannot be resolved, the organisational AP Lead must discuss with NHSE any plans for the trainee to move placement areas, before any move occurs (excepting emergencies)
- The trainee must stay in contact with manager, supervisor and AP lead (if they are involved) at regular intervals

- Efforts must be made to resolve any issues within the placement area, an action plan should be made by the trainee, supervisor, manager and, if appropriate, the organisational AP Lead within 7 days of first contact.
- The action plan should have SMART targets.
- **The trainee, manager (or supervisor) MUST contact NHSE at this point, to advise that trainee is in difficulty and to share the action plan. At this stage, NHSE will not take any action but will be aware of concerns.**

- If trainee is unable to discuss issues with manager and/or supervisor – because of absence or breakdown in relationship, for example, trainee should contact organisational AP Lead within 7-10 days of start of issue
- Any concerns about safety of trainee placement and/or patient safety MUST be reported to AP Lead immediately

Appendix 3

Employer Readiness for Advanced Practice

Many employers have requested support with the development of advanced practice roles. This Readiness for Advanced Practice Checklist has been developed for employers to self-assess their readiness for advanced practice and to 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 advanced practice) at an organisational, departmental/practice level and individual trainee and supervisor level. Organisations can rate their extent of readiness on a scale of 1 to 4, where 1 signifies there is no evidence and 4 signifies that the factor is fully embedded within the organisation.

An action plan with SMART objectives can be developed by the organisation in response to their self-assessed readiness. This should be co-ordinated by the Advancing Practice 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 readiness and will help to inform decisions about future funding they will receive to support advanced practice. The information gathered will be collated in a way to help NHS England identify areas in which we can better support employers across the South-East region to develop advanced practice.

It is also strongly recommended that organisations complete the [Centre for Advancing Practice 'Governance Maturity Matrix'](#) to formatively self-assess their progress on the governance of advanced practice

Name of Organisation/ Primary Care Hub / Trust:			
Completed by:		Executive sponsor:	
Name & Job title	Date	Name & Job title	Date

Organisational level			
There is clear understanding, support, and commitment for AP roles at executive and director level of the organisation	Named executive sponsor		
There is named strategic leadership and operational leadership for AP	Job descriptions, organisational chart		
To ensure patient safety, we have clear governance and support arrangements for AP	Governance systems, policies, strategies		
The organisation has implemented the Centre for Advancing Practice 'Governance Maturity Matrix and has formatively assessed progress against the domains.	Centre for Advancing Practice Governance Maturity Matrix		
There is a business case to underpin the workforce planning for AP level roles to maximise their impact, including standardised titles and banding and a succession plan where appropriate	Business cases, workforce plans		
We have surveyed our staff to establish where enhanced and advanced roles already exist and have mapped existing roles against the Framework to establish where development is needed for transition to AP roles	Workforce reviews, local AP database, AP mapping tool		
For those on full training pathways (including apprenticeships), we have fully funded training posts with agreed on-the-job protected learning time and off-the-job study leave for all AP level roles	Job descriptions, job plans, AP apprenticeships		
We have robust processes for recruitment and selection into AP level roles and for monitoring progress and certifying completion of training	AP strategy document		
All AP supervisors have time specified in their job plans for supervision of AP (minimum 1 hour per week)	Job plans		
We have clearly defined substantive AP posts for trainees to move into on completion of their training	Job descriptions, job plans, workforce plans		
We have processes to ensure that the NHS England supervision fee (£2600 per trainee per year) is accessible at service level	AP strategy document, communications, minutes of meetings		
We provide support, training and induction for staff who supervise clinicians in AP roles in training and beyond	AP strategy document		
We have discussed our plans for AP with our ICS/STP and Local People Boards	Communications, minutes of meetings		
We have opportunities for trainee APs to develop capability across the four pillars via placements or rotations in other areas, supported by skills-specific supervision	Examples of rotations or placements		

Departmental or General Practice level	Examples of evidence in your organisation	Extent to which these are in place 1-4	Explain your decision
Organisational level			
The purpose and scope of AP roles in patient pathways are clearly articulated	Job descriptions, workforce plans		
We have in-house training pathways for AP, with specialty-specific curricula or core and specialist capabilities that encompass all four pillars of the Framework	Training pathway documents, curricula, competencies		
We have planned AP supervision in the context of existing learners and staff	Clinical supervision timetables/plans		
Each AP trainee has a named supervisor who is familiar with the requirements of AP	Workforce reviews, local AP supervisor database		
We have mechanisms for evaluating the impact of AP roles	Service evaluations		
Workplace assessment of AP trainees is carried out by competent assessors who are familiar with the assessment tools	AP strategy, workforce reviews		
We have links with specialty-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		
AP Trainee and Supervisor level			
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		
AP trainees have an agreed scope of practice and there is a clear strategy for them to evidence their competence and progression.	Job descriptions, job plans, curriculum frameworks, competency frameworks		
AP supervisors have completed training in supervision and have on-going support for their role	Workforce reviews, local supervisor database		
There are support networks for both trainees and supervisors (in-house, ICS/STP-wide or specialty specific)	Local supervisor database, supervisor networks/events		
Action plan to address factors self-assessed at 1, 2 and 3:	SMART (Specific, Measurable, Attainable, Relevant, and Time-Bound) Objectives:		

Appendix 4

Supervisor Readiness Checklist

South East Region 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. Many registered health professionals will have received training in supervision. For example, you may have completed a supervision module as part of your MSc in advanced practice and if you are

a doctor who is a **GMC accredited educational supervisor** then you will already have received training to support supervision at an advanced level. If you are new to supervising a multi-professional trainee advanced practitioner, are you ready to supervise health professionals with other registrations?

You just have to complete the checklist on the following pages to self-assess your readiness to supervise a trainee advanced practitioner. You can assess yourself as **fully ready, partially ready, or not ready.**

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;		
I have time to provide a minimum of 1 hour of supervision to my trainee per week as a co-ordinating education supervisor/associate supervisor.	Job plans		
I understand the specific requirements of the advanced level practice MSc programme and/or credential that my trainee is undertaking.	HEI MSc programme handbook, credential specification or other national capability/ curriculum framework.		
I understand the trainee's profession and education content of their pre-registration training.	Profession specific standards of proficiency.		
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.	Advanced practitioner job description.		
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.		

Factors suggesting readiness for Advanced Practice	Examples of evidence	Am I ready?	Personal Action Plan
I understand the core capabilities of advanced practice as articulated in the multi-professional framework for advanced clinical practice.	Multi-professional framework for advanced clinical practice in England.		
I understand my role as a co-ordinating education supervisor/associate supervisor in supporting a developing the trainee advanced practitioner.	Workplace supervision for advanced clinical practice: An integrated multi-professional approach for practitioner development.		
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.		
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		
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 are planned and prioritised each week to monitor progress.	Job plans; clinic rotas		
I am aware that over extended periods of absence of more than 4 weeks, 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; appraisal documentation; participation in supervisor forums; peer support; supervision sessions.		
I know who the advanced practice lead for the organisation is and how to access support if my trainee runs into difficulties.	Organisation policy		

Appendix 5

Readiness to become an advanced practitioner

South East Region Faculty of Advancing Practice

Introduction

If you are aspiring to be an advanced practitioner or are already in post and applying for funding to complete your advanced clinical practice MSc, it is important to understand the expectations and commitment needed to train for this role.

The following checklist is for aspiring and trainee advanced practitioners to self-assess their readiness for advanced practice training. You can assess yourself as **fully ready**, **partially ready**, or **not ready**.

Factors suggesting readiness for Advanced Practice	Examples of evidence	Am I ready?	Personal Action Plan
I understand the 4 pillars of advanced practice and how these are an integral part of the advanced practice role.	Multi-professional framework for Advanced Clinical Practice in England		
I understand the core capabilities of advanced practice as articulated in the Multi-professional framework for advanced clinical practice.	Multi-professional framework for Advanced Clinical Practice in England		
I understand the advanced clinical practice MSc programme/ curriculum/credential that I am undertaking and how this relates to my role.	HEI programme handbooks; credential; specialist AP curriculum e.g. RCEM ACP curriculum and assessment.		
I have an agreed scope of practice that details the requirements and limitations of my role.	Scope of practice; job description.		
I meet the HEI academic requirements for enrolling on an advanced clinical practice MSc programme.	HEI programme handbook and website.		
I know how often I am expected to attend lectures and study days at the university and have agreed protected time with my manager to join these.	HEI programme handbooks.		

Factors suggesting readiness for Advanced Practice	Examples of evidence	Am I ready?	Personal Action Plan
I know how much additional study time is recommended by my programme and have agreed a plan with my manager to enable this.	HEI programme handbooks		
A co-ordinating education supervisor has been identified for me before I commence my training and they have completed the advanced practice supervisor's readiness checklist.	Workplace supervision for Advanced Clinical Practice: An integrated multi-professional approach for practitioner development.		
I have associate supervisors who can support and assess me across all 4 pillars of advancing practice.	Workplace supervision for Advanced Clinical Practice: An integrated multi-professional approach for practitioner development.		
I understand the importance of engaging in regular supervision and the assessment of capability to ensure patient and practitioner safety.	HCPC standards of conduct, performance and ethics; NMC Standards for student supervision and assessment;		
I have an agreed job plan that covers all 4 pillars of practice, allows for a minimum of 1 hour of supervision per week and has additional, independent study time agreed.	Job plan.		
I understand I should complete a learning needs analysis; a personal development plan and a learning contract with my co-ordinating education supervisor to guide and support my development.			
I understand I must work in partnership with my employer, advanced practice lead, HEI and the Regional Faculty for Advancing Practice to proactively identify any supervision issues, learning environment needs or difficulties in achieving learning objectives that may affect my progression to try to find a resolution.	NHS England commitment statement		
I know who the advanced practice lead for the organisation is and how to access support should difficulties arise.	Organisation policy		

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for all enquiries relating to advanced practice.