 

Primary Care Kent Surrey and Sussex

Training Hubs’ Strategic Guidance for Advancing Practice

2023-24

In collaboration with KSS Primary Care School and NHSE South East Advanced Practice Faculty

“With the right education, support and experience, advanced clinical practitioners can successfully provide a much-needed addition to the general practice workforce”

(Health Education England 2017)

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* Allison Hawes (Primary Care Clinical Lead, Kent Surrey and Sussex Primary Care School)
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## Overview and Vision

This guidance is written for Primary Care organisations in Kent, Surrey, and Sussex.

The document supports Advanced Clinical Practitioner (ACP) trainees, supervisors, employers, and Training Hub ACP Leads within or across Primary Care Networks.

It outlines the ACP role, funding opportunities, supervision requirements, roles and responsibilities, and the application process.

Training Hubs across Kent, Surrey, and Sussex (KSS) are committed to ensuring that the workforce has the right skills to meet the diverse needs of their population. A key priority is to support employers to develop their workforce within a quality assured learning environment, whilst simultaneously providing robust and clear career progression for their workforce (Picture 1).



*Picture 1: Kent, Surrey and Sussex Primary Care ACP Strategy.*

**Contact details of local Training Hubs:**

**Kent and Medway Training Hubs:** kmpcth@nhs.net

**Surrey Training Hub:** syheartlandsccg.surreytraininghub@nhs.net

**Sussex Training Hub:** sxicb.sussextraininghubs@nhs.net

## Section 1: Key aim

The aim of this document is to provide local guidance for the development of Advancing Clinical Practice within KSS Primary Care to improve governance arrangements. It complements the [SE Faculty of Advancing Practice guidance](https://kss.hee.nhs.uk/wider-workforce-and-programmes/advancing-practice-faculty/).

## Section 2: Introduction and Background

The role of the ACP has evolved since the introduction of the multi-professional framework for advanced clinical practice in [Multi-professional Framework for Advanced Clinical Practice in England](https://www.hee.nhs.uk/sites/default/files/documents/multi-professionalframeworkforadvancedclinicalpracticeinengland.pdf) (HEE 2017).

The framework is the principal document that sets out the national definition, core capabilities and key principles for implementation of multi-professional advancing clinical practice. Since the development of the national framework individual professional roadmaps and core capability frameworks have been published and continue to be to support both clinicians and employers understand the role of ACPs for different professions, working within a variety of clinical settings, for example:

* [Core Capabilities Framework for Advanced Clinical Practice (Nurses) Working in General Practice / Primary Care in England](https://www.skillsforhealth.org.uk/images/services/cstf/ACP%20Primary%20Care%20Nurse%20Fwk%202020.pdf) (Skills for Health 2020)
* [Paramedic Specialist in Primary and Urgent Care Core Capabilities Framework.pdf (hee.nhs.uk)](https://www.hee.nhs.uk/sites/default/files/documents/Paramedic%20Specialist%20in%20Primary%20and%20Urgent%20Care%20Core%20Capabilities%20Framework.pdf) (Skills for Health 2019)
* [First Contact Practitioners & Advanced Practitioners - Roadmaps to Practice](https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/ahp-roadmaps/first-contact-practitioners-advanced-practitioners-roadmaps-practice) (Health Education England 2021)

The NHS Long Term Plan (NHS England 2019) and General Practice Forward View (NHS England 2016) have proposed new, more integrated models of care that span traditional boundaries between health and social care organisations. The NHS People Plan articulates an urgent need to invest in the development of new non-medical clinical roles and, in particular, advanced level skills to enable workforce expansion (NHS 2020).

The role of an ACP transcends a wide range of professional groups to ensure population health needs are met. ACPs provide complete episodes of care for patients of any age with a wide variety and range of presenting problems and health care needs. ACPs provide evidence based, high-quality care for patients throughout their health and social care journey, enabling capacity, capability, productivity and efficiency within the system (NHS England 2019). Moreover, to support standardisation of these roles and bring stability to workforce developments, Health Education England published the Multiprofessional Framework for Advanced Clinical Practice’ for England in 2017 (Health Education England 2017) that sought to provide a clear definition of Advancing Clinical Practice.

With the introduction of the KSS learning environment approval process there will be uniformity of governance and support for all learners within PCN’s. This will result in less disparity for ACPs and thus patient experience across the system.

Locality Training Hubs are working closely with NHS England Kent, Surrey and Sussex (NHSE KSS) Primary Care School and the South East Faculty of Advancing Practice to safely grow and support the advancing practice workforce within primary care, with the aim of meeting evolving demands and the population needs for the future.

The purpose of the ACP role development and NHS E funding is to ensure that there are the right numbers of staff, with the right skills, values, and behaviours, available at the right time and in the right place, to deliver high quality care to our population.

## Section 3: Advanced Clinical Practitioners and trainees

**3.1 What is an Advanced Clinical Practitioner?**

Advanced Clinical Practice 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. ACPs come from a range of professional backgrounds such as Nursing, Pharmacy and Allied Health Professionals. The ACP Multi-Professional Framework (Health Education England 2017) provides a clear and consistent approach to the development of advanced clinical practice across England.

***3*.2 Capabilities for advanced clinical practice**

All health and care professionals working at the level of Advanced Clinical Practice should have developed their skills and knowledge to the standard outlined in the Multi-professional Framework (Health Education England 2017) and the expected core capabilities and competencies as outlined by specific NHS E frameworks and roadmaps.

The four pillars of advanced practice that underpin all frameworks and roadmaps are:

1. Clinical Practice

2. Leadership and Management

3. Education

4. Research

Throughout an individual’s professional career, the level of distinction on each individual pillar will vary depending upon their role.

Individual professionals who have gained their advanced practice MSc whilst not working in primary care should self-assess their Primary Care specific capabilities against the relevant profession specific advanced practice frameworks ensuring they can practice safely in primary care. Identified training needs should be discussed with PCN educators, employers, or the training hub.

**3.3 Underpinning Principles of Advancing Clinical Practice**

Advanced Clinical Practice is not a role but a clearly defined level of practice within a clinical profession. ACPs traditionally work across professional boundaries and demonstrate values-based care, good management and leadership, innovating and autonomous practice, critical reasoning and thinking, high levels of decision-making and problem-solving,in a context of complexity, uncertainty and varying levels of risk, in turn accepting responsibility and being held accountable for them (NHS Health Education England 2015).

ACPs can work with the patient and agree a plan of care; deliver a large proportion of that care themselves or in partnership with medical colleagues and other members of the health and social care team.

More information on the full scope of the role can be found in the [HEE Multi-Professional Framework for Advanced Practice in England (HEE 2017).](https://advanced-practice.hee.nhs.uk/multi-professional-framework-for-advanced-clinical-practice-in-england/)

Advanced Clinical Practitioners can:

* Make professionally autonomous decisions, for which they are accountable
* Independently run clinics and undertake appropriate home visits
	+ Receive patients with undifferentiated and undiagnosed problems and assessing their health care needs, based on highly developed clinical knowledge and skills, including skills not usually exercised by registered healthcare professionals, such as physical examination
	+ Screen patients for disease risk factors and early signs of illness
	+ Order necessary investigations, and providing treatment and care both individually, as part of a team, and through referral to other agencies
	+ Have a supportive role in helping people to manage and live with illness
	+ Have the authority to admit or discharge patients from their caseload, and refer patients to other health care providers as appropriate
* Work collaboratively with other health care professionals and other disciplines

Importantly, ACPs develop expertise in leadership, management, education and research. This enables them to support activities such as, but not restricted to:

* Peer appraisal
* Inter-professional supervision and CPD
* Evidenced based practice and audit activity including quality improvement
* Leadership and management activities
* PCN or system leadership roles in support of community education facilitation

*“Being an ACP in general practice is a really great job which allows me to utilise a blend of medical and nursing skills. Having had good, formalised training, I have been able to build on it over many years to practise at the level I do now, assessing and diagnosing undifferentiated conditions and managing complex patients. I work in a team where I am valued for my expertise and supported to make use of my educational and leadership skills. I thrive on the variety of being a generalist, while also being able to specialise in diabetes. I could easily retire but have no plan to do so while I am enjoying it and working at the top end of my licence” Experienced* Advanced Clinical Practitioner.”

*Picture 2: Source ACP colleague in Sussex.*

## Section 4: Education/Training Opportunities

**4.1 Funding**

All funding decisions are reviewed on a bi-annual basis, so please refer to NHSE national and regional guidance.

Currently the MSc Advanced Clinical Practice 3-year programmes can be accessed via the apprenticeship levy and a limited number of fully commissioned places via the South East Faculty of Advancing Practice.

Access to commissioned Advanced Clinical Practice MSc programmes and supervision grants for trainees accessing the Apprenticeship Advanced Clinical Practice programme are determined by the South East Faculty of Advancing Practice and local training hub processes, for further information go to [HEE KSS Advancing Practice Faculty](https://kss.hee.nhs.uk/wider-workforce-and-programmes/advancing-practice-faculty/) website.

**Employers supported by their local Training Hub are required to submit relevant paperwork in line with the South East Faculty of Advancing Practice application process for the specified year.**

The 2023-2024 funding offer for a commissioned Advanced Clinical Practice MSc place is provided by the South East Faculty of Advancing Practice and is normally inclusive of tuition fees (paid directly to the education provider) and an education and supervision grant paid to the employer for the agreed duration of the programme. A supervision grant may also be available for employer-funded trainees on the Apprenticeship ACP programme. All education and supervision grants are received by local training hubs from SE regional AP Faculty as part of their Learning and Development Agreements quarterly. Primary Care organisations can invoice their local training hub as agreed for the allocated funds.

Please refer to [Advancing Practice in the South East Region A guide to implementing and funding advanced practice (hee.nhs.uk)](https://wessex.hee.nhs.uk/wp-content/uploads/sites/6/2021/12/HEE-South-East-advance-practicev3-G.pdf) (South East Faculty of Advancing Practice 2021).

## Section 5: Supervision requirements

Supervision is paramount to the success of ACPs in all settings.

Supervision is about feedback and support for developing skills and must not focus only on the portfolio and evidence, but on the individual developing clinical, leadership, educational and research competencies.

Guidance for [Workplace Supervision for Advanced Clinical Practice](https://www.hee.nhs.uk/sites/default/files/documents/Workplace%20Supervision%20for%20ACPs.pdf) (Health Education England 2020a) and [Advancing Practice in the South East Region A guide to implementing and funding advanced practice (hee.nhs.uk)](https://wessex.hee.nhs.uk/wp-content/uploads/sites/6/2021/12/HEE-South-East-advance-practicev3-G.pdf) (South East Faculty of Advancing Practice 2021) are available to support trainees, supervisors and employers.

|  |  |
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| **Coordinating Educational Supervisor** | Can be a GP ES or RMSV. Or an AP AHP/Pharmacist or Nurse who has completed the Roadmap Supervisor course. Any HCP should be at least 3 years in their ACP or GP role before undertaking this role. |
| **Associate Workplace Supervisor** | Could be carried out by a healthcare professional who has completed some form of supervision training. For example, the Practice Assessor or Practice Supervisor courses, AHP Practice Educator courses, RMSV, GP CS or ES or pharmacy specific supervision programmes. |

## Section 6. Selection process

The purpose of a robust recruitment programme is to ensure that the right person with the right skills, values and behaviours is recruited onto the Advanced Clinical Practice programme. It is recommended that the recruitment of trainee ACPs considers alignment to both the employers’ and NHS values and behaviours.

Rigorous selection and interview processes **MUST** be followed by all organisations to ensure a fair and transparent approach to decisions about eligibility and access to funded training programmes. Allocation of places will depend upon the service need required per locality.

It is important to note that the recruitment panel for the Advanced Clinical Practice programme has the final decision regarding commission places. Unsuccessful applicants can reapply when additional commission places become available or apply via the apprenticeship route.

**6.1 Application process**

Before Individuals apply for funding they are expected to:

* be qualified for a minimum of 3 years for Nurses and 5 years for AHPs following specific roadmaps
* working in primary care for a minimum of 1 year
* meet the entry criteria for their chosen University before applying for advanced practice funding
* if relevant completed FCP roadmap stage 1 and 2
* For ARRS funded paramedics they must be compliant with the requirements set out in the [PCN Network DES](https://www.england.nhs.uk/publication/network-contract-directed-enhanced-service-contract-specification-2022-23-pcn-requirements-and-entitlements/) and [FCP Roadmap](https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/roadmaps-practice-0).

They are required to complete all relevant documentation for the specified year as advised by Training Hubs:

* Local Training Hub approval - application form (Appendix 7) and interview
* South East Faculty of Advancing Practice approval - Trainee application request submitted by local Training Hub
* HEI approval - upon approval from local Training Hub and South East Faculty of Advancing Practice, trainee to submit application to HEI for acceptance onto the ACP programme

*Please contact your local Training Hub for further information.*

## Section 7: Governance

To support employers and training hubs to grow and embed Advanced Practice safely within organisations, The Centre of Advancing Practice have developed the following guidance - [Governance of advanced practice in health and care provider organisations (HEE 2022).](https://advanced-practice.hee.nhs.uk/resources-news-and-events/governance-of-advanced-practice-in-health-and-care-provider-organisations/)

Organisation ACP Leads / Managers are required to review the website and complete the maturity matrix to fully understand where their organisation maps and any future support they might require from the training hub / South East Faculty of Advancing Practice.

The Matrix covers:

* Governance
* Leadership
* Workforce
* Business Case
* Training
* Clinical
* Supervision
* CPD

An Introduction to the Advanced Practice Governance Maturity Matrix webinar is available here: [Governance of advanced practice in health and care provider organisations - Advanced Practice (hee.nhs.uk)](https://advanced-practice.hee.nhs.uk/resources-news-and-events/governance-of-advanced-practice-in-health-and-care-provider-organisations/).

As part of the robust recruitment and selection process the following contract agreements **MUST** be agreed by all parties:

**7.1 Trainee agreement**

* It is expected that the trainee ACP is working towards developing a learning environment consistent with the Place Based Learning and continues to work to develop others around them
* Trainee ACPs are expected to attend regular ACP Peer Support meetings / Action Learning Sets
* Trainee ACPs will discuss with their employer the need for agreed 20% off-the-job learning, inclusive of study leave and on-the-job protected supervision time and will highlight to their local Training Hub any concerns
	+ Spending a minimum 1-hour per week with their agreed Coordinating Education Supervisor
* Trainees selected for commissioned places according to an identified service need will be expected to remain with the employer that originally supported their application
* Trainees are expected to be proactive in managing their learning journey and are required to provide feedback to their local Training Hub **every 6 months** or sooner if any issues are identified (Appendix 3)

Trainees must follow the South East Faculty of Advancing Practice Trainees in difficulty process, found [here](https://kss.hee.nhs.uk/wider-workforce-and-programmes/advancing-practice-faculty/), at the first sign of any concerns with their studies or learning environment. In the case that the trainee wants to change employer, they must discuss this with their local Training Hub. Any requests will be reviewed on an individual basis by the South East Faculty of Advancing Practice 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 therefore if the trainee moves from the original place of employment, funding may stop. SE Regional AP Faculty would first consider how it can continue funding the current employer who was granted the funding for a trainee ACP and, only where that is not possible, look to see how the trainee ACP can continue to be supported, see [Advancing Practice in the South East Region A guide to implementing and funding advanced practice 2022-2023 document](https://wessex.hee.nhs.uk/wp-content/uploads/sites/6/2021/12/HEE-South-East-advance-practicev3-G.pdf).

In the exceptional case of funding transfer, a funding transfer form must be completed and submitted to the training hub (Appendix 8).

**7.2 Employer agreement**

* The role of ACPs and those in training must be supported and embedded within the employer’s workforce plans / structures
* It is expected that the employer is working towards developing a learning environment consistent with Place Based Learning
* It is expected that each employer will provide clear expectations of the scope of practice for the trainee:
	+ relevant job descriptions (Appendix 1) and job plans (Appendix 2)
	+ appropriate level of indemnity
	+ access to ACP forums / Peer Support / Action Learning Sets
	+ supervision (or access to supervision) from an appropriately qualified Coordinating Education Supervisor and Associate Supervisors
	+ All Coordinating Education Supervisors must have time specified in their job plans for supervision of ACP (minimum 1 hour per week)
* Employers must allocate 20% off-the-job learning, inclusive of study leave and on-the-job protected supervision time
* It is also expected that the employer / Coordinating Education Supervisor will provide feedback to their local Training Hub **every 6 months** or sooner if concerns are identified (Appendix 4).
* **NB. Employers must ensure that all ACP trainees have clearly defined substantive ACP posts to move into on completion of their training.**

**7.3 Local Training Hubs agreement**

* Local Training Hubs are accountable to the Primary Care School and provide advice and guidance to trainees and employers in line with the key principles of advanced clinical practice as set out in the national framework, individual professional roadmaps, and core capability frameworks.

 Training hubs will identify a lead for ACPs who will:

* Submit an ACP documentation to KSS and South East Faculty of Advancing Practice to obtain fully funded commissioned training places and supervision grants
* Maintain regular communication with the South East Faculty of Advancing Practice, to evaluate the impact of training and identify clear learning outcomes. This includes biannual trainee check in quality assurance calls. Failure to maintain consistent communication with the SE Faculty of Advancing Practice can result in funding being withdrawn
* Monitor ACPs progress
* Manage concerns identified by ACP / employer / supervisor / university with support of Local Training Hub
* Oversee all finances related to ACPs

**7.4 Concerns**

It is imperative that the educational/training environments are of a high standard, so that the trainee, supervisor, and employer have a good learning experience and patient safety is protected.

Training Hubs are committed to supporting a positive learning culture via the implementation of Place Based Learning. Furthermore, Training Hubs have a quality management role in ensuring that concerns from either the trainee ACP, Coordinating Education Supervisor, employer and/or education provider are explored and that all parties are supported. In turn the Primary Care School links with the Quality team to ensure the [HEE Quality Framework from 2021](https://nshcs.hee.nhs.uk/publications/health-education-england-hee-quality-framework-from-2021/) (Health Education England (HEE) Quality Framework from 2021 — Publications, 2021) is upheld.

To ensure standardisation across the system, the South East Faculty of Advancing Practice [‘Trainees in difficulty: general principles’](https://wessex.hee.nhs.uk/wp-content/uploads/sites/6/2021/12/HEE-South-East-advance-practicev3-G.pdf) indicates processes that are required to be followed. Additionally, the Primary Care School Triggered Quality Assessment Record of conversation document (Appendix 9) forms the basis for any tripartite visits undertaken by the Advancing Clinical Practice lead within each organisation.

## Section 8: Embedding the role

ACP roles are a valued part of the workforce and are pivotal to meeting the future needs across the system. For the role to be successful it needs to be embedded successfully within each organisation.

**8.1 Recommended pay scales**

Across organisations there is inconsistency in pay of trainee and qualified ACPs. It is important to recognise that this can destabilise organisations across the system. Not all organisations follow Agenda for Change (AFC), for example Primary Care, however the following is recommended to ensure standardisation across the system and nationally.

Trainee ACPs should commence on AFC Band 7, working up towards Band 8a on qualifying. To support continued progression and recognition of further experience and expert practice and leadership development ACPs can progress to Band 8b. This would involve an ACP being able to:

* Lead an ACP team
* Support, educate and develop Trainee and newly qualified ACPs
* Demonstrate expert/experienced level of mapping to the four pillars with minimal to no development requirements
* Be actively leading for the advanced practice agenda locally, within their PCN and wider NHS organisation
* Involvement at a strategic level around service improvement and the role of the ACP in Primary Care
* Have an agreed supervisor throughout their career (including upon qualifying).

**These attributes are not an exhaustive list but are a guide.**

Further development to consultant level is also possible (guidance for this is in development).



*Picture 4: Diagram of the ACP AFC Bands (NHS Health Education England, 2015).*

**8.2 Recognition of prior learning**

Practitioners may have achieved advancing levels of practice through a combination of courses and experiential learning. Individuals can apply to the Centre for Advancing Practice for the supported e-portfolio approach to recognition of prior learning, see link: [Advanced Practice e-portfolio](https://advanced-practice.hee.nhs.uk/eportfolio-route/).

**8.3 Regulation**

It is important that the individual ACPs and Trainees can provide evidence of their competencies and capabilities and employers can demonstrate to the Care Quality Commissions (CQC) how they assure the competence of staff employed in advanced clinical practice roles.

**Please refer to the documents and websites referenced for specific understanding of the regulatory and employment expectations.**

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## Appendices

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### Appendix 1: Sample Job descriptions

**Trainee Advanced Clinical Practitioner Job Description**

1. **JOB DETAILS**

|  |  |
| --- | --- |
| **Job Title:** | **Trainee Advanced Clinical Practitioner** |
| **Band or equivalent:**  | **7** |
| **Practice** |  |
| **PCN** |  |
| **Reports to:** | *Name of Practice Supervisor* |

1. **JOB SUMMARY**

The Trainee Advanced Clinical Practitioner (tACP) will be supported through indirect supervision to be responsible for assessing, diagnosing, interpreting investigations, and treating patients within Primary Care within a developing scope of competence. They will monitor and assist with improving standards of care utilising clinical expertise and experiences. They will teach and support colleagues where appropriate, providing professional clinical leadership. Where appropriate they will act as an expert in their field and lead and/or participate in initiatives to improve standards of care for the client group and assisting to advancing the ACP role.

The Trainee Advanced Clinical Practitioner is service driven, and will be developing themselves around the Department of Health Guidance across the four domains of Advanced Practice, those being:

1. Expert Practice
2. Practice and service development, Research and Evaluation
3. Education and Training
4. Professional leadership and Consultancy

**JOB PURPOSE**The post holder will be an experienced Nurse/AHP/Pharmacist qualified to undergraduate level. Individual training needs will be met by undertaking an MSc in Advanced Clinical Practice and a clinical portfolio to achieve the level of competence required by the post. The trainee will be paid at Band 7 (minimum of 3 years) until completion of all competences deemed necessary for autonomous practice where they will then pay at Band 8a.

On completion of both theoretical and practical components of this training post the advanced clinical practitioner will:

* Be able to demonstrate safe, senior clinical decision-making by autonomously assessing patients presenting to Primary Care including initial history taking, clinical assessment, diagnosis, treatment, and evaluation of care with prescription of any medication required.
* Demonstrate critical thinking in the clinical decision-making process. They will work collaboratively with the multi-professional practice team to meet the needs of patients and will play a key role in service delivery and adherence to policy and procedures.
* Provide and assure safe care to patients and service users and maintain a safe environment for all according to local and national standards and evaluating and researching patient safety across all areas.
* Play a pivotal role in the operational development of the service. They will initiate, manage and drive change within their area, innovating changes in practice for the benefit of patient care in line with Primary Care Network (PCN) and local programmes.
* Facilitate an effective workplace culture across all areas of the PCN.
* Sustain person-centred, safe, and effective care through self-awareness, leadership, active learning, development, improvement, and innovation).
1. **KEY RESULT AREAS/MAIN DUTIES AND RESPONSIBILITIES:**
	1. **Clinical Expert Practice**
		1. Work autonomously as well as within defined patient pathways of care to assess, examine, investigate, diagnose, and treat patients with a wide range of physical, social, and psychological needs and presenting complaints.
		2. Practice in accordance with the professional, ethical, and legal framework for advanced clinical practice.
		3. Appropriately interpret information and use knowledge and judgement to highly provide specialist advice when reviewing, analysing, and evaluating all aspects of the patients care and treatment plan according to their holistic needs.
		4. Undertake appropriate investigations and treatments utilising evidence-based practice/clinical guidelines applying skill, knowledge, experience, and clinical judgement to meet individuals’ specific needs.
		5. Use skills to practice at an advanced level to facilitate advanced physical assessment, clinical examination, investigation, diagnosis, and management of patients.
		6. Aware of own limitations and limitations of role to refer to other practitioners when needs and risks are beyond their own scope of practice liaising with the multidisciplinary team as required.
		7. Obtain consent when undertaking assessments and when discussing implementation of investigation and treatment plans giving alternatives when appropriate to facilitate patient choice.
		8. Evaluate the effectiveness of interventions and treatment using evidence-based practice, whilst using knowledge and skills to assess further patient needs.
		9. According to current legislation and practice policy undertake independent prescribing if relevant for the role.
		10. Maintain legible and accurate patient notes, both written and electronic, in accordance with local and national professional policies and guidelines.
		11. Ensure that all practice within the clinical area complies with additional policies and procedures.
		12. Provide clinical leadership and development support to the multi-disciplinary team.
		13. Where issues of clinical competence are identified, work with their supervisor to address them.
		14. Contribute to the local resolution, investigation and follow action of any informal or formal complaints.
		15. To maintain own personal & professional development, keeping professional portfolio of evidence up to date.
		16. Act as a credible clinical role model.
		17. Practice in a confident and competent professional manner.
		18. Ensure dignity, privacy, and cultural and religious beliefs are always respected.
	2. **Practice and Service Development, Research and Evaluation**
		1. To participate in the systematic monitoring and evaluation of practice within the clinical area, ensuring that it is evidence-based. In conjunction with the team, participate in the development of action plans which aim to enhance the quality of practice using the results of audits undertaken. Participate in the evaluation of the changes made in practice.
		2. To lead in setting and maintaining evidence based and current practice as well as be involved in the delivery of new developments and evidence-based initiatives within the area.
		3. Undertake data collection effectively for recognised audits and service reviews.
		4. To audit, evaluate and review the quality of their own work, and where necessary make appropriate improvements or suggestions to improve standards and raise quality of performance.
		5. To inform and influence Clinical Governance issues.
		6. To actively inform and promote network sharing and sharing of achievements and innovative practice.
		7. To ensure research and audit findings and recommendations are communicated to appropriate stakeholders and individuals.
		8. Take an active role in evaluating current service provision and give constructive views on how service could be developed and the impact on individual roles, service provision and services.
	3. **Educational Responsibilities**
		1. In conjunction with senior colleagues identify the training/development needs of staff within the clinical area.
		2. Facilitate the implementation of clinical competencies within the clinical environment.
		3. Facilitate the implementation of clinical supervision within the clinical area, providing clinical support where appropriate.
		4. Act as a mentor & preceptor to staff and students as required.
		5. Facilitate training and education within their area as well as in the wider arena as appropriate using specialist knowledge and skills to enhance the knowledge and practice of others.
	4. **Professional Leadership**
		1. Work collaboratively with secondary, community and intermediate care teams, ensuring there is seamless care across organisational boundaries.
		2. Work with clinical and leadership teams to develop new and improved processes to streamline and improve patient flow and care processes.
		3. To assist with development of new initiatives and ways of working, including nurse/AHP led services, informed by local and national Policy.
		4. To provide professional support to nursing/AHP staff within primary care and to those staff engaged in specific service developments.
		5. To act as a positive role model to inspire those working within these services including pre-registration students, to improve and develop services that promote the best interests of patients within primary care.
		6. Participates in developing professional practice nationally through membership of relevant professional associations and forums where appropriate.
		7. Share best practice and new evidence through publications and presentation at local, national and international conferences/meetings as appropriate.

**4. Structure Chart**

|  |
| --- |
| **Please include for organisation.** |

**5.** **Core Values**

|  |
| --- |
| **Our values** |
| Kent, Surrey and Sussex CCGs are values-based organisations who are proud to embed the CCG values into everything they do. Our priority is to ensure all our staff work to the same values of: **Working together for patients**: Patients come first in everything we do.**Respect and dignity**: We value every person.**Everyone counts**: We maximise our resources for the benefit of the whole community, and make sure nobody is excluded, discriminated against, or left behind.**Compassion**: We ensure that compassion is central to the care we provide and respond with humanity and kindness.**Commitment to quality of care**: We earn the trust placed in us by insisting on quality and striving to get the basics of quality of care right every time.**Improving lives**: We strive to improve health and wellbeing and people’s experience of the NHS. |

**PERSON SPECIFICATION**

**POST:**

**BAND:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\***Assessment will take place with reference to the following information

A=Application form I=Interview T=Test C=Certificate

|  |  |  |  |
| --- | --- | --- | --- |
| **Area** | **Essential** | **Desirable** | **Assess-****ment** |
| **Values and Behaviours** |
|  **ESSENTIAL CRITERIA FOR ALL POSTS** |  |  |  |
| Demonstrable commitment to and focus on quality, promotes high standards to consistently improve patient outcomes  |  √ |  | **A/I** |
| Demonstrable skill to work together to serve our community through delivering safe and excellent clinical care |  √  |  | **A/I** |
| Value diversity and difference, operates with integrity and openness  | √ |  | **A/I** |
| Treat others with compassion, empathy, and respect  | √ |  |  |
| Share information openly and effectively with patients, staff, and relatives | √ |  |  |
| Work across boundaries, looks for collective success, listens, involves, respects, and learns from the contribution of others  | √ |  | **A/I** |
| Uses evidence to make improvements, increase efficiencies and seeks out innovation | √ |  | **A/I** |
| Actively develops themselves and others | √ |  | **A/I** |
| *Add any other desirable topics* |  |  |  |
| **Qualifications** |
| Educated to master’s level / degree level / NVQ / Certificate **OR** equivalent level of experience of working at a senior level/manager level/supervisor/ in specialist area*Add any other desirable qualifications* | **√** |  | **A/I** |
| **Knowledge and Experience** |
| Extensive knowledge of specialist areas, acquired through post graduate diploma or equivalent experience. State the specific knowledge *If applicable, add any other desirable knowledge and experience* | √ |  | **A/I** |
| CPD - Evidence of post qualifying and continuing professional development  | √ |  |
| Must have an understanding of the background and aims of current healthcare policy/national guidance/CQC/ and appreciate the implications of this on engagement  | √ |  |
| Member of relevant professional body  | √ |  |
| *If applicable, add any other desirable criteria* |  |  |
| **Skills and Capabilities** |
| Ability to negotiate on difficult and controversial issues including performance and change  |  |  |  |
| Analytical Skills Problem-solving skills and ability to respond to sudden unexpected demands  |  |  |  |
| Strategic thinking or for admin roles forward planning – an ability to anticipate and resolve problems before they arise  |  |  |  |
| Example - Planning Skills Demonstrated capability to plan over short-, medium- and long-term timeframes. Depending upon the role and its seniority, this will vary  |  |  |  |
| Advanced Communication skills, negotiation skills, influencing skills |  |  |  |
| Project Management skills if required for the post holder (prioritising, planning, adapting plans, resource planning) |  |  |  |
| Must be able to prioritise own work effectively and be able to direct activities of others. Experience of managing and motivating a team and reviewing performance of the individuals |  |  |  |
| Taking decision and to what level. Autonomy/Freedom to Act / compliance with the policies |  |  |  |
| Ability to make decisions autonomously, when required, on difficult issues, working to tight and often changing timescales |  |  |  |
| Skills, Working knowledge of Microsoft Office with intermediate keyboard skills and/or any other relevant IT systems applicable to the applicant |  |  |  |
| Equality and Diversity Needs to have a thorough understanding of and commitment to equality of opportunity and good working relationships both in terms of day-to-day working practices, but also in relation to management systems  |  |  |  |
| **Personal Attributions***(Use the following examples as appropriate)* |
| Experience of working in a busy environment |  |  |  |
| Adaptability, flexibility, and ability to cope with uncertainty  |  |  |  |
| Willing to engage with and learn from peers, other professionals, and colleagues in the desire to provide or support the most appropriate interventions |  |  |  |
| Professional calm and efficient manner  |  |  |  |
| Effective organiser/prioritisation skills |  |  |  |
| Influencer and networker |  |  |  |
| Demonstrates a strong desire to improve performance and make a difference by focusing on goals |  |  |  |
| Attention to detail |  |  |  |
| Highly motivated with ability to influence and inspire others |  |  |  |
| Ability to work independently |  |  |  |

**Generic Advanced Clinical Practitioner Job Description**

1. **JOB DETAILS**

|  |  |
| --- | --- |
| **Job Title:** | **Advanced Clinical Practitioner** |
| **Band or equivalent:**  | **8a** |
| **Practice/PCN:** |  |
| **Reports to:** |  |

1. **JOB SUMMARY**

The Advanced Clinical Practitioner (ACP) will provide expert assessment, treatment, and management of a case load, using complex communication skills, judgement, discretion and decision making. They will monitor and assist with improving standards of care, supervising, teaching, and supporting colleagues providing skilled professional leadership. Where appropriate they will act as an expert in their field and lead and/or participate in initiatives to improve standards of care for the client group and assisting to advancing the ACP role.

The Advanced Clinical Practitioner is service driven, and the role is structured around the Department of Health Guidance across the four domains of Advanced Practice, those being:

1. Expert Practice
2. Practice and service development, Research and Evaluation
3. Education and Training
4. Professional leadership and Consultancy

**JOB PURPOSE***This is a generic Job Description for Advanced Clinical Practitioners (ACPs) working within Primary Care. Specific responsibilities will vary between Primary Care Networks (PCNs)/Practices; however, all ACP posts will be expected to reflect the four pillars of Advanced Practice, Clinical Practice, Leadership, Education of self and others, and Research & Development.*

* To work to a high level of personal and professional autonomy, using specialist knowledge and skills to deliver independent assessment, clinical examination, diagnosis, clinical decision making and planning of care and treatment, health promotion and safe admission and discharge of patients.
* To act as an independent non-medical prescriber, where applicable to role/profession.
* To work collaboratively with all members of the multidisciplinary team to provide best clinical care, emotional and psychological support and education to patients and their carer’s.
* To facilitate evidence-based practice and promote and undertake research and clinical audit within the service. Design and provide clinical/practical and theory-based education and training, e.g., to nurses/AHPs, junior medical staff.
* To work with innovation and flexibility to adapt to a fast-changing specialty and play an integral role in the operational/strategic development of the service.
1. **MAIN DUTIES AND RESPONSIBILITIES:**
	1. **Clinical Expert Practice**
		1. Provide a visible presence and engage in direct clinical care and practice as appropriate.
		2. Assess diagnose, plan, implement, and evaluate treatment/interventions and care for patients.
		3. To make independent clinical decisions and initiate invasive and non-invasive treatments, care, and technological interventions as appropriate under supervision and with support of General Practice colleagues.
		4. To plan, order, interpret and act upon the results of tests and investigations.
		5. To provide evidence-based healthcare which contributes to the diagnosis, care, or treatment for patients.
		6. To demonstrate expertise in the assessment, planning, implementation, and evaluation of care for patients.
		7. To work as an expert practitioner and, upon referral, provide expert advice and/or care.
		8. To exercise a high degree of personal professional autonomy able to make critical judgements. In particular, regarding legal, ethical and moral aspects of care for patients who are particularly vulnerable.
		9. Ensure that accurate, essential, and appropriate written and verbal information is relayed to staff, ensuring adequate facilities are in place to maintain safety in the environment, ensuring effective management of this group of patients.
		10. Liaise with relevant Secondary and Social Care organisations, establishing local networks with the appropriate patient and carer groups.
		11. Collaborate with senior clinical colleagues, develop, or introduce agreed clinical guidelines for best practice and ensure that all practice developments are evaluated.
		12. Ensure dignity, privacy, and cultural and religious beliefs are always respected.
	2. **Practice and Service Development, Research and Evaluation**
		1. Manage and assess risk within the areas of responsibility, ensuring adequate measures are in place to protect staff and patients.
		2. Facilitate good team spirit through leadership skills and team building.
		3. Assist in ensuring confidentiality and safe keeping of records, promoting accurate and appropriate record keeping across the multidisciplinary team.
		4. Promote safe custody, maintenance, and administration of drugs in accordance with the local policy and the law.
		5. To liaise and work with other clinical staff to share expertise and co-ordinate approaches to care.
		6. Maintain effective liaison and promote good relationships.
		7. To attend relevant meetings where appropriate ensuring continuous effective communication.
		8. Provide support and advice to all disciplines of healthcare staff, acting as an excellent role model and demonstrating advanced clinical skills and knowledge.
		9. To be a “change agent” in the introduction of any change in practice required to meet the changing needs of patients.
		10. To establish an ongoing programme of audit to evaluate practice ensuring that the data is used to develop and improve the service.
		11. Involved in and support multi-disciplinary clinical audit and research across where appropriate, implementing innovations in clinical practice and actively encourages the utilisation of research and evidence-based practice.
		12. Supports quality improvement projects and promotes the use of methodologies to promote good clinical practice.
		13. To promote Primary Care as a model of good service and educational practice, leading the way for other organisations in this field.
		14. Participate in staff appraisal and setting of personal and department objectives where appropriate.
		15. To have a personal duty of care in relation to equipment and resources used within the Practice/PCN.
	3. **Educational Responsibilities**
		1. Provide a supportive environment for all staff (including pre-registration students) which encourages learning and professional development. This will require liaison with education providers and the Training Hub.
		2. To provide educational leadership, setting the strategic priorities facing the speciality and subsequently facilitating the provision of education.
		3. To actively participate in the development and delivery of future education and training provision, which recognises the needs of patients and is in line with national priorities.
		4. Collaborate with senior colleagues and educational establishments where appropriate to ensure the needs of service are met.
		5. To assist with the development of education and training which are appropriate for practitioners working within Primary Care.
		6. To identify own education and training needs and ensure that these are addressed through the appraisal process with the line manager.
		7. Evaluate the care of patients through a process of audit and research to examine and develop evidence-based practice and clinical effectiveness.
		8. Collaborate with other health care professionals in initiating and promoting research. Support where appropriate other individuals in the conduct of research and promote dissemination and implementation of findings.
		9. Make presentations on complex subjects, both written and verbally to a wide range of groups and at meetings and conferences external to the organisation in order to share work locally, nationally and internationally.
		10. Using computer software to input, extract and analyse data as required and to develop and create divisional/specialty reports and other reports as required in liaison with Information Services.
		11. Actively seek user involvement in developing services that are responsive to the needs of the local population.
	4. **Professional Leadership and Consultancy**
		1. Work collaboratively with secondary, community and intermediate care teams, ensuring there is seamless care across organisational boundaries.
		2. Work with clinical and leadership teams to develop new and improved processes to streamline and improve patient flow and care processes.
		3. To assist with development of new initiatives and ways of working, including nurse/AHP led services, informed by local and national Policy.
		4. To provide professional support to nursing/AHP staff within the PCN and to those staff engaged in specific service developments.
		5. To act as a positive role model to inspire those working within these services including pre-registration students, to improve and develop services that promote the best interests of patients within the PCN.
		6. As part of the wider Integrated Care Board (ICB) strategy, champion the development of ACP opportunities for research and education and raise the positive profile of the service through publications, conference presentations, professional networking, and organisational collaborations.
		7. Participates in developing professional practice nationally through membership of relevant professional associations and forums where appropriate.
		8. Share best practice and new evidence through publications and presentation at local, national and international conferences/meetings as appropriate.
	5. **Patient and Public Liaison**
		1. Act as a credible resource when speaking with patients and relatives, providing advice and support where appropriate.
		2. Provide specialist input into relevant patient and public involvement groups where appropriate.
2. **Organisational Chart**

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| --- |
| **Please include for organisation.** |

1. **Our Core Values**

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| --- |
| **Our Values** |
| Kent, Surrey and Sussex CCGs are values-based organisations who are proud to embed the CCG values into everything they do. Their priority is to ensure all staff work to the same values of: **Working together for patients**: Patients come first in everything we do.**Respect and dignity**: We value every person.**Everyone counts**: We maximise our resources for the benefit of the whole community, and make sure nobody is excluded, discriminated against, or left behind.**Compassion**: We ensure that compassion is central to the care we provide and respond with humanity and kindness.**Commitment to quality of care**: We earn the trust placed in us by insisting on quality and striving to get the basics of quality of care right every time.**Improving lives**: We strive to improve health and wellbeing and people’s experience of the NHS. |

**PERSON SPECIFICATION**

**POST: Advanced Clinical Practitioner**

**BAND: 8a**

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**\***Assessment will take place with reference to the following information

A=Application form I=Interview T=Test C=Certificate

|  |  |  |  |
| --- | --- | --- | --- |
| **Area** | **Essential** | **Desirable** | **Assess-****ment** |
| **Values and Behaviours** |
|  **ESSENTIAL CRITERIA FOR ALL POSTS** |  |  |  |
| Demonstrable commitment to and focus on quality, promotes high standards to consistently improve patient outcomes  | √ |  | **A/I** |
| Demonstrable skill to work together to serve our community through delivering safe and excellent clinical care | √  |  | **A/I** |
| Value diversity and difference, operates with integrity and openness  | √ |  | **A/I** |
| Treating others with compassion, empathy, and respect and  | √ |  |  |
| Share information openly and effectively with patients, staff, and relatives | √ |  |  |
| Works across boundaries, looks for collective success, listens, involves, respects, and learns from the contribution of others  | √ |  | **A/I** |
| Uses evidence to make improvements, increase efficiencies and seeks out innovation | √ |  | **A/I** |
| Actively develops themselves and others | √ |  | **A/I** |
| *Add any other desirable topics* |  |  |  |
| **Qualifications** |
| Relevant MSc, supplemented by relevant, experience and short courses• Independent non-medical prescriber (where applicable to role/professional group)• IRMER (Imaging Referral by Non-Medical Healthcare Professionals) training complete | √ |  | **A/C** |
| Completed advanced clinical practice MSc |  | √ | **A** |
| *If applicable, add any other desirable qualifications* |  |  |  |
| **Knowledge and Experience** |
| Experience of conducting audit/research | √ |  | **A/I** |
| Significant relevant experience to the level of advanced practice  | √ |  | **A/I** |
| Familiar with aspects of the NHS agenda and national directives and strategy relating to patient safety and quality improvement | √ |  |  |
| Understanding of the changing landscape of the NHS | √ |  | **A/I** |
| Conference presentations, publications |  | √ |  |
| Evidence of teaching experience within university setting |  | √ | **A** |
| Experience of running research and audit and implementing innovative practices |  | √ | **A** |
| Peer reviewed publication of research |  | √ | **A** |
| Evidence of reviewing articles for publication |  | √ | **A** |
| *If applicable, add any other desirable knowledge and experience*  |  |  |  |
| **Skills and Capabilities** |
| Ability to negotiate on difficult and controversial issues including performance and change | √ |  | **A/I** |
| Analytical Skills Problem-solving skills and ability to respond to sudden unexpected demands  | √ |  | **A/I** |
| Strategic thinking – an ability to anticipate and resolve problems before they arise  | √ |  | **A/I** |
| Excellent Communication skills, negotiation skills, influencing skills | √ |  | **A/I** |
| Management Skills and leadership skills - Must be able to prioritise own work effectively  | √ |  | **A/I** |
| Experience working as an autonomous practitioner in a Nurse Practitioner/AHP role or equivalent | √ |  | **A/I** |
| Provide multi-professional education and policy agenda. |  | √ | **A/I** |
| Involved in any research or service change as required, promoting best practice |  | √ | **A/I** |
| IT Skills, Database, spreadsheets and word processing | √ |  | **A/I** |
| Equality and Diversity Needs to have a thorough understanding of and commitment to equality of opportunity and good working relationships both in terms of day-to-day working practices, but also in relation to management systems  | √ |  | **A/I** |
| **Personal Attributions***(Use the following examples as appropriate)* |
| Highly motivated with ability to influence and inspire others | **√** |  | **A/I** |
| Willing to engage with and learn from peers, other professionals, and colleagues in the desire to provide or support the most appropriate interventions | **√** |  | **A/I** |
| Professional calm and efficient manner  | **√** |  | **A/I** |
| Effective organiser/prioritisation skills | **√** |  | **A/I** |
| Influencer and networker | **√** |  | **A/I** |
| Demonstrates a strong desire to improve performance and make a difference by focusing on goals | **√** |  | **A/I** |
| Ability to work independently | ***√*** |  | **A/I** |
| Adaptability, flexibility, and ability to cope with uncertainty | ***√*** |  | **A/I** |
| Convey highly complex concepts in an easily understood language with a creative and visionary approach to problem solving. | ***√*** |  | **A/I** |
| Interest in own professional development | ***√*** |  | **A/I** |

**Senior Advanced Clinical Practitioner Job Description**

* 1. **JOB DETAILS**

|  |  |
| --- | --- |
| **Job Title** | **Lead/Experienced ACP** |
| **Band or equivalent:**  | **8b** |
| **Practice/PCN** |  |
| **Reports to:** | *Professional Lead*  |

* 1. **JOB PURPOSE**

The post holder is an experienced registered professional qualified to MSc Advanced Practice Level within Primary Care. They will be working towards demonstrating they meet the four pillars of consultant practice, which are expert practice, strategic and enabling leadership, learning, developing, and improving across the system and research and innovation.

Individual learning needs will be met by undertaking regular training needs analysis to ensure individuals have the capability and competence needed to meet local population health needs.

Through continued professional development, the senior advanced practitioner will:

* Provide expert professional advice to patients / clients, carers and staff and be responsible for providing expert clinical care and leadership within Primary Care. Work to a high level of personal and professional autonomy, using specialist knowledge and skills to deliver independent assessment, clinical examination, diagnosis, clinical decision making, planning of care and treatment, and health promotion. This may include: -
* Home visits/nursing home visits as part of the agreed job plan.
* Act as an independent non-medical prescriber, where applicable to role/profession
* Work collaboratively with all members of the multidisciplinary team to provide best clinical care, emotional and psychological support and education to patients and their carer’s.
* Facilitate evidence-based practice and promote and undertake research and clinical audit within the service and across the PCN. Design and provide clinical/practical and theory-based education and training, e.g., to nurses/AHPs, junior medical staff.
* Work with innovation and flexibility to adapt to a fast-changing specialty and play an integral role in the operational/strategic development of the service.

**JOB SUMMARY**The Senior Advanced Practitioner will provide expert assessment, treatment, and management of a case load, using complex communication skills, judgement, discretion and decision making. They will monitor and assist with improving standards of care, supervising, teaching, and supporting colleagues providing skilled professional leadership. Where appropriate they will act as an expert in their field and lead and/or participate in initiatives to improve standards of care for the client group and assisting to advancing the Senior ACP role.

The Senior Advanced Practitioner will be service driven, and the role is structured around the Department of Health Guidance across the four pillars of Consultant Practice, those being:

1. Expert Practice
2. Strategic and enabling Leadership
3. Learning, developing, and improving across the system
4. Research and innovation
5. **KEY RESULT AREAS/MAIN DUTIES AND RESPONSIBILITIES:**
	1. **Expert Practice**
		1. Demonstrate advanced professional theoretical and practical knowledge.
		2. Assess individual patient needs using a range of different methods that manage risk and are appropriate to the needs of the clients across the whole spectrum of primary care, ensuring that highly complex facts or situations, requiring analysis, interpretation, and comparison of a range of options are considered.
		3. Determine therapeutic programs, which involve autonomous assessment, diagnosis, treatment, and discharge of patients who attend the practice and able to prescribe a range of medicines within individual scope of practice, across the whole spectrum of their specialty.
		4. Work in partnership with the patients and their relatives, along with the other professionals to make sound decisions, which are ethically based and in the interests of the patients in the absence of precedents and protocols.
		5. Develop services that are focused on the individual patient and underpinned by research.
		6. Ensure that care is reviewed regularly in conjunction with the multi-disciplinary team to improve the quality of care received by patients and their families.
		7. Work with professional bodies, clinical networks, commissioners, regional and national level organisations, third party sectors, charities, and other parties.
		8. Promote professional practice and ensure all staff comply with relevant legislation, HCPC, Nursing and Midwifery Council (NMC) codes and guidance.
		9. Advise managers on issues concerning professional practice.
		10. Contribute to how risk is managed in unpredictable and complex situations and where a precedent has not been set.
		11. Contribute to the ongoing development of evidence-based practice and improvement of quality, safety and health and service outcomes.
		12. Contribute to the ongoing development of putting in place and reviewing, care and service pathways, standards and policies, guidelines, procedures, service improvement and practice accreditation.
		13. Ensure there are formal systems in place for collecting and reviewing feedback from patients and service users, carers, and staff across services, working with service teams to identify and put in place any action needed as a result of that feedback.
		14. Ensure dignity, privacy, and cultural and religious beliefs are always respected.
	2. **Strategic and enabling leadership**
		1. Assist with creating a culture of effectiveness, inclusiveness, and excellence across how services are traditionally delivered, to develop:
* High performing independent health-care teams across the system
* Good places to work, where people matter and people from all backgrounds can excel
	+ 1. Encourage others to take on leadership responsibilities, building high-quality leadership from a wide range of backgrounds.
		2. Assist with supporting professional development that improves people’s leadership abilities, mentorship, and coaching, and how they give and receive feedback, learn from mistakes and build on good practice.
		3. Assist with building networks of leaders who can work together to deliver service, organizational and system objectives and respond positively and creatively to changing situations.
		4. Be working towards leading strategic development, improvement, inquiry, and innovation across specific workstreams that informs and responds to system objectives and supports commissioners, and senior leaders with their decision making.
		5. Work towards involving key partners in creating a bold and innovative shared vision which is in line with the future needs and aims of the general population across health and social care.
		6. Assist with building and maintaining sustainable partnerships across the ICB, nationally and internationally, drawing on standards and best practice evidence to guide decision-making.
		7. Assist with creating networks to allow for joint working across organisations and sectors.
	1. **Learning, developing, and improving across the system**
		1. In collaboration with Training Hubs assist with learning and development across the system and pass on knowledge and assess the effectiveness of educational activities.
		2. Support the creation of a learning culture across the system, providing opportunities for shared learning, development, and improvement and for others to develop their capabilities.
		3. Deliver person-centred, safe, and effective workplace learning, from practice to system level.
		4. Identify own education and development needs by regularly seeking feedback on own behaviour and values from others and using this information to reflect on actions to increase effectiveness as a practitioner.
		5. With support, implement peer learning reviews and ongoing learning and development systems, and evaluate their effect on service users and their families, carers and staff and services.
		6. Assist with developing the workforce so that staff can fulfil their potential, make progress in their careers, and meet the future needs of the system.
		7. Work in collaboration with higher education institutes and Training Hubs to make sure professional curriculums reflect excellence, the needs of the service, current evidence, and ways of working that inspire students and academic staff to contribute to future health and care, regionally and nationally.
		8. Start to engage with producing papers that should be published either in recognised peer reviewed professional publications or at professional conferences.
		9. Act as a professional resource in the field of Senior Advanced Practice.
	2. **Research and innovation**
		1. Work towards developing new insights from appraising, analysing, evaluating, and blending different types of evidence and knowledge from a variety of sources (e.g., including experiences of service users and carers, expertise, and local knowledge, considering the implications for practice).
		2. Evaluate knowledge, evidence, and experience of national and international developments in health and social care, to influence how future health and care services are developed across disciplines and beyond institutions.
		3. Contribute to knowledge of Advanced Practice and encourage others to do the same.
		4. Work towards building academic networks of research partnerships.
		5. Routinely be involved in research (local and national) and clinical audit in the field of Advanced practice, ensuring continuous evaluation of the practice of oneself and others, using a broad range of valid and reliable evaluation methods, which are appropriate to needs and context.
		6. Assist and contribute to national and international research, inquiry, innovation, and evaluation that generate new knowledge and understanding about safe and effective care across the system, involving public, service users and carers.
		7. Assist and contribute to national and international forums, guideline development groups, steering groups, policy development and strategy for your area of expertise, making sure the wider system benefits from the most advanced developments and strategic networks.
		8. Assist on activities that allow the widest access to new research innovations, outcome indicators and ways of working that will benefit health care, including high-quality publications, professional and public engagement strategies, and appropriate media.
		9. Work across boundaries within the system to work with stakeholders to provide wider perspectives and knowledge in relation to people, communities, healthcare, and services.
		10. Provide professional expertise to clinical and care pathways, services, organisations, systems, senior leaders and commissioners across complex issues and situations to add to the public’s knowledge, experience, and health outcomes.
		11. Act as a local, national, and international ambassador and provide expertise through learning and development opportunities, keynote conferences and consultancy and university honorary appointments, to allow closer links between education, research, and practice.
		12. Contribute their expertise and advice at stages of consultancy practice in a way that helps senior clinical leaders to improve decision-making and problem-solving.
		13. Assist with leading in programs (with other senior advanced clinical practitioners) of mentorship, development and evaluate the impact of change in consultancy practice across systems for advanced practitioners and senior clinical leaders, locally, regionally, and nationally.
1. **Other**

Job Holders are required to:

1. Maintain personal and professional development to meet the changing demands of the job, participate in appropriate training activities and encourage and support staff development and training.
2. Always keep requirements in mind and seek out to improve, including achieving~~.~~ Quality Outcome Framework (QoF) indicators
3. Adhere to primary care policies and procedures, e.g., Health and Safety at Work, Equal Opportunities, no smoking.

Respect the confidentiality of all matters that they may learn relating to their employment and other members of staff. All staff are expected to respect the requirements of the Data Protection Act 1998.

This job description does not purport to cover all aspects of the job holder’s duties but is intended to be indicative of the main areas of responsibility.

1. **Supervision**

The appointee will be responsible to a named GP for clinical supervision.

1. **Study Leave & Continuing Professional Development**

Study and professional leave will be granted at the discretion of the practice and in accordance with Terms and Conditions.

1. **Organisational Chart**

|  |
| --- |
| **Please add for organisation.** |

1. **Our Core Values**

|  |
| --- |
| **Core Values** |
| Kent, Surrey, and Sussex CCGs are values-based organisations who are proud to embed the CCG values into everything they do. Their priority is to ensure all our staff work to the same values of: **Working together for patients**: Patients come first in everything we do.**Respect and dignity**: We value every person.**Everyone counts**: We maximize our resources for the benefit of the whole community, and make sure nobody is excluded, discriminated against, or left behind.**Compassion**: We ensure that compassion is central to the care we provide and respond with humanity and kindness.**Commitment to quality of care**: We earn the trust placed in us by insisting on quality and striving to get the basics of quality of care right every time.**Improving lives**: We strive to improve health and wellbeing and people’s experience of the NHS. |

**PERSON SPECIFICATION**

**POST: Senior Advanced Practitioner**

**BAND: X**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\***Assessment will take place with reference to the following information

A=Application form I=Interview T=Test C=Certificate

|  |  |  |  |
| --- | --- | --- | --- |
| **Area** | **Essential** | **Desirable** | **Assess-****ment** |
| **Values and Behaviours** |
|  **ESSENTIAL CRITERIA FOR ALL POSTS** |  |  |  |
| Demonstrable commitment to and focus on quality, promotes high standards to consistently improve patient outcomes  |  √ |  | **A/I** |
| Demonstrable skill to work together to serve our community through delivering safe and excellent clinical care |  √  |  | **A/I** |
| Value diversity and difference, operates with integrity and openness  | √ |  | **A/I** |
| Treating others with compassion, empathy, and respect | √ |  |  |
| Share information openly and effectively with patients, staff, and relatives | √ |  |  |
| Works across boundaries, looks for collective success, listens, involves, respects, and learns from the contribution of others  | √ |  | **A/I** |
| Uses evidence to make improvements, increase efficiencies and seeks out innovation | √ |  | **A/I** |
| Actively develops themselves and others | √ |  | **A/I** |
| **Qualifications** |
| Relevant MSc in Advanced Clinical Practice | √ |  | **A/I** |
| * Independent non-medical prescriber (where applicable to role/professional group)
* IRMER (Imaging Referral by Non-Medical Healthcare Professionals) training complete
 | √ |  | **A/I** |
| Teaching/mentoring qualification |  | √ | **A/I** |
| **Knowledge and Experience** |
| Experience of change management working across the system |  | √ | **A/I** |
| Post registration specialty experience – to the level of advanced practice and be credentialed with the Centre for Advancing Practice | √ |  | **A/I** |
| Recognised and accessible as expert in field | √ |  | **A/I** |
| Experience of audit processes, research, and clinical trials | √ |  | **A/I** |
| Experience of educating/training colleagues at all levels across the system |  | √ | **A/I** |
| Experience of management of staff and resources | √ |  | **A/I** |
| Familiar with aspects of the NHS agenda and national directives and strategy relating to patient safety and quality improvement. | √ |  | **A/I/P** |
| Peer reviewed publication of research |  | √ | **A/I** |
| Evidence of reviewing articles for publication | √ |  | **A/I** |
| Member of relevant professional body  | √ |  | **A/I** |
| Member of additional national specialist interest groups |  | √ | **A/I** |
| *If applicable, add any other knowledge and experience* |  |  |  |
| **Skills and Capabilities** |
| Demonstrate the following interpersonal skills – tolerance, sensitivity and empathy with staff and clients  | √ |  | **A/I** |
| Ability to negotiate on difficult and controversial issues including performance and change across the system | √ |  | **A/I** |
| Analytical Skills Problem-solving skills and ability to respond to sudden unexpected demands  | √ |  | **A/I** |
| Strategic thinking - have an ability to anticipate and resolve problems before they arise to ensure continuity of service | √ |  | **A/I** |
| Planning Skills: Demonstrated capability to plan over short-, medium- and long-term timeframes factoring in national and regional guidance | √ |  | **A/I** |
| Evidence of advanced Communication skills, negotiation skills, influencing skills | √ |  | **A/I** |
| Management Skills and leadership skills - Must be able to prioritise own work effectively and be able to direct activities of others. Experience of managing and motivating a team and reviewing performance of the individuals | √ |  | **A/I** |
| Ability to make decisions autonomously on difficult issues, working to tight and often changing timescales | √ |  | **A/I** |
| Provide specialist clinical training and undertake presentations, both within the department and local HEIs as well as nationally and internationally at conferences and workshops | √ |  | **A/I** |
| IT Skills, Working knowledge of Microsoft Office and Excel with intermediate keyboard skills  | √ |  | **A/I** |
| Equality and Diversity - Needs to have a thorough understanding of and commitment to equality of opportunity and good working relationships both in terms of day-to-day working practices, but also in relation to management systems  | √ |  | **A/I** |
| Financial or Budgetary responsibilities - Involved in budget setting and working knowledge of financial processes  |  | √ | **A/I** |
| *If applicable, add any other skills and capabilities* |  |  |  |
| **Personal Attributes***(Use the following examples as appropriate)* |
| Used to working in a busy environment | √ |  | **A/I** |
| Adaptability, flexibility, and ability to cope with uncertainty  |  |  |  |
| Willing to engage with and learn from peers, other professionals, and colleagues in the desire to provide or support the most appropriate interventions  | √ |  | **A/I** |
| Professional calm and efficient manner  | √ |  | **A/I** |
| Effective organizer/prioritisation skills | √ |  | **A/I** |
| Influencer and networker | √ |  | **A/I** |
| Demonstrates a strong desire to improve performance and make a difference by focusing on goals  | √ |  | **A/I** |
| Attention to detail | √ |  | **A/I** |
| Highly motivated with ability to influence and inspire others | **√** |  | **A/I** |
| Ability to work independently | √ |  | **A/I** |

### Appendix 2: Job Plan – Examples

**Trainee ACP**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | Clinical | Clinical  | Workplace Supervision with coordinating supervisor | HEI / study day  | Clinical |
| **PM** | Admin –  | Clinical  | Clinical | Clinical |

**ACP**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | Clinical | Clinical  | Workplace Supervision with coordinating supervisor | Clinical | Clinical |
| **PM** | Admin – Focusing on audit (research) and leadership elements(leadership) | Clinical – supporting trainees (associate supervisor)(Education) | Clinical | Delivering education | Clinical |

**Lead/Experienced ACP**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | Innovating services – leadershipaudit & research  | Providing Workplace Supervision as coordinating supervisor  | Providing Workplace Supervision as coordinating supervisor | Delivering education at HEI or via other routes to PCN | Clinical |
| **PM** | Clinical  | Clinical | National HEE work |

### Appendix 3: Trainee Advanced Clinical Practitioner Feedback form

|  |  |
| --- | --- |
| **Name of Trainee:** |  |
| **Practice:** |  |
| **Email Address:** |  |
| **Name of Assessor:** |  |
| **Professional qualification of Supervisor:**  |  |
| **Assessor’s Email Address:** |  |
| **Modules completed and passed so far:***(Please include Recognition of Prior Learning)* |  |
| **Current module being undertaken:** |  |
| **Any claims, concerns, or issues:***(Please also include positive claims that can be shared and celebrated)* |  |
| **Date last Peer Support / Action Learning Set / Clinical Supervision attended:** |  |
| *I understand that I must inform my local Primary Care Workforce Development Lead of my progress every 6 months (every January and July) or sooner if any concerns / issues are identified. Failure to complete and return the attached form may result in loss of future funding.* |
| **Signature:** |  | **Date:** |  |
| **Please complete and return to your local learning and development department / training hub.** |

### Appendix 4: Trainee Advanced Clinical Practitioner PracticeFeedback form

|  |  |
| --- | --- |
| **Name of Trainee:** |  |
| **Practice:** |  |
| **Name of person completing the form:** |  |
| **Designation of person completing the form:**  |  |
| **Name of Assessor:** |  |
| **Professional qualification of Supervisor:**  |  |
| **Assessor’s Email Address:** |  |
| **Current module being undertaken:** |  |
| **Any claims, concerns, or issues:***(Please also include positive claims that can be shared and celebrated)* |  |
| **Signature:** |  |
| **Date:** |  |
| *Please update the local learning and development department / training hub on the progress of your ACP trainee every 6 months (every January and July) or sooner if any concerns / issues are identified. Failure to complete and return the attached form may result in loss of future funding.* |

### Appendix 5: Process for applications for Commission Places for Primary Care

**Training Hubs to complete yearly needs analysis identifying candidates for Commission ACP funded places – (Quarter 2).**

**Training Hubs to submit commissioning intentions for fully commissioned places to NHSE (Quarter 2).**

**)**

**Training Hubs to offer identifies candidate’s opportunity to apply for fully commission place (Quarter 3).**

**)**

**Review Applications** for commission funding requests supervision funding agreements from Practice manager (Quarter 3-4).

**)**

**Interview** Commission ACP candidates (Quarter 3-4).

**Training Hubs to inform applicants** of interview outcome and submit details to NHSE via Trainee Application form for review by Advancing Practice Faculty. (Quarter 4-1)

**Training Hubs/AP Faculty to inform applicant** of Advancing Practice Faculty outcomes. (Quarter 1-2)

**Successful applicants** to apply to the University

Depending on the timing of allocated commissions, the process of applying to the University may run simultaneously with the understanding that both the University and the TH process must be successful for the commissioned place.

**Training Hubs to** Inform the University via email of the Commission Awarded Candidates.

**Successful applicant to complete** Advancing Practice Faculty paperwork and submit to AP Faculty (Quarter 1-2).

\* NB dates are subject to change.

### Appendix 6: Process for applications for Apprenticeship Supervision Grants for Primary Care

**Training Hubs to complete yearly needs analysis identifying ACP candidates Apprenticeship Supervision Grants – (Quarter 2).**

**Training Hubs to submit commissioning intentions for Apprenticeship Supervision Grants to NHSE AP Faculty (Quarter 2).**

**)**

**Training Hubs to request ACP Apprentices to** submit details to NHSE via Trainee Application form for review by Advancing Practice Faculty (Quarter 4-1).

**Training Hubs to inform applicant** of Advancing Practice Faculty outcomes (Quarter 1-2).

**Successful applicant to complete** Advancing Practice Faculty paperwork and submit to Training Hub to return documents (Quarter 1-2).

\* NB dates are subject to change.

### Appendix 7: Application form for Primary Care - MSc Advanced Clinical Practice programme commissioned places

This application form consists of four sections. You are required you to complete all sections clearly.

Section 1: Personal and Professional details

Section 2: Declaration of support from Practice Manger

Section 3: Declaration of support from ‘Coordinating Education Supervisor’

Section 4: Personal intention form

**SECTION 1: PERSONAL AND PROFESSIONAL DETAILS**

|  |
| --- |
| **Personal Details:** |
| First Name: |  | Surname: |  |
| Preferred name: |  | Your pronouns | She/Her **□** He/Him **□** They/Them **□** Other (please specify) □ ………………………………….. |
| Accessibility / learning need requirements: |  |
| Profession: |  |
| Date of registration: |  | Years post-registration experience?(Minimum 3 years FTE nursing 5 years FTE AHPs as per roadmaps): |  |
| Current Job Title: |  |
| Holds a substantive contract with a Primary Care organization? | **YES / NO** | Length of time employed in primary care (Minimum 1 year): |  |
| Name of Primary Care Employer and Work Address: |  |
| NHS email address: |  | Contact telephone no: |  |
| **Supervision and Assessing pre-registration/undergraduate students** |
| Have you been an active Educator i.e., Practice Assessor / Supervisor in the last 12 months? | **YES / NO** | If **NO,** are you willing to supervise/assess students or undertake training? | **YES / NO** |
| **Previous courses completed / applied for:** |
| Have you already completed any modules identified within the program? *If so, please give details.*  |  |
| Are you currently undertaking any other program of study?*If so, please give details.* |  |
| Have you previously undertaken any modules from the ACP MSc program (including Independent Prescribing) that you have either not completed or failed? *If so, please give details.* |  |
| Please provide evidence of Core Primary Care Knowledge, Skills and Attributes and required e-learning as per professional roadmap/capability document. |  |
| **Areas of clinical practice:** |
| Please highlight areas of clinical practice during and post qualifying you will be expected to support and how you intend to cover any skill gaps.Please make any reference to areas that include pediatrics and mental health. |  |
| **Personal Statement:** |
| Please write a personal statement in support of your application. This should be an academic, referenced, and reflective statement of 500 words detailing: 1. Why are you planning to undertake the Advanced Clinical Practice MSc program?
2. How will training to work at an advanced level benefit your local patient population?
3. How will training to work at an advanced level change your individual practice?

*Continue on a separate sheet if necessary.* |
| Statement: |
| Academic References (Supportive literature used in Personal Statement). |
|  |

**SECTION 2: DECLARATION OF SUPPORT FROM PRACTICE MANGER**

|  |
| --- |
| **To be completed by the employer (Practice Manager/Lead GP)**  |
| Applicant Name: |  |
| Employer Readiness document completed and returned to Training Hub? | **YES / NO** |
| The practice is working towards developing a multi-professional learning environment. | **YES / NO** |
| The applicant will be provided with clear expectations of the scope of practice as a trainee ACP i.e., relevant trainee ACP job descriptions (JD), job plans (JP) and appropriate level of indemnity whilst training and will be updated post qualifying (Trainee JDs and JPs are to be submitted with application form). | **YES / NO** |
| The applicant will be fully supported to develop and work at an advanced level by an appropriately trained Coordinating Educational Supervisor. The coordinating educational supervisor must satisfy one of the following: * A qualified ACP or GP of at least 3 years’ experience with the HEE Roadmap supervisors training
* A GP ES (trainer)

All supervisors will have expert knowledge of the area of practice they are supervising, have education experience and be a skilled facilitator able to support learning, development, assessment and verification of competence and capability. *N.B. Supervisor can be from within the PCN or neighboring PCN.* | **YES / NO** |
| The applicant will have agreed on-the-job protected learning time and off-the-job study leave whilst training. | **YES / NO** |
| Coordinating Educational Supervisor has time specified in their job plans for supervision of ACP (minimum 1 hour per week). | **YES / NO** |
| The applicant will be supported to access placements / supervision to develop across the four pillars of advanced practice by skills-specific supervision as identified within their Personal Development Plan and Job Plan. | **YES / NO** |
| The applicant will be fully supported to attend regular Advanced Practice Forums / Peer Support / Action Learning Sets for ACPs during training and once qualified. | **YES / NO** |
| The applicant has a clearly defined substantive ACP post to move into on completion of their training. | **YES / NO** |
| The applicant will continue to be supported with appropriate continuous professional development and an annual appraisal once qualified. | **YES / NO** |
| Please state why your practice is supporting this employee to become an Advanced Clinical Practitioner. |  |
| What will be the benefit of having an Advanced Clinical Practitioner to your practice and PCN and meeting local population need?  |  |
| Please state how you will support the applicant during the transition phase from their current role to a trainee ACP and once qualifying?What will they do differently? |  |
| **Funding:** |
| **As an education grant is provided, it is expected as a minimum that the employer will release the learner for 20% off-the-job learning, inclusive of study leave and on-the-job protected supervision time.**  |
| Please confirm that the practice will allow the minimum required amount of study time and protected supernumerary clinical sessions for the entire duration of the program as above. | **YES / NO** |
| **I agree to support the applicant for this program of study (to be completed by manager)** |
| Name of Manager: |  | Job Title: |  |
| Contact Address: | **Post code:** |
|  |
| Signature: |  | Print name: |  |
|  | Date: |  |
| Email address: |  |
| Telephone |  | Mobile: |  |

**SECTION 3: DECLARATION OF SUPPORT FROM ‘COORDINATING EDUCATION SUPERVISOR’. *Please refer to supervision guidance.***

|  |
| --- |
| **Supervising Practitioners Details:** |
| Applicant Name: |  |
| Full name of ‘Coordinating Education Supervisor’: |  | Phone Number: |  |
| Practice Address: |  | Email Address: |  |
| I agree to work with the PCN towards developing a multi-professional learning environment.  | **YES / NO** |
| Are you happy to provide on-going supervision, support, identify opportunities to develop and undertake competence assessments for the trainee as set out in Section 2 of this form? | **YES / NO** |
| As a Coordinating Educational Supervisor, I have time specified in my job plans for supervision of ACP (minimum 1 hour per week). | **YES / NO** |
| The applicant will be fully supported to develop and work at an advanced level by an appropriately trained Coordinating Educational Supervisor. The coordinating educational supervisor must satisfy one of the following: * A qualified ACP or GP of at least 3 years’ experience with the HEE Roadmap supervisors training
* A GP ES (trainer)

All supervisors will have expert knowledge of the area of practice they are supervising, have education experience and be a skilled facilitator able to support learning, development, assessment and verification of competence and capability. *N.B. Supervisor can be from within the PCN or neighboring PCN.* | **ES** | **YES / NO** |
| **CS** | **YES / NO** |
| **Qualified ACP** | **YES / NO** |
| **GP** | **YES / NO** |
| Has completed the HEE Roadmap supervisors training or is a GP ES (trainer) and has the expert knowledge of Advancing Clinical Practice?  | **YES / NO** |
| HEE Supervisor readiness document completed and attached.*This is required.* | **YES / NO** |
| Briefly outline your experience of teaching, supervision and assessment of students and your understanding of the support ACP trainees require. |  |
| I confirm that I have agreed to oversee learning, supervise and support the applicant in their development to become an Advanced Clinical Practitioner over the duration of the program. I agree to facilitate the identification of alternative supervision for the learner, should I leave my post before completion of the program.  |
| Signature: |  | Date: |  |

**SECTION 4: PERSONAL INTENTION FORM**

|  |
| --- |
| **Application Declaration:** |
| If successful in my application: |
| ¨ | I declare I am not currently subject to any concerns or complaints about my fitness to practice, either with my employer or professional regulator. |
| ¨ | I agree to work with the PCN towards developing a multi-professional learning environment and continues to work to develop others around them. |
| ¨ | I agree to remain working within the Organisation identified on this application form for the duration of the programme.  |
| ¨ | I agree to notify the training hub if I intend to change employer within the duration of the training. *The Training Hub understands that in exceptional circumstances learners may transfer to other employment. However, transfer of funding to other employers within the duration of the training is not guaranteed.*   |
| ¨ | I agree to notify the training hub if I defer, extend, or cease my studies. *The Training Hub will consider the impact of the changes and may ask the learner to provide further information in writing to support the request.* |
| ¨ | I agree that the HEI and Supervisors can update both my employer and the Training Hub on my progress as required. |
| ¨ | I agree NOT to undertake any additional module bearing programmes or fellowships whilst undertaking the MSc in Advanced Practice |
| ¨ | I agree to attend regular Advanced Practice Forums / Peer Support / Action Learning Sets to support my learning. |
| ¨ | **I agree to provide a summary report to the TH every 6 months or sooner if any concerns arise.** |
| ¨ | Trainee Job Description and example Job plan submitted with application. |
| ¨ | HEE ACP readiness checklists completed and returned. |
| ¨ | Commitment statement completed and returned. |
| ¨ | GDPR completed and returned. |
| ¨ | Equal Opportunities Monitoring Form returned. |
| Student Name: |  |
| Signature:  |  | Date: |  |
| APPLICANT CHECKLIST – ALL SECTIONS MUST BE COMPLETED IN FULL: |
| Have all FOUR sections of the application form been completed? | **YES / NO** |
| Have you obtained the signature of:- Your line manager?- Your ‘Coordinating Education Supervisor’? | **YES / NO** |
| The details regarding funding in Section 2 of the form have been discussed and understood. | **YES / NO** |

### Appendix 8: Application form to request transfer of funding

This application form consists of four sections. You are required you to complete all sections clearly.

Section 1: Personal and Professional details

Section 2: Declaration of support from Practice Manger

Section 3: Declaration of support from ‘Coordinating Education Supervisor’

Section 4: Personal intention form

**SECTION 1: PERSONAL AND PROFESSIONAL DETAILS**

|  |
| --- |
| **Personal Details:** |
| First Name: |  | Surname: |  |
| Profession: |  |
| Current Job Title: |  |
| Name of Primary Care Employer and Work Address: |  |
| Previous employers’ details:*Including date left.*  |  |
| NHS email address: |  | Contact telephone no: |  |
| **Supervision and Assessing pre-registration/undergraduate students** |
| Have you been an active Educator i.e. Practice Assessor / Supervisor in the last 12 months? | **YES / NO** | If **NO,** are you willing to supervise/assess students or undertake training? | **YES / NO** |
| **Previous courses completed / applied for:** |
| Have you already completed any modules identified within the program? *If so, please give details.*  |  |
| University details – Include details such as PGDip or MSc. |  |

**SECTION 2: DECLARATION OF SUPPORT FROM PRACTICE MANGER**

|  |
| --- |
| **To be completed by the employer. (Practice Manager/Lead GP)**  |
| Applicant Name: |  |
| Employer Readiness Checklist completed and returned to Training Hub. | **YES / NO** |
| The practice is working towards developing a multi-professional learning environment.  | **YES / NO** |
| The applicant will be provided with clear expectations of the scope of practice as a trainee ACP i.e., relevant trainee ACP job descriptions (JD), job plans (JP) and appropriate level of indemnity whilst training and will be updated post qualifying. (Trainee JDs and JPs are to submit with application form). | **YES / NO** |
| The applicant will be fully supported to develop and work at an advanced level by an appropriately trained Coordinating Educational Supervisor. The coordinating educational supervisor must satisfy one of the following: * A qualified ACP or GP of at least 3 years’ experience with the HEE Roadmap supervisors training
* A GP ES (trainer).

All supervisors will have expert knowledge of the area of practice they are supervising, have education experience and be a skilled facilitator able to support learning, development, assessment and verification of competence and capability. *N.B. Supervisor can be from within the PCN or neighboring PCN.*  | **YES / NO** |
| The applicant will have agreed on-the-job protected learning time and off-the-job study leave whilst training. | **YES / NO** |
| Coordinating Educational Supervisor has time specified in their job plans for supervision of ACP (minimum 1 hour per week). | **YES / NO** |
| The applicant will be supported to access placements / supervision to develop across the four pillars of advanced practice by skills-specific supervision as identified within their Personal Development Plan and Job Plan. | **YES / NO** |
| The applicant will be fully supported to attend regular Advanced Practice Forums / Peer Support / Action Learning Sets for ACPs during training and once qualified. | **YES / NO** |
| The applicant has a clearly defined substantive ACP post to move into on completion of their training. | **YES / NO** |
| The applicant will continue to be supported with appropriate continuous professional development and an annual appraisal once qualified. | **YES / NO** |
| **Funding:** |
| **As an education grant is provided, it is expected as a minimum that the employer will release the learner for 20% off-the-job learning, inclusive of study leave and on-the-job protected supervision time.**  |
| Please confirm that the practice will allow the minimum required amount of study time and protected supernumerary clinical sessions for the entire duration of the program as above. | **YES / NO** |
| **I agree to support the applicant for this program of study (to be completed by manager)** |
| Name of Manager: |  | Job Title: |  |
| Contact Address: | **Post code:** |
|  |
| Signature: |  | Print name: |  |
|  | Date: |  |
| Email address: |  |
| Telephone |  | Mobile: |  |

**SECTION 3: DECLARATION OF SUPPORT FROM ‘COORDINATING EDUCATION SUPERVISOR’. *Please refer to supervision guidance.***

|  |
| --- |
| **Supervising Practitioners Details:** |
| Applicant Name: |  |
| Full name of ‘Coordinating Education Supervisor’: |  | Phone Number: |  |
| Practice Address: |  | Email Address: |  |
| I agree to work with the PCN towards developing a multi-professional learning environment.  | **YES / NO** |
| Are you happy to provide on-going supervision, support, identify opportunities to develop and undertake competence assessments for the trainee as set out in Section 2 of this form? | **YES / NO** |
| As a Coordinating Educational Supervisor, I have time specified in my job plans for supervision of ACP (minimum 1 hour per week). | **YES / NO** |
| The applicant will be fully supported to develop and work at an advanced level by an appropriately trained Coordinating Educational Supervisor. The coordinating educational supervisor must satisfy one of the following: * A qualified ACP or GP of at least 3 years’ experience with the HEE Roadmap supervisors training
* A GP ES (trainer)

All supervisors will have expert knowledge of the area of practice they are supervising, have education experience and be a skilled facilitator able to support learning, development, assessment and verification of competence and capability. *N.B. Supervisor can be from within the PCN or neighboring PCN.* | **ES** | **YES / NO** |
| **CS** | **YES / NO** |
| **Qualified ACP** | **YES / NO** |
| **GP** | **YES / NO** |
| Has completed the HEE Roadmap supervisors’ training or is a GP ES (trainer) and has the expert knowledge of Advancing Clinical Practice?  | **YES / NO** |
| HEE Supervisor readiness document completed and attached,*This is required,* | **YES / NO** |
| I confirm that I have agreed to oversee learning, supervise, and support the applicant in their development to become an Advanced Clinical Practitioner over the duration of the program. I agree to facilitate the identification of alternative supervision for the learner, should I leave my post before completion of the program.  |
| Signature: |  | Date: |  |

**SECTION 4: PERSONAL INTENTION FORM**

|  |
| --- |
| **Application Declaration:** |
| If successful in my application: |
| ¨ | I declare I am not currently subject to any concerns or complaints about my fitness to practice, either with my employer or professional regulator. |
| ¨ | I agree to work with the PCN towards developing a multi-professional learning environment and continues to work to develop others around them. |
| ¨ | I agree to remain working within the Organisation identified on this application form for the duration of the programme.  |
| ¨ | I agree to notify the training hub if I intend to change employer within the duration of the training. *The Training Hub understands that in exceptional circumstances learners may transfer to other employment. However, transfer of funding to other employers within the duration of the training is not guaranteed.*   |
| ¨ | I agree to notify the training hub if I defer, extend, or cease my studies. *The Training Hub will consider the impact of the changes and may ask the learner to provide further information in writing to support the request.* |
| ¨ | I agree to attend regular Advanced Practice Forums / Peer Support / Action Learning Sets to support my learning. |
| ¨ | **I agree to provide a summary report to the Training Hub every 6 months or sooner if any concerns arise.** |
| ¨ | Trainee Job Description and example Job plan submitted with application. |
| ¨ | HEE ACP readiness checklist completed and returned. |
| ¨ | Commitment statement updated. |
| ¨ | Equal Opportunities Monitoring Form returned. |
| Student Name: |  |
| Signature:  |  | Date: |  |
| APPLICANT CHECKLIST – ALL SECTIONS MUST BE COMPLETED IN FULL: |
| Have all FOUR sections of the application form been completed? | **YES / NO** |
| Have you obtained the signature of:- Your line manager?- Your ‘Coordinating Education Supervisor’? | **YES / NO** |
| The details regarding funding in Section 2 of the form have been discussed and understood | **YES / NO** |

### Appendix 9: Triggered Quality Assessment form

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**Triggered Quality Assessment Record of Conversation**

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**Save file as: PracticeName\_TriggeredQualityAssessment\_Date**

 **Or**

 **EducatorInitials\_TriggeredQualityAssessment\_Date**

[**TQA Form Guidance.docx**](https://healtheducationengland.sharepoint.com/%3Aw%3A/s/PrimCareSchoolAdmin-KSS/EV9FW7gR8KxDuLlDxR8EeZQBYOx7Z0LJ6bgwoyPBDgMJrQ?e=YRGsKJ) **for guidance on completing this form.**

**Triggered Quality Assessment Report**

|  |  |
| --- | --- |
| **Name of Practice (and ODS code)**  |  |
| **Name of Educator (if relevant to concern)** |  |
| **Primary Care Network** |  |
| **Training Hub** |  |
| **Training programme / Learner group**  |  |
| **What Learners are there in the Clinical Learning Environment (including employed learners)?** |  |
| **Background to meeting**  |  |
| **HEE Quality Assessment team****(including attendees from GP/PC School and PCN if appropriate)**  |  |
| **Practice attendees** |  |
| **Date of visit** |  |

**Triangulation with relevant parties (e.g. learners, regulatory body, HEI)**

**Please complete one line per discussion**

|  |  |
| --- | --- |
|  | **Summary of discussions** |
| Choose an item. |  |
| Choose an item. |  |
| Choose an item. |  |
| Choose an item. |  |
| Choose an item. |  |

**Conversation Details**

|  |  |
| --- | --- |
| **Summary of Discussion** |  |
| **Summary of Concerns** |  |
| **Conclusion** |  |

**Next Steps**

**Follow up actions and recommendations**

|  |  |  |
| --- | --- | --- |
| **Actions** | **By Whom?** | **By When?** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Recommendations** | **By Whom?** | **By When?** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Signed:** |  |
| **Date:** |  |

**For completion after PC Quality or TH Leads Meeting Discussion**

|  |  |
| --- | --- |
| **Meeting discussed at :** |  |
| **Date discussed:** |  |
| **Outcome from meeting:** |  |

**Level of Concern**

Using HEE’s Intensive Support Framework, please assess the level of concern following the visit.[**ISF Framework**](https://healtheducationengland.sharepoint.com/Comms/Digital/Shared%20Documents/Forms/AllItems.aspx?id=%2FComms%2FDigital%2FShared%20Documents%2Fhee%2Enhs%2Euk%20documents%2FWebsite%20files%2FCommissioning%20for%20quality%2FIntensive%20Support%20Framework%20Guide%20%2D%20June%2018%2Epdf&parent=%2FComms%2FDigital%2FShared%20Documents%2Fhee%2Enhs%2Euk%20documents%2FWebsite%20files%2FCommissioning%20for%20quality&p=true)

|  |  |  |
| --- | --- | --- |
| **ISF Rating Level (please tick)**  |  |  |
| No concerns | 0 |  |
| Minor concerns | 1 |  |
| Significant concerns | 2 |  |
| Major concerns | 3 |  |
| Training suspended | 4 |  |

### Appendix 10: Quality Assessment process



### Appendix 11: Equal Opportunities Monitoring Form



**EQUAL OPPPORTUNITIES MONITORING FORM**

HEE wants to meet the aims and commitments set out in its equality policy, which includes not discriminating under the Equality Act 2010. We want to understand our employees. We ask questions to collect overall statistical information – not to pinpoint individuals but help us to understand which groups are underrepresented in our workforce and whether all groups’ needs are met. Your information is safe and answers are confidential.

Help us become a more inclusive employer. By learning more about our workforce, we can make sure everyone feels welcome, supported, and able to succeed here.

|  |  |
| --- | --- |
| **1.** | **What best describes your Gender:** *(please* ***tick*** *appropriate box)* |
|  | Male FemaleGenderfluid | [ ] [ ] [ ]  | IntersexNon-binary Prefer not to say | [ ] [ ] [ ]  |  |
|  | If you prefer to use your own term, *please specify here:* |
| **2.** | **Do you consider yourself to be Trans?**(Trans is an umbrella term to describe people whose gender is not the same as, or does not sit comfortably with the sex you were assigned at birth?) |
|  | YesNo Prefer not to say | [ ] [ ] [ ]  |
| **3.** | **Are you married or in a civil partnership?** |
|  | YesNo Prefer not to say | [ ] [ ] [ ]  |
| **4.** | **Age:** |
|  | 16-2425-3435- 4445-54 | [ ] [ ] [ ] [ ]  | 55-6465+ Prefer not to say | [ ] [ ] [ ]  |
| **5.** | **What is your ethnicity?****Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive to belong. I would describe my ethnic origin as**: *(please* ***tick*** *the appropriate box or provide further detail as appropriate)* |
|  | **White** |  | **Asian/ Asian British** |  | **Black/ African/ Caribbean/ Black British** |
|  | English British WelshScottishNorthern Irish IrishGypsy or Irish TravellerPrefer not to say | [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  | Indian PakistaniBangladeshiChinesePrefer not to say | [ ] [ ] [ ] [ ] [ ]  | CaribbeanAfricanPrefer not to say | [ ] [ ] [ ]  |
|  | Other White Background *(please write in):* | Other Asian background *(please write in):* | Other Black/ African/ Caribbean background *(please write in):* |
|  | **Mixed/multiple ethnic** | **Any other Ethnic background, please write in:** |  | **Other ethnic group *(please specify):*** |
|  | White & Black CaribbeanWhite & Black AfricanWhite & AsianPrefer not to say | [ ] [ ] [ ] [ ]  | Arab Prefer not to say | [ ] [ ]  |  |
|  |
| **6.** | **My sexual orientation is:** |
|  | HeterosexualGay LesbianBi (umbrella term to encompass pan and queer) | [ ] [ ] [ ] [ ]  | Asexual Prefer not to say | [ ] [ ]  |  |
|  | If you prefer your own term, *please specify here:* |
| **7.** | **Please indicate your religion or belief:** |
|  | AtheismBuddhism Christianity HinduismIslam Judaism  | [ ] [ ] [ ] [ ] [ ] [ ]  | Sikhism Rastafarian PaganismHumanist AgnosticPrefer not to say | [ ] [ ] [ ] [ ] [ ] [ ]  |  |
|  | If other, *please specify here:* |
| **8.** | **Do you consider yourself to have a disability under the Equality Act 2010 or health condition?** |
|  | Yes NoPrefer not to say | [ ] [ ] [ ]  |  |
|  | **If *yes*, please indicate your disability:** |
|  | Deaf or hearing impairmentMental healthBlind or visual impairmentMobilityManual DexterityProgressive conditionsLearning difficulties (eg dyslexia, dyspraxia) | [ ] [ ] [ ] [ ] [ ] [ ] [ ]  | Facial disfigurementSpeech impairmentHeart problemsDiabetesBreathing ProblemsOtherPrefer not to Say | [ ] [ ] [ ] [ ] [ ] [ ] [ ]  |  |
|  | *In the Equality Act 2010 a person has a disability if:** *They have a physical or mental impairment*
* *The impairment has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities*

*For the purpose of the Act, these words have the following meanings:** *‘substantial’ meaning more than minor or trivial*
* *‘long-term’ meaning that the effect of the impairment has lasted or is likely to last for at least 12 months (there are special rules covering recurring or fluctuating conditions)*
* *‘normal day-to-day activities’ include everyday things like eating, washing, walking and going shopping*

The information in this form is for monitoring purposes only. If you believe you need a ‘workplace adjustment’ then please discuss this with the recruiting manager. |
| **9.** | **Do you consider yourself to have caring responsibilities**  |
|  | YesNo Prefer not to say | [ ] [ ] [ ]  |  |
|  | **If *yes*, please specify:** |
|  | Primary carer of a child/children (under 18)Primary carer of disabled child/children Primary carer of disabled adult (18 and over) | [ ] [ ] [ ]  | Primary carer of older person/people (65 and over)Secondary CarerPrefer not to say | [ ] [ ] [ ]  |
|  | **NOTE:** Please return the completed form to your relevant Training Hub alongside your application. |