Advanced Clinical Practice: 
Past, Present & Future

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The Ideal Nurse...

‘No matter how gifted she may be, she will never become a reliable nurse until she can obey without question. The first and most helpful criticism I ever received from a doctor was when he told me I was supposed to be simply an intelligent machine for the purpose of carrying out his orders.’

– SD (1917)
Key Elements of the Career Framework


Career Framework Level 9
People working at level 9 require knowledge at the most advanced frontier of the field of work and at the interface between fields. They will have responsibility for the development and delivery of a service to a population, at the highest level of the organisation.  
Indicative or Reference title: Director

Career Framework Level 8
People at level 8 of the career framework require highly specialised knowledge, some of which is at the forefront of knowledge in a field of work, which they use as the basis for original thinking and/or research. They are leaders with considerable responsibility, and the ability to research and analyse complex processes. They have responsibility for service improvement or development. They may have considerable clinical and/or management responsibilities, be accountable for service delivery or have a leading education or commissioning role.  
Indicative or Reference title: Consultant

Career Framework Level 7
People at level 7 of the career framework have a critical awareness of knowledge issues in the field and at the interface between different fields. They are innovative, and have a responsibility for developing and changing practices and/or services in a complex and unpredictable environment.  
Indicative or Reference title: Advanced Practitioner

Career Framework Level 6
People at level 6 require a critical understanding of detailed theoretical and practical knowledge, are specialist and/or have management and leadership responsibilities. They demonstrate initiative and are creative in finding solutions to problems. They have some responsibility for team performance and service development and they consistently undertake self-development.  
Indicative or Reference title: Specialist/Senior Practitioner

Career Framework Level 5
People at level 5 will have comprehensive, specified, formal and broad-based knowledge within a field of work and
Sepsis: recognition, diagnosis and early management

NICE guideline [NG51]  Published date: July 2016  Last updated: July 2016  Uptake of this guidance

- Cyanosis of skin, lips or tongue
- Non-blanching rash of skin

1 high risk criterion

Arrange immediate review by senior clinical decision maker (person authorised to prescribe antibiotics, such as CTA/ST3 and above or advanced nurse practitioner).

Carry out venous blood test for the following:
- blood gas including glucose and lactate measurement
- blood culture
- full blood count
- C-reactive protein
- urea and electrolytes
- creatinine

- Signs of potential infection, including redness, swelling or discharge at surgical site or breakdown of wound

2 or more moderate to high risk criteria

- SBP: 91-100 mmHg

Only 1 moderate to high risk criterion

Clinician to review person’s condition and venous lactate results within 1 hour

Carry out venous blood test for the following:
- blood gas including lactate measurement
- blood culture
- full blood count

Clinician review within 1 hour if indicated
Advanced Practice is **NOT:**

- A Job Title
- A Role
- Non-Medical Prescribing
- A two or five day Training course
- A Physical Examination module
- Attendance Certificates
- ...... “I’ve been doing this for years”

**Airedale Inquiry (2010)**

Sister Grigg Booth was not a Beverly Allitt or a Colin Norris in that her actions were almost entirely open. She recorded what she was doing in clinical records, prescription charts, notes. We think it unlikely that she deliberately set out to harm patients. She was utterly convinced of her own clinical prowess; we have no doubt that on occasions she went well beyond the boundaries of acceptable nursing practice at that time and beyond the boundaries of her own clinical understanding. We are satisfied that she acted unlawfully from time to time.

From the mid 1990s senior night nursing staff were working as Night Nurse Practitioners (NNPs). Sister Grigg Booth was the most senior. The purpose of the NNPs’ role was to reduce the workload of junior doctors. Thus they took on additional tasks so that junior doctors could get more rest at night. The four NNPs whose practice we looked at closely all administered intravenous opiates. So did other NNPs. This was against official hospital policy. They did so for years. The Board was unaware that this was going on. Senior managers knew or should have known it was going on. They did nothing about it.
Health Education England (2017) Definition

Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master’s level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence.

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

• Advanced
  – “...acquisition of additional expertise to achieve a higher performance level.”

• Extended
  – “.....additional expertise sufficient to provide services or perform tasks that are outside the usual scope of practice of the profession.”


Skill mix redesign / Inter-professional working

Skills & Knowledge Adaption

Examples include cannulation, venepuncture and catheterisation.

Redundant Medical
Adaptive medical
Professional medical
Clinical knowledge
Technical Medical
Nursing
Care

History taking, examination, diagnosis and ordering tests and investigations such as radiology tests.

Conducting assessments on junior doctors, conducting audit on the medical process or outcomes. Clinically, giving diagnosis, prognosis and referral.

Examples include PIC, CVP, arterial lines, ultrasound scanning.

Radford, 2012. PhD
Credentialing Defined

“a process which provides formal accreditation of attainment of competences (which include knowledge, skills and performance) in a defined area of practice, at a level that provides confidence that the individual is fit to practice in that area....”

(Post-graduate Medical Education & Training Board, 2010).
4 Pillars

• Clinical

• Leadership

• Education

• Research
Good Governance

“You must have sufficient governance and systems in place to monitor the quality and safety of care and these must help the service improve and reduce any risks to health, safety and welfare for your service users.”

Health Education England (2017)
CQC: 5 Key Lines of Enquiry (KLOE)

1. **Safe**: Are the ACPs safe? How are you sure?
2. **Effective**: Are the ACPs effective? How do you know?
3. **Caring**: Do ACP roles support the caring culture?
4. **Responsive**: Are ACP roles organised so that they meet patient needs. How are you measuring?
5. **Well-led**: Is clear leadership and management around the ACP role. Is there clearly defined accountability?
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