**Multi-professional Clinical Framework Consultation**

**Demographics**

1.**Which professional group do you belong to?**

Nursing and Midwifery

Allied Health Professional

Healthcare Science

Paramedicine

Management

Other

**Title**

2.**In your opinion does the title of the framework make it clear who/what the framework is for?**

Yes, it's completely clear

Yes, it's fairly clear

No, it's not very clear

No, it's not at all clear

**Purpose**

3.The MCDF has been designed to:
1.Provide clarity regarding levels of professional practice.
2.Standardise the levels across all registered healthcare professions (excluding Medicine and Dentistry.)
3.Clarify the skills and knowledge development necessary to help practitioners to move between levels as they progress their careers.
4.Help Service Managers identify the level at which a role should be pitched, in relation to A4C Banding
5.Help service managers to understand what they can expect from practitioners at each level when developing services and workforce plans and the necessary development associated with each level.
6.Support the ‘Healthier Wales’ transformation agenda and the reset and recovery agenda across NHS Wales.

**In your opinion is the purpose of the framework clear from these 6 points?**

Yes

No

4.**Do you think the framework will achieve its stated purpose?**

Yes

No

**Levels of Practice**

5.The MCDF contains definitions of Enhanced, Advanced and Consultant levels of practice. These can be used:

1. For self-assessment or assessment in the workplace to identify a practitioner’s current capabilities and learning needs
2. To map against other frameworks to identify potential gaps in individual/team capabilities to support the development of a training plan as a platform to develop programmes of study and qualifications
 **In your opinion do the level descriptors provide clarity about the three levels of practice?**

Yes

No





6.**In your opinion will they help provide consistency across professions?**

Yes

No

7.**If yes, how could consistency be achieved?**



* *Defining a clear purpose and objectives for enhanced, advanced and consultant clinical practice roles.*
* *Clearly defined assessment criteria of the candidates’ capabilities, specific to the context of their practice to ensure that health and care professionals working at this level are widely recognised as having a consistent level of competence.*
* *Assessors must be occupationally competent, recognised as such by employers and education providers, and be competent themselves in the assessment criteria.*
* *A range of assessors should be used, including educators with appropriate academic and clinical experience and competent health and care professionals at the required level.*

8.**In your opinion should any post titled Enhanced, Advanced or Consultant be mandated to meet the level descriptors?**

Yes

No

9.**Why do you think this?**

*To ensure roles are clearly defined through all sectors and there is a consistent approach in delivery of the level descriptors. Pharmacy already has this in place for consultant pharmacists as per NHS guidance.*

10.The titles of the pillars are:

· Professional practice

· Development of self and others

· Professionalism, leadership

· Research

**In your opinion do you feel that the four pillars are titled and structured appropriately?**

Yes

No

11.**Do you think research should be :**

In a pillar of it's own

A theme running through the other 3 pillars

Both

**Domains**

12.The MCDF has 3 domains which contain the learning outcomes and assessment criteria. They are arranged to holistically embed the specific learning and assessment that needs to take place in order to evidence development aligned to the four pillars.

**In your opinion do you think having 4 pillars and 3 domains will cause confusion?**

Yes

No





13.**In your opinion should there be specific assessment criteria under the 3 domains?**

Yes

No





**Learning Outcomes**

14.The framework contains core learning outcomes and assessment criteria for the three levels of practice. A key element of the preparation for individuals to practice at any of the three levels will be an assessment of achievement against these learning outcomes. It is recognised that, due to the remit of their role, not al practitioners will be able to deliver on all the learning outcomes, this would be agreed with the individual’s line manager.
 **Will the learning outcomes meet the development needs of enhanced, advanced and consultant clinical roles?**

Yes

No

15.**Suggestions**

16.**In your opinion what assessment process should be undertaken and why?**

* *Individuals will require the support of an identified educational supervisor in the work place, for example a colleague working at consultant level or another appropriately qualified senior practitioner. The supervisor will provide continuity of support and an overview of the development of the individual practitioner as a whole.*
* *Work Based Assessment - case based presentation, theoretical and/or practical tests of knowledge skills and behaviours, critical reflections, portfolio of evidence etc.*
* *Assessment of portfolio of evidence - this requires experts trained in the assessment of the framework and work based learning to review the collected portfolio of evidence submitted. This should be based on an educational evidence base of programmatic assessment and competency committees. This involves multiple individuals reviewing an e-portfolio of evidence against the outcomes, then coming to a group-think decision collectively.*

**Use of the Framework**

17.The framework can be used in a number of ways by the individual practitioner, the employing organisation and education partners.
 **Do you think the framework will be used by individuals/teams to plan education aligned to the PADR process?**

Yes

No





18.**How would you use the framework in practice?**



*Pharmacy already has a robust post-registration curriculum and credentialing model in place delivered by the professional leadership body. This defines equivalent levels of practice: post-registration Foundation (enhanced), Advanced and Consultant.*

*These curricula are supported by evidence-based, robust credentialing assessments endorsed by the profession and the NHS across GB, including in Wales.*

*HEIW already provides support against these curricula for post-registration pharmacists.*

19.**Would you like to provide any further comments?**

*Pharmacists have their own post-registration curricula and credentialing model delivered by the professional leadership body to assure capability. As a result, Pharmacists, must be added to the ‘excluded’ list, alongside medicine and dentistry, to avoid any confusion within the profession as to which framework they should be working towards. Once this framework is agreed we can map our professions against the multi-professional framework to demonstrate parity.*