

## Framework for Enhanced, Advanced and Consultant Clinical Practice Consultation

### Demographics

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

Nursing and Midwifery

Allied Health Professional

Healthcare Science

Paramedicine

Pharmacy

Management

Medicine

Other

Next

#### 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

#### 3. The Professional Framework for Enhanced, Advanced and Consultant Clinical Practice in Wales. 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. Define the underpinning education level for each level of practice.
4. Describe how practitioners can be supported by employing organisations.
5. Clarify the skills and knowledge development necessary to help practitioners to move between levels as they progress their careers.
6. 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.
7. Support the Health and Social Care Workforce Strategy 2020.
8. Support practitioners in knowing how to maintain credibility in the pillars of practice.

#### In your opinion is the purpose of the framework clear?

Yes  
No ✓

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

Yes  
No ✓

**Levels of Practice**

5. The Professional Framework for Enhanced, Advanced and Consultant Clinical Practice in Wales contains definitions of Enhanced, Advanced and Consultant levels of practice. These can be used:

- For self-assessment or assessment in the workplace to identify a practitioner's current capabilities and learning needs
- 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. Do you feel the career road map demonstrates a possible career journey through the levels of practice for most professional registrants?**

- Yes ✓
- No

**8. Do the images of the pillar percentages help explain different roles and job plans.**

- Yes
- No ✓

**9. Does the Framework explain clearly the different levels of education that underpin each level of practice?**

Yes  
No ✓

**10. Do you think the framework will be used by individuals/teams to plan education aligned to the PADR process?**

Yes  
No ✓

**11. Does the framework clearly set out how practitioners will be assessed to be at a level of practice?**

Yes  
No ✓

**12.The framework suggests how practitioners should be supported by employers. Do you feel this is clear, and the recommendations reasonable?**

Yes  
No ✓

**13.Does the framework set out clearly the governance around enhanced, advanced and consultant levels of practice?**

Yes  
No ✓

**14.Does the framework clearly set out how enhanced, advanced, and consultant roles will be monitored (in terms of numbers/ roles)?**

Yes ✓  
No

**15.Is the guidance on appointment of enhanced, advanced, and consultant practitioners clear?**

Yes  
No ✓

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

- It is important to note the document states the framework 'is intended for use by all professions excluding medical and dental.' Pharmacy is not part of the allied health professionals' group so in effect the document is unclear whether or not its intended to be adopted by the pharmacy profession. Pharmacy needs to be added to the excluded list.
- The document refers only to employees in one sector, NHS employees. Within pharmacy, a substantial proportion of professionals are employed in the private sector who provide services under terms of an NHS contract (community pharmacy). Whilst government policy directs a shifting of care from secondary to primary, and we want professionals working across settings, this framework doesn't support this.
- We are very keen in Wales to make sure we have alignment with the Royal Pharmaceutical Society core advanced pharmacist curriculum. We have achieved this in England via a collaborative approach with Health Education England (HEE), aligning with the 'NHS Multi-professional framework for advanced clinical practice in England.'
- Pharmacy is mature in the definition of post-registration practice and already has an established series of post-registration curricula aligned to enhanced, advanced and consultant-level practice. These are supported by robust milestone e-portfolio credentialing assessments.
- These curricula have been designed to align closely to the four pillars of advanced practice which are used to define advanced practice across other healthcare professions.
- These curricula are based on patient and service need; although they are aligned to academic levels, they are not driven by these. They rather develop in a spiral fashion to develop practitioners with advancing clinical and non-clinical capabilities across the four

pillars of advancing practice as the autonomy & complexity of practice develops and individuals' sphere of influence of practitioners expand from individual to system level. This is based on the Dreyfus model of skills acquisition and a programmatic approach to assessment developed by Van de Vleuten.

- The curricula and credentialing assessments are supported by a robust educational governance structure housed by the RPS in which Wales is represented at all levels. This creates a nationally accepted standard for post-registration pharmacy.
- We wish to ensure alignment with multiprofessional frameworks across the devolved nations but believe it is important to have a profession-specific development pathway to support pharmacists and assure their practice for patients and the system. These are already well established.
- We believe the RPS structure and pharmacy more generally could act as an exemplar for how other professions could define and assure post-registration levels of practice given our significant work in this area over the past five years.

#### Post-registration Foundation (PRF)

- Aligns to enhanced level, currently supports pharmacists to become prescribers and develop early non-clinical leadership, education & research capabilities.
- Pharmacy is unique in that all registrants will be prescribers from 2025/26; this means the nature of enhanced level practice will evolve significantly over the next 3-5 years for pharmacy requiring a dynamic approach. Ultimately, this level of practice will need to support newly qualified pharmacists to develop their early prescribing practice and scope.
- The document does not currently reference the RPS PRF curriculum – this should be referenced as the definition of enhanced practice.

#### Advanced

- The RPS core advanced curriculum is recognised as equivalent to the HEE ACP framework in England.
- The reference in the current document is aligned to the old APF framework and needs updating.
- Important to recognise the profession-specific clinical components that differentiate an advanced pharmacist from an advanced physiotherapist, for example, whilst celebrating their common advanced non-clinical capabilities across education/research

#### Consultant

- Consultant pharmacist posts and individuals are standardised and assured via a robust process delivered centrally by the RPS, as defined, and endorsed by the NHS Consultant Pharmacist Guidance 2020 (endorsed in Wales).

#### The document

- The current framework describes the difference in the level of practice in a very superficial way; they are not structured clearly or aligned to the pillars of advancing practice.
- Agree that RPL (we call it APCL) is important to encourage flexibility and avoid assessment duplication; we recognise all certified learning, not just academic. The document tends to suggest that academic learning is the only educational provision to support development which we do not support. We believe that learning in the post-registration space should be multifaceted and encompass vocational, experiential and academic learning, based on the education context and the learner's preferences.
- We believe that the definition of different levels of post-registration practice should be driven by patient & service need rather than just alignment to arbitrary academic levels; relying on defining advanced practice solely by academic level is problematic. As pharmacists graduate with a L7 academic qualification (and soon as prescribers), this could infer that they register as advanced pharmacists, which is not correct.

- The framework is very prescriptive suggesting 80% clinical and 20% non-clinical across the pillars for advanced practice. This is arbitrary and potentially too limiting for the important non-clinical pillars. These should be flexible and depend on the role and patient/system need.
- There should be greater consistency in the use of 'advanced', both intra- and inter-professionally so patients have clarity in the level of practice of those providing care.
- We strongly believe that milestone assessment points to demonstrate readiness to practise at an enhanced/advanced/consultant level need to provide assurance for patients and the wider system; this should be based on a recognised assessment methodology. Such an assessment system should be national to ensure a national standard, preferably across the UK to support workforce portability and recognition between devolved nations.