

Advanced practice

Policy summary

As the delivery of healthcare changes, some professionals are taking on responsibilities not traditionally associated with their roles. This could potentially pose a risk to public protection that regulators should manage. We found that risks to patient safety come from professionals taking on roles and responsibilities which they lack the competence to carry out safely and effectively or where they practise with inadequate safeguards. This means that regulatory bodies need to consider the risks to patients in the context of other established safety arrangements, for example, through employers' safeguards. If an area of practice develops within a profession which poses different types of risk to patients and requires new standards of proficiency to be performed safely, regulatory bodies need to act. However, action should not be taken if there is no additional risk from a new role.

Background

The way in which healthcare is delivered changes over time. This means that health professionals can take on new responsibilities that are not traditionally associated with their professions. This is sometimes referred to as 'advanced practice'. The development of these roles could potentially pose a risk to public protection. This would arise if health professionals' initial training and the experience they gain during their career along with any additional qualifications did not adequately prepare them to undertake these new responsibilities.

In 2008 the Secretary of State for Health asked us to provide advice about advanced practice and other similar developments such as 'specialist practice'. The underlying purpose of the work was to ensure that patient and public safety was not being put at risk because of advanced practice.

What did we do?

We met with the health professional regulators, professional bodies, employers, patients and the public to seek their views on advanced practice and specialist practice. We asked the regulators about how they managed the issue of advanced practice. We also took into account the work of the Department of Health's Extending Professional Regulation Working Group,

which made recommendations about extending the scope of health professional regulation.

What did we find out?

The results of research with patients and the public showed that they understood the term 'specialist' as a focus on one area of practice to a higher level. They felt the term 'advanced' was more vague. People assumed it meant more qualified or experienced, and felt that this inspired confidence. However they were unsure what being 'advanced' actually meant about the professional.

Across the health professions there are significant differences in the ways in which the terms 'advanced practice' and 'specialist practice' are used. There is a general agreement that advanced practice refers to a level of practice carried out by professionals who:

- Have developed their skills, knowledge and behaviours to a high level
- Are capable of safe and effective practice in more complex situations
- Might have a higher level of responsibility, work without as much supervision and have more clinical accountability.

The definition of 'specialist practice' varies across the professions. It can apply to health professionals who focus their existing

professional knowledge on one area, or to those who have gained a very high level of skill in a certain area.

The regulators take different approaches to managing the qualifications that professionals may acquire after initial registration. These fall into three broad categories:

- Controlling the use of specialist titles, so that some titles can only be used by those who have reached a high level of skill and knowledge in one area of practice
- Controlling entry to particular types of practice; some regulators require further qualifications before a professional can take on certain responsibilities, for example an optician who wants to dispense contact lenses. These qualifications are noted on the regulators' register
- Providing information. The Nursing and Midwifery Council annotates its register to show where a professional has additional learning within a particular field of practice.

The regulators' core standards state that health professionals have a duty to practise only where they are competent to do so, and that they must not put patient safety at risk. This applies to all health professionals wherever they are working. We found that the risks associated with advanced practice are the same as those in other types of practice. Risks may arise if professionals may take on roles or responsibilities that they cannot perform safely and effectively, or if professionals and/or their employers do not ensure there are appropriate safeguards in their practice.

Regulators, employers and professionals all have an important role to play in protecting the public. The regulatory bodies' role is to ensure that health professionals are fit to practise in their field by setting and enforcing standards of competence and conduct. Regulatory bodies must have good links with employers and professional bodies to identify potential risks to public protection and ensure that any regulatory action is targeted and proportionate.

It is the employer's role to ensure that a professional has the right skills for a particular job, that they are assigned appropriate tasks and that they keep their skills up to date. Where health professionals are self-employed, they must ensure their own practice is up to date and put safeguards in place for patient safety. We believe that employers are best placed to assess and control the risks arising from the day to day work of health professionals. In contrast, regulators place broad requirements on professionals to practise only where they are competent to do so, keep their skills up to date and prioritise patient safety.

We looked at our data on fitness to practise and found that there is no systematic evidence about cases brought to the regulators involving a professional who has practised beyond their competency. This means we cannot take a view on whether this is a significant problem.

In future all regulators will introduce revalidation, a process that periodically checks that health professionals are fit to practise in their profession. It is expected that as part of this process the regulators will assess the risks relating to health professionals' work. This will help the regulators identify high-risk areas of practice and target their approach accordingly.

What did we conclude?

All health professionals are accountable to their regulatory body, at whatever level they practise. They must abide by the duties laid out in the regulators' codes and standards. These make it clear that professionals must practise only where they can do so safely and competently.

The regulators' approach to advanced or specialist practice must be viewed alongside other arrangements for managing risks to patient safety. These include employers' procedures and existing regulation. The responsibility for ensuring a health professional has the skills to carry out a role competently and safely rests with the employer. Self-employed professionals have

a duty to practice within the scope of their role and ensure patients are not put at risk.

The process of revalidation will create an opportunity for regulatory bodies to identify high-risk areas of practice and focus their work where risks are highest. Where a professional takes on more responsibilities, or trains in order to develop their practice over time, this is unlikely to cause significant

risks to public safety. Such developments would not require changes to the existing regulatory structure. If an area of practice develops within a profession which poses new or different risks to patients and requires new standards of proficiency to be performed safely, the regulatory body will need to respond accordingly.

For further information, please visit www.chre.org.uk

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