



NURSE INNOVATORS

Clinical decision-making in action



Royal College
of Nursing
Scotland

TERMINOLOGY USED IN THE REPORT

Advanced nursing practice has evolved organically across Scotland, with a variety of roles developing in response to different local service needs. This means that nurses working at an advanced level of practice have a range of roles and job titles, including advanced nurse practitioner, clinical nurse specialist and nurse consultant.

For ease of reading in this report we have used the term **advanced nurse practitioner (ANP)** to refer to any nurse who is working at an advanced level of nursing practice, irrespective of their official role or job title. We have taken this decision because there is no single definition or terminology which collectively describes all those nurses who work at an advanced level of practice and the variety and lack of consistency of roles and terminology can be confusing.

We have included in this report the key characteristics, as defined by the RCN, which all nurses working at an advanced level of nursing practice need to encompass. Central to this is the ability to act as a **senior clinical decision-maker**, with the authority and autonomy to make complex decisions about a patient's care.

RCN Scotland would like to thank all the nurses who willingly agreed to be interviewed and take part in this work, which would not have been possible without their contributions.

FOREWORD

THERESA FYFFE, RCN SCOTLAND DIRECTOR

The impetus for us to produce this report and the accompanying case studies was initially born out of our frustration at the lack of recognition at all levels of the health service and within Government of the key contribution that senior nurses in clinical decision-making roles currently make to our health service – and the huge potential to develop this nursing workforce for the future.

It also came about from our work on the integration of health and social care. Integration presents major challenges, but also not-to-be-missed opportunities to look at different models of care and to change the way in which our health services are delivered, to meet the local needs of patients. To make this a reality – given current pressures within health and social care – senior nurses working in clinical decision-making roles will be crucial to success, as I hope our report clearly demonstrates.

The final impetus for us to publish this report has been the plethora of reform groups set up by the Scottish Government to look at future models of care, including the Sustainability and Seven Day Services Task Force, the primary care out-of-hours review and unscheduled care reforms. We sit on many of these groups and the role of advanced nursing practice in finding creative, sustainable solutions to delivering high-quality, person-centred services is finally moving up the agenda.

Among some stakeholders, however, there is still a lack of understanding of these senior nurses' clinical decision-making skills, expertise and knowledge, which we hope this report, along with these senior nurses' own accounts of their role, will help address.

Overall, our aim is to inform those designing, resourcing and shaping the future of our health and social care services – in Government, in integration joint boards and in health boards – about the current and future potential of senior nurses in clinical decision-making roles and the benefits they bring to patients and to the health service as a whole.

This report also makes a number of recommendations, including the need for a coherent national approach to the development of advanced nursing practice and, crucially, the need for investment and support in developing this workforce for the future.

Given all these factors – and the announcement by the Chief Nursing Officer for Scotland of a review into advanced nursing practice – I believe this report is particularly timely.

"I take personal responsibility for keeping my patients safe. An experienced nurse would know what needs to be done, but they wouldn't be able to start a drug, make a change, order an investigation or initiate a resuscitation. We can act immediately at the bedside: implement, evaluate and then discuss it further. I am learning all the time."

**CALUM PARKER, ADVANCED
CRITICAL CARE PRACTITIONER,
NHS Lothian**

PENNIE TAYLOR, HEALTH JOURNALIST

Anyone seeking real innovation in health services in Scotland need look no further than advanced nursing practice. All over the country, nurses who have extended their skills are developing new ways of working for the benefit of patients, their carers and the NHS as a whole.

My eyes were opened to the role as I conducted the interviews for the features that accompany this report. I met nurses working in many specialist areas across the country who are pushing out the boundaries of traditional nursing practice to improve quality of care.

The advanced nurse practitioners (ANPs) I spoke to are courageous, creative and very highly skilled, and I am deeply indebted to each of them for the insight they gave me to the complexities, and rewards, of their challenging role.

Practising autonomously is brave, and the commitment it takes to become an ANP is considerable. The role may have emerged in response to changes in medical practice, but these are not quasi doctors: the ANPs I met all stress that they are nurses first and foremost, committed to clinical excellence and holistic person-centred care.

True pioneers whose skill sets include diplomacy and inter-professional relations, ANPs are bridging the traditional gaps between the health and care professions. All the evidence indicates this is bringing huge benefits.

Yet still, ANPs describe the fragility of their services as financial pressures come to bear. Service managers have to be supported to appreciate the value of their ANPs, and to take the long view to invest in them – done properly, savings will be delivered and service stability assured.

Advanced nursing practice may be relatively new, but I am in no doubt that these clinical roles offer sustainable, high-quality and person-centred solutions to some of the trickiest challenges facing Scotland's health and care services.

As one of the ANPs told me: "Our opportunity to influence the future is huge".

"There are more nurses working in advanced practice here because we rose to the challenges and didn't waste a good crisis. With GP out-of-hour changes and junior doctor working time restrictions, the timing was right and we are ahead of the game. Here we have been allowed to trail blaze right across the scope of practice."

EDDIE DOCHERTY, ASSOCIATE NURSE DIRECTOR FOR ADVANCED PRACTICE, NHS AYRSHIRE & ARRAN

"I can see traditional hierarchies starting to move because of how [ANPs] are working. Power balances are shifting and professionals are becoming more and more collaborative as nurses, medics and AHPs [allied health professionals] start to work together differently."

JANE MCNULTY, INTERIM CHIEF NURSE, NHS Lothian

"The ANP service has far exceeded expectations. They are improving patient care, and culture change is being driven by these developing roles."

DR ANN HODGES, CLINICAL DIRECTOR FOR MENTAL HEALTH SERVICES, NHS GRAMPIAN

Introduction

As a nation, we know that we need new models of patient care to meet changing demand. At a time when the health service is facing unprecedented pressure, advanced nursing practice offers a sustainable solution to the delivery of quality patient care.

"We visit the majority of patients at home, undertake telephone consultations, and continue to expand the nurse-led clinic service. This is about focusing care around patient ability, needs and location while balancing escalating demand on resources."

JILL NICHOLLS, HEART FAILURE SPECIALIST NURSE, NHS TAYSIDE

Advanced nurse practitioners (ANPs) are highly qualified nurses, who have the clinical expertise, theoretical knowledge and experience needed to work at an advanced level of nursing practice. Central to this is their ability to act as a senior clinical decision-maker, with the authority and autonomy to make complex decisions about a patient's care.

As our case studies illustrate, these nurses, using their advanced clinical knowledge as well as commitment and courage, are pushing out the boundaries of nursing practice, extending traditional skill sets and creating exciting opportunities for service development.

"When we started there was no job description, no model to follow, and no real idea whether it would work. Since then we have significantly expanded our roles to enhance patient care."

TRISH BURY, ANP, NHS GRAMPIAN



Lyndsey Fearn, ANP, Wishaw Minor and Major Injury Nurse Treatment Service (MINTS), NHS Lanarkshire

Over the past 10 years, ANPs in Scotland have emerged in response to service need. With pressures on our health system and workforce growing, these pioneering nurses are proving they are vital to service sustainability, the promotion of patient safety and healthcare quality improvement.

"It's about teaching generic skills and getting people to apply them. This training has changed the way we deliver a lot of care. We are moving away from the notion that every patient needs to be seen by a doctor."

GILLIAN CORBETT, CHIEF OF NURSING SERVICES WISHAW GENERAL HOSPITAL, NHS LANARKSHIRE

The International Council of Nurses offers a definition of an ANP as a 'registered nurse who has acquired the expert knowledge base, complex decision-making skills and clinical competencies for expanding practice, the characteristics of which are shaped by the context and/or country in which s/he is credentialed to practice. A Master's degree is recommended for entry level' (2008)¹.

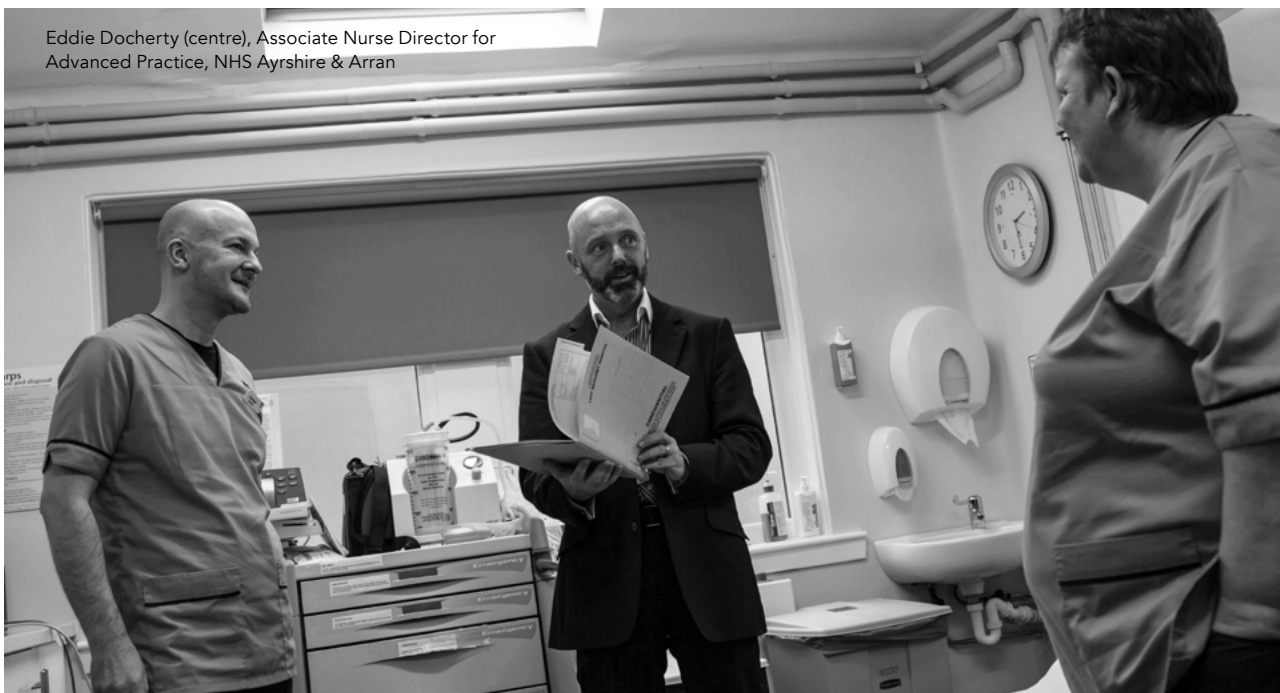
To be working at this level ANPs will have demonstrated they have the expert knowledge, complex decision-making skills and clinical competencies to practise autonomously.

The Royal College of Nursing has identified key characteristics of advanced nursing practise², including:

- Making professionally autonomous decisions for which they are accountable
- Receiving, assessing and diagnosing patients with undifferentiated and undiagnosed problems
- Having the authority to admit, discharge and refer patients
- Ordering investigations and providing treatment individually or as part of a team
- Supporting patients to self-care, manage and live with illness
- Working collaboratively across professions and disciplines
- Providing clinical leadership

"You feel right at the cutting edge, making the changes you know need to be made. For instance, I revised the blood glucose management policy, and that's really

Eddie Docherty (centre), Associate Nurse Director for Advanced Practice, NHS Ayrshire & Arran



rewarding. I never thought I'd be listened to so much. People really take on board what you say."

LIAM MCHUGH, ANP, NHS LANARKSHIRE

ANPs operate outwith traditional practice silos: they are bridging the gaps between acute and primary care and offering a new way of approaching clinical leadership that cuts across traditional boundaries. They are changing deeply-rooted professional cultures and driving new ways of working to support vulnerable patients and communities that might otherwise lose access to valuable local services that make a real difference to people's lives.

Advanced nursing practice is at the leading edge of healthcare innovation, and represents a robust yet creative solution to some of the greatest challenges facing healthcare in Scotland.

"I have a great admiration for them. I'm very proud to see nurses in such an extended role. They are not thinking of themselves as mini doctors – they are nurses through and through, and that's what makes them special."

JULIE MACKAY, MORAY NURSE MANAGER, NHS GRAMPIAN

The time has come to formalise and resource advanced nursing practice in Scotland to

maximise its potential for the benefit of patients and the health service as a whole.

"We are keen to keep a constant cycle of development so that the staff and the service do not become stale. I am always asking what we need to do next to improve the care our patients receive."

EDDIE DOCHERTY, ASSOCIATE NURSE DIRECTOR FOR ADVANCED PRACTICE, NHS AYRSHIRE & ARRAN

Why advanced nursing practice?

Clinical decision-makers

The ability to make autonomous clinical decisions within an individual's scope of practice without referral to a doctor is a key principle of advanced nursing practice. ANPs can assess and diagnose patients, develop care plans, order tests and prescribe treatment or medication. They have the authority to admit or discharge patients, and refer patients to other health care providers.

"[It] means developing clarity of thought and the ability to make active rather than passive decisions. It's about synthesising information and reaching a diagnosis quickly and effectively, without suffering paralysis by analysis. That is challenging as ANPs work alone, and can't defer."

EDDIE DOCHERTY



Linda Harper (left), Associate Nurse Director, NHS Grampian

ANPs can improve the responsiveness and effectiveness of the team through their ability to triage, assess and make clinical decisions. This helps to improve patient flow within acute and community services, and at the interface between them.

“They have fulfilled every expectation, and convinced the sceptics. We would struggle without them now, and there is lots of potential to take the role further.”

DR BRIAN COOK, MEDICAL DIRECTOR, NHS Lothian

In some clinical areas, such as the NHS Tayside Heart Failure Nurse Liaison Service, practising at an advanced level means that nurses can oversee the complete patient journey, including supporting patients to self-manage their care. As confidence in their abilities grow, so onward referral to medical specialists reduce. This model frees up medical colleagues to concentrate on those patients with the most complex care needs, making the most of increasingly scarce professional resources.

“We liaise closely with GPs, district nurses, pharmacists and social care, and link with specialist palliative care colleagues too. An informed, supported collaborative approach is the best way of working.”

JILL NICHOLLS

Although controversial to some clinicians in the early days of advanced nursing practice, the clinical decision-making contribution that ANPs bring has now been widely acknowledged and valued:

- The Royal College of Physicians of Edinburgh consensus statement on patient

flow³ makes it clear that access to senior clinical decision-makers, including nurses, 24/7 is a vital requirement for improving patient flow and responding to unscheduled care needs

- The Scottish Government’s Sustainability and Seven Day Services Task Force has made a commitment⁴ to explore the contribution of nurses (and allied health professionals and healthcare scientists) operating as senior decision-makers in acute and primary care
- The Chief Nursing Officer is establishing a workstream on advanced nursing practice as part of wider work on transforming nursing roles

Training and expertise to deliver safe care

It takes time and commitment for a nurse to become an ANP, with the skill and confidence to work autonomously and make complex clinical decisions. Education and training is rigorous. All ANPs should be educated to masters level and work at least at Band 7 (Scottish Government guidance, 2010⁵). However, in reality, many of these roles will have responsibilities that mean they will be evaluated at a Band 8. Many will also be independent prescribers, which demands a separate qualification. Because of the high level of knowledge and experience they need to equip them for the role, ANPs are already senior nurses with several years of post-registration training and experience behind them when they start ANP training.

“People are attracted by the degree of hands-on care. They love the variety and the autonomy. But they’re really scared when they first start and need to build up their confidence.”

LINDA HARPER, ASSOCIATE NURSE DIRECTOR, NHS GRAMPIAN

In addition to completing a masters programme in advanced clinical practice, ANPs will undergo extensive in-house training with clinical mentors, including senior doctors, to support the development of practical skills. ANPs are not permitted to practice autonomously until they have been fully assessed to ensure they have the expertise to do so safely.

Jill Nicholls, Heart Failure Specialist Nurse, NHS Tayside



“We put our ANPs through a tough programme before they are asked to take sole responsibility for patients – we owe it to the nurses, and the people they will be caring for.”

LINDA HARPER

ANPs deliver safe services. Local audits of the ANP out-of-hours Grampian Medical Emergency Department (GMED) service show that ANPs make sound clinical decisions, in line with those made by doctors. There, regular case reviews are made by a team including GPs and clinical performance is closely monitored. Indeed, each of the services featured in our case studies undertakes regular critical review.

“We have the confidence and ability to treat people and then send them home. That can be a greater challenge for A&E staff whose instinct may be to admit.”

LINDA HARPER

Complementing doctors, not replacing them

The nurses we feature in our case studies all stress that being an ANP builds on their fundamental ethos as nurses: that they are not trying to replace doctors, but maintain a focus on practising holistically, taking into

account the patient’s broader needs as well as their symptoms. Advanced nursing practice offers senior nurses who do not wish to give up hands-on patient care a rewarding route for career progression, and should be viewed as an opportunity to motivate and retain highly-experienced and highly-skilled expert clinicians.

“It’s a fantastic opportunity from a nursing perspective: an opportunity to develop a new role. For me, being a charge nurse would have meant never getting near a patient. If you are ambitious, and you want to stay clinical, this is definitely the way to go”

LIAM MCHUGH

ANPs complement the work of medical colleagues by extending their nursing skills into hitherto unexplored areas of clinical practice, all the while maintaining their core person-centred nursing ethic.

“They make time for me to be training in the job, and not just filling gaps in the rota. The system here is quite specialised and advanced. It creates a strong foundation that makes sure patient care doesn’t fall through gaps. It should be happening everywhere.”

DR AKKSHAY IYER, FOUNDATION YEAR TWO TRAINEE, NHS GRAMPIAN

Nor are they 'medics on the cheap': senior nurses are highly paid in their own right. But advanced nursing practice does make best use of resources. ANPs bring service stability and flexibility. Their contribution as senior clinical decision-makers allows every healthcare professional to work to the top of their skill level as part of a multi-professional team.

"It is not a cheap option compared to doctors. But it is sustainable."

EDDIE DOCHERTY

Benefits for patients

"Patients tell us they feel much more supported and we have opened up their access to specialist care considerably. They say they can discuss very personal things that they wouldn't have bothered the consultant with."

LORNA YOUNG, ANP, NHS GRAMPIAN

There is a growing body of evidence that ANPs enhance patient care, improving outcomes and satisfaction with the services that patients and their carers receive.

"In my experience from the A&E point of view, patients don't mind who they're seen by. They don't question our clinical skills and ability. What they do question is waiting for six hours rather than one hour to be seen,

and ANPs are making a huge difference to waiting times while improving the quality of care."

GILLIAN CORBETT

Anecdotally, from the nurses we profile in our case studies, patients say they feel they can share more personal information with an ANP than with a doctor. While a 2005 Cochrane review⁶ found that:

- Appropriately-trained nurses deliver as high quality care as primary care doctors and achieve as good health outcomes for patients
- Patient satisfaction was higher for nurse-led care

"It's extremely reassuring. Jill is a specialist. I would far rather see her than a GP or a junior doctor."

ALLAN KEILLOR, PATIENT, NHS TAYSIDE

An evaluation of advanced nursing practice in Ireland (2010)⁷ showed strong evidence that ANPs improve patient outcomes by, for example, providing earlier diagnosis and intervention, timely access to care, promoting self-management and increasing patient satisfaction.

Similarly, an evaluation in primary care trusts in England (2009)⁸ showed that ANPs:



Karin Howard, Team Co-ordinator, NHS Grampian

- Carried out more holistic assessment of patients and increased patient satisfaction
- Resulted in better engagement of patients in 'hard-to-reach' groups
- Improved continuity of care, reduced waiting times and shortened length of stay

Their autonomy and advanced decision-making skills, along with their years of nursing knowledge and experience, are what enable ANPs to make such a positive difference to patients.

Benefits for the health service

In Scotland ANPs emerged, in part, as a response to junior doctor training changes and the need to develop new arrangements for out-of-hours care following renegotiation of the GP contract, which gave GPs the option to opt out of delivery of out-of-hours primary care. But as the evaluation of ANPs in primary care trusts in England⁸ shows, the innovation has brought far greater impact, including:

- Reduction in unplanned admissions to hospital from nursing homes
- Improved access to primary care services in areas where GP recruitment and retention had been difficult
- Reduced stress amongst GPs, improved recruitment and freeing up senior doctor time

"It's about putting all your education, experience and instinct to good use. If I avert one hospital admission, I feel satisfied."

JILL NICHOLLS

The English evaluation⁸ also found that ANPs improved inter-professional culture by improving communication between healthcare professionals from different disciplines.

Evaluation of advanced nursing practice in Ireland (2010)⁷ further endorses the leadership aspects of advanced practitioner roles, showing that ANPs:

- Increase the knowledge, skill and competence of other staff, empower and support staff and avoid de-skilling of both nursing and medical junior staff

- Contribute to strategic planning of services, work across hospital and community and provide clinical leadership, mentorship and support
- Conduct and implement research and provide expert clinical advice

The evolution of advanced nursing practice has allowed more cost effective, efficient and flexible service delivery. As senior clinical decision-makers, ANPs can deliver significant savings in the longer term by avoiding unnecessary hospital admissions, reducing the length of hospital stay, supporting discharge and cutting readmission rates⁷.

"Ours may appear to be an expensive service on the surface as it's not cheap having top-level nurses working weekends and nights, but we represent cost avoidance. If you look at the bigger picture, it is clear we save money in the long-run."

LORNA YOUNG

As such, advanced nursing practice is well placed to address the concerns that are being expressed by the Academy of Medical Royal Colleges and Faculties of Scotland and the Royal College of Nursing Scotland, who recently issued a joint statement⁹ calling for national action to build a more sustainable NHS in Scotland, including improved inter-professional working.

"Fragmented structures, overload and out-dated ways of working mean that the full potential of the most valuable resource in our health service – the people who work in it – is often not achieved. We could work much more effectively if the barriers to collaborative team working were effectively challenged and professionals were trusted, equipped and enabled to work across the full range of their expertise."

ROYAL COLLEGE OF NURSING SCOTLAND AND ACADEMY OF MEDICAL ROYAL COLLEGES AND FACULTIES IN SCOTLAND

"At first the doctors were apprehensive, but now they say they couldn't do their job without us. There are far better relationships on the wards, mutual respect. They are excellent at teaching us."

LYNDSEY FEARN, ANP, NHS LANARKSHIRE

ACTION REQUIRED

Clear definition of the ANP role

The lack of a clear definition of the ANP role means there is currently confusion and role variation across Scotland. At present, there is no robust way of identifying the number of ANPs and only a handful of health boards report on their advanced practitioner workforce. This must be addressed in order to scope the national picture and identify service gaps.

“ANPs need to be clearly defined and recognised on the nursing council register. We are asking ANPs to take on a great deal of responsibility and we need to make sure that they are professionally recognised for that.”

JANE MCNULTY, INTERIM CHIEF NURSE, NHS Lothian

- In the absence of the UK Nursing and Midwifery Council defining registration standards for advanced nursing practice, work should be undertaken to:

- describe and set a benchmark for what advanced level nursing practice is
- explore opportunities to support the individual credentialing of ANPs
- The RCN should explore developing an accreditation or fellowship scheme for ANPs
- There must be accurate reporting by all health boards to identify numbers of advanced nurse practitioners to prevent postcode provision of ANPs

Consistent training, education and career development of advanced nursing practice

“We were the only organisation to have identified clear competencies for ANPs. Some people call themselves ANPs, but they haven’t done the training. That is the key.”

LINDA HARPER

Since 2007 the Scottish Government and NHS Education for Scotland have been working on a systematic approach to developing advanced practice roles. They have produced a Post-Registration Career Development Framework¹⁰,

an Advanced Practice Toolkit¹¹ and a tool to help services analyse their need for advanced practice roles¹².

However more needs to be done to translate this into practice. Masters programmes for advanced practice have evolved differently and current training, education and assessment of competence varies. Education, training and career development of ANPs needs to be further developed to create consistency and confidence and to support governance of roles and a truly mobile workforce across Scotland. There is also potential for multi-disciplinary education and training.

“ANPs have had to jump through more hoops to prove themselves, and that’s a shame, but they’ve just got on and done it. It has been a lengthy process, getting senior colleagues to understand that they need to apply the same measures they use to assess a junior doctor to assessing the skills of ANPs. But we’re getting there.”

GILLIAN CORBETT

- Develop nationally agreed standards for training, education and career development pathways for advanced nursing practice
- Define national competencies for advanced nursing practice across different fields of practice

Professional support

“It is an extremely difficult journey. Self-doubt is very common and there is usually a confidence slump at some stage. ANPs are learning to practice in a particularly grey area between nursing and medicine and you can feel very, very professionally isolated.”

EDDIE DOCHERTY

Nurses working at an advanced level can feel very isolated in their developing area of practice and require ongoing peer support and mentoring. Access to clinical supervision, clinical-decision making support and ongoing continuing professional development is vital to develop and maintain skills and ensure the highest standard of care for patients.

ANPs need to be creative in how they maintain their clinical skills, and this will often involve

their medical colleagues. For example, ANPs working in the out-of-hours service on Isle of Cumbrae also work in hospitals on the mainland to maintain critical clinical skills: managers and clinical colleagues support this.

“There are lines of referral and contact with the people at Crosshouse Hospital on the mainland, and the team here is amazing. We are able to keep patients on the island who would have been sent off before. This is the answer for rural communities in Scotland.”

GILLIAN MCNAUGHTON, ANP, NHS AYRSHIRE & ARRAN

- **Health boards need to ensure ANPs are fully supported through clinical supervision, mentoring and peer support and have access to continuing professional development and clinical decision-making support**

Long-term investment and workforce planning

“We have to invest to save. There will not be the numbers of doctors to meet patient need in the future, so we have to be planning ahead. That means double-running costs in the short-term, but ANP training will pay off in time.”

JANE MCNULTY

Advanced nursing practice should form a key element of long-term, multidisciplinary workforce planning by health boards and integration authorities. It is not a quick-fix option to fill a gap, but needs long-term investment to build sustainable services for the future. This includes succession planning and investment in training.

“We have always got to demonstrate value for money, and that’s quite right. My argument around emergency care is that it is costing us £250,000 every six months trying to get locum doctors from overseas to backfill the emergency department. Six ANPs would cost £321,000 but that would deliver stability, guarantee rotas and do so much more to protect patient safety.”

GILLIAN CORBETT

With workforce planning being done at a local level by health boards and integration

authorities, there still needs to be a national approach to training to ensure Scotland has enough ANPs to meet the changing health care needs of the population.

- **Health boards and integration authorities should invest in the long-term development of ANPs**
- **Scottish Government and NHS Education for Scotland must translate local workforce needs into a national approach for ANP workforce planning and training**

“Patients and clinicians like ANPs. We are improving care, building sustainability into the service and containing cost. This is the way ahead.”

LINDA HARPER

Infrastructure and IT

There is woeful access to patient records available to ANPs. They often work across specialties and between acute and primary care, and with social work, the Scottish Ambulance Service and Police Scotland and may require access to a wide range of patient information. Our case studies show that GPs can be reluctant to extend access to the full patient records that they hold, which can hamper out-of-hours care provided by ANPs.

Antiquated computer systems and the slow response of IT support is cited as a block to efficient working by ANPs. Advances in technology and telehealth can improve access to healthcare, promote wellbeing and support a more flexible workforce¹³. IT teams must do a great deal more to support mobile working, and provide access to and training in relevant applications that ANPs wish to use.

“We are stretching the boundaries of risk management. Because of their clinical background, our staff tend to be most comfortable dealing with the really acute things, and know exactly what to do. But when it comes to care of the elderly, people with diabetes and chronic heart disease, it can be more difficult. It would help if we had access to full GP patient records, but if they are in any doubt, we train ANPs to take a pause, seek a GP opinion, and then decide how to proceed.”

LINDA HARPER

- **Health boards, integration authorities, GPs and other agencies need to make sure patient records are readily accessible to all those who need them**
- **Health boards and integration authorities must develop IT infrastructure and the use of technology to improve patient care and support a more flexible workforce**

Culture

"All the feedback has been excellent. In the past, doctors may have felt threatened, but we are beyond that stage now. It is good to see the development of a profession."

DR ADNAN MALIK, CUMBRAE GP

Each of the nurses we profile in our case studies reports meeting initial resistance from nursing and medical colleagues, which they fought to overturn. A change of culture to challenge silo mentality and a transformation of professional attitudes is required at all levels of organisations to build understanding and acceptance of advanced nursing practice.

"Resistance from doctors is a constant personal and professional challenge. I have the same conversations every time we move into a new clinical area: 'It can't be done', 'nurses can't be trained to this level', 'you need a doctor'. My response is to acknowledge that there are things that only a senior specialist doctor can do. We're not trying to replace them. We are still nurses at the core - patient-centred and working to the values and professional requirements of our code. Only we are at the cutting-edge of the code."

EDDIE DOCHERTY

There has to be clear strategic vision about the value and role of ANPs among health boards and integration authorities, and buy-in to the concept from management. Finance leads have to recognise the long-term investment that is required, and resource the development of ANP services.

"There was a lot of resistance from medical staff saying 'nurses can't do that!' and 'patients will expect to see a doctor'. One even said 'I'll see you in court'. In the beginning, ANPs were told they weren't

welcome by consultants on one ward, but the same department is now asking for more of them."

GILLIAN CORBETT

Patients, carers and the public need to understand the benefits of being cared for by ANPs, including better outcomes, better access to services and increased patient satisfaction.

"There was concern among some doctors that we would be changing their treatments and making autonomous decisions. We had to reassure them about our skills, communicate with them, and involve them in developing our clinical guidance."

JILL NICHOLLS

Scotland's politicians have to understand and support the need for ANPs. When services are introduced, they must be willing to help to foster public confidence.

"There have been public meetings and discussions with politicians in the past when we have replaced a community's GP cover. Thankfully, experience of the service has brought recognition of the ANPs' skills. In fact, many GPs now want ANPs working within their practices."

LINDA HARPER

- **The Scottish Government, RCN and Scotland's health and care organisations should work together to promote the role of advanced nursing practice, nationally and locally**

Research

"We are hot on randomised controlled trials, but I would like to take a more qualitative view as well. Nurses are in a prime position to look at what being in ICU does to you as a person. I don't want to be a doctor, but to develop my nursing skills in a clinically significant way."

HELEN LYALL, ADVANCED CRITICAL CARE PRACTITIONER, NHS Lothian

The research that exists into the impact of the ANP role is piecemeal, locally-focused and sporadic. There needs to be national research to evaluate the influence of ANPs on care

quality, patient and carer satisfaction, team working and service efficiency in Scotland. Within this, a particular focus on how ANPs support delivery of the new National Health and Wellbeing Outcomes underpinning health and social care integration would help support integration authorities and local partners.

- **Scottish Government and research funders should prioritise the evaluation of advanced nursing practice**

"We think we're the first in Scotland to do this kind of emergency assessment, where nurses are doing all the work. Our evidence shows that it is highly effective."

KARIN HOWARD, TEAM CO-ORDINATOR, NHS GRAMPIAN

Conclusion

"If they weren't here we would have to close our emergency service. These ANPs provide extremely high-level and high-quality assessment based on a great deal of clinical experience. They represent a significant development in the clinical workforce."

DR ANN HODGES, CLINICAL DIRECTOR FOR MENTAL HEALTH SERVICES, NHS GRAMPIAN

As our case studies show, ANPs in Scotland are delivering rewards that benefit all.

"I would far rather have a nurse or a paramedic looking after me than some of the locum doctors we used to fly in from abroad to cover these shifts. The ANPs are extremely proficient. We no longer use locums from abroad at all."

DR FIONA MCKAY, GMED CLINICAL SUPERVISOR, NHS GRAMPIAN

Advanced nursing practice offers senior nurses an opportunity to further develop their clinical

skills, enhancing frontline recruitment and retention. ANPs have the potential to deliver service sustainability, and promote service quality improvement. Patients, carers and service users report increased satisfaction, and all the evidence indicates ANPs represent value-for-money, making best use of resources by allowing every healthcare professional to work across the breadth of their expertise and to the top of their skill level as part of a multi-professional team.

"I can foresee ANPs with dual roles working jointly with NHS 24 on the telephones and in A&E where their skills would enhance both settings. And when it comes to providing specialist cancer care and mental health care, ANPs would bring another very valuable level of clinical support. Their involvement would mean that fewer patients would have to be referred on."

DAWN ORR, NURSE CONSULTANT IN TELEHEALTH AND TELECARE, NHS 24

The risks of not maximising the ANP role across Scotland are significant, and the opportunities it offers immense.

"Nursing gives us sustainability, succession planning and consistency. I can see whole units being staffed by ANPs in five years time."

GILLIAN CORBETT

"I can see ANPs doing more intensive care unit transfers, to take the pressure off anaesthetists. What we do will depend on individual ANP's comfort levels, and the ceiling on that is being raised all the time."

CALUM PARKER, ADVANCED CRITICAL CARE PRACTITIONER, NHS LOTHAN

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