

Advanced Level Practice for Ophthalmic Nursing

CLINICAL PROFESSIONAL RESOURCE



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This document has been designed in collaboration with our members to ensure it meets most accessibility standards. However, if this does not fit your requirements, please contact corporate.communications@rcn.org.uk

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Contents

1. Introduction	4
RCN Advanced level standards.....	5
RCN Workforce Standards.....	7
RCN Professional Framework: This is Nursing	7
2. Advanced practice in ophthalmic nursing	11
Clinical nurse specialists and advanced practice roles	12
Advanced level practice: clinical skills and knowledge	13
Advanced level practice: education.....	16
Advanced level practice: research.....	17
Advanced level practice: leadership and management	18
3. Clinical practice for advanced level practice for ophthalmic nursing	20
4. Conclusion	29
5. References and further reading.....	30

Notes

It is recognised that services are provided by registered nurses and midwives, health care support workers, assistant practitioners, nursing associates, student nurses and midwives, and trainee nursing associates. For ease of reading, the generic terms 'nurse', 'nursing' and 'nurses' are used throughout this document.

The RCN recognises and embraces our gender diverse society and encourages this guideline to be used by and/or applied to people who identify as non-binary, transgender or gender fluid.

The RCN also recognises that not all those born female, or male will identify with the same gender nouns, but for ease of reading, use the term women/men and where appropriate acknowledge non-binary terms.

1. Introduction

In contemporary health care, nurses are a critical part of delivering, improving and developing clinical care and the patient experience. Nurses work within a speciality across all levels of nursing and ensuring career progression through these levels is essential in developing the profession.

Ophthalmic nursing offers opportunities for advanced level roles, and this publication aims to outline the roles, and ways in which nurses could transition to advanced level practice.

It is also noted that for nurses working in ophthalmic settings, their overall practice needs to take account of NMC revalidation standards (NMC, 2021). More detail is available at: nmc.org.uk/revalidation/overview/what-is-revalidation

Evidence suggests that there is a wide variation in employer understanding and approach to these roles with differing expectations (Devereux, 2023). The need for standardisation has also recently been highlighted in an independent report from the Nuffield Trust in 2023, available at: nuffieldtrust.org.uk/research/independent-report-on-the-regulation-of-advanced-practice-in-nursing-and-midwifery. The aim of this guidance is to identify the skills required and produce a framework for ophthalmic nurses to progress their careers.

Several initiatives have been introduced to attempt to standardise practice by providing guidance on the knowledge and skills required for non-medical ophthalmic health care professionals, including nurses (and orthoptists and optometrists).

The most significant was the multiprofessional *Ophthalmic Common Clinical Competency Framework* (OCCCF) in 2019, which became the Ophthalmic Practitioner Training (OPT) programme in 2020, available at: rcophth.ac.uk/training/ophthalmic-practitioner-training/opt-curriculum. The OPT has three levels of proficiencies. Level one denotes a practitioner who can perform clinical work to assist medical decision; level two reflects a practitioner who is able to work to protocol with clearly defined delegated decision, and level three implies that the practitioner makes decisions independently with appropriate support and back up.

The OPT covers:

- cataract
- glaucoma
- medical retina
- acute and emergency eye care.

In England, advanced clinical practice is mapped against OPT level three competencies and the National Health Service for England (NHSE) multiprofessional framework for advanced clinical practice.

The OPT applies to non-medical registered ophthalmic health care professionals, such as nurses, orthoptists and optometrists. It is acknowledged that there are a growing number of unregistered staff working in supportive roles such as ophthalmic technicians, ophthalmic vision sciences and health care assistants. They play a vital role within the multidisciplinary team particularly in diagnostic and imaging services.

There are a number of RCN resources and tools, which can be used to articulate the requirements for advanced practice, including:

- *RCN Advanced Level Practice Standards*: rcn.org.uk/Professional-Development/publications/rcn-professional-development-framework-advanced-level-nursing-uk-pub-011-127
- *RCN Nursing Workforce Standards*: rcn.org.uk/Professional-Development/Nursing-Workforce-Standards
- *RCN Professional Framework*: (rcn.org.uk/Professional-Development/Career-Frameworks) (Table 1), which are used to outline the expectations of these roles.

RCN Advanced level standards

“Advanced level nursing describes a level which can only be delivered by registered nurses with substantial experience and expertise. This level can be applied to the full range of registered nurses’ careers, and not solely particular roles or specific organisational contexts. The advanced level is differentiated from other levels by a registered nurse’s expertise in applying highly developed theoretical and practical knowledge to complex, unpredictable, and sometimes unfamiliar situations, through use of critical thinking, high-level decision making and exercising professional judgement. It is underpinned by a comprehensive range of knowledge, skills, and capabilities within each of the four pillars of nursing, namely clinical practice, education, research, and leadership. These will have been developed through studying a full Master’s degree in a relevant subject area with experiential learning or by demonstrating equivalence. Integration of all the capabilities across the four pillars, together with critical reflection, is key to enable an advanced level nurse to function to their full potential and optimise their autonomy within their context of employment” (RCN, 2024a).

Nurses practicing at advanced level are usually educated at Master’s level and have been assessed as competent in practice using their expert clinical knowledge and skills. They have the freedom and authority to act, making autonomous decisions in the assessment, diagnosis, and treatment of patients.

The International Confederation of Nurses (ICN) defines an advanced practice nurse as a generalist or specialised nurse who has acquired, through additional graduate education (minimum of a Master’s degree), the expert knowledge base, complex decision-making skills and clinical competencies for Advanced Nursing Practice, the characteristics of which are shaped by the context in which they are credentialed to practice (ICN, 2020).

Registered nurses working at advanced level should meet the following standards:

- have an active registration with the NMC
- practice within the four pillars of advanced nursing (Clinical practice, Leadership, Education and Research) (HEE, 2017)
- have a job plan that demonstrates advanced nursing practice and has equity with peers working at this level
- be educated to Master’s level
- be an independent prescriber, where clinically required

- meet NMC revalidation requirements
- demonstrate autonomous use of evidence.

Core standards for advanced level nursing (RCN, 2024a)

The knowledge base and skills for this level of nursing is influenced by the context in which individuals practise, and all advanced level registered nurses will demonstrate the capability to:

- take full responsibility for and optimise their freedom to act, with commitment to, and evidence of, operating at the highest standards across all four pillars of advanced level nursing
- apply a systematic, authoritative, and tacit understanding of current knowledge, advanced skills, and related issues in their field and at the interface of other fields. This includes current and emerging technology. They will proactively develop new skills and approaches in response to emerging knowledge and techniques
- create an evidence-based judgement about a particular issue by integrating knowledge from new or existing sources, including those from other disciplines, and in situations with incomplete, contradictory, or limited information. This utilises their ability to interpret, analyse, evaluate, synthesise, and infer
- demonstrate a holistic grasp of complex situations, perceiving the overall picture and alternative approaches, with a vision of what may be possible
- communicate complex issues clearly and effectively to a wide range of stakeholders, selecting and applying a range of methods and approaches
- demonstrate vigilance by systematically monitoring, assessing, proactively challenging situations, actions and behaviours and acting to maintain safety and minimise risk
- work in a collaborative, compassionate way, promoting equality, respecting diversity, and ensuring inclusivity, taking responsibility for challenging behaviour that does not align with these values
- extensive use of critical reflection in action and on action particularly in complicated, unpredictable, unfamiliar, and complex situations
- demonstrate reflexivity by recognising how their own actions, thoughts, feelings and values effect other people and situations.

RCN Nursing Workforce Standards

Workforce is a critical issue, especially in the NHS, and defined standards can be used by advanced nursing practitioners to support and direct safer and effective staffing in all areas of ophthalmic nursing. The *RCN Nursing Workforce Standards* can be used by all to enhance care provision. The 14 standards are set out in three distinct themes, which can be used to constantly assess, agree and support safe and effective staffing levels.

The three themes

- **Responsibility and accountability:** standards one to four outline where the responsibility and accountability lie within an organisation for setting, reviewing and taking decisions and actions regarding the nursing workforce.
- **Clinical leadership and safety:** standards five to 10 outline the need for registered nurses with lead clinical professional responsibility for teams, their role in nursing workforce planning and the professional development of that workforce.
- **Health, safety and wellbeing:** standards 11 to 14 outline the health, safety, dignity, equality and respect values of the nursing workforce to enable them to provide the highest quality of care.

The RCN's *Nursing Workforce Standards* are available at: rcn.org.uk/Professional-Development/publications/rcn-nursing-workforce-standards-uk-pub-011-930

RCN Professional Framework: This is Nursing

(rcn.org.uk/Professional-Development/Career-Frameworks)

The RCN Professional Framework aims to articulate and clarify the differing roles and responsibilities and clarify role progression. [Table 1](#) outlines the possible career pathways from nursing support workers to advance practice in ophthalmic nursing.

Table 1 – Role progression in ophthalmic nursing care

Role progression in nursing	Opportunities to enhance knowledge and understanding of ophthalmic nursing practice
Nursing support worker, pre-registration nursing student, student nurse associate (working under supervision) and nursing associates (NAs England only)	Foster interest in ophthalmic nursing care
Registered nurses and nurse associates (NAs England only) at all levels providing care across all ages in general/non-specialist settings	All nurses should have some understanding of basic ophthalmic nursing care regardless of their clinical setting or specialist field. They should be able to support a person with sight impairment, eg, leading and guiding them. It's vital that they can assess visual acuity, clean the eye, use the correct techniques to apply eye drops and eye ointment, be aware of the common signs and symptoms of ophthalmic emergencies. rcn.org.uk/Professional-Development/publications/rcn-eyes-right-uk-pub-011-980
Registered nurses providing care in an ophthalmic setting	Develop the knowledge and skills to effectively care for patients in settings such as outpatient departments, theatres, ophthalmic emergency departments day care wards and preassessment clinics.
Registered nurses working at an enhanced level of practice, providing care in ophthalmology	Undertaking specialist post registration courses such as the PGCert Enhanced Clinical Practice (ECP) or specialist modules to underpin their enhanced roles.
Registered nurses at advanced level providing care in ophthalmology	<p>Develop a sub specialist or generalist role in advanced ophthalmic nursing – undertake a Master's degree incorporating the relevant specialist module, clinical leadership and research. An alternative route is the OPT level three, working with a supervisor to undertake the work-based assessment (WBA) and completion of a portfolio of evidence.</p> <ul style="list-style-type: none"> • Independent prescribing qualification either as a standalone course, or component of a relevant Master's degree. • Autonomously manage their clinical case load by undertaking complex clinical decision making, patient assessment, diagnosis, and treatment. • Review prescribed treatment and evaluate treatment plans. • Initiate onward referral, where necessary, to ensure comprehensive, holistic patient care. <p>Expert patient advocacy. Auditing own practice and engage in research and teaching activities. Demonstrate leadership by initiating, implementing or contributing to service improvement initiatives.</p>
Registered nurses at consultant level providing care in ophthalmology	Develop a sub specialist (or generalist role) in ophthalmic nursing at a recognised consultant level practice and have a portfolio of career-long learning, experience, and formal education; hold a Master's degree and doctorate or planning to transition to a Doctoral Pathway. Autonomous expert fulfilling the four pillars of clinical, leadership, research and education. Working strategically to enhance the overall patient experience, service delivery, and support for their teams and colleagues.

Examples of advanced level nurse working

1. Acute and emergency care

Ophthalmic acute and emergency care services offer appropriate triage and comprehensive holistic management of patient presenting with a range of ophthalmic emergency conditions. Such examples include, visual disturbances, eye pain, eye trauma, and physical changes in the appearance of the eye. This specialised care aims to alleviate symptoms, preserve sight, and safeguard life through various interventions and treatment modalities.

A multidisciplinary team of ophthalmologists, orthoptists, optometrists, ophthalmic nurses, ophthalmic technicians, and support staff collaborates to deliver expert care tailored to each patient's needs, ensuring timely and effective outcomes in critical ophthalmic situations. Sight threatening cases are provided for in urgent eye care settings. Multiprofessional working will also include working with other specialities such as neurology, sexual health, or general medicine.

2. Intravitreal injectors

Age-related macular degeneration (AMD) is the commonest cause of visual loss and registered blind patients over the age of 50 years in the developed world. The advent of intravitreal anti-VEGF agents has changed the goal of treatment for neovascular age-related macular degeneration from stabilising visual loss to visual improvement. AMD has created a significant demand for intravitreal injection therapy which has been met by the expansion and development of advanced practice intravitreal injectors, both nursing and other non-medical health-care practitioners, injector roles. This role is aligned to recognised clinical competencies to administer anti-VEGF therapy and is dependent on the provision of appropriate indemnity arrangements, training, and supervision from ophthalmic specialist doctors and is based on the Royal College of Ophthalmology 2018 guidance, which can be found at: <https://curriculum.rcophth.ac.uk/wp-content/uploads/2018/02/Intravitreal-Injection-Therapy-August-2018-2.pdf>

3. Cataract assessment

In this role the advanced ophthalmic nurse undertakes complete pre-operative assessment of patients attending for cataract surgery. This is from the point of triaging their initial referral the documentation of their health history and presenting complaint, to the clinical examination, investigation and diagnosis (including performing and critically evaluating biometry) of their ocular condition and listing for surgery. This includes taking consent and planning the refractive outcome with the patient and the general management of their surgical pathway.

Consultant nurse

The role of consultant nurse can be aligned to any ophthalmic sub-speciality and is structured around the four core functions of consultant practice as set out in the HEE multiprofessional consultant-level practice capability and impact framework (HEE, 2017).

The consultant nurse

- Is an expert clinical practitioner delivering a comprehensive service to patients through the high degree of professional and personal autonomy.
- Interprets, evaluates, and implements values-based practice across pathways, services, organisations, and systems.
- Is a dynamic link between clinical practice and service development.
- Is an agile and adaptable leader deploying skills and qualities that impact at local and national levels through relationships that foster critical thinking, innovation, negotiation, and creativity.
- Is an integral part of research, service evaluation, service delivery and quality improvement initiatives working with individuals, teams, organisations, and higher education institutes.

2. Advanced level ophthalmic nursing

The emergence of advanced practice, together with the extension and expansion of nursing skills, has led to the development of specialist nurses and advanced level practitioners within the field of ophthalmic nursing. However, as with advanced practice roles in other specialities, the educational pathway and role remit lacks clarity, consistency and standardisation (Dover et al., 2019).

These roles are known by a variety of titles such as clinical nurse specialist (CNS), advanced practice (AP), nurse practitioner (NP), advanced nurse practitioner (ANP), advanced level practitioner (ALP) and nurse consultant (NC) with limited guidance or regulation on the educational requirements of the role being undertaking. This may create confusion for employers, nurses, other health care professionals and patients who may be unsure of the scope and /or limits of practice roles.

These roles may be grouped by bands of pay and some may have a specific skill attached such as fundoscopy, minor operations, intravitreal injections, and OCT interpretations. The following competencies aim to address some of the confusion, and for ease of reading the text uses ALP, in line with the Advanced Level Nursing publication (RCN, 2024a).

Advanced nursing practice is about having the right professional, in the right place at the right time to ensure that the patient has the correct care needed, and not necessarily about having direct medical support. The concepts of accountability, higher-level decision making and autonomy are synonymous with advanced practice resulting in a unique nursing role in comparison to other frontline nurses (Kerr and Macaskill, 2020).

Whatever the career path, there are many sources of help and inspiration in practice, from identifying gaps, to developing the skills and knowledge required, as well as devising new roles and networking with others, who have progressed to more senior roles.

Factors that may impact on the expansion and development of the roles, include:

- clarity around the role
- recognition of prior learning and credentialing
- availability and financial support for education for these expanded roles in provider terms
- individuals' ideas/understanding of the breadth/depth of the role
- support from peers and other professionals, patients and organisations
- overall costs and salary
- an appropriate mentor in place and ongoing mentorship with protected time and funding should be standard to aid learning
- the learner should have access to and work alongside a clinical mentor* who can provide feedback and support, and who can assess their competence and development
- the unit should have a peer review system in place, so that once qualified, advanced level practitioners/nurses' practice is continually assessed, in line with the NMC Code

(NMC, 2018), and they have access to ongoing mentorship and support, and regular clinical reviews of cases.

* Coaching and mentoring (NHS Leadership Academy, 2022) leadershipacademy.nhs.uk/programmes/coaching-and-mentoring

Clinical nurse specialists and advanced practice roles

There are growing demands on health care services because of changing population health needs which, coupled with service redesign, has provided opportunities for the nursing profession to develop and expand roles, scope and practice. The International Council of Nurses (ICN, 2020) stated that the advanced level role “*is fundamentally a nursing role, built on nursing principles*”, and identifies a clinical nurse specialist (CNS) and nurse practitioner (NP) as the two most common.

There is confusion and ambiguity with the many titles and roles, and there is little correlation between job title and pay. The ICN draws a clear distinction between the roles of clinical nurse specialist (CNS) and nurse practitioner (NP) (both of which may be advanced level roles) and acknowledges the confusion suggesting that these are best understood as being on a continuum.

Table 4 – Clinical nurse specialist and advanced level practice

There is a different scope of practice and focus, although both are expected to be educated to at least Master’s level, practice autonomously and are accountable to an advanced level
The clinical nurse specialist , as expert clinician, has a focus on clinical excellence, a specialist area of practice and is more likely to engage in non-clinical and indirect care activities
Advanced level nursing practice has greater direct involvement and autonomy in patient care particularly in relation to activities such as diagnosis, prescription and treatment of conditions

In the UK, the CNS is a job role, not a level of practice, and currently falls within the enhanced, advanced or consultant level of practice definition. Specialist nurses may be clinical specialists within a specific clinical area, for example eye drop compliance in glaucoma clinics, focusing on a specific population, type of care or condition. They are an essential part of a service model and practice in an integrated manner within the multidisciplinary team, to deliver safe, effective, clinical evidence-based, efficient, high-quality patient care.

The degree of autonomy exercised in utilising extended skills, and the level of practice demonstrated across the four pillars ([Table 5](#)) relates to level of practice.

- Enhanced level of practice describes a level that can only be delivered by registered nurses who have gained additional post-registration education and experiential learning in a relevant subject area.
rcn.org.uk/Professional-Development/Levels-of-nursing/Enhanced
- Advanced level nursing is a level delivered by registered nurses with substantial experience and expertise.
rcn.org.uk/Professional-Development/Levels-of-nursing/Advanced

- Consultant level nursing describes a level which can only be delivered by registered nurses who have progressed from an advanced level within their field to reach a significantly higher level.

rcn.org.uk/Professional-Development/Levels-of-nursing/Consultant

The four pillars of nursing are:

<p>Clinical</p> <p>The clinical pillar includes the knowledge, skills, and behaviours and nursing proficiencies needed to ensure high quality care is provided that is safe, effective and person-centred.</p>	<p>Research</p> <p>The research pillar includes the knowledge, skills, and behaviours and nursing proficiencies needed to lead and deliver research, as well as source and use high-quality evidence to inform practice, education activities and improve services.</p>
<p>Education</p> <p>The education pillar includes the knowledge, skills, and behaviours and nursing proficiencies needed to enable reflective practice, ongoing self-development and effective learning in the workplace.</p>	<p>Leadership</p> <p>The leadership pillar includes the knowledge, skills, and behaviours and nursing proficiencies needed to work effectively in a team, lead in the manner appropriate to their level within the career framework and fulfil management responsibilities (if applicable).</p>

Advanced level: clinical skills and knowledge

Clinical practice is the key to creating a specialist arena of nursing practice. Some elements will be developed from entering ophthalmic care, whilst others are attained after experience and specialist education to demonstrate competence and confidence.

Overall, an advanced level nurse should:

- act as an expert nursing resource in their area of professional practice, including utilisation of clinical expertise
- role model high levels of nursing professionalism to people in the organisation and wider networks
- systematically apply an in-depth understanding of health and care policy, systems and structures, implications of changing population needs and the political, social, economic, legal, technical, and professional context of health care and proactively work to address issues that they encounter
- apply knowledge and skills to a broad range of professionally challenging unpredictable, complex situations, within and across teams. Using the central tenets of clinical quality, patient safety, governance, controls assurance and clinical effectiveness (Association for Perioperative Practice, 2017)
- critically analyse and synthesise complex problems, enabling innovative creative solutions to improve outcomes and enhance people's experiences
- constantly work, directly or indirectly, to improve the quality of services and care provided for people and/or populations

- promote service user and public involvement to enhance care for people, populations, and service delivery
- provide direct advice to individuals and interprofessional teams in a wide range of situations
- contribute to the understanding of the impact of practice on global and/or planetary health by promoting and adopting environmental-friendly and sustainable approaches
- be proficient in the use of digital technologies applicable in the workplace
- step into challenging situations, prioritising people using a values-based approach
- systematically apply an advanced awareness of professional and ethical values and the NMC Code to personal and strategic decisions, actions, responsibilities, outcomes, and dilemmas, whilst working with others to suggest appropriate solutions in unpredictably complex contexts
- advocate for people, services and nursing.

The NMC is also currently reviewing the role of advanced practice and its potential regulation, and further information can be found at: nmc.org.uk/about-us/our-role/advanced-practice-review

Table 5 outlines key elements for all nurses, and especially for those intending to advance their practice. **Section 3** goes on to identify key skills for advanced practice.

Table 5 Knowledge and skills recommended for developing practice

<ul style="list-style-type: none"> • Anatomy and physiology • Pharmacology • Surgical and anaesthetic techniques • The preoperative process • Principles of surgical care • Principles of anaesthetic care • Principles of post-anaesthetic care • Principles of perioperative care <p>Clinical skills</p> <ul style="list-style-type: none"> • Hand hygiene and aseptic technique • Assisting a patient with sight impairment • Comprehensive history taking • Anterior segment slit lamp skills • Lid hygiene • Fundoscopy and posterior segment assessment • Visual acuity testing • Near vision testing • Instillation of eye drops • Application of eye ointment • Eyelid eversion • Taking a conjunctival swab • IOP measuring • Biometry • Autorefraction • Focimetry • Corneal pachymetry • Pupillary assessment • Ishihara colour vision testing • Fields testing • Amsler grid test • Perform OCT photography • Retinal imaging • Disc and optic nerve imaging • Intravenous access, cannulation and venepuncture and IV administration (for example using the capital nurse IV passport) • Eye irrigation 	<ul style="list-style-type: none"> • Preparation of a patient for cataract surgery • Post-operative discharge following cataract surgery <p>Professional/legal and ethical practice</p> <ul style="list-style-type: none"> • Legislation • Professional ethics • Professional regulations • Policies and guidelines <p>Principle of hospital hygiene, asepsis, and sterilisation</p> <ul style="list-style-type: none"> • Infection prevention and control • Waste management strategies • Risk management strategy <p>Interpersonal relationships and communication</p> <ul style="list-style-type: none"> • Communication techniques • Non-technical skills • Human factors • Nurturing respectful relationships • Psychological and communication skills • Health education and promotion • Problem solving techniques • Communications and interpersonal skills • Professional behaviour and discipline <p>Organisational, management and leadership skills</p> <ul style="list-style-type: none"> • Principles of organisation • Problem solving strategies • Emotional Intelligence • Financial/budgetary implications • Quality assurance auditing • Materials management • Personal and resource management • Principles of organisation management and leadership • Inter-professional education • Professional behaviour and discipline • Stress and conflict management
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Association for Perioperative Practice (AFPP) (2017) National Core Curriculum for Perioperative Nursing pcc-national-core-curriculum-for-perioperative-nursing-final.pdf

afpp.org.uk/wp-content/uploads/pcc-national-core-curriculum-for-perioperative-nursing-final.pdf and the OPT Programme rcophth.ac.uk/training/ophthalmic-practitioner-training/opt-curriculum

Advanced level: education

There is currently no one educational pathway to support development in all areas of advanced practice in ophthalmic nursing, and consequently it can be complex to understand the differences in the roles from an academic viewpoint. Advanced practice stems from nurse's development of themselves and is always underpinned by nursing education and critical thinking.

It is generally recognised that education for advanced practice and critical thinking should be at Master's level, and investment in nurses, to enhance their practice is critically important for patients and for professional development, both individually and in support of better health care provision. The RCN's *Professional Development Framework Advanced Level Nursing* (2024a) contains further details on what should be included.

Demonstrating learning at Master's level/advance practice is also important for career development. There are processes available for those who may not have the opportunity to complete a full programme at this academic level, which includes demonstrating and recognising former learning from experience such as recognition of prior learning.

Access to placements - advanced clinical practice education requires protected and funded periods of clinical placement dependent on experience, to bridge the theory practice gap and enhance competency through practice.

Recognition of prior learning (RPL) - many students enter higher education with valuable knowledge and skills developed through a range of professional contexts. Both formal study (certificated) and informal learning (via work experience) may be accredited for either entry to a programme of study or to gain exemption from parts of the programme.

It is important to stress that credit is not given for experience alone but rather for the learning gained through that experience. To receive Recognition of Prior Learning (RPL), evidence must be provided of prior achievements, which are formally mapped and assessed against the course learning outcomes. This process enables an academic judgement to be made for the amount of credit that can be granted, or for course enrolment without the formal entry requirements. In making this assessment, universities are assured that all students receiving an award have demonstrated achievement of the course requirements through studying the course in full or using some of their previous experience or qualifications. Those wishing to claim RPL should contact their local university admissions office. Further information is at: qaa.ac.uk/docs/qaa/quality-code/making-use-of-credit.pdf

Developing practice through education

- Playing a key part in educating junior colleagues and the wider team.
- Contributing to the education pathways of peers and multiprofessional teams.
- Being involved in the education of nursing colleagues, doctors, GPs, practice nurses and the wider multiprofessional team.

Advanced level: research

The nursing profession has an obligation to strengthen the research culture and support evidence-based nursing practice, to optimise the health and wellbeing of all. The RCN's *Professional Development Framework Advanced Level Nursing* (2024a) identifies key elements of this pillar, which can be found at: rcn.org.uk/Professional-Development/publications/rcn-professional-development-framework-advanced-level-nursing-uk-pub-011-127

Whilst advanced level nurses are uniquely positioned to actively participate in and contribute to the professional body of knowledge in their field of advanced practice, some continue to feel reluctant or uncertain about how to initiate or negotiate their involvement (Fielding et al., 2022). Although limited time and resources may be a perceived barrier to motivate and support research activity, opportunities exist to enable advanced level nurses to become research active whilst meeting the competing demands of their clinical role.

Integrating research into clinical practice can include:

- keeping abreast of the developing literature within ophthalmic care, in particular peer-reviewed research publications and disseminate findings to inform and underpin the team's practice
- gaining confidence in evaluating the quality of published research, and interpreting results to work out what applies to your clinical practice
- understanding different research methodologies, their strengths and weaknesses, to be able to identify biases in research conduct and reporting
- contributing to local and national professional forums
- disseminating evidence-based practice findings through local and national networks and conferences
- identifying an issue of clinical relevance from practice experience/clinical observation that requires research to strengthen evidence for best practice
- evaluating and auditing own and others' clinical practice to highlight gaps in clinical practice and develop ideas for improving care/outcomes
- critically appraising the outcomes of audit and service evaluations
- attending annual scientific meeting/research conference in your specialism to be fully informed of innovations
- considering submitting abstracts/posters on innovations in practice
- seeking out 'inhouse' research networking opportunities, for example, offering your assistance to collect data on established research projects
- liaising with other advanced level nurses to explore concerns or commonalities across practice disciplines to inform a co-creation research proposal to answer important practice questions
- conducting a structured literature review to identify innovative research questions or new ways of looking at a phenomenon of interest

- meeting the organisation's clinical research team to discuss opportunities to collaborate on research projects, offering your specialist knowledge in return for guidance from more experienced research staff
- contacting a higher education institute for their list of open research seminars/events to enable you to network with local researchers
- discussing the possibility of a research mentor at your next appraisal.

Join the RCN's Research Society for information on using and developing research to enhance practice: rcn.org.uk/Professional-Development/research-and-innovation

Advanced level: leadership and management

Nurses, regardless of their role or practice setting, embody qualities of both a leader and manager. Whilst managers and leaders may share similar traits, they have distinct roles that emphasise and utilise leadership in different capacities.

Nurse managers are responsible for ensuring that specific health care settings function smoothly, providing a vital link between an organisation's vision and patient care. Acting as a valuable resource for advice and information, overseeing service delivery, supervising staff schedules, reviewing employee performance and professional development, budgeting, and improving health care operational quality.

Nurse leaders are responsible for advancing the organisation's vision and strategic long-term plans. They act as role models to inspire and influence others, ensure regulatory compliance, oversee quality measures, develop and implement new standards, and lead organisational change.

The most influential factor in shaping and driving organisational culture is leadership. Providing compassionate, authentic, and collaborative leadership greatly impacts team cohesion, people's sense of belonging, and may increase job satisfaction and retention, which in turn, influences care delivery. Organisations need the important contribution of nurses committed to working at advanced level practice, to provide leadership in clinical expertise, quality improvement efforts to optimise patient outcomes, and professional advancement of nursing staff. This must be negotiated within legal, ethical, professional, organisational policies, governance arrangements, and the financial challenges now facing the healthcare system.

The RCN outlines the key elements of advanced level leadership at: rcn.org.uk/Professional-Development/publications/rcn-professional-development-framework-advanced-level-nursing-uk-pub-011-127

The NHS Leadership Academy developed the *Healthcare Leadership Model* (leadershipacademy.nhs.uk/healthcare-leadership-model), aims to enable nurses to become better leaders in their day-to-day roles. The model comprises nine leadership dimensions, with each dimension shown on a four-part scale, ranging from 'essential' through to 'proficient', 'strong' and 'exemplary'. This can help advanced level nurses to understand their leadership development needs.

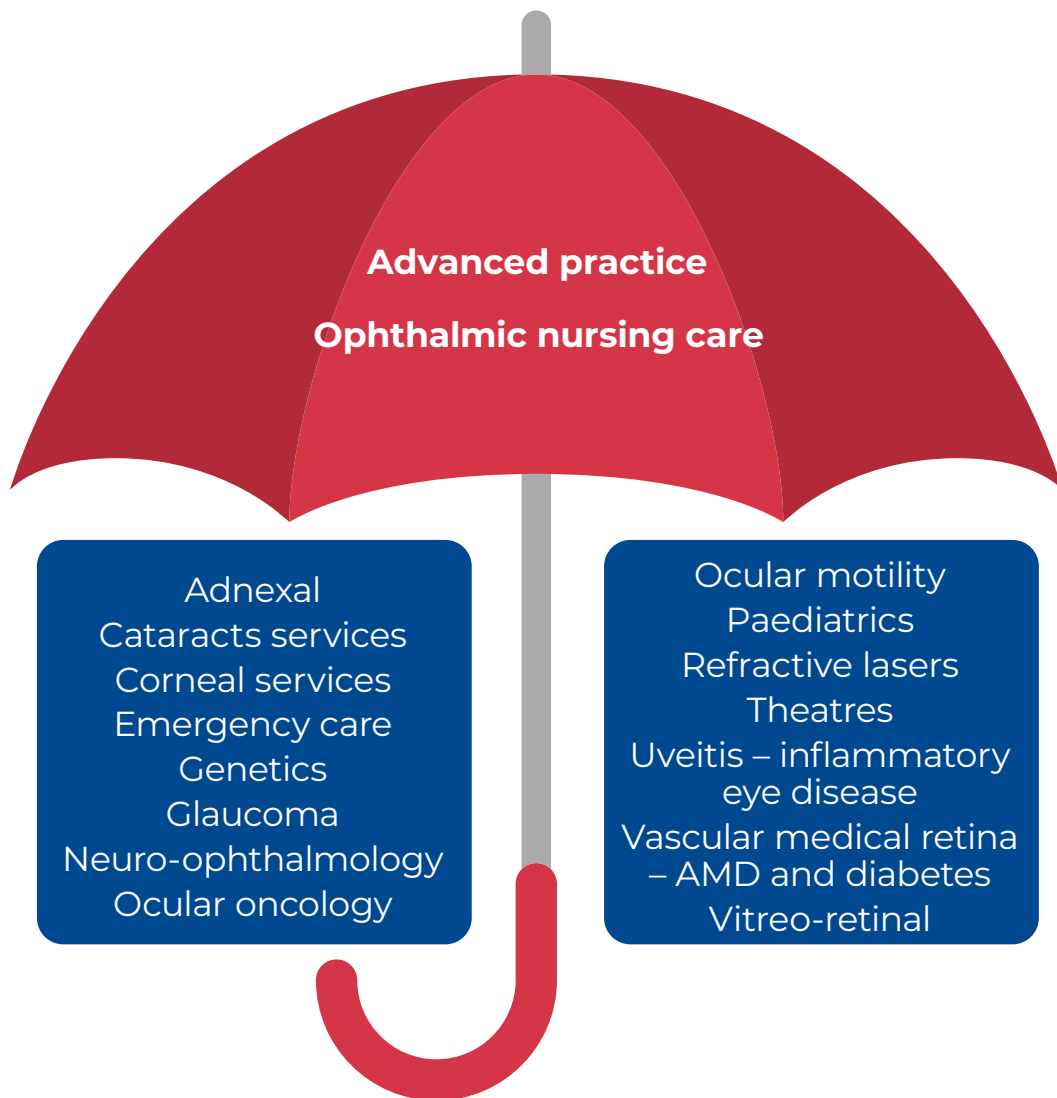
1. Inspiring shared purpose.
2. Leading with care.
3. Evaluating information.
4. Connecting our service.
5. Sharing the vision.
6. Engaging the team.
7. Holding to account.
8. Developing capability.
9. Influencing for results.

The dimensions describe what it is and why is it important, with a series of questions to guide peoples' thoughts and result in effective leadership behaviour.

Progressing leadership skills may include:

- advocating for those accessing ophthalmic care locally, and on a wider scale within service
- working autonomously as a clinical leader and within the service and multidisciplinary teams
- contributing to policies, procedures, development, and care pathways within service, particularly with reference to complex cases
- being aware of and contributing to ensuring service is cost effective and efficient
- ensuring service change is patient led eg, patient feedback, perform audits.
- being responsible for your own learning and acting as a positive role model for others, and be open to colleague feedback
- performing clinical supervision for junior colleagues and ensure own clinical supervision needs are met
- performing advanced practice peer audit as needed
- knowledge of local pathways for referral ie, ophthalmic referral pathways, including digital systems and processes such as Single Point of Access (SPoA), for further detail visit: moorfields.nhs.uk/for-health-professionals/referring/single-point-of-access and oxfordshireloc.org.uk/wp-content/uploads/2024/07/BOB-Cataract-SPoA-Referral-instructions-for-Optometrists-V3.0-86.pdf
- having knowledge of local/national resources
- having knowledge of age of consent/domestic abuse/modern slavery/mandatory reporting and local safeguarding pathways.

3. Clinical practice for advanced level ophthalmic nursing



* There are a wide range of skills bespoke to ophthalmology, the following have been considered as advanced practice skills, however some skills may be specialist/enhanced or advanced level, dependent on the area of practice, but would not be considered essential to be an advanced nurse practitioner as defined above.

Advanced level practice in ophthalmology

An advanced level nurse within ophthalmic nursing must be able to autonomously manage the patient journey from referral to the end of each, individual's journey and ensure follow up care is provided to enable focus on advanced and/or complex areas of care. The range of clinical skills are variable and those listed here are just some examples.

- Conduct comprehensive assessment: perform and interpret diagnostic tests, analyse diagnostic results and formulate individualised care, perform advanced diagnostic techniques, communicate diagnostic findings clearly with patients and their families and apply ethical guidelines and principles in collecting, interpreting and sharing ophthalmic related information.
- Work autonomously, using a person-centred approach within the expanded scope of practice.
- Undertake comprehensive health assessments, be aware of differential diagnosis and be able to diagnose ophthalmic conditions.
- Prescribe care and treatment or appropriately refer and/or discharge patients/clients.
- Provide complex care, and management of care using expert decision-making skills.
- Act as an educator, leader, innovator and contributor to research.
- Undertake full patient assessments, to include of anterior and posterior segments of the eye including fundoscopy if applicable.

Non-medical prescribing (NMP) any prescribing completed by a nurse or other health care professional other than a doctor or dentist. [hee.nhs.uk/our-work/medicines-optimisation/training-non-medical-prescribers](https://www.hee.nhs.uk/our-work/medicines-optimisation/training-non-medical-prescribers)

Clinical skills	Education available
<ul style="list-style-type: none"> • In order to prescribe medicinal products, nurses must have recorded their prescriber qualification on the NMC register. There are two types of nurse prescribers. Community nurse prescribers; and independent and supplementary nurse prescribers. nmc.org.uk/standards/standards-for-post-registration/standards-for-prescribers 	<ul style="list-style-type: none"> • A Competency Framework for all Prescribers: rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/Prescribing%20competency%20framework/prescribing-competency-framework.pdf • MSc in Advanced Clinical Nursing Practice • Imaging and interpretation courses • Non-medical prescribing course (V300)

Adnexal is described as the eye accessories or what surrounds the eyeball. Ocular adnexa include the orbit, extraocular muscles, eyelids, lacrimal system, and optic nerves

Clinical skills	Education available
<ul style="list-style-type: none"> • Acute management and treatment of infected or inflamed eyelids eg, blepharitis • Management of minor eye lid lumps including the incision and curettage of chalazion • Syringing of the tear duct and punctal plug insertion • Fundoscopy • Injection of botulinum toxin for ptosis and blepharospasm • Intravenous steroid therapy for thyroid eye disease • Education and support for patients who have BCC • Artificial eye care including socket management • Management of patients with dry eyes • DCR tube removal • Removal of sutures • Pre- and post-operative advice • Health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree – available at a number of universities across the UK – contact your local education provider for further information • Bespoke, local training programmes associated with centres of excellence in adnexal treatments and procedures • Fundoscopy training course • Slit lamp training course • Lacrimal course • Botox injection course • Phlebotomy and cannulation

Cataracts: a progressive clouding of the lens, mostly related to age but can be associated with other eye conditions such as glaucoma; systemic conditions such as diabetes or following eye surgery or injury.

Clinical skills	Education available
<ul style="list-style-type: none"> • Comprehensive triage and assessment of presenting complaint • Comprehensive clinical assessment and examination, including fundal examination, visual acuity testing, slit lamp examination and tonometry • Differential diagnosis and investigations • Pre-assessment, including biometry and A-scan • OCT • Autorefraction • Focimetry • YAG laser capsulotomy • Providing patient information and obtaining consent • Risk stratification and surgical planning • Pre- and post-operative advice and support • Health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree – available at a number of universities across the UK – contact your local education provider for further information • Ophthalmic practitioner training rcophth.ac.uk/training/ophthalmic-practitioner-training • Fundoscopy course • Biometry course • OCT capture and interpretation • YAG laser capsulotomy • Bespoke, local training programmes associated with centres of excellence in cataract service

Corneal service: The corneal service also known as the external disease clinic involves caring for different eye conditions affecting the front of the eye ranging from the clear window or tissue on the front of the eye known as the cornea, conjunctiva, (clear skin covering of the eye) and the sclera (white coat of the eye). Some of these conditions can be painful and cause damage to the layers leading to a deterioration in vision.

Clinical skills	Education available
<ul style="list-style-type: none"> • Visual acuity testing • Slit lamp skills • Tonometry • OCT and Imaging • Fundoscopy • Pentacam topography • Confocal microscopy • Focimetry • Pachymetry • Auto refraction • Contact lens management • Cross linking • Pre- and post-operative care and evaluations • Providing patient information and obtaining consent • Pre- and post-operative advice and support • Health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree – available at a number of universities across the UK – contact your local education provider for further information • Bespoke, local training programmes associated with centres of excellence in corneal treatments and crosslinking • Slit lamp course • OCT Interpretation • Fundoscopy courses

Emergency care: Emergency Eye Care is required for a patient who presents with recent onset of sight or related life-threatening condition. This specialized care aims to alleviate symptoms, preserve sight, and safeguard life through a combination of treatments, therapies, medications, and surgical interventions. The Emergency Eye Care Commissioning guidance recommends that this service is always accessible regardless of the geographical location of the patient. Currently, this service is hospital based in secondary or tertiary care. RCOphth (2020).

Clinical skills	Education available
<ul style="list-style-type: none"> • Triage and assessments • Visual acuity testing • Slit lamp • Tonometry • Visual field testing • Fundoscopy • OCT/imaging interpretation • Ophthalmic cranial nerve assessment • Emergency eye irrigation for chemical injury • Patient support and health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Ophthalmic practice training (OPT) or bespoke, local training programmes associated with centres of excellence in refractive treatments • Fundoscopy course • Slit lamp course • OCT Interpretation course

Genetics: includes congenital (present at birth) eye malformations (microphthalmia (small abnormal eyes), anophthalmia (no eyes) and ocular coloboma (cleft in the eyeball), congenital cataracts, congenital glaucoma, inherited retinal degenerations, optic atrophy and certain types of strabismus with a family history. Common diseases such as refractive error eg, myopia (short-sightedness), glaucoma and age-related macular degeneration also have a genetic component together with environmental influences.

Clinical skills	Education available
<ul style="list-style-type: none"> • There are more than 350 hereditary eye diseases, so the clinical skills are associated with a basic understanding of the genetic mapping of hereditary eye conditions, their assessment, diagnosis, potential monitoring and treatment in addition to generic skills such as visual acuity testing, slit lamp, and tonometry 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Phlebotomy and cannulation course • Bespoke, local training programmes associated with centres of excellence in genetic eye conditions

Glaucoma: a common eye condition, usually chronic, but can be acute, where the optic nerve becomes damaged through an acute or prolonged and sustained increase in intra-ocular pressure. It can lead to a loss of vision if it's not diagnosed and treated early and generally affects people of all ages but is most common in adults in their 70s and 80s.

Clinical skills	Education available
<ul style="list-style-type: none"> • Comprehensive triage and assessment of presenting complaint • Performing and interpreting visual fields • OCT Capture and interpretation • Gonioscopy • Pachymetry • Comprehensive clinical assessment and examination • Differential diagnosis and investigations • Pharmacotherapeutics and surgical management of glaucoma including laser • Consenting for treatment including risks and benefits • Surgical planning 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Ophthalmic practitioner training

Refractive lasers: is an optional eye surgery used to improve the refractive state of the eye and decrease or eliminate dependency on glasses or contact lenses. This includes various methods of surgical remodelling of the cornea, lens implantation or lens replacement. The most common methods use excimer lasers to reshape the curvature of the cornea. Refractive eye surgeries are used to treat common vision disorders such as myopia, hyperopia, presbyopia or astigmatism.

Clinical skills	Education available
<ul style="list-style-type: none"> • Comprehensive triage and assessment of presenting complaint and aims of treatment • Comprehensive clinical assessment including: pentacam corneal topography, focimetry, autorefraction, pachymetry and wavefront analysis • Risk stratification and surgical planning • Types of treatment • Biometry including A-scan biometry • Providing patient information and obtaining consent • Pre- and post-operative advice and support • Providing patient information and obtaining consent • Health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Ophthalmic practitioner training • Bespoke, local training programmes associated with centres of excellence in refractive treatments

Theatres with pre-operative care and recovery: ophthalmic surgery in the UK is usually carried out as day cases. On some occasions however, particularly when the nature of the need for surgery is due to trauma, an increasing number of units have started to introduce pathways for the management of common surgical emergency procedures. Urgent and traumatic ophthalmic procedures may get delayed by major operations taking priority. The result is increased bed occupancy, unnecessary prolonged fasting and poor patient experience (Centre for Perioperative Care, 2024).

There are a variety of pathway options which can enable emergency patients to be managed on a day case basis:

- assess, discharge and admit to future trauma List
- assess, discharge and admit to elective day surgery list
- assess, discharge and admit to dedicated emergency day surgery list
- assess, operate on same day and discharge via day surgery pathway post-operatively (Centre for Perioperative Care, 2024).

Clinical skills	Education available
<ul style="list-style-type: none"> • Whether a patient follows an elective or an urgent/emergency pathway, the following skills are fundamental to day case staff to develop. Day case nursing team consists of preoperative (preassessment and ward), intraoperative (theatre), and postoperative (recovery) staff. 	<ul style="list-style-type: none"> • Competencies for the Day Surgery Team, pages 6-16 of for the specific competencies: afppbads-competencies-with-appendices-final-draft-june-2024-with-title.pdf

Uveitis/Inflammatory eye disease: Uveitis clinic involves care of diseases and inflammations affecting the uveal tract of the eye. (The vascular/pigmented layers from the iris, ciliary body and choroid). These inflammations are often caused by viruses such as Herpes Simplex, (HSV), Varicella-Zoster Virus which causes chicken pox and Shingles (HSV), and the Cytomegalovirus (CMV), some preventable diseases like Rubella, eye trauma, Toxoplasmosis, and some autoimmune conditions such as multiple sclerosis and ankylosing spondylitis.

Clinical skills and assessments	Education available
<ul style="list-style-type: none"> • Visual acuity testing including LOGMAR • Slit lamp • Tonometry • Visual field testing • OCT capture and interpretation • Fundoscopy • Providing patient information and obtaining consent • Patient support and health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Ophthalmic practice training • Bespoke, local training programmes associated with centres of excellence uveitis treatment and procedures • Fundoscopy course • Slit lamp course • OCT/B-scan interpretation • Intravitreal injections • Diabetic screening and grading

Medical Retina – Age-related macular degeneration (AMD) and diabetes

Definition: Retinal disorders are conditions that affect any part of the retina. Some can mildly affect a person's vision, while others may lead to blindness. Types of disease include Age-related macular degeneration (AMD), Diabetic retinopathy, retinal vascular disorders, retinal vein occlusion (CRVO/BRVO/HRVO), and central serous retinopathy, and central retinal occlusion or retinoblastoma

Diabetic retinopathy is a complication of diabetes, caused by high blood sugar levels damaging the back of the eye (retina). It can cause blindness if left undiagnosed and untreated.

Clinical skills	Education available
<ul style="list-style-type: none"> • Visual acuity testing including LOGMAR • Slit lamp • Tonometry • OCT capture and interpretation • Fundus fluorescein angiogram (FFA) • Providing patient information and obtaining consent • Triage and risk stratification • Pre- and post-operative assessment and advice • Patient support and health promotion advice • Intravitreal injection • Fundoscopy 	<ul style="list-style-type: none"> • Slit lamp course • OCT interpretation course • IVT course • Diabetes screening and grading • Fundoscopy course

Vitreoretinal is the term used in relation to the vitreous body and the retina. The vitreous body is a gel-like filling the back of the eye and the retina is lining at the back of the eye. The macula is at the centre of the retina. Vitreoretinal diseases are conditions that affect the retina at the back of the eye and the vitreous fluid around it. Primary risk factors for vitreoretinal diseases include ageing or diabetes. Examples of these vitreoretinal diseases are:

- macular degeneration
- retinal tear, retinal detachment, macular hole epiretinal membrane or macular pucker
- diabetic retinopathy and maculopathy.

Vitreoretinal diseases are conditions that affect the retina at the back of the eye and the vitreous fluid around it.

Clinical skills	Education available
<ul style="list-style-type: none"> • Full assessment of presenting complaint • Clinical examination including fundoscopy, OCT interpretation and B-scan • Differential diagnosis • Fundus fluorescein angiogram (FFA) • Providing patient information and obtaining consent • Triage and risk stratification • Pre- and post-operative assessment and advice • Patient support and health promotion advice • Preoperative intravitreal injections as needed 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Bespoke, local training programmes associated with centres of excellence in vitreo-retinal treatments and procedures

Paediatrics: Eye care for children and young adults requires specialist education and knowledge of the needs of children and young adults, as well as speciality ophthalmic knowledge and experience of relevant conditions.

Clinical skills	Education available
<ul style="list-style-type: none"> • Holistic assessment of the child and young adult, and the presenting condition • Understanding the patients' needs in relation to diagnosis and clinical examination. For example, slit lamp, eye irrigation, remove foreign bodies) • Being mindful of age-appropriate distraction therapy • Carrying out a 'well child' examination • Understanding of perioperative care for children and young adults • Understanding limits of expertise, and how to engage the multi professional team, and relevant charities/agencies as required. • Communication skills relevant to children and young adults • Consent • Knowledge and understanding of local and national guidelines around safeguarding for children and young adults. This should include an understanding potential vulnerability and developing own professional vigilance and curiosity • Working closely with parent/s/guardians • Understanding and competence in pharmacology related to children and young adults • Providing patient information and obtaining consent where applicable • Pre- and post-operative advice and support if applicable • Patient support and health promotion advice 	<ul style="list-style-type: none"> • Postgraduate Certificate in Ophthalmic Nursing, specialist modules or relevant Master's degree • Independent and Supplementary Prescribing (NMC and HCPC Approved) (Nurse prescriber course), including specialist learning around children and young adults: sheffield.ac.uk/ahpnm/apprenticeships/mmedsci-ophthalmology-advanced-clinical-practice-paediatrics-apprenticeship • Advanced resuscitation for children and young adults • Safeguarding for children and young adults • Guide Dogs Pathway for CYP – due to be published 2025

Further skills to be considered include neurology, oncology and ocular motility/strabismus.

Conclusion

Postgraduate education, knowledge, leadership and management skills, as well as active participation in clinical roles and knowledge translation are crucial ingredients for promotion of nursing graduates to advanced practice roles (Chau et al., 2022). However, in contrast to other specialities, developing practice as an advanced level nurse in ophthalmology care can be complex, with no direct pathway. Therefore, thinking strategically about career direction and looking at the role requirements is an important first step, as is ensuring that education is at Master's level.

The key points around working at an advanced level include:

- advanced knowledge and clinical skills
- accountable practitioners working at the boundaries of the profession
- innovative practice, using a clear evidence base
- skilled at assessing and managing risks
- freedom and authority to act and takes responsibility for decisions and actions made
- experienced in ophthalmic nursing care with master level thinking and relevant courses for development
- providing holistic assessment
- looking at the whole person through different healthcare models from health promotion, caring, counselling, assessment, diagnosis, referral, treatments, and discharge
- enhancing the solutions to workforce challenges.

Ophthalmic nursing offers opportunities for advanced practice roles, and those nurses wishing to enhance their practice and advance their careers in this specialist area of practice will need the initial requirements outlined above and then may choose a sub-specialty for the different roles.

References and further reading

Association for Perioperative Practice (AFPP) (2017) National Core Curriculum for Perioperative Nursing. Available at: [pcc-national-core-curriculum-for-perioperative-nursing-final.pdf](#) (accessed 22 September 2025)

Chau JP, Lo SH, Lam SK, Saran R and Thompson DR (2022) Critical elements in nursing graduates' transition to advanced practice roles and their perceived impact on patient care: an exploratory, descriptive study of graduates' and their managers' perceptions. *BMC nursing*, 21(1), p.122. Available at: <https://pubmed.ncbi.nlm.nih.gov/35590330> (accessed 22 September 2025)

Devereux E (2023) Support for regulation of advanced practice nurses. *Nursing Times*. Available at: nursingtimes.net/news/professional-regulation/support-for-regulation-of-advanced-practice-nurses-12-05-2023 (accessed 22 September 2025)

Dover N, et al., (2019) A rapid review of educational preparedness of advanced clinical practitioners. *Journal of Advanced Nursing*, 75(12), pp.3210-3218. Available at: <https://pubmed.ncbi.nlm.nih.gov/31225654> (accessed 22 September 2025)

Fielding at al., (2022) Research as part of the advanced clinical practitioner role. *British Journal of Nursing*, 31(7):372-374. doi: 10.12968/bjon.2022.31.7.372. Available at: <https://pubmed.ncbi.nlm.nih.gov/35404650> (accessed 22 September 2025)

GIRFT Academy (2024) Centre for Perioperative Care (2024). Day Case First: National Day Surgery Delivery Pack Version 2.0. Available at: <https://cpoc.org.uk/sites/cpoc/files/documents/2024-09/National%20Day%20Surgery%20Delivery%20Pack%20V2.0%20September%202024.pdf> (accessed 22 September 2025)

Health Education and Improvement Wales (2023) *Professional Framework for Enhanced, Advanced and Consultant Clinical Practice*. Available at: <https://heiw.nhs.wales/workforce/workforce-development/professional-framework-for-enhanced-advanced-and-consultant-clinical-practice/> (accessed 22 September 2025)

Health Education England (2017) Multi-professional framework for advanced clinical practice in England. Available at: www.hee.nhs.uk/sites/default/files/documents/multi-professionalframeworkforadvancedclinicalpracticeinengland.pdf (accessed 22 September 2025)

International Council of Nurses (2020) Guidelines on Advanced Practice Nursing 2020. Available at: icn.ch/system/files/documents/2020-04/ICN_APN%20Report_EN_WEB.pdf (accessed 22 September 2025)

Kerr L and Macaskill A (2020) The journey from nurse to advanced nurse practitioner: applying concepts of role transitioning. *British Journal of Nursing*, 29(10), pp.561-565. Available at: <https://pubmed.ncbi.nlm.nih.gov/32463753> (accessed 22 September 2025)

Nuffield Trust (2023) *Independent report on the regulation of advanced practice in nursing and midwifery*. Available at: www.nuffieldtrust.org.uk/sites/default/files/2023-05/Advanced%20practice%20report%20FINAL%5B69%5D.pdf (accessed 22 September 2025)

Nursing and Midwifery Council (2021) What is Revalidation? (web). Available at: www.nmc.org.uk/revalidation/overview/what-is-revalidation (accessed 22 September 2025)

Royal College of Nursing (2024a) *RCN Professional Development Framework – Advanced Level Nursing*. Available at: www.rcn.org.uk/Professional-Development/publications/rcn-professional-development-framework-advanced-level-nursing-uk-pub-011-127 (accessed 22 September 2025)

Royal College of Nursing (2024b) *Advanced Nursing Practice for Gynaecology and Women's Health*. Available at: www.rcn.org.uk/Professional-Development/publications/rcn-anp-gynaecology-womens-health-uk-pub-011-260 (accessed 22 September 2025)

The Royal College of Ophthalmologists (2018) *Ophthalmic Service Guidance Intravitreal injection therapy*. Available at: www.rcophth.ac.uk/wp-content/uploads/2022/02/Intravitreal-Injection-Therapy-August-2018-1.pdf (accessed 22 September 2025)

The Royal College of Ophthalmologists (2020) *Commissioning Guidance Emergency Eye Care*. Available at: www.rcophth.ac.uk/wp-content/uploads/2021/12/Emergency-Eye-Care-Commissioning-Guidance.pdf (accessed 22 September 2025)

RCN quality assurance

Publication

This is an RCN practice guidance. Practice guidance are evidence-based consensus documents, used to guide decisions about appropriate care of an individual, family or population in a specific context.

Description

Ophthalmic nursing offers opportunities for advanced level roles, and this publication aims to outline the roles, and ways in which nurses could transition to advanced level practice. These competencies outline how nurses can progress through the levels of practice to become specialists within this field of practice, enhance patient care, as well as ensuring career progression which is essential in developing the profession.

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The Nine Quality Standards

This publication has met the nine quality standards of the quality framework for RCN professional publications. For more information, or to request further details on how the nine quality standards have been met in relation to this particular professional publication, please contact **publications.feedback@rcn.org.uk**

Evaluation

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