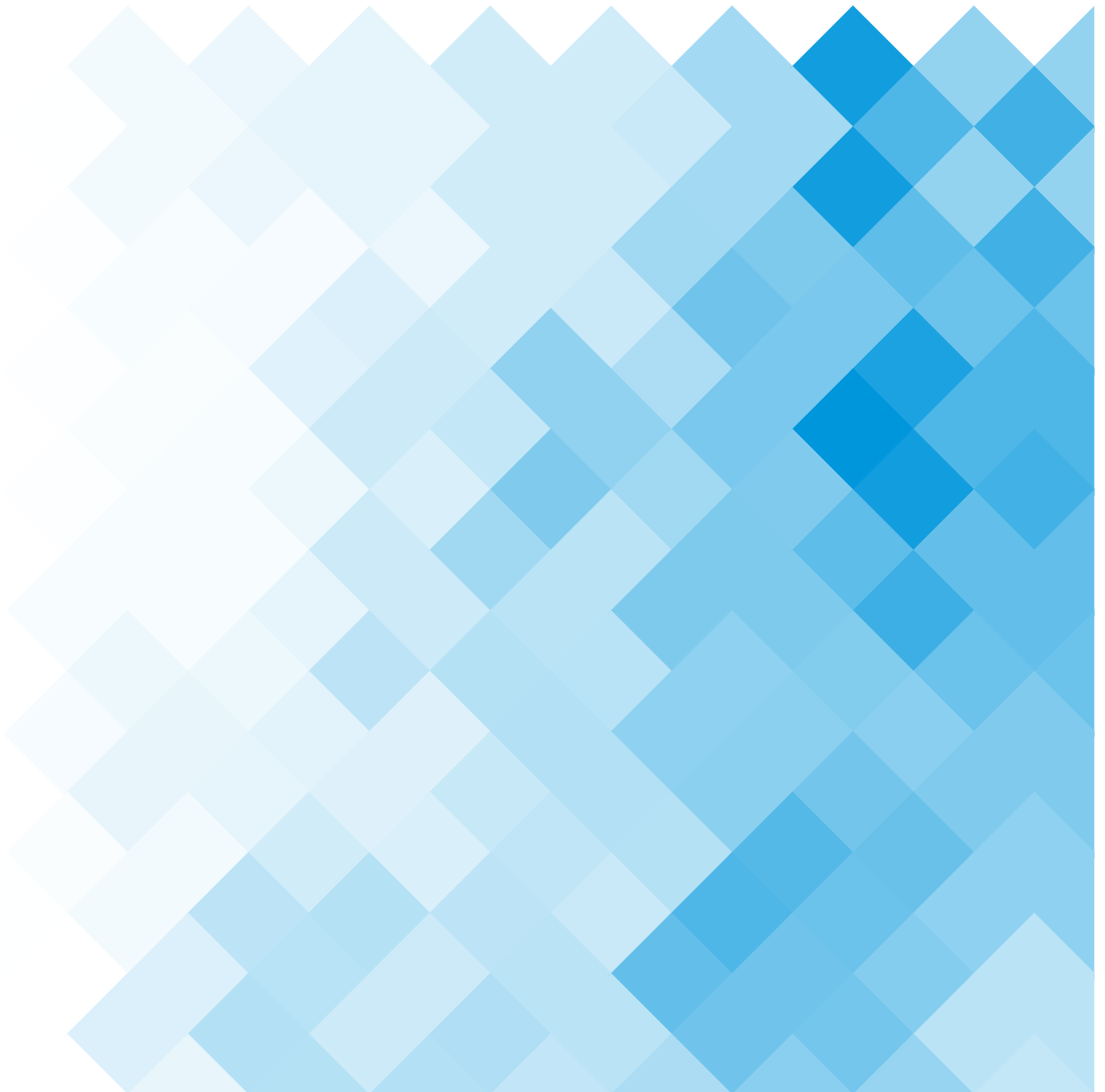


The Advanced Nurse Practitioner in General Practice



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What is an Advanced Nurse Practitioner?

“An Advanced Nurse Practitioner (ANP) is an experienced and highly educated Registered Nurse who manages the complete clinical care for their patient, not solely any specific condition. Advanced practice is a level of practice, rather than a type or speciality of practice.

ANPs are educated at Masters Level in advanced practice and are assessed as competent in this level of practice. As a clinical leader they have the freedom and authority to act and accept the responsibility and accountability for those actions. This level of practice is characterised by high level autonomous decision making, including assessment, diagnosis, treatment including prescribing, of patients with complex multi-dimensional problems. Decisions are made using high level expert, knowledge and skills. This includes the authority to refer, admit and discharge within appropriate clinical areas.

Working as part of the multidisciplinary team ANPs can work in or across all clinical settings, dependant on their area of expertise.”

(Chief Nursing Officers Directorate, 2017)

What can an Advanced Nurse Practitioner do?

The core clinical competencies of the ANP are to:

- Take a comprehensive history
- Perform a clinical assessment (a comprehensive physical clinical examination of all systems and a mental health assessment)
- Formulate differential diagnoses
- Request, interpret and act on diagnostic tests and investigations
- Formulate an action plan for the treatment of the patient
- Admit, discharge or refer a patient dependent on patient need at time of review

Each ANP will have a specific set of clinical competencies evidencing their practice. For GP ANPs the Royal College of General Practitioners/Royal College of Nursing ANP competencies are the ones we are using within NHSGCC and West of Scotland Advanced Practice Academy.

Following training and with the appropriate support in place, ANPs can see a broad range of patients. Examples include:

- Patients presenting with wide range of minor ailments including upper respiratory tract infections, common skin conditions, indigestion, D&V, constipation, etc.
- They may also be able to help with triage, monitoring patients with long-term conditions and dealing with the less medically complex repeat prescribing and hospital discharges.

ANPs may only ‘work within the limits of their competence’ (NMC 2018).

“My day is broken into 15 minute appointments. Patients are ‘sign-posted’ by reception staff and may include people with acute exacerbations of asthma and COPD, or chest pain as well as many minor ailments. The conditions I see cover from head to toe and include all systems. I’ll diagnose a wide range of conditions including diabetes, hypertension, urinary tract infections, respiratory infections and a wide range of common skin conditions. Frequently I’ll refer to secondary care either for emergency admission or to clinics such as the rapid access chest pain clinic. Many patients also attend for advice about starting contraception, menopause and pre-pregnancy planning. Part of the day is allocated for checking test results and reviewing treatment plans. This may involve titrating medicines to comply with protocols or referring to specialist nurses such as diabetes, heart failure or respiratory Clinical Nurse Specialists. Auditing aspects of care provided by the practice and clinical supervision of nursing and support staff are also part of my role”

General Practice ANP

Advanced Nurse Practitioner Core Elements and Information



Education

Since 2016 new ANPs have had to undertake a master's level qualification in advanced practice. For most, this means a Postgraduate Diploma. This course should cover:

- Clinical Assessment
- Clinical reasoning, judgement and diagnostic decision making
- Anatomy and pathophysiology
- Non-medical prescribing (V300)
- Leading, delivering and evaluating care
- Practice learning/ work based learning

Within the West Region, the Universities of the West of Scotland, Glasgow Caledonian and Stirling offer suitable programmes. For more information see www.nhsggc.org.uk/advancedpractice and follow link to 'ANP Education and Programmes'

It takes between 2-3 years to train an ANP.

Competency Framework

ANPs working within General Practice are expected to provide evidence that they meet RCGP/RCN General Practice Advanced Nurse Practitioner competencies. Available from here: <http://www.rcgp.org.uk/policy/rcgp-policy-areas/nursing.aspx>



ANPs working for GP Out-of-hours services should ensure they can map evidence against the NES Out-of-hours competencies. Available from here:

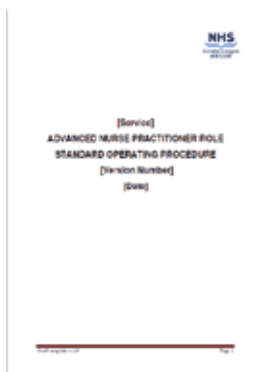
<https://www.nes.scot.nhs.uk/education-and-training/by-theme-initiative/workforce-development/out-of-hours-unscheduled-care/advanced-clinical-practice-portfolio.aspx>

As Prescribers they should also be able to demonstrate that they meet the Royal Pharmaceutical Society's Prescribing Competency Framework.

Available from here:

<https://www.rpharms.com/resources/frameworks/prescribers-competency-framework>

Scope of Practice



Scope of Practice is guidance which sets out the range of the practitioner's responsibility. It will describe the procedures, actions and processes the registrant can undertake in terms of their education and specific demonstrated competency. Please be mindful that a scope of practice is likely to change over the course of their career.

Each ANP service should have the ANPs scope of practice clearly stated in writing. A template is available for practices to use. Available from www.nhsggc.org.uk/advancedpractice and follow link to 'Information for Managers'. In this document the inclusion and exclusion criteria should be made explicit, as well as referral and supervision arrangements

ePortfolio



All ANPs should hold a NES TURAS ePortfolio where they'll collate evidence of the education and specific competencies they have met that are relevant to their role. The competencies should be mapped to workplace based assessments including mini-Clinical Examinations (miniCEX), Direct Observation of Procedural Skill (DOPS), Case-based Discussion (CbD), reflection, feedback from others and formal education.

The ePortfolio is free to nursing working in Scotland. More information on how to obtain can be found here:

<https://www.nes.scot.nhs.uk/education-and-training/by-discipline/nursing-and-midwifery/careers-and-recruitment/nursing-midwifery-career-long-eportfolio.aspx>

Prescribing



ANPs must be non-medical prescribers and hold the V300 qualification and be recorded with both the NMC (this can be checked through <https://www.nmc.org.uk/registration/search-the-register/>) and the Health Board (check with the NHSGGC Non-medical prescribing team).

This is usually undertaken in the second year of ANP training. If the trainee already holds the V300 qualification they do not need to repeat it (even if it was done at a lower academic level). The trainee's university will advise on how to transfer the credits in (there may be a small fee for doing this payable to the university).

X-ray requesting



ANPs who have been recorded as ANP (General Practice) (via the Final Sign-off Process) and have completed the required IR(ME)R training can apply to have their name added to the ANP General Practice IR(ME)R Protocol Form and gain 'Entitlement' to request Chest X-rays, DEXA scans and Pelvic ultrasounds for specific conditions. The ANP needs to wait until they've received a letter of entitlement before they can make these requests.

ANPs who hold an entitlement letter will be automatically added to OrderComms so they can request these electronically.

Referring to secondary care

ANPs who have been recorded as ANP (General Practice) (via the Final Sign-off Process) and have completed any required workshop sessions (such as dermatology or IR(ME)R) will have their name added to the approved referrers list.

The ANP needs to wait until they've received a letter of entitlement before they can make these referrals.

Quality Assurance

It is essential that practices have mechanisms in place for quality assurance and this should be reflected in the ANPs ePortfolio. It's recommended that a basket of measures is used that can demonstrate:

- Safe
- Effective; and
- Person Centred Care



The following mechanisms are suggested.

- An annual random audit of ANP documentation. A minimum of 10 cases (including 10 prescribing decisions) should be pulled and reviewed. A Documentation Audit Tool, developed by NHS Ayrshire and Arran, is available for use (available from www.nhsggc.org.uk/advancedparctice).
- Patient survey
- Complaints
- Ad hoc feedback from services that ANPs have referred patients to (inc. radiology, and specialist services)
- A formal annual review where:
 - » Competencies reviewed (to ensure currency, missing ones completed and any new ones added)
 - » Training needs identified (NES ANP Learning Needs Analysis tool can be used)
 - » Learning activities (CPD) recorded
 - » Evidence of other supporting professional activities reviewed
 - » Feedback from others (e.g. 360 feedback, new DOPs, miniCEX and CbD)
 - » Reflective accounts
 - » Simulation training evidenced (e.g. BLS, medical emergencies etc)
 - » NES ANP Learning Analysis Tool available from www.nhsggc.org.uk/advancedparctice and follow link to 'Information for Managers'. DOPS, MinCEX and CbD forms are in the NES Turas eportfolio.

Evidence for ANPs

Practices should look to collect data to evidence the impact and added value of the ANP service. The following could be considered:

- Number of patients seen
- Consultation length
- Patient satisfaction
- Prescriptions issued
- Referrals made
- Missed appointments
- It may be possible to implement measures for specific patient groups – COPD and asthma patients and hospital admissions, diabetic patients and HbA1c levels, hypertension patients and BP etc

ANP FINAL SIGN-OFF

Final Sign-off to become an ANP (General Practice)

Before an ANP can practice independently they need to be 'signed off' as competent to practice. This final Sign-off process also gives permissions to access investigations and referral into services they need to allow them to carry out their role.

How to complete final Sign-off: The line manager and practice supervisor review the trainee's ePortfolio and complete the final sign-off document. This is then sent to the Board's Consultant Nurse for Advanced Practice for adding to the Board held list of ANPs. A sample of portfolios will be internally moderated within the Board and a smaller sample externally moderated by the WoS Advanced Practice Academy. ANPs and their employer will then receive a letter from their Professional Lead confirming recognition of ANP status. This is exactly the same process that ANPs directly employed by the Board go through.

More details available at: www.nhsggc.org.uk/advancedpractice and follow link to 'final sign-off'.

Job Description



NHSGGC have a generic ANP job description which can be used by General Practices. It's available at www.nhsggc.org.uk/advancedpractice and follow link to 'Information for Managers'

Pay

The minimum pay for an ANP is at Agenda for Change Band 7 (CNOD, 2017).

Please see <https://www.rcn.org.uk/employment-and-pay> for information on the current pay scales.



Indemnity



Practices should inform their indemnity provider when they employ a trainee ANP or ANP.

Trainee ANPs and ANPs working within general practice as per NMC Regulations should ensure that they have appropriate indemnity cover in place.

Trainee ANPs

Trainee ANPs should be employed within a trainee post. A trainee post should have the following characteristics:

- Be paid at a level below a qualified ANP (usually equivalent to a Band 6)
- Have a place reserved on a suitable ANP education programme at university
- Have funding earmarked for training
- Have training time built into the post (this includes study time and supervised practice). Approximately 1200 hours of study and practice are required over the course of an ANPs training.
- Have a Practice Supervisor allocated to the trainee for the duration of their training. This needs to be suitably educated and experienced healthcare professional who can do the job the trainee is being prepared for. Often in General Practice this will mean a GP.
- Have a Designated Medical Prescriber to support the trainee during the non-medical prescribing module
- Have an ANP post available at the end of training
- Have an exit strategy in place if the trainee was unsuccessful or chose to withdraw

Clinical Supervision for Trainee ANPs

Trainee ANPs require supervision throughout their entire ANP education. They will require:

- Practice Supervision
- Educational Supervision
- Professional Supervision

A 'tripartite' approach is encouraged. This will involve:

- A Practice Supervisor who will be an experienced senior clinician who is doing or is able to do the same job the trainee ANP is preparing for. This individual could be a suitably qualified and experienced ANP or they may be another suitably qualified and experienced healthcare professional, most often a consultant, General Practitioner or registrar.
- An Educational Supervisor who will be a suitably qualified and experienced educationalist (e.g. personal academic tutor). This could be the Programme Leader for the course the trainee is undertaking, or another member of the programme team the responsibility is delegated to
- The trainee's line manager who will be responsible for ensuring that the trainee is supported and appropriately clinically supervised throughout their entire training.

If the trainee's line manager is a registrant they may provide Professional Supervision. Otherwise one of the other supervisors may perform this role providing they are a senior registered nurse. Ideally, at least one of the supervisors should be an Advanced Nurse Practitioner.

On occasion one individual may be able to undertake more than one of these roles. However, best practice would be to involve three separate people with distinct responsibilities.

Responsibilities of supervisors

- The Practice Supervisor will be responsible for ensuring that the trainee is appropriately clinically supervised throughout their training. This may involve one-to-one supervision, especially near the beginning of the training, or may involve ensuring that a team of suitably qualified and experienced people are available to provide supervision if the Practice Supervisor isn't present. The Practice Supervisor should meet with the trainee on a regular basis to discuss progress. As a minimum this would be on a 6-8 weekly basis. The Practice Supervisor will liaise with the line manager at regular intervals.
- The Educational Supervisor will be responsible for ensuring that the trainee can access the modules on the programme, will provide academic advice and support to the trainee and will liaise with the Line Manager.

- The Line Manager will be responsible for ensuring that the Supervision model is working, that the trainee is getting the personal, professional, academic and clinical support that they need. The Line Manager is also responsible for ensuring that the trainee has appropriate time for learning built into their job plan and that they can access all appropriate learning opportunities

The three supervisors should communicate with each other on a regular basis and it would be good practice for all three to meet together with the trainee at least once a year.

The three supervisors should have open lines of communication to share progress and discuss issues.

- The trainee also has responsibilities. The trainee should liaise with the line manager on a regular basis regarding progress and should raise any issues that might impact on training and development at an early stage.
- The trainee should also share relevant information with their clinical supervisor and education supervisor as appropriate.
- The trainee is an adult learner and as is expected to identify their own learning needs, assisted by the clinical and education supervisors and line manager.

Requirements of supervisors

The following are minimum requirements. Different Higher Education Institutions and/or additional awarding bodies (e.g. RCEM, FICM, RCN) may have extra requirements.

- **Practice Supervisor** – must be a senior clinician who is technically skilled to undertake the role the trainee is preparing for. They must be registered by their Registering Body (NMC, GMC, HCPC) and not have any limitations on their practice. They also must be able to prescribe. Ideally they should hold a masters level qualification.
- **Educational Supervisor** – must be part of the Programme Team at the Higher Education Institution the trainee is undertaking the qualification at. They must either be employed by the Institution or hold an Honorary Contract with that institution. Educational Supervisors must have access to the academic transcripts of the trainees they are supervising. They must hold a masters level qualification or above and ideally be an Advanced Practitioner
- **Line Manager** – must be willing to take on the responsibility to support the supervision of the trainee and to facilitate the training within the workplace

Designated Medical Prescriber (DMP)

During the Non-Medical Prescribing (NMP) module the trainee will also need to have a DMP. If the Practice Supervisor is a medical practitioner then they may wish to take on this role. If the Practice Supervisor isn't a medical practitioner then a DMP will need to be included as part of the Supervision team, as a minimum for the NMP module, but ideally from the NMP module to the end of the training (in most programmes this would equate to the second year of training if undertaking the full postgraduate diploma).

Dissertation Supervisor

If the trainee goes onto complete the Masters programme, they will require a Dissertation Supervisor. This Supervisor will be appointed by the Higher Education Institution.

NES Funding

There is some funding available through NHS Education for Scotland for trainee ANPs. This covers university fees only. To reserve funding for a trainee, the employer needs to complete the annual NES Training Needs Analysis for ANPs. This is usually done around March each year. An email will go out to all Practices regarding this at the appropriate time. Information will also be published on the Advanced Practice website. A name and NMC number will then need to be given to the Consultant Nurse for Advanced Practice before end of July so he can apply for the funding to be ear marked.

During July/August the trainee needs to apply to the Consultant Nurse for Advanced Practice for that funding. Trainees at UWS will complete a UWS Special Advanced Practice SLA form and those at other universities including GCU will complete a SL2 form. Further information and the forms can be found on the website, just follow the link to funding.

NHSGGC Support for Trainee ANPs (General Practice)

NHSGGC have put in some additional support for trainees from general practice for the work-based learning component of their training. This includes:

- A NHSGGC Moodle virtual learning environment with links to various resources www.ggcmoodle.scot.nhs.uk
- A series of 'masterclasses' to support trainees these classes are taught by GPs, ANPs, and specialists
- Action Learning Sets to support trainees
- Simulation session on medical emergencies
- Links to appropriate eLearning resources such as eGP

Practice commitment to trainees

Having a trainee ANP is a big commitment, but the rewards of having a fully trained ANP at the end outweigh the costs. NES, NHSGGC and the trainee's university are supporting the trainee in different ways so the burden is not completely on the employer. To access this support the practice does need to commit to providing a training post. These trainee posts have a service element as well as a trainee component. The big commitments for the practice are:

- Providing the trainee time for learning both within and out-with the practice.
- Providing a suitable practice supervisor to mentor the trainee (in a similar way to how GP trainees are supported)

Final Sign-off

The trainee will be supported to reach final Sign-off process through their university studies and workbased workshops

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More details available at: www.nhsggc.org.uk/advancedpractice and follow link to 'final sign-off'.

Indemnity

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Trainee ANPs and ANPs working within general practice, as per NMC Regulations, should ensure that they have appropriate indemnity cover in place.

Transitioning ANPs

Qualified ANPs (non-General Practice) who are transitioning to an ANP role in General Practice
ANPs who have been trained in another specialty will have knowledge and skills that are transferable to general practice, but they will also have significant learning needs.

When employing an ANP, it is important to examine their portfolio of evidence. Increasingly this will be an ePortfolio. Applicants for an ANP post should be able to email a link to a share pack from their ePortfolio and in it provide evidence of:

- Their masters level qualification in advanced practice with a breakdown of the modules they've successfully completed
- Evidence that they are recorded with the NMC as a Nurse Independent Prescriber
- The competency framework they've completed
- Evidence of reflection, work-place based assessments (mini-CEX, DOPS, CbD etc) and feedback from others including their practice supervisor.

A comparison of the completed competency framework and the RCGP/RCN ANP competencies will give an indication of the learning needs of any applicant.

Available from <http://www.rcgp.org.uk/policy/rcgp-policy-areas/nursing.aspx>

ANPs who do not have a general practice nurse background are likely to have significant learning needs. Primary Care Support can provide learning tables with information on learning opportunities and courses to help meet general practice nursing competencies and there is a possibility that transitioning ANPs could access part of the ANP (General Practice) programme. This should be discussed with the Consultant Nurse – Advanced Practice as places may be limited.

The transitioning ANP will be supported to reach final Sign-off process via Consultant Nurse – Advanced Practice and Primary Care Support.

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Existing ANPs (General Practice)

ANPs trained prior to 2017 and employed within General Practice (before the publication of the CNO's guidance CNOD 2017) still need to be able to demonstrate that they have been trained appropriately and are competent to practice. These practitioners also need to go through the Final Sign-off process.

This final Sign-off process also gives permissions and entitlement to access investigations and referral into services they need to allow them to carry out their role.

How to complete final Sign-off: The line manager and practice supervisor review the trainee's ePortfolio and complete the final sign-off document. This is then sent to the Board's Consultant Nurse for Advanced Practice for adding to the Board held list of ANPs. A sample of portfolios will be internally moderated within the Board and a smaller sample externally moderated by the WoS Advanced Practice Academy. ANPs and their employer will then receive a letter from their Professional Lead confirming recognition of ANP status. This is exactly the same process that ANPs directly employed by the Board go through.

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Continuing Professional Support and Development

West of Scotland Advanced Practice Academy

The Health Boards in the West of Scotland and the universities that train ANPs have formed an Advanced Practice Academy to support the development of the role and to provide CPD opportunities for ANPs in the region. The NHS Ayrshire and Arran, NHS Lanarkshire, NHS Dumfries and Galloway, NHS Greater Glasgow and Clyde, NHS Forth Valley, Golden Jubilee National Hospital, NHS 24, Scottish Ambulance Service, University of West of Scotland, University of Stirling and Glasgow Caledonian University collaborate in the Academy.

The Academy puts on three CPD events for Nursing and AHP Advanced Practitioners every year. These are paid for by the member boards who provide free places for recorded ANPs.

The Academy also provides guidance to the Boards on governance arrangements for ANPs within the region.

There is also a north and an east Advanced Practice Academy. Each Academy is chaired by a Board Executive Nurse Director.

ACAP Scotland



ACAP Scotland is a registered Scottish charity that's dedicated to supporting the networking of Advanced Nurse Practitioners in Scotland. ACAP hold an annual conference for Scottish ANPs every November in either Edinburgh or Glasgow at a very reasonable cost.

ACAP also produce a free journal and website for ANPs. See www.acapscotland.org

Clinical Supervision for qualified ANPs



Every ANP should have continuing supervision post-qualification. Training for supervisors will be provided by the Board and supervision resource packs are available from NHS Education for Scotland.

<https://learn.nes.nhs.scot/3580/clinical-supervision>

Experienced ANPs or GPs who'd be interested in taking on the role of a supervisor for qualified ANPs should contact the Consultant Nurse for Advanced Practice.

Supervision could be provided within a practice, across a cluster or within an HSCP locality.

More Information

NHS Greater Glasgow and Clyde Advanced Practice website

www.nhsggc.org.uk/advancedpractice

Information and documents to support the ANP role in NHS GGC. Including information on courses and funding.

NHS Scotland Advanced Practice Toolkit

An online resource of information and tools that help support Advanced Practice was developed by the Scottish Government now maintained by NHS Education for Scotland. It is available at:

www.advancedpractice.scot.nhs.uk

NHSGGC Advanced Practice

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NHSGGC Primary Care Support

Kathy Kenmuir, Lead for Nursing in General Practice kathy.kenmuir@ggc.scot.nhs.uk

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References

Chief Nursing Officer's Directorate (2017) Transforming Nursing, Midwifery and Health Professions' (NMaHP) Roles: Paper 2 Advanced nursing practice. Edinburgh: Scottish Government.

Available from: <https://www.gov.scot/publications/transforming-nursing-midwifery-health-professions-roles-advance-nursing-practice/>

Nursing and Midwifery Council (2018) The Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and associates. London: NMC. Available from: <https://www.nmc.org.uk/standards/code>

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