“Embrace the opportunities that advanced practice offers”

Recently I sat with a group of worried doctors who after two years of aggressive recruitment for junior medical staff had not had a single applicant. They were facing the unthinkable of having to close down their clinical service. However, there was another solution, although it didn’t sit well with some of them – use advanced nurse practitioners. After all, what was their alternative – redesign or don’t deliver?

Don’t get me wrong, advanced nurse practitioners are not going to cure the NHS of all its problems. But in a world of increasingly limited options, they are certainly a significant part of the solution.

The truth is that the world of healthcare has changed – there is no going back to a mythical time when the boundaries between health professions and staff were inflexible and unmoveable. The urgent need for service redesign is in response to some of the most serious resource problems in healthcare organisations that I have ever known. The NHS is experiencing widespread organisational instability and change, coupled with the prospect of long-term financial constraint. We are now facing stark realities: we must rethink how we deliver services – or we simply won’t deliver them. The problem is right here and right now. That being the case we must embrace the opportunities that advanced practice offers.

However, with that also comes professional responsibility. We have to articulate advanced practice, we must guide it, nurture it and grow it. It falls on the regulators, managers, educators, researchers and frontline practitioners to take a multi-professional collaborative responsibility for this development.

And yes – the scope of practice guides nurses in all areas of practice, but advanced nurses are breaking new ground and challenging traditions all the time. It is unthinkable that we as a profession can allow advanced practice to develop without providing leadership, without requiring evidence, without putting checks and balances in place that protect the people we serve – the public. It is equally unthinkable that we should expect or allow others to do this for us. This means that it falls on nursing to agree on a framework, a career matrix, which enables us all to use advanced practitioners and implement new ways of working in delivering healthcare.

I believe the scope of practice alone is not sufficient to “manage” a nursing career framework that encompasses advanced nursing. I suggest that well-structured and transferable mechanisms of employer-led governance and mandatory appropriate education should now prevail. And this should form part of a national strategy that is sanctioned and guided at a regulator and government level.

So it’s time for us all to wake up and start working with all our colleagues, including those in other professions, to start changing the grinding and dated legacy of professional and organisational traditions, and time to embrace new ways of delivering healthcare. NT

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Better bone health in rural communities p25

SPOTLIGHT

Peace of mind brought home via telehealth

Patients can do much to minimise the effects of long-term conditions if they can manage them. This involves learning about disorders, triggers for and early signs of exacerbation, and what to do if their condition deteriorates.

While some patients remain stable largely independently with routine check-ups, others need more intensive support. If provided in the home, such support can be expensive, while attending GP practices or outpatient departments can be difficult for patients.

As our review on page 16 illustrates, telehealth can transform care for many of these patients. Remote monitoring can detect problems at an early stage. This gives patients peace of mind and is cost-effective.

True, there are challenges in introducing and using telehealth, but the benefits make it worth the effort.

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