



Advanced practice in Prosthetics and Orthotics



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Foreword

Advanced practice roles have rapidly grown in the NHS in recent years, as NHS services seek to develop their workforces to work in new ways which meet population health needs and ever increasing demand from patients. Health service bodies and governments in the four countries have put in place professional frameworks, policies, and funding to support these developments.

However, observing the place of the prosthetics and orthotics profession within this context, one could be forgiven for assuming the profession has been left behind. Advanced practice is in its relative infancy in prosthetics and orthotics and there are very few practitioners who will be working at this level of practice. We have yet to harness the potentially transformative value of advanced practice for the prosthetic and orthotic workforce, NHS services, and the patients we care for.

I am pleased to present this document which explores advanced practice in prosthetics and orthotics. We hope it will support increasing awareness and understanding of advanced practice in the profession, and support prosthetists and orthotists, service providers and others to actively consider how advanced practice roles might help build fulfilling carers, support the transformation of services and improve outcomes for patients. We are at the beginning of an exciting journey.



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1. Introduction

Advanced practice is a multi-professional level of professional practice in health and care.

Registered health and care professionals working at this level of practice will typically have direct responsibility and accountability for complex decision making about patient care, including management of complete episodes of care. They will exercise high levels of professional autonomy, managing complexity, uncertainty, and varying levels of risk (HEE 2017). To practice at this level, health and care professionals will normally hold a Master's degree or equivalent.

The NHS 'Long Term Workforce Plan' sets out ambitious plans to grow the advanced practice workforce in England to enable innovative ways of working and service transformation, support workforce retention, and deliver better patient care (NHSE 2023b). Advanced practice roles are increasingly becoming embedded in teams delivering clinical services across a range of different professions. However, we know that, at the time of writing, advanced practice is in its relative infancy in prosthetics and orthotics.

This document forms part of work which aims to enhance awareness, encourage inclusivity, and facilitate the progression of advanced practice within prosthetics and orthotics. It discusses the challenges and opportunities for advanced practice and provides case studies of how members of the profession have to date sought to develop and advance their knowledge, skills, and practice.

The purpose of this document is to help increase understanding of advanced practice and to help contribute to the development and utilisation of advanced practice within prosthetics and orthotics. It will particularly be useful to prosthetists and orthotists interested in developing their careers into advanced practice roles and to NHS services (including commissioned services) considering how advanced practice roles might be most effectively developed and utilised in prosthetics and orthotics.

1.2 A note about terminology

We acknowledge that terminology in this area has evolved over time and continues to evolve. Job titles used in practice vary. Unless we are quoting a third-party source, we have used 'advanced practice' and 'advanced practitioner' throughout this document. We note, however, that these terms are sometimes used interchangeably with other terms such as 'advanced clinical practice' and 'advanced clinical practitioner'.

'Advancing practice' is used by NHS England as an inclusive term which recognises that practitioners develop their practice over time as they undertake education and training and acquire further knowledge, skills, and experience. It spans different levels of professional practice including enhanced, advanced, and consultant level practice. We explain more about enhanced and consultant level practice in section two.

1.3 Applicability to the four countries of the UK

This document has been funded and supported by Health Education England, now part of NHS England, and in places draws directly on workforce policy in the English context.

Wherever possible, we have tried to write this document to be inclusive of all four countries of the UK. Where content relates to England, we have made sure this is clear in the text

2. About advanced practice

This section explains more about advanced practice; the frameworks developed to support advanced practice in each of the UK countries; and how advanced practice fits within the broader NHS career framework for clinical professions..

2.1 Definition of advanced practice

Health Education England (HEE) provides the following definition of advanced practice

'Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence.'

Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families, and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes.'

Reference: HEE (2017).

Advanced practice is therefore a level of practice which can be deployed across a range of professions and areas of practice. It is characterised by high levels of autonomy and the ability to navigate complex situations, with a focus on improving the experience and outcomes of patients. Importantly, this level of practice is more than just possessing advanced clinical skills but also involves mastery in the other pillars of practice – leadership and management, education, and research. All four pillars are considered essential to making an effective contribution to service delivery and patient care.

The definition above refers to a 'master's level award or equivalent' that encompasses all four pillars of clinical practice. This wording is a reference to a post-registration master's award which addresses the published capabilities for advanced practice (see below). 'Or equivalent' in the definition indicates that advanced practice education and training has developed over time and as a result, some existing practitioners in the health and care workforce would have followed a variety of different education, training, and development routes into advanced practice.

As advanced practice is a level of professional practice rather than a job title, titles used in workplaces can vary. They typically include, for example, titles such as 'advanced practitioner', 'advanced clinical practitioner', and 'advanced' preceding the name of the profession and/or area of practice.

2.2 Enhanced, advanced, and consultant level practice

Advanced practice is a level of practice which is part of a career development framework which spans enhanced, advanced, and consultant level practice.

This represents a continuum of practice, recognising the steps on a career development journey. This starts from qualification as a health and care professional, as professionals progressively gain further education, training, and experience which develops their knowledge, skills, and practice. The level of complexity and uncertainty managed by a professional in their practice increases at each level of practice.

The following provides a summary of these levels of practice. It also discusses 'specialist practice' where a practitioner has a depth of knowledge and skills in a particular area.

2.2.1 Enhanced level practice

Enhanced practice is the level of practice which immediately precedes advanced practice.

The enhanced practice workforce has been described as: ‘...the graduate professional workforce delivering the majority of clinical activity, those who have moved beyond novice/competent and who are not working at the level of advanced practice. This is a highly valued, broad, and essential level of practice within the workforce for whom training and development to maximise their professional skills and capability is a vital aspect of building safe and effective services, workforce productivity and retaining [...] staff.’ (HEE 2024).

Enhanced level practice describes the ability to manage a level of complexity of work and risk which is beyond entry to practice at first registration. Health and care professionals working at this level of practice will typically have undertaken post-registration education and training relevant to their area of practice and role. They usually work as part of a multi-disciplinary team to manage discrete episodes of care within a specific context

Enhanced level practice might be one step on a professional’s career journey on the way to completing education and training in advanced practice. Or it could be a fulfilling career destination in its own right.

Health and care professionals working at this level of practice will have a variety of job titles across a range of professions. ‘Enhanced practitioner’ or ‘enhanced clinical practitioner’ are not typical job titles (HEE 2022).

2.2.2 Specialist practice

Specialist practice occurs when a practitioner has acquired a depth of knowledge and skills in a particular area of practice.

Specialist practice is not considered to be a level of practice in its own right, as specialist knowledge exists across all levels of practice complexity (HEE 2022). Put simply, it is possible for practitioners to demonstrate specialist knowledge and skills at all levels of practice, including at enhanced, advanced, and consultant levels of practice.

2.2.3 Consultant level practice

Consultant level practice is a level of practice above the level of advanced practice, characterised by the ability to make a significant contribution at a strategic level

Consultant level practitioners have high levels of clinical credibility within their chosen field coupled with the skills to lead and transform healthcare systems for the benefit of services, the workforce, and patients. (NHS England 2023a). So, for example, in addition to the management of complex patient care, consultant practitioners will often have responsibility for a complete care pathway and will be involved in leading and driving work which aims to redesign how care is delivered to optimise the use of resources and improve patient outcomes.

Consultant level practitioners will have demonstrated doctoral level capabilities and may hold a doctoral qualification

2.3 Frameworks in the four UK countries

The definition of advanced practice above is taken from Health Education England's Multi-Professional Framework for Advanced Clinical Practice in England ('the Multi-Professional Framework'; HEE 2017).

This Framework articulates the capabilities that underpin advanced practice, across all four pillars of practice. They are generic rather than profession-specific – health and care professionals working at this level of practice will demonstrate the capabilities in relation to their profession, job role, and area of practice. There are also similar documents for enhanced level and consultant level practice (HEE 2022; NHSE 2023a).

For some clinical areas, HEE has published supplementary 'core capability frameworks' which articulate what competent advanced practice in that specific area looks like.

Similar frameworks exist in the other UK countries:

- In Scotland, the 'Nursing, Midwifery, and Allied Health Professionals (NMAHP) development framework – post-reg framework' (NHS Education for Scotland 2024).
- In Wales, the 'Professional Framework for Enhanced, Advanced, and Consultant Clinical Practice' (Health Education and Improvement Wales 2023)
- In Northern Ireland, the 'Advanced AHP practice framework' (Department of Health 2019).

As each country has published its own framework(s), definitions, language, and professional capabilities vary. However, the approach of each of the countries, including the basic structure of career frameworks, definitions of advanced practice and, the pillars of clinical practice, is very similar.

Service providers and prosthetists and orthotists with an interest in advanced practice are encouraged to refer to the Framework(s) in place in the country in which they operate or work.

2.4 NHS England Centre for Advancing Practice

NHS England has established the Centre for Advancing Practice to drive its work on enhanced, advanced, and consultant level practice.¹

The Centre's roles include accrediting education programmes in advanced practice against its standards to ensure that professionals receive consistent preparation to practice at an advanced level.

There are Regional Faculties in each of the seven regions in England, with a role to understand local workforce needs and drive advanced practice at a local level. Their role includes providing funding to support NHS professionals to undertake advanced practice education and training.

The Centre and the Regional Faculties are good sources of information and advice about advanced practice. You can find more information about the role of the Centre and the Regional Faculties by visiting the Centre's website.

1. Centre for Advancing Practice <https://advanced-practice.hee.nhs.uk>

3. Developing advanced practice in prosthetics and orthotics

This section discusses the challenges, benefits, and opportunities for advanced practice in prosthetics and orthotics.

It explains what enhanced and advanced practice looks like in prosthetics and orthotics and outlines the typical education and training pathway for advanced practitioners.

3.1 What are the challenges for advanced practice in prosthetics and orthotics?

There are currently very few advanced practice roles in prosthetics and orthotics. This needs to be addressed in order to support a sustainable professional model for the workforce that is fit for the future.

Eddison *et al* (2023) note high levels of attrition of prosthetists and orthotists relative to other Allied Health Professions (AHPs) and low levels of reported job satisfaction from practitioners who completed a workforce survey. At the same time, there is a projected increase in the number of people in the UK who will require prosthetic and orthotic care. This all contributes to a shortfall in the workforce needed to meet current and projected demand.

Reported interest in advanced practice was high, with 39% of prosthetists and orthotists saying that working in advanced practice and consultant roles was a career goal. 24.1% of orthotists and 30.5% of prosthetists surveyed reported that they were working at the advanced level of practice. However, these figures are far in excess of the very small number of practitioners who would be formally recognised as advanced practitioners in line with the published NHS frameworks (Eddison *et al* 2023).

Advanced practice, as part of a broader career framework, has the potential to play a crucial part in improving job satisfaction and retention by providing a clear pathway for career progression. However, overall, there appears to be a lack of detailed awareness in the profession of what advanced practice is and how it can benefit prosthetists and orthotists, the services they deliver, and the patients they care for.

There are a number of factors which contribute to low levels of awareness and a lack of opportunity for prosthetists and orthotists. This includes that the majority of prosthetists and orthotists delivering NHS services are employed by private companies delivering services under contract (62% in the workforce survey). In our experience, this can mean that there is a strong contractual focus on commercial activity over staff development. Practitioners and employers may also not be fully acquainted with the NHS career framework and the potential value of advanced practice to services, limiting career opportunities.

Even among the 38% of prosthetists and orthotists who reported they were directly employed by the NHS, significant barriers persist.

Challenges include:

- The profession's lack of visibility and recognition given its small size.
- The small size of teams and departments can inhibit progression and create barriers to backfilling staff so they can be released for education and training.
- A lack of available job roles and clear pathways to advanced practice, leading to prosthetists and orthotists needing to create and advocate for their opportunities to develop their knowledge, skills, and practice.
- Some positions require the legal ability to prescribe medicines which is currently not available to prosthetists and orthotists (in contrast to other professions in the multi-professional team, including physiotherapists and podiatrists).
- There are relatively few support worker roles in the profession, which can limit opportunities for the registered workforce to work 'at the top of their licence'.
- A lack of funding and support from NHS organisations.
- A lack of self-confidence amongst practitioners to apply for available roles.

As a result, there is a lack of prosthetists and orthotists who can act as visible role models for advanced practice within the profession and who can encourage services and employers to be more innovative in considering how advanced practice can more effectively utilise the skills of the workforce, improve service efficiency, and improve outcomes for patients.

3.2 What are the benefits of advanced practice?

‘Advanced practice provides me with a dynamic balance between clinical and non-clinical duties, allowing me to contribute to the advancement of others through leadership and education while supporting the growth of my profession and department through research.’

Laura Barr, Advanced specialist orthotist

Whilst in its relative infancy in prosthetics and orthotics, advanced practice is becoming increasingly well established in other professions and clinical areas, for example, in nursing and in some of the other Allied Health Professions, such as physiotherapy and podiatry.

Drawing on early innovation in prosthetics and orthotics and the experience of other professions and clinical services, the benefits of advanced practice roles in prosthetics and orthotics are potentially transformative.

The following provides a high-level summary of the benefits for NHS services and employers, prosthetists, orthotists, and patients.

- **NHS services and employers.** Advanced practice roles, where developed and effectively utilised, can help NHS services transform clinical services to better meet the needs of patients.

They can:
 - Increase the capability and capacity of the multi-professional team and foster collaboration by more effectively utilising the skills of each team member to meet service needs and service demand.
 - Increase the adaptability of services and the health and care workforce to meet changing population health needs and increased demand.
 - Help reduce waiting times and improve patient care, outcomes, and satisfaction by ensuring that patients are seen at the right time and by the right person who can best meet their needs.
 - Improve job satisfaction and workforce retention by enabling clear, sustainable and fulfilling career pathways.
- **Prosthetists and orthotists.** By completing education and training in advanced practice, prosthetists and orthotists can acquire new professional capabilities and use these in roles in which they can make an increased difference to patients and services. They benefit from improved job satisfaction and career progression, allowing them to make the most of their skills and experience.
- **Patients and the public.** Advanced practice roles can benefit patients by enabling high quality, compassionate, inclusive, and timely care.

Advanced practice is not about creating a generic health and care professional. Instead, a prosthetist and orthotist's discrete professional identity, knowledge and skills are crucially important in enabling their practice as an advanced practitioner within their particular scope of practice and context.

Advanced practice It is not about a prosthetist and orthotist substituting for another profession. Instead, by diversifying the pool of multi-professional clinicians equipped with advanced level knowledge and skills, the skills of the whole team can be more effectively utilised, improving the care patients receive.

There is no doubt that advanced practice prosthetists and orthotists are and would be able to play a vital role in streamlining patient pathways, improving patient access, enhancing communication, and alleviating the burden on overstretched clinics. All for the benefit of the patients who rely on the care we provide.

3.3 What does enhanced and advanced practice look like in prosthetics and orthotics?

Professional practice, including enhanced and advanced level practice, is underpinned by the four pillars of practice.

We have tailored the pillars of practice published in England and Scotland to create pillars of practice for prosthetics and orthotics – See Figure 1 below.

Figure 1: Pillars of practice for prosthetics and orthotics



Clinical and Technical Practice

Knowledge, skills, and behaviours needed to provide effective, and person centred. Prosthetic and Orthotic care.



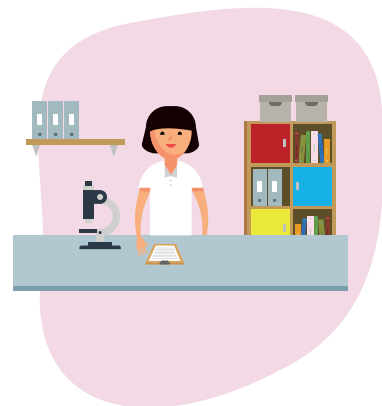
Education/Facilitating Learning

Knowledge, skills, and behaviours needed to enable effective learning in the workplace.



Leadership and Management

Knowledge, skills, and behaviours needed to lead and fulfil management responsibilities.



Evidence, Research and Development

Knowledge, skills, and behaviours needed to use evidence to inform practice and improve services.

Figure 1: Pillars of practice for prosthetics and orthotics

3.3.1 Enhanced practice in prosthetics and orthotics

In section two, we described enhanced level practice as the level of professional practice that precedes advanced practice.

This is a level of practice that recognises the expertise of prosthetists and orthotists after qualification as they continue to develop their knowledge and skills to manage increasing risk and complexity. Many roles will be at this level of practice.

Whilst enhanced and advanced are different levels of practice which help us understand differences in work being carried out, 'enhanced' and 'advanced' are not value judgements - both levels of practice have an equally important part to play in delivering services and patient care.

Table 1 below summarises the difference between the enhanced, advanced, and consultant levels of practice by indicating the qualifications that people will typically hold at each level of practice. Whilst these are levels of professional practice rather than job roles, we have given some example job titles in the profession which we hope will help to differentiate between prosthetic and orthotic practice at different levels. We have given NHS Agenda for Change salary bandings for each level. However, these job titles and bandings are indicative only and should be treated with caution, as titles, role content, and bandings may vary between different NHS services and employers.

We have also provided links to the BAPO Career Development Framework (2024), which aims to support the career development of the whole of the prosthetics and orthotics workforce.

Table 1: Enhanced, advanced, and consultant level practice in prosthetics and orthotics

Level of practice	Indicative job titles	Qualifications (from)	Career Development Framework ²	Indicative AfC band (from)
Enhanced practice	Specialist prosthetist Specialist orthotist Senior prosthetist Senior orthotist	Post-registration and/or postgraduate qualification and experience.	Level 6	6
Advanced practice	Advanced practitioner Advanced clinical practitioner Advanced prosthetist Advanced orthotist	Master's degree in advanced practice (or equivalent) addressing all four pillars of practice.	Level 7	7 (trainee); 8a (qualified)
Consultant practice	Consultant practitioner Consultant prosthetist Consultant orthotist	Doctorate or doctoral level qualifications and experience	Level 8	8c

At an enhanced level of practice, prosthetists and orthotists will have undertaken post-registration and/or postgraduate training and qualifications to develop their knowledge and skills in particular clinical areas or in carrying out particular clinical interventions.

At this level of practice, prosthetists and orthotists will make an important contribution to episodes of care. They will have further developed their skills in one or more of the pillars of practice but will not have acquired all the required capabilities for advanced practice across all four pillars of practice.

Practitioners in the profession at this level are likely to act as clinical leads and have responsibility for mentoring more junior members of staff. They are likely to have the expertise to lead complex clinical presentations and patient groups. This might include using specialist knowledge and skills related to specific conditions and groups of patients – such as diabetes or neurology, for example. They may have developed their skills more in the clinical and leadership pillars, rather than in the research and education pillars.

2. Career development framework levels as outlined in BAPO (2024).

3.3.2 Advanced practice in prosthetics and orthotics

The following seeks to describe and illustrate the characteristics of advanced practice roles in the context of prosthetics and orthotics, illustrating how they can make an important contribution to service delivery and patient care. We have structured the below against each pillar of practice for prosthetics and orthotics (See Figure 1).

Pillar: Clinical and technical practice

- **Scope of practice:** Advanced practice allows prosthetists and orthotists to extend their scope of practice beyond traditional boundaries, in areas where they can provide high quality, safe patient care. This includes taking on more complex cases, managing complete episodes of care from start to finish, and making decisions that go beyond routine prosthetic and orthotic care.
- **Management of complex cases:** A significant aspect of advanced practice for prosthetists and orthotists is the ability to manage complex cases that may require a more in-depth understanding of various conditions. This includes, for example, running specialised clinics and dealing with rare sites of limb loss/absence and intricate and complex pathologies.
- **Clinical autonomy:** Advanced practice empowers prosthetists and orthotists with a higher level of clinical autonomy. They may work under the guidance and indirect supervision of medical consultants, but they have the authority to make critical decisions in patient care, order investigations, and create comprehensive management plans.
- **Interprofessional collaboration:** Advanced practice in prosthetics and orthotics involves close collaboration with a diverse range of healthcare professionals, such as doctors, physiotherapists, nurses, and orthopaedic consultants. This interdisciplinary approach enhances patient care and promotes a more holistic understanding of healthcare.
- **Patient-centred care:** Advanced practice emphasises a patient-centred approach, ensuring that the patient's journey is seamless, well-managed, and characterised by early intervention. Advanced practitioners contribute to improving waiting times, reducing the need for multiple appointments, and enhancing the overall patient experience.

Pillar: Education/facilitating learning

- **Educational leadership:** Advanced practitioners often take on leadership roles in education. This includes organising and providing training for colleagues, developing professional development frameworks, and contributing to undergraduate programmes. This educational aspect extends the influence of advanced practitioners in shaping the future of their profession.
- **Teaching and training:** Advanced practitioners play a crucial role in teaching and training colleagues. This extends beyond their immediate department to include national-level involvement, such as contributing to professional body courses and participating in conferences.

Pillar: Leadership and management

- **Leadership roles:** Advanced practice equips prosthetists and orthotists with the knowledge, skills, and experience to take on leadership roles within their organisations and at a national level. This may involve being a team lead for a specific speciality, representing the profession in various capacities, and leading working groups or projects.
- **Advocacy for the profession:** Through their advanced practice roles, prosthetists and orthotists become advocates for the profession. They work to break down barriers, overcome challenges related to non-medical prescribing, and pioneer initiatives that highlight the valuable contributions of prosthetists and orthotists to clinical services.

Pillar: Evidence, research and development

- **Research, and Innovation:** Advanced practice roles involve active engagement and participation in research and innovation. Professionals contribute to developing, coordinating, and undertaking research within their field. This engagement with research activities enhances evidence-based practice and contributes to the advancement of prosthetic and orthotic care and the development of clinical services.

3.3.3 Advanced practice and prescribing

The specific regulated professions that are able to access mechanisms to sell, supply, administer and prescribe medicines is set out in legislation. Prosthetists and orthotists are not currently able to train to become prescribers.

The ability to prescribe is not a requirement for, or an integral part of, advanced practice education and training and is not a requirement to be able to practise at an advanced level.

However, we know that employers may sometimes decide that being able to prescribe is an important requirement for specific advanced practice roles and to maximise the usefulness of advanced practitioners to some care pathways. This can limit opportunities for prosthetists and orthotists.

Prosthetists and orthotists and their employers are encouraged to make best use of the existing mechanisms available to the profession:

Patient Specific Direction (PSD). This is when a prosthetist and orthotist supplies or administers a medicine to a patient which has been prescribed for that patient by a prescriber. The prescriber must have individually assessed the patient and completed a written, signed instruction for the supply or administration of the medicine (for example, in the patient's notes or medicines chart).

Patient Group Direction (PGD). Prosthetists and orthotists are able to supply or administer medicines under a PGD. A PGD is a written instruction for the supply or administration of medicines to a group of patients. PGDs are agreed by a doctor, a pharmacist and approved by an employer. They allow a named health professional to supply or administer specified medicines for specified groups of patients in specified circumstances. PGDs are often used to deliver immunisation programmes, for example, and are widely used in primary and secondary care.

You can find more information about the medicines and prescribing rights of prosthetists and orthotists on the HCPC website.¹

1. <https://www.hcpc-uk.org/standards/meeting-our-standards/>

3.4 Developing advanced practice roles within prosthetics and orthotics

3.4.1 Becoming an advanced practitioner

The NHS England Centre for Advancing Practice only accredits advanced practice programmes which lead to the award of a full post-registration Masters qualification and which can demonstrate they meet required standards, including mapping to the Multi-professional Framework.

In summary, the pathway to becoming an advanced practitioner typically involves the following steps.

- The employer identifies the need for a prospective advanced practitioner role.
- The employer recruits and appoints a health and care professional into a trainee advanced practitioner role. In the NHS, trainees are normally appointed at Band 7 on Agenda for Change.
- The employer supports the trainee to complete an accredited Master's programme in advanced practice. The programmes are normally three years in duration and include both academic content and supervised clinical preparation in the workplace. Many programmes are open to any professional registered with the Health and Care Professions Council (HCPC).³
- On successful completion, the health and care professional has demonstrated the capabilities required to practise at an advanced level. In the NHS, fully qualified advanced practitioners are normally appointed at Band 8a on Agenda for Change.

The support of the employer is crucial throughout the above. Where NHS prosthetic and orthotic services are contracted to private organisations, the support of the commissioning organisation to develop advanced practice roles is also likely to be required, to ensure any funding and contractual issues are addressed.

As previously noted, advanced practice education and training have, however, developed over time. Some existing advanced practitioners across all professions will not have completed a full Master's qualification in advanced practice as outlined above, and/or will have completed education and training before the Multi-professional framework was published. For example, they might have completed an academic post-graduate qualification and then completed separate training in the workplace.

The Centre for Advancing Practice's 'ePortfolio (supported) route' is a time-limited means by which existing, experienced advanced practitioners who do not hold an accredited Master's programme can demonstrate how their education and experience meet the capabilities in the Multi-professional Framework. More information about this route is available on the Centre's website.

Someone who successfully completes a Centre accredited programme or the ePortfolio (supported) route is able to be issued with a 'digital badge' (a web-enabled certification) which recognises their achievement at advanced level.

3.4.2 Developing roles based on service need

To develop advanced practice roles in prosthetics and orthotics, an important first step is to identify a service need.

The following are some key questions to help think about whether and how advanced practice roles can meet service needs. We hope that they will be helpful both for commissioning organisations and services and for prosthetists and orthotists who want to advocate for their career development.

3. You can find a list of accredited programmes in England here: <https://advanced-practice.hee.nhs.uk/our-work/programme-accreditation/accredited-programmes/>

- What is the current demand for prosthetic and orthotic services and what are the challenges in meeting those demands?
- What do patients need and want from prosthetic and orthotic care and what are the challenges in meeting those needs?
- How might advanced practice roles in prosthetics and orthotics help address those demands and needs and, as part of the multi-professional team, contribute to the delivery of high quality, timely care for patients?
- How might advanced practice roles in prosthetics and orthotics help enable redesigned services which optimise the contribution of the whole workforce and more efficiently meet service demand?

In answering those questions, it can be helpful to learn from other professions where advanced practice roles are now well established.

Once a service need has been identified, the next step is to develop a job description for an advanced practice role which clearly defines the role and its responsibilities.

During education and training in advanced practice, effective supervision in the workplace is crucial. Practitioners undertaking Master’s qualifications in advanced practice need both academic and clinical preparation to allow them to demonstrate all the capabilities across all four pillars of practice as outlined in the Multi-professional framework. Once education and training are completed, continued support and supervision remain important to ensure that the advanced practitioner continues to develop their knowledge and skills and can practice effectively. This supervision and support could come from other practitioners in the profession, but could also come from other experienced clinicians in the multi-professional team.

The Centre for Advancing Practice has published resources to support the supervision and governance of advanced practice within the workplace. These are available from the Centre’s website.

The principles outlined above can also be followed when thinking about the service need for roles which are at an enhanced level of practice. This includes identifying the education and training which will equip a prosthetist and orthotist to practise at this level.

The pathway to advanced practice is summarised in Figure 2 below.

Figure 2: Advanced practice pathway

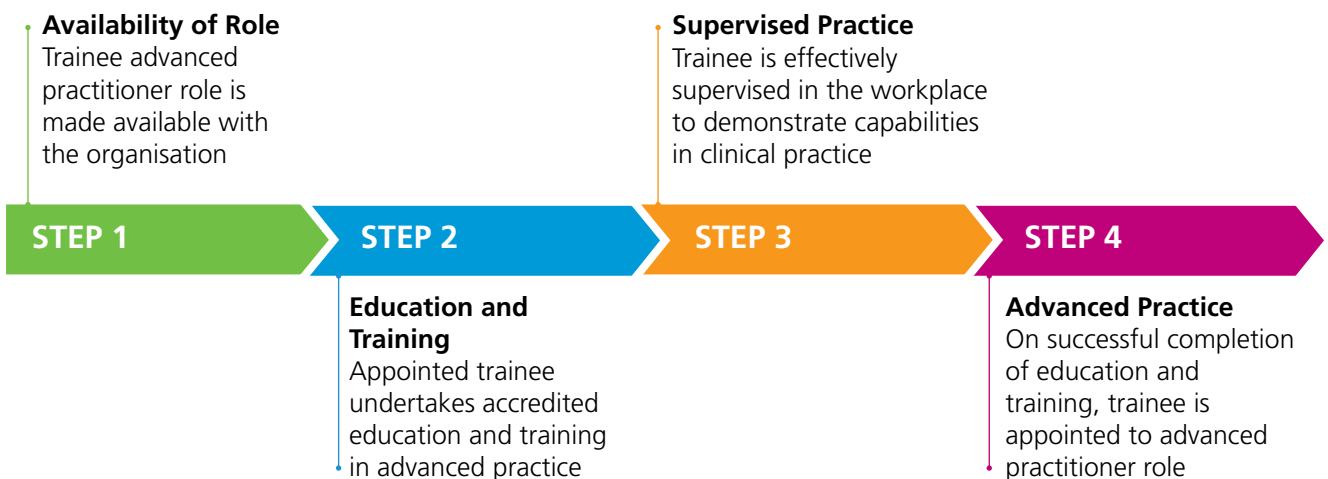


Figure 2: Advanced Practice Pathway

3.4.3 Advocating for advanced practice

We have set out some of the challenges for developing advanced practice roles in prosthetics and orthotics and we know that these challenges are particularly difficult to overcome where clinical services are delivered by private companies under contract to the NHS.

There are no simple solutions, but whether you work directly for the NHS or for a private company, we all need to be proactive advocates for our profession and for our own career development.

If you are interested in developing advanced practice and advanced practice roles in your service, this might start with building your clinical network who can support you – this might include, for example, Chief Allied Health Professionals (AHPs); other AHPs you work with who are in advanced practice roles; and medical colleagues. A good evidenced-based business case, with support from other members of the multi-professional team, which addresses the questions in the previous section, can help persuade employers and commissioning organisations of the benefits of advanced practice

As the professional body, we will continue to use our role to advocate for advanced practice in prosthetics and orthotics.



4. Case studies

This section includes case studies of the career journeys of a range of prosthetists and orthotists who have sought to develop their practice into the enhanced, advanced and, consultant levels of practice.

As we have discussed, advanced practice is in its relative infancy in prosthetics and orthotics and the education and training pathway for advanced practice has developed across all professions over time. Please see section three of this document for more information about the prospective education and training pathway for advanced practice.

We have included case studies for all three levels of practice to help illustrate the contributions made by prosthetists and orthotists at different steps of a career development journey.

The prosthetists and orthotists in the case studies have demonstrated persistence and determination in seeking to identify opportunities for career development for the benefit of their practice, services, and patients

Whilst the career journey of each of these prosthetists and orthotists is unique, we hope the case studies provide inspiration for prosthetists and orthotists thinking about their own career aspirations and for services in thinking about how they might develop their workforces.

The case studies that follow are drawn from orthotics rather than prosthetics.

We know that there are far fewer practitioners in the workforce working as prosthetists than orthotists. We still consider there is real scope for advanced practice in prosthetic services. However, there may be particular barriers to advanced practice in prosthetic services that we need to work to address.

Enhanced level practice



Conor McDaid, Clinical Lead Orthotist

Conor McDaid is Clinical Lead Orthotist at Wirral University Teaching Hospital NHS Trust and Director, Great Gait Orthotics. He holds an MSc in Advanced Clinical Practice but does not currently hold an advanced practice role.

Career Journey

- Qualified as a Prosthetist/Orthotist in 2011.
- Worked with a contracted company delivering NHS services for five years
- Promoted to the role of Clinical Lead Orthotist, overseeing a team of 16 orthotists.
- Joined an NHS Trust as Clinical Lead Orthotist.
- Completed an MSc in Advanced Clinical Practice in 2022.

Motivation for career development

Conor felt he had good clinical experience in foot and ankle pathology and mechanisms and that there was scope to develop his role. He recognised that there was a shortage in medical staff in the UK and there was a good opportunity for his Trust to utilise advanced clinical skills.

Enhanced level practice



Job role

Despite completing an MSc in Advanced Clinical Practice and there being an identified service need for an advanced practitioner role, staff shortages have meant that Conor is yet to be appointed to an advanced practitioner role.

As an advanced practitioner, Conor envisions a role that involves managing patients from the beginning to the end of their episode of care, including ordering investigations and developing patient management plans under the supervision of a consultant.

In Conor's existing role, he is actively involved in providing training in orthoses and their application for other AHPs and staff on the ward. He also oversees the clinical development of band 5 and band 6 staff.

Conor is engaged in various research and development activities, such as working on APOS in his knee osteoarthritis clinic, running a journal club, and contributing to the development of a nationwide outcome measure through his MSc work. He collaborates with his professional body on the implementation of these initiatives. He also provides regular clinical supervision.

Benefits for patients

Once implemented, Conor thinks an advanced practice role will help expedite treatment for patients by allowing diagnostic investigations to be ordered then and there, alleviating pressure on other services including primary care and reducing waiting times.

Challenges

Conor has encountered challenges due to the absence of a defined pathway for advanced practice roles. As one of the first to explore this territory as an orthotist, he had to take the initiative and create his own opportunities.

He has found that advanced practice roles tend to be created for physiotherapists and podiatrists and as a result he thinks that his undergraduate degree in prosthetics and orthotics has held him back.

Advice for practitioners considering an advanced practice role

Conor emphasises the importance of ensuring that there will be an advanced practice role before completing education and training.

Future opportunities for advanced practice in prosthetics and orthotics

Conor believes there will be more opportunities when NHS Trusts realise the importance of retaining staff and the need to develop roles suitable for professionals like orthotists, as services strive to meet the increasing demand for healthcare.

Advanced level practice



Laura Barr, Advanced Specialist Orthotist and MSK Team Lead for Orthotics

Laura Barr is Advanced Specialist Orthotist and MSK Team Lead for Orthotics at NHS Greater Glasgow and Clyde.

Career Journey

- 2007-2015: General orthotic practice with a focus on diabetes.
- 2013-2016: Completed an MSc.
- 2015-2019: Transitioned into an Extended Scope Practitioner (ESP) role in Orthopaedics.
- 2017 – to date: Leads the MSK team for NHS Greater Glasgow and Clyde (GGC) Orthotic Service.
- 2019: ESP role converted to Advanced Orthotic Practitioner.
- 2022: Pursuing a PhD.
- 2022-2023: Completed NHS Education for Scotland Fellowship.
- 2023 – to date: Undertaking NHS Research Scotland Fellowship.

Key moments in career journey

Laura worked in various aspects of general orthotic practice for a number of years, before pursuing her interest in MSK and orthopaedics. This included undertaking formal education and training, as well as making the most of the clinical opportunities where she worked.

Laura undertook training in image interpretation. This, together with her clinical experience, allowed her to take on an extended scope role. Her role and other similar roles within the NHS Board she works in were later changed to advanced practice, with her role now encompassing all four pillars of practice.

Job role

Laura manages complex clinical caseloads, with responsibilities including triage, assessment, diagnosis, and post-operative discharge planning for foot and ankle service patients.

Laura is responsible for education in the orthotic department relating to MSK conditions. She organises and provides training, as well as managing training plans for staff. She also undertakes a variety of other education roles including as an external examiner on an undergraduate prosthetics and orthotics programme and as a trainer on professional body courses.

Laura is the specialist team lead for MSK in her Health Board's orthotic service and is the national MSK lead for Orthotics in Scotland. She is active in research, leading research initiatives within the orthotic service.

Advanced level practice



Benefits of role

Laura's advanced practice role enhances the orthotic treatment of patients with complex presentations, reducing waiting times, improving access to care and alleviating pressure on other clinical services.

Laura did not want to pursue an office-based career and advanced practice has allowed her to find the right balance between clinical and non-clinical work. She enjoys using her advanced skills to manage the care of patients with more complex needs. Working across all four pillars of practice has made her role fulfilling by giving her the freedom to pursue her own interests.

Challenges

During her training journey, the absence at the time of an established framework for AHP advanced practice posed challenges.

Advice for practitioners considering an advanced practice role

Laura advises aspiring advanced practitioners to start their development early, gain broad experience, use available frameworks, share resources, and seek support from other advanced practitioners.

Future opportunities for advanced practice in prosthetics and orthotics

Laura thinks there is the potential for orthotists to work as first contact practitioners in primary care.

Drawing on her experience, she thinks that advanced practice roles could be created in other clinical areas. Laura thinks lack of access to non-medical prescribing could be a barrier in some clinical areas, such as diabetes care.

Consultant level practice



Nick Gallogly, Consultant orthotist

Nick Gallogly is a consultant orthotist and Head of Service and Orthotic Clinical Lead at the Royal Berkshire Foundation NHS Trust.

Career Journey

- Holds degrees in Medical Mechanical Engineering and Prosthetics and Orthotics.
- Attained an MSc in Clinical Biomechanics.
- Obtained in-house training with medical consultants from various disciplines – including orthopaedic, diabetic, vascular, and neuromuscular.
- Only one of two recognised consultant orthotists in the UK.

Consultant level practice



Motivation for career development

Nick found that there were limited opportunities for career progression compared with other colleagues, despite his years of experience. He was motivated by a desire to progress and to be recognised for the work he was doing.

Job role

Nick's role spans both MSK and diabetic care.

He runs foot and ankle clinics with medical consultant colleagues. He teaches AHP and medical colleagues in orthotics. He is also actively involved in contributing to research studies.

His work in diabetes involves a weekly diabetic foot service, with a multi-disciplinary team. He takes the lead in clinical decisions made in the absence of other members of the team – this includes, for example, making imaging requests and putting in place acute management plans. He teaches and presents at conferences.

Benefits of role

Nick's patients benefit from more holistic care, as a result of a more joined-up approach. Nick says he has greater knowledge, appreciation, and respect for his colleagues in other professions and their important role in patient care.

Nick says he enjoys the sense of accomplishment he gets from being able to make a positive change for his patients.

Advice for practitioners considering an advanced practice role

Nick says that a supportive manager and consultant colleagues is essential. He says that this is important in making sure that a practitioner will be able to make use of their education and training in practice.

Consultant level practice



Dr Nicky Eddison, Consultant orthotist

Nicky Eddison is a consultant orthotist and service manager at The Royal Wolverhampton NHS Trust and also holds the position of Associate Professor of Orthotics at Staffordshire University.

Career Journey

- Holds a degree in Prosthetics and Orthotics.
- Attained a PhD
- Has completed several accredited leadership courses, including the NHS Rosalind Franklin Leadership Course and the AHP Federation 'Future leaders' course, and is a trained leadership educator. Nicky is also a registered accredited mediator.

Consultant level practice



- Has a portfolio of research published in international peer-reviewed journals and has presented her work at conferences across the world.
- Has held the role of external examiner on an undergraduate prosthetics and orthotics programme.
- She teaches AHP, nursing, and medical colleagues in orthotic treatment.
- Is an expert advisor for the Medicines and Healthcare products Regulatory Agency (MHRA).
- Became the first recognised Consultant orthotist in the UK in 2020.
- Is currently the only Associate Professor of orthotics in clinical practice in the UK.
- Is currently the Chair-Elect of the British Association of Prosthetists and Orthotists, and will step up to the Chair's position in March 2024.

Motivation for career development

Nicky always had a passion for research but found there were limited opportunities to carry out research in prosthetics and orthotics. Nicky was motivated to improve the research profile of prosthetists and orthotists whilst remaining in a clinical role. The aim was to carry out research that was transferable to clinical practice, thus, enhancing her skills whilst trying to improve clinical practice.

Job role

Nicky's role includes line management of a team of staff, leadership duties in the form of service manager and clinical lead, as well as her role with the professional body. From a clinical perspective, Nicky is responsible for overseeing the orthotic clinical care of all patients at the Royal Wolverhampton NHS Trust, whilst treating her own caseload of complex patients. Nicky also has budget management responsibilities as part of her role. From a research perspective, Nicky conceptualises, designs, and implements a range of research projects spanning several different areas of interest including biomechanics, public health, health inequalities, leadership, telehealth and workforce.

Nicky regularly teaches research and presents her work at conferences across the world.

Benefits of role

The patients who visit Nicky's department benefit from a research-active service, where staff are encouraged to get involved with research and ensure the latest evidence-based treatments are incorporated into patient care. Nicky also believes that the Consultant role in orthotics highlights the high level of skill orthotists can offer.

The skills Nicky has developed have enabled her to cross traditional professional boundaries, working across pathways and with a range of multi-professional teams.

Advice for practitioners considering an advanced practice role

Nicky says self-belief is important – we are all learning. Practitioners should take control and accountability for their own development, making the most of every opportunity that comes their way. She suggests reaching out to those who have gone before you as a source of sage career advice.

Pursuing advanced practice is hard work, so Nicky says that it is crucial practitioners choose an area that they are passionate about.

5. Conclusions

This document has provided information about advanced practice and the challenges and opportunities for advanced practice in prosthetics and orthotics.

We hope it is useful to prosthetists and orthotists, service providers, and other stakeholders as the profession continues its advanced practice journey.

We will now use this document to help us raise awareness of advanced practice and advanced practice roles and to advocate for and facilitate the development of advanced practice in prosthetic and orthotic practice.

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