

## Education and Training Committee

<b>Meeting Date</b>	04 March 2026
<b>Title</b>	Scope of practice and delegation update - resource development
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### Executive Summary

The HCPC ran a series of webinars (Sept-Nov 2025) with the General Osteopathic Council (GOsC), the materials of which were discussed with ETC at the September Committee. The data from the webinars informed the development of additional resources, including some jointly with the GOsC to support registrants working at enhanced, advanced, and consultant levels. The resources also focus on supporting managers and strategic leaders, including multiprofessional colleagues, to help their workforce meet their regulatory standards in three key areas: scope of practice, supervision and delegation.

The new resources include:

- new standalone and downloadable resources: a Shared Update, a reflective template and a set of graphics/posters;
- New webpages: for information on delegation, a dedicated section for advanced levels of practice;
- additional content: personas, glossary of key terms, project report, blog post, FAQs (based on webinar questions);
- uplifts to existing webpages: employer hub, CPD, scope of practice, supervision, professional indemnity, professional bodies;
- webinar recordings, downloadable versions of the webinar slide decks, short video segment on levels of practice; and
- signposted guidance and resources from other places.

The Committee is invited to note and provide any feedback for us to consider and take forward with the GOSC as we finalise the materials for publication, namely:

- 1) Shared Update on the Advanced Levels of Practice;
- 2) reflective template: defining and demonstrating your scope of practice at advanced levels of practice; and
- 3) graphics to support key concepts linked to the topics.

<b>Action required</b>	The Committee is asked to provide input and feedback to develop the proposal.
<b>Previous consideration</b>	Previous discussions with ETC focused on the webinar delivery element for this project. The outcomes from the webinars have informed the content for the resource development.
<b>Next steps</b>	The project ends on 31 March 2026. The project team is working with the HCPC Communications team to develop a longer communications plan to promote the resources and support their use in practice.
<b>Financial and resource implications</b>	Funding for this project was received from NHS England. There are no financial or resource implications outside of agreed budgets and workplans.
<b>Associated strategic priority/priorities</b>	Continuously improve and innovate Promote high quality professional practise Promote the value of regulation
<b>Associated strategic risk(s)</b>	6. We do not sufficiently or appropriately promote our work, leading to opportunities to enhance our regulatory activity being missed and the benefits of regulatory reform remaining unrealised.
<b>Risk appetite</b>	Regulation - measured Influence/leadership - seeks
<b>Communication and engagement</b>	We have undertaken extensive communication and engagement work throughout this project. A separate comms plan is being developed to promote the resources on completion of the project.
<b>Equality, diversity and inclusion (EDI) impact and Welsh language standards</b>	We have sought inputs on the EDI impact of this project in our extensive engagements with stakeholders across the four nations and through the EDI forum.
<b>Other impact assessments</b>	None
<b>Reason for consideration in the private session of the meeting (if applicable)</b>	Not applicable

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## Scope of practice and delegation update - resource development

### 1. Background

- 1.1 The HCPC has been commissioned by NHS England to deliver materials to assist experienced allied health professionals (AHPs) across the UK to continue to meet regulatory standards when working at advanced levels of practice, with a focus on scope of practice, delegation and supervision. The materials comprise a series of webinars (discussed at the September 2025 Education and Training Committee (ETC) meeting) and a set of resources for discussion at this ETC meeting – March 2026.
- 1.2 This work targets two groups. First, all AHPs – which includes osteopaths in England. We are therefore working closely with colleagues at the General Osteopathic Council (GOsC) to deliver webinars and resources which are relevant for the whole AHP workforce. The second group consists of any professionals who manage AHPs, regardless of their own professional background.
- 1.3 While this commission focuses on supporting AHPs working at advanced levels of practice, the content will be useful for HCPC registrants who are not AHPs who are interested in learning more about how the HCPC's standards support registrants to optimise their scope of practice and delegate safely and effectively.
- 1.4 We know that AHPs work at advanced levels of practice (now defined within the NHS context as three different levels – enhanced/specialist, advanced and consultant with some variation across the four UK countries), as they seek to meet increasingly complex needs of service users. The HCPC and the GOsC do not set or limit the scope of practice of AHPs in keeping with our standards being outcome focused. Despite this, we know that there has been confusion from AHPs (and non-AHPs who manage AHPs) about how AHPs can continue to meet their regulatory requirements while working at these advanced levels of practice. This sits within a context of an evolving understanding of the nature of advanced practice itself, which is now commonly viewed as a level of practice enacted within a number of roles rather than a single, distinct role.
- 1.5 This paper focuses on the development of resources as an output from the learning from the webinars. The primary aim of the resources is to improve understanding of how AHPs working at advanced levels of practice can optimise their scope of practice, effectively supervise and delegate work to others, engage in their own supervision, confidently accept delegated activities and meet the HCPC and GOsC standards. The webinars and resources are aimed at experienced practitioners who are currently or are working towards advanced levels, and their employers, managers, and senior leaders.

- 1.6 This paper provides an overview of the resource development element, and we welcome feedback from the ETC which we will take into consideration when we finalise the materials before the project closes at the end of March 2026.

## **2. Overview of the resource development work as informed by the webinars**

- 2.1 The work to develop the resources was informed by and followed the delivery of the webinars, and a brief outline of the webinar outcomes is presented to provide context for the rationale to develop specific resources:

- Registered number of people: 5117
- Total attendance: 2419
- Number of managers attending: 884
- Number of registrants attending: 1535 (covering all professions and UK countries)
- Average star rating over 4 out of 5 for being both informative and relevant to their practice

- 2.2 We used the webinars as an information gathering tool—through the registration form, a post-webinar evaluation form, and through interactive elements during the webinars themselves including voting, posting questions and asking people to share one action as an outcome from the webinar learning. The following data sources have informed the resource development plan:

- Questions posed by people registering for the event (n=400)
- Interactive elements from the webinars inc. voting (n=between 471-579 votes per statement), questions submitted, planned actions submitted (n=891)
- Post-webinar evaluation (n=172)

- 2.3 The new resources include:

- New standalone and downloadable resources:
  - a 'Shared Update on Advanced Levels of Practice' written by the HCPC and GOsC;
  - a reflective template to support registrants to define and explain their scope of practice at advanced levels of practice; and
  - graphics and posters supporting key concepts.
- New webpages: for delegation and a dedicated web section for advanced levels of practice.
- Additional content: personas, glossary of key terms, project report, blog post, FAQs (based on webinar questions).
- Minor amendments to existing webpages: employer hub, CPD, scope of practice, supervision, professional indemnity and professional bodies.
- Webinar recordings, downloadable versions of the webinar slide decks and short video segment on levels of practice.
- Signposted guidance and resources to other places including professional bodies.

2.4 The committee is invited to note and provide any feedback for us to consider and take forward with the GOsC as we finalise the materials for publication, namely:

- Shared Update on the Advanced Levels of Practice (Appendix A);
- reflective template: defining and explaining your scope of practice at advanced levels of practice (Appendix B); and
- graphics to support key concepts linked to the topics (Appendix C)

### **3. Contextual information on the jointly developed resources for ETC review and input**

#### Shared Update on the Advanced Levels of Practice:

3.1. The Shared Update from the HCPC and GOsC clarifies our existing position on regulation of advanced levels of practice and reinforces how registrants can continue to meet our standards. There is a particular focus on scope of practice, CPD, delegation and supervision. It has been designed to sit alongside the Four UK Countries statement on Advanced Practice in the Allied Health Professions (written by the Chief Allied Health Professions Officers) with the update covering a broader remit to encompass the three advanced levels of practice. It will be designed as a downloadable resource for ease of sharing by the target audiences.

#### Reflective template: defining and explaining your scope of practice at advanced levels of practice:

3.2. The reflective template is designed for registrants to help them to define and explain their scope of practice as they advance in their careers. It contains scenarios with reflective questions, all based on real-world experiences and with support from colleagues. It will be designed as a downloadable resource so registrants can work on it offline and save it as a CPD activity.

#### Graphics to support key concepts linked to the topics

3.3. The HCPC and the GOsC have collaborated to develop the following graphics:

- Workforce levels of practice – the aim of this graphic is to show that the advanced levels are part of a workforce solution to provide clarity about career progression.
- Safe and effective practice as a shared directive – the aim of this graphic is to outline the responsibilities held by registrants, regulators, employers and professional bodies to support safe and effective practice. It emphasises that regulation is part of a broader safety picture and that, on its own, does not guarantee safety.
- Supporting advanced levels of practice across the system – the aim of this graphic is to provide more detail about the roles and responsibilities of the registrant, the regulator, the employing organisation and the professional body to support advanced levels of practice.

### Development process for all resources

- 3.4. Each resource has been developed by the delivery team with approval and sign-off process completed by the Executive Leadership Teams within the HCPC and GOsC. The following groups will be provided with an opportunity to review and comment prior to publication: the four CAHPOs and their deputies, the Centre for Advancing Practice (NHS England funded commission), the HCPC Education and Training Committee and Professional Bodies.

## **4. Overview of communications and engagement work**

- 4.1. There is a high level of interest in the nature of AHP advanced practice and how professionals working at advanced levels of practice continue to meet their regulatory standards. We want to ensure the resources are useful for AHPs, their managers and the strategic leaders supporting the development of experienced registrants.
- 4.2. We are mindful that any work the HCPC undertakes on advanced practice may raise questions about the HCPC's approach to regulation. Our position on that is clear, is available on the [HCPC website](#) and will be reinforced through the Shared Update.
- 4.3. Through our Clinical Fellow and our Strategic Relationships Lead, we have continued to engage widely with professional bodies, Chief Allied Health Professions Officers, the HCPC's EDI Forum, NHS Education Scotland as well as other arm's length bodies and forums for AHPs and multiprofessional advanced practice leaders. Some of these colleagues have contributed to the scenarios outlined in the resources.
- 4.4. Through these engagements we have been clear that the HCPC's approach has remained unchanged and that professionals working at advanced levels of practice are already fully regulated and must meet their relevant regulatory standards. The resources seeks to give additional support to AHPs working at advanced levels of practice to enable them to meet their existing standards.

## **5. Financial and resource implications**

- 5.1 We have been contracted by NHS England for this project and the work is being funded by NHS England with the aim of reaching AHPs working across all four nations. The subsequent resources will also be inclusive of all four UK nations.
- 5.2 The delivery of this project has no financial or resource implications outside our agreed budget.

## **6. Conclusions and next steps**

- 6.1 The work to finalise all pre-design versions of the resources concludes on 31 March 2026.
- 6.2 The delivery team are working with the HCPC Comms team to develop a plan to promote the resources and support their use in practice. The delivery team are also presenting an update at the HCPC Professional Body Forum.

## **7. Appendices**

- 7.1 Appendix A: Shared update on the Advanced Levels of Practice
- 7.2 Appendix B: Reflective template: defining and explaining your scope of practice at advanced levels of practice
- 7.3 Appendix C: Graphics to support key concepts linked to the topics.

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## Shared Update on advanced levels of practice (2026)

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### Audiences for the Shared Update

This Update is for use by a range of audiences including but not limited to:

- Registrants aspiring to or working at advanced levels of practice
- Line managers of registrants aspiring to or working at advanced levels of practice, across sectors
- Operational and strategic managers e.g. Advanced Practice Leads in NHS Trusts, Chief Allied Health Professionals (AHPs) Leads, Chief Nurses
- Colleagues in multiprofessional teams seeking to understand the nature of advanced levels of practice for Health and Care Professions Council (HCPC) and General Osteopathic Council (GOsC) registrants
- Registrants and other colleagues working in Higher Education Institutes supporting the development of the workforce

## Key points

- All HCPC and GOsC registrants working at advanced levels are already fully regulated and must meet all regulatory standards which are relevant to their scope of practice.
- Service user safety is a shared responsibility. Registrants, regulators, employers, professional bodies, unions and others play important and different roles in ensuring safety.
- The HCPC and GOsC do not set or limit the scope of practice of registrants but it is essential for registrants to use their professional judgement to work within their scope to ensure they practise safely, lawfully and effectively.

## Introduction

- HCPC and GOsC have collaborated to produce this Shared Update for registrants working at or towards advanced levels of practice in a range of sectors and settings, and for the multiprofessional managers, strategic leaders, colleagues and academics who support the development of this experienced and highly skilled workforce.
- This Update clarifies the existing position on regulation of advanced levels of practice and reinforces how HCPC and GOsC registrants working at these levels can continue to meet their existing standards across a range of job titles, sectors and settings.
- This Update navigates professional regulatory standards at advanced levels of practice, with a particular focus on scope of practice / scope optimisation, continuing professional development (CPD), delegation and supervision, to make the most of this workforce to benefit service users.
- The content in this Update was originally developed for a [webinar series](#) commissioned by NHS England and co-hosted by HCPC and GOsC. Discussions with registrants, managers, strategic leaders, academics and professional bodies colleagues informed the webinar content.
- It also sits alongside the [Four UK countries statement on Advanced practice in the Allied Health Professions \(AHPs\)](#)<sup>1</sup> written by the Chief Allied Health Professions Officers, with the Update covering a broader remit to encompass the three advanced levels of practice including enhanced/specialist, advanced and consultant.

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<sup>1</sup> Chief Allied Health Professions Officers (2024) [Four UK countries statement on Advanced Practice](#)

## Existing HCPC / GOsC regulatory arrangements: from education to registration through to advanced levels of practice

- Pre-registration qualifications, to gain entry onto the registers are delivered through education programmes approved/recognised<sup>2</sup> by the regulators. There are multiple routes to be awarded these qualifications including via the apprenticeship route.
- Some registrants will enter the workforce through pre-registration master's or doctoral routes. They will still need to build the capability and experience over time in their practice to demonstrate they are working at advanced levels of practice.
- At the point of registration, all registrants are expected to practise as autonomous professionals, exercising their own professional judgement. They must continue to meet the professional standards of their regulator, to actively participate in supervision, have in place a professional indemnity arrangement for their practice (which meets the regulator's requirements) and undertake continuing professional development relevant to their scope of practice, participating in periodic audits when required.
- HCPC / GOsC registrants, regardless of the level they practise at, are already regulated. There are systems in place to maintain safe and effective practice, ranging from outcomes-based standards, to fitness to practise processes and sanctions. In serious cases this can include removing a registrant from the register and therefore from practice.
- The role of the regulators is to protect the public. The HCPC and the GOsC continue to assess the risks in practice, at all career levels. The HCPC and GOsC do not set or limit the scope of practice of any registrants – to do so may unnecessarily hinder how multidisciplinary teams work together and how roles and services develop over time. Registrants working at advanced levels of practice exercise significant autonomy, judgement and responsibility in their roles. A system-wide approach (e.g. clinical governance arrangements that employers have in place) remains another important safety measure for all levels of practice.
- Regulation is one part of a broader safety picture. The registrant, the regulators, employing organisations (where appropriate) and professional bodies all play a proactive role in ensuring safe and effective practice working within a legal framework.

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<sup>2</sup> HCPC use the term 'approved' and GOsC use the term 'recognised' for programmes that have demonstrated they meet the required regulatory standards.

## How our standards apply to registrants working at advanced levels of practice

In this section we set out how outcomes-based regulation works and why it isn't prescriptive.

- The regulatory standards are designed to apply to registrants working in all roles across settings, including in clinical/professional practice, academic, leadership, management and research roles. When the standards refer to service users, this means the broad range of people who are affected by the professional services of registrants e.g. patients, families, carers, students and learners, colleagues, people who are line-managed by a registrant and more.
- The HCPC and GOsC both adopt the same approach to protecting the public through outcomes-based regulation (OBR). This emphasises the importance of focusing on the results and impact of registrant services, rather than the processes used.
- The OBR approach is one of the reasons the standards are not designed as a list of regulated activities (input-focused). Additionally, a focus on compliance to a list of processes could stifle innovation and reduce the agility of regulated professions to use their professional judgement to respond efficiently to meet the ever-changing needs of people and populations.
- OBR encourages regulators to work in collaboration with a wide range of organisations and people, acknowledging that regulation is one part of a broader safety picture.

## Defining advanced levels of practice

In this section we define the three levels of practice (enhanced/specialist, advanced, consultant) which form a career and workforce development framework on completion of the earlier career stages.

- The three advanced levels of practice are enhanced / specialist, advanced and consultant (see figure 1). For registrants, the levels of practice may help to identify their scope of practice and areas for continuing professional development, as they continue to work as autonomous practitioners.
- The wording for the levels of practice differs slightly across the UK countries ('Specialist' is used in Scotland and Northern Ireland but in England and Wales the same level is described as 'Enhanced'). The overall approaches, including the descriptions of each level of practice are closely aligned.

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- There are many different roles and job titles across sectors at these levels of practice. Some roles remain within individual professions, and some are in multiprofessional roles.
- The definitions of the advanced levels of practice (enhanced/specialist, advanced and consultant) originate in the national health sectors across the UK so may feel less familiar to registrants working in roles across the broader health and care system. However, the terminology, or variations of it, has been widely adopted in resources relevant to registrants working across sectors e.g. featuring in some career development frameworks from professional bodies.
- The levels of practice are not a regulatory requirement. They have been developed as part of ongoing work to provide clarity about career progression, and to support the education, training, governance and organisational oversight that is needed to support role development for experienced health and care professionals.

Figure 1: Workforce levels of practice



## Safe and effective practice as a shared directive for advanced levels of practice

In this section, we reinforce that a proactive system-wide approach is needed to make healthcare safe and effective and outline requirements to show what that looks like in practice.

- Professional regulation is part of a broader safety picture and on its own does not guarantee safe practice, including at advanced levels of practice.
- The HCPC and GOsC set standards for our registrants in order to protect the public. These standards ensure registrants receive the education necessary to gain entry to their register and set the ethical framework they must meet while registered.
- Safe and effective practice is a shared responsibility between the registrants, health and care regulators (professional healthcare regulators like the HCPC and the GOsC and system regulators), the employing organisations (where appropriate) and professional bodies, all working together within a legal framework (see Figure 2).
- Employing organisations must ensure they have in place:
  - clear leadership oversight and accountability for the workforce
  - a consistent understanding of advanced levels of practice (including at the operational level)
  - workforce policies and processes to support advanced levels of practice including for supervision, delegation and scope optimisation
  - robust workforce planning including service design and deployment
  - consistent support for the workforce including education, training and supervision to meet regulatory requirements
  - job descriptions that map against the four pillars of practice
  - defined scopes of practice that are reviewed at regular intervals
- Professional bodies provide profession-specific guidance and support including in relation to scope of practice, advocacy and advice, research, and support for professional growth and continuing professional development.
- Professional body membership may include professional indemnity arrangements, although in some instances registrants may need to make additional arrangements depending on their individual scope of practice.



### Safe and effective: a shared directive

Figure 2: Safe and effective practice as a shared directive

## Defining scope of practice: individual and profession

In this section, we cover scope of practice and the two inter-related elements: individual and profession. Links are made between professional judgement, scope of practice and arrangements for professional indemnity.

- Scope of practice refers to the range of responsibilities and activities that a registrant is qualified and capable to perform based on their education, training and experience.
- As set out above, outcomes-based regulation means that the HCPC and the GOsC do not set or limit a registrant's scope of practice. It is essential for registrants to use their professional judgement to work within their scope to ensure they practise safely, lawfully and effectively.
- Scope of practice is a living process comprising two inter-related elements: individual and profession. Both evolve and change over time (see Figure 3). An individual's scope of practice may extend beyond the generally accepted boundaries of the origin profession with appropriate experience, education, training and organisational oversight.
- Of central importance is that registrants, managers and organisations must be able to articulate and evidence their individual and profession's scope of practice including how they work to effectively meet service user needs, and the knowledge, skills and qualifications gained to do so.

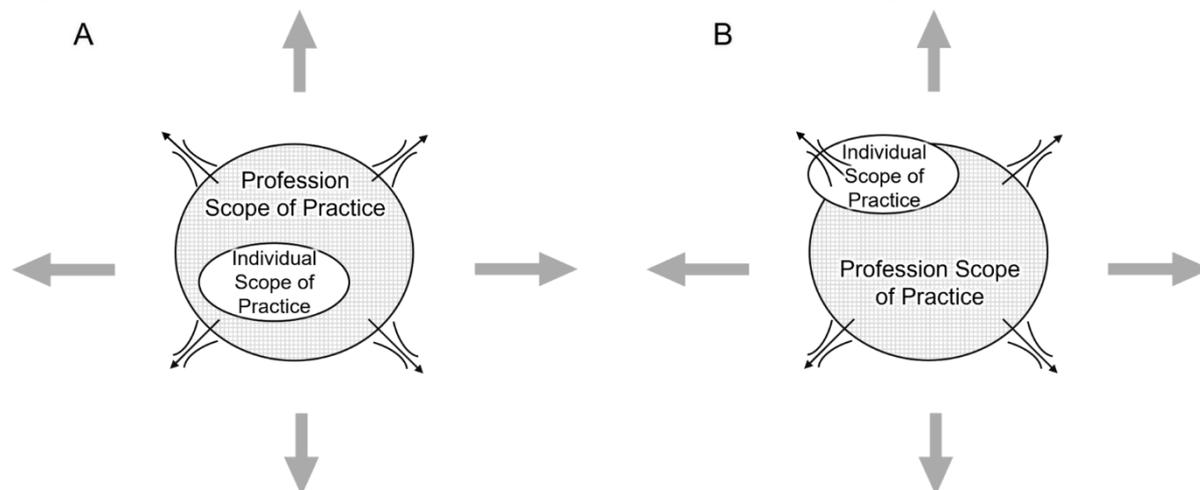
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- Registrants must ensure they have professional indemnity arrangements in place and that it provides the appropriate level of cover, including for their individual scope of practice.

Figure 3: Individual and profession scope of practice as a living process<sup>3</sup>



## Scope of practice, continuing professional development (CPD) and service user needs

This section explains how registrants meet their registration renewal and CPD requirements while working at advanced levels of practice.

- Registrants at advanced levels of practice will continue to develop across all four pillars of practice (clinical practice, education, leadership and research) relevant to their individual and professions scope of practice.
- Professional Bodies, working in conjunction with regulators, support the evolution of a profession's scope of practice.
- Individual registrants must evidence how their CPD supports them to appropriately evolve their scope of practice to meet service user needs (recognising that the term 'service user' is broad).
- CPD and lifelong learning is each person's responsibility and needs to be made possible and supported by employers<sup>4</sup> including time allocated in supervision to identify ongoing learning and development opportunities.

<sup>3</sup> [Downie et al \(2023\)](#)

<sup>4</sup> [CPD is not just a 'nice to have': Why everyone in the system should support CPD | The HCPC](#)

## Job titles at advancing levels of practice

This section addresses one of our most frequently asked questions to clarify there is no link, from a regulatory perspective, between job titles and advanced levels of practice.

- There are a range of job titles across advanced levels of practice, determined by the employing organisation and not the regulators. The titles, pay terms and conditions vary across organisations.
- The lack of clarity in the myriad of titles can cause confusion for the public, especially when the protected title<sup>5</sup> does not form part of the job title.
- Efforts across the UK are seeking to provide clarity for registrants, managers and organisations about routes into different levels of practice, alongside the governance and oversight to support them. This includes work by NHS Education Scotland to standardise titles used by professionals working at advanced levels<sup>6</sup>.
- HCPC and GOsC support the recent work in Scotland<sup>7</sup> where a national job title format for AHP advanced practice roles has been agreed, to provide greater clarity and consistency for the public and the wider workforce i.e. Advanced Practice [insert name of AHP profession] with the option to include the clinical specialty, e.g. Advanced Practice Occupational Therapist in Frailty. This identifies the level of practice and uses the protected professional title from the HCPC register.

## Role of managers and organisations to support registrants at advanced levels of practice

This section outlines ways that managers of our registrants can support them to meet their standards, including through operational policies and processes for supervision and delegation, recognising not all registrants work within organisations.

- The HCPC and GOsC regulate individuals and not organisations. Therefore, the regulatory standards focus on requirements for registrants. As outlined above, safe and effective practice is a shared responsibility. Managers and organisations are required to support their staff to meet their regulatory requirements.

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<sup>5</sup> The HCPC or the GOsC protect a range of professional titles that can only be used by registrants. For a full list of titles protected by the HCPC [see here](#) and for the GOsC [see here](#).

<sup>6</sup> Transforming Roles paper 9: allied health professions advanced practice: [Transforming Roles paper 9: allied health professions advanced practice - gov.scot](#)

<sup>7</sup> Scottish Government (2025) [Paper 09](#)

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- We recognise that not all registrants work within organisations so this may not apply to all.
- Supporting registrants to optimise their scope of practice at advanced levels of practice enables teams and organisations to make the best use of the workforce in terms of their time, knowledge and skills to benefit service users.
- ‘Scope optimisation’ is a phrase that means identifying ways to make the best use of the whole workforce at all levels of practice, in terms of their time, knowledge and skills to benefit service users. Scope optimisation can be realised through effective delegation across the entire workforce (including delegating to the support workforce).
- Delegation is a relational activity and not a transactional one. A person being delegated to must be able to complete the activity, be provided with support and supervision, know how to seek guidance when needed, or decline undertaking the delegated activity if they feel it is beyond their own scope of practice.
- Managers and organisations must ensure they have in place effective policies, processes and governance arrangements, including for scope of practice, continuing professional development, supervision and delegation.

## Acknowledgements

The HCPC and the GOsC would like to acknowledge the shared expertise of colleagues from professional bodies, academics, strategic leaders, registrants, managers and colleagues in the wider healthcare and regulatory systems, for their contributions to this Shared Update.

<b>Sign-off / approval processes:</b> HCPC including Executive Leadership Team GOsC	<b>Opportunity to review and comment:</b> CAHPOs including deputies Centre for Advancing Practice HCPC Education and Training Committee Professional Bodies
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# Defining and explaining your scope of practice at advanced levels of practice – a reflective template

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## Why and how to use this template

Determining what is and is not part of your scope of practice as you advance in your level of practice is for you to decide, using your professional judgement, based on service user needs and with support from the organisation you work in (if this applies to you).

This template has been designed to support you to reflect on your practice. It is a tool to help you define and explain your individual scope of practice as you advance in your career, which is unique to you within your regulatory framework and the context in which you are working. It contains scenarios with reflective questions and activities related to key concepts.

## Introduction

This template has been co-created by the Health and Care Professions Council (HCPC) and the General Osteopathic Council (GOsC) as an output from a joint [webinar series](#) focusing on scope of practice, supervision and delegation at the advanced levels of practice.

Your scope of practice is the limit of your knowledge, skills and experience and is made up of the activities you carry out within your professional role. As a registrant and health and care professional, you must keep within your scope of practice at all times to ensure you are practising safely, lawfully and effectively. It is likely that your scope of practice will change over time as your knowledge, skills and experience develop, including through additional training or qualifications.

As an autonomous professional, you need to make informed, reasoned decisions about your practice to ensure that you meet the standards that apply to you. This may involve seeking advice and support from education providers, employers, colleagues, professional bodies, unions and others to ensure that the safety of service users is safeguarded at all times.

## Defining advanced levels of practice

The three advanced levels of practice are enhanced/specialist, advanced and consultant (see Figure 1). For registrants, the levels of practice may help you to identify your scope of practice and areas for continuing professional development (CPD), as you continue to work as an autonomous practitioner.

The wording for the levels of practice differs slightly across the UK countries ('specialist' is used in Scotland and Northern Ireland, but in England and Wales the same level is described as 'enhanced'). The overall approaches, including the descriptions of each level of practice, are closely aligned.

These levels of practice are not a regulatory requirement. They have been developed as part of ongoing work to provide clarity about career progression, and to support the education, training, governance and organisational oversight that is needed to support role development for experienced health and care professionals.

Figure 1: Workforce levels of practice



### Defining scope of practice at advanced levels

In contrast to the levels of practice, the term scope of practice is a regulatory concept which you are required to work within and is “the limit of your knowledge, skills and experience and is made up of the activities you carry out with your professional role.”<sup>1</sup>

The HCPC and GOC standards require all registrants, at all career levels, and in all sectors and settings, to recognise and work within their limits<sup>2</sup>. Registrants are also expected to complete CPD activities relevant to their scope of practice, which is all part of protecting the public.

<sup>1</sup> HCPC (2024) [Scope of practice | The HCPC](#).

<sup>2</sup> [B. Knowledge, skills and performance – Osteopathic Practice Standards](#)

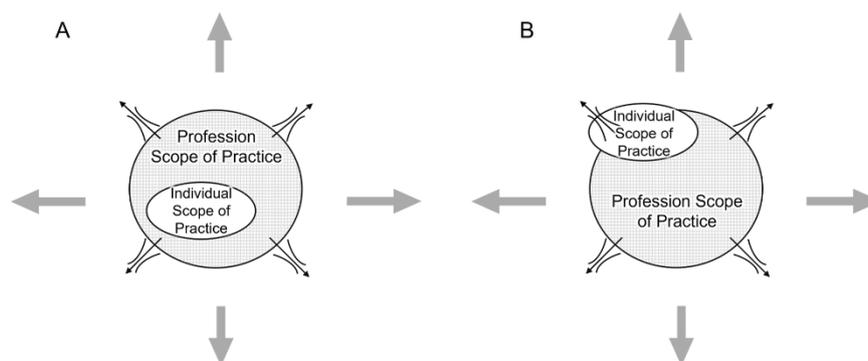
**Scope of practice is a living and evolving process.** As registrants advance in their careers, each person will gain different skills and experiences, including through formal qualifications and other forms of CPD, to meet service user needs<sup>3</sup>

When thinking about whether an activity is within your scope of practice it may be helpful to consider the following:

- Do I have the skills and knowledge to carry out the activity safely and effectively?
- Can I complete training or receive other support, such as supervision, that will give me the skills and knowledge needed to carry out the activity safely and effectively?
- Is the activity restricted by law, for example prescribing, and, if so, can I legally do it?
- Does my professional indemnity arrangements cover the activity?

There are **two inter-related components within scope of practice - individual and profession** - and both evolve over time. As you become more advanced in your practice, your individual scope of practice may appropriately extend beyond the generally accepted scope of your profession (see Figure 2<sup>4</sup>) to meet service user needs. It does not develop in isolation, rather an expanded scope must be developed because it addresses a service need, with organisational oversight in place, and underpinned with workforce planning. The scenarios later in this template will provide worked examples to support you to reflect on the concept that scope of practice is a living process.

Figure 2: Individual and profession scope of practice as a living process



<sup>3</sup> The definition of 'service user' is a broad phrase to refer to 'those who use or are affected by the services of a professional registered with the HCPC. Therefore, service users include people with health and care needs, their families and carers as well as students, learners, and colleagues, including people who are line-managed by registrants. HCPC (2018) [Service user and carer involvement | The HCPC](#).

<sup>4</sup> Source: [Downie et al 2023](#) Open access.

## Reflective activities:

This section provides a set of concepts and reflective questions that you can consider, to support you to define and explain your evolving scope of practice as you move into advanced levels of practice, including in different roles and across settings. You may wish to use this as part of your reflective practice and in supervision or appraisal processes. If you are working in an employing organisation, you could consider mapping it to your job description.

For further resources on scope of practice, visit the [HCPC website](#).

## Individual and professions scope of practice

Individual and professions scope of practice evolve and change over time. Consider these scenarios and reflect on the extent to which these apply to your own situation and profession.

### *A profession's scope of practice changes over time*

In the 1980s and early 1990s, radiographers were not involved in cannulation. Fast forward to the present day and, with the appropriate training, this is an embedded activity within the scope of practice for the profession, including for some people working at entry level grades.

## Reflection

- To what extent does this example apply to your profession?
- Can you think of specific examples where your profession's scope of practice has evolved or could evolve in the future?

*An individual's scope of practice changes over time within a profession*

It is within the scope of occupational therapy practice to prescribe bespoke wheelchair and seating packages to enable a person to take part in their daily activities. Sanj spends ten years working in a wheelchair service starting as a relative novice, with supervision and support, then advancing his practice, knowledge and skills through experience and additional training. He also supports others to do the same. Therefore, the activity of prescribing wheelchair and seating packages is both within his individual and professions scope of practice.

But as an individual practitioner, Sanj subsequently moves into a national strategic leadership role at the Royal College of Occupational Therapists and has not worked in a wheelchair service for over 15 years. He is still practising safely within his scope of practice because his current role requires different skills. But wheelchair and seating prescriptions are now outside his individual scope of practice. Should he wish to widen his scope of practice to include the activity again, he would need to undertake additional learning and training to do so safely and effectively, including drawing upon contemporary research to inform his practice.

**Reflection**

- To what extent does this example apply to your individual scope of practice?
- Can you identify specific points in your career where your scope has changed?
- How can you evidence the way in which you supported the evolution of your individual scope of practice for example through additional experience, qualifications, supervision or mentoring support?

*An individual's scope of practice extends beyond the generally accepted scope of practice of the profession in clinical practice.*

It is 2015 and Jo is an experienced physiotherapist with a passion for supporting older adults living with frailty. They complete additional postgraduate master's level study to become an advanced clinical practitioner (ACP) – a multiprofessional role whereby their scope of practice extends beyond that of their origin profession. They are the first ACP in their hospital trust. Jo uses their professional judgement and clinical reasoning to develop their scope of practice to meet service user needs including activities such as advanced care planning, venepuncture cannulation and ordering X-rays. Jo has training for the new elements within their scope of practice and demonstrates their capability to do them safely and effectively. Regular supervision supports them to reflect on their scope of practice, including the on-going evolution of it to meet the often-complex needs of their service users. The job description reflects their individual scope of practice, and the role is supported by the Consultant Geriatrician. Governance and oversight are provided by the trust including ongoing review and use of national guidance on the implementation of advanced practice roles.

### **Reflection**

- To what extent does your individual scope of practice align or extend beyond that of your profession?
- To what extent has that changed as your profession's scope of practice has also continued to evolve?
- How can you evidence the way in which you supported the evolution of your individual scope of practice for example through additional experience, qualifications, supervision or mentoring support?
- To what extent do you see your scope of practice evolving in the future to meet service user needs?
- What are the next steps to take to achieve this such as experiences, qualifications, business case planning, and review of professional indemnity arrangement?

So far, the example scenarios have primarily been situated within clinical practice, but the evolution of scope of practice applies to roles across settings and sectors including education, leadership and management, and research roles. Consider these next scenarios.

*An individual's scope of practice extends beyond the generally accepted scope of the profession including in education, leadership and research.*

Adam is an osteopath running a multidisciplinary practice providing an interdisciplinary approach to musculoskeletal (MSK) care, employing physiotherapists, osteopaths, sports therapists and psychologists across three clinic locations. The practice offers training placements to AHP students. Over time, Adam steps back from hands-on clinical work to focus more on the administrative and strategic aspects of running the clinics, managing the increasing staff team, liaising with education providers, and providing supervision and mentoring. Keen to contribute to the development of interdisciplinary approaches to health care, he works with a local university MSK research department to develop an ongoing research and evaluation process to gauge response rates in patients with chronic pain.

### **Reflection**

- Identify the people 'affected by the services Adam provides' such as. who are Adam's service users?
- In what ways can Adam demonstrate he is continuing to meet the standards set by his regulator – the GOsC?
- If you are regulated by the HCPC, and work in a similar interdisciplinary managerial and strategic leadership role, how can you continue to meet the standards set by your regulator?
- Can you identify specific points in your career where your scope has changed and evolved related to roles in education, leadership or research activities?
- How can you evidence the way in which you supported the evolution of your individual scope of practice, for example through additional experience, qualifications, supervision or mentoring support?

*An individual's scope of practice extends beyond the generally accepted scope of practice of the profession in an education and leadership role, warranting additional professional indemnity arrangements.*

Paula is a speech and language therapist and, after years combining independent practice and academia, she now also runs her own workforce learning and development consultancy, as a limited company registered in the UK. She works across several contracts and specialises in the strategic development of professional development support. With an established international reputation, one of her contracts involves working with a national organisation in Australia for a different profession to her own, who want to revise their guidance for supervision. This is within her individual scope of practice, and she can evidence this through her publications, experiences and additional post-graduate qualifications. However, this is beyond the generally accepted scope of practice for her origin profession. Furthermore, her professional liability arrangements do not extend to cover working with colleagues overseas in this capacity. Therefore, Paula needs to make supplementary arrangements for her professional indemnity, requiring a separate insurance policy which covers her for other elements of her work via her professional body.

### **Reflection**

- Can you identify specific points in your career where your scope has changed and evolved in relation to education, leadership or research activities?
- How can you evidence the way in which you supported the evolution of your individual scope of practice, for example through additional experience, qualifications, supervision or mentoring support?
- To what extent does the issue of additional professional indemnity arrangements apply to you, including if you work as a sole trader, within a limited company or other areas not covered by your existing arrangements?
- If you are unsure, who would be able to advise you?

## Demonstrating your individual scope of practice

There are a range of other resources, from your regulator and professional body, to support you to define and explain your scope of practice. For example, most professional bodies have career (or professional) development frameworks, many of which refer to advanced levels of practice. You can map yourself into these, alongside multiprofessional resources, to demonstrate your level of practice and identify areas for ongoing CPD.

There are two concepts that feature in many resources – the four pillars of practice and the novice to expert continuum. Neither of these concepts are a regulatory requirement, but they can also help to guide your professional judgement when defining and explaining your scope of practice.

## The four pillars of practice

There are four pillars of practice and some of the wording differs across the UK countries and professions (see Table 1), although the core concepts are similar. Broadly speaking, each pillar is defined as follows:

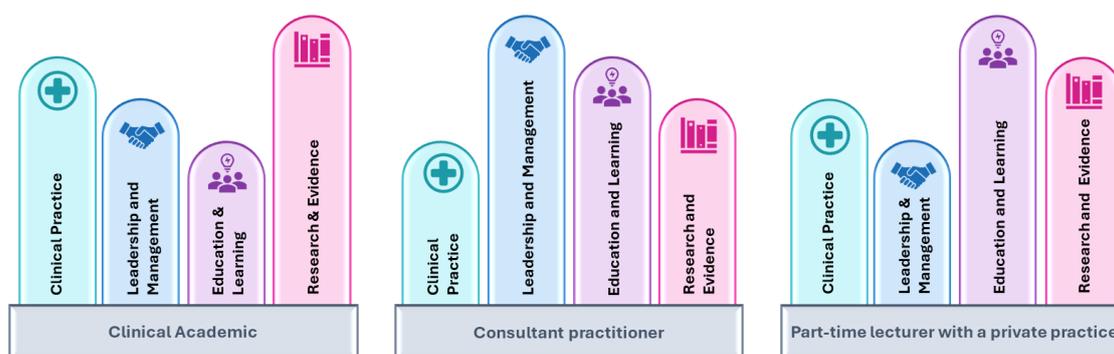
- Clinical / professional practice: the knowledge, skills and behaviours needed to provide high-quality **healthcare that is safe, effective and person-centred**
- Facilitating learning / education: the knowledge, skills and behaviours needed to enable **effective learning in the workplace for yourself and others**
- Leadership (and management): the knowledge, skills and behaviours needed to **lead self and others and to fulfil management responsibilities**
- Evidence, research and development (and innovation): the knowledge, skills and behaviours needed to engage in **research activities, apply evidence in practice to inform practice and improve services**

Table 1: Illustrative examples of some of the differing terminology for the four pillars of practice (\*referred to as domains of practice rather than pillars)

Scotland – NHS Education Scotland	England – Centre for Advancing Practice	British and Irish Orthoptics Society*	Royal College of Speech and Language Therapists*
Clinical practice	Clinical practice	Clinical practice	Professional practice
Facilitating learning	Education	Facilitation of learning	Facilitation of learning
Leadership	Leadership and management	Leadership and management	Leadership and management
Evidence, research and development	Research	Evidence, research and innovation	Evidence, research and innovation

There is a workforce expectation that people working at advanced and consultant levels of practice will work across all four pillars of practice, and there is a fifth pillar ('consultancy across the pillars') at the highest level of practice. However, the size of each pillar will vary according to your scope of practice (see Figure 3) and role(s).

Figure 3: illustrative examples of the variation in pillars according to different roles.



The pillars may go up or down depending on the nature of your career progression if, for example, you change roles.

*Pillars of practice may move up and down throughout your career*

Bev begins her career in Clinical practice and during that time supports students with their practice-based learning (education and learning), leads a small team within her department (leadership and management), works as the local Trade Union representative (leadership and management) and regularly audits the team's performance against national evidence-based standards to improve the quality of the service (research and evidence).

Later in her career, Bev moves into a regional strategic leadership role. The size of the clinical pillar reduces, and the leadership pillar grows significantly. A secondment opportunity to collaborate with the local university also sees the size of the research and evidence pillar increase. Bev continues to support practice-based learning through leadership placements.

### Reflection

- Thinking about your current role, how would you visually represent the size of each pillar?
- To what extent has the size of each pillar changed over the course of your career so far?
- To what extent are you familiar with the resources available from your professional body, such as career development frameworks, to support you to demonstrate your scope of practice across each pillar / domain and identify areas for CPD?

### Applying the four pillars of practice to your role

Use this template to define and explain the elements of your practice that extend across all four pillars of practice. Consider the impact of voluntary work you may do and how that can support your continuing professional development, for example volunteering as a school governor providing strategic leadership experience.

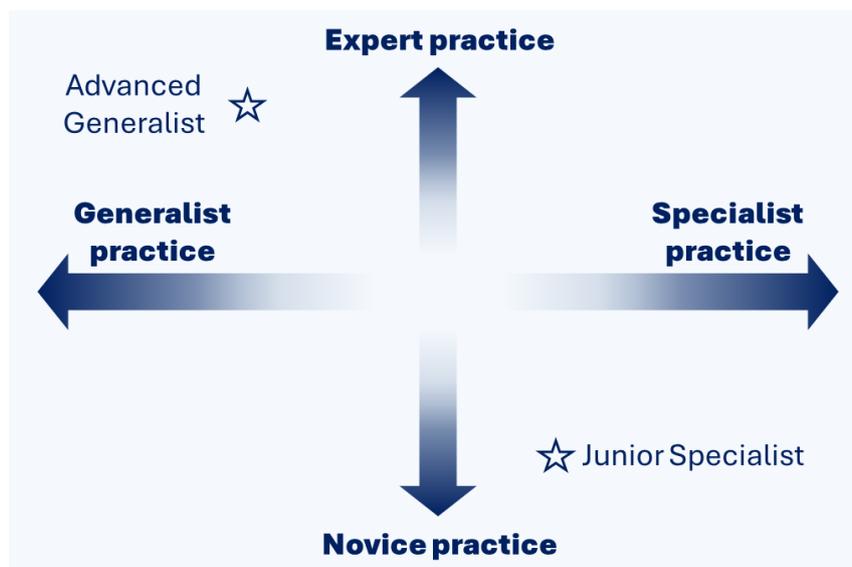
Clinical /professional practice	Leadership and management
Education / facilitating learning	Research and evidence

## The novice to expert and generalist to specialist continuum

Figure 4 is a diagram that is also widely used within workforce development to support people to reflect on their level and scope of practice. The levels of practice (novice to expert) intersect with the continuum of the scope of practice (specialist to generalist).

Figure 4 helps to articulate that scope of practice may be narrow if a registrant chooses to specialise for example in hand therapy, or broad if a registrant chooses to work in a generalist field such as primary care.

Figure 4: The novice to expert and generalist to specialist continuum



### Reflection

- Where would you currently put yourself on the continuum and why? How could you evidence you are at that position?
- Reflecting on your career so far, identify the transitional points, for example a promotion or a move from one sector to another. Are there places where you have gone from being an expert advanced clinician to a novice academic and worked your way back up over time with additional learning and experience?

Use this space to capture notes and any follow up actions you may wish to consider

A large empty rectangular box with a thin black border, intended for capturing notes and follow-up actions.

## Appendix C: Graphics to support key concepts linked to the topics

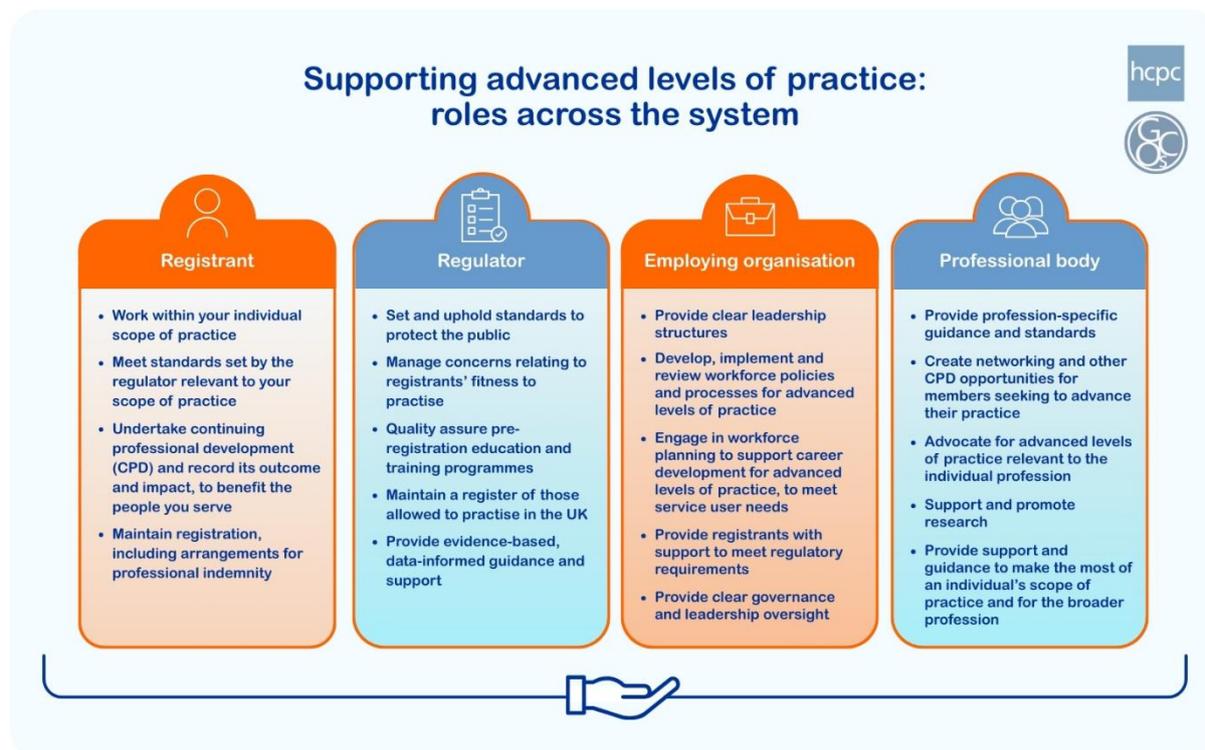
These graphics appear in various places in the resources, always accompanied by more explanatory text. While we hope these graphics can provide a simple illustration of core concepts, they are not a substitute for the detailed work elsewhere in the resources.

### Graphic 1



Sets out basic roles of the registrant, the employer, the regulator and the professional body for ensuring safe and effective practice.

Graphic 2



A more detailed explanation of the different roles of the registrant, the regulator, the employer and the professional body in supporting advanced levels of practice across the system.

**Graphic 3**



This graphic explains the levels of practice as a connected journey from pre-entry to consultant.