Insights on advanced levels of practice: analysis of challenges and opportunities in scope of practice, supervision and delegation

November 2026



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Foreword

Across the UK, experienced professionals are increasingly working at enhanced, advanced and consultant levels, taking on complex roles that are central to delivering high-quality, responsive and sustainable practice. As these roles evolve to appropriately meet service user needs, so too must our shared understanding of how regulatory standards apply in practice, particularly in relation to scope of practice, supervision and delegation.

This report presents the findings from a collaborative project led by the Health and Care Professions Council (HCPC), working in partnership with the General Osteopathic Council (GOsC), commissioned by NHS England. It explores how registrants, managers and strategic leaders understand and apply key regulatory concepts at advanced levels of practice, and where further clarity and support are needed.

At its core, this work is about public protection. The HCPC's role is to ensure that all registrants meet standards that promote safe and effective practice, regardless of where or how they work across the system. All HCPC registrants working at advanced levels of practice are fully regulated by the HCPC. As professionals progress in their careers, their scope of practice naturally evolves. This brings opportunities to improve services and outcomes for the public, but innovation also requires careful, informed decision-making supported by strong professional judgement, appropriate supervision and delegation, and effective governance.

This project has highlighted the importance of a shared, system-wide understanding of scope of practice, supervision and delegation. While registrants remain individually accountable for their practice, safe and effective care is achieved through shared responsibility - across regulators, employers, professional bodies and the wider workforce.

The scale of engagement in this project has been significant, with contributions from thousands of stakeholders across professions, sectors and the four UK countries. Through webinars, stakeholder discussions and data collection, this work has captured a rich and diverse picture of current practice. It has also informed the development of a suite of practical resources designed to support registrants, managers and strategic leaders to apply regulatory standards with confidence.

This report should therefore be viewed not simply as a reflection on what we have learned, but as a contribution to ongoing, system-wide conversations about workforce development at the advanced levels of practice and the role of regulation within it. As health and care services continue to adapt to changing population needs, technological advances and new models of care, the importance of experienced professionals working across the system at advanced levels of practice will only grow.

Andrew Smith, Deputy CEO and Executive Director of Education, Registration and Regulatory Standards

Executive summary

1.1 Introduction to the project

In 2025, the Health and Care Professions Council (HCPC) was commissioned, in collaboration with the General Osteopathic Council (GOsC), to undertake a project to support registrants working at, or towards, advanced levels of practice and those who manage them.[1] The focus was on increasing awareness and providing clarity on how to meet existing regulatory standards and expectations, particularly those relating to scope of practice, supervision and delegation.

The aims of the project were:

1. to understand perceptions from multiple stakeholders on scope of practice, delegation and supervision at the advanced levels of practice;
2. to provide regulatory support to registrants, managers and strategic leaders on the following topics at the advanced levels of practice:
    a. scope of practice
    b. scope optimisation
    c. delegation
    d. supervision
3. to provide resources to support registrants, managers and strategic leaders to apply regulatory standards at the advanced levels of practice.

In carrying out these aims, we gathered insights and data from over a thousand stakeholders on their understanding of scope of practice, supervision and delegation, the role of the regulators, and how registrants understand their standards. This report describes the work we did and what we produced during this project and shares some of the challenges and opportunities we identified along the way. We conclude the report with suggestions on how different groups of stakeholders might engage with this work depending on their role in the system.

1.2 Insights at a glance

From September to November 2025, the HCPC and the GOsC hosted a series of webinars on scope of practice, supervision and delegation. The primary audiences were registrants working at, or towards, advanced levels of practice and the multiprofessional managers and strategic leaders supporting them. These groups are not distinct as, for example, there are

[1] For the purposes of this project, the term ‘advanced levels of practice’ was agreed with the commissioning body (NHS England) and adopted to describe three distinct levels of practice namely enhanced/specialist, advanced and consultant, appreciating that variation exists in the use of these terms.

registrants working at the advanced or consultant levels who also have managerial roles including to support local and regional governance processes for workforce development.

The content of the webinars was informed by:

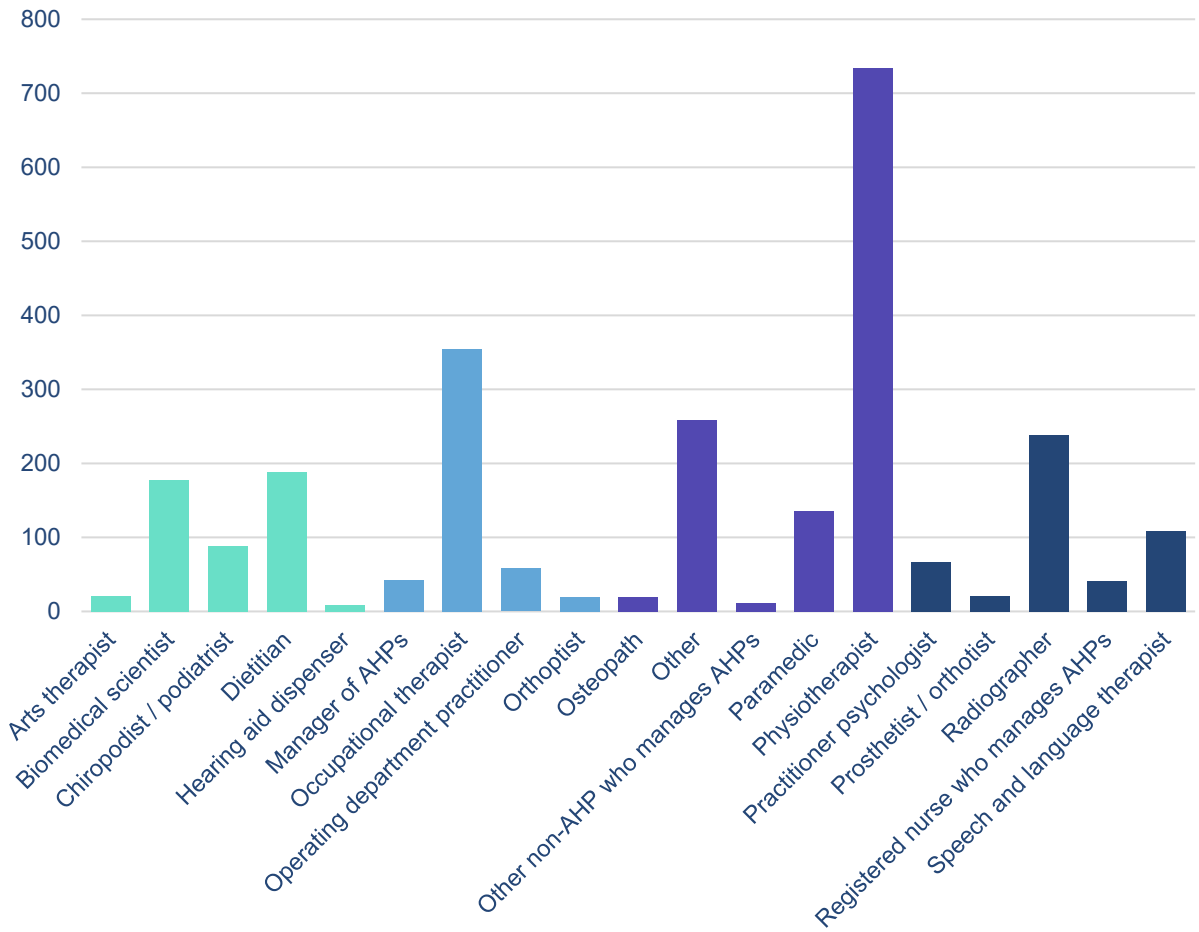
- 37 listening conversations with professional bodies and unions, national and regional strategic leaders (across the four UK countries), academics delivering post-graduate education and research, and registrants; and
- 10 multiprofessional meetings (across the UK).

Webinar statistics



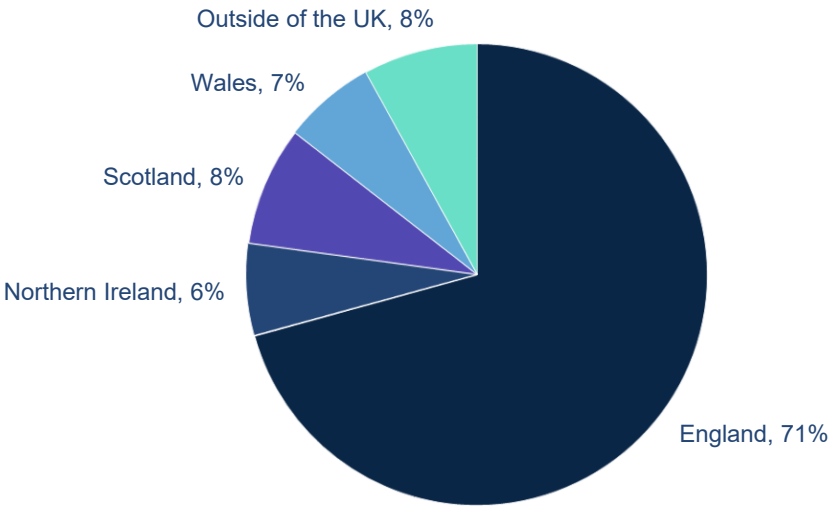
We had multi-professional participation, including representation from all allied health professions (AHPs), biomedical scientists, practitioner psychologists and hearing aid dispensers, as well as nurses and doctors managing AHPs (see Figure 1).

Figure 1: Professions of webinar registered attendees



We also had representation from all four UK nations and beyond (see Figure 2).

Figure 2: Webinar registered attendee location



The large number of attendees gave us a unique opportunity to gather information about registrants working at advanced levels of practice. We used the webinars as an information gathering tool through the following methods:

1. questions posed at the point of registering for each webinar
2. interactive elements during the webinars, including voting, questions submitted, and planned actions submitted
3. a follow-up post-webinar evaluation form

The post-webinar evaluation form was subsequently completed by 172 people. Respondents were asked to award a star-rating (out of five, with five being the highest) to a number of statements. The data showed that, for the majority of people responding, their knowledge and understanding of the topics had changed because of the information gained at the webinars and that the webinars helped them to reflect on their practice:

To what extent has your knowledge and understanding of the topics changed because of the information gained from the webinar?



4.05

172 responses

To what extent has the webinar helped you to reflect on this aspect of your practice (ie optimising scope of practice, delegation or supervision)?



4.27

172 responses

Even where the star-rating was lower, respondents still found the webinars to be of value to confirm what they knew, especially when experiencing resistance from others in practice, for example:

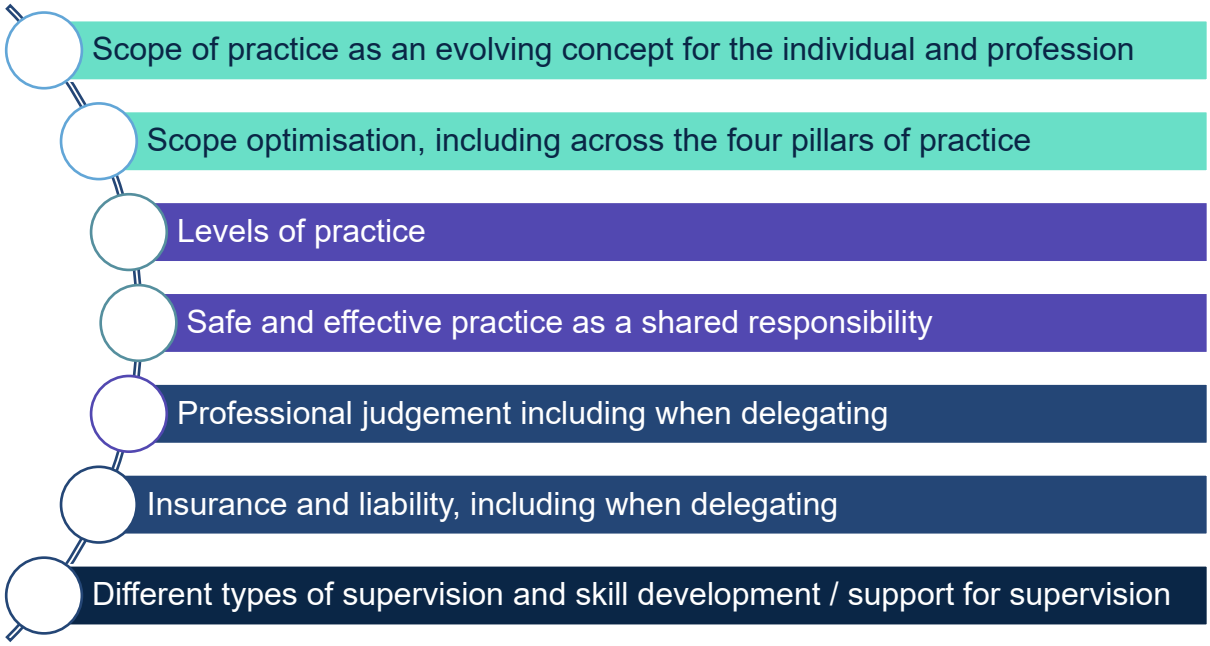
> "I was already confident and with a good understanding of the topic of supervision. For me [the value] was the confirmation as I find that there is a lack of knowledge around colleagues… and a lot of resistance."

These perspectives provide insight on how people viewed scope of practice, supervision and delegation within the landscape of advanced levels of practice. The outcomes helped to shape the resources that we developed following the webinar series.

Underlying areas for continued learning and support

This project has not sat in isolation and is part of our continued work to respond proportionately to workforce development for experienced registrants. For example, the HCPC commissioned research into advanced practice in 2021 and subsequently shared the outcome of that work within the system.[2] Based on the findings of the research, which were considered and accepted by the HCPC Council,[3] 'there is no clear evidence…that additional regulation of advanced level of practice is needed, or desired, to protect the public'.[4] However, the research identified several areas where registrants and their managers could benefit from more support to meet regulatory standards.

This project built on the results from the research. Alongside the research key themes, our analysis of the webinar data sets shows that collectively we need to continue to support registrants and managers in their understanding of the following areas:



[2] HCPC and University of Bradford (2021) Advanced Practice Research Report. https://www.hcpc-uk.org/resources/policy/advanced-practice-full-research-report/.

[3] On 1 July 2021, the HCPC Council discussed the review of regulation of advanced practice. The Council accepted the findings of the review.

[4] HCPC and University of Bradford (2021) Advanced Practice Research Report, 6. https://www.hcpc-uk.org/resources/policy/advanced-practice-full-research-report/.

Based on these conclusions, we identified six different types of resources to support understanding from a regulatory perspective:

1. New standalone and downloadable resources
2. New webpages
3. Revisions to text on existing webpages
4. Additional content to add to existing webpages
5. Access to webinar recordings including a short video segment
6. Signposts to other places for guidance and resources, including from professional bodies.

The detailed descriptions for each set of resources include (Figure 3):

Figure 3: Resource category and description



As our new resources reinforce, safe and effective practice is a shared responsibility across our health and care systems. While some of the areas of support relate to the HCPC's standards, registrants need support from their employers and professional bodies including about their scope of practice and indemnity arrangements.

1.3 Conclusion

The aims for this project were met. The HCPC, working with the GOsC, has a contemporary understanding about the perceptions from multiple stakeholders on scope of practice, supervision and delegation at the advanced levels of practice. A wide range of resources have been co-created to provide support to registrants, managers and strategic leaders on the topics. Further work is required to embed the resources and their key messages into practice including by the regulators, professional bodies, health and care providers, universities and registrants to develop a shared understanding of the advanced levels of practice across the system.

Deeper project insights

The remainder of the report provides more details about the project, including the broader context relating to the advanced levels of practice. It provides insights and interpretations of the findings and makes recommendations for the next steps.

Deeper insights into the project will cover:

- The background and historical context of advanced levels of practice, including the four pillars of practice
- The HCPC's approach, as a multi-professional health and care regulator, to the advanced levels of practice
- The findings and emerging picture from this work
- The next steps.

2.1 Background and context for the project

Historical context of advanced levels of practice in the UK

The development of levels of practice for experienced healthcare professionals working in roles outside of medicine in the UK has its origins in the 1970s. The expansion of roles, predominantly in the nursing profession initially, came in response to changing population health needs and pressures on the medical workforce.[5]

In 1990, the first formal advanced practice education programme was established at the Royal College of Nursing providing a structured education pathway for advanced roles. This helped to shape early definitions of advanced practice within the UK.[6] Around the same time, advanced practice, as a single level of practice, continued to evolve within other professional groups including the allied health professions (AHPs).

In the 2010s and beyond, the four UK countries adopted more formalised frameworks including for AHPs. For example, the first edition of the Nursing, Midwifery and Allied Health Professions Career Development Framework by NHS Education Scotland was published in 2010, which sought to conceptualise a broader range of levels of practice including specialist, advanced and consultant.[7]

[5] Leary A, MacLaine K (2019) The evolution of advanced nursing practice: past, present and future. Nursing Times [online]; 115: 10, 18-19.

[6] Ibid.

[7] NHS Education Scotland (2025) The Nursing, Midwifery and Allied Health Professions Career Development Framework. NMAHP Development Framework.

Subsequent publications, across the four UK countries, have defined wider levels of practice as part of a career and workforce development trajectory. The wording for the levels of practice differs slightly across the UK countries – 'specialist' is used in Scotland[8] and Northern Ireland,[9] and in England[10] and Wales[11] the same level is described as 'enhanced'. The overall approaches across publications, including the descriptions of each level of practice, are closely aligned.

The majority of the national strategic work to define the levels has been situated within the health part of the system for professionals working within the national health services across the UK countries. The levels of practice are not an HCPC regulatory requirement, and this means that we do not set specific criteria for practising at these levels and registrants do not have their level of practice captured on their register entries. However, many professional bodies have adopted the structure within their professional development frameworks.[12] Therefore, the levels of practice, as a workforce structure, have the capacity to support a broader range of HCPC registrants when they are using their professional judgement to define and explain their scope of practice, when thinking about their own supervision requirements and when delegating to others.

Arguably the greatest attention has been paid to the advanced level, for example the multi-professional advanced practice framework was published in England in 2017 and revised in 2025.[13] However, recent work in England, has sought to develop apprenticeship schemas and model curricula for the enhanced level of practice[14] as well as publication of capabilities for the consultant level of practice.[15]

In the sector, the perceived benefits of the levels of practice are that they provide clear career progression, a standardised description of capabilities at each level, guide decisions on scope of practice, support safe skill development and enable better workforce planning.

It should be recognised that the work on levels of practice has primarily focused on nursing, midwifery and allied health professions. To date, the levels of practice are not used explicitly by all HCPC registrant professions in workforce planning. However, there is consistency in the way that scope of practice is defined as a regulatory requirement for all HCPC registrants working at all levels. For example, the HCPC standards of proficiency (last

[8] Ibid.

[9] Department of Health Northern Ireland (2019) Advanced AHP Practice Framework. Advanced AHP Practice Framework | Department of Health.

[10] NHS England - formerly Heath Education England (2022) The principles of enhanced level practice The Principles of Enhanced Level Practice

[11] Health Education and Improvement Wales (2023) Professional Framework for Enhanced, Advanced and Consultant Clinical Practice. Professional Framework for Enhanced, Advanced and Consultant Clinical Practice - HEIW.

[12] Resources designed for professional body members working across all sectors and settings including but not limited to social care, the justice sector, independent practice, the third sector, academia and more.

[13] NHS England (2025) Multi-professional framework for advanced practice. Multi-professional framework for advanced practice 2025 - Advanced Practice

[14] NHS England (2025) AHP enhanced practice – schemas and model curricula AHP enhanced practice | NHS England | Workforce, training and education

[15] NHS England (2023) Consultant-level practice capability and impact framework Consultant-level practice capability and impact framework - Advanced Practice

updated in 2023) require all registrants to work within the limits of knowledge, skills and experience and recognise that scope of practice may evolve with experience, as registrants advance in their careers to meet service user needs.

There are some recognised challenges with the levels of practice and how they are currently applied within the sector as part of an evolving workforce development programme. For example, there is a lack of consistency in how both roles and job titles are enacted at different levels of practice as well as variation in how these roles are used in different settings. Some roles are multiprofessional (in other words they can be taken on by suitably qualified professionals from a range of different professions) and may require exceptionally high levels of autonomy and specialisation when working with service users, such as the advanced clinical practitioner role. These roles should be seen for the value they can bring to service users and not as substitutes for other roles, including for doctors. Simultaneously, there are some advanced and consultant level roles where the scope of practice remains within the origin profession, for example a Consultant Physiotherapist in Frailty. Therefore, it is recognised that the wide range of roles and titles, alongside the variation in how the roles are deployed, can cause confusion to the public. Furthermore, there have been some recurring misconceptions in some discussions that people working at the advanced level of practice are not regulated. Both of these points of confusion needed to be addressed within the project in order to provide clarity from the HCPC as the largest multi-professional healthcare regulator.

For the purposes of this report and work, the HCPC refers to the three career development levels for experienced professionals (enhanced/specialist, advanced, consultant) collectively as the ‘advanced levels of practice’. This is based on contemporary workforce discussions which are likely to continue to evolve over time.

Historical context of the four pillars of practice

The four pillars of practice are a workforce structure defined as clinical practice, education, leadership and research, although there is variation in their descriptions including to reflect the many ‘non-clinical’ areas where some professions work. The ways in which professionals work across the four pillars will vary depending on the context of their role, their level of practice, the sector(s) they are working in, and the needs of their service users. At each level of practice, there is an expectation, emphasised in many professional body frameworks, that safe and effective practice requires health and care professionals to work across the four pillars of practice.

As with the levels of practice, the four pillars of practice are not new, originating from work in 1997[16] and subsequently adopted across the system. For example, the Royal College of Paramedics used the four pillars of practice in its own career framework in 2014.[17] Many other professional bodies have also aligned their profession-specific frameworks to the levels of practice and four pillars of practice over recent years (for example British and Irish

[16] Waters, A (2025) What are the four pillars of nursing? BMJ Health Careers What are the four pillars of nursing? | BMJ Health Careers

[17] Eaton, G and Broughton, W (2018) The Four Pillars: outlining and aligning our future Opinion. Journal Of Paramedic Practice - The Four Pillars: outlining and aligning our future.

Orthoptic Society 2025,[18] Chartered Society of Physiotherapy 2024,[19] Royal College of Speech and Language Therapists 2023).[20]

While not a regulatory requirement, there are benefits to using the four pillars of practice in strategic workforce development. The pillars provide a structure for holistic professional development, support the development of leadership skills, and reinforce person-centred care, including through the emphasis on research and service improvement.

From this brief overview, it is possible to see that the advanced levels of practice, in combination with the four pillars of practice, have evolved significantly in the last 35 years from localised innovations to nationally recognised, strategically important components of the UK healthcare workforce.[21]

Work across the system continues to shape the development of the different levels of practice to support registered professionals, individual professions and organisations. This is particularly in response to strategic drivers[22] that require more professionals in the system working at the advanced levels to support new models of service delivery, for example care that is closer to home, that effectively utilises technology and that focuses on prevention.

Regulators are alive to the fact that workforce development is evolving to meet the changing and often complex needs of the people that registrants serve across the UK. Therefore, in order to protect the public, regulators need to be part of the broader workforce development conversations to support the application of standards into practice. This project was developed in part as a response to continued engagement in that space.

[18] British and Irish Orthoptic Society (2025) Professional Development Framework Professional Development Framework: Guidance for the orthoptic workforce

[19] The Chartered Society of Physiotherapy (2024) Career Framework The CSP Career Framework 2024

[20] Royal College of Speech and Language Therapists (2023) Professional Development Framework Professional Development Framework | RCSLT

[21] Delagarde, V., Castro-Sanchez, E. and Hurley, G (2022). Development of advanced clinical practice in England: historical origins and future perspectives. *Revue de la Pratique avancée*, 3(4), pp. 219-223.

[22] See, for example, the NHS Long Term Workforce Plan (2023): NHS England » NHS Long Term Workforce Plan.

2.2 Advanced levels of practice and the HCPC

The HCPC is the regulator of 15 health and care professions, established by the Health Professions Order 2001. Our statutory role is to:

- Protect, promote and maintain the health and safety of the public
- Promote and maintain public confidence in the professions we regulate
- Promote and maintain professional standards and conduct for members of those professions[23] (see Appendix A for more information)

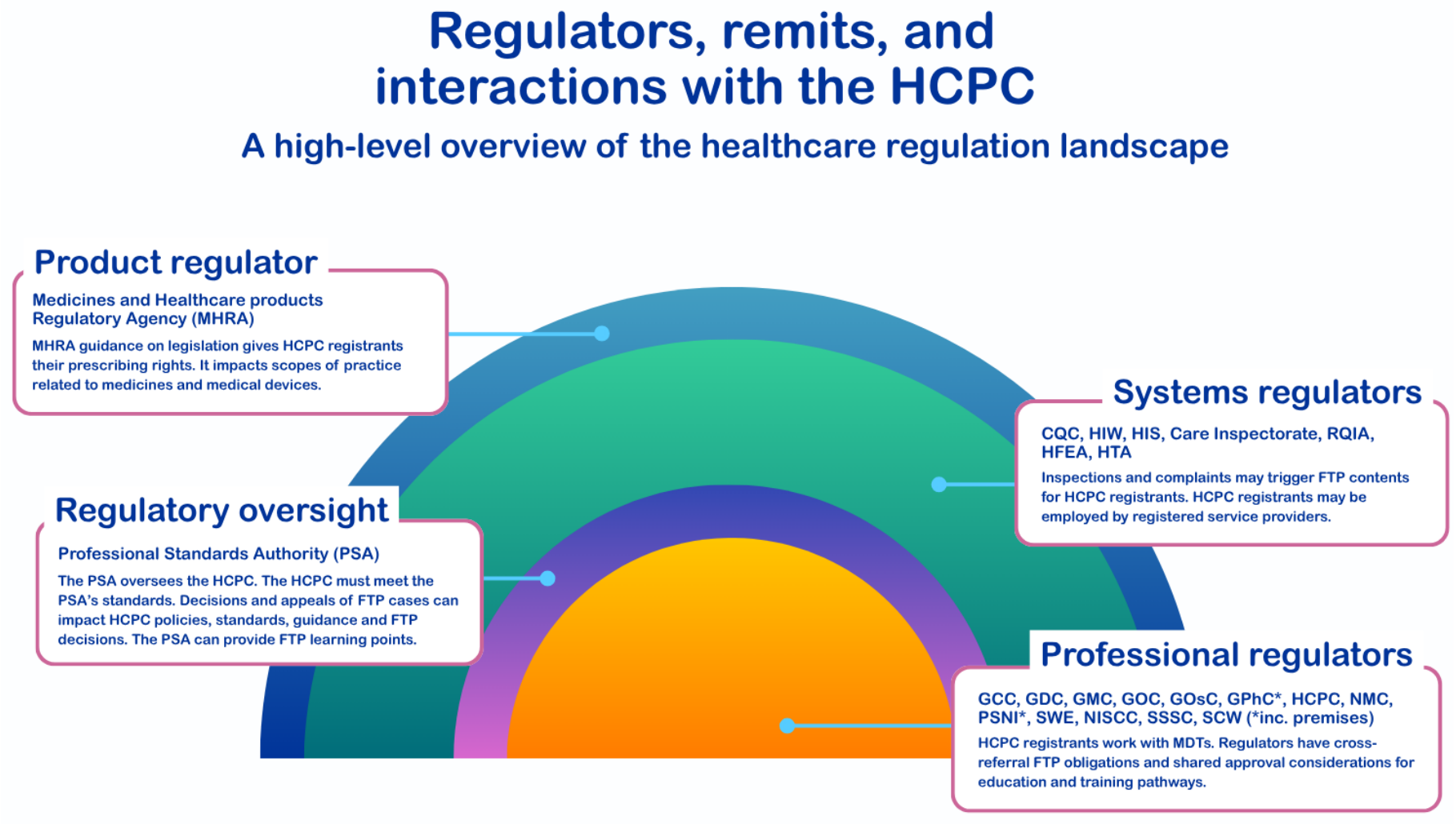
We do this by:

- Setting standards for professionals' education and training and practice
- Approving programmes which professionals must complete to register with us
- Keeping a register of professionals, known as 'registrants,' who meet our standards
- Taking action if professionals on our Register do not meet our standards

The HCPC is one of nine professional regulators overseen by the Professional Standards Authority for Health and Social Care (PSA) and sits within an even wider landscape of healthcare regulators which includes systems regulators like the Care Quality Commission (CQC), Healthcare Inspectorate Wales (HIW), Healthcare Improvement Scotland (HIS), the Regulation and Quality Improvement Authority (RQIA), and the product regulator the Medicines and Healthcare Products Regulatory Agency (MHRA) (see Figure 4). We work closely with other regulators on cross-cutting public safety concerns, including fitness to practise cases, and when issues impacting our registrants intersect with the remit of other regulators.

[23] Article 3(4) and (4A) of the Health Professions Order (2001) states that the HCPC's over-arching objective is to protect the public and sets out how this objective should be pursued.

Figure 4: Tiers of regulation in UK healthcare (HCPC, 2026)



As the UK's largest multi-professional regulator, the HCPC sets standards for over 350,000 professionals working across 15 different professions, in every part of the UK. Our registrants work across the health and care system in a variety of roles delivering care to individuals every day, in a range of settings, including from clinical practice to academia, research and management. This means that our registrants often interact and engage with other regulated healthcare professionals and regulatory bodies in their work, particularly as they become more experienced in their fields and if they move into advanced levels of practice.

HCPC registrants are fully regulated at all levels of practice. All registrants must meet the standards of conduct, performance and ethics, the standards for continuing professional development, and the standards of proficiency that are relevant to their scope of practice. The HCPC's standards are robust and outcome-focused rather than prescriptive. This means that registrants are able to continue meeting their HCPC standards in a wide range of roles.

Like other regulators, the HCPC does not set or limit a registrant's scope of practice. Regardless of their role, a registrant must use their professional judgement when making decisions and only undertake activities which are within their knowledge, skills and experience.[24] All registrants are considered autonomous at the point of entry to the Register, and the level of autonomy will grow over time. For example, professionals working at the advanced level are expected to exercise significant autonomy, judgement and responsibility in their roles. All registrants must be able to justify their decisions and actions.

In recent years, there has been a focus in the healthcare regulation environment on perceived additional risks at the advanced level (but not for enhanced or consultant levels of practice). Research commissioned by the HCPC from the University of Bradford concluded that 'no evidence was presented from any participant group that advanced level practice presents a greater risk to the public'.[25] Nevertheless, these perceived risks have generated a number of conversations across the multiprofessional workforce about how best to ensure public safety.

We recognise that while the HCPC and other regulators have not identified a need for additional regulation for their registrants, the Nursing and Midwifery Council (NMC) is currently undertaking work that will lead to the additional regulation for advanced nursing and midwifery practice. This does not mean that one group of registrants will be safer than another, rather different professions and settings will always have their own requirements. It is appropriate that each regulator takes decisions based on their own assessment to achieve the same end goal – public safety.

What is clear is that professional regulation is part of the broader safety picture, but on its own does not guarantee safe practice, including at advanced levels of practice. Safe and

[24] Scope of practice | The HCPC. Accessed 17 February 2026.

[25] HCPC and University of Bradford (2021) Advanced Practice Research Report. https://www.hcpc-uk.org/resources/policy/advanced-practice-full-research-report/.

effective practice is a shared responsibility between the registrant / professional, the regulator, the employing organisation (where applicable) and the professional body, all working within a legal framework.

Additional regulation has not been deemed necessary for HCPC registrants advancing in their careers at the current time, as registrants working at all levels of practice are fully regulated. Nevertheless, we recognise there is a need to continue to support registrants working at or towards the advanced levels of practice and their multiprofessional managers. We therefore designed a response based on the right-touch regulation approach from the PSA.[3] This approach involves looking at the level of risk of harm and choosing the most effective and proportionate response, whether through regulation or other actions. The actions in this instance can be framed within the aims of the project, namely:

1. To understand perceptions from multiple stakeholders on scope of practice, delegation and supervision at the advanced levels of practice.
2. To provide regulatory support to registrants, managers and strategic leaders on the following topics at the advanced levels of practice:
    a. Scope of practice
    b. Scope optimisation
    c. Delegation
    d. Supervision
3. To ensure the provision of multi-media resources to support registrants, managers and strategic leaders to apply regulatory standards at the advanced levels of practice.

2.3 Perceptions and understandings

Thus far, the report has set out the context, contemporaneous and historical, for the HCPC's work through this project on the advanced levels of practice. The rest of the report will unpack the project itself, including our data collection and analysis, and where our conclusions lead us.

Throughout the course of the project, we conducted extensive stakeholder engagement to better understand perceptions on scope of practice, supervision and delegation at advanced levels of practice across the sector.

The project was in two phases:

1. Design, deliver and evaluate a webinar series focusing on scope of practice, supervision and delegation, for two audiences – registrants working at or towards the advanced levels of practice and managers and strategic leaders supporting workforce development.
2. Use the intelligence from the webinar series to identify the areas requiring further support and design and co-create a suite of multi-media resources for registrants and managers.

To inform the content of the webinars, the stakeholder engagement included:

- 37 listening conversations with professional bodies, unions, national and regional strategic leaders (across the four UK countries), academics delivering post-graduate education and research, and registrants
- 10 multiprofessional meetings (across the UK)
- 400 questions posed by registrants and their managers registering for the webinars.

To inform the content of the subsequent resources, we drew from the stakeholder engagement above and the following sources of data collected during the webinars:

- 3,393 total submissions to voting sessions from attendees (with 11,519 individual votes cast overall by respondents)
- 889 end-of-webinar ratings and actions submitted by webinar attendees
- 172 post-webinar evaluation forms completed by webinar attendees

Stakeholder engagement continued throughout the project including further invitations to discuss our work with multiprofessional colleagues. Additional stakeholder engagement included:

- 5 one-to-one meetings including registrant practitioners and academics
- 11 meetings with professional bodies, the NMC, national organisations (e.g. NHS Education Scotland), the Department of Health and Social Care, NHS Employers and the regional Northeast London AHP Faculty

- 2 presentations at the HCPC Professional Bodies Forum
- 1 presentation to the HCPC Education and Training Committee
- 1 presentation to over 700 registrants as part of HCPC CPD week
- 1 additional meeting (post-webinar delivery) with the Deputy Chief Allied Health Professions Officers from the four UK nations
- attendance and panel discussion at the in-person Advanced Practice Leads Conference, attended by approximately 150 Advanced Practice Leads from NHS Trusts.

Over the 12-month project duration, we had over **4,923 individual interactions** with key stakeholders to inform our work. Each of these interactions was analysed and considered in the course of developing the project outputs.

A point of note, in the data gathering phases, processes were put in place to enhance the trustworthiness of the data including anonymous voting, separating the questions posed on the registration form from their author, and analytical support from a colleague outside the project team to limit bias in interpretation. However, there will always be limitations with any methodologies, and these must be acknowledged for example, the risk of socially desirable answering, especially when the questions are being posed by the regulator.

Collaboration to inform the webinar content

As outlined above, we conducted 37 conversations, as a convenience sample, to inform the webinar content with representatives from professional bodies and unions, national and regional strategic leaders (across the four UK countries), academics delivering post-graduate education and research, and registrants. Each conversation lasted between 30-60 minutes and included exploring perceptions on the following questions:

From your perspective, at the advanced levels of practice, what do you see as the:

- Current priorities for scope of practice?
- Current priorities for delegation and supervision?
- Key content for the HCPC and the GOsC to consider in the webinar series within their remit as regulators.

Opportunities arose for 10 additional multiprofessional group meetings and presentations at events, for example the Advanced Practice Leads group (an informal group of advanced practice leads in NHS Trusts), the AHP Faculty Network and an event hosted by Skills for Care focusing on delegated healthcare activities.

Contemporary notes were made during and after each conversation and meeting. The themes that emerged from our preliminary stakeholder engagement and sector conversations informed the development of content for the webinars (Table 1). For example, we based the voting sessions during each of the webinars on specific topics to gain a deeper

and broader understanding of these themes from registrants and managers who participated. A summary of the webinar content is presented below to provide insights into the current priorities about the topics and the content recommended by stakeholders during our initial stakeholder engagement process.

Table 1: Summary of stakeholder engagement discussion topics

Broader topics relevant to advanced levels of practice	Scope of practice topics	Supervision topics	Delegation topics
The remit of the healthcare regulator	What the standards say about scope of practice	What the standards say about supervision	What the standards say about delegation
The broad definition of service user	Scope of practice as an evolving process	Supervision as a core component to maintain safe and effective practice	Delegation to meet service user needs
Service user perspectives of advanced practitioners	Individual and profession's scope of practice	Different types of supervision	Delegation within teams and across organisations
Four UK countries statement on Advanced Practice from the Chief Allied Health Professions Officers[26]	Scope optimisation – making the best use of the workforce	What supervision is not / different types of professional development support	Delegation as a relational activity
Workforce levels of practice	Four pillars of practice	Key characteristics of effective supervision[27]	Universal, targeted, specialist concept
Novice to expert	Scope of practice: specialist to generalist	Organisational governance	Questions to guide professional judgement

[26] Chief Allied Health Professions Officers (2024) Statement on Advanced Practice from the Chief Allied Health Professions Officers in each of the four UK countries. Four country AP statement Oct 2024

[27] Key characteristics of effective supervision | The HCPC

Resources from professional bodies including career development frameworks	Scope of practice and professional judgement	Multiprofessional supervision	Delegation and insurance
Multiprofessional CPD Principles[28]	Scope of practice and CPD		
Safe and effective practice as a shared responsibility / Roles in the system to support	Professional indemnity arrangements		

Additional data-gathering to inform the resource development process

The interactive design of the webinars enabled them to function as an information gathering tool through the registration form, a post-webinar evaluation form, and through sections within the webinars themselves where participants were asked to vote, post questions and share one action as an outcome from the webinar learning.

Alongside the data from the conversations to inform the webinar content, the following data sources from the webinars subsequently informed the resource development plan:

- **400** questions posed by people registering for the webinars
- Interactive elements from the webinars including voting sessions (n=between **471**–**579** votes and 2–5 questions posed per session), questions submitted, and **889** planned actions submitted
- **172** post-webinar evaluations.

Data snapshot from webinar voting sessions

Our webinars brought together thousands of registrants working at or towards the advanced levels of practice as well as the professionals who manage them. This presented a unique opportunity to collect data on what these professionals thought about working at the advanced levels and about meeting their standards. During each of the eight webinars, we conducted quantitative voting sessions which asked participants to rate their level of agreement to belief statements on scope of practice, delegation and supervision.

[28] CPD is not just a 'nice to have': Why everyone in the system should support CPD | The HCPC

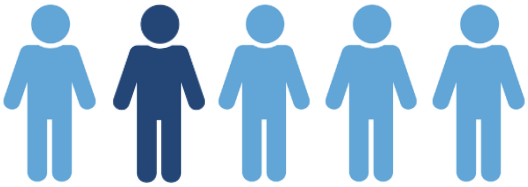
The data collected from these voting sessions provided key insights into the challenges and opportunities facing registrants working at advanced levels of practice and their managers. These insights are set out below.

For the full set of data, see Appendix B.

93%

93% of both registrants and managers feel confident that their colleagues understand that the knowledge, skills and capabilities of the person being delegated to must be carefully considered.

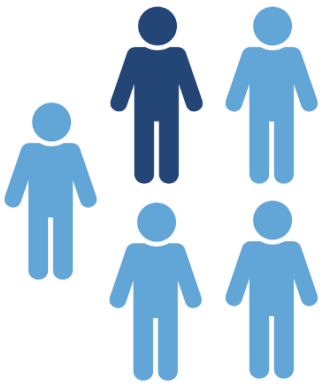
Nearly 1 in 5 registrants and managers indicated that, in their own supervision, space is not provided to support them to reflect on and identify areas for CPD.



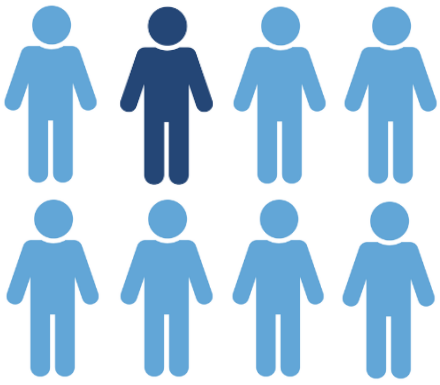
?

The majority of both registrants and managers did not believe that registrants are confident in their understanding of professional indemnity insurance and their employer's vicarious liability within the context of delegating activities.

Registrants were slightly less confident than managers that colleagues understand how scope of practice evolved with time, experience and additional qualifications.



Over 1 in 5 managers and 1 in 8 registrants said it is not widely understood that registrants must know their profession's scope of practice across the four pillars of practice to maintain safe and effective practice.



95%

94%

95% of registrants and 94% of managers feel confident that their colleagues in the health and care sector understand that registrants must know their individual scope of practice to maintain safe and effective practice.

At the end of each webinar, we asked attendees to complete a short evaluation and submit one action that they would undertake following the session.

The webinars were well-received by registrants and managers, with attendees giving the series over four out of five stars on average for being both informative and relevant to their practice. Some of the areas that participants highlighted as particularly interesting or useful are:

- Providing a clear explanation of the concepts of individual and professions' scope of practice, delegation and supervision particularly how they apply at advanced levels of practice and in real-life situations

> The most interesting and useful part of the presentation was gaining a clearer understanding of how to apply the HCPC scope of practice framework to real-life clinical situations. I found it particularly helpful to learn how to recognise when a task is within my competence and when to appropriately refer or seek guidance, which reinforced the importance of accountability and safe professional boundaries.

- Highlighting both similarities and differences between different professions (both AHP and non-AHP) and levels of practice

> I am a doctor supervising an ACP trainee so it was good to see the differences and similarities between doctors and other clinicians.

- Clarifying the responsibilities of both registrants and employers to ensure safe practice, including insurance and liability

> The webinar provided useful insights that made me think more critically about how I manage my responsibilities and delegate tasks.

Recognising that scope of practice changes over time so what may be considered safe practice can vary.

> ‘I think seeing the career progression and skill attainment as less linear was empowering when considering my own career journey to date. I also appreciated that some skills can ebb and flow relevant to the context and environment your find yourself as a clinician.’

Actions from participants

At the end of each webinar (but within the time allocated for attendance), participants were invited to share an action that was their next logical step and something that could be achieved within the next two weeks. Many chose to share their actions (n=889), and we grouped them into the following most common actions:

1. Use the webinar slides to inform staff development sessions
2. Review the additional resources shared during the webinars including for supervision and delegation
3. Review the content and availability of CPD opportunities within my service
4. Embed the webinar content into professional development reviews / appraisals
5. Use content to peer-advise managers and staff on advanced levels of practice and direct staff and teams to webinar resources including strategic leaders within their organisations
6. Use the webinar materials to ask managers for better CPD opportunities to develop activities linked to advanced levels of practice
7. Use the webinar materials to support registrants to be confident and develop their knowledge and skills to be effective supervisees
8. Identify ways to build the resources into educational content
9. Assess which resources can be used for advanced levels of practice within the context of multiprofessional teams
10. Review the activities being undertaken at work, at the advanced levels, and make explicit links between them, their scope of practice and job descriptions.

> Since the webinar, I've made a conscious effort to check my understanding of any task I am delegated and to ask for clarification when needed, which has helped me feel more confident in my role.

> I have already shared key content with B7 [Band 7] leaders in my team to help them to effectively plan work tasks across the team members considering safe scope of practice.

> Within the next two weeks, I plan to review the HCPC Standards of Proficiency and map them against my current scope of practice, identifying any areas where I need further development or clarification to ensure safe and effective practice.

The actions submitted by webinar attendees demonstrate the relevance of the webinar content to HCPC registrants and their managers and provide further insights into the areas that the workforce need continued support on.

2.4 Emerging picture

One of the goals of this project was to understand the barriers that registrants working at the advanced levels of practice face in continuing to meet their regulatory requirements and to practise safely and effectively. The data and insights we collected prior to and throughout the webinar series bring to light some of the gaps in knowledge and confidence within the workforce which serve as barriers or perceived barriers to safe and effective practice.

This next section provides our analysis of the data, including the needs we identified in the process of this project and how we are addressing those needs through the development of resources. While the HCPC's resources will address some of the needs identified by participants, it remains clear that a system-wide approach is still required to ensure safe and effective practice. We would recommend employers, managers, higher education institutions and professional bodies reflect on the role they can play in addressing these needs as well.

Evidence-informed resource development

Our analysis of all the data sets showed that all of us working across the system need to continue to support registrants and managers with the following topics (see Table 2):

1. Scope of practice, as an evolving concept for the individual and profession
2. Scope optimisation (including across the four pillars)
3. Levels of practice
4. Safe and effective practice as a shared responsibility
5. Professional judgement, including when delegating
6. Insurance and liability, including when delegating
7. Different types of supervision
8. Skill development and support for supervision

To address these topics, from a regulatory perspective, we developed six different types of resources (see Table 2):

1. New downloads
2. New webpages
3. Additional content for webpages
4. Uplifts to existing webpages
5. Access to webinar recordings
6. Signposts to resources from others

The next table maps the different resources to the topic(s) they are seeking to address:

Table 1: Matrix of project resources by key learning topic

Learning topic / Resource		Scope of practice: an evolving concept (individual and profession)	Scope optimisation (inc. across the four pillars)	Levels of practice	Safe and effective practice as a shared responsibility	Professional judgement including when delegating	Insurance and liability, including when delegating	Different types of supervision	Skill development and support for supervision
New downloads	Shared Update on the regulation of advanced levels of practice								
	Reflective template to define and explain scope of practice								
New web-pages	Advanced levels of practice								
	Delegation								
New content on webpages	Personas								
	Glossary of key terms								
	Project insights report								
	Blog post								
	Frequently asked questions								
Uplifts to existing webpages	Employer hub								
	CPD pages								
	Scope of practice								
	Supervision								
	Professional indemnity								
	Professional bodies								
Access to webinar recordings	Original webinar recordings								
	Video of segment on levels of practice								
	Slides on scope of practice, supervision and delegation								
Signposts to other resources	Career development frameworks from professional bodies								
	Guidance from national organisations across sectors								

Each of the resources that we developed as part of this project were informed by the data we collected and the challenges and opportunities we identified throughout our work. We collaborated with colleagues across the system throughout the development process, for example for the practical scenarios in the reflective template. As evidenced by the table above, we carefully developed each resource to address the challenges and areas for continued support in a variety of ways through multiple resources. By layering content related to these areas through multiple resources and in different media, we hope to maximise the impact of this work on the sector and improve confidence among registrants working at or towards advanced levels of practice and their managers.

A critical exploration of the eight topics – learning gaps

There were eight themes that emerged from our work as areas requiring additional learning and support, and this section will summarise what our work revealed about each one. The information was woven into the subsequent resources we developed, and we will direct readers to some of those specific resources.

1. *Scope of practice: as an evolving concept for the individual and profession*

Nearly 10% of registrants and 6% of managers disagreed with the statement:

> I believe it is widely understood that an individual's scope of practice evolves with time, experience, additional qualifications and/or when they move job roles and/or sectors.

Furthermore, 8% of registrants and 10% of managers disagreed with the statement:

> I believe it is widely understood that professional bodies help shape the scope of practice for specific professions informed by standards set by the regulator.

In addition, feedback from strategic leaders during the resource drafting process particularly welcomed the inclusion of the evolutionary nature of scope of practice to help people to clarify their understanding.

In combination, these responses suggest that further work on the nature of scope of practice would be of benefit, especially as this was a strong theme to emerge from the stakeholder engagement discussions as well.

The HCPC standards of conduct, performance and ethics state that:

> 3.1 You [the registrant] must only practise in the areas where you have the **appropriate knowledge, skills and experience** to meet the needs of a service user safely and effectively
>
> 3.2 You [the registrant] must undertake **additional training** to update your knowledge, skills and experience if you wish to widen your scope of practice
>
> 3.3 You [the registrant] must refer a service user to an appropriate practitioner if the care, treatment or other services they need are beyond your scope of practice. This person must hold the appropriate knowledge, skills and experience to meet the needs of the service user safely and effectively

Further guidance on the HCPC website states that scope of practice is also shaped by a number of factors including job role, work setting, the generally accepted scope of their profession, legal limitations and indemnity insurance. As the regulator, we do not set a definitive list of activities registrants can undertake. Therefore each registrant must use their professional judgement to determine whether specific activities are within their scope of practice and whether they need additional training or support to undertake them safely and effectively.

Recognising that further information would be of benefit to professionals working at or towards the advanced levels of practice, we worked with the GOsC to produce two key resources.

The first is a reflective template to support registrants to define and explain their scope of practice. Colleagues, including from practice and professional bodies, supported the development of interactive scenarios within the template for registrants to work through to reflect on their individual and profession scope of practice. This resource helps registrants and their managers to be intentional about what activities can reasonably fall into the scope of a registrant and what additional training or support may be needed to undertake them safely and effectively.

The second resource is a Shared Update on the regulation of advanced levels of practice. In this Update, there is a section that draws on contemporary evidence to discuss the two inter-related parts to scope of practice – individual and profession. It also describes how the former may grow beyond the generally accepted boundaries of the origin profession to meet service user needs but needs to be done so with intention and oversight.

2. Scope optimisation (including across the four pillars)

Voting patterns from the webinars revealed that 14% of registrants and 22% of managers disagreed or strongly disagreed with the following statement:

> I believe it is widely understood that registrants must know their profession's scope of practice across the four pillars of practice to maintain safe and effective practice.

This suggested that registrants would benefit from further resources to make the links between scope of practice, the four pillars of practice and how to align CPD / professional portfolio activities to both. Many of the actions that participants pledged at the end of the webinars also indicated that they were keen to review and align their CPD to their scope of practice, including across teams.

We created new content on the HCPC webpages for both registrants and managers (including via the Employer Hub). A collection of small presentations is available for download, which include reflective questions that support teams to engage in conversations about scope optimisation, the four pillars of practice and CPD.

We developed a series of personas to demonstrate the interplay of these concepts at advanced levels of practice. One persona introduces us to Ola, a speech and language therapist working in a school for young people and describes how he works across the four pillars of practice and aligns his CPD activities accordingly.

These resources were developed with colleagues across the system and may also be used to help learners within post-registration education as we collectively continue to support professionals to make the most of their time, knowledge and skills to benefit the people they serve.

3. Levels of practice

The stakeholder engagement discussions highlighted there is much work needed to support the understanding of the different levels of practice, recognising the reality that there are not universally accepted definitions for each level (with the exception of the level of advanced practice) and that there are differences in terminology to describe them.

While the regulators do not set specific requirements based on an individual's level of practice, a better understanding of the levels can support registrants when using their professional judgement to define and explain their individual scope of practice, alongside identifying areas for ongoing learning. As this segment of the webinar was particularly well-received, we re-recorded it as a short stand-alone resource, using one of the newly developed graphics. Within the first ten days of publishing the short video, it had received over 530 views. We also developed a new webpage 'What are advanced levels of practice?' with downloadable graphics.

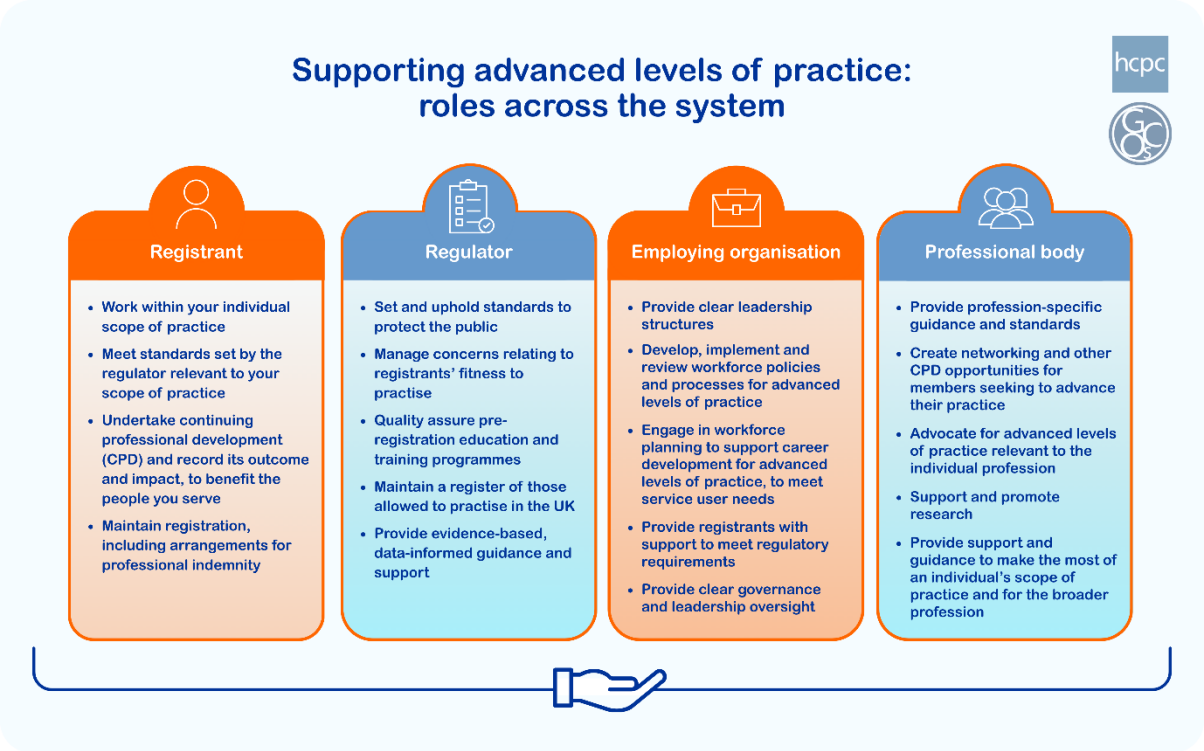
We also wove information on the levels of practice into other resources such as the Shared Update and the reflective template, alongside signposts to other resources including the career / professional development frameworks from professional bodies who also use the concept.

4. Safe and effective practice as a shared responsibility

The fourth topic that emerged as an area for further learning was the need to reinforce that safe and effective practice is a shared responsibility. Regulators play a critical role in ensuring registrants meet their standards, but it is important to clarify the roles of different people and organisations within the system in ensuring safe and effective practice. This topic emerged from the stakeholder discussions and the questions asked at registration and during the webinars.

In response to this, we developed two standalone graphics, versions of which we made into posters with some explanatory context. The first graphic (Figure 5) speaks to roles across the system to support advanced levels of practice (a poster version is also available):

Figure 5: Supporting advanced levels of practice: roles across the system graphic



The second graphic (Figure 6) places advanced levels of practice back into the wider workforce to reinforce that safe and effective practice requires a shared responsibility at all levels of practice (a poster version is also available):

Figure 6: Safe and effective: a shared directive graphic



The key messages in the graphics are also reinforced in the Shared Update, the recorded webinars and in the downloadable slide-decks among other places. All of these resources can be accessed via a newly developed landing page dedicated to advanced levels of practice.

5. *Professional judgement, including when delegating*

Our work revealed a need to further clarify registrants' responsibility to use their professional judgement when delegating tasks. Conversations with professional bodies brought forward frequently asked questions from advisors that registrants working at advanced levels of practice are sometimes unclear about when they can delegate tasks.

The HCPC standards of conduct, performance and ethics related to delegation state that:

> 4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.
>
> 4.2 You must continue to provide appropriate supervision and support to those you delegate work to.

We expect registrants to use their professional judgement to determine whether or not someone has the knowledge, skills and experience to take on delegated work.

We developed a new webpage on delegation which outlines the key responsibilities and benefits of safe and effective delegation. The webpage offers practical questions to support registrants when using their professional judgement to meet HCPC standards.

We also developed a persona which demonstrates how a registrant might use their professional judgment to delegate tasks. This follows a hypothetical registrant, Dylan, who delegates tasks to support workers and carers which sets out the various resources and principles that Dylan considers when exercising his professional judgment in delegating.

Our work to clarify the role of professional judgement in decision-making for registrants working at advanced levels of practice, including when delegating, aligns with resources and guidance from professional bodies and other organisations working on this topic, for example Skills for Care.

6. Insurance and liability when delegating

The voting sessions throughout the webinars highlighted that both registrants and managers lack confidence in the understanding of professional indemnity insurance and their employer's vicarious liability within the context of delegating activities. Out of all of the voting sessions, the questions related to professional indemnity and vicarious liability elicited the highest level of disagreement and concern by respondents.

We recognise that professional indemnity insurance and employer vicarious liability insurance are complex and highly individualised legal arrangements that can be difficult to understand. We also know that much of the detail for these arrangements sits outside of the remit of the regulator. While the HCPC requires registrants to have appropriate indemnity arrangements, we do not set specific requirements or provide advice on indemnity arrangements. Nevertheless, our findings identified that we could set out our expectations related to indemnity arrangements more clearly, and signpost registrants to other sources of information where appropriate.

We revised our webpage on professional indemnity to clearly set out that if a registrants' scope of practice is changing, they will need to contact their insurer to make sure that their new scope of practice is appropriately covered. We also added an additional FAQ to our webpage to further explain that if a registrant's individual scope of practice is expanding, they will need to consider whether or not they have appropriate cover to take on those new activities. We made clear throughout the webpage that registrants can get more individualised guidance and support on professional indemnity arrangements from their professional body, trade union, employer (if they have one) or their insurer.

7. Different types of supervision

We received a number of questions posed during the course of the webinars regarding supervision of experienced practitioners. In webinar voting sessions, attendees were asked to rate their agreement that:

> Different types of supervision are widely known.

Respondents indicated moderate levels of confusion about different types of supervision: 29% of registrants and 21% of managers disagreed or strongly disagreed that different types of supervision are widely known. We also received a number of questions before and during the webinar about line managing individuals from other professions with specific skills and capabilities (such as prescribing rights).

Supervision is essential to support continuing professional development and plays a key part in ensuring good practice and high-quality care. Professionals at all levels of their career benefit from supervision, as it provides an important opportunity to reflect on professional practice, including what went well, what could have gone better and where improvements could be made.

We updated our existing webpages on supervision to clarify:

- the differences between practice / clinical supervision, professional supervision, operational / line management supervision, and educational supervision, and
- supervision at advanced levels of practice.

Throughout our supervision webpages, we emphasise that supervisors and supervisees do not have to be from the same origin profession as long as the supervisor has the knowledge, skills and experience to provide the needed support.

We also developed personas that provide examples of registrants working at advanced levels of practice engaging with supervision. These examples demonstrate some of the key principles that registrants must consider when they are supervising others or being supervised.

8. Skill development and support for supervision

Voting data from the webinars suggests that registrants and their managers alike may need more support in supervision to reflect on CPD. 18% of registrants and 20% of managers disagreed or strongly disagreed that:

> In my own supervision, space is provided to support me to reflect on and identify areas for continuing professional development.

This data aligns with feedback we received from professional bodies and qualitative data from the webinar series that some registrants and their managers do not always understand the role of supervision in career development.

In line with the webpage updates described above, on our supervision webpages, we further clarified:

- the role of the employer in supporting supervision, including providing space in supervision to discuss CPD,
- the connections between supervision and CPD, and
- the impact of supervision on career development.

Our personas on advanced levels of practice also highlight the role of supervision in career development.

The quantitative and qualitative data gathered and analysed throughout the course of the project enabled us to develop a robust set of resources to further support registrants working at advanced levels of practice and their managers. We were also able to improve some of our existing resources and information based on the needs that we identified throughout this project.

This section has provided an overview of the eight topics we focused on during the resource development phase. The next section discusses the work that needs to continue beyond the parameters of this project.

2.4 The future of advanced levels of practice

With a new suite of resources, developed through a collaborative and robust approach, the next step is to socialise and embed them into practice. Strong national leadership, employer guidance and complementary workforce frameworks are required alongside the work of the regulators. Therefore, there is an opportunity for the resources to be used by many people and organisations across the system including in different settings, in post-registration education learning materials, by registrants, managers and strategic leaders.

Our hope is that these resources provide a robust and effective regulatory contribution to the on-going nuanced, informed and wide-ranging conversations that need to continue. With how services are delivered changing faster than ever, the adoption of new technologies and a focus on preventative health measures, the collective focus must be what matters: making the most of the whole health and care workforce, including those working at the advanced levels of practice, to deliver high-quality services for the people and communities we serve across all settings and sectors.

Future opportunities

HCPC will continue to play its role in the system including by reviewing our standards as part of cyclical review processes. We will continue to support registrants and managers in applying our existing standards to support safe and effective practice. We will do this for example through the promotion of these resources, through the work of our policy team and professional liaison service, and through cross-regulatory engagement.

Proactive communication is needed across the system, from regulators, professional bodies and organisations to understand and address the needs of different professions, so we can develop a more detailed understanding of what the advanced levels of practice look like for different roles, settings and professions. Part of this is the need for continued discussions to further our understanding of individual and profession scope of practice as this will continue to evolve.

Conclusion

The aims of the project were to understand the perceptions of and provide regulatory support on scope of practice, delegation and supervision at advanced levels of practice, including through the development of multi-media resources. The target audiences for the project were registrants working at or towards advanced levels of practice, their managers and strategic leaders in the health and care sector.

All of the aims of the project were met through a process of collaboration with colleagues across the system to understand the multiple perceptions and subsequently provide support to registrants, managers and strategic leaders. The support has taken multiple forms. Firstly, a set of live webinars, which were recorded and then made available online. Secondly, the development of resources including new content such as the Shared Update on the regulation of the advanced levels of practice and a Reflective template to define and explain your scope of practice – both co-created with the GOsC – and the development of new webpages and uplifts to existing webpages to ensure contemporary messaging and provide further clarity (see Table 2).

3.1 Summary of learnings

Our work throughout the project, through extensive stakeholder engagement and data collection, sheds further light on the challenges and opportunities facing experienced HCPC registrants working at advanced levels of practice. While there is nervousness surrounding some of the sector discussions on the singular advanced practice level and proposed additional regulation for nurses and midwives, at the HCPC we are confident that our registrants working at all levels of practice are fully regulated and well-equipped to take on the ever-changing complexities of the healthcare sector in the UK.

As we have set out throughout this report, our work unveiled some areas of confusion and uncertainty regarding registrants working at advanced levels of practice. We found that registrants and managers need more support on topics relating to scope of practice, scope optimisation, levels of practice, delegation, professional indemnity insurance, and supervision.

Our subsequent work to develop resources and improve existing information available to our registrants, including those working at advanced levels of practice, directly responds to the identified areas of confusion. The level of insight and engagement we received from stakeholders during this process demonstrates the commitment of colleagues across the sector to delivering, facilitating and ensuring safe and effective practice. We now have a suite of resources (see Table 2) that fill in gaps of knowledge and support areas of uncertainty for our registrants working at advanced levels of practice and their managers.

Working alongside professional bodies, trade unions, strategic leaders, and other regulators on this project continues to exemplify the importance of collaboration and co-production, as demonstrated by the Shared Update we published with the GOsC.

Our work also shed light on the volume and diversity of work occurring across the four UK countries and among professions to support registrants working at advanced levels of practice, and we are pleased to be a part of that growing body of knowledge and resource. We know there are opportunities for registrants working at advanced levels of practice to engage in tackling some of the biggest problems in health and care, and we hope that our registrants feel more empowered to take on these roles with the support created as part of this project. We hope that multiprofessional managers supporting the development of the workforce feel the same.

3.2 A request to support embedding the resources into practice

All the resources outlined in this report are now available on the HCPC website (see Table 2). Work is required to embed and evaluate their uptake in practice. We encourage and invite colleagues to:

1) access the resources that are relevant to their role
2) consider ways to share the resources with others, including people working towards or at the advanced levels of practice, operational managers, strategic leaders at local, regional and national levels, and academics working to support registrants working at or towards the advanced levels of practice
3) identify opportunities to align or embed these resources into your existing policies and processes.

3.3 What we learnt

The personal reflections from the Clinical Fellow working on the project were published via this blog and reflect some of the collective learning from the project team.

Afterword

The final drafting of this report was completed two months after the project formally finished and once the resources were published. This enabled us to gather early impact data to develop a sense of how people are engaging with the resources.

Overall, we have seen a very positive reception of the resources from across the workforce, including strong engagement with the content that we published.

- Between the months of March and April 2026, our two new downloadable resources, the Shared Update on advanced levels of practice and the reflective template to define and explain scope of practice were downloaded **426 and 710 times** respectively. This amounts to these resources being downloaded more than **six** (Shared Update) and **eleven times** (reflective template) **per day**.
- The new webpages and web content that we published have also received a high number of views across the two months. New webpages on advanced levels of practice received **1,420 views** collectively while the webpages on delegation received **240 views**.
- The personas we developed to demonstrate complex and cross-cutting topics in advanced levels of practice received **96 views** all together in the same time period.
- As of 15 May 2026, the webinar recordings from the webinar series had been viewed **1,883 times** all together, with the webinar on understanding your scope of practice at advanced levels of practice receiving **1,167 views** alone.
- We also saw significant increases in views to webpages that we amended to provide more content and clarity. For example, the webpage What is your scope of practice? saw a **26% increase** in views during March 2026 compared to February 2026. Meanwhile, the webpages related to supervision saw up to a **70% increase** in total views in March 2026 with the pages Guidance for supervisors and What is supervision? receiving the greatest percent increase in views from the previous month.

The engagement data set out above demonstrates the appetite across the workforce for greater support on scope of practice, supervision, and delegation for registrants working at or towards advanced levels of practice and their managers.

Furthermore, our work has been shared more broadly by other key stakeholders including professional bodies, operational and strategic leaders, employers, the Chief Allied Health Professions Officers and more. The number of organisations and professional bodies[29] that have shared our work with their members helps to ensure that HCPC registrants across the

[29] See for example, NHS Employers, Institute of Biomedical Science, NHS Networks, the Society of Radiographers, British Academy of Audiology, Royal College of Paramedics

UK feel supported and are receiving consistent, clear messaging across the board about safe and effective practice at advanced levels.

Members of the project team have been invited to attend virtual events to speak to regional AHP teams, wider professional body groups and other regulators.

A long-term communications plan has been developed to ensure ongoing promotion of the resources.

Acknowledgements

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Appendix A: About the HCPC

We are a regulator of health and care professionals established by the Health Professions Order 2001. Our statutory role is to protect, promote and maintain the health and safety of the public; promote and maintain public confidence in the professions we regulate; and promote and maintain proper professional standards and conduct for members of those professions.[30]

We promote high quality professional practice, regulating 15 health and care professions by:

- setting standards for education and training and practice,
- approving education programmes which professionals must complete to register with us,
- maintaining a register of professionals who meet our standards,
- acting if professionals on our Register do not meet our standards and
- acting to stop unregistered practitioners from using protected professional titles.

We currently regulate these 15 health and care professions:

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Speech and language therapists

[30] Article 3(4) and (4A) of the Health Professions Order (2001) states that the HCPC's over-arching objective is to protect the public and sets out how this objective should be pursued.

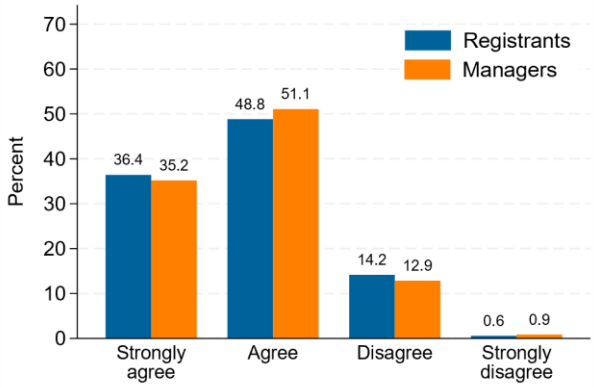
Appendix B: Webinar voting data

Full dataset: Perspectives on scope optimisation (scope of practice, delegation and supervision at advanced levels of practice)

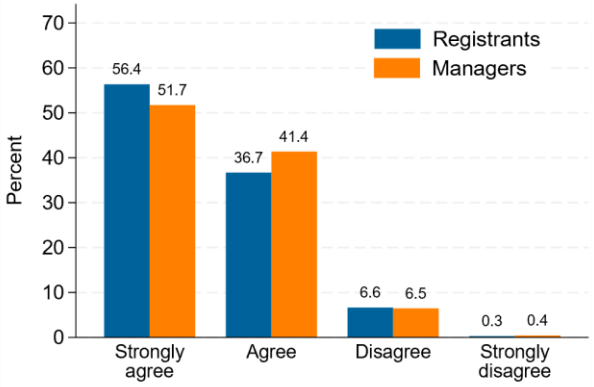
Perspectives on delegation and supervision

Vote 1: Delegation and supervision (n=579)

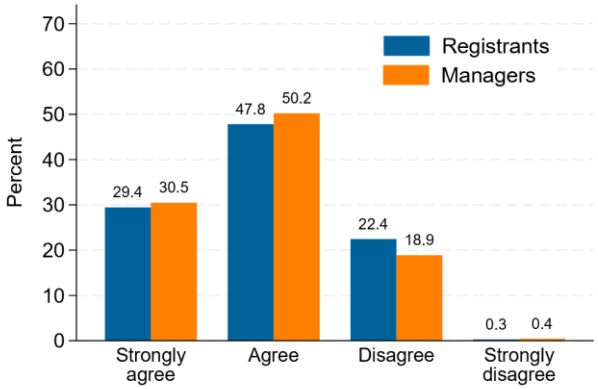
1) It is widely understood that there is a difference between delegation and referring on to other people.



2) It is widely understood that the knowledge, skills and capabilities of the person being delegated to must be carefully considered.



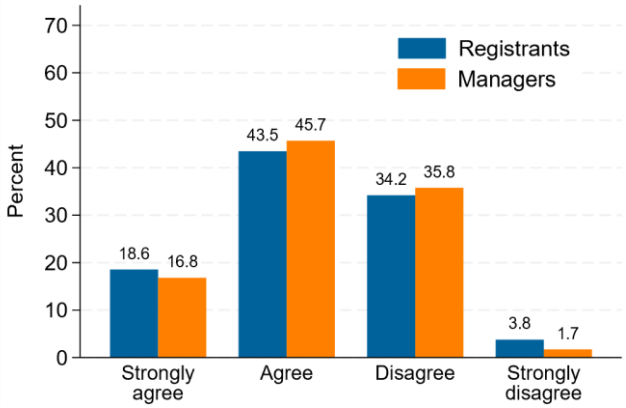
3) When delegating to others, the responsibilities of the individual registrant doing so is widely understood.



4) When delegating to others, the responsibilities of the service manager are widely understood.

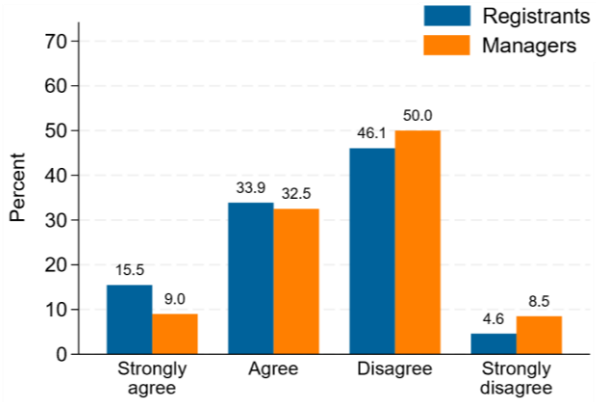


5) When delegating to others, the responsibility of the employing organisation is widely understood.

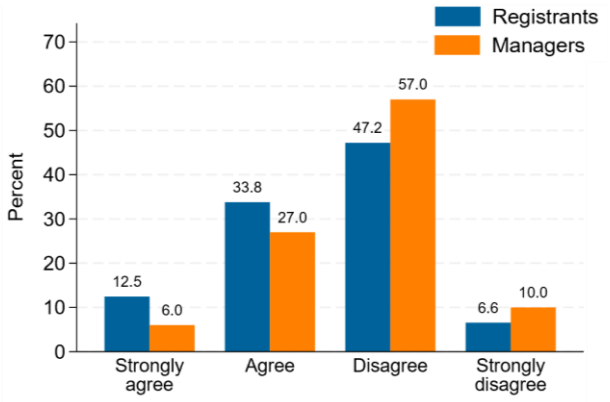


Vote 2: Delegation and insurance (n=506)

6) Registrants are confident in their understanding of professional indemnity insurance within the context of delegating activities.

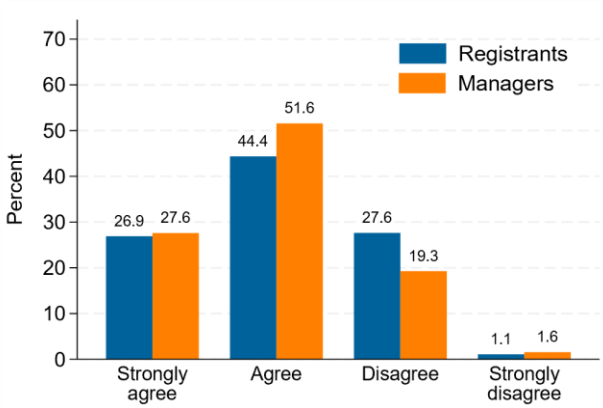


7) Registrants are confident in their understanding of their employer's vicarious liability within the context of delegating activities.

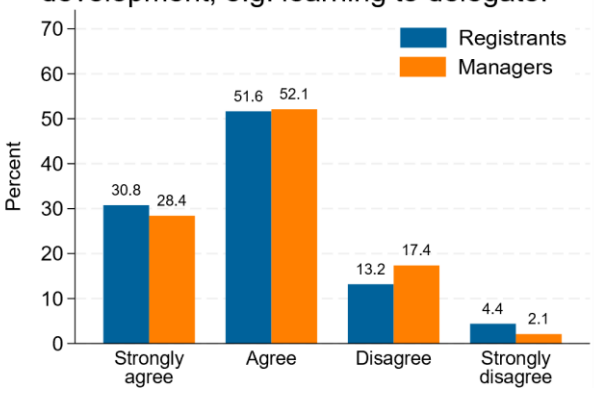


Vote 3: Delegation and supervision (n=471)

8) Different types of supervision are widely known.



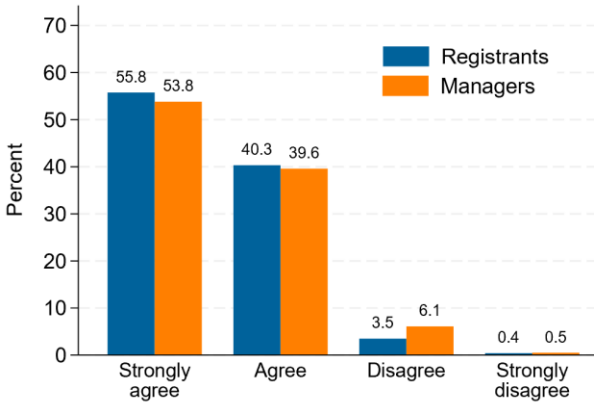
9) In my own supervision, space is provided to support me to reflect on and identify areas for continuing professional development, e.g. learning to delegate.



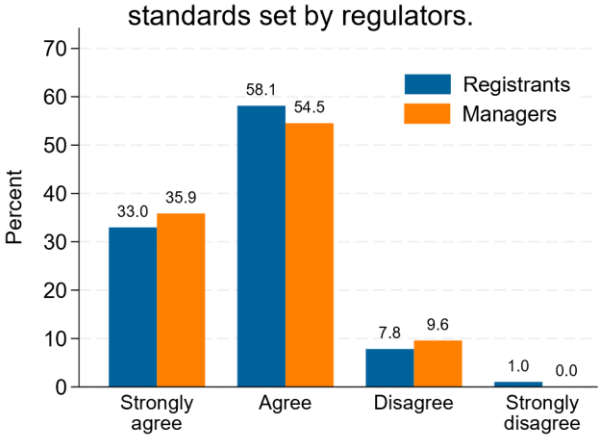
Perspectives on scope of practice

Vote 1: Scope of practice (n=688)

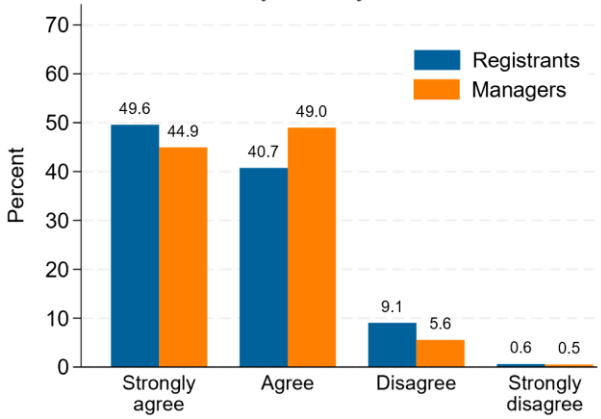
1) I believe it is widely understood that regulators set standards to maintain safe and effective practice to protect the public.



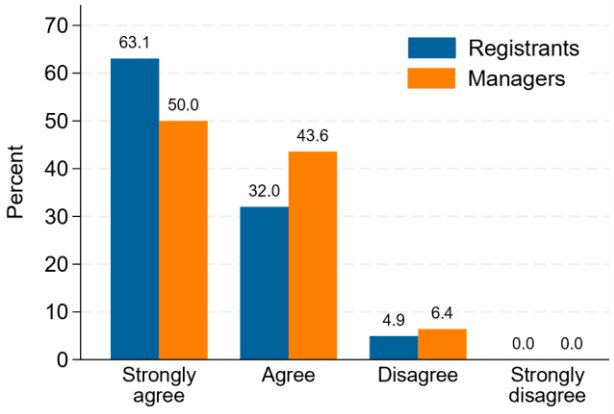
2) I believe it is widely understood that professional bodies help shape the scope of practice for specific professions informed by standards set by regulators.



3) I believe it is widely understood that an individual's scope of practice evolves with time, experience, additional qualifications and/or when they move job roles and/or

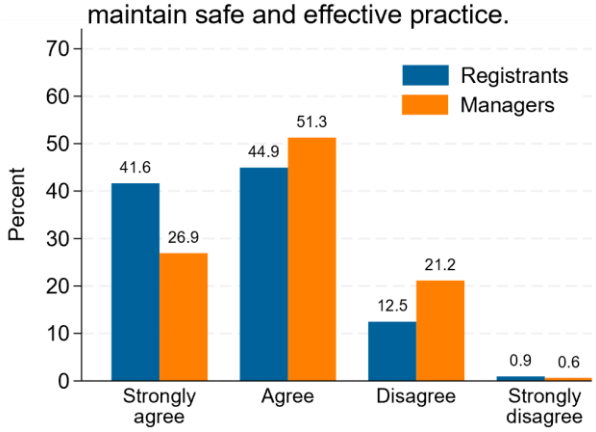


4) I believe it is widely understood that registrants must know their individual scope of practice and the associated knowledge and skills to maintain safe and effective practice.

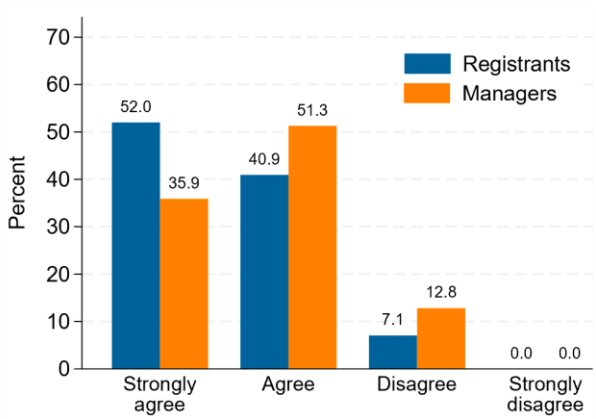


Vote 2: Scope of practice / scope optimisation (n=584)

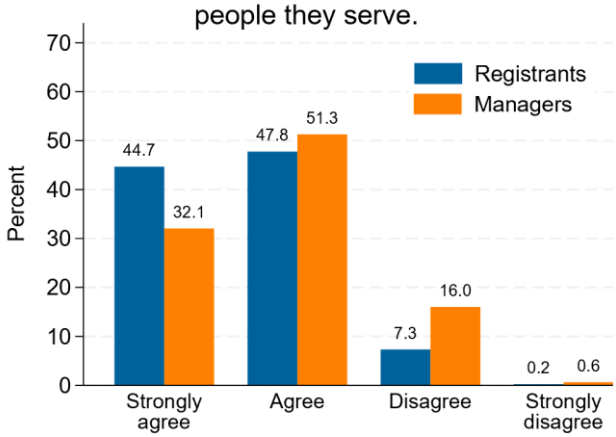
5) I believe it is widely understood that registrants must know their professions scope of practice across the four pillars of practice to maintain safe and effective practice.



6) I believe it is widely understood that registrants must align their CPD activities and professional portfolio to their scope of practice.

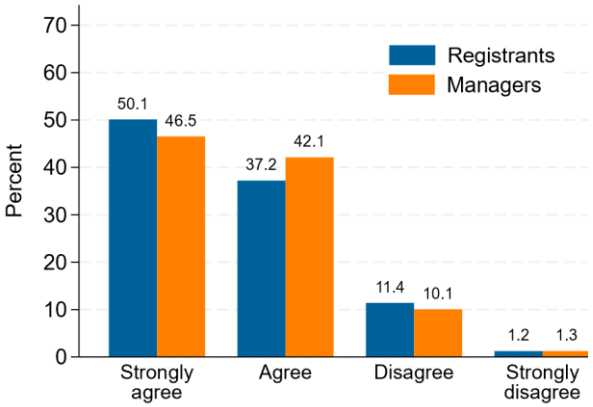


7) I believe it is widely understood that registrants must align their CPD activities and professional portfolio to meet the needs of the people they serve.



Vote 3: Scope of practice (n=565)

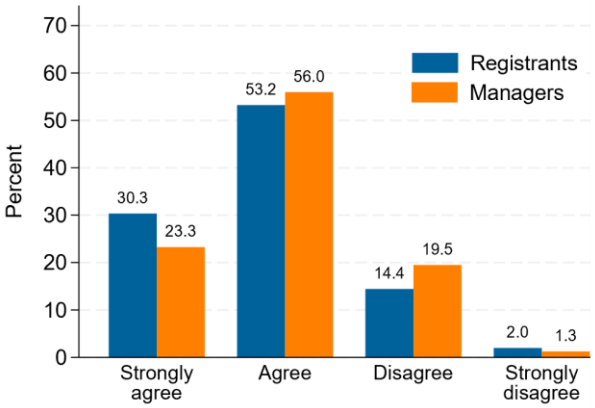
8) I believe it is widely understood that the employing organisation must have robust governance arrangements in place to maintain safe and effective practice for all career levels.



9) I believe it is widely understood that our scope of practice is not explicitly tied to a pay grade.



10) I believe it is widely understood that a scope of practice is determined by the role that the professional is filling at that time.



Further information

For more information about advanced levels of practice visit:
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