Beyond a "One Size Fits All": Rethinking Multiprofessional ACP Education

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BACKGROUND

The Multiprofessional Framework for Advanced Clinical Practice (ACP) (1,2) is designed to support collaborative advanced practice across professions. The framework identifies the need to work generically, with a flexibility of approach to shared attitudes, behaviours and clinical standards whilst upholding the contribution of their own profession and the advanced practice role in equal measure.

There is limited variability of such specialised programmes with few being specifically tailored to the needs of AHPs seeking ACP roles (3) and ambiguous ACP job descriptions continue to lack clarity to demonstrate scope of the role (4,6). There are gaps in literature exploring AHP trainee ACPs (tACPs) perceptions of multiprofessional master's programme in terms of impact, experiences and inclusivity.

AIMS and OBJECTIVES

To explore the trainee Allied Health Professionals' (AHPs) perceptions of their ACP programme journey. This was explored through the following objectives:

1. To examine and understand the perceptions of non-nursing ACP students at the Higher Education Institute (HEI) in relation to the ACP curriculum.
2. To recognise gaps in the subject area of multiprofessional ACP education and identify teaching and learning developments.
3. To acquire knowledge to inform strategies which support curriculum development to benefit non-nursing and AHP advanced practice students now and in the future.

METHODOLOGY

Design: Predominantly qualitative, with limited demographic data.

Sample: Purposive sampling of non-nursing students enrolled at one HEI (2017–2024).

Context: Aligned with NHS multiprofessional framework introduction.

Data Collection: JISC survey via Virtual Learning Environment (VLE), distributed by module leads; included multiple open and one closed-ended question.

Analysis: Closed-ended data analysed statistically; open-ended data analysed using thematic analysis (5)

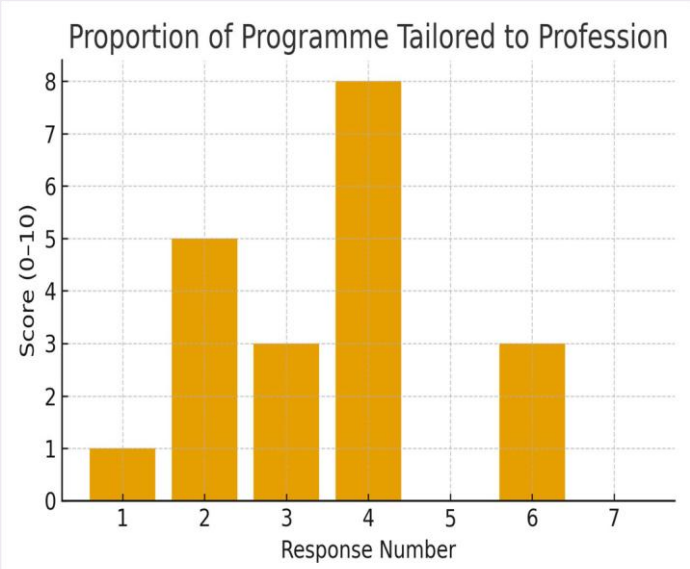
Ethics: Internal ethical approval obtained (Ref: 24/NAH/013).

Outputs: Survey questions and key themes p

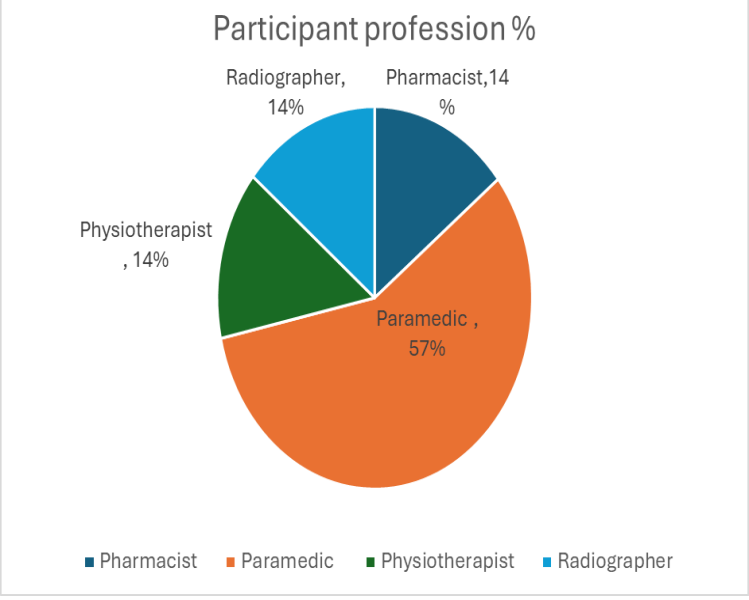
Recruitment: Minority group; participation voluntary with no impact on academic progression presented in tables and figures.

RESULTS

20 AHP students were invited to participate in the study, the response rate to the survey was 37%.



Results to the question "Do you feel that the curriculum content is tailored to a multiprofessional workforce?" scores ranged from 0 to 8 (mean = 2.8), indicating that participants generally felt the programme was not tailored to their professional needs.



From the qualitative data, four themes were identified:

- Professional identity
- Navigating professional challenges
- Curriculum skills and development
- Diversity of roles

DISCUSSION

Participants identified:

Internal conflict between original profession and ACP role, which often go unrecognised.

Uncertainty around role expectations, scope, and boundaries.

Limited role recognition by colleagues, service users, and carers. They felt they were,

"Asked to 'copy and paste' skills from another profession"

Poor exposure to other ACP roles led to reduced collaboration and isolated practice.

Lack of AHP academic representation and 'nursing-focused' content led to feelings of exclusion. They advocated to,

"…include a baseline of all professions…from which we all journey to arrive at 'advanced practice'"

Curriculum misalignment: overly acute-focused, limited relevance to community/primary care.

Variation in understanding the ACP role not always linked to competency differences (4).

LIMITATIONS

Small, single-site study limits generalisability. Variation across UK ACP programmes reduces representativeness.

Limited national data on AHP ACP participation highlights need for further research.

RECOMMENDATIONS

- **Support AHP identity** in ACP programmes and workplace.
- **Increase AHP/pharmacist representation** in teaching and guest lectures.
- **Multiprofessional education alone is insufficient** inclusivity must be intentionally designed.
- **Make curriculum inclusive**: balance acute/community focus, profession-specific relevance, and competencies.
- **Embed interprofessional learning** that recognises diverse roles.

CONCLUSION

AHP ACP trainees face identity conflict and potential exclusion. Inclusive, flexible curricula are essential to enhance learning, reduce tension, and support a diverse sustainable ACP workforce.

REFERENCES

1. NHS England 2017. *Multi-professional framework for advanced clinical practice in England.* London: Health Education England, 12.
2. NHS England, 2025. *Multiprofessional Framework For Advanced Practice 2025* [online] ,
3. Heale, R. and Rieck Buckley, C., 2015. An international perspective of advanced practice nursing regulation. *International nursing review, 62*(3), pp.421-429.
4. Kuczawski, M., Ablard, S., Sampson, F., Croft, S., Sutton-Klein, J. and Mason, S., 2024. Exploring advanced clinical practitioner perspectives on training, role identity and competence: a qualitative study. *BMC nursing, 23*(1), p.185.
5. Braun, V. and Clarke, V., 2021. One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qualitative research in psychology, 18*(3), pp.328-352.
6. Timmons, S., Mann, C., Evans, C., Pearce, R., Overton, C. and Hinsliff-Smith, K., 2023. The Advanced Clinical Practitioner (ACP) in UK healthcare: dichotomies in a new 'multi-professional' profession. SSM-Qualitative Research in Health, 3, p.100211.