

# **4<sup>th</sup> VPU Congress**

## **14-15 November 2025**

### **Berlin**

**Professor Jacqueline Filkins**  
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# **Reflections of a Leader**

**Professor Jacqueline Filkins**

# From a picture of a VISION to it becoming an AIM



*A pile of rocks ceases to be a pile of rocks  
when someone has the idea of a cathedral*



*KOLN CATHEDRAL took 632 years to complete*



## **Reflections from small steps and stumbles to leadership roles**

From Vision to Aims and Reflective Practice

Examples from my toolbox (learning experiences):

1. Do not assume!
2. When opportunities (big or small) present themselves: take them, reflect and .....
3. Innovate!
4. Emotional Intelligence

# REFLECTIVE PRACTICE

It can be painful, exciting  
and teach us to take small steps

It can also lead you  
to being bold and take a leap into the  
unknown



# DO NOT ASSUME: Find out where, what and how; ask questions; be prepared!

- The harsh reality was that we did none of the above.
- Adaptability and resourcefulness became a necessary tool.
- And it was hot!!!



The journey by boat from the UK to Capetown continued by train through the Kalahari desert on to Bulawayo (Rhodesia) and onwards to Blantyre, Malawi.

# When opportunities (big or small) present themselves – take them!

- An opportunity to take a job in the Northern tip of Madagascar presented itself.
- I wanted to find out and understand mothers' health needs for their young children.
- But how could I find out?



# Growth through Opportunities

Opportunities can grow unexpectedly.

Working in various large hospitals, as a Senior Clinical Nurse on fulltime night shifts, I was aware of the divide between night and day staff.

One night, an emergency developed which became a pivotal experience for me. It led me to respond to an Advert from the WHO to apply for a Fellowship.

Weeks later, I received the news that I had been approved for the Fellowship.

*This was the moment when I became “seen and heard”.*





# Opportunity leads to Innovations

- 1 Government announced that the title “administrator” be replaced by “manager” (1984). A vacancy arose in the small hospital where I was the Senior Clinical Nurse. After outlining a suggestion that the 2 posts could be combined, I was appointed.
- 2 At a conference in Geneva, I heard three nurses discussing their problems of not being seen as professionals by the medical teams. The decision was to meet at the next coffee break to explore this issue further.
- 3 Outcome was: recognition that we were leaders and that we had to act! A plan was agreed: this was the beginning of the **European Nurse Directors Association (ENDA)**

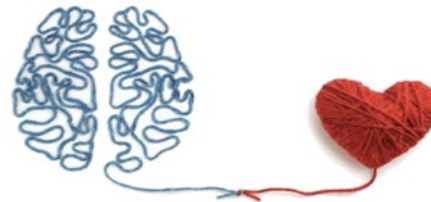
# Emotional Intelligence: what it is, where and how to use it

Emotional intelligence involves being self-aware whilst listening, observing, and processing information. When combined with reflective practice, it enhances our depth of insight and comprehension. This is very relevant in situations such as:

- Managing change
- Project planning
- Handling challenging circumstances
- Building confidence and trust



Self awareness  
Self management  
Social awareness  
Relationship management



# Advanced Nurse Practitioners can lead to increased visibility of Nursing Power

The “Know-**HOW**” is the scientific and practical knowledge of nursing in which the Art of nursing is the cornerstone.

The “Know-**THAT**” is mainly the practical knowledge.

By keeping this difference in mind, we can deduce that ANP’s belong to the “know-HOW” and that their contribution in taking on expanded roles bring multiple benefits.

It should be noted that we need both; but we need to be much clearer which roles we attribute to one or the other. It is an important part of workforce planning and education.

**Today, looking at Your endeavours to introduce, develop and promote Advanced Nursing Practice, you are best placed to meet the patients, the wider community and the Nursing professionals’ needs.**

# **Advanced Nursing Practice in the UK**

**Professor Brian Webster-Henderson OBE**

# OUR LOCATIONS





**NO.1 UNIVERSITY IN THE NORTH OF ENGLAND AND 6TH IN  
THE UK FOR PRODUCING ALUMNI COMPANY FOUNDERS**



**NO.1 UNIVERSITY IN THE  
NORTH WEST**

**& IN THE TOP 10 IN THE UK FOR GRADUATES INTO EMPLOYMENT  
OR FURTHER STUDY WITHIN 15 MONTHS (97%)**



**2ND**

**IN THE NORTH WEST FOR  
QUALITY EDUCATION**



**RANKED TOP 41% OF  
UNIVERSITIES WORLDWIDE FOR  
SOCIAL AND ECONOMIC IMPACT**



# Background

- Nursing in the UK
- Evolution of Advanced Nursing Practice – Advanced Clinical Practice
- The role of the regulator
- University of Cumbria Approach to Advanced Practice
- Assessments
- Nurse Prescribing
- Scope of Practice
- Nurse Specialists V's Advanced Nurse Practitioners
- Workforce shortages and developments

# Nursing in the United Kingdom

3 Year Degree

2 Year Masters  
Degree

A Degree  
Apprenticeship

Top Up Degree from  
Nurse Associate to  
Registered Nurse  
(England Only)

# Nursing in the UK

Funding for nursing is different in all 4 counties of the United Kingdom

Health and Education are “devolved” areas

Nursing Associates only apply to England

**BUT**

All 4 countries have Advanced Clinical (Nursing) Practitioners

# Role of the Nursing & Midwifery Council as Regulator

- Advanced Practice has “evolved”
- Not been regulated in the UK – resulting in a messy landscape
- Royal College of Nursing introduced ***accreditation – as a way of introducing some form of standardisation***





# NMC Principles of Advanced Practice



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## Principles for advanced practice

These principles include a definition  
of advanced level practice

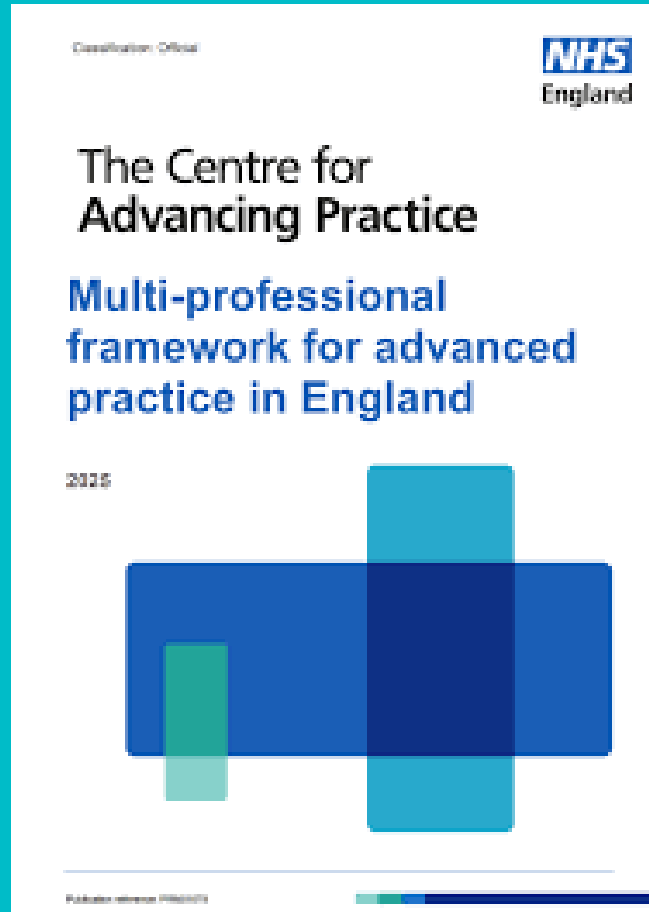
June 2025



# Definition

**“Advanced practice is delivered by accomplished registered health and care professionals. It is a level of practice characterised by a high degree of autonomy and designated responsibility for complex decision making. This is underpinned by a post-registration master’s level award or equivalent undertaken by an experienced practitioner that encompasses all four pillars of clinical practice, leadership and management, education, and research.**

# A multi-professional framework



- 2025 NHS published a framework
- Clear definitions
- Expectations within the 4 pillars of advanced practice
- Competencies and requirements

# 4 Pillars of Practice

**Clinical  
Practice**



**Leadership  
and  
Management  
Practice**



**Education**



**Research**



# University of Cumbria: Studying to be an Advanced Practitioner

- A “good” first degree.
- 3 years part time study – maximum of 5 years.
- You require a contract from your local NHS organisation – *Trainee Advanced Clinical Practitioner*.
- You require a registered General Medical Practitioner as an educational supervisor.
- You should have normally 5 years clinical practice experience.
- Required to pass an interview.
- Provide 2 references (current employer and one on clinical competence).
- Programme is then mapped out.



# University Programme: Year One

Consultation,  
Examination & Clinical  
Decision Making (20)

Clinical Decision  
Making: Improving  
Outcomes in Complex  
Patients (20)

Analysing Research  
and Evidence to Inform  
Advanced Clinical  
Practice (20)

Portfolio of Advanced  
Practice and Objective  
Structured Clinical  
Examination (OSCE)

# University Programme: Year Two

Clinical Leadership to  
Improve Patient  
Outcomes (20)

Independent &  
Supplementary  
Prescribing for Nurses  
& Midwives (40)

Optional Module(s)  
(depending on area of  
practice) (20)

Portfolio of Advanced  
Practice and Objective  
Structured Clinical  
Examination (OSCE)

# University Programme: Year Three

Service Evaluation for  
Improving Clinical Practice  
(40)

Optional Modules ( 20  
credits each if required)

# Optional of Modules Examples

Health Assessment in Common Childhood Illness

Advanced Assessment of the Acutely Unwell Child

Initial Management of Acutely Ill Adult

Advanced Pathophysiology and Disease in Practice

Negotiated Learning

Work Based Learning

# Assessment

- Range of assessments
- OSCE's are required
- Portfolio of competence – signed off by educational supervisor
- Must meet regulator principles
- Must pass all elements of the programme
- Prescribing has additional requirements which are regulator driven

**Then employed as an Advanced Clinical Practitioner**



# Independent Nurse Prescribing

Independent prescribers are nurses who have successfully completed an NMC Independent Nurse Prescribing Course (also known as a v200 or v300 course) and are registered with the NMC as an IP. They are able to prescribe any medicine provided it is in their competency to do so. This includes medicines and products listed in the BNF, unlicensed medicines and all controlled drugs in schedules two - five.

# Learning from Advanced Clinical Practice – *a personal view*

- It's been a messy landscape and an evolving journey.
- Currently not regulated – this is seen as a problem by many.
- Workforce shortages in all areas have driven the agenda in many parts of the UK.
- Cumbria and Advanced Practice – multiple practitioners.
- Also seen a growing movement of Physicians Associates.
- A rise then a decline in Nurse Consultants – often financially driven.
- GP surgeries, accident and emergency, acute settings – have provided a view that this is very adult and acute orientated.

# What about the future?

