

## Case Study for Advanced Practice Role

# Joe Smith

Trainee ACP in Neuro-Ophthalmology  
(Orthoptist)

Acute Trust

Briefly outline your career journey and when you began your Advanced Practitioner/Advanced Clinical Practitioner training.

I am currently undertaking an MSc Advanced Clinical Practice (ACP) apprenticeship at the University of Liverpool, so I spend one day per week at the university studying modules that help demonstrate and evidence my achievement of the four pillars of ACP. Before this, I spent four years working as an Orthoptist – during this time I had significant exposure to all areas of orthoptics and ophthalmology and undertook various extended roles in neuro-ophthalmology and adult strabismus.

Are there any key moment(s) in your career that led to your decision to become an Advanced Practitioner?

I have always had an interest in and passion for the 'neuro' side of orthoptics and ophthalmology since studying. As I became more experienced, I began to take on extended roles in neuro-ophthalmology and that's where my passion was sparked. Another key moment, was when I started to develop my knowledge and skills and saw how they could positively impact patient care and our service and that led to my decision to become an Advanced Practitioner (AP).

Why did your organisation/department develop the role of an Advanced Practitioner/Advanced Clinical Practitioner?

There was a "service need" in my case – as a consultant retired and there were increasing numbers of referrals to the neuro-ophthalmology service which are hard to cope with. Despite this, we still had to be the driving force and show our medical colleagues how we could help. This involved extensive training and completion of local competency documents with lots of audits to prove concurrence in decision-making.

Describe your role as an Advanced Practitioner/Advanced Clinical Practitioner – include how you cover the 4 pillars of advanced practice?



**Clinical** – I am involved in various clinics, but I typically spend one day per week in neuro-ophthalmology and adult strabismus clinics reviewing patients that would otherwise be seen by medical colleagues. I am also involved in one virtual session a week, where I review the medical records of patients who have attended our virtual neuro-ophthalmology clinics with diagnoses such as IIH, intracranial tumours, and suspicion of optic disc swelling. This involves reviewing the diagnostic tests and making clinical decisions on diagnosis or stability and the need for further investigation and follow-up.

I also have one session performing botulinum toxin injections for patients diagnosed with blepharospasm or hemifacial spasm and one day per week I work in orthoptic-led clinics reviewing new and follow-up adults and paediatrics and review our adult post-operative strabismus patients.

**Leadership** – The leadership aspect of my role is demonstrated in various ways; I am responsible for leading the orthoptic-led neuro-ophthalmology service, involved in various governance groups within my hospital, as well as being involved in steering groups for orthoptics and AHPs, and I am a trade union representative and sit on the BOSTU executive board.

**Education** – Currently I am involved in the local teaching of undergraduate orthoptists and optometrists, pre-registration optometrists, medical students, and trainee ophthalmologists within my hospital. This is an area I would like to be more involved

with after completing my ACP training potentially in a university setting for part of the week.

**Research** – I am regularly involved in local research projects and perform ongoing clinical audits and service evaluations as part of my role.

**Broadly speaking what have been the key benefits to patient care of your Advanced Practice role?**

As I am in training, we are yet to develop individual ACP-led clinics but since orthoptists have taken on the role of virtual reviewers, we have been able to reduce the waiting list and appointment times, speed up delivery of results and communication with other specialists, and maintain high levels of patient satisfaction.

**Which other health professions or organisations do you work with as part of your Advanced Practitioner role?**

My main contact is with Ophthalmologists, Neurologists, Endocrinologists, Neurosurgeons, and Specialist Nurses.

**What was the biggest challenge during your training journey and how did you overcome it?**

Time management. It is difficult to balance a full-time job, university work and your personal life but being organised, setting goals, and having a plan on how you will achieve your objectives make this easier.

**What advice would you give someone considering an Advanced Practitioner post?**

Organisation is key and makes sure you keep records of everything you do as it will help you along the way. I also would not recommend taking on just any AP role, as I think you need to have a true interest in the area to commit to the work required.

**What future opportunities and or innovations do you see as an Advanced Practitioner/Advanced Clinical Practitioner?**

Ophthalmology is experiencing an ever-growing demand so I think there will be many future opportunities for AP. Skilled and experienced AP will be able to take over the care of select groups of patients with appropriate safeguards in place and this will enable ophthalmologists to see the most acute and urgent cases in a timelier manner which will benefit patients and staff experience, patient safety, and service delivery.

**What do you enjoy most about your role?**

I am always learning new things and have new challenges that I need to overcome – no two days are the same.

