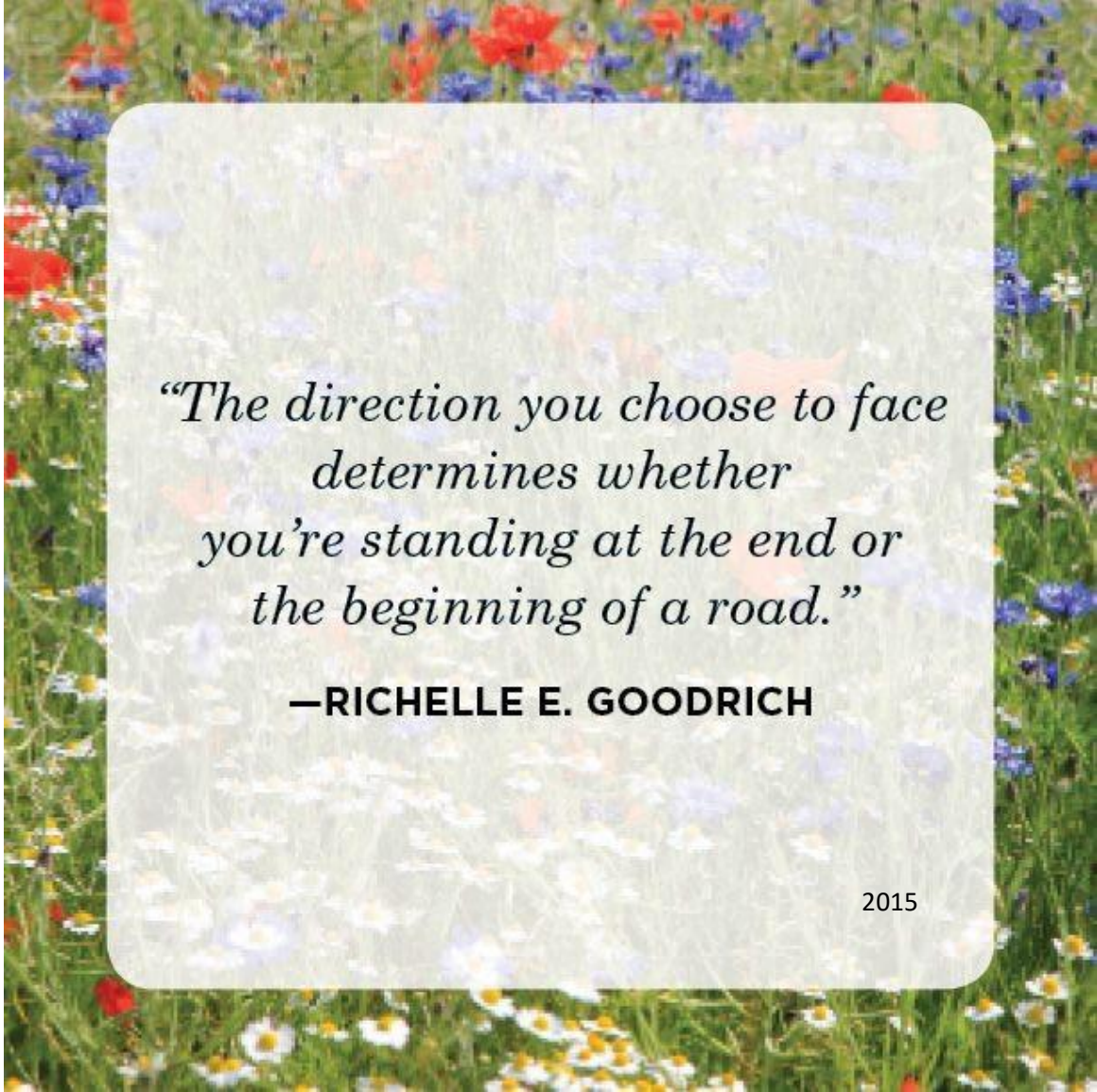




Your Roadmap to Professional Advocate Practice (PNA, PMA, PA)



*“The direction you choose to face
determines whether
you’re standing at the end or
the beginning of a road.”*

—RICHELLE E. GOODRICH

2015

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Forword

Imagine planning a journey without a destination or trying to get somewhere new without directions. We would soon feel lost and would want to give up and stop.

For sure, if all difficulties were known at the start of a journey many of us wouldn't bother to start out. However, take heart, for as Tony Robbins says, "the only impossible journey is the one you never begin."

In 2021, the Chief Nursing Officer for England, Dame Ruth May, DBE praised the efforts of nurses during the COVID-19 outbreak and supported the initiative to utilise the positive outcome of the A-EQUIP model (Advocating for Education and Quality Improvement) within midwifery services and extend this to nursing. The intention was to support the wellbeing of nurses and improve professional resilience, which would help with retention and thus improve patient outcomes post COVID-19. To help achieve this, the Professional Nurse Advocate (PNA) role was launched in England in 2021 towards the end of the third wave of the COVID-19 pandemic. This was the start of a critical point of recovery: for patients, for services and for our workforce (NHS England and NHS Improvement, 2021).

By undertaking specific training, the Professional Nurse Advocate (PNA) course was designed to equip nurses with the skills and knowledge to deliver Restorative Clinical Supervision (RCS) from within the functions of the A-EQUIP model, with the long-term intentions of improving the resilience of the workforce, support retention of nursing staff and improve patient outcomes (NHS England and NHS Improvement, 2021).

PNA's are not alone in this work. We have our Professional Midwifery Advocate (PMA) colleagues and more recently we have Allied Health Professional Advocates (PA) working to deliver this role. The roadmap is to help you to proactively set yourself up for success and help you to focus during your first months of practice. The aim of the roadmap is to help you navigate your way into the role with purpose.

So, whether you are a new PNA/PMA or PA this is an exciting step in your professional journey, but it can also be intimidating. It will be unfamiliar at first and difficult to navigate. To support you as you start your journey, we have designed a roadmap for you to become more accustomed and comfortable in your new role.

Definition of a Professional Advocate

Definition of a Professional



Professionalism is characterised by the autonomous evidence-based decision making by members of an occupation who share the same values and education. (NMC, 2017)

A Professional demonstrates respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development.

Definition of a Nurse/Midwife/Allied Health Professional (AHP)

Health professionals maintain health in humans through the application of the principles and procedures of evidence-based medicine and caring. Health professionals' study, diagnose, treat, and prevent human illness, injury, and other physical and mental impairments in accordance with the needs of the populations they serve. They advise on or apply preventive and curative measures and promote health with the goal of meeting the health needs and expectations of individuals and populations and improving population health outcomes. (WHO, 2013)



Definition of an Advocate

To speak for, support, or represent a person or group of people who may need extra help or protection. (Cambridge Dictionary, 2023).

Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles. (ICN, 2002)

A-EQUIP – Your Model to Practice

NORMATIVE

- Promote professional accountability
- Promote involvement in improving quality issues
- Improve effectiveness in a clinical role

RESTORATIVE

- Develop staff personally and professionally
- Promote the retention of staff by reducing stress, burnout and sickness absence
- Support staff to feel less isolated

PERSONAL ACTION FOR QUALITY IMPROVEMENT

- Support service improvement to deliver quality care
- Measure the impact of improvement on professional practice
- Evaluate the impact of improvement on professional practice

FORMATIVE

- Support meaningful career conversations
- Focus on developing clinical competence
- Develop clinical leadership qualities

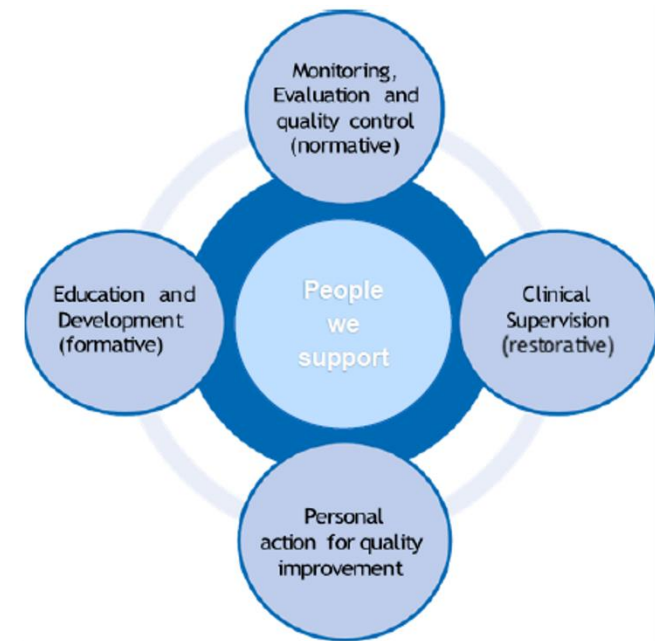


Figure 1. NHS England and NHS Improvement (2021)

Your Professional Advocate Roadmap



Qualifying In Your New Role



Identify Your Safety Network



Advertising Your Role



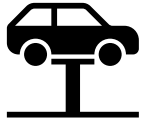
Gaining Knowledge and Signposting



Data Collection and Feedback



Qualifying In Your New Role



- ☐ Ensure the person(s) leading this role in your organisation is aware you have passed your course (some organisations accept a provisional result as confirmation that you have qualified).
- ☐ Meet with your line manager to share your news and establish the support you will need. You can also discuss opportunities for time to practice. This can vary across organisations.

e.g. common practice could look like 2.5 hours per week – 7.5 hours per month dependant on your role within your organisation.

Identify Your Safety Network



- ☐ Link in with others in the same role within your organisation to establish connections, share progress and explore ideas together.
- ☐ Establish your safety network for support (e.g. Psychology team, Wellbeing team, PNA/PMA/PA Network and Quality Improvement Team). Arrange regular RCS for your own wellbeing.
- ☐ Link in with all your local networks, meetings, and groups, to remain up to date with your practice and receive further support.
- ☐ Sign up to [FutureNHS Collaboration Platform - FutureNHS Collaboration Platform](#) for a wealth of information from Regional and National Teams.



Let us start at a slow.....

- ☐ Prepare a presentation and poster to introduce your role to your team.
- ☐ Activities identified that you might like to use.
- ☐ Create a safe space to facilitate your restorative practice.
- ☐ Engage with your team by organising events, walkabouts, drop-in sessions, and workshops.



Gaining Knowledge and Signposting



- ☐ Gather signposting resources (both internal and external to your organisation) for you to refer to when providing support.
- ☐ Gather useful tools (See Toolbox). These can be used as icebreakers and activities when facilitating RCS sessions.
- ☐ Create a programme of activities to help you deliver your sessions.
- ☐ Regularly attend your local PNA/PMA/PA team meetings to remain up to date with your practice, network and to contribute your ideas and experiences.

Data Collection and Feedback



- ☐ Link in with your organisational PA lead(s) to find out the data you need to collect and how to submit this for the monthly Provider Workforce Return (PWR).
- ☐ Find out how your organisation evaluates your PNA/PMA/PA activity data and how it is shared.
- ☐ Share and celebrate your successes within your team, your PNA/PMA/PA colleagues, and your wider organisation.

What Happens When You Hit Those Bumps in The Road?



Hattam (2023)

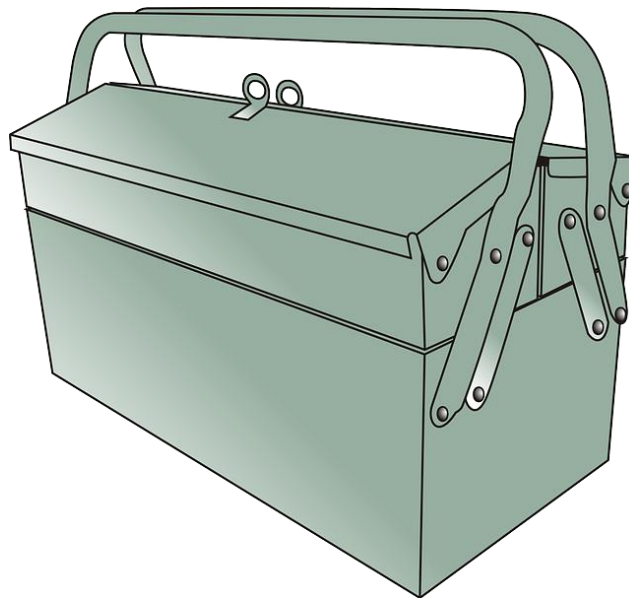
Occasionally, things do not go as planned; for example: Finding the time to practice can sometimes be a challenge when there are so many demands on your time.

Do not give up. Revisit your roadmap. Remember to refer to your toolbox below.

If dedicated time to practice has not been allocated to you, your skills and the tools provided will still support your practice.

Your Toolbox:

Resources below to guide your practice:



Monthly Provider Workforce Return (PWR) Data Explained

This is the number of RCS sessions that you have had in the month	Total number of RCS sessions	This includes planned and unplanned restorative conversations, both 1:1 and groups, in either a safe space or a corridor
This is the total number of people that have been present at each RCS session	Number of attendees receiving an RCS session	If a person has attended multiple RCS sessions in the same month, they are counted every time they attend.
This is the number of career conversations you have had in the month	Total number of career conversations	This can be with an individual or a group: groups are classed as 2 or more people.
This is the total of number of people that have been present at each career conversation	Number of attendees receiving career conversations	If a person has attended multiple career conversations in the same month, they are counted every time they attend.
This is the number of improvement projects you have supported within the month	Total number of improvement projects/programmes supported (rolling total)	Count each project that you have actively supported that month. Once complete or not supporting anymore, that project is no longer counted (rolling total).

This mandatory data is collated monthly from all PAs by the PA lead(s). It is then submitted to the nominated responsible person receiving PWR data in your organisation. This data is used by NHSE to monitor workforce trends; ensure that organisations comply with best practice and to make decisions regarding future recruitment initiatives. (Access PWR Standard Operating Procedure (SOP) [here](#))

Facilitating an RCS Session – You may want to consider the prompts below

Welcome Introductions

- Hello, my name is.....my role is.....tell me a little about yourself.
- There is no set agenda but hopefully this session will help you to understand how feelings and emotions can have an impact on our day-to-day life both personally and professionally.

Set out your safe space contract

- Our discussion is confidential, private and without judgement however, for your own safety and the safety of others, if you do disclose something that identifies as professional misconduct, illegal or gives cause for concern of your safety and that of others, I would need to act upon this.
- I won't be taking notes, however, I will record our discussion anonymously (no names) under a headline e.g., 'workplace stress' or 'career progression'. This is to evaluate the role of the PA; how it is being used, and how we can make improvements.
- If our discussion leads to an action plan, I can guide you through this process.
- Our session will be one-hour long, if you need longer, we can re-book a second session (note: keep one eye on the time and hold to the hour, even if the supervisee wants to carry on it is best to gently inform them that this can be discussed at the next session).
- We're going to turn our phones/computers etc. off so we have no interruptions.
- Before you leave today, I'll check how you are feeling.

Relax and begin when you're ready

- Before we start, we will take time to 'check in' with each other. You may want to consider a brief relaxation exercise (check out your toolbox).
- Consider starting with: 'What brought you here today' followed by curious questioning: **WHAT, WHY, HOW, WHEN, WHO, TELL ME MORE.**
- Listen with empathy. Click on the link [here](#).
- Check with the individual/group they are comfortable sharing information and responding to reflective questions.
- Where possible avoid advising, instructing or sharing your own experiences.
- As the session draws to a close, take the opportunity to 'check out'.
- Consider ending with: 'Did you find this session helpful today?' 'Is there anything more you would like from me'?
- You may want to finish by thanking them for attending, engaging in the session, sharing their story and trusting in you.
- Hand out an evaluation form, explaining how the information they provide will remain anonymous.
- Finally, for your data reporting, record the number of attendees (if facilitating a group) and the theme(s).

Other Types of Conversation




What is a corridor conversation?

A corridor conversation is a chance meeting with a colleague whilst in the same place at the same time.

As the meeting is unplanned you may feel unprepared to listen to your colleague, as they begin to share their concerns or ideas.

Take this opportunity to help them reflect whilst offering a time to meet in a safe environment.

This conversation does count as an unplanned RCS session.



What is a well-being conversation?

A well-being conversation focuses on the whole person, e.g. physical, mental, emotional, social, financial, lifestyle and safety.

The aim is to create an environment where colleagues feel safe and are heard and valued.

This conversation is generally a 1:1 chat about a person's health and well-being.

These conversations are generally not a 'one off', checking in at agreed intervals are often required.

Holding a Career Conversation

A career conversation is a meaningful discussion and can be a pre-planned or ad-hoc conversation. Career conversations provide staff the opportunity to reflect upon their career and have an open and honest conversation about their hopes and aspirations for the future. Career conversations can also provide staff the opportunity to have their say on matters that are most influencing them whilst at work. This can be in a positive or sometimes negative context. Career conversations can also be supporting staff with interview preparation, job applications or preparation for appraisals.

You may like to consider the questions below:

- At this point in your career are you content in staying in your current role/place of work?
- What development opportunities have you explored?
- What would you like to achieve in your current role?
- What support do you need to achieve this?
- What role are you considering?
- What is your primary motivation?
- Have you discussed this with your manager?
- What support or professional development will you need to achieve this?
- Is now the right time for you to take on a new challenge?
- Is this something to work towards?
- What is important for you right now?
- Is this something you want, or something you feel you should do?



This list is not exhaustive, rather a guide.

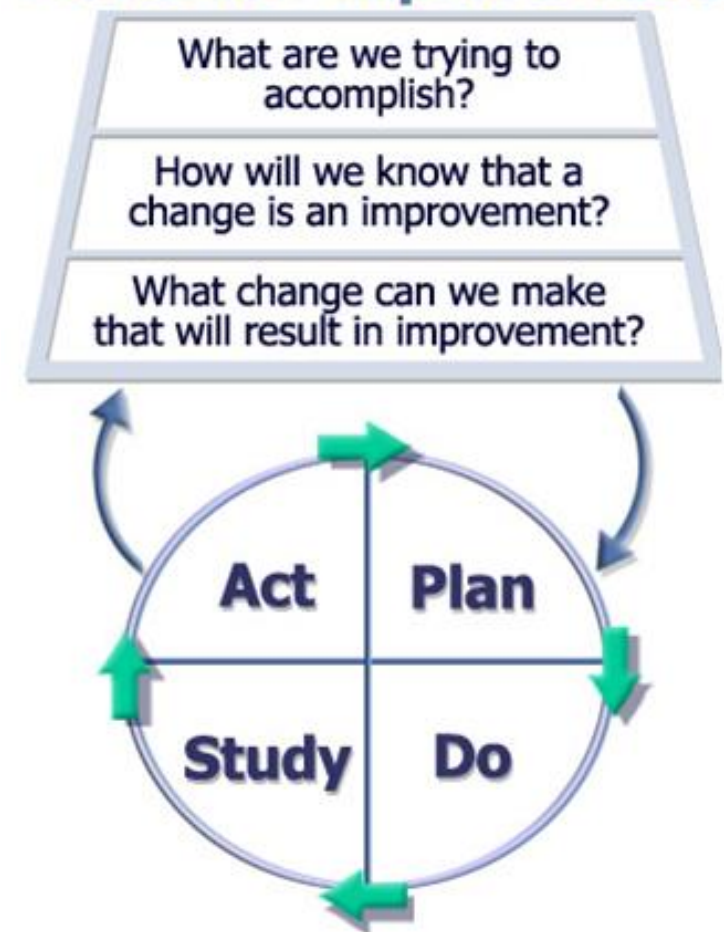
Supporting Quality Improvement (QI)

Getting started...

- Advocate for **Personal Action for Quality Improvement (QI)** by delivering RCS to colleagues.
- Empower colleagues to collaborate with QI experts in their organisation.
- Encourage colleagues to undertake QI education programmes.
- Advocate the use of QI methodology and tools for colleagues leading quality improvement projects and initiatives.
- Lead programmes of improvement yourself utilising QI methodology and tools, role modelling best practice

*The A-EQUIP model supports a **continuous improvement process** that aims to build on personal and professional clinical leadership. (NHS England, 2023)*

Model for Improvement



Resources Linking to the A-EQUIP Model

NORMATIVE

Tools	Links to:
Nursing and Midwifery Council (2018) Code of Conduct	The Code (nmc.org.uk)
Health and Care Professions Council (2016) Standards of Conduct, Performance and Ethics	standards-of-conduct-performance-and-ethics.pdf (hcpc-uk.org)
Nursing and Midwifery Council (2021) Revalidation Templates	Forms and templates - The Nursing and Midwifery Council (nmc.org.uk)
NHS England (2022) Patient Safety Incident Response Framework	B1465-1.-PSIRF-v1-FINAL.pdf (england.nhs.uk)
The law, confidentiality, and accountability for the PNA	The law, confidentiality and accountability for the PNA Nursing Times
National Guardian's Office - Freedom to Speak Up	The National Guardian's Office - Freedom to Speak Up

RESTORATIVE

Tools	Links to:
The Betari Box	Are you letting others manipulate your attitude and behaviour? (Betari Box) (youtube.com)
The Self-Kindness Toolkit	Free self-kindness toolkit for adults British Red Cross
The Johari Window	The Johari Window - Building Self-Awareness and Trust (mindtools.com)
Mock Group RCS Session	Professional Nurse Advocate (PNA) delivered restorative clinical supervision (RCS) - YouTube
'At My Best' – Strength Cards, Good Question Cards, and activities	Strengths Cards - For coaching and facilitation At My Best – At My Best (Work Positive Limited) Good Question Cards - coaching cards; positive psychology At My Best – At My Best (Work Positive Limited)
Sonia Sparkles: Basic Needs at Work	Basic Needs at Work: It's time to give staff what they need – Sonia Sparkles
Stephen Covey – Circle of control	Circle of control - a free wellbeing and anxiety tool (youtube.com)
ShinyMind App	ShinyMind - Mental Health & Wellbeing App co-created with the NHS
Martin Hogan – Example RCS	RCS Live (youtube.com)

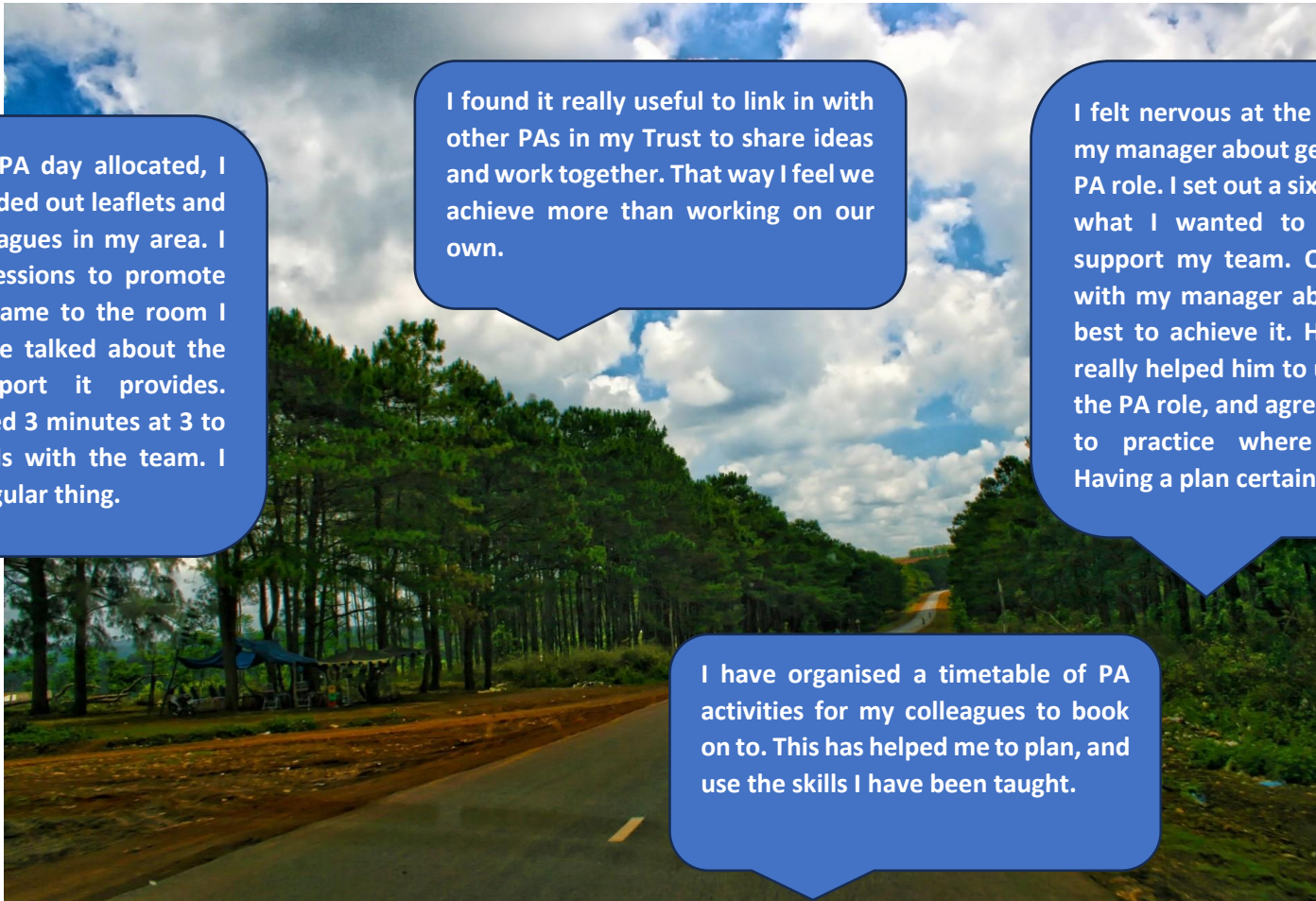
PERSONAL ACTION FOR QUALITY IMPROVEMENT

Tools	Links to:
PDSA cycles and Model for Improvement	https://aqua.nhs.uk/wp-content/uploads/2023/07/qsir-pdsa-cycles-model-for-improvement.pdf
“SMART” Aim Statement writing	https://aqua.nhs.uk/wp-content/uploads/2023/07/qsir-developing-your-aims-statement.pdf
Full list of Quality, Service Improvement and Redesign (QSIR) Tools	https://aqua.nhs.uk/qsir-tools/
Martin Hogan’s “Teaching Tuesday Clinic – How to QII”	Pan London Teaching Tuesday Clinics How to QII EDITED (youtube.com)
1:1 RCS session – Personal Action for Quality Improvement demonstrated	Professional Nurse Advocate (PNA) Supervision 1 (youtube.com)
Follow-up 1:1 RCS session – Personal Action for Quality Improvement demonstrated	Professional Nurse Advocate (PNA) Supervision 2 (youtube.com)
Quality Improvement (QI) Resource Pack - Empowering teams to make safety improvements - May 2023	PowerPoint Presentation (thehealthinnovationnetwork.co.uk)

FORMATIVE

Tools	Links to:
How to Have a Career Conversation with your Staff	How to Have a Career Conversation with your Staff - FOR MANAGERS (youtube.com)
How to Have a Career Conversation – Martin Hogan	How to have Career Conversations template - YouTube
Stay and Grow Conversations Toolkit and Templates	Stay and Grow Conversations toolkit and templates (northkenttraininghub.nhs.uk)
RCN Careers resource for registered nurses	Registered nurses Nursing careers resource Royal College of Nursing (rcn.org.uk)
NHS Standard Contract 2024/25	https://www.england.nhs.uk/wp-content/uploads/2024/02/04-NHS-Standard-Contract-2024-to-2025-General-Conditions-full-length-version-1-February-2024.pdf
An introduction to leading with kindness and compassion in health and social care	Leading With Compassion Free Course The King's Fund (kingsfund.org.uk)
COVID-19 Psychological First Aid	COVID-19: Psychological First Aid Training Course - FutureLearn
High Impact Actions – Ways to Stay	Home - NHSE Midlands (waystostay.co.uk)

The PNA/PMA/PA Journey: As Shared by Others



When I had my first PA day allocated, I planned my day. I handed out leaflets and contact cards to colleagues in my area. I organised 'drop in' sessions to promote the role. Colleagues came to the room I had booked where we talked about the role, and the support it provides. Following on I arranged 3 minutes at 3 to use the strength cards with the team. I plan to make this a regular thing.

I found it really useful to link in with other PAs in my Trust to share ideas and work together. That way I feel we achieve more than working on our own.

I felt nervous at the thought of speaking to my manager about getting time to deliver my PA role. I set out a six month plan to describe what I wanted to achieve, and how to support my team. Once prepared, I spoke with my manager about my plans and how best to achieve it. He commented this has really helped him to understand more about the PA role, and agreed to allocate the hours to practice where reasonably possible. Having a plan certainly helped me.

I have organised a timetable of PA activities for my colleagues to book on to. This has helped me to plan, and use the skills I have been taught.

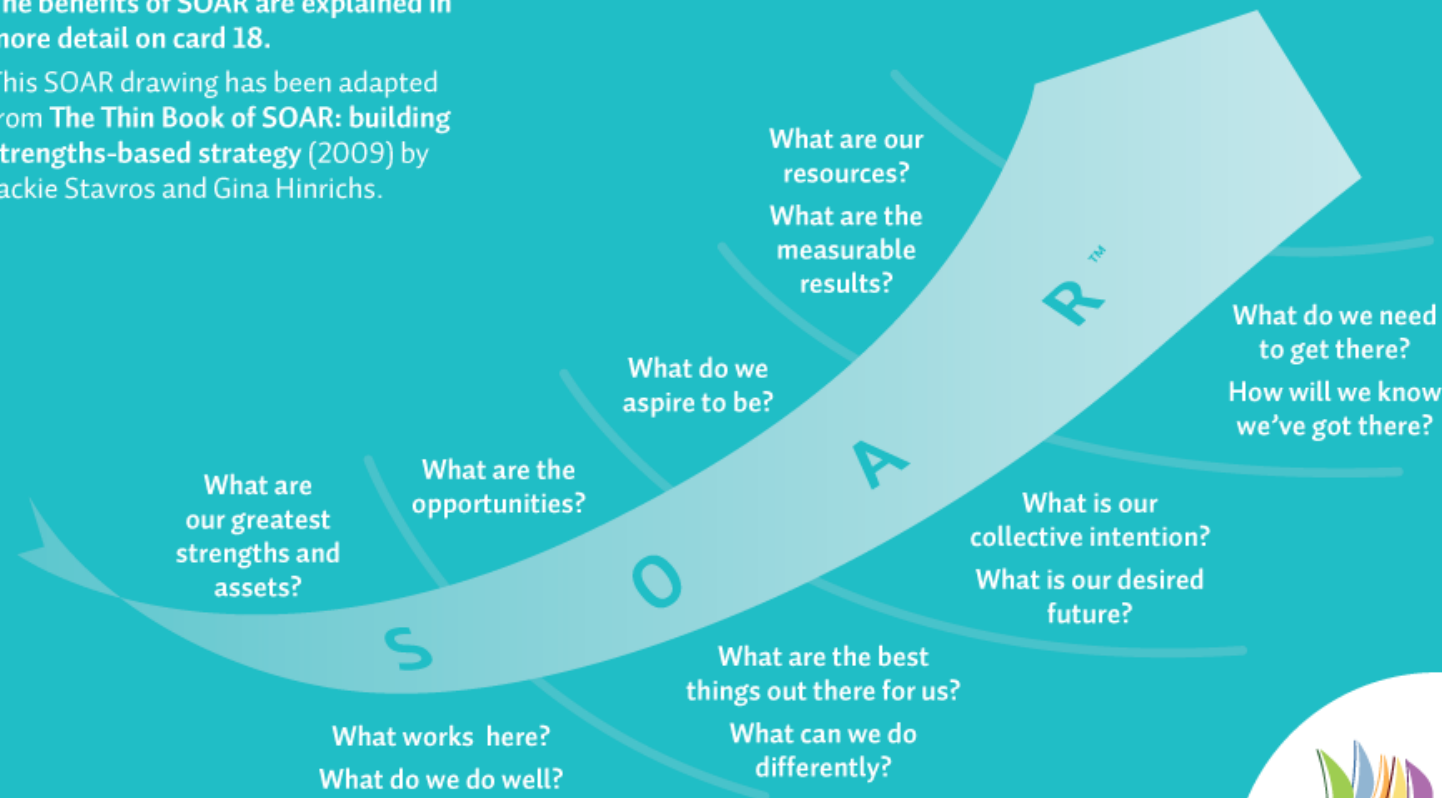
Appendices

Appendix 1 - What are your Strengths, Opportunities, Aspirations and Results?

Strengths, Opportunities, Aspirations, Results

The benefits of SOAR are explained in more detail on card 18.

This SOAR drawing has been adapted from **The Thin Book of SOAR: building strengths-based strategy** (2009) by Jackie Stavros and Gina Hinrichs.



AI essentials

www.appreciatingpeople.co.uk



Appreciating People (2024)

Appendix 2 - SOAR Template

S	Strengths <ul style="list-style-type: none">• What are our greatest strengths?• What makes us unique?• What do we excel at?	Opportunities <ul style="list-style-type: none">• What opportunities can we leverage into success?• What disruptions can we reframe as opportunities?
O		
A	Aspirations <ul style="list-style-type: none">• What do we want to be & do in the future?• How can we make a difference?• What are we passionate about?	Results <ul style="list-style-type: none">• What are the measureable results that will tell us we've achieved our vision?• How do we translate our vision of success into tangible outcomes?
R		

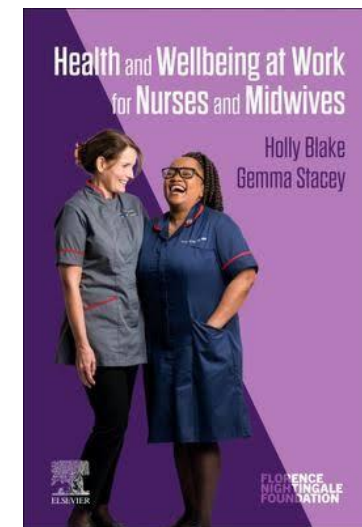
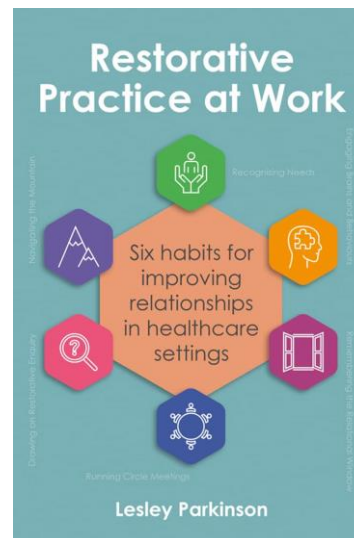
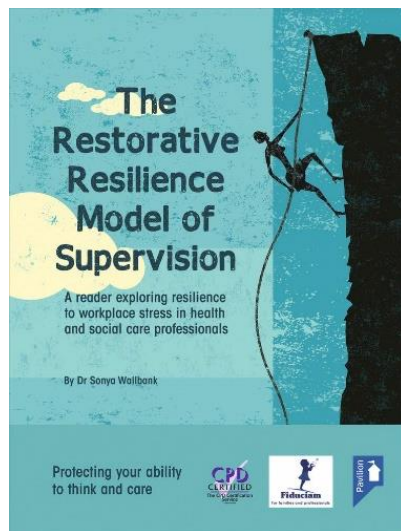
EQUIP Health Care (2019)

Appendix 3 - Reflective Models

Atkins and Murphy Model of Reflection	Stage 1 Awareness	Stage 2 Describe the situation	Stage 3 Analyse feelings and knowledge	Stage 4 Evaluate	Stage 5 Identify any learning	
	Awareness of uncomfortable thoughts and feelings, actions or new experiences	Describe the situation Include salient (most noticeable or important), feelings, thoughts, event or features	Analyse feelings and knowledge Identify and challenge assumptions. Imagine and explore alternatives	Evaluate The relevance of knowledge. Does it help to explain/resolve the problem? How was your use of knowledge?	Identify any learning which has occurred?	
Johns Model of Reflection	Stage 1 Description of the Experience	Stage 2 Reflection	Stage 3 Influencing Factors	Stage 4 Alternative Strategies	Stage 5 Learning	
	What has happened? What are the main problems?	What was I trying to achieve? How did I feel about this experience?	What internal factors and external factors influenced my decision-making?	What other choices did I have? Could I have solved this problem better?	How has this experience changed my ways of knowing? What would I do if it happened again?	
Driscoll Model of Reflection	Stage 1 What?		Stage 2 So What?	Stage 3 Now What?		
	What is the experience? What happened? What was my reaction?		How did I feel at the time and how do I feel now? What were the positive and negative aspects of the event?	What are the implications for me based on my experience description and analysis? What might I do differently if I face a similar situation? How can I be better prepared to avoid the same outcome in a similar situation in the future?		
Gibbs Model of Reflection	Stage 1 Description	Stage 2 Feelings	Stage 3 Evaluation	Stage 4 Analysis	Stage 5 Conclusion	Stage 6 Action Plan
	What happened?	What were you thinking and feeling?	What was good and bad about the experience?	What sense can you make of the situation?	What else could have been done?	If it arose again what would you do?

Appendix 4 - Further Resources

- The NHS Long Term Plan [NHS Long Term Plan » Overview and summary](#)
- NHS Long Term Workforce Plan [NHS England » NHS Long Term Workforce Plan](#)
- Safer Staffing Guidance - [NHS England » Safer staffing: nursing and midwifery](#)
- The People Promise - [NHS England » The Promise](#)



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