NHS Education for Scotland

Pilot Succession Planning Development Pathway for Advanced Practice

Consultation
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Introduction
In recent years there has been a sharp increase in the number of advanced practitioners in Scotland. Whilst there have been pockets of good practice, development has been largely opportunistic with little national guidance on what is required at this level. The need for a more systematic means of developing advanced practitioner attributes has been recognised, with advanced practice playing a central role in building workforce capacity to aid in the direction of travel set out in Delivering Care; Enabling Health (SEHD 2006) and Better Health; Better Care (SGHD 2007).

A pilot advanced practice succession planning development pathway is therefore being devised to provide a generic, flexible and sustainable framework, supporting educational solutions for advanced practice. It is envisioned that this will enhance capability and capacity within the nursing profession, utilising a consistent approach nationally within Scotland. The pathway will help people to identify their development needs and support them in accessing the appropriate education through either work based learning or academic education provision. This pilot advanced practice succession planning development pathway will be available to all practitioners working towards developing advanced practice attributes.

It is acknowledged that as advanced practice roles have resulted from addressing government policy, national drivers/targets, and also local contextual factors practitioners have differing ranges of education and experience. A key issue in this succession pathway is therefore enabling practitioners collaboratively with their employers to identify their own educational needs and solutions to support their development. Practitioners should be able to identify the elements of the pathway required, to develop their existing role and/or prepare them for a more advanced role. It is proposed that a development needs analysis tool devised for the succession planning pathway will aid in this process. It is also important that individuals set out their learning outcomes via annual appraisal linking to the Knowledge & Skills Framework (KSF). These tools should also enable individual practitioners to identify areas of further development, on completion of the pilot. This succession planning development pathway is equally applicable for those wishing to develop clinical, clinical/education, clinical/managerial, or clinical/research advanced roles. This pathway is one of a series of initiatives aiming to support the development of the nursing workforce.

Context and Links to other Projects
Nursing and Midwifery Council
The Nursing and Midwifery Council (NMC 2005) defined the “Advanced Nurse Practitioner” and outlined draft competencies for the role (Appendix one). In 2006 the NMC sought approval from the Privy Council to create a further part of the register for the Advanced Nurse Practitioner. Since this time, the White Paper ‘Trust, Assurance and Safety – the Regulation of Health Professionals in the 21st Century (Department of Health, 2007) has stated that the UK Government will ask the Council for Healthcare Regulatory Excellence to work with different health care regulators to support the work on standards for advanced practice. This includes developing standards for nurses, AHPs and clinical scientists. NMC are currently awaiting further detail from the White Paper Implementation Plan before any further discussions or decisions can be made on the Advanced Nurse Practitioner (NMC, 2007). The NHS Career Framework also includes advanced practitioners at level 7 of the framework (Appendix two).
Modernising Nursing Careers (MNC) was launched in 2006 as part of the overarching Modernising Healthcare Careers Strategy. It is a joint initiative involving the four UK countries, and developments in Scotland will feed into the wider UK agenda on delivering MNC aspirations. Scotland is taking the lead on Specialist and Advanced practice and a range of initiatives are being taken forward that are linked to this pilot advanced practice succession planning development pathway.

**Advanced Practice Toolkit**
This work is being led by the Scottish Government, and is being informed by work undertaken surrounding the Senior Charge Nurse review, NMC regulation, implementation of ‘Visible, Accessible and Integrated Care’, and creation of ideal type exemplars in key areas of clinical practice. The toolkit is currently being developed to include a definition of advanced practice; workload/workforce analysis tools, an education framework and KSF outline/job descriptions. The advanced practice succession planning development pathway will be included in the toolkit. A position paper on the progress of this toolkit will be made available in December 2007.

**Clinical Education Career Pathways**
NES is leading the development of pathways for Clinical Education Careers spanning service and education as part of the MNC agenda. The pathways will articulate with the NHS Career Framework and the Scottish Credit and Qualifications Framework (SCQF). The rationale for this development is to enhance clinical education career opportunities that positively contribute to staff development and retention, and support the consistent provision of appropriate educational opportunities for practitioners. The pilot advanced practice succession development pathway will be available to individuals undertaking a clinical education career pathway.

**Development Pathway for Consultant Nurses, Midwives and AHPs (NMAHPs)**
The succession planning development pathway for consultant NMAHPs was designed to increase the recruitment pool of people with the skills, abilities and motivation to achieve a consultant role. It is not a standardised programme, but a personalised development pathway designed to match each individual’s strengths, abilities and learning needs. The advanced practice succession planning pathway will employ the same succession planning methodology to ensure clear and consistent links are made for practitioners within the NHS Career Framework.

**Early Clinical Careers Fellowships for Nurses and Midwives**
The aim of this project is to identify highly motivated, enthusiastic and resilient newly registered nurses and midwives to undertake a national prescribed development programme. The fellowship programme will support the personal, professional and academic development of registered nurses and midwives within a specific clinical context.
Succession Planning
A succession planning pathway should incorporate succession development methodologies. In essence it is about building talent through flexible options to develop individuals (Cunningham 2007a). As Guinn (2000) highlights a key component to enabling successful succession planning is not to focus on “job titles” but concentrate on the key skills and behaviours required to successfully enable an organisation to accomplish its goals and strategies. Within the Scottish Health Service it has been recognised that building a national approach towards key skills and behaviours through education provision is necessary at advanced practitioner level given the extensive and expanding range of change required highlighted in “Better Health; Better Care” (SGHD 2007).

Butler & Roche-Tarry (2002) outline that it is important to consider what already exists and what is required, in addition to assessment systems that can measure the development of skills, competencies and knowledge within practice. Therefore the pathway aims to be flexible; taking into account existing education provision and the valuable role work based learning and professional development play in developing the knowledge, skills and expertise to work at an advanced level. Given the complexity of advanced practice it will be important that appropriate locally delivered educational solutions are utilised in relation to individual job requirements. It is also anticipated the pilot will also aid in identifying any gaps in educational provision nationally.

Succession Planning Development Pathway
The development of this pathway has been formed through reviewing the literature\(^1\) and feedback from three regional events across Scotland in July 2007\(^2\). This pilot advanced practice succession planning development pathway follows a similar format to the existing succession planning development pathway for consultant NMAHPs\(^3\). This is to ensure that a consistent methodology is employed to enable practitioners to identify their continued professional development needs in a structured way throughout the career framework. Utilising this information, the pilot advanced practice succession planning development pathway encompasses four interlinked elements which require consideration (Figure 1).

1. Central supporting mechanisms (Infrastructure to support learning)
2. Generic overarching themes (Main components of advanced practice)
3. Examples of education solutions (Solutions participants could access to meet learning needs)
4. Underpinning principles (Main principles of advanced practice)

The four elements can be reviewed in appendix four.

It is recognised that in the United Kingdom, there is currently a lack of consensus regarding the level of study required by an Advanced Practitioner. To progress to advanced practitioner level, it is generally accepted that individuals should show evidence of MSc level of study, such as at Post Graduate Diploma/working towards Masters Level. This is the level we would recommend given the increasing complexity of the roles at this level as well as the additional accountability, responsibility and the knowledge and skills required for innovation and creativity in developing services and workforce. In addition to managing change both at an individual, professional and organisational level. Clearly, this level must articulate with the requirements of Professional bodies, as regulatory requirements emerge.

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\(^1\) Cross reference to appendix three
Figure One – Interlinked components to the succession development pathway

- **1. Central Supporting Mechanisms**
  - Infrastructure

- **2. Four Overarching Themes**
  - Areas of Learning

- **3. Examples of education solutions**
  - Methods of Delivery

- **4. Underpinning Principles**
  - Development

Succession Planning Development Pathway Advanced Practice
(1) Central Supporting Mechanisms

Groves (2007) highlights that the key to succession planning is the supporting mechanisms in place to ensure competencies and capabilities are enhanced and embedded in practice. These underpinning mechanisms are important at this level of practice, to aid organisations to develop a supportive infrastructure to facilitate individual's development. A key element to the central supporting mechanisms at this level is Work Based Learning (WBL). As Williamson (2005;498) illustrates “facilitation of an environment that is conducive to work based learning is equally important if learning and changes in practice are to be sustained and shared across the wider organisation”. Swallow et al (2001) identified benefits of WBL in enhancing day-to-day practice as well as supporting practice development activity. Whilst Rhodes & Sheil (2007) reiterate that in developing our nurse leaders, WBL has been recognised in providing flexible educational solutions. Other examples of central supporting mechanisms in supporting advanced practice education solutions are given below.

Action Learning Sets
Action learning is a learning methodology which enables linking theory to practice, as it is grounded in facilitating active learning within practice (Rimanoczy 2007).This is where individuals bring actual practice problems to learning sets. Individuals are encouraged to question or challenge their clinical practice and consider different modes of action. The purpose of including action learning sets in the succession planning pathway is to aid individuals in considering alternative solutions to challenges/problems within their practice. Joyce (2005) suggests that this method of learning also incorporates the development of many of the underpinning principles outlined in this succession planning development pathway. Johnson (1998) highlights an important aspect that action learning is dependent on the skills of the facilitator, and if it follows a managerial model does not work well. Equally important are the resources, time, and appropriate mix of participants, which must be considered when setting up this supporting mechanism. Smith and O’Neil (2003) considered typical action learning programmes that offer several parallels to WBL and work based programmes (Appendix five). These areas of overlap within these concepts and models support this pilot succession planning development pathway for advanced practitioners. In addition, West (2005) highlights that action learning sets have the potential to develop advanced practice principles and attributes.

Critical companionship
Titchen (2003;12) states “Critical companionship is a helping relationship, in which an experienced facilitator (often but not always a colleague) accompanies another on an experiential learning journey, using methods of “high challenge” and “high support” in a trusting relationship. The overall purpose of critical companionship is to enable others to practise in ways that are person centred and evidence based”. This can be employed on a one to one basis or within a number of learning contexts outlined in the supporting mechanisms for this succession pathway (Titchen 2003; Dahlgren et al 2006; Gribben & Cochrane 2006). It is anticipated that critical companionship will support and develop high level critical reflection and metacognitive skills and will be used within the succession planning development pathway to enable individuals to interrogate their own practice and continually develop their learning.
Mentorship/Clinical Supervision/Co-Coaching

The literature\(^4\) outlines that the concept of mentorship/coaching/shadowing is seen as a central mechanism to supporting advanced practice. If practitioners are to lead, influence and empower in practice/education and incorporate the patient at the centre of care they require the supportive exchange of learning, advice and feedback to apply this to practice. As part of the succession planning pathway we will be exploring ways of utilising mentorship/coaching/shadowing.

Clinical supervision is a model which can be utilised in supporting advanced practice. Much literature has outlined the benefits of clinical supervision, in facilitating the overarching themes and underpinning principles (Kilcullen 2007).

As outlined earlier within Scotland there are a number of practitioners who are working at/ or towards advanced practitioner level. They will currently have differing levels of education provision and experience. Co-coaching is a mechanism which could facilitate individuals learning and development needs that respect individual differences. Cunningham (2007b) outlines in this situation co-coaching is a good supporting mechanism.

Annual review/plan/KSF

This is seen as crucial to enable practitioners in identifying their individual learning needs and inform completion of the development needs analysis tool for advanced practice.

\(^4\) Cross reference to appendix three
### (2) Four Overarching Themes

The four overarching themes comprise the main components of advanced practice, Leadership, Teaching, Coaching and Mentoring, Research and Advanced Clinical Practice.

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<th>Teaching Coaching and Mentoring</th>
<th>Research</th>
<th>Advanced clinical practice</th>
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<tr>
<td>• Identifying need for change, leading innovation and managing change, including service development.</td>
<td>• Principles of teaching and learning</td>
<td>• Ability to access research/use information systems</td>
<td>• Decision making/clinical judgement and problem solving</td>
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<td>• Developing case for change</td>
<td>• Supporting others to develop knowledge and skills</td>
<td>• Critical appraisal/evaluation skills</td>
<td>• Critical thinking and analytical skills incorporating critical reflection</td>
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<td>• Negotiation and influencing skills</td>
<td>• Promotion of learning/creation of learning environment</td>
<td>• Involvement in research/audit</td>
<td>• Managing complexity</td>
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<td>• Networking</td>
<td>• Patient teaching and information giving</td>
<td>• Ability to implement research findings into practice- including development of policies/protocols and guidelines.</td>
<td>• Clinical Governance</td>
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<td>• Developing patient education materials</td>
<td>• Conference presentations</td>
<td>• Equality &amp; Diversity</td>
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<td>• Advanced Values Base knowledge</td>
<td>• Publications</td>
<td>• Ethical decision making</td>
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<td>• Assessment, diagnosis referral, discharge</td>
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<td>• Achievement of NMC draft competencies</td>
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<td>• Developing higher levels of autonomy</td>
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<td>• Assessing and managing risk</td>
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<td>• Developing confidence</td>
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<td>• Developing therapeutic nursing to improve patient outcomes</td>
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<td>• Higher level communication skills</td>
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<td>• Patient Focus/Public Involvement</td>
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- Leadership
- Teaching Coaching and Mentoring
- Research
- Advanced clinical practice
(3) **Education solutions**

There are a large number of education solutions that participants could access to meet their learning needs within the overarching themes. The pathway is flexible and therefore the examples given, only highlight some of the differing methods of learning that could be used (Appendix four). For example, individuals could undertake, Work Based Learning, academic theoretical modules, shadowing or experiential learning.

(4) **Underpinning principles**

**Autonomous practice**

Advanced Practitioners practice autonomously. Within the literature there has been a debate relating to this principle. As Boyden & Edwards (2007) outline it may be interpreted as making independent decisions, it is however recognised that many may work within or lead teams. Therefore it is referred to in this document as the freedom to exercise judgement about actions, in turn accepting responsibility for them, and being held to account.

**Critical Thinking**

Practising autonomously requires higher level critical thinking skills. Mantzoukas et al (2007; 33) states that critical thinking is “self-regulatory judgement that results in demonstrating the ability to interpret, analyse, evaluate and infer”. Critical thinking allows advanced practitioners to explore and analyse evidence, cases and situations in clinical practice, enabling a high level of judgement and decision making.

**High Levels of Decision Making & Problem Solving**

As an underpinning principle it would be expected that an advanced practitioner can demonstrate expertise in complex decision making in relation to their current role. This includes determining what to include in the decision making process, and making a decision based on judgement and critical thinking/problem solving. This in turn affects the ability to practice autonomously.

**Values Based Care**

At this level of practice, individuals require to have a high level of awareness of their own values and beliefs. Care is negotiated with patient/carers as an equal partner.

**Improving Practice**

It is recognised that if NHS Scotland is to improve and change practice as outlined in Better Health; Better Care (SGHD 2007) it is crucial that the learning and development gained through the succession planning development pathway is translated into practice. It is important that advanced practitioners deliver advanced practice which is evidence based within service, whilst acting as a positive role model that enables change regardless of their “job title”. To determine the impact of individual practitioners on development and service delivery concurrent evaluation of the pilot succession planning development pathway will be undertaken.

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5 Cross reference to appendix three
6 This is a crucial as outlined in both Delivering Care; Enabling Health (SEHD 2006) and Better Health; Better Care (SEHD 2007)
Summary

This pilot advanced practice succession planning development pathway will be available to all practitioners working towards developing advanced practice attributes. It is acknowledged that advanced practice roles have resulted from addressing government policy, national drivers/targets, and also local contextual factors and practitioners have differing ranges of education and experience. A key issue in this pathway is therefore enabling practitioners collaboratively with their employers to identify individual educational needs and solutions to support their development. The pathway will act as a flexible guide. It is also important that individuals set out their learning outcomes via annual appraisal linking to the Knowledge & Skills Framework (KSF). Given the complexity of advanced practice, local adaptation of appropriate education solutions should be utilised in relation to individual job requirements.

This pathway is designed to enable people to identify their individual development learning needs and supporting them in conjunction with employers in recognising what is required for their particular role. All components within this pathway are interlinked and it is recommended that consideration is given to each element to enhance the benefit of using the pathway.
Appendix One – NMC (2005) Definition of the “Advanced Nurse Practitioner”

“Advanced nurse practitioners are highly experienced and educated members of the care team who are able to diagnose and treat your healthcare needs or refer you to an appropriate specialist if needed”

Advanced nurse practitioners (ANP’s) are highly skilled nurses who can:

- Take a comprehensive patient history
- Carry out a physical examination
- Use their expert knowledge and clinical judgement to identify the potential diagnosis
- Refer patients for investigations where appropriate
- Make a final diagnosis
- Decide on and carry out treatment, including the prescribing of medicines, or refer to patients to an appropriate specialist
- Use their extensive practice experience to plan and provide skilled and competent care to meet patient’s health and social care needs, involving other members of the health care team as appropriate
- Ensure the provision of continuity of care including follow up visits.
- Assess and evaluate, with patients, the effectiveness of the treatment and care provided and make changes as needed.
- Work independently, although often as part of a health care team
- Provide leadership
- Make sure that each patient’s treatment and care is based on best practice.

(As published by Association of Advanced Nurse Practitioner Educators (AANPE) 2006)
MORE SENIOR STAFF - LEVEL 9
More senior staff with ultimate responsibility for clinical caseload decision-making and full on-call accountability.

CONSULTANT PRACTITIONERS - LEVEL 8
Staff working at very high level of clinical expertise and/or have responsibility for planning services.

ADVANCED PRACTITIONERS - LEVEL 7
Experienced clinical practitioners with high level of skill and theoretical knowledge. Will make high level clinical decisions and manage own patients.

SENIOR PRACTITIONER/SPECIALIST PRACTITIONER LEVEL 6
A higher degree of autonomy and responsibility than level 5 or managing one or more services in a clinical environment.

PRACTITIONERS - LEVEL 5
Registered practitioners consolidating pre-registration experience and getting ready for a higher level of functioning.

ASSISTANT / ASSOCIATE PRACTITIONER – LEVEL 4
Studying for HND/ DipHE some work involving protocol based care under the supervision of a registered practitioner.

SENIOR HEALTHCARE ASSISTANT/TECHNICIAN – LEVEL 3
Higher level of responsibility than support worker and studying for or attained S/NVQ 3/4 or NHC / Cert HE.

SUPPORT WORKERS – LEVEL 2
Frequently entitled ‘Healthcare or Care Assistant’, probably studying for or attained a vocational qualification (S/NVQ) at level 2.

SUPPORT WORKERS – LEVEL 1
e.g. domestic/support staff or those in roles that require very little formal education.
Appendix Three – Literature which informed the central themes/principles for Advanced Practitioner Level.


Castledine, G (2001) Can we standardize titles and levels in nursing? British Journal of Nursing 10(13) 891


Daly, W., M (2003) Nursing Roles and levels of practice; a framework for differentiating between elementary, specialist and advancing nursing practice 12(2) 158-167

Davies, B & Hughes, M, A (2002) clarification of advanced nursing practice; characteristics and competencies. Clinical Nurse Specialist 16 147-152

Deary, R (2005) An action research study exploring midwives support needs and the affect of group supervision. Midwifery 21 (2) 161-176


Killcullen, A (2007) An experiences of clinical supervision on registered nurses undertaking MSc/graduate diploma in renal and urological nursing and on their clinical supervisors. Journal of Clinical Nursing 16 (6) 1029-1038


West, P (2005) Blackburn with Darwen Action Learning Set- A model for improving the interface between inpatient and community teams. The Mental Health Review. 10 (1) 22-25


### Appendix Four

**Diagram of Advanced Practitioner Development Pathway**

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<th>Central Support Mechanisms</th>
<th>Over-arching Themes</th>
<th>Examples of Education Solutions</th>
<th>Underpinning Principles</th>
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<td>Action Learning Sets</td>
<td><strong>Leadership</strong></td>
<td>Leadership Programmes</td>
<td>Central Support Mechanisms</td>
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<tr>
<td>Mentorship/Coaching</td>
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<td>RPL Work based learning</td>
<td>Over-arching Themes</td>
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<td>Annual Review &amp; Plan</td>
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<td>Performance &amp; Shadowing</td>
<td>Examples of Education Solutions</td>
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<td>KSF</td>
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<td>Research Programmes</td>
<td>Underpinning Principles</td>
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<td>Clinical Supervision</td>
<td><strong>Teaching, Coaching &amp; Mentorship</strong></td>
<td>Practice Teacher preparation</td>
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<td>Co-coaching</td>
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<td>Work based learning</td>
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<td>Accredited teaching &amp; assessing qualification</td>
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<td>Audit/research studies/protocol</td>
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<td>Work based learning courses surrounding</td>
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<td><strong>Advanced Clinical Practice</strong></td>
<td>• Non medical prescribing</td>
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<td>• Clinical Governance</td>
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<td>• Ethics</td>
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Appendix Five – Action Learning and Work Based Accreditation

Personal Development

Accreditation through Work based learning processes in collaboration between service and HEI's.
Reference


Butler, K & Tarry-Roche, D., E (2002) Succession planning; Putting an organization's knowledge to work. Careers and Recruitment. 20 201-203


Cunningham I (2007a) Talent Management: making it real Development and Learning in Organisations. 21(2) 4-6

Cunningham I (2007b) Managers can't (and shouldn't) do all the coaching; taking a more realistic approach to coaching in organisations. Development and Learning in organisations. 21(1) 4-6


Joyce, P (2005) Developing a nursing management degree programme to meet the needs of Irish nurse managers. Journal of Nursing Management 13 74-82


