London Cancer Clinical Nurse Specialist Development Toolkit

Developed by the Macmillan Cancer CNS Development Lead Pilot Project

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Introduction

The purpose of the toolkit is to support Clinical Nurse Specialists (CNSs) to develop their confidence and core skills and behaviours to care for people affected by cancer. It has been designed for CNSs to assess and track their confidence in professional practice and as a mechanism for collecting and presenting evidence of meeting core cancer capabilities in practice to enable these to be signed off by their line manager or supervisor.

The toolkit supports local implementation of the Aspirant Cancer Career and Education Development (ACCEND) programme as it contains a capability assessment derived from the Core Cancer Capabilities in Practice (CiP) and Education Framework for the Nursing and Allied Health Professions Workforce.

Background

National

The 2019 NHS Long Term Plan (https://www.england.nhs.uk/cancer/strategy/) commits to deliver personalised care for everyone living with cancer, recommending that all individuals with cancer have access to the right expertise and support through a clinical nurse specialist or support worker. Specialist cancer nurses are key to ensuring that peoples' needs are addressed and that they experience high-quality outcomes and experience. A growing cancer population with increased complexity of needs means that there is an urgent need to act now to keep up with the demand and ensure people living with cancer receive the support they require.

However, the cancer nursing workforce is facing a decline in experienced professionals due to retirement and there are reduced numbers recruited into this vital specialty due to limited understanding of the CNS role, lack of exposure to cancer nursing education, and challenges in career progression. In response, the **Aspirant Cancer Career and Education Development (ACCEND) Programme** was launched in 2023 to transform education, training, and career pathways for nurses and allied health professionals (AHPs) in cancer care. ACCEND provides a nationally agreed, multi-level framework supporting career development from pre-registration to advanced roles, addressing workforce gaps by offering structured education and development opportunities. A key component is the Career Pathway, Core Cancer Capabilities in Practice (CiPs), and Education Framework, which define the capabilities required for effective and personalised cancer care. The CiPs within the ACCEND Framework are high-level, professional capabilities that describe the expected clinical and professional practice for individuals in cancer care roles. They are divided into 7 domains and outline the knowledge, skills, behaviours, and professional attributes required for safe, effective, and personalised care. By providing a structured and comprehensive approach to career development, ACCEND addresses current workforce challenges and ensures that healthcare professionals are well-equipped to deliver high-quality cancer care now and in the future.

The ACCEND Programme can support with upskilling, recruitment, and retention, but requires local implementation supported by experienced nursing and Allied Health Professionals (AHP) workforce leaders in Cancer Alliances. Therefore, it is a 2025/26 national deliverable for Cancer Alliances to facilitate the implementation of the ACCEND Career Pathway, Core Cancer Capabilities and Education Framework in providers for relevant nursing, AHP and support worker roles in cancer.

Regional – London

In 2019, the London Lead Cancer Nurse Forum (LLCNF) identified the urgent need for a cancer nursing roadmap to address workforce gaps, including the retirement of experienced CNSs. A 3-year pilot program, co-funded by Macmillan and NHS England, was launched in 2023 to enhance CNS workforce resilience. This initiative includes the introduction of Cancer Development Leads (CDLs) in each Integrated Care System (ICS) to accelerate CNS development, provide structured support, and implement the ACCEND framework locally.

To support this project, a task and finish group of the CDL pilot steering group was convened to develop a toolkit to support the new CDL postholders to deliver tailored support for the CNSs in their local ICS. The group developed two documents to form the toolkit: a self-efficacy/confidence assessment and a London cancer core capabilities assessment form. This emphasises the importance of confidence alongside capability in achieving clinical excellence and professional autonomy. This comprehensive approach aims to ensure the development of a confident, capable CNS workforce across London.

Toolkit Description

The toolkit comprises two resources designed to provide a practical framework support continued growth in confidence, capability, and autonomy.

CNS Self-efficacy/Confidence in Professional Practice Assessment.

Key aim: Evaluates self-confidence:

This tool supports CNSs in evaluating and tracking their own confidence across key areas of practice. By reflecting on their ability to apply skills in real-world settings, individuals can track progress, recognise areas for development, and build confidence in their professional role. The assessment items are mapped to the ACCEND framework domains to support structured personal development and career progression.

London Enhanced and Advanced CNS ACCEND Capability Assessment Form

Key aim: Provides evidence for capabilities in practice:
This capability assessment is intended for both enhanced and advanced CNSs, enabling them to identify and address education, learning, and development opportunities.

Provides a clear framework to develop the core cancer-specific capabilities in practice (CiPs) with knowledge, skills, and behaviours to care compassionately for people affected by cancer. The CiPs within the ACCEND Framework are high-level, professional capabilities that describe the expected clinical and professional practice for nurses in cancer care roles. They are divided into 7 domains and provide a clear, structured way for CNSs to develop and demonstrate the professional capabilities needed to maintain and improve both the clinical and leadership aspects of being a CNS in cancer nursing. The domains are as follows:
Domain A: Person-centred coallaborative workingtr
Domain B: Assessment, investigations, and diagnosis
Domain C: Condition management, treatment, and planning
Domain D: Leadership and collaborative practice
Domain E: Developing evidence-based practice and improving quality

Domain F: Service evaluation and quality improvement
Domain G: Educating and developing self and others

These domains are essential for ensuring that CNSs can:

- Deliver high-quality, personalised cancer care.
- Lead teams and collaborate with other healthcare professionals.
- Stay current with evidence-based practices.
- Improve service delivery through evaluation and quality improvements.
- Continuously educate themselves and others.

How to use the Toolkit

It is advised that **both** tools contained in the toolkit are used to ensure a comprehensive approach is taken to supporting CNSs to be confident and able in their roles. The toolkit is designed to be embedded within local continuing professional development (CPD) and appraisal processes for CNSs. By integrating use of these forms with the annual appraisal process, and regular CPD-focussed meetings, the CNS is supported in accelerating their learning, achieving greater autonomy, tracking progress and achievements, and delivering the highest standards of personalised cancer care. It is advised that regular meetings and review of the documents takes place between the CNS and their line manager and/or supervisor. This collaborative process allows for customised support and recognises that development needs can vary per individual based on their career stage, goals, and opportunities available within the organisation. This approach supports continuous professional growth and allows the CNS, their manager, and the supervisor to align on priorities, such as training courses, shadowing opportunities, and experiential learning, which will advance their skills and autonomy.

It is recommended that drafts and completed resources within the toolkit are held by the CNS. By maintaining ownership, CNSs are supported in taking an active role in their development and use the toolkit as a resource to enhance their practice. Upon completion of the capabilities assessment, it is advised that the signed-off form is shared by the CNS with their line manager to support their annual appraisal.

Here is a step-by-step guide for using the toolkit:

Step 1. Initial meeting – Introduction to the toolkit

An initial meeting is conducted to review the contents of the toolkit and discuss how this will be incorporated into the CNSs continuing professional development and aligned with their appraisal.

Invitees to the meeting: CNS, line manager, and/or agreed supervisor.

Discussion to include Review of the assessment forms to ensure shared understanding of content and roles/responsibilities in terms of completion and signing off. Talk through the practicalities regarding where the draft/completed assessment will be saved online and the processes for signing off. Agree frequency of meetings and dates for:

- CNS to complete the self-efficacy/confidence assessment
- Review of the completed assessment form with manager/supervisor
- Development of action plan based on the results
- Review of the Capabilities Assessment form
- Completed sign-off date for the Capabilities Assessment

Step 2: CNS to complete the Self-Efficacy/Confidence Assessment

The CNS independently completes the Self-efficacy/Confidence in Professional Practice Assessment form. Each question aligns with one or more of the ACCEND domains; therefore, the CNS can reflect on their confidence levels across the core cancer capabilities, establishing a foundation for setting specific learning objectives. The CNS brings the completed documents to a meeting with their supervisor and/or line manager. Each question is discussed individually and then an overall review of the results conducted. The review will reveal specific domains in which the CNS feels less/more confident and will enable a development plan to be jointly created.

Step 3: Complete the Capabilities Assessment

This resource provides a comprehensive evaluation of specific capabilities aligned with the ACCEND framework. It is recommended that the results from the completed self-efficacy/confidence assessment document used to guide discussions about meeting these capabilities effectively.

Process:

1. **Capability Review:** The line manager and/or supervisor and the CNS collaboratively review each capability within the four sections (clinical nursing practice, proactive management, multidisciplinary partnership working and professional practice leadership) of the assessment tool. Together, they determine which capabilities have been successfully achieved and identify those requiring further development.
2. **Action Plan Creation:** Develop a detailed action plan to address unmet capabilities. This plan should outline the evidence required to meet these capabilities and the specific support, training, or experiences required to do so. Additionally, define a clear process for capability sign-off, identifying the appropriate members of the multidisciplinary team (MDT) with signing authority for specific capabilities. Agree on timeframes for achieving and validating each capability. Tailor the process to each capability while ensuring alignment with professional standards and practice expectations.
3. **Review Meeting Frequency:** The frequency of review meetings should be agreed upon based on the CNS's development goals, personal objectives, and the agreed-upon timelines. This frequency may vary depending on the setting and the skills or knowledge being developed.
4. **Engagement with signing authority contributors:** The line manager or supervisor should engage with individuals identified as responsible for signing off specific capabilities. Ensure their agreement to participate, clarify expectations of their role, and confirm their understanding of the required time commitment, processes, and deadlines.
5. **Regular Review Meetings:** Hold regular meetings to track progress, evaluate the effectiveness of the action plan, and make necessary adjustments to support the CNS's development.
6. **Capability Sign-Off:** Each capability should be signed off by the designated individual once the required evidence has been demonstrated. This ensures a thorough and validated assessment process.
7. **Progress Record Completion:** Once the capabilities within a section have been met, the date is recorded in the progress section located at the end of the document and signed by the line manager.

Overview of the CNS Self-Efficacy/Confidence in Professional Practice Assessment

Summary

This self-assessment tool supports Clinical Nurse Specialists (CNSs) in reflecting on their confidence in applying the knowledge, skills, behaviours, and professional attributes described within the Core Cancer-specific Capabilities in Practice (CiPs) of the **Aspirant Cancer Career and Education Development (ACCEND) Framework**. Aligned to the seven ACCEND domains, the tool helps CNSs identify strengths, development needs, and opportunities for growth.

Confidence, or self-efficacy, is the belief in one's ability to successfully apply skills and capabilities in practice. Used as part of continuing professional development (CPD), clinical supervision, and appraisal discussions, this tool enables CNSs to reflect on their ability to deliver high-quality, personalised care, respond to complex patient needs, and record their development over time through repeated completion. This supports ongoing professional growth and the delivery of safe, effective, evidence-based cancer care.

Aim

This assessment and the resultant development plan aim to support CNSs in their professional development by:

1. **Facilitating self-assessment**: Enabling CNSs to assess their personal strengths and areas for development, facilitating ongoing professional growth.

2. **Enhancing self-efficacy**: Fostering CNSs' confidence in their ability to perform tasks related to cancer care capabilities, which are essential for achieving desired outcomes in patient care.

3. **Planning professional development**: The results will highlight where additional learning or support needed to enhance the CNS skills and self-efficacy and the plan to achieve these.

Description

The assessment comprises:

- **A series of 25 questions**: Answering these questions provides insights into confidence levels in meeting capabilities for professional practice which are essential for decision-making, leadership, and patient care. Detail of the ACCEND domain(s) that each questions aligns is noted under each question. The domains are as follows:
  Domain A: Person-centred collaborative working
  Domain B: Assessment, investigations, and diagnosis
  Domain C: Condition management, treatment, and planning
  Domain D: Leadership and collaborative practice
  Domain E: Developing evidence-based practice and improving quality
  Domain F: Service evaluation and quality improvement
  Domain G: Educating and developing self and others

- **An action plan:** To be completed in collaboration with line manager or supervisor.

Guidance notes for CNSs completing the assessment:

Reflect Honestly: Be honest with yourself when completing this assessment form. This process is designed to support your growth in your role as a CNS and to enhance your overall practice. The purpose of the assessment is to help you gain a clear understanding of your strengths and identify areas for improvement. By sharing and co-developing the action plan with your line manager or supervisor, you will create a valuable record of your learning needs. This record can serve as evidence for accessing education, training courses, or other development opportunities.

Follow these steps:

1. **Answer the questions in the assessment form:** Reflect on your belief in your ability to complete the tasks outlined in each question. Think about your experience and performance in real-world scenarios, particularly focusing on your comfort level, independence, and your need for guidance. Using the scale provided under each question, circle the relevant confidence level. A description for each of the levels is included below to help you with scoring:
   Limited Confidence: If you feel you have minimal understanding and frequently hesitate when performing this task, requiring substantial guidance.
   Developing Confidence: If you understand the basics but still hesitate and occasionally need support or reassurance.
   Moderate Confidence: If you have a solid understanding and can perform tasks with minimal hesitation but may still seek confirmation in complex cases.
   High-level of Confidence: If you can complete tasks efficiently with little to no guidance and handle most challenges with ease.
   Exceptional Confidence: If you feel you have mastery of the task, can lead others, and confidently navigate complex situations independently.

2. **Schedule a meeting with your line manager or supervisor to review and discuss the content**. Add any comments under each question to provide reflections or additional details where helpful. Pay particular attention to questions where your confidence scores are low and look for patterns across the ACCEND domains. Identifying common themes in your learning and development needs will help you create a more focused and effective action plan.

3. **Co-develop the action plan with your line manager and/or supervisor.** Use SMART goals (or locally used equivalent) in the formulation of the plan. SMART goals provide clarity, focus, and measurable milestones, ensuring objectives are specific, achievable, and time bound. They will enable you to track progress effectively and achieve goals with greater efficiency.

4. **Re-visit and update this assessment in one year or sooner**, as agreed with your line manager/supervisor,

The CNS Self-Efficacy/Confidence in Professional Practice Assessment

Name:	
Date Completed:	

1. How confident do you feel in your current practice as a Clinical Nurse Specialist (CNS) in cancer care?

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

2. How confident are you in articulating your role and responsibilities as a CNS?

Aligns with ACCEND domains: ABCDEFG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

3. How confident are you in organising your own workload so that you meet your clinical and service responsibilities?

Aligns with ACCEND domain: D

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

4. How confident are you to demonstrate your specialist knowledge and experience to support a patient in your service?

Aligns with ACCEND domains: ABCE

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

5. How confident are you at presenting patients at MDT (Multidisciplinary Team) meetings?

Aligns with ACCEND domains: ABCEG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

6. How confident are you that patients know how to contact you during office hours?

Aligns with ACCEND domains: AC

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

7. How confident are you at managing yourself, your work life and home life?

Aligns with ACCEND domains: DG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

8. How confident are you that you want to be in a CNS role where you will develop further your skills and capabilities to be a proficient cancer nurse?

Aligns with ACCEND domains: ABCDEFG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

9. How confident are you to recognise and seek assistance in changing patient conditions that could affect the patient's health?

Aligns with ACCEND domains: ABCG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

10. How confident are you in preparing patients for relevant procedures and treatments?

Aligns with ACCEND domains: ABC

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

11. How confident are you in documenting and reporting an accurate ongoing evaluation of patient care?

Aligns with ACCEND domains: ABCG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

12. How confident are you in demonstrating a good understanding of informed consent?

Aligns with ACCEND domains: ABCG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

13. How confident are you in providing care/advice to patients with ongoing health care needs?

Aligns with ACCEND domains: ABC

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

14. How confident are you in critical thinking to make decisions when developing care plans for patients?

Aligns with ACCEND domains: ABCDEG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

15. How confident are you independently determine when a consultation with another member of the Multidisciplinary Meeting is required?

Aligns with ACCEND domains: ABCDEG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

16. How confidently can you challenge advocacy for a patient with other members of the multidisciplinary team?

Aligns with ACCEND domains: ABCDEG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

17. How confident are you in demonstrating and articulating a broad specialist knowledge of your tumour type for nursing practice?

Aligns with ACCEND domains: ABCEG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

18. How confident are you in reporting a near miss in care?

Aligns with ACCEND domains: ABCG

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

19. How confident are you in providing nursing care to meet hospice, palliative, or end-of-life care needs?

Aligns with ACCEND domains: ABC

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

20. How confident are you in managing patients' therapeutic interventions following treatment i.e. drains, catheters etc relevant to speciality?

Aligns with ACCEND domains: ABCE

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

21. How confident are you in advocating for your patient's welfare and wellbeing?

Aligns with ACCEND domains: ABC

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

22. How confident are you at delivering personalised patient centred care?

Aligns with ACCEND domains: ABC

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

23. How confident are you at presenting and reflecting on a case in clinical supervision?

Aligns with ACCEND domains: ABCE

Limited Confidence	Developing Confidence	Moderate Confidence	High-level of Confidence	Exceptional Confidence
Discussion/ Comments from supervisor				

24. How confident are you at supporting patients and their carers at a time of breaking bad news?

Aligns with ACCEND domains: ABCG

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ comments from supervisor				

25. How confident are you at assessing a patient physically and psychosocially?

Aligns with ACCEND domains: AB

Limited Confidence	**Developing Confidence**	**Moderate Confidence**	**High-level of Confidence**	**Exceptional Confidence**
Discussion/ Comments from supervisor				

Overview and Plan

Discuss the results of your self-assessment with your supervisor and/or line manager and add any reflections they might have for you and plans to address your learning needs in the boxes below. Use SMART goals (or equivalent framework) to provide to enable you to track progress effectively and achieve goals with greater efficiency.

Comments:

Plan:

Date for review:

Overview of the London Enhanced and Advanced CNS ACCEND Capability Assessment

Summary

The London Enhanced and Advanced CNS ACCEND Capability Assessment supports Clinical Nurse Specialists (CNSs) to identify, develop, and demonstrate the knowledge, skills, and behaviours required for enhanced and advanced cancer nursing practice. It provides a structured framework to support professional development, evidence capability achievement, and plan learning across the CNS career pathway.

The assessment includes capability standards, examples of evidence, development planning tools, and an evidence log to support progression and recognition of practice development.

Aim

To support CNSs in achieving and evidencing the core cancer-specific Capabilities in Practice (CiPs) required for enhanced and advanced cancer nursing roles, enabling the delivery of high-quality, personalised cancer care.

Description

The London Enhanced and Advanced CNS ACCEND Capability Assessment outlines essential skills, knowledge, and capabilities necessary for providing care to individuals affected by cancer at both enhanced and advanced practitioner levels.

It is structured into four sections, each corresponding to a specific area of nursing practice:

1. Clinical Nursing Practice
2. Proactive Management
3. Multidisciplinary Partnership Working
4. Professional Practice and Leadership

Each section includes:

- The core capabilities required for that specific area of nursing practice.
- Detail on the alignment of each capability with ACCEND domains.
- Examples of evidence CNSs can provide to demonstrate achievement of capabilities at enhanced and advanced levels.
- An overview of training objectives and plans to achieve the outlined capabilities.
- An evidence log for documenting evidence, self-reflections and sign-off for each capability

At the end of the document is a progress record, in which detail can be added regarding the date for the final sign-off for each section.

How the CNS ACCEND Capability Assessment Tool Supports the Nursing Workforce and ACCEND Local Implementation

The ACCEND framework provides a nationally agreed, multi-level structure to support career development from pre-registration to advanced roles. By addressing workforce gaps, it promotes structured education and professional development opportunities.

A key component of ACCEND is the Career Pathway, Core Cancer Capabilities in Practice (CiPs), and Education Framework, which collectively define the capabilities required for effective and personalised cancer care. These CiPs outline high-level professional capabilities expected in clinical and professional cancer care roles and are categorized into seven domains:

Domain A: Person-Centred Collaborative Working
Domain B: Assessment, Investigations, and Diagnosis
Domain C: Condition Management, Treatment, and Planning
Domain D: Leadership and Collaborative Practice
Domain E: Developing Evidence-Based Practice and Improving Quality
Domain F: Service Evaluation and Quality Improvement
Domain G: Educating and Developing Self and Others

Together, these domains support Clinical Nurse Specialists (CNSs) to deliver safe, effective, evidence-based, and personalised care, work collaboratively within multidisciplinary teams, contribute to service improvement, demonstrate leadership, and support the development of others.

This CNS ACCEND Capability Assessment has been developed to support the practical implementation of the ACCEND Framework within local services. By aligning assessment questions with the ACCEND domains, the tool provides a structured approach for CNSs to reflect on their capabilities, identify strengths and development needs, and demonstrate professional growth over time. The assessment can be used alongside appraisal, clinical supervision, and continuing professional development (CPD) processes to support individual development planning and workforce capability reviews.

The assessment tool helps CNSs, supervisors, and organisations track development against nationally recognised cancer care capabilities, supporting a consistent approach to workforce development and local implementation of the ACCEND Framework.

Guidance on using the London CNS ACCEND capabilities assessment:

It is recommended that each CNS who utilises this document has a designated supervisor who is responsible for guiding, supporting, and assessing achievement of the CNS's capabilities. The supervisor has a key role alongside the CNSs line manager in ensuring that the CNS meets the required standards of practice. The document is completed jointly between the CNS and the designated individuals.

Recommended process: This resource provides a comprehensive evaluation of specific capabilities aligned with the ACCEND framework. It is recommended that the results from the completed self-efficacy/confidence assessment are used to guide discussions about meeting these capabilities effectively.

1. **Capability Review:** The line manager and/or supervisor and the CNS collaboratively review each capability within the four sections (clinical nursing practice, proactive management, multidisciplinary partnership working and professional practice leadership) of the assessment tool. Together, they determine which capabilities have been successfully achieved and identify those requiring further development.
2. **Action Plan Creation:** Develop a detailed action plan to address unmet capabilities. This plan should outline the evidence required to meet these capabilities and the specific support, training, or experiences required to do so. Additionally, define a clear process for capability sign-off, identifying the appropriate members of the multidisciplinary team (MDT) with signing authority for specific capabilities. Agree on timeframes for achieving and validating each capability. Tailor the process to each capability while ensuring alignment with professional standards and practice expectations.

3. **Review Meeting Frequency:** The frequency of review meetings should be agreed upon based on the CNS's development goals, personal objectives, and the agreed-upon timelines. This frequency may vary depending on the setting and the skills or knowledge being developed.
4. **Engagement with signing authority contributors:** The line manager or supervisor should engage with individuals identified as responsible for signing off specific capabilities. Ensure their agreement to participate, clarify expectations of their role, and confirm their understanding of the required time commitment, processes, and deadlines.
5. **Regular Review Meetings:** Hold regular meetings to track progress, evaluate the effectiveness of the action plan, and make necessary adjustments to support the CNS's development.
6. **Capability Sign-Off:** Each capability should be signed off by the designated individual once the required evidence has been demonstrated. This ensures a thorough and validated assessment process.
7. **Progress Record Completion:** Once the capabilities within a section have been met, the date is recorded in the progress section located at the end of the document and signed by the line manager. Completion of all capabilities within the document provides evidence that the CNS has achieved advanced practitioner level in cancer care.

Explanation of the ACCEND domains.

The following description of each of the seven domains may prove useful in discussion around their relevance to practice and professional impact.

Domain A: Person-centred collaborative working

What it does: This domain focuses on the CNS's ability to work with patients in a collaborative, patient-centred manner. It ensures that CNSs provide personalized care that integrates ethical practices, communication skills, and helps patients navigate their cancer journey. CNSs work with other healthcare providers and agencies to ensure smooth transitions in care.
Professional Impact: Improves patient care by ensuring collaboration across teams and placing the patient's needs at the centre of decision-making.

Domain B: Assessment, investigations, and diagnosis

What it does: This domain focuses on clinical assessment skills, such as taking patient histories, performing physical and mental health assessments, and ordering investigations for diagnosis.
Professional Impact: Strengthens clinical decision-making and diagnostic capabilities, ensuring CNSs can accurately assess patients and contribute to care planning.

Domain C: Condition management, treatment, and planning

What it does: This domain ensures CNSs can manage cancer treatments, handle complex clinical situations, prescribe medications, and manage symptoms like pain or late effects of treatment. It also involves promoting self-care and rehabilitation.
Professional Impact: Enhances a CNS's ability to manage a patient's cancer journey holistically, improving outcomes by addressing both treatment and recovery.

Domain D: Leadership and collaborative practice

What it does: This domain is about the CNS's role as a leader within the healthcare system. It involves managing teams, leading projects, and collaborating with other professionals to drive improvements in care.
Professional Impact: Develops leadership skills that are essential for driving team performance, improving care quality, and ensuring that the CNS can act as a role model in clinical settings.

Domain E: Developing evidence-based practice and improving quality

What it does: Focuses on the ability of CNSs to use research and evidence to inform their practice. CNSs are expected to stay updated on the latest research and apply it to patient care.
Professional Impact: Ensures that CNSs provide care that is backed by the latest scientific evidence, improving the quality of care, and contributing to innovation in cancer treatment.

Domain F: Service evaluation and quality improvement

What it does: This domain involves assessing and improving the quality of the services provided. CNSs are expected to evaluate current practices and implement changes to improve patient care.
Professional Impact: Empowers CNSs to identify areas of care that need improvement and act, resulting in better service delivery and patient outcomes.

Domain G: Educating and developing self and others

What it does: This domain emphasizes the importance of education for both the CNS and their colleagues. CNSs are expected to continually develop their own skills and educate others, such as junior staff or patients.
Professional Impact: Promotes ongoing professional development and knowledge-sharing, ensuring that CNSs not only improve their own practice but also contribute to the education and development of the wider healthcare team.

London CNS Aspirant Cancer Career and Education Development (ACCEND) Capabilities Assessment

CNS Name:	
Line Manager:	
Supervisor:	

1.	**CLINICAL NURSING PRACTICE: Knowledge of cancer, treatments, and side effects, including awareness of how health inequalities impact cancer outcomes, enabling nurses to make necessary adjustments to ensure all patients receive equitable and effective care. Application of clinical nursing practice in cancer.**
ACCEND domains	**Meets ACCEND domains ABCDEFG**
Practitioner Level	**Enhanced capability is achieved if the individual can demonstrate the core cancer capabilities in practice under supervision and with necessary support for effective learning.** **Advanced level is achieved by provision of evidence as described below.**
Capability no.	**Description**
1.1	**Demonstrates engaging in continuous learning and applies knowledge to practice of the pathology of cancer, using Bloom's Taxonomy, remembering and understanding fundamental concepts to applying, analysing, and evaluating this knowledge in clinical practice.**
Evidence no.	**Evidence log to demonstrate capability**
1.1.1	**Attends a minimum of 10 Multidisciplinary team meetings (ideally consecutively for continuity). During this period, the CNS should identify learning outcomes, and maintain a reflective log to capture key experiences, insights. This reflective practice will help the CNS to enhance their understanding of team dynamics, decision-making processes, and the integration of holistic care approaches, strengthening their role within the Multidisciplinary Meeting and improving patient outcomes.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.1.2	**Completion of The Fundamentals in Cancer Care module at level 6 or 7 (hybrid or in attendance only) or equivalent Continuing Professional Development (CPD) activity.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
1.2	**Demonstrates a commitment to continuous learning and effectively applies knowledge of treatment principles to relevant cancer site/area of practice.**
Evidence no.	**Evidence log to demonstrate capability**
1.2.1	**Shadows Consultant consultations (Oncological Haematology & Surgical).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.2.2	**Presents cases to the Consultant, or Lead CNS clearly explaining the rationale behind clinical decision-making and recommendations (a minimum of three examples, each followed by the provision of constructive feedback).**
	Evidence provided:

	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.2.3	**Shadows each of the disciplines within the team**.
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
1.3	**Demonstrates the ability to identify signs and symptoms of acute oncology emergencies and coordinate appropriate assessment, escalation, and management.**
Evidence no.	**Evidence to demonstrate capability**
1.3.1	**Participates in an AOS (Acute Oncology Service) placement for at least 14 days – to gain understanding of pathways.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.3.2	**Able to talk through acute oncology emergencies and describe how they should be managed.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.3.3	**Shadows the acute oncology team to learn about CUP (Cancer of Unknown Primary) management, emergency admissions, and essential skills for handling acute oncology emergencies.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
1.3.4	**Completion of at least level 1 Acute Oncology Passport (digital resource on Macmillan hub). Optional: Completion of Level 2 Acute Oncology passport (information on UKONS website).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
1.4	**Demonstrates engaging in continuous learning and applies knowledge to practice, and development or delivery of local service policies and work programmes.**
Evidence no.	**Evidence log to demonstrate capability**
1.4.1	**Shadows Consultant consultations (Oncological Haematology & Surgical oncology) to understand multidisciplinary team/standard operating procedures and outpatient follow up schedules.**
	Evidence provided:

	Self-reflections: What you have learned, how you have grown, and where you can improve
	Sign off completed (name/date):
1.4.2	**Engages in essential reading to support learning and inform clinical decision-making in the clinical environment.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve
	Sign off completed (name/date):
Capability no.	**Description**
1.5	**Demonstrates advanced clinical skills relevant to speciality.**
Evidence no.	**Evidence log to demonstrate capability**
1.5.1	**Verbal/written case study that highlights specialist clinical skills for their cancer site/area of practice.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
1.6	**Applies clinical judgement to differentiate between expected treatment-related symptoms and those requiring urgent review, escalation, or specialist input.**
Evidence no.	**Evidence log to demonstrate capability**
1.6.1	**Promptly identifies red flag symptoms and takes decisive action, as assessed through observation and reflective practice, ensuring timely interventions and improved patient safety.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
1.7	**Demonstrates the ability to recognise and interpret indicators of disease progression and end-of-life care needs within their specialist area, ensuring appropriate assessment and management.**
Evidence no.	**Evidence log to demonstrate capability**
1.7.1	**Describes signs and symptoms of disease progression within speciality and indicators of end of life.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Overview and Plan Following discussions with your supervisor, the agreed-upon training objectives should address identified skills and knowledge gaps. These objectives should be Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART), accompanied by clear recommendations and a detailed action plan.	
Comments:	
Plan:	
Date:	

2.	**PROACTIVE MANAGEMENT: Supporting patient self-care, self-management and facilitating independence.**
ACCEND domains	**Meets ACCEND domains ADFG**
Practitioner Level	**Enhanced capability is achieved if the individual can demonstrate the core cancer capabilities in practice under supervision and with necessary support for effective learning.** **Advanced level is achieved by provision of evidence as described below.**
Capability	**Description**
2.1	**Completed advanced communications skills training, demonstrating proficiency (location, date).**
Evidence	**Evidence to demonstrate capability**
2.1.1	**Completion of Advanced Communication Skills Course**.
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.1.2	**Completion of Level 2 Psychological training.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
2.2	**Demonstrates the ability to deliver personalised cancer care from screening to living with and beyond cancer for different treatment intents and modalities in the context of collaborative working.**
Evidence no.	**Evidence to demonstrate capability**
2.2.1	**Uses advanced communication skills and specialist knowledge to lead Holistic Need Assessment (HNA) sessions for 10 patients and develop effective and comprehensive Personalised Care and Support Plans; reviewing these at key points in cancer pathway (for example, end of treatment).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.2.2	**Independently supports patients at key points across the cancer pathway. For example, is present during breaking bad news at diagnosis and is available for advice and information as required.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.2.3	**Provide Health & Wellbeing information and/or sign posting to patients/carers pre and post treatment (one-to-one or as part of group Health and Wellbeing Events).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.2.4	**Participates in locally agreed number of patient support groups.**

	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.2.5	**Supports completion of End of Treatment Summaries (EoTS)**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
2.3	**Recognises and assesses psychological distress and abnormal psychological responses, facilitating timely referral to appropriate services and healthcare professionals to support patient wellbeing.**
Evidence no.	**Evidence to demonstrate capability**
2.3.1	**Completion of Level 2 Psychological training and Advanced Communication Skills Training, and/or Enhanced Communication Skills.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.3.2	**Engages in appropriate signposting and referral to additional support services without prompting, e.g. Maggie's, Macmillan Cancer Support and Information Centres, other charities/resources.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
2.4	**Utilises techniques/interventions to promote patient/carer independence throughout the cancer pathway.**
Evidence no.	**Evidence to demonstrate capability**
2.4.1	**Demonstrates experience of effectively signposting patients to support services throughout the length of the cancer pathway.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
2.5	**Develops and delivers patient and carer education and training.**
Evidence no.	**Evidence to demonstrate capability**
2.5.1	**Contributes to delivery of locally agreed number of patient support group sessions.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):

2.5.2	**Helps to develop and deliver locally agreed number of Health and Wellbeing Event presentations to patients living with and beyond cancer.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
2.5.3	**Participates in locally agreed number of pre-habilitation and on-treatment education sessions to optimise identification and management of side effects or long-term effects.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
2.6	**Demonstrates the ability to ensure staff welfare by instigating and participating in team support.**
Evidence no.	**Evidence to demonstrate capability**
2.6.1	**Attendance at minimum of 80% clinical supervision sessions annually.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Overview and Plan Following discussions with your supervisor, the agreed-upon training objectives should address identified skills and knowledge gaps. These objectives should be Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART), accompanied by clear recommendations and a detailed action plan.	
Comments:	
Plan:	
Date:	

3.	**MULTIDISCIPLINARY PARTNERSHIP WORKING: Delivering personalised care in partnership. Advocating for patients and carers to ensure their voices are heard and to facilitate shared decision-making.**
ACCEND domains	**Meets ACCEND domains ABCDEFG**
Practitioner Level	**Enhanced capability is achieved if the individual can demonstrate the core cancer capabilities in practice under supervision and with necessary support for effective learning.** **Advanced level is achieved by provision of evidence as described below.**
Capability no.	**Description**
3.1	**Demonstrates a comprehensive understanding of diagnostic pathways, investigations, and staging processes within their area of practice, applying this knowledge to support assessment, care planning, and patient care.**
Evidence no.	**Evidence log to demonstrate capability**
3.1.1	**Signposts and guide patients to essential tests and supports them in the preparation for investigations and treatments.**

	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.1.2	**Presents minimum of 4 patient case presentations within a multidisciplinary team meeting (MDT). Case presentations to include stage of patient in pathway, outstanding investigations, future treatment plan, holistic needs.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.2	**Applies knowledge of national and local cancer standards, service-specific targets, pathway Standard Operating Procedures, and NHS Cancer Programme priorities to support high-quality care, service delivery, and continuous improvement within their area of practice.**
Evidence no.	**Evidence log to demonstrate capability**
3.2.1	**Provides examples of how national and local cancer standards, service-specific targets, KPIs, and pathway requirements have informed clinical practice, service delivery, or caseload management.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.2.2	**Attends relevant Cancer Alliance meetings, including tumour board meetings (or local equivalent) and demonstrates understanding of Cancer Alliance work plan.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.3	**Adheres to the Trust's Key Worker Policy.**
Evidence no.	**Evidence log to demonstrate capability**
3.3.1	**Demonstrates key worker responsibilities as per local key worker policy/guidelines.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.3.2	**Demonstrates ability to effectively practice as the Key Worker in clinical activities and within the MDT (multidisciplinary team).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):

3.3.3	**Documents key indicators regarding patient diagnoses in electronic patient records. Includes inputting information such as named CNS, CNS contact details etc.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.4	**Demonstrates the ability to apply knowledge of MDT functions across primary and tertiary care. Facilitates seamless patient navigation between organisations. Provides support to patients and families during transitions and ensures the safe, effective transfer of the key worker role across settings.**
Evidence no.	**Evidence log to demonstrate capability**
3.4.1	**Produces a reflective patient scenario describing the pathway of a patient from diagnosis, through treatment, follow-up and living with and beyond cancer.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.4.2	**Development of a case study that provides experience in the handing over of patient to another key worker. (e.g. palliative care, another Trust). Content to include detail regarding how the decision for transfer was made, and a description of processes and communications that were conducted to affect the transfer so that it was seamless for the patient. Incorporates reflections on what might have been done differently to make the process smoother if relevant.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.5	**Identifies and applies knowledge of distinct MDT roles, including the MDT Co-ordinator, to enable effective team functioning and patient-centred decision-making.**
Evidence no.	**Evidence log to demonstrate capability**
3.5.1	**Shadows extended members of MDT including dental, lymphoedema therapists, AHPs (Allied Health Professionals).**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.5.2	**Demonstrates understanding of the role of core MDT members and provides explanation of their responsibilities in patient care.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.6	**Identifies and uses appropriate referral routes to AHPs and related services, ensuring patients' assessed needs are met through timely, coordinated access to support.**
Evidence no.	**Evidence log to demonstrate capability**

3.6.1	**Conducts formal referrals, or signposts to, Allied Health Professional teams and other services that are essential for patient care (for example, audiology, chest clinic {nebulisers}, Macmillan Information and Support). Evidenced by producing 4 case presentations in which a range of referrals is demonstrated.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.7	**Assesses the information needs of patients and carers at significant pathway points and signposts patients to a range of relevant information resources.**
Evidence no.	**Evidence log to demonstrate capability**
3.7.1	**Actions the identified needs from care plans – i.e. benefits referrals, completion of grants, SR1 forms.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.8	**Recognises and responds to the impact of health inequalities on patient access to cancer services and care.**
Evidence no.	**Evidence log to demonstrate capability**
3.8.1	**Verbal/written case study demonstrating understanding of the variety of communication methods available to enable equality of access to information and high-quality care for all patients.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.8.2	**Verbal/written case study demonstrating an example of reducing inequalities in patient access to, and outcomes from, area of practice/service. To include any relevant changes made to service delivery to reduce health inequalities.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.8.3	**Verbal/written case study demonstrating experience in discussing treatment decisions with patients, including when they decline MDT's recommended options.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.9	**Demonstrates understanding of roles of members of community teams.**
Evidence no.	**Evidence log to demonstrate capability**
3.9.1	**Describes role of community services in supporting patients and carers (e.g. mental health, community palliative care, hospices, social prescribers). Shadows relevant teams as appropriate.**
	Evidence provided:

	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.10	**Demonstrates understanding of CNS role in supporting rehabilitation.**
Evidence no.	**Evidence log to demonstrate capability**
3.10.1	**Conducts joint patient sessions with Allied Health Professionals.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.10.2	**Provides description of signs or symptoms that would trigger referral to Physiotherapist, Occupational therapist, Dietitian and Speech and Language Therapists.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.11	**Acts as a patient advocate and a link between patients, carers, and healthcare professionals to optimise effective coordination of care.**
Evidence no.	**Evidence log to demonstrate capability**
3.11.1	**Demonstrates ability to advocate for patient preferences relating to their care and treatment.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.11.2	**Communicates patient choices within the Multidisciplinary Team meeting.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.12	**Communicates effectively within MDT as a core member. Contributes and influences decision making, and development of treatment plans using specialist knowledge to optimise care.**
Evidence no.	**Evidence log to demonstrate capability**
3.12.1	**Demonstrates ability to raise concerns to team during MDT and care planning discussions.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.12.2	**Promotes shared decision making with patient.**
	Evidence provided:

	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
3.13	**Supports patients and carers through a palliative diagnosis and change of focus from active/maintenance treatment plan to palliation.**
Evidence no.	**Evidence log to demonstrate capability**
3.13.1	**Enables timely referral to specialist palliative care by applying the CNS role effectively with patients, carers and the MDT.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.13.2	**Demonstrates ability to refer patients to specialist palliative care services when clinically indicated or to meet the changing needs of the patient e.g. advancing disease, complex symptoms, psychosocial distress, to receive support with advance planning needs, or is nearing end of life.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
3.13.3	**Confidently and effectively acts as key worker for patients from diagnosis to end of life care when the key worker responsibility transfers to the specialist palliative care CNS.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
Overview and Plan Following discussions with your supervisor, the agreed-upon training objectives should address identified skills and knowledge gaps. These objectives should be Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART), accompanied by clear recommendations and a detailed action plan.	
Comments:	
Plan:	
Date	

4.	**PROFESSIONAL PRACTICE AND LEADERSHIP:** Driving service improvements through professional development, innovation, evaluation, and quality improvement initiatives. Demonstrating leadership in delivering high-quality, evidence-based cancer care.
ACCEND domains	**Meets ACCEND domains ABCDEFG**
Practitioner Level	**Enhanced capability is achieved if the individual can demonstrate the core cancer capabilities in practice under supervision and with necessary support for effective learning.** **Advanced level is achieved by provision of evidence as described below.**
Capability	**Description**
4.1	**Identifies individual professional need for education and training.**
Evidence	**Evidence log to demonstrate capability**
4.1.1	**Attendance a minimum of 80% clinical supervision sessions annually.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
4.1.2	**Engages in annual appraisal process and regular 1:1s.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
4.1.3	**Completes and reviews CNS self- efficacy tool to support learning and development.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
4.1.4	**Keeps up to date with latest research, clinical information resources i.e. NICE, GIRFT, charity strategies and activities.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.2	**Identifies service needs based on patient insights/feedback and leads development of pathway improvements.**
Evidence no.	**Evidence log to demonstrate capability**
4.2.1	**Reflects on local results of National Cancer Patient Experience Survey and, with support from Lead Cancer Nurse and patient experience leads, evaluates impact on service delivery.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.3	**Able to collect and interpret quantitative data.**

Evidence no.	Evidence log to demonstrate capability
4.3.1	**Understands and actively participates in CNS data collection including KPI's. These performance metrics enable accurate comparisons, benchmarking, and improved care quality.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.4	**Works within JD (Job Description), NMC (Nursing and Midwifery Council) code, job plan and contract to work as a safe and professional CNS.**
Evidence no.	**Evidence log to demonstrate capability**
4.4.1	**Demonstrates that operates within professional boundaries, seeking guidance from peers and managers through appraisal and reflective practice.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.5	**Delivers local and national programmes of education on cancer, end of life, and living with and beyond cancer, e.g. study days and conferences.**
Evidence no.	**Evidence log to demonstrate capability**
4.5.1	**Participates in 3-4 peer or patient group teaching sessions per annum i.e. cancer Health & Wellbeing Events (HWBEs) and support groups.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.6	**Supports and teaches non-specialist healthcare professionals in the implementation of cancer care.**
Evidence no.	**Evidence log to demonstrate capability**
4.6.1	**Participates in 3- 4 per annum cancer Specialist teaching sessions.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.7	**Accepts personal responsibility for professional development and maintains professional competence and credibility.**
Evidence no.	**Evidence log to demonstrate capability**
4.7.1	**Demonstrates comprehensive personal and professional understanding of relevant research, including its influence on evolving local and national cancer treatment protocols. This knowledge ensures that patient care is consistently aligned with the latest evidence-based practices and innovative treatment approaches.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):

Capability no.	Description
4.8	**Engages in level 2 clinical supervision, reflective practice and self-evaluation and utilises to improve care and practice.**
Evidence no.	**Evidence log to demonstrate capability**
4.8.1	**Attends 80% of clinical supervision sessions per year.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Capability no.	**Description**
4.9	**Identifies and participates in the development and delivery of educational initiatives for health and social care providers that address the needs of patients and carers.**
Evidence no.	**Evidence log to demonstrate capability**
4.9.1	**Participates in locally agreed number, and type, of living and beyond cancer activities as part of enhanced recovery.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
4.9.2	**Leads on locally agreed number of educational events for local health services.**
	Evidence provided:
	Self-reflections: What you have learned, how you have grown, and where you can improve.
	Sign off completed (name/date):
Overview and Plan Following discussions with your supervisor, the agreed-upon training objectives should address identified skills and knowledge gaps. These objectives should be Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART), accompanied by clear recommendations and a detailed action plan.	
Comments:	
Plan:	
Date:	

Progress Record: Date that all Capabilities signed-off per section

Section	Title	Date that all capabilities met	Signed (by line manager/supervisor)
1.	Clinical Nursing Practice		
2.	Proactive Management		
3.	Multidisciplinary Partnership Working		
4.	Professional Practice and Leadership		

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Macmillan London CNS Development Lead Pilot Project Task and Finish Group
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Glossary

Advanced CNS: Clinical Nurse Specialists (CNS) are pivotal leaders in clinical practice, responsible for delivering advanced nursing care, driving clinical excellence, and supporting patient outcomes. Their roles encompass expert patient assessment and management, leadership in care delivery, mentorship and education of junior staff, and the implementation of evidence-based practice. Additionally, they contribute to service development, quality improvement initiatives, and collaborate closely with multidisciplinary teams to ensure the highest standards of care. Advanced CNSs are also accountable for maintaining clinical governance, managing complex caseloads, and advancing their specialty through continuous professional development. This level is underpinned by a comprehensive range of knowledge, skills, and capabilities within each of the four pillars of nursing: clinical practice, education, research, and leadership. These will have been developed through completing a master's degree in a relevant subject area with experiential learning or by demonstrating equivalence. Integration of the capabilities across the four pillars, together with critical reflection, enables a nurse working at the advanced level to function to their full potential and feel empowered to make decisions in the workplace (https://www.rcn.org.uk/Professional-Development/Levels-of-nursing/Advanced).

Enhanced CNS: Enhanced Clinical Nurse Specialists (CNS) have a crucial role in providing specialised patient care, focusing on developing their clinical expertise and leadership skills. Their responsibilities include delivering high-quality care, managing patient caseloads under the guidance of senior colleagues, and beginning to take on leadership roles within the team. While their capabilities are aligned with those of an Advanced CNS, they are at a developmental stage, with an emphasis on building their clinical judgment, refining decision-making abilities, and gradually increasing their involvement in service improvement and staff education. Enhanced CNSs are expected to work closely with more senior CNSs, contributing to the multidisciplinary team while preparing to take on greater responsibilities as they transition into higher banded roles. Registered nurses working at an enhanced level are expected to be able to manage discrete activities in complex, challenging and changing situations and environments. They should also be confident to seek further guidance when they reach the boundaries of their capabilities (https://www.rcn.org.uk/Professional-Development/Levels-of-nursing/Enhanced).

Capability: Capabilities involve the integration of knowledge, skills and behaviours that enable an individual to develop and perform effectively across a range of roles, contexts, and levels of practice. They reflect advance practice, including the ability to adapt to change, apply learning in complex and unfamiliar situations, exercise clinical judgement, and demonstrate autonomy and impact on patient outcomes. Capabilities are dynamic and developmental, supporting ongoing professional growth and progression. Within cancer nursing particularly in advanced roles this capability-based approach aligns with the ACCEND framework, which emphasises adaptable, context-driven practice rather than task completion alone.

This is distinct from competencies which refers to the ability to perform specific tasks safely and effectively to an established standard. They are typically task focused and relate to defined skills or procedures required within a role. Competence is demonstrated through consistent performance of routine clinical activities and is essential for ensuring safe practice in defined situations. However, competencies alone do not capture the level of reasoning, adaptability, or professional judgement required for advanced or specialist roles.

In practice, competencies provide important foundational evidence (e.g. procedural skills, course completion, or supervised practice), but capabilities are the primary measure of professional development and progression. A capability-based approach therefore focuses on how knowledge and skills are applied in real clinical contexts to achieve safe, effective, and patient-centred outcomes.

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