

Consultant Level Case Study:

Dr Paul McArdle

Overview

Paul provides multi-professional senior leadership for AHPs across primary, community and secondary care services. He is Chair of the BDA England Board whilst maintaining a clinical role as a diabetes specialist dietitian.

Developing from advanced into consultant level

Paul describes his career journey as dynamic and evolving, shaped by opportunities he either embraced or actively sought. Before structured career frameworks like the Dietetic Career Framework (the DCF) existed, there was limited guidance on professional growth in dietetics. The lack of clear career pathways made it challenging to navigate and achieve career aspirations. Now that working across the four pillars of practice are widely recognised, Paul hopes this framework will empower more dietitians to grow and advance into senior leadership roles.

As Paul transitioned from enhanced and to advanced level practice, his passion for improving pathways for service users led him to a line management role. Although leadership was not an initial career ambition, it did present an opportunity to pursue an academic research path, supported with funding from NIHR (National Institute for Health and Care Research).

His interest in research developed through his involvement in producing national guidelines with Diabetes UK. A funded research position enabled him to complete his master's in Research Methods and experience this setting while maintaining his NHS role. Recognising the impact of research on his dietetic practice he successfully applied for a clinical doctorship to complete a PhD.

Following his research, Paul focused on building capacity in the NHS to empower and enable peers to



embed research and quality improvement into their everyday practice. Under his leadership, his NHS Trust became a research site for six studies, showcasing the positive impact that one individual can have in growing research engagement within our profession.

Paul highlights that developing his leadership and research skills through these opportunities were significant factors in improving his own dietetic practice. He credits volunteering with the BDA as a major influence on his career progression. Access to BDA resources, such as e-zines, introduced him to NIHR funded research opportunities. His time on the Diabetes Specialist Group committee also allowed him to develop his leadership skills early in his career, even where this was not a requirement in his NHS role. After completing his term as Chair of the group, he was successful in his application to become BDA England Board Chair, a natural progression to the roles that he held in the past and enabled him to stretch himself outside the comfort zone of his clinical speciality of diabetes.

Clinical Expertise and Professional Development

Prior to his current role, Paul worked as a diabetes specialist at an advanced level of practice, leading service-user interventions within a multidisciplinary

team. To support his role, he completed an accredited Non-Medical Prescribing (NMP) module, leading to HCPC annotation as a supplementary prescriber (SP). Paul sees that prescribing rights, alongside expanded clinical diagnostic skills, are essential for the future of the dietetic profession to enhance credibility and capability as fully autonomous practitioners.

Role Impact

Paul works in a multi-professional sphere, advocating for AHPs whilst continuing his significant contribution to the dietetic workforce. Despite his leadership responsibilities, he maintains clinical activities as a diabetes specialist – even though this is not an expectation of his current role. He is a role model by

maintaining a strong, visible presence, with expert knowledge of the dietetic profession and the complex and changing health and care system in which they work.

Career Aspirations

Paul’s immediate career aspirations are focussed on embedding himself into his current role and organisation. Although he works in a multi-professional setting, he plans to collaborate closely with the dietetic service within his portfolio. His long-term goal is to continue to develop as a leader with a wide sphere of influence and hopes to support the establishment of a Chief AHP role in his Trust, filling a leadership gap in his organisation.

How does Paul work across the 4 pillars of practice?

Paul currently is strongest in the leadership pillar, though in the past he would have identified more with the ‘research’ or ‘practice’ pillars. He acknowledges that engagement across the pillars evolves based on career stage and role responsibilities. Having always worked clinically with service-users, Paul is aware of the risk of deskilling in some areas of the professional practice pillar due to his current leadership role, which at times can feel like a backward step. However, he views consultant-level practice as not just about individual skills and expertise but about creating an environment that enables others to develop and thrive to drive forward professional practice. To maintain balance across, Paul has always proactively sought opportunities outside of his role to strengthen both his personal and professional development across the pillars.

