

ACP Credentialing Webinar: Final Tips Before Submission (2017 curriculum)

Questions and Answers

During the ACP webinar held on 15 June 2023, attendees were invited to submit questions via Slido. Many of the questions were answered during the webinar, but due to the number of questions received, we were unable to answer all of them within the session. We have therefore gathered the questions submitted into several common themes and provided answers below.

Please note that it has not been possible to answer all questions submitted; some were specific to an ACP's own personal circumstances, some required further information to be able to provide a comprehensive answer. In some instances, the same question was asked multiple times but with slightly different wording; these have been combined into a single question.

If you cannot find an answer to your specific query below, please email ACP@rcem.ac.uk and we will respond directly.

NB: all questions and answers relate specifically to the 2017 ACP curriculum, although some will also apply to the 2022 ACP curriculum. If you have a question about the new curriculum, please email ACP@rcem.ac.uk.

Volume of evidence

Q. Is there a minimum number of items of evidence permitted, as well as a maximum?

A. We do not specify a minimum number of items as this will naturally depend on the curriculum element. More importantly, you should be ensuring that you have the right type of evidence to demonstrate competency. However, you should always bear in mind that too little evidence, probably less than 2 or 3 items, could suggest a lack of experience.

Q. Does e-learning counts towards the 7/10 pieces of evidence?

A. No, this figure excludes both e-learning modules and curriculum item ratings. However, if you were to include a reflection form, such as a 'self-directed learning reflection' form, this would count towards the maximum.

Q. Does each competency need a unique piece of evidence? How many competences can each piece of evidence be linked to?

A. All competences, presentations and procedures in the curriculum, including the common competences, must have some evidence provided against them. The number of items and type of evidence will vary for each competence.

In general terms, one piece of evidence can be used for up to two competences, occasionally three, except for the ACAT-EM which can cover up to five competences. One common competence can be covered at the same time as a clinical competence on one assessment form. For clinical presentations, particularly the trauma presentations, it is expected that each will have a different patient/form.

Also see section 4.7 The Guide to RCEM Emergency Care ACP Credentialing (2017 ACP Curriculum):

Academic achievements

Q. I have an MSc that I obtained in 2016 in practice development, plus some additional level 7 modules. If I use the RCEM Academic Declaration form, is this acceptable?

A. The advanced practice programme must contain modules covering the topics of history taking and physical assessment, and clinical decision-making and diagnostics, regardless of the title of the programme. Your programme may not have modules with the specific titles listed above.

In order to ensure you have achieved level 7 academic learning in these areas, please map the learning outcomes from your academic modules against the learning outcomes required by the College in the Academic Declaration form, giving the module name and full text of the outcome.

Q. Can you use an existing MSc obtained earlier, with additional modules at level 7 to evidence RCEM objectives?

A. Yes, some ACPs may need to complete additional level 7 modules if their original academic programme did not meet all RCEM-required learning outcomes.

Q. If we have completed the academic declaration form on paper and uploaded it, do we need to redo it in the electronic version?

A. This will depend on the version. If your form is identical to that which is included as appendix 4 of the guide to credentialing, this will be acceptable (providing you link it to the checklist). If you have completed an older version of the form, you will need to transpose the information to the electronic form available on the ePortfolio platform.

Q. My NMP is level 6, will this be a problem?

A. No, providing your entry on the relevant professional register is annotated to confirm you are an independent prescriber.

Also see sections 1.7 and 4.2 of The Guide to RCEM Emergency Care ACP Credentialing (2017 ACP Curriculum)

QIP / Audit

Q. For the audit section, how much do we actually have to do? How many audit cycles? How many audits do you have to have to credential?

A. You will need to provide evidence of leadership and implementation of actions from a minimum of one audit or quality improvement project with reflection, including evidence of actions completed and evaluation of the impact of those actions following recommendations or agreement by stakeholders. Your role in the audit and QI must be clear. There must be evidence of a re-audit.

Q. Are there any specific forms/proforma to submit the audit/QI?

- A. Included in your evidence must be a formal assessment of the audit or QI using the appropriate form (Audit Assessment Tool) and an element of personal reflection in the reflective notes section of the portfolio.

The Audit / Clinical Governance Activity form may also be used to describe the activity.

Also see section 4.29 of The Guide to RCEM Emergency Care ACP Credentialing (2017 ACP Curriculum)

Changing from dual to adult credentialing

- Q. I initially intended to credential in both adults and children but now wish to credential in adults only. Will it matter when it comes to submission as I have both on my ePortfolio?

- A. Dual credentialing is challenging and requires a minimum of 4 years to create a portfolio that shows sufficient breadth and depth of the curriculum for both adults and children. This will require specific programmes of experience and learning opportunities and needs to be planned in advance.

It is therefore common for many ACPs who initially intend to dual credential to decide part-way through training that they wish to focus on adults only. If you wish to credential in adults only, please email ACP@rcem.ac.uk to advise the ACP team that you wish to drop the paedics component. The ACP team will change your ePortfolio account to **ACP: Adult** and add the adult credentialing checklist to your dashboard.

Please note the following:

- You should continue to link evidence to the dual curriculum even though you are now credentialing in adults only. **Do not** relink existing evidence, or link **new** evidence, to the adult curriculum; this would be time-consuming, unnecessary and confusing for the Panel. The checklist will inform the ACP Credentialing Panel which credential you are submitting evidence against, and the Panel will just ignore any paedics evidence you have already linked.
- If you have already linked evidence to the dual **checklist**, existing links will not be automatically migrated across to the adult checklist and therefore you will need to relink your evidence to the adult checklist as appropriate. You will still be able to see your dual checklist (and the evidence you have linked to it) under the 'Goals' tab.

WPBAs

- Q. Can our final WPBAs contain learning points, or should we be looking to have minimal to no learning points for final evidence?

It depends. Learning points do not necessarily mean that you have not demonstrated competency to the required standard during the assessment. It may be that the assessor has just suggested some ways to develop beyond the level required for credentialing. If this is the case, the assessor must make it clear in the assessment that you have met the standard required for credentialing.

If the assessor has identified learning points because you have not reached the required standard in that competency, these will need to be addressed (with further education, reflection, etc.) as the Panel would not be assured that you were practising at the required level.

Q. When a supervisor has written action points on a ticket which I subsequently complete, is it acceptable to document what I have done/learnt in the comments below?

A. Please see previous answer. The essential thing is that there is an element of reflection – whether you add this to the assessment as a ‘comment’ or you complete a ‘reflective practice log’ is not as important as the content itself.

Q. Do ESLEs and ACATs have to be for different people?

A. An ACAT and ESLE cannot cover the same time period. They must be completed on separate occasions.

Q. Are ACATs mandatory? I have ESLEs for each year but wondering about ACATs?

A. Yes, the guidance is clear. The checklist states that, for CC4 and CC8, “we require at least 2 x ACAT-EM **and** 2 x ESLE led by a consultant. The ESLEs would normally be completed towards the end of training. The ESLEs must include commentary on broader non-technical skills across the curriculum and not just CC4 and CC8”. Both tools must be used as they assess different skills.

Q. I’m not sure whether I’m writing a good enough ticket - can some example tickets be made available?

A. We will shortly be publishing examples and guidance on what makes a ‘good’ assessment on the RCEM website.

Curriculum item ratings

Q. What information is required within a curriculum item rating (ACP)?

A. ACPs must enter some reflection for each competence/presentation. This personal reflection should analyse your own capability – not just a description of the activity or list of evidence, but how the evidence demonstrates the development of capability and progression to independent practice and the standard required for credentialing.

Q. What makes a good CIR? Can we have an example?

A. We will shortly be publishing examples on the RCEM website.

Q. I have not completed CIRs for the first 2 years. Does this matter or is it ok just to have them completed now?

A. Whilst CIRs completed throughout training are helpful to demonstrate progress and development, this is not mandatory for credentialing. The Panel will accept final CIRs completed shortly before submission.

Q. When completing a curriculum item rating for non-checklist acute presentations do we need a comment/reflection, or do we just select the level?

- A. All curriculum items – common competences, presentations and procedures – require reflection as part of the curriculum item rating. It is not acceptable to just select the level or rating. This applies to both checklist and non-checklist items.

Miscellaneous

Q. Should we create a separate folder to list the life support course certificates in the library?

- A. You may create a folder within your library if you wish but current certificates must also be linked to 'life support courses' in the checklist

Q. Is being an active instructor for advanced life support courses enough for credentialing or do you need to be a candidate in the last 4 years?

- A. If you are an instructor, you will need to provide an instructor certificate with evidence of acting as faculty on the appropriate number of courses needed per year to maintain your instructor status.

Q. How do you mark each checklist component as achieved, mine still say in progress?

- A. The checklist is signed off by the named Educational Supervisor as the final action to be completed prior to submission. This is not something that is done by the ACP.

Q. Is there a paper copy of the patient feedback form – I'm finding patients aren't completing online via the link?

- A. There is no longer a requirement to include patient survey forms within your evidence. This tool is no longer available to ACPs on the 2022 ACP curriculum or EM trainees on the 2021 medical curriculum.

Q. Do completed e-LFH modules automatically link to the RCEM ePortfolio yet?

- A. Unfortunately, as e-LFH is not an RCEM product, completed e-LFH modules will not automatically link to the RCEM ePortfolio. You will need to upload e-LFH certificates to your document library and then link them to the relevant curriculum items.

Q. What is the minimum level (1-4) for the common competences that we have to achieve?

- A. For credentialing, an ACP must achieve minimum level 2 in all common competences.

Q. Is there any specific guide available for supervisors for the credentialing checklist?

- A. Credentialing checklists can be downloaded from the RCEM website; these provide more detailed information than is contained in the electronic version on the dashboard:
- [ACP credentialing checklist \(2017 curriculum\) – adults](#)
 - [ACP credentialing checklist \(2017 curriculum\) – children](#)
 - [ACP credentialing checklist \(2017 curriculum\) – adults and children](#)

If your ES requires specific instructions on how to sign-off the checklist, i.e. how to mark each section as achieved, please ask them to email ACP@rcem.ac.uk.

Supervisors will also find a helpful checklist to assist with reviewing and signing off the portfolio prior to submission as appendix 2 of The Guide to RCEM Emergency Care ACP Credentialing (2017 ACP Curriculum).

Q. What will it mean for the supervisor and ACP if you are aiming for the Autumn 2024 credentialing window but do not complete in time?

Although Autumn 2024 will be the final opportunity to credential on the 2017 curriculum we would recommend that, if you believe this will be the **earliest** you will be ready to credential, you consider transitioning to the 2022 curriculum now, as this doesn't give you any leeway in case you do not progress as quickly as you expect, or other life events occur in the meantime. Transitioning is relatively straightforward and certainly easier to do sooner rather than later.

We would strongly recommend that only those ACPs who intend to submit within the Autumn 2023 or Spring 2024 windows remain on the 2017 curriculum; Autumn 2024 then becomes your fall-back window if you need to take an extended period of absence, for example.

We would advise you to read all of the transition guidance available on the [RCEM website](#) and meet with your ES to have a realistic discussion as to when you both think you will be ready to submit.

If you decide to transition, please complete the **Curriculum Migration** form on risr/advance (formerly Kaizen) and email ePortfolio@rcem.ac.uk to advise the ePortfolio team that you have submitted this request. The ePortfolio team will migrate you to the 2022 ACP curriculum within 10 working days.

Most existing evidence will still be applicable to the 2022 curriculum, mainly for the non-clinical SLOs and clinical syllabus, and the document [2022 ACP Curriculum Transition Guidance](#) will provide information on the new evidence that will be required post-transition.

The ACP ES would be required to complete RCEM ACP Supervisor training (2022 curriculum) within 12 months of transition. This will enable them to complete the ESR, FEGS and Foundation Skills sign-off.

Q. For STR, do STR forms need to be used, or can ES discussions/university course feedback with ES etc, be used?

- A. For credentialing, an STR is required for each year of training (minimum of 3 in total at regular intervals) and these must be completed using the Structured Training Report form available on risr/advance.

Q. My department did not make my FEGS available to upload to my portfolio in real time. Can these be added in one go with comment from my supervisor explaining?

- A. FEGS completed retrospectively are not helpful for the Panel. If the meeting did actually take place each year but a form was not completed at the time, the form may be created retrospectively **providing** it is completed using contemporaneous notes from the meeting. In these circumstances the form must include a statement from the ES explaining why the form was not completed at the time of the faculty meeting and confirming the content is transposed from notes made during the meeting. It is also

advisable for the ES to explain this in the FEES resolution comment in the checklist when signing off the portfolio prior to submission.

Q. Is there a quick way to de-link tickets or do you have to go into each one individually?

- A. Each assessment or item of evidence will need to be de-linked individually. Please email ePortfolio@rcem.ac.uk for further guidance and assistance with de-linking.

Q. Does the 'Management: Project Record' need to be signed-off by an EM consultant?

- A. No, this is a generic form for the ACP to record and reflect upon a number of different management tasks. Where assessment is required, you would use the appropriate form, e.g. audit assessment tool, management: complaint, management: critical incident, etc.

Q. How do you break down your logbook when your system uses triage codes 1-5, and doesn't necessarily reflect majors, minors, resus?

- A. ACPs are required to provide an annual breakdown of their case mix and patient numbers to demonstrate sufficient experience in all areas of the ED. If the hospital system does not allow the data to be broken down into the areas specified within section 4.15 of the Guide to RCEM Emergency Care ACP Credentialing (2017 ACP Curriculum), there should be an explanation and confirmation by the Educational Supervisor within the summary table that the ACP has been involved in the full breadth of case mix and acuity.

If there are relatively small numbers in the portfolio, then an explanation from the Educational Supervisor to account for this must be provided. It would be expected that, over a three-year period, an adult-only ACP would see a minimum of 2,000 patients and that 15% of those would be critically ill or injured patients. Similar numbers and complexity are expected for a children-only ACP. There should also be evidence of patient contact with ambulatory type patients with minor injuries to demonstrate curriculum coverage. For ACPs who are dual credentialing, there should be at least 500 children in addition to the adults across the breadth of the age groups and curriculum.

Q. Can we see an example of triangulation of evidence please?

- A. One example may be: you undertake an assessment, and the assessor identifies various learning points to be addressed. This would not reassure the Panel that you are practising at the standard required for credentialing. You may then choose to complete some e-learning or other educational activity to improve your knowledge and understanding of the procedure, and some reflection as to what didn't go well, what you have done to address this and how this has impacted upon, and improved, your practice. You may also wish to include a subsequent summative assessment which demonstrates that the previous learning points have been addressed.

Please note, learning points do not necessarily mean that you have failed to demonstrate competency at the required standard during the assessment. It may be that the assessor has just suggested some ways to develop beyond the level required for credentialing. If this is the case, the assessor must make it clear in the assessment that you have met the standard required for credentialing.