

## Demonstrating Previous Experience

### Curriculum Vitae, training advice and academic programme

#### Curriculum Vitae

The ACP Credentialing Panel needs to see a CV to appreciate the developmental journey and experience that the ACP has, and to check that the eligibility is met in terms of experience and patient contacts.

Coverage of your early career within the CV should indicate your initial qualification and development of experience – accounting for the five years post-registration that is required **before** entering ACP training. Entry into the ACP training pathway with less experience than this needs to be explained, and additional evidence will be required to demonstrate appropriate clinical experience. Three of those years should be in emergency/acute care.

The regulations are clear that the experience developing as an EM-ACP must be in an emergency care environment – this means an emergency department with a full case mix. At point of submission, the ACP must have a minimum of 3 years (full time equivalent) in advanced clinical practice in an emergency department, with additional time required for concurrent adult and children's application.

Time working exclusively as an ambulance paramedic or in an urgent treatment centre is fine, but cannot provide the whole case mix, and so must be **in addition** to time in an emergency department where the focus would be on the continuing care (not only initial assessment) or high acuity patients respectively.

Time in another acute specialty may also contribute to the experiential learning but cannot be counted in the emergency department time.

The CV should specify the clinical working hours of each post – per week. Ideally the CV will summarise the months in each post to make it easy for the Panel to review. This should be hours working clinically as an ACP – if you are also undertaking a shift leader role, the breakdown of hours for each element of work (shift leading and advanced practitioner) must be clear in the CV. This is not recommended. The Panel will look for 30 hours a week working as an advanced practitioner for a minimum of three years for adult or children (pro-rata). Less than full time working is welcomed and very beneficial, but the CV must demonstrate that, overall, the equivalent time has been spent in ACP training and direct patient contact.

For those ACPs working concurrently towards adult and children's credentialing, the CV must make a distinction between posts/clinical hours and how they are divided between adults and children – and whether it is a children's ED. This is critical for understanding patient contact.

The CV must be clear about any gaps in training/experience including parental leave, extended sickness absence, etc.

The CV is also a good place to list some of your other professional achievements including academic research, publications, managerial and leadership roles and educational responsibilities.

## Training advice

There are a variety of approaches to undertaking training as an EM-ACP and completing the required academic programme. However, these largely fall into two categories: 1) concurrent completion, or 2) undertaking the Masters first, then completing the portfolio required for RCEM credentialing. It is likely that this whole process will take more than three years, and it may be that the trainee ACP (tACP) is not able to commence clinically based training until some key elements of the academic course, for example history taking and clinical assessment, have been achieved. It must be remembered that a new ACP, embarking on assessing patients and diagnosing and treating, is unlikely to be independent with the supervisor in the department (entrustment level 2b) in the first year. This experiential learning takes time and therefore planning.

The RCEM does not stipulate how the portfolio and academic programme are combined but it may be useful to discuss this with other trainees, supervisors or senior ACPs to ascertain which option would best suit a particular location or programme.

## Selecting an HEI

Where a tACP is working within an established programme, it is likely that there will be a pathway to obtaining the required academic components. However, for locations which are new to training ACPs, it is important that the course selected meets the requirements for credentialing. To be assured of this, there are several approaches that may be considered:

- Visit <https://directory.advanced-practice.hee.nhs.uk/search/programmes> which lists programmes accredited by NHSE Centre for Advancing Practice. If the programme you are considering is listed here, it will be acceptable for credentialing, *providing* it is a generic or, preferably, EM-specific advanced practice qualification. An advanced practice programme in another specialty, such as oncology or cardiology, will not be acceptable. If the academic programme is NHSE accredited (and appropriate), there is no longer a requirement for the ACP to complete an Academic Credentialing Declaration within their ePortfolio;
- Contact other locations in the region to ascertain if they have used a local HEI to provide the academic training for tACPs intending to credential;
- Contact a local HEI and discuss whether they have supported tACPs who wish to credential with the RCEM. If not, consider sharing the Academic Credentialing Declaration and curriculum and ask whether their advanced practice programme meets the described learning outcomes.