

I am not a nurse or paramedic – can I credential with RCEM?

The College welcomes applications from any Advanced Clinical Practitioner who fulfils the eligibility criteria in the EM-ACP curriculum and regulations (2022) and who, together with their ACP Educational Supervisor, believes they have sufficient evidence to be considered for credentialing. This includes a relevant qualification in advanced clinical practice and recognition as an independent prescriber. We recommend that potential EM-ACPs from professional backgrounds other than nursing and paramedicine seek advice and guidance from the RCEM ACP Forum, and also requests an Educational Supervisor who is familiar with the EM-ACP curriculum and who can therefore give accurate and constructive advice.

To date, RCEM has only credentialed ACPs from a nursing or paramedic background. This has reflected our understanding that colleagues from nursing and paramedic professions are those most likely to have acquired the previous experience of delivering direct clinical care in the emergency setting needed before starting EM-ACP practice. In the curriculum we state that “a suitable entry point would be 5 years post-registration with a minimum of 3 years emergency/acute care experience and the practitioner working at enhanced practice level.” (Emergency Medicine Advanced Clinical Practitioner Curriculum 2022, section 2.3.1).

However, we recognise that professions outside of nursing and paramedic practice may feel they are at a disadvantage as they may not have had access to that experience across the syllabus before commencing. Clearly colleagues in other professions (including, but not limited to, pharmacy, physiotherapy, and occupational therapy) are increasingly working in many roles in Urgent and Emergency Care (UEC) including EDs and Urgent Treatment Centres (UTC) and often work as first contact clinicians. These are valued roles within our multi-professional teams and provide opportunities to develop practitioner skills and competence. However, equally commonly, these practitioner roles may be limited in the scope of practise/ case mix, focusing on selected patient groups or conditions, or limited in requirements for advanced clinical decision making and interventions within those roles, hence such practitioners may require additional time to gain a broader range of experience before EM-ACP training. We also recognise that, as advanced practitioners in your own professional roles, you will often reach high levels of entrustment in some areas of our curriculum and syllabus.

What is critical to understand is that, to credential as an EM-ACP, the standard is the same irrespective of professional background, and the entire syllabus must be covered. If you are from another professional background, it is critical for you to undertake a realistic evaluation of your current scope of practice and clinical model of care delivery. It is likely that you will need additional time in the EM-ACP training programme to develop the breadth of capability and to reach the required level of entrustment. Regardless of professional background, the regulations remain that all ACPs are required to complete a minimum of 3 years, 30 hours per week direct clinical contact (WTE) working in an emergency department prior to submission.

We look forward to receiving applications from EM-ACPs from other professional backgrounds over the next few years.