

RCEM ACP credentialing – where do I start?

Whether you are a tACP (trainee ACP) or a senior/experienced ACP, starting on the credentialing pathway can be daunting.

Although RCEM EM-ACP credentialing is not a formal training programme, some regions or Trusts will have developed their own credentialing programme and may already have ACPs who have successfully credentialed. If this applies to your own ED, there will already be supervision and support mechanisms in place, and a cohort of credentialed ACPs who can offer further support and mentoring.

However, if you are the first tACP/ACP in your ED to undertake credentialing, knowing how and where to begin is significantly more challenging. We hope that answering the following questions will help you get started and signpost you to further sources of support if needed.

Question 1

Have you either successfully completed, or are currently undertaking, a Masters degree in advanced practice?

- **Yes, go to question 2**
- **No, go to question 5**

Question 2

Does your Masters degree in advanced practice meet the requirements for RCEM credentialing, i.e. is it either accredited by the NHSE Centre for Advancing Practice¹ (check the website [here](#)) or does it meet the RCEM-required learning outcomes (see appendix 2)?

- **Yes, go to question 3**
- **No, see below**

If your Masters degree does not meet the requirements for RCEM credentialing, please seek advice from the College. You may need to consider taking additional level 7 modules.

[Go to appendix 1]

Question 3

Will your department support you in your application for credentialing, and assign you an ACP Educational Supervisor who meets the eligibility criteria as defined in the [credentialing regulations](#) and who has successfully completed RCEM ACP Supervisor training (2022 curriculum)?

- **Yes, go to question 4**
- **No, see below**

If your department is unable to provide an appropriate ACP Educational Supervisor, explore the reasons why this is not possible and seek further advice from the College or ACP Forum.

[Go to appendix 1]

¹ If the Masters programme is not accredited by the NHSE Centre for Advancing Practice, ACPs working in England will not be eligible to apply for the NHSE digital badge

Question 4

Do you work full-time with a minimum of 30 hours per week direct patient contact?

➤ Yes, see below

Next steps:

- ❖ Become an [Associate Member \(ACP\)](#) of the College. Access to the RCEM ePortfolio (risr/advance) is included in the membership fee and login details will be sent to you once your membership application has been approved.
- ❖ Read the curriculum, credentialing regulations and guidance on the [RCEM website](#)
- ❖ Commence your ePortfolio. Add your post (location, grade and % whole-time equivalence), and your ACP Educational Supervisor and Clinical Supervisor once they have been assigned to you.
- ❖ Upload any existing evidence to your ePortfolio.
- ❖ Meet with your Educational Supervisor to identify areas where you are already performing, and those that will require support and training.
- ❖ Complete a PDP - agree your objectives with your ES and think about how you will collect evidence in your first year.

➤ No, see below

If you work less than full time, you will still be able to credential but it will take you longer than 3 years (or 4 years for concurrent adult and children's applications) to achieve the minimum experience required.

If you have a hybrid role that reduces your clinical hours to less than 30 per week, discuss possible options with your line manager, such as a change in job plan or taking on extra shifts. If a local solution cannot be found, you will still be able to credential. As with ACPs who work less than full time, it will just take longer to achieve the minimum experience required.

[Go to 'next steps' above]

Question 5

Do you have the support of your department to apply for a Masters in advanced practice?

➤ Yes, see below

Next steps:

- ❖ Select an appropriate Masters programme in advanced practice that is either accredited by the NHSE Centre for Advancing Practice² (check the website [here](#)) or meets the RCEM-required learning outcomes (see appendix 2)
- ❖ Ensure you are able to self-fund the Masters programme if it is not being funded by your Trust
- ❖ Make sure that you will be able to balance your academic and clinical work without risking burn-out. Discuss this with your line manager and seek advice from your ACP Forum regional rep if necessary.
- ❖ Apply for the Masters programme.

➤ No, see below

If you do not have the support of your department, please seek advice from the ACP Forum.

[Go to appendix 1]

² If the Masters programme is not accredited by the NHSE Centre for Advancing Practice, ACPs working in England will not be eligible to apply for the NHSE digital badge

Appendix 1: Further information

RCEM Training Team

For further information and advice on EM-ACP credentialing and the ACP curriculum, please email ACP@rcem.ac.uk

ACP Forum

The ACP Forum consists of a Chair and eight representatives from across the four nations, all of whom are advanced nurses or paramedics working in Emergency Medicine. The Forum was established to provide a focus and representation for ACPs and tACPs within the College and to help shape the development of EM as a specialty and improve the training experience.

If you are still having difficulty knowing how and where to start on the credentialing pathway, you may find it helpful to speak with a credentialed ACP who has already navigated this journey. The ACP Forum may be able to put you in touch with someone in your region who could offer some mentoring or become a 'buddy'.

To contact the Forum, please visit <https://rcem.ac.uk/ec-acp-forum/>

Appendix 2: Academic learning outcomes

Your advanced practice programme must contain modules covering the topics of history taking and physical assessment, and clinical decision-making and diagnostics. The modules may not have these specific titles but must cover the College-required learning outcomes described below.

You must read carefully the outcomes described below and compare them to the learning outcomes from your own advanced practice programme. Your programme may have two or three modules that, between them, contain the outcomes below.

If your academic programme is not accredited by the NHSE Centre for Advancing Practice, you will need to complete the **Academic Declaration** form within the portfolio. The wording of your completed modules may not be written exactly as below, but you should copy across the outcomes in your course description that meet these. It is not enough just to copy the *name* of the module - we must see the learning outcomes that your course offered.

History taking and physical assessment

- ❖ Elicit a focused history to establish the possible cause of the presentation in all ages
- ❖ Establish relevant previous history including drug history and social elements that may contribute to a presentation
- ❖ Gather relevant information from a range of other sources including relatives, carers and medical records, particularly where this may be sensitive information
- ❖ Recognise the challenges of gathering complex and sensitive information
- ❖ Demonstrate an accurate physical examination of all body systems in simple and complex situations in all ages, and consider the findings in the context of the patient presentation
- ❖ Synthesise the findings of the history and examination to make a differential diagnosis and formulate a management plan
- ❖ Demonstrate judgement in communication and data gathering within the patient encounter and make appropriate recordings
- ❖ Distinguish and articulate the difference between normal and abnormal in the context of the patient presentation
- ❖ Ensure patient privacy, dignity and confidentiality is maintained throughout the clinical assessment
- ❖ Critically consider the place of the skills of history taking and physical examination within the context of advanced clinical practice

Clinical decision-making and diagnostics

- ❖ Demonstrate an understanding of the decision-making process in advanced clinical practice
- ❖ Utilise a range of sources of knowledge and information, as well as decision support tools, to come to a sound clinical judgement
- ❖ Critically evaluate decision support tools in the clinical context to support rapid decision-making and resuscitation in all ages
- ❖ Manage uncertainty and the associated risks in the diagnostic process and communicate this appropriately with the patient
- ❖ Engage the patient in shared decision-making, providing sufficient and clear information to support the decision-making

- ❖ Communicate and record the rationale for decision-making to others when making a decision and the importance of that record
- ❖ Evaluate decisions in the light of the clinical outcome
- ❖ Critically evaluate the contribution of clinical tests (laboratory, imaging and near patient testing) to the clinical decision-making in the light of accuracy and cost of those clinical tests as well as the epidemiology of the condition
- ❖ Utilise clinical tests in an effective manner to supplement the clinical assessment. This will require reviewing the risks of over or under utilisation of investigations, statistical utility of investigations balancing the cost with benefit to maximise the impact on patient care