

ACCP

By Heather Baker

Aims & Objectives

• Aim

- Overview of the ACCP role and how it works within the local critical care setting
- Objectives
 - My development to ACCP
 - Drivers
 - FICM guidance and curriculum
 - What's happening locally at ULHT

Northumbria ACCPs



Drivers

- Increasing age & co-morbidities
- Utilise new technologies and treatments
- Reduction in ICM trained staff
- Resident ratio 1:8
- Staff progression
- Staff retention

ACP vs ACCP

- ACP cheaper because more numbers to be trained
- ACP generically trained and only competencies are speciality specific
- ACP definition is acknowledged by HEE, but it's not a title or a role
- Any registered professional
- Not supernumerary, on job training
- Even less specialist knowledge

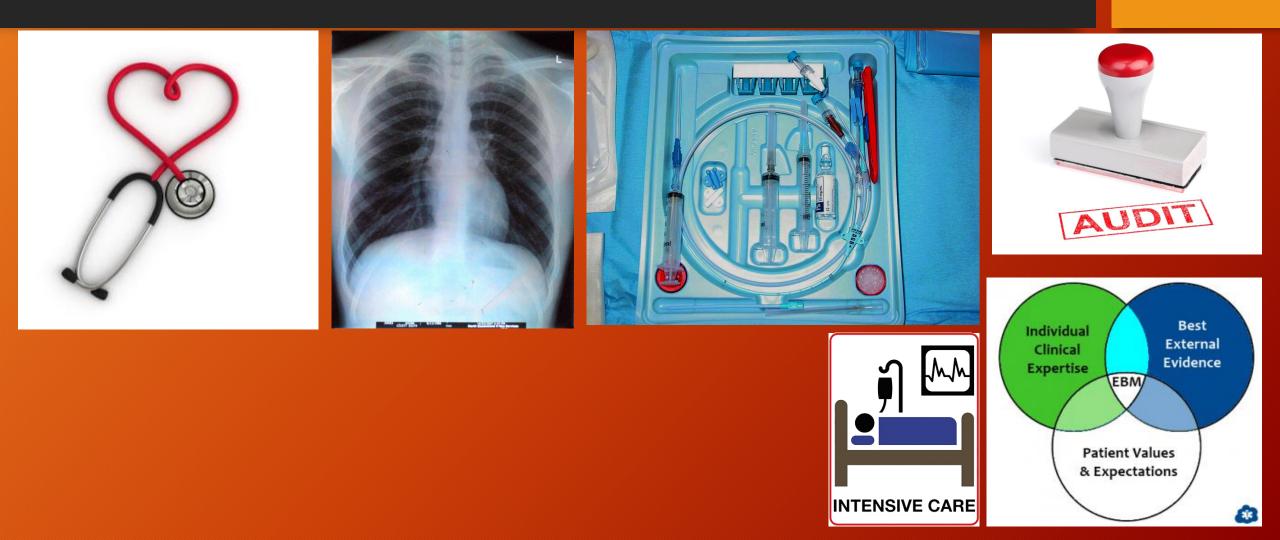
Pre- requisites for ACCP

- Registered professional Nurse/physio
- Experience working in critical care
- Bsc or demonstrate academic ability at degree level
- Complete a robust selection process
- Must be entered on to an appropriate postgraduate diploma/MSC with higher education Institution
- Must be able to prescribe

What is an ACCP

- High standard knowledge and skills
- Nurse/Physio
- Diagnose & treat
- Refer to specialist if needed
- Empowered to make high level clinical decisions
- Successfully completed academic and clinical competencies set out by FICM
- A FICM member ACCP with supervision from ICM consultant should fall within definition of an ICU resident (GPICS 2018)

What can ACCP do



Program & course

- 2 years full time supernumerary
- Complete program leading to appropriate postgraduate diploma/ MSC
- Cellular physiology
- Homeostasis
- Systems A + P & pathophysiology
- History taking and examination

- Radiology
- Microbiology
- Pharmacology & prescribing
- Technology
- Discharge planning and rehabilitation
- EOL care
- Organ/tissue donation
- Surgical procedures

FICM & Networking

- National Association of Advanced Critical Care Practitioners (NaACCP)
- Founded in June 2013, hosted by FICM
- <a>www.ficm.ac.uk/accps/naaccp
- Regional networks- Northern region, Mid ACCP, London Network, North West
- Podcasts Jonathon Downham
- Facebook
- Twitter

CPD & appraisal

- Meet mentor formally every 6 months
- Logbook skills
- Feedback
- Record of study days & formal teaching
- FICM/ ULHT assessment forms
- Tripartite appraisal consultant & matron
- Audit
- Service development

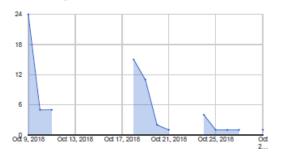
Advantages vs disadvantages

- Expensive to train financial/time
- Lack of knowledge
- Continuity of care
- Passionate about ICU and want to be there
- Keeps experienced nurses clinical
- Reduces consultant workload in longer term

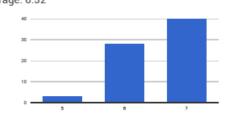


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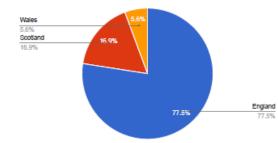
Timestamp



What grade were you during your training, or what grade are you if currently training? Average: 6.52



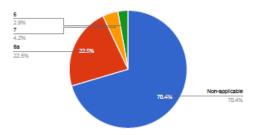
Which country do you work in?



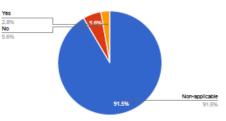
Are you currently qualified as an ACCP in your

No

If qualified, with or without FICM membership, what grade are you?



If you are qualified ACCP in your service, are your registered with FICM as a member?

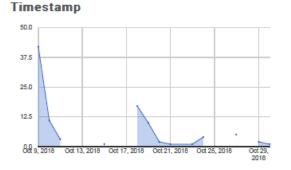


Which hospital trust do you work in?

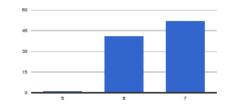




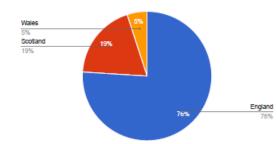
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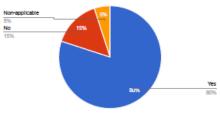
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Yes

Non-applicabi

28%

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Which hospital trust do you work in?

with birmingham heartlands yorkshire national glasgow leeds clyde and manancy grampian alhull greater vale ^{yorkahire} hampshire bank upon tees east alexandra royalt servery united cardiff one outh salford infirmary teaching **NO** foundationtyne_stockport plymouth

LCH pilot project

- Meet GPICS requirement
- Junior Drs 3/5 ACCP has prevented them making a mistake
- Registrars better theatre training,
- Consultants protected time & continuity
- Nurses Bridge between nurses and medical staff
 - Interventions and performed more efficiently
 - Senior nurses have support
 - ³/₄ staff asked see it as career progression





Contacts and References

- Heather.baker@ulh.nhs.uk
- The Faculty of Intensive Care Medicine (FICM)
- The Guidelines for Provision of Intensive Care services, version 2 (GPICS2)
- Health Education England (HEE 2017) ACP framework
- ULHT ACCP Pilot project