Acute Medicine Career Framework for Nursing: Shaping the Future of Acute Medicine

"Illustrative image generated using Microsoft Copilot AI."

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Acknowledgments

The Acute Medicine Career Framework has been developed in collaboration with a dedicated group of specialist registered nurses and allied health professionals from diverse settings across the United Kingdom, alongside key partners including the Royal College of Nursing (RCN) and NHS England (NHSE).

Contributors include clinical experts in Acute Medicine, leadership, research, and education. This framework draws on current best practices and aligns with the pillars of nursing, providing a clear, structured, and accessible career pathway from preceptorship through to advanced practice within Acute Medicine.

We extend our deepest gratitude to all individuals and organisations whose dedication, expertise, and support made the development of the Acute Medical Nursing Career Framework possible.

Special thanks go to the nursing professionals who generously shared their insights, feedback, and guidance throughout this process. Your commitment to excellence in acute medical care is embedded in every aspect of this framework, which serves as a foundational step in supporting registered nurses' career development and progression.

Authors

Hannah Hegarty	The Society for Acute Medicine Nursing Representative: Senior Sister, Acute Medical Unit, University Hospitals Birmingham NHS Foundation Trust.
Elaine Burnett	Advanced Clinical Practitioner, Acute Medical Unit, Portsmouth Hospitals NHS Foundation Trust
Dr Liz Lees-Deutsch	Professor for Nursing Practice, Centre for Care Excellence, University Hospital Coventry and Warwickshire NHS Trust and Centre for Healthcare Communities, Coventry University
Tash Kelly	Matron for Acute & Ambulatory Medicine, University Hospitals Dorset NHS Foundation Trust.
Nicola Bailey	Divisional Education Lead, University Hospital Southampton NHS Foundation Trust.
Kirsten Evans	Acute Medical Unit Physiotherapy Lead, Emergency Floor Therapy Team, RLUH Liverpool University Hospitals NHS Foundation Trust
Lyndsey Alexander	The Society for Acute Medicine AHP Representative: Clinical Occupational Therapist for Medicine, Western General Hospital, NHS Lothian
Meike Gfrarer	Acute Medical Unit Nursing Officer, Princess Mary's Royal Air Force Nursing Service, Royal Centre for Defence Medicine
Cait Hennessy	Advanced Clinical Practitioner in Acute Medicine, University Hospital Birmingham NHS Foundation Trust
Kendal Andreason	RCN Professional Lead for Acute, Emergency, and Defence Nursing

Contributors

Dr Abby Kendrick	Clinical Education Based Information Services: Clinical Evidence Based Information Services University Hospital Coventry and Warwickshire NHS Trust
Maria Oyston	Head of Nursing Service Delivery, Transformation and Resilience, Quality Directorate, Office of the Chief Nurse, NHS England
Cora Presley	Deputy Director- Service Delivery, Transformation & Resilience Quality Directorate, NHS England

Purpose Statement

This document, developed by The Society for Acute Medicine (SAM), aims to provide a comprehensive career framework developed in collaboration with the Royal College of Nursing (RCN) and NHS England (NHSE) to establish clear and structured career pathways within Acute Medicine. It serves as a multi- phase career development programme designed to support registered nurses by defining essential skills, knowledge, and professional milestones from entry-level to advanced practice. By offering guidance and a common language for career progression, this framework empowers registered nurses to enhance their expertise, improve patient care, and achieve sustained professional growth within the speciality of Acute Medicine.

NB: SAM are not expected to 'assess' or 'validate' any learning activities; these aspects will be enabled at hospital/trust level for example, by practice educators.

To bring this work to fruition the following work has been completed:

1. Rapid Evidence Review: regarding barriers and facilitators to knowledge attainment and skills in acute medicine.
2. Establish: working group members to assist the development of the work.
3. Scope competencies from acute medicine (2013) to inform the existing SAM framework.
4. Input from MDT to allow thorough in-depth capabilities
5. Integrate appropriate existing assessment strategies to align with competencies.

Future ambition

1. To develop an online platform and a repository for the storage of information.
2. Develop an online platform to host the framework.

The framework is intentionally designed as a capability document because Acute Medicine requires practitioners to integrate judgement, behaviours, and decision-making in real clinical contexts, rather than demonstrating isolated tasks. This mirrors the *Capabilities in Practice* model used in Internal Medicine, developed after competency-based systems were shown to become a "tick-box exercise" that failed to reflect real-world performance. [53] By focusing on holistic, trustworthy professional activity and progressive autonomy, the capability approach better captures the complexity, adaptability and integrated practice essential to modern Acute Medicine.

Background

The landscape of Acute Medicine is continually evolving, with increasing complexity in patient care and growing pressure on healthcare services. Registered nurses are at the forefront of delivering timely, high-quality care in these demanding settings. However, there have historically been a lack of clear and consistent career pathways to support professional growth and recognition for registered nurses working in Acute Medicine.

To address this, the Society for Acute Medicine (SAM), in collaboration with the Royal College of Nursing (RCN), NHS England (NHSE), and a network of specialist registered nurses and allied health professionals, has developed the Acute Medical Nursing Career Pathway with Capability Framework. This framework responds to a national need to attract, retain, and support the career progression of nursing staff by providing structured guidance on capability development and professional advancement within the specialty.

Further underpinning the rationale for this framework, the Clinical Academic Training (CAT) group conducted a rapid review titled *"Report on the barriers and facilitators for nurses and therapists allied to health, in developing their knowledge and skills within acute medicine, to support career progression."* To underpin the development of this new framework a rapid review of literature was undertaken to establish the best evidence relating to the acquisition of knowledge, skills and, importantly, career progression in acute medicine.[1] This revealed a dearth of evidence in the specific context of Acute Medicine, with literature concentrated on acute care. Notably across the acute care literature, career progression [through levels of practice] were also absent. Nevertheless, we extracted and charted twenty two primary and secondary outcomes related to workplace learning[1,2] (p6), to aid our early conceptual knowledge.

Several intercollegiate guidelines have been considered in the development of this new framework; Health Education England defined levels of practice, through a trajectory commencing from apprentice (entry level) to consultant level, differentiating nine career stages (p11)[1]. NHS England (2024) defined enhanced level of practice across the AHP workforce, to include 10 professions.[2] The nursing workforce standards (2021) also support leadership, accountability and responsibility for ensuring the safety and effectiveness of services[52.] The new framework will reflect the broad range of skills required in acute medicine, integrating registered nurses and allied health professionals. Please see below the list of guidelines and documents used to support this framework.

Eligibility framework – results

Health Education England. An Integrated Career and Competency Framework for Acute Medical Nurses. 2022. Available at: https://advanced-practice.hee.nhs.uk/wp-content/uploads/sites/28/2024/04/Advanced%20clinical%20practice%20in%20acute%20medicine%20curriculum%20framework.pdf

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Health Education England. Same Day Emergency Care- SDEC Competencies. 2023. Available at: https://www.hee.nhs.uk/sites/default/files/documents/Same%20Day%20Emergency%20Care.docx

Barton, C, Simpson, M, Girdler-Heald, L, Millerick, Y, Higginbotham, K, and Whittingham, K. Heart Failure Specialist Nurse Competency Framework. 2021. Available at: https://www.rcn.org.uk/workingwithus/-/media/Royal-College-Of-Nursing/Documents/Working-with-us/Endorsements/Heart-failure-specialist-nurse-competency-framework.pdf

Royal College of Nursing and Emergency Care Association. National Curriculum and Competency Framework Emergency Nursing (Level 1). 2017. Available at: https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2017/june/pub-005883.pdf

Health Education England. Advanced Clinical Practice in Acute Medicine Curriculum Framework. 2022. Available at: https://1drv.ms/b/s!ApHe1hSZ2eKbgYQlY4YFtrzrnl75lQ?e=MEnlyl

National Outreach Forum and Critical Care Networks - National Nurse Leads. National Competency Framework for Registered Practitioners: Level 1 Patients and Enhanced Care Areas. 2018. Available at: https://www.cc3n.org.uk/uploads/9/8/4/2/98425184/level_1_competencies_final_7.7.18.pdf

By drawing on the findings of the CAT group rapid review and aligning with national workforce strategies, this framework addresses identified gaps, supports workforce sustainability, and ensures that registered nurses and allied professionals have the skills, knowledge, and support they need to excel in Acute Medicine — ultimately enhancing patient outcomes and strengthening system resilience.

Alongside this CAT group rapid review, The RCN levels of nursing have been referred to throughout the career framework, to ensure registered nurses in acute medicine are working within the scope of practice expected within their role, whilst still allowing for progression and support to progress. The aim of this career framework is to support a registered nurse from preceptorship through to advanced practice.

The Acute Medicine Career Framework

The Acute Medical Nursing Career Framework outlines a structured progression for registered nurses working in Acute Medical settings, aligned with the Nursing Code [54]and encompassing the importance of the 6 C's, Care, Compassion, Competence, Communication, Courage and Commitment [55]. The framework is designed to support career development across four stages of capabilities, guiding registered nurses through increasing levels of responsibility and expertise while incorporating the four pillars of advanced nursing practice: clinical practice, education, leadership, and research. This is laid out in Figure 1.

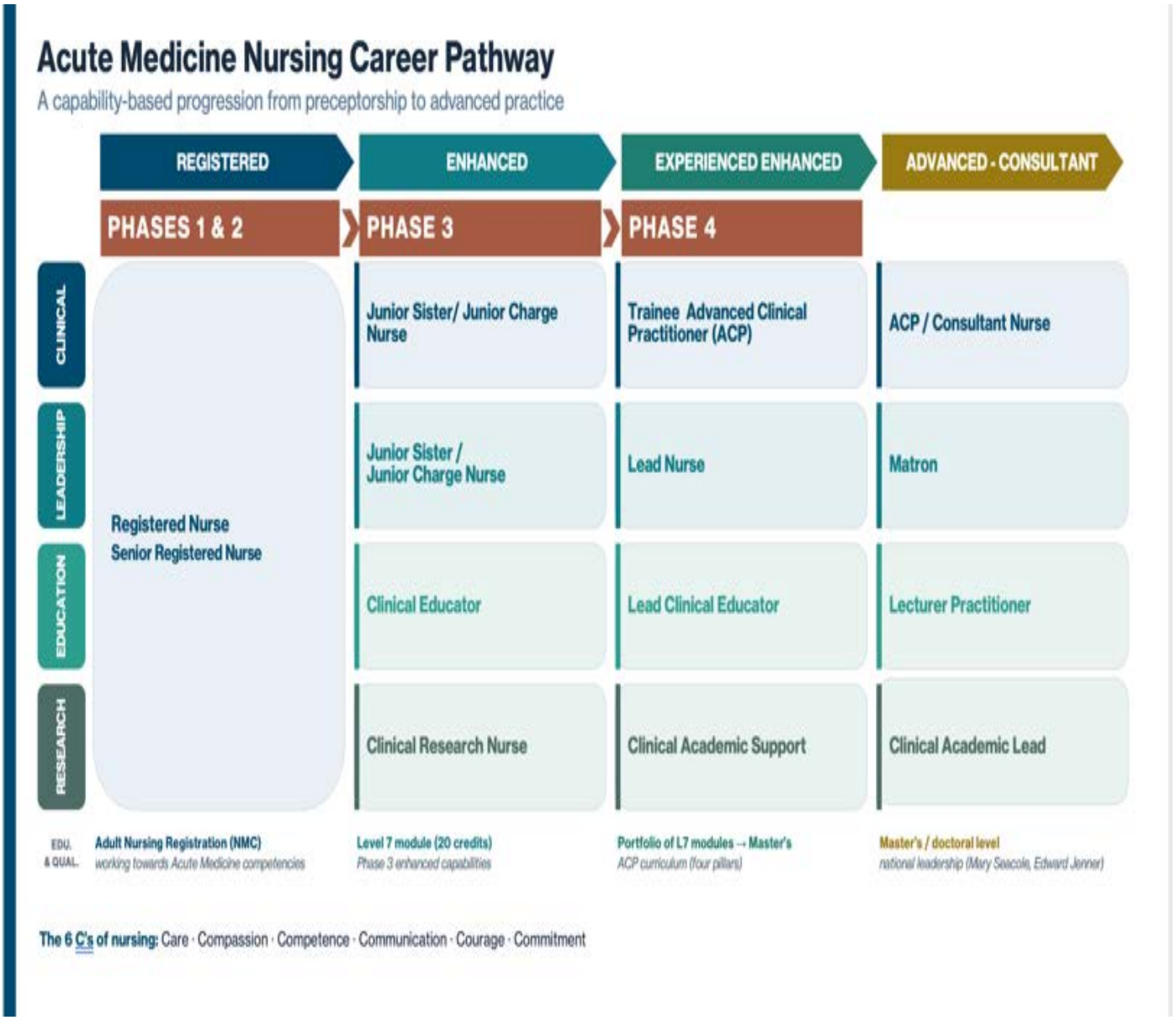
Phase 1 covers the first year (Whole Time Equivalent, WTE), focusing on basic care and preceptorship, including the ability to escalate concerns and uphold the NMC code.

Phase 2 (years 2–5 WTE) introduces acute care, leadership foundations, and patient flow management.

Phase 3 involves enhanced care areas, such as supporting emergency situations, nurse-led clinics, requiring progressive clinical knowledge.

Phase 4 represents more refined roles like Ward Manager, Clinical Nurse Specialist- enhanced care nursing, or Advanced Clinical Practitioner (ACP), supported by postgraduate education (e.g., Masters in Acute Medicine, PGCE) and national leadership programmes such as Mary Seacole and Edward Jenner. This final stage emphasises strategic leadership, developed clinical expertise, and active participation in education and research initiatives.

Figure 1


Acute Medicine Nursing Career Pathway
A capability-based progression from preceptorship to advanced practice
REGISTERED
ENHANCED
EXPERIENCED ENHANCED
ADVANCED - CONSULTANT
PHASES 1 & 2
PHASE 3
PHASE 4
CLINICAL
LEADERSHIP
EDUCATION
RESEARCH
Registered Nurse
Senior Registered Nurse
Junior Sister/ Junior Charge Nurse
Junior Sister / Junior Charge Nurse
Clinical Educator
Clinical Research Nurse
Trainee Advanced Clinical Practitioner (ACP)
Lead Nurse
Lead Clinical Educator
Clinical Academic Support
ACP / Consultant Nurse
Matron
Lecturer Practitioner
Clinical Academic Lead
EDU. & QUAL.
Adult Nursing Registration (NMC)
working towards Acute Medicine competencies
Level 7 module (20 credits)
Phase 3 enhanced capabilities
Portfolio of L7 modules → Master's
ACP curriculum (four pillars)
Master's / doctoral level
national leadership (Mary Seacole, Edward Jenner)
The 6 C's of nursing: Care · Compassion · Competence · Communication · Courage · Commitment

Future Proofing

Recognising the ever-changing nature of healthcare, this Acute Medicine Career Framework marks an important step towards establishing a structured and sustainable development pathway for registered nurses and nursing associates. It enables them to evidence the acquisition of critical knowledge, practical skills, and clinical capability required to deliver safe, high-quality care in increasingly complex acute medical environments.

Healthcare must continually evolve to meet the needs of an ageing population, respond to advances in diagnostics and treatment, and deliver more personalised and preventive care. In line with the 10-Year Health Plan for England: Fit for the Future[4], this framework supports the system-wide shift towards a more responsive, digitally enabled, and prevention-focused NHS It reflects key national priorities including developing a modernised and flexible workforce, strengthening care in community and acute settings, and embedding prevention and personalisation at the heart of healthcare delivery.

Future-proofing nurse training is critical to these ambitions. A skilled and adaptable workforce is essential to reducing health inequalities, increasing productivity, and ensuring long-term sustainability of services[56 57]. This framework prepares professionals to meet these demands by encouraging continuous learning and by fostering capabilities that promote collaboration, innovation, and evidence-based practice. It also aims to equip staff to work across multidisciplinary teams, engage effectively with patients and families, and manage evolving healthcare pressures with greater confidence and resilience. In doing so, it plays a vital role in combatting issues like burnout, emotional fatigue, and career stagnation.

To remain relevant and responsive, the Acute Medicine Career Framework will be reviewed regularly and revised in line with ongoing policy and system reform. Future iterations will incorporate developments in evidence-based care, advances in technology, and updates to nursing education and regulation. In doing so, the framework ensures alignment with national strategy while promoting the long-term goal of a confident, competent, and future-ready workforce capable of delivering outstanding acute medical care.

Using the Career Framework for Revalidation

The acute medicine career framework provides a structured approach to evidencing professional development and competence for NMC revalidation. By mapping your practice against the framework's levels and capability domains, you can clearly demonstrate how you meet the requirements for safe, effective care and ongoing learning. Each section is aligned with the NMC Code [54] to ease with revalidation. Additionally, the framework supports identification of CPD activities and future development goals, making it easier to plan and record learning that is relevant to your role and progression. You are given the opportunity to reflect after each domain which can then be used as part of the revalidation bundle.

Time to complete

Each phase of the framework is designed to be completed within a minimum of one year and aligns directly with your revalidation requirements. We recommend a **minimum of 75 hours of protected education time annually**, in addition to any mandatory training. These hours should be used to engage with structured acute medicine career frameworks—such as this one or nationally recognised acute medical courses—which typically cover clinical assessment, triage, leadership, quality improvement, and safeguarding. Dedicated CPD time in acute medicine is essential because it ensures registered nurses stay up to date with rapidly changing clinical guidelines and develop advanced skills needed for safe, effective care[58].

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Glossary of Registered Nurse & Nursing Associate roles in the Acute Medical setting

These descriptions reflect the most commonly understood definitions for Acute Medicine nursing roles; however, it is acknowledged there may be local variations due to a variety of factors.

Registered Nursing Associate

A registered nursing associate contributes to the core work of nursing within Acute Medicine. They should be working to complete the relevant Phase 1 and Phase 2 capabilities. They deliver clinical care under the supervision and direction of a registered nurse. They are not a substitute for registered nurses but are a useful part of the Acute Medical workforce.

Registered Nurse (Staff Nurse)

A registered nurse who is either newly registered or new to Acute Medical nursing; has not yet acquired the capabilities of a nurse within Acute Medicine. These registered nurses require supervision and support in practice, ranging from direct supervision in their initial weeks to indirect supervision as they develop in both confidence and capability. They should be working to complete the Phase 1 capabilities. Typically, they would be a Junior registered nurse within the first 2 years of registration.

Experienced Registered/Staff Nurse (Senior Registered Nurse)

A registered nurse who has completed preceptorship and has achieved the Phase 1 capabilities. They can work with individual patients or groups of patients without direct supervision in an acute medical setting. This includes initial assessment and the provision of treatment (but not diagnosis) for patients. In AMU's, this is likely to include working with unstable and high acuity patients. As well as those being cared for within Medical Same Day Emergency Care (MSDEC). They should be working to complete the Phase 2 capabilities. Typically, they would be a registered nurse within 2-5 years of registration.

Junior Sister or Junior Charge Nurse (enhanced level)

An experienced nurse who has completed the Phase 1 and 2 capability documents and works to develop their colleagues as well as themselves; they should have completed at least one postgraduate level 7 university module (20 credits) to support their learning. They should be able to lead and supervise the clinical work of others and competently manage an AMU/ MSDEC. They should be capable and confident in triaging patients attending for unscheduled care arriving from different avenues such as ED, GP or paramedics; as well as managing patient flow. In some settings, they may also be conducting nurse-led clinics and managing patient caseloads within defined protocols. They should be completing the Phase 3 capability to ensure they develop into an enhanced clinical expert, to align with leadership and management skills.

Senior Sister or Senior Charge Nurse (experienced enhanced level)

A highly experienced nurse who has completed Phases 1,2 and 3 of the capability documents. They should be working on one of the capability branches within Phase 4. Is a clinical expert and

proactively develop themselves and others. They lead and supervise the clinical work of others and can manage the Acute Medical care setting as a whole, managing patient flow and delegating care accordingly. They should work in close partnership with the medical staff to ensure the safety of patients and the best use of resources. They should focus on more in-depth leadership, educational and/or research capabilities. They should be developing a portfolio of master's modules at level 7 (20 credits per module) within a higher education institution with the goal of a full Master's

Practice Educator

This is an Acute Medical Nurse having completed Phase 1 and 2 as a minimum and preferably also Phase 3 of the capability documents. They facilitate educational opportunities in the Acute Medical setting. They provide supervision in practice, deliver training sessions and assessment of competencies and capability. They often teach on nationally recognised courses (for example, Advanced Life Support). They should establish the training requirements within the Acute Medical setting to ensure the necessary workforce skill mix, as well as completing and reviewing regular skills gaps analyses. They will work closely with the lead nurse and link the education strategy for the specific setting with the overall strategy for education in the organisation. They should be working towards academic skill sets, as seen within the Educational branch in Phase 4 of the career framework. They will also oversee achievement of mandatory training and context-specific training within the Acute Medical environment and lead on local inductions.

Clinical Academic

This is a registered expert nurse who has extensive experience within Acute Medicine. Their job plan enables a joint contract across healthcare providers and a higher educational institution. This dual role combines clinical delivery with audit, quality improvement, research, and building a clinical academic career. They will support multi-disciplinary staff in Acute Medicine and advise on the most up-to-date evidence and best practice within Acute Medicine. They will guide and advise staff in Acute Medicine to apply current research. They will talent spot to build the capacity and capability of the workforce and develop staff through clinical academic pathways, accessing grant funding streams, supporting research in Acute Medicine.

Advanced Clinical Practitioner

This is an advanced clinician who has undergone training to expand their knowledge and scope of practice and is educated and practising at master's level. They have experience and competence across the four pillars of advanced clinical practice: clinical practice, leadership, education and research, as described HEE Advanced clinical practice in acute medicine curriculum framework[5] in England. For Northern Ireland, clinicians should refer to the Advanced nursing practice framework ADVANCED NURSING PRACTICE FRAMEWORK - Supporting Advanced Nursing Practice in Health and Social Care Trusts.[6] In Wales, please refer to the Professional framework for Enhanced, Advanced and consultant clinical practice in Wales [7] For Scotland, please refer to the Advanced practice toolkit Advanced practice toolkit | Turas | Learn. [8] They sit within the medical workforce, but maintain their base professional identity and registration.

Lead Nurse Manager

This is an Acute Medical Nurse who has completed Phase 1,2 and 3 capabilities and is working within the ward manager branch of Phase 4. There may in some cases be separate Lead Nurse Managers for AMU and MSDEC. They are responsible for the day-to-day operational management of the Acute Medical setting, including workforce management and developing and implementing local policy and clinical guidance. They will oversee financial responsibility as a local budget holder. They will also oversee recruitment, development and retention of the workforce, and is a key support for the team and support their well-being.

Matron

This is a strategic role which provides leadership in Acute Medicine and links to the wider organisation with other specialities. They develop policies, procedures and drive improvement and service delivery. They have the overall responsibility for staff development. They will have a strong track record of healthcare leadership underpinned by a relevant master's level qualification and having developed an understanding of the importance of patient flow and patient pathways.

The Acute Medical workforce extends beyond registered nurses to include a range of registered and unregistered professionals who play a vital role in the effective operation of the Acute Medical Unit (AMU) and Medical Same Day Emergency Care (MSDEC) services.

Mental Health Registered Nurses are an increasingly integral part of the acute medical team, providing specialised support to patients with mental health needs within the acute setting. In addition to direct patient care, they offer valuable support and guidance to the wider multidisciplinary team.

Discharge Teams work within Acute Medicine to coordinate and facilitate timely discharges. Their role is essential in maintaining patient flow and ensuring capacity is managed effectively at the front door.

Navigators/Flow Coordinators are multidisciplinary teams, often composed of both registered and non-registered nursing staff. They manage patient flow through the AMU and MSDEC, including bed allocation within the unit and across the wider hospital. Registered practitioners within these teams are responsible for triaging patients and ensuring appropriate placement to support safe and efficient care delivery.

Healthcare Assistants (HCAs) provide fundamental support in the delivery of patient care. Their responsibilities include assisting with personal hygiene, monitoring vital signs, and supporting patient mobility.

Emergency Care Technicians (ECTs) are unregistered practitioners with a widened scope of practice, including clinical skills such as phlebotomy, peripheral cannulation, and performing ECGs. Frequently based in MSDEC, ECTs contribute to the timely assessment and management of ambulatory patients, thereby enhancing the speed and efficiency of care.

Acute Medicine also benefits from the expertise of registered nurses and clinicians from other specialities, who contribute to the care of patients within the Acute Medical Unit (AMU) and Medical Same Day Emergency Care (MSDEC). This includes specialist registered nurses and members of the wider multidisciplinary team (MDT), whose collaborative input is essential in delivering comprehensive, patient-centred care.

This career framework may also be used for support in conjunction with developing acute medical services such as community SDECs and virtual wards/ hospital at homes.

Evidence required to achieve capability sign-off

Self assessment –

At each stage of the framework, individuals are encouraged to undertake a self-assessment to reflect on their progress. Where appropriate, the nurse may sign off on capabilities they deem themselves to have achieved, based on sufficient evidence of knowledge, skill, and consistent performance in practice.

Capability sign off –

Capabilities may be signed off on by any suitably experienced and already capable member of the multidisciplinary team. This includes registered nurses, allied health professionals, or medical staff who possess relevant expertise and qualifications in the specific capability area being assessed.

Final sign-off –

Final verification of capability to be completed by clinical educators or members of the senior multidisciplinary team. This includes senior nurses, practice development staff, or allied health professionals in recognised leadership or educational roles, ensuring robust governance and consistency in capability validation.

Table 1

Competency levels [9]	
Novice (N)	Staff member is unable to perform this task due to having no previous experience. A practitioner would be unable to safely perform the skill without direct support requiring verbal queues and physical intervention or support.
Advanced Beginner (AB)	Advanced beginners can perform the required skill, however, will require direct supervision support and advice.
Competent (C)	Advanced Beginners demonstrate safe and acceptable performance because the nurse has had prior experience in actual situations. They are efficient and skilful in parts of the practice area, requiring occasional supportive cues. Knowledge is developing.
Proficient (P)	Has been practising these skills for many years and is able to perform them to a high standard without direction or supervision.
Expert (E)	Has extensive experience in performing this skill to a high standard without any supervision. Can anticipate and deal with problems independently. Is confident in supporting the training of other professions enabling them to carry out this skill.

Evidence of formal assessment

Whilst self-assessment helps to direct learning, support development and provide a baseline for subsequent assessment, objective formal assessment of capability should be undertaken for quality assurance purposes and should include individual professional feedback. Assessment should be based on objective evidence. Due to the diverse nature of the capabilities, no one type of evidence can meet all the statements [59]. A variety of evidence types must be used to demonstrate the knowledge, skills and behaviours required. Evidence may include those listed below.

Table 2

Assessment Methods	
Direct observation of procedural skills	DOPS
Case-based discussion	CBD
Feedback from colleagues and/or patients	F
Simulation	S
Question and answers	Q&A
Nationally recognised courses	RC
Reflective Report	RR
Anonymised clinical case notes	CCN
Workbooks	WB
Online modules	OM

It would be acceptable to put these abbreviated codes in the evidence column of the career framework to demonstrate the type of evidence that has been generated. Regular reviews are essential to highlight and resolve any difficulties in achieving or maintaining capability; these should also be in line with local Trust appraisal procedures and personal development plans. They also provide support for individuals, helping them to reach their potential without being restricted by traditional time-bound progression limits.

The Framework

The capability framework for nursing in Acute Medicine is demonstrated in Figure 2.

- Good Nursing Practice – Centre Core – These focus on the core concepts of nursing, drawing on the 6Cs of nursing. Care, Compassion, Competence, Communication, Courage and Commitment
- Cross–cutting themes – Inner wheel- These generic themes apply to patients with Acute Medicine.
- Pillars of Advanced Practice – Outer Wheel – All themes then link to the pillars, allowing guidance to progress systematically.

These sections appear in all phases of the framework.

It would be overwhelming for anyone to try and address all the capabilities simultaneously; it is recommended that realistic developmental goals (SMART Goals) are set at each one-to-one meeting/ appraisal/ personal development plan and reviewed promptly. The 'expected achievement date' column within these capabilities can be used to log the next date of the planned meeting/ appraisal/ personal development plan.

Within each meeting, there should be an agreement on which specific capabilities have been achieved or maintained, and which need to be progressed before the next meeting. It may be decided that some capabilities do not apply to the specific environment in which the individual Is working. In this case N/A should be marked against them. This will also allow the individual to use their career framework as a passport should they move to another Acute Medical Unit or Medical Same Day Emergency Care and continue their development.

Figure 2

Inspiration taken from RCN National curriculum and competency framework [52]

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