

Real-life story - Leo Nakhimoff

Leo started his career in health as a student paramedic. After years of experience in various roles and continuous learning, he's now doing a Master's degree apprenticeship as a trainee advanced clinical practitioner



Leo Nakhimoff Trainee advanced clinical practitioner

Employer or university University Hospitals Bristol NHS Foundation Trust

Salary range Unknown

How I got into the apprenticeship

Three years after being a student paramedic with the London Ambulance Service, I qualified as a paramedic and worked in various roles. Having been heavily influenced by my mentors towards the role of an emergency care practitioner, I self-funded a BSc in health care practice at St George's, University of London in 2014.

I left the ambulance service to develop clinically with the goal of working in an emergency department (ED). However, with no hospital experience, and not being a registered nurse, it took a further three years to achieve this goal. I worked in urgent care centres, minor injury units, GP surgeries, NHS 111 and out-of-hours clinics to get varied experience until I became an emergency practitioner at Bristol Royal Infirmary.

The advanced clinical practitioner (ACP) role in ED was in its infancy in the department, but it was the role I really wanted. I spent the next two years preparing for it, mixing clinical experience and academic progression. During this time, I took on an additional part time role as the education lead for nurses.

In 2019, I was given the opportunity of becoming a trainee ACP and starting the MSc degree apprenticeship in advanced clinical practice at University of the West of England. Over the past decade, my clinical progression has been influenced by my drive to always be the best clinician I can be.

What I do

I wouldn't say there is a typical day. Depending on the shift, I attend the board round (a summary discussion of the patient journey and what is required that day for it to progress) at the start and then spend the day seeing patients. I assess and treat any patient who comes into the different areas of the accident and emergency department, so 'minors', 'majors' or 'resus'. I order investigations, perform clinical procedures and manage the patient's journey through to admission or discharge. I work as a clinician alongside the medical staff.

I have been given training, mentorship and time and space to learn, which I particularly appreciate.

The best bits and challenges

In terms of challenges, the main one is the sheer volume of learning that needs to be done. Learning a new topic or skill is fundamentally an easy thing to do but learning how to apply that and develop as a clinician to the required level is the real challenge.

It is a daunting challenge but one I am enjoying. I am in a lucky position that my role has been developed out of the trial and error of the two previous trainees. It has been moulded into an excellent role and learning opportunity and there is nothing yet that I would change. I have been given training, mentorship and time and space to learn, which I particularly appreciate.

Life outside work

I love to barbecue all year round. I love to travel, ride my motorbike and watch live sports. Having interests and things that you can do with colleagues is important. Being able to bond with them over things that aren't work related helps create trust and improve working relationships, which in turn makes going to work for long hours much easier.

My wife, son and dog are the most important things to me, so having a healthy work-life balance is important. I also think it's important to have areas that cross over, so your work and home life are never two separate entities. Both my wife and I do a lot of medical charity work in Kenya and works at music festivals and sporting events.

Career plans and top tips for others

My next three years are full on! I have my MSc degree apprenticeship to complete, including non-medical

prescribing, while completing the ACP's credentialing portfolio from the Royal College of Emergency Medicine. Simultaneously, I will need to complete audits, advanced life support and European support trauma courses, and various placements in acute medicine, critical care and anaesthetics.

Once I qualify, I want to take a break from academia and consolidate my practice. However, the idea of doing a PhD in the future is not out of the question!

If someone told me they wanted to be an ACP I would encourage it. My advice would be to find out everything you can about the role and if it is suitable for you, to go into it with an open mind and be prepared to work incredibly hard. It is a long journey and your confidence will likely be knocked many times. But there is so much to learn and it is hugely rewarding.

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