

Preceptorship for Newly Registered Practitioners Policy

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1. Introduction

Preceptorship is a period of structured transition for the newly registered practitioner during which he or she will be supported by a preceptor, to develop their confidence as an autonomous professional, refine skills, values and behaviours and to continue on their journey of life-long learning (DOH, 2010)

The benefits of supporting newly registered practitioners within the clinical setting are well documented; enhancement of quality care, improved recruitment and retention, opportunities to talent spot, developing an understanding of the organisational objectives, supporting the concept of life long learning, making care the priority and enhancing the image of healthcare professionals. (DoH 2009)

The role of the preceptor for a newly registered practitioners is a significant role. The quality of the preceptorship relationship can have long term consequences for the newly registered practitioners career. Preceptors should therefore be aware that this is a privileged role and undertake the associated responsibilities with integrity

Avon & Wiltshire Mental Health Partnership NHS Trust is committed to supporting newly registered practitioners to build confidence and develop further competence in practice during the transition from student to newly registered practitioner.

2. Policy Statement

The Trust is committed to the provision of preceptorship for newly registered practitioners. The Trust expects all employees to contribute to the support of staff under preceptorship.

Similarly, the Trust expects newly registered practitioners will assume their responsibilities as registered practitioners and commit to meeting agreed requirements and learning outcomes set out during their preceptorship period.

For preceptorship to be effective it must be a reciprocal relationship between the newly registered practitioner, their line manager and the preceptor. All parties involved must undertake the roles and responsibilities set out in this policy and associated procedures.

3. Purpose

The purpose of this policy, and linked procedures is to ensure that all Preceptorship programmes are structured to develop the skills, knowledge and capability of the newly registered practitioner and strengthen their professional confidence

4. Scope

4.1 Nursing

- Newly registered nurses with the NMC who have completed a pre-registration programme in the UK for the first time
- Nurses entering a new part of the NMC register
- Newly admitted Nurses from other European Economic Area States and other nation states
- Registered Nurses who are returning to practice following a significant period of absence from practice

The preceptorship programme is also a useful tool for registered nurses entering different areas of practice within AWP and for those under conduct or capability measures.

4.2 Occupational Therapy

- Newly registered occupational therapists.
- Occupational therapists new to the NHS after working in another field or, those from other countries.

4.3 Social Work

- All AWP employed social workers who have registered in the last 2 years and are in a role that requires registration are obliged to register for the Assessed and Supported Year in Employment (ASYE) scheme. The ASYE scheme provides the framework for the social work equivalent of preceptorship and the AWP ASYE guidance is attached to this policy in Appendix 1.
- Newly registered social workers employed in roles that do not require registration will be offered the opportunity (but not obliged) to join the ASYE scheme, provided that they are employed in a role within AWP that will enable them to achieve and demonstrate the College of Social Work Professional capabilities.

4.4 Physiotherapy

The chartered society of physiotherapy does not have any specific guidelines but supports the following of the Department of Health Preceptorship Framework.

4.5 Dietetics

All newly registered dieticians are required to participate in the a Preceptorship programme . This will be led by the AWP Head of Dietetics.

4.6 Registered Bank Employees

For newly registered practitioners employed exclusively on the bank and those substantive staff working bank shifts during their preceptorship period please refer to the relevant discipline specific procedure.

5. Policy description

5.1 Supernumerary status and managing the clinical area:

Best practice indicates that on commencement of the preceptorship period all newly registered practitioners will have a minimum of two weeks supernumerary status within the clinical environment.

5.2 Protected time:

Protected time for the preceptor and newly registered practitioner to work and meet together must be agreed with and supported by the line manager. Time must be sufficient to meet all the requirements of the preceptorship period and in order to allow the preceptor/preceptee relationship to develop and strengthen. It is recognised that more time will be required in the initial stages, reducing as preceptorship progresses toward the end of the preceptorship period.

5.3 Preceptorship Period:

The preceptorship period is expected to last between 6 and 12 months but will differ for each discipline. Refer to discipline specific procedure for guidance.

Preceptorship is not to be undertaken in isolation and should be considered alongside the Appraisal Policy, Probationary Period Policy and Supervision Policy.

5.4 Interruption to the Preceptorship period:

If, at any time, the existing preceptor is unable to continue as preceptor to the newly registered practitioner, the line manager should ensure that a replacement or interim preceptor is identified to ensure a seamless continuation of the programme.

If the preceptee moves to a different clinical team or leave the employment of AWP prior to finishing the preceptorship programme, a hand over of progress should be undertaken by the preceptor to the new preceptor where known.

5.5 Managing Poor Performance:

The Preceptorship programme is not designed to manage poor performance. Concerns in relation to Capability are to be addressed using the [Capability Policy and Procedure](#).

5.6 Long term absence:

- The period of preceptorship can be extended if there are significant periods of absence, for example, long term sickness leave or maternity leave.
- Where it is known that the newly registered practitioner is likely to be absent within the preceptorship period for a significant period of time (i.e., for four weeks or more), the preceptor will review the progress made. The preceptorship period will recommence on return giving due regard to the pause in the programme and the need for any 'refresher' learning and development.

6. Roles and responsibilities

6.1 Director of Nursing and Quality

The Director Nursing and Quality is responsible for the delivery of the Trusts preceptorship policy and preceptorship programmes within the Trust. They will monitor this through the Quality Board.

6.2 Professional Leads

Ensure that the infrastructure to support Preceptorship for newly registered practitioners in their area of specialism is implemented, sustained and regularly reviewed.

To act as a source of knowledge of the Preceptorship Programme Trust-wide and ensure there is clarity and a shared understanding of the process amongst all stakeholders.

To provide on-going support, guidance and advice to line managers and preceptors to ensure the Preceptorship policy is implemented Trust-wide.

To ensure the Preceptorship Programmes are up-to-date and reflect best practice.

Maintain a database of those undergoing preceptorship. Monitor and identify individuals and areas requiring additional support and take all appropriate steps to enhance and encourage the retention of newly registered practitioners.

6.3 Human Resources

Provide Professional Leads with details of new starters who are newly registered on a monthly basis through the successful candidate forms submitted to HR.

6.4 Ward / Team Managers:

Identify newly registered practitioners at point of job offer and annotate them accordingly on the successful candidate form.

Ensure newly registered practitioners joining the team are informed about this policy and the relevant preceptorship programme.

Ensure there are adequate numbers of preceptors suitable for the role to provide preceptorship for any newly registered practitioner appointed to the team.

Ensure the team are made aware of newly registered practitioners joining the team so that appropriate support and guidance can be promoted.

The manager is required to inform both the newly registered practitioner and the preceptor of any concerns as soon as they are identified.

The manager is responsible for completing final sign off following the successful completion of the Preceptorship programme.

Seek guidance from Professional Leads and HR if there concerns relating to the capability of the newly registered practitioner.

6.5 Preceptors

Preceptors are required to support and assess the newly registered practitioner during the first 6–12 months of their employment through the relevant Preceptorship programme.

The preceptor is required to keep the line manager informed of;

- progress with the preceptorship programme, including completion
- any concerns as soon as they are identified
- newly registered practitioners' successful completion of the relevant preceptorship programme

The preceptor is not accountable for the actions or omissions of the newly registered practitioner

6.6 Newly registered practitioner

The newly registered practitioner who is progressing through the Preceptorship Programme is responsible for;

- Practicing in accordance with their professional standards.
- Ensuring they understand and engage in undertaking the Preceptorship Programme, completing the required learning outcomes within the identified time frames.
- Engaging in management supervision, which is considered to be separate from, but complementary to, preceptorship.
- Being assertive in ensuring that they have access to and make use of the resources, guidance and support required to complete the preceptorship programme.
- Raising any concerns about completing the preceptorship package with the preceptor and line manager.

6.7 AWP Employees

Newly registered practitioners should be supported by the entire team. All team members should be aware of those staff members undertaking Preceptorship or professional supervision in order that they can provide appropriate support and guidance.

7. Associated and Related Procedural Documents

[Capability Policy and Procedure](#)

[Induction Policy](#)

[Learning and Development Policy](#)

[Staff Supervision Policy](#)

[Community Preceptorship Programme for Newly Registered Nurses](#)

[Inpatient Preceptorship Programme for Newly Registered Nurse](#)

[Probationary Period Policy](#)

[Appraisal Policy](#)

8. Monitoring or audit

Assurance reporting will be undertaken by each discipline and presented to ESEC on an annual basis.

9. References

Department of Health (2010) Preceptorship Framework for Newly Registered Nurses, Midwives and Allied Health Professionals. London: Department of Health.

Department of Health (2009) Preceptorship Framework for Nursing. London: Department of Health.

Nursing and Midwifery Council (2008) Preceptorship Guidelines. NMC Circular 21/2006. London Nursing and Midwifery Council.

Nursing and Midwifery Council (2008) code of professional conduct: standards for conduct, performance and ethics. London Nursing and Midwifery Council.

Version History				
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