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This Policy needs to be read in conjunction with the following documents:
South Staffordshire and Shropshire Healthcare NHS Foundation Trust
Appraisal, KSF and Gateway Policy
South Staffordshire and Shropshire Healthcare NHS Foundation Trust Policy for Training, Development and Study Leave
South Staffordshire and Shropshire Healthcare NHS Foundation Trust le/01 Induction, Mandatory and Statutory Training Policy
South Staffordshire and Shropshire Healthcare NHS Foundation Trust le/02 Managing Performance – Supporting Staff Policy
South Staffordshire and Shropshire Healthcare NHS Foundation Trust le/A Induction and Mandatory Training Procedural Guidance
South Staffordshire and Shropshire Healthcare NHS Foundation Trust gh/02 Professional Registration Policy
Preceptorship framework (AHPs)
Preceptorship Trust work based learning framework (Nursing)
Preceptorship booklet (Nursing)
All other Trust approved documents related to the clinical area where the newly registered practitioner is working
Clinical Preceptorship Policy

1 Purpose and Summary

1.1 This document presents the Clinical Preceptorship Policy for South Staffordshire and Shropshire Healthcare NHS Foundation Trust (the Trust). The purpose of this document is to give a clear statement to the Chief Executive, Chief Operating Officer, Directors, Service Managers, Professional Leads, and Healthcare Professionals of the standards expected of all employees engaged in the support, management, delivery and participation in Clinical Preceptorship programmes.

1.2 The Trust recognises that moving from the role of a student into professional practice is a demanding time for many healthcare professionals, as they meet the opportunities and challenges of their first post.

1.3 This policy provides the framework of support to the newly registered practitioner that is a nurse or AHP who is entering employment in England for the first time following professional registration with the NMC or HPC. It includes those who are recently graduated students, those returning to practice, those entering a new part of the register e.g. community public health specialists and overseas-prepared practitioners who have satisfied the requirements of, and are registered with, their regulatory body.

1.4 It does not effect, override or divert from any other policies procedures or practices within the organisation that are used to ensure competency, safe and effective practice. For example, decisions regarding an employee’s readiness to take responsibility will be determined by the appropriate document or practice employed for all other employees e.g. Medicine administration is covered by the medicines code.
2 Scope

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 lifelong learning.

2.1 This policy is aimed specifically at newly qualified clinical staff joining pay Band 5 at the initial incremental point and those returning to practice, those entering a new part of the register e.g. community public health specialists and overseas-prepared practitioners who have satisfied the requirements of, and are registered with, their regulatory body.

2.2 While engaged in preceptorship newly registered health professionals are sometimes referred to as a 'preceptee'

2.3 Aspects of preceptorship support may also be offered to other newly qualified staff joining the NHS on a higher incremental point or on a different band. In these circumstances it will be the responsibility of service managers and professional leads to decide when preceptorship if required.

2.4 This clinical preceptorship policy aims to promote consistency by providing information for Service Managers and Professional Leads on common standards required in order to implement preceptorship programmes in their areas. It also sets out a broad preceptorship framework for use by new Band 5 entrants and their preceptors.

2.5 Preceptorship should be integrated with professional standards, supervision, continuing professional development (CPD), and the Knowledge and Skills Framework (KSF). The preceptorship period of support is not to be considered as an extension of a formal programme of education, but one where knowledge, skills, professional capabilities and behaviours are refined and applied in practice. Registrants will be
accountable for their practice from the point of registration, regardless of any support system.

3 Aims of Preceptorship
3.1 The overall aims of preceptorship are to:

3.1.1 Provide guidance and support during the transition from student to registered practitioner; helping them develop confidence as an autonomous practitioner
3.1.2 Facilitate application and refinement of knowledge, skills and professional capabilities and behaviours
3.1.3 Promote continuing professional development and reflective practice
3.1.4 Provide a structured framework for new Band 5 entrants to achieve the objectives set in the KSF Foundation Outline and outcomes identified in the individual’s Personal Development Plan at the end of their first 12 months as a registered practitioner.
3.1.5 Facilitate portfolio development, which includes evidence to support the achievement of their Band 5 KSF Foundation Gateway Outline.

4 The Knowledge and Skills Framework (KSF)
4.1 Department of Health (2004) The NHS Knowledge and Skills Framework (NHS KSF) and the Development Review Process sets out the knowledge and skills that need to be applied to each post.

4.2 Within the first 12 months of employment (in a Band 5 post), there will be two development reviews. The first review after six months will seek to establish whether the employee is progressing towards the objectives set in the KSF Foundation Outline and outcomes identified in the individual’s Personal Development Plan. At 12 months the second development review will focus on the KSF foundation outline for the post and the preceptee will need to meet those requirements to progress through the foundation gateway.
4.3 Movement through this foundation gateway will move the employee up on the pay-band. To clarify the foundation gateway review takes place at 12 months.

5 Roles and Responsibilities within the Clinical Preceptorship Process

5.1 The Preceptee

5.1.1 The Preceptee is responsible for familiarising themselves with the preceptorship programme, including the knowledge and skills that they are required to demonstrate prior to progressing to the next pay point AND

5.1.2 Plans and attends agreed meetings
5.1.3 Participates in preceptorship process
5.1.4 Assumes responsibility for service provision
5.1.5 Utilizes resources to meet learning needs
5.1.6 Acknowledges learning as a lifelong process
5.1.7 Maintains responsibility for documentation of preceptorship process

5.2 Preceptor

5.2.1 The role of the preceptor is to:

provide tailored, individual support during the new staff member’s first 12 months of practice to help achieve objectives set out in their KSF Foundation Gateway Outline for a Band 5 post and Personal Development Plan,

5.2.1.1 Use adult learning philosophy which respects learner and values their contribution

5.2.1.2 Act as a role model and resource within the clinical area

5.2.1.3 Provide constructive feedback to Preceptee

5.2.1.4 Facilitate the reflective and review process at 6 and 12 months
5.2.1.5 Recognise and respect cultural and individual diversity

5.2.1.6 Demonstrate good leadership qualities, and good communication and reflective practice skills.

5.2.2 The preceptor will be a qualified member of staff, with a minimum of one year’s post qualifying experience and will have sufficient knowledge of the new staff member’s area of practice.

5.2.3 The team leader / line manager will identify the appropriate person to act as preceptor based on their suitability to perform the role.

5.3 **Team Leader / Line Manager**

5.4 In conjunction with the relevant professional lead, ensure all new staff requiring preceptorship are allocated an appropriate preceptor and

5.5 Ensure that preceptors and new staff members have appropriate preceptorship documentation and are aware of their roles and responsibilities

5.6 Ensure all preceptors have received suitable training for their role

5.7 Provide support and allow the time for the preceptors and new staff members to complete the preceptorship programme

5.8 Ensure all new staff receives appropriate induction training, including statutory and mandatory training

5.9 Review and evaluate the outcomes of the preceptorship period with the preceptor and Preceptee

5.10 The budget holder will normally be responsible for signing off the reviews and authorising the pay uplift.
5.11 Will identify new entrants at the point of recruitment and ensure they are enrolled on a local preceptorship programme.

6  **Clinical Preceptorship Process**

6.1 Preceptorship will require one to one meetings to establish goals, monitor progress and review progress at completion.

6.2 The line manager should lead the review meetings and discuss the goals and standards with the staff member and Preceptor.

6.3 Managers should ensure commencement of preceptorship process and set the dates for reviews with their staff prior to employment.

6.4 Ensure their own support needs are being met through clinical supervision and/or other mode/s of structured support.

6.5 Preceptorship will formally commence within one month of employment and should normally be completed within first 12 months in post.

7  **Recording Evidence and Portfolio Development**

7.1 The Preceptee will maintain a portfolio providing evidence of achievements and the Band 5 KSF Foundation Gateway Outline. The portfolio will include a record of development activities and application of learning, such as reflective accounts, attendance at training, and relevant reading.

7.2 The portfolio will be reviewed on a regular basis within supervision and preceptorship meetings as a means of monitoring progress.

7.3 Supervision meetings should be held once a month as a minimum.

8  **Development Reviews**

8.1 Six Month Review - The focus of the six month review is on ensuring that the individual is progressing towards achieving the objectives set in their Band 5 KSF Foundation Gateway Outline which will need to be met after
twelve months in post. Towards the end of the first six months, the preceptor will meet with the preceptee to discuss progress. In keeping with guidelines for appraisal, there should be ‘no surprises’ as the preceptee should have received regular feedback on their performance.

8.2 The evidence provided within the portfolio will be reviewed against the Band 5 KSF Foundation Gateway Outline (NB: the preceptee will be expected to achieve those aspects of the KSF Foundation Outline identified in the Preceptorship framework at the six month review) and their Personal Development Plan.

8.3 If the preceptee has not provided sufficient evidence that they have achieved or are working towards achieving the six month review standards, the preceptor will record which of the standards or performance criteria that have been met, and detail a plan to support achievement of those outstanding. A monthly review meeting should be planned until the required standards have been met.

9 Twelve Month Review

9.1 After the six month review, the preceptorship process continues. The Preceptor and preceptee will agree objectives and a development plan in order to achieve the Band 5 KSF Foundation Gateway Outline. The twelve month review will be conducted in accordance with the South Staffordshire and Shropshire Healthcare NHS Foundation Trust Appraisal, KSF and Gateway Policy.

9.2 Achievement of the Band 5 KSF Foundation Gateway Outline will result in payment of an incremental uplift passing through the foundation gateway. A variation form will need to be completed and signed by the authorising manager. If the preceptee has not provided sufficient evidence that they have achieved the foundation KSF outline, the process outlined in the Trust’s Appraisal, KSF and Gateway Policy should be followed.
9.3 The normal rules for ‘Exceptional Grounds for Deferral of Pay Progression’ will apply as stated in 6.26 and 6.27 of the NHS Terms and Conditions of Service Handbook.

10 Completion of Clinical Preceptorship
10.1 The preceptorship period ends after the preceptee has successfully met the requirements of the Band 5 KSF Foundation Gateway Outline. Thereafter the member of staff will continue to engage in regular supervision and other learning in order to address learning objectives identified in their personal development plan.

11 References

