

Early careers: Preceptorship and Beyond

***Preceptorship for Newly Registered Nurses, Midwives
& accelerated preceptorship programme for use with international nurses,
returners to NMC register and registered nurses returning to clinical practice***

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Summary of document:

Best practice for supporting Newly Registered Nurses, Midwives. & accelerated preceptorship programme for use with international nurses, returners to NMC register and registered nurses returning to clinical practice.

Scope:

Registered nurses and midwives

To be read in conjunction with:

- [Chief Nursing Officer for Wales: priorities 2022 to 2024 | GOV.WALES](#) (opens in a new tab)
- [The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates - The Nursing and Midwifery Council \(nmc.org.uk\)](#) (opens in a new tab)
- [Principles of preceptorship - The Nursing and Midwifery Council \(nmc.org.uk\)](#) (opens in a new tab)
- [Spotlight on Nursing and Midwifery, July 2023](#) (opens in a new tab)
- Hywel Dda University Health Board (HDUHB) Clinical Supervision guidance document

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Include links to [Patient Information Library](#)

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Glossary of terms

NRN - Newly Registered Nurse

NRM - Newly Registered Midwife

ELS - Education Liaison Service

IEN - International Educated Nurses

SCPHN - Specialist Community Public Health Nurse

SPQ - Specialist Practitioner Qualification

RtP - Return to Practice

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Introduction

We will support you to be the best nurse/midwife that you can be. From day one, you will benefit from strong nursing leadership, experienced role models and a structured support network to maximise your wellbeing and professional development.

The Education liaison Service is responsible officer for preceptorship and the Executive Director of Nursing, Quality & patient Experience mandates preceptorship across the organisation.

What is preceptorship?

The aim of preceptorship is to welcome and integrate newly registered professionals into their new team and place of work. It helps these professionals translate their knowledge into everyday practice, grow in confidence and understand how to apply the Code in their day-to-day work (NMC 2023). Preceptorship is a framework that helps newly registered professionals have the best possible start as a registered professional in the UK.

*Preceptorship is **not** designed to replace appraisals, be a substitute for a formal induction and mandatory training or be a way to re-test or repeat any knowledge and skills that a professional needs to register on the NMC register.*

What does it involve?

- An induction programme including statutory & mandatory training.
- Support & supervision from a Preceptor to enhance clinical skills, improve patient care & experience.
- Completion of preceptorship portfolio to support NMC revalidation.
- Opportunities to complete essential training to contribute to progression through to your next pay increment and to prepare for future career progression.
- Links to organisational policy & procedures.
- Access to external regulatory requirements.

What are the benefits of preceptorship?

Preceptorship has a variety of benefits for employers and preceptees, among others.

Benefits for nurses, midwives:

- Preceptorship offers the structured support needed to transition their knowledge into everyday practice successfully.
- It provides a foundation for a lifelong journey of reflection and the ability to self-identify continuing professional development needs.
- A positive preceptorship experience is reported to result in newly registered nurse and midwives having increased confidence and sense of belonging, feeling valued by their employer.

- An opportunity to grow the professionals that are coming behind you in practice, looking after students in practice and imparting your knowledge and experience to grow the profession.

Benefits for employers:

- Effective preceptorship outcomes are linked to improved recruitment and retention. Attracting and retaining skilled nurses and midwives is important for delivering better, safe, and effective care.

A period of preceptorship immerses the newly registered nurse, midwife into their professional role and into the ways of working and culture of their new workplace. The aim of preceptorship is to ensure newly registered nurses feel valued and inspired to be competent and confident nurses who provide excellent, safe nursing care ([Gillespie, 2017 \(opens in a new tab\)](#)). The NMC they state: “the early experiences of nursing and midwifery professionals where support is lacking, can have subsequent, negative consequences. Lack of support can affect their confidence, their sense of being able to practise safely and whether they intend to stay in their profession” ([Spotlight on Nursing and Midwifery, July 2023 \(opens in a new tab\)](#)). Making the transition from student nurse/midwife, internationally educated nurses (IEN) or Return to Practice (RtP) staff to NMC registrant can be challenging, and good quality preceptorship programme can help new professionals to feel more confident in their ability to provide good quality care.

This policy applies to and recognises the value and expertise of *international nurses, returners to NMC register and registered nurses returning to clinical practice*. Hywel Dda University Health Board (HDUHB) recognise the range of challenges centred around IENs adjusting to nursing / midwifery practice in the UK.

The aim of this policy is to recognise the different stages and expertise of nurses and midwives applying the principals of Benner’s Novice to Expert Theory which presents a systematic way of understanding how a learner whether a student, new or seasoned nurse/midwife develops skills and understanding of a practice situation/event over time. By applying the principles 'novice to expert' model of clinical competence to leadership, all nurses, and midwives to which this policy refers are encouraged to consider the skills involved in moving from novice to expert alongside identifying the strengths and skills they wish to develop. Nurses and Midwives are encouraged to reflect their own values and beliefs, and the values and beliefs of those they lead and serve.

As part of a wider Career-spanning approach, which encompasses Preceptorship underpinned by Clinical Supervision, the HDUHB “Early careers - Preceptorship & Beyond” promotes individual growth and improved patient care, provides opportunities for registered nurses, midwives and SPQ & SCPHN from across the HDUHB in the early stages of their career to build a network for support, develop skills and knowledge and share experiences and support the registrant to meet their professional obligations under the [NMC \(opens in a new tab\)](#) code.

The Chief Nursing Officer (CNO) Wales ambition is to close the vacancy gap and to attract, recruit and retain a competent, motivated, skilled nursing and midwifery workforce who have the capacity and

attributes to assume their roles with confidence in meeting the needs of the population, whilst working to their full potential. “Early careers Preceptorship & Beyond” Preceptorship for Newly Registered Nurses, Midwives & accelerated preceptorship programme for use with international nurses, returners to NMC register and registered nurses returning to clinical practice is a mandatory offer and mandatory uptake of employment in HDUHB. *It supports the CNO Wales mandate for NHS Wales to offer and deliver an all-Wales preceptorship programme, for a minimum of 18 months.*

Core elements of a programme

The core elements of the programme include a preceptorship policy that defines the roles, supernumerary period, and protected time, and is standardised across the HDUHB. A formal structured programme of learning for the preceptee, identification of development for the preceptor, and the role of the preceptorship lead, monitoring and evaluation are aligned with NMC principles of preceptorship. The framework includes a core set of standards that constitute a minimum requirement for preceptorship programmes and are aimed at all settings and all fields of nursing and midwifery and has thus been established as a realistic set of standards.

Intended recipients

The NMC states “that all newly registered nursing associates, nurses, and midwives receive preceptorship in their first-year post-registration”. This HDUHB policy applies to Newly registered nurses and midwives and includes:

- all nurses and midwives who are “new registrants” admitted to the NMC register after completing a pre-registration nurse/midwifery training programme in the UK for the first time,
- all nurses and midwives completed a Return to Practice programme.
- all nurses and midwives have attained NMC registration as an IEN.
- all nurses and midwives have subsequently entered a new part of the register’.
- all newly registered nurses and midwives, as defined above, who are employed by HDUHB in a nursing/midwifery capacity, including employment through the nursing/midwifery bank.

NEWLY REGISTERED NURSES & MIDWIVES (PRECEPTees)

- **AWAITING PIN (Personal Identity Number)**

Any Newly Registered Nurse (NRN) Newly Registered Midwife (NRM) awaiting their PIN, must not practice as an accountable, registered practitioner, but under the direct supervision of a **registered nurse/midwife** (known as a preceptor). Accountability in this situation is taken by the preceptor for the preceptees practice until their PIN is confirmed. Preceptees must have all documentation entries they have made countersigned by a preceptor during this time.

- The preceptee awaiting their PIN will work as an Assistant Practitioner at Band 4 level.

- **REGISTERED**

The preceptee who has received their PIN from the NMC must be supported by a named preceptor for the duration of the preceptorship period. The preceptee is fully accountable (NMC Code 2018) for their own practice and must be fully aware of their competency levels and areas for personal development from documented discussions with their preceptor and from completion of their professional portfolio.

- Preceptees with a PIN do not need to work under the direct supervision of another registered practitioner but must be supported and have access to a more senior nurse for their preceptorship/novice period.

Length of programme

“Early careers Preceptorship & Beyond” Preceptorship for Newly Registered Nurses, Midwives & accelerated preceptorship programme for use with international nurses, returners to NMC register and registered nurses returning to clinical practice is primarily focused on the first 3 years post registration with NMC.

Year 1 TRANSITION & TRANSFORMATION

Education Liaison Service (ELS) core & Transitional Preceptorship Programme has been specifically designed to meet the development needs of new/returning NMC registrants as defined above in section 6 and is delivered through a blended learning approach. The preceptorship consists of 14 days in total, this is separated into front loading clinical skills days, followed by transitional days with an emphasis on professionalism. Attendance at all days is mandatory and registrants need to have attended all to successfully complete the preceptorship programme and provide evidence to their line manager to support progression through the pay gateway. Recognising service specific needs, the core frontloading skills days are organised separately for adult nurses, adult community nurses, paediatric nurses, mental health and learning disability nurses. The transitional days are inclusive of all areas of nursing and midwifery practice.

All registrants are required to complete a PADR with their direct line manager before the end of Year 1. The HDUHB PADR documentation of the discussion is used as a basis to focus on and identify the nurse’s career aspirations, areas for development and interests.

The “Preceptorship and Beyond” framework is additional support for clinicians to develop in their second- & third-year post-registration. It is designed to provide support, guidance, encouragement and signposting following Year 1 preceptorship. It offers a range of structured opportunities for learning and development to help nurses shape their early career.

Year 2 SUPERVISORY

Focuses on refining appropriate specialist clinical skills through in-house training sessions alongside a streamlined set of management master classes and leadership training to refine staff’s professional autonomy.

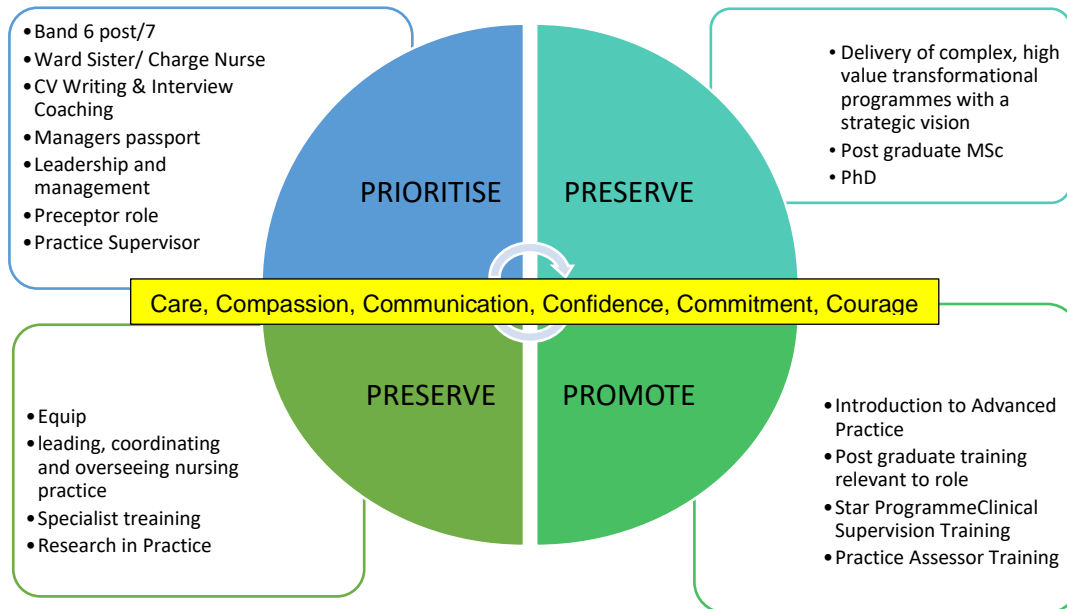
Year 3 AUTONOMY:

As for Year 2 with a continued focus **People Management**.

As well as attending all mandated sessions the framework will facilitate the provision of individualised pathways for nurses/midwives with a ‘pick and mix’ approach to developing their careers.

Career Pathways will identify a choice of pathways for NRN/NRM s which are built around the four pillars of nursing practice – clinical, education, leadership, and research. This offers NRN/NRMs flexible opportunities to develop individualised career pathways, where required.

Figure One provides an illustrative model of the Framework based on NMC Code 2018:



Supernumerary period

All NRN/NRMs must have a minimum of one month supernumerary period from when they begin working as a registrant - this is pro rata . Some areas will offer longer periods of supernumerary status (for example, intensive care units and other specialist areas). This should be in addition to induction requirements, however individual needs should be recognised as required by the NMC principles of preceptorship (5.2) . [nmc-principles-for-preceptorship-a5.pdf](#) (opens in a new tab).

The gold standard will include additional protected time for the preceptee for development and meetings with their preceptor. A core standard of eight hours' protected time is also recommended for each preceptor per year to accommodate their development, meetings, and peer support needs.

Meeting requirements

To facilitate the preceptee's socialisation and integration into their new work area, the first meeting with the preceptor should take place within their first two weeks of joining the HDUHB as a NRN/NRM of receiving their PIN or earlier where feasible. In the first year, bi-monthly meetings should be recorded in the preceptee's professional portfolio with an interim meeting halfway through the preceptorship period and a final sign-off meeting towards the end of the preceptorship period. A gold standard

includes that these meetings should be around an hour long and should include protected time for both preceptee and preceptor.

Roles

The following role descriptors are required:

Preceptorship lead

The Education Liaison Service (ELS) are the nominated preceptorship leads.

The ELS act as a central point of contact within the HDUHB, and are responsible for the co-ordination, delivery, facilitation, evaluation, and monitoring of the preceptorship programme. They are responsible for the development and review of both programme and policy in collaboration with operational and professional practice development teams.

In addition, the role includes the promotion of the value and benefits of preceptorship within HDUHB. The preceptorship lead reports to the Executive Director of Nursing, Quality & Patient Experience via Senior Nursing and Midwifery team forum.

Preceptor

Any registered nurse / midwife of an equivalent or senior level to the preceptee, and within the same discipline (i.e., nursing/midwifery), may be a preceptor. They should have a minimum of 12 months' experience post-registration, with experience of working within the setting, and they should attend initial training or development. Each new registrant will have access to a preceptor within their own discipline. They are required to:

- Act as professional role models
- Receive ongoing support and actively engage in professional development.
- Be supportive and constructive in their approach to the preceptee.
- Share effective practice and learn from others.
- Seek and receive feedback on the quality of all aspects of their preceptorship role.

Preceptee

- Be an accountable professional and take a proactive approach & accountability and responsibility for their own learning.
- Practice in accordance with the NMC Code: *Professional standards of practice and behaviour for nurses and midwives* (NMC 2018)
- Attend 100% of the preceptorship programme
- Identify timely to their manager and ELN if a preceptor is not available.
- Identify individual specific learning needs and develop support plans for addressing these needs with the preceptor.
- Utilise and prioritise their protected learning time to successfully complete their preceptorship.
- Be aware of the relevant policies and procedures and a clear understanding of the expected standards, competencies and objectives required by their employer.
- Complete role-specific workplace induction as appropriate to clinical areas.

The preceptee has the responsibility to attend each day of the programme. If the preceptee misses any days of the programme, they are able to arrange the missed sessions with another preceptorship group running within the HDUHB.

Where a preceptee does not attend the programme or leaves any day early the ELS will inform the new registrant's line manager

Preceptorship champion

The role of the preceptorship champion is determined by the clinical manager (the roles and expectations are outlined in the Professional portfolio given to all NQN/NRN pages 29-30) and will promote the value and benefit of preceptorship within the HDUHB.

Board members, Heads of Service, and Operational Managers

Executive board members, Assistant Directors, Heads of Service, senior and operational managers and staff at all levels will assume corporate responsibility for the implementation of the Early careers: Preceptorship and Beyond: Preceptorship for [Newly Registered](#) (opens in a new tab) Nurses, Midwives.

& accelerated preceptorship programme for use with international nurses, returners to NMC register and registered nurses returning to clinical practice

Compliance

The ELS will hold a central register of attendance. Nonattendance of preceptees will be brought to the attention of the preceptees line manager.

Evaluation

To ensure the programme meets as many needs as possible feedback will be actively sought from preceptees, preceptors and wider operational teams. Each programme will be evaluated by the ELS and adjustments made to take feedback into account.

Standardised documentation

Completion of the HDUHB standardised Professional Portfolio is required. This is available via the ELS. Individual NRN/NRM can add additional information according to their needs.

NMC revalidation

As part of the Early careers: Preceptorship and Beyond the ELS will review registrant's professional portfolio in preparation for their NMC revalidation with their operational line manager.

Clinical Supervision

Clinical Supervision underpins the Early Careers - Preceptorship and Beyond.

Clinical supervision is practiced across nursing, midwifery, and other healthcare professions. Clinical supervision is “a formal process of professional support, reflection and learning that contributes to individual development” (Butterworth 2022 p20). By underpinning the programme with formal clinical supervision staff will:

- Feel supported.
- Experience less stress, burnout, and sickness absence.
- Develop personally and professionally.
- Be less inclined to leave the profession.
- See increased confidence levels.
- Feel less isolated.

CNO Wales 2023 has mandated the implementation of clinical supervision principles for the Welsh nursing workforce. Refer to HDUHB Clinical Supervision Guidance Document

References

- Chief Nursing Officer for Wales: priorities 2022 to 2024 | GOV.WALES (opens in a new tab)
- The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates - The Nursing and Midwifery Council (nmc.org.uk) (opens in a new tab)
- The Capital Nurse Preceptorship Framework for London | Health Education England (hee.nhs.uk) (opens in a new tab)
- NHS England » National preceptorship framework for nursing (opens in a new tab)
- Principles of preceptorship - The Nursing and Midwifery Council (nmc.org.uk) (opens in a new tab)
- once-for-wales-preceptorship-portfolio-final-22-1.pdf (rcm.org.uk) (opens in a new tab)
- Register as a nurse or midwife if you trained outside the UK - The Nursing and Midwifery Council (nmc.org.uk) (opens in a new tab)
- More support needed for international nurses and midwives - The Nursing and Midwifery Council (nmc.org.uk) (opens in a new tab)
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- Spotlight on Nursing and Midwifery, July 2023 (opens in a new tab)