



**Cornwall Primary
Care Training Hub**

Cornwall Primary Care Training Hub

General Practice Interprofessional Preceptorship Policy

Standard Policy

Version 2 – September 2024

Document information

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Scope	
Document owner	Emma Borders, Preceptorship Lead
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Ratified/approved	JH & PJ, LB

This policy should be read in conjunction with preceptees employers other organisational human resource policies, which include:

- Equality and diversity policy
- Disciplinary policy
- Appraisal and supervision policy
- Probation period guidance
- Staff development policy
- CPD policy

Definitions

Preceptorship	The purpose of preceptorship is to provide support, guidance and development for all newly registered practitioners and those new to general practice to build confidence and further develop competence as they transition to autonomous professional.
Preceptorship period	Designated 12 month period of support and guidance for practitioner new to general practice.
Preceptor	Person providing support and guidance to the preceptee. A qualified practitioner with a minimum of 12 months' experience and working in the same work area as the preceptee.

Preceptee	The practitioner new to general practice receiving support and guidance from the preceptor.
Preceptorship lead	Central point of contact and lead for preceptorship within organisation or integrated care system (ICS).

Introduction

This preceptorship policy is intended for all practitioners new to primary care, preceptors, preceptorship leads, line managers, practice educators, clinical skills coaches and all those involved directly or indirectly in the preceptorship of practitioners new to general practice

Preceptorship is a programme of structured support for newly qualified practitioners or practitioners new to general practice as they transition into their new role. This policy is based on the guidance and standards established by the NHSEI National Preceptorship Framework (2022), Health Education England preceptorship standards (2015), the Department of Health guidance (2010), Capital nurse preceptorship framework (2017 and the Preceptorship Framework for Newly Registered Nurses, Midwives and Allied Health Professionals, DH (2010). It complies with the guidance set out by the Nursing and Midwifery Councils principles for preceptorship (NMC, 2020).

The Cornwall training hub recommend this preceptorship programme is offered to all practices in Cornwall allowing all practitioners new to general practice access to a structured preceptorship programme.

Purpose of preceptorship

The purpose of preceptorship is to provide support, guidance and development for all practitioners new to general practice to build confidence and competence as they transition into their new role.

Preceptorship is provided by trained preceptors for each preceptee for a minimum period of 12months.

Scope

The preceptorship policy provides a framework and set of common standards and support (cultural, pastoral and wellbeing), which apply to all practitioners new to general practice.

The preceptorship period for general practice organisations mandates a preceptorship period of 12 months.

This preceptorship policy is intended as a resource for all those involved in the preceptorship of practitioners new to general practice within their organisation supported by the Cornwall training hub.

Preceptorship Program Structure

Cornwall Training Hub has developed and oversees the implementation of the Interprofessional Primary Care Preceptorship Policy. This policy provides guidance on preceptorship and a clear, structured framework that can be utilised in general practice settings across Cornwall. The interprofessional preceptorship offer is available to all general practice organisations in Cornwall. In addition, the Cornwall Training Hub offers comprehensive support for the preceptee, preceptor, and employing organisation.

Preceptees will have full access to the **Cornwall Training Hub Programme**, which can be viewed in the prospectus available on our website via the [Primary Care Education Prospectus](#) link. At the outset of the preceptorship, each preceptee will be assigned a clinical skills coach (aka preceptorship champion) who will guide them towards relevant support and development opportunities tailored to their profession. This may include, but is not limited to, access to the Passport to Primary Care, various training programmes, the GPN Fundamentals course at the University of Plymouth (for nurses only), clinical skills coaching, communities of practice and clinical supervision.

Clinical skills coaching is an initiative by the Cornwall Training Hub designed to support healthcare workers new to primary care or those looking to develop new skills. Highly experienced clinical skills coaches work with preceptees to embed learning, build clinical skills, and enhance confidence and competence through 1:1 coaching sessions. These coaches act as preceptorship champions and serve as a vital link between the preceptee, preceptor, employing organisation, and the Training Hub. In addition to providing ongoing coaching, they can assist with initial training planning, goal setting, and identifying targeted training opportunities tailored to the preceptee's needs. They will also signpost relevant educational programmes, wellbeing initiatives, and peer support forums.

As part of the preceptorship, preceptees are required to attend the earliest available course dates for the '**Passport to Primary Care**', a multi-professional introductory training programme. Course content covers key areas such as the commissioning, delivery, funding, and regulation of primary care services; medicine management; scope of practice; lone working; safeguarding; record keeping; confidentiality; consent; and personalised care, all through a general practice perspective. Additional information on training, competency updates, and support opportunities is provided by the Cornwall Training Hub.

Nursing preceptees are strongly encouraged to enrol in the University of Plymouth's accredited 'Fundamentals of General Practice Nursing' programme. Funding for this training is available through the Cornwall Training Hub, and

preceptees should discuss this with the preceptorship lead prior to starting. The Graduate and Postgraduate Certificate in ['Fundamentals of General Practice Nursing'](#) equips healthcare practitioners with the skills and knowledge necessary to deliver person-centred care in a general practice setting. The programme comprises three modules: Transition into General Practice, Embedding in General Practice, and Advancing within General Practice.

- **Preceptorship + Offer for General Practice Nurses:** Practices employing new general practice nurses can benefit from the enhanced 'Preceptorship +' offer. This includes a commissioned place on the 'Fundamentals of General Practice Nursing' programme. Additionally, employing practices may access an educational support fund (limited availability) of up to £2,000 to support the nurse's training.

Clinical supervision is a fundamental component of the preceptorship and will be facilitated by the Cornwall Training Hub. Preceptees will join a closed clinical supervision group with peers from the same or similar professional backgrounds. Sessions will be conducted virtually every 4–6 weeks by experienced facilitators from the Cornwall Training Hub

Process

Each new to general practice practitioner is eligible to participate in the preceptorship programme and the line manager at their employing organisation is responsible for ensuring that the appropriate arrangements are made:

- The line manager is responsible for enrolling the new starter on the appropriate induction, mandatory and statutory training, and the preceptorship development programme. The line manager also advises the preceptorship lead of each practitioners new to general practice start date and name of preceptor.
- Each preceptee will be allocated a nominated preceptor, within the first week of joining the organisation, by their line manager.
- The preceptee will meet with their allocated preceptor within the first week of joining, with the purpose of agreeing a charter and developing learning objectives for the preceptorship period.
- Meetings between the preceptee and preceptor should take place bi-monthly as a minimum requirement. These should be documented using the standard templates.

- The line manager will support attendance and participation in the Cornwall training hubs preceptorship education programme.
- By the end of the preceptorship period, the preceptee will have completed their programme of learning, have developed confidence and competence, and achieved final sign-off as an autonomous practitioner.

- New starter accepts offer and start date agreed.
- Employing organisations line manager allocates preceptor.
- Line manager enrolls NRP on development programme.
- Line manager notifies preceptorship lead of new starter and expected date of joining.



- New starter joins and has minimum supernumerary period of **2weeks**.
- New to practice practitioner completes induction, mandatory and statutory training.
- Preceptor and preceptee meet during **first week**.
- Preceptor, preceptee and clinical skills coach meet.
- Training needs analysis / SLOT completed (by either Preceptor or Clinical skills coach/preceptor ambassador).
- Individual learning plan with objectives established for preceptorship.
- Agree charter between preceptor and preceptee.



- Preceptee attends all required training and development (assistance with this can be provided by Clinical skills coach/preceptor ambassador)
- including but not limited to passport to primary care, GPN fundamentals UoP (nurses only), training, clinical skills coaching and clinical supervision.

- Preceptee and clinical skills coach meet on a routine basis for coaching sessions to develop clinical skills.
- Preceptee maintains portfolio and completes reflections.
- Preceptee receives clinical supervision.
- Preceptee and preceptor meet **bi-monthly**.



End of preceptorship:

- Preceptee and preceptor meet for final sign-off.
- Clinical skills coach and preceptee meet for final coaching session.
- Preceptorship lead and line manager advised.
- Evaluation of preceptorship programme completed.

Role of the preceptor

The preceptor should be a registered professional with a minimum of 12 months' experience and working in the same profession as the preceptee (nurses may act as preceptors for nursing associate preceptees). They should have a minimum of 12 months' working in the work area or setting and have completed their preceptor development.

The preceptor development includes completion of the e-learning for health preceptor development programme - [Multi-Professional Preceptor e-Compendium programme](#), and a face to face meeting with a preceptorship champion to explain the preceptorship offer and answer any questions.

The preceptor should participate in preceptorship forums and support networks to maintain up-to-date knowledge, and will receive 12 hours of protected time for preceptorship duties over the 12 months preceptorship period.

The role of the preceptor is to provide guidance to the preceptee by facilitating the transition into their new role in general practice. by gaining experience and applying learning in a clinical setting during the preceptorship period. A minimum of 12 hours' protected time is allocated to each preceptor (inclusive of training) to carry out preceptorship responsibilities:

- Plan, schedule, conduct and document regular meetings with the preceptee
- Assess learning needs and develop an individual learning plan with the preceptee (this can alternatively be done with the clinical skills coach).
- Act as a role model for professional practice and socialization.
- Possess a good understanding of the preceptor framework requirements and communicate these to the preceptee clearly and concisely
- Act as a professional friend, peer and advocate

- Participate in preceptorship forums, clinical supervision and support networks to maintain up-to-date knowledge.

Full details can be found in Appendix Two 'Role Descriptors'

Role of the preceptee

The preceptee is responsible for their development and commitment to their preceptorship programme. Protected time is given for all responsibilities to:

- Attend all organised training and participate in all learning opportunities
- Prepare for and attend meetings with their preceptor at the agreed times
- Work in collaboration with their preceptor to identify, plan and achieve their learning objectives, which includes developing an individual learning plan and completing all documentation within required timeframes (this can alternatively be done with the clinical skills coach).
- Organize clinical skills coaching sessions and complete relevant documentation pre and post these sessions, and provide feedback on clinical skills coaching sessions.
- Escalate concerns, reflecting on own practice, and taking ownership of own professional development.

Full details can be found in Appendix Two 'Role Descriptors'

Role of the preceptorship lead

The preceptorship lead is responsible for leading the programme within the Cornwall Primary Care Training hub and overseeing the preceptorship programme. The responsibilities of the preceptorship lead are to:

- Maintain a register of preceptors and ensure there are sufficient trained preceptors
- Provide development and support for preceptors
- Allocate or delegate the responsibility for identifying preceptors in time for the preceptee's start date
- Monitor and track completion rates for all preceptees
- Measure the effectiveness and impact of preceptorship programmes on retention and staff engagement (with the support of dedicated administrators)
- Act as point of escalation to maintain the relationship between preceptor and preceptee.

Full details can be found in Appendix Two 'Role Descriptors'

Role of the Clinical Skills Coach (aka preceptorship champion)

The role of the preceptorship champion may be taken up by any Cornwall training hub Clinical skills coach (See clinical skills coach SOP) and is to promote the value and benefit of preceptorship for nursing and support implementation within Cornwall and throughout Primary Care.

- Offer 1:1 clinical skill coaching to the preceptee as an additional support to build competence and confidence.
- Raise the profile of the preceptorship programme, the value and benefits within own clinical area or organisation.
- Engage with the organisation's preceptorship team to continue the evolution of the preceptorship work internally and across region as appropriate.
- To liaise with other preceptorship champions and facilitate development and delivery of preceptorship communities of practice.
- Provide feedback to organisation's preceptorship team when improvement and education is required in areas, or where newly qualified staff require additional input.

Role of the line manager

The role of the line manager is to ensure the implementation of the preceptorship policy within the employing organisation. The responsibilities are:

- To allocate a preceptor to each new to practice practitioner on their first day of starting
- To ensure completion of all induction, mandatory and statutory training for the preceptee
- To provide a minimum supernumerary period of 2 weeks (75 hours) for the preceptee
- To ensure the preceptee and preceptor are given protected time for meetings at the outset of the programme and bimonthly thereafter.
- To work collaboratively with preceptorship lead to ensure there are sufficient trained preceptors within work area to provide support and evaluate the impact of preceptorship.
- To complete any relevant paper work to facilitate clinical skills coaching sessions (i.e MOU)

Concerns

Concerns regarding the preceptor or preceptee performance must be addressed as soon as possible with the line manager. Where appropriate, escalation processes may be followed as per the employing organisations policies.

A recommended escalation process can be found in Appendix Three 'Escalation Process'

Evaluation

Evaluation of the preceptorship programme should be completed annually by the preceptorship lead. This will include:

- Evaluation of preceptorship experience from preceptee feedback questionnaires at end point
- Feedback from preceptors
- Feedback from line managers / practice educators / preceptorship champions
- Course evaluations
- Analysis of retention statistics at 12 months and 24 months post-registration / start date with organisation.

Compliance

The preceptorship programme and policy should comply with:

- National Preceptorship Framework (2022)
- NMC Principles for Preceptorship (2020)
- HEE Preceptorship Standards (2015)
- Preceptorship Framework for Newly Registered Nurses, Midwives and Allied Health Professionals, DH (2010).

Appendices

The following documents form part of the preceptorship policy:

1. National Preceptorship Framework Model
2. Role descriptors for preceptor, preceptee, preceptorship lead and preceptorship champion
3. Escalation process
4. Glossary of terms and abbreviations
5. Document control.

Appendix One – National Preceptorship Model for Nursing v1.6 – June 2022

The following National Preceptorship Model is based in part on the National Preceptorship Framework for Nursing (June 2022), which provides full details.

The purpose of preceptorship is to provide support, guidance and development for all newly registered practitioners to build confidence and develop further competence as they transition from student to autonomous professional. Preceptorship may also be provided for professionals transitioning from one role or setting to another.

The Cornwall primary care training hubs policy aims to meet the gold standard of preceptorships as per the national preceptorship framework

Criteria	Core standard	Gold standard
Intended recipients	All newly registered nurses and nursing associates	All newly registered practitioners
Length of preceptorship programme*	Minimum of six months on joining the organisation or receiving PIN	12 months on joining the organisation or receiving PIN
Supernumerary period	Minimum of two weeks' supernumerary for preceptee (or equivalent to 75 hours)	Additional protected time throughout the programme for preceptor and preceptee included in preceptorship policy for organisation
Meeting requirements (preceptor and preceptee)	Minimum of three meetings: <ul style="list-style-type: none"> - Within first two weeks - Middle of programme - Completion of preceptorship programme 	As a minimum, every two months including: <ul style="list-style-type: none"> - Within first week - Middle of programme - Completion of preceptorship programme
Roles (with expectations)	<ul style="list-style-type: none"> - Preceptor (protected time of eight hours per year) - Preceptee 	<ul style="list-style-type: none"> - Preceptor (protected time of 12 hours per year) - Preceptorship lead - Preceptorship champion / ambassador / link
Preceptor	<ul style="list-style-type: none"> - Equivalent level or senior to preceptee - Minimum 12 months' experience post-registration - Attending initial training 	<ul style="list-style-type: none"> - Equivalent level or senior to preceptee - Minimum 12 months' experience post-registration - Role expectations - Minimum 12 months' experience in setting

	<ul style="list-style-type: none"> - Refer to role descriptor for detail 	<ul style="list-style-type: none"> - No more than one preceptor to two preceptees - Initial training - Ongoing support and training
Preceptorship lead	<ul style="list-style-type: none"> - Central point of contact within organisation / ICS - Responsible for programme co-ordination - Monitoring and evaluating preceptorship - Development and review of programme and policy 	<p>Plus:</p> <ul style="list-style-type: none"> - Development programme for preceptors - Support for preceptors - Develop and deliver support network for preceptors - Maintain register of preceptors - Promotion of value and benefits of preceptorship within own organisation - Develop and support network of preceptorship champions
Core elements	<ul style="list-style-type: none"> - Preceptorship policy - Formal, structured programme of learning - Standard documentation across organisation - Role descriptions - Protected time - Monitoring and evaluation - Development of preceptors / preceptor training 	<ul style="list-style-type: none"> - Senior responsible officer (SRO) at board level - Protected time for preceptors (minimum 12 hours) - Meeting templates - Development and support for preceptors - Preceptorship mandated across organisation - Audit trails to demonstrate compliance, evaluation and feedback
Indicative content of development programme	<ul style="list-style-type: none"> - Facilitated learning / study days (flexible dependent on work area and individual requirements) - Preceptee individual learning and development plans - Wellbeing initiatives 	<p>May include:</p> <ul style="list-style-type: none"> - Action learning - Peer support forums for preceptor and preceptee - Coaching - Mentoring - PNA / restorative supervision

	<ul style="list-style-type: none"> - Reflection - Pastoral care and support - Clinical supervision 	
Compliance	<ul style="list-style-type: none"> - National Preceptorship Framework (2022) - NMC Principles for Preceptorship (2020) - HEE Preceptorship Standards (2015) - Preceptorship Framework for Newly Registered Nurses, Midwives and Allied Health Professionals, DH (2010) 	
Evaluation	<ul style="list-style-type: none"> - Course evaluations - Retention statistics (12 and 24 months post-registration) - Feedback questionnaire on preceptorship experience at end point - Annual review of the programme - Feedback mechanism for preceptors to support them - Feedback from preceptor and preceptees 	<ul style="list-style-type: none"> - Session feedback - Feedback questionnaire on preceptorship experience at mid point and end point - Preceptee involvement in design and development of programme - Stakeholder feedback

Appendix Two – Role Descriptors

Preceptor role descriptor

To provide guidance to the preceptee by facilitating the transition from student to registered practitioner. This should be achieved by gaining experience and applying learning in a clinical setting during the preceptorship period. The role of preceptor should be provided with protected time as set out in the preceptorship policy.

It is the responsibility of the preceptor to:

- Possess a good understanding of the preceptor framework requirements and communicate these to the preceptee clearly and concisely
- Understand the scope and boundaries of the roles of the preceptee
- Act as a professional friend, peer and advocate
- Act as a role model for professional practice and socialisation to the profession
- Ensure all induction has been completed and check that the preceptee is fully aware of local ways of working and appropriate policies
- Facilitate introductions for the newly registered practitioner to colleagues, multi-disciplinary team, peers and others (internal and external to the organisation, as appropriate)
- Promote networking and development of effective working relationships
- Agree learning needs with preceptee, and develop a learning plan with achievable goals
- Carry out regular and confidential review with the newly registered practitioner
- Use coaching and mentoring skills to enable the newly registered practitioner to develop clinically and professionally, and to develop confidence
- Facilitate a supportive and inclusive learning environment by signposting resources and actively planning learning opportunities for clinical, professional and personal growth of the newly registered practitioner
- Give timely and appropriate feedback to the newly registered practitioner on a regular basis
- Liaise with the line manager to monitor progress and address areas of poor performance or areas requiring further development through objective setting and regular review, keeping preceptorship lead involved.

Preceptorship lead role descriptor

An appointed preceptorship lead should be responsible for overseeing the preceptorship programme at each organisation or ICS. The role may be combined with another role, depending on the organisation and the number of newly registered practitioners.

It is the responsibility of the preceptorship lead to:

- Coordinate the identification of preceptors, know who they are and provide the appropriate level of preparation and support
- Identify all NRNs/NRNAs requiring preceptorship and others for whom preceptorship is deemed beneficial
- Allocate or delegate the responsibility for identifying preceptors in time for the preceptee's start date, which may include involvement in the recruitment process

- Monitor and track completion rates for all preceptees
- Perform regular checks that the preceptor/preceptee relationship is working satisfactorily
- Identify any development or support needs of preceptors
- Measure the effectiveness and impact of preceptorship programmes on retention and staff engagement, and to evaluate programmes after each cohort
- Ensure there are sufficient trained preceptors
- Support and prioritise staff retention
- Act as the point of escalation to maintain the relationship between preceptor and preceptee
- Use coaching skills and techniques to facilitate as appropriate
- Develop the Preceptorship Champion Network if required
- Liaise with other local and national preceptorship leads
- Ensure preceptorship operates within the DH framework (2010), HEE Standards (2017), NMC Principles of Preceptorship (2020) and National Preceptorship Framework (2022).

Preceptorship champion role descriptor

The role of the preceptorship champion is to promote the value of preceptorship and support implementation within their area, organisation and/or ICS. The role should be held by an experienced preceptor who is passionate about preceptorship.

It is the responsibility of the preceptorship champion to:

- Act as a clinical skills coach for the preceptee.
- Raise the profile, the value and the benefits of the preceptorship programme within their own clinical area or organisation
- Act as a role model for best practice in support of newly qualified staff or act as a role model for best practice undertaking the preceptorship programme (this will depend who the champion is)
- Engage with the organisation's preceptorship team to continue the evolution of preceptorship work internally and across the region as appropriate
- Liaise with other preceptorship champions and facilitate development and delivery of preceptorship communities of practice
- Feedback to their organisation's preceptorship team when improvement and education are required in areas, or where newly qualified staff require additional input
- Share knowledge and skills with others to help them develop their thinking and practice.

Preceptee role descriptor

The preceptee is responsible for their own development and commitment to their preceptorship programme.

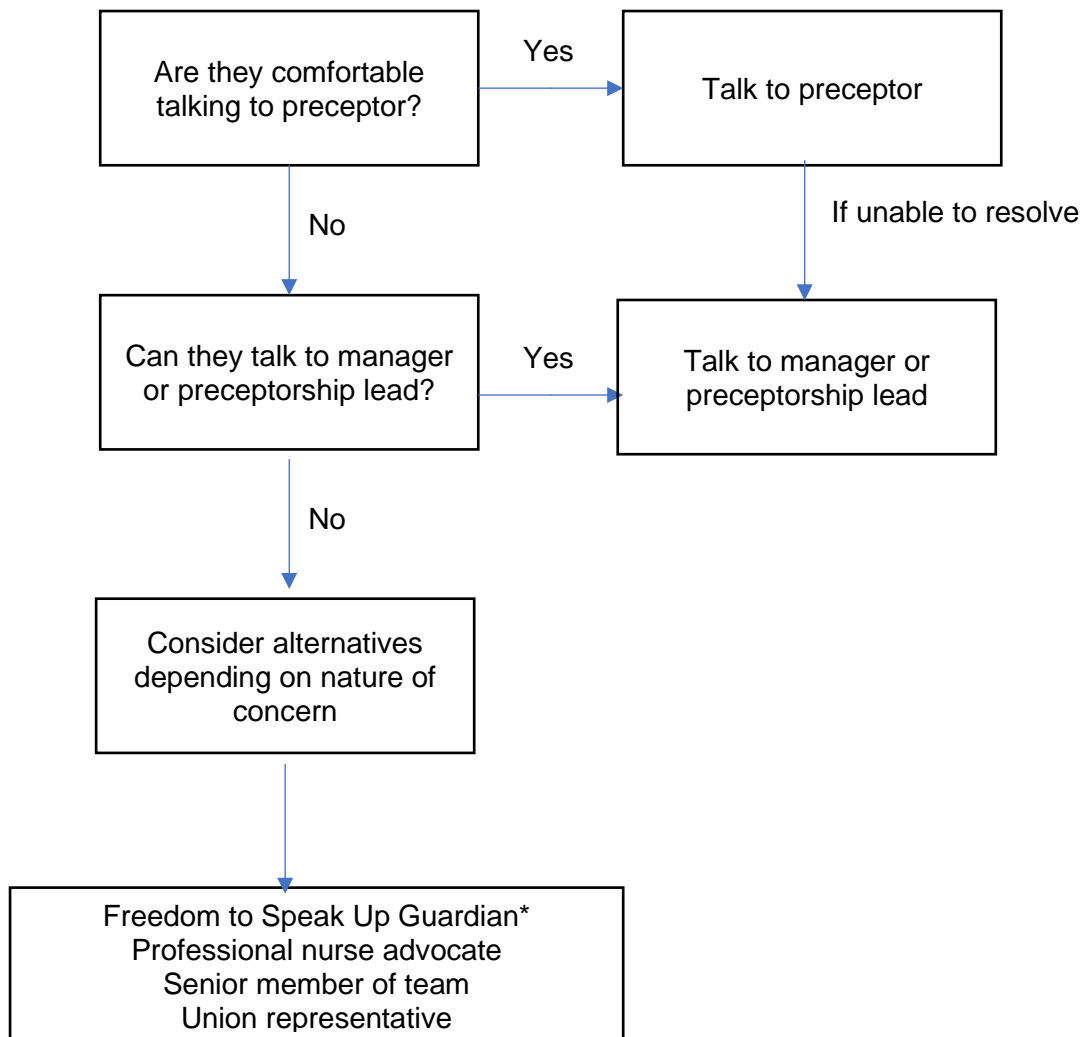
It is the preceptee's responsibility to:

- Attend all organised training and participate in all learning opportunities, including induction
- Organise and attend meetings with their preceptor at the agreed times and within the requirements of the framework
- Have a clear understanding of the objectives and learning outcomes of the preceptorship framework
- Work in collaboration with their preceptor to identify, plan and achieve their learning objectives
- Develop an individual learning plan and complete all documentation within required timeframes
- Promote the role to a high standard
- Maintain timely and professional behaviour at all times
- Adhere to their individual code of professional practice
- Escalate concerns, reflecting on their own professional practice, and take ownership of their own development.

Appendix Three – Escalation Process

The NMC offers guidance for nurses and midwives at www.nmc.org.uk/raisingconcerns

The RCN offers comprehensive guidance on escalation process for nursing staff. This is available at [Raising concerns | Guidance for RCN members | Royal College of Nursing](#)



** Freedom to Speak Up Guardian may have different titles according to organisation*

Appendix Four – Glossary

Term	Definition
Accelerated preceptorship	Intensive preceptorship programme lasting approximately six weeks
AHP	Allied health professional
CEO	Chief executive officer
CN	Chief nurse
DH	Department of health
GPN	General practice nurse
GP	General Practitioner
HPCPC	Health and Care Professionals Council
HEE	Health Education England
ICS	Integrated care system
ILP	Individual learning plan
NA	Nursing associate
NMC	Nursing and Midwifery Council
NQP	Newly qualified practitioner
NRN	Newly registered nurse
NRNA	Newly registered nurse associate
NRP	Newly registered practitioners
PNA	Professional nursing advocate
Practitioner	Registered professional, i.e. nurse, nursing associate, midwife, allied health professional
Preceptee	Person receiving support and guidance from the preceptor, usually the newly registered practitioner
Preceptor	Person providing support and guidance to the preceptee
Preceptorship champion	Person in designated role to promote value of preceptorship within organisation
Preceptorship lead	Central point of contact and lead for preceptorship within organisation or ICS
Preceptorship model	Short version of the preceptorship framework
Preceptorship period	Designated period of support and guidance for new practitioner in 6-12 months post registration
RTW	Returner to work
SLOT	A training needs analysis – Strengths, Learning Needs, Opportunities and Threats
SRO	Senior responsible officer
SSSA	Standard for student supervision and assessment

Appendix Five

Policy document version and control

Date	Version	Changes	Author	Approval
05/09/24	2	Removal of fellowship and addition of the preceptorship + offer and new funding allocation	Emma Borders	

