



Family Nursing  
& Home Care

## PRECEPTORSHIP PORTFOLIO CHILDREN'S COMMUNITY NURSE

Name	
Allocated Clinical Area(s)	
Preceptorship Start Date	
Preceptorship Completion Date	

## Preceptorship Details

Preceptorship Entry Criteria	
Newly Qualified	Return to Practice
New to NMC from outside UK	New part of NMC register

*Please tick applicable criteria above*

Placement 1:	
Preceptor Name	
Preceptor Contact Details	
Clinical Area Manager	
Clinical Area Contact Details	

Placement 2:	
Preceptor Name	
Preceptor Contact Details	
Clinical Area Manager	
Clinical Area Contact Details	

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## 1. Introduction to the FNHC Preceptorship Programme

The role of the Community Children's Nurse is highly complex and requires skills in negotiating, coaching, teaching and supporting children and young people and their carers, whilst effectively collaborating with a range of other agencies and services involved in enabling children and young people to remain safely in the community and transition to adult services in due course.

There are four groups of children and young people that have been identified as needing services:

- Those with acute and short term conditions
- Those with long term conditions
- Those with disabilities and complex conditions, including those requiring continuing care
- Those with life-limiting and life-threatening illness including those requiring palliative and end of life care

In order to meet these challenges, Family Nursing & Home Care (FNHC) recognises the benefits of a Preceptorship programme that not only supports newly qualified practitioners in professional and personal development but also in terms of retention and recruitment. Therefore it also offers this programme to assist the transition of Return to Practice nurses, experienced practitioners newly appointed to FNHC and existing practitioners undergoing role transition within the organisation.

All preceptees must read the FNHC Preceptorship Policy prior to commencing the Preceptorship programme. The Preceptorship Programme facilitates the structured transition of newly registered nurses and midwives who fulfil the entry criteria for Preceptorship, as defined by the Nursing & Midwifery Council (NMC) Principles for Preceptorship (2020). The programme is designed to develop skills, values and behaviours whilst also developing the confidence of newly registered nurses and midwives.

## 2. Collecting and Demonstrating Evidence of Achievement

All preceptees will take ownership and responsibility for their learning and proactively engage in setting objectives for development. Depending on clinical fields and areas of practice, professional development may be dependent on a blended approach of both pre-set objectives and preceptee/preceptor driven objectives.

Personal and professional objectives should align to:

- The NMC Code (2018b)
- The NMC Future Nurse Standards of Proficiency (2018a)
- Queen's Nursing Institute (QNI)/QNI(Scotland) (QNIS) Voluntary Standards for Community Children's Nurse Education and Practice
- The practitioner's job description
- FNHC Organisational descriptors (Fig 1)

These descriptors are based on the FNHC Strategic Priorities 2019-23 and provide a structure for the setting of objectives. It is not anticipated that people will need to have objectives/ evidence of working towards each of these individually; they are designed as a guide for the appraisal process.

Figure 1 FNHC Organisational Descriptors



## Evidence examples

The following are some examples the preceptee could use to demonstrate achievement of objectives.

<ul style="list-style-type: none"><li>• Certificate of training</li><li>• Completion of workbooks</li><li>• Reflections (NMC templates must be used) <a href="#">NMC Reflective Account form</a></li><li>• Peer observations</li><li>• Professional feedback</li><li>• Patient/client feedback <a href="#">NMC Practice-related feedback log</a></li></ul>	<ul style="list-style-type: none"><li>□ Evidence of clinical audit</li><li>□ Clinical supervisor feedback</li><li>□ Assignments</li><li>□ Literature reviews</li><li>□ Publications</li><li>□ Teaching evaluation forms</li><li>□ Nursing/Midwifery documentation</li><li>□ Professional Portfolio</li><li>□ Reports</li><li>□ Examinations</li></ul>
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Collecting and demonstrating evidence is the responsibility of the preceptee and can be undertaken in a number of ways depending on the opportunities and level of confidence. Throughout the preceptorship year, there will be opportunities for preceptees to attend learning events to support development and learning.

Any evidence used must not contain any information, which may identify any service user, patient or client. All personal details of service users, clients or patients must be redacted appropriately to maintain confidentiality.

### **3. Preceptorship Programme Timeline**

#### **3.1 Pre-commencement**

Prior to commencement of employment, the preceptee is expected to complete the following:

- ✓ Preceptee to introduce themselves to the line manager and preceptor
- ✓ Preceptee is aware of start date, shift times and off duty.
- ✓ Preceptee has accessed and read the Preceptorship Policy.
- ✓ Preceptee has received a copy of the FNHC Staff Handbook and is familiar with the contents (also see section 5)
- ✓ An individualised supernumerary period has been allocated and is evident on the rota.

#### **3.2 Week 1 - Initial Meeting between Preceptor and Preceptee**

- ✓ Discuss the Preceptorship process, the Preceptorship portfolio and how it will be completed
- ✓ Complete Preceptorship Agreement (Appendix 1)
- ✓ Agree support network and mechanisms
- ✓ Discuss first week orientation / induction programme
- ✓ Discuss any personal learning objectives and document using template (Appendix 3)
- ✓ Set a date for next meeting/review
- ✓ Record discussion and actions agreed using template (Appendix 2)

#### **3.3 Week 4 – Review Meeting between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review and update personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ Set a date for next meeting/review
- ✓ Record discussion and actions agreed using template (Appendix 2)

### **3.4 Week 12 – Review Meeting between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review and update personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ Set a date for next meeting/review
- ✓ Record discussion and actions agreed using template (Appendix 2)
- ✓ Complete Interim Probation Report template (Appendix 4) and feedback to preceptee's Line Manager (or Line Manager will complete)

### **3.5 Week 18 – Review Meeting between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review and update personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ Set a date for next meeting/review
- ✓ Record discussion and actions agreed using template (Appendix 2)

### **3.6 Week 24 – Review Meeting between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review and update personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ Set a date for next meeting/review
- ✓ Preceptor to record discussion and actions agreed using template (Appendix 2)
- ✓ Preceptor to complete End of Probation Report template (Appendix 5) and feedback to preceptee's Line Manager (or Line Manager will complete)



### **3.7 Weeks 25 to 52 - As required/agreed Review Meetings between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review and update personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ Set a date for next meeting/review
- ✓ Record discussion and actions agreed using template (Appendix 2)

### **3.8 One Year- End of Preceptorship Review Meeting between Preceptor and Preceptee**

- ✓ Review and discuss progress to date
- ✓ Review personal learning objectives (Appendix 3)
- ✓ Review and document evidence of learning
- ✓ If all portfolio elements have been achieved to a satisfactory level, preceptor and preceptee to complete Final Meeting and Sign Off Declaration (Appendix 6) to confirm end of preceptorship period
- ✓ Preceptee and Preceptor to complete evaluation forms (Appendices 7&8) and forward to FNHC Preceptorship Lead/Education Department

#### 4. Orientation and Induction Checklist

Description	Preceptor Signature	Preceptee Signature	Date
Introduction to immediate colleagues			
Tour of work area & building and car parking arrangements			
Fire Procedures (fire drill, fire alarm, fire exits and assembly point)			
Fire Extinguishers (location of equipment/extinguishers)			
Fire Wardens			
First Aiders and First Aid Box			
Location of nearest defibrillator			
Catering facilities (kitchen; tea/coffee making)			
Communications: Notice boards, newsletters, website, email, team meetings			
Use of equipment/supplies ie photocopier/scanner/stationery			
Job role/duties discussed			
FNHC Strategy and Business Plan/Organisational Structure			
Location of FNHC policies and procedures			
Absence notification (sickness reporting/sickness pay/sickness certificates)			
Hours of work/record keeping/time sheets/mileage forms/annual leave requests/off duty requests			
Issue of: <ul style="list-style-type: none"> <li>➤ Uniforms/Clinical equipment</li> <li>➤ Mobile telephone/IPad/laptop</li> <li>➤ Car parking permits</li> </ul>			
Multi-disciplinary team working (including referrals to HCS, JHC etc.)			

Description	Preceptor Signature	Preceptee Signature	Date
Access to FNHC personal email account and HCS/MyStates website/MyView			
Access to H&CS Infection Control Website			
Use of Personal Protective Equipment			
Is aware of how to apply for study leave			
Can access H&CS Nursing and Midwifery Higher Education Website			
Internal mail system including emails			
Explanation of appraisal and probationary processes			
Registered with Virtual College and can access platform of learning			
Awareness of Safeguarding processes and reporting mechanisms for both Adults and Children			
Understands NMC requirements for revalidation and the themes of the NMC Code (2018)			
Is aware of Wellbeing website and the support services available			

## 5. Policies and Procedures Checklist

Below are a list of policies which the preceptee must familiarise themselves with. This list is not exhaustive and there may be additional policies pertinent to the preceptee's area of practice.

Policy / Procedure	Preceptee Signature	Date
<a href="#">FNHC Staff Handbook</a> Includes:  Adverse Weather Alcohol, Drugs & Gambling Annual leave Anti-bullying & harassment Capability Disciplinary Equal opportunities Flexible working Gifts & inducements Grievance Redundancy Sickness and Disability Whistle Blowing		
Capacity and Self Determination (Jersey) Law 2016 Code of Practice  <a href="#">CSDL 2016 Code of Practice</a>		
Confidentiality  <a href="#">FNHC Confidentiality Policy</a>		
Data Protection  <a href="#">FNHC Data Protection Policy</a>		
Display Screen Equipment  <a href="#">FNHC DSE Policy</a>		
Health and Safety  <a href="#">FNHC Health and Safety Policy</a>		
Infection Control  <a href="#">FNHC Hand Hygiene and use of PPE</a> <a href="#">FNHC Sharps Injury procedure</a> <a href="#">FNHC Sharps Safety Policy</a> <a href="#">FNHC Staff Infection Management</a>		

Policy / Procedure	Preceptee Signature	Date
Medicines <a href="#">FNHC Medicines Policy</a>		
Mobile Device Policy <a href="#">FNHC Mobile Device Policy</a>		
Safeguarding Adults and Children <a href="#">FNHC Safeguarding Policy Adults and Children</a>		
Safeguarding Restorative Supervision <a href="#">FNHC Safeguarding Restorative Supervision</a>		
Uniform and Dress Code <a href="#">FNHC Uniform and Dress Code Policy</a>		
<b>Useful Links</b>		
<p><u>Queen's Nursing Institute</u> <a href="http://www.qni.org.uk">www.qni.org.uk</a></p> <p>The QNI is a registered charity dedicated to improving the nursing care of people in the home and community</p> <p><u>Marsden Manual for Clinical Procedures</u> <a href="http://www.rmmonline.co.uk/">http://www.rmmonline.co.uk/</a></p> <p>This manual provides evidence-based clinical skills and procedures related to essential aspects of a patient's care.</p> <p>The password and user details for remote access are:  User: jerseygen2015  Password: jerseygen2015</p> <p><u>Hospital Library</u> Password for e-portal is Letmein*2</p> <p><u>Clinical Skills</u> <a href="https://clinicalskills.net/login?token=fnhc0101">https://clinicalskills.net/login?token=fnhc0101</a></p> <p>The content is reviewed and updated on a regular basis and the easy to follow content can be used to support care planning and education.</p> <p>Each clinical member of staff will be provided with an individual log-in and the site can be added to IPads. If you require a log-in or have forgotten your details, contact the FNHC Education Department.</p>		

## 6. Training Record

To be regularly reviewed and updated throughout preceptorship programme

Corporate Induction Programme – full day			
To be completed during first 6 months for all new FNHC employees			
Subject	Speaker	Date attended/completed	Nurse Signature
Welcome to Organization & Role of the Committee	Committee member/CEO		
Finance & Corporate Services Overview	Finance Director or Nominee		
Fund Raising Overview	Fund Raising Officer		
Human Resources	HR Officer		
Quality and Governance Overview including Assure	Quality & Governance lead or Nominee		
Hub & Data Protection Overview	Head of Information Governance & Systems		
Clinical Effectiveness & Audit	Clinical Effectiveness Lead		
Safeguarding	FNHC Safeguarding Lead		
Child and Family Services Overview	Operational :Lead or Nominee		
Adult Services Overview	Operational :Lead or Nominee		
Rapid Response and Reablement Overview	Operational :Lead or Nominee		
Home Care Overview	Operational :Lead or Nominee		
Education Overview	Education and Practice Development Nurse		
Specialist Nurses	Individual Specialist Nurses		

Mandatory Training and Development			
To be completed during first 6 months for all new FNHC employees			
Training	Access/ Contact Details	Date attended/completed	Nurse Signature
ASSURE Incident Reporting System	FNHC Education Team		
Basic Life Support (Adult & Paediatric) Anaphylaxis & Use of AED	FNHC Education Team		
Capacity/Deprivation of Liberty Safeguards (DOLS)	FNHC Education Team		
Children's Rights Awareness	On line – Virtual College		
Communication & De-escalation Skills	FNHC Education Team		
Conflict Resolution	On line – Virtual College		
Customer Care	On line – Virtual College		
Display Screen equipment (DSE) and Workstation	On line – Virtual College		
Equality, Diversity & Human Rights	On line – Virtual College		
Fire Safety	On line – Virtual College		
Health, Safety & Welfare	On line – Virtual College		
Infection Prevention & Control – Clinical	On line – Virtual College		
Information Governance Awareness	On line – Virtual College		
Lone Worker	FNHC Education Team		
Mental Health, Dementia & Learning Disabilities	On line – Virtual College		

Role-specific Training and Development			
Training	Access/ Contact Details	Date attended/completed	Nurse Signature
ANTT Clinical Skills / Wound Care /Catheter Care	FNHC Specialist Nurses Clinical Leadership Team		
Catheter Best Practice & Continence Assessment	FNHC Specialist Nurse		
EMIS	Head of Information Governance and Systems		
Moving and Handling in the Workplace	On line – Virtual College		
Moving and Handling People	FNHC Education Team		
Professional Writing and Recording	FNHC Education Team		
Safeguarding Level 3 (HCS)	Email <a href="mailto:HealthSafeguardingTeam@health.gov.je">HealthSafeguardingTeam@health.gov.je</a>		
Sepsis	FNHC Sepsis Champion		
Stoma Care	FNHC Specialist Nurse		
Intravenous Drug Administration (IVDA)	FNHC Education Team  Click on this link to access course workbook <a href="#">HCS IVDA Workbook</a>		
Venous Blood Sampling & Cannulation	FNHC Education Team  Click on this link to access course workbook <a href="#">HCS VBS &amp; Cannulation Workbook</a>		



Training	Access/Contact details	Date attended/completed	Nurse Signature
McKinley Syringe Driver	On line register on the link below to access to the training <a href="#">BD e-learning portal</a> (not compatible with tablet devices)		
Glucometer	Clinical Area Champion		

## 7. Skills Development

### Future Nurse Annex A: Communication and relationship management skills

The NMC (2018) 'Future Nurse' skills (Annex A and B) are skills that the NMC identify will need to be demonstrated at the point of registration. The preceptee will be required to identify those skills needed in their area of practice and be able to demonstrate these. Those skills needing further support and development may be set as an objective using the objective template. Not all skills will be relevant to the preceptee's area of practice.

This Annex identifies those that you need to develop in order to practice in your chosen area.

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>1.Underpinning communication skills for assessing, planning, providing and managing best practice, evidence-based nursing care</b>				
1.1 actively listen, recognise and respond to verbal and nonverbal cues				
1.2 use prompts and positive verbal and nonverbal reinforcement				
1.3 use appropriate non-verbal communication including touch, eye contact and personal space				
1.4 make appropriate use of open and closed questioning				
1.5 use caring conversation techniques				
1.6 check understanding and use clarification techniques				
1.7 be aware of own unconscious bias in communication encounters				
1.8 write accurate, clear, legible records and documentation				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
1.9 confidently and clearly present and share verbal and written reports with individuals and groups				
1.10 analyse and clearly record and share digital information and data				
1.11 provide clear verbal, digital or written information and instructions when delegating or handing over responsibility for care				
1.12 recognise the need for, and facilitate access to, translator services and material.				
<b>2. Evidence-based, best practice approaches to communication for supporting people of all ages, their families and carers in preventing ill health and in managing their care</b>				
2.1 share information and check understanding about the causes, implications and treatment of a range of common health conditions including anxiety, depression, memory loss, diabetes, diabetes, respiratory disease, cardiac disease, neurological disease, cancer, skin problems, immune deficiencies, psychosis, stroke and arthritis				
2.2 use clear language and appropriate, written materials, making reasonable adjustments where appropriate in order to optimise people`s understanding of what has caused their health condition and the implications of their care and treatment				
2.3 recognise and accommodate sensory impairments during all communications				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
2.4 support and manage the use of personal communication aids				
2.5 identify the need for and manage a range of alternative communication techniques				
2.6 use repetition and positive reinforcement strategies				
2.7 assess motivation and capacity for behaviour change and clearly explain cause and effect relationships related to common health risk behaviours including smoking, obesity, sexual practice, alcohol and substance use				
2.8 provide information and explanation to people, families and carers and respond to questions about their treatment and care and possible ways of preventing ill health to enhance understanding				
2.9 engage in difficult conversations, including breaking bad news and support people who are feeling emotionally or physically vulnerable or in distress, conveying compassion and sensitivity.				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>3. Evidence-based, best practice communication skills and approaches for providing therapeutic interventions</b>				
3.1 motivational interview techniques				
3.2 solution focused therapies				
3.3 reminiscence therapies				
3.4 talking therapies				
3.5 de-escalation strategies and techniques				
3.6 cognitive behavioural therapy techniques				
3.7 play therapy				
3.8 distraction and diversion therapies				
3.9 positive behaviour support approaches				
<b>4. Evidence-based, best practice communication skills and approaches for working with people in professional teams</b>				
<b>4.1 Demonstrate effective supervision, teaching and performance appraisal through the use of:</b>				
4.1.1 clear instructions and explanations when supervising, teaching or appraising others				
4.1.2 clear instructions and check understanding when delegating care responsibilities to others				
4.1.3 unambiguous, constructive feedback about strengths and weaknesses and potential for improvement				
4.1.4 encouragement to colleagues that helps them to reflect on their practice				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
4.1.5 unambiguous records of performance				
<b>4.2 Demonstrate effective person and team management through the use of:</b>				
4.2.1 strengths based approaches to developing teams and managing change				
4.2.2 active listening when dealing with team members' concerns and anxieties				
4.2.3 a calm presence when dealing with conflict				
4.2.4 appropriate and effective confrontation strategies				
4.2.5 de-escalation strategies and techniques when dealing with conflict				
<b>4.2.6 Effective co-ordination and navigation skills through:</b>				
4.2.6.1 appropriate negotiation strategies				
4.2.6.2 appropriate escalation procedures				
4.2.6.3 appropriate approaches to advocacy				

Additional Comments:

## Future Nurse Annex B: Nursing procedures

The NMC (2018) 'Future Nurse' skills (Annex A and B) are skills that the NMC identify will need to be demonstrated at the point of registration. The preceptee will be required to identify those skills needed in their area of practice and be able to demonstrate these. Those skills needing further support and development may be set as an objective using the objective template. Not all skills will be relevant to the preceptee's area of practice.

This Annex identifies those that you need to develop in order to practice in your chosen area.

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>Part 1: Procedures for assessing people's needs for person centred care</b>				
<b>1. Use evidence-based, best practice approaches to take a history, observe, recognise and accurately assess people of all ages:</b>				
<b>1.1 mental health and wellbeing status</b>				
1.1.1 signs of mental and emotional distress or vulnerability				
1.1.2 cognitive health status and wellbeing				
1.1.3 signs of cognitive distress and impairment				
1.1.4 behavioural distress based needs				
1.1.5 signs of mental and emotional distress including agitation, aggression and challenging behaviour				
1.1.6 signs of self-harm and/or suicidal ideation				
<b>1.2 physical health and wellbeing</b>				
1.2.1 symptoms and signs of physical ill health				
1.2.2 symptoms and signs of physical distress				
1.2.3 symptoms and signs of deterioration and sepsis				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>2. Use evidence-based, best practice approaches to undertake the following procedures:</b>				
2.1 take, record and interpret vital signs manually and via technological devices				
2.2 undertake: Venepuncture: Cannulation: Blood sampling: Interpreting normal and common abnormal blood profiles: Venous blood gases:				
2.3 manage and interpret blood glucose monitors:				
2.4 accurately measure weight and height: calculate body mass index and recognise healthy ranges and clinically significant low/high readings:				
2.5 undertake a whole body systems assessment including Respiratory: Circulatory: Neurological: Musculoskeletal: Cardiovascular: Skin status:				
2.6 undertake chest auscultation and interpret findings				
2.7 collect and observe: Sputum: Urine: Stool: Vomit: Undertaking routine analysis and interpreting findings				
2.8 measure and interpret blood glucose level				
2.9 recognise and respond to signs of all forms of abuse				
2.10 undertake, respond to and interpret neurological observations and assessments				



Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
2.11 identify and respond to signs of deterioration and sepsis				
2.12 administer basic mental health first aid				
2.13 administer basic physical first aid				
2.14 recognise and manage seizures, choking and anaphylaxis, providing appropriate basic life support				
2.15 recognise and respond to challenging behaviour, providing appropriate safe holding and restraint				
<b>Part 2: Procedures for the planning, provision and management of person-centred nursing care</b>				
<b>3. Use evidence-based, best practice approaches for meeting needs for care and support with rest, sleep, comfort and the maintenance of dignity, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
3.1 observe and assess comfort and pain levels and rest and sleep patterns				
3.2 use appropriate positioning and pressure relieving techniques				
3.3 take appropriate action to ensure privacy and dignity at all times				
3.4 take appropriate action to reduce or minimise pain or discomfort				
<b>4. Use evidence-based, best practice approaches for meeting the needs for care and support with hygiene and the maintenance of skin integrity, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
4.1 observe, assess and optimise skin and hygiene status and determine the need for support and intervention				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
4.2 use contemporary approaches to the assessment of skin integrity and use appropriate products to prevent or manage skin breakdown				
4.3 assess needs for and provide appropriate assistance with washing, bathing, shaving and dressing				
4.4 identify and manage skin irritations and rashes				
4.5 assess needs for and provide appropriate oral, dental, eye, and nail care and decide when an onward referral is needed				
4.6 use approved techniques when undertaking wound care including dressings, pressure bandaging, suture removal, and vacuum closures				
4.7 use approved techniques when managing wound and drainage processes				
4.8 assess, respond and effectively manage pyrexia and hypothermia				
<b>5. Use evidence-based, best practice approaches for meeting needs for care and support with nutrition and hydration, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
5.1 observe, assess and optimise nutrition and hydration status and determine the need for intervention and support				
5.2 use contemporary nutritional assessment tools				
5.3 assist with feeding and drinking and use appropriate feeding and drinking aids				
5.4 record fluid intake and output and identify, respond to and manage dehydration or fluid retention				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
5.5 identify, respond to and manage nausea and vomiting				
5.6 insert, manage and remove gastric tubes				
5.7 manage artificial nutrition and hydration using oral, enteral and parenteral routes				
5.8 manage the administration of IV fluids				
<b>6. Use evidence-based, best practice approaches for meeting needs for care and support with bladder and bowel health, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
6.1 observe and assess level of urinary and bowel continence to determine the need for support and intervention assisting with toileting, maintaining dignity and privacy and managing the use of appropriate aids				
6.2 select and use appropriate continence products; insert, manage and remove catheters for all genders; and assist with self-catheterisations when required				
6.3 undertake bladder scanning				
6.4 manage bladder drainage				
6.5 assess bladder and bowel patterns to identify and respond to constipation, diarrhoea and urinary and faecal retention				
6.6 administer enemas and suppositories and undertake rectal examination and manual evacuation when appropriate				
6.7 undertake stoma care identifying and using appropriate products and approaches				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>7. Use evidence-based, best practice approaches for meeting needs for care and support with mobility and safety, accurately assessing the person`s capacity for independence and self-care and initiating appropriate interventions</b>				
7.1 observe and use evidence-based risk assessment tools to determine need for support and intervention to optimise mobility and safety, and to identify and manage risk of falls using best practice risk assessment approaches				
7.2 use a range of contemporary moving and handling techniques and mobility aids				
7.3 use appropriate moving and handling equipment to support people with impaired mobility				
7.4 use appropriate safety techniques and devices				
<b>8. Use evidence-based, best practice approaches for meeting needs for respiratory care and support, accurately assessing the person`s capacity for independence and self-care and initiating appropriate interventions</b>				
8.1 observe and assess the need for intervention and respond to restlessness, agitation and breathlessness using appropriate interventions				
8.2 manage the administration of oxygen using a range of routes and best practice approaches				
8.3 take and interpret peak flow and oximetry measurements				
8.4 use appropriate nasal and oral suctioning techniques				
8.5 manage inhalation, humidifier and nebuliser devices				
8.6 manage airway and respiratory processes and equipment				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
<b>9. Use evidence-based, best practice approaches for meeting needs for care and support with the prevention and management of infection, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
9.1 observe, assess and respond rapidly to potential infection risks using best practice guidelines				
9.2 use standard precautions/ protocols				
9.3 use effective aseptic, non-touch techniques				
9.4 use appropriate personal protection equipment				
9.5 implement isolation procedures				
9.6 use evidence-based hand hygiene techniques				
9.7 safely decontaminate equipment and environment				
9.8 safely use and dispose of waste, laundry and sharps				
9.9 safely assess and manage invasive medical devices and lines				
<b>10. Use evidence-based, best practice approaches for meeting needs for care and support at the end of life, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions</b>				
10.1 observe, and assess the need for intervention for people, families and carers, identify, assess and respond appropriately to uncontrolled symptoms and signs of distress including pain, nausea, thirst, constipation, restlessness, agitation, anxiety and depression				
10.2 manage and monitor effectiveness of symptom relief medication, infusion pumps and other devices				
10.3 assess and review preferences and care priorities of the dying person and their families and carers				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
10.4 understand and apply organ and tissue donation protocols, advanced planning decisions, living wills and health and lasting powers of attorney for health				
10.5 understand and apply DNACPR (do not attempt cardiopulmonary resuscitation) decisions and verification of expected death				
10.6 provide care for the deceased person and the bereaved respecting cultural requirements and protocols				
<b>11.Procedural competencies required for best practice, evidence-based medicines administration and optimisation</b>				
11.1 carry out initial and continued assessments of people receiving care and their ability to self-administer their own medications				
11.2 recognise the various procedural routes under which medicines can be prescribed, supplied, dispensed and administered; and the laws, policies, regulations and guidance that underpin them				
11.3 use the principles of safe remote prescribing and directions to administer medicines				
11.4 undertake accurate drug calculations for a range of medications				
11.5 undertake accurate checks, including transcription and titration, of any direction to supply or administer a medicinal product				
11.6 exercise professional accountability in ensuring the safe administration of medicines to those receiving care				

Skill Identified	Applicable Y/N	Date of Achievement	Preceptor Signature	Preceptee Signature
11.7 administer injections using intramuscular, subcutaneous, intradermal and intravenous routes and manage injection equipment				
11.8 administer medications using a range of routes				
11.9 administer and monitor medications using vascular access devices and enteral equipment				
11.10 recognise and respond to adverse or abnormal reactions to medications				
11.11 undertake safe storage, transportation and disposal of medicinal products				

Additional Comments:

## QNI/QNIS Voluntary Standards for Community Children's Nurse Education and Practice

The QNI/QNIS Voluntary Standards aim to provide children, young people, their carers and the public with a contemporary description of a Community Children's Nurse and identify the key aspects of the Community Children's Nurse role, grouping them under the four key domains that reflect the breadth of competence needed for safe, high quality, personalised and person-centred care for children and young people and their families. The [QNI/QNIS Voluntary Standards for CCN Education & Practice](#) full document provides further information.

This table below gives an overview of outcomes to be achieved, but every practitioner is different and individuals will complete at their own pace.

Aim	Date achieved	Evidence eg discussion, exercises, activities, reflection etc	Preceptor Signature	Preceptee Signature
<b>Domain 1 – Clinical Care</b>				
1.1 Demonstrate a broad range of specialist community children's nursing clinical expertise that supports high quality children and young people person-centred care for the caseload population in a variety of community settings				
1.2 Use a broad range of skills to undertake the assessment of children and young people with complex/continuing/ palliative care needs or those presenting with more acute illnesses, using a range of evidence based assessment tools and consultation models to enable accurate nursing diagnostic decision making and appropriate referral.				
1.3 Assess the health related needs of children and young people and their carers, developing therapeutic relationships and working in partnership to co-produce care plans identifying roles and responsibilities that include anticipatory and proactive care, delivery of care packages aiming to improve health, well-being and the promotion of self-care in addressing short or long term health conditions.				



1.4 Supervise the delivery of children and young people's care plans by the wider community children's nursing team ensuring regular evaluation of care and maximising independence for families and other siblings. Develop systems to support staff interventions and care quality.				
1.5 Support all staff to use tools to identify changes in health status and maximise the skills of the Community Children's Nurse to support complex assessment, decision making and symptom management where the patient is showing signs of deteriorating health or new symptoms.				
1.6 Assess when additional expertise or signposting to other specialist services, including those offered by the third sector, is necessary and make objective and appropriate referrals, whilst maintaining overall responsibility for nursing management and co-ordination of care.				
1.7 Ensure clear lines of accountability with respect to delegation, supervision and mechanisms for the assurance of clinical and care governance. Ensure there are effective systems for safeguarding supervision for all staff in the CCN team.				
1.8 Source and utilise information technology and technology assisted learning systems to improve efficiency and effectiveness of the community children's nursing service.				
1.9 Work collaboratively with others to identify children, young people and carers who would benefit from appropriate technology, with ongoing support and management.				

1.10 Promote the mental health and well-being of children, young people and carers in conjunction with mental health professionals, paediatricians and GPs, identifying needs and assessing mental capacity, using recognised assessment and referral pathways and best interest decision making and providing appropriate emotional support.				
1.11 Apply the principles of risk stratification and case management to enable identification of those children and young people most at risk of poor health outcomes. Apply this information to support service development				
1.12 Where appropriate, undertake the case management of children and young people with complex needs, with the support of the multidisciplinary team, to improve current and future care needs, self-management, facilitate timely discharges and reduce avoidable hospital admissions to enable care to be delivered closer to, or at home.				
1.13 Assess and evaluate risk using a variety of tools across a broad spectrum of often unpredictable situations that incorporates safeguarding, including staff, children and young people and carers within their home environments.				
1.14 Develop and implement risk management strategies that take account of children, young people and carers' views and responsibilities and the need for normal child development, whilst promoting patient and staff safety and preventing avoidable harm to individuals, carers and staff.				
1.15 Work in partnership with children, young people, carers and education and social care services to promote empowerment, independence and understanding of condition(s), providing appropriate education and support to maximise health outcomes. Understands the continuing care framework and its application locally				

1.16 Explore and apply the principles of effective collaboration and professional influencing within a multi-agency, multi-professional context, facilitating integration of health, education and social care services, ensuring person-centred care is anticipated and co-ordinated across the whole of the child or young person's life course.				
1.17 Work collaboratively with a range of adult services to ensure effective transition, also recognising that transition may also occur from neonatal services to children's services				
1.18 Demonstrate advanced communication skills that engage and involve children and young people and their carers and which foster therapeutic relationships and enable confident management of complex interpersonal issues and conflicts between children and young people, carers and members of the caring team.				
1.19 Prescribe across a range of interventions within their scope of competence				
<b>Domain 2 – Leadership and Management</b>				
2.1 Contribute to public and child health initiatives and surveillance, recognising professional boundaries whilst working from an assets-based approach that enables and supports children and young people to maximise their health and well-being at home or school, increasing their self or family efficacy and contributing to community developments.				
2.2 Lead, support, clinically supervise, manage and appraise a mixed skill/discipline team to provide community nursing interventions in a range of settings to meet current and potential future care needs, appraising those staff reporting directly to the Community Children's Nurse whilst retaining accountability for the caseload and work of the team.				

2.3 Enable other team members to appraise, support and develop others in the team and initiate strategies for disseminating best practice and addressing poor practice.				
2.4 Manage the community children's nursing team within regulatory, professional, legal, ethical and policy frameworks ensuring staff feel valued and developed. Use a range of supervision methods to support and enhance practice, build resilience and support staff to explore moral and ethical dilemmas encountered in community children's nursing.				
2.5 Facilitate an analytical approach to the safe and effective distribution of workload through delegation, empowerment and education which recognises skills, regulatory parameters and the changing nature of community children's nursing whilst establishing and maintaining the continuity of caring and therapeutic relationships.				
2.6 Lead, manage, monitor and analyse clinical caseloads, workload and team capacity to assure safe staffing levels in care delivery, using effective resource and budgetary management.				
2.7 Manage and co-ordinate programmes of care, for children and young people with acute, complex and long term conditions and palliative care, ensuring their patient journey is seamless between mental and physical health care, hospital and community services and between primary and community care. Recognise the rights of children and young people when planning care, fulfilling an advocacy role where appropriate.				
2.8 Provide an advisory service where appropriate and collaborate with other agencies to evaluate public health principles, priorities and practice and participate in implementing these policies in the context of the community children's nursing service and the needs of the local community.				

2.9 Participate in the collation of a community profile, through engagement with networks that support the delivery of locally relevant resources for health improvement and analysing and adapting practice in response to this.				
2.10 Articulate the complexity of clinical decision making and the roles and unique contribution of the children's community nursing service in meeting the health care needs of the population in the community and the evidence that supports this in local areas. Feel confident to challenge and be challenged				
2.11 Ensure all staff are able to recognise vulnerability of children and young people and understand their responsibilities and those of other organisations in terms of safeguarding legislation, policies and procedures.				
2.12 Use knowledge and understanding of social, political and economic policies and drivers to analyse the strategic imperatives that may impact on community children's nursing services and the wider health care community. Where appropriate participate in organisational responses and use this knowledge when advocating for children and young people or resources.				
<b>Domain 3 – Facilitation of Learning</b>				
3.1 Promote and model effective team working within the community children's nursing team and the wider multi-disciplinary team, primary care colleagues and other agencies.				
3.2 Use creative problem-solving to develop a positive teaching/learning environment and workplace for supporting disciplines and professions learning about caring for children and young people in the community and the interdependency of integrated service provision.				

3.3 Develop strategies to teach, assess and support the maintenance of competencies for unregulated staff caring for children with additional needs				
3.4 Demonstrate the values of high quality, compassionate nursing and support the ongoing development of these values in others, whilst demonstrating resilience and autonomy in the context of increasing demand, managing change to meet the evolving shape of services through flexibility, innovation and strategic leadership.				
3.5 Lead and foster a culture of openness and the recognition of duty of candour, in which each team member is valued, supported and developed, inspiring a shared purpose to support the delivery of high quality effective care.				
3.6 Contribute to the development, collation, monitoring and evaluation of data relating to service improvement and development, quality assurance, quality improvement and governance, reporting incidents and developments related to community children's nursing and ensuring that learning from these, where appropriate, is disseminated to a wider audience to improve patient care.				
<b>Domain 4 - Evidence, Research and Development</b>				
4.1 Ensure care is based on all available evidence, published research and best practice and foster professional curiosity in the team.				
4.2 Demonstrate an understanding of research governance and high level skills in discerning between different forms of evidence and their application in managing uncertainty in decision making in clinical practice.				



## Appendix 1 Preceptorship Agreement

### Preceptorship Agreement



#### **Preceptee**

I, \_\_\_\_\_ commit to fulfilling my responsibilities as a newly registered practitioner and preceptee.

This includes:

- Completing all organisation and local induction, statutory and mandatory training
- Attending study days and doing all required training to complete my preceptorship
- Observing and adhering to organisation values
- Participating fully in the preceptorship programme by preparing for and attending meetings as scheduled with my preceptor
- Working collaboratively with my preceptor to share my reflections and identify learning and development needs
- Seeking feedback from others to inform my progress
- Owning my learning and development plan

**Signature:**.....

**Date:**.....

#### **Preceptor**

I, \_\_\_\_\_ commit to fulfilling my responsibilities as a preceptor.

This includes:

- Providing support and guidance to the newly registered practitioner
- Acting as a role model and critical friend
- Facilitating introductions and promoting good working relationships
- Participating in all preceptorship activities including completing required training, preparing for, attending and documenting regular scheduled meetings
- Providing timely and appropriate feedback to the preceptee
- Liaising with preceptee's manager about progress as appropriate
- Advising on learning and development needs, facilitating a supportive learning environment and signposting learning resources

**Signature:**..... **Date:**.....



## Appendix 2 Meeting Discussion Template

<b>Preceptorship Meeting Record</b>			
Preceptee:.....		Preceptor:.....	
.....		.....	
Date.....		Week:.....	
<b>Discussion:</b>			
<b>Actions agreed:</b>			
Preceptor Signature		Preceptee Signature	
Date		Date	

### Appendix 3 Objectives and Achievements Record

No.	Objective	Support / Resources Required	Evidence of Achievement	Date Achieved
		Timescale		Signature of Assessor
Date				
		Timescale		Signature of Assessor
Date				
		Timescale		Signature of Assessor
Date				
		Timescale		Signature of Assessor
Date				
		Timescale		Signature of Assessor
Date				
		Timescale		Signature of Assessor
Date				

## Appendix 4 Interim Probation Review Record

PROBATION – INTERIM REVIEW			
Name		Joining date	
Department & Grade		Team/Group	
Please attach list of agreed objectives for the review period and other relevant documentation. The following must be discussed:-			
Overall standard of work (Please type your comments below)			
			Initials (Employee)
Attitude towards work and colleagues (Please type your comments below)			
			Initials (Employee)
Ability and knowledge to do the job (Please type your comments below)			
			Initials (Employee)
Specific training areas identified (Please type your comments below)			
			Initials (Employee)
Conduct, attendance and punctuality during review period (Please type your comments below)			
			Initials (Employee)
Potential areas of concern (if any issues are raised it must be made clear to the employee that they may be asked to leave before Final Probation review if there is not an acceptable improvement within 4 weeks) (Please type your comments below)			
			Initials (Employee)
Overall comments on performance during review period			
Relevant induction training has been completed and all forms submitted to HR <input type="checkbox"/> Yes <input type="checkbox"/> No			Initials (Employee)
Final Review scheduled for			
Date of Review			
List of objectives prepared and explained			
Final Review date agreed (Must take place within 5 working days following the 22nd week of employment)			

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Staff Member:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Line Manager/Operational Lead

Please forward completed form to the Human Resources Department

## Appendix 5 End of Probation Review Record

PROBATION – 26 WEEK REVIEW			
<b>Name</b>		<b>Joining date</b>	
<b>Department &amp; Grade</b>		<b>Team/Group</b>	
Please attach list of agreed objectives for the review period and other relevant documentation. The following must be discussed:-			
<b>Overall standard of work (Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Attitude towards work and colleagues (Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Ability and knowledge to do the job (Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Specific training areas identified (Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Conduct, attendance and punctuality during review period (Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Potential areas of concern</b> (if any issues are raised it must be made clear to the employee that they may be asked to leave before Final Probation review if there is not an acceptable improvement within 4 weeks) <b>(Please type your comments below)</b>			
			<b>Initials (Employee)</b>
<b>Overall comments on performance during review period</b>			
Relevant induction training has been completed and all forms submitted to HR <input type="checkbox"/> Yes <input type="checkbox"/> No			<b>Initials (Employee)</b>
<b>Final Review scheduled for</b>			
<b>Date of Review</b>			
<b>List of objectives prepared and explained</b>			
<b>Final Review date agreed</b> (Must take place within 5 working days following the 22nd week of employment)			

**Signed:**

**Staff Member:**

**Date:**

**Signed:**

**Line Manager//Operational Lead**

**Date:**

Please forward completed form to the Human Resources Department

## Appendix 6 Preceptorship Final Meeting and Sign Off Declaration

### Preceptorship Final Meeting and Sign Off Declaration

<b>Preceptee Name:</b>	
<b>Preceptor Name:</b>	
<b>Date of Meeting:</b>	
<b>Review of previous development objectives:</b>	
<b>Reflection on what has gone well and any challenges:</b>	

**Development plan:** Objectives should be SMART – Specific, Measurable, Achievable, Realistic and Time bound

### PRECEPTORSHIP SIGN-OFF DECLARATION

This is to confirm that the preceptee has completed all aspects of the preceptorship programme to a satisfactory standard and the preceptorship period is now complete.

**Date of completion:**.....

#### Preceptee

**Name:**.....**Signature:**.....

#### Preceptor

**Name:**.....**Signature:**.....

#### Operational/Management Lead:

**Name:**.....**Signature:**.....

Once completed please send a copy to:

**FNHC Preceptorship Lead/Education & Development Team**

**Human Resources Department**

**Operational Lead**

## Appendix 7 Preceptee Evaluation Form

### Preceptee Evaluation Form      Candidate ID:

Please complete the evaluation form on completion of your Preceptorship Programme and send to **FNHC Preceptorship Lead/Education & Development Team**

All replies are anonymous and will be collated and used to develop the FNHC Preceptorship programme.

Question	Yes	No
1. Do you feel you were prepared for the FNHC Preceptorship Programme?		
If no please clarify:		
2. Do you feel you had enough support throughout your FNHC Preceptorship Programme?		
If no please clarify:		
3. Do you feel you had enough time with your preceptor to complete the requirements of the Preceptorship Portfolio?		
If no please clarify:		
4. Do you feel the information you were given was sufficient for you to understand the requirements of the Preceptorship Programme?		
If no please clarify:		
5. Do you think the duration of the FNHC Preceptorship Programme was adequate to complete the objectives in the portfolio?		
If no please clarify:		
6. What did you like about the FNHC Preceptorship Programme?		
7. How do you feel the FNHC Preceptorship Programme could be improved?		

Thank you for taking the time to complete this questionnaire.

If you would like to discuss any aspect of preceptorship further than please contact the

**FNHC Education & Development Team**

## Appendix 8 Preceptor Evaluation Form

### Preceptor Evaluation Form

Candidate ID:

Please complete the evaluation form on completion of your Preceptorship Programme and send to **FNHC Preceptorship Lead/Education & Development Team**

All replies are anonymous and will be collated and used to develop the FNHC Preceptorship programme.

Question	Yes	No
1. Do you feel you were provided with enough information about the FNHC Preceptorship Programme?		
If no please clarify:		
2. Do you feel you had enough support to enable you to undertake your role as a Preceptor?		
If no please clarify:		
3. Do you feel you had enough time with your Preceptee to complete the requirements of the Preceptorship Portfolio?		
If no please clarify:		
4. Do you feel the information you were given was sufficient for you to understand the requirements of the Preceptorship Programme?		
If no please clarify:		
5. Do you think the duration of the Preceptorship Programme was adequate to complete the objectives in the portfolio?		
If no please clarify:		
6. What did you like about the FNHC Preceptorship Programme?		
7. How do you feel the FNHC Preceptorship Programme could be improved?		

Thank you for taking the time to complete this questionnaire.

If you would like to discuss any aspect of preceptorship further than please contact the

**FNHC Education & Development Team**