



# Family Nursing & Home Care

## **Standard Operating Procedure Preceptorship Programmes**

October 2021

## Document Profile

<b>Type</b>	Standard Operating Procedures
<b>Title</b>	Preceptorship Programmes
<b>Author(s)</b>	Mo de Gruchy
<b>Category</b>	Clinical
<b>Version</b>	1
<b>Approval Route</b>	Organisational Governance Approval Group
<b>Approved by</b>	Organisational Governance Approval Group
<b>Date approved</b>	06/10/21
<b>Review date</b>	3 years from approval
<b>Document Status</b>	This is a controlled document. Whilst it may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, it should not be saved onto local or network drives but should always be accessed from the intranet.

## Version Control / Changes Made

Date	Version	Summary of changes made
Sept 2021	1	New SOPs to support delivery of the FNHC Preceptorship Programmes for District Nursing (Adults), Health Visitors, School Nurses and Community Children's Nursing Team.

## Contents

Introduction.....	4
SOP 1 Preceptorship Lead.....	6
SOP 2 Preceptors and Preceptees .....	7
SOP 3 Supernumerary and Probation Periods.....	9
SOP 4 Addressing Concerns.....	10
SOP 5 Programme Evaluation and Audit .....	11
SOP 6 Miscellaneous .....	12
Appendix 1 Preceptorship Programme Audit Tool.....	14

## Introduction

Family Nursing & Home Care (FNHC) in agreement with Health & Community Services (HCS) and Jersey Hospice Care (JHC), has a [Preceptorship Policy](#) in place which applies to all newly registered nurses, nursing associates or midwives employed within the Organisation.

Therefore this applies to those who are:

- Newly admitted to the NMC register who have completed a pre-registration nurse training programme either in Jersey or in the UK
- Nurses and midwives who enter a new part of the register
- Nurses and midwives newly admitted to the NMC register from other European and Nation States
- Nurses returning to practice following successful completion of a return to practice programme
- Newly registered nursing associates

Family Nursing and Home Care (FNHC) is committed to offering registrants the opportunity to access the benefits of a preceptorship programme that will:

- Support the transition of such registrants into work environments
- Facilitate the development of confidence and skills
- Be tailored so that such registrants have additional support from both a preceptor and line manager
- Be reviewed regularly to ensure it continues to meet the needs of new registrants

FNHC will ensure that there is a defined governance framework in place, including:

- an identified Preceptorship Lead
- a register of preceptors who have undertaken training and education in preparation for their role and hold the essential skills and qualities expected
- tracking and monitoring registrants from commencement through to completion of preceptorship
- preceptorship arrangements that meet and satisfy professional regulatory body and organisational requirements
- audit and evaluation of the preceptorship programme using agreed tools

These Standard Operating Procedures (SOPs) underpin the FNHC Preceptorship Programme and give details of how this will be delivered and are designed to be used alongside the FNHC Preceptorship Portfolios in place for:

- District Nurse (Adults)
- Health Visitor
- School Nurse
- Children's Community Nurse

## SOP 1 Preceptorship Lead

### **Purpose**

To define the role and responsibilities of the Preceptorship Lead

### **Scope**

All staff involved in the FNHC Preceptorship Programme

### **Core Requirements**

FNHC will identify a Preceptorship Lead who will be responsible for overseeing the preceptorship programme which may include:

- Identifying preceptors, knowing who they are and providing appropriate level of preparation and support
- Identifying relevant registrants requiring preceptorship and others for whom preceptorship is deemed beneficial
- Allocating or delegating the responsibility for identifying preceptors in time for the preceptees start date
- Monitoring and tracking completion rates for all preceptees
- Performing regular checks that the preceptor / preceptee relationship is working satisfactorily
- Identifying any development / support needs of preceptors or preceptees
- Measuring the effectiveness and impact of preceptorship programmes on retention and staff engagement, using an agreed audit tool and evaluations

## SOP 2 Preceptors and Preceptees

### **Purpose**

To define the responsibilities of Preceptors and Preceptees

### **Scope**

All staff involved in the FNHC Preceptorship Programme

### **Core Requirements**

#### Preceptors

FNHC will allocate practitioners with the appropriate skills to the role of preceptor prior to the commencement of the registrant's employment.

The preceptor must have been registered for a minimum of 12 months, preferably in the area that the preceptee is working in.

Although there are no formal qualifications associated with undertaking the role of preceptor there are qualities and skills considered essential to the successful facilitation of preceptee skill development and confidence building.

Preceptors should:

- Possess the ability to act as a professional role model
- Have effective communication, interpersonal, reflective, critical thinking and decision making skills
- Possess the ability to recognise cultural and individual diversity needs
- Demonstrate effective leadership skills, assertiveness and flexibility
- Be confident, competent and motivated in own role
- Be patient and possess the ability to guide the preceptee through complex activities and tasks

In addition to the allocation of a preceptor, preceptees may be allocated a 'buddy' who will be able to provide additional guidance and support in the absence of the preceptor or work collaboratively with the preceptor to develop knowledge, clinical skills and real time problem solving.

## Preceptees

Preceptee is the term used to identify a registrant undergoing a programme of preceptorship.

The preceptee will be expected to fully engage in the FNHC preceptorship programme, by attending meetings with their preceptor, participating in learning activities and ensuring they remain up to date with the organisational requirements for mandatory and statutory training.

All registered preceptees must take accountability for their professional practice, as part of the NMC Code of Professional Standards of Practice and behaviour for nurses and midwives.

All Nursing Associates must adhere to the standards as defined in the NMC Standards of Proficiency for Nursing Associates.

Accountability is recognised from the point of registration regardless of any support system in place.

As part of preceptorship, preceptees awaiting formal registration with the NMC and Jersey registration may have the opportunity to be employed by FNHC as a non-registered Support Worker (SW) until their registration is completed.

Whilst in this role, the SW will work under the delegated authority of a registered nurse. SWs must not undertake tasks or practice outside their level of competence and must work within their scope of practice. SWs will practice in accordance with the Code of Practice for Health and Social Care Support Workers in Jersey.



## SOP 3 Supernumerary and Probation Periods

### **Purpose**

To define the requirements of the preceptee's supernumerary and probation periods

### **Scope**

All staff involved in the FNHC Preceptorship Programme

### **Core Requirements**

#### Supernumerary Period

All preceptees will be entitled to an individualised period of supernumerary status at the commencement of preceptorship, which will be discussed and will be dependent on the preceptee's prior level of knowledge and experience.

The preceptee will utilise this period to familiarise themselves with their working environment and complete the induction and orientation checklist contained within the preceptorship portfolios.

Additionally preceptees will be required to access relevant FNHC policies and procedures complete an inventory of training as identified in their FNHC preceptorship portfolio.

#### Probationary Period

All registrants new to FNHC will undertake a six month probationary period, as set out in their Statement of Employment Terms.

The preceptor and preceptee will meet at defined intervals to review progress, as per the Preceptorship Programme Timeline. The preceptor will keep the preceptee's line manager up to date with progress and/or any concerns.

There will be an Interim Probation Review at Week 12 and an End of Probation Review at Week 24-26. The Probation Review Meetings will be completed by the preceptee's line manager using the appropriate documentation, or may be delegated to the preceptor as part of the preceptorship review. If the latter, the preceptor will ensure that the preceptee's line manager receives a copy of the completed form.

The preceptee will be advised by their line manager in writing whether their employment has become permanent or if their probation period has been extended.

Once confirmed as a permanent employee of FNHC, preceptees will invited to take part in an annual Performance Development Review meeting, as per [FNHC Staff Handbook](#).

## SOP 4 Addressing Concerns

### **Purpose**

To define how any identified concerns will be addressed.

### **Scope**

All staff involved in the FNHC Preceptorship Programme.

### **Core Requirements**

The preceptor and preceptee will agree and sign a preceptorship agreement, setting out expectations from both parties.

The preceptor and preceptee will meet at agreed intervals to review progress and set objectives.

It is important that preceptors and preceptees bring any issues or concerns to the attention of their line manager or professional clinical lead. Documentary evidence of these concerns must be recorded and the required action taken to resolve these issues.

If a member of staff has concerns about an individual's fitness for practice they must discuss this with the individual concerned and document this discussion, bringing it to the attention of the line manager or clinical lead who will decide what action is required.

Where a new registrant is unable to demonstrate the required standards of competency after 12 months, the preceptor will inform the line manager, who will discuss applying the Capability Policy as set out in the [FNHC Staff Handbook](#).

## SOP 5 Programme Evaluation and Audit

### ***Purpose***

To define how the FNHC Preceptorship programme will be evaluated and audited

### ***Scope***

All staff involved in the FNHC Preceptorship Programme

### ***Core Requirements***

As part of the continued review and development of the FNHC preceptorship programme, all preceptees and preceptors will be expected to complete an evaluation at the end of the programme. These are located in the Appendix section of the preceptorship portfolio. The feedback received will inform future preceptorship programmes ensuring the programme remains relevant and effective.

The FNHC Education team/Preceptorship lead will audit the Preceptorship programme using the checklist in Appendix 1 to ensure the programme continues to meet national and organisational requirements.

## SOP 6 Working Arrangements

### **Purpose**

To define various working arrangements within FNHC

### **Scope**

All staff involved in the FNHC Preceptorship Programme

### **Core Requirements**

#### Overtime Hours

During their probationary period, the preceptee is only able to undertake overtime hours within their designated team. On successful completion of probation, the preceptee may be able to undertake overtime hours in another team. If there are any practice related issues or concerns then these must be addressed prior to the preceptee being able to work any overtime hours in other areas.

#### Twilight/Night shifts

Preceptees will be able to be rostered onto twilight/night shifts dependent on the preceptee's prior level of knowledge and experience. Suitability for undertaking twilight/night shifts must be discussed with the preceptee, preceptor and line manager.

Preceptees must be suitably prepared for the responsibility of twilight/night shifts ensuring appropriate skill acquisition and knowledge base. It is important to ensure the preceptee is ready for the transition onto twilight/night shifts with opportunity for reflection and professional discussion.

Preceptees may only be rostered to work on these shifts with substantive staff and under no circumstances should a preceptee be rostered to work with agency or bank staff. Ideally, preceptees should be rostered with staff who have completed relevant nurse in charge competencies.

Those preceptees who do not feel ready to undertake twilight/night shifts should be offered a programme of development to support this.

#### Covering staff numbers in other areas

On occasions, it may be necessary to move staff across different teams to support delivery of care. Ideally, preceptees would not be moved during the first six months during probation; however, this is not always possible. All preceptees are accountable for their own practice and actions at the point of registration and

therefore must declare if they feel they are not competent to undertake any specific practises or tasks when asked to support other areas.

### Applying for jobs

Preceptees are able to apply for other jobs within FNHC once they have successfully completed their probationary period. If the preceptee is applying for another job internally then the employing team must agree to continue the preceptee's preceptorship programme and ensure a preceptor is allocated at the commencement of the preceptee's new role.

## Appendix 1 Preceptorship Programme Audit Tool

### Preceptorship Programme Audit Tool

<b>Name of Preceptee</b>	
<b>Name of Preceptor</b>	
<b>Type of preceptorship portfolio completed</b>	District Nurse(Adult)/Health Visitor/School Nurse/Children's Community Nurse (select one)
<b>Date preceptorship portfolio commenced</b>	
<b>Date preceptorship portfolio completed</b>	

If the answer to any of the following Outcomes is No, please give reason in Comments box

Outcome	Yes/No	Comments
Preceptor was allocated to preceptee at start of preceptorship programme		
Allocated preceptor had at least 12 months experience in practice area		
Preceptor and preceptee had opportunity to meet prior to start of programme		
Preceptee was allocated a supernumerary period suited to their needs		
Week 1 Preceptorship Meeting completed and documented, including Preceptorship Agreement		
Week 4 Preceptorship Meeting completed and documented		
Week 12 Preceptorship Meeting completed and documented		
Week12 Interim Probation Review meeting completed and documented		
Week 18 Preceptorship Meeting completed and documented		

Week 24 Preceptorship Meeting completed and documented		
Week 24-26 End of Probation Review meeting completed and documented		
Weeks 24-52 Preceptorship Meetings completed as required/agreed and documented		
Week 52 End of Preceptorship Meeting completed and documented, including Sign Off Declaration		
Identified objectives have been achieved by the end of the Preceptorship Programme		
Preceptor has kept preceptee's line manager updated with their progress and any concerns raised		
Any concerns raised during the programme have been addressed appropriately		
If there was any change of preceptor during the programme, please give reason		

**Any action/follow up required**

--