

# A TOOLKIT FOR PRECEPTORSHIP

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### Aims and outcomes

This project reflects a mixed methods design to address the following project aims:

- To review current preceptorship programmes within NHS Trusts in the North West Region and ascertain the impact of these programmes upon retention of newly qualified nurses and midwives
- To design and pilot, based upon best evidence, a preceptorship framework
- Evaluate the impact of the pilot programme upon retention of newly qualified nurses and midwives
- Evaluate the pedagogic rigour of the programme and suggest recommendations for modification





Online Survey



Content Analysis



Ethnogeographical Interviews

Steering committee



### Online Survey

- Set up on BOS (Bristol Online Survey)
- Sent to 42 Trusts (100%)
- Replies from 23 Trusts (56%)
- Requested Preceptorship policies and frameworks 18 Trusts sent documents (43%)



# Content Analysis of Preceptorship Documents

- There is no one framework that could be universally applied (all Trusts are different)
- However, key / core elements
- Multi-professional, multi-disciplinary programme advantageous



## Ethnogeography

- Walking and talking!
- Appreciative Inquiry
- R&D approval 5 Trusts
- Small sample 2 midwives, 3 nurses



### Challenges

- Time
- Preceptor training
- Preceptor style
- Lack of clarity
- Challenging established practice?

### Benefits

- Sense of belonging
- Value preceptor input
- Supernumerary period
- Preceptorship as a 'team' Trust wide
- Acculturation
- Confidence building



### Midwives

- Longer period of time to achieve the post qualification competencies to progress to band 6
- Fear of the unknown BUT on reflection not so bad!
- Difficulty meeting with preceptor
- Enhance CV
- Educational link midwife
- Support is crucial team working



# Where do you see yourself in 5 years time?

- Working closer to home
- Moving Trusts to gain different experience smaller Trust/ larger Trust
- Specialising

BUT no one expressed a desire to leave their chosen professional discipline – preceptorship had been a significant factor in fostering this outcome.



### Key messages

- No ONE framework to fit all
- Monitoring spend fiscal allocation from HEE NW money. Tracking and reporting
- Monitoring attrition rates uniformly across Trusts
- Transition from student to practitioner different journey for nurses and midwives
- Innovation in curricular design closer relationships between HEI's and Trust partners
- Ensuing future development maps against and are compliant with National Guidelines and KPI's



## Moving on....

- Ran preceptorship conference on 4<sup>th</sup> November 2015
  - Sharing best practice and project findings
  - Building links with those responsible for preceptorship in practice
- Used feedback from conference
- Revisited overall aims and objectives
- Sat down with HEE NW





### **Preceptorship: Learning Together**

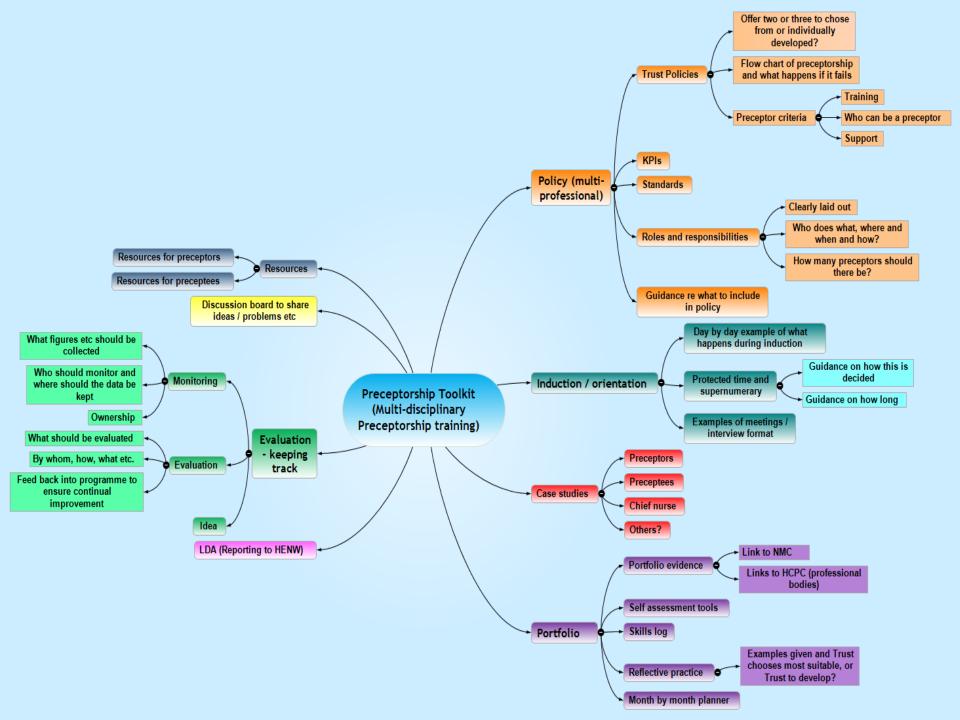
November 4th 2015: University of Chester, Warrington Campus

10.00 - 10.05	Welcome and introductions
10.05 - 10.15	Context Setting: Libby Sedgley, Programme Manager Education Commissioning HENW
10.15 - 10.45	Update from National Preceptorship Steering Group: Kim Leigh, Nursing Education and Workforce Lead HENW
10.45 - 11.15	Project Findings: An Overview Dr Lou Taylor and Dr Charlotte Eost-Telling, University of Chester
11.15 - 11.30	Coffee
Session 1: Practice Perspective	
11.30 - 11.45	Preceptee Perspective: Stephanie Daye, Derbyshire Community Health Services NHS Trust
11.45 - 12.00	Preceptor Perspective: Sarah Hardman, Central Manchester University Hospitals NHS Foundation Trust
12.00 - 12.10	Questions to Panel
12.10 - 12.55	Lunch
Session 2: Preceptorship Exemplars	
12.55 - 13.15	Central Manchester University Hospitals NHS Foundation Trust: Caroline Williams
13.15 - 13.35	The Christie NHS Foundation Trust: Patricia Kelly
13.35 - 13.55	Salford Royal NHS Foundation Trust: Julianah Oluwasakin
13.55 - 14.05	Questions to Panel
Session 3: Workshop	
14.05 - 14.50	Workshop and Refreshments
14.50 - 15.00	Concluding Remarks



## Moving on....

- Worked with members of the steering committee Jan 2016
- Co-producing the Toolkit with key stakeholders
- Will be hosted by HEE NW
- E-win web space



### Multi-disciplinary Preceptorship training

#### 1. Multi-professional Policy

- 1.1. Trust Policies
- 1.2. KPIs
- 1.3. Standards
- 1.4. Roles and responsibilities
- 1.5. Guidance on policy content

#### 2. Induction / orientation

- 2.1. Day by day example of what happens during induction
- 2.2. Protected time and supernumerary
- 2.3. Examples of meetings / interview format

#### 3. Case studies

- 3.1. Preceptors
- 3.2. Preceptees
- 3.3. Chief nurse
- 3.4. Others?

#### 4. Portfolio

- 4.1. Portfolio evidence
- 4.2. Self-assessment tools
- 4.3. Skills log
- 4.4. Reflective practice
- 4.5. Month by month planner

#### 5. LDA (Reporting to HEE NW)

5.1. Metrics for reporting

### 6. Evaluation - keeping track

- 6.1. Monitoring
- 6.2. Evaluation

#### 7. Discussion board to share ideas / problems etc?

#### 8. Resources

- 8.1. Resources for preceptors
- 8.2. Resources for preceptees



### Preceptorship Toolkit

- Live evolving Toolkit
- Bottom up nature and ownership by Trusts
- Relocates this within the Trusts
- Trusts can use as much or as little as they need....a useful resource, not a mandate