

A PRECEPTORSHIP CASE STUDY

The voices of experience



I recently spoke with **Peter Iliff** and **Holly Taylor**, of TayCare Medical, about their experiences of preceptorship, from the perspective on an employer and someone who has recently completed a preceptorship programme. Here's what they had to say.



Peter, what value do you think preceptorship brings to your service and the new graduates who are joining your team?

The key message is around building confidence; a framework of confidence around the graduate coming into the service. That's for the benefit of them as an individual and, I think, for TayCare as an employer, but also for the NHS service in which they'll be working. Obviously, there's an investment for everybody. Each of those three stakeholders are heavily invested in the appointment of a new graduate. I think it's incumbent on us, as employers and the NHS service where we work, to make sure there is that supportive approach.

We recognise the vulnerability of a new graduate when they first start work. Therefore I think having a process that aims to build confidence is important. We know it'll make it more likely that an individual will stick around, and we'll get a return on our mutual investment in that person. But it also provides an element of safety and assurance to the NHS, knowing that person is likely to practice in the best interests of the patient. So, it's also an investment that benefits the patient as well. When done well, we all benefit.

Holly, what difference do you think your preceptorship programme made to you as you were settling into your first post as a registered clinician?

I think it was the confidence. The confidence thing is massive as you start out. Through preceptorship, you

build your competence as well as your confidence, and they gradually grow together. Preceptorship gave me that dedicated, structured time to allow that to develop.

What were the key features of the preceptorship programme that you went through?

A key part was dedicated time to reflect. I think that was a massive part of it. The reflection and seeing how far you have come helps build confidence. You can look back to a point three months ago and see how far you've come and where you're going now, and set plans for the next three months and beyond that.

I worked quite closely with my preceptor. We had regular informal discussions and set up dedicated times every three months to review progress and plans and work towards goals and building confidence and competences.

What was the thing that you valued the most about your preceptorship?

Looking back, I think how far it does support you to progress. I think that reflection makes you realise what you've achieved and how far you've come, how your patients have responded to the way you work with them, and how that influences the outcomes of your patients.

Peter, how challenging, or otherwise, was it to set up a preceptorship programme for TayCare?

There's a requirement to put some resource into it. That includes employing the person who is almost effectively supernumerary for most of the first year.

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We transition them into a more productive role over time. The environments we work in are not like in a physio team, for example, where you might have six or seven plinths and a new graduate could be accommodated within that space which can provide a supervisory element to it. Very often, in orthotics, we'll only have one clinic room in a hospital. That means you effectively have two orthotists working one patient list for a period, until it's safe for the recent graduate to work independently, potentially in an adjacent room or down a corridor, or potentially even in another hospital. So, you have to build that financial commitment into recruiting a new graduate and supporting them as part of the training programme you provide.

There's also developing and running the programme itself. That requires investment in developing the overall approach and the resources that document development of preceptees, and in releasing time of preceptors to provide support and guidance.

As Holly said, while preceptorship isn't focused on competence, I do think the two are intrinsically linked. There's a lot of technical things that we need to learn to do. If you're not able to do those things, you're not able to develop that confidence. Having a framework to document the development of competencies helps to embed the knowledge, skills and behaviours required in that environment. Competence and confidence reinforce each other.

So, there's investing in the documentary side of it, but the preceptors themselves also need to be supported, appropriately trained and to feel confident in their role. If they feel confident as a preceptor as well as a clinician, they'll communicate and help spread that confidence to the preceptee. You need to have a functioning team in which people are confident in their roles and they're resourced to fulfil them.

It is challenging because, like everywhere else in the NHS, we're all hard pressed. Everyone's working super-hard. So you've got to arrange your preceptorship offer in such a way that it's effective and relatively efficient. There is a tension created by employing a new graduate who's not going to be productive from day one. But you want to ease them into a place where they are productive and they're

confidently contributing to the improving the health of that population.

What are the benefits of front-loading that investment in the new human who's joined your team? How do you see that playing out over time?

I think it's essential. The data suggests that type of investment in training and support, and what morphs from preceptorship into a longer CPD journey, will encourage people to stay within the profession. I think you need to be honest with yourself as an employer and say this is not a short term investment. We need to look to the medium and the long term. And if we do it right ... we won't necessarily do everything right ... but if we learn on that journey and we implement those learnings, then there is a high probability that we'll end up with a fantastic orthotist (at TayCare, we only employ orthotists) who's confident and is going to stick with us. We would always hope someone will stay with us for five years. I think that's the kind of vision that we have when we take somebody on.

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So Holly, what advice would you give to new graduates heading towards their first role as a registered clinician when it comes to engaging with preceptorship?

Do really engage with it. It helps, not just with confidence, but with skills that last beyond the preceptorship as well. And those reflection skills, those relationships with your preceptor, are really important, too. Coming out of it, you'll have more confidence. And you'll build on that confidence; it will still a work in progress. It always will be. There'll always be something new in clinic. And preceptorship builds those relationships and builds reflective practice that you can take forward.

It is really beneficial. It's definitely helped me and my confidence in going forwards. It's definitely worth the investment.