

Psychological Practitioner Preceptorship

Quick Reference Guide

Elements for inclusion in individual preceptorship plans

These points are recommended for inclusion in Psychological Practitioner Preceptorship to ensure preceptorships align to the principles within the guidance.

1. Support attendance at a multi-professional preceptorship programme if appropriate

Line managers/preceptors to consider the appropriateness of their Organisations Multi-Professional Preceptorship Programme or equivalent for their preceptee.

- Will it cover topics and contribute effectively to support the goals and development of the preceptee as a newly qualified Psychological Practitioner?

In addition, it is considered best practice to complete elements of the wider preceptorship, where appropriate, alongside other preceptees, of the same or other roles. Services and preceptors should consider how this can be achieved in their area.

Consideration will be needed as to the appropriate fit of the preceptorship programme where psychological practitioners are not new starters within the team but are transitioning to a qualified position.

2. Provide transition to qualified information

Supervision requirements

Line Management, Caseload Management Supervision (CMS) and Clinical Skills Supervision (CSS) are mandatory requirements of all the Psychological Practitioner roles. On qualification, these are as per the table below. At the initial preceptorship meeting the preceptor should ensure written agreements of these requirements is in place for the preceptee. The preceptee should keep a supervision log.

	CWP	EMHP	PWP	MHWP
CMS	1hr per fortnight	1hr per fortnight	1hr per week	30 mins per week
CSS	1hr per fortnight until 6 months post qualified then 1hr per month	1hr per fortnight until 6 months post qualified then 1hr per month	1hr a fortnight	1hr a fortnight

Graded Increase to Qualified Caseload

This should be individualised with an agreed graded approach during the preceptorship year. It can be set in the preceptor and preceptee initial meeting and progress should be monitored.

Registration

Newly qualified Psychological Practitioners should begin the process of registration with either BABCP or BPS as soon as they are eligible.

3. Organise observed practice

All qualified Psychological Practitioners should complete a minimum of two observed practices a year. These can be observed live or recorded via video or audio. This is aligned to registration requirements. During the preceptorship period it is good practice to include additional observed practice and joint work with a supervisor. The number of these may depend on individual progress and development.

Preceptorship reviews can help plan for these and learning goals can also be developed from feedback.

4. Enable reflective practice using an appropriate model

The use of an appropriate reflective model that the preceptee/preceptor are familiar with (e.g. Gibbs, Kolb, Rolfe, Driscoll) can allow the preceptee to complete written reflections, relevant to their scope of practice.

For example:

- Challenge/Discomfort
- Risk
- Positive Outcome
- Co-morbidity
- Building therapeutic relationships

Review of these reflections with the preceptor will support consolidation of understanding, learning and identify areas for development. These can be reviewed in the preceptorship meetings and help to guide goals and development.

5. Support continuing professional development (CPD)

All Psychological Practitioners are required to undertake CPD to gain/maintain professional registration. The registering bodies¹ provide details and examples of appropriate CPD and forms for recording. There is also PPN Psychological Practitioner CPD Guidance available².

Psychological Practitioners may express interest in a specific area (e.g. As a PWP - Older Adults in NHS Talking Therapies), which may lead to the development of specific goals within the preceptorship.

There are CPD examples which are generic to all roles i.e. Equality, Diversity and Inclusion (EDI); however, there are also examples which are role/service/setting specific:

CWP Examples include:	EMHP Examples include:	PWP Examples include:	MHWP Examples include:
<ul style="list-style-type: none"> • Community Engagement • Parent Led Approaches • Groups 	<ul style="list-style-type: none"> • Whole School Approach • Parent Led Approaches • Groups 	<ul style="list-style-type: none"> • Long Term Conditions (LTCs) • cCBT • Groups 	<ul style="list-style-type: none"> • Multidisciplinary team working • Drug and Alcohol Services • Groups

¹ Wider Psychological Workforce Registration | BPS; BABCP: About Wellbeing Practitioner Registration

² PPN Psychological Practitioner Continuing Professional Development (CPD) Guidance

6. Refine clinical skills:

Personal Development Planning

Goals should be individualised and set in the preceptor and preceptee initial meeting. Progress should be monitored during review meetings and the final meeting.

Shadowing

This can be utilised as part of the preceptorship to support the development and consolidation of skills. It should be linked to specific goals and relevant to the role and remit of the Psychological Practitioner. This can be live or achieved through recorded sessions reviewed in supervision.

Training other professionals

In the Preceptorship year this could consist of supporting and increasing the understanding of the Practitioner role and remit with other Professionals, Peer Support within role or informal mentoring of trainee Psychological Practitioners.

Publication

Writing and research can be important in regard to increasing understanding of a role. They can support personal development and reflective practice, as well as having potential wider impact. If a Preceptee has an interest (e.g. a specific intervention, patient-group or in relation to lived experience) this can be linked to goals and discussed in review meetings.

7. Support wellbeing

Wellbeing is key to staff retention. The NHS has developed a number of resources nationally and locally that support staff wellbeing. Preceptors should be aware of what is available in their organisation and support preceptees to access as appropriate.

8. Explore leadership

The [NHS Healthcare Leadership model](#) shows that leadership in the NHS can come from all staff.

Although more likely to be post the preceptorship period, an individual who shows an interest in developing specific leadership skills may wish to explore with their preceptor learning and goals related to leadership development in review or final meetings. Consider available leadership programmes available locally or through national structures.

9. Checklist for preceptors

Preceptors may find the below checklist useful as they begin their role. Please note that some of the suggested tasks may be ongoing beyond the preceptorship year.

1 Initial meeting and planning with preceptee			
	Task	Started	Completed
(a)	Set up initial meeting with preceptee within the preceptees first week of starting in role.	<input type="checkbox"/>	<input type="checkbox"/>
(b)	Go through the Preceptorship Guidance with preceptee. Agree together: <ul style="list-style-type: none"> • Timings and meeting places for future meetings. • How you will implement the tailored preceptorship and document how you will work together. • Digital or paperwork recording and templates you will use. 	<input type="checkbox"/>	<input type="checkbox"/>
(c)	Work with preceptee to identify areas for development.	<input type="checkbox"/>	<input type="checkbox"/>
(d)	If part of a multi-professional preceptorship programme, ensure the preceptee has access to profession specific input either within or external to the organisation	<input type="checkbox"/>	<input type="checkbox"/>
(e)	Engage with and support preceptorship evaluation and improvement projects.	<input type="checkbox"/>	<input type="checkbox"/>

2 Preceptor development			
	Task	Started	Completed
(a)	Have an awareness of the PPN Psychological Practitioner Preceptorship Guidance	<input type="checkbox"/>	<input type="checkbox"/>
(b)	Complete the Multi-Professional Preceptor e-Compendium training. As part of the above training: <ul style="list-style-type: none"> • Complete Preceptor Skills Checklist (provided as part of the training) for your own ongoing development, use this to identify current strengths as well as opportunities for development. 	<input type="checkbox"/>	<input type="checkbox"/>

	<ul style="list-style-type: none"> Complete the Organisational Checklist (provided as part of the training) and contact Preceptorship Champions and/or Leads to support your understanding as required. 		
(c)	Scope out and identify relevant training, development and networking opportunities within your organisation, system and professional body which will allow you to update and develop in the role. This may include additional skills-based training such as coaching, supervision and reflective skills. This may also include work related to the Lived Experience voice.	<input type="checkbox"/>	<input type="checkbox"/>
(d)	Familiarise yourself with your organisations paperwork related to preceptorship such as policy, portfolio and meeting templates, role descriptors and protected time for preceptees and preceptors.	<input type="checkbox"/>	<input type="checkbox"/>
(e)	<p>Discuss and agree with your Line Manager your protected time for:</p> <ul style="list-style-type: none"> Meeting your preceptee Preceptor role related training and development Any other preceptorship related activity <p>Refer to your organisation's preceptorship policy</p>	<input type="checkbox"/>	<input type="checkbox"/>