

# General Practice Nursing Preceptorship & Assessment Booklet

FOR NEWLY QUALIFIED NURSES OR THOSE  
NEW TO A GENERAL PRACTICE NURSING ROLE





# Foreword

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For many years it has been recognised that following qualification nurses should undertake a period of Preceptorship, whereby they can consolidate the pre-registration learning and work on areas of required growth and consolidation with the guidance of a clinical mentor/supervisor.

NHS East of England are delighted to put forward to you a detailed and specific booklet for the Preceptorship of Nurses in General Practice. This booklet offers examples of areas that you may wish to consider in more detail in this new role and suggests a framework by which individual practitioners can be assessed or evidence their own professional growth.

We would highly recommend the utilisation of this framework to act as a standardised tool to help the transition of newly registered nurses to their role within the General Practice setting or for those nurses new to the general practice nursing role.



Handwritten signature of Kathy Branson.

**Kathy Branson**  
Deputy Chief Nurse  
NHS East of England

Handwritten signature of Michelle Gallifent.

**Michelle Gallifent**  
Head of Education & Development  
NHS East of England

This toolkit has been compiled by Jackie Jones,  
Primary Care Placements/Special Projects,  
on behalf of NHS East of England, Multi-Professional Deanery.

#### Acknowledgements:

Jenny Fryer, Norfolk PCT (2006)  
Working In Partnership Programme (WIPP), General Practice Nursing Project (2007)

**This booklet is confidential and will remain the property of the practitioner.**

Name:

Job title:

Organisation:

Contact details:

Notes:

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# Introduction

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Preceptorship is an important element of the Post Registration Education and Practice Proposals put forward by the NMC (UKCC) in 1990 but is equally valid for all newly qualified clinical staff and for those moving on to new jobs or areas of work.

Preceptorship should be under the guidance of a preceptor who should be a first level clinician with at least 12 months experience in the clinical area where the preceptorship is to take place. In addition to the NMC guidance the NHS East of England also advocates that all preceptors should hold a regularly updated Mentorship in Public Service Certificate or other suitable qualification as agreed for other disciplines i.e. therapists.

The preceptorship programme has been introduced to assist newly qualified staff in consolidating their course content and helping them to translate theoretical knowledge into practical skills within general practice nursing. It is also a useful tool for those moving into general practice nursing for the first time.

Beginning a new role causes much anxiety and this period of support should help you in the transition from student to qualified clinician or from one post to another. You are accountable for your practice but can expect support from your colleagues during this period. There is no prescribed length because all learning is individual, however it is envisaged that 6-12 months will allow you to further develop your professional and reflective skills, which will assist you in becoming a competent practitioner in your new role.

The preceptorship programme comprises of three main components:

- a) orientation to the clinical area
- b) support and supervision in the clinical area
- c) further development of the skills you have already acquired and development of new skills pertinent to your clinical area

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Whilst Preceptorship or Induction into a new role is variable there are certain requirements which must be met. You should expect:-

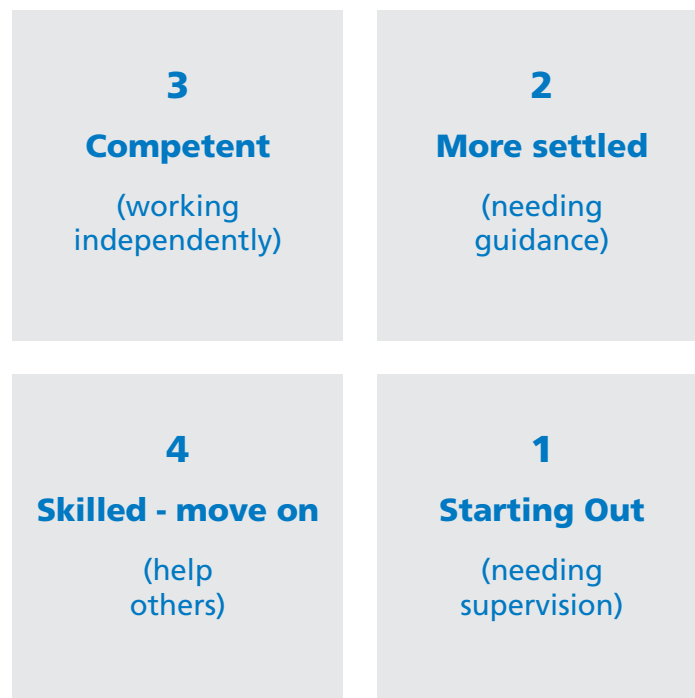
- Immediate identification of your preceptor/assessor on appointment. You may have both a main and associate preceptor/assessor and should expect to be allocated a second preceptor/assessor if one member of staff is unavailable to you for prolonged periods
- An orientation to your area or base prior to your first day on duty
- An orientation to other staff in your area and the appropriate management structure, relevant to the work place within your first week of work
- A formal meeting with your main preceptor/assessor in the first week to establish your learning needs and to identify learning opportunities. This may include skills acquired during your training which may need further development as well as new skills pertinent to your area of work
- A proportion of your time during the preceptorship programme will be spent working with your preceptor/assessor. The precise amount of time will vary according to your needs, development and progress. You may be working directly alongside them or they may be in a co-ordinator role. Whichever applies you should have access to your preceptor/assessor and be able to raise relevant issues or seek clarification in the course of your day
- Whilst communication with your preceptor/assessor is ongoing you should also have a formal meeting part way through your preceptor period and again at the end of the preceptorship programme to assess your progress and development

This pack contains general information on appraisal and personal development plans. The NHS East of England is committed to Lifelong Learning and you are encouraged to continue your clinical and personal development throughout your career.

# Lifelong Learning

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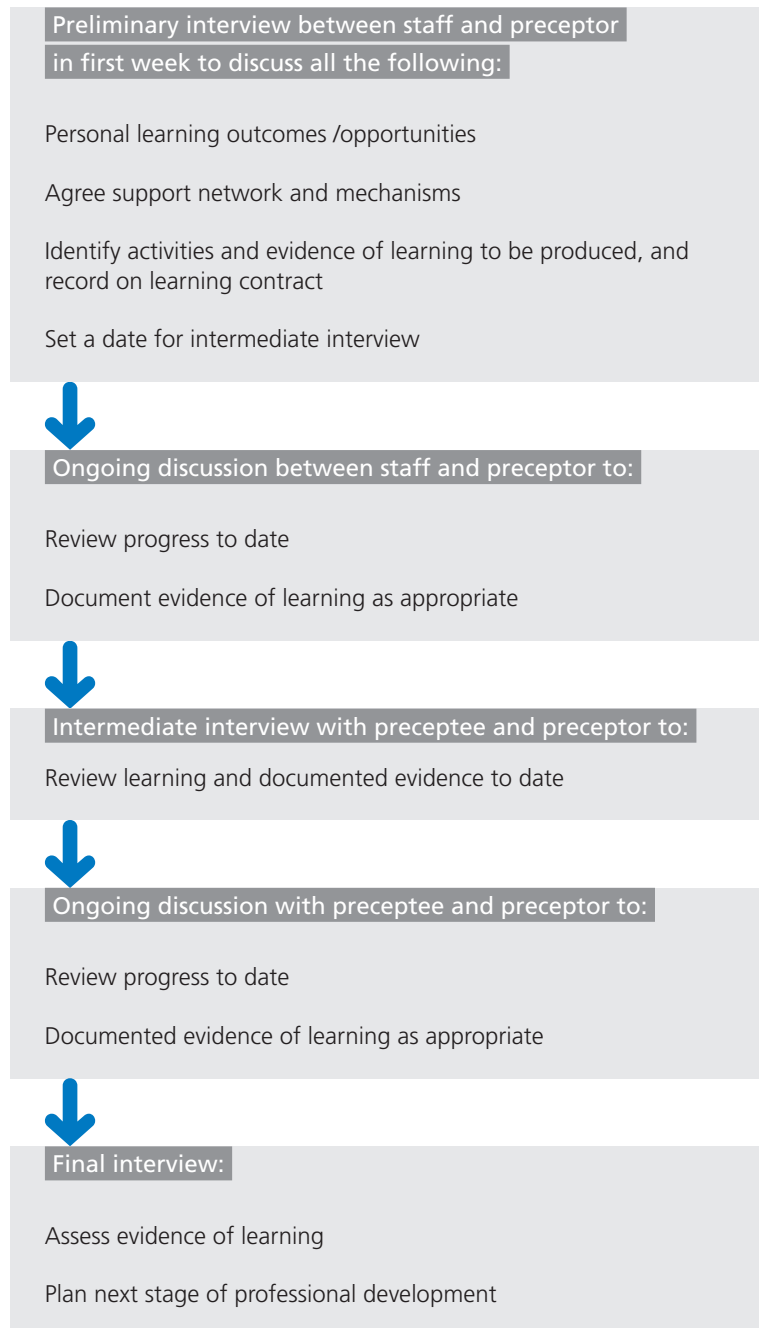
Starting any new job requires a learning phase and this is often a perpetual circle. We should not feel the need to apologise when we join the circle again at No 1 many times in our lives.



*Adapted from: Luft J., Ingham H., (1955)  
The Johari Window, a graphic model of interpersonal awareness.*

# Flowchart of Preceptorship Programme

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# Reflective Cycle

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Use a notepad so that you write things down  
as it helps to clarify things later

Discuss ideas with your preceptor

Use the reflective cycle to learn from your experiences  
(Gibbs 1988)

Please remember that patient information is confidential

**Describe**, what happened?

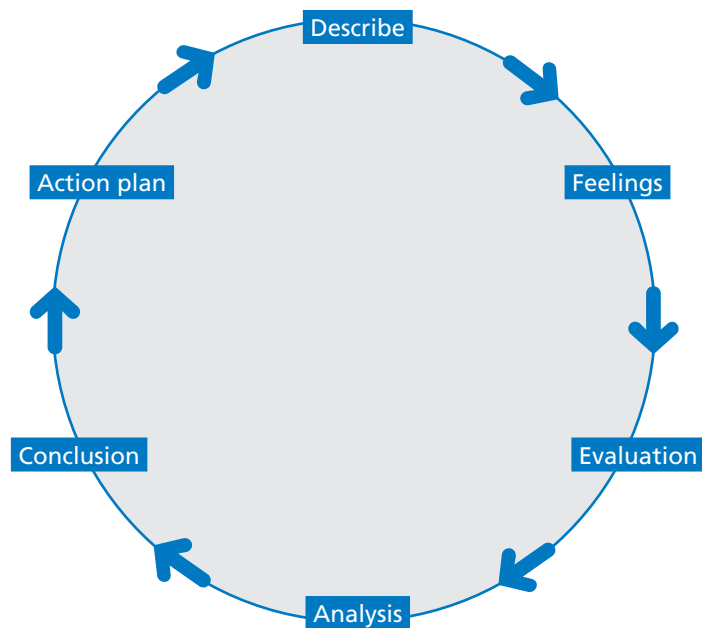
**Feelings**, what were you thinking and feeling?

**Evaluation**, what was good or bad?

**Analysis**, what sense did you make of it?

**Conclusions**, what else could you have done?

**Action plan**, what will you do if it happens again?



(Gibbs 1988)

# Appendices

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# Support

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The first element of preceptorship is support.

This support is aimed at easing your transition from a student to a registered clinician or from one post to a new one. Preceptors are guides/supporters as well as colleagues who are a valuable resource of help, both professionally and personally.

The level and frequency of this support will vary between individuals and therefore it is necessary for you to consider the nature and level of support you may require. As a guideline, you may wish to spend a minimum of one shift a week with your preceptor or assessor and this will need to be agreed with your preceptor as sufficient to meet your needs.

Listed below are some questions that may assist you in establishing the most appropriate support network.

1. Who is best placed to provide you with the support that you may need?
2. How frequently do you wish to meet this person to discuss your learning and progress?
3. How often do you wish to work (on the same shift) with this person?
4. What are the 'ground rules' for this support?
5. How are you going to document your discussions and interactions with your preceptor?

Having considered these questions, it would be appropriate to negotiate this with your preceptor and document your discussions. It is also necessary to record on your intermediate and final interview sheets, the level of support you have received and any problems/issues that may have prevented the agreed support network from functioning efficiently.

# Support Network Discussion

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Please record the following:

- 1. The name of the person who is able to support you

Two horizontal grey bars for recording the name of the person who is able to support you.

- 2. How often will you meet?

Two horizontal grey bars for recording how often you will meet.

- 3. The ground rules for the sessions are (e.g. length of session, venue, formal/informal, in addition to assessment sessions?)

A large area with 25 horizontal grey bars for recording the ground rules for the sessions.

# Learning Contract

It is essential that you complete this learning contract in order to document the learning activities that you will undertake. Please photocopy this sheet as often as necessary.

**Agreed Activities**

(How will they be achieved?)

**Timeframe**

(By what time will it be achieved?)

1	
2	
3	
4	

**Agreed Evidence**

(How will learning be demonstrated?)

1
2
3
4

Signature of Assessor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Practitioner \_\_\_\_\_ Date \_\_\_\_\_

# Initial Interview

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Please record the outcome of your negotiation with your preceptor/assessor with emphasis on the following:

1. Orientation/Induction into workplace


2. Support


3. Nursing skills


Signature of Assessor	Date
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Signature of Practitioner	Date
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# Clinical Supervision

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Clinical supervision brings practitioners and skilled supervisors together to reflect on practice. Supervision aims to identify solutions to problems, improve practice and increase understanding of professional issues.

Clinical supervision is not a management tool and it is not the same as your appraisal and personal development plan. Nor is it the same as counselling and has nothing to do with someone looking over your shoulder whilst you carry out a skill.

Clinical supervision is important to you as a learner in a new area of work. The type of supervision individuals should have can vary, clinical supervision can occur in groups, on a one to one basis or through networking.

Clinical supervision can provide support to you. There are many staff within Healthcare Trusts who have clinical supervision and many state it is very beneficial, helping to increase job satisfaction and morale.

“Once qualified you cannot be expected and should not be allowed to ‘go it alone’ for the next forty years of practice. Clinical supervision is for you, for the profession and for our patients”

*Fowler. J. (1998) The Handbook of Clinical Supervision – Your Questions Answered. Salisbury. Quay Books*

# Programme Evaluation

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1. Please comment on the period of time allowed for the Preceptorship/assessment programme.

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2. What were the positive aspects of the programme?

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3. What could be improved?

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4. With regards to the booklet, what would you change?

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5. Please offer any other comments (please continue on a separate sheet)

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Please photocopy and return the evaluation form (anonymous if preferred) to:  
Jackie Jones. Primary Care Placements/Special Projects. NHS East of England Multi-Professional Deanery.  
Victoria House, Capital Park, Fulbourn, Cambridge. CB21 5XB  
jackie.jones@eoe.nhs.uk

# Assessment Section

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# Skill Assessment Checklist

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The range and scope of a practice nurse's work is highly variable and this tool represents a basic guide and can be changed according to the job description and the requirements of the practice.

The assessor can only deem the individual to be competent at the time of observation and completion of this assessment form.

The assessor cannot be held individually responsible for the individual's future action but must only sign to state the individual is competent when it is adequately demonstrated.

It is recommended that columns 1 and 2 should be completed within the first 3-6 months and the remaining two columns 3 and 4 should be completed within 6-12 months of commencing employment, although this may vary according to the hours worked. Any outstanding competencies should be completed as part of continuing professional development and the job description of the individual role.

Associated theoretical knowledge is usually best provided by an accredited course however prior knowledge or experience can be accepted if it is presented in a form of verifiable evidence.

## Skills assessment using a rating scale

1. Not encountered yet
2. Observed only
3. Performed under supervision
4. Competent and performed independently

Name of Assessor

Name of Practitioner

## 1. GENERAL PRACTICE ORGANISATION

	1	2	3	4	Signature of Assessor
Understands the profile of general practice and the funding arrangements for income generation					
Understands the roles and responsibilities of the members of the primary health care team with appropriate knowledge of who to refer to					
Demonstrates teamwork skills through working in a way that is complementary to others and contributes at team meetings					
Contributes to compilation of disease registers in general practice					
Awareness of confidentiality issues relating to general practice					
Contributes to practice development plans					
Awareness of primary care trust structure and professional leadership for practice nurses					
Ability to use information technology (IT) within consultations and for audit purposes					
Understands the income sources in general practice and the importance of contributing to the Quality and Outcomes Framework					

## 2. SCOPE OF PROFESSIONAL PRACTICE

	1	2	3	4	Signature of Assessor
Demonstrates clarity of role including defined parameters of practice, accountability and responsibility					
Participates in appropriate delegation of tasks with understanding of personal responsibilities					
Undertakes continuous personal development in order to provide evidence based care					
Participates in clinical supervision activities					

### 3. RISK MANAGEMENT

	1	2	3	4	Signature of Assessor
Understands the current health and safety policies and own role and responsibilities					
Works in a manner that demonstrates personal safety					
Able to initiate correct procedures for dealing with complaints					
Records patient contact and interventions appropriately and reports critical incidents/ significant events					
Demonstrates use of confidentiality in line with NMC and Caldicott guidelines					

### 4. CLINICAL EFFECTIVENESS

	1	2	3	4	Signature of Assessor
Demonstrates ability to reflect critically and learn from experience					
Contributes to the audit process					
Knows how to access IT and other information to improve practice					
Uses critical appraisal skills in determining the strength of evidence for practice					
Provides care that is evidenced based					
Works according to protocols and guidelines in practice and contributes to their compilation					
Aware of national and local policies that influence the practice nurse role					

### 5. CHILD PROTECTION

	1	2	3	4	Signature of Assessor
Understands personal role and responsibilities					
Aware of national and legal acts and policies					
Aware of local policies					
Referral when necessary to appropriate health professionals					
Aware of general practice procedures within child protection					

## 6. MENTAL HEALTH

	1	2	3	4	Signature of Assessor
Basic knowledge of mental health problems					
Ability to identify 'at risk' patients					
Uses basic rating scales for mental health assessment as appropriate					
Initiates referrals to appropriate health professionals					

## 7. IMMUNISATION

	1	2	3	4	Signature of Assessor
Able to advise patients in the immunisation programmes according to local and national guidelines					
Participates in specific training to administer medicines using patient group directions					
Able to recognise and initiate management of adverse reactions and anaphylaxis					
Demonstrates appropriate handling of children and gaining consent					
Uses appropriate voluntary, social and health care agencies for further information					
Demonstrates safety in maintaining the cold chain					

## 8. RESUSCITATION

	1	2	3	4	Signature of Assessor
Annual attendance at basic cardiopulmonary resuscitation (CPR) training					
Regular maintenance and checking of equipment					

## 9. ANAPHYLAXIS PROCEDURES

	1	2	3	4	Signature of Assessor
Undertaken specific training to administer adrenaline in emergency situations using patient group directions					
Familiar with the techniques of resuscitation for a patient with anaphylaxis					
Able to use basic emergency equipment					

**10. WOUND CARE**

	1	2	3	4	Signature of Assessor
Works according to local policies and procedures					
Determines and implements appropriate treatments for superficial wounds					
Assessment and removal of sutures					
Assessment and removal of clips					
Provides teaching and information on skin care to patients and junior staff					
Initiates appropriate referral to senior colleagues, specialist nurse or GP					

**11. INFECTION CONTROL**

	1	2	3	4	Signature of Assessor
Awareness of and adherence to policies and procedures for decontamination, sterilisation, infection control and maintenance of equipment					
Protection of patient, self and other staff when dealing with body fluids					
Undertakes adequate hand washing techniques					
Undertakes and teaches correct procedures for cleaning surfaces					
Undertakes and teaches safe processes for the collection handling and disposal of waste					
Undertakes and teaches safe practice in receiving and handling specimens in the practice					

## 12. VENEPUNCTURE

	1	2	3	4	Signature of Assessor
Received appropriate training in taking blood samples					
Uses the correct technique and equipment					
Correctly labels specimens and forms					
Knows the system for safely transporting specimens to the laboratory					
Aware of appropriate bottles to be used for common diagnostic tests					
Participates in safe systems for relating results and reporting abnormal results					
Gives appropriate information to patients					

## 13. LONG TERM CONDITIONS

Asthma	1	2	3	4	Signature of Assessor
Understands the pathophysiology and therapeutic management					
Understands and explains the triggers and influence of lifestyle					
Undertakes history taking, reversibility tests and exercise tests					
Recognises emergency situations and initiates management according to local or practice guidelines					
Refers to appropriate health professionals as necessary					
Chronic Obstructive Pulmonary Disease	1	2	3	4	Signature of Assessor
Understands the pathophysiology and therapeutic management					
Understands contributory factors and advises patients accordingly					
Undertakes history taking, diagnostic and screening tests as required					
Refers to appropriate health professionals when needed					

<b>Diabetes</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Signature of Assessor</b>
Understands the pathophysiology and therapeutic management					
Understands and teaches patients and carers on contributory factors					
Undertakes history taking, diagnostic and screening tests to monitor condition					
Refers to appropriate health professionals when needed					
Recognises emergency situations and initiates management according to local or practice guidelines					
<b>Hypertension</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Signature of Assessor</b>
Understands the pathophysiology and therapeutic management					
Understands and teaches patients and carers contributory lifestyle factors					
Undertakes history taking, diagnostic and screening tests					
Refers to appropriate health professionals when needed					
Reviews medication according to practice guidelines					
<b>Spirometry</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Signature of Assessor</b>
Undertakes spirometry after attending appropriate training programme					
<b>Smoking Cessation</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Signature of Assessor</b>
Undertakes consultations for smoking cessation support and guidance after attending appropriate training course					
<b>Healthy Eating</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Signature of Assessor</b>
Able to teach the principles of healthier eating					
Supervises the management of patients on weight reducing diets, providing advice and motivational support					
Relates the meaning of body mass index (BMI) to patients and advises on appropriate physical exercise					

14. EAR CARE					
	1	2	3	4	Signature of Assessor
Understands the anatomy and physiology and associated conditions					
Undertakes history taking, diagnostic and treatments to include ear syringing					
Advises patient on contributory factors					

15. CERVICAL CYTOLOGY					
	1	2	3	4	Signature of Assessor
Understands the national and local policies for cervical screening					
Undertakes history taking, counselling and gives appropriate information and advice to patients					
Demonstrates ability to perform cervical smears inline with national guidance					

16. ADDITIONAL COMPETENCIES					
Blank for your own use	1	2	3	4	Signature of Assessor

# Notes

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# Notes

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