

New Graduate Preceptorship: scoping review and recommendations

British and Irish Orthoptic Society, March 2025





Project Title	New Graduate Preceptorship - scoping review and recommendations	
	British and Irish Orthoptic Society (BIOS)	
Supplier	stephonie tempest consultancy Ital	
Project Lead	Dr Stephanie Tempest	
	PhD MSc PGLTHE BSc (Hons) FHEA Chartered FCIPD	
Project Team	Amanda Weaver – AHP preceptorship subject matter expertise	
	BIOS Advisory Group – representatives from UK countries, BOTSU, and Orthoptists at different career levels including preceptees, line managers and service leads	
Project Sponsor	Craig Murray, BIOS Chair	
Project Manager	Michelle Murray	
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Executive summary

Background:

BIOS commissioned stephanie tempest consultancy limited to undertake a project to review the current new graduate preceptorship offer for Orthoptists and offer recommendations for ongoing work. The recommendations need to align with existing preceptorship requirements from the regulator, Health and Care Professions Council (HCPC) and those for Allied Health Professions (AHPs) across the membership countries.

This work was commissioned and funded by NHS England.

Process:

A five stage process was undertaken between September 2024 and March 2025 including:

- 1) Forming and working with an Advisory Group (BIOS key internal stakeholders). The group supported survey development and analysis and advice on the draft and final recommendations and reporting.
- 2) Undertaking a members survey to understand the current knowledge and engagement with preceptorship resources from multiple perspectives.
- 3) Drafting an initial set of recommendations based on the survey analysis and shaped by the Advisory Group.
- 4) Hosting three segmented virtual member events to discuss and refine the draft recommendations (one each for pre-reg students/preceptees; preceptors/line managers / supervisors; service managers/leads).
- 5) Finalising the recommendations and a final review with the Advisory Group.

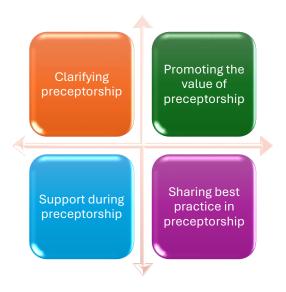
Outcome:

Four broad themes emerged from the project (see Figure one), comprising seventeen recommendations. From these themes and recommendations, the Advisory group identified the minimum requirements and expectations from which to build success:



- Offer preceptorship at interview
- Have a meaningful, supportive programme in every department (preferably with a team focus)
- Ensure preceptors are trained
- Protect time for preceptors and preceptees

Figure one: Four broad emergent themes to support the ongoing development of preceptorship



The seventeen recommendations are:

Theme	Recommendations	
Clarifying	1. To emphasise what new graduate preceptorship is	
preceptorship	and is not, including that preceptorship:	
	 builds confidence as people transition into the workplace 	
	 supports the development of safe and effective orthoptists 	



- is not about developing people to be ready for Band 6 jobs.
- 2. To continue to lead a profession-specific, *segmented*, promotional campaign to raise awareness of the existing resources for new graduate transitional support including:
 - HCPC Principles for Preceptorship
 - BIOS preceptorship programme
 - BIOS New Graduate CPD events
 - BIOS New Graduate representative
 - Multiprofessional programmes
- 3. Understand what a successful preceptorship period includes for an Orthoptist, as part of a quality improvement process including to measure the impact.
- 4. To promote the message that preceptorship is for *all* new graduates and should be tailored for each person. It is not an "off-the shelf" package and must not be linked to academic attainment (e.g., a newly qualified orthoptist will still need preceptorship even if they were awarded a first-class degree).
- 5. To promote the value of the BIOS preceptorship programme as a *team* process (rather than purely for the preceptor and preceptee). Provide advice for all on the logistics and resources to support its use (in multiple formats including bite-size guides, posters etc.).



Promoting the value of preceptorship

- 6. To continue to embed pre-preceptorship and preceptorship, to promote the concepts and value of transitional support, into pre-registration programmes.
- 7. To emphasise the importance of new graduate preceptorship for developing strong foundations for a range of career opportunities e.g., into academic and / or research roles.

Support during preceptorship

- 8. To formalise *training* for preceptors e.g., learn from the BIOS Clinical Tutors model alongside ways to use the existing resources for preceptors.
- 9. To explore opportunities to formalise *peer support* for preceptors e.g., learn from the BIOS Clinical Tutors model and promote / advocate for multiprofessional preceptor peer learning opportunities within organisations and across available communities of practice.
- 10.To provide clear guidance and support for preceptees and preceptors to successfully complete and close the preceptorship phase, including advice for the next steps.
- 11. To formalise new graduate preceptee peer assisted learning opportunities (and define what this is) e.g., consider a profession-specific New Graduate Network within BIOS, promote the multiprofessional new graduate peer learning programmes within organisations.



- 12. To promote the message that preceptorship is a team effort and that everyone needs to be accessible for assistance. It's not purely about the preceptee and preceptor. Reinforce that everybody is there to support anybody, as part of a broader, positive team culture.
- 13. To explore the potential for a BIOS preceptorship lead role. A suggestion would be to explore if new graduate representatives could progress to this role at the end of their term of office.

Sharing best practice in preceptorship

- 14.To highlight examples of best practice where the BIOS Preceptorship programme has been successfully implemented into departments.
- 15. To identify examples of transitional support that work well in practice, including how challenges (such as time) have been overcome e.g. increasing supernumery time, allocating realistic caseloads for a defined period with reviews. Ensure the examples include the perspectives of preceptees, preceptors and service managers.
- 16.To set up preceptorship from a strong starting position including expectations and booking of regular meetings for the duration of the preceptorship period.
- 17. BIOS to seek to influence ways to embed time to support preceptorship within job planning for preceptees and preceptors and promote the BIOS job plan calculator to assist with the process.



Conclusion: From the stakeholder engagement and co-creation activities undertaken in this project, a set of recommendations has now been established for BIOS to consider and take forward, to further develop new graduate preceptorship. When planning the next steps for the on-going quality improvement of the existing transitional support for new graduates, the focus of activities should include:

- clarifying preceptorship
- promoting the value of preceptorship
- supporting each other in the preceptorship process
- sharing best practice in preceptorship

On reviewing the themes and recommendations, the project advisory group view the following as minimum requirements from which to build success:

- Offer preceptorship at interview
- Have a meaningful, supportive programme in every department (preferably with a team focus)
- Ensure preceptors trained
- Time given to preceptors and preceptees



1. Background

The British and Irish Orthoptic Society (BIOS) commissioned stephanie tempest consultancy ltd to carry out an in-depth review and evaluation of the current preceptorship offer for new graduate Orthoptists and provide recommendations for future work to be considered. The recommendations must align with existing preceptorship requirements from the regulator, Health and Care Professions Council (HCPC) and those for Allied Health Professions (AHPs) across the membership countries.

The project was led by Dr Stephanie Tempest (AHP and learning and development consultant), working with Amanda Weaver (subject matter expert on AHP Preceptorship) and an Advisory Group comprising of key stakeholders from within BIOS.

Monthly reporting to the internal BIOS Project Management team was undertaken as part of project planning and governance.

This work was commissioned and funded by NHS England.

2. Overview of project stages

The overall aim of the project: To determine the current and future new graduate preceptorship needs within the Orthoptics profession, aligned to the broader AHP preceptorship requirements.

Objectives:

- 1. Understand the current availability and structure of transitional support for new graduate Orthoptists
- 2. Evaluate the experiences, including needs (met and unmet), of new graduate Orthoptists in relation to the *current* transitional support on offer, from multiple perspectives
- 3. Evaluate the experiences, including needs (met and unmet), requirements and capacity for Orthoptists supporting new graduate



- colleagues e.g. in preceptor roles, in relation to the *current* transitional support on offer
- 4. Evaluate the impact of the *current* transitional support for new graduate Orthoptics, from multiple perspectives, including on retention
- 5. Identify the principles, structures, processes, requirements and desired outcomes for a revised *future* profession specific new graduate preceptorship offer
- 6. Produce a summary report of the findings, to include profession specific recommendations, aligned to the HCPC Principles for Preceptorship and country specific requirement e.g. NHS England AHP Preceptorship Standards and Framework (England) and National Education for Scotland (NES) Flying Start program (Scotland)

Objectives 1-5 were met through a combination of sources including discussions with the Advisory Group, member survey and virtual member engagement events. The data from these objectives informed the content of the recommendations.

Project timeline: Oct '24 – Mar '25





The Advisory Group

Advisory Group members comprised the following:

- BIOS New Graduate Leads
- LOOP Chair
- BIOS Vice-Chair
- Trade Union General Secretary
- EDI Lead
- Chair Education and Professional Development Committee
- Northern Ireland Trustee
- Former Scotland Trustee

It was not possible for everyone to attend each of the five meetings therefore updates, and requests to review the survey and recommendations, were also sent via email, to enable group members to participate as much as they were able. There was a vacancy in the Wales Trustee role at the time of the project but the Project Lead sought to inform and update an identified representative from Wales, who also contributed as they were able.

The Advisory Group met five times during the project (Nov ' 24 – Mar '25) as outlined below:

Meeting 1	Designing the survey
Meeting 2	Piloting and finalising the survey
Meeting 3	Reviewing and providing additional context to the survey outcomes
Meeting 4	Reviewing and refining the draft recommendations (for sharing at the member discussion events
Meeting 5	Reviewing draft report and identifying minimum requirements for success



Member survey

The anonymous members survey was distributed widely through BIOS communication channels and with support from the Advisory Group, initially from Monday 2nd Dec to Friday 20th Dec 2024, to the following groups:

- Students
- New graduates / preceptees
- Preceptors / line managers / supervisors
- Team managers
- Academics

Recognising that the timeframe coincided with other engagement activity for other projects, and to optimise engagement, the survey was subsequently left open and repromoted until Monday 13th January, enabling a response rate to grow from 8 (in December) to a final total of 17. The response profile comprised:

Responses from England = 15	A final year student
Responses from Scotland = 2	Four new graduates
	Ten Orthoptists providing support
	A service manager
	An academic

A copy of the survey questions and responses are in Appendix One. The findings from the survey informed the proposed draft recommendations which were shared and refined with the Advisory Group and then discussed, refined and expanded on at the member discussion events.

Member discussion events

Three segmented discussion events were held between 6th – 13th February 2025 for the following groups:



- pre-reg students/preceptees (n=2)
- preceptors/line managers / supervisors (n=7)
- service managers/leads (n=8)

At each event, an overview of the project was presented alongside the sixteen initial draft recommendations, developed as an outcome from the survey and from working with the Advisory Group. A copy of the slides used across the events is in Appendix Two.

An interactive whiteboard (Padlet) was used to gather perspectives across all three events. Appreciating that some people prefer to consider and reflect before contributing, the Padlet was kept open, and the link shared with participants after the events, so they could contribute later should they wish. Three out of the seventeen participants added extra information after the events.

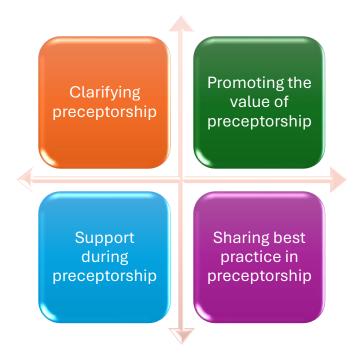
A copy of the final Padlet, including comments, is in Appendix Three.



Recommendations

Four themes emerged from the project (See Figure two), comprising seventeen recommendations from a synthesis of all the engagement sources (Advisory Group, Member survey and virtual events).

Figure two: Four emergent themes to support the ongoing development of new graduate preceptorship





Theme	Recommendations	Data extracts (multiple sources)
Clarifying preceptorship	 To emphasise what new graduate preceptorship is and is not, including that preceptorship: builds confidence as people transition into the workplace supports the development of safe and effective orthoptists is not about developing people to be ready for Band 6 jobs. 	Nine out of seventeen participants at the member events highlighted this as a priority. One participant commented that it "is critical to safe practise including to safeguard preceptees and patients."
	 2. To continue to lead a profession-specific, segmented, promotional campaign to raise awareness of the existing resources for new graduate transitional support including: HCPC Principles for Preceptorship BIOS preceptorship programme BIOS New Graduate CPD events 	Two out of seventeen participants at the member events highlighted this as a priority. One participant commented that "Any campaigns must bear in mind that all 4 HEIs have different programmes, and all students will have different placement experiences."



- BIOS New Graduate representative
- Multiprofessional programmes
- 3. Understand what a successful preceptorship period includes for an Orthoptist, as part of a quality improvement process including to measure the impact.

Four out of seventeen participants at the member events highlighted this as a priority recognising that "the preceptee needs to feel confident". One participant felt there is "no full understanding of the benefits of preceptorship and how staff can develop with it."

Suggestions were also made on how to do this including:

- Benchmark to guidance to demonstrate improvement
- Use the PDSA cycle for quality improvement of the preceptorship offer
- Gather feedback at the end of preceptorship from the preceptee



	4. To promote the message that preceptorship is for <i>all</i> new graduates and should be tailored for each person. It is not an "off-the shelf" package and must not be linked to academic attainment (e.g., a newly qualified orthoptist will still need preceptorship even if they were awarded a first-class degree).	Five out of seventeen participants at the member events highlighted this as a priority. Comments included: "Emphasise more to be safe and effective clinician than being clever." And "This supports preceptor in reinforcing that each person is different and will progress at different times."
	5. To promote the value of the BIOS preceptorship programme as a <i>team</i> process (rather than purely for the preceptor and preceptee). Provide advice for all on the logistics and resources to support its use (in multiple formats including bite-size guides, posters etc.).	Three out of seventeen participants at the member events highlighted this as a priority. One participant commented that "Those who struggle with us have worked elsewhere and not had the full support of colleagues in previous roles e.g. working single handed soon after starting, no feedback on their progress."
Promoting the value of preceptorship	6. To continue to embed pre-preceptorship and preceptorship, to promote the concepts and	Two out of seventeen participants at the member events highlighted this as a priority. Discussions at the events and survey data



value of transitional support, into pre-registration highlighted that students / new graduates know about preceptorship from university. programmes. They look for preceptorship in job adverts, ask about it in interviews and its availability (or lack of) supports their decision making when considering a post. Where interviewees don't know about preceptorship, it is explained in interviews by those who offer it. 7. To emphasise the importance of new graduate Seven out of seventeen participants at the preceptorship for developing strong foundations member events highlighted this as a priority, for a range of career opportunities e.g., into with one participant stating this was the "top academic and / or research roles. priority". The preceptorship period "is an extension of the pre-registration education, to build on core skills to develop as an Orthoptist."



Support during preceptorship

8. To formalise *training* for preceptors e.g., learn from the BIOS Clinical Tutors model alongside ways to use the existing resources for preceptors.

Six out of seventeen participants at the member events highlighted this as a priority and two participants recognised this as very important. "I felt a bit left to my own devices when starting as a preceptor – just had the guidance to read."

9. To explore opportunities to formalise *peer* support for preceptors e.g., learn from the BIOS Clinical Tutors model and promote / advocate for multiprofessional preceptor peer learning opportunities within organisations and across available communities of practice.

Six out of seventeen participants at the member events highlighted this as a priority. The idea of a BIOS Preceptor Group was seen as very useful, but value was also seen in local multiprofessional networks. One participant noted "Our AHP Workforce Lead has already implemented this."

10.To provide clear guidance and support for preceptees and preceptors to successfully complete and close the preceptorship phase, including advice for the next steps.

This emerged as a specific recommendation from the final member event so there was not an opportunity for others to rate it.



11.To formalise new graduate preceptee peer assisted learning opportunities (and define what this is) e.g., consider a profession-specific New Graduate Network within BIOS, promote the multiprofessional new graduate peer learning programmes within organisations.

Eight out of seventeen participants at the member events highlighted this as a priority. The discussions included recognising peer learning "as an excellent way to encourage thinking including about different types of evidence". There was a recognition that structured support was needed to make peer learning productive and helpful.

12. To promote the message that preceptorship is a team effort and that everyone needs to be accessible for assistance. It's not purely about the preceptee and preceptor. Reinforce that everybody is there to support anybody, as part of a broader, positive team culture.

Seven out of seventeen participants at the member events highlighted this as a priority, with one participant reinforcing this was "an important message". Comments included that "the team should be aware that you are starting as a new graduate and be welcoming, so you don't feel 'annoying' having to ask lots of questions."



	13.To explore the potential for a BIOS preceptorship lead role. A suggestion would be to explore if new graduate representatives could progress to this role at the end of their term of office.	Two out of seventeen participants at the member events highlighted this as a priority. Members of the Advisory Group discussed this as a potential CPD / growth opportunity within the organisation to offer a leadership opportunity for people in earlier stages of their careers.
Sharing best practice in preceptorship	14.To highlight examples of best practice where the BIOS Preceptorship programme has been successfully implemented into departments.	Six out of seventeen participants at the member events highlighted this as a priority. It would be "Very useful to see examples including hearing from people who have completed preceptorship."
	15.To identify examples of transitional support that work well in practice, including how challenges (such as time) have been overcome e.g. increasing supernumery time, allocating realistic caseloads for a defined period with reviews. Ensure the examples include the perspectives of preceptees, preceptors and service managers.	Ten out of seventeen participants at the member events highlighted this as a priority. It was recognised that this would be "so useful for managers and preceptors" providing "live examples on challenges, and not just reading policy."



16. To set up preceptorship from a strong starting position including expectations and booking of regular meetings for the duration of the preceptorship period.

Eight out of seventeen participants at the member events highlighted this as a priority. One participant noted they "combine preceptorship with Trust probation and run monthly 1:1 meetings, so they are not seen as separate." One participant noted that it "sounded simple but is essential" including, in setting regular meetings in advance, the new graduate "feels supported". One participant commented that "Preceptorship tends to fizzle out towards the end."

17. BIOS to seek to influence ways to embed time to support preceptorship within job planning for preceptees and preceptors and promote the BIOS job plan calculator to assist with the process.

Eight out of seventeen participants at the member events highlighted this as a priority. Participants recognised this needed organisational support and would value "guidance on how to set up within job planning."

At the final advisory group meeting, members reviewed the themes and recommendations (which had been sent in draft form a week before the meeting). Based on the project findings and through discussion, the group identified the minimum requirements and expectations from which to build success:



- Offer preceptorship at interview
- Have a meaningful, supportive programme in every department (preferably with a team focus)
- Ensure preceptors are trained
- Protect time for preceptors and preceptees



Further suggestions

From engaging in this work, the Project Lead and Project Team have provided further suggestions linked to the above recommendations.

1.The Orthoptic community to commit to embedding the recommendations within their local context.

Suggestion: Share the Executive summary through the BIOS communication channels and create opportunities to keep new graduate preceptorship on the strategic agenda to improve recruitment and retention, including through investments in continued workforce development projects.

2.Make links between new graduate preceptorship and the use of the new BIOS Professional Development Framework when published.

There are several workforce projects underway as part of an overarching commission from NHS England, one of which is the co-creation of the first BIOS Professional Development Framework. Once published, the Framework has the potential to be used in parallel to preceptorship, in part to deliver recommendation 12 and then through the continuation at a foundation level of practice.

Suggestion: Within the marketing and ongoing promotion of the new Professional Development Framework, BIOS to consider promoting the value of it to support learning and development before, during and after the new graduate preceptorship phase.

3.Alignment of new graduate preceptorship recommendations from other professions



In 2024/2025, all AHP professional bodies were tasked by NHS England to review, understand, and identify the profession-specific elements of preceptorship for their respective professions. Networking and collaboration with other professions confirm that this project for BIOS, aligns with broader AHP recommendations for the next phase of the preceptorship improvement journey. This alignment includes recommendations based on the professional bodies' roles within preceptorship, clarification of preceptorship by professional bodies, guidance for those involved in preceptorship, and the sharing of resources. A key priority is ensuring support and training for individuals undertaking the preceptor role.

Suggestion: Link in with the other professions to share outputs from the commission around new graduate preceptorship

Suggestion: Continued engagement with national work to ensure that preceptorship developments within the national contexts e.g. emerging work in nations, such as the England to develop the quality mark, includes the voice and is fit for purpose for Orthoptists.

Project limitations

The project design provided a variety of ways to engage in the work to inform the recommendations including with Advisory Group members, through a survey, member engagement events and an interactive whiteboard (Padlet) that remained open for the before and after events. Forty-two people informed this work, which is a very small percentage of the overall workforce. Furthermore, given elements of the project were anonymous, it is not possible to know if some people engaged in more than one way.

There were several projects requiring member engagement at the same time, especially when the survey was launched. Some were aligned to the broader NHS England commission and also the BIOS Workforce Survey.



The work to evolve new graduate preceptorship continues to evolve, with momentum gathering since the launch of the HCPC Principles and AHP wide activity. Therefore, data to gather experiences of preceptorship, must be interpreted with some caution while the concept and offer is evolving in and of itself.

Summary and conclusion

This project sought to:

- work with members, through a range of profession-wide engagement activities, to review and evaluate the existing new graduate preceptorship experiences; and
- 2) co-create a set of recommendations for BIOS to consider for future work.

From the stakeholder engagement and co-creation activities undertaken in this project, a set of recommendations has now been established for BIOS to take forward, to further develop new graduate preceptorship. When planning the next steps for the on-going quality improvement of the existing transitional support for new graduates, the focus of activities should include:

- 1. clarifying preceptorship
- 2. promoting the value of preceptorship
- 3. supporting each other during preceptorship
- 4. sharing best practice in preceptorship

From the themes and recommendations, the Advisory group identified the minimum requirements and expectations from which to build success:

- Offer preceptorship at interview
- Have a meaningful, supportive programme in every department (preferably with a team focus)
- Ensure preceptors are trained
- Protect time for preceptors and preceptees



Appendices

Appendix One: Summary of member survey questions and responses

Summary of member survey Supporting newly qualified orthoptists BIOS Preceptorship survey.pdf

Appendix Two: copy of the slides used at the member engagement events

FINAL member event presentation BIOS New Graduate Preceptorship.pdf

Appendix Three: copy of Padlet data gathered across the member events

<u>Padlet - Developing recommendations to support new graduate Orthoptists</u> <u>preceptees.pdf</u>