

Clinical Preceptorship Procedure

ADDENDUM Standard Operating Procedure for applications to 'Fast Track' preceptorship

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1 Scope

- 1.1. This standard operating procedure (SOP) details how South East Coast Ambulance Service NHS Foundation Trust (hereafter 'the Trust' or 'SECAmb') will provide the opportunity for appropriately qualified individuals to 'fast-track' through Preceptorship for Newly Qualified Paramedics (NQP).
- 1.2. The SOP should be read in conjunction with the Clinical Preceptorship Procedure which details how the Trust supports NQPs through their preceptorship.
- 1.3. This process follows the national guidance relating to fast-tracking for NQPs (NHS Employers, 2017). This is to ensure that consistency is maintained across all National Health Service (NHS) Ambulance Trusts within the United Kingdom.
- 1.4. This procedure will provide a clear framework to both the NQP and the Trust for the eligibility, application, and decision-making process for NQPs working for the Trust who wish to consider fast-tracking through preceptorship.
- 1.5. It is noted that preceptorship is designed to support the NQP with the transition from student to experienced paramedic, and that in the majority of cases, competent and confident NQPs will benefit from completing the standard 24-month consolidation of learning period.
- 1.6. The fast-track process exists to recognise where individuals have prior experience and learning relevant to the paramedic role and allow them to evidence how they can apply this experience to the competencies required to work in the role of experienced paramedic. It is not designed for individuals without this experience to condense the time in which they have to gain this experience (preceptorship).
- 1.7. This procedure will apply to all NQPs undertaking their preceptorship (sometimes referred to as a Consolidation of Learning Period) with the Trust.
- 1.8. This procedure does not include the management of NQPs who join the Trust having started their preceptorship elsewhere, which is covered within the Clinical Preceptorship Procedure.
- 1.8.1. Where NQPs have transferred to the Trust from elsewhere in order to complete their Preceptorship, they will not be eligible to apply for fast-tracking until they have successfully completed their probationary period (minimum of six months in post).

2 Procedure

- 2.1. There are three stages to determine whether an NQP is accepted to fasttrack through their preceptorship (the process for each is described within this procedure):
- 2.1.1. Basic eligibility criteria this is a checklist of requirements to provide transparency around the pre-requisites for fast-track application. Awareness of the eligibility criteria should be used to both promote applications from eligible individuals and minimise unnecessary effort from applicants who will not be successful in a fast-track interview panel.
- 2.1.2. Threshold criteria (self-assessment) this supports the applicant who meets the eligibility criteria with gathering the evidence required to be successful at the fast-track interview panel and is aligned to the consolidation of learning portfolio which is completed by all NQPs.
- 2.1.3. Fast-track interview panel (FTIP) this is the opportunity for the applicant to demonstrate how they have (or are able to) successfully gained the competencies required to start working as an experienced paramedic in a compressed time-frame, drawing on their previous experience.
- 2.2. All Newly Qualified Paramedics (NQPs) employed by the Trust who wish to be considered for fast-tracking must complete an application using the provided 'Fast-track application form' (see Appendix B). This form is designed to guide the applicant through the process, ensuring eligibility, and provide a governance framework to any decisions made.
- 2.2.1. Where a candidate requires reasonable adjustments to support their application and / or during the interview process, for example as a result of additional learning support needs or a disability, they should approach a Clinical Education Lead in the first instance who will provide this support (including sign posting to other resources).
- 2.3. **Basic eligibility criteria:** in order to be eligible for fast-tracking, candidates must evidence that they are able to meet the basic eligibility criteria. Note that applications will only be considered after the NQP has completed the first six months of their preceptorship.
- 2.3.1. The basic eligibility criteria are as follows:
- 2.3.1.1. Current or most recent Trust line manager reference. This should include a commentary on sickness levels and compliance with Trust policies. Note that the sickness record itself will not affect the individual's application for fast-tracking, however the length of periods of absence (and therefore reduced clinical exposure) may mean that the individual has gained insufficient post-registration experience to be eligible for fast-tracking, for example if they have undertaken insufficient clinical practice hours.

- 2.3.1.2. Verification that the applicant is up to date with all relevant statutory and mandatory training as required by Trust policy. An applicant will not be penalised for not having completed the Key Skills programme for the current year, where the programme is still in progress. An inability on the Trust's part to facilitate this training will not prevent an application.
- 2.3.1.3. Evidence of prior experience of mentoring in a clinical setting. This must include responsibility for, or substantial involvement in, the sign off of students against academic programmes of study, and must be prior to starting preceptorship (since NQPs are not permitted to undertake summative assessment of students).
- 2.3.1.3.1. For the avoidance of doubt, 'academic programme' refers to any level of study, including supporting learners within further education programmes.
- 2.3.1.3.2. Applicants will be expected to evidence substantial involvement, for example supporting a learner with action plans throughout a period of study to achieve a goal and demonstrating responsibility for the future actions of that student when qualified.
- 2.3.1.4. The candidate must not have received a formal outcome under either the disciplinary or capability policy and procedures (either wholly or partly at fault) at any stage during preceptorship. For the purpose of this procedure an individual will only be considered to have been formally managed where it has been necessary to provide specific sanctions afterwards (such as a restriction in practice, formal warning, or is still under a capability action plan). It is important to note that involvement in an investigation at any stage does not, in itself, make a candidate ineligible and may have led to learning which would support an application.
- 2.3.1.5. The candidate must have no active formal warnings, sanctions or other concerns noted in their personnel file under the Trust's Capability or Disciplinary policy. For clarity, any historical or expired concerns will not be considered.
- 2.3.1.6. The candidate must be able to evidence they have followed national and local Trust policy and procedures relevant to the NQP role at all times since starting their preceptorship.
- 2.3.2. Where a candidate does not meet the basic eligibility criteria, the application will be rejected. Since the eligibility criteria relate to experience gained prior to starting as an NQP and performance as an NQP to date, candidates who have their application rejected at this stage will not be able to re-apply for fast-tracking at a later date in their preceptorship.
- 2.4. **Threshold criteria:** this is a candidate self-assessment which is designed to allow the fast track candidate to focus on what evidence they would need to provide in order for the Fast Track Interview Panel to make a decision.

- 2.4.1. The self-assessment consists of 20 questions which are taken directly from the Consolidation of Learning portfolio elements. These are listed on the application form (see appendix B).
- 2.4.2. The candidate must be able to answer the questions appropriately in order to assure the Fast Track Interview Panel that they are confident, capable and credible in their knowledge and understanding. This will require reflection and consideration of how best to evidence knowledge, both in written form (for example their ePortfolio) and in other forms, such as verbally.
- 2.4.3. The completed self-assessment will form part of the application form, and will be made available to the Fast Track Interview Panel in order to support the questioning of the panel.
- 2.5. **Fast Track Interview Panel (FTIP):** Once the application has been reviewed by a Clinical Education Lead with direct knowledge of the preceptorship programme, if the basic eligibility threshold has been met and the self-assessment has been completed appropriately, the application will be referred to a Fast-Track Interview Panel. This will be arranged between the interview panel and the applicant and should be completed in the applicants own time (analogous to any other interview for promotion).
- 2.5.1. The FTIP will consist of at least two members:
- 2.5.1.1. The first will normally be a Consultant Paramedic, who has experience of teaching and assessment and a clinical history as an experienced paramedic.
- 2.5.1.2. The second will normally be an Operations Manager who has completed specific training in interview skills and / or education and assessment.
- 2.5.1.3. Where it is not possible to comply with these minimum requirements, the Consultant Paramedic Education may in exceptional circumstances approve an alternative interview panel. This must be on a case-by-case basis and the reasons should be recorded in the panel's notes.
- 2.5.2. The interview will last for approximately one hour the interview panel should then take sufficient time to deliberate in order to reach a decision.
- 2.5.3. The panel will not normally expect to assess individual practice (such as psychomotor skills), but will focus on assessing candidate knowledge and application of knowledge. This may include clinical decision-making; understanding and discussion of referral pathways; risk stratification; and practice-based supervision. The candidate should expect to use examples from their experience to demonstrate their competence and confidence in these areas.

- 2.5.4. Candidates will be encouraged to bring evidence to support their application and enhance their responses to the interview panel. This evidence may include:
 - Curriculum Vitae (CV);
 - Evidence of former learning;
 - Evidence of previous supervisory, managerial or developmental roles, such as clinical supervision, mentoring, line management, teaching, etc.;
 - Individual reflective narratives on various clinical cases;
 - Individual critiques of published articles and research;
 - Diaries or other accounts of learning in practice;
 - Continuous Professional Development (CPD) undertaken, and the learning arising from this;
 - Testimonials and commendations;
 - Presentations;
 - Evidence of participation in research.

The panel will also be expected to access the applicant's Preceptorship ePortfolio to review the evidence held within. Where evidence exists but is not available on the day of the interview, the panel may defer a decision subject to timely provision of the evidence requested. This should be clearly documented in the outcome with a mutually agreed timeframe.

- 2.6. **Decision to fast-track:** the decision whether to fast track or not will be based on the candidate's performance at interview, measured against the requirements of the role which include the job description and scope of practice for a Newly Qualified Paramedic, and the Consolidation of Learning Outcomes.
- 2.6.1. The panel will make a decision regarding how long the applicant's remaining preceptorship should be. The options for outcome will depend on which stage of their preceptorship the candidate is currently at:
- 2.6.1.1. For international paramedics with at least two years of prior operational experience only, the panel may choose that the candidate completes their preceptorship immediately (with the proviso that the candidate must have completed six months of their preceptorship to have been eligible to apply for fast-tracking), at 12 months, 18 months or be required to complete the standard 24-month preceptorship period.
- 2.6.1.2. For a candidate who is between six and 12 months into their preceptorship, the panel may decide that the candidate completes at 12 months, 18 months, or be required to complete the standard 24-month preceptorship period.
- 2.6.1.3. For a candidate who is between 12 and 18 months into their preceptorship, the panel may decide that the candidate completes at 18 months or be required to complete the standard 24-month preceptorship period.

- 2.6.1.4. For a candidate who is between 18 and 24 months into their preceptorship, the panel may decide that the candidate completes their preceptorship with immediate effect (subject to the consolidation of learning ePortfolio being complete), or be required to complete the standard 24-month preceptorship period.
- 2.6.2. When making their decision, the panel should consider the applicant's performance against the Dreyfus Model of Skills Acquisition (see Appendix A). The candidate should demonstrate proficiency (level 4) in all elements.
- 2.6.3. Where fast tracking has been accepted, the decision will be recorded on the candidate's ePortfolio, along with an updated expected completion date. A copy of the application and details relating to the panel's decision will be uploaded to the ePortfolio to support this.
- 2.6.4. Regardless of the decision made, the panel will be required to provide a rationale for their decision, which will be provided to the candidate in order to support their ongoing development.
- 2.6.5. Given the nature of the fast-track process is designed to identify candidates who have previous relevant experience, rather than those who feel they are progressing rapidly during their preceptorship, it is unlikely that the panel will recommend a reapplication for fast tracking again in the future. However, in exceptional circumstances this is available as an option to the panel where this is offered the rationale for the decision must be clearly documented.
- 2.6.6. Candidates who are accepted for fast tracking will still be required to evidence all the Consolidation of Learning Outcomes in their ePortfolio by the end of their preceptorship. A failure to achieve this by the fast-tracked completion date will render the fast-track agreement void, and the candidate will be reinstated on the standard two-year preceptorship programme with their original completion date.
- 2.6.6.1. Any such cancellation of the fast-track agreement will not affect the level of support the candidate is entitled to receive through the Clinical Preceptorship Procedure, including but not limited to the option to further extend the preceptorship period.
- 2.7. **Right of appeal:** where the applicant disagrees with the decision of the panel, they will be afforded one opportunity to appeal against this decision. This should be undertaken following the Trust's Grievance Policy and Procedure, and following the timescales therein.
- 2.8. **External review:** the National Education Network in Ambulance Services (NENAS) will review fast track panel decisions annually, using an anonymised sample of both successful and unsuccessful outcomes, requested at random from all ambulance trusts.

2.8.1. The purpose of this audit is not to overrule local Trust appeal decisions and will not change decisions made. However, it will provide data to enable better understanding around consistency, variation and trends arising, and will facilitate wider learning and consider further changes to practice.

3 Responsibilities

3.1. As an addendum to the Clinical Preceptorship Procedure, this parent procedure should be referred to for the chain of responsibility.

4 Audit and Review

- 4.1. This procedure is to be audited for compliance against the following Key Performance Indicators (KPI):
- 4.1.1. KPI 1: All Newly Qualified Paramedics to be made aware of the standard operating procedure for fast-tracking (compliance target = 100%).
- 4.1.1.1. For newly employed NQPs this will take place during the Transition to Practice course or equivalent clinical induction.
- 4.1.1.2. For existing NQPs this will be distributed by email and will be added as an 'announcement' to the ePortfolio.
- 4.1.2. KPI 2: All applicants under this procedure to be reviewed for eligibility and self-assessment within 14 calendar days of receipt of application (compliance target = 90%).
- 4.1.3. KPI 3: All applicants who are eligible for attendance at Fast Track interview panel to be offered interview with 28 calendar days of review of application (compliance target = 90%).
- 4.1.4. KPI 4: All applicants, irrespective of eligibility / attendance at interview panel, to be informed of outcome within 7 calendar days of decision (compliance target = 90%).
- 4.2. This procedure will be reviewed every three years or sooner if new legislation, codes of practice or national standards are introduced. The procedure will be reviewed by the Consultant Paramedic Education with input from all key stakeholders.

5 Associated Documentation and references

- 5.1. Health and Care Professions Council (2014). *Standards of Proficiency Paramedics.* London: HCPC.
- 5.2. National Health Service (NHS) Employers (2017). *Fast Track Process Guidance v8 [online]*. Available at: <u>https://www.nhsemployers.org/-</u>

<u>/media/Employers/Documents/Pay-and-reward/Fast-Track-Process-Guidance-V8.pdf</u> [Last accessed: December 2021].

- 5.3. South East Coast Ambulance Service NHS Foundation Trust (2015). Scope of Practice and Clinical Standards Policy. Crawley: SECAmb.
- 5.4. South East Coast Ambulance Service NHS Foundation Trust (2017). *Clinical Preceptorship Procedure v3.* Crawley: SECAmb.
- 5.5. South East Coast Ambulance Service NHS Foundation Trust (2020). *Grievance Police and Procedure v3.* Crawley: SECAmb.

6 Equality Analysis Record

- 6.1. The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.
- 6.2. Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.

Appendix A: The Journey from Novice to Expert (Benner, 1984)

Level	1	2	3	4	5
Description	Novice	Advanced beginner	Competent	Proficient	Expert
Career development stage	Undergraduate / pre-registration student	Newly Qualified Paramedic (NQP) at point of registration	NQP at 12 month development review	Paramedic at completion of preceptorship	Highly experienced paramedic / specialist paramedic
Knowledge	Minimal 'textbook' knowledge with no application to practice.	Working knowledge of key aspects of clinical practice.	Good working and background knowledge of own clinical practice areas.	Depth of understanding of own discipline and surrounding areas of practice.	Authoritative understanding of discipline and deep tacit understanding across all areas of practice.
Contextual perception	Tends to see actions in isolation.	Sees actions as a series of stages.	Sees actions at least partially in terms of longer term goals.	Sees overall picture and how individual actions fit within it.	Sees overall picture including alternative approaches.
Autonomy	Needs close supervision or instruction.	Able to achieve some tasks using own judgement but support needed for overall task.	Able to achieve most tasks using own judgement.	Able to take full responsibility for own work and supervise others.	Able to take full responsibility for going beyond existing standards and creating own interpretations.
Standard of work	Requires close supervision to ensure satisfactory standard.	Competent in straightforward tasks but requires support for more complex tasks.	Achieves basic standards although may lack refinement.	Fully acceptable standard achieved routinely.	Excellence achieved with relative ease.
Coping with complexity	Little or no conception of dealing with complexity.	Appreciates complex situations but only able to achieve partial resolution independently.	Copies with complex situations through deliberate analysis and planning.	Deals with complex situations holistically – confident in decision making.	Holistic grasp of complex situations – able to apply intuitive and analytical approaches as needed.

Adapted from the Dreyfus model of skills acquisition (Dreyfus and Dreyfus, 1986).

Appendix B: Fast Track Application Form

Please note that as the application form is an interactive document, this version is for reference only and should not be used for applications.

NQP Consolidation of Learning Fast Track Application

Candidate Details Mandatory Sect			
Candidate Name	Click or tap here to enter text.	Payroll No	Click or tap here to enter text.
OTL Name	Click or tap here to enter text.	NQP start date	Click or tap here to enter text.
Base station	Click or tap here to enter text.	Application date*	Click or tap here to enter text.

*Note that candidates are not eligible for fast track application until they have successfully completed the six-month (probationary) review with their preceptor at the earliest.

Equality and in	Equality and inclusion monitoring Optional Section				
Ethnic origin	Click or tap here to enter text.	A1 – Indian A2 – Pakistani	MixedChinese / otherM1 – White and BlackO1 – ChineseAfricanO9 – Any other ethM2 – White and BlackgroupCaribbeanWhiteM3 – White and AsianWhiteM9 – any other mixedW1 –BritishbackgroundW2 – IrishW3 – Any other Wbackground		
Nationality	Click or tap here to enter text.	Country of birth	Click or tap here	e to enter text.	
Sexual orientation	Heterosexual / Gay / Lesbian / Bisexual / Other / I do not wish to disclose				
Religion / belief	Atheism / Buddhism / Christianity / Hinduism / Islam / Jainism / Judaism / Sikhism / Other / I do not wish to disclose				
Disability	Yes / No / I do not wish to disclose	Yes / No / I do not wish toIf yes, pleaseClick or tap here to enter text.			

Qualifications		Mandatory Section		
HCPC Registration Number	Click or tap here to enter text.	Date of first registration	Click or tap here to enter text.	
Paramedic qualification held (title)	Click or tap here to enter text.	Qualification institution	Click or tap here to enter text.	

Please note that an anonymised version of this application may be shared as part of the national NQP Fast Track consistency process and quality assurance.

Part 1: Candidate de	eclaration	To be completed by the applicant
Please provide details of prior experience of mentoring in a clinical setting	The NQP must provide evidence of their experience supporting learning in practice and demonstrate their responsibility for, or substantial involvement in, sign off of students against an academic programme of study. This is likely to have been undertaken during previous clinical practice (examples include, but are not limited to, working as a paramedic abroad or prior to a break in HCPC registration; a registered healthcare professional in another field). Working alongside other ambulance staff does not qualify as operating in a sign off capacity as Practice Educator in itself. However, if the NQP has worked as the named mentor for a learner, has been involved in developing action plans or the structured development of the learning journey, or has demonstrated accountability for the future actions of the learner once qualified, this is likely to meet the requirement stated above.	Click or tap here to enter text.
Please provide evidence that you are aware of and have followed national and local Trust Policy and the standard operating procedures relevant to the NQP role	More information about the requirements of the Consolidation of Learning Programme can be found in the Trust's Clinical Preceptorship Procedure, available from the intranet. Application for fast track is not available until you have completed the six-month (probationary) review with your preceptor – this will be reviewed on your ePortfolio, and will not generally be applied until 12 months post-registration (see pert 5).	Click or tap here to enter text.
Please confirm that all relevant statutory and mandatory training is up to date	You should include the dates of completion for the face-to-face Key Skills Programme and completion of the eLearning modules on SECAmb Discover.	Click or tap here to enter text.
Do you have any further comments regarding this application?		Click or tap here to enter text.

Please note that applicants who do not meet the minimum criteria will be rejected at initial review, therefore if you do not meet these criteria please discontinue with the application and refer to the NQP team for further advice and support.

[Continues on the following page]

Part 2: Line manage	er reference	To be completed by line manager
Please confirm the candidate meets the requirements of the six-month NQP review	This should include confirmation that the six-month (probationary) evaluation has been submitted with no concerns identified, and that the candidate has successfully completed their probationary period with no extension required.	Click or tap here to enter text.
Please confirm the candidate is up to date with all statutory and mandatory training as required by Trust policy.	Where this is outstanding due to a failure of the Trust to make the training available, please detail this (with appropriate supporting evidence).	Click or tap here to enter text.
Are there any current formal disciplinary, absence, or performance management actions recorded for the candidate or are there any actions pending	Please note that whilst concerns identified under the sickness management policy are not in themselves a reason to prevent fast-tracking, it is unlikely that a candidate who has spent a significant amount of time absent from work through sickness will have evidenced sufficient progression to be successful in a fast track application.	Click or tap here to enter text.
Do you have any further comments regarding this application?		Click or tap here to enter text.

[Continues on the following page]

Part 3: Candidate self-assessment

To be completed by the applicant

You are required to provide appropriate evidence against each of the following criteria (maximum 250 words per question).

Plagiarism and anonymity statement:

In submitting this application, I acknowledge that the contents of this evidence are my own work and drawn from my contemporary learning and experience. (N.B. submission of previous academic work would not be considered contemporary learning). I also have taken steps to anonymise any patient or organisationally identifiable information.

Section of portfolio	Evidence	Guidance	Initial to confirm
1 – A1	The NQP is able to understand and demonstrate the need for patient advocacy.	You should be able to evidence the benefits / necessity of patients being able to have an independent representative who can assist in understanding a diagnosis to ensure they can make appropriate and informed decisions about treatment options with dignity and autonomy.	Click or tap here to enter text.
2 – A2	The NQP is able to demonstrate confidence in all aspects of patient examination and history.	Taken in accordance with the medical model. The candidate should provide evidence of the ability to take a history and examine in a systematic way, with examples of how this informs the management plan.	Click or tap here to enter text.
3 – A2	The NQP is able to demonstrate the ability to formulate and implement a management plan in collaboration with the patient, carer and other HCPs.	Provide evidence of your clinical decision-making and rationale for management of patients.	Click or tap here to enter text.
4 - A3	The NQP is able to recognise clinical risk and understand the need for compliance with clinical governance processes.	Describe your approach to risk and risk stratification as well as how this informs your employers approach to generic risk, audit and risk management.	Click or tap here to enter text.
5 – B1	The NQP is able to demonstrate professional behaviour in all areas of communication.	Evidence your ability in: active listening, non-verbal; body language, eye contact, identifies barriers to communication, able to show understanding and empathy. Professional, clear and appropriate in all communication.	Click or tap here to enter text.
6 – B1.2	The NQP is able to demonstrate an understanding of the processes involved in reporting concerns about safety and wellbeing.	Describe how they keep up to date with and informed about employer policy and procedures. Evidence may include understanding of the wider issues involved. N.B. this relates to patient wellbeing NOT the wellbeing of the NQP.	Click or tap here to enter text.
7 – B2	The NQP is able to demonstrate the principles of equality and diversity.	Evidence may include understanding of the wider issues involved, how these affect patient-centred care and organisational culture.	Click or tap here to enter text.
8 – B3.1	The NQP is able to demonstrate the ability to work within the limits of their own scope of practice and competence.	Evidence will include the ability to reflect and learn about the candidates own scope of practice and how this changes over time.	Click or tap here to enter text.
9 – B3.2	The NQP is able to demonstrate the ability to delegate tasks appropriately and understand the issues arising from the supervision of others.	Evidence of supervisory roles, including coaching, mentoring and support to others in a clinical care setting. Evidence may include examples of successful delegation and how the candidate approaches delegation and supervision.	Click or tap here to enter text.
10 – B3.3	The NQP is able to demonstrate an awareness of risk and a responsibility to manage risk and seek support where required.	NQP identifies, assesses, monitors and prioritises risk, can provide examples of where they have addressed risk and implemented risk management techniques to reduce, eliminate or minimise the impact. NQP can identify who to consult regarding issues e.g. risk of Hep infection; steps to take, OH, incident report completion etc. Keeps up to date with changes in policy	Click or tap here to enter text.

11 – B4.1	The NQP is able to demonstrate an open and honest manner during all incidents, adverse or otherwise.	Provide evidence of incidents where the ability to identify, discuss and learn from incidents that arise and if negative, implement improvements to learn and prevent reoccurrence.	Click or tap here to enter text.
12 – B4.2	The NQP is able to demonstrate behaviour which justifies the public's trust and confidence in the profession and the individual.	Evidence will include examples of where the candidate's integrity, reliability, fairness and approach to equality have been tested. Evidence of compliance with and understanding of (for example) data protection, information governance, regulation, confidentiality, codes of conduct and trust and national policy.	Click or tap here to enter text.
13 – B4.3	The NQP is able to demonstrate the ability to keep thorough, clear, accurate and secure work records.	Candidates should be able evidence awareness of best practice and core principles for record keeping, NHS guidelines for record keeping to ensure clear, legible and accurate records. The importance of good record keeping ensuring appropriate treatment, assists in referral, care planning, accountability, reviews. ensuring effective care is provided to all patients within timeframe. Candidate should be able to show an understanding of legal and regulatory issues regarding record keeping.	Click or tap here to enter text.
14 – B4.4	The NQP is able to identify and address ethical and legal issues that may occur during their practice and work within a strong ethical framework.	Ethical issues and dilemmas should be articulated and analysed, candidates should demonstrate understanding of the legal and ethical frameworks that they work under.	Click or tap here to enter text.
15 – C1	The NQP is able to demonstrate a continuing high standard of CPD.	NQP has a record of CPD completed including any certificates/awards given. Evidence of active engagement in CPD, plus reflection on what is learned.	Click or tap here to enter text.
16 – D1	The NQP is able to demonstrate leadership and judgement in making informed decisions and to take ownership of their own learning and development.	The candidate should be able to evidence their personal growth in role and reflect on how and why this changes over time.	Click or tap here to enter text.
17 – D2	The NQP is able to demonstrate a team working ethos.	Provides examples of team working, identifies the benefits of team work.	Click or tap here to enter text.
18 – E1	The NQP is able to demonstrate a practical understanding of the role and responsibilities of the mentor (Practice Educator) in a clinical setting.	The candidate should provide evidence of practice education in the clinical setting including sign off and support of undergraduates or students on a similar programme of study as the named mentor.	Click or tap here to enter text.
19 – F1	The NQP is able to demonstrate an understanding of the requirement to manage their own fitness to practice and an awareness of the appropriate support mechanisms which exists within their Trust.	Aware of services and what they offer, able to signpost to Living Well Service, fast track Physio, etc.	Click or tap here to enter text.
20 – G1	The NQP is able to demonstrate insight into their own professional and clinical practice by using reflective models.	Demonstrates understanding of Models of Reflection (e.g. Gibbs/Schon/Koln/Johns/Driscoll), is able to implement frameworks of reflection to evaluate, analyse and provide insight in reflection to enable positive outcomes in learning from their experience.	Click or tap here to enter text.

Part 4: Completion check	To be completed by the Clinical Education Lead

Are all sections of the form completed? Does the applicant meet the minimum criteria (parts one / two)?

Yes	Forward to panel for interview. Date sent to panel:	Click or tap here to enter text.
No	If application incomplete, return to applicant for review (date):	Click or tap here to enter text.
	If minimum criteria not met, record as unsuccessful (date):	Click or tap here to enter text.

Part 5: Interview panel			•	To be com	pleted by the	panel
tracking t	pplicant met the required criter hrough the NQP Consolidation plete a recommended outcome appropr	l of L	earning Prog	gramme?	Vac	
	for fast-track at 12 months: trictions within the Fast Track SOP			rogramme at 6 international NQPs with		
	for fast-track at 18 months: trictions within the Fast Track SOP		Complete p	rogramme at 1	2 months:	
Complete full programme (24 months):			Complete p	rogramme at 1	8 months:	
				rogramme imm		
	document the rationale for the decision and includ	ie an ap	propriate action plai	n for the applicant:		
Panel details:			Date of par	iel:	Click or tap he enter text.	re to
Name:	Click or tap here to enter text.		Role:Click or tap here to enter text.			
Name:	Click or tap here to enter text.		Role:	Click or tap here	to enter text.	

Role:

Click or tap here to enter text.

Name:

Click or tap here to enter text.