

Transcript of the NHS England webinar, Preceptorship for podiatrists, held on 15 November 2023 and chaired by Joanne Casey

0:0:0.0 --> 0:0:0.550

Mark Platt

It's starting.

0:0:0.560 --> 0:0:0.940

Mark Platt

There we go.

0:0:2.540 --> 0:0:2.810

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It's.

0:0:3.880 --> 0:0:14.750

Joanne Casey

Apologies if that was my fault, I'm not quite sure if I was meant to push that button or someone else meant to push the button, so maybe we'll just do a little recap then as this is a recorded session and we're just starting.

0:0:14.760 --> 0:0:15.350

Joanne Casey

So welcome.

0:0:15.390 --> 0:0:18.450

Joanne Casey

Welcome to those of you who are just joining us now. Anna.

0:0:18.460 --> 0:0:23.250

Joanne Casey

Second, welcome to those of you that have been here for the last five minutes or so and maybe listened to this short introduction.

0:0:23.860 --> 0:0:25.130

Joanne Casey

My name is Joanne Casey.

0:0:25.140 --> 0:0:31.870

Joanne Casey

I'm professional development lead at the Royal College of Podiatry, and tonight we're hosting with NHS England the HTPC and Oxley's health.

0:0:31.880 --> 0:0:44.220

Joanne Casey

Health trust our webinar on Preceptorship specific to the Podiatry profession and we'll just do a little round Robin of the people in the room and if I start with the speaker that's gonna be going first this evening and that will be mark.

0:0:44.230 --> 0:0:45.390

Joanne Casey

Mark is going to introduce yourself.

0:0:45.810 --> 0:0:46.180

Mark Platt
Yep.

0:0:46.190 --> 0:0:47.500

Mark Platt
Hello, my name is Mark Platt.

0:0:47.510 --> 0:0:54.520

Mark Platt
I'm policy lead at the Healthcare Professions Council and have been leading our work on developing our principles for preceptorship.

0:0:55.560 --> 0:0:56.100

Joanne Casey
That's lovely.

0:0:56.110 --> 0:0:56.870

Joanne Casey
Thanks, mark.

0:0:56.880 --> 0:0:57.360

Joanne Casey
And Amanda?

0:0:58.640 --> 0:0:59.410

WEAVER, Amanda (NHS ENGLAND - T1510)
Evening everyone.

0:0:59.420 --> 0:1:0.390

WEAVER, Amanda (NHS ENGLAND - T1510)
My name is Amanda Weaver.

0:1:0.400 --> 0:1:4.720

WEAVER, Amanda (NHS ENGLAND - T1510)
I'm a physiotherapist and I'm the HP preceptorship workforce leader, NHS England.

0:1:5.670 --> 0:1:6.60

Joanne Casey
Perfect.

0:1:6.70 --> 0:1:6.620

Joanne Casey
Thank you.

0:1:6.630 --> 0:1:9.80

Joanne Casey
And Felicity for you and Alexa, please.

0:1:10.250 --> 0:1:10.820

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Hi everyone.

0:1:10.830 --> 0:1:11.440

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I'm Felicity.

0:1:11.450 --> 0:1:18.680

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I'm a podiatrist and an HP preceptorship lead and I'm gonna be here alongside Alexia, who is gonna be joining.

0:1:18.690 --> 0:1:24.410

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

She's currently just doing some now surgery, and she's gonna be talking about her perception of experience as a percept D.

0:1:25.130 --> 0:1:25.560

Joanne Casey

Lovely.

0:1:25.570 --> 0:1:26.360

Joanne Casey

Thank you.

0:1:26.430 --> 0:1:32.240

Joanne Casey

So this is a a webinar this evening about preceptorship Podiatry professions are small profession.

0:1:32.250 --> 0:1:34.270

Joanne Casey

We've got just shy of 11,000.

0:1:34.370 --> 0:1:40.80

Joanne Casey

Sorry, 12,000 of us registered on the HTPC register, which was a data from March this year.

0:1:40.210 --> 0:1:49.700

Joanne Casey

That's about one per 5700 residents in the UK, so we're a small but very vital profession within the AHP community and the NHS has long term plan.

0:1:50.270 --> 0:2:3.840

Joanne Casey

That's 2019 plan originally and it is also this new plan that's come through is to look to support and retain podiatrists within England and part of the preceptorship sort of work plan is actually a very pivotal in doing that.

0:2:3.900 --> 0:2:17.130

Joanne Casey

This webinar here is, you know, very important one to successfully transition and develop a student podiatrists into their roles as they won't go into the workplace and develop their careers, so we'll just start this evening then.

0:2:17.140 --> 0:2:19.890

Joanne Casey

So next slide, please, Martin.

0:2:20.280 --> 0:2:21.810

Joanne Casey

This is our agenda tonight.

0:2:21.820 --> 0:2:25.390

Joanne Casey

We've got preceptorship principles with Mark from the HTPC.

0:2:25.400 --> 0:2:38.180

Joanne Casey

We've then got preceptorship updates with Amanda Oxley, with Felicity and Alexa are going to talking about actually preceptor shipping actions they've been doing preceptorship now for a while and that will be the lived experience with Alexia or the preceptorship.

0:2:38.190 --> 0:2:39.80

Joanne Casey

And then I'm.

0:2:39.130 --> 0:2:45.530

Joanne Casey

I'll update you on the workforce educational reform plan, but also specifically the preceptorship project that was undertaken.

0:2:45.930 --> 0:2:47.430

Joanne Casey

We've got a poll in the chat.

0:2:48.360 --> 0:2:50.750

Joanne Casey

I'm just going to launch the poll.

0:2:50.820 --> 0:3:0.580

Joanne Casey

I'm hoping I'm doing this right now and it should then ask you a little bit about whether or not you have heard about preceptorship before this webinar.

0:3:1.640 --> 0:3:4.150

Joanne Casey

If that coming up for everybody, uh.

0:3:8.230 --> 0:3:8.760

Joanne Casey

Great.

0:3:8.840 --> 0:3:15.820

Joanne Casey

OK, so so at the moment we've got 92% of people are suggesting they have heard of Preceptorship, which is great to hear.

0:3:15.830 --> 0:3:17.600

Joanne Casey

And I I guess that's music to your ears.

0:3:17.650 --> 0:3:24.720

Joanne Casey

Amanda and Marc, that actually the people in the room, I have heard us and I can see now we've got over 30 or 40 people in the room.

0:3:24.730 --> 0:3:26.800

Joanne Casey

So that's a large proportion.

0:3:27.470 --> 0:3:30.500

Joanne Casey

So thank you all for answering the poll.

0:3:30.890 --> 0:3:32.80

Joanne Casey

Martin, next slide please.

0:3:37.450 --> 0:3:37.860

Joanne Casey

Great.

0:3:37.870 --> 0:3:39.490

Joanne Casey

So Oberta you mark.

0:3:42.180 --> 0:3:42.630

Mark Platt

Great.

0:3:42.640 --> 0:3:43.300

Mark Platt

Thank you, John.

0:3:44.10 --> 0:3:51.110

Mark Platt

So before I start, I just say that because I'm here to talk about HCPC principles for preceptorship that the work that we've been doing is being done.

0:3:51.760 --> 0:3:52.250

Mark Platt

Uh.

0:3:52.320 --> 0:3:59.410

Mark Platt

A collaboratively with an interest England colleagues with professional bodies and also with registrants.

0:3:59.520 --> 0:4:14.420

Mark Platt

So it's a collaborative piece of work and we hope that that and is is good at carrying it through and it's good to see is we found from the pole that there's a sizable number of people already do know about preceptorship or hoping our principles can increase that could have the next slide please.

0:4:16.290 --> 0:4:21.120

Mark Platt

But just if you a little bit about hcpc, so we are uh statutory professional regulator.

0:4:21.130 --> 0:4:25.680

Mark Platt

We are here to protect the public by regulating healthcare professionals in the UK.

0:4:25.850 --> 0:4:31.180

Mark Platt

We regulate 15 / 300,000 registrants and 15 different professions.

0:4:32.50 --> 0:4:35.280

Mark Platt

We set standards professionals, education, training and practice.

0:4:35.830 --> 0:4:37.700

Mark Platt

We approve education programs.

0:4:37.710 --> 0:4:41.260

Mark Platt

Which professionals must meet complete rather to register with us?

0:4:41.750 --> 0:4:43.910

Mark Platt

We keep a register which is.

0:4:45.60 --> 0:4:50.270

Mark Platt

I sorry, keep a register of professionals who are known as registrants and those people who meet our standards.

0:4:50.600 --> 0:4:53.950

Mark Platt

We also active professionals on our register don't meet our standards.

0:4:54.380 --> 0:4:59.110

Mark Platt

And finally, we act to stop unregistered practitioners from using our 15 protected.

0:4:59.280 --> 0:5:3.170

Mark Platt

Sorry from using our 33 profession protected professional titles.

0:5:3.320 --> 0:5:5.60

Mark Platt

Sorry, could stay on that slide please.

0:5:6.220 --> 0:5:6.910

Mark Platt
Thank you.

0:5:7.20 --> 0:5:9.850

Mark Platt
So in terms of Preceptorship is interesting.

0:5:9.860 --> 0:5:10.50

Mark Platt
How?

0:5:10.60 --> 0:5:11.990

Mark Platt
How does Preceptorship fit into all of that?

0:5:12.0 --> 0:5:16.430

Mark Platt
What preceptorship helps professionals at key moments of transition?

0:5:16.750 --> 0:5:22.750

Mark Platt
It helps newly qualified professionals, which is where most people know about preceptorship and where it's traditionally been routed.

0:5:22.760 --> 0:5:28.90

Mark Platt
Certainly, if you have colleagues who are nurses or midwives, that's where they are most used to seeing perception preference.

0:5:28.240 --> 0:5:32.190

Mark Platt
But we also think it's useful for people who are returning to practice after a long time away.

0:5:32.340 --> 0:5:35.940

Mark Platt
So that includes people who taken parental leave or family care needs.

0:5:36.410 --> 0:5:49.470

Mark Platt
It's also really important for people coming to work in the UK for the first time, we're seeing an increase in the number of internationally educated and trained professionals coming to work in the work into the UK and then also for people at career progression points.

0:5:49.480 --> 0:5:58.680

Mark Platt
So people taking promotions, taking on new responsibilities, changing work locations or changing assignments, so perception can help people at those key moments.

0:5:58.930 --> 0:6:2.720

Mark Platt
And a key thing about perception is that it's about confidence.

0:6:3.150 --> 0:6:7.750

Mark Platt

It's not about retesting professional and proficiency.

0:6:7.760 --> 0:6:9.610

Mark Platt

It's about giving people a support to people.

0:6:9.620 --> 0:6:11.890

Mark Platt

Have the confidence to take on their roles.

0:6:12.460 --> 0:6:13.990

Mark Platt

Now can have the next slide please.

0:6:14.60 --> 0:6:14.420

Mark Platt

Thank you.

0:6:16.340 --> 0:6:26.550

Mark Platt

So in terms of principles, which is what I'm here to talk about, which we haven't, well, we have published and we haven't published in that we published a consultation response earlier this year.

0:6:26.560 --> 0:6:31.190

Mark Platt

But I've been working with colleagues from professional bodies and issues England on a a nice.

0:6:32.400 --> 0:6:34.660

Mark Platt

Uh, sort of more elaborate piece of guidance.

0:6:34.830 --> 0:6:44.40

Mark Platt

We've developed our principles through engagement with stakeholders, which includes, as I said, professional bodies, Energy England, also colleagues from across the devolved nations.

0:6:44.390 --> 0:6:55.890

Mark Platt

The principles were approved by HTTP Council in February of this year and we published them in our consultation response, which I'm just going to pop in the link there.

0:6:56.850 --> 0:6:57.190

Mark Platt

Uh.

0:6:57.200 --> 0:7:17.10

Mark Platt

In March of this year, the high level principles and I I heard earlier referred to as guidance, but they're not quite guidance, they're principles and they're designed to support people accessing preceptorship or people who are looking to provide preceptorship and they've been designed to be appropriate to a range of settings and working arrangements.

0:7:17.50 --> 0:7:27.860

Mark Platt

You imagine that with the number of professionals we have, the number of professions we have to see the number of titles we oversee, trying to make sure that the principles can be applicable to everyone as a key important.

0:7:28.40 --> 0:7:34.330

Mark Platt

I want to have of having the principles and I also want to make sure they're supportive to the HP's regulator infrastructure.

0:7:34.340 --> 0:7:44.870

Mark Platt

What that really means is that they are helpful in enabling our registrants to meet the standards, the standards of proficiency and the standards of conduct, performance and ethics, and the standard support continuing professional development.

0:7:46.220 --> 0:7:48.290

Mark Platt

And if I could have the next slide, please.

0:7:49.680 --> 0:7:50.910

Mark Platt

So I said the high level.

0:7:51.60 --> 0:7:57.490

Mark Platt

I'm not gonna go into into great detail each of them and encourage you to look at the consultation response pending this larger document.

0:7:57.500 --> 0:8:15.790

Mark Platt

We're intended to bring out the end of this month, but in essence they cover five key areas, so they cover organizational culture and preceptorship, and we know that for preceptorship to be embedded well and to deliver well, there needs to be a culture within the organization of the people working that supports preceptorship principal too, which is around quantity Universite.

0:8:15.800 --> 0:8:23.570

Mark Platt

So it needs to make sure that there is a continuous learning in the way of perception is provided and that includes feedback from preceptees and preceptors.

0:8:23.580 --> 0:8:29.930

Mark Platt

Perceptor's being people who are receiving preceptorship preceptors, people who are supporting them, but also them program leads as well.

0:8:30.220 --> 0:8:32.470

Mark Platt

Principle three is our own perception impairment.

0:8:32.520 --> 0:8:45.90

Mark Platt

So that's about ensuring that people who are receiving perceptive or accessing preceptorship are able to feel in control and exercise some degree of autonomy within their perception program.

0:8:45.100 --> 0:8:49.450

Mark Platt

So they have a preceptorship uh structure that meets their individual needs.

0:8:49.460 --> 0:8:53.400

Mark Platt

Cause we say this is very much about confidence rather than competence.

0:8:53.720 --> 0:8:59.250

Mark Platt

Principle four was preceptor role and preceptors are really important because those are the people that support an individual preceptees.

0:8:59.480 --> 0:9:8.570

Mark Platt

And so making sure that their wealth supported, too, is that they're trained if they need to be, that they're given support and access, and time is an important element of providing good high quality.

0:9:8.770 --> 0:9:26.290

Mark Platt

We've preceptorship and then about principles about delivering perception programs, and that's aimed at primarily people who are going to be running large programs or small programs, but running programs for delivering percept chips and to give them support that they need to do that well.

0:9:28.720 --> 0:9:35.930

Mark Platt

Again, you'll see that the these are laid out in a way that means that we hope that could be applicable to us wide range of settings as possible.

0:9:36.580 --> 0:9:38.590

Mark Platt

Can I have the final slide please?

0:9:41.390 --> 0:9:45.130

Mark Platt

So as I said, we've already published the principles in their skeletal Forbes.

0:9:45.140 --> 0:10:2.190

Mark Platt

They've speak uh in the consultation response, but I've been working quite diligently with colleagues on developing more embellished document that gives a bit more information, provides case studies and links to existing perception offers provided by the NHS across the Four Nations or by professional bodies.

0:10:3.100 --> 0:10:5.560

Mark Platt

And so you'll have good practice guidance.

0:10:5.570 --> 0:10:6.630

Mark Platt

It will have case studies.

0:10:8.470 --> 0:10:18.180

Mark Platt

They'll also be supporting information available on our website, so we're developing content, our web pages that to support people, not just the resource itself, but additional content.

0:10:18.820 --> 0:10:33.480

Mark Platt

Also, one of the great successes we've had from this work is we've created a four NHS Systems Working group, so perceptorship is offered across three of the four UK nations that England, Scotland and Wales.

0:10:33.490 --> 0:10:34.900

Mark Platt

It's in development in Wales.

0:10:34.910 --> 0:10:39.620

Mark Platt

It's already being delivered in Scotland, but primarily aimed at new and you qualify.

0:10:39.630 --> 0:10:45.950

Mark Platt

Then, when Amanda's framework you have comes out, it will be it'll be a fully functioning, very large program.

0:10:45.960 --> 0:11:4.180

Mark Platt

That support offered in England, but we want to make sure that we're keeping the the arrangements across the UK connected to each other because perception is one of the things we think we'll need to be developed and so only from an HP perspective, because there are so many different experiences that people have to make sure those are fed into the ongoing development and perception across the UK.

0:11:4.610 --> 0:11:15.280

Mark Platt

And then I said that we wanted to make sure that principles were suitable and applicable to a wide range of my registrants as possible, as the key recognition that came through from my consultation.

0:11:16.210 --> 0:11:23.760

Mark Platt

That number of our registrants work in settings that are either not amenable to large scale programs or they work independently.

0:11:23.770 --> 0:11:43.570

Mark Platt

Its sole providers, so who wants to do some work over the next couple of months with professional bodies to see if we can develop some further support information to support people who aren't able to access programs run by the NHS, for example, or where they're working in ways that makes it more difficult to access programs that offered somewhere?

0:11:44.810 --> 0:11:58.710

Mark Platt

As I said, UM, our consultation document was a response document has the details of the principles themselves tending the principles document, the larger scale more about Sharon will be out at the end of this month.

0:12:0.910 --> 0:12:2.500

Mark Platt

That's that's from me.

0:12:2.510 --> 0:12:4.640

Mark Platt

I'm gonna hand over now seamlessly to Amanda.

0:12:6.640 --> 0:12:8.50

WEAVER, Amanda (NHS ENGLAND - T1510)

Thank you, mark.

0:12:8.600 --> 0:12:12.170

WEAVER, Amanda (NHS ENGLAND - T1510)

So I'm gonna update on what's happening from an NHS England perspective.

0:12:12.180 --> 0:12:19.590

WEAVER, Amanda (NHS ENGLAND - T1510)

So as Mark mentioned, the HCPC have been doing the work behind the principles which are these overarching statements of good practice.

0:12:19.960 --> 0:12:25.290

WEAVER, Amanda (NHS ENGLAND - T1510)

And we've been working to see how we can actually put this into practice in our organizations.

0:12:26.250 --> 0:12:27.310

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:12:27.830 --> 0:12:36.60

WEAVER, Amanda (NHS ENGLAND - T1510)

So the first thing I just want to talk about is actually what preceptorship is, because preceptorship is that transitional support to build confidence.

0:12:36.70 --> 0:12:51.20

WEAVER, Amanda (NHS ENGLAND - T1510)

And if you take anything away from today, it's about transitional support and confidence where you've got a preceptee who is the person receiving preceptorship, a preceptor, who is the person who is supporting that person with coaching and mentoring skills.

0:12:51.610 --> 0:12:56.350

WEAVER, Amanda (NHS ENGLAND - T1510)

But also there is organizational programs that might be available to support people.

0:12:56.810 --> 0:13:7.480

WEAVER, Amanda (NHS ENGLAND - T1510)

That preceptor and Preceptee meeting and also what's available across your ICB in your system, and that's something that's quite different for ihps than maybe our nursing and our midwifery colleagues.

0:13:8.940 --> 0:13:11.730

WEAVER, Amanda (NHS ENGLAND - T1510)

So where this sits for NHS England?

0:13:11.810 --> 0:13:22.900

WEAVER, Amanda (NHS ENGLAND - T1510)

From a strategy point of view is that preceptorship is mentioned within the NHS long term workforce plan, which is what is directing the direction of work for workforce over the next few years.

0:13:23.950 --> 0:13:35.460

WEAVER, Amanda (NHS ENGLAND - T1510)

It talks about that good quality preceptorship is key for our wider workforce and this is an iterative document, so it will be built on as the AHP work evolves and is implemented.

0:13:36.380 --> 0:14:1.570

WEAVER, Amanda (NHS ENGLAND - T1510)

It's also within the AHP strategy for England as well AHP's deliver because it talks about us having AHP's in the right place at the right time with the right skills, but also talks about how do we bring together what happens in universities and what happens in the workplace and how do we close that gap so that people don't lose confidence as they move on that transition between education and employment.

0:14:1.580 --> 0:14:3.710

WEAVER, Amanda (NHS ENGLAND - T1510)

And employment next slide please.

0:14:6.800 --> 0:14:24.70

WEAVER, Amanda (NHS ENGLAND - T1510)

So one of our drivers for change on all of this work is around retention and about what happens in the first few years as we as we go into employment now this data is from NHS, it is from ESR data and it is just from England.

0:14:24.80 --> 0:14:26.100

WEAVER, Amanda (NHS ENGLAND - T1510)

So it's just put it into perspective there.

0:14:26.870 --> 0:14:36.140

WEAVER, Amanda (NHS ENGLAND - T1510)

But within the first year alone, we know that there is actually a we lose 10.3% of our workforce.

0:14:36.150 --> 0:15:1.200

WEAVER, Amanda (NHS ENGLAND - T1510)

It's actually just changed on the latest figures, so it has come down slightly, but it is still higher than

we would like to see and we are still do see this increase in the first couple of years which then flattens out and changes now the reasons behind this that we've heard are around workload around that expectation as you move into the workforce.

0:15:1.380 --> 0:15:17.50

WEAVER, Amanda (NHS ENGLAND - T1510)

But also we're hearing about work life balance, flexibility with working, but also that people want to work in different ways, is no longer that set format of just clinical work that people are wanting to do.

0:15:17.320 --> 0:15:24.140

WEAVER, Amanda (NHS ENGLAND - T1510)

They want to work across the four pillars of practice and a lot more people are a lot earlier stage are wanting to do more report Folio career.

0:15:25.180 --> 0:15:36.270

WEAVER, Amanda (NHS ENGLAND - T1510)

We're also hearing of people wanting to keep developing again across those four pillars of practice, but loud and clear, we hear time and time again that actually people just want to feel valued.

0:15:36.480 --> 0:15:40.970

WEAVER, Amanda (NHS ENGLAND - T1510)

They want to feel part of a team and they want to feel like they belong within their organization.

0:15:42.20 --> 0:15:42.820

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:15:44.250 --> 0:15:50.840

WEAVER, Amanda (NHS ENGLAND - T1510)

So I mentioned that in within the first year alone, it was sitting for AHP's and average of 10.3%.

0:15:50.850 --> 0:15:58.250

WEAVER, Amanda (NHS ENGLAND - T1510)

Now, however, for Podiatry it's actually sitting at 15%, so it's slightly above the average.

0:15:58.580 --> 0:16:19.580

WEAVER, Amanda (NHS ENGLAND - T1510)

Again, within the NHS within that first year and what we all say now is that when we link this with the retention data that the HCPC have, we can also see that we do have a bit of a trend of that drop off within those first four years of podiatrists who actually come off the register as well.

0:16:19.590 --> 0:16:20.870

WEAVER, Amanda (NHS ENGLAND - T1510)

And we need to be mindful of that.

0:16:21.30 --> 0:16:25.320

WEAVER, Amanda (NHS ENGLAND - T1510)

If people are training a people are spending that time and that investment.

0:16:25.390 --> 0:16:26.680

WEAVER, Amanda (NHS ENGLAND - T1510)

So we compare dietaries.

0:16:26.790 --> 0:16:32.370

WEAVER, Amanda (NHS ENGLAND - T1510)

We need to encourage them to stay as part of the workforce and stay registered within their profession.

0:16:33.130 --> 0:16:33.820

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide please.

0:16:35.420 --> 0:16:49.990

WEAVER, Amanda (NHS ENGLAND - T1510)

The HCPC also did a year in registration survey and the thing I just wanted to highlight from here was about podiatrists who shared that actually, they didn't feel like they were engaging with other professional groups from this study.

0:16:50.140 --> 0:16:58.270

WEAVER, Amanda (NHS ENGLAND - T1510)

So this is where we're talking about that multi professional working, that team working together and how we bring that into preceptorship.

0:16:58.340 --> 0:17:0.50

WEAVER, Amanda (NHS ENGLAND - T1510)

So again, people feel part of a team.

0:17:0.60 --> 0:17:3.830

WEAVER, Amanda (NHS ENGLAND - T1510)

They feel like they belong and they feel valued within that workforce.

0:17:4.300 --> 0:17:5.70

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide please.

0:17:6.370 --> 0:17:10.520

WEAVER, Amanda (NHS ENGLAND - T1510)

So all program NHS England has three elements to it.

0:17:10.530 --> 0:17:16.430

WEAVER, Amanda (NHS ENGLAND - T1510)

It has the pre preceptorship stage which is about what can we do to support people towards employment.

0:17:16.630 --> 0:17:27.380

WEAVER, Amanda (NHS ENGLAND - T1510)

So this will be working with our HCI colleagues, but also return to practice and international recruitment as we know that this is increasing in as we move forward.

0:17:27.930 --> 0:17:31.540

WEAVER, Amanda (NHS ENGLAND - T1510)

We've got the preceptorship element, which is what we're talking about today.

0:17:31.550 --> 0:17:38.510

WEAVER, Amanda (NHS ENGLAND - T1510)

So that period of structured support to build confidence and then we also know there's more than just preceptorship.

0:17:38.600 --> 0:17:50.990

WEAVER, Amanda (NHS ENGLAND - T1510)

There's more sitting in that element of the four pillars of practice, the capabilities and competencies and how we develop our workforce for the future and that's something we're going to look at in the future of the program.

0:17:52.110 --> 0:17:55.350

WEAVER, Amanda (NHS ENGLAND - T1510)

But what we all say now is that it needs to be tailored.

0:17:55.960 --> 0:17:59.600

WEAVER, Amanda (NHS ENGLAND - T1510)

It isn't one size fits all and it needs to be quite different.

0:18:1.40 --> 0:18:6.80

WEAVER, Amanda (NHS ENGLAND - T1510)

Everyone has different needs as they come into the workforce because of the journey that they've taken to get there.

0:18:6.220 --> 0:18:9.100

WEAVER, Amanda (NHS ENGLAND - T1510)

This might be their first, their second, their third career.

0:18:9.410 --> 0:18:11.520

WEAVER, Amanda (NHS ENGLAND - T1510)

They could have come from an apprentice journey.

0:18:12.90 --> 0:18:14.100

WEAVER, Amanda (NHS ENGLAND - T1510)

So actually, how does that differ?

0:18:14.110 --> 0:18:19.520

WEAVER, Amanda (NHS ENGLAND - T1510)

What they need as an individual, then how do we build their professional identity as a podiatrist?

0:18:19.990 --> 0:18:24.200

WEAVER, Amanda (NHS ENGLAND - T1510)

How do we link them in with the the resources that we've got from the Royal College?

0:18:24.370 --> 0:18:28.710

WEAVER, Amanda (NHS ENGLAND - T1510)

And also how do we build their networks with other podiatrists for that peer support?

0:18:30.200 --> 0:18:38.990

WEAVER, Amanda (NHS ENGLAND - T1510)

How do we include people within that allied health professions family so that we can raise everyone's voices and actually increase our access?

0:18:39.0 --> 0:18:50.550

WEAVER, Amanda (NHS ENGLAND - T1510)

Maybe to development opportunities and then how do we set as part of that wider healthcare workforce with our nursing, midwifery and other colleagues and what can we learn with them in that preceptorship space?

0:18:50.960 --> 0:18:51.680

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:18:52.560 --> 0:18:56.250

WEAVER, Amanda (NHS ENGLAND - T1510)

So we've already mentioned a marks mentioned who preceptorship is for.

0:18:56.340 --> 0:19:3.110

WEAVER, Amanda (NHS ENGLAND - T1510)

It's much wider than just newly qualified, which is where Preceptorship started out back in 2010, and the Department of Health.

0:19:4.150 --> 0:19:5.840

WEAVER, Amanda (NHS ENGLAND - T1510)

It's not just newly qualified.

0:19:5.850 --> 0:19:8.680

WEAVER, Amanda (NHS ENGLAND - T1510)

Now we're talking about people who are returning to practice.

0:19:8.690 --> 0:19:23.140

WEAVER, Amanda (NHS ENGLAND - T1510)

We're talking about internationally recruited or internationally educated individuals, people who've had longer term times away from the workplace, but also what we heard was people needing that transitional support when they changed sectors or working environments.

0:19:23.290 --> 0:19:33.590

WEAVER, Amanda (NHS ENGLAND - T1510)

So by this I mean maybe an OT who's moving from acute care into social care or an osteopath is moving from private practice into the NHS for the first time.

0:19:34.100 --> 0:19:36.90

WEAVER, Amanda (NHS ENGLAND - T1510)

And this is the same for podiatrists.

0:19:36.420 --> 0:19:46.190

WEAVER, Amanda (NHS ENGLAND - T1510)

When we're moving different sectors, there will be different transitional support requirements that you may need as you move into those different environments again so that you feel like you belong.

0:19:46.250 --> 0:19:49.650

WEAVER, Amanda (NHS ENGLAND - T1510)

You're part of that team and that you're valued in that organization.

0:19:50.260 --> 0:19:51.20

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:19:52.660 --> 0:19:58.970

WEAVER, Amanda (NHS ENGLAND - T1510)

So the benefits of preceptorship were really starting to find the impact of preceptorship.

0:19:58.980 --> 0:20:2.740

WEAVER, Amanda (NHS ENGLAND - T1510)

Now in that developing confidence, feeling valued and feeling welcomed.

0:20:3.260 --> 0:20:8.460

WEAVER, Amanda (NHS ENGLAND - T1510)

But what I would also urge you to look at is the benefits for preceptors.

0:20:8.470 --> 0:20:21.540

WEAVER, Amanda (NHS ENGLAND - T1510)

So those people that are supporting those members of staff because actually this is part of lifelong learning, developing supportive skills like mentoring and coaching and bringing those together to help an individual on their path.

0:20:22.350 --> 0:20:23.120

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide please.

0:20:25.300 --> 0:20:45.570

WEAVER, Amanda (NHS ENGLAND - T1510)

So if we can embed preceptorship and get this right for individuals, we will have more confident AHP's moving forward and this will support our recruitment and retention and we can already see from some of the nursing work and some of the organizations that have multi professional preceptorship programs for HTTPS already that this actually supports recruitment.

0:20:45.700 --> 0:20:54.160

WEAVER, Amanda (NHS ENGLAND - T1510)

It is an attractive thing for people who are moving into the workforce and it helps to keep hold of people in their roles and in their organizations.

0:20:54.790 --> 0:21:3.680

WEAVER, Amanda (NHS ENGLAND - T1510)

But at the heart of all of this is actually we want to provide enhanced care for our patients or our service users and we can do that by developing our workforce.

0:21:4.210 --> 0:21:4.970

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:21:6.20 --> 0:21:10.590

WEAVER, Amanda (NHS ENGLAND - T1510)

So we know that the moment that actually it's really varied throughout England.

0:21:10.600 --> 0:21:14.710

WEAVER, Amanda (NHS ENGLAND - T1510)

So we did some work earlier this year looking at what was actually available.

0:21:14.720 --> 0:21:24.900

WEAVER, Amanda (NHS ENGLAND - T1510)

So we could get an idea of the landscape and out of this 64% of organizations who responded did say they offered to all offered preceptorship to all of their AHP.

0:21:25.310 --> 0:21:37.590

WEAVER, Amanda (NHS ENGLAND - T1510)

That does leave us with 36% who either aren't offering anything or any offering to some AHP groups, and we know that not all of the trusts across England responded or they 71% did, which was a really good response.

0:21:38.900 --> 0:21:54.850

WEAVER, Amanda (NHS ENGLAND - T1510)

We can break it down by professions and we can see from this actually 64 of those organizations offer to podiatrists, which is fantastic, but we need to have that caveat around this that we know that not all organizations will have podiatrists within their organizations.

0:21:55.0 --> 0:21:57.540

WEAVER, Amanda (NHS ENGLAND - T1510)

But what we want to see is that this grows in the future.

0:21:57.550 --> 0:21:59.670

WEAVER, Amanda (NHS ENGLAND - T1510)

We want to see that trend of that improvement.

0:22:0.140 --> 0:22:0.870

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:22:1.790 --> 0:22:11.160

WEAVER, Amanda (NHS ENGLAND - T1510)

So we do have some resources available so that you can support preceptorship within your organizations and taking this forward.

0:22:11.460 --> 0:22:12.220

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:22:13.580 --> 0:22:18.430

WEAVER, Amanda (NHS ENGLAND - T1510)

So the first thing we have is something called step to work, which is an E learning for health module.

0:22:19.0 --> 0:22:25.230

WEAVER, Amanda (NHS ENGLAND - T1510)

This is fully accessible and you can dip in and out of this as you need to.

0:22:25.630 --> 0:22:39.670

WEAVER, Amanda (NHS ENGLAND - T1510)

It's fully accessible on any device, whether it be a mobile or a computer, and actually what it's showing already is there an increased confidence and increased readiness for preceptorship for those that go through the step to work elearning.

0:22:40.100 --> 0:22:52.210

WEAVER, Amanda (NHS ENGLAND - T1510)

What we've also done is make sure that this is available outside of the UK, because we know that this

is actually quite useful for people who are on an international recruitment transition and it can support people into the workplace.

0:22:52.580 --> 0:23:2.890

WEAVER, Amanda (NHS ENGLAND - T1510)

It can also support people in their final year of study so that they can get ready for preceptorship, or it can be used as that first step of preceptorship within organizations as is needed.

0:23:3.730 --> 0:23:4.450

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide please.

0:23:5.910 --> 0:23:10.20

WEAVER, Amanda (NHS ENGLAND - T1510)

The question I get asked mostly and say does Mark is when are we publishing?

0:23:10.30 --> 0:23:11.890

WEAVER, Amanda (NHS ENGLAND - T1510)

Well, we can tell you now, which is fantastic.

0:23:12.970 --> 0:23:29.660

WEAVER, Amanda (NHS ENGLAND - T1510)

We're publishing our document on the 27th of November, so it's only 12 days away, which I'm acutely aware of and our document will have standards and a best practice framework that will support preceptorship in organizations.

0:23:29.810 --> 0:23:37.940

WEAVER, Amanda (NHS ENGLAND - T1510)

It will also have within it some of the background and the research of why it's so important for AHP S to have preceptorship.

0:23:38.10 --> 0:23:41.400

WEAVER, Amanda (NHS ENGLAND - T1510)

So it helps you to build that business case within your organization.

0:23:42.190 --> 0:24:6.680

WEAVER, Amanda (NHS ENGLAND - T1510)

What we've done is we've taken the five principles from the HCPC and we've extrapolated those to two that standards, which allows organizations to actually benchmark themselves of how they're doing in the future, we'll we'll be producing some self assessment tools which will help people on that quality improvement journey to actually work out from a maturity matrix, how they're developing their preceptorship offerings.

0:24:7.210 --> 0:24:9.320

WEAVER, Amanda (NHS ENGLAND - T1510)

There will also be a toolkit of resources.

0:24:9.990 --> 0:24:14.640

WEAVER, Amanda (NHS ENGLAND - T1510)

These aren't mandatory, they are templates that people can use if they wish to.

0:24:14.930 --> 0:24:29.650

WEAVER, Amanda (NHS ENGLAND - T1510)

We were asked by quite a lot of organisations if we had templates, so we've listened to that feedback and we have provided that some of that feedback came from the consultation with the HCPC and that toolkit will be something we build on in the future.

0:24:29.720 --> 0:24:35.110

WEAVER, Amanda (NHS ENGLAND - T1510)

So although we're gonna have a few parts that will start, there's gonna be 10 documents that will be released at the same time.

0:24:35.320 --> 0:24:37.790

WEAVER, Amanda (NHS ENGLAND - T1510)

We'll be building on that over the next six months.

0:24:38.710 --> 0:24:39.430

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide please.

0:24:42.60 --> 0:24:49.370

WEAVER, Amanda (NHS ENGLAND - T1510)

So Preceptorship is not going to happen and won't be high quality if it's not delivered by high quality preceptors.

0:24:49.440 --> 0:24:51.690

WEAVER, Amanda (NHS ENGLAND - T1510)

So we need to invest in their training.

0:24:52.0 --> 0:24:56.470

WEAVER, Amanda (NHS ENGLAND - T1510)

So what we've been involved in is multi professional preceptor training, which is now live.

0:24:56.480 --> 0:25:4.870

WEAVER, Amanda (NHS ENGLAND - T1510)

It's got 5 units on here and it can be accessed via the Learning Hub hub page and this is truly multi professional.

0:25:4.880 --> 0:25:11.110

WEAVER, Amanda (NHS ENGLAND - T1510)

We've worked very closely with our nursing and midwifery colleagues and is aligned to all of the work that we've been doing.

0:25:11.670 --> 0:25:20.440

WEAVER, Amanda (NHS ENGLAND - T1510)

Again, is that first step to either introduce preceptorship to Perceptors and their role, or as a refresher for people as they move forward.

0:25:20.950 --> 0:25:22.80

WEAVER, Amanda (NHS ENGLAND - T1510)

Next slide, please.

0:25:22.250 --> 0:25:35.90

WEAVER, Amanda (NHS ENGLAND - T1510)

So I mentioned the Learning Hub NHS England is moving towards the learning hub for all of their

elearning, so our program also has a catalog on there which is an ability to share resources and sign posts to different resources.

0:25:35.100 --> 0:25:40.950

WEAVER, Amanda (NHS ENGLAND - T1510)

So we do have a profession resources page on there which links with all the work from the Royal College of Podiatry.

0:25:42.370 --> 0:25:48.730

WEAVER, Amanda (NHS ENGLAND - T1510)

So last slide for me is just our contact details for our program and our website.

0:25:48.820 --> 0:25:59.970

WEAVER, Amanda (NHS ENGLAND - T1510)

And just to say, as I mentioned that the preceptorship standards and framework will be published on the 27th of November, we will be holding some launch events for that which will be coming out in comms.

0:26:0.360 --> 0:26:3.470

WEAVER, Amanda (NHS ENGLAND - T1510)

But please do contact the program if you need any more information.

0:26:3.800 --> 0:26:4.390

WEAVER, Amanda (NHS ENGLAND - T1510)

Thank you.

0:26:4.400 --> 0:26:5.340

WEAVER, Amanda (NHS ENGLAND - T1510)

And I'll hand David, Felicity.

0:26:9.100 --> 0:26:10.120

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Thank you.

0:26:10.260 --> 0:26:16.210

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so hello everyone, and welcome to the obviously perception webinar.

0:26:16.220 --> 0:26:20.970

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I'm gonna be talking a little bit about applying it into practice and seeing it in the real world.

0:26:21.220 --> 0:26:25.590

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so just next slide please, just to meet the team.

0:26:25.600 --> 0:26:27.70

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So I am Felicity.

0:26:27.160 --> 0:27:0.620

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I have podiatrist by background and I started with an OXLEAS as a band 5 and still remain and I

worked in the community and specialised in the diabetic foot and pressure sores and then I found that I had a passion for developing others and loved having students so applied for this job as soon as it came out and to be preceptorship lead alongside my colleague Hannah who's also in the webinar and she's a physio and she created this program from the beginning and I joined a little bit later on.

0:27:0.630 --> 0:27:5.980

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

But just to say it's an AHP program created by AHPS, which is great.

0:27:6.630 --> 0:27:7.540

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Next slide please.

0:27:9.560 --> 0:27:13.550

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so just in terms of a timeline and how we got to where we are now.

0:27:13.560 --> 0:27:18.800

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So actually at OXLEAS we were looking at retention back in 2017.

0:27:19.280 --> 0:27:31.450

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I'm OXLEAS I think had one of the worst retention rates within within London and and NHS England actually tasked the trust to improve those retention rates.

0:27:31.740 --> 0:27:44.810

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So our trust looked at how would maybe we could implement preceptorship for AHPS because as you can see from those stats from Amanda, we were losing quite a lot within the first couple of years.

0:27:45.220 --> 0:27:53.560

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And So what we had available at OXLEAS is we had a nursing specific percept ship program which are AHPS were invited on to.

0:27:54.390 --> 0:28:3.20

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

But looking at the feedback from that is it got very nursing specific towards the end and wasn't really applicable to our HP.

0:28:3.30 --> 0:28:7.40

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So there was a high dropout rate for perceptive HTTPS.

0:28:7.410 --> 0:28:13.520

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So we looked at using our student tariff money and looked at creating some and preceptorship lead post.

0:28:13.530 --> 0:28:18.440

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And that's when Hannah came along with our other colleague, Anna, who has since left the team.

0:28:18.450 --> 0:28:19.790

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
But she's an OT as well.

0:28:20.340 --> 0:28:36.490

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
And and they looked at creating a perceptorship program, and in the first year, I think there's a 20% improvement in retention and they took this figure to health education England to win a pot of money to share this model across London.

0:28:36.500 --> 0:28:45.510

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
So this was the Pan London Mental Health and community Community integrated trusts, so that was we were successful with that.

0:28:45.520 --> 0:28:52.370

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
And then that's when I came on board with the team back in 2020 and we were ready to launch ready to go February 2020.

0:28:52.380 --> 0:28:57.20

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
But we all know what happened there and it was obviously COVID.

0:28:57.30 --> 0:28:59.70

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
So our original model.

0:28:59.650 --> 0:29:1.570

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Ohh it's gone back to the previous slide.

0:29:2.840 --> 0:29:11.170

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Umm, our original model was to go in to each individual trust and do a bespoke roll out and but we had to change it to a virtual.

0:29:11.180 --> 0:29:28.530

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
But really, that was a silver lining we feel, and because we brought everyone in together as a Pan London AHP community and as we had some really wonderful feedback and we submitted a business case to our trusts to expand the program out nationally.

0:29:28.540 --> 0:29:54.320

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
So not only our London trust and also not just NHS trusts, and we now offer our program out to private providers, individuals, local authorities and and we are now expanding our AHP community and in our first year full time we were shortlisted for Digital Practice award for the National Capital Awards and again in 20 and 23.

0:29:54.330 --> 0:30:14.190

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So we're really proud of our achievements and how we have been able to expand this program out, but really resonate with what and Amanda mentioned there about podiatrists, I think when because we're such a small profession and we can well, I can definitely relate to feeling quite insular within my profession.

0:30:14.200 --> 0:30:30.810

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And I'm kind of just staying within my team within my profession and maybe not broadening my horizons or my networks and I feel, you know, if if this was something that was offered to me when I first started, I would have jumped at this chance to meet other AHP's learn about each other's roles.

0:30:31.240 --> 0:30:34.80

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so yeah, that's how we've gotten to where we are now.

0:30:34.870 --> 0:30:35.890

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And next slide, please.

0:30:37.280 --> 0:30:44.160

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So in terms of our partners, this is just a picture of all of our partners that we have on our programme at the moment.

0:30:44.300 --> 0:31:3.550

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So you can see a real variety and we've got some majority within London and but we do have some national partners now and are real mixture of NHS and we've got a Hospice and local authority and obviously we're we are wanting to welcome even more as we as we go along.

0:31:3.560 --> 0:31:6.110

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So that's yeah, our partners.

0:31:6.120 --> 0:31:7.210

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So next slide please.

0:31:8.940 --> 0:31:42.810

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So just in terms of what we offer in terms of our program and we're going to a bit more detail with some of these, but we have a monthly bound 5 meetings with the band five, yeah, the Band 5 preceptees we currently have on our program podiatrists, occupational therapists, physiotherapists, speech, language therapists, dieticians, diagnostic radiographers, therapeutic radiographers and we have just welcomed an orthoptists and so real variety of AHPS which is fab and in those meetings we cover a real I brought and spectrum of topics which are go into more detail.

0:31:43.720 --> 0:31:45.870

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We provide that perceptual training.

0:31:45.880 --> 0:31:51.910

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So Amanda was talking about we've got to be able to support our preceptors if we wanting to support our preceptees.

0:31:52.320 --> 0:32:1.190

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so we do a full day training workshop, which is super Interactive and you're there with other AHP colleagues as well to share experiences.

0:32:1.760 --> 0:32:9.430

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And after that training we go on to continued support our preceptors by providing them with support groups.

0:32:9.440 --> 0:32:11.10

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We do this every other month.

0:32:11.480 --> 0:32:19.690

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We will provide updates, we go around the room and just hear about their challenges and maybe some successes that they're having with their preceptees.

0:32:20.460 --> 0:32:24.710

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We provide all of our protectees with a one to one, so we introduce the program.

0:32:24.720 --> 0:32:35.790

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We introduce the concept of preceptorship because for many of those that that are new qualified, they don't, you know much, don't know much about Preceptorship and the concept and the benefits of it.

0:32:35.940 --> 0:32:38.30

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so we go through all of that with them.

0:32:38.240 --> 0:32:44.650

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And we also have a preceptorship portfolio and a portal, which I'll be showing you little bits off.

0:32:44.660 --> 0:32:45.760

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So next slide please.

0:32:47.940 --> 0:32:57.10

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So just to linking with the HEE perception principles and we were we were really wanting to kind of get involved in providing our feedback with these principles.

0:32:57.20 --> 0:33:15.230

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So we did attend some of the consultation meetings around them and we have obviously reviewed the principles and really happy to say that our program aligns with the HCPC principles and we work a lot with the national team providing case studies and science and success stories.

0:33:15.610 --> 0:33:21.570

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so yeah, that's how we are linking with national and then next slide please.

0:33:22.310 --> 0:33:25.100

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So this is the portal, so if we yeah, just do a couple of clicks.

0:33:25.110 --> 0:33:29.580

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So preceptees have access to the portfolio.

0:33:29.590 --> 0:33:31.800

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It has their competencies on it.

0:33:31.810 --> 0:33:35.780

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It has a calendar on it which has our meetings on.

0:33:36.390 --> 0:33:43.360

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It also has a forum which we've recently just launched so septis can ask other preceptees questions.

0:33:43.370 --> 0:33:50.950

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We've got a networking section where they can introduce themselves and it's a very small world, so they might recognize them very from university.

0:33:51.180 --> 0:34:0.710

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We've got a login now for the preceptors where they can review and approve and preceptees competencies and then lastly we have got our podcast on there.

0:34:0.720 --> 0:34:8.60

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So those that like listening to podcasts, do you really recommend you going away and listening to a couple of the episodes?

0:34:8.70 --> 0:34:18.620

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We talk to preceptees past and present, and recently we actually invited our first lot of preceptors on to talk about the benefits that they found as a preceptor.

0:34:19.550 --> 0:34:23.860

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And then going into and the portfolio and our competencies in more detail.

0:34:24.170 --> 0:34:35.940

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so just to say, with the word competencies and we aren't deeming them incompetent because we know that they've gone to university, but it's a process of them becoming consciously competent.

0:34:36.50 --> 0:34:40.900

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So that links back to what Mark was saying around and really building that confidence.

0:34:40.910 --> 0:34:44.620

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So we're hoping to instill that confidence by them.

0:34:44.730 --> 0:35:0.470

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

You know, achieving these competencies over time and in, in the hope to, you know, tackle maybe some imposter syndrome, they may be facing and we do have some really wonderful feedback from preceptors that complete the competencies and the portfolio.

0:35:1.0 --> 0:35:8.550

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And just to talk through this is just an example of one, we actually link them to the HCPC standards of CPD.

0:35:8.740 --> 0:35:22.90

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So not only are they, you know, they're being aware of the hcpc sounds a proficiency, but also how to formulate their CPD portfolio and that is something that I definitely struggled with when I first started.

0:35:22.100 --> 0:35:28.910

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We didn't really have much of a template, but they're having that awareness straight away and they're bedding that really good practice from the get go.

0:35:29.100 --> 0:35:33.760

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And actually we hear a lot of preceptees saying that they're helping their team members around their CPD portfolio.

0:35:34.390 --> 0:35:47.440

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I'm recently we have had our first perception that went to renew and went for a first renewal and got called to audit and the really wonderful thing is she was able to use her perception portfolio for that whole first year.

0:35:47.450 --> 0:35:52.100

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So it's wonderful that we're able to support them with their CPD portfolio as well.

0:35:53.440 --> 0:35:54.540

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Hey, next slide please.

0:35:56.180 --> 0:36:0.750

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
And just to talk through a little bit more about the portfolios, there's 33 competencies in total.

0:36:0.760 --> 0:36:14.680

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Sorry, this is another clicky one and we've got a contract and which they signed with their percept talks and we have supervision logs which we have created for their preceptee and preceptor to complete.

0:36:14.750 --> 0:36:18.520

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
There's different categories within the portfolio.

0:36:18.590 --> 0:36:34.210

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
We also have a post and profession specific section, so this is where we recognise that obviously it's an AHP program, but within the professions there's going to be specific requirements and we also incorporate observed clinical practice and endorsement.

0:36:34.220 --> 0:36:40.750

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
So collecting those wonderful bits of feedback that they might receive, and then obviously they have access to electronic portal.

0:36:41.380 --> 0:36:42.360

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Next slide please.

0:36:44.590 --> 0:36:49.820

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Just in terms of our meetings, they're all virtual and they're monthly.

0:36:49.830 --> 0:36:50.800

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
They're bite size.

0:36:50.810 --> 0:36:57.560

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
They're only two hours, but they are all recorded as well and the kind of topics that we cover more the softer skills.

0:36:57.610 --> 0:37:4.420

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
So things like resilience, we do sessions just all on networking and broadening their networks.

0:37:4.480 --> 0:37:8.260

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
And we look at things like prioritization and delegation.

0:37:8.410 --> 0:37:24.80

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Well, being establishing that work life balance, quality improvement, looking at reflection, we incorporate perception buddies who are preceptees of previously completed perceptorship and looking at managing challenging conversations culture and change.

0:37:24.90 --> 0:37:32.830

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We did a session in October about anti racism and we've just done a session today all about leadership and how you're meant to.

0:37:32.870 --> 0:37:40.520

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

You know you're meant to steal that for even if you're newly qualified, you don't have to be a manager to assert those leadership qualities.

0:37:40.530 --> 0:37:44.950

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So a real broad range, but they're really applicable to all AHPS.

0:37:45.550 --> 0:37:48.680

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Can we also do topics around AHP clinical case studies?

0:37:48.860 --> 0:38:4.840

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So that's where they can present about their roles and AHP learn about the other AHP roles and we have had feedback that set teacher said that's really helped with that professional identity because they're learning about the different roles, but also what they can bring to that particular case study.

0:38:5.410 --> 0:38:7.60

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We do lots of breakout rooms.

0:38:7.70 --> 0:38:9.780

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Make try and make it as interactive as possible.

0:38:10.50 --> 0:38:18.180

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Lots of polls and quizzes, and they also get us certificate for every session they intend for their CPD portfolio next meeting thanks.

0:38:18.560 --> 0:38:18.950

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Next.

0:38:18.960 --> 0:38:20.220

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Uh slide.

0:38:20.230 --> 0:38:31.280

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So the training that we provide for the preceptors, this is full day workshop and we cover many different topics so that we get actually get them to reflect on their experience when they first qualified.

0:38:31.290 --> 0:38:38.130

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It's really good to get them back into that mindset and then we go through learning in the workplace what is perception.

0:38:38.140 --> 0:38:48.420

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We go through our portfolio, link it to clinical supervision, go through the HCPC standards of CPD, but also now the perception, principles and share well being and resources.

0:38:50.120 --> 0:38:50.890

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Next slide, please.

0:38:52.260 --> 0:39:2.630

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And we also have as an additional add-on accreditation with London South Bank University, which Alexia has also completed to assure talk for her experience with it.

0:39:2.900 --> 0:39:15.670

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

But it's just an opportunity for Preceptees to get 20 credits towards a masters by submitting our portfolio and they have to tweak it a little bit by including critical reflections within it.

0:39:16.240 --> 0:39:18.690

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

But it really links really, really well.

0:39:18.700 --> 0:39:26.630

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So if there are any perceptions that are super driven and know they eventually want to go on to do at the study, this is a fantastic opportunity for them.

0:39:27.880 --> 0:39:28.460

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Next slide.

0:39:30.480 --> 0:39:35.510

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So just in terms of feedback, it's another clicky one and this is our completion feedback.

0:39:35.520 --> 0:39:44.50

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So really proud of it here and just to pick out, you know the, the the last one here.

0:39:44.60 --> 0:39:48.730

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So 100% said it's helped improve their confidence to apply for Band 6.

0:39:48.740 --> 0:39:57.190

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Wrong completion and that's a huge start, especially when we want to instill confidence for those that are newly qualified and also retain.

0:39:57.480 --> 0:40:9.830

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And we actually do find a lot that complete the portfolio and perceptorship and they've got their portfolio, they've got all this wonderful, this wonderful resource that they can bring to their interviews, tons of examples.

0:40:9.840 --> 0:40:16.980

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

They can talk through and we have lots of competencies like getting involved in audits, like getting involved in Qi.

0:40:16.990 --> 0:40:22.80

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

That's really going to support them when they go on for that uh band 6 uh job interview.

0:40:22.930 --> 0:40:27.400

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So that's our feedback, but let's actually hear from a real life preceptee.

0:40:27.470 --> 0:40:31.320

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And so next slide, please, I'd love to welcome Alexia.

0:40:31.330 --> 0:40:39.620

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So she started in OXLEAS in 2020, and she completed obviously a perception, but also the accreditation.

0:40:39.950 --> 0:40:46.340

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And she's now in about 6 row, which is great, and she's just gonna be answering a few of our questions.

0:40:46.350 --> 0:40:51.150

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So next slide, I'll just go through these with Alexia, so, hi, Alexia.

0:40:51.880 --> 0:40:52.350

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Hi.

0:40:52.620 --> 0:40:53.390

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Hi, lovely.

0:40:53.400 --> 0:40:53.970

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We can hear you.

0:40:53.980 --> 0:40:57.130

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

OK, I'll say you're just doing, uh, some nail surgery.

0:40:58.120 --> 0:40:58.320

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yeah.

0:40:57.440 --> 0:40:59.60

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Yes, yes, I've just finished.

0:40:59.670 --> 0:41:2.30

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Ah, I see.

0:41:2.40 --> 0:41:2.470

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yeah.

0:41:2.510 --> 0:41:6.700

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Obviously, talk us through your experience with the perception program.

0:41:8.20 --> 0:41:21.660

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So when I joined as a band five in OXLEAS, it was really overwhelming because I joined during the COVID pandemic and there was a lot of changes regarding caseloads and the sort of patients that you'd be seeing, which was mainly high risk.

0:41:22.700 --> 0:41:31.330

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So as you can and as you can imagine, if you have a bit of knowledge about Podiatry, we'll be doing a lot of with a lot of patients that have really high risk.

0:41:31.340 --> 0:41:33.590

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So that was really challenging.

0:41:33.600 --> 0:41:41.370

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So when I was introduced to preceptorship, I thought, OK, I thought maybe to be completely honest I thought maybe it would.

0:41:41.380 --> 0:41:49.330

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

It would just be something like a tick box that will do and then maybe help me progress on to a band 6, but actually I really really enjoyed it.

0:41:49.340 --> 0:42:5.300

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

I enjoyed the journey of completing all the competencies, meeting up with other Allied health care

professionals, and just just going through the process of finishing uni, being newly qualified and being able and confident enough to to perform my role.

0:42:5.340 --> 0:42:7.610

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So that was probably the main thing for me.

0:42:7.620 --> 0:42:9.0

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Had a good really good time.

0:42:9.450 --> 0:42:16.350

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Learned a lot and definitely build my confidence to become to progress onto Atlantic role.

0:42:17.450 --> 0:42:19.710

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Five and and what?

0:42:19.720 --> 0:42:21.750

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

What do you find are the main challenges?

0:42:21.760 --> 0:42:24.640

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

What were the main challenges when you're completing Preceptorship?

0:42:24.710 --> 0:42:24.830

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yep.

0:42:25.850 --> 0:42:33.280

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Definitely completing the preceptorship during during the pandemic and just obviously we had to do everything virtual.

0:42:33.290 --> 0:42:38.820

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So that was that was that wasn't too bad, considering how much work workload we all had to do.

0:42:39.40 --> 0:43:11.470

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So that was quite good for from myself and other people that I spoke to as well, and also just being able to just have one day where you finish your clinic a little bit early, you sit down, you're able to just sit back, relax and just have a real conversation with other allied healthcare professionals to see where, where everyone everyone's head is at and just just go through the process together and just it was just really good to to go through the journey with other allied healthcare professionals because Podiatry as we know is it is a small profession.

0:43:11.800 --> 0:43:29.210

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

I was the only podiatrist doing the preceptorship at the time, so just being able to speak to other OTS

physios, dieticians, speech and language and just to know that everyone was going through the same emotions and everything at the same time, that was really, really good and really welcoming.

0:43:30.60 --> 0:43:31.60

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yeah, absolutely.

0:43:32.170 --> 0:43:36.380

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And and what do you feel were the main benefits to you?

0:43:39.180 --> 0:43:39.410

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Umm.

0:43:36.390 --> 0:43:40.710

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I know you spoken through a few of those, but would you like to expand on any others?

0:43:41.660 --> 0:43:52.310

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

I think the main thing was when I finished all my competencies and I moved on to do the the accreditation at London University, South Bank University.

0:43:52.600 --> 0:44:10.530

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So there I think I was able to dive into my professional a little bit deeper because then you're mean the assessment that I did at the time involved going through a case study and then using literature to back up my clinical thinking and my clinical reasoning and things like that.

0:44:10.680 --> 0:44:11.960

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So I was actually able to.

0:44:12.470 --> 0:44:16.150

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

OK, this is what I've done and I've I've actually used real case scenarios as well.

0:44:16.160 --> 0:44:35.230

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So patients that adult that was treating within community, so that was really, really good because I was able to look at the literature in terms of like wound care in term, in terms of wound dressings, in terms of national guidance and they're into the national guidance and he HCPC standards as well.

0:44:35.340 --> 0:44:42.620

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So I was able to kind of like link everything together and make it specific to my to my role.

0:44:43.50 --> 0:44:49.780

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So I was able to gain a lot of skills and a lot of knowledge through that, so that was a real real life experience for me.

0:44:49.790 --> 0:44:50.470

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
That was really good.

0:44:51.380 --> 0:44:51.950

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Yeah, I remember.

0:44:51.960 --> 0:44:57.750

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
You're reflecting on that particular patient and and how that accreditation really helps you with that.

0:44:57.880 --> 0:44:59.670

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
It was the chronic ulceration, wasn't it?

0:45:0.10 --> 0:45:0.170

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
Yes.

0:45:3.790 --> 0:45:4.350

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
Definitely.

0:44:59.680 --> 0:45:4.800

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
And it was just tweaking a few little things, wasn't it, around communication that that really helped?

0:45:4.810 --> 0:45:6.570

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Yeah, I'm.

0:45:6.620 --> 0:45:7.280

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
I know you again.

0:45:7.290 --> 0:45:12.610

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
You've touched on a little bit about how it's benefited you, but now you're further along in your career.

0:45:12.620 --> 0:45:13.190

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
You're two.

0:45:15.170 --> 0:45:15.310

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
Yes.

0:45:13.200 --> 0:45:20.490

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
I think you're two years into your band 6 and do you feel preceptorship provided you with that good foundation for your future tricks?

0:45:22.530 --> 0:45:22.780

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
Yeah.

0:45:20.500 --> 0:45:23.500

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
I know you've got lots of aspirations and then.

0:45:25.60 --> 0:45:26.170

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
Yes, definitely.

0:45:26.180 --> 0:45:37.360

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
So I think finish in university and then getting a job straight away as a band 5 and then being introduced straight away onto the preceptorship programme was actually it.

0:45:37.370 --> 0:45:59.170

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
It just gave me allowed me to just continue with the momentum and to just continue pushing and continue progressing and which is I think it was a great mindset for me to develop right at the start of my career because after that then I'll completed all the competencies and then I moved on to do the the CREDITATION, which was the level 7 creditation.

0:45:59.180 --> 0:46:0.260

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
So that was really interested.

0:46:0.270 --> 0:46:8.320

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
He pushed me from a different from a different aspect, so I was able to use literature to back up all my clinical thinking and everything else.

0:46:21.810 --> 0:46:22.60

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Umm.

0:46:8.330 --> 0:46:32.320

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
My clinical approach to a different case scenarios and I think from from from that perspective is it allowed me to just have to develop like a a solid mindset of progression from the start of my of my career, which I really really did enjoy that he played a relevant role in, in my personal life as a as a podiatrist.

0:46:33.100 --> 0:46:33.220

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)
Yeah.

0:46:32.630 --> 0:46:35.590

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)
So since then, just to give an example, so I've been able to.

0:46:36.420 --> 0:46:55.110

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

I have completed the levels of working notation and doing a Level 7 diploma in Healthcare Management, which is just showed because I at the start I wasn't sure if I wanted to, to actually work and do something else on the side, but after completing the level 7 accreditation, I thought you know what I can actually do this.

0:46:57.870 --> 0:46:58.250

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Umm.

0:46:55.220 --> 0:47:8.70

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

I can actually work and manage my time a little bit better and do other things that I'm interested in as well to progress as a professional, so it definitely did it shift my mindset from the start, so that was really, really good.

0:47:9.550 --> 0:47:11.450

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

That was round up beautifully, Alexia.

0:47:13.260 --> 0:47:19.360

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And and just to say, have you supported any newly qualified podiatrist with perception as a preceptor?

0:47:20.450 --> 0:47:47.140

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Not officially as a preceptor, but I have helped nearly qualified podiatrists coming into OXLEAS with their portfolios, their competencies and just giving them a bit of guidance, especially because coming in as a as a as a band 5 sometimes can be a bit overwhelming, especially when you've got other things going on in your personal life, but you still wanna continue to learn and stay motivated within the profession.

0:47:47.150 --> 0:48:1.170

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So yes, I have helped them with completing competencies and just like giving them ideas on what other things that they could do to to continue to, to keep the momentum so that we can grow as altogether definitely.

0:48:0.630 --> 0:48:3.140

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Umm this one last week.

0:48:1.640 --> 0:48:4.100

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

And also I've been telling all my friends as well.

0:48:5.270 --> 0:48:5.780

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

What was that?

0:48:7.160 --> 0:48:7.570

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Woo.

0:48:9.10 --> 0:48:9.790

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So that's good.

0:48:9.490 --> 0:48:15.580

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So we need and then lastly, would you recommend Percept ship to newly qualified podiatrists?

0:48:16.430 --> 0:48:17.870

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Oh yes, definitely.

0:48:18.770 --> 0:48:34.480

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Definitely only 100% I think with, especially if you're working within the National Health at the moment to taking into account on the risk categories and criterias, we're moving on very much from an increased risk to high risk service.

0:48:34.670 --> 0:48:38.380

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So you can be very full on and overwhelming.

0:48:38.390 --> 0:48:51.990

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

You're just dealing with wounds all the time, and you can easily get lost and forget about the, you know, all the other aspects of Podiatry is Podiatry that we have, you know, all this clinical scope and things that we can do.

0:48:52.180 --> 0:48:55.150

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

So Preceptorship definitely right at the start.

0:48:55.160 --> 0:49:0.290

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Soon as you finish university and you know, start into your your band 5 role.

0:49:0.300 --> 0:49:16.370

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

It's definitely really good for mindset and just to continue and to enjoy your career, which I can, I mean personally, I can only speak for myself, but I have been enjoying since finishing preceptorship and just building on and even better things I guess.

0:49:17.400 --> 0:49:18.580

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

I have amazing.

0:49:18.590 --> 0:49:19.970

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Thank you so much.

0:49:20.350 --> 0:49:20.810

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

You're welcome.

0:49:20.20 --> 0:49:28.550

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And I think that's all from OXLEAS, but obviously I have any questions do put them in the chat and I'll share our website link as well.

0:49:28.860 --> 0:49:29.580

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So thank you.

0:49:30.550 --> 0:49:30.930

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Thank you.

0:49:30.940 --> 0:49:33.360

Joanne Casey

Thanks for this tea and Alexia, that's really great to hear.

0:49:37.780 --> 0:49:38.80

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Just.

0:49:33.370 --> 0:49:40.490

Joanne Casey

And it's really lovely to hear your enthusiasm, Alexia, in the background and you know, we wish you very well on your career journey.

0:49:40.500 --> 0:49:44.790

Joanne Casey

And thanks for Lucy for being so supportive of Alexia on her trajectory.

0:49:45.720 --> 0:49:46.80

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Thank you.

0:49:45.640 --> 0:49:47.690

Joanne Casey

So do we have any questions in the chat?

0:49:47.700 --> 0:49:49.710

Joanne Casey

We did want to try and make this a bit interactive.

0:49:49.720 --> 0:50:8.890

Joanne Casey

I'm going to be monitoring the chat now as we go, so if anybody wants to pop anything in anything specific about the alexia's preceptorship journey or the hcpc perceptive principles or even NHS England perceptive strategy, do pop it in now, and if not, ohh.

0:50:8.900 --> 0:50:12.230

Joanne Casey

So when will the HCPC principles on perceptorship be officially published?

0:50:12.240 --> 0:50:14.680

Joanne Casey

I think you said later this month Mark, didn't you but?

0:50:14.430 --> 0:50:16.10

Mark Platt

Yep, and the end of November.

0:50:18.140 --> 0:50:18.530

Mark Platt

Yeah, he said.

0:50:17.300 --> 0:50:18.860

Joanne Casey

That's great. Lovely.

0:50:18.540 --> 0:50:26.400

Mark Platt

The moment we're just finally finishing off the design stuff and also we're having them translated into Welsh so that we we can ensure that we meet our Welsh standard.

0:50:27.180 --> 0:50:30.500

Mark Platt

We currently subject to the requirements of the Welsh language standard.

0:50:30.510 --> 0:50:36.50

Mark Platt

That's gonna be moving to a more formal piece of legislation, so we want to be ahead of that with the perception of work.

0:50:37.720 --> 0:50:38.120

Joanne Casey

Lovely.

0:50:38.130 --> 0:50:38.540

Joanne Casey

Thank you.

0:50:38.550 --> 0:50:41.340

Joanne Casey

Well, do keep popping any questions into the chat.

0:50:41.450 --> 0:50:48.10

Joanne Casey

I'll just if we just at the next slide, please and ah, so, Emma Cowley just written.

0:50:48.20 --> 0:50:49.400

Joanne Casey

Thank you very much to OXLEAS.

0:50:49.410 --> 0:50:50.440

Joanne Casey

It's a huge success.

0:50:50.450 --> 0:50:53.780

Joanne Casey

So well done, there was a a real praise indeed.

0:50:54.290 --> 0:50:56.100

Joanne Casey

So thank you for the next slide.

0:50:56.110 --> 0:51:3.780

Joanne Casey

So a little bit about the workforce education reform programme that we were part of the preceptorship project that NHS England strategy was about.

0:51:3.790 --> 0:51:4.800

Joanne Casey

So next slide please.

0:51:7.510 --> 0:51:18.480

Joanne Casey

So we've called AHP 4, so back in 2021 and it just England granted the professional bodies some pocket of funding to allow them to explore workforce and education reform within their individual professions.

0:51:18.850 --> 0:51:24.540

Joanne Casey

Part of that professional work package, one of them was preceptorship and support for early careers and students.

0:51:24.550 --> 0:51:29.360

Joanne Casey

AHP 4 so it's that's the generic title for it.

0:51:30.10 --> 0:51:39.280

Joanne Casey

The specifically Podiatry took on this work package and this is available in our workforce transformation program web page, which is there.

0:51:39.290 --> 0:51:48.470

Joanne Casey

It's a live link, so if you clicked on the link you should be able to go through to our web page and that supports all of the work packages that we delivered within this workforce Pro workforce program.

0:51:48.800 --> 0:52:14.340

Joanne Casey

But AHP 4, which the retention of support for students newly qualified workforce and early careers and it it tries to include support and guidance to enable a smooth transition of professional development, whether that be a newly qualified student, whether that be a return to practice and

it's the aim to try and build confidence and to aid retention within the profession to enable job satisfaction and professional growth.

0:52:14.550 --> 0:52:21.920

Joanne Casey

And part of that work package was certain activities that we've put forward and there are assets attached to this work stream as well.

0:52:21.930 --> 0:52:27.660

Joanne Casey

So we we look to work with Podiatry managers to ensure graduates have access to an NHS band five job offer.

0:52:28.160 --> 0:52:46.10

Joanne Casey

We also were promoting an optimization of the practice based learning models and increasing capacity, confidence and system responsibility of the new graduates in the workforce by promoting that bound 5 scope of practice and then of course highlighting opportunities of preceptorship to the, you know, to everybody out there.

0:52:46.150 --> 0:52:47.430

Joanne Casey

And next slide please.

0:52:50.690 --> 0:52:51.140

Joanne Casey

It's lovely.

0:52:51.150 --> 0:52:51.960

Joanne Casey

Thank you.

0:52:52.130 --> 0:52:56.40

Joanne Casey

And I guess part of this really sits within modernizing the profession.

0:52:56.230 --> 0:53:17.340

Joanne Casey

So when we think about that flexibility of working that Amanda was talking about, when we think about the four pillars of advanced practice and that portfolio career and the benefits of preceptors in mentoring and that facilitated learning pillar, we really need to be thinking about our Podiatry career framework and of course, the Podiatry career framework maps against your professional journey.

0:53:17.510 --> 0:53:34.850

Joanne Casey

It's a new reengaged framework which was put together this year, so do go and have a look at it because it really will try and cement your journey and your professional growth to those four pillars of professional practice and it can sort of lay the landscape for you and your journey as a, as a Podiatry professional.

0:53:35.380 --> 0:53:37.210

Joanne Casey

So we've got the career framework there.

0:53:37.740 --> 0:53:42.310

Joanne Casey

The other thing we do have, and we put together, was the clinical career development preceptorship framework.

0:53:42.980 --> 0:53:45.470

Joanne Casey

So go and have a look at that particular asset.

0:53:45.660 --> 0:53:51.780

Joanne Casey

And of course, we've got the newly qualified Podiatrists toolkit, which is an enabler to get you into your first job offer.

0:53:52.530 --> 0:54:6.720

Joanne Casey

So you know, Preceptorship really is kind of a pivotal in our within the profession and the Royal College is taking it very seriously indeed and working with the with NHS England and also the HCPC to make sure that we bring it into life and into the workplace.

0:54:7.110 --> 0:54:16.920

Joanne Casey

And hopefully when we think about engaging with others that that was one of the things that we felt that possibly wasn't something we were doing or felt that lacked as a Podiatry profession.

0:54:16.930 --> 0:54:34.850

Joanne Casey

I think that was one of the stats Amanda came out with from the NHS England survey was that we didn't feel we were engaging with other professional groups by listening to Alex to Alexia's journey and the OXLEAS team, it seems like they brought together that AHP package and actually really tried to cement the integration of working with others.

0:54:35.80 --> 0:54:58.60

Joanne Casey

And when we think about modernizing the 21st century professional ever Podiatry professional, we do definitely think about that multidisciplinary team working and how we can explore working together you know picking out the sort of complex decision making that podiatrists do and how we can gain those skills, capabilities, attributes and values definitely comes out through the career framework.

0:54:58.70 --> 0:55:17.40

Joanne Casey

So do really try and have a look at those if you're a podiatrist sitting in our audience today and try and look at where your journey may start, may continue and then hopefully your trajectory to professional growth within this preceptorship section, you will sort of see these four different topic areas down the side.

0:55:17.50 --> 0:55:32.470

Joanne Casey

It's been put together quite nicely by the project officer involved there, retention and support for students due to qualified that would be 1 section there early professional growth and development, the preceptorship section, uh mentorship of developing your AHP career and there are some additional resources as well.

0:55:32.880 --> 0:55:39.650

Joanne Casey

And if you wanted to take a look at that, it would, we'd really appreciate that and the whole workforce package.

0:55:39.660 --> 0:55:44.150

Joanne Casey

So do go and have a look at how we can try and modernize the profession and develop your career.

0:55:44.960 --> 0:55:45.950

Joanne Casey

If next slide, please.

0:55:48.40 --> 0:55:57.910

Joanne Casey

So I guess that kind of brings us onto the end of the session and I've just kind of going down into the chat box a little bit and how we can try.

0:55:57.920 --> 0:56:2.800

Joanne Casey

I'm just seeing if there's anybody who's put any questions in there for us this evening.

0:56:4.360 --> 0:56:5.70

Joanne Casey

Any more?

0:56:6.250 --> 0:56:7.810

Joanne Casey

Ohh, I'd things moving a bit quickly.

0:56:8.530 --> 0:56:10.310

Joanne Casey

Umm someone just wasn't.

0:56:10.320 --> 0:56:12.280

Joanne Casey

Podiatry shouldn't be working in Silo.

0:56:12.290 --> 0:56:12.990

Joanne Casey

No, that's correct.

0:56:13.0 --> 0:56:20.120

Joanne Casey

We should be shining a light on the on the profession to work together and that's imperative and I think that we could probably all completely agree on that.

0:56:20.810 --> 0:56:29.980

Joanne Casey

And then we found working in we found in Community Trust that that virtual working works best as we cover such a large area and it cuts out travel time.

0:56:30.250 --> 0:56:31.900

Joanne Casey

And that's an interesting, wasn't it?

0:56:31.910 --> 0:56:32.860

Joanne Casey

Virtual working.

0:56:32.870 --> 0:56:49.320

Joanne Casey

And actually, if you're attending the Royal College of Podiatry's conference this year, you'll know that on our leadership section on the Friday at 1:00 o'clock, we are covering a real wear headset technology that was brought to us by one of our leaders in the profession who took on the leadership programme at the Royal College.

0:56:49.450 --> 0:56:56.640

Joanne Casey

And she's gonna be talking about how she was able to adapt real wear headset technology into virtual learning as well as virtual working.

0:56:57.130 --> 0:57:5.820

Joanne Casey

So again, I think if you're working in an environment where you're landscape is broad, you might find that a useful session to come to if you're going to be coming to our college conference.

0:57:6.510 --> 0:57:12.330

Joanne Casey

We've got a little thing down here for you, Felicity, about the cost involved for private practices.

0:57:12.740 --> 0:57:14.800

Joanne Casey

I'm presuming that means the financial cost.

0:57:14.980 --> 0:57:20.400

Joanne Casey

Do you know your financial package or are you wanting people to direct to your link there in your slides?

0:57:21.690 --> 0:57:23.240

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yeah, we do know the cost.

0:57:23.650 --> 0:57:24.820

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

So it will.

0:57:25.50 --> 0:57:33.840

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

It's £350 per septi and that includes the package for preceptee and preceptor for the whole duration of perception.

0:57:36.50 --> 0:57:36.500

Joanne Casey

Lovely.

0:57:36.510 --> 0:57:37.400

Joanne Casey

Thank you.

0:57:38.120 --> 0:57:42.610

Joanne Casey

So do we have any other questions from the audience this evening?

0:57:47.90 --> 0:57:48.500

Joanne Casey

Oh, what else put in?

0:57:48.510 --> 0:57:49.260

Joanne Casey

That's a bargain.

0:57:49.330 --> 0:57:49.730

Joanne Casey

There we go.

0:57:51.300 --> 0:57:52.170

Joanne Casey

Very well done.

0:57:52.360 --> 0:57:54.990

Joanne Casey

So, Mark, Amanda, Felicity and Alexia.

0:57:55.0 --> 0:57:57.850

Joanne Casey

Was there anything else that you'd like to say before we close this webinar?

0:58:3.330 --> 0:58:3.960

Mark Platt

Well, I was waiting.

0:58:3.360 --> 0:58:6.510

WEAVER, Amanda (NHS ENGLAND - T1510)

I will just that we might jump at the same time.

0:58:6.520 --> 0:58:21.940

WEAVER, Amanda (NHS ENGLAND - T1510)

I'm just gonna say I've added to the chat the information about the webinars and support events that Mark and myself will be involved in regarding the PERCEPTORSHIP standards and frameworks and also the principles from the HCPC so people can join us to hear more.

0:58:24.140 --> 0:58:25.410

Mark Platt

I was just gonna say cheese things.

0:58:25.480 --> 0:58:25.970

Mark Platt

One is.

0:58:25.980 --> 0:58:32.30

Mark Platt

Thank you for coming, cause it's really nice to know that there is interest in perception and that people want to learn more and want to be involved.

0:58:32.140 --> 0:58:42.910

Mark Platt

I think just to pull on one of the points that was raised earlier and what we want to see really is a golden journey of people joining or coming into the workforce and accessing preceptorship.

0:58:43.50 --> 0:59:0.500

Mark Platt

And then as they progress through becoming preceptors, you know, paying back, supporting people who are preceptees themselves and developing their ongoing learning culture that connects with our standards, our standards around uh, conduct performance and ethics and proficiency, and also our ongoing standards of conduct of uh, continued professional development.

0:59:0.560 --> 0:59:1.960

Mark Platt

It's sort of all connects up.

0:59:2.60 --> 0:59:22.840

Mark Platt

It's a really good way of helping support your colleagues and your teams, and as I think as a man who's pointed out, this is all about helping people continue to enjoy their jobs because you enjoy the work that they do and we find perception as well as providing that confidence can give people that sense of team and connection with colleagues.

0:59:23.250 --> 0:59:31.50

Mark Platt

The last thing for me is to say that and when we publish our principles, I, I'd I principles, reception document.

0:59:31.120 --> 0:59:36.430

Mark Platt

It's very difficult to know what to call things in this sort of cyber world because it won't be published as a physical thing.

0:59:36.440 --> 0:59:41.30

Mark Platt

But when it goes pushed on the line, we'll be doing lots of communications to colleagues.

0:59:41.40 --> 0:59:43.950

Mark Platt

And they'll be stuff in the regular news lesson we send out to people as well.

0:59:43.960 --> 0:59:50.70

Mark Platt

So do keep an eye out for that when it comes out and I will be participating in the events that Amanda's put up on the side as well.

0:59:50.80 --> 0:59:51.930

Mark Platt

So there should be a lot of stuff from us.

0:59:51.940 --> 1:0:8.590

Mark Platt

But what we're hoping is that with the work that we've done and the work that's been done by colleagues and she's England and the ongoing work in Scotland and developing work in Wales, that actually this is something that is the start of a journey with perception for colleagues and and for professions that we regulated for AHP.

1:0:8.600 --> 1:0:12.10

Mark Platt

Colleagues, it's not not a one off event that this is something we contribute and grow.

1:0:13.840 --> 1:0:16.560

Joanne Casey

Roughly thanks Mark and a down Alexia, anything from you?

1:0:18.490 --> 1:0:19.860

Joanne Casey

Sorry, Felicity and Alexia.

1:0:22.960 --> 1:0:23.140

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Yeah.

1:0:19.870 --> 1:0:27.880

Joanne Casey

Sorry, I think I've just seen lots of Adele's messages popping up in the screen comment congratulating you, and I just thought that's sorry, Felicity.

1:0:29.230 --> 1:0:42.930

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And yeah, just obviously do reach out to us if you have any questions about perception, we're more than happy to have discussions with anyone, even if you know you don't want to purchase package and you want to hear a little bit about more about our experience.

1:0:42.940 --> 1:0:47.140

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

We're more than happy to link with anyone and but yeah, thank you all for listening.

1:0:47.150 --> 1:0:48.720

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

And Alexia, did you have anything else?

1:0:50.290 --> 1:1:1.910

PEREIRA DA SILVA, Alexia (OXLEAS NHS FOUNDATION TRUST)

Umm, nothing in particular, just if you're thinking about doing Preceptorship, definitely make it fun for yourself, because you will definitely enjoy and you will learn so much from it, definitely.

1:1:2.610 --> 1:1:3.90

DEVEREUX, Felicity (OXLEAS NHS FOUNDATION TRUST)

Umm.

1:1:4.570 --> 1:1:5.440

Joanne Casey

Thank you so much.

1:1:5.450 --> 1:1:8.900

Joanne Casey

It's probably worth mentioning here a little bit about the mentorship platform.

1:1:9.50 --> 1:1:12.940

Joanne Casey

If you're a member of the Royal College of Podiatry, you've got access to a mentorship platform.

1:1:13.190 --> 1:1:14.220

Joanne Casey

Do go and have a look.

1:1:14.230 --> 1:1:19.220

Joanne Casey

You can put yourself forward as a preceptor, or you can then go and find yourself a mentor.

1:1:19.360 --> 1:1:24.840

Joanne Casey

If you were a preceptee or you know it's because it is about your career journey, it's not just about getting your first job.

1:1:24.850 --> 1:1:26.500

Joanne Casey

It's a better getting about all of your career.

1:1:26.510 --> 1:1:33.840

Joanne Casey

All of your capabilities and feeling supported and guiding with your job as you go through, go through your career.

1:1:34.80 --> 1:1:38.110

Joanne Casey

So do you take a look on the Royal College of Podiatry mentorship platform?

1:1:38.400 --> 1:1:41.430

Joanne Casey

And I guess that's everything from this evening then.

1:1:41.440 --> 1:1:47.530

Joanne Casey

So thank you so much for joining us and take a look at the Royal College of Podiatry's Web page assets OXLEAS.

1:1:47.540 --> 1:1:54.770

Joanne Casey

OXLEAS you know web pages as well HCPC principles and nhsengland principles, and they all come out at the end of the month.

1:1:54.870 --> 1:1:57.410

Joanne Casey

So thank you so much for joining us and goodbye.