

Reference Number: UHB 374 Version Number: 1	Date of Next Review: 6 TH Dec 2020 Previous Trust/LHB Reference Number: T 354
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Preceptorship for Newly Registered Nurses and Midwives Policy

Policy Statement

To ensure that the Health Board delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, we will provide a robust preceptorship process for all newly qualified nurses and midwives who are employed in this organisation.

Preceptorship enables all newly registered practitioners to be supported as they make the transition from student to new registrant in a supportive and nurturing environment. This period of support will increase confidence, develop knowledge and skills which will facilitate a competent workforce and ensure a high quality experience for new registrants and the patients/clients that they care for.

Policy Commitment

Cardiff and Vale University Health Board are committed to ensuring that suitably experienced and trained nurses and midwives are identified and available to undertake the role of preceptor. This policy sets out preceptorship arrangements for Band 5 entrants and provides a standardised approach to ensure consistency across this Health Board.

The Preceptorship Procedure will provide role clarity and key responsibilities of the preceptor, preceptee, sister/charge nurse or midwife, senior nurse/midwife and clinical board nurse/midwife. An overview of the process for monitoring the development and competence of the new registrant will also be outlined.

Supporting Procedures and Written Control Documents

This policy is supported by the following documents:

Capability Policy

<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/Capability%20Policy%20June%2020131.pdf>

Disciplinary Policy and Procedure

<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/NHS%20Wales%20Disciplinary%20Policy%20and%20Procedure%20adopted%20PPP%2016.05.17.pdf>

Health and Safety Policy

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<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/Health%20and%20Safety%20Policy%20final%20Nov16%20.pdf>

Mandatory Training Policy

<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/Mandatory%20Training%20Final%203.pdf>

Conducting Personal Appraisal Development Reviews Policy

<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/PADR%20Policy%20Approved%20by%20ver%202.pdf>

Other supporting documents are:

Department of Health (2010) Preceptorship Framework for Newly Registered, Midwives and Allied Health Professionals.

http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@abous/documents/digitalasset/dh_109794.pdf

Welsh Government (2014) Core Principles for Preceptorship

<http://www.weds.wales.nhs.uk/sitesplus/documents/1076/Final%20Report%20for%20Preceptorship.pdf>

Nursing and Midwifery Council (NMC) (2015) The Code. Professional standards of practice and behaviour for nurses and

midwives. <https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf>

Scope

This policy applies to all newly registered nurses and midwives (band 5) who are employed by Cardiff and Vale University Health Board, including staff who have completed 'Return to Practice' or 'Adaptation' programmes. It also applies to experienced registered nurses who will act as preceptors and the nursing leaders who will be responsible for policy implementation.

Equality and Health Impact Assessment

An Equality and Health Impact Assessment (EHIA) has been completed and this found there to be potentially very limited impact identified.

Policy Approved by	Quality, Safety and Experience Committee
Group with authority to approve procedures written to explain how this policy will be	Learning, Education and Development

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implemented	
Accountable Executive or Clinical Board Director	Executive Nurse Director
<p><u>Disclaimer</u> If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the Governance Directorate.</p>	

Summary of reviews/amendments			
Version Number	Date Review Approved	Date Published	Summary of Amendments
1	06/12/17	12/12/17	The original policy has been updated and redrafted into separate Policy and Procedure documents. Reviewed and updated in line with Core Principles for Preceptorship (Welsh Government 2014). This document has been condensed for this Preceptorship of Newly Registered Nurses and Midwives Policy. All supplemental information has been contained within a new Preceptorship of Newly Registered Nurses and Midwives Procedure.

**Equality & Health Impact Assessment for
Preceptorship for Newly Registered Nurses and Midwives Policy**

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	<ul style="list-style-type: none"> • Patricia Brown, Clinical Teacher. Tel: (029)20687661 • Corporate nursing, Learning, Education and Development.
3.	Objectives of strategy/ policy/ plan/ procedure/ service	<ul style="list-style-type: none"> • To ensure that suitably experienced and trained nurses and midwives are identified to undertake the role of preceptor. • To provide role clarity and outline the key responsibilities of the preceptor, preceptee and the line manager. • To provide a clear process for monitoring the progress, professional development and competence of the preceptee.
4.	Evidence and background information considered. For example <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines 	The UHB's usual arrangement with regard to consultation was followed (i.e. 28 days on the intranet). The following staff reviewed and commented on this policy; <ul style="list-style-type: none"> • Senior Nurse for Trauma and Orthopedics • RCN Convener • L.E.D Manager for Coaching, communication and clinical skills. • Practice Development Nurse – Surgery Clinical Board

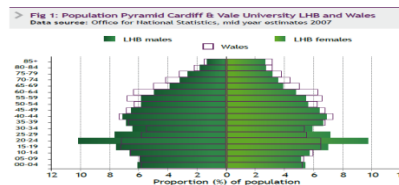
- participant knowledge
- list of stakeholders and how stakeholders have engaged in the development stages
- comments from those involved in the designing and development stages

Population pyramids are available from Public Health Wales Observatory¹ and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need².

The EHIA form was reviewed by;

- Equality & Diversity Manager for Cardiff and Vale UHB,
- Welsh Language Officer for Cardiff and Vale UHB
- Representative from Public Health Wales

Cardiff & Vale University Local Health Board (LHB) area is the smallest and most densely populated LHB area in Wales, primarily due to Wales' capital city: Cardiff. 72.1 and 27.9 percent of the LHB area population live within Cardiff and the more rural Vale of Glamorgan respectively.



Population Data – Potential numbers of staff accessing the Nurse Foundation Programme per year = approximately 200 new starters.

History of the Nurse Foundation Programme

The Nurse Foundation Programme (NFP) was designed by the Nurse Education Department and Professional Development Nurses in response to discrepancies and deficits in training around the Trust in 2008. Clinical areas were providing different levels of training for their new starters which

¹ <http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf>

² <http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face>

		<p>resulted in inequity of access and a lack of parity across the organisation. The group developed a comprehensive training programme for newly qualified practitioners and incorporated mandatory training, essential clinical skills and peer support. The programme was piloted in September 2008 and has run twice a year since then to coincide with University graduation dates.</p> <p>Evaluations from last 3 years of NFP programme were reviewed in relation to the protected characteristics</p> <p>The NFP programme was formally reviewed and evaluated by Dr Aled Jones (Cardiff University) to ensure the programme was meeting the needs of the newly qualified nurses, preceptor's and aligned to the Cardiff and Vale Nursing and Midwifery Strategic Framework 2014-2017.</p> <p>This Policy is underpinned by the Department of Health (2010) Preceptorship Framework and the Welsh Government (2014) Core Principles for Preceptorship.</p> <p>The following Preceptorship Policies have been reviewed in terms of equality impact. Although not exhaustive they provide a representation of the view that the policy would have no impact.</p> <p>Preceptorship Policy for foundation Band 5 staff Nursing and Allied Health (2015) – Mersey Care NHS Trust.</p> <p>Preceptorship Policy (2016) – Sheffield Health and social Care NHS Foundation Trust</p> <p>Preceptorship policy (2016) – Gateshead Health NHS Foundation trust This policy states that there is no evidence to support that this policy is</p>
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		likely to have any differential impact of effect on any of the protected characteristics.
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	<p>This policy applies to;</p> <ul style="list-style-type: none"> • All newly qualified registered Nurses or Midwives who gain employment at Cardiff and Vale University Health Board. • Nurses who have recently completed a 'Return to Practice' or 'Adaptation' programme and require a period of preceptorship. • Registered nurses who will be taking on the role of Preceptor • Line Managers who are employing any of the above

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
6.1 Age For most purposes, the main categories	This policy has a positive impact on this group by ensuring that all staff are able to access support from a preceptor and to a preceptorship programme and will be	NA	NA

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>are:</p> <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	<p>treated in the same way.</p> <p>This policy applies to working age groups only. No documented evidence found from the assessment review to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where applied cause an adverse impact against any group of individuals in respect of age.</p>		
<p>6.2 Persons with a disability as defined in the Equality Act 2010</p> <p>Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical</p>	<p>This policy has a positive impact on this group by the processes to be followed for any member of staff who may have a disability, thereby ensuring that all staff accessing the preceptorship programme will be treated fairly and supported in appropriate ways to access available support.</p> <p>The UHB is aware from its demographic information that it employs staff who has disabilities as defined within the Act. As such, the Policy has been made accessible to staff in both electronic and paper copy.</p>	<p>Within the taught NFP Preceptorship programme, all power point presentations to use appropriate background and font. Presentations are available on the</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
conditions such as diabetes		intranet for all staff to access a week before timetabled sessions. All classrooms used for teaching purposes are accessible to all. "It may be beneficial to consider the preceptee working 7.5 hour shifts during the supernumerary period to enable them to experience department routines over more days and maximize their	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
		exposure to learning experiences. It will also enable the preceptee to reflect and consider their learning needs between shifts and take full advantage of this supernumerary period.” Direct quote from policy	
6.3 People of different genders: Consider men, women, people undergoing gender reassignment	There appears not to be any impact on staff regarding gender. No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, conditions, rules or requirements which could potentially exclude or where applied cause an	NA	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender	adverse impact against any group of individuals in respect of gender		
6.4 People who are married or who have a civil partner.	There appears not to be any impact. No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially	NA	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	exclude or where applied cause an adverse impact against any group of individuals in respect of sexual orientation. Stonewall and Terrance Higgins Trust websites accessed and no evidence found		
<p>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.</p>	<p>This policy has a positive impact on this group by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly and supporting them in appropriate ways to access available support</p> <p>This policy supports the 'Occupational Health Policy' (2012). Staff that go on maternity leave during their preceptorship period will be provided with a preceptor on their return and will be given the opportunity to join the current preceptorship programme. There appears not to be any impact</p>	NA	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	<p>There appears not to be any impact regarding race, nationality, colour, culture or ethnic origin. No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where applied cause an adverse impact against any group of individuals in respect of race.</p> <p>Cultural diversity between preceptor and new registrant can be a positive asset for the Preceptorship programme and the organization. However, it is acknowledged that this could potentially have a negative impact on either preceptor or preceptee.</p>	<p>Preceptor and preceptee to report any identified issues in relation to culture, race or ethnic origin with the sister/charge nurse/midwife if this is impacting on the learning relationship and learning environment.</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	<p>This policy has a positive impact on this group by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly and supporting them in appropriate ways to access available support.</p>	<p>Staff who have specific needs in relation to religion can discuss these with the NFP lead and line manager. Staff are able to raise any issues with their line manager/Human Resources.</p>	
<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	<p>This policy has a positive impact on this group by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly and supporting them in appropriate ways to access available support. This is in line with equity of access.</p>	<p>NA</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design</p> <p>Well-being Goal – A Wales of vibrant culture and thriving Welsh language</p>	<p>Positive impact as they can work using their first language of Welsh in a confident manner with MDT colleagues and patients where possible and appropriate. Positive impact for this organisation in providing bilingual provision and service for its patients and staff as outlined in the Welsh government strategic framework ‘More than just words’(2012)</p> <p>http://www.wales.nhs.uk/sites3/documents/415/web%20-%2016184_narrative_e_web.pdf</p> <ul style="list-style-type: none"> • Welsh Language (Wales) Measure 2011³ <ul style="list-style-type: none"> • Self-development for preceptor and preceptee <p>This experience may also enable Welsh speaking</p>	<p>Recruitment – ascertaining where welsh speaking preceptors work and wherever possible allocate welsh speaking newly qualified staff to a Welsh speaking preceptor.</p> <p>-Liaise on a quarterly basis with the Welsh Language officer to</p>	

³ <http://www.legislation.gov.uk/mwa/2011/1/contents/enacted>

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	preceptors to also mentor welsh speaking student nurses undertaking the Coleg Cymraeg Cenedlaethol incentive scholarship.	advise on matters relating to Welsh provision. -ESR for current and accurate information regarding location of welsh speaking staff - Cross reference database mentors/preceptors -All relevant documentation to be available in Welsh (on request)	
6.10 People according to their income related	This policy has a positive impact on this group by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly	NA	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	and supporting them in appropriate ways to access available support. There appears not to be any impact		
6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	This policy has a positive impact on this group by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly and supporting them in appropriate ways to access available support.	NA	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	No evidence was found to suggest that any other groups or risk factors relevant to this policy and accompanying procedure have a negative impact.	Discussion with line manager and preceptor if new starter has caring responsibilities which need consideration to enable access to all support mechanisms within preceptorship process	

7. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health inequalities</p> <p>Well-being Goal - A more equal Wales</p>	<p>The aim of this policy is to ensure that ALL newly registered nurses and midwives who join the organization receive active support during their transition from student nurse to registrant and are competent and fit for practice. It is based on the Department of Health's (2010) Preceptorship Framework</p> <p>.</p>	<p>- Line manager and Preceptor to monitor progress to ensure that those from lower income groups do well and progress</p>	
<p>7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support</p>	<p>This policy has a positive impact by ensuring that all staff accessing preceptorship support and the preceptorship programme will be treated fairly and supporting them in appropriate ways to access available support.</p> <p>In the same way irrespective of the individuals' ability to improve or maintain healthy</p>	<p>NA</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>disease prevention (e.g. immunization and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight management services etc.</p> <p>Well-being Goal – A healthier Wales</p>	<p>lifestyles</p>		
<p>7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions</p> <p>Well-being Goal – A prosperous Wales</p>	<p>The Cardiff and Vale Health Board staff has a yearly PADR where the preceptee and preceptor will have the opportunity to discuss progress and competency The PADR process should be utilized to formally assess the preceptee at six months and twelve months. These reviews will need to be linked to the Pay Progression process.</p>	<p>“If preceptors work part time it may be beneficial to allocate a co-preceptor to ensure full time support is provided.” A direct quote from the policy</p>	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighborhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>	<p>For this policy there appears to be no impact</p>		
<p>7.5 People in terms of social and community influences</p>	<p>For this policy there appears to be no impact</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>on their health: Consider the impact on family organisation and roles; social support and social networks; neighborliness and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>			
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological</p>	<p>For this policy there appears to be no impact</p>		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
diversity; climate Well-being Goal – A globally responsible Wales			

Please answer question 8.1 following the completion of the EHIA and complete the action plan

<p>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p>	<p>On reviewing the previous policy and writing the latest version, improvements have been made in people who communicate using the Welsh language and people who require reasonable adjustments within the preceptorship process. Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this policy.</p>
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
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	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.2 What are the key actions identified as a result of completing the EHIA?</p>	<p>6.2 Within the taught NFP Preceptorship programme, all power point presentations to use appropriate background and font. Presentations are available on the intranet for all staff to access a week before timetabled sessions. All classrooms used for teaching purposes are accessible to all.</p> <p>“It may be beneficial to consider the preceptee working 7.5 hour shifts during the supernumerary period to enable them to experience department routines over more days and maximize their exposure to learning experiences. It will also enable the preceptee to reflect and consider their learning needs between shifts and take full advantage of this supernumerary period.</p> <p>As there has been potentially very limited impact identified, it is unnecessary to</p>			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</p> <p>This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?</p>	<p>As there has been potentially very limited impact identified, it is unnecessary to undertake a more detailed assessment</p>			

