hcpc health & care professions council



Principles for Preceptorship

Including supporting information

Helping health and care professionals through career transitions

November 2023

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Glossary of terms used in this document

Preceptorship – a period of structured support provided to HCPC registrants at key moments of career transition. This includes joining the workforce for the first time, returning to work after a long period away (including being re-admitted to the register), working in the UK for the first time, taking up a new role, or moving to a new organisation, to give them confidence to act as an autonomous practitioner

Preceptee – an individual accessing a period of Preceptorship

Preceptor – an individual providing one-to-one support to someone undertaking Preceptorship

The following terms are defined in the context of Preceptorship.

Continuing Professional Development or 'CPD' - the way in which HCPC registrants continue to learn and develop throughout their careers so they keep their skills and knowledge up to date and are able to practise safely and effectively

Competence – the abilities and knowledge that enable an employee to safely and effectively manage tasks required by their role

Induction – processes used by organisations and teams to introduce someone into a new organisation or role**Multi-profession** – learning that brings together professionals from a range of different professional groups

Profession-specific – learning that is focused on the knowledge and capabilities required for a specific HCPC's regulated profession

Programme/s – the supporting structure underpinning the delivery of Preceptorship, including the support for Preceptors

System challenges – internal and external factors, such as funding or staffing shortages, that may impact on the day-to-day delivery of Preceptorship.

Tailored – Preceptorship support that is adapted to an individual's needs as required

Transition/s – changes in a registrant's employment situation that can benefit from support, such as being a newly qualified trainee, returning to work after parental leave, coming to work in the UK from abroad, taking up a new role, or moving to a new organisation

Uni-profession – support provided by the same profession and focused on profession specific issues

Foreword

The Preceptorship Principles and supporting information set out in this document are designed to support all professionals registered with the HCPC[1] to access Preceptorship when and where they need it, to support them at key transition moments in their careers, and to help them in providing safe, compassionate and high-quality care.

We know that transitions such as joining the workforce as a new registrant, working in the UK for the first time or returning after a lengthy period away from the workforce, can be challenging for individuals. Well-resourced and tailored Preceptorship programmes offer support for HCPC registrants at such moments, giving them the support they need and in a way that can meet their individual circumstances.

We have developed these Principles collaboratively, working with the professional bodies that represent our registrants and with individual registrants. We have also engaged with education and training authorities across the UK's four nations, to ensure they fit with existing and developing Preceptorship arrangements in each nation.

The supporting information has been written to help registrants and those delivering Preceptorship use the Principles in their workplaces and practice.

We believe that well delivered Preceptorship support has a key role to play in supporting both current and future HCPC registrants, helping them to achieve their potential and to fully and confidently meet the needs of those they serve.



Bernie O'Reilly
Chief Executive and Registrar

1. The HCPC is the regulator for 15 health and care professions: Arts therapists, Biomedical scientists, Chiropodists/podiatrists, Clinical scientists, Dietitians, Hearing aid dispensers, Occupational therapists, Operating department practitioners, Orthoptists, Paramedics, Physiotherapists, Practitioner psychologists, Prosthetists/orthotists, Radiographers and Speech and language therapists.

More information at: https://www.hcpc-uk.org/about-us/who-we-regulate/the-professions/

About the HCPC



The HCPC's statutory role is to protect the public by regulating healthcare professionals in the UK.

We promote high quality professional practice, regulating over 300,000 registrants across 15 different professions by:

- setting standards for professionals' education and training and practice;
- approving education programmes which professionals must complete to register with us;
- keeping a register of professionals, known as 'registrants', who meet our standards;
- acting if professionals on our register do not meet our standards;
- and acting to stop unregistered practitioners from using protected professional titles.

Using the HCPC Principles for Preceptorship

Principle 1 — Organisational culture & Preceptorship

Principle 2 — Quality & oversight of Preceptorship

Principle 3 — Preceptee empowerment

Principle 4 — Preceptor role

Principle 5 — Delivering Preceptorship programmes





These Principles have been developed following extensive consultation with individual professionals regulated by the HCPC and the professional bodies and groups that represent them.

They have been written to encompass the 15 professions and 33 titles that we regulate, to support those we regulate, in all of the settings in which they work, and in recognition of the different employment arrangements that are in place across the health and care systems in England, Northern Ireland, Scotland and Wales.

The five Principles are broad in structure, so that they can be easily used across the range of workplaces in which our registrants work and their variety of contractual arrangements.

We want our registrants to use them to access Preceptorship programmes where available, or to help them shape the creation of new ones where they are not.

We intend those running or establishing Preceptorship programmes for our registrants to use them as a guide, to ensure programmes meet HCPC registrants' needs and support improvements in the quality of the services they provide.





Organisational culture & PreceptorshipOrganisational culture &

Preceptorship is a structured programme of professional support and development designed to improve registrant confidence as they transition into any new role.

Preceptorship contributes to an organisational culture in which registrants are supported to achieve their potential whilst delivering safe and effective care and treatment.

Effective Preceptorship should:

a) be embedded in the organisation's workforce and organisational systems to enable Preceptee access and engagement;

b) comply with equality legislation and take account of national and local equality, diversity and inclusion policies;

c) provide opportunities for Preceptees to develop confidence and to support their future career;

d) prioritise Preceptee and Preceptor health and wellbeing; and

e) promote a culture of learning, self-reflection and safe practice.



Quality & oversight of Preceptorship

Preceptorship is an important investment in a registrants' professional career.

All registrants should have access to a quality Preceptorship programme. It demonstrates the value of individual registrants' health, wellbeing and confidence during times of transition.

To enable effective Preceptorship there should be:

a) processes to ensure registrants can access Preceptorship which meets their individual needs;

b) processes in place to support an appropriate mix of profession-specific, multi-profession and uni-profession learning and development within organisations or with wider system and professional networks;

c) integration with induction to professional role where appropriate;

d) recognition of the impact of system challenges and how to mitigate these;

e) systems in place to monitor, evaluate and review Preceptorship programmes;

f) professional and organisational governance frameworks which allow the process to be audited and reported; and

g) understanding of, and compliance with, national and local policies, and the relevant governance requirements required by the four countries of the UK.



Preceptee empowerment

Preceptorship should be tailored to the individual Preceptee, their role and their work environment.

Preceptorship should not retest clinical competence but instead, empower the Preceptee to reflect on what they bring to their role and identify support needed to develop their professional confidence.

Effective Preceptorship should provide registrants' with:

a) access to a Preceptorship programme which instils the importance of continuing professional development;

b) appropriate resources and guidance to develop confidence and support continuing professional development;

c) a tailored programme of support and learning reflecting individual needs;

d) an identified Preceptor for the duration of their Preceptorship; and

e) autonomy to influence the duration and content of their Preceptorship in partnership with their Preceptor, others in their organisation and wider professional networks.



Preceptor role

The Preceptor role is a fundamental part of effective Preceptorship. Preceptors should have appropriate training, time and support to understand and perform their role.

Preceptors do not need to be from the same profession as Preceptees but should be the most appropriate individual to provide support.

In effective Preceptorship, Preceptors should:

a) act as a professional role model and be supportive, constructive and compassionate in their approach;

b) help to facilitate multi-professional aspects of Preceptorship where appropriate;

c) support Preceptees to reflect on their development and signpost to relevant support and development opportunities;

d) support Preceptees to engage with their wider profession, and help build networks locally or through external professional networks;

e) share effective practice and learn from each other;

f) be encouraged to see the personal and professional benefit of taking on the role of Preceptor; and

g) have access to feedback on the quality and impacts of all aspects of their work as Preceptors.



Delivering Preceptorship programmes

Preceptorship programmes should reflect the differences in routes to registration, range and intensity of previous practice experiences, and the variety of services and settings in which registrants work.

These Principles apply to all registrants working in any health or social care setting across UK, including but not limited to, the NHS, the social care sector, and the independent and charitable sectors.

Preceptorship programmes should:

a) be tailored to take account of the environment the individual Preceptee is working in;

b) be flexible to support various types of transition in a timely way;

c) have flexibility to deliver common themes of Preceptorship in a multiprofessional way while ensuring profession specific elements are provided where necessary;

d) have a structured design which describes how the programme delivers success for Preceptees;

e) vary in length and content according to the needs of the individual Preceptee and the organisation. Individual countries, regions or organisations may set minimum or maximum lengths for Preceptorship; and

f) have awareness of, and align with, other profession specific and workforce development programmes.

Supporting Information

The details below expand on the delivery elements of the Preceptorship Principles, and are provided to support Preceptees, Preceptors, and those running and evaluating Preceptorship programmes.



Principle 1

Organisational culture & Preceptorship

Effective Preceptorship should:

a) be embedded in the organisation's workforce and organisational systems to enable Preceptee access and engagement;

b) comply with equality legislation and take account of national and local equality, diversity and inclusion policies;

c) provide opportunities for Preceptees to develop confidence and to support their future career;

d) prioritise Preceptee and Preceptor health and wellbeing; and

e) promote a culture of learning, selfreflection and safe practice.

What this means in practice for HCPC registrants

- Preceptorship should be an essential part of an organisation's learning and development infrastructure. For registrants working in larger organisations Preceptorship may be provided by a Preceptorship team or lead. For registrants working for smaller organisations or independently this may mean obtaining external support.
- Preceptorship should be offered to everyone who requests or needs it. A registrant's need for Preceptorship may be identified by them or by their employer
- Preceptorship should focus on enabling Preceptees to develop into a new role or situation, to develop professional confidence and meet the HCPC's Standards, including CPD requirements.
- Preceptorship should encompass health and well-being support, ensuring Preceptees and Preceptors are supported and able to address any well-being challenges, in line with the HCPC expectations of registrants to maintain their health and well-being.
- Preceptorship should accommodate any reasonable adjustments needed by Preceptees with protected characteristics, such as giving additional time or providing equipment needed to complete a programme.

Principle 2

Quality & oversight of Preceptorship

To enable effective Preceptorship there should be:

a) processes to ensure registrants can access Preceptorship which meets their individual needs;

b) processes in place to support an appropriate mix of professionspecific, multi-profession and uni-profession learning and development within organisations or with wider system and professional networks;

c) integration with induction to professional role where appropriate;

d) recognition of the impact of system challenges and how to mitigate these;

e) systems in place to monitor, evaluate and review Preceptorship programmes;

f) professional and organisational governance frameworks which allow the process to be audited and reported; and

g) understanding of, and compliance with, national and local policies, and the relevant governance requirements required by the four countries of the UK.

What this means in practice for HCPC registrants

- Preceptorship should provide support that is tailored to registrants' development needs and connects with their professional practice, including their scope of practice. This may include connecting Preceptees with sources of specialist knowledge and advice where appropriate.
- Preceptorship should connect to onboarding and induction programmes for newly recruited registrants while ensuring there is a clear distinction between them.
- Preceptorship programmes should be sufficiently robust to cope with system challenges, and registrants' access to Preceptorship should not be reduced or removed without good reason or for lengthy periods of time.
- Registrants' experiences and views should be sought and considered in the evaluation of Preceptorship programmes and offers.
- Systems used to monitor and evaluate Preceptorship programmes should capture data sufficient to accurately understand Preceptees' experiences and should be regularly reviewed to ensure they are fit for purpose.

Principle 3 Preceptee empowerment

Effective Preceptorship should provide registrants' with:

a) access to a Preceptorship programme which instils the importance of continuing professional development;

b) appropriate resources and guidance to develop confidence and support continuing professional development;

c) a tailored programme of support and learning reflecting individual needs;

d) an identified Preceptor for the duration of their Preceptorship; and

e) autonomy to influence the duration and content of their Preceptorship in partnership with their Preceptor, others in their organisation and wider professional networks.

What this means in practice for HCPC registrants

- Preceptorship programmes should underpin registrants' CPD activities and support them in meeting their regulatory obligations.
- Preceptorship programmes should be designed to enable flexibility in what is offered to Preceptees, including how and when they access support.
- Preceptorship programmes should connect to development plans that support registrants to continue their professional learning beyond the Preceptorship period.
- Preceptorship programmes should encourage and support Preceptees in becoming Preceptors as they progress beyond their own need, to create an onward flow of new Preceptors, to ensure there is adequate support for future Preceptees.

Principle 4 Preceptor role

In effective Preceptorship, Preceptors should:

a) act as a professional role model and be supportive, constructive and compassionate in their approach

b) help to facilitate multi-professional aspects of Preceptorship where appropriate;

c) support Preceptees to reflect on their development and signpost to relevant support and development opportunities;

d) support Preceptees to engage with their wider profession, and help build networks locally or through external professional networks;

e) share effective practice and learn from each other;

f) be encouraged to see the personal and professional benefit of taking on the role of Preceptor; and

g) have access to feedback on the quality and impacts of all aspects of their work as Preceptors.

What this means in practice for HCPC registrants

- Registrants should be offered opportunities to be Preceptors and be supported to take up the role, including having access to appropriate training, allocated time and support to fulfil the role.
- Registrants should consider being a Preceptor as a component of their CPD portfolio, adding new skills and experience that can benefit their practice.
- Preceptorship programmes should provide arrangements for registrants undertaking the role of Preceptor to share their experiences and learning with each other, and with their professional bodies.

Principle 5

Delivering Preceptorship programmes

Preceptorship programmes should:

a) be tailored to take account of the environment the individual Preceptee is working in;

b) be flexible to support various types of transition in a timely way;

c) have flexibility to deliver common themes of Preceptorship in a multiprofessional way while ensuring profession specific elements are provided where necessary;

d) have a structured design which describes how the programme delivers success for Preceptees;

e) vary in length and content according to the needs of the individual Preceptee and the organisation. Individual countries, regions or organisations may set minimum or maximum lengths for Preceptorship; and

f) have awareness of, and align with, other profession specific and workforce development programmes.

What this means in practice for HCPC registrants

- Registrants should be offered Preceptorship that reflects their working practices and supports their ongoing development, both immediate and long-term.
- Preceptorship programmes should help registrants to connect their Preceptorship with their professional needs and regulatory obligations.
- Preceptorship programmes should link with other development programmes and opportunities made available to registrants, such as professional development or management training courses. Where practicable they may also be used to create peer networks to support registrants in their daily practice.

Differences between Preceptorship and other forms of support

Preceptorship and programmes to provide Preceptorship should not be confused with other training or learning and development mechanisms.

This table provides information about other forms of support which may underpin or connect with Preceptorship but should not be viewed as being equivalent to it.

Coaching

'Coaching aims to produce optimal performance and improvement at work. It focuses on specific skills and goals, although it may also have an impact on an individual's personal attributes such as social interaction or confidence. The process typically lasts for a defined period of time or forms the basis of an ongoing management style.'

Source: Chartered Institute of Professional Development (CIPD)[2]

A Preceptor may adopt a coaching approach in providing support to an individual Preceptee.

Induction / Onboarding

'Induction is an opportunity for an organisation to welcome their new recruit, help them settle in and ensure they have the knowledge and support they need to perform their role.'

Source: CIPD[3]

Induction or onboarding programmes are key to establishing a new employee into their place of work and their service, and can be incorporated into Preceptorship offers for newly recruited registrants.

This can be done by ensuring that they are included in the Preceptee's Preceptorship programme or by ensuring newly employed Preceptees are made aware of any arrangements available to them, via their Preceptor where suitable.

They can be used as a mechanism to ensure registrants are enrolled onto Preceptorship programmes, for example by alerting education teams about new members of staff, and to highlight Preceptorship and the benefits it can give to the Preceptee, Preceptor and the organisation.

Probation

A probation period is a set amount of time at the start of a new employment designed to allow an employer to decide whether someone is a good fit for the job. Probation periods aren't compulsory, although most UK employers use them. A probation period may be included in an employment contract and be overseen by an employee's manager.

A key difference between probation periods and Preceptorship is that probation is directly connected to a registrant's employment contract.

Preceptorship programmes should be designed to support Preceptees as they settle into new roles, be they newly qualified or experienced registrants changing roles or employers.

Wherever possible Preceptors should be drawn from outside the registrant's management chain, so that the two are not confused and that the relationship between the Preceptor and Preceptee is understood to be supportive and developmental.

Mentoring

'Mentoring in the workplace tends to describe a relationship in which a more experienced colleague shares their greater knowledge to support the development of an inexperienced member of staff. It calls on the skills of questioning, listening, clarifying and reframing that are also associated with coaching.'

Source: CIPD[2]

Preceptorship is different to mentoring, as it aims to provide guidance to gaining experience and applying learning in a clinical setting during the Preceptorship period. A Preceptor may use mentoring skills or approaches in providing support to a Preceptee on a Preceptorship programme.

Supervision

While there is no single or agreed definition of supervision, at its core, supervision is a process of professional learning and development that enables individuals to reflect on and develop their knowledge, skills, and competence, through agreed and regular support with another professional.

Supervision can have different forms and functions, and there are a wide variety of terms used depending on the workplace.

These include:

- Practice / clinical supervision, which aims to support learning and develop competency related to a specific clinical task.
- Professional supervision, which is largely focused on identifying professional learning and development needs and CPD.
- Operational/line management supervision.

More information on supervision is available on the HCPC website, at https://www.hcpc-uk.org/standards/meeting-our-standards/supervision-leadership-andculture/supervision/.

Preceptorship is different to practice/clinical or operational/line management supervision in that they tend to be focused on an area or key issue and are often provided to or used by registrants needing to improve their skills or seeking to advance their careers, rather than at points of transition.

Preceptorship is similar to professional supervision and can be incorporated into a professional supervision arrangement where other arrangements are not practicable. However, there will need to be a clear agreement between the Preceptee and the Preceptor to ensure that there is a clear delineation between them, e.g., in recording meetings or discussing concerns.

2. https://www.cipd.org/uk/knowledge/factsheets/coaching-mentoring-factsheet/ (June 2021)
3. https://www.cipd.org/uk/knowledge/factsheets/induction-factsheet/ (December 2022)

Preceptorship for registrants working outside the NHS, including as sole practitioners



We recognise that many HCPC registrants are employed or work outside the NHS structures, where Preceptorship is less well known and may be more difficult to access. While Preceptorship is not a requirement for HCPC registration, there is a wealth of evidence that providing it, as described in our Principles, is beneficial to individual registrants' professional practice and well-being, and supports organisations in recruiting and retaining staff.

The information below is provided to support registrants in considering what options are available to access or support Preceptorship.

Working in organisations delivering health and care services

For those working for commercial or voluntary/charitable organisations the Principles could be used to make a business case for providing Preceptorship. In organisations with large numbers of registrants the generic guidance and documentation provided by country level organisations (see following sections) will be helpful to establishing and running Preceptorship programmes.

Similarly, in organisations employing HCPC registrants from specific professions the information and guidance provided by the relevant professional body will be suitable (see next section).

Working in organisations delivering non-health and care services

For those working in organisations not focused on providing health and care services, the Principles could similarly be used to make a business case for providing Preceptorship.

It is likely in these circumstances that Preceptorship programmes would need to be managed by personnel or learning development functions, again using relevant national guidance or where available profession specific guidance produced by professional bodies (see following sections).

Working independently

For those working independently, whether in health and care provision or other sectors, it is unlikely that there will be accessible organisation Preceptorship programmes already in place. In recognition of this situation the HCPC will be working with stakeholders to understand how best to provide support in the future.

Some of the programmes provided by professional bodies may be helpful for individual registrants (see profession specific information section), and where appropriate could be used to develop ‘Preceptorship communities’ to bring together registrants willing to provide Preceptorship support and those needing it.

Preceptorship for internationally recruited registrants



For HCPC registrants who have come to work in the UK via our international registration route, Preceptorship can provide a way to support acculturation to both their new working environment and to working in the UK.

Preceptorship programmes for internationally recruited registrants (either offered specifically to them or as participants on a general programme) can assist them in understanding important cultural differences, for instance on how the UK's health and care systems operate, and communication and expectation differences of service-users in the UK compared to those of their home countries. It can also help them in meeting their regulatory obligations, which may be different to those in place where they trained or qualified.

The HCPC offers 'Joining the UK workforce' webinars and workshop for international registrants, designed to support their transition to UK practice. More information is available from the HCPC Professional Liaison Service, at: professional.liaison@hcpc-uk.org

Preceptorship arrangements by UK nation

The details below are for programmes run by or used by NHS or public authorities.

England

NHS England's Workforce Training and Education Team has produced an implementation framework that can be used to introduce AHP focused Preceptorship programmes into workplaces without them or to review and refresh existing programmes.

More details are available at:

https://www.hee.nhs.uk/our-work/allied-health-professions/education-employment/national-allied-health-professionals-preceptorship-foundation-support-programme/allied-health

They have also published more general information on Preceptorship:

https://www.hee.nhs.uk/our-work/allied-health-professions/education-employment/national-ahp-preceptorship-foundation-support

https://learninghub.nhs.uk/Catalogue/AHP-Preceptorship-Foundation

Scotland

NHS Education for Scotland have the Flying Start NHS® programme, which is only available for newly qualified nurses, midwives or AHPs, and is designed to be completed in the first year of practice.

Information on Flying Start at:

https://learn.nes.nhs.scot/735/flying-start-nhs

NHS Education for Scotland have a framework for nursing and midwifery colleagues which is currently being reviewed and adapted for use by Allied Health Professions.

https://learn.nes.nhs.scot/42348/Preceptorship

Preceptorship arrangements by UK nation

Wales

Although there are currently no multiprofessional Preceptorship programmes in place in Wales for HCPC registrants, there are a number of local or profession-specific schemes, such as the all-Wales Audiology Preceptorship scheme.

The Welsh Government have national frameworks in place for healthcare scientists (Healthcare Science in NHS Wales: Looking Forward, 2018) and for the AHP workforce (Allied Health Professions Framework for Wales: Looking Forward Together, 2019). These are supported via national programmes managed by 'Health Education and Improvement Wales' (AaGIC/HEIW). A Healthcare Science Preceptorship framework is currently in development as part of that work.

It should also be noted that Radiographers and Operating Department Practitioners are included within Healthcare Science strategic developments in NHS Wales.

More information at:

AHP Webpages:
Allied Health Professions (AHPs) - HEIW
https://heiw.nhs.wales/our-work/allied-health-professions-ahps

AHP Framework for Wales:
www.gov.wales/sites/default/files/publications/2020-02/allied-health-professions-framwework-for-wales.pdf

Profession specific information

The following Professional Bodies have produced profession specific guidance or information on Preceptorship or related work.

British Academy of Audiology – Framework (Member Access only)

Provides support for newly qualified or returning staff to develop their skills and knowledge under the support and guidance of a Preceptor). It is not restricted to specific banding or job positions and may be implemented for both NHS and private Audiology clinicians.

BAA Preceptorship Framework launched - British Academy of Audiology: www.baaudiology.org/baa-preceptorship-framework-launched

British Association of Prosthetists and Orthotists – Guidance

A guide to the use of Preceptorship within Prosthetics and Orthotics, including aims and benefits of Preceptorship programmes

https://www.bapo.com/wp-content/uploads/2020/01/Prosthetists-and-Orthotists-Preceptorship-Guide.pdf

British Dietetic Association – Preceptorship Framework and Case studies

Webpages about Preceptorship for dietitians including BDA Preceptorship framework/supportive resources and case studies

https://www.bda.uk.com/news-campaigns/campaigns/dietetic-workforce-development-programme/early-dietetic-careers-Preceptorship.html

British and Irish Orthoptic Society – Information and Case Studies

Webpage about preceptorship for orthoptists, including case studies from early-career orthoptists and links to further guidance: https://www.orthoptics.org.uk/resources/new-grad/

British Psychological Society – Guidelines and Information

Documents providing a set of shared guidelines for all applied psychologists

https://www.bps.org.uk/guideline/bps-practice-guidelines-2017

https://www.bps.org.uk/guidelines-and-documents

Also available in print:

'BPS Guidelines on Job Planning for Practitioner Psychologists in the NHS and Social Care'

This guidance is for practitioner psychologists working in NHS Trusts and Health Boards to guide the job planning process

Chartered Society of Physiotherapists – Case Studies

Webpages about Preceptorship for physiotherapists, including case studies with feedback from newly qualified physiotherapist Preceptees.

https://www.csp.org.uk/professional-clinical/cpd-education/preceptorship

Royal College of Podiatry – Clinical Career Development Preceptorship Framework

A guide produced by the College of Podiatry, written to aid podiatry and chiropody registrants develop confidence and professional skills during times of transition in your clinical career.

https://learninghub.nhs.uk/Resource/28571/Item

Royal College of Occupational Therapists - Guidance

Documents developed to support newly qualified occupational therapists moving into their first roles.

https://www.rcot.co.uk/supporting-early-career-occupational-therapists

A hub of resources for occupational therapists who want to return to professional practice and those who support them.

https://www.rcot.co.uk/about-occupational-therapy/returning-practice

Royal College of Speech and Language Therapists (RCSLT) – Guidance

Webpages about Preceptorship with links to RCSLT resources for Newly Qualified Practitioners

https://www.rcslt.org/learning/preceptorships

Society of Radiographers / College of Radiographers (SoR) - Guidance

Standards for the education, training and Preceptorship of reporting practitioners in adult chest X-ray

New Guidance: Standards for the education, training and preceptorship of reporting practitioners: https://www.sor.org/news/scor/new-guidance-standards-for-cxr-education-training