



Faculty of Health

MSc Advanced Professional Practice (Clinical Practitioner)

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MSc Advanced Clinical Practice Apprenticeship Degree

CLINICAL SUPERVISOR / MENTOR'S HANDBOOK 2022-2023

Core Specific Clinical Modules

APP 710 – Advanced Assessment for Clinical Practice

APP 711 – Managing Clinical Complexity

(APP710 is an Optional Module for DN SPQ students)

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DISCLAIMER

PLEASE NOTE:

All the information in this Mentors Handbook is correct at the time of printing. Courses are regularly reviewed and updated so details may change. Occasionally, a module listed in the Handbook may be replaced or withdrawn. Whilst this Mentor's handbook is focussed on the ACP and APP (Clinical Practitioner) programmes, we do acknowledge the two modules presented here are option modules within the APP portfolio and the advanced assessment for clinical practice is an option module for the DN programme.

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[Health Education England Supervision Introduction](#)

The MSc Advanced Professional Practice (Clinical Practitioner) and the MSc Advanced Clinical Practitioner Degree Apprenticeship programmes were accredited and recognised formally by Health Education England (HEE) in November 2021. It has been aligned to the standards set out by HEE and the [2017 Multi-professional Framework](#). More details of this and the role of the Advanced Clinical Practitioner in the workplace can be found here: <https://advanced-practice.hee.nhs.uk/>.

The [HEE Workplace Supervision for Advanced Clinical Practice](#) was published in July 2022 and can be found here to help you and your service provide support, mentorship and clinical supervision to your trainee ACP during and following their MSc training. The executive summary reads as follows:

“The provision and delivery of high-quality workplace supervision for practitioners developing in advanced clinical practice is crucial for both professional and patient safety. It requires an integrated approach in which the developing advanced clinical practitioner (sometimes referred to as a trainee), is supported by multi-professional supervisors. The developing advanced clinical practitioner/trainee should have a nominated ‘Coordinating Education Supervisor’ who supports the practitioner during the period of development and access to a variety of ‘Associate Workplace Supervisors’ who are matched to specified aspects of practitioner development across all the pillars of advanced clinical practice, (Clinical, Research, Leadership and management or Education). This guidance for workplace supervision of advanced clinical practice development will be useful for supervisors, employers, those driving workforce development and educators. There are seven fundamental considerations, set out in the diagram that follows, which underpin workplace supervision and ensures that both patient and professional safety are



maintained during the practitioner's advanced clinical practice development" (HEE, 2022).

HEE centre for Advancing Practice highlights that multi-professional advanced clinical practitioner are a growing part of the modern healthcare workforce. Their valuable contribution to patient care and pathways is recognised in health and care policy (NHS, 2020). They are registered practitioners from a range of professional backgrounds who have advanced level capabilities across the four pillars of Clinical, Leadership and Management, Education and Research, as set out in the Multiprofessional Framework for Advanced Clinical Practice in England, (NHS, 2017). Development in advanced clinical practice usually combines practice-based (workplace) learning and training with academic learning at level 7, (Masters), delivered in a traditional higher education institution (HEI) such as a university.

The provision of workplace supervision which is responsive to a developing practitioner's learning and development needs should be identified as part of advanced clinical practice workforce and business planning. It should be accompanied by investment in supervisor and practice educator development. Aside from whether there is supervisor capacity in the existing workforce, it cannot be assumed that existing uni-professional workplace supervision practices will map neatly to the learning needs of developing multi-professional advanced clinical practitioners/trainees. Nor can it be assumed that uni-professional colleagues have a shared understanding of the professional scope or typical clinical practice profile of developing advanced clinical practitioner/trainees from different qualifying professions. This is a rapidly developing field of multi-professional practice across a growing range of settings, and it is acknowledged that there will be justifiable variation in supervision arrangements associated with geography, pathways, practice context and roles. Although supervision practices are well-established in health and social care, the HEE workplace supervision document has been developed because:

- There is variation in the extent to which advanced clinical practice and advanced clinical practitioners are established and recognised across the health and care system.
- Current supervision practices tend to have a profession-specific focus; both the practices and the accompanying terminology vary greatly both within and across professions.
- Practitioners developing in advanced clinical practice come from an expanding range of registered professions; they are hybrid health and care professionals for whom there is no common, shared pre-registration foundation.
- Workplace supervision of advanced clinical practice knowledge and skills' development is likely to include some supervision across traditional professional boundaries.





University of Plymouth Introduction

As a team of clinical academics, we thank you very much for agreeing to be a clinical supervisor/mentor for a student on the MSc Advanced Professional Practice (Clinical Practitioner) Programme or the MSc Advanced Clinical Practitioner Degree Apprenticeship programmes. The aim of this handbook is to give you some ideas about your role as a mentor in what is a demanding but rewarding programme for the student.

It is anticipated that students will need a clinical supervisor's / mentor's support in clinical practice for at least the first two years of the programme (at which point they will have completed the Post Graduate Certificate and Post Graduate Diploma stages). In the third year, the Master's phase, the student will have an academic supervisor for their research project and dissertation. It must be remembered that even after completion of the MSc, the trainee ACP must have ongoing supervision and should be integral to all ACP's.

It is likely that you will already know the student concerned quite well. This should be helpful to both of you as you negotiate the student's learning needs, as you will already understand the student's knowledge base and skills.

The overall goal of this programme is for the student to attain their MSc in Advanced Clinical Practice therefore enabling them to use the title Advanced Clinical Practitioner (ACP) on completion and practice at that advanced level. Until they achieve their MSc award, we would advise using the title **Trainee ACP**.

As a first step, you will need to negotiate a learning contract with the student (see appendix 1 for a template of this). The student has access to a digital template of this on their Digital Learning Environment (DLE) site. The learning contract will allow you to focus on specific areas to be developed, as well as the amount of time you can commit to helping your student with their personal, professional, and clinical skills' development.



A significant part of your mentoring role for this module is likely to be about supporting your student's development of clinical skills, so it is important that you are available to work clinically with them, and that this is negotiated ***early*** in the programme. The student is required to complete a selection of written clinical case studies of observed clinical examinations as part of their overall assessment. These examinations may be undertaken whilst being observed by another qualified clinician, but you are requested to oversee the completion of the logs and their overall clinical skills development.

You are not required to *formally* assess a student on this programme; rather, to provide formative support and guidance. The process of written academic work alongside formal Objective Structured Clinical Examination (OSCE) will be the method to deem competence.

You are asked to provide formative feedback in a written format for the student and this will be submitted to the teaching team to ensure that students are being adequately supported and guided through learning new clinical skill. Studying at Master's Level (Level 7) is challenging and demanding work. The team assures you that we are here to provide continuous support to you and the student. The student has access to a wide and extensive range of learning materials at the University of Plymouth, both online and in our large modern library on the main campus. Please do not hesitate to contact us or any member of the team for any further information.

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Year 1 - Postgraduate Certificate (PgCert)

To achieve this level 60 credits must be obtained by completing the **three core modules** below

- APP701 [Advancing Practice in Context](#) 20 Credits
- APP710 [Advanced Assessment for Clinical Practice](#) 20 Credits
- APP758 [Advanced concepts in research: methodology and methods](#) 20 Credits

Year 2 - Postgraduate Diploma (PgDip)

To achieve this level, the student will have completed the PgCert and needs to gain an additional 60 credits (120 credits in total). This must include the **core module** and two optional modules of their choice (NMP703 is core for apprentices who are able to)

- APP711 [Managing Clinical Complexity](#) 20 Credits

Core module (MSc ACP Degree Apprenticeship Only - for those able to)

- NMP703 [Independent and supplementary prescribing](#)

Optional modules

Two x 20 credit modules or one x 40 credit module. Most students will require Independent Prescribing as part of their clinical role. If students already have IP at level 7, they can APL/transfer this into year two. If IP at level 6, an additional 40, level 7 credits need to be obtained - [A-Z list](#).

Final year - MSc

To achieve a full MSc degree, a PgDip will be obtained and an additional 60 credits (to give 180 credits in total). This must include the core module and an optional module of your choice.

Core module

- SPP702 [Substantive Professional Project](#) 40 Credits

Core module (MSc ACP Degree Apprenticeship Only)

- APP746 **End Point Assessment**

Optional module

Optional modules can be one x 20 credit modules and can be chosen from the Masters level modules [A-Z list](#).



- Please see Appendix 2 for the MSc Advanced Professional Programme Pathway diagram structure and the MSc Advanced Clinical Practice Apprenticeship Degree diagram structure.
- Every postgraduate taught course has a detailed programme specification document describing the programme aims, the programme structure, the teaching and learning methods, the learning outcomes, and the rules of assessment.
- There is an optional electronic portfolio that runs on **Pebblepad** for all students to use as a platform to collate evidence. Ongoing evidence collation is imperative as the trainee evolves into an ACP and we suggest starting to use this platform early to encourage good habits. We acknowledge that some specialities already have a portfolio of curriculum hence why we are not mandating the use of the Pebblepad platform.
- Formal teaching normally takes place in two semesters, the first starting in September and completing in December, the second starting in January and completing in July.
- The non-apprenticeship student will have a choice of optional modules from a selection of optional modules; this will vary from year to year and be based upon demand – see Masters Level modules [A-Z list](#).
- There is also the opportunity to APEL in 40 level 7 credits from a recognised Independent and Supplementary prescribing Programme or to self-fund and undertake the University of Plymouth Independent and Supplementary prescribing Programme which runs annually in September



Pathway / Programme Specific Modules

The two modules below are the specific clinical modules which students will require a mentor in practice.

APP710	Advanced Assessment in Clinical Practice
APP711	Managing Clinical Complexity

1. Pathway Aims

The aim of the Clinical Practitioner pathway is to equip health professionals to advance knowledge and skills by:

1. Gaining a deeper understanding of the advanced clinical practice role and how this level of practice is used to enhance the patient journey whilst ensuring that the right care is delivered by the right clinician at the right time.
2. Developing a critical understanding of the contemporary issues that influence on service delivery and how the advancing level of practice influences the provision of high quality, patient centred care.
3. Developing a contemporary approach to health and social care through advancing and utilising knowledge and skills in professional practice.
4. Ensuring professional practice is underpinned by a focus on excellence and sustainability by developing a critical, analytical and creative approach.
5. Critically reviewing trends in theory, practice and management relating to practice.
6. Equipping individuals for lead roles in management, clinical practice and/or education.
7. Promoting an understanding of the philosophy and procedures involved in research and use of evidence.
8. Designing and undertaking research that will enhance and develop patient care and/or service provision.
9. Enabling experienced healthcare practitioners to develop cognitive and clinical skills about the consultation process, clinical examination of major body systems and interpretation of diagnostic data.
10. Enabling practitioners to synthesise and implement knowledge into practice.
11. Developing competence, autonomy, and professional accountability in the development of managing clinical complexity. Using a systematic approach to make sound judgements in the absence of complete data demonstrating expertise in complex decision-making.



2. Pathway Intended Learning Outcomes

Please see individual module handbooks for mapping of Intended Learning Outcomes against those modules and the level required. These are fully mapped to the benchmark as set by HEE and align to the Multi-professional Framework (2017).

2.1. Knowledge and understanding

On successful completion graduates will have developed:

1. A systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of their academic discipline, field of study, or area of professional practice.
2. A comprehensive understanding of techniques applicable to their own research or advanced scholarship.
3. Originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry used to create and interpret knowledge in the discipline.
4. Knowledge gained from advanced study to professional practice
5. A deeper understanding of the advanced clinical practice role and how this level of practice is used to enhance the patient journey whilst ensuring that the right care is delivered by the right clinician at the right time.
6. A developed a deeper understanding of the influences, drivers and policies that inform the level of advanced practice.
7. Additional systematic and structured history taking assessment and physical examination skills, in order to integrate advanced assessment findings into clinical decision making.
8. An ability to accurately recognise illness through clinical history taking, observation and examination and formulate a working diagnosis and management plan for patients presenting with undifferentiated / undiagnosed complaints.



2.2. Cognitive and intellectual skills

On successful completion, graduates will have developed the ability to:

1. Critically analyse policy, research, and theoretical literature.
2. Synthesise arguments and results from varying sources including research, policy, and theoretical literature.
3. Critically reflect on professional practice and incorporate knowledge to enhance practice.
4. Develop critical arguments around research, policy, and theory.
5. Apply knowledge gained from advanced study to professional practice.
6. Develop one's own capabilities relating to, and embed the principles of, the four- pillars of advanced practice into the clinical arena.
7. Use critical thinking skills relating to the professional, political, legal, and ethical demands of working within the context of advanced practice as an autonomous practitioner in an integrated service sector.

2.3. Key and transferable skills

On successful completion, graduates will have developed the ability to:

1. Deal with complex issues both systematically and creatively, make sound judgements in the absence of complete data, and communicate their conclusions clearly to specialist and non-specialist audiences.
2. Demonstrate self-direction and originality in tackling and solving problems, and act autonomously in planning and implementing tasks at a professional or equivalent level, non-specialist audiences.
3. Accept responsibility for their own professional practice applying ethical, legal, and professional principles.

2.4. Employment related skills

On successful completion, graduates will have developed the ability to:

1. Exercise initiative and personal responsibility.
2. Employ the skills for decision-making in complex and unpredictable contexts; and the independent learning ability required for continuing professional development.
3. Demonstrate sound understanding of the importance and relevance of evidenced based practice to the delivery of safe effective patient/client care.
4. Evaluate the context of risk and development of quality, patient/client safety and clinical governance agenda critically reflecting upon student's individual development.
5. Develop a contemporary evidenced based proposal for research that will inform practice.



2.5. Practical skills

On successful completion, graduates will have developed the ability to:

1. Facilitate the provision of an environment of care in which the uniqueness of each individual is valued and is a commitment to fair and anti-discriminatory practice.
2. Proactively adopt appropriate strategies to enhance learning for patients and colleagues.
3. Propose and develop a researchable question and critically analyse the evidence from the research to fill a practice - theory gap.
4. Undertake self-motivated research, critically appraise, and present data.
5. Utilise their clinical skills through simulated scenarios and enhanced competence in practice, including safe consultation and informed clinical decision making about diagnosis by a deeper understanding of the body systems and patho-physiology.
6. Practice with competence, autonomy, and professional accountability in the development of managing clinical complexity, systematically and creatively; to make sound judgements in the absence of complete data demonstrating expertise in complex decision making.



Characteristics and Qualities of a Clinical supervisor / mentor

The terms clinical supervisor and mentor are used to denote the role of a healthcare professional that facilitates learning, supervises, and assesses students in the practice setting. The Nursing and Midwifery Council (**NMC**) has published a set of guidelines, Standards to support learning and assessment in practice <https://www.nmc.org.uk/standards/additional-standards/standards-to-support-learning-and-assessment-in-practice/>. Although this document is primarily designed to support undergraduate students of nursing the principles are useful and provide a sound basis for any mentoring relationship within the healthcare arena.

The **BMA (2022)** on behalf of the **GMC** also offer guidance for mentors: <https://www.bma.org.uk/advice/career/progress-your-career/mentoring>.

Health Education England suggest in their workplace supervision document that the multi-professional nature of the advanced clinical practice workforce differentiates it from other health and care provision by registered professionals. This has implications for recruitment into advanced clinical practice development/trainee posts and the accompanying education and practice-based workplace supervision because:

- Developing practitioners/trainees will have different professional starting points reflecting different professional registrations, prior practice, and supervision experience; nurses, pharmacists, allied health professionals (AHPs) and so on.
- There is no single underpinning, pre-registration professional training for practitioners developing to an advanced clinical practice level. This contrasts with the way that practitioners such as nurses or doctors, though ultimately specialising, share common pre-registration foundations for their respective professions.



- The scope of practice for different registered professions varies; for example, not all professional registrations extend to independent for supplementary prescribing.
- Advanced clinical practice workplace supervisors and those they supervise may hold different registrations and it cannot be assumed that their experiences, beliefs, and expectations about supervision are the same.

The training and development of advanced clinical practice workplace supervisors should address familiarisation with professional registrations, professional scope of practice and the implications for advanced clinical practice. It follows that such training would also encourage supervisors to be familiar with the scope of the pre-registration curricula for any supervisee whose registration differs from that of the supervisor.

Pre-requisites of the mentor's role for the Trainee Advanced Clinical Practitioners include:

- **The mentor must want to be a mentor.**
- **The mentor is a health care professional in a relevant clinical area and with the appropriate professional and clinical expertise.**
- **It is suggested that the mentor for students should either be an Advanced Practitioner who has attended an approved programme of preparation to the level of a PgDip or above incorporating the clinical elements, and a minimum of 2 years post qualification experience.**

OR

- **Is a medical practitioner of Registrar level or above.**
- **You will also need to be working in an environment that will enable you to meet the programme learning outcomes.**



Ann Morton (2003) had written an excellent guide to mentoring, which is highly recommended. The following figures are adapted from this material. As Morton notes, the Manager, Assessor and Mentor may have similar interests, but the desired endpoint is different.

Manager	Assessor	Mentor
Sets objectives Identifies performance problems Promotes development opportunities via career review process Achieves task result today Concerned with standards, deadlines Monitors for control Getting Things Done	Tests objectives have been met Assesses performance Assesses results Assesses against standards Monitors for quality Assessing Performance	Advises on goals Promotes development opportunities to improve performance Aims to get job done better tomorrow Concerned with career aspirations and needs Monitors for progress Helping the mentee

Morton (2003) identifies these concepts as being related to good mentoring:

Good mentoring usually requires...	Context might also demand...
Non-directive Coaching Support Openness Honour Reliability Induction Genuineness Listening Guidance Sounding board Questioning Confidentiality	Empathy Challenging Advice Custom & practice Shoulder-to-cry on Career advice Development Empowerment Honesty Friendship Shared values Role model

The following are usually largely outside the remit of the mentoring role: Contracts, Counseling, Solving problems, Appraising, Champion, Congruence, and Caring. Mentoring usually involves some degree of change and



development of the role during the period of mentorship. These are summarized thus (Morton, 2003)

Stages in mentoring

Kennington (1994)	Fletcher (1997)	Holloway et al (1994)
Alliance Assessment Analysis Alternatives Action Planning Application Appraisal (of the process)	Setting the boundaries Personal survival Alignment Consolidation Moving on	Getting together Getting to know each other Working together Learning together Saying goodbye

An integrated Multi-Professional Approach to workplace supervision (HEE, 2022)

There are currently no statutory requirements for a mentor/mentee relationship attached to an advanced practice course. However, the updated, new, and directive standards as discussed earlier from HEE (2022), BMS (2022) and (NMC 2006) provide sound advice and suggestions to formulate an effective relationship between mentor and student.

HEE (2022) reiterates a collaborative approach:

“Some employers have established, designated ‘Trainee Advanced Clinical Practitioner’ roles with protected development time both in-practice (workplace) and off-the-job. However, this is not always the case. Either way, registered professionals developing in advanced clinical practice will be balancing day-to-day practice demands and the maintenance of patient safety, with their own learning, development, and professional registration requirements for ongoing clinical and managerial supervision, while seeking to maintain both professional and personal well-being. It is unrealistic to propose that a single supervisor, however skilful, will be equipped to support the breadth of development necessary across all four advanced clinical practice pillars of clinical, research,



education, leadership, and management, while also supporting the developing practitioner/trainee with the competing workplace demands.

In the workplace, a developing practitioner/trainee in advanced clinical practice can expect to have an identified 'Coordinating Education Supervisor' and a number of 'Associate Workplace Supervisors' who support specified aspects of the practitioner's specialty or area-specific knowledge and skills development in relation to the four pillars of advanced clinical practice.

An integrated approach with '**Coordinating Education Supervisor**' and '**Associate Workplace Supervisors**' is recommended because:

- Currently there is no consistently adopted approach to workplace supervision in advanced clinical practice and a variety of advanced clinical practice supervision models and accompanying terminology are implemented across settings and regions.
- Although there are examples where the medical trainee supervision model (COPMeD, 2018) and the terminology 'Education Supervisor' and 'Clinical Supervisor' have been adopted, there are also settings where there is limited overlap between the advanced clinical practice role and that of a medical trainee, and in these instances a medical trainee model fit less effectively.
- An 'Associate Workplace Supervisor' may be identified to support clinical development, as with the clinical supervisor in the medical training model but equally may be identified because of their expertise in another pillar of development: education, leadership/management, or research."

In addition, the mentor requires a sound understanding of:

1. Communication and working relationships enabling the development of effective relationships based on mutual trust and respect.
2. An understanding of how students integrate into practice settings and assisting with this process.



3. The provision of ongoing and constructive support for students
4. Facilitation of learning in order to:
 - Demonstrate sufficient knowledge of the student's programme to identify current learning needs.
 - Demonstrate strategies which will assist with the integration of learning from practice and educational settings.
 - Create and develop opportunities for students to identify and undertake experiences to meet their learning needs.
5. Assessment in order to:
 - Demonstrate a good understanding of assessment and ability to assess.
 - Implement approved assessment procedures (in MSc APP this is a formative, not summative, process).
6. Role modelling in order to:
 - Demonstrate effective relationships with patients and clients.
 - Contribute to the development of an environment in which effective practice is fostered, implemented, evaluated, and disseminated.
 - Assess and manage clinical developments to ensure safe and effective care.
7. Creating an environment for learning in order to:
 - Ensure effective learning experiences and the opportunity to achieve learning outcomes for students by contributing to the development and maintenance of a learning environment.
 - Implement strategies for quality assurance and quality audit.
8. Improving practice in order to:
 - Contribute to the creation of an environment in which change can be initiated and supported.
9. A knowledge base in order to:
 - Identify, apply, and disseminate research findings within the area of practice.



Goal Setting

The student will be required to develop learning contract, (see appendix 1) to set clear, measurable goals to aid their learning. A useful acronym to foster effective goal setting is SMART.

SMART stands for:

- Specific
- Measurable
- Achievable
- Relevant
- Time-framed

Useful Websites for Mentors

HEE (Health Education England) competency Framework

<https://www.hee.nhs.uk/our-work/advanced-clinical-practice/multi-professional-framework>

HEE Centre for Advancing Practice

<https://advanced-practice.hee.nhs.uk>

HEE Centre for Advancing Practice Workplace Supervision Guidance

<https://advanced-practice.hee.nhs.uk/workplace-supervision-for-advanced-clinical-practice-2/>

NMC Standards <https://www.nmc.org.uk/standards/>

NMC (2008) Standards to support learning and assessment in practice

<http://www.nmc-uk.org/Documents/Standards/nmcStandardsToSupportLearningAndAssessmentInPractice.pdf>

Useful site for NPs and mentors.

RCN Nurse Practitioner competencies (May 2017)

HCPC COUNCIL - <https://www.hcpc-uk.org/resources/standards/standards-of-education-and-training/>



References

Barton, T.D. (2006) Clinical mentoring of nurse practitioners: the doctors' experience. *British Journal of Nursing* 15(15): 820 - 824 (10 Aug 2006)

COPMeD (2018) A Reference Guide for Postgraduate Specialty Training in the UK. The Gold Guide 7th Edn. Available online at:
https://www.copmed.org.uk/images/docs/gold_guide_7th_edition/The_Gold_Guide_7th_Edition_January_2018.pdf

Crossely, T (2000) For and Against. Doctors and nurses should monitor each other's performance. *BMJ* 2000; 320:1070-1071 (15 April)

Jones, M., Nettleton, P and Smith, L (2005) The Mentoring Chameleon - a Critical Analysis of Mentors' and Mentees' Perceptions of the Mentoring Role in Professional Education and Training Programmes for Teachers, Nurses, Midwives and Doctors. *Education online*.
<http://www.leeds.ac.uk/educol/documents/143672.htm> Accessed 12/09/17

Morton, A (2000): Mentoring. Continuing Professional development Series 2. York, LTSN Generic Centre. Available as E book via MOODLE
<http://www.ltsn.ac.uk/genericcentre>

USEFUL BOOKS AND JOURNAL ARTICLES

Bayley, H, Chambers, R (2004) *The good mentoring toolkit for Healthcare*. Oxford: Radcliffe.

Clynes, M. Rattfery, S (2008) Feedback an essential element of student learning in clinical practice. *Nurse Education in Practice*. 8(6):405-11



Dowie, C. Basford, P. (2003) *Mentoring in Practice: a Reader*. London: University of Greenwich.

Foster-Turner, J (2005) *Coaching and Mentoring in Health and Social Care: the essentials of practice for professionals and organisations*. Oxford: Radcliffe

Nagelkerk, J.M (2006) *Starting your practice: a survival guide for nurse practitioners*. Elsevier Health Science. St Louis.

Rose, M. Best, D. (2005) *Clinical Education, Professional Supervision and Mentoring*. London: Churchill Livingstone.

In addition, a search using the term Advanced Practitioner (paramedic, Nurse, physio etc) will give several sites where GP practices outline the services that their NPs provide.



APPENDIX 1 – Example and Guidance on Developing a Learning Contract

STUDENT NAME		STUDENT ID NUMBER	Mentor's Name		
Clinical area:				Dates: From:	To:
Date	LEARNING OBJECTIVES FOR THE PLACEMENT	LEARNING RESOURCES AVAILABLE	EVIDENCE TO BE PRESENTED TO DEMONSTRATE ACHIEVEMENT	Student Review dates/ Signed	Mentor Review dates/ Signed
	<p>In this section the student and the mentor identify and document what the student needs/would like to learn during the clinical experience, e.g., what skills does the student need to develop in practice, what specific learning experiences and opportunities are available.</p> <p>In addition, the student should review the modules and portfolio requirements for practice.</p> <p>Learning objectives are identified and agreed with the Mentor, and reviewed at regular intervals</p>	<p>The student and the mentor will discuss and identify the learning resources/opportunities that are available.</p> <p>Learning opportunities in other areas may be identified which will enable the student to meet the specified learning objectives.</p> <p>In this section, the student documents the resources that they will be accessing.</p>	<p>The student and mentor will discuss and agree which forms of evidence may be appropriate to demonstrate achievement of the learning objectives.</p> <p>The evidence should relate to the themes of the programme.</p> <p>The evidence may also relate to the competencies and the written evidence to be included in the Portfolio.</p> <p>Progress will be reviewed on a regular basis and the learning contract revised/updated as necessary and during formative assessment.</p>		

APPENDIX 2: Advanced Professional Practice (Clinical Practitioner) And Advanced Clinical Practitioner Programme Structure

