NHS England

East of England Faculty for Advancing Practice Supervisor Training Resources

Programme Workbook

Version 1

Produced by:

East of England Faculty for Advancing Practice in collaboration with East of England regional higher education institutes (HEIs), colleagues from NHS England Workforce, Training, and Education Directorate, Integrated Care Systems (ICS) Advanced Practice Leads, and organisational Advanced Practice Leads.

Contents

Introduction

High quality supervision is essential to support the development of confidence and capability for advanced practitioners and advanced practice trainees and underpins the importance of patient and practitioner safety. Workplace supervision that considers and responds to advanced practitioner or trainee learning and development needs should be recognised as part of any advanced practice workforce and business planning and include investment in supervisor training and development.

Support and expansion of current supervisor capacity, coupled with succession planning, is linked with securing a capable and skilled future workforce whilst retaining and fostering the current workforce, as laid out in the NHS England (NHSE), Educator Workforce Strategy (2023).

As part of this ongoing commitment, NHS England East of England Faculty for Advancing Practice has produced Advanced Practice Supervisor Training programme resources to support the development and training of proficient and skilled advanced practice supervisors across the region, whose competencies and capabilities will align with the Advanced Practice Supervisor Capabilities (NHSE, 2023).

Overview of Workbook

The Advanced Practice Supervisor Training workbook includes self-directed learning and completion of the workbook followed by mandatory attendance at an in-person or virtual day (your organisational Advanced Practice Lead will have further information about this). The workbook will map against the NHSE Advanced Practice Supervisor Capabilities (2023) and ensure that the dimensions of supervisor capability are addressed in these resources. Once the training resources are complete, the practitioner should be able to evidence and apply the knowledge, skills, and behaviours in practice and in future supervisory roles linking to advanced practice.

The role of supervisor is a position of responsibility, as supervision underpins professional and public safety. It is important that supervisor development is afforded appropriate time and attention; therefore, it is recommended that the workbook is completed **prior** to attending the in-person or virtual teaching session. To ensure adequate preparation for the in-person or virtual day, all mandatory resources within the workbook should be accessed

and the critical reflection tasks undertaken. The learning and activities in the workbook will be utilised in the in-person/virtual session to facilitate further discussion.

The workbook will also act as a repository for learning and a resource that may be referred to in future. An eLearning for Healthcare login (e-lfh) is necessary to access some of the videos and modules in the workbook. The Faculty acknowledge that some of the content in the workbook will overlap with several supervisor capabilities; we have endeavoured to place the content in a logical order in the most appropriate section.

It is recognised that each practitioner embarking on this training will have varying levels of experience related to supervision as well as a different rate of self-directed learning. It is estimated that this workbook will take approximately 1-2 working days to complete. The benefit of the workbook's structure allows the practitioner to work at their own pace and at their convenience.

Following the completion of the workbook, attendance is **required** at a teaching day, delivered either in-person or virtually. The topics for this session were identified by stakeholders as areas that may require a deeper dive and richer discussion to bring the learning to life. One session discusses the learner focused approach, individual learning needs, and learning objectives. A second session will focus on giving and receiving feedback and a third session will focus on trainees in/with difficulties. During the teaching day, practitioners may highlight other areas that are a priority, therefore, the facilitator/s may choose to tailor the discussion to meet the learning needs of the practitioners.

This format will provide a comprehensive training experience that combines self-directed study with interactive learning. Practitioners will benefit from a blended approach that maximises understanding of the material presented with the opportunity to engage with the content collaboratively with discussion and application of learning in a group setting. Date and mode of delivery of the in-person or virtual day will be at the discretion of the Integrated Care Board (ICB) Advanced Practice Lead or organisational Advanced Practice Lead.

Prior to commencement of training resources

Please note that completion of these resources will not be formally assessed. It is recommended that practitioners complete the Supervisor Readiness Checklist (NHSE, 2024) prior to commencing the training. By doing so, the practitioner will establish a baseline of supervisory knowledge but will also identify specific supervisor learning and development needs. Once the training has concluded, the practitioner can complete the Supervisor Readiness Checklist again to self-assess and evaluate supervisory learning and knowledge attainment. The Supervisor Readiness Checklist can be accessed via this link or click on the above document link.

Supporting continuous professional development for supervisors will benefit beyond the advanced practice workforce. Developing supervisor capacity will be a key enabler for the delivery of the NHS England Long Term Workforce Plan (2024). Supervision is a key aspect of maintaining workforce and public safety. Employers should consider skill mix and experience within a team and ensure adequate workplace support for advanced practice development.

Prior to commencing this training, it is essential for the practitioner to have a discussion with their line manager and organisational advanced practice lead. In primary care, the advanced practice lead will be within the primary care training hub. The practitioner should also discuss with their line manager a mutually agreed allowance of time to complete this workbook and attend the mandatory in-person/virtual teaching session. Once all agreed, please ensure practitioner, line manager, and organisational advanced practice lead all sign below. Please note, located in Appendix A is a checklist to keep track of progress through the resources and a final sign off form by the practitioner, line manager, and advanced practice lead in Appendix B.

Advanced Practitioner signature/date _____

Line Manager signature/date_____

Organisational Advanced Practice Lead signature/date_____

Capability 1- Purpose of Supervision

The advanced practice supervisor is expected to:

"*Provide supervision to support effective workplace learning at advanced level which ensures the maintenance of professional and public safety in the context of the required advanced level capabilities across the four pillars of advanced practice (clinical, leadership, research, and education) and the trainee's development pathway (MSc, Apprenticeship, ePortfolio (supported route)*" (NHS England, 2023).

Areas of focus in this section:

- Definitions of supervision
- Supervision within advanced practice
- Relevant governance and standards of proficiency for registered professionals
- Supervision guidance, standards, and requirements for specified curricula
- The supervision of advanced practice development across the four pillars of advanced practice, (clinical expertise, research, education, leadership/management)

Estimated time to complete: 2 hours 15 minutes

Definitions of supervision

Descriptions of supervision can include:

- A regular contact which is protected
- Setting of expected standards
- Monitoring/assessment of practice
- A reflection on practice
- Reviewing workload
- Identification of areas for development
- Offers support and guidance

Activity: e-Learning for Health Module-Introduction to Supervision (30mins)

Description**:** This e-lfh module provides an awareness and understanding of the general principles of supervision and considers the supervisory role in supporting trainees and qualified professionals in clinical education and practice settings. Several definitions of supervision in healthcare are explored and different approaches to supervision are considered.

Learning objectives**:**

- Be familiar with supervision and the role in supporting learners and colleagues
- Be familiar with the different concepts and definitions of supervision within healthcare
- Be familiar with approaches to supervision
- Define the principles of supervision and its relation to the context of clinical education

This module can be found at: http://portal.e-lfh.org.uk/Component/Details/725430

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR)>01-Supervision of Learners>Supervision

Supervision within advanced practice

All practitioners working at advanced practice level should have developed the knowledge and skills as outlined in the [Multiprofessional Framework for Advancing Practice in England](#) HEE, 2017). The Framework is built upon the following definition of Advanced Practice in England and has been designed to facilitate a consistent understanding of advanced practice:

> "*Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education, and research, with demonstration of core capabilities and area specific clinical competence. Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families, and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes*" (HEE, 2017).

The transition from experienced professional to advanced practice trainee and then to qualified advanced practitioner requires significant adjustment. Role transition, unfamiliarity with new situations and expectations, and challenges from colleagues can lead to struggles with professional identity, self-doubts of competence, and feelings of disconnection and isolation. High quality supervision can support with the above and other matters that will arise in training and practice.

As a supervisor it is important to understand that the developmental path to advanced practice may be different for individuals from a range of professional backgrounds. Current trainees will either be enrolled on a Higher Education Institute (HEI) direct entry MSc in Advanced Practice or an [Advanced Practice Degree Apprenticeship](#). Level 7 (master's) academic development is combined with workplace development of advanced level capabilities. These capabilities are developed across the four pillars of advanced practice: clinical expertise, research, education, and leadership/management. The [ePortfolio Route](#) is another pathway provided to offer recognition of advanced level practice by The Centre for Advancing Practice. This route is for existing experienced practitioners working at advanced level who can evidence the knowledge, skills, and capabilities, as mapped against the four

pillars of advanced practice and the 38 capabilities in the Multiprofessional Framework (HEE, 2017).

Please **click the links** for further information on the following:

- [ePortfolio (supported) route](#)

- [Centre for Advancing Practice Accredited Programmes*](#)

- [Advanced Practice Degree Apprenticeship](#)

*Please note that advanced practitioners may have completed or are undertaking non-accredited advanced practice programmes; however, these programmes may not meet all criteria for NHS England recognition of advanced practice level. In this situation, please seek further advice from the organisational advanced practice lead.

The NHS England [Workplace Supervision for Advanced Clinical Practice Guidance](#) (NHSE, 2024) recommends, 'Those developing in advanced practice should have:

- a named **Coordinating Education Supervisor** who supports the practitioner throughout the period of advanced practice development/training.

- access to **Associate Workplace Supervisors** who support specific aspects of advanced level development/training across the four pillars of practice (clinical, research, education, and leadership/management).

Coordinating Education Supervisors and Associate Workplace Supervisors may also have responsibility for workplace assessment and verification of the trainee's advanced level capabilities.'

An integrated approach is recommended by NHS England (2024) because there is no consistent approach to advanced practice supervision in the workplace and one may encounter varying terminology and models across clinical settings and locations.

In some settings, the medical trainee supervision model and the terms 'Education Supervisor' and 'Clinical Supervisor' have been implemented; however, there are areas where there is limited overlap between an advanced practitioner/trainee and that of a medical trainee, therefore, this model should be applied with due consideration. An Associate Supervisor can support the clinical pillar (just as the clinical supervisor in medical training); however, can also support expert knowledge in one of the other pillars of advanced practice: leadership/management, research, or education.

Activity: The Co-ordinating Education Supervisor/Associate Workplace Supervisor (10 mins)

Please review **section 6.1 and 6.2: An integrated multiprofessional approach to workplace supervision for the developing advanced practitioner** in the [Workplace Supervision for Advanced Practice Guidance](#) for a more detailed description of the role and responsibilities of each supervisor.

Relevant governance and standards of proficiency for registered professionals

Registered professionals working in health and care settings are expected to understand supervision and engage in supervisory activities as per employment and professional registration requirements.

Like clinical capabilities, supervisor capabilities will develop over time through a variety of professional training as well as learning and practice experiences. Effective advanced practice supervisors will apply supervisor knowledge and skills along with specific advanced practice expertise.

Essential Reading: Supervision guidance, standards, and requirements for specified curricula

The [Advanced Practice Supervisor Capabilities](#) (NHSE, 2023) (Figure 1) sets out learning and development principles for practitioners supervising advanced practice trainees. These capabilities discuss the knowledge, skills, and behaviour necessary for effective and inclusive supervision while applying specific advanced practice dimensions.

The capabilities are to be used in conjunction with the [Centre for Advancing Practice supervision guidance](#) (Figure 3) and [minimum standards](#) (Figure 2). This workbook is mapped against these capabilities, it is **essential** to read and be familiar with these and the other supervision guidance documents.
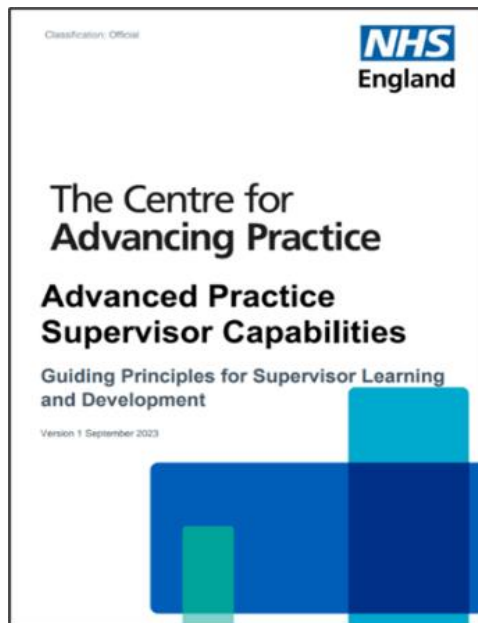
FIGURE 1: ADVANCED PRACTICE SUPERVISOR CAPABILITIES (NHSE, 2023)

The [Minimum Standards for Supervision](#) (NHSE, 2024) states "High quality supervision for healthcare professionals moving into trainee advanced practice roles is essential for supporting the development of confidence and capability and underpins patient and practitioner safety." See figure 2.

FIGURE 2: MINIMUM STANDARDS FOR SUPERVISION (NHSE, 2024)

NHS England's [Workplace Supervision for Advanced Practice](#) (2024) provides further in-depth, evidence-based information and recommendations on how to develop quality supervision in the workplace." These documents will offer invaluable guidance to support practitioners who are developing as supervisors and underpins much of the content and learning within this programme. See figure 3.
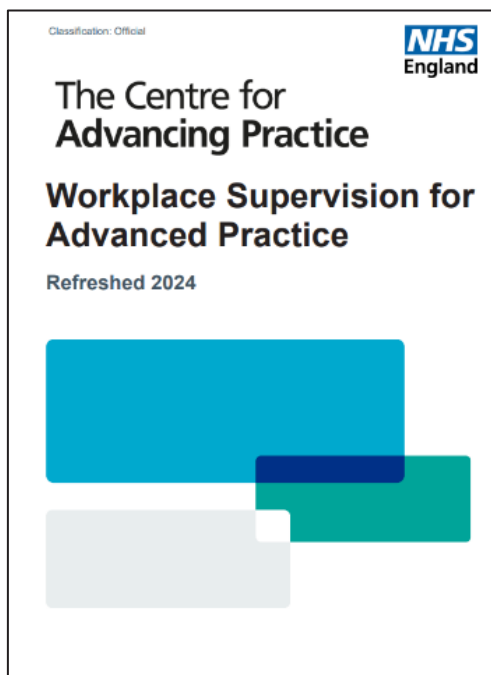
FIGURE 3: WORKPLACE SUPERVISION FOR ADVANCED PRACTICE (NHSE, 2024)

Activity: NHS England Workplace Supervision for Advanced Practice videos (42mins)

This suite of videos prepared by [The Centre for Advancing Practice](#) in 2020 provides an introduction and overview of key points related to supervision within advanced practice that will be discussed more in depth throughout the workbook. There are seven fundamental principles for the supervision of developing advanced practitioners found in the [Centre for Advancing Practice workplace supervision guidance](#) as seen in Figure 4.

FIGURE 4: FUNDAMENTAL PRINCIPLES FOR SUPERVISION (NHSE, 2024)

The following videos discuss the seven fundamental principles of supervision:

1. Supervision in Advanced Clinical Practice (1m43s)

2. Practice Context (2m26s)

3. Competence and Capability (3m4s)

4. Multiple Professional Registrations (6m16s)

5. Individual Learning Plan (5m15s)

6. Professional Development and Transition (6m15s)

7. Integrated Approach (7m1s)

8. Supervisor Development (6m44s)

9. Final Thoughts (3m1s)

Activity: Effective Supervision for Advanced Practice and Minimum Standards (22mins)

Please **watch the following video** from NHS England (2022) which discusses key fundamentals of advanced practice supervision with a useful overview of the NHS England supervision documents which highlight essential points to consider when supervising an advanced practitioner or advanced practice trainee.

[Effective Supervision for Advanced Practice and Minimum Standards Documentation](#)), (21m47s)

The supervision of advanced practice development across the four pillars of advanced practice

All advanced practitioners are expected to maintain advanced level practice portfolios across the four pillars (Figure 5). The trainee will require supervision spanning across the pillars. At various points, the HEI programme supervisor may provide supervision required to meet learning needs; however, it is important to keep portfolio evidence up to date as a supervisor, to maintain the knowledge, skills and behaviours to support trainees.

FIGURE 5: FOUR PILLARS OF ADVANCED PRACTICE, (NHSE)

Activity: Thinking points (20mins)

Choose and complete one of the three thinking points below. You can use the box on the next page for your notes:

Thinking point 1:

- How would you define supervision?
- What do you see as the purpose(s) of supervision?
- In what ways are you currently involved in giving and/or receiving supervision and how is that likely to change over time?

Thinking point 2:

With reference to Figure 6, review your experiences of supervision and consider where you would 'plot' them in the Venn diagram.

- Where on the diagram is your emphasis?
- How might you extend your (or others') practice to ensure supervision has a broader scope?

FIGURE 6, THINKING POINT 2

Thinking point 3:

Consider how you have prepared for supervision in the past:

- Are there things you feel work particularly well?
- Are there aspects you might improve?
- What differences do you perceive there to be between you and your supervisor/supervisee(s)?
- How might these differences have a positive impact on the ways you work together?
- How might they inadvertently have a negative impact and what might you do to mitigate them?

Notes for Activity: Thinking Points

Capability 2 – Models and Approaches to Supervision

The advanced practice supervisor is expected to:

"***Draw on understanding of different models, approaches, and modes of supervision, selecting, and applying those which will best support the trainee's advanced level learning, development, and well-being* (NHS England, 2023)."**

Areas of focus in this section:

- Models of supervision
- How to incorporate models and approaches into supervision and how best to support learning and development of a trainee and/or advanced practitioner

Estimated time to complete: 1 hour 35 minutes

Models of Supervision

There are multiple clinical supervision models suited to different organisations and team dynamics. Models can be helpful in providing frameworks for both supervision and for supervisor training and development. There is no current model designed or used specifically for advanced practice. As with all models and frameworks, it is important to apply critical awareness and consider the strengths and limitations of each model in the context in which it is used.

Activity: Clinical supervision models (30mins)

Please click the link below:

- [Clinical supervision models](#) (NHS Employers, 2022)

Activity: Critical awareness of supervision models (10mins)

Choose a supervision model from the activity link above and list the strengths and weaknesses of using this model as a supervisor within the context of a clinical environment.

Strengths	Weaknesses

Activity: e-Learning for Health module-Core Supervision Model (30mins)

Description: This module aims to provide learners with knowledge of supervision methodologies and principles and will give an overview of how to support supervisors and supervisees in effectively engaging with the process of clinical supervision.

Learning objectives:

- Become familiar with reflection
- Identify key purposes of effective clinical supervision
- Explain the benefits of clinical supervision for yourself and your practice
- Explain the importance of preparation for clinical supervision
- Demonstrate at least three ways supervision can be practised

This module can be found at: http://portal.e-lfh.org.uk/Component/Details/684286 or on https://www.e-lfh.org.uk/: Supervision for Multi-Professional Teams (CSM)>Supervision for Multi-Professional Teams>Introduction to Core Supervision>Core Supervision Model.

Incorporating models and approaches into supervision and how to support learning and development of a trainee and/or advanced practitioner

Models of supervision and frameworks can highlight criteria, dimensions of, and influences on the trainee's/advanced practitioner's practice and can guide the supervisor in their support; however, this does not guarantee appropriate or effective supervision. Figure 7 below highlights the different aspects of developing an advanced practitioner which should be considered by the supervisor. These aspects are not exhaustive; each will be explored throughout the advanced practitioner supervisor training resources.

FIGURE 7: DEVELOPMENT OF ADVANCED PRACTITIONER, (NHSE)

Dr. Deborah Harding, (2019), states: "Ultimately, supervision is perceived to be optimal when both supervisor and supervisee care about and care to resolve practice uncertainties or developmental needs, and when supervisor and supervisee adopt a cluster of facilitative behaviours and characteristics. Practitioners who display these characteristics can be described as 'permeable practitioners'; they expect and anticipate uncertainty in day-to-day practice and seek to resolve uncertainties in a variety of reflective and learning activities, one of which may be supervision."

While it is important to have regular protected time for supervision, it is the perceived quality and not the quantity of the supervision which will determine the adequacy and effectiveness of that supervision. The supervisor, along with the trainee/advanced practitioner, will mutually agree on the frequency and duration of the supervision. This will be based on the trainee's/advanced practitioner's current capabilities and learning needs, as well as the organisational service requirements. The supervisor should be responsive to the above but ensure both professional and public safety are paramount.

Activity: The Permeable Practitioner deeper dive (20mins)

- Read: The Permeable Practitioner

- The Permeable Practitioner self-assessment resource is available on the Permeable Practitioner website.

Capability 3 – Models of Learning and Skills Acquisition

The advanced practice supervisor is expected to:

"*Select and apply models and theories to support workplace advanced level skills learning and acquisition, adjusting approaches to match the trainee's level of knowledge, skills development, and experience* (NHS England, 2023)."

Areas of focus in this section

- Theoretical perspectives about learning and skills acquisition as applied to adult learners.
- The application of theoretical perspectives to workplace supervision of advanced practice.

Estimated time to complete: 55 minutes

Theoretical perspectives about learning and skills acquisition as applied to adult learners

Models of supervision are sometimes accompanied by models of professional development and skills' acquisition. Those of Benner (1984) (adapted from the Dreyfus Model of Skill Acquisition, 1980) and Peyton (1998) are routinely cited.

Benner presented a theoretical framework titled "From Novice to Expert" (1984) which addresses the different stages of professional growth of nurses specifically, but has been used in other clinical professions, see Figure 8.

Benner's (1984) model of skills' acquisition

Expert:
Can take rapid decisions- has intuitive grasp

Proficient:
Able to take in patients whole needs

Competent:
Conscious, deliberate planning

Advanced Beginner:
Difficulty thinking ahead, changing course, prioritising

Novice:
Textbook and rule led
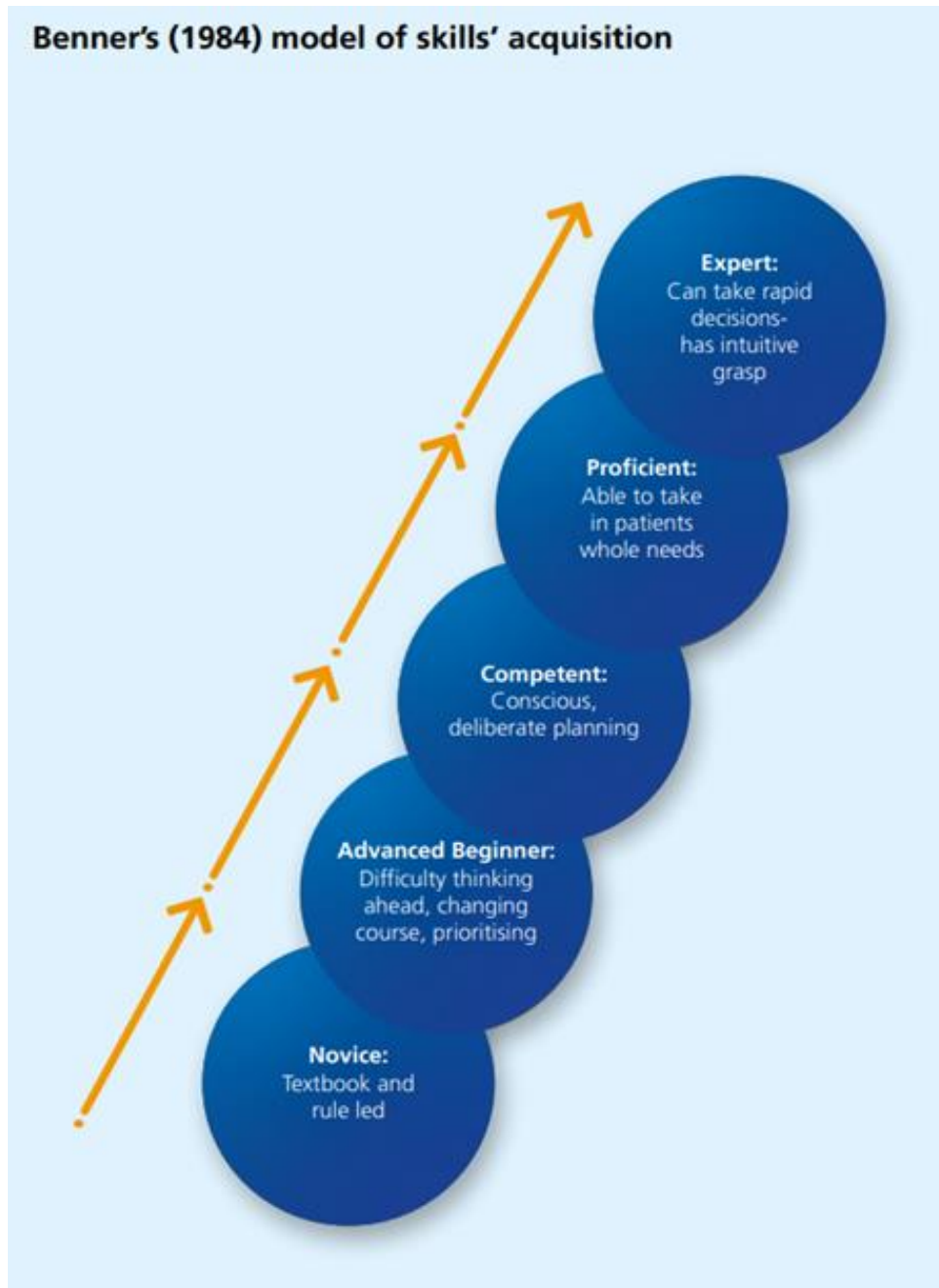
FIGURE 8: BENNER'S MODEL OF SKILLS' ACQUISITION (1984)

Peyton's approach, see Figure 9, outlines a 4-step approach to teaching incorporating the following steps of demonstration, deconstruction, comprehension, and execution (1998).
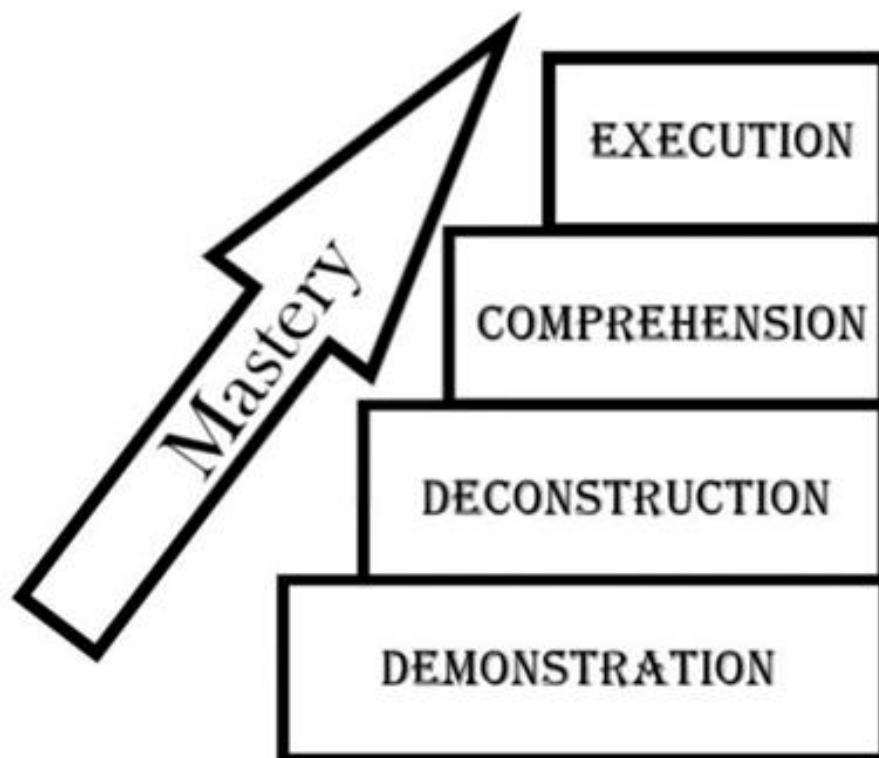
FIGURE 9: PEYTON'S FOUR-STEP APPROACH, (1998)

Some regard such models as too prescriptive, suggesting a final point or a 'best place' for the practitioner to be positioned (Dall'Alba and Barnacle, 2015).

Learning is a lifelong process and learning models have evolved over years; from learning models focused on the 'educator-centred' approach to 'learner-centred' approaches. Three main terms can describe how knowledge is acquired at various levels, see Figure 10:

- Pedagogy – Educator-centred learning where a teacher imparts knowledge onto a learner and is usually structured in nature, such as in a primary school.
- Andragogy – Adult-centred learning where the learner is self-directed and has active participation in their education, includes case studies, practical examples. This term was coined by Knowles in 1968 to highlight the differences in adult learning compared with child-centre learning.
- Heutagogy – Self-directed learning where the learner directs their own studies based on curiosity and motivations.
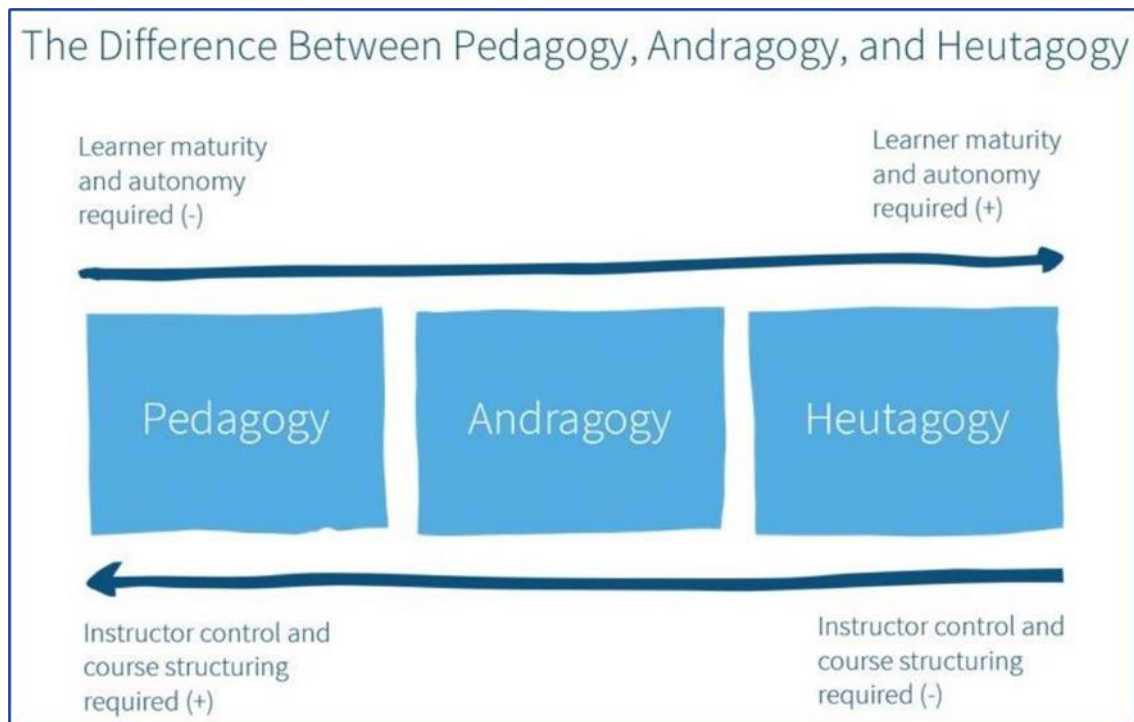
FIGURE 10: THE DIFFERENCE BETWEEN PEDAGOGY, ANDRAGOGY, AND HEUTAGOGY

Activity: Adult Learning Theory Videos (6mins)

Please **watch the following videos** which discuss key fundamentals of adult learning theory and adult learning assumptions:

- Adult Learning Assumptions (CDC, 2018), (3m01s)
- Adult Learning Theory (University of BC, 2017), (3m14s)

The application of theoretical perspectives to workplace supervision of advanced practice

In the previous section, several theorical perspectives were described, however the clinical environment is dynamic. As healthcare is so variable, healthcare professionals are required to adapt to working environments and remain innovative while being challenged in practice. The article following this section offers a guide for healthcare professionals to put adult learning theories into context.

A learning model called the Master Adaptive Learner (MAL) (Cutrer et al., 2017) was born from American medicine and developed within context, for example the dynamic clinical environment, and explains four phases of learning:

- Planning
- Learning
- Assessing
- Adjusting

The mind of the MAL requires the identification of gaps of knowledge, engagement in learning, testing newly learned material, and using this learning in practice. Each phase requires specific skills to be able to complete each phase. The MAL focuses on cognitive learning and requires critical thinking and reflection for every phase. This may be useful for supporting trainee advanced practitioners in developing skills in a fast-paced and variable environment.

Activity: Adult Learning Theories in Context (20mins)

- Read: Adult Learning Theories in Context: A Quick Guide for Healthcare Professional Educators (Mukhalalati and Taylor, 2019)

Activity: Applying theoretical perspectives to workplace learning (20 mins)

Take some time to reflect on the learning theories within this chapter and decide which theory relates to the development of advanced practitioners and why.

Capability 4 – Critical Reflection

The advanced practice supervisor is expected to:

"Apply understanding of critical reflection to support advanced level development, adjusting approaches to match the trainee's level of development and experience and encouraging exploration of different approaches to support learning in and from practice (NHS England, 2023)."

Areas of focus in this section:

- Approaches to critical reflection
- The use of critical reflection to support advanced level learning
- Building on strengths, secure aspects of practice and prior learning and practice

Estimated time to complete: 40 minutes

Approaches to critical reflection

Activity: Different approaches to critical reflection (10mins)

- Read: [Models of Reflection and Reflective Practice](#) (HEE, 2025)

Current approaches to supervision encourage reflective practice. Schön's (1983) distinction between reflecting after an event ('on action') and circumstances in which an experienced practitioner adjusts practice while reflecting 'in action', remains influential. There are those who caution that experienced professionals should not become over-reliant on 'reflection in action' and that this should be accompanied by regular, scheduled opportunities such as workplace supervision to review the taken-for-granted, thus moderating tendencies to turn to off- the-peg solutions (Eraut, 1994). There are many readily available frameworks and models to support such scheduled reflection on action (Gibbs, 1988; Moon, 1999).

Activity: Watch the following video (University of Guelph library, 2018) (3mins)

- [What is Critical Reflection? Introducing the "What, So What, Now What" Model (2mins44s)](#)
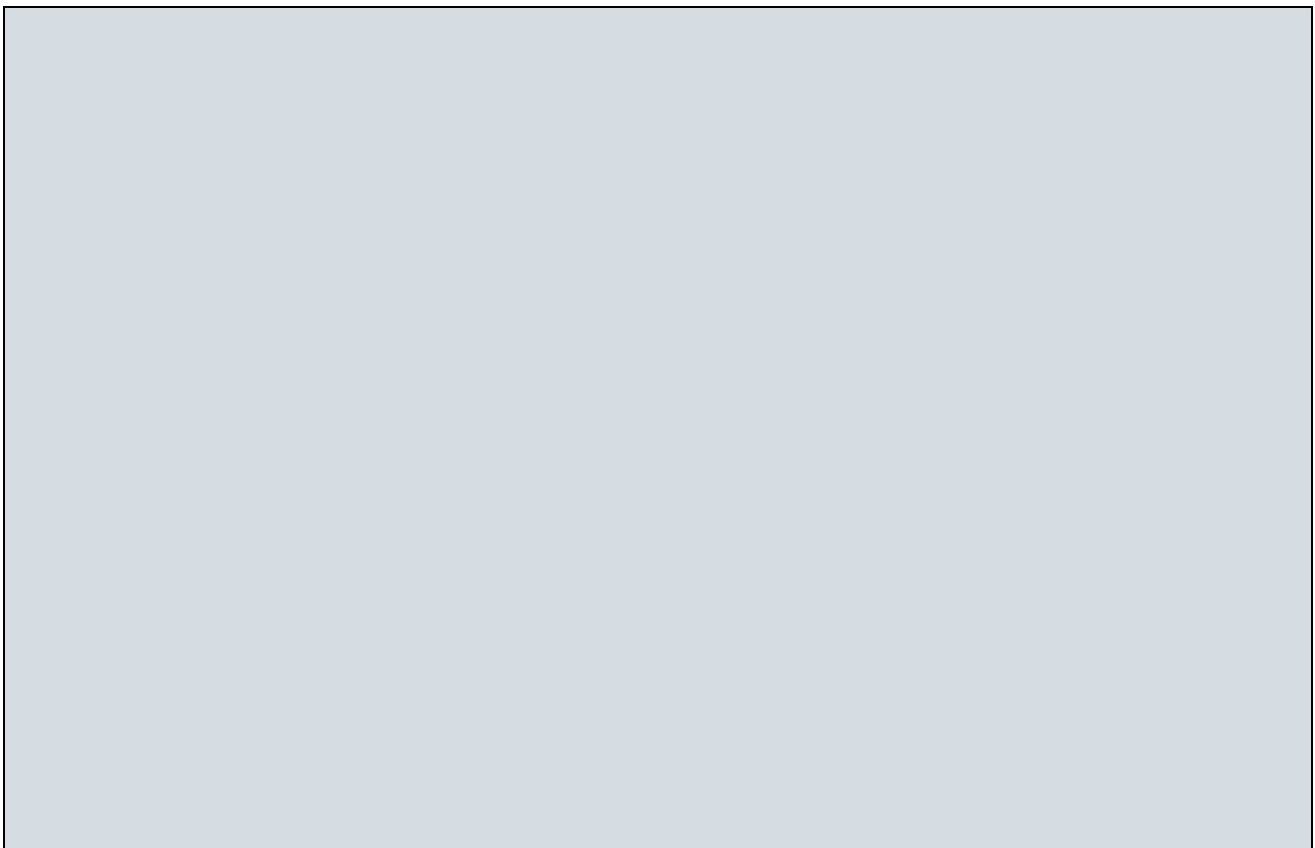
Activity: Review of reflective learning resources (10mins)

These are available for trainees, advanced practitioners, and supervisors to support development in this area:

- [Reflective Practice Resources](#) (NHS England, 2024)
- ENHANCE programme at [Transformative reflection](#) (NHS England, 2024)

Activity: Personal reflection style (15mins)

Use the space below to reflect on your own style of reflective practice. Is there one preferred model or a range of models depending on the type of reflection?

Capability 5 – Feedback & Facilitation

The advanced practice supervisor is expected to:

"Apply feedback, facilitation, communication skills, coaching approaches and techniques which build on the trainee's strengths to encourage and ensure effective workplace learning, assessment and progression in advanced practice (NHS England, 2023)."

Areas of focus in this section:

- Feedback
- Coaching and mentoring
- Mediation and conflict
- Supporting a trainee with or in difficulty

Estimated Completion time: 2 hours 20 minutes

Feedback

As a supervisor, you will be required to give regular feedback to the learner while they develop as an advanced practitioner. This feedback is usually directly to the learner and will include both strengths and areas that require improvements. Below are three different tools that can be used to deliver feedback in a measured and considered way; they include the feedback sandwich, the SHARE debrief tool, and the BUILD model. Giving effective feedback will also be explored further in the practical day and will offer a chance to develop feedback skills in a safe environment.

- **Feedback sandwich**

  The feedback sandwich starts and concludes with positive feedback, and what can be considered as the more critical feedback (or what may be classed as 'negative' feedback), is "sandwiched" between the positive aspects. This can be used in everyday clinical practice; however, if used continuously, it has the chance of

becoming predictable. It can be useful to give positive feedback on its own when the opportunity arises. If coworkers feel acknowledged daily, they will be more open to all kinds of feedback when applicable (Hardevella et al, 2017).

- **SHARE debrief tool**

    The SHARE debrief tool (NHS, 2022), Figure 11, supports health and care teams to engage teams and staff who may be affected by a learning response outcome.

    It can be used to:

    - present findings from a learning response (such as an incident investigation, MDT review and clinical huddle) and define and agree areas for improvement.
    - collaboratively develop and prioritise safety actions in response to defined areas for improvement.
    - corroborate thinking regarding safety actions before agreeing to implement them.
    - debrief after the completion of learning.
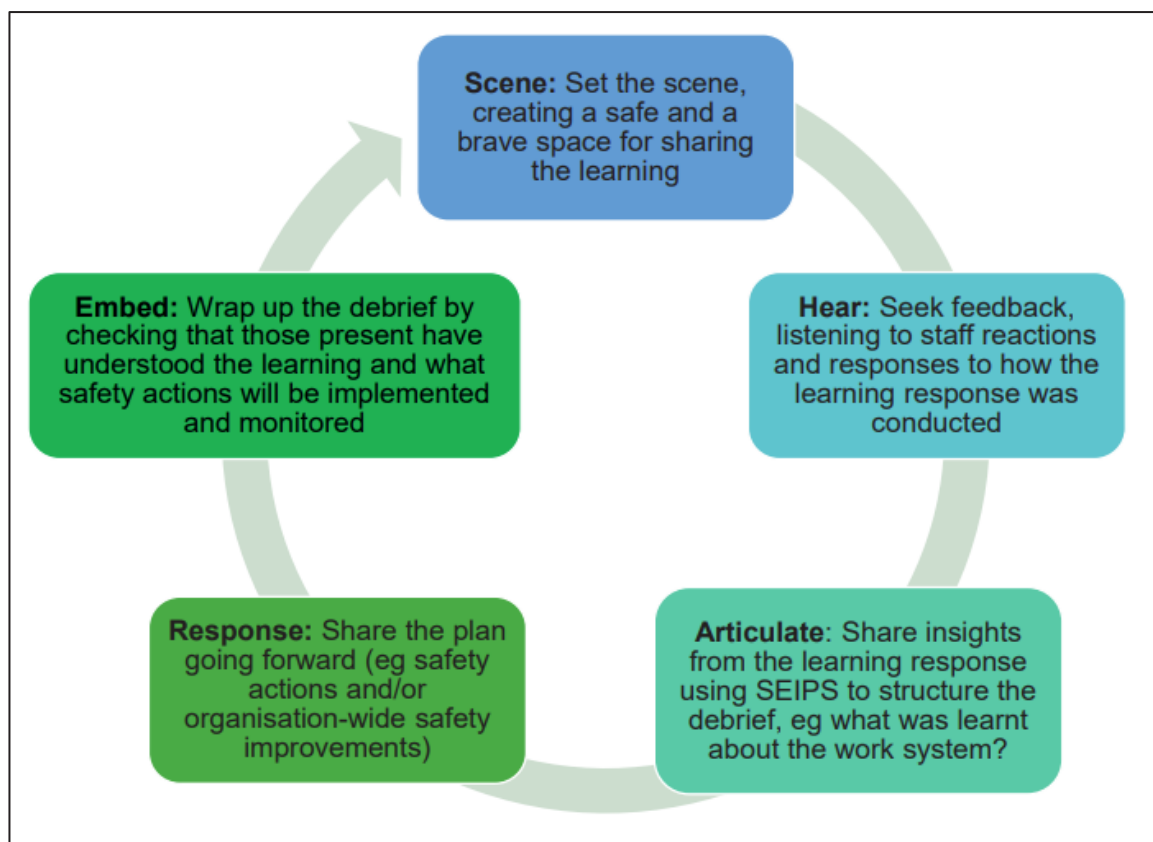
FIGURE 11: FIVE STEPS IN THE SHARE DEBRIEF TOOL, (NHS ENGLAND, 2022)

- **BUILD Model**

The BUILD model (University of Otago, 2020) is a structured approach to giving feedback in a respectful and constructive manner. By utilising this model, feedback conversations can be more productive, less confrontational, and focused on growth and improvement. The BUILD model consists of 5 key steps as outlined in Figure 12 below:

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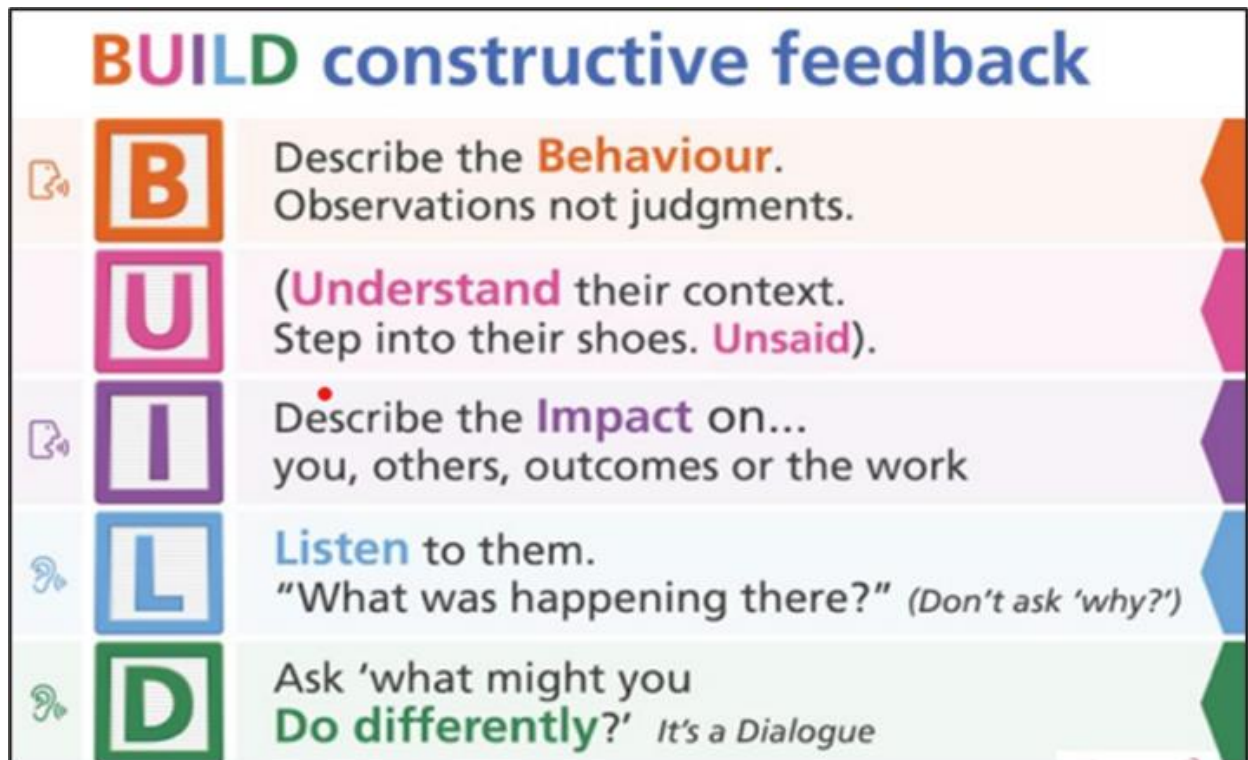
FIGURE 12: BUILD CONSTRUCTIVE FEEDBACK MODEL, (UNIVERSITY OF OTAGO, 2020)

- **'Behaviour'** sticks to facts rather than opinions or beliefs
- **'Understand'** builds empathy before providing feedback
- **'Impact'** provides clarity on the consequences
- **'Listen'** by asking open questions and actively without interrupting or passing judgement
- **'Do differently'** encourages self-reflection and empowers the individual to come up with solutions

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Activity: e-Learning for Health Module-Feedback (60mins)

Description. This session offers suggestions on how you can improve your feedback to ensure you are better able to help motivate and develop learner's knowledge, skills, and behaviours.

Learning Objectives:

- State some of the principles behind giving effective feedback and establishing a 'feedback culture'.
- List the different contexts in which feedback can be given.
- Describe some of the issues involved in giving and receiving feedback.
- Apply the learning from the session to your own practice through carrying out activities and reflecting on these.

This module can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/725842

Or on https://www.e-lfh.org.uk/:Educator Training Resources (ETR) >01 – Effective feedback

Coaching and mentoring

Coaching and mentoring are helpful tools to support supervisors and trainees. Coaching focuses on learning from previous experiences to improve how things are done currently (NHS Improving Quality, 2015). Mentoring allows more senior staff to share knowledge and experiences, whilst supporting other staff in learning and development (NHS Leadership Academy, 2014).

Coaching implements techniques to help supervisors access resources and capabilities to facilitate the achievement of success. Whether as a one-to-one or within a group context, coaching is often perceived as the single most effective development intervention that clinical staff in a variety of roles can access. As coaching skills can take time to develop and requires further training to become proficient, the expectation is to be aware of coaching approaches and skills that may be helpful to the trainee. If further coaching development is desired, enquire about training opportunities or speak to your education team.

The main characteristics of coaching are:

- The relationship has a fixed duration.

- The meetings are structured and regularly scheduled.

- Short-term and focused on specific areas of development, goals, and challenges.

- The coach does not need direct experience of the role of the individual being coached.

Mentoring guides and supports an individual with professional development. Priority is placed on the needs of the individual encouraging independence and autonomy while identifying opportunities for further development.

The characteristics of mentoring are:

- The relationship is ongoing.
- Meetings can be more informal.
- Long-term career and development focused.
- The mentor is usually a more senior or experienced individual working in the same sector/profession.

Please review the following for further information on coaching and mentoring:

NHS Improving Quality Coaching Learning Handbook

CIPD Coaching and Mentoring

Activity: Coaching versus Mentoring (15 minutes)

Discuss the benefits of coaching vs mentoring. Reflect on your own experiences in practice. When would you choose one method over the other and why?

	Coaching	Mentoring
Benefit of one over the other		
When would you choose this as a method over the other?		

Mediation and Conflict

Mediation is a voluntary process led by an impartial third party to resolve conflict. Conflict can occur in any employment relationship and is best dealt with early at source. If left unchecked, it can fester and escalate, potentially leading to grievance and discipline procedures or employment tribunals. Mediation avoids these more formal and costlier routes by guiding participants towards reaching mutually acceptable solution (CIPD, 2023).

As a supervisor, there may be a time when dealing with a challenging trainee and conflict resolution skills will be crucial in maintaining a healthy supervisor/trainee relationship. Most organisations will offer conflict resolution training, either by eLearning or in-person taught sessions. For further training, search your organisation's intranet site or contact your line manager/ education team.

Supporting a trainee with or in difficulty

In the NHS England East of England Faculty for Advancing Practice document Readiness for advanced practice: A guide for aspiring and trainee advanced practitioners (2024), there are

three 'Trainee in Difficulty' pathways located in the appendices. Please familiarise yourself with these pathways for awareness:

- Trainee in need of support
- Trainee requiring support in the placement areas
- Trainees requiring support with advanced practice MSc programme/HEI

As part of this document, trainees are advised to gain support in the form of a 'learning community' as this will aid motivation and value throughout the training. Trainees can also seek support and guidance from the HEI, their organisation, their ICS, library services, and social media.

Activity: e-Learning for Health-Supporting a trainee with or in difficulty (60mins)

Description: This session provides an overview of the impact of professional and personal difficulties on trainees

Learning Objectives**:**

- • How to identify a trainee in need of additional support
- • Addressing issues at an early stage
- • Properly documenting the management
- • Communicating with the trainee and others who need to know

This module can be found at: https://portal.e-lfh.org.uk/Component/Details/725848

Or on https://www.e-lfh.org.uk/:

Educator Training Resources (ETR) > 01 - Supervision of Learners > Video: Training Support - Trainees with Difficulties

Capability 6: Practitioner/Learner Focused Approach

The advanced practice supervisor is expected to:

"Provide inclusive, learner-focused supervision, which incorporates ways to recognise and support person specific factors including any protected characteristics, personal circumstances, and specific learning needs, to guide progress through a personal learning plan towards advanced level capability across the pillars of practice (clinical, research, education, and leadership/management), in the relevant speciality, pathway or setting including where relevant, a specified curriculum, credential specification and relevant higher education institution (university) requirements.

Support advanced level development and progress in a specified aspect of advanced level capability (as describing in the personal learning plan) through inclusive, learner-focused supervision which incorporates ways to support and navigate person specific factors including any protected characteristics, personal circumstances and specific learning needs equitably.

Provide and/or ensure access to restorative supervision and coaching to support transition to advanced level practitioner as necessary (NHS England, 2023)."

Areas of focus in this section:

- Equality, diversity and inclusion
- Learning difference/neurodiversity
- Developing individual learning plans
- Health and well-being

Estimated time to complete: 3 hours 25 minutes

Equality, diversity, and inclusion

Equality, diversity, and inclusion (EDI) is 'everyone's business' as described by the NHS England EDI improvement plan (2023). As you are aware there are 9 protected characteristics under the Equality Act 2010 as shown in the Figure 13 below. The NHS EDI improvement plan has 6 high impact actions with related success measures.
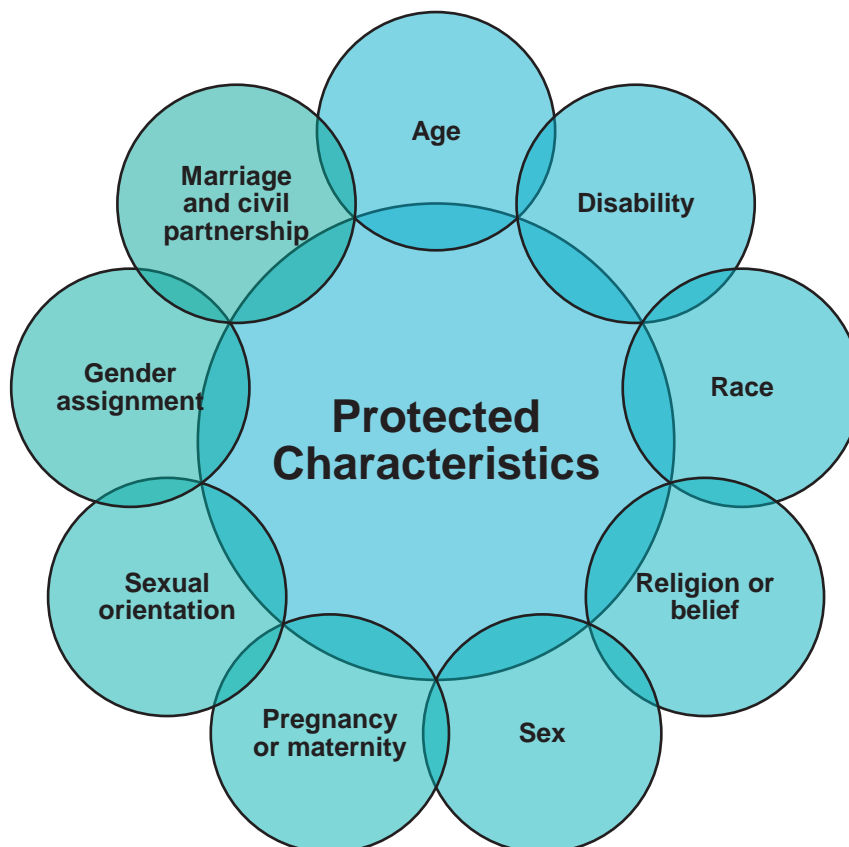
FIGURE 13: PROTECTED CHARACTERISTICS (EQUALITY ACT, 2010)

Measures that advanced practice supervisors can take to support trainees from an EDI background include:

- Fair and inclusive recruitment processes
- Access to career progression, training, and development opportunities
- Reducing health inequalities within the workplace
- Creating an environment that does not tolerate bullying, discrimination, harassment, aggression or violence at work.

- Create an environment which supports psychological safety, and offers a trainee to speak up freely, without fear of repercussions.

This list is not exhaustive and if any support is required to improve on equality, diversity, or inclusion measures, your local EDI champion or lead can support. To find out more about NHS England's approach to diversity and inclusion, please access: Diversity & Inclusion (NHS England, 2023).

For a deeper dive: Leadership Listens, episode 5: The importance of compassion and inclusion (NHS Leadership Academy, 2022).

Activity: e-Learning for Health Module-Equality, Diversity, and Inclusion (60 mins)

Description: Equality, diversity and inclusion (EDI) are central to the NHS, in terms of both employment and service delivery. This session offers the opportunity to consider your role in relation to EDI and explore the key principles involved. Throughout the session you will be given an opportunity to apply the learning to your own practice through carrying out activities and reflecting on these.

Learning Objectives as set out in the module:

- State the importance of inclusion and what is meant by social identity and protected characteristics.
- Describe how equality, diversity and inclusion (EDI) impacts on your role
- Understand the responsibilities you have as set out in relevant legal frameworks and legislation.
- Describe how institutional discrimination works and what you can do to mitigate this.
- Challenge discrimination and inappropriate behaviour effectively.
- Apply equalities principles to the education and training of healthcare professionals.

This module can be found at: https://portal.e-lfh.org.uk/Component/Details/725230

Or on https://www.e-lfh.org.uk/ Educator Training Resources (ETR) > 01 - Supervision of Learners > Diversity, Equal Opportunities and Human Rights

Activity: Your organisation's approach to EDI (30mins)

Ensure familiarity with your own organisation's EDI policies and procedures and how they address discrimination. Take some time to read through them so you are aware of what actions to be taken if issues arise. EDI training is mandatory; however, it is important to be familiar with your specific organisational policies.

Activity: Challenging discrimination (10mins)

After reading key EDI policies and procedures, use this learning for the following activity:
You overhear a racially discriminatory comment being made to your trainee in the middle of a clinical assessment observation; what action would you take?

Learning difference/neurodiversity

Neurodiversity describes the population as a whole and recognises the diversity of different brains. Neurotypical describes the majority group that perceives work, learns, and expresses themselves in ways that are seen as the societal norm. Neurodivergent describes the minority group that diverts from said norm.

For more information, please see: HEE's [Guide to Practice Based Learning for Neurodivergent Students](#).

Activity: e-Learning for Health Module-Assessing Educational Needs (50mins)

Description: This session explores the role of the clinical or HEI health professional's teacher in assessing the educational needs of learners. The session considers the roles of the different individuals and organisations involved in defining learning needs (including the learner, the teacher, the professional and health care organisations) and sets this in the broad context of health professionals' education.

Learning objectives:

- Recognise the reasons why assessing individual and group learning needs is important.
- Identify the roles and responsibilities of those involved in assessing learning needs.
- Recognise some common techniques used by both learners and teachers to assess learning needs.
- Explain the importance of appropriate professional conversations.
- Identify appropriate tools to assess learning needs, including reflective accounts, professional development plans, portfolios and critical event analyses.

This module can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/725433

Or on https://www.e-lfh.org.uk/ : Educator Training Resources (ETR) > 01 - Supervision of Learners > Assessing Educational Needs

Developing individual learning plans (or personal development plans PDP)

An individual learning plan or personal development plan (PDP) is an action/learning plan with objectives based on self-awareness, values, reflection, goal setting, and planning for training or career development. Advanced practice trainees are encouraged to review learning, goals, and achievements on a regular basis throughout training and development. Learning outcomes should be clear, realistic, desirable, and achievable. A first step is to look at strengths, preferences, values, and preferred learning styles. For more information please see: Personal development planning.

Developing an individual learning plan or PDP begins with an appraisal of the trainee's learning needs:

- Understanding existing professional knowledge, skills, experiences, behaviours, and characteristics.
- Agreeing which aspects of the existing knowledge, skills, experiences, behaviours, and characteristics must be augmented in training and off-the-job, to ensure competent, capable, safe, and effective advanced clinical practice.
- A baseline against which to track and record development in the specified capabilities and competences for the target advanced clinical practice role.
- The acknowledged added value different professional registrations bring the practice setting for patient benefit.

Supervisors are often required to work with individual trainees to set formal learning objectives with regards to knowledge, skills or behaviour learning needs. Using a framework, such as Bloom's Taxonomy (1956, 2001) (Figure 14), is an effective way to structure how educational objectives are agreed and defined for the cognition of knowledge, moving through the remembering, comprehension, application, analysis, synthesis and evaluation of information.
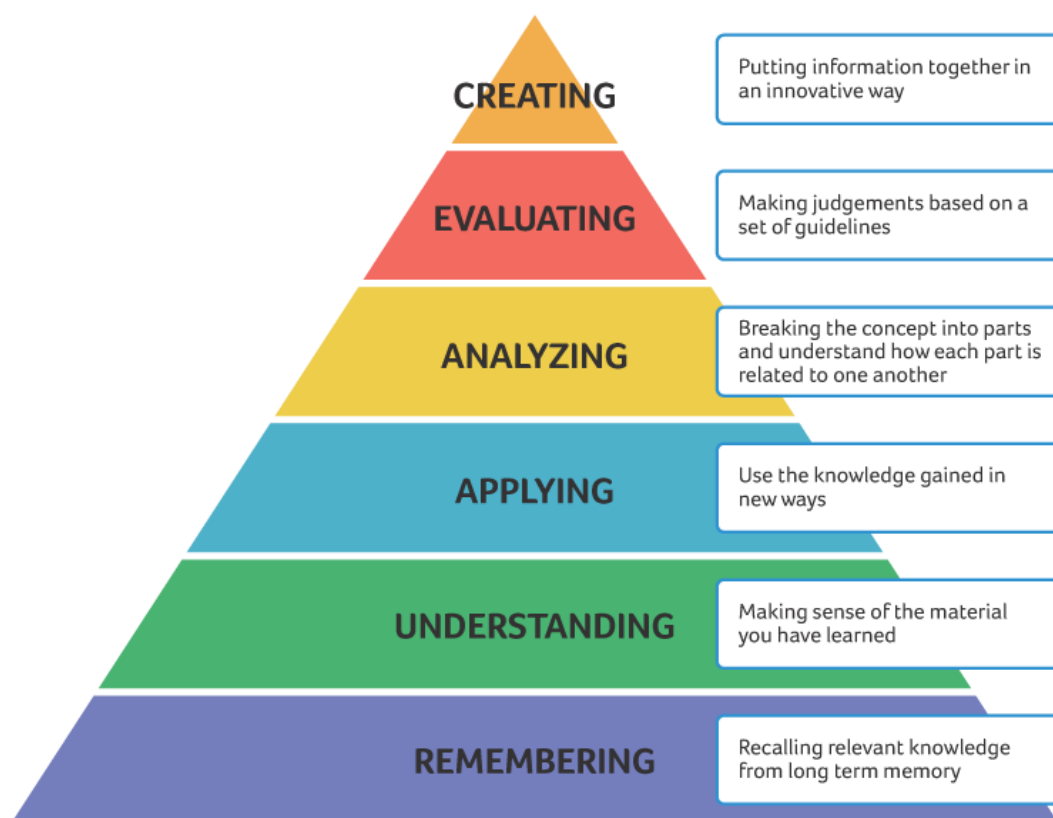
FIGURE 14: BLOOM'S TAXONOMY (2001)

It is important to consider the current level of the trainee's knowledge, skill, and behaviours as well as the stage the trainee is at in their advanced practice education. It is advisable that SMART goals to increase success in achieving the learning outcomes are set and will be explored in the in-person or virtual teaching session.

SMART stands for specific, measurable, achievable, realistic, and time-based. Example SMART objectives log (NHS England, 2021).

Activity: e-Learning for Health Module-Setting Learning Objectives (30 mins)

Description: The session introduces the topic of setting learning objectives in the clinical context and links closely with the session assessing educational needs (758/002). This session briefly considers the roles for the different individuals and organisations involved in setting learning objectives (including the learner, the teacher, the professional and health care organisations) and sets this in the broad context of clinical education.

Learning objectives:

- Identify some of the principles behind setting educational objectives.
- Recognise some of the distinctions between objectives, outcomes and competencies.
- Consider some of the issues involved in mapping learning to organisational and professional requirements.
- Link learning objectives to curriculum outcomes and objectives defined by learners themselves.
- Apply the learning from the session to your own practice through carrying out activities and reflecting on these.

This module can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/725954

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 01 - Supervision of Learners > Setting Learning Objectives

Activity: Trial of a SMART learning objective (20mins)

Take some time to consider a SMART objective for a first-year advanced practice trainee for knowledge, a skill, or a behaviour that requires development for one of their modules. Bring this SMART objective to the practical day as this will be discussed in more detail.

SMART	Knowledge	Skill	Behaviour
Specific			
Measurable			
Achievable			
Realistic			
Time-based			

Health and well-being

Healthy teams lead to healthy patients. NHS England (2024) offers a guide to supporting teams seeking to improve their health and wellbeing, through culture change. Inspired by the NHS health and wellbeing framework (NHS England, 2021), this guide has been co-designed with colleagues across health, social care, and voluntary sectors. It is aimed at teams looking for inspiration and guidance when creating a local culture of wellbeing in a practical and engaging way.

For more information please access: NHS Looking after your team's health and wellbeing guide. (NHS England, 2024) (3m55s)

As an advanced practice supervisor, the trainee may feel safe to confide about mental or physical health issues. It is useful to understand what available support could be offered to the trainee in your local area or workplace.

Activity: Support available for physical or mental health issues (5mins)

Take a few minutes to note a few different available options or signposts you could offer a trainee if they confided they were struggling mentally with stress at work or home life. You may wish to review your organisation's intranet.

Capability 7 – Workplace/Practice Learning Environment

The advanced practice supervisor is expected to:

"Adopt and model behaviours which establish a conducive, inclusive workplace learning environment and organisational culture to support advanced level development, innovative and culturally competent practice (NHS England, 2023)."

Areas of focus in this section:

- Establishing a supervision agreement/commitment
- Fostering and modelling trust, collaboration, dialogue

Estimated time to complete: 1 hour 35 minutes

Establishing a supervision agreement/commitment

When approaching supervision, it can be good practice to establish a supervision agreement between participants, so that both the trainee and supervisor have a clear and shared understanding about what the supervision will entail. Please click on the link for an example of a template [Supervision Agreement Template](#) (HCPC, 2024).

Fostering and modelling trust, collaboration, and dialogue

A successful supervision relationship must incorporate time for developing trust, collaboration, and open dialogue.

The clinical learning environment is important in ensuing the trainee has the correct resources and support to allow for productive and safe learning. As part of the [Clinical Learning Environment Strategy for East of England](#) (HEE, 2022), "Developing a culture of inclusive and compassionate learning" is discussed and goes into further detail:

"Developing a culture of inclusive and compassionate learning will actively raise awareness of and engage intersectionality within the learner community, validate learner experiences and perspectives and challenge indirect and direct discrimination in the learning environment.

Approaches to supporting practice learning will be co-created with learners, patients, educators and education partners to ensure that all voices are heard, including those of traditionally marginalised groups who in the past may have felt excluded or silenced. These inclusive approaches will be integrated with the existing frameworks and training and included within supervisor and educator training and support.

Compassionate approaches to learning will seek to promote wellbeing and alleviate anxiety arising from practice experience for all those engaged in the clinical learning environment and in so doing remove barriers to learning and development while higher education institutions also promoting retention. Best practice will be recognised, shared and celebrated."

Activity: Safe Learning Environment Charter (10mins)

The Safe Learning Environment Charter supports the development of positive and safe cultures with continuous learning across all learning environments in the NHS. It is underpinned by principles of equality, diversity, and inclusion (EDI). Please review the following document: [Safe Learning Environment Charter-what good looks like (NHSE, 2024)](#).

Activity: eLearning for Health module-Facilitating Learning in the Workplace (50mins)

Description: This session explores some theoretical perspectives on workplace learning and consider some suggestions on how to support learners in the clinical environment.

Learning Objectives as set out in this module:

- Recognise the opportunities for learning that present themselves in everyday working practice.
- Identify ways to create an environment where learning can take place.
- Describe the wider range of strategies to support learning.

This model can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/726638

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 04 - The Learning Environment > Facilitating Learning in the Workplace

Activity: e-Learning for Health module-Assuring and Maintaining Quality in Health Professions Education (30mins)

Description: Health professions teachers and managers need to evaluate the quality and effectiveness of their teaching and of the learning that takes place. Evaluation generally occurs within defined quality assurance frameworks that have common features. Understanding quality assurance systems and evaluation methods will help teach us to improve the student/ learner experience.

Learning objectives as set out in this module:

- Evaluate the quality and effectiveness of your teaching.
- Recognise quality assurance systems and evaluation methods.
- Identify the most common tools used in the evaluation of teaching and learning.

This module can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/728492

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 04 - The Learning Environment > Assuring and Maintaining Quality in Health Professions Education

Capability 8 – Registrant Responsibility

The advanced practice supervisor is expected to:

"To support and empower the trainee to take responsibility for identifying, prioritising, and addressing individual advancing practice learning needs.

Recognise and act when the trainee's personal, professional, or advanced practice learning needs are outside of the supervisor's scope of practice. Making referrals for appropriate support (coordinating education supervisor, academic supervisor, staff support, psychological support, counselling) or capability specific associate supervision as required.

Act as a role model by maintaining own capability in the relevant practice setting, in accordance with own professional registration, and engage in continuing professional development as a supervisor and educator." (NHS England, 2023)

Areas of focus in this section

- Supervisor as a registrant
- Supervisee/ trainee/ learner as registrant
- Professional regulatory bodies and registrant responsibility

Estimated time to complete: 55 minutes

Supervisor as a registrant

Supervision provides opportunities to share, explore and resolve practice uncertainties in a safe space. Registered health care professionals are expected to understand the purpose of and engage in supervision and continuous professional development as per the registrant's professional regulatory body. For further information about professional regulator bodies, please choose from the following links:

- [Health and Care Professions Council standards of proficiency](#)

- [Nursing and Midwifery Council standards of proficiency](#)

- [General Pharmaceutical Council standards and guidance](#)

- [General Medical Council professional standards](#)

Trainee as the registrant

It is the responsibility of the advanced practice trainee to work within their registered profession codes of conduct whilst training and when qualified. Supervisors may be required to supervise a trainee that is registered in a different profession. For further information on other professions' codes of conduct, please click the relevant code:

- [HCPC Standards of performance and ethics](#)
- [NMC 'The Code'](#)
- [Royal Pharmaceutical Society Governing Documents](#)

Professional regulatory bodies and registrant responsibility

Trainees and advanced practitioners should have relevant competencies and capabilities to work safely within their scope of practice. Scope of practice refers to the boundaries within practice based on level of education, training, and competencies/capabilities and defines the duties and responsibilities that can be legally undertaken. It is essential for multi-professional advanced practitioners to operate within those defined scopes of practice to ensure patient safety, personal safety, organisational safety and delivery of quality care. This is underpinned by maintaining competencies/capabilities that are discussed and signed off during the annual appraisal process.

For further information relating to patient safety, please access: [The NHS Patient Safety Strategy.](#)

Employers also have responsibilities for ensuring adequate supervision and training for employees. Please review this document: [Health and Care Act 2008- regulations 12 & 18.](#)

Registrant accountability in advanced practice refers to the responsibility of health care professionals working at advanced level to make decisions in a context of complexity, uncertainty, and varying risk, and to have accountability for decisions made (HEE, 2017).

Advanced practice development takes place in a live and dynamic clinical setting with multiple stakeholders from clinical, operational, and educational governance organisations. Each stakeholder's immediate governance focus may differ; however, the overarching aim is to support practitioner development while ensuring safe and effective care. Organisations have a liability to ensure appropriate governance for advanced practitioners.

Supervisors should know and ensure trainees are aware of the organisational/ICB governance frameworks/policies and procedures and trust/practice requirements. The clinical governance that is in place is to protect both patient and professional safety, see Figure 15.

.
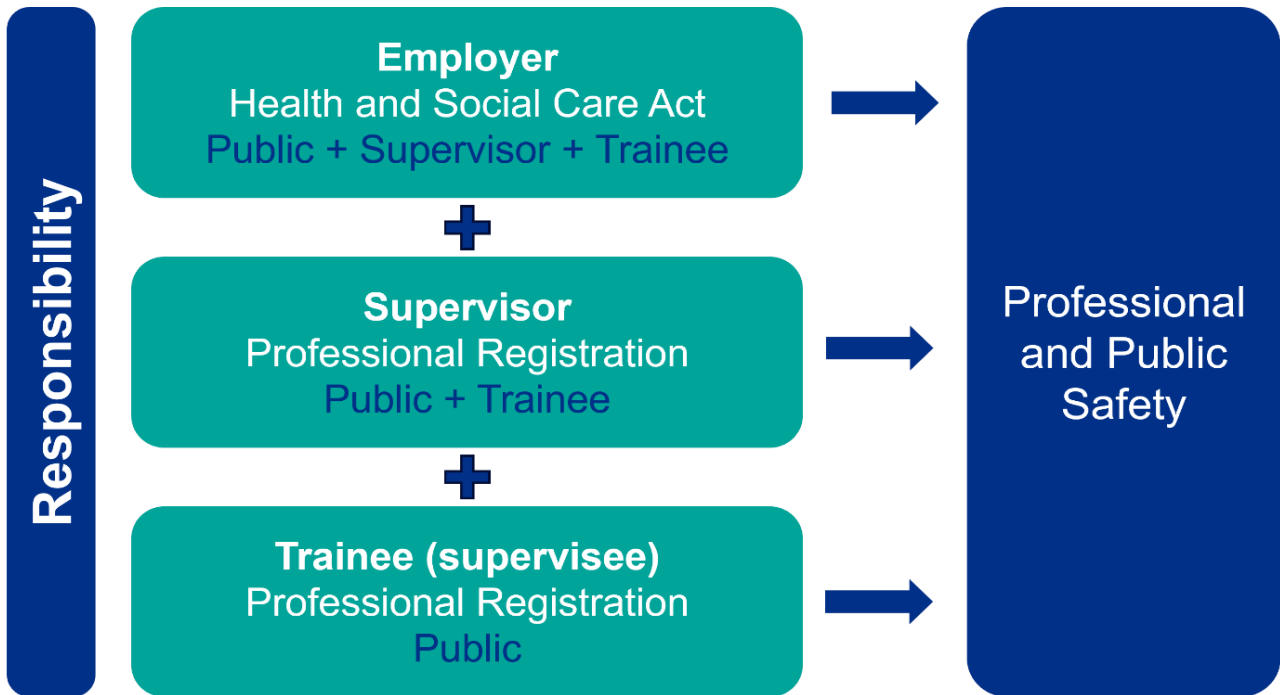
FIGURE 15: EMPLOYER, SUPERVISOR, AND TRAINEE RESPONSIBILITIES IN ADVANCED PRACTICE, (NHSE, 2024)

Activity: Readiness Documents (30 mins)

Please review the following checklists and action plan from the Centre for Advancing Practice website.

- Employer's advanced practice supervision action plan
- Readiness to become an advanced practitioner
- Supervisor readiness checklist, guidance for supervisors

It is important to ensure you have the experience, knowledge, and expertise to provide good quality supervision.

An employer seeking to introduce advanced practitioners into the workforce must factor the provision of workplace supervision for advanced practice development into the local workforce strategy, recognising that this will require investment in coordinating education supervisor and associate workplace supervisor capacity, capability, and competence.

Health and care professionals engage in career- long learning and development. In advanced practice development, employers must ensure that the balance between employee and trainee demands are maintained. Job plans offer one way in which this can be agreed, documented, and monitored. Job planning the clinical workforce-allied health professionals guide (NHSE, 2019) provides further information about the purpose and benefits of job planning.

Activity: Job Plan (10mins)

Here is an example job template. Please review your working week where supervision time can be included in your job plan; bearing in mind that the minimum standards for supervision of a trainee is 1 hour per week. Please see Appendix D for full size job plan template for this activity.

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Am							
Pm							
Eve							

Activity: Keeping current with supervision (5mins)

Take a couple of minutes to note in the box below. How will you keep up to date with supervision as CPD/appraisal process?

Capability 9 – Multi-Professional Practice

The advanced practice supervisor is expected to:

"Recognise the advanced practice learner as an experienced registered professional augmenting existing competence and capability to an advanced level, adjusting supervision approach for different starting points and building on strengths and existing knowledge, skills, and behaviours.

Establish a clear and agreed understanding of multi-professional factors which are relevant for the trainee's advanced practice development and supervision across the pillars of practice, ensuring these are reflected in the personal learning plan to include factors which may be specific to supervision between practitioners from different professions and/or registrations (NHS England, 2024)."

Areas of focus in this section:

- Different registrations, prior experience, expectations of supervision
- Integrated multi-professional team culture for supervision

Estimated time to complete: 1 hour 15 minutes

Different registrations, prior experience, expectations of supervision

Multi-professional advanced practice is a rapidly developing field of multi-professional practice across a growing range of settings such as physiotherapy, paramedicine, nursing, pharmacy, and radiography, with advanced level capabilities across the four pillars of clinical, leadership and management, education and research, as set out in the Multi-professional Framework for Advanced Clinical Practice in England. 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, this resource has been developed because:

- There is variation in the extent to which advanced practice and advanced practitioners are established and recognised across the health and care system.
- Current supervision practices tend to be profession specific.
- Advanced practice is multi-professional.

Within workplace supervision of advanced practice, knowledge and skills development is likely to include some supervision across traditional professional boundaries (NHS England 2024). There are already resources, courses and programmes that aim to develop registered professionals as workplace, practice-based educators, supervisors, and assessors, for example, medical professions have structured learning opportunities for those supervising postgraduate medical trainees. Historically these supervision training resources have been developed within and for single professional registrations such as nurses, doctors, pharmacists, physiotherapists and so on. The content, or curricula of these supervision practices may have some common features as listed in the figure below.

It is important for all supervision programmes to provide tools to signpost for personal, professional, or psychological support. This includes ensuring the supervisor can clearly maintain clinical and professional governance such as patient and professional safety, risk management, confidentiality, statutory duties, and duty of candour. For examples, see Figure 16.
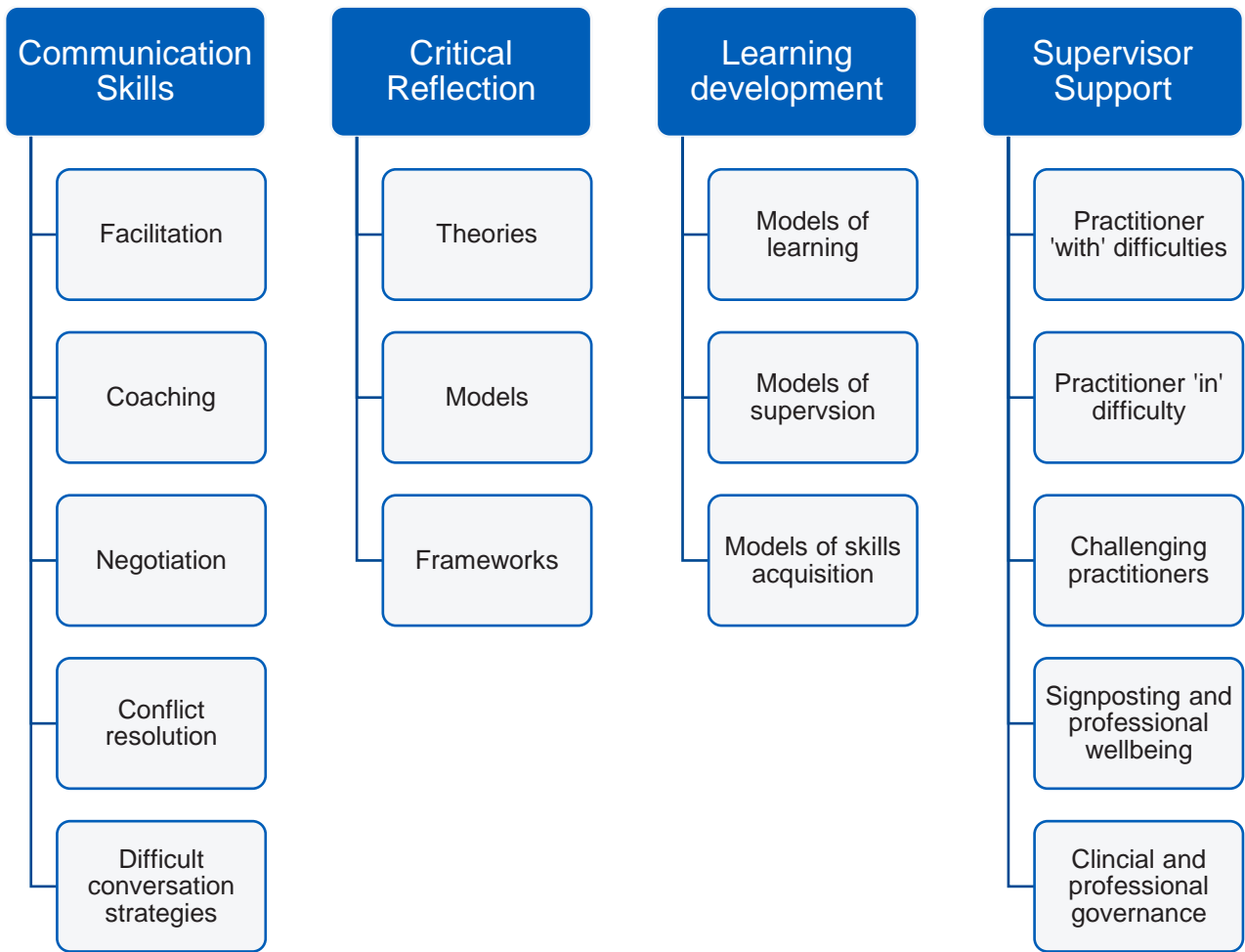
FIGURE 16: SIGNPOSTING TOOLS

We have seen the commonalities across supervision resources, courses, and programmes. Some barriers apply to all supervision across the health and care system, while others are barriers more specific to the advanced practice context. Figure 17 shows some of the barriers that can be found.
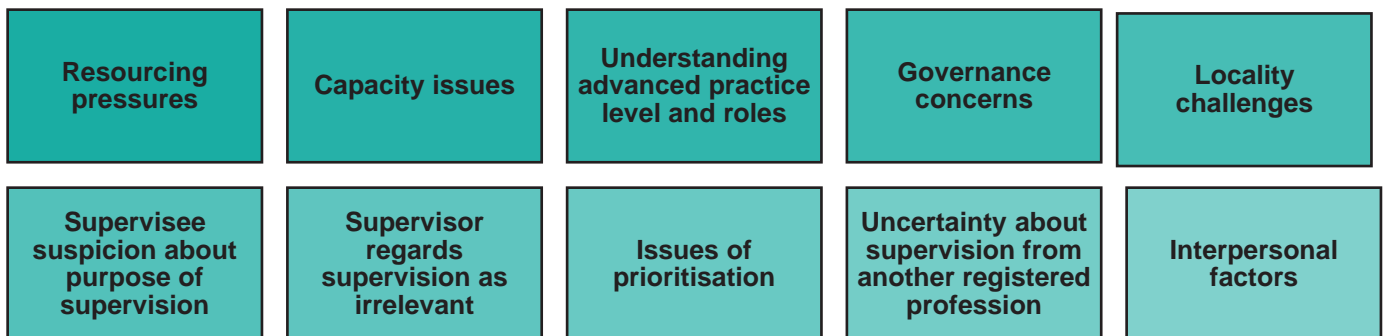
FIGURE 17: EXAMPLES OF BARRIERS TO SUPERVISION

Please access the following link for more information on barriers to supervision and ways of overcoming them: https://advanced-practice.hee.nhs.uk/our-work/supervision/#Appendix-5 (NHS, 2020)

Activity: Challenges and Barriers to Supervision (10mins)

Choose 2 of the barriers discussed in the above link and discuss possible solutions to overcoming these challenges?

Challenges	Possible Solutions

Integrated multi-professional team culture for supervision

Inter-professional working is not a new concept and has been a historical feature of the NHS. Inter-professional supervision *is*, however, a newer concept, and advanced practice embraces the integration of multi-professional education and supervision, valuing what each profession can offer in relation to the commonality of supervision knowledge and support.

Team culture means the sharing of beliefs, behaviours, practices and values for a particular organisation. Advanced practitioners may join together in a number of beliefs, behaviours, and practices at an advanced level of practice, and although each NHS organisation will have a variation of their own values, the 6 overarching core values of the NHS connects us all and what we all have in common regardless of profession

See: The NHS values | Health Careers:

- Working together for patients
- Respect and dignity
- Commitment to quality of care
- Compassion
- Improving lives
- Everyone counts

Activity: e-Learning for Health Module- Interprofessional Education (60mins)

Description: This session explores some theoretical perspectives on workplace learning and consider some suggestions on how to support learners in the clinical environment.

Learning Objectives:
- Recognise the opportunities for learning that present themselves in everyday working practice.
- Identify ways in which you can create an environment where learning can take place.
- Describe the wider range of strategies to support this learning.

This module can be found at: https://portal.e-lfh.org.uk/Component/Details/728329

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 05 - Approaches in Education > Interprofessional Education

Article

For a deeper dive into the challenges arising within a multiprofessional workforce:

Exploring the role of advanced clinical practitioners (ACPs) and their contribution to health services in England: A qualitative exploratory study (Mann et al., 2023).

Capability 10 – Valid, Fair & Reliable Assessment

The advanced practice supervisor is expected to:

"Work collaboratively with education providers to ensure valid, fair and reliable assessment and verification of workplace capabilities, combining, as required, with skilful feedback, facilitation, coaching and mentoring to support trainee progression.

Select and apply valid, fair, and reliable modes of workplace assessment and verification of advanced level capabilities consistent with curriculum and education provider requirements (NHS England, 2023)."

Areas of focus in this section:

- Assessment techniques and assessments
- Maintaining supervision capabilities
- Portfolio evidence

Estimated time to complete: 1 hour 50 minutes

Assessment techniques and assessments

Assessments are an essential part of the learning process within a clinical learning environment, allowing the trainee to receive direct feedback about progress through understanding certain knowledge, or developing expected skills or behaviours. The supervisor's feedback will indicate the trainee's progress made, strengths noted, and areas of improvement required to meet the learning outcomes set. Assessments can be classed into formative and summative, and each assessment method will vary in terms of validity, fairness, and reliability.

The table below shows similarities and differences between formative and summative assessments. As a supervisor advanced practice trainees will require support with the completion of practice assessment documents and workplace-based assessments. Some examples of workplace-based assessments have been linked with videos to be watched. These videos are directed towards pharmacists however, the content is relevant for multi-professional use.

	Formative	Summative
Purpose	Assessment of learning of knowledge, skill, or behaviour	Assessment as part of an HEI
Time Frame	Occurs during the learning process or programme	Occurs at the end of learning process or programme
Measurement	Direct feedback for strengths and areas for improvement	Pass or fail marking system
Tool examples	• Case-Based Discussion (CBD) (5m35s) • Direct Observation of Practical Skills (DOPs) (6m03s) • Mini Clinical Evaluation Exercise (Mini Cex) (6m32s) • Multi-source feedback • Clinical observation tools (COTs) • Clinical Examination Procedures	• Essay • Examination • Observed Structured Clinical Examinations (OSCE) • Presentation • Project

Activity: e-Learning for Health Module-Workplace and Practice based Assessment (50mins)

Description: This session explores ways in which the clinical performance of healthcare professionals can be assessed in the workplace. It outlines the principles underpinning the design of workplace/practice-based assessment systems and tools, considering how they influence subsequent use. Examples of tools typically used to assess practice of students and trainees are provided. This session concludes with suggestions on how to best use these types of assessment tools to support the development of students and trainees.

Learning objectives:

- Identify the ways in which clinical performance of healthcare professionals can be assessed in the workplace.
- Outline the principles underpinning the design of workplace/practice-based assessment systems and tools, and how they influence subsequent use.
- Describe tools typically used to assess practice of students and trainees.
- Identify how to use these types of assessment tools to support the development of students and trainees.

This module can be found at: https://portal.e-lfh.org.uk/LearningContent/Launch/726002

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 03 - Assessment and Progression > Workplace and Practice Based Assessment > Workplace and Practice Based Assessment

Activity: e-Learning for Health-Structured Assessments of Clinical Competence (25mins)

Description: Clinical teachers are often involved in assessments of clinical competence in the workplace, in universities and for postgraduate or post qualifying examinations. This session outlines the theoretical principles underlying the development of modern structured assessments of clinical competence and describes some practical aspects of designing and implementing the most used assessment: the objective structured clinical examination (OSCE).

Learning objectives:

- Recognise the background to current methods of assessing clinical competence.
- Identify the structure, strengths, and limitations of an OSCE.
- Develop a blueprint for a clinical assessment.
- Select appropriate types of examiners and patient for OSCE stations.
- Health professionals need to be assessed to ensure they are fit for purpose as well as fit to practice.

This module can be found at: https://portal.e-lfh.org.uk/Component/Details/725665

Or on https://www.e-lfh.org.uk/: Educator Training Resources (ETR) > 03 - Assessment and Progression > Structured Assessments of Clinical Competence > Structured Assessments of Clinical Competence

Activity: Workplace Based Assessment Experience (10 mins)

Take 10 minutes to note what workplace-based assessments you have completed in practice for your own learning in the table below. Then record how these tools can be used to assess and support an advanced practice trainee through training.

Workplace-Based Assessment Tools	How to apply this tool for clinical supervision

Maintaining Supervisor Capability

"*Registered professionals recognise their responsibility for continued engagement in lifelong learning as new theories and methods evolve. Just as clinical capabilities need renewal and refreshing, so too with supervisor capabilities*" (NHS England, 2023).

Professional development activities which support the maintenance and augmentation of supervisor capabilities include:

- practice networks
- peer to peer assessment and discussion

- appraisal objectives with a supervision/educator focus

- 360 assessments

- learning sets

- including supervision/educator evidence into a portfolio of ongoing continuous professional development

As an advanced practice supervisor, there is no formal assessment of supervisor capabilities; however, it is the supervisor's responsibility to maintain the expected knowledge, skills, and behaviours in relation to the supervisor capabilities to support current and future trainees through advanced practice training and development. There is a worksheet located in Appendix C to document any further training or updates related to supervisor training.

Portfolio of evidence

As a current advanced practitioner, there is an expectation to maintain a portfolio of evidence for scope of practice across the four pillars of advanced level practice, and should contain a range of evidence linked to the 38 capabilities as set out in the [Multi-professional framework for advanced clinical practice in England](#) (HEE, 2017). Each piece of evidence should state how it demonstrates capability; some pieces of evidence may demonstrate multiple capabilities. It is about quality of evidence rather than quantity.

As scope expands to include responsibilities as an advanced practice supervisor following this training, there will be an expectation to include portfolio evidence of supervisor capability. The portfolio of evidence may also be used to meet professional regulatory (HCPC/GPhC/NMC) and employment requirements, such as appraisal and revalidation purposes (Skills for Health, 2024).

Existing and new advanced practice trainees are expected to develop personal portfolios of evidence during advanced practice training. As an advanced practice supervisor there will be times that the trainee may require support to enable opportunities to complete certain capabilities. The trainee will be expected to show initiative in collating most evidence they require to meet programme learning outcomes and specific organisational/practice requirements.

Appendices

Appendix A-Progress Checklist

Capability	Page	Activity	Date of Completion	Notes
Capability 1: Purpose of Supervision				
		e-lfh: Introduction to Supervision		
		review section 6.1 The Co-ordinating Education Supervisor and section 6.2 Associate Workplace Supervisor		
		Essential reading: Supervision guidance, standards, and requirements		
		NHS England Workplace Supervision for Advanced Practice videos		
		Effective Supervision for Advanced Practice and Minimum Standards		
		Thinking points		
Capability 2: Models and Approaches to Supervision				
		Clinical supervision models		
		Critical awareness of supervision models		
		e-lfh: Core Supervision Model		
Capability 3: Models of Learning and Skills Acquisition				
		Adult Learning Theory Videos		
		Adult Learning Theory in Context		

		Applying theoretical perspectives to workplace learning		
Capability 4: Critical Reflection				
		Different approaches to critical reflection		
		Video: What is critical reflection?		
		Review of reflective learning resources		
		Personal reflection style		
Capability 5: Feedback & Facilitation				
		e-lfh: Feedback		
		Coaching v. Mentoring		
		e-lfh: Supporting a trainee with or in difficulty		
Capability 6: Practitioner/Learner Focused Approach				
		e-lfh: Equality, Diversity, and Inclusion		
		Your organisation's approach to EDI		
		Challenging discrimination		
		e-lfh: Assessing Educational Needs		
		e-lfh: Setting Learning Objectives		
		Trial of a SMART learning objective		
		Support available for physical or mental health issues		
Capability 7: Workplace/Practice Learning Environment				
		Safe Learning Environment Charter		
		e-lfh: Facilitating Learning in the Workplace		
		e-lfh: Assuring and Maintaining Quality in Health Professions		

Capability 8: Registrant Responsibility				
		Readiness documents		
		Job plan		
		Keeping current with supervision		
Capability 9: Multi-professional Practice				
		Challenges and Barriers to Supervision		
		e-lfh: Interprofessional Education		
Capability 10: Valid, Fair, & Reliable Assessment				
		e-lfh: Workplace and Practice-based Assessment		
		e-lfh: Structured Assessments of Clinical Competence		
		Workplace Based Assessment Experience		

Appendix B- East of England Advanced Practice Supervisor Training Evidence of Completion

Workbook completion:

Once the Advanced Practice Supervisor Training workbook **has been completed**, please have your line manager and organisational Advanced Practice Lead sign below to ensure they are aware of completion and to confirm readiness and eligibility to attend the in-person or virtual teaching session.

Advanced Practitioner signature/date_____

Line Manager signature/date_____

Organisational Advanced Practice lead signature/date_____

Attendance at in-person or virtual supervisor training teaching session:

Yes, I have attended the facilitated supervisor training teaching session:

Date attended_____

Facilitator signature _____

Appendix C-Supervisor training updates

Date	Type of training (in person/e-learning)	Notes / reflections and learning

Appendix C-Supervisor training updates

Appendix D- Job Plan

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Am							
Pm							
Eve							

Appendix E-Trainees in need of support: general principles

Trainees in need of support: general principles

NHS England

Trainee in need of support

- Issue with placement/ practice area
- Issue with education provider
- Issue with supervisor/supervision
- Issue with managing programme of study
- Personal circumstances

Trainee should approach line manager as soon as possible to raise issue and develop a plan to support trainee with agreed actions and time frames

If trainee cannot approach line manager, the organisational/training hub advanced practice lead should be contacted in the first instance

Line manager should contact organisation's/training hub's advanced practice lead to raise issue whilst attempts to manage/resolve issues are undertaken and trainee is supported

Further actions an advanced practice lead should take:

- Identify key staff involved
- Meet with trainee +/- manager to develop action plan with agreed targets/time frames
- Contact trainee's supervisor to discuss supervision arrangements and ensure these are in place
- Investigate cause of issue and any remedial action taken or planned
- Ensure education provider aware if studies are impacted

The organisational/training hub advanced practice lead should contact the NHS England Regional Faculty for Advancing Practice via england.eoeapfaculty@nhs.net as soon as an issue is raised with them.

Immediate actions to be taken by the advanced practice lead:

- Ensure patient/trainee is safe
- **Identify and escalate any safety/governance issues immediately with relevant channels i.e. primary care training hub, within employing organisation**
- Provide support to trainee including trainee's wellbeing/signpost re: wellbeing needs

Appendix F-Trainees requiring support with education provider

Trainees in need of support

Trainees requiring support with education provider studies

There is an expectation for all advanced practice trainees to be proactive in managing their learning journey. This includes acting to manage and resolve problems that may occur during their training programme, with the support of their manager, supervisor, organisational/training hub advanced practice lead, MSc programme lead, and the NHS England – East of England Faculty for Advancing Practice.

Trainee requiring support with MSc programme/ education provider studies

➜

Within 4 weeks of trainee needing support

Trainee contacts MSc programme lead or personal tutor at education provider to organise support for studies

➜

Within 1 week of trainee contacting education provider:

Trainee contacts line manager and supervisor(s) to discuss issues and to make appropriate arrangements for adjustments in practice placement if needed

➜

The trainee MUST report to their line manager and organisational/training hub advanced practice lead IMMEDIATELY if they:

- intend to the leave the programme
- defer on assignments/need to resubmit assignments: these may be education provider assignments or practice placement assignments/portfolios/skills, etc.
- have difficulties in attending required study days, and/or are unable to attend.
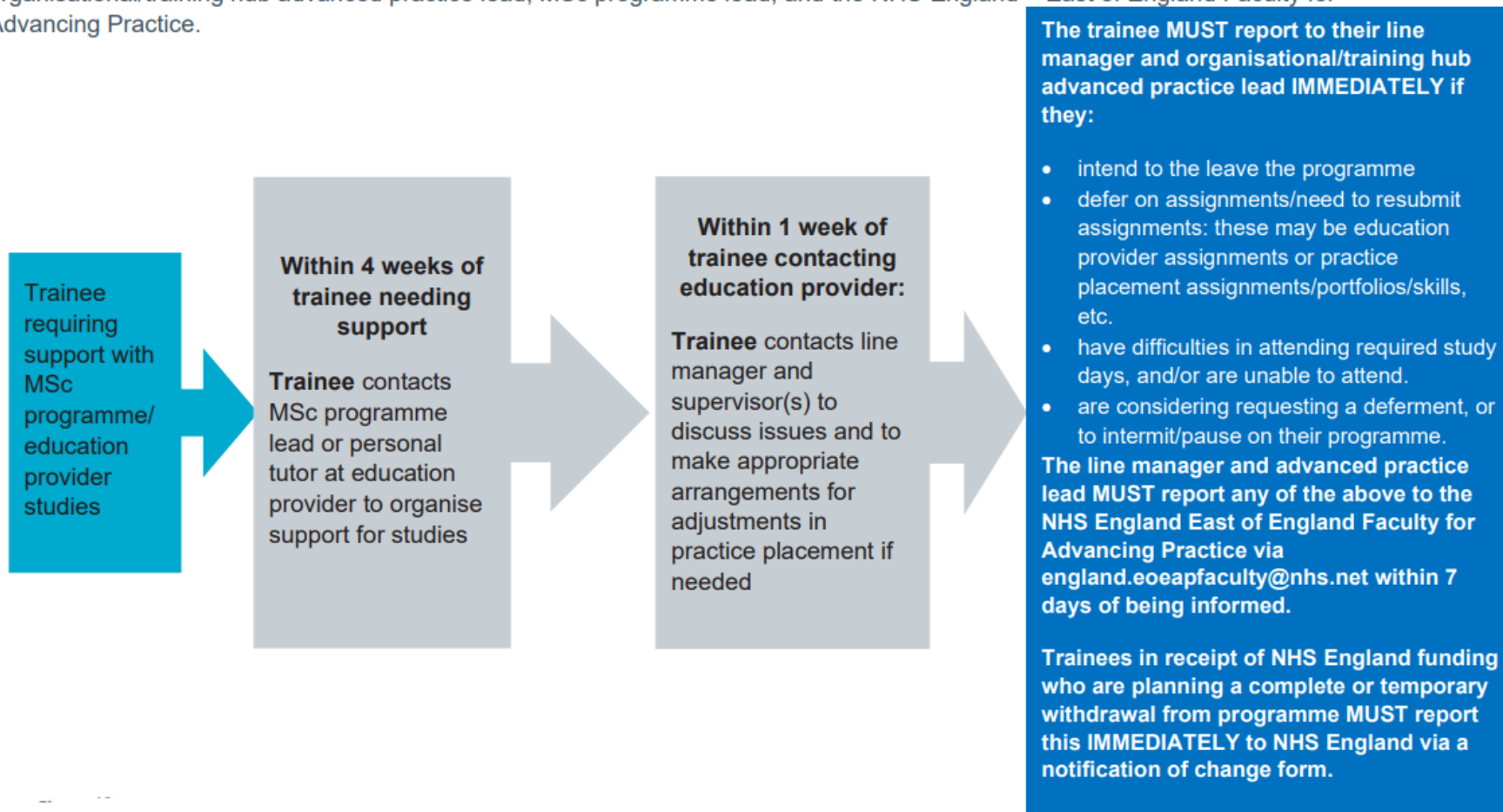- are considering requesting a deferment, or to intermit/pause on their programme.

The line manager and advanced practice lead MUST report any of the above to the NHS England East of England Faculty for Advancing Practice via england.eoeapfaculty@nhs.net within 7 days of being informed.

Trainees in receipt of NHS England funding who are planning a complete or temporary withdrawal from programme MUST report this IMMEDIATELY to NHS England via a notification of change form.

Appendix G-Trainees requiring support in placement/practice areas

Trainees in need of support

Trainees requiring support in placement/ practice areas

There is an expectation for all advanced practice trainees to be proactive in managing their learning journey. This includes acting to manage and resolve problems that may occur during training, with the support of their line manager, supervisor, organisational advanced practice lead, MSc programme lead, and the NHS England Regional Faculty for Advancing Practice.

Trainee requiring support in the training placement area: these may be related to capability, clinical learning environment/practice or personal circumstances

- Trainee should meet with line manager of placement/practice to raise any issues at earliest opportunity: within 7-10 days from start of issue
- Trainee should also contact supervisor to arrange support and create an action of plan with agreed targets and timeframes to attempt to resolve issues (within 7-10 days from start of issue)
- **Any issues relating to patient/trainee safety or safety of the placement/practice MUST be reported to line manager and supervisor immediately and ensure any patient safety/incident reporting procedures are followed.**

If issues cannot be resolved, the trainee must discuss any potential placement or practice moves (except emergencies), with the organisational/training hub advanced practice lead who will inform NHS England. If action plan/targets unmet and trainee is considering possible deferment (or alternatives), the advanced practice lead will inform NHS England.

The trainee must stay in contact with manager, supervisor, and advanced practice lead-at regular intervals.

Efforts must be made to resolve any issues within the placement/practice area. An action plan must be made by the trainee, supervisor, manager and, if appropriate, the organisational/training hub advanced practice lead within 7 days of first contact.

The action plan should have SMART objectives.

The trainee and line manager and organisational advanced practice lead (or supervisor) MUST contact NHS England via england.eoeapfaculty@nhs.net at this point to advise the trainee is in difficulty and to discuss the action plan. At this stage NHS England will not take any action but will be aware of concerns.

If trainee is unable to discuss issues with line manager and/or supervisor (e.g., because of absence or breakdown of relationship) trainee should contact organisational/training hub advanced practice lead within 7-10 days of start of issue.

Any concerns about safety of trainee placement and/or patient safety MUST be reported to advanced practice lead immediately.

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Resource List

Association of Advanced Practice Educators Student Handbook – AAPE Student Handbook
aape.org.uk/resources-index/student-handbook/

The NHS England Ophthalmic Common Clinical Competency Framework – Curriculum (OCCCF)
https://www.hee.nhs.uk/our-work/advanced-clinical-practice/ophthalmology-common-clinical-competency-framework-curriculum

Musculoskeletal core capabilities framework for first point of contact practitioners
https://www.csp.org.uk/system/files/musculoskeletal_framework2.pdf

Core Capabilities Framework for Advanced Clinical Practice (Nurses) Working in General Practice / Primary Care in England
https://www.hee.nhs.uk/sites/default/files/documents/ACP%20Primary%20Care%20Nurse%20Fwk%202020.pdf

Nursing and Midwifery Council, (NMC) https://www.nmc.org.uk/

Health and Care Professions Council, (HCPC) https://www.hcpc-uk.org/

General Pharmaceutical Council, (GPhC) https://www.pharmacyregulation.org/

Faculty of Intensive Care Medicine, (FICM) Advanced Critical Care Practitioner Programme
https://www.ficm.ac.uk/

Royal College of Emergency Medicine (RCEM) Emergency Care Advanced Clinical Practice Curriculum https://rcem.ac.uk/