

# Supporting Advanced Practice Trainees Experiencing Difficulty



**Faculty for Advancing Practice Midlands**



Introduction	4
Prevent	5
1. Establish Effective Supervision and Mentorship	5
2. Communicate Expectations Clearly	6
3. Personalise the Learning Approach	6
4. Monitor Progress and Provide Timely Feedback	6
5. Simplify Complex Tasks	6
6. Foster a Supportive Learning Culture	6
7. Encourage Peer Connection and Learning	<b>Error! Bookmark not defined.</b>
Resources that may help	6
Identify	8
1. Performance Concerns	8
2. Behavioural and Emotional Indicators	8
3. Communication and Interaction Issues	8
4. Attendance and Stress Signals	8
5. Strategies to Confirm and Explore Concerns	9
Resources that may help	9
Escalate	10
1. Initiate a Constructive Conversation	10
2. Keep Thorough Documentation	10
3. Engage Workplace and Academic Supervisors	10
4. Escalate to Senior Leadership if Needed	10
Respond	11
1. Assess Health and Promote Recovery	11
2. Support Well-being and Time Management	11
3. Develop a Targeted Performance Improvement Plan (PIP)	11
4. Strengthen Supervision and Support	11
5. Engage External Support Systems	11

6. Consider Redeployment or Exit as a Last Resort	12
7. Uphold Confidentiality and Professionalism	12
8. Reflect and Improve Systems	12
Resources that may help	12
Conclusion	16
References	16

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## Introduction

The transition to advanced practice is a demanding process that can present significant personal and professional challenges. Experiencing difficulty during this period is both common and predictable and should not be viewed as a sign of weakness or failure.

This guidance aims to support early recognition and prevention of issues, promoting a safe and sustainable progression through training. It is designed to support Advanced Practitioner trainees who may be experiencing difficulties, offering practical strategies and insights for learners, their supervisors, colleagues, and Higher Education Institution (HEI) staff to foster a collaborative, responsive, and supportive learning environment.

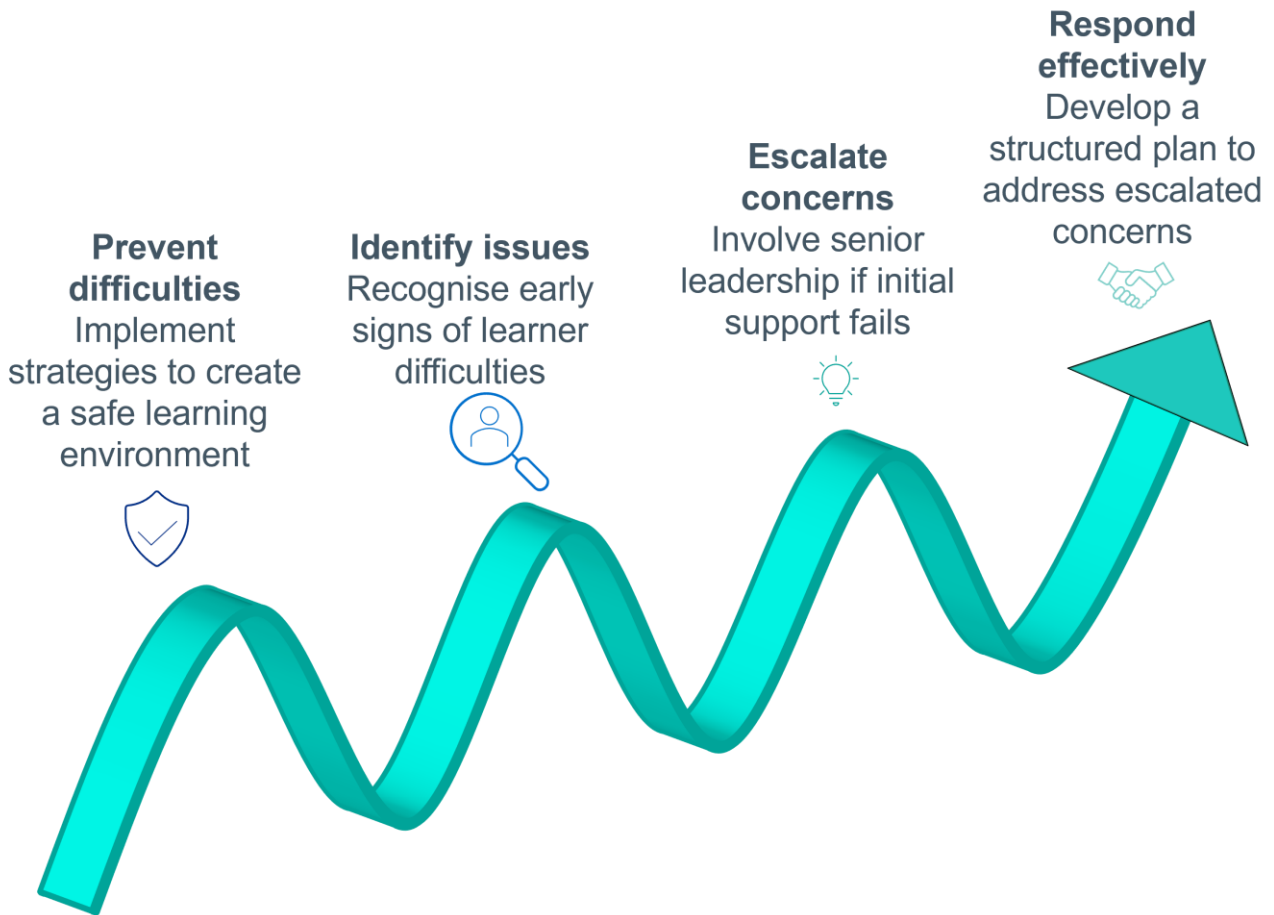
Additional resources to support those involved in advanced practice supervision can also be found [here](#)

A trainee in difficulty is an individual whose progress in their training program is causing concern. This may be due to a variety of factors including:

- **Academic performance:** Not meeting curricular requirements or struggling with specific subjects or skills.
- **Professional conduct:** Issues with behaviour, ethics, or interpersonal relationships.
- **Health and wellbeing:** Physical or mental health problems affecting their ability to train.
- **Personal circumstances:** Life events or challenges impacting their training.

It is important to note that a trainee in difficulty is not necessarily a poor performer but someone who is experiencing difficulties that are hindering their progress. Early identification and support are crucial to help trainees overcome challenges and successfully complete their training.

This guide uses the **PIER** model (NHS England, 2024) to structure a supportive approach to trainees in difficulty by **Preventing** problems through clear expectations, mentorship, and a safe learning environment; **Identifying** early warning signs like performance changes or distress; **Escalating** concerns using agreed pathways and involving relevant support networks; and **Responding** with tailored, compassionate action plans to optimise learning and well-being. It promotes early, empathetic intervention to keep trainees on track and thriving.



## Prevent

Transitioning into an Advanced Practitioner trainee role involves a significant professional shift. It often involves redefining clinical identity, adapting to new responsibilities, and navigating unfamiliar environments. This can feel isolating and overwhelming, making structured support, supervision, and mentorship essential for a successful transition.

Here are some proactive measures for discussion between trainee and supervisor to help prevent a learner from experiencing difficulties and create a safe learning environment.

### 1. Establish Effective Supervision and Mentorship

- Assign a coordinating educational supervisor who understands the trainee's qualifying professional registration, prior experience, and regulatory context.
- Where appropriate ensure workplace-based supervisors or a mentor/buddy are in place to provide guidance and support in clinical practice.
- Foster open communication to encourage trainees to express concerns without hesitation or fear of judgement.

## 2. Communicate Expectations Clearly

- Set and agree on the trainee's scope of practice, learning objectives, and progress measures from the outset.
- Use job planning to structure clinical and non-clinical time effectively, ensuring the trainee and supervisor are aligned.
- Encourage trainees to ask questions to clarify expectations and reduce uncertainty.

## 3. Personalise the Learning Approach

- Assess risk factors. Some trainees may struggle to balance their training programme with family commitments, whilst those with recognised neurodiversity issues may require a more flexible approach to their academic studies.
- Acknowledge individual learning paces that may require flexibility and adjustment of training methods to suit different styles and needs.
- Recognise trainees' diverse backgrounds, prior learning and employee rights that must be respected.

## 4. Monitor Progress and Provide Timely Feedback

- Schedule regular check-ins to discuss development, address challenges, and offer constructive, confidence-building feedback.
- Use workplace-based assessments to support reflection and measure progress in real-world practice, with patient safety as a core theme.

## 5. Simplify Complex Tasks

- Break down challenging tasks into manageable steps.
- Tackle one task at a time to reduce overwhelm and build confidence incrementally.

## 6. Foster a Supportive Learning Culture

- Create a psychologically safe environment that encourages questions, curiosity, and learning from mistakes. NHS Employers offers guidance and advice on how we can achieve this which can be accessed [here](#).
- Acknowledge growth and development over perfection.

## 7. Encourage Peer Connection and Learning

- Engage and collaborate with other trainees to promote shared learning and a sense of belonging.
- Enable knowledge exchange through informal peer mentoring and teamwork.

[Resources that may help](#)  
[Supervisor Readiness Checklist](#),

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[Readiness to Become An Advanced Practitioner,](#)  
[Employers advanced practice supervision action plan.](#)

[Governance Maturity Matrix](#)

[An employer's guide to ADHD in the workplace](#)

[Guide to Practice-Based Learning \(PBL\) for Neurodivergent Students](#)

### **Case Study: “One Size Doesn’t Fit All” – Tailoring Support for Diverse Learners**

Kerri Douglas, MSc Advanced Clinical Practice Programme Lead at Keele University, recognises the vital role Higher Education Institutions (HEIs) play in supporting learners with additional needs. She identifies mature students returning to study, those for whom English is a second language, and students with diagnosed or undiagnosed learning needs as particularly at risk or encountering difficulties.

#### **Challenge:**

Many learners struggle with mastering varied assessment formats, a difficulty often worsened by inconsistent assessor expectations. These challenges can lead to disengagement, underperformance, and increased stress.

#### **Innovative Response:**

Keele University has introduced flexible assessment options within certain modules, allowing students to choose formats that align with their strengths. Early identification of at-risk learners enables tailored support, such as pre-planned assignment extensions. Additionally, pastoral care is strengthened through buddy systems and close monitoring by programme leads.

#### **Impact:**

These strategies foster a more inclusive learning environment, reduce barriers to success, and empower learners to thrive academically and professionally.

## Identify

Identifying a trainee in difficulty early on is crucial to provide timely intervention and support. During periods of high pressure, when academic and workplace demands intensify, a trainee's ability to self-regulate and maintain self-awareness may be reduced. It is important for both trainees and colleagues to remain alert to early signs of difficulty, which may include:

### 1. Performance Concerns

- **Lack of Progress:** Frequently misses milestones, struggles to complete tasks, or needs significantly more time than expected.
- **Repeated Mistakes:** Makes the same errors despite feedback and has difficulty applying learning to practice.
- **Poor Quality of Work:** Work consistently falls below the required standard with little improvement.

### 2. Behavioural and Emotional Indicators

- **Low Engagement:** Appears distracted, withdrawn, or uninterested; avoids participating in discussions or activities.
- **Negative Attitude or Frustration:** Displays stress, low mood, or expresses defeatist statements (e.g., "I can't do this").
- **Decline in Confidence:** Shows anxiety or hesitation when performing tasks or discussing material which is new or unfamiliar.
- **Avoidance of Feedback:** Resists critique, may become defensive, or disregards suggested improvements.

### 3. Communication and Interaction Issues

- **Reluctance to Ask for Help:** Avoids seeking clarification, appears apprehensive or isolated in sessions.
- **Isolation from the Group:** Works alone and withdraws from peer interaction or group learning opportunities.
- **Lack of Initiative:** Waits for direction, avoids responsibility, and shows minimal curiosity or motivation.

### 4. Attendance and Stress Signals

- **Missed Deadlines and Absenteeism:** Frequently late, cancelling meetings, absent or fails to submit work without explanation.
- **Physical Signs of Stress:** Displays restlessness, fatigue, or tense body language (e.g. fidgeting, sighing).

## Strategies to Confirm and Explore Concerns

- **Ensuring a safe psychological space:** Foster open communication, respect diverse perspectives, and ensure everyone feels safe to speak without fear of judgment or retaliation.
- **Direct Communication:** Initiate a private, open-ended conversation to highlight recognised triggers or change in behaviour.
- **Observation:** Monitor behaviour during training sessions and team interactions for consistent patterns.
- **Feedback Gathering:** Seek insights from academic and workplace supervisors, mentors, and colleagues who closely work with the trainee.

## Resources that may help

[Dealing with Trainees in Difficulty \(Mahmood, 2012\)](#)

[Giving and Receiving Feedback](#)

[Professional nurse advocate A-EQUIP model: a model of clinical supervision for nurses](#)

### Case Study: Restoring, Reflecting, Reforming: The A-EQUIP Approach in Action

The A-EQUIP (Advocating and Educating for Quality Improvement) model, based on Bridget Procter's work, was developed by NHS England as a clinical supervision framework. Introduced in 2017 within midwifery to replace statutory supervision, it was later adapted for the wider nursing workforce.

Helen Allen, Lead ACP for Quality Improvement at University Hospitals of Derby & Burton, has adopted the model to support Advanced Practitioners across disciplines through restorative supervision. Professional Advocates promote continuous improvement, leadership, and high-quality care, aligning with the four pillars of Advanced Practice.

**Education & Development (Formative)** – Linked to the Education pillar, this function enhances knowledge and leadership through guided reflection, encouraging ACPs to challenge and improve practice while advocating for patients.

**Personal Action for Quality Improvement** – Tied to Leadership and Research pillars, it empowers ACPs to engage in improvement initiatives and actively enhance care.

**Clinical Supervision (Restorative)** – Rooted in the Clinical pillar, this function offers emotional support, reduces burnout, and improves wellbeing, retention, and team dynamics.

**Monitoring & Evaluation (Normative)** – Spanning all pillars, it reinforces accountability, validates clinical actions, and supports learning from errors to ensure safe, effective practice.

## Escalate

When a trainee is in difficulty and the strategies discussed above have not been effective, escalation is necessary to ensure they receive appropriate support. Here are some steps to consider when escalating a trainee's situation:

### 1. Initiate a Constructive Conversation

- Open a respectful, honest dialogue with the trainee to outline the specific concerns.
- Review what actions have already been taken to support them and clearly explain the importance of improvement.
- Focus on observable behaviours, explore potential contributing factors, and invite the trainee to share any personal or contextual challenges.
- Ensure the trainee understands possible consequences if issues are not resolved, while maintaining a compassionate, supportive tone.

### 2. Keep Thorough Documentation

- Maintain a clear, factual record of performance concerns, including missed deadlines, specific incidents, and actions taken.
- Document all feedback, the trainee's responses, and any progress made (or lack thereof).
- Consistent, objective documentation will support fairness, clarity, and accountability throughout the process.

### 3. Engage Workplace and Academic Supervisors

- Escalate concerns to the coordinating educational supervisor or academic supervisor, sharing documented evidence and outlining previous interventions.
- Collaboratively identify further strategies or support options.
- Agree on clear, time-bound improvement goals with the trainee and document the action plan, including responsibilities and resources.

### 4. Escalate to Senior Leadership if Needed

- If concerns persist despite informal interventions and supervision, escalate to the Advanced Practice Lead or senior management.
- Provide a concise summary of all steps taken, the trainee's engagement with the process, and any impact on service delivery, staff morale or patient care.
- This ensures transparency and enables leadership to explore further action where appropriate.

## Respond

The goal is to help the trainee improve while ensuring the organisation's standards are upheld. This step will require involvement of a manager or Advanced Practice Lead whose response will be informed by organisational policy.

### 1. Assess Health and Promote Recovery

- Refer trainees to Occupational Health where performance concerns may be linked to health issues.
- Seek recommendations for reasonable adjustments to support training and document in a Tailored Adjustments Plan.
- Emphasise the importance of regular breaks and physical rest to support cognitive performance and well-being.

### 2. Support Well-being and Time Management

- Promote access to well-being services, including stress assessments.
- Explore options for temporary adjustments:
  - Time out of academic study (while remaining within MSc completion limits)
  - Leave from work or team reassignment.
  - Notify the Regional Faculty of any breaks via the appropriate "[Change in Circumstances](#)" form.

### 3. Develop a Targeted Individual Learning Plan

- Collaboratively create a learning plan that outlines:
  - Specific performance concerns
  - Measurable improvement goals
  - Resources available
  - Timelines and regular review checkpoints
- Align the plan with local HR policy and ensure the trainee fully understands expectations.

### 4. Strengthen Supervision and Support

- Assess the need for additional supervision or focused training to address specific development needs.
- Consider assigning an alternative supervisor if current arrangements are not effective.
- Gather workplace-based assessments from a broad variety of assessors to ensure objectivity.

### 5. Engage External Support Systems

- Signpost or refer to:
  - University/Higher Education support services

- Access to Work
- Regional Faculty for Advancing Practice
- Alternative assessment or supervision by an experienced advanced practitioner from another organisation

## 6. Consider Redeployment or Exit as a Last Resort

- If all support options are exhausted and no improvement is observed:
  - Explore redeployment to a more suitable role.
  - Removal from the programme, if not able to meet the capability requirements to continue in training. This must be in accordance with relevant organisational policy and should be as a last resort.

## 7. Uphold Confidentiality and Professionalism

- Manage concerns with sensitivity and discretion, involving only those with a need to know.
- Maintain the trainee's dignity and privacy throughout the process.

## 8. Reflect and Improve Systems

- Conduct a retrospective review of processes such as recruitment, supervision, induction, and placement allocation.
- Use insights to enhance training design and governance, preventing recurrence of similar issues.

## Resources that may help

AdvanceHE (2022) [Education for Mental Health Toolkit](#)

[Access to Work](#)

[Android Apps for Learners with Dyslexia](#)

[Dyslexia Friendly Workplaces - A guide for employers](#)

[Useful Resources | mSurgery](#)

Organisational Managing and Supporting Performance Policy

University Policies and Procedures for Authorised Break in Studies

## Scenario: Escalating Concerns About a Trainee ACP

The case study below is aimed to illustrate the practical use and implementation of the PIER structured approach when supporting the learner in difficulty within practice.

### Background:

Jordan, a trainee Advanced Practitioner, has recently been the subject of multiple concerns raised by colleagues. These include poor time-management, difficulty concentrating, emotional lability, and disengagement from their workplace-based portfolio. Jordan has also made several minor prescribing errors and has been openly critical of management and organisational processes. Their behaviour within the team has been described as argumentative and disruptive, leading to concerns about their readiness to work without direct supervision.

### Supervisor Response Using the PIER Model:

**Prevent:** Jordan's educational supervisor, Dr. Patel, had previously established regular check-ins and a psychologically safe environment for feedback. However, recent pressures may have disrupted these preventative measures. Dr. Patel reviews the original learning agreement and support plan to identify missed opportunities for early intervention.

**Identify:** Dr. Patel meets with Jordan in a private, supportive setting to discuss the concerns raised. They explore Jordan's perspective, acknowledging their neurodiversity and emotional regulation challenges. Dr. Patel uses reflective questioning to help Jordan recognise patterns in their behaviour and performance and gently introduces the feedback from colleagues.

**Escalate:** Given the persistence and seriousness of the concerns—particularly the prescribing errors, team disruption, and lack of insight—Dr. Patel determines that escalation is necessary. A formal case review is initiated, involving the clinical lead, and HR. Occupational health and neurodiversity support services are also engaged to ensure a holistic understanding of Jordan's needs. A risk assessment is completed, and a temporary adjustment is made to ensure Jordan works only under direct supervision.

**Respond:** A tailored support plan is developed collaboratively with Jordan, focusing on reasonable adjustments, structured supervision, and emotional wellbeing. Portfolio engagement is restructured into manageable tasks with clear timelines. Jordan is offered mentoring and access to coaching to support self-regulation and professional development. The team is also briefed on inclusive practices and how to support neurodiverse colleagues effectively.

Following the above interventions Jordan is able to continue with their studies and feels supported within the workplace, their supervisors report a significant improvement with all

concerns now resolved. The structured supervision and guidance on self-regulation have equipped Jordan with the skills to recognise and understand potential triggers that may derail progress to enable early escalation and supportive interventions. Jordan now also ensures that an open and honest conversation is held with all new supervisors so that they can meet Jordans workplace-based supervision needs and be proactive rather than reactive in their support.

Further information can be found in the infographic below suggesting what is felt to be a proportionate response when managing concerns raised to support learners in difficulty. This approach is utilised and advocated by the Derbyshire Faculty for Advancing Practice.

## A Proportionate Response to Managing Concerns About a Trainee

The Derbyshire Faculty of Advancing Practice has produced a guide to managing concerns raised about the progress of a trainee or their performance. The infographic below provides guidance for all partners organisations within the Integrated Care System.

1

### Low Level Concerns

- Gather feedback from colleagues
- Meet the trainee and document the discussion
- Review personal objectives and review regularly
- Signpost to well-being services
- Increase the level of day-to-day support

2

### Moderate Concerns

- In addition to the above interventions:**
- Monitor progress closely
  - Identify any reasonable adjustments required
  - Inform line manager and ACP lead
  - Consider an Occupational Health referral
  - Involve senior educators if performance does not improve

3

### Significant Concerns

- In addition to the above interventions:**
- Arrange regular meetings with the supervisory team
  - Consider a pause in academic studies
  - Refer to the organisational policy for managing and supporting performance
  - Gather further assessments of performance

Derbyshire Faculty of Advancing Practice (2024) **Training Guide**

## Conclusion

Supporting learners in difficulty requires a proactive, compassionate, and structured approach. The PIER model provides a clear framework to guide supervisors in recognising early signs of struggle, taking timely and appropriate action, and fostering a supportive learning environment. By focusing on prevention, early identification, effective escalation, and responsive intervention, supervisors can play a pivotal role in safeguarding trainee wellbeing and promoting successful progression.

## References

NHS England (2024) Managing acute physical deterioration through the 'prevention, identification, escalation, response' (PIER) approach [Online] Accessed 27/07/25 available at: <https://www.england.nhs.uk/patient-safety/managing-acute-physical-deterioration-through-the-prevention-identification-escalation-response-pier-approach/>