

# Undertaking BMUS Preceptorship Endorsement Scheme Pilot

Sharon Watty

Ultrasound Practice Educator and Professional Development  
Lead

Guys and St Thomas hospital NHS Trust, London



**BMUS** 

## **BMUS Preceptorship Endorsement Scheme**



- **Decide to do it!**
- **Read the criteria**
- **Support and feedback**
- **Benefits of BMUS endorsement**



# Essential Criteria

1. A named mentor
2. Induction
3. Template for meetings
4. Evidence objectives have been met
5. Evidence accessible policies
6. Time for learning and reflection
7. Time for attending meetings
8. Support for mentor/ preceptor
9. Culture to develop four pillars of practice
10. Pathway to address lack of progression




# Essential criteria

A named mentor / preceptor for all new starters, transitioning staff and newly qualified staff

Guy's and St Thomas' **NHS**  
NHS Foundation Trust


## RADIOLOGY ULTRASOUND

Induction Information for  
Sonographers



Radiology Ultrasound Induction Pack

### The GSTT Team

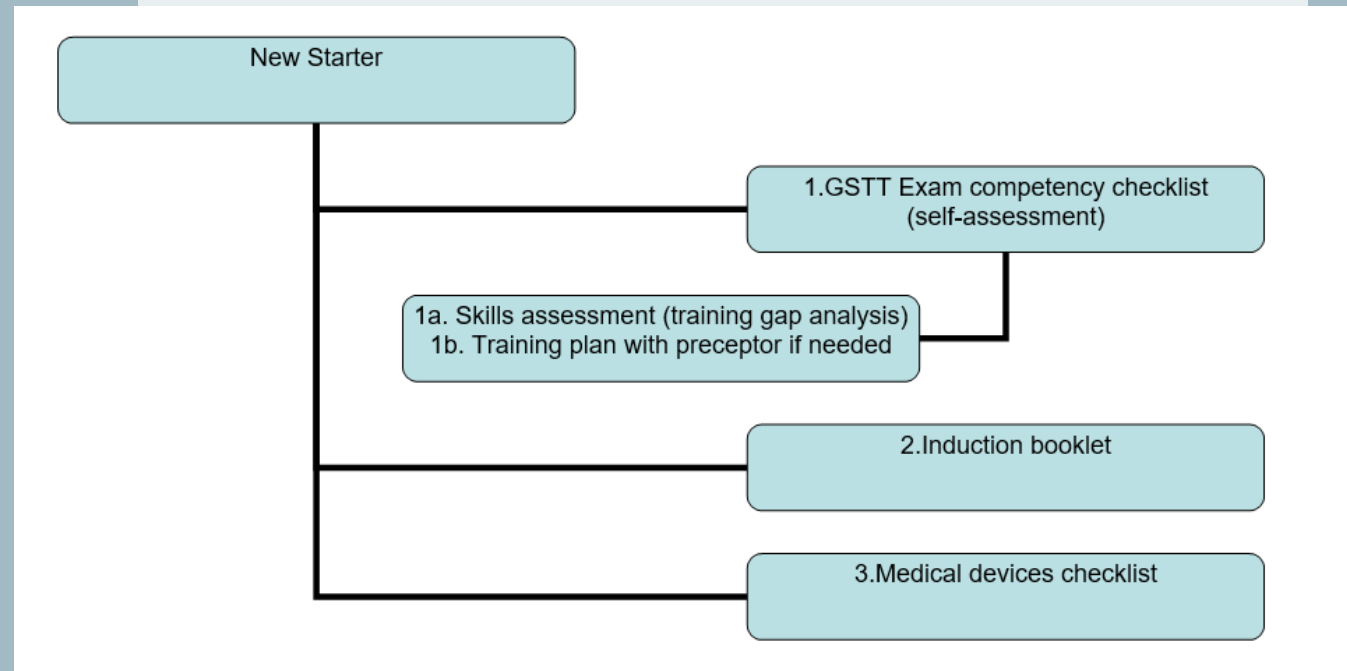
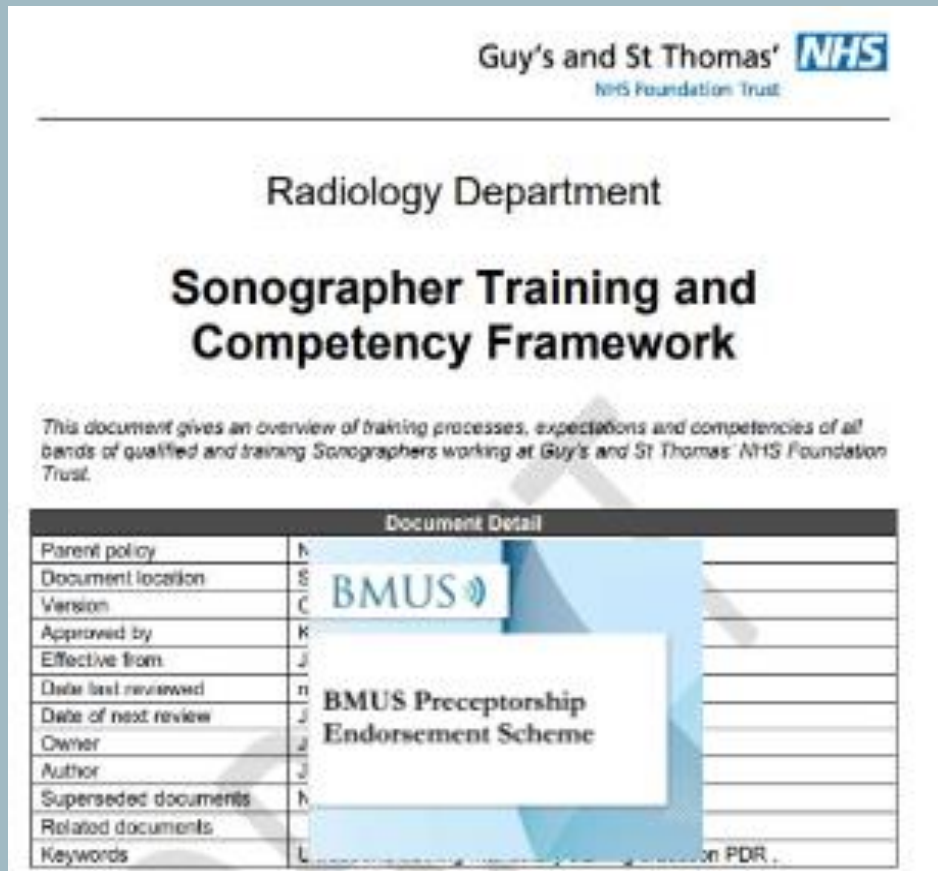
Head of Radiology	 <b>BMUS Preceptorship Endorsement Scheme</b>
Head of Nursing	
Deputy Head of Radiology	
<b>St Thomas Superintendent</b>	
<b>Guys Superintendent</b>	
Practice Educators	
Paediatric Specialist Sonographer	
Key Mentor	
Clinical Supervisor (if applicable)	
Clinical Assessor (if applicable)	

**Other key team members**  
Sonographers – 25-30 full and part time Sonographers and 1-2 Trainee Sonographers.  
Radiologists – [redacted] y- Ultrasound Lead.  
Ultrasound Nursing Assistants  
Admin team  
Trust telephone number  
**020 7188 7188**



# Essential Criteria

- A **local induction programme** should be completed for all new starters, transitioning staff and newly qualified staff. This will comprise a check list, agreed timeframe, completion deadline and sign-off



## Ultrasound Clinical Competency and Training Checklist

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Area: \_\_\_\_\_

Assessor: \_\_\_\_\_

BMUS

BMUS Preceptorship  
Endorsement Scheme

Please complete all tabs or printed version. Email Supts once complete.

### Communication skills

#### Able to demonstrate:

Appropriate communication skills with patients and visitors	COMPETENT
Appropriate communication skills with colleagues/staff members including team members of other disciplines	COMPETENT
Professional appearance	COMPETENT
Appropriate commitment and attitude	COMPETENT

Introduction 1. Communication 2. Knowledge & Skills 3. Technical ability

### Knowledge and Skills

#### Able to demonstrate:

Relevant IT skills	COMPETENT
Appropriate knowledge of equipment use	COMPETENT
Appropriate examination technique	COMPETENT
Appropriate spend	COMPETENT
Understands how to write a report	COMPETENT
Demonstrates depth of background knowledge of area of work	COMPETENT
Demonstrates depth of knowledge of patient condition/history/previous reports	COMPETENT
Ask appropriate questions	COMPETENT
Ability to cope with workload and skills required at GSTT	YES

### General ultrasound skills

Ability to routine demonstrate the following to protocol and GSTT standard:

Full abdominal scan	Competent
Testicular scan	Competent
Upper limb DVT	In development
Lower limb DVT	Competent
Thyroid/ head&neck	Competent
Soft tissue lumps	In development
Hernia	In development

#### COMMENTS

Confident to scan soft tissue lumps and bumps (lipomas/sebaceous cysts etc). Can scan anterior abdominal hernias however will need fu

In development  
Competent  
Advanced/Trainer

### Gynae ultrasound skills

Ability to routine demonstrate the following to protocol and GSTT standard:

Perform a routine gynae scan	Competent
Perform a complex gynae scan	Competent

## COMPETENCY IN ULTRASOUND

>Ability of the practitioner to practice safely and effectively to a professional standard (PSA, 2002)

>An aid to determine what skills are needed and a way to measure performance.

> Ensures local measures are in place to support trainees and the trainee

#### Based on examinations performed at GSTT

NOVICE - no background training

BEGINNER - some background experience

COMPETENT - consciously efficient and competent to perform the scan

EXPERT - High level of theory and practice (unconsciously competent)

no knowledge or experience

attending uni/ observed and limited performance of the skill

fewer aware of short comings for some complex clinical presentations.

perform and teach a range of scans without concern, can safely answer clinical question

This is a Self Assessment - backed up relevant CPD, audits and appropriate qualification

DATE:


TICK ONE BOX

TICK WHERE APPROPRIATE

Type of ultrasound scan	NOVICE	BEGINNER	COMPETENT	EXPERT	Teach/ Supervise	Training planned
1 Abdomen			X		X	
2 Abdominal Wall	X					
3 Appendix			X		X	
4 Abdominal aorta			X		X	
5 Bladder with flow rate		X				
6 Doppler: Lower limb venous			X		X	


# Essential criteria

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## RADIOLOGY ULTRASOUND

Induction Information for  
Sonographers



OBSTETRIC AND GYNAECOLOGY ULTRASOUND

- 8<sup>th</sup> Floor North wing
- Main Reception
  - Fire exits, fire-fight
  - Photocopier
  - Local areas (Anten (EPAGU), Fetal Me
  - Maternity Assessm North wing
  - Superintendent, cl
  - Quiet rooms
  - Staff room, changi
  - Emergency drugs,
  - Equipment and lin
  - Location of local pc
  - Ultrasound Rooms

Now complete:

- 1 hour at receptor
- In addition for Obstetr
- Gain security acces
- Badgernet Access (
- Astraia Access ✓

Miscellaneous	BASIC TRAINING	TRAINER'S SIGNATURE	DATE
Recording gender	✓		25/09/22
Recording/filming and thermal prints	✓		25/09/22
Astraia messages	✓		25/09/22
Where to seek obstetric vs ultrasound advice	✓		25/09/22
Conflict resolution and security	✓		25/09/22
Locating stock	✓		25/09/22
Infection control/ PPE	✓		25/09/22
QA	✓		25/09/22
Other: interesting cases, referral box, audit	✓		25/09/22
Undertake online course and send certificate to Sharon.Watty@gstt.nhs.uk <a href="https://portal.e-lfh.org.uk/FASP">https://portal.e-lfh.org.uk/FASP</a>			

Obstetric training is complete once all competency boxes are filled in.

Signature



Trainers Name

SHARON WATTY

Trainers Signature




Date training completed

25/09/22

# Essential Criteria

- A local induction programme should be completed for all new starters, transitioning staff and newly qualified staff. This will comprise a **check list, agreed timeframe, completion deadline and sign-off**

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Radiology Department

## Sonographer Training and Competency Framework

*This document gives an overview of training processes, expectations and competencies of all bands of qualified and training Sonographers working at Guy's and St Thomas' NHS Foundation Trust.*

Document Detail	
Parent policy	h
Document location	S
Version	C
Approved by	K
Effective from	J
Date last reviewed	n
Date of next review	J
Owner	J
Author	J
Superseded documents	h
Related documents	
Keywords	L



**BMUS Preceptorship Endorsement Scheme**

Serena Patel- Preceptor		Training Plan
NAME :		Training Plan Start
	ACTIVITY	ANTICIPATED COMPLETION DATE
November	<b>OBS</b>	
	Confident with growth scans and feels ready to move onto starting early lists with growths only	19.12.22
	Still doubled up with a sonographer for remote supervision until end of preceptorship period	30.12.22
	Practice and exposure to scanning more twins- RG to highlight this to obs flow co/ reception first thing that she would like to scan twins	30.12.22
	<b>Gynae</b>	
	More McNair sessions still required for more complex gynae pathology reporting	30.12.22
	Complex reports/ IP requests double checking	Ongoing
	Signing own reports where feels confident to do so	30.12.22
	Gynae scanning sessions with extended appointment times in GUSS	Ongoing
	Report catchup/ complex pathology follow up sessions may be considered- RG to highlight if required. May be useful initially	30.01.23
	<b>Early pregnancy</b>	
	Scanning completely independently	30.12.22
	Recognises need for asking for second opinions	30.12.22
	Feels confident in this area	30.12.22
	<b>Other</b>	
	Mandatory training update	Complete
	Reporting templates setup and ready	Complete
	Find and listen in to IOTA webinar to familiarise	Complete
	Background reading on ovarian pathology	Complete
	Badgernet access- to discuss login details with SD	Complete
	Student diary updated by SP til end of Dec	Complete
	Started post	Complete



## Upper limb DVT Ultrasound Assessment

**Purpose:** The document is designed to provide a clear understanding and a high level of detail.

**Objectives:**

1. Demonstrate detailed understanding of the anatomy and pathology
2. Demonstrate knowledge of the scanning technique
3. Demonstrate suitable reporting skills

**Assessment:**

Learners are expected to undertake supervised ultrasound sessions to gain practical skills and develop accurate reporting skills. Background reading is expected to support the training as well as attending to the training.

During the training period the learner is expected to:

1. Perform routine and complex examinations
2. Recognise anatomy and pathology
3. Diagnose and report abnormalities
4. Recognise their limitations and when to refer

To demonstrate this has been achieved should indicate this on the competency assessment. An assessment will take place by a suitably qualified assessor with or without assistance. Throughout the learning a log book (min 100 scans) should be maintained. The logbook and final competency assessment training commencing.

To demonstrate continuous professional development a portfolio which includes evidence of relevant learning and courses attended as well as a log book should be maintained.

All qualified sonographers undertaking the upskilling program are expected to meet the below standards for each scan they perform.

- Check the patient's identity
- Ensure the patient was correctly prepared for the examination
- Understand the implications of the request being made
- Ensure the patient's comfort, privacy and safety during the examination
- Carry out the scanning technique appropriate for the examination
- Demonstrate all relevant anatomy and/or pathology in keeping with departmental protocol
- Take measurements as required
- Record relevant images at appropriate times during the scan
- Explain to the patient the significance of observations and measurements
- Complete the examination within the allotted time in keeping with the departmental protocol
- Come to the correct conclusion from the observations and measurements made

# A method in place to evidence that objectives set by the preceptor and preceptee have been met

### ARM DVT COMPETENCY COMPLETION

**Sonographer name:**

**Assessor name:**

**Date:**

**Scan clinical info:**

Task	Competent (Y/N)	Signed
Correct use of transducer		
Optimisation of settings		
Can demonstrate normal anatomy		
Recognise patency and occlusions		
Utilisation of colour and spectral Doppler		
Assess venous system with PICC lines		

- A template for recording preceptor/preceptee meetings

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**Band 7 Sonographer Preceptorship**

Welcome to your preceptorship in Ultrasound at Guy's and St Thomas' NHS Foundation Trust (GSTFT).

It is suggested and we whole heartedly agree that newly qualified Sonographers and sonographers training in a new skill, should have a period of support when they first start working as an independent and autonomous professional.

This document is designed to help you structure this time period. Use this as a stimulus for arranging meetings with the Tutor Sonographer and your line manager. Use the reflection and feedback log sections as a start for your learning and a space to save your continued professional development in the final log page. You should also think of reading materials and attending organised study days to supplement your learning.

We hope to...

- Provide support and guidance to the newly qualified Sonographer
- Acting as a role model and critical friend
- Facilitating introductions and promoting good working relationships
- Participating in all preceptorship activities including completing required training, preparing for, attending and documenting regular scheduled meetings
- Providing timely and appropriate feedback to the preceptee
- Liaise with manager and Tutor Sonographer about preceptee's progress as appropriate
- Advise on learning and development needs, facilitating a supportive learning environment and signposting learning resources

Your aim is to....

- Complete all Organisation and local induction, statutory and mandatory training
- Attend study days and doing all required training to complete my preceptorship
- Observe and adhere to Organisation values
- Participate fully in the preceptorship programme by preparing for and attending meetings as scheduled
- Working collaboratively to share my reflections and identify learning and development needs
- Seeking feedback from others to inform my progress
- Owning my learning and development plan
- Identify Trust, dept. & specific personal objectives
- Think about your expectations - What support would you like over this time period and from your preceptor? Think about how often you would like to meet, what support looks like to you, how will you be in contact with your preceptor?

**Reflection Log**

After the first week in each area and after each preceptor meeting:

Reflection on what has gone well and any challenges:

Study days / eLearning / competencies completed:

**Preceptorship Meeting**

**Name:** [Redacted]

**Preceptor:** Sharon Watty

Date of meeting	07/07/2022
<b>What has been going well?</b>	
In recent weeks I have been performing the majority of my lists as independently as possible and I have seen overall improvements in my timekeeping and in my report writing.	
I have become increasingly confident scanning in obstetrics. I am happy with my scanning technique, and in the times I have experienced running my own list, I have been able to stick to the allocated scan times for most patients.	
With regards to general scanning, I feel comfortable in abdominal, renal, testes and DVT Doppler studies for outpatients and most inpatients (complex cases aside).	
I have started taking more ownership of my scans and feel more confident discussing cases with other clinicians. For example, I have been contacting radiologists for second opinions, discussing patients with FMU consultants, and organising relevant follow-ups.	

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Reflection Template

TITLE (delete as appropriate):

DATE:

Your name

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**What is reflection in clinical practice?**

Kolb proposed a four-stage learning process with a model that is often referred to in describing experiential learning. The process can begin at any of the stages and is continuous, i.e. there is no limit to the number of cycles you can make in a learning situation. **This theory asserts that without reflection we would simply continue to repeat our mistakes.** We should therefore use reflection to fully engage with the learning process.

The experiential learning cycle:

```

    graph TD
      Experience[Experience: You do something or something happens which you experience] --> Reflection[Reflection: You're questioning and evaluating what happened]
      Reflection --> Theorising[Theorising: analysis of better ways, consideration of alternatives]
      Theorising --> Experimenting[Experimenting: deciding what to do differently, and putting it into action]
      Experimenting --> Experience
  
```

Kolb's research found that people learn in four ways with the likelihood of developing one mode of learning more than another. As shown in the 'experiential learning cycle' model, learning is achieved through:

- Concrete experience
- Observation and reflection
- Abstract conceptualisation
- Active experimentation

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**What happened today?**

---

**What did I learn?**

# Contemporary, evidence-based and readily accessible policies and procedures

PC > Shared (S:) > Radiology > Ultrasound > Policies, SOPs and Protocols

Name

- Archive
- Evelina Children's Ultrasound
- General & Gynae Ultrasound
- Generic guidance
- Obstetric Ultrasound
- US SOPs Word Version templates
- Radiology policy link

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## Clinical Guidance

# Gynaecology Ultrasound Guidelines

### Summary:

*This document provides guidance for all ultrasound practitioners scanning and reporting Gynaecological ultrasound within the radiology departments at Guys and St Thomas' Hospitals.*

Document Detail	
Document type	Clinical Guideline
Document name	Gynaecology ultrasound guideline
Document location	GTi Clinical Guidance Database
Version	V3.2
Effective from	Jan 2008
Last review date	May 2023
Review date	May 2026
Owner	Clinical lead, Radiology
Author	Sharon Watty, Ultrasound Practice Educator and Professional Development Lead.



**-Regular time allocation for learning and reflection for all new starters, transitioning staff and newly qualified staff**

**-Provision made to allow attendance to Governance and/or Multidisciplinary Team (MDT) meetings**

- Regular staff meetings
- REALM
- Learning from incidents
- Newly qualified – time to report, reflect, second opinions, follow up cases.
- Learning to audit, Vet, CPD sessions, doubled up sessions for training
- Clinical governance, MDTs

The image shows a screenshot of a complex spreadsheet or data table. The table is organized into several columns and rows. The top section has a grey background, followed by a white section, a yellow section, and a purple section at the bottom. Red circles and rectangles highlight specific data points and cells within the table, indicating areas of focus or interest. The table appears to be a detailed schedule or data log, possibly related to the learning and reflection activities mentioned in the text.



# A support network for the mentor/preceptor

## Scope of the Key Mentor Role – Mentorship in Radiology

To assist and maintain an effective learning environment which ensures the safety of patients and the growth of the learner. The expectation is that each trainee sonographer will have access to a named mentor. The mentoring role will be undertaken alongside the Practice Educator(s)/Superintendents/ clinical supervisors/ clinical assessors within their responsibilities.

### What is a mentor :

Encourage, support, coach advise. Should be a different person to line manager/ teacher/ supervisor/ assessor or can lead to confusion. What is a preceptor/ preceptorship: peer support, can be at the same band but with more experience.

### How to mentor:

Establish working relationships with the mentee.  
 Demonstrate the characteristics of good mentor: good communication skills and role model (by meeting professional standards).  
 Facilitate learning of mentee.  
*Create best learning environment – ‘future of radiography depends on good clinical placements’ Society of Radiographers.*

### Responsibilities

- Be the named mentor, act as a link and resource between the Tutor sonographer and/or university practice educators.
- Liaise with the Tutor Sonographer with regards to mentoring issues
- Ensure that each student is satisfied with clinical placement time to achieve their numbers/ university requirements in each area.
- Establish inter-professional learning and professional integration as part of the practice placement experience, to develop the trainee into a well rounded competent sonographer.
- Identify any outstanding issues with student supervision.
- Encourage
- Assist in

**LONDON  
IMAGING  
ACADEMY**



useful

## Education Leads Meeting Terms of Reference

### Purpose

The purpose of this group is to support the education and development opportunities within the department, aligning educational motives with local and Trust level strategies, allow timely and appropriate processing of funding, provide support and empowerment to the education leads and ultimately improve the delivery of education within radiology by our dedicated education leads team.

### Membership and frequency of meetings

The meeting will be pre-arranged by the Ultrasound practice educator lead (SW) via a TEAMS link.  
 There will be a rotation of the host for each meeting with an associated theme and agenda sent to all

## ULTRASOUND LEAD PRACTICE EDUCATORS MINUTES

The purpose and aim of this meeting is to consolidate, learn and develop a positive learning and working culture between the ultrasound practice education sonographers at GSTT on a regular monthly basis.

Attendance is mandatory.

Apologies should be sent when attendance is not possible.

Asana platform is currently used to define the tasks and roles and can be used a guide for this practice educator meeting.

It will envisaged that the Asana platform will also serve as a point to record the minutes/ outcomes of this meeting.

MEETING DATE: 30/03/2023

TIME: 12:00- 13:00

### AGENDA:

1. Agree to the meeting purpose (terms of reference), time, date and regularity. (5min)
2. Measuring Impact (Imaging Academy slides) and improving quality of upskilling data (20 min)
3. JWs Upskilling feedback – solutions/ survey monkey (10min)
4. BMUS Preceptorship (10min)
5. QSI (10 min)
6. Asana tasks (if time)
7. AOB

supporting  
visitors can be

## STUDENT SUPERVISION

SW 22/09

### Comments in red:

- **Training Students - need more time in Obs to give proper hands on**  
There is now more time due to changes to bookings – there is no obligation to let students scan all patients. There is a shortage of appointments and it's difficult to reduce lists.
- **General feeling that more support from the Tutor sonographer with practical teaching is needed particularly in Obstetrics**  
Will be discussed with Tutor sonographer – always happy to hear any suggestions and interested to know what sonographers needs with practical teaching are – is it general tps? Training lists in OBS would be ideal but as mentioned due to capacity I do not think they are possible.
- **Can more sons train in obs, it does not always have to be the supervisors**  
All obs sonographers can and do train, I wonder if this is a misunderstanding – I looked through a random 3-4 weeks (April and May). On average, out of 9 sessions per week, Matt scanned with a designated supervisor twice, 7 sessions with another B?

### Who/ what are student supervisors?

- Graham
  - Jessie
  - Jason
  - Nic Fiddimore-Rowe
  - (Buna)
  - Chantelle
- NHS FOUNDATION TRUST  
UNIVERSITY
- TS meet with supervisors.
  - Regular meeting with trainees
  - Ultrasound TA
  - SIM
  - Arrange lists – formalives/summatives.
  - Extra paperwork writing feedback.
  - Rota
  - Support extra needs/ guidance

### Your role in training?

1. Understand ultrasound as a modality and how it fits in to patient management (purpose, use, benefits, limitations).
2. Understand how to use the machine, hold the probe.
3. Understand how to use BN, Astraia, CRIS, SECTRA
4. Finally, how to scan.
5. How to report (verbally/ written).



### OBSTETRICS

- Obstetric concerns are complex as there are multiple issues
- *"I think with limited time, late patients, limited appointments (pressures not to rebook) no training lists and the same sonographers doing all the obs training it has a compounding affect."*

# Foster a progressive culture within the department that recognises and understands the four pillars of practice associated with advanced and consultant practice

## Advanced practice- Ultrasound future

Jan 2023

Evidence of staff who are or working towards advanced/ consultant practice

Evidence staff participation in four pillars (incorporate into staff meetings, presentations)

Find local research departments. (MSc, PhD students, Clinical academic centers, HEIs, BMUS/ SOR, NIHR websites and support)

Certificates, awards or evidence in leadership, service innovation, educational achievements, clinical excellence

\*Now forms part of induction/ preceptorship framework for all staff

**JOINT FMU and WUS Study Afternoon: 5.**

**DATE:** March 3<sup>rd</sup> 2020.

**TIME:** 2-5pm

**LOCATION:** Raynes Institute, 4<sup>th</sup> floor Lambeth wing

Welcome!

Welcome to the 5<sup>th</sup> Joint FMU and Women's ultrasound meeting—bringing and building clinical expertise with education and research within Ultrasound. By keeping up to date with changes and jointly developing our lead our practice as clinical experts.

**SCREENING/ OELM: LEARNING FROM DISCREPANCIES**

**2:00** Elsa Moro & Sharon Watty

Short break

**AUDITS**

**3:00** BMUS Referrals Audit – Hovnan Arnan

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NHS Foundation Trust

Radiology Department

### Sonographer Training and Competency Framework


This document gives an overview of training processes, expectations and competencies of all bands of qualified and training Sonographers working at Guy's and St Thomas' NHS Foundation Trust.

Document Detail	
Parent policy	N
Document location	S
Version	C
Approved by	K
Effective from	J

tered: 18 Skipped: 1

AREA	Clinical Practice	Education		Leadership and management		Research
PAEDS	1-2 sessions p/w Approx 3-6 months Aim scan and report independently	In house- Log book and assessment	Supplement with relevant CPD	Work in a MDT/ team work	Adapt communication skills	Supplement with contribution to audit and potential research proposal
		Manage workload	Follow protocol	Know limitations		



An Academic Health Sciences Centre for London

Pioneering better health for all

# A fair and transparent pathway to address lack of progression of individuals



Managing Performance

Areas to discuss	Praise strengths	Communicate areas of
Delivery of out in the		
Meeting of what?		
Meeting b standards,		

Perf  
Continue  
  
  
  
ACT

## Capability Policy & Procedure

Guy's and St Thomas' NHS Foundation Trust requires high standards from all employees in order to provide an efficient and effective service to its patients. The Trust is committed to providing a fair and effective procedure where an employee does not meet the required standards of work performance

Document Detail	
Policy group	HR
Version	1.5
Approved by	Joint Policy Forum
Effective from	April 2016
Date last reviewed	April 2019

Guy's and St Thomas' NHS Foundation Trust

**Monthly One-to-One Form**

ed to record you member of staff's progress against their objectives  
ormance management cycle.

Date of meeting:

Areas to discuss / Praise strengths / Communicate areas of

Development Needs / Any support required by your member

responsibility By When



# Desirable Criteria

A named Practice Educator who has completed a formal training programme

King's College London  
Faculty of Life Sciences & Medicine

## Certificate of Achievement

This is to certify

**Serena Pat**

has attended the  
Practice Educator's Virtual  
on 31<sup>st</sup> March 2022.

3 hours of continuing professional development  
to include supporting King's College London Postgraduate Students

Signed

Dated:

Future  
Learn



Certificate of Achievement

**Serena Pat**

has completed the following course

TRAIN THE HEALTHCARE TRAIL  
HEALTH EDUCATION ENGLAND

The course explored key concepts of training in healthcare, focus  
lasting learning and the transfer of newly acquired knowledge

5 weeks, 5 hours per week

Dr Nick Napper  
Educationalist, Health Education England  
Health Education England

NHS  
Health Education England

# TOT



Teaching our Teachers Portfolio. September 2022.

**Name:** SHARON WATTY

**Job Title:** ULTRASOUND PRACTICE EDUCATOR AND PROFESSIONAL  
DEVELOPMENT LEAD

**Area of work:** ULTRASOUND - RADIOLOGY

**Named Mentor:** EMMA CHUNG – ULTRASOUND JOINT COURSE DIRECTOR  
KCL


This portfolio forms your summative assessment of the Teaching our Teachers course. Please familiarise yourself with the portfolio and its requirements. Your learning during the course will be an iterative process and your ability to reflect on, and learn from your experiences will enhance your understanding and your performance as a teacher. You will need to identify a mentor, with a teaching qualification (or equivalent experience), who comes on this journey with you and supports you through the course. They will ultimately observe you teaching and give you relevant and useful feedback to inform your development as a teacher. Please let the TOT faculty know the name, job title, teaching qualification and email address of your mentor by sending their details to:

[Teachingourteachers@gstt.nhs.uk](mailto:Teachingourteachers@gstt.nhs.uk)



# Desirable criteria

- Evidence of fulfilling the sonographer career and progression framework
- Evidence of links with relevant regional and/or national networks

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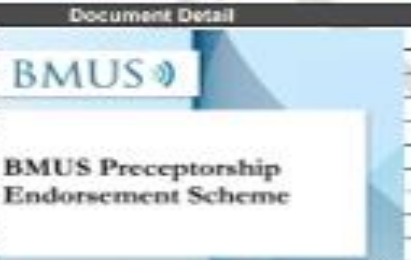
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Radiology Department

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Related documents	
Keywords	L



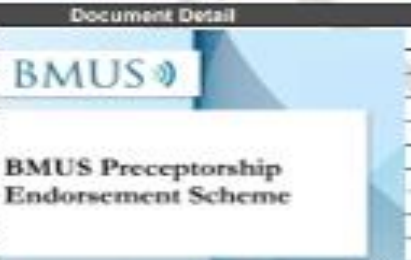
  
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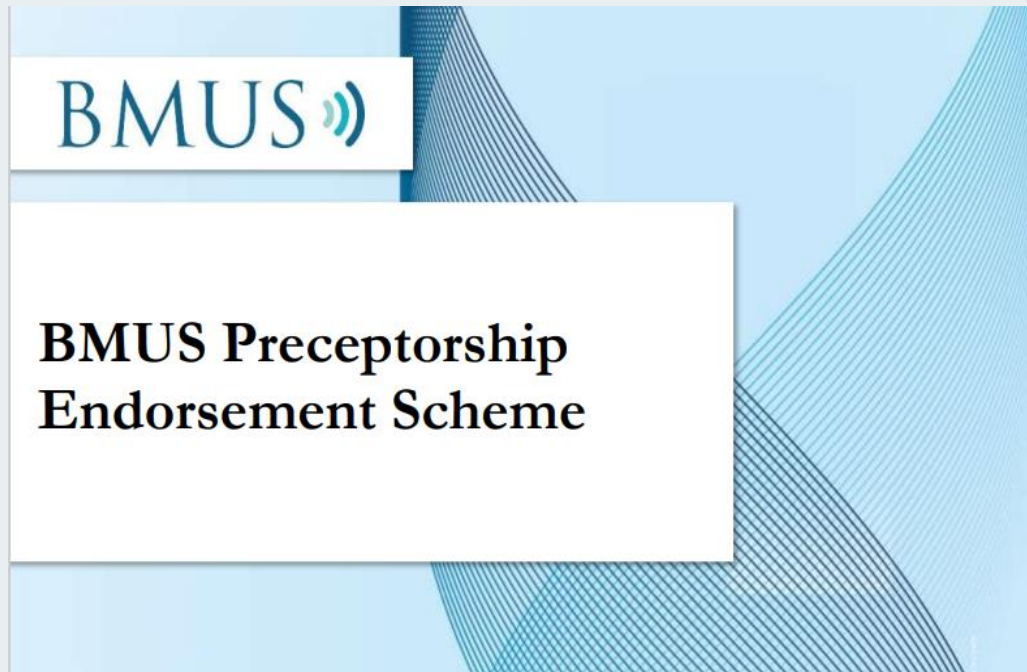
## Allied Health Profession Preceptorship Policy

**Summary:**

The Preceptorship Programme supports newly registered Allied Health Professionals (AHPs) in their first 12 months of registered practice. It is a structured programme enabling the smooth transition from 'pre-registered student' to 'accountable clinician'. Preceptorship may also support those joining the Health Care Professions Council (HCPC) register for the first time (e.g. International recruitment) or those re-joining the register following a break from service (AHP returners). AHP professions at Guy's and St.Thomas' NHS Foundation Trust (GSTT) are; podiatrists, dietitians, occupational therapists, operating department practitioners, orthoptists, prosthetists and orthotists, physiotherapists, diagnostic radiographers, therapeutic radiographers and speech and language therapists.



# The benefits of BMUS endorsement



- Enables a deep dive into your own preceptorship practices
- Providing a balanced and thorough preceptorship shows value in your staff.
- Standardising and streamlining documents (QSI/ CQC/ NSC)
- Recognition of the value of practice education
- A prestigious BMUS certificate.



BMUS 

**BMUS Preceptorship  
Endorsement Scheme**



  
Guy's and St Thomas'  
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Evelina  
London

*Thank  
You!*

